Case Study 3: Intervention Plan

Corrie White

Department of Sport and Performance Psychology, University of Western States

SPP 6522/8522: Sport and Performance Psychology Interventions

Dr. Russ Flaten

March 16, 2025

CASE STUDY 3: INTERVENTION PLAN

2

Case Study 3: Part 2 Intervention Plan

Introduction

Brandi, a 19-year-old Division I lacrosse player struggling to return to her former level of play following a significant facial injury. Brandi's situation is a complex situation with consideration of physical recovery, psychological trauma, athletic identity challenges, and performance pressure.

In the case of the Brandi, the following six core needs were originally identified:

- 1. **Motivation** Brandi's return to lacrosse is influenced by external factors (scholarship, team relationships) and internal drive. Reconnecting with the aspects of the sport that once brought her joy is essential to reigniting her intrinsic motivation.
 - **2. Confidence & Decision-Making** Her injury has led to hesitation and losing trust in her ability to read the game. Identifying specific confidence deficits will guide targeted interventions to rebuild her trust in decision-making.
 - **3. Trauma Recovery** The physical and psychological impact of her facial injury has disrupted her athletic development. A systematic assessment is needed to determine how unprocessed trauma affects her current performance.
 - **4. Athletic Identity & Self-Efficacy** Brandi's time away from competition may have altered her perception of herself as an athlete. Evaluating her belief in her abilities, particularly in high-risk situations (e.g., receiving fast passes), is key to restoring her confidence.
 - **5, Managing Anxiety & Fear** Brandi likely experiences heightened anxiety in game situations that mirror her injury. Understanding her awareness of these hesitation patterns will help design interventions to address fear responses.

- **6. Physical Limitations vs. Psychological Barriers** Consulting with her physical therapist will clarify any lingering physical constraints. Distinguishing between actual physical limitations and psychological avoidance is necessary to set realistic expectations for her return.
- **7. Coach Communication & Leadership Style** The coach's transactional approach and pressure to perform may not be conducive to Brandi's recovery. Assessing his leadership style and exploring possible adjustments could improve support for her rehabilitation

The first and initial phase of the intake session should focus on determining whether Brandi truly still loves lacrosse and wants to continue playing. Her hesitation and fear could either be a temporary response to her traumatic injury or a more profound signal that her passion for the sport has changed. This portion of the intake will use a questionnaire surrounding her feelings about lacrosse and presented in a motivational interviewing manner, observation of Brandi's affect when discussing playing and practicing lacrosse, as well as the Sport motivation scale-6 (SMS-6) will help determine whether she still loves and wants to play lacrosse.

Establishing that Brandi has the three needs of Self Determination Theory (SDT) (Deci & Ryan, 2000), autonomy, relatedness, and competency being met will be insightful into her willingness to be truthful about what is causing her hesitancy and lack of aggression- is this based on fear of re-imjury or have her desires changes? Once it is established that Brandi does want to continue to play at the collegiate level, this assessment can move forward.

However, based on professional feedback and to remove any overlap among needs and to ensure her intervention plan remains highly focused and targeted, these six needs have been distilled down even further to **three Core Needs:**

- Motivation: (Redefining or reconnecting with her core motivation will be essential for her return. Increasing her intrinsic motivation requires identifying which aspects of lacrosse still bring her joy despite the trauma.)
 - i. Intrinsic Motivation (Brandi demonstrated intrinsic motivation before her injury through her "smart, aggressive" play style. Redefining or reconnecting with her core motivation will be essential for her return. Increasing her intrinsic motivation requires identifying which aspects of lacrosse still bring her joy despite the trauma.)
 - ii. **Situational Motivators** (Brandi's motivation to return to lacrosse is likely influenced by her scholarship status, team relationships, and personal identity as an athlete.)
- Confidence: (Brandi's injury resulted from misreading a fast pass, which may have compromised her trust in her on-field decision-making. Her hesitation suggests significantly diminished confidence in situations similar to her injury context.
 - i. **On-field Decision Making** (underlying this need is learning conditions)
 - ii. Anxiety Causing Hesitation (underlying this is attentional focus)

3. Physical Limitations & Athletic Identity Assessment

- Collaboration with Brandi's Physical Therapist to determine her current physical readiness and identify any lingering physical constraints.
- ii. Physical vs. Psychological Barriers: Is diminished level of play due to actual physical limitations, or is fear of reinjury causing subconscious avoidance?

iii. Impact on Athletic Identity: Brandi's extended time away from competition may have altered her self-perception as an athlete. Her self-efficacy in skills related to her injury (especially receiving fast passes) needs assessment to determine if confidence loss is skill-based or trauma-based.

By addressing these **three key areas**, this intervention is expected to yield the most immediate and substantial improvements in individual performance. The following strategies and implementation plans will ensure both short-term progress and long-term sustainability in these core domains for Brandi.

Focus One: Motivation

Objective: Help Brandi determine what motivates her to play lacrosse and whether this motivation is intrinsic or situational. This will help her decide whether or not she is motivated to continue playing after her severe injury.

Intervention Strategies:

• Determine Motivation

Administer the Sport Motivation Scale-6 (SMS-6) to evaluate Brandi's motivational profile.

- Motivational interviewing techniques: explore her feelings and attitudes toward returning to & playing lacrosse
 - Conduct a pre-intervention play assessment during game time to understand how motivation manifests in performance.
- Goal Setting: Use SMART GOALS to create an attachment to the game and her role as a valuable player. Start with short-term, move into process

goals, and finish with long-term goals. (Doran, 1981; Weinberg, 2010).

 Imagery: Used to help players stay in the game, or re-enter following injury. (Weiss, n.d.)

Educational & Mindset Needs:

To implement an assessment of herself and her current motivators, Brandi needs to be educated on the types of motivation: positive, negative, intrinsic, and extrinsic. An explanation of how each type of motivation will provide the foundation for Brandi's exploration of her current motivation (Williams & Krane, 2014). Educate Brandi on motivation theory, emphasizing intrinsic vs. extrinsic motivation. Brandi Introduce Self-Determination Theory (SDT) concepts, highlighting autonomy, competence, and relatedness as motivators (Deci & Ryan, 2008). Discuss growth vs. fixed mindset to help her recognize how mindset impacts performance (Dweck, 2006). Guide Brandi in self-reflection exercises to help her articulate her personal motivators and potential barriers.

Monitoring & Assessment:

- If she demonstrates strong commitment, proceed with Phase 2: Skill
 Development and Practical Application.
- Compare initial assessment results with observations to identify discrepancies.
- Reassess motivational strategies if Brandi expresses uncertainty about continuing lacrosse.
- Use reflective journaling or verbal feedback from Brandi to track her evolving perspective.

Summary

This intervention aims to help Brandi assess and reconnect with her motivation for playing lacrosse, determining whether it is intrinsically driven by passion for the sport or situationally influenced by external factors such as her scholarship or team expectations.

Understanding her motivational profile is critical in determining whether she genuinely desires to return to competition following her injury.

The intervention includes motivational assessment using the Sport Motivation Scale-6 (SMS-6), motivational interviewing, and goal-setting through SMART goals (Doran, 1981; Weinberg, 2010). Imagery exercises (Weiss, n.d.) will reinforce positive emotional connections to the sport and help Brandi visualize herself performing successfully. By introducing Self-Determination Theory (Deci & Ryan, 2008) and educating Brandi on growth vs. fixed mindset (Dweck, 2006), she will gain deeper insight into her motivation and ability to overcome setbacks.

To implement these strategies, Brandi will participate in pre-intervention play assessments, reflective journaling, and self-reported motivation check-ins to track her evolving commitment. She will regain confidence in her athletic role by reinforcing intrinsic motivation, goal-directed focus, and positive visualization and return to a sustainable, long-term commitment to her sport.

Progress will be assessed through observational data, self-reported motivation shifts, and a post-intervention reassessment of the SMS-6 to measure changes in her motivational drivers. Strengthening Brandi's connection to the game and reinforcing intrinsic enjoyment will ultimately lead to enhanced engagement, increased resilience, and improved performance on the field.

Implementation Plan

Phase 1: Assessment and Education (Weeks 1-2)

Objective: Assess Brandi's intrinsic motivation and commitment to lacrosse. Establish a baseline of motivation and ensure she is committed and desires to play lacrosse, or if her motivators are purely situational. Provide foundational education on motivation, imagery, and enthusiasm/ mindset to help Brandi explore what currently motivates her,

Action Steps:

- Administer Sport Motivation Scale-6 (SMS-6) to evaluate her motivational profile.
- Use motivational interviewing to explore her current feelings about playing.
- If Brandi strongly desires to continue, proceed with confidence-building and trauma-focused interventions. If uncertainty remains, reassess motivational strategies before progressing.
- Goal setting: SMART GOALS for the next 2 weeks- Short-term,
 process-oriented goals (e.g., "Attend every practice and engage fully.")
- Imagery: Have Brandi describe how she envisions herself as her best on the playing field. Have her read this script every night before bed, instructing her to feel what each component feels like.

Monitoring & Assessment:

- Pre-intervention observation of game time (play assessment) and
- Discuss her feelings surrounding playing with Brandi before the actual assessments.

Phase 2: Skill Development and Practical Application (Weeks 3-5)

Objective: Implement intervention strategies through structured skill-building activities and real-world application.

Action Steps:

- Goal Setting: SMART GOALS the next 2 weeks.
 Performance-based goals (e.g., "Improve reaction time to fast passes.")
- Imagery: Continue using written visualization of Brandi as her best self on the field. Refine this process down to the five senses and have Brandi identify them as she uses visualization.
- Self-Talk: Create a script with Brandi to use and instruct her to repeat it 3 times a day and at key times (Before practice, During challenging drills, After a mistake in practice)

Monitoring & Assessment:

- Motivation Check In:
 - -What about lacrosse excites you most right now?
 - -What's been challenging about motivation?
- Continue with observation of play.
- Continue Check in with Brandi about how she feels before/during/after/playing.
- Brandi can use a journal to track her feelings at practice and at games.

Phase 3: Integration and Long-Term Development (Weeks 6-8 and Beyond)

Objective: Ensure long-term application of motivation awareness and education, create a sustainable commitment to playing lacrosse and nurturing intrinsic motivation

Action Steps:

- SMART goals for remainder of season
 Long-term goals (e.g., "Focus on love of the game, ability as a player in high-pressure game situations.")
- Imagery: Brandi continues to use Imagery once a day, ideally before bed.
- Distill Self Talk Script into a few key words, Brandi can access & use anytime she feels motivation waning.

Monitoring & Assessment:

- Continue Observation of Brandi at play, ensure what she's stating as her goals match what is being observed on the field.
- Repeat the Sport Motivation Scale-6 (SMS-6) to assess motivation type 8
 weeks after interventions.

Focus One Conclusion:

The Motivation Intervention Plan for Brandi provides a structured, evidence-based approach to assessing and enhancing her commitment to lacrosse. By systematically evaluating her intrinsic and situational motivators, this plan ensures that Brandi makes an informed decision about her future in the sport.

Through goal-setting, imagery, and self-talk, Brandi gains valuable tools to reignite her passion for lacrosse and develop a resilient mindset. The three-phase approach allows for a gradual progression from assessment to skill-building and long-term integration, ensuring that motivation strategies are implemented and sustained over time.

By the end of this intervention, Brandi will clearly understand her motivational drivers, have a stronger connection to her athletic identity, and have practical strategies for maintaining

motivation even in the face of adversity. The reassessment using the Sport Motivation Scale-6 (SMS-6) will provide measurable insight into her motivational growth, ensuring that interventions remain effective. This approach empowers Brandi to make an informed decision about her future in lacrosse while equipping her with mental resilience and strategies to optimize performance and well-being.

Focus Two: Confidence and Self-Efficacy Development

Objective: Enhance Brandi's confidence and manage anxiety effectively to improve her performance.

The primary aim with this Intervention Focus is to increase Brandi's confidence and help her manage anxiety effectively to enhance her performance outcomes. Currently Brandi has issues with confidence and self-efficacy, which negatively affect her execution of plays when under pressure and cause her to hesitate in situations similar to the one she was injured in. The goal is to mentally prepare Brandi through cognitive, somatic, and focus strategies.

Intervention Strategies

1. Cognitive Techniques for Confidence Building (CBT Approach)

Cognitive Reframing – Identify and replace self-doubt statements
 with performance-enhancing thoughts (Seligman, 2011).

2. Somatic Techniques for Anxiety Reduction (MAC Approach)(Gardner & Moore, 2004)

- Progressive Muscle Relaxation (PMR) Teach athletes to recognize and control muscle tension under pressure.
- Controlled Breathing Exercises Implement box breathing or 4-7-8

- Breathing techniques to lower physiological stress responses, activating the vagus nerve relaxation.
- Biofeedback Training Train athletes to monitor and adjust physiological responses to anxiety using biofeedback techniques (Paul et al., 2012).

3. Focus Strategies

- Attentional Focus (Marchant et al., 2009)
- Psychological Cuing: raise awareness of thoughts of re-injury and when these arise teach Brandi to repeat "I am healthy, I am strong" (Keegan, 2016)

4. Mindfulness-based stress reduction (MBSR)

Educational & Mindset Needs

Brandi requires a foundational understanding of performance's psychological and physiological components to implement these interventions successfully. Self-efficacy theory (Bandura, 1977) emphasizes the role of belief in performance outcomes and successes, while cognitive distortions that come with injury and fear of re-injury, must be addressed through cognitive reframing and positive self-talk (Seligman, 2011). Cognitive behavioral therapy plus motivational interviewing can help Brandi identify negative thoughts about the behavior of playing sports and reframe negative thoughts into positive thoughts to promote behavior change (ie, change her fear of reinjury into one of positive thinking that her body is strong and recovered and ready to return to sport. (Ardern, et al, 2022). Brandi will require basic education about how thoughts work to create a chain reaction in emotions and thoughts.

Understanding the body's stress response to injury and fear of re-injury is essential for effectively applying somatic techniques. Brandi is reacting with hesitation, demonstrating she may need some focus training. The Mindfulness-Acceptance-Commitment (MAC) model (Gardner & Moore, 2004) will be introduced to help Brandi accept her thoughts and emotions, and realign her focus with her identified values. Teaching mindfulness principles will prepare athletes for pre-game and in-competition rituals, fostering a balanced and focused mindset (Gardner & Moore, 2004.) Psychological Cuing is an essential tool that can help raise her awareness once she has been educated on CBT (Keegan, 2019)

Monitoring and Assessment

- Pre- and Post-Confidence Assessments: Utilize self-report measures to evaluate
 Brandi's confidence levels before and after the intervention.
- **Observational Analysis:** Track Brandi's performance during practice and gameplay, focusing on moments of hesitation and decision-making speed.
- **Self-Reflection Journals**: Require Brandi to document thoughts on confidence, anxiety, and performance challenges, analyzing patterns over time.
- Coach & Peer Feedback: Gather insights from Brandi's coach and teammates
 regarding observed changes in confidence, assertiveness, and overall presence on
 the field.
- **Somatic Response Monitoring:** Assess Brandi's ability to regulate physiological responses to stress through biofeedback and breathing exercises.
- Competitive State Anxiety Inventory-2 (CSAI-2): (Martens et al., 1990) will be administered before practice and games to measure pre-competition anxiety levels.

• The Sport Confidence Inventory (SCI): (Vealey, 1986) will be implemented to assess and address this need. This assessment explicitly measures sports-related confidence in physical skills, mental preparation, and resilience.

Summary

This intervention is designed to enhance Brandi's confidence and help her manage anxiety following her injury. Brandi struggles with self-doubt and hesitation in high-pressure situations, negatively impacting her performance. Addressing these challenges is critical to rebuilding trust in her abilities and ensuring a triumphant return to competition.

The intervention incorporates Cognitive-Behavioral Therapy (CBT) techniques such as cognitive reframing (Seligman, 2011) to replace self-doubt with performance-enhancing thoughts. Somatic strategies, including Progressive Muscle Relaxation (PMR), controlled breathing exercises, and biofeedback training (Paul et al., 2012), will help Brandi regulate physiological responses to anxiety. Psychological cuing and attentional focus training (Marchant et al., 2009) will address hesitation, while mindfulness-based stress reduction (MBSR) (Gardner & Moore, 2004) will promote emotional control.

To implement these strategies, Brandi will engage in confidence assessments, guided imagery exercises, structured self-talk, and game-time application of focus techniques. Real-time exposure to high-pressure scenarios will progressively recondition her response to competitive environments, allowing her to execute plays with greater confidence and decisiveness.

Progress will be measured through self-report scales, journaling, observational analysis, and coach/teammate feedback. By equipping Brandi with cognitive, physiological, and attentional strategies, this intervention ensures that she not only regains confidence but sustains it under game pressure, promoting long-term resilience and optimal performance.

Implementation Plan

Phase 1: Assessment and Education (Weeks 1-2)

Objective: Evaluate Brandi's current confidence levels, cognitive patterns, and anxiety responses. Provide education on how thoughts, emotions, and physiological responses interact to affect self-efficacy and performance.

Action Steps

• Confidence & Anxiety Assessment:

- Use self-report measures to assess Brandi's current confidence levels in play situations.
- Utilize reflective discussion to identify moments when hesitation occurs.

• Cognitive Education:

- Teach Brandi about self-efficacy theory (Bandura, 1977) and the impact of cognitive distortions on confidence (Seligman, 2011).
- Introduce cognitive reframing to help her recognize and restructure self-doubt statements.

• Somatic Awareness & Relaxation Training:

- Educate Brandi on the body's physiological stress response to anxiety and fear of reinjury (Hsu et al., 2017).
- Teach Progressive Muscle Relaxation (PMR) and controlled breathing techniques (box breathing, 4-7-8 method).

• Mindfulness and Psychological Cuing:

- Introduce Mindfulness-Based Stress Reduction (MBSR) to develop awareness of fear-based thoughts.
- Begin psychological cuing training, where Brandi learns to recognize and interrupt fear-based thought patterns by repeating a self-affirming phrase:
 - "I am healthy, I am strong."

Monitoring & Assessment:

- Track Brandi's self-reported confidence levels before and after practice.
- Observe Brandi's body language and decision-making during gameplay.
- Log her use of mindfulness techniques and breathing exercises during training.
- Athletic Identity Measurement Scale (AIM) (Mitchell, 2021) will measure Brandi's current level of connection with self as an athlete.

Phase 2: Skill Development and Practical Application (Weeks 3-5)

Objective: Implement intervention strategies through structured confidence-building activities, real-world application, and practice scenarios that simulate game pressure.

Action Steps:

- Cognitive Techniques for Confidence Building (CBT Approach):
 - Positive Self-Talk: Develop a structured self-talk script for Brandi to repeat before games and during challenging moments.
 - Cognitive Reframing: Brandi identifies and replaces self-doubt statements with performance-enhancing thoughts.
- Somatic Techniques for Anxiety Reduction (MAC Approach):

- Continue Progressive Muscle Relaxation (PMR) and controlled breathing exercises.
- Introduce Biofeedback Training (Paul et al., 2012) to help Brandi recognize and manage anxiety-related physiological responses.

Focus Training & Psychological Cuing:

- Implement attentional focus training (Marchant et al., 2009).
- Apply psychological cuing in real-time practice, reinforcing
 Brandi's awareness of hesitation moments and encouraging
 immediate cognitive restructuring.

• Guided Imagery & Visualization:

- Have Brandi visualize herself successfully executing plays, focusing on feeling confident, strong, and in control.
- Integrate five-senses visualization to enhance realism and engagement

Monitoring and Assessment:

- Observe Brandi's performance in training and scrimmages to assess confidence improvements.
- Have Brandi complete weekly reflection journals to track anxiety levels, self-talk effectiveness, and emotional responses.
- Conduct midpoint check-in discussions to refine techniques as needed.

Phase 3: Integration and Long-Term Development (Weeks 6-8 and Beyond)

Objective: Ensure long-term application of confidence-building strategies and create a sustainable mindset shift that prevents relapse into hesitation and self-doubt.

Action Steps:

• Reinforce Cognitive Strategies:

- Brandi can use transition from structured self-talk scripts to quick cue words or phrases in pressure situations.
- Encourage autonomous cognitive reframing, where Brandi self-identifies and adjusts negative thoughts in real-time.

• Sustain Somatic Regulation Techniques:

- Ensure that breathing exercises, PMR, and mindfulness practices
 become part of Brandi's pre-game and in-game routines.
- Introduce pre-game relaxation rituals tailored to Brandi's needs.

• On-Field Confidence Testing:

- Gradually increase exposure to high-pressure game situations, simulating conditions where hesitation occurred.
- Continue imagery training for confidence reinforcement before key games.

• Final Confidence Evaluation & Review:

- Conduct a post-intervention confidence assessment to measure changes from Phase 1.
- Re-administer self-report scales and compare results to initial assessments.

CASE STUDY 3: INTERVENTION PLAN

19

• Evaluate Brandi's coach and teammate feedback on confidence and

decisiveness in gameplay.

Monitoring & Assessment:

Observe game performance improvements and reduced hesitation in

high-pressure situations.

• Compare Brandi's pre- and post-intervention confidence levels.

• Assess her continued use of self-talk, mindfulness, and cognitive strategies

in competition settings.

Focus Two Conclusion

The Confidence and Self-Efficacy Development intervention provides a structured

approach to overcoming fear, hesitation, and self-doubt, ensuring Brandi can return to peak

performance. Through a combination of cognitive, somatic, and attentional focus techniques,

Brandi is equipped with concrete tools to rebuild trust in her abilities.

This plan ensures that Brandi regains her confidence and sustains it under game pressure

by progressing through assessment, skill-building, and long-term integration. Reassessments and

observational data will confirm progress, while autonomy in self-regulation will ensure

long-term success beyond the intervention.

Focus Three: Physical Limitations & Athletic Identity Assessment

Objective

Currently, Brandi struggles with her self-perception as an athlete. Her fear of re-injury

causes subconscious avoidance and hinders her execution of plays under pressure. The goal is to

re-establish Brandi's athletic identity by addressing the trauma she experienced and retraining

her mind and body to trust her physical ability through progressive exposure and psychological

resilience strategies. By implementing these strategies, Brandi will release her physical and mental trauma, re-embrace herself as an athlete, improve her athletic identity, and improve her performance on the field.

Intervention Strategies

- 1. **Cognitive Behavioral Therapy (CBT)** will be used to help Brandi reframe negative thoughts about her injury and physical capabilities. Through cognitive restructuring and exposure therapy, she will learn to shift fear-based thinking to confidence-based thinking in high-pressure situations.
 - Cognitive Distortions: identifying negative thought patterns, convincing
 Brandi she is too injured to play fully (Turner et al, 202)
 - Reframing Negative Thoughts: Teach her to identify and reframe any negative thoughts by identifying and reframing (Turner, et al., 2020)
- 2. **Self-Talk Techniques:** will reinforce control and safety during play. By using phrases like "Control the Controllables" and "I am healthy, I am safe," Brandi will train her mind to combat fear and hesitation with confidence and focus.
- 3. **Positive Visualization:** will provide Brandi with mental rehearsal strategies, guiding her through high-risk plays and successful game scenarios to reinforce her belief in her abilities (Weiss, n.d)

Educational & Mindset Needs

Each athlete has differing needs in recovery, biological, psychological, and social elements, and different emphases at various times during a course of treatment (Engel, 1977, Ardern, 2022). Complete physical function is required for returning to sport, and Brandi needs education so that she can trust her body in its newly rehabbed state. (Arden, 2022) A consultation

with her physical therapist will help dispel any misunderstandings on play limits or what situations she should avoid.

By having a consultant with Brandi to hear and help her process what the physical therapist states will ensure that she understands her capabilities. Brandi requires education on her psychological state following the impact of injury on her psyche. An overview of trauma will be shared to provide her with a basic understanding of how the nervous system and body react when faced with the possibility of potential re-injury. She needs education on how these somatic reactions translate into emotional responses (Hsu et al., 2016) "A strong athletic identity can act as an Achilles' heel in coming to terms with a disruptive life event," (Sparkes, 1998) and as such educating Brandi on how athletic identity works will support her post-injury (Buck, M, 2021).

**Monitoring and Assessment: Progress will be tracked through physical therapy reports, self-reflection exercises, and observation of on-field performance.

- Pre- and post-intervention assessments will evaluate her athletic identity and confidence levels.
- Journaling and self-reporting will track Brandi's emotional and psychological responses to training.
- Game-time observations will assess whether she executes plays without hesitation and demonstrates improved confidence in her physical abilities.

Summary

This intervention is designed to rebuild Brandi's trust in her body and reinforce her athletic identity, addressing both psychological and physical barriers following her injury.

Currently, Brandi experiences fear of re-injury, leading to subconscious avoidance and hesitation

in high-pressure game situations. Overcoming these barriers is essential to ensuring full mental and physical reintegration into competitive play.

The intervention utilizes Cognitive Behavioral Therapy (CBT) strategies such as cognitive reframing (Seligman, 2011) and exposure therapy (Ardern et al., 2022) to help Brandi shift from fear-based thinking to confidence-based thinking in high-stress situations. Self-talk techniques (Keegan, 2016) reinforce a sense of control, while guided imagery and visualization (Weiss, n.d.) will mentally prepare Brandi for high-risk plays and successful game scenarios. Collaboration with her physical therapist will provide clarity on physical limitations vs. psychological barriers, ensuring that her hesitation is addressed at both the mental and physical levels.

To implement these strategies, Brandi will undergo athletic identity self-assessments (AIMS) (Brewer et al., 1993), pre- and post-intervention confidence evaluations, and structured game-time exposure exercises (Gardner & Moore, 2004). Educational components will focus on the psychological impact of injury and athletic identity development (Sparkes, 1998; Buck, 2021), while mindfulness-based interventions (Gardner & Moore, 2004) will help Brandi regulate stress responses and increase psychological flexibility.

Progress will be assessed through physical therapy reports, observational data, self-reflection exercises, and coach feedback. By utilizing CBT-based fear reduction (Hsu et al., 2016), self-talk reinforcement (Keegan, 2016), and systematic exposure therapy (Ardern et al., 2022), Brandi will reconnect with her competitive identity, eliminate hesitation in high-pressure plays, and fully embrace her return to lacrosse.

Implementation Plan

Phase 1: Assessment and Education (Weeks 1-2)

Objective: Establish a baseline of physical ability to ensure Brandi can play at full intensity. Assess her current level of athletic identity. Educate Brandi on the psychological and physical impacts of trauma on the body.

Action Steps:

• Physical Readiness Assessment:

- Collaborate with Brandi's physical therapist to determine current physical capabilities and any remaining limitations.
- Clarify real vs. perceived restrictions in play situations.

• Athletic Identity Self-Assessment:

- Use Athletic Identity Measurement Scale (AIMS) to assess Brandi's connection to her role as an athlete.
- Conduct an open discussion about how she perceives herself post-injury.

• Education on Trauma and Recovery:

- Explain how the nervous system reacts to injury, trauma and why fear of re-injury can create avoidance behaviors (Hsu et al., 2016).
- Discuss somatic responses to stress (e.g., muscle tension, racing heart) and how they influence hesitation in high-pressure moments.

• Cognitive Behavioral Therapy (CBT) Introduction:

- Educate Brandi on injury-related cognitive distortions (e.g., catastrophizing, fear-based thinking). (Turner et.al., 2020)
- Introduce thought-reframing techniques to shift her mindset from fear-based avoidance to confidence in recovery. (Turner et.al., 2020)

Monitoring & Assessment:

- Observe Brandi's practice sessions to note hesitation patterns.
- Have Brandi journal thoughts and emotions related to her confidence in her body.
- Review findings from AIMS and physical therapy reports to inform next steps.

Phase 2: Skill Development and Practical Application (Weeks 3-5)

Objective: Implement targeted confidence-building strategies to help Brandi mentally and physically reintegrate into high-intensity play situations.

Action Steps:

- Cognitive Behavioral Therapy (CBT) for Confidence & Fear Reduction:
 - **Cognitive Reframing:**
 - Identify automatic negative thoughts about reinjury.
 - Challenge these thoughts with rational evidence-based counterstatements (e.g., "My body is fully recovered, and I trust my rehab process.") (Turner et al, 2020)
 - o Behavioral Activation:
 - Assign gradual exposure to high-intensity plays (e.g., progressing from slow-speed drills to full-contact scrimmages).
 - Exposure Therapy for High-Risk Scenarios:
 - Rank fear-inducing play situations from low to high intensity.
 - Gradually introduce drills that expose Brandi to these scenarios
 (e.g., fast passes, cutting maneuvers, contested plays).
- Self-Talk for Athletic Identity Reaffirmation:

- Develop a personalized self-talk script Brandi can use in high-stress moments:
 - "Control the Controllables."
 - "I am healthy, I am safe."
- Have Brandi repeat her self-talk before practice, during tough drills, and after setbacks.

Guided Imagery & Visualization for Athletic Identity:

- Use mental imagery exercises where Brandi visualizes herself executing plays successfully in real time.
- Reinforce sensory details (e.g., feeling the ball in her stick, hearing the crowd, sensing her footwork).

Monitoring and Assessment

- Conduct check-ins to assess Brandi's confidence changes during play.
- Have Brandi track progress in a reflection journal (noting confidence shifts, hesitations, and resilience moments).
- Observe on-field decision-making—is hesitation decreasing? Is she trusting her physical abilities?

Phase 3: Integration and Long-Term Development (Weeks 6-8 and Beyond)

Objective: Ensure long-term application of mental strategies so Brandi sustains confidence and fully reintegrates into her athletic identity.

Action Steps:

 Self- Talk Transition: from structured self-talk scripts to automatic cue words

- Encourage self-guided cognitive reframing for continued growth.
- Maintain Exposure to High-Intensity Play:
 - Simulate game-like stress conditions in drills and scrimmages to ensure confidence is maintained.
 - Continue progressive exposure to high-risk scenarios to eliminate lingering avoidance behaviors.

• Athletic Identity Reassessment:

- Re-administer the Athletic Identity Measurement Scale (AIMS) to track Brandi's perception of herself as an athlete.
- Conduct a final confidence and self-efficacy assessment to ensure sustainable progress.

Monitoring & Assessment:

- Observe Brandi's decision-making and aggressiveness on the field—is she playing without fear?
- Review Brandi's journaling reflections for long-term mindset shifts.
- Have coaches provide feedback on her confidence, leadership, and execution.

Focus Three Conclusion

The Physical Limitations & Athletic Identity Assessment intervention is designed to rebuild Brandi's trust in her body and reinforce her self-perception as an athlete. This plan ensures progressive and sustainable confidence growth by identifying fear-based avoidance behaviors, utilizing CBT strategies, and gradually exposing Brandi to high-pressure situations.

Through cognitive reframing, self-talk reinforcement, and systematic exposure therapy, Brandi will regain confidence in her physical capabilities and reconnect with her competitive identity. By Phase 3, she will no longer hesitate in high-risk plays and fully embrace her return to competitive lacrosse.

Overview and Analysis of Strategies and Intervention Plans

This intervention plan addresses the psychological, emotional, and performance-related challenges Brandi faces following her injury. Focusing on motivation, confidence, and athletic identity ensures a well-rounded rehabilitation strategy that supports her immediate return to play and long-term resilience. The structured, multi-phase approach integrates cognitive-behavioral therapy (CBT), exposure therapy, self-talk reinforcement, and mindfulness-based interventions to rebuild trust in her abilities and minimize hesitation in high-pressure situations. Key assessments, including the Sport Motivation Scale-6 (SMS-6) and the Athletic Identity Measurement Scale (AIMS), provide measurable insights into her progress and ensure interventions remain targeted and effective.

The confidence and self-efficacy development component employs cognitive reframing, attentional focus training, and somatic regulation techniques to help Brandi manage anxiety and restore her decision-making skills. Mindfulness-based stress reduction (MBSR) and guided imagery exercises further reinforce mental resilience, preparing her for real-time performance scenarios. This approach ensures that Brandi's progress is sustained over time by systematically tracking it through self-reporting, observational analysis, and coach feedback. Integrating biofeedback training and progressive muscle relaxation further supports emotional regulation and physical preparedness under stress.

28

Finally, the intervention addresses Brandi's athletic identity by distinguishing physical limitations from psychological barriers. Collaboration with her physical therapist ensures an accurate understanding of her readiness to return, while exposure therapy gradually reintroduces her to high-risk situations. Brandi's transition back to competition is optimized for long-term success by reinforcing positive self-perception through structured self-talk and visualization exercises. The intervention plan's phased implementation allows for continuous assessment and adaptation, ensuring Brandi not only regains her confidence but also sustains peak performance and resilience in her sport.

References

- Ardern, C. L., Hooper, N., O'Halloran, P., Webster, K. E., & Kvist, J. (2022). A Psychological Support Intervention to Help Injured Athletes "Get Back in the Game": Design and Development Study. *JMIR Formative Research*, 6(8), e28851.

 https://doi.org/10.2196/28851
- Bandura, A. (1997). *Self-efficacy: The exercise of control*. W H Freeman. Times Books/ Henry Holt & Co.
- di Fronso, S., & Budnik-Przybylska, D. (2023). Special Issue: Sport Psychology Interventions for Athletes' Performance and Well-Being. *International Journal of Environmental Research and Public Health*, 20(4), 3712. https://doi.org/10.3390/ijerph20043712
- Doran, G. T. (1981). There's a S.M.A.R.T. way to write management's goals and objectives.

 Management Review, 70(11), 35-36.
- Dweck, C. S. (2006). *Mindset: The New Psychology of Success*. Random House
- Engel, G.L.(1977). The need for a new medical model: a challenge for biomedicine. *Science*. 196(4286):129–136. doi: 10.1126/science.847460. [DOI].
- Hsu, C. J., Meierbachtol, A., George, S. Z., & Chmielewski, T. L. (2017). Fear of Reinjury in Athletes. *Sports Health*, 9(2), 162–167. https://doi.org/10.1177/1941738116666813
- Keegan, R. (2016). Being a Sport Psychologist. Palgrave Macmillan.
- Gardner, F. L., & Moore, Z. E. (2004). A mindfulness-acceptance-commitment-based approach to athletic performance enhancement: Theoretical considerations. *Behavior Therapy*, 35(4), 707–723. https://doi.org/10.1016/S0005-7894(04)80016-9
- Marchant, David C; Greig, Matt; Scott, Catherine.(2009) Attentional Focusing Instructions

 Influence Force Production and Muscular Activity During Isokinetic Elbow Flexions.

- The Journal of Strength & Conditioning Research:23 (8) 2358-2366,
 DOI:10.1519/JSC.0b013e3181b8d1e5
- Krane, V. & Williams, J.M. (2021). *Applied sport psychology: Personal growth to peak performance* (8th Edition). McGraw-Hill Education.
- King, R. (2018). Cognitive behavior therapy in injury recovery. Offseason Athlete. Retrieved

 March 11th from https://offseasonathlete.com/Cognitive-behavior-therapy-injury-recovery/
- Pocwardowski, Sherman & Ravizza, (2004). Personal philosophy in the sport psychology service delivery: Building on theory and practice. *The Sport Psychologist*. 18, 445-463.
- Sparkes, A.C. (1998). Athletic Identity: An Achilles' Heel to the Survival of Self. *Qualitative Health Research*. 1998;8(5):644-664. doi:10.1177/104973239800800506
- Taylor, J. (2017). Assessment in applied sport psychology. Human Kinetics.
- Turner. M.J., Aspin, G., Didymus., F.F., Mack, R., Olusoga., P., Wood., A.G.& Bennet, R., (2020). One Case, Four Approaches, The Application of Psychotherapeutic Approaches in Sport Psychology. *The Sport Psychologist*. 34(71-83).
- Vealey R. S. (2024) A framework for mental training in sport: Enhancing mental skills, wellbeing, and performance. *Journal of Applied Sport Psychology*. 36:2, 365-384. DOI: 10.1080/10413200.2023.2274459
- Weinberg, R. S. (2010). Goal setting in sport and exercise: Research to practice. *Quest*, 62(3), 313-325. https://doi.org/10.1080/00336297.2010.10483654
- Weiss, W. M. (n.d.). Mentally preparing athletes to return to play following injury. Association for Applied Sport Psychology. Retrieved from https://appliedsportpsych.org/resources/ injury-rehabilitation/mentally-preparing-athletes-to-return-to-play-following-injury/