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Journal of Sport Psychology in Action

ISSN: 2152-0704 (Print) 2152-0712 (Online) Journal homepage: www.tandfonline.com/journals/uspa20

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To cite this article: Alex Oliver & Robert Morris (10 Nov 2026): Experiences of Delivering a Personal-Disclosure Mutual-Sharing Intervention Within Semiprofessional Football, Journal of Sport Psychology in Action, DOI: 10.1080/21520704.2026.2759335

To link to this article: https://doi.org/10.1080/21520704.2026.2759335

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Published online: 10 Nov 2026.

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JOURNAL OF SPORT PSYCHOLOGY IN ACTION
https://doi.org/10.1080/21520704.2026.2759335

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Experiences of Delivering a Personal-Disclosure Mutual-Sharing Intervention Within Semiprofessional Football

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ABSTRACT

Teams that are cohesive display behavioral, cognitive, and affective outcomes. Within applied sport settings, Personal-Disclosure Mutual-Sharing (PDMS) is proposed as an intervention to facilitate growth of team cohesion through cultivating behavioral, cognitive, and affective elements by encouraging athletes to share meaningful personal narratives with their teammates. In this paper, we detail key reflections on components of successful delivery of a PDMS intervention delivered with a semiprofessional football team. Specifically, we outline considerations related to antecedents, preparation, delivery and post-session activities that allow practitioners to successfully navigate implementing a PDMS intervention. We describe the importance of preexisting conditions that include rapport, cultural awareness, relationships with coaching staff, and identification of a suitable game to deliver the intervention before. Next, we describe preparatory processes that included an introduction to the intervention, contracting, one-to-one support, and the facilitator's own story to share. We then outline the session processes that include timing, participants, and managing the space and the influence this has on disclosures. Finally, map post-session reflections and social validation that illustrates athlete's perceptions of the intervention. By mapping the processes, reflections, and contextual considerations involved, we offer guidance for the effective and ethical delivery of PDMS.

KEYWORDS

Group Intervention; Applied Practice; Team Cohesion; Personal-Disclosure Mutual-Sharing; Team Building

In sport, cohesion and collective efficacy are mediators for behavioral, cognitive, and affective outcomes at a team level (McEwan & Beauchamp, 2014). Cohesion, in particular, is conceptualized as having two dimensions, task cohesion which is members' shared commitment to achieving group goals and objectives, and social cohesion which refers to interpersonal connectedness and sense of belonging experienced by group members (Carron et al., 2002). Building a cohesive unit influences how athletes interpret

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challenges, how they coordinate behaviors and sustain motivation over time (Cannon-Bowers & Salas, 2001). In essence, when athletes perceive their team as unified and capable, they are more likely to engage in adaptive behaviors that support their shared goals. Consequently, interventions designed to deliberately strengthen cohesion can have a powerful effect on group functioning. Such interventions can facilitate group functioning, develop their shared interpersonal bonds, enhance collective resilience and create an environment that supports more effective team performance.

Personal-Disclosure Mutual Sharing

One intervention to foster team cohesion that has seen growth in the literature is Personal-Disclosure Mutual Sharing (PDMS; see Warburton et al., 2026 for a recent review). PDMS is a group-level communication-based intervention that requires individuals to disclose personal stories and information that was previously unknown to members of a group or team (Holt & Dunn, 2006). Individually, PDMS promotes growth through an increased participant awareness of their thoughts and feelings toward the topic being discussed. This leads to mutual rapport and respect amongst its members through shared understanding of values and beliefs communicated (Warburton et al., 2026). PDMS may be relationship-orientated, rational-emotive, coping-orientated, or mastery-orientated (see Evans & Barker, 2020). As highlighted in Warburton et al. (2026) review, PDMS offers a structured way of enhancing cohesion by encouraging athletes to share personal experiences, values, and identities that are typically unknown within the team. Establishing such a shared understanding, empathy, and interpersonal connection can then be seen to underpin high-quality team processes. The processes underpinning PDMS also align with broader literature related to belonging and common humanity. Belonging reflects individuals' perceptions of being accepted, valued, and connected within a group (Cohen, 2022). While common humanity refers to recognizing that personal struggles and challenges are shared aspects of human experience rather than isolated individual experiences (Neff, 2023). Through hearing teammates disclose meaningful personal experiences and challenges, participants may come to recognize shared experiences and commonalities that were previously unknown. It is the group setting that provides the conditions which facilitate and promote growth, when those present express themselves authentically, improving self-awareness, empathy, and socio-emotional relationships (Dunn & Holt, 2004). Consequently, PDMS may strengthen feelings of belonging and interpersonal connection alongside its intended effects on team cohesion.

Team cohesion is typically conceptualized as comprising social and task dimensions (McEwan & Beauchamp, 2014). Social cohesion reflects the quality of interpersonal relationships and connectedness amongst team members, whereas task cohesion relates to the degree to which individuals unite around shared goals and performance objectives. In the present case, PDMS was primarily intended to facilitate social cohesion through increased interpersonal understanding and connection amongst players.

PDMS activities are underpinned by a Rogerian (e.g., Rogers, 1951) person-centered counseling approach. During the intervention, teamwork is therapeutic and collaboration facilitates resolution through interpersonal interactions (Holt & Dunn, 2006). This works by nurturing empathy as group members gain a greater understanding of each other's experiences (Dryden, 2006). Through communicating values, beliefs, attitudes, and personal experiences, shared perceptions and meanings emerge. This in turn elicits growth at an individual-level and at a team-level by promoting shared constructs and understanding (Warburton et al., 2026).

The case

The current case concerned the delivery of a PDMS intervention within an association football (i.e., soccer) team that had undergone a period of managerial change and squad transition. Managerial change and turnover of players from the preceding season had been emphasized by relegation. As a consequence of the transfer activity, many in the squad were playing together for the first time. PDMS was selected as a structured group-based intervention because it aligned with the needs of the team. Specifically, the intervention was designed to (i) facilitate integration within the group, (ii) strengthen interpersonal relationships, and (iii) foster a greater sense of belongingness. By increasing each of these constructs it was anticipated that there would be growth in group dynamics related to social identification, friendship, and results would occur in-turn. These were important constructs as there had been an influx of new players which meant many were playing together for the first time. Therefore, many within the team were unfamiliar with each other and as a group lacked cohesion. Accordingly, PDMS was selected as a structured group intervention in which athletes were invited to disclose and discuss meaningful personal experiences within a facilitated team setting. The intervention was designed to deepen disclosure, encourage active listening, and promote reflection on shared experiences and values. The desired outcome, therefore, was to increase familiarity and cohesion within the group.

Practical considerations for PDMS delivery

At the time of the intervention, I (the first author), held a consultancy role at a semiprofessional football club and was in the final stages of practitioner training with the Chartered Association of Sport and Exercise Science (CASES) to be registered with the Health Care and Professionals Council (HCPC) which is a United Kingdom-based qualification. The second author is a HCPC registered practitioner Sport and Exercise Psychologist and was my supervisor.

My philosophy of practice was primarily underpinned by a humanistic approach as I see freedom, dignity, and potential in all (Rogers, 1957). To enact this, I look to create a space where clients can speak freely and are enabled to share their thoughts and feelings without fear of judgment (Katz & Hemmings, 2009). I believe that creating such an environment facilitates growth and fulfillment of potential—a state of congruence (Rogers, 1959). This aligned to a PDMS intervention because such interventions promote growth through increased self-awareness of thoughts and feelings toward the topic being discussed (Dunn & Holt, 2004; Warburton et al., 2026). Congruence, unconditional positive regard, and empathy that allow an individual to move toward actualization can be mapped onto a PDMS intervention.

Within my consultancy role I was embedded in the football club. Repeated immersion in training and match environments allowed a strong working alliance to develop between coaching staff, the players and me. On-going observations from being embedded within the setting showed the need for a cohesion-focused intervention. In particular, the team approached a high-stakes phase of competition in which group unity, communication, and shared purpose were central to performance aspirations. In response to these emergent needs, I selected PDMS as an intervention that aligned with both the team's goals and my humanistic philosophy because it was anticipated that this approach would facilitate growth and connection amongst the players and address issues of an apparent lack of cohesion. This perception stemmed from observations of inconsistent communication during training and in matches, individual conversations with various stakeholders, and few opportunities afforded to openly explore their experiences as members of the team. Having identified PDMS as an appropriate intervention, attention was turned to the design and delivery of the session. Windsor et al. (2011) thirteen-point guidelines provided a starting point for intervention design, and subtle tweaks and considerations were then applied for the current case. Moreover, whilst other work within football contexts (e.g., Evans et al., 2013) provides insights to PDMS delivery, less attention has been given to the contextual adaptations, practitioner decision-making processes, and implementation

considerations that shape delivery within applied football environments. Consequently, the current paper seeks not to evaluate intervention effectiveness, but rather to provide a reflective account of how established PDMS principles were operationalized and adapted within a semiprofessional football setting.

The present case organizes these practical considerations into four broader phases of implementation to illustrate how they were operationalized within the applied setting. For example, greater consideration was given to the preparation, ordering, and delivery insofar that in the current program of work these were more structured. The following case outlines a worked example of considerations, decisions, and actions that shaped the delivery of this PDMS session, and the reflections that followed. By making these implementation considerations explicit, we aim to provide practitioners with practical guidance for planning, adapting, and delivering PDMS within their own performance environments. We highlight considerations across four levels for delivery: antecedents, preparation, delivery and debriefing (see Figure 1.). Four phases of implementation became clearer through the iterative reflective process that the first author engaged in during, and after, the consultancy project. Collectively, these levels provide a practical framework for practitioners by identifying key decisions that require consideration before, during, and after PDMS. The purpose is not to provide a single approach, but rather to illuminate the decision-making processes undertaken when tailoring PDMS to a performance context.

Antecedents

The effectiveness of the PDMS intervention was shaped by several key antecedents that were developed in the months leading up to its delivery. These foundational elements created the psychological safety and trust required for meaningful disclosure. For a review on psychological safety see: Vella et al. (2024) and for insights in developing psychological safety see Jowett et al. (2023). Antecedents collectively provided the groundwork from which the intervention could be implemented ethically, sensitively, and with genuine impact. Therefore, practitioners should recognize that PDMS should not be viewed as a standalone workshop. Establishing trust, rapport, and psychological safety prior to delivery may influence participant willingness to engage and disclose personal experiences.

Rapport

At the time of the intervention, I had developed rapport amongst players and coaches, achieved through sustained immersion within the club

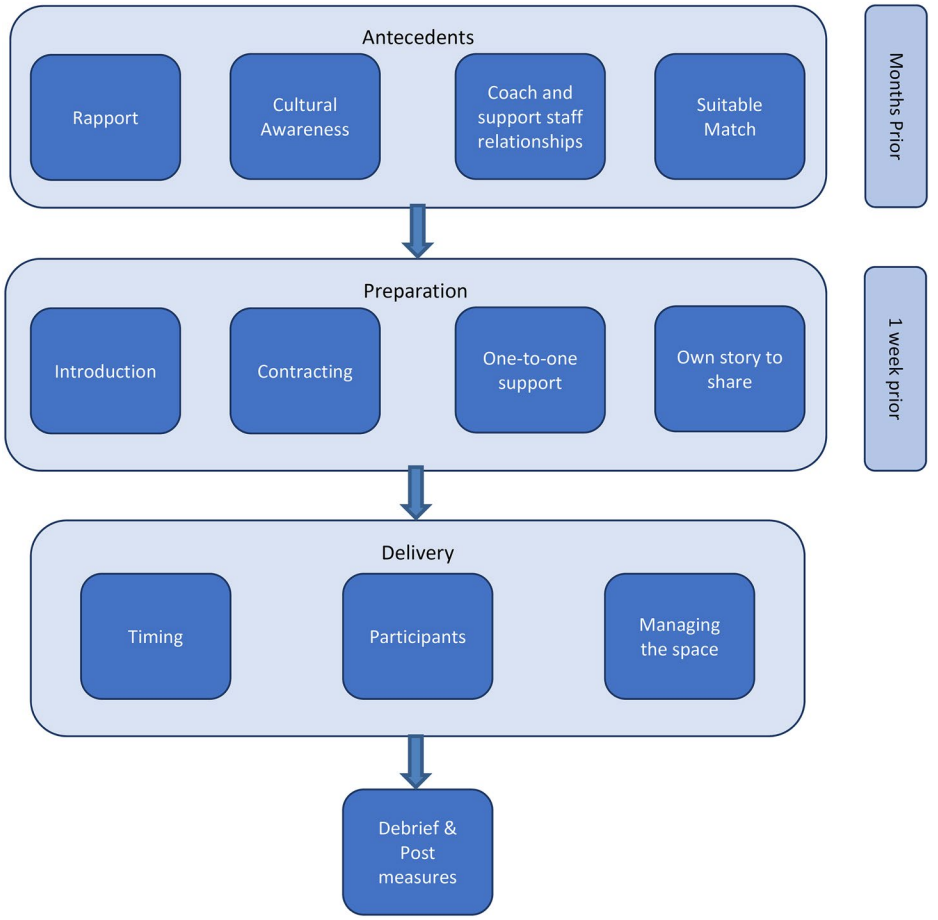


Figure 1. Map of considerations for delivery of PDMS in a team sport environment.

environment (Barker et al., 2011; Poczwardowski & Sherman, 2011). Regular attendance at training sessions, matches, and informal interactions allowed me to become familiar with the players on a personal level. The part-time status of the club meant that training sessions took place in the evening twice per week, and I was able to attend most training sessions. By the time of the intervention, I had been embedded in the environment for several months working through coaches, working at a group-level and supporting individuals one-to-one. This sustained presence enabled the development of strong working relationships across multiple layers of the club, contributed to creating a foundation that was essential for facilitating a psychologically safe PDMS session. Practically, PDMS may be more effective when facilitators have already established credibility and trust within the performance environment rather than introducing the intervention as an isolated activity (Holt & Dunn, 2006; Warburton et al., 2026).

Cultural awareness

Cultural awareness was treated as a distinct antecedent in this case as understanding the club norms, values, and wider perceptions of sport psychology was essential for delivering an effective PDMS intervention so that it would be impactful for the client (Holt & Dunn, 2006; Windsor et al., 2011). Appreciating the culture of semiprofessional football, particularly its structures, expectations, and boundaries, helped ensure that my approach was sensitive to the environment and ethically grounded. Through immersion developed in the months prior to the intervention, I developed a clearer awareness of how the club operated and how best to position the intervention within it. Without this cultural understanding, it would have been difficult to navigate the space appropriately, and the quality and integrity of the support provided may have been compromised. Practitioners should consider how existing team norms and attitudes toward psychology may influence engagement with disclosure-based activities.

Coach and support staff relationships

A strong working relationship with the team manager (head coach) was central to the successful delivery of the intervention (Windsor et al., 2011). In the current case, I held detailed discussions with the manager about the team and their needs. The manager was highly supportive and viewed the intervention as an opportunity to bring the team closer together, which helped foster buy-in across the squad. The manager showed genuine interest in the support being provided and his belief that having a psychologist in the building contributed to the club's professionalism created a collaborative foundation. Therefore, practitioners should foster early engagement with coaches and support staff as this may enhance buy-in and increase the perceived legitimacy of the intervention.

Suitable match

The timing of the intervention was also an important consideration. PDMS is often most effective when delivered ahead of a match that carries heightened significance, as it can help strengthen cohesion (Dunn & Holt, 2004; Holt & Dunn, 2006; Windsor et al., 2011). Practitioners should work with coaches and support staff to identify a suitable date when a PDMS intervention may have its greatest impact and meaning. In the current case, as the team approached the 'run-in', the build up to a match with a rival team for a promotion play-off spot was identified as an appropriate time for the intervention to be carried out. The intervention took place prior to a training session two days before the match. This was the training session that immediately preceded gameday and reflects the semiprofessional schedule of many football clubs. The game identified was a 'six-pointer'

and a win could facilitate a late charge to the promotion play-off. Whilst a 'six-pointer' is not a literal double points fixture, it is a fixture that two close rivals contest where a 6-point swing can occur because of the result of the game. This made it a meaningful and timely context for the session to take place (Holt & Dunn, 2006; Windsor et al., 2011).

Preparation

Prior to delivery, consideration was given to room layout, group size, time allocation, and the communication of expectations regarding confidentiality and respectful listening. Direct preparation for the PDMS session was carried out in the week prior to the intervention. This stage required careful planning to ensure that players felt informed, supported, and psychologically safe ahead of the intervention. The preparatory work was designed to establish clear expectations, outline the purpose of the session, and provide opportunities for participants to reflect on their own contributions in advance.

Introduction, outlining of the session and contracting

I introduced the session prior to training in the team dressing room and provided handout packs that comprised: an information sheet, a consent form, and baseline measures. During this process, players had the opportunity to ask any questions they had. I then sat in a quiet spot in the treatment room so that any players who had questions or queries about the handout. Signed consent forms and completed baseline measures were returned to me by most of the players the same day. Players that had not completed the consent form and baseline measures were encouraged to take them home, read through and consider taking part, and if they agreed were asked to return consent form and completed baseline measure to the following training session. The information sheet included details of when the session was taking place and what was expected of them; that they would be asked to share insights and speak in front of the group for around 3 min. Players were given two prompts to guide their speech to teammates: (1) tell the group why you play football and what you think you bring to the team; (2) Tell a personal story or describe a situation that will help teammates understand you more; but this should be a story that you have not shared with the group before. It can be related to football or it could be from your personal life. It should illustrate something that you feel defines your character, motives, and desires.

Five rules for the session were also shared on the information sheet: (1) respect and uphold confidentiality by not discussing information and/or personal stories with those individuals who did not attend the session; (2) delivering information and/or personal stories is not a test and you

will not be given preferential treatment or discriminated against based on what you decide to share or do not decide to share; (3) answer all parts of the instructions to provide a detailed account of your thoughts, feelings, and experiences; (4) be open and honest with your disclosures. There are no right or wrong answers and all that is required is you detail information aligned to the 2 prompts above; (5) be professional at all times by respecting, listening, and attending to others when they are speaking.

Cognizant of the literature (e.g., Evans et al., 2013; Holt & Dunn, 2006; Windsor et al., 2011), it was integral that there were clear instructions about the session and what was being asked of the players prior to the session. The instructions provided outlined clear rules for the session to promote active listening, non-judgment, and unconditional positive regard. Players were informed that while all participants were expected to treat discussions confidentially, and respectfully, complete confidentiality could not be guaranteed within a team setting. Because of the sensitive nature of PDMS, and as disclosure would go beyond client-practitioner and be teammate-to-teammate, consent forms specifically for the session were signed and returned to me before the session. These consent forms were in addition to the existing consent and agreements already in place.

One-to-one opportunity

Included on the information sheet was a reminder of my contact details that they were free to use to raise questions or queries about their speech which was to be built around motivations for playing football and personal challenges or sacrifices made that helps define their character. I purposively checked-in and followed-up with those who had been in touch with questions or uncertainty about what their delivery might look like. During the current case three players had sought clarity on what they had to do during the session. Support, guidance, and reassurance had been flagged by previously published PDMS work (e.g., Windsor et al., 2011) as an important process to help participants develop meaningful contributions to the group session. The process of providing guidance is underpinned by unconditional positive regard (see Rogers, 1957).

Own story to share

In preparation for the session, I reflected on my journey and appropriate responses to the PDMS questions set. Windsor et al. (2011) shared that their clients had asked to hear their story and promoted the idea that a practitioner facilitating a PDMS session should be prepared to bring their own disclosure. Although this was the final disclosure shared with the group, I hoped that by being part of the disclosure, it would help others feel comfortable with what they shared earlier.

Delivery

The running of the intervention required careful facilitation to ensure that the conditions established during preparation were maintained throughout the intervention. This stage involved maintaining the space to ensure it remained respectful and a space safe for disclosure. Effective delivery meant being attuned to group dynamics while providing a supportive structure that encouraged openness and mutual respect. Together, these considerations enabled the session to progress organically while preserving the psychological safety necessary for mutual sharing.

Timing

The length and depth of disclosures varied across the players. Although they were advised to speak for around three minutes, several offered longer reflections; particularly those who chose to share more personal or emotionally significant experiences. Others kept their contributions shorter and more focused. As a result, the session unfolded at a natural pace rather than a strictly timed one, with space given for players to pause, gather their thoughts, or respond emotionally when needed. In the interests of time, questions were not invited after each speech. In total, the session lasted around 45 min.

Participants

In total, 14 players participated in the PDMS session, with ten choosing to offer their disclosures within the group. This represented a majority of the first-team squad present at training, with four players absent through injury. Players were given the option on whether they wished coaches and the manager to be present, and no objections were raised, however, coaches, and other staff, were not present as they wanted to give players space to speak freely. The few members of the squad who chose not to disclose were among the younger members of the squad, I later learned that some had not engaged with the task beforehand suggesting their hesitancy was likely linked to apprehension and a lack of readiness rather than unwillingness to participate. Given the vulnerability inherent in PDMS, such responses are understandable. A similar pattern occurred in Evans et al. (2013) PDMS intervention within academy football setting - rather than apportion blame to the client for not being prepared for the session, this may have been a consequence of apprehension that they felt and they perhaps did not feel ready to disclose in front of new teammates as this may expose some vulnerabilities. Therefore, challenges experienced in academy football settings by Evans et al. (2013) are also present within adult football. When working in this space it is important to remain compassionate and understanding and deal with individuals not wishing

to share sympathetically. This is to say, they should not be blamed for not sharing. Rather than pressuring participation, the decision was made to respect readiness to engage and allow involvement through listening alone. Doing so is consistent with the voluntary nature of PDMS and helped preserve the psychological safety of those present.

Managing space

Because of space constraints, the session took place in a hospitality room within the stadium, where seats had been arranged in a circle. Seating players in a circle ensured that all participants could see one another and promoted a sense of equality in the room. This seating arrangement may also help avoid layouts that reinforce formal (and informal) hierarchies. I welcomed the attendees to the session and went through a reminder of instructions and the rules for the session. Attendees were reminded to be open and honest with the group (Holt & Dunn, 2006). The question prompts and ground rules for the session also remained on the projector slide throughout the session.

To begin the session, I asked if anyone would like to volunteer and go first. In response to this request, group norms became evident, as it seemed one of the younger players was obliged to go after a senior player called for a "young one first". This is reflective of the group dynamic on the training pitch, for example in rondos[1] the youngest two players would begin in the middle as interceptors. After the young player shared their reflection, they were greeted with a round of applause led by senior members of the squad; spontaneous applause has been noted across PDMS literature (e.g., Barker et al., 2014). Acknowledgement and applause served as an affirmation of the speaker's contribution, reinforcing acceptance, validation, and belonging within the group. After the first player had shared, the senior players were forthcoming with their stories. Sharing personal stories facilitated perspective-taking and empathy by exposing teammates to experiences and challenges that were previously unknown. Increased interpersonal understanding was anticipated to strengthen social cohesion through greater feelings of connection and mutual respect. Because of the openness and level of disclosure displayed in early speeches, the willingness to disclose to teammates was reciprocated by other attendees (Wright & Ingraham, 1985). Listening to teammates' disclosures provided opportunities for players to identify shared experiences and recognize common challenges, fostering perceptions of similarity and strengthening

[1]Rondos are a high-intensity possession-based drill in football where a group of attackers aim to keep possession from defenders in a small space.

interpersonal bonds. There were players visibly moved by untold and unheard stories. Support for delivery was achieved through the conditions that were co-created by those within the room.

Debrief and social validation

Following the session participants were verbally thanked and formally debriefed. Considering how participants are supported following the session, particularly following personal disclosures that evoked strong emotional responses is important. Social validation was then conducted to gain insight into the perceived effectiveness of the intervention (Barker et al., 2013). This was completed a few weeks later using a short questionnaire *via* the team's WhatsApp group, with players reminded that their responses would remain anonymous. Based on social validation data, alongside my own reflections, and through training and match observations, those who engaged in the PDMS activity appeared to view it as beneficial for the desired outcomes, i.e., to strengthen connection, understanding, and cohesion in the group. Responses suggested that players developed a greater appreciation of their teammates' personal experiences and challenges, with several noting that conversations of this nature did not usually happen within a football environment. Others reflected that the session helped them better understand their teammates and recognize shared experiences within and outwith football. While social validation and practitioner observations indicated positive perceptions of the intervention, responses were not obtained from all participants and formal post-intervention measures of cohesion were not collected. Consequently, interpretations regarding improvements in cohesion should be treated cautiously and are limited to participant perceptions and practitioner reflections.

Reflections and lessons learned

Facilitating the PDMS session was both challenging and rewarding. Several disclosures were emotionally powerful, and I had to manage my emotions in-the-moment. This required a degree of emotional labor (Grandey & Melloy, 2017) and was particularly challenging as others in the room appeared emotionally moved by what their teammates had shared. Although I had anticipated some emotional intensity in disclosures (e.g., Dunn & Holt 2004), I was perhaps a little underprepared for the extent to which I would be moved. When facilitating a similar session in the future, I would spend more time preparing for the emotional demands of the exercise and planning strategies to manage my own emotional responses while maintaining my role as facilitator. This in part may have been down to players not sharing disclosures with me beforehand. Additionally,

group-norms on the intensity of disclosure may have influenced what was shared. The brief period after the session, when I restored the room to its original layout, provided a valuable opportunity to decompress from the emotional intensity of the exercise and process my own reflections on what had gone well. I believe that this time, and activity, may be a useful consideration as a mechanism when engaging in PDMS. Although not every player shared, nor fully prepared a story to tell, everyone in the room provided appropriate conditions for the speaker—and those that did share their disclosure—all did so in a respectful and mature way.

One player I had been supporting individually disclosed an adverse childhood experience to the group for the first time. They later shared that hearing their teammates' stories made them feel comfortable enough to disclose their own experiences. This reciprocal process reflected the conditions created in the session, i.e., empathetic understanding and unconditional positive regard, contributing to psychological safety.

Many shared disclosures beyond football—with some discussing their identities away from football (e.g., as a dad) and how this impacted on their outlook, ambitions, and motivations. As a practitioner that looks to place emphasis on holistic development (i.e., whole person and not just a performer), I found this reassuring and validating because it spoke to some of the one-to-one work that I had conducted. Although, I also reflect on whether this was, in part, a product of part-time and semiprofessional status as the clients may be more cognizant of their identities away from football as they are more salient. For example, many of those in the team report to training straight from work.

The depth of disclosure demonstrated the strength of the relationships developed over months of immersion in the environment. Even players I had not worked with individually were still willing to engage in the session, highlighting the value of sustained presence in building trust. That so many came to my session suggested that I had accrued 'buy-in' from the group and that I had gained their trust and respect for the work that I was doing. The openness of a senior player early in the session appeared to set a tone for the group, I reflect on whether others would have been a little more guarded with their reflection and disclosure had the disclosure not been so open. The openness demonstrated that the space created would be safe for disclosure.

Conclusion

We have presented a worked example of a PDMS intervention which was delivered by the first author in a consultancy role with a semiprofessional football team. By providing a worked example with considerations for practice of delivering PDMS as an intervention, it is hoped that this will be used as guidance for practitioners looking to implement an intervention

that promotes team cohesion. Through mapping stages and conditions within these stages, we have provided a visual framework for practitioners to use as a starting point in their intervention design. Thus, several practical lessons emerge. First, extensive relationship-building prior to delivery appeared critical for establishing psychological safety. Second, the sequencing of activities helped participants gradually become comfortable with disclosure. Third, facilitator awareness of group dynamics and the ability to respond to these dynamics as they emerge are essential. Finally, formal debriefing allows participants to receive support, consolidate their learning, and identify future actions for the team. PDMS can be an effective intervention within a team sport environment when grounded in cultural awareness and strong relationships with players, as well as wider support staff. Through suitable planning and (re)contracting it is possible to create psychological safety needed for meaningful disclosure, resulting in perceived benefits for connection, interpersonal understanding, and cohesion.

Disclosure statement

No potential conflict of interest was reported by the author(s).

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