

Cutting Losses for Student-Athletes in Transition: An Integrative Transition Model

H. RAY WOOTEN, JR.

This article provides a framework from which to address the transition, decision-making, personal, and career counseling strategies useful with athletes. Counseling strategies, both personal and career, accompany each stage in the integrated model for working with this special population.

The positive aspects of sports participation are well known and numerous, including both physical and personal development (Collingwood & Willett, 1971; Folkins & Sime, 1981; Sachs & Buffone, 1984). Extreme sport activity and affiliation, however, may produce negative effects such as role confusion, foreclosed identity, career, academic, and personal difficulties (e.g., Lanning, 1982; Pearson & Petitpas, 1990; Remer, Tongate, & Watson, 1978; Wittmer, Bostic, Phillips, & Waters, 1981). Furthermore, when winning becomes paramount, there is a tendency for the sports milieu to foster excessive student-athlete affiliation and dependence on the coach and sports community. Coaches react to pressures to win by creating an environment that controls all phases of the athlete's life (e.g., housing, class schedule, summer job) (Coakley, 1990).

In many cases, the sports identity, status, and preferential treatment create a seductive environment of entitlement, permissiveness, and dependence. Many young student-athletes hold the irrational belief that "things will be handled for me because I am special." For example, athletes may expect good grades for mediocre academic work, and preferential treatment for class deadlines, class attendance, and course registration. The irrational beliefs or faulty worldview generalizations are manifested in a myriad of academic, social, and emotional difficulties.

Many student-athletes experience a difficult transition when special or preferential treatment is suddenly lost. Sustaining an injury, not meeting eligibility requirements, or failing to make the team are some events that precipitate the sudden loss of athletic identity, status, and protective environment. A result is that problems arise

H. Ray Wooten, Jr., is an assistant professor in the Department of Counseling and Human Services at St. Mary's University, San Antonio, TX 78228-8527.

either in the form of denial ("I'm special and will be taken care of") or through the realization that indeed "the game is over." In either case, the impending realization by the athlete that he or she is not as special as was once thought is at hand.

INTERVENTIONS

Counseling interventions for student-athletes must focus on the development of coping skills in response to or in anticipation of transition from sport (e.g., Chartrand & Lent, 1987; Jordan & Denson, 1990; Lanning, 1982; Remer et al. 1978; Wittmer et al., 1981). Transition from sport may signal loss or a threat that has personal, social, and emotional effects that, if not addressed, may have serious consequences. For example, because the athletic milieu fosters player dependence, many student-athletes routinely expect that others will do their personal decision making such as choosing academic majors, class schedules, and summer employment. Consequently, many student-athletes have not developed career problem-solving and decision-making skills important for later career development and transition. Pearson and Petitpas (1990) extrapolated Schlossberg's (1981) model of transition and predicted that transition would be more difficult for athletes who (a) exclusively based identity on athletics; (b) have a gap between level of aspiration and ability; (c) are inexperienced with transition; (d) have limited ability to adapt due to emotional or behavioral (or both) deficits; (e) lack supportive relationships; and (f) lack resources to cope with transition.

Pearson and Petitpas's (1990) indicators provide a mirror image of many student-athletes (e.g., academic, career, personal deficits). Several models, psychoeducational programming, and strategies have been developed to address these special academic and career concerns (e.g., Chartrand & Lent, 1987; Jordan & Denson, 1990; Pearson & Petitpas, 1990; Wooten & Hinkle, (1992). Nonetheless, few models probe the emotional and cognitive aspects involved in the transition from sport. This article provides a framework from which to address the transition, decision making, personal, and career counseling strategies useful with athletes. This framework is based on (a) Hopson and Adams's Seven-Phase Model of Stages Accompanying Transition (Hopson, 1981; Hopson & Adams, 1977); and (b) the CASVE model of decision making (Peterson, Sampson, & Reardon, 1991). The integration of these models illuminates the emotional factors accompanying a transition and the information processing of career and personal decision making (cognitive component). Counseling strategies, both personal and career, accom-

pany each stage in the integrated model for working with this special population.

THE INTEGRATIVE TRANSITION MODEL

Emotional Tasks

Hopson and Adams's (1977) process model addresses emotional and self-esteem reactions accompanying a transition. Stages related to experienced feelings are characterized by an initial downward spiral and are followed by upward stages of emotion.

Stage 1 is characterized by shock and immobilization. The amount of time spent in this phase depends on the individual's psychological make-up and the nature of the transitional event. Involuntary changers (e.g., the athlete who is injured) are more likely to react in an overwhelmed or shocked manner.

Stage 2 is characterized by the desire to make the transition smaller by minimizing its importance or denying the truth of the matter. Feelings of frustration, depression, and anxiety are characteristic of this stage.

Stage 3 is marked by intensified feelings of anxiety and depression as individuals begin to doubt their abilities to provide for themselves and may become self-deprecating. Emotional responses include sadness, fear of the future, and anger.

Stage 4 suggests that an individual reaches a critical point of acceptance of the event and begins to look toward the future. Individuals let go of their negative emotions and begin an upward spiral.

Stage 5 is a time for exploration of new options. Individuals get a burst of energy and adopt a new way of looking at transition. They have a sense of moving forward and want to act on or test out new ideas.

Stage 6 is a reflective phase following the roller coaster of emotion. This stage involves active participation in exploring and changing thoughts, feelings, and behaviors. Individuals begin to make sense of what has happened and are able to attach new meaning to their experiences.

Stage 7 is a point of integration and renewal. Exploration brings new ways of behaving and thinking. Individuals are at a higher level of functioning and have learned new skills for coping with future transitions.

Cognitive Tasks

Peterson, Sampson, and Reardon (1991) outlined a cognitive decision-making model that facilitates career transition and develop-

ment. The model is based on a cycle of five generic career problem-solving and decision-making skills known as the CASVE Cycle. The first stage is Communication, which requires receiving and interpreting information that identifies a gap between a real and an ideal state. There is recognition of both external demands (events, significant others) and internal states (emotions) that signal the need for problem solving (Peterson et al., 1991). The Analysis stage is a process of reducing the problem into causal components and seeking the connections between them. This includes clarifying and obtaining knowledge about self, occupations, decision making, and metacognitions (Peterson et al., 1991). The Synthesis stage reconstructs the information to create multiple alternative courses of action that can eliminate or reduce the problem. The Valuing stage sets priorities for alternatives in terms of costs and benefits, and the last stage, Execution, formulates an action for implementing a tentative choice. Peterson et al. (1991) suggested that the cycle is recursive and that individuals may move forward or backward through the stages in response to decision needs and emerging information.

According to Peterson et al. (1991), the strengths of this approach are that it is parsimonious, easy to comprehend, provides a conceptual framework for outlining essential characteristics and needs of the individual, and provides a standard for monitoring and evaluating client progress.

Merged Emotional and Cognitive Models

An integration of the emotional and cognitive aspects of transition and renewal are necessary to understand the process of career change and development. These models serve as appraisal templates for exploring potential avenues for assessing coping resources, alternatives, and solutions. A merger of these models outlines the need for flexibility, sensitivity, and training for the development of skills for effective problem-solving and decision making. Moreover, the individual can see the roles of both emotions and cognitions that exacerbate or diminish the current problem (see Figure 1).

CASE EXAMPLES

The following cases illustrate how the Integrative Transition Model can be applied to career transition.

Case 1

A male athlete who failed to make a football team after several tryouts in the professional ranks was referred for counseling by his family

Stages of Transition (emotional)	Career Decision Making (cognitive)	Career Counseling Techniques
I. Shock & Immobilization		Relationship building
II. Minimization & Denial	Communication	Individual therapy grief, depression self-talk
	- - - - - Assessment	- - - - -
III. Self-Doubt Depression	Analysis	Career assessment Decision making Data gathering
IV. Letting Go	Synthesis	Identify, develop alternatives
	- - - - - Action Stages	- - - - -
V. Testing Options	Valuing	Values clarification
VI. Search for Meaning	Execution	Clear, sequential detailed planning
VII. Internalization		

FIGURE 1
Integrative Transition Model

who stated that he seemed depressed and isolated. After initial exploration, he stated the following:

I had it all figured out, now I don't know what to do. I have let others make all the decisions and look where it got me. I knew the dream was too good to be true.

He presented at Hopson and Adams's Stages 2 and 3 with feelings of anxiety and depression because he did not know what would happen or what to do. He doubted his personal abilities that heretofore had made him a successful athlete. Using the CASVE model, he presented at the Communication stage of career decision making. He was aware of the need for change but procrastinated because of his irrational beliefs (I will fail) and the accompanying feelings (scared).

The first counselor strategy was to develop a therapeutic relationship to help the client express and identify his feelings. The counselor facilitated, guided, and supported the client while unfolding the complex series of feelings. Second, emotional distress and corresponding maladaptive behaviors were reduced by investigating, confronting, and correcting errors in thoughts, perceptions, and

beliefs. A therapeutic relationship combined with affective and cognitive interventions helped the client change his perception from pessimism and loss to searching for new alternatives and opportunities.

As a result, the client proceeded into the Analysis stage and decided to take a battery of career inventories to discover just "Who am I?" Career assessment inventories helped him clarify abilities, interests, and values, and obtain personal information about himself. Counselor interpretation helped the client overcome the emotional and irrational beliefs that maintained the impasse.

Concurrently, the CASVE decision-making model was employed. The client was taught problem-solving and decision-making skills. As a result, the client regained his prior level of motivation and self-confidence, which helped him operate and act on decisions in an effective manner.

Case 2

A female collegiate student-athlete who finished her senior year of eligibility in the fall semester presented for counseling at the end of the school year and stated the following:

I have been extremely frustrated and depressed and can't seem to get anything done. I thought I could figure all this stuff out by myself. I know I have to make some decisions about the future, but I never thought this time would have gotten here so fast.

The client's emotional state was assessed at Hopson and Adams's Stage 3. She expressed no self-confidence and doubted her ability to provide for herself. Furthermore, she stated that she did not know who she was anymore and complained of feeling dizzy and nauseous when thinking about the future. Regarding career decision making, she realized she had to make some decisions but was unsure of how to go about it. Her indecision resulted from not enough information and wanting someone to tell her what to do.

The counseling relationship was established by helping the client sort out her feelings. The counselor served as a sounding board as the client developed a sense of emotional control from telling her story. The counselor illuminated irrational thoughts and perceptions concerning the client and her abilities to work through this impasse. Furthermore, the client's athletic strengths of self-discipline and commitment were brought from the playing field to the problem at hand and to the real world. She was able to identify feelings, thoughts, and behaviors that had led to undesirable consequences in the past and was now able to state what she wanted.

Career assessment instrument results suggested several areas for further exploration, which she pursued avidly. She focused on data gathering to determine possibilities for subsequent decision making. Plugging the information into the CASVE model helped her decide on a career in marketing. After a series of informational interviews, she decided on graduate school as her next step.

CONCLUSION

These cases demonstrate how understanding the emotional stages of transition in combination with a cognitive model of decision making can facilitate constructive change for student-athletes who are faced with loss of athletic identity, status, and protected environment. This integrative transition model serves as a template for effective counseling interventions by examining the affective, cognitive, and behavioral domains that circumscribe the amelioration of distress, assessment of needs, generation of alternatives, identification of goals, and execution of plans for the student-athlete in transition.

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