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Practice Notes

Whenever the services of a clinical social worker are sought, both client and worker engage collaboratively in treatment in order for the client to reach their potential (Shaefor & Horejsi, 2015). Athletic coaches, from youth sports to the elite, college, or professional levels, provide the athlete the opportunity to succeed and realize their potential. This article will reflect on the recommendations of Gill (2008, 2014), Dean and Rowan (2014), Moore, (2016a, 2016b), Schyett, Dean, and Zeitlin (2016), to involve social workers in college and university athletic programs, and will seek to show that there are many natural similarities between coaching and clinical social work. The body of research and literature devoted to the similarities of clinical social work and athletic coaching is relatively small. While there are entire disciplines devoted to sports psychology and athletic coaching, the concept of "sports social work" is in its nascent stage. To assist in alleviating the paucity of research into the utility of social work in sports, The National Alliance of Social Work in Sports (NASWIS) was created in 2015 and promotes the roles and values of social work (advocacy, case management, clinical social work, policy practice) in all levels of athletic competition (NASWIS, 2017). NASWIS also maintains a reference library for researchers whose focus is to examine the role of social work in athletics.

A Framework for Shared Qualities of Clinical Social Workers and Coaches

The practice that coaches and social work clinicians conduct daily are similar in scope and application. Sheafor and Horesji (2015) stated that "A social worker's art is the application of his or her intuition, creativity and natural aptitudes and skills for helping people" (p. 30). Substitute the word "coach" for social worker and "athletes" for people and one might begin to imagine that coaching is closely linked to the work clinical social workers practice.

The underpinnings of clinical social work and coaching rely on a foundational base of knowledge, skills and attitudes (Hepworth, Rooney, Rooney, & Strom-Gottfried, 2013). Indeed, much has been written regarding the specialized skills and applied knowledge needed to be a competent social worker (Cournoyer, 2014; Hepworth et al., 2013; Shaefor & Horejsi, 2015), and an effective coach (Bennie & O'Connor, 2012; Gilbert, Nater, Siwik & Gallimore, 2010; Irvin, 1992; Jones & Kingston, 2013; Wooden, 1988). The foundation of specialized knowledge a seasoned clinical social worker, and an experienced coach possess, is but one of the keystones in realizing the potential of clients and student-athletes.

Knowledge

Familiarity and experience with a sport and wanting to teach potential athletes is the foundation for coaching (Buning & Thompson, 2015). Similarly, wanting to help people excel in their environment is the foundation for a career in social work (Cournoyer, 2014). Knowledge in coaching, like social work, is gained through experience, observation, application of learned material, attending clinics, obtaining advanced degrees in athletic administration, coaching or social work, and through practice. The late Bob Johnson, a long-time hockey coach at the University of Wisconsin and a Stanley Cup winning coach of the Pittsburgh Penguins, once told

this writer that "A good coach never stops learning…I learn something from every clinic I go to, no matter what the level" (B. Johnson, personal conversation, 1987). The National Association of Social Workers Code of Ethics (NASW, 2008) states, one of social work's six core values is competency, which refers to clinicians and workers developing knowledge of the most recent evidence-based methods. The same, successful coaches will constantly review, revise and adapt their practices and skills teaching to provide athletes with the highest possible level of instruction. Mike Keenan, long time NHL and Stanley Cup winning coach once said (Irvin, 1992):

> The thing you have to be for sure is a student for life so you continue to learn about the coaching profession on an ongoing basis. If you can't accept new ideas, if you can't accept change, then you're not going to be a very effective coach…You have to be flexible in your thinking. (p. 106)

Without constantly updating their practice or practices, both clinical social workers and coaches run the risk of repeating mistakes and providing ineffective service, teaching and skill development instruction. Staleness in athletics and clinical social work practice produces dissatisfaction with oneself, and the profession. Clients and athletes can see through the lack of preparation in coaching and clinical work.

Skills

Skills for successful coaches require a constant evaluation and assessment of the athlete's or the team's performance, and adjusting practices, strategies, and tactics. While working with a client, an effective social work clinician will review the client's progress and treatment plan, and help the client adjust or change their goals. Therapeutic strategies, to assist in goal achievement, may be modified or new ones introduced, much like a coach will add a more involved or difficult drill after developing a foundation skill for their athlete. Evaluation, whether in an athletic setting, or a social work practice, is an ongoing process (Cournoyer, 2014). When a clinician asks a client "How are you this week?" the assessment process continues. Coaches at all levels evaluate athlete's performances through daily analyses of practices and games (Wooden, 1988).

A coaches' job often involves informing the athletes of how to "read and react" to situations by connecting their views of the opponents' reactions to their own responses. Athlete's responses to an opponents' move could be considered "triggers" as well; "She's going to test your left side…when she does you'll have to…" (Hockey Canada, 1991; Raiola, 2014). Making unlikely connections will encourage the client or player, to consider how thinking unconventionally may help them adapt on the field or in life. Considering alternative perspectives allows one to "stretch their thinking", and perhaps consider a view that others have not, to reach their goals (Shaefor & Horejsi, 2015; Shero, 1975). Teaching clients how to make connections help them develop effective coping strategies to mitigate traumatic reactions.

Coaches motivate and inspire their athletes, in order for their players to reach higher, push the envelope, or go to those uncomfortable areas where success reigns (Wooden, 1988). Clinical social workers also motivate their clients to think of options, discover the untapped abilities, and nurture inherent skills. Motivation may well be the most important or critical skill for the coach or clinician to employ with their respective populations (Buning & Thompson, 2015; Sheafor & Horesji, 2015). Motivation may be an ethereal concept, as what works to instill

confidence in one athlete or client may actually stall the progress of another. Confidence in the ability to develop a skill leads to a person or athlete to feel competent (Cournoyer, 2014). Competence is developed through planning practices or interventions which allow clients or athletes to prepare, or drill and become confident in their skills (Cournoyer, 2014). While coaches create drills that simulate competitions or games, clinical social workers will craft scenarios in the office for the client to role play, and simulate human interactions. The confidence a player or client develops in such situations gives the coach or social worker the ability to motivate - to inform the athlete or client that they can replicate what they did in practice, or the office, when it counts (Cournoyer, 2014).

Creativity, in an athletic contest or in a human interaction, is best exhibited when one has an unfettered, unshackled, and uninhibited sense to produce the desired end (Barnett, 2012). Coaches who approach the skill development of athletes with an understanding that they will, at some point, make mistakes, empower the athlete to create, or evoke their best abilities. Coaches fail when they refuse to understand that people make errors (Wooden, 1988). An athlete's motivation can suffer, if they interact with a disproving, intolerant coach on a regular basis. The player who is empowered not to worry about errors will eventually feel more creative, competent and confident (Gould, 2016). The confidence to be free from the worry of making mistakes allows both the athlete and coach to concentrate on the present, not the anticipatory regret, of a contest's outcome (Tedesqui & Glynn, 2013). A successful coach seeks to limit errors, and have their athlete understand the origin of their mistakes, what they can do to learn from them, and to not be paralyzed by the potential of mistakes, while exhibiting a creativeness in their game. Clinical social workers often make mistakes with their clients (Felizzi, 2016; Hepworth et al., 2011). In an emotionally laden meeting with a client, mistakes may occur simply due to the emotionality within the session. Much like a coach who tries to teach athletes how to dissect their mistakes, the effective clinician will do the same, and seek to better understand the client's material and meaning (Hepworth et al., 2011).

Fred Shero, who won two Stanley Cups while coaching the Philadelphia Flyers, was nicknamed "Freddy the Fog". This moniker was applied to Shero because he appeared to be going through life in a constant state of deep thought, lost in the process of planning practice, thinking about game situations, or personnel moves (Shero, 1975). Total immersion, physically, emotionally and mentally in a practice or game allows the individual to absorb their environment and become a part of it (Felizzi, 2016). This does not mean that the social work clinician has violated boundaries with the client while becoming involved and attentive in the therapeutic process. The richness of the clinical alliance is evident as the social worker uses affective words, active listening and responds in a genuine manner to the client (Cournoyer, 2015; Hepworth et al., 2011; Sheafor & Horseji, 2015). Effective coaches are absorbed in the development of their athletes, and in essence, time genuinely seems to "fly" whenever a coach is involved in the process of running a practice or teaching a skill.

Attitudes

There's six seconds left in the game. You have one time out left. Your best scorer fouled out. You know the freshman who has played little this season is quick, has a fairly accurate shot and has done well in practice. Do you sub in the freshman, or depend on the upperclassman who, while not a great shooter, is generally cool in these situations? A daring attitude, as a coach, is often a double edged sword. However, if a coach is intimately aware of the skill level, and

mental awareness of his/her team, then is it daring? Similarly, a clinical social worker dares to address subjects with clients that may be difficult, emotional, taboo or painful. Allowing a client to simply come in to the office and vent often times leads to failure in treatment, since no change options are offered. Through the daring use of questioning and demand for work, the social worker supportively prods and encourages the client to address distressing material in a supportive environment (Sheafor & Horejsi, 2015).

The attitude of curiosity, about the clients' experiences, is the vessel social workers use in developing and empathic, and genuine responses. The questioning and desire to know enables the clinician to develop a relationship that is built on genuineness, and an authentic interest to support and help the client (Sheafor & Horejsi, 2015). An effective coach deconstructs his or her team frequently to satisfy their own curiosity as to whether or not there team is performing optimally. A coach asks about the players' health and their well-being, as a competent coach wants to be certain their players are secure and worry free (Shero, 1975; Wooden, 1988). Indeed, showing such curiosity can display a level of caring, never previously experienced by the athlete. Much like showing genuine, unconditional positive regard for a client, the displaying curiosity about a players' mental health can only strengthen the relationship between the player and the client to find that one button or switch that lights the inspirational flame (Wooden, 1988).

Conclusion

Social workers provide the majority of mental health services in the United States (NASW, 2017) and a National Collegiate Athletic Association (NCAA, 2017) reports recognized the need and awareness for the availability of increased mental health services in college athletics. Thus, the logical connection would be to consider a partnership between professional and clinical social workers and collegiate athletics. The similarities between college coaching and clinical social work in this paper are only a few of the examples where the two professions share perspectives or interact. Including social workers in collegiate athletic programs can be a symbiotic relationship. The instincts of helping, coaching and education are intertwined in many ways as discussed above. Allowing college athletes to access on site or available social work services can only enhance the development education, and growth of the college athlete. Further, utilizing organizations such as NASWIS to provide research resources and advocacy for social workers in sports is valuable and a critical vessel for the professions of coaching and athletic administration, along with social work, to continue and develop their collaborative efforts. There are most likely many, many more factors that could be presented and discussed regarding the similarities between the creative endeavors of artists, coaches and clinical social workers. The material presented here is but a few of those concepts that are found in all three endeavors. One constant in all of the above is the motivation of the social worker to help clients and the coach to develop athletes. Using a daring and curious approach can enhance the experience of all-client and social worker, athlete and coach.

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