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Many athletes, during the course of their careers as competitors, experience performance impairment caused by psychological factors. At such times, it is important that sport psychology consultants understand these issues in order to help athletes deal with them more effectively. Psychodynamic theory is one approach that can provide a basis for obtaining this knowledge. Previous articles on this subject have addressed individual case histories and treatment of psychopathology in athletes, or the benefits of a psychodynamic perspective in understanding behavior in sport, or described particular sports from a psychodynamic viewpoint (Apitsch, 1995; Begel, 1992; Beisser, 1967; Hanna, 1993; Perry & Sacks, 1981; Sachs & Buffone, 1984; Sacks, 1980, 1990). None of these articles, however, addressed how sport psychology consultants who are not clinically trained can use psychodynamic concepts to help athletes perform better. The article by Strean and Strean (1998) in this issue, in addressing this point, opens an important dialogue.

Concepts of Psychodynamic Theory

Strean and Strean’s (1998) description of the theoretical underpinnings for understanding normal development and personality is based predominantly on classical Freudian psychoanalytic theory. They summarize the essential concepts of psychodynamic or psychoanalytic theory as follows: Unconscious processes affect behavior; past history influences present functioning; all behavior has meaning; and defense mechanisms exist to handle conflict. These ideas imply that the children we once were remain active in the adults we are now. However, we must not equate the child’s wishes with those that we consciously recognize. Moreover, the existence of unconscious thought does not necessarily mean that it is the predominant motivating factor behind a particular behavior. (Sometimes, the wish to sleep after the alarm clock rings comes from physical fatigue and is a conscious choice for needed rest.) Furthermore, understanding how unconscious processes operate does not determine which intervention is most appropriate or effective (Giges, 1996a). In addition, by defining psychodynamic theory as both a theory and a

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form of therapeutic intervention, Strean and Strean create an ambiguity that may cause difficulty for practitioners who are not clinically trained.

**Sport Psychology Consultants**

How can psychodynamic concepts enhance the performance of sport psychology consultants? In their attempt to answer this question, Strean and Strean address treatment of athletes with obsession, phobia, depression, uncontrollable anger, or other symptoms. Although most of the clients are athletes, who can develop symptoms, the described treatment process is psychodynamic psychotherapy, and not sport psychology consultation. Furthermore, the section, Therapeutic Intervention, addresses techniques that are part of psychotherapy practice. For example, most sport psychology consultants would not consider “free association” a “fundamental rule.” The authors state, “For athletes to develop more confidence, they must first learn to enjoy their mental contents (i.e., free associations)” (p. 214). This is not a prerequisite to increased self-confidence. It can also come from developing new skills, mastering challenges, or attaining difficult goals, especially in sport.

What can sport psychology consultants who have not had training and supervised experience in psychotherapy be realistically expected to do with understanding gained from psychodynamic theory? How do such consultants analyze transference, interpret resistance, and assess ego strengths? Can these consultants be expected to make an interpretation, which the authors say “make the athlete aware of the unconscious meaning . . . or cause of a given psychic event” (p. 219)? Is digging out significant details from the past necessary or even desirable in addressing an athlete’s performance issues? These interventions are not just concepts or techniques, they are considerations that are integral to the complex process of psychotherapy. Such treatment is significantly different from sport psychology consulting (Giges, 1996b).

Strean and Strean state, “According to psychodynamic theory, professional assistants help clients see how and why they experience the helping person in a certain way” (p. 215). This would not apply to performance enhancement consulting. Further, “In psychodynamically oriented intervention, counselors primarily focus on how the athlete responds to questions, confrontations, clarifications, and interpretations, rather than on whether the content is correct” (p. 220). Is this appropriate for sport psychology consultants? Imagine a consultant giving an athlete incorrect information, then later trying to analyze why the athlete got upset when it led to negative consequences. Again, the authors describe how a psychodynamic therapist might work, without clearly distinguishing this from sport psychology consulting. Although the authors intended to demonstrate how concepts and treatment procedures from psychoanalysis can be adapted to sport psychology consulting, they do not clearly demonstrate how that can be done. In their conclusion, they acknowledge existing differences, but throughout the text these are never clearly identified. The authors have left that to the individual practitioner.

**Applying Psychodynamic Theory**

Psychodynamic theory can be useful to the sport psychology consultant by helping to explain behaviors that are significantly influenced by unconscious factors.