

Identifying Signs of Mental/Emotional Distress ...and next steps

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Action Plan

KNOWLEDGE & CONFIDENCE

- Recognize
- Reach out
 - How to start the conversation
- Refer
 - Necessary or not?
- Remain Supportive
 - Follow up even post referral
 - Continued practical and emotional support

Mindset & Meaningful Details

- The state of mind and emotional stability of an athlete impact performance
- Most common & concerning symptoms – depression, anxiety, bipolar, psychotic
- Prior diagnosis or condition?
- Grind of practices/games can serve as distraction – down time can involve nervousness, guilt, anxiety, anger, rumination
- Target athlete attitudes regarding mental health & help-seeking
 - Many athletes wait until breaking point to report

Potential Triggers

- Long-standing issues
- Team dynamics
 - Bullying: Peer(s) or coach!
- Issues specific to team & sport
- Injury
 - Is a loss
- Pressure
- Trauma or life-changing event
 - past or present
 - Isolated incident or prolonged circumstances
 - Live witness or via proximity (e.g., happened to family member)
- Domestic issues; SES
- Environment (personal past; present as relates to loved ones)

Symptoms of a Panic Attack

- Heart pounding
- Sweating
- Shaking
- Short of breath
- Choking sensation
- Chest pain or discomfort
- Nausea or abdominal distress
- Dizzy / light-headed
- Body temp fluctuations
- Numbness/tingling
- Detached from reality or oneself
- Fear of losing control/ "crazy"
- Fear of dying

*Abrupt surge of symptoms that peaks within minutes

Signs & Symptoms of Mental/Emotional Distress

- Sudden, drastic changes in personality
 - Withdrawal; social disengagement
 - Uncharacteristic, extreme mood swings
 - Paranoia, agitation, aggression, worthlessness, hopelessness*
 - Fatigue, insomnia, changes in appetite, lack of motivation (may seem lazy)
- Questionable judgment; irrational (concerning patterns of thinking)
- Attention & memory not as sharp; slow information processing
 - THIS is what you might see vs the emotional features
- Decrease in / lack of resilience (e.g., to coaching, perceived failure, training set-backs)
 - Excessive guilt/self-blame or blaming others (internalizing vs externalizing)

Potential Red Flags

- Slower reflexes - can seem like "heaviness," fatigue
- Restlessness – may appear jittery, nervous, impatient
- Irritability
- Acting out behavior
 - Argumentative, aggressive/violent, probs outside of team
 - Identifiable target? Plan?
- Increase in maladaptive coping mechanisms
 - E.g., drinking/substance abuse
 - = Lack of alternative coping skills

Potential Red Flags

- Bizarre thinking; delusions
- Seeing or hearing things
- Disorganized speech – no cohesive string of thoughts

**The above 3 signal concern even if just for a day*

- Lack of facial expression or engagement
- Shifts into excessive amounts of risky behavior(s) – e.g., spending, substances
- Impulsivity

No referral

- Contain
- Empathize
 - Narrate what you see
 - Reflect hear
- Collaborate
 - May incorporate friends/families into info gathering & athletic support system
- Provide contact info for support & give them option
 - shows nonjudgment & can empower them to take action -in their own time

Likely referral

- Assess for urgency
 - Nature of the symptoms
 - Nature of the trigger
 - History of self-harm, suicide attempts, violence?
 - Showing rage or seeking revenge – identifiable target?
- Consult
 - Among appointed staff
 - Mental health professional
- Call Crisis Line or 911 if immediate danger/concern...
 - If concern re suicidality – **ASK**
 - *Use the words* - it won't put idea in someone's head

A closer look at suicidality

- Thoughts about death/dying
- “Better off dead;” “burden” to others; wish to not wake up
- Irrational; incohesive; reckless/impulsive
- Past attempts (#1 predictor)
- Increased alcohol/drugs
- Lack of support system
- Social media posts

Suicidality cont.

- Feelings of isolation; unbearable pain; “trapped” - hopelessness
- Plan*
- Means* - currently have or actively looking (e.g., online; purchase firearm)

~ Athletes often reassure others they are fine

- “Mental toughness” can be prioritized over acknowledging pain & asking for help; perseverance over “weakness” (produces results in athletics!)

**Panic Attacks are related to more suicide attempts & suicidal thinking*

Review of the fine line – when to refer

Referral can wait

- Individual can describe his/her “story” in a cohesive manner (sequence of events, able to find words to articulate contributing factors, doesn’t get repeatedly overwhelmed by emotions)
- Individual able to function overall and in team/competitive settings
 - Based on observation & self-report
 - Can bounce back from athletic setbacks, roll with transitions

Refer for mental health services

- Mental/emotional distress is impairing ability to perform to capacity, relate with others, meet basic needs (e.g., eat, sleep, self-care)
- Individual seems to have developed a numbness to events, people, surroundings
- Engaging in self-destructive behavior
- Increasing # of off-the-field issues

Key take-aways...

- Emphasis on *whole person*
- Athlete is more than their sport
- Self-worth should not be determined by wins/losses

Thank you!