



# PARALELL TO PHYSICAL SYMPTOMS



## OBJECTIVE

There are clear protocols in sports for how to respond to a sprained ankle or a broken wrist. Just like physical injury, there are times you can play through a mental health condition. There are circumstantial mental health needs- an athlete may report an increase in anxiety or nervousness before a big game or match. Or, an athlete may have a chronic condition (e.g., anxiety, depression) and has strategies to deal with symptoms. Generally, an athlete can play through both of these situations.

## COACHES ROLE

It is critical to be overt about HOW the coaching staff will respond if mental health needs emerge. Athletes often report that they don't disclose their mental health needs because they are unsure how the coach/administration will respond. Will they be viewed as weak or less capable? Will they receive support? Clear steps release the burden of guessing what will happen for the athlete and alleviates pressure for the coach to determine how to respond.

## ACUTE SYMPTOMS

When there are more acute symptoms that impact an athletes ability to engage in play, such as an onset of suicidality or an increase in depression or anxiety symptoms, we recommend the following steps.

1. Ensure there is a designated person on the coaching staff who will be the first point of contact. This person should be able to talk through emotions and check in with the athlete regularly.
2. The athlete and the designated staff discuss how they will know the athlete needs more mental health support. How can the staff person best support the athlete?
3. The athlete and the designated staff work together to determine who else to include- a caregiver? Clinician? Team Doctor?
4. If/when the athlete develops more severe symptoms (or what was determined in step 2) the designated staff will reach out to who was identified in step 3 or refer to mental health emergency services.