time to change

let's end mental health discrimination

Mental Health Awareness in Sport

An introductory course for sports coaches



mind

For better mental health

rethink

RESOURCE PACK

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This resource pack is designed for sports coaches attending the Mental Health Awareness in Sport course, delivered by Time to Change.

Time to Change is a programme delivered by the leading mental health charities Mind and Rethink. It is England's biggest ever programme to challenge mental health stigma and discrimination.

For more information about Time to Change, visit our website: **www.time-to-change.org.uk, or join our Facebook group: www.facebook.com/timetochange**.

Facebook is the best way to keep up with developments and new opportunities in sport. We will also add you to our project email list to receive occasional updates about our work.

How to use this Resource Pack

The pack is divided into the same modules used in the course. It is intended as a reference book during and after your course. It contains additional information you might want to refer to later, adding detail to the content of your workbook.

The Football Association (FA) is a partner of Time to Change, and is supporting the programme's work in football. The training is not part of the FA's education programme. Neither the course nor this resource pack enable the reader to diagnose or treat mental health problems.

Sport and Mental Health - introduction

Where possible, people with mental health problems should have access to the same mainstream activities (in healthcare, employment, arts, culture – and sport) as anyone else. The Time to Change programme is working with partner organisations to help make mainstream sport more open and accessible to people with mental health problems.

People with mental health problems are significantly more likely than the general population to have physical health problems, and are much more likely to be unemployed than people with a physical disability. As a result, social exclusion can be a major issue. This can further damage mental health.

Sport has the power to help tackle this inequality. Physical activity is part of the best practice treatment of some mental health conditions – for example depression. Sports clubs can also provide a safe environment for social interaction – this can be vital in helping recovery from some mental health problems. Put simply, sport has the power to save lives through physical activity and social inclusion.

Some people with mental health problems may benefit from the provision of sporting activities specifically designed for them. You may be interested in two toolkits produced by Time to Change, aimed at people who might commission and deliver sports and mental health projects. Although the toolkits focus on football, they contain information that will be useful to other sports. These will be published soon on the Equality pages of the Football Association website.

What is mental health?

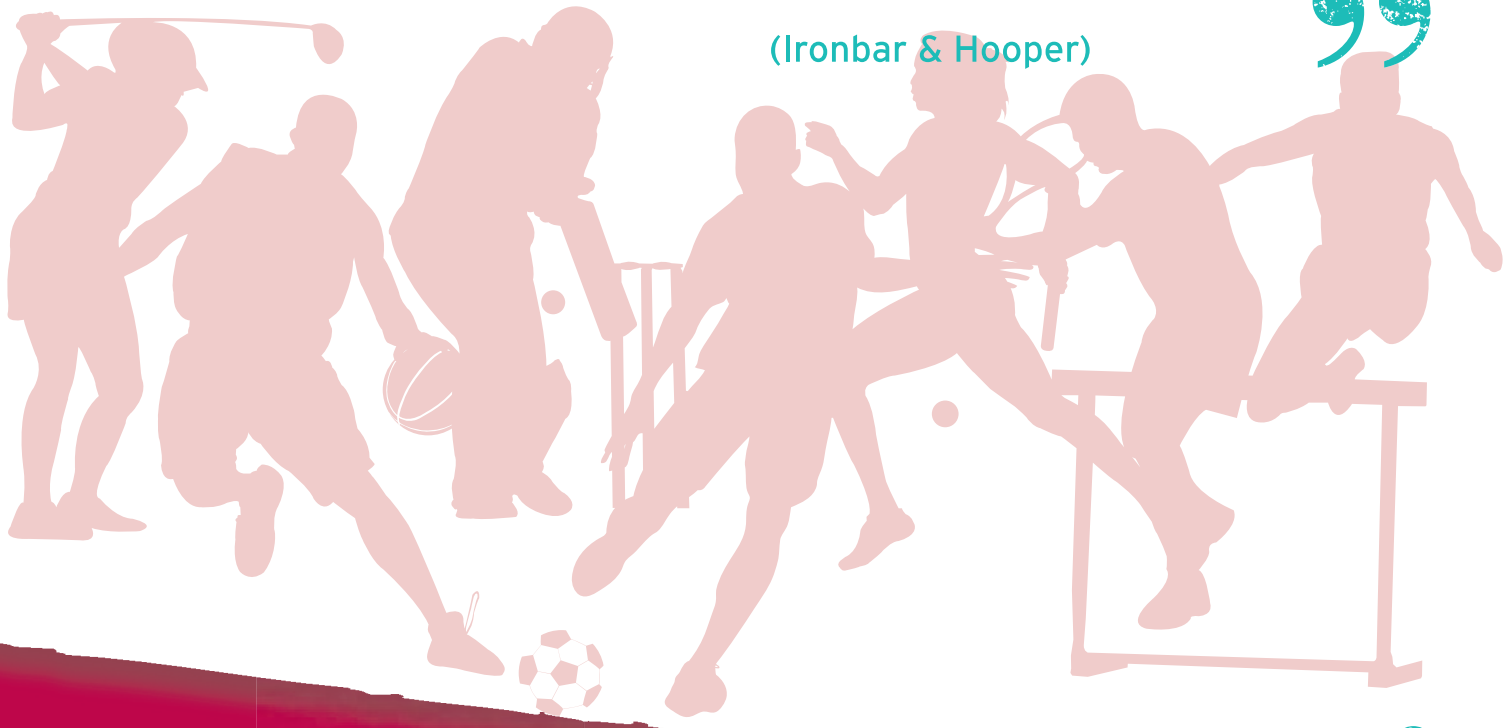
The phase "mental health" tends to be used in a negative way. But really mental health is a broad term that covers both healthy and unhealthy states.

It is necessary to think of a positive mental state as something which needs to be achieved and maintained. Each of us experiences change in our mental health state, but for most of us, for most of the time, our mental health state is a healthy one.

Part of having a healthy mental state is being able to cope with daily stresses and strains of life, or "resilience". Difficulties such as bereavement, problems in the workplace, with housing, the environment, social isolation, poverty or physical injury – particularly if the impact is over a prolonged period – may place your mental health under stress.

Our mental health is in a constant state of flux. It is ever changing, reflecting responses to the environment. It is intrinsically connected to our physical, emotional and social health.

(Ironbar & Hooper)



Common types of mental health problems



Mental health problems range from those that are mild and short term to those that are severe and long-term.

This is not an exhaustive list. **Use this information to recognise ill-health NOT to diagnose.**

Depression

Depression is a very common mental health problem. It can be relatively mild and short-lived, but for some people it is more severe and enduring.

A person who is clinically depressed will have multiple symptoms for a number of weeks.

People with major depression have severe symptoms and over a long period of time have 20 times the rate of suicide of any other group of people.

John Kirwan MBE is a legendary All Black winger, holding their record of 97 tries. He experienced depression as a player, and fronted the New Zealand version of the Time to Change campaign. He's made several TV commercials, explaining how he felt. These are available on YouTube, and are recommended viewing:

http://www.youtube.com/watch?v=39LU31RgFfA&feature=related
http://www.youtube.com/watch?v=cZ9yRhCiLfA
http://www.youtube.com/watch?v=GWg03By_was&NR=1

John Kirwan is now an international coach. He guided the Italian national team to record historic victories over Wales in 2003 and Scotland in 2004. He now manages Japan.

Serena Williams is the 2010 singles champion at Wimbledon, and in women's doubles at the French Open. Her 27 Grand Slam titles places her ninth on the all-time list. She is the most recent player, male or female, to have held all four Grand Slam singles titles simultaneously and only the fifth woman in history to do so. She has won two Olympic gold medals (women's doubles), and more Grand Slam titles in singles, women's doubles, and mixed doubles than any other active female player.

Serena has experienced depression; **"I definitely have not been happy. Especially when I had that second [foot] surgery, I was definitely depressed... I cried all the time."**

Anxiety disorder

Anxiety disorder is another common mental health problem.

Feeling anxious at times due to events or circumstances is a normal response and is designed to protect us from danger or imminent threat.

However some people experience anxiety when there is no apparent cause. For others the anxiety becomes so severe and pervasive that it interferes with their ability to maintain relationships with others, to hold down a job or do "normal" things like go shopping or eat meals.

Marcus Trescothick MBE is among England's finest post-war batsmen. He plays first-class cricket for Somerset County Cricket Club and represented England in 76 Test matches and 123 One Day Internationals. In 2005, Trescothick became the fastest player to reach 5,000 runs in Test cricket, and also achieved the notable feat of scoring over 1,000 Test runs in a calendar year for the third consecutive year. Trescothick was named as one of the five Wisden Cricketers of the Year for his achievements in 2005 and was awarded an MBE in 2006. He experienced anxiety, which led to depression, when touring internationally with England and subsequently Somerset. He explores the issues he faced in his outstanding autobiography "Coming Back to Me". Marcus is a champion of the Time to Change programme.







Obsessive compulsive disorder (OCD) and phobias

Both are forms of anxiety disorder.

England football legend **David Beckham** has stated that he has OCD:

"I've got this obsessive compulsive disorder where I have to have everything in a straight line or everything has to be in pairs. I'll put my Pepsi cans in the fridge and if there's one too many then I'll put it in another cupboard somewhere... I'll go into a hotel room and before I can relax, I have to move all the leaflets and all the books and put them in a drawer. Everything has to be perfect... I've tried and can't stop."

David Beckham OBE is one of the most prolific footballers in England. During his time at Manchester United, the club won the Premier League title six times, the FA Cup twice and the UEFA Champions League in 1999. He became England's all-time most-capped outfield player in 2009 when he passed Bobby Moore's total of 108. He won the 2001 BBC Sports Personality of the Year after his World Cup qualifying heroics and in 2010 received the Lifetime Achievement Award for his contribution to football.

It is worth noting that OCD can be mild or severe. What David describes - while no doubt interfering in his life - sounds fairly mild. OCD can be completely debilitating, destroying people's lives.

Bi-polar disorder (previously called manic depression)

Frank Bruno MBE was WBC world heavyweight champion in 1995. He became a professional boxer in 1982 and racked up a series of twenty-one consecutive wins by knockout. Altogether, he won 40 of his 45 contests.

Frank has also been diagnosed with bi-polar. He describes the pressure he felt while he was unwell:

> "It's like a kettle. If it's a kettle, you turn the kettle off, you know what I mean? I wish I could put a hole in my head and let the steam come out. The steam was getting so high and the pressure was getting too much for me."

Frank is a champion and spokesman for Time to Change.



Additional Symptoms and Stigma

Additional symptoms and "dual diagnosis"

Some mental health problems can be associated with other conditions or symptoms. When combined with drug or alcohol issues, it can be part of a "dual diagnosis".

Other symptoms can include:

- **Destructive behaviour**
- **Anger**
- **Low self esteem**
- **Self harming**
- **Addiction**

Paul McGrath won the PFA Player of the Year award in 1992-93, and was a Football League Cup winner with Aston Villa. He was widely regarded one of the greatest players in the side's history, and was nicknamed "God" by their fans. He was also a long standing player for the Republic of Ireland, playing in two World Cups. Paul experienced depression and alcoholism for many years, and is frank about both conditions in his autobiography.

Addictive illnesses, such as problems with alcohol, gambling, sex and drugs, are often found in conjunction with underlying mental health problems such as depression or anxiety. The use of alcohol or drugs to alleviate symptoms of mental health problems is sometimes called "self medication". In addition addiction can increase the risk of mental health problems. Addiction issues can impact people from all backgrounds and from all walks of life.

Middle distance runner and double Olympic gold medallist Dame **Kelly Holmes** DBE, MBE won the gold medals for 800 metres and 1500 metres events at the 2004 Summer Olympics in Athens. She still holds the British records for the 600, 800, 1000 and 1500 distances.

Kelly suffered mental health problems following an injury. In her case it was combined with self-harming; **"I became depressed and I cut myself with scissors. You feel you can't get out of a cycle of crying, feeling like the world's ended and that there's nothing positive to strive for"**.

The impact of stigma, and how sport can help

Making friends, holding down a job, keeping fit, staying healthy... these are all normal everyday parts of life. But the stigma that surrounds mental illness makes all these things harder for people who have mental health problems.

Despite attitudes about sexuality, ethnicity and other similar issues improving, and despite some improvements since the launch of Time to Change, discrimination against people with mental health problems is still widespread.

Time to Change carried out a large survey at the start of the programme; "Stigma Shout". We surveyed almost 4,000 people with direct experience of mental health problems. We then took those findings into workshops with over 100 people where we explored the issues in more depth.

Some of the key findings include:

- Nearly nine out of 10 people (87%) reported the negative impact of stigma and discrimination on their lives
- Two thirds of respondents said they had stopped doing things because of stigma and discrimination
- Two thirds said they had stopped doing things because of the fear of stigma and discrimination.

Some of the main areas of life that both service users and carers said were affected by stigma:

- Being able to join groups and take part in activities within the community
- Feeling the confidence to go out and about - to the shops, down the pub
- Ability to openly disclose mental health issues
- Employment
- Building new and retaining existing friendships
- Ability to challenge professionals, be heard by professionals or make changes to treatment.

Many people say that being discriminated against in work and social situations can be a bigger burden than the illness itself. The way family, friends, neighbours and colleagues behave can have a massive impact on the lives of people with mental health problems.

Sport can play a huge role in tackling stigma and its effects:

- In breaking down boundaries between people with and without mental health problems
- In creating social integration and boosting self-confidence
- In tackling physical health inequalities.







Links between Mental and Physical Health

People with mental health problems often have significant physical symptoms, caused by the problem or the medication designed to treat it. Often social isolation also results from mental health problems – this isolation can make the mental health problems worse.

There are clear mental health benefits derived from physical activity:

> Physical activity is effective in the treatment of clinical depression and can be as successful as psychotherapy or medication, particularly in the long term.
>
> Chief Medical Officer, 2004

> Comparative studies have demonstrated that exercise can be as effective as medication or psychotherapy.
>
> Mental Health Foundation on depression, 2010

> Patients of all ages should be advised of the benefits of following a structured and supervised exercise programme.
>
> National Institute for Clinical Excellence (NICE) on depression

Guidance for dealing with people with mental health problems in a coaching / sporting context

Your course should provide you with much of the background information that you need. These pages are intended to provide additional tips and guidance you can refer to at a later date.

Don't hesitate to seek additional information (for example about a particular diagnosis, or the effects of a specific medication) if you think that might be useful. Some sources of information are contained at the back of this workbook.

Not all of the suggestions below will be applicable for everyone, and people's requirements may change over time. **The most important thing a coach can do is communicate with athletes to ascertain what works for them - if in doubt ask!**

Communication tips

It's good to talk! Getting things out in the open can hugely help people with mental health problems. Not everyone with mental health problems will be comfortable in discussing it, and you should respect their views. **But if they're happy to talk about it, you should be open to discussing mental health, in the same way you would a cruciate injury or an Achilles tear.**

Language can be tricky – some people will be happy to refer to their depression or schizophrenia. Others may just talk about a period of being "unwell". **It's best to find out what people call their problem and use their language.**

People with mental health problems may be more sensitive to criticism. Coaches may chose be robust and assertive when dealing with under- performance or poor technique - this is less likely to be appropriate when dealing with athletes with mental health problems.

Be aware of your own feelings and seek support if needed. Fellow coaches, your governing body or coaching organisations may be able to provide advice. The organisations listed below will be happy to provide you with additional support. There is lots of help available if required.



Making training / practice inclusive

Coaches should use their expertise to adopt training sessions and games where appropriate. This is something that coaches should be confident in doing – activities will routinely be changed for someone carrying an injury, beginners or younger / older participants. Coaches should be happy to make allowances for athletes' mental health, in order to allow them to participate and access sport, exactly as they would a physical health condition or disability. **Coaches don't need to be experts in mental health to help people**.

Appropriate actions / dispensations may depend on the athlete, their health situation at any particular time, and how open they are willing to be about their diagnosis with the rest of the team or club.

The implications of side effects (either of mental health problems or medication) will differ between sports and situations. For example, the shaking that is associated with some anti-psychotic medication may not be a significant hindrance to a rugby forward entering a ruck. It's likely to be a much larger problem for a golfer about to take a tricky putt, or snooker player lining up a long pot.

For less severe and enduring problems (such as depression and anxiety), athletes may need minor amendments to enable them to participate, such as **reassurance about the skill level required, or assistance with transport** – particularly when getting to new places. Public transport can be particularly stressful. These amendments may lessen as symptoms hopefully recede over time.

Be prepared to **provide alternatives for athletes who are not comfortable within team or group situations** and exercises – such as individual skill tests.

Some anti-psychotic medications increase the skin's sensitivity to sunlight – when training outside **it can be useful to remind players to use sun cream**, or even for the club to provide it.

Making attendance easy

Coaches should introduce themselves to anyone new. Make other athletes aware that someone new is present so they can do the same. Don't assume that athletes will have the confidence to introduce themselves or start a conversation.

Make sure athletes with mental health problems know that if they are in a 'bad space' they can just come along and 'be' in the group if that helps them.

Some medications can cause lethargy. In addition many mental health problems cause sleep disruption. **Starting sessions in the afternoon, or at 11am at the earliest, can make attendance much easier**. Other side effects, such as shaking, may also be improved later in the day.

Keeping training times, days and venues consistent can be a significant help. Attendance often takes a tremendous effort for athletes with mental health problems. If they arrive to find a cancelled or rescheduled session it can have a significant impact. Consider making a special effort to contact athletes with mental health problems following a change in sessions, particularly if this is to a new venue. Could assistance with transport be useful? You shouldn't provide more assistance than is needed, and it can be a tricky balancing act between providing the support required to enable participation, and doing too much.

How to handle illness during training / competition

Hopefully, this won't be experienced. However, it's important that you're prepared just in case.

Where appropriate, **athletes can let the group know in advance what support they might need in a crisis or when distressed**. Prepare procedures to cover illness during sessions, including who to contact (next of kin).

Appoint deputies (assistant coaches / senior players) and let them know how to access kit, keys, petty cash, paperwork etc so the session can carry on if someone becomes unwell and you need to leave the session for a while.

Additional signposting and support

These organisations and websites can provide additional information and support:

Mental Health First Aid

Website of English Mental Health First Aid programme, news, updates, useful information and more.

www.mentalhealthfirstaid.csip.org.uk

Department of Health / NHS

This site provides news pages, links to policy documents and search facilities on health and social care general topics: www.dh.gov.uk

The NHS Direct website has useful web pages containing information about all aspects of health: www.nhsdirect.nhs.uk

Samaritans

Samaritans provides confidential, non-judgemental emotional support, 24 hours a day for people who are experiencing feelings of distress or despair, including those which could lead to suicide

www.samaritans.org
jo@samaritans.org
08457 90 90 90
Chris, PO Box 9090, Stirling, FK8 2SA

Mind and Rethink

The mental health charities who run the Time to Change campaign have a wealth of information and resources about mental health issues. There are also local branches of Mind and Rethink. The service that these branches provide varies, but there is likely to be a branch near you that will offer some support or information.

www.mind.org.uk
www.rethink.org
Mind Infoline: 0300 123 3393
or info@mind.org.uk

SANE

SANE provides practical help to improve quality of life for people affected by mental illness.

www.sane.org.uk
Helpline: 0845 767 8000

DRUGS AND ALCOHOL

Alcohol Concern

The national agency on alcohol misuse – information on alcohol misuse.

www.alcoholconcern.org.uk
020 7928 7377
Waterbridge House
32–36 Loman Street
London SE1 QEE

FRANK

Drugs information site aimed at young people, with an extensive database of commonly misused substances.

www.talktofrank.com

SUPPORT FOR CARERS

Carers Direct

Information, advice and support for carers

www.nhs.uk/carersdirect
0808 802 0202

Princess Royal Trust for Carers

www.carers.org
www.youngcarers.net



Thank you

Time to Change would like to thank the following organisations for their assistance with the preparation and delivery of the Mental Health Awareness in Sport courses:

- The Football Association
- Maggi Rose Training Limited
- Mind Workplace
- Arsenal in the Community
- Avon and Wiltshire Mental Health Partnership NHS Trust
- Blackburn Rovers Community Trust
- Bolton Wanderers Community Trust
- Charlton Athletic Community Trust
- Chelsea Foundation
- Everton in the Community
- Gloucestershire County FA
- Huddersfield Town Football Club
- Hull City Sport & Education Trust
- Liverpool FC
- Manchester City in the Community
- Manchester United Foundation
- Pompey Sports and Education Foundation
- QPR in the Community Trust
- West Ham United Community Sports Trust
- Wigan Athletic Community Trust
- Wolves Community Trust

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