

# ISSP Quarterly Newsletter January 2022

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# Q&A with NFL Linebacker AJ Klein

By: Austin Kayser, MS4, University of Wisconsin School of Medicine and Public Health

As a 4th year medical student at the University of Wisconsin-Madison School of Medicine and Public Health, I had the opportunity to sit down and talk with NFL linebacker AJ Klein of the Buffalo Bills. We talk about mental health in the NFL, stigma, recent high-profile cases of athletes sitting out for mental health reasons, and the value of therapy, amongst other topics.

# Talking about mental health can be challenging for athletes and non-athletes alike. What made you want to sit down and talk about this?

There are these recent current events of high-profile athletes stepping away or being open about mental health struggles – Michael Phelps' documentary The Weight of Gold, Simone Byles, Naomi Osaka and Hayden Hurst sharing his story. People are starting to realize that athletes are humans too and that we have some of the same struggles that everyone has.

In the NFL you see the tragedies of mental health. Every year there are incidents that maybe wouldn't have happened if guys felt comfortable talking about their emotions and feelings. Guys are getting assault charges. There's DUIs and addiction. How much of that stems from mental health and how much of it is just mistakes, I don't know. But I think much of it stems from things they are going through that no one really knows about.

# Do you have any fears or reservations talking about mental health as an NFL player who is in the public light?



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No, not really. This past year was hell for me. And not only this past year; I've been through traumatic events since I've been in the NFL that have affected not only who I am as a person but also my play on the field. I don't have any reservations, though, because if anything positive can be taken from my story that's great. I lose nothing by being open and want to be someone who can share my experiences.

# The NFL has said that they are committed to prioritizing and destigmatizing mental health. What stigma do you think still exists in the league and how is that changing?

The hardest part is that stigma that we always have these "big tough, manly men". For as long as I have been playing the game its been, "Toughen up. Don't cry. Get up and dust yourself off". Struggling with mental health can be perceived by some as a sign of weakness. You worry that people might wonder, "Can this guy still perform on gamedays?".

With all of this stigma we internalize an idea that we shouldn't care about our mental health. We don't address things but rather just continually stick them in our back pockets. The next thing you know, you're carrying a bag of bricks in your back pocket that is dragging you down. Whether it's personal challenges, relationship issues or prior trauma, we put all that on the backburner because we're more worried about doing our job than we are about our own well-being.

There is nothing wrong with being vulnerable. I think it is more manly to show your emotions instead of always trying to be stoic. It shows realness and authenticity. It shows courage and strength. It shows that you are human.

# What about the perception from the public?

That can be hard too. Even some of the negative responses we saw to Simone Byles pulling out of the Olympics was disappointing. I get that the Olympics mean a lot to people but at the end of the day she is human.

Some fans often don't see us that way. They see us as performers who only have entertainment value and are just commodities that might mess up their fantasy football teams. Even if fans knew some of the personal struggles that are discussed in house or with our sports psychiatrists, I still think there would be some in the public who would react negatively. They say things like, "Oh that guy is a wuss. How could he possibly have that much money and still be sad? I guess that's why he's been dropping so many balls lately". People still react much differently if you sit out a game because of a mental health injury compared to if it were a leg injury.

It's interesting the way we often divide the body and mind as if they are separate things. We tend to view physical injuries as being worthy of rehabilitation and attention while mental health injuries are thought to be a person's moral failure and own responsibility to 'get themselves together".

Exactly. A mental health injury doesn't show up on a CAT scan or MRI. There is no cast for depression or wheelchair for anxiety.

# Talk about your own experiences with mental health during your time in the NFL.

One of my biggest challenges was during the offseason after we lost the Super Bowl in 2015 with the Carolina Panthers. The highs of that season were met with some of the most devastating lows that I've ever experienced. The loss was bad enough, but I was also having some significant relationship struggles. On top of that my dad was diagnosed with cancer and I felt like I was too far away from family to know how he was doing with treatment.

My body hurt. I felt depressed as all hell and sunk into a really dark place. My thoughts were off and I was irritable and angry. I wasn't a fun person to be around. I'm not sure I quite got to thinking about suicide but there was definitely a time when I was thinking "What am I even worth anymore? Why do I play football?". But I didn't talk about these things with anyone, I just kept stuffing them in my back pocket. It was hard because at times I felt like I was being selfish thinking about how I was doing while my dad was going through cancer treatment. But at the same time, I didn't feel like I had anyone checking in with me about how I was doing. This past year was also tough for me. I showed up to camp at a weight that I hadn't been at since high school because I hadn't been eating or sleeping. My body was physically reacting to all of the stress and anxiety I was experiencing.

I'm curious about this idea of putting things in our back pockets until they get too big. In a high-intensity career like professional sports, does that sometimes function as a double-edge sword – distracting from the struggles in a good way but also meaning things might not get addressed?

For sure. I used football as a distraction. There were times during that Super Bowl run that were awesome and so in many ways it worked as a distraction. But distracting myself completely from my mental health wasn't what I needed.

### How were you able to cope with these situations?

Its tough because we're used to overcoming physical adversity. We play through pain. When I had surgeries on my groin and shoulder I was always on a path to rehabilitation and getting better. With mental health there is this sense that "I should just get over this myself".

After the Super Bowl loss, I don't remember anything specifically I did to get myself out of feeling like that. I didn't have football as a distraction. I just kind of hit this rock bottom and waited until I could start training again for the upcoming season. I've realized now that if I'm not actively working on something I don't function well. I need a goal set in front of me.

When I was in my darkest spots it was mostly trying to be around friends. Not the kind of people who when you go home only want to talk about football. But those friends who know there is more to me as a human being than the fact that I play football for a living. Those friends who know that's not what defines me as an individual.

This past year, only my linebackers coach, head coach and general manager knew what I was going through. It was scary to break down in tears in front of them about how things were affecting me emotionally and physically. Fortunately, they reacted in a way where they told me to take care of myself and my family and that they were there for there for me in whatever way I needed. I am very grateful for that because I'm not so sure other places around the league would have reacted the same way.

### What role has therapy played in your life?

I spent more time on the phone with my therapist than I probably ever will again this last year. It helped to de-clutter and calm my mind. I have supportive friends and family, but sometimes it really helps to hear things from a professional who is this objective, third-party who doesn't have any skin in the game other than helping me. I was getting bombarded with football expectations, relationship problems and other stress. My therapist helped me realize how much I was holding in that I just needed to get out. And once I got those things out, not only did I feel a release mentally but even physically. I always slept the best after talking with my therapist.

### What resources are available to NFL players regarding mental health?

Recently the NFL made changes to require a licensed mental health professional on every team. Through the NFL Players Association we have mental health counseling that players and their family can use. There's also this app we have that has a whole section on mental health; tools for improving mental health, stories from guys around the league, and information on things like diet, sleep, and stress.

### What resources or support do you think would be helpful for NFL players?

I recently listened to former NFL player Brandon Marshall's podcast, 'I am Athlete'. There's an episode about the importance of checking in with teammates to make sure they are alright. You'd like to see more of things like that. Small groups where we could sit down for 15 minutes and talk about this stuff. You don't always know what's going on in your teammates lives and being able to get that off our chests and address those things would be great.

The hard part would be getting buy-in from the players for something like that. The moment something is mandatory in an NFL locker room, nobody cares about it. It would have to be an unforced, safe environment for guys to be able to share like that.

# What are your hopes for the conversation around mental health in the NFL moving forward?

The league's reaction but even more so the players' reaction to Hayden Hurst's story was really encouraging. I hope that sets a good trend moving forward. Exactly like Hayden did, this conversation must be player driven. We can't wait for the NFL to take the lead on mental health because they aren't going to unless we push for it.

Moving forward I hope we can rally around and support guys who share their stories about what it's like to struggle with mental health as NFL players. That vulnerability and courage, like we talked about earlier, creates an environment where more guys can come forward.

Other NFL players know we are human. We know that. But we want fans to know that too. Sharing our stories helps them see us in that vulnerable light where they can recognize that we are humans struggling and overcoming the same mental health challenges that we all face.

# Reflections as a Collegiate Rower Entering Psychiatry

By: Fan-Jean Lui, MS4, University of Wisconsin School of Medicine and Public Health

I participated in Division III Women's rowing when I was in college. With no prior rowing experience, I joined the team my freshman year as a novice rower. I left the team at the end of my sophomore year, then rejoined in the last semester of my senior year. I loved being on the water and the feeling of synchronizing my moves with my boatmates to achieve a common goal. However, being a collegiate rower also came with its own challenges. Now I am a fourth-year medical student going into psychiatry. After taking an elective on sports psychiatry, I gained more insight into my experience as a collegiate rower and the personal hurdles I had to overcome.

Traditionally, rowers practice in the early mornings before the break of dawn. For six days a week, I would wake up at 5 am, and then gather at a central location on campus to carpool to the boat house near campus by 5:30 am. The practice would end at 8 am, with barely enough time for me to shower, change, grab breakfast, and gather my bag for my 8:30 am science classes. In addition to morning practices, we had afternoon exercises and weekend races. Rowing was also a year-round obligation, so we would have a full practice schedule for most of the academic year. There were many mornings when I didn't feel well enough to go to practice. However, I would force myself to go because my absence would mean the boat wouldn't be full and my boatmates would not be able to practice on the water.

Collegiate rowing can be very stress-induing. Competition within the sport was fierce, even being in "just" Division III. While we bonded as teammates and shared countless hours together through grueling drills, we were also each other's competition as our boating and seating assignments were tied to our performance in practice. Those positions changed frequently, and every change was a marker on how we were doing relative to our teammates at the time. Our 2000-meter erg times and our weight were posted on the wall of the erg room to be seen by everyone. We couldn't help but compare ourselves against each other constantly.

Many rowers take pride in their mental and physical toughness. We would brag about our morning routines and show up to classes in our rowing jacket like it was our badge of honor. However, that pride was also a double-edged



sword. By the end of my sophomore year, I was struggling with my classes and feeling fatigued and irritable. I attributed my symptoms as being too faint-hearted for the sport and I just didn't have what it would take to excel. When I realized I wasn't as "tough" as I thought a rower should be, my pride turned into shame and eroded my confidence.

After finishing the final race of my sophomore year during finals week, I decided to take a break from rowing. When I mustered up the courage to have a conversation with my coach about my desire to leave, she just nodded knowingly and told me that I could come back anytime if I were to change my mind. I thought her nod could be from her acknowledging my suffering or be from her own experience of seeing so many rowers burning out in the end. Indeed, rowing is one of the sports with a relatively high risk of depression coming just behind track and field and cheerleading.<sup>1</sup>

Despite the high prevalence of depression among rowers and other athletes alike, wellness was never prioritized when I was on the team. Athletes have unique challenges and a stressful, competitive lifestyle that can lead to new mental health struggles. However, collegiate athletes are less likely to seek mental health care compared to non-athlete peers. Lack of mental health literacy, busy schedules, and a perceived public and personal stigma all contribute to the reluctance of seeking mental health treatment.<sup>1</sup> These were also the same reasons why I didn't think to seek mental health support during my sophomore year.

Quitting rowing was the key to improving my mental health at the time, but it was a very difficult decision to make. I felt like a major part of my identity was ripped away as I no longer could call myself a collegiate athlete. It took a few months to finally feel at peace with my decision. On one fall evening during my junior year, I had a sudden realization of how much better I was feeling. It felt as if a heavy weight was lifted off my shoulders and the fogginess of my surroundings finally cleared. While I lamented the loss of my role as an athlete, I learned that my mental wellbeing was worth so much more.

For the next year and a half, I continued to have a busy schedule juggling academics, research, and other extracurriculars. It wasn't until the spring semester of my senior when I learned about my school's free counseling service. Therapy taught me to put more focus on personal wellness and utilize strategies to manage my schedule more effectively. I also realized how much I missed rowing and the team camaraderie. I rejoined the team during the last semester of my senior year and focused on enjoying the sport instead of getting caught in the competitive aspect of it. Rowing's routine and team community enriched my life and gave me a newfound confidence towards the end of my college career.

Fan-Jean Liu is fourth year a medical student at University of Wisconsin School of Medicine and Public Health

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#### **ISSP Education Committee Update**

By: Claudia Reardon, MD, Committee Chair (clreardon@wisc.edu)

A word on history: In May 2018, the International Society for Sports Psychiatry (ISSP) released its portable, didactic sports psychiatry curriculum. It was developed by members of the ISSP Education Committee and designed for use by trainees across many levels looking for additional educational opportunities in sports psychiatry. Thereafter, several ISSP members who are practicing psychiatrists asked about the possibility of completing the curriculum in order to obtain a certificate in acknowledgement of additional training in sports psychiatry. The ISSP Education Committee thus explored this possibility, and as of February 2019, the ISSP has been offering a program for obtaining a "Certificate of Additional Training in Sports Psychiatry" centered around the curriculum developed in 2018 (and updated in 2020). *Status of the program*: Since its inception, the ISSP has awarded 48 Certificates of Additional Training in Sports Psychiatry.

*What you can do*: If you are interested in completing the curriculum and/or applying for a Certificate of Additional Training in Sports Psychiatry, check out these websites:

- Curriculum: https://www.sportspsychiatry.org/Curriculum
- Certificate: <a href="https://www.sportspsychiatry.org/page-18106">https://www.sportspsychiatry.org/page-18106</a>

If you are a highly experienced sports psychiatrist interested in obtaining a Certificate, you may be eligible for our "Experienced Sports Psychiatrist Certification Program", in which you may receive the Certificate without undertaking the detailed training otherwise required. Among the other requirements for this pathway, the professional experience requirement is as follows: ten years or more of extensive clinical experience with at least 20% of full time (i.e., one workday per week) on average dedicated to the care of athletes, coaches, and/or teams. Less than ten years of total experience is acceptable as long as the total sports experience adds up to or exceeds two full years (i.e., 25% time over 8 years, 33% time over six years, 50% time over 4 years, etc.). Email Dr. Reardon for further information if interested.

# **Outreach Committee & Membership Committee**

Chairs: Cindy Miller Aron, LCSW, Dr. David Harel (Outreach) and Dr. Vuong Vu (Membership)

The Outreach and Membership committees have been actively involved in looking at ways to expand the ISSP's presence in the world of athletics and have begun talks regarding future partnerships. Eric Morse is in conversation with JCSMS (Joint Commission on Sports Medicine and Science, Carla and I had a promising initial conversation with Carly Day who is the organizational liaison for AMSSM (American Medical Society of Sports Medicine) and Cindy had a promising initial conversation with Jamie Houle, Organizational liaison for CCSPA (Clinical and Counseling Sports Psychology Association).

We will be following up with all of these in early 2022 to hopefully get actionable items.

# **Scientific Committee**

Chair: Dr. Alan Currie

### Scientific symposia

The ISSP Scientific Committee aims to organize scientific symposia twice per year with short presentations of around 5-6 items of new research. These are an opportunity for new researchers to showcase their work, perhaps in anticipation of publication. For 2022 it is intended to supplement these sessions with updates on specific topics conducted by experts in those areas. These topics are still being discussed so if you have an idea and some speakers in mind then do let us know.

#### **Recommended reading**

For 2022 it is proposed to begin assembling reading lists on specific topics (e.g., depression, ADHD, eating disorders, sleep). These would be of past and current, articles, books, editorials, recorded webinars and conferences, and other scientific and educational offerings. The lists would be held by the committee, available to members and updated every 12-18 months. If you have an idea for a topic and are willing to help develop and maintain these resources, then please get in touch.

#### Athlete mental health: future directions

Finally, if you are interested in sport psychiatry research then you might like to read this recent article which summarizes the key areas where knowledge is lacking, and the search evidence is relatively weak. It might help you to focus your ideas and develop your projects. Currie, A., Blauwet, C., Bindra, A., Budgett, R., Campriani, N., Hainline, B., ... Reardon, C. L. (2021). Athlete mental health: future directions. British Journal of Sports Medicine, 55, 1243–1244. https://doi.org/10.1136/bjsports-2021-104443



# **Message from the Communications Committee**

The Communications Committee seeks to communicate to members, potential members, and the athletic community to help establish the sub-field of sports psychiatry as a sub-specialty. The main function of the Communications Committee is to create that web of connection and outreach that helps spread the word about ISSP's activities, future projects, helps manage social media, the ISSP website, and provide an avenue and platform for members wishing to disseminate information.

Interested in getting involved and want to contribute to the quarterly newsletter? Please email Ryan Benoy at <u>rbenoy10@gmail.com</u>. We are looking for committed members to share their experience and expertise with the ISSP community. The mission of the newsletter is to provide an outlet for our members to share their knowledge and insights in the field, provide commentary on current events and trends in the world of sports psychiatry, and to create a stronger sense of connection among our members. Please consider sharing your passion with us! Ideas for future issues of this newsletter include member spotlights, reviews of recent academic research that may be important to the field of sports psychiatry, your perspective as a sports psychiatrist on a recent athletic event, or your approach to treating athletes in your office.

Stay connected! Please follow our Facebook, Instagram, and Twitter accounts to keep up to date on current events in the world of sports psychiatry. Our goal is to provide value to our members and entice new members to join by increasing traffic on our social media channels.

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