Suicide and Mental Health Emergencies

What Staff Should Know

Mental health emergencies are common, and suicide is the second-leading cause of death among people ages 15-24 in the U.S. However, research suggests that participation in NCAA sports may be a protective factor for mental health. Understanding the signs of mental health emergencies can help you recognize and support student-athletes experiencing a mental health emergency. **By creating a supportive environment, you can help student-athletes know they're not alone and support them before a crisis occurs.**

WHAT ARE SUICIDE AND MENTAL HEALTH EMERGENCIES?

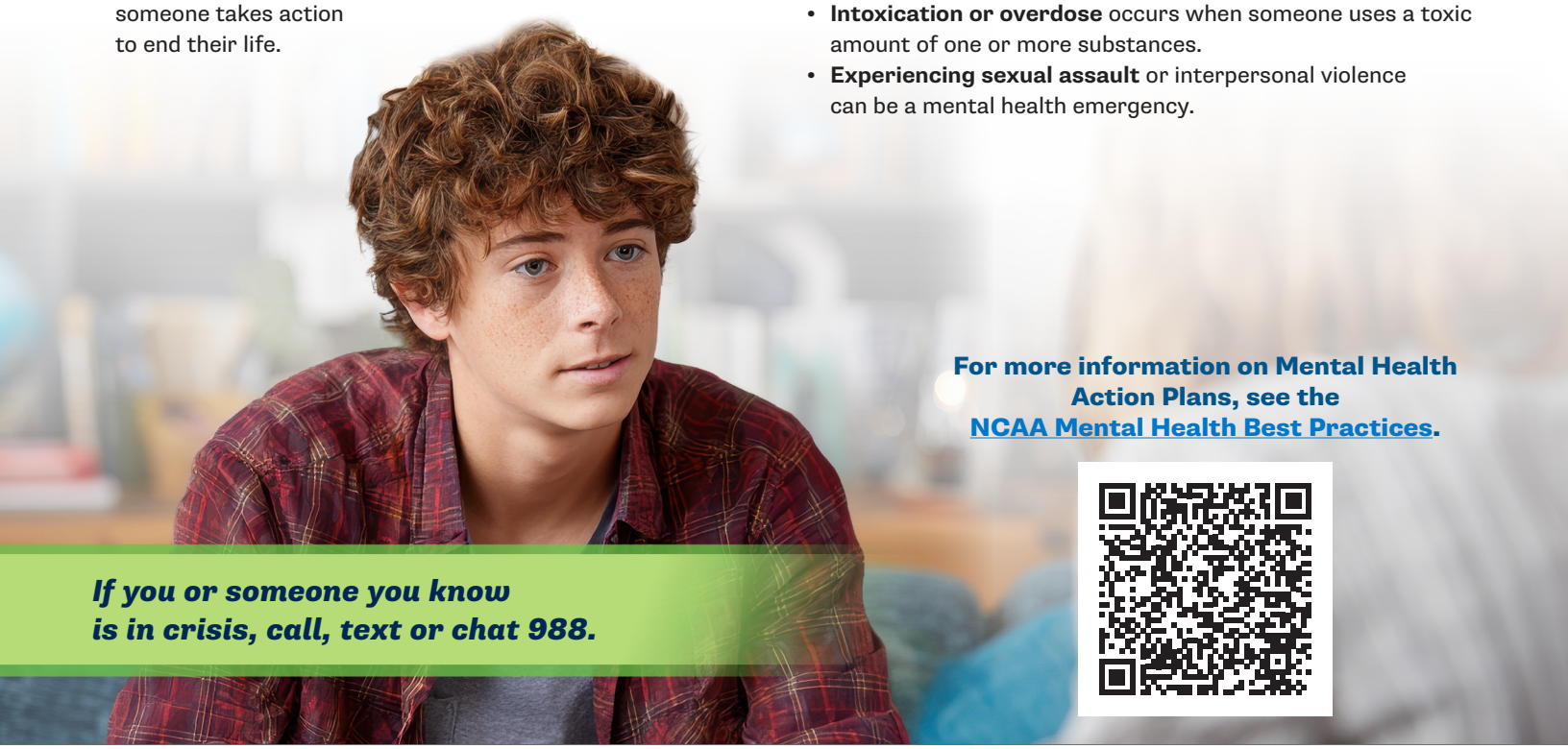
Mental health emergencies can include a wide range of experiences. Understanding different presentations of mental health emergencies can help you recognize when a student-athlete may be experiencing a crisis so you can help connect them with professional support.

Suicidal Behaviors

- **Self-harm nonsuicidal self-injury** occurs when someone deliberately injures or harms themself, without the intent to die, to cope with emotional pain.
- **Suicidal thoughts (suicidal ideation)** are thoughts about wanting to die. Suicidal thoughts may be passive, such as someone thinking others would be better off without them, or active, such as thinking or planning ways to die by suicide. Suicidal thoughts may be fleeting or persistent.
- **Suicide attempts** occur when someone takes action to end their life.

Other Mental Health Emergencies

- **Psychosis** is a mental state where someone has significant difficulty telling the difference between what is real and what is not. Examples may include hearing voices or seeing things that aren't there, or holding false beliefs that others don't believe, such as feeling as though their thoughts are being controlled by someone else.
- **Violent thoughts (homicidal ideation)** occur when someone has thoughts about harming someone else, which may range from fleeting thoughts to detailed plans.
- **Intoxication or overdose** occurs when someone uses a toxic amount of one or more substances.
- **Experiencing sexual assault** or interpersonal violence can be a mental health emergency.



If you or someone you know is in crisis, call, text or chat 988.

For more information on Mental Health Action Plans, see the NCAA Mental Health Best Practices.

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Recognizing the Signs

- Withdrawing from teammates, coaches, friends or family.
- Loss of interest in activities or sports.
- Talking about feeling "done" or believing they are a burden.
- Questioning why anything matters.
- Seeking to obtain firearms or controlled substances without explanation.
- Giving away possessions or saying goodbye to people.
- Talking about wanting to hurt someone.
- Seeming unusually aggressive or paranoid.
- Talking about hearing voices or seeing things that others don't.
- Seeming out of touch with reality.
- Difficulty remaining conscious or being nonresponsive.
- Vomiting or seizures.
- Unexplained cuts, burns, bruises or scratches (often on wrists, arms, thighs or torso).
- Slowed, irregular or difficulty breathing.

Student-athletes in crisis may try to minimize or hide the signs due to feelings of shame, fear of losing playing time or stigma about mental health conditions.

What To Do

When signs of a mental health emergency appear, prompt, compassionate action can save lives. You can play a key role in recognizing student-athletes at risk, expressing concern and connecting student-athletes to appropriate care.

If you are concerned a student-athlete is at risk of experiencing a mental health emergency:

- Speak to them privately, calmly and without judgment.
- Share specific observations.
- Listen more than you talk and avoid trying to fix or downplay their feelings.
- Reassure them that help is available and asking for support is a sign of strength.
- Connect them with a licensed mental health provider or team physician or offer to accompany them there. If a licensed mental health provider or team physician is not immediately available, call, text or chat 988.

If you suspect a student-athlete is experiencing a mental health emergency and in imminent risk of harm to themselves or someone else:

- Follow your athletic department's emergency Mental Health Action Plan immediately.
- Contact emergency support, such as the Suicide and Crisis Lifeline (988) for guidance.
- Ensure the student-athlete is not left alone if they appear in immediate danger.
- Document and report concerns according to institutional policy.
- Asking someone about suicidal thoughts or other mental health concerns does not increase risk or plant ideas – it can provide relief and spur someone to seek help.

As staff, you can promote mental well-being by creating an environment that supports student-athlete well-being and normalizes help-seeking.

- Normalize talking about mental health and help-seeking, including mental health emergencies.
- Use destigmatizing language when discussing suicide, such as saying "died by suicide" (not "committed suicide").
- Display mental health resource information in places where they are visible to student-athletes, such as locker rooms, training facilities and coaches and athletics staff offices.
- Encourage routines that prioritize self-care, including rest, recovery and connections beyond athletics.

As staff, you can be prepared to support a student-athlete who is experiencing a mental health emergency by being familiar with your Mental Health Action Plan.

- Assure your MHAP is written and includes the full spectrum of care for both routine and emergency mental health care needs.
- Communicate your MHAP to all stakeholders regularly.
- Have a plan for when and how your MHAP will be rehearsed.