

The Psychology of Performance

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“Perform”

- **Verb** Carry out, accomplish, or fulfil (an action, task, or function):
Synonyms carry out, do, execute, discharge, bring about, bring off, accomplish, achieve, fulfil, complete, conduct, effect, dispatch, work, implement
- **Adverb** [*no object, usually with adverbial*] Work, function, or do something well or to a specified standard.

“Performance”

- Process of performing a task or function: Synonyms carrying out, execution, discharge, conducting, conduct, effecting, accomplishment, achievement, completion, fulfilment, dispatch, implementation

Performance Psychology

- *....is a branch of applied psychology that focuses upon the factors that allow individuals, teams, and groups to achieve their aims. It engages the performer on how to be successful by developing the power of the mind and to practice mental skills training in their daily lives*



Suicide in Professional Athletes: is it related to the sport?

J. John Mann M.D. Columbia University and New York State Psychiatric Institute

If recent headlines about athletes dying by suicide have made you wonder whether progress in brain research can help shed light on the potential role in these suicides of head hits in sport, then you are right—and not just in the case of the athletes. Research on suicide across its spectrum has told us enough about the brain to greatly help in considering whether and how head trauma may have set the stage when an individual dies by suicide.



Suicide is the third leading cause of death

In May, 2012, *The Washington Post* reported Sean, a linebacker who played in the NFL, for seasons and was among the most widely respected players of his generation, was found dead in California home Wednesday... with a gunshot to the chest. There was no suicide note (and officials said a gun was found near Sean and appeared to be a suicide." The paper also reported "he had survived a 100-foot fall down a cliff in October 2010, ... and police said it was he fell asleep at the wheel". Police seem to have this conclusion based on Mr Sean stating he was asleep at the wheel, but another potential explanation is that this had been a suicide attempt that he

Enke follows worrying trend of athletes who have committed suicide

DPA

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The local police on Tuesday said that first investigations into the death of German international Robert Enke seemed to indicate that the popular Hannover 96 goalkeeper committed suicide.

Enke, 32, who was favoured to be Germany's first choice goalkeeper at the World Cup finals in South Africa next year, was killed at a railway crossing near his home early on Tuesday evening. The first investigations into his death appeared to be a suicide according to the police.

This was later confirmed by Enke's agent Joerg Neblung, who said that the goalkeeper had taken his own life.

f Like 2

Depression and suicide in sportspeople

9 FEBRUARY, 2012 09:34 AM | BY ALAN PRINGLE

The stigma of mental illness in sport has recently come to prominence following the tragic suicides of several high-profile sportspeople.

German international football goalkeeper Robert Enke, Denver Bronco's wide receiver Kenny McKinley, Austrian Olympic judo silver medalist Claudia Heill, Kenyan Olympic marathon champion Sammy Wanjiru and Wales national football team manager Gary Speed.

This, tragically, is not a list of recent winners of a prestigious sports award, but a list of high profile people from the world of sport who have taken their



Cricket's darkest statistics, and why assumptions about suicide might be wrong

By Nick Harris

Comments a

SJA Internet Sports Writer of the Year

15 November 2011

The untimely death at the weekend of the former cricketer and writer Peter Roebuck, who took his own life by jumping from the sixth floor of a Cape Town hotel on Saturday night, has again prompted debate about the apparently high prevalence of suicide among men who've played the game professionally.

The operative word is 'apparently' – but we'll come back to that.



Roebuck (left), 55, has been widely hailed as one of his sport's finest scribes. For anyone unfamiliar with his unconventional life and times, it's worth a look at some of the myriad pieces published in recent days and linked here in *The Guardian*, *The Telegraph*, *The Independent* and the *Daily Mail*.

This extract from a piece by Greg Baum in *The Sydney Morning Herald* (linked in full here) gives a small flavour of the man if not the player.

"He was complex, intense, taut, edgy, opinionated, a little manic, mostly cheerful, sometimes broody. He was a

The Prevalence of Failure-Based Depression Among Elite Athletes

Thomas Hammond, MSc, Christie Gialloreto, MSc,† Hanna Kubas, BSc,‡ and Henry (Hap) Davis IV, PhD§*

Objective: To assess the prevalence of diagnosed failure-based depression and self-reported symptoms of depression within a sample of elite swimmers competing for positions on Canadian Olympic and World Championship teams.

Design: A cross-sectional design.

Setting: Assessments were conducted after the conclusion of the qualifying swimming trials.

Participants: The sample consisted of 50 varsity swimmers (28 men and 22 women) based at 2 Canadian universities who were competing to represent Canada internationally.

Main Outcome Measures: Diagnosed depression was assessed using a semistructured interview, and symptoms of depression were also assessed by the Beck Depression Inventory II. Performance was measured by changes in swimming time and athlete ranking.

Results: Before competition, 68% of athletes met criteria for a major depressive episode. More female athletes experienced depression than their male peers ($P = 0.01$). After the competition, 34% of athletes met diagnostic criteria and 26% self-reported mild to

INTRODUCTION

Depressive disorders are the most prevalent psychological disorder where approximately 17.7% of the population will develop this condition at some point during their life.¹ Given the pervasiveness of depression, the severity of consequences on an individual's well-being, and ability to function, this area in psychology has received much attention in the general population. Similarly, there has been a growing interest in recent years related to the mental health of athletes.²

Despite this interest, very few epidemiological studies have been conducted examining the psychopathology of athletes.² It has been proposed that the main reason for this is due to the widespread assumption that only emotionally and mentally strong athletes are able to compete at the highest levels of elite sport. As such, psychological disorders do not exist amid these elite performers.³ Other studies have suggested that athletic participation was a marker for decreased instance of depression and suicidal ideation.^{4,5} However, the majority of evidence examining elite athletes indicates that depression occurs at a similar or increased frequency as

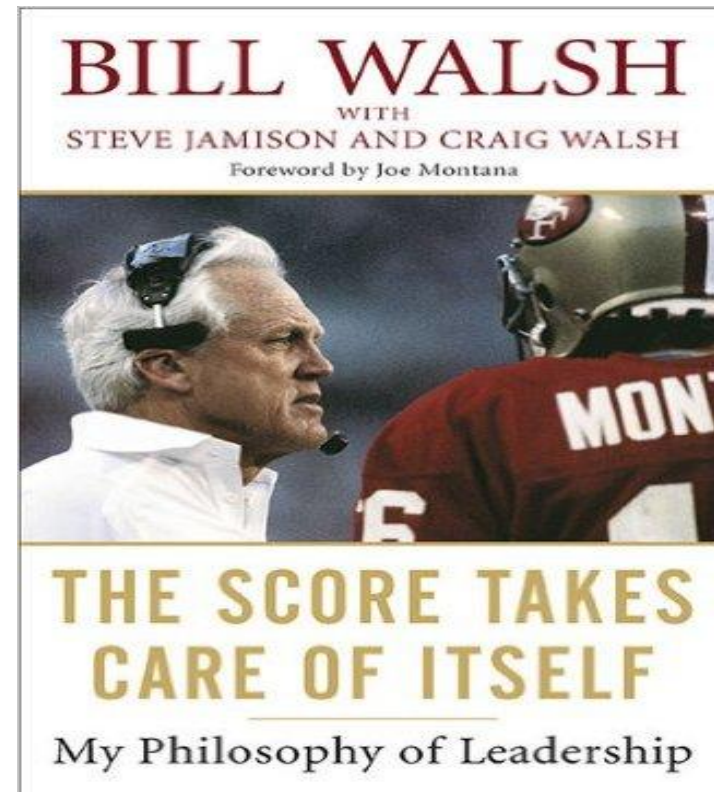
Sports Psychology

- Champion psychology – counterproductive for the majority
- Sports people trained to take total responsibility for outcome - winning or losing
- “No points for winning”
- Change in mindset – to process focus
- What do sports people have control of? preparation, attitude, decision making, execution
- *“I can accept failure, everyone fails at something. But I can't accept not trying.”*

Michael Jordan

Focus on Process

- Aim for a Standard of Performance (which is absolute) vs winning (which is relative to others).
- “Process” of improvement leads to “result” of victory and not vice-versa.
- Focus on processes that produces results and not on results.
- Promotions/wins/sales quotas (and HbA1c) are results, they do not provide information about performance. It’s important to dig into performance to find truth hidden behind these results.



Diabetes Burnout

Bill Polonsky - Diabetes Burnout: What to do When You Can't Take it Anymore.

- Diabetes burnout is a state of emotional exhaustion caused by the continuous distress of (and efforts to self-manage) diabetes. Typically, the individual feels that, despite their best efforts, their blood glucose levels are unpredictable and disappointing. This often leads to feelings of failure and helplessness. Burnout people just “can’t be bothered” anymore.
- These individuals are often described by health professionals as being “difficult”, “non-adherent”, “hopeless” or “unmotivated”, while actually they are really struggling with the relentlessness of managing a lifelong condition.
- Signs of diabetes burnout are disengagement from self-care tasks (e.g. skipping or omitting insulin injections or missing medications, giving up blood glucose monitoring, unhealthy or uncontrolled eating, risk taking behaviours, not attending clinic consultations).
- If and when someone with diabetes burnout attends the consultation, they are rarely open to any advice for change you may offer: “I have tried that before but it did not work...”; “I stopped doing fingerpricks, because I know my blood sugar will be too high anyway”.
- This disengagement from self-care increases their fears of developing chronic complications because they do understand the importance of diabetes self-care for their long term health, but they feel unable to take control. *“They are at war with their diabetes – and they are losing”*

Short Report: Educational and Psychological Aspects

Use of clinical targets in diabetes patient education: qualitative analysis of the expectations and impact of a structured self-management programme in Type 1 diabetes

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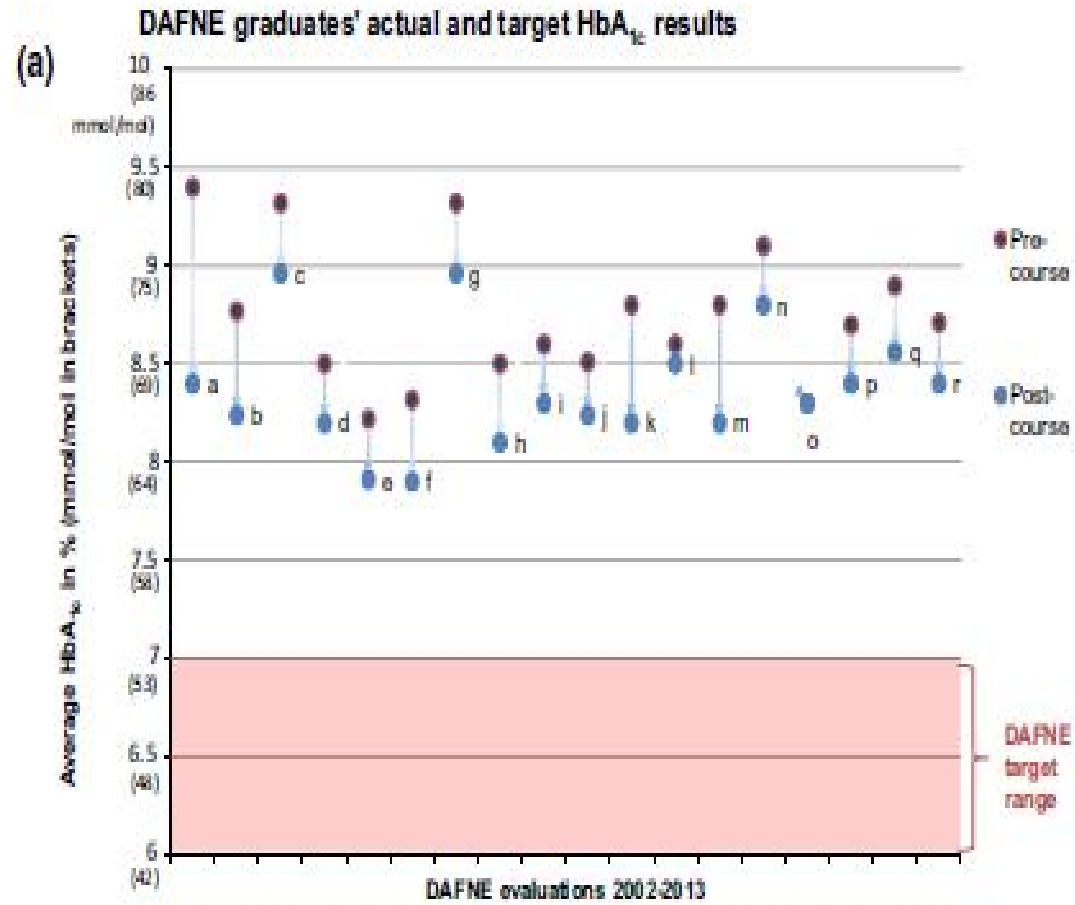
Accepted 28 January 2014

Abstract

Aims To explore the impact of education and target-setting on the life stories of patients with diabetes up to 10 years after they had participated in the Dose Adjustment for Normal Eating programme (DAFNE).

Methods Qualitative, semi-structured interviews were conducted before and after DAFNE courses to elicit narrative accounts from participants at three UK education centres. Observations of courses also took place. Data were gathered from 21 participants over 32 interviews and 146 h of observations, and analysed using a narrative approach.

Results Findings suggest that patient education can create positive transformations in the lives of people with diabetes in ways that are not fully captured by simple quality-of-life scores. However, a review of evidence from other studies shows that DAFNE-recommended blood glucose results are in fact out of reach of even these most motivated and



Counterproductive...?

shows that DAFNE-recommended blood glucose results are in fact out of reach of even these most motivated and well-informed patients. This information was not shared with DAFNE attendees, who were expected to aim for near-normal HbA_{1c} levels. After the course, participants sometimes perceived themselves as failing in their efforts, even when they had better than average blood glucose results.

Conclusions Specific and measurable low HbA_{1c} targets may be desirable for reducing the risk of complications in diabetes, but they are not attainable or realistic even for most DAFNE graduates. It is suggested that setting goals without information about how achievable they really are could be counterproductive in terms of supporting and maintaining patient self-efficacy long-term.

Diabet. Med. 00, 000–000 (2014)

Introduction

Formal courses teaching people with diabetes how to self-manage are backed by national governments and are

cohort were asked to aim for a HbA_{1c} concentration of 42 mmol/mol (6%) but very few reached it; 10 years after the trial, the group had a mean HbA_{1c} of almost 64 mmol/mol (8%) [3]. A study of a diabetes teaching and training

- How much control does someone with type 1 diabetes have over their blood glucose?
- What, in addition to carbohydrates and insulin, affects blood glucose?





I Love you
mum
Even tho
you are a bit
bossy

Actually Mummy...

The Diary of a Loquacious Schoolgirl



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Stable Diabetes: it's Mission Impossible #DPC16

March 14, 2016 by Helen — 7 Comments



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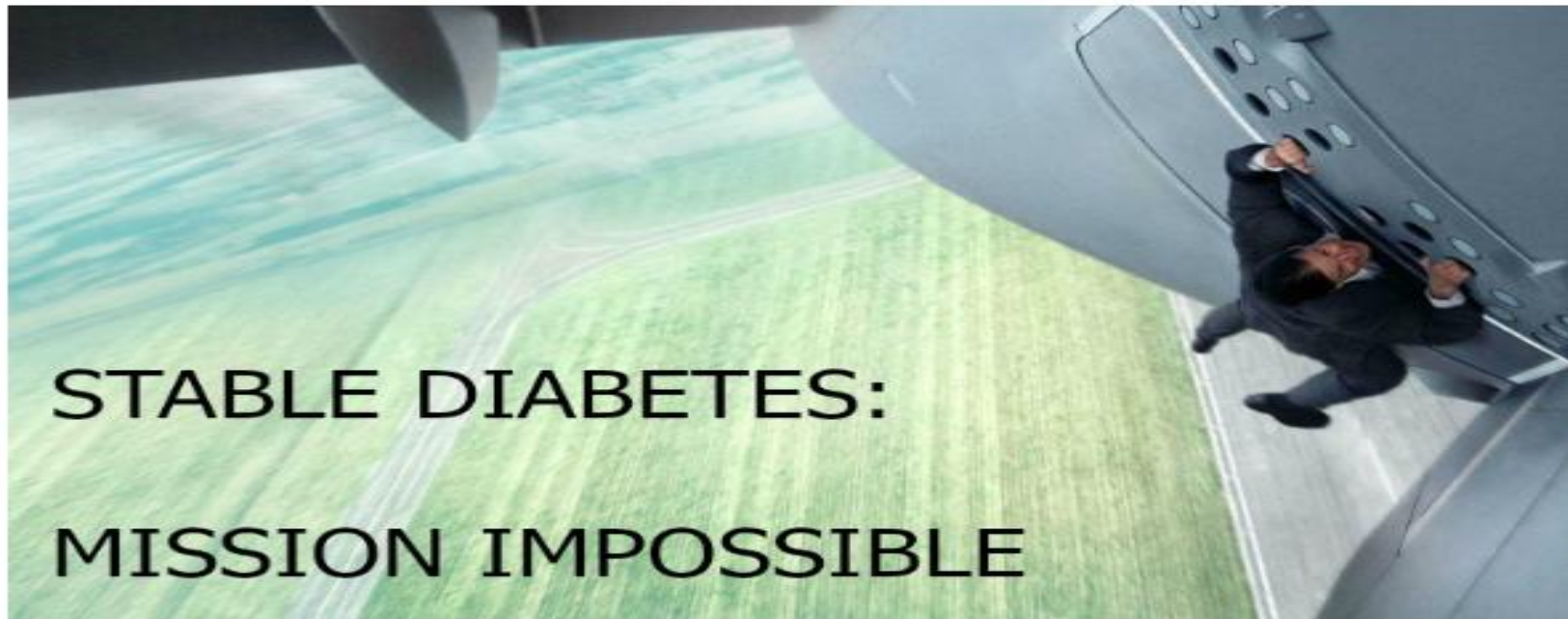
A man in a blue lab coat is holding a massive stack of papers that is nearly as tall as he is. The papers are stacked on a light-colored surface, and the man is looking down at them with a slight smile. The background is a blurred office or laboratory setting.

**"THINGS IN LIFE THAT
CAN MAKE YOUR BLOOD
SUGAR HIGH / LOW...**

... VOLUME 1"

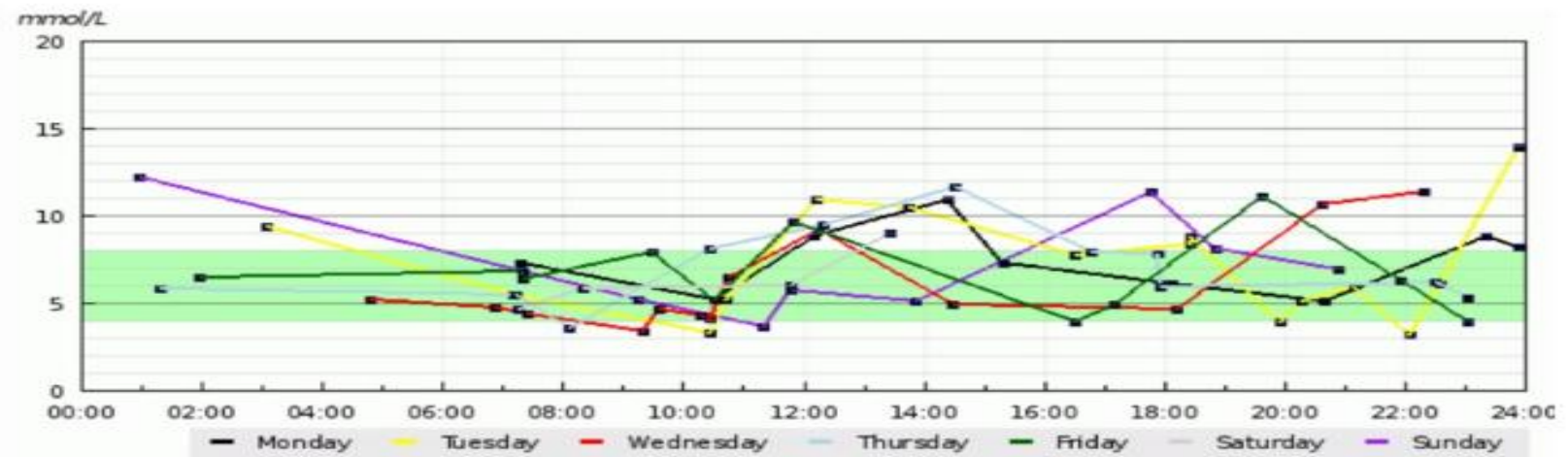
Focus on the controllables

A session on exercise drew on sports psychology: patients feel the huge burden of the end result – the HbA_{1c} (the periodic blood test result used to measure diabetes control), when some hurdles along the route are quite simply beyond their control. Exam stress, a nasty cold, an argument with a friend, and all the other reasons in that huge book up there will affect blood glucose levels. We know for a fact that watching *Mission Impossible: Rogue Nation* will increase blood sugar from a nice 6, to 17.2 in the course of half an hour. She's not old enough to fancy Tom Cruise, so I imagine it was all that breath-holding in the water tank. Anyway, you see my point.



Why there is no such thing as stable diabetes

Take a look at this image:



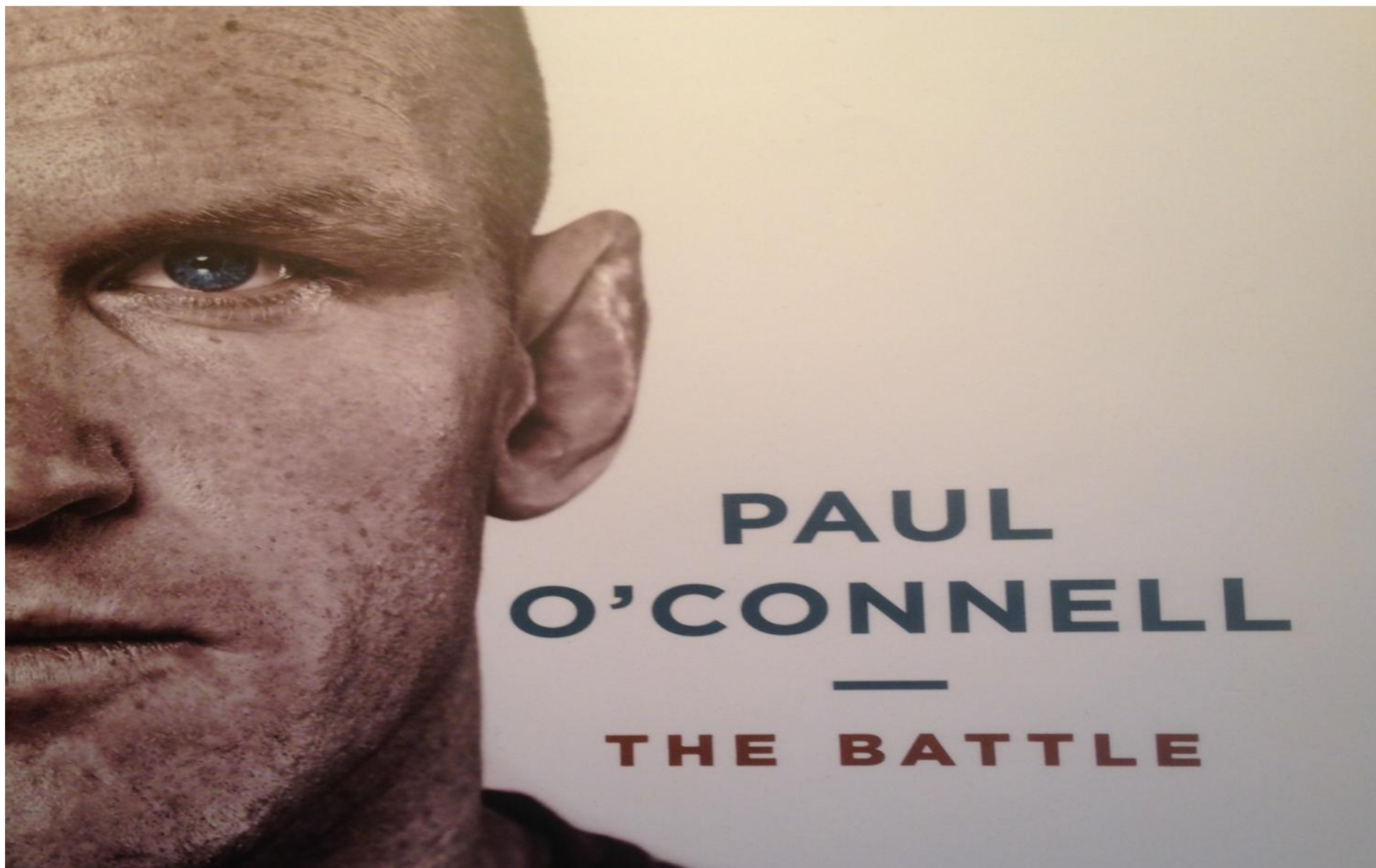
This picture represents a week of blood sugar readings for my 11 year old daughter. She is considered by her doctors to have excellent control, in the top 5% of her clinic. Anything inside the shaded green area (4.0 – 8.0) is in target. Not normal, but normal enough to minimise the risk of complications. The points below 4.0 are hypos, where she has suffered a low blood sugar and urgently needed to consume sugar. The points over 8.0 are numerous, unexpected, and also make her feel pretty rough. She or I worked really hard to prevent them, but they happened anyway.

Reflection

- Are we outcome focussed or process focussed?
- Where does that mindset come from?
- (As in life) failure is not defined by an undesired outcome but by lack of effort, poor attitude and / or bad choices.

your enemy in sport, because...
manes. I'd never looked at it that way before, but I could see his point. What I took out of it was that as a team we needed to find a different way of achieving consistency. We needed to get ourselves into the frame of mind that Eanna had written about in his email to Declan, without the stress of having to build a cause.

The difference that performance psychology made in the second half of my career was that I got much better at working on the process that went into winning, rather than being distracted by thoughts of what winning or losing might feel like. For me, the process became the key to high performance and, just as importantly, the key to enjoying the journey.



**PAUL
O'CONNELL**
—
THE BATTLE

References

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- Snow R, Sandall J, Humphrey C (2014): Use of clinical targets in diabetes patient education: qualitative analysis of the expectations and impact of a structured self-management programme in Type 1 diabetes. **Diabetic Medicine**, 31 (6), 733–738.



Slides available from:

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