PROFILES IN PSYCHOLOGY



By Dr. Allan R. Mandel, Ph.D., R. Psych.

Dr. Hap Davis is a Calgary clinical psychologist who runs a private practice from his downtown office. He has a bachelor's degree from the University of Pennsylvania,

a master's degree from the University of South Florida, and he completed his doctoral degree at the University of Calgary. While much of his practice is "bread and butter" clinical psychology, he has diverse interests and is well known especially for his work as a sports psychologist. In this capacity, he has provided services to swimmers, gymnasts, golfers, figure skaters, track and field athletes, equestrian competitors, and hockey players. He was the Calgary Flames' psychologist from 1984 to 1996 (including the year they won the Stanley Cup), and still receives clinical referrals from the club. He provides services to the Canadian National Swim Team and the University of Calgary Swim Club, and in the past has been involved with the Calgary Aquabelles Synchronized Swim Team. He has been a consulting psychologist with the Calgary Police Service and has directed health promotion, preventive counselling, and evaluation programs for the Calgary Family Service Bureau. He was one of the first psychologists in the province to work in psychosocial oncology, having co-founded the Psychological Services Unit with the Southern Alberta Cancer Center. He is an expert on the topic of psychological assessment of refugee claimants and persons with a history of torture and persecution; he does assessments and has published in this area. Most recently, he has been involved in research using functional magnetic resonance imaging (fMRI) to study brain function in competitive athletes. He has been cited in media sources such as the New York Times, CBC's The National, and TSN.





What is sport psychology?

Sport and exercise psychology is the application of the science of psychology to the field of sport. Sport psychologists are licensed practitioners in psychology. This

should be understood but many practitioners, media and consumers often get the starting point wrong and regulatory bodies have done little to protect the consumer or to clarify things among practitioners – therefore, many people who call themselves "sports psychologists" are not psychologists at all. Sport psychologists help athletes to achieve athletic potential, they help coaches to coach effectively, and they help sport management to organize optimal environments for high performance. They help athletes, coaches, and managers who encounter upset, discouragement, or despair and they help their clients to achieve dreams.

What are the origins of sport psychology and who were the main pioneers in the field?

The origins of sport psychology can be traced to the period when psychology itself was in its infancy. For instance, in the 1920's the works of Coleman R. Griffith in his motor learning lab at the University of Illinois marked a start-point for formal inquiry into the elements of motor behaviour. For another 30 years or so sport psychology was esoteric until Bruce Ogilvie and Tom Tutko pioneered the application of the principles of exercise psychology and clinical psychology to NCAA and professional sport. Bruce, born in BC, died only a few years ago at 82 in California after an applied and research career that had spanned six decades. He worked with the majority of US Olympic teams. At one point, he was active with athletes in professional baseball, the NBA and the NFL, sometimes with several teams in each. The University of Alberta with Murray Smith at the helm took sport psychology to the next level in graduating some of the most respected practitioners in the field today. The main drawback to the U of A program is that while it graduated esteemed professionals who have led North American and international practitioners, it did not graduate them as psychologists. Hence, from the 1970's the Canadian application of sport psychology took a shift, the influence of which remains with practitioners who, while expert in kinesiology and sport, are not necessarily expert or licensed in psychology.

What are the major psychological issues that competitive athletes face?

Athletes want the same things most of us want: happiness and effectiveness. They want to achieve to the best of their abilities. They want to feel loved and they want interpersonal stability. The major issue that distinguishes the athlete from others, however, is the desire to excel in a physical pursuit. Thus, the major psychological issues for athletes derive from these elements: they require help with defining goals, learning psychological skills in performance imagery, self-talk management, focus and concentration, and arousal management, learning to recover after training, and learning to hold some sense of personal balance in an inherently imbalanced life style.

How important is the "psychology of the team" in team sports, and what work have you done in this area?

In my view, all sport is team sport. Some athletes compete alone and some compete in a group. In open sports I have worked principally with ice hockey, having acquired the foundations of my current practice under the mentorship of Cliff Fletcher, the then GM with the Calgary Flames. He hired me, trusted me, invested confidence in me, taught me to take initiative, and permitted my pride. I will always remember his contributions that were pivotal in my career.

I have been working with Swimming Canada as national team psychologist since 1999, and have been involved at the national level since 1993. In my current role I consult with coaches and athletes throughout Canada, I coordinate sport psychological service provision when I am not delivering these services myself, I attend most national meets, and I travel with the team to international competitions (World Championships, Pan Pacific Championships, Commonwealth Games, Olympics). Last year I was away from Calgary for over 70 days in this role; this is not unusual for sports psychologists. Overall, sports psychology accounts for roughly 40 percent of my professional activity, roughly the percentage of time that was devoted to hockey when I was with the Flames.

What are some of the specific interventions that you use with high performance athletes or teams?

Virtually all athletes today receive psychological training in imagery, self-talk, confidence maintenance, focusing, and arousal management. Cognitive behavioural methods that are used in other fields have been transcribed for application to sport. In sport, however, some interventions are possible that are not as feasible in clinical or counselling psychology. For instance, accountability is clear in win-lose scenarios and some imagery training is easily enhanced with video that is available for most athletes at the elite levels. Athletes can talk in very specific terms about what they were trying to do and they can imagine future performance using video that most business managers or spouses would never have at their disposal. Sport video is the mainstay of my practice and I use it in all aspects of my work.

Tell us about your work with fMRI, and how you obtained access to using fMRI technology.

For many years I was frustrated by the fact that many Canadian athletes, young people who would potentially make their first professional contributions to Canada by competing for us at the Olympic level, would quit following underachievement and under the sometimes crushing weight of disappointment of failure. doctoral dissertation work was in depression and I am expert in negative self-reference. I could see that too many of our athletes were being lost to self-criticism and hopelessness following failure and I wanted to see how this might equate to depression. I wanted further to develop empirically-derived methods for intervention. This is too much to fully outline in this context, but in brief, with the consistent encouragement, interest, and stimulation of my friend Patrick Baillie, I contacted expert neuroscientists in depression to ask them if our athletes could become "essentially" depressed in the course of a competition and go on to underachieve because of this. Helen Mayberg, Mario Liotti, and Richard Davidson - known for PET and fMRI research in affect - helped by confirming that affect induction in a lab should be really no different from the intense experience of an Olympic athlete who might be the lone focus of 17,000 spectators and millions of TV viewers. When athletes fail, they confirmed, this failure should be sufficient to replicate laboratory affect induction. Together, we set out to see if this was so by using fMRI (functional magnetic resonance imaging) which permitted us to look at regional cerebral blood flow in athletes as they watched themselves compete. Our hypotheses (confirmed! with national team swimmers, gymnasts, and speed skaters) were that we would see

rapid shifts from frontal regions within minutes – shifts that are the neurochemical hallmarks of depression - and that we would see correlated diminished activations of the motor cortices that would, with frontal executive functions, support physical performance. We have now studied both success and failure.

To get into the lab without grant support was somewhat tricky, but the neuroimaging lab at the University of British Columbia was already doing a lot with fMRI research and Elton Ngan, who was doing schizophrenia research in psychiatry at UBC, conspired to get us in the back door. The only requirement was that in my role as national team psychologist with Swimming Canada I would apply for ethical reviews and bring cash. For this last piece, I raised about \$100,000 from some very wonderful and generous Calgary businessmen. Our work is now expanding to the US with new hypotheses about affect in sport being pursued by another long-time friend and colleague Len Zaichkowsky at Boston University.

Do most professional sports teams have a sports psychologist? Is psychology a respected discipline in the world of professional sports?

Exact numbers are hard to obtain but most professional teams do not have a sport psychologist. Coaches are very protective of their relationships with athletes and they often perceive that a psychologist will upset coach-athlete relationships and actually undermine performance. The field has not flourished as would be expected for a variety of reasons but the main ones are these: Some psychologists enjoy the limelight even more than the athletes they work with and these ego-driven psychologists are quickly dismissed. Other psychologists talk well enough to get through the door but they are not effective enough with performance to stay there. Still others enjoy clinical work so much that they see only clinical problems; the result is that they lose their jobs for not contributing to enhancing performance. Some psychologists believe (without empirical basis) that they can guide a team through the entry draft. When they predictably fail to do so they set the entire field back. Finally, CAP and other regulatory bodies do not regulate unethical practices outside our field and some practitioners deliver inadequate services while claiming to be sport psychologists even though they are not licensed in psychology. When they fail, we all fail. Regrettably I have numerous examples of each of these scenarios.

Tell us about your work with psychological assessment of Convention refugee claimants.

I got involved with this almost 20 years ago and I have now assessed roughly 500 victims of persecution and torture as they apply for protection in Canada under a UN convention that protects refugees. The psychologist works with the lawyer for the claimant to determine whether the person is credible in asserting fear of persecution or torture with a belief that they cannot be protected by the state. Additionally, the psychologist estimates what psychological harm has been done prior to and since landing in Canada and what the psychological consequences of return to the country of origin might be.

Key issues include "internal flight" and "disproportionate harm"; defining these may help explain the work I do. If a claimant has an internal flight alternative it is deemed that he or she could move to another part of the country and not require the protection of Canada. Some persons, however, due to mental health issues cannot move anywhere in the country without continuing to be disabled by, say PTSD. They would lack the internal flight alternative. A person raped by the police acting on government authority to dissuade her from her political beliefs would not be expected to perceive safety in any region of a small country. She would reason instead that she could not hide indefinitely and that she would fear that upon identification by authorities that she would again be persecuted. Under these circumstances it may (upon close examination) not be expected that the person would recover from depression or PTSD. The psychologist would look at mental health risk factors, which draws heavily on the empirical published literature, and apply these to the context of the person in the country of origin. It is not a foregone conclusion that all harmed persons require protection of another state and it is not presumed that depression cannot resolve in a frightened person. The psychologist acts as an expert to evaluate this very complex area for the lawyer and Canada Immigration.

A different issue is that of disproportionate harm. Sometimes, Canada finds that the person has an internal flight alternative or that the circumstances of the country of origin changed after the person fled to Canada. The psychologist would explore whether the file can be reconsidered in light of the possibility that a person could be harmed by a return to such an extent

that they would suffer more than others in their same returning circumstances. An example would be the person who would only be able to return to the care of his parents due to the psychological problem of mental handicap. In this case, if one parent has been abusive of the individual in the past, the individual may be safe in society, but disproportionately harmed by a return to the care of the abuser. Fear of future harm would not dissipate simply with Canada Immigration reassurances. The psychologist has the responsibility of delineating these psychological realities for the lawyer who makes representations on the client's behalf.

What advice do you have for psychologists who might wish to become involved in sports psychology?

Become a psychologist. Learn kinesiology. Enjoy sport. Expect to work with coaches as much as with athletes. Respect high performance. Don't expect to get rich; expect instead to subsidize the passion with more traditional streams of professional income. Prepare for working with ethical issues, negative affect and career transition. Be a learner.

What led you to settle in Calgary?

My wife, Ruth, and I came to Canada from the United States in 1973 after I had fulfilled two years of alternative service to the US military as a conscientious objector. At that time we each had MA degrees in counselling and wanted to work in the US northwest in a school system. Finding no employment, we pursued our option to become Landed Immigrants and I followed up on a tacit job offer that had developed while we were still living in Tampa. Roughly 10 days after arriving with all of our possessions in U-Haul tow behind our VW beetle, I was working at Calgary Family Service Bureau. Two years later, I was engaged in biochemical/cognitive research in depression. One year after this I started my PhD at the U of C which had already agreed to let me continue my clinical pursuits by studying adult depression.

What are your personal involvements with sports?

I was a serious, but not very fast, track athlete. I ran in high school and at Penn before giving it all up and joining the legions of 10K and marathon runners in Calgary. I still run (even slower) and, in addition, I cross country ski, snow board, kayak, and hike.

Thank you for taking time from your busy schedule to do this interview.

Dr. Mandel can be contacted at (403) 286-8425, or at amandel@mandelassociates.com