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Support and Care for the Mental Health of Collegiate Athletes

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Support and Care for the Mental Health of Collegiate Athletes

Abstract

While college is often one of the best times of a person's life, it is also often one of the most challenging. College students are under immense pressure to succeed in all of their activities while still doing well in their classes and graduating within four years. This especially holds true for collegiate athletes. Student-athletes are under constant pressure to succeed in both the classroom as well as the athletic field. Balancing these challenges can be overwhelming for athletes to handle. Stress from academics and the new social structure is tough but when athletics are added, sometimes it gets to be too much. Student-athletes are trained every day to improve their physical strength, but do they receive enough mental health coaching to improve their mental and emotional strength?

This research paper delves into the importance of being able to recognize when a student is struggling and knowing how to handle the situation. Even though mental health is becoming a new topic of discussion, many people still treat it as a taboo that they do not want to talk about. However, mental health is something that everyone has. Not everyone has poor mental health and not everyone has good mental health, but everyone does have mental health so this is a topic that should concern everyone.

The goal of this paper is to get people to recognize the importance of continuing to discuss these issues openly and to make sure that the people who surround our student-athletes are equipped to handle their unique mental health challenges.

Keywords

Mental Health, Athletes, College, Suicide

Disciplines

Higher Education | Mental and Social Health | Sports Studies

Comments

Written for FYS 150: Death and the Meaning of Life.

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Professor Myers

Research Paper

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Many people you ask will tell you “college was the best four years of my life.” The college experience is full of new adventures and experiences creating memories that last a lifetime. However, students actually going through the experience quickly learn that, on many levels, college is hard. The pace of the work is hard, the amount of work is hard, and trying to balance all of the various activities and taking care of the chores of living on one’s own for the first time is hard. College students are under immense pressure to succeed in all of the different activities in which they participate in while still doing well in classes and trying to graduate within four years. College can be especially hard for varsity athletes. Student-athletes are under a constant pressure to succeed in both the classroom as well as the athletic field. Balancing these challenges can be overwhelming for athletes to handle. Stress from academics and the new social structure is tough but when athletics are added, sometimes it gets to be too much. Student-athletes are trained every day to improve their physical strength, but do they receive enough mental health coaching to improve their mental and emotional strength?

According to SAVE, Suicide Awareness Voices of Education, “suicide is the second leading cause of death in the world for those aged 15-24 years. 7 in 100,000 youth ages 15-19 die by suicide each year and 12.7 in 100,000 young adults ages 20-24 die by suicide each year” (“Suicide Facts”). Suicide is also a type of death that can be readily prevented. The fact that it is the second leading cause of death in the world for young adults is tragic. The lives of so many young adults are taken each year due to the suffering that could have been helped if they had the

right resources. Many students struggle with mental health issues on a daily basis, but if they are given the correct treatments such as therapy and/or medications, these mental illnesses can be easier to handle. Many of the issues with which students struggle can be alleviated with therapy or medication. “In fall 2011, the ACHA [American College Health Association] conducted the National College Health Assessment. According to the results of the study, during the previous year, 86.1 percent of respondents reported they felt overwhelmed by all they had to do, 60.5 percent felt very sad, 57.2 percent felt very lonely, 49.9 percent felt overwhelming anxiety, 45.2 percent felt that things were hopeless, and 30.3 percent felt so depressed that it was difficult to function; 6.6 percent reported they had seriously considered suicide” (Taub and Thompson). All of these feelings that these students have are things that can be helped if they have the right resources available to them. Students are under so much pressure to succeed in their classes and all of the activities they are involved in that they feel like they do not have the time to take care of themselves. They do not get the proper help that they need because they are so busy as is and they feel like they cannot fit another thing like therapy or doctor’s appointments into their schedule.

There is also a stigma around mental illnesses and asking for help in our society. Many people who are suffering from mental illnesses are scared to reach out and ask for help for a variety of different reasons. Some people are afraid to ask for help because they feel like other people have it worse and they are being dramatic. Some people are afraid to ask for help because someone in their family or one of their friends does not believe in mental illnesses. Some people are afraid to ask for help because often times our society makes it seem like asking for help is a sign of weakness. Still, others do not know what kind of help is available or what they need. Although most colleges and universities in the United States offer free or low-cost counseling

services for students, there are not very many students who take advantage of this.

Unfortunately, “80 to 90 percent of college students who die by suicide had not sought help from their college counseling centers” (Taub and Thompson). Colleges and universities started trying to figure out why more students were not utilizing the campus counseling services that they offer. In 2008, researchers began looking for barriers that held students back from using the counseling services on campus and they identified several barriers including “public and personal stigmas, lack of time, privacy concerns, lack of emotional openness, lack of a perceived need for help, concerns about costs or insurance coverage, skepticism about treatment effectiveness, lack of knowledge of services, and language barriers” (Taub and Thompson). With this many reasons why students are not reaching out for help, there are many students who do not get the help they need.

Everything that has been discussed thus far is relatable to any college student. However, student-athletes in college often struggle with all of those things and more due to being a part of something so time demanding. William Barr, director of neuropsychology at New York University Langone Medical Center, said “we may put athletes on a pedestal and think they are superhuman, but they have the same issues as we do plus issues that come as a result of their roles as athletes and public figure. There’s the need to cooperate with a group, perform to achieve and all the things they have to balance in addition to their coursework” (Terlep). Student-athletes are under an immense amount of pressure to succeed in both their classes and their sport, not to mention other clubs or activities that they are involved in on campus as well. Although being a part of an athletic team in college does have many advantages, it also does bring along many challenges. It can be incredibly challenging to balance school work and athletics and internships and clubs and all of the other activities college throws at students. Since

they are so focused on bettering their physical being and they have a whole team of friends and coaches to support them, it can be hard to believe that students who participate in organized sports struggle with mental health issues just like any other student. Because of how much they have going on in their lives and how much stress they are under, student-athletes need support when it comes to their mental health.

In athletics, injuries are common. To many athletes, injuries may be the single most devastating thing to happen to them. Not being able to play their sport can alter their whole world. “In a small study of five injured athletes who attempted suicide, the commonalities identified included the achievement of significant success prior to the injury, an injury severe enough to require surgery followed by a prolonged and challenging rehabilitation necessitating restriction from their sport, the inability to return to their preinjury level in their sport, and having their positions usurped by teammates.” There are many “psychological characteristics including anger, confusion, fatigue, tension, and depression [that] have been associated with injury, which leaves an athlete vulnerable to suicidal behavior” (Clinical Sports Psychiatry). In an article written in 2014 about the suicide of an Ohio State University football player named Kosta Karageorge, Brian Hainline, the NCAA’s first-ever chief medical officer, stated that “some student-athletes, if they are injured, think everything they stand for has gone away. There is a desire to become good at all costs that can lead students into unhealthy or ethically challenging situations” (Terlep). It can be very difficult for student-athletes to deal with an injury that prevents them from playing their sport for a long time because often times it is when they play their sport that they can relax and forget about everything else in the world. When they no longer have their sport as their outlet, it can be really hard for them to cope with stress.

Injury-related or not, there are many student-athletes who struggle with mental health issues. There is “research [that] suggests that 10 percent of college student-athletes struggle with issues serious enough to warrant counseling” (Taub and Thompson). Many student-athletes struggle with mental health issues due to the drive to be the best at everything they do. Athletes are trained to not stop working hard on something until they reach perfectionism in whatever it is that they are working on. According to a study done by the department of psychology at Stockholm University, “individuals who are characterized by frequent cognitions about the attainment of ideal, perfectionistic standards are more likely to experience negative emotions and heightened levels of anxiety and depression symptomatology, due to the existing discrepancy between ideal and current self/situation” (Koivula). In athletics, it is generally a good thing to have this drive until it becomes too extreme. “Extreme perfectionism, ‘... where anything less than perfect is unacceptable, can leave individuals vulnerable to depression’, which can, in turn, lead to suicidal behavior” (Clinical Sports Psychiatry).

There is a lot of research that makes the argument that mental health issues, suicide, and suicidal behavior are not increased among athletes; therefore, collegiate student-athletes might actually be at less of a risk of suicide than college students who do not participate in athletics. In a study done by the National Collegiate Athletic Association (NCAA), they concluded that “the suicide rate in NCAA athletes appears to be lower than that of the general and collegiate population of similar age” and “athletes have substantially higher self-esteem and social connectedness while exhibiting lower levels of depression than non-athletes” (Rao). However, mental health and suicide is a newer area of research. Because of this, the sample size is not very large so there are not strong data to support an increased or decreased risk of these conditions in this subpopulation of student-athletes. Along with this, the NCAA admits that “multiple studies

have reviewed the effects of athletic participation and exercise on depression and suicidality with varying conclusions” (Rao). Also, in an article about understanding depression and suicide in college athletes, it is stated that “current estimates of depression and suicide prevalence in these populations [student-athletes] are challenged by the lack of consistent methodology, inconsistent reporting by schools and a poor understanding of relevant screening tools to effectively evaluate athletes. Thus, under-reporting of mental health concerns in athletes is a significant concern, and depression and suicide are tangible concerns to address in athletes of all ages and levels of ability” (Rao). Researchers are not sure if there is a correlation between athletics and suicidal behavior because there is a lot of information missing due to under-reporting of mental health concerns in athletes and other inconsistencies. Also, because being an athlete does not make you suicidal and being suicidal does not make you an athlete. Their point in researching this issue is just to bring this situation into the light and give it more attention because it is a problem. Not every athlete is depressed and/or considering suicide, but if there as an athlete who is depressed and/or suicidal, athletics could be a contributing factor to these emotions. Being a student-athlete is a tremendous time commitment along with a large stressor. Many athletes use their sport as a way to escape from their other stressors in life, but, at times, their sport can become one of their stressors and they no longer have it as an escape. Also, the NCAA decided to do this study because they “recently highlighted mental health concerns of student-athletes as an area requiring further attention, citing a gradual increase in suicide rates and increase in the type, percentage, and severity of depression in young adults” (Rao). The NCAA would not have conducted this study if mental health and suicidal tendencies were not becoming an issue among collegiate athletes.

Although there is not enough evidence supporting one side of the argument to conclude whether athletics increases or decreases suicidal behavior, it is clear that colleges need to discuss this topic, among other mental health issues, more because it is an increasing concern. Since it is becoming more of an issue, athletic programs and coaches at college institutions need to address this situation. As stated earlier, suicide is one of the few deaths that can actually be prevented if warning signs are seen early. People can get help. Their lives do not have to end. They just have to get the support and help they need to show them that, as cliché as it is, things do get better and life is worth living. As pointed out in the article about understanding depression and suicide in college athletes, “while much effort has been put into developing and maintaining emergency action plans to manage on-field medical emergencies, only preliminary efforts have been developed to assist the acutely depressed or suicidal athlete through an organized emergency mental health crisis plan” (Rao). Unfortunately, this statement is very accurate. There are always paramedics and other emergency personnel available at athletic events ready to jump in and save an injured athlete, but, currently, there is not anyone to save a mentally ill athlete. In the defense of college athletic programs, it can be challenging to determine if an athlete is struggling mentally because it is not visible to the human eye. You can tell when an athlete is physically injured because they have a limp or a bruise or an inflammation or a broken bone. It is easy to see if someone is physically hurt and it is easy to figure out how to fix the said injury. However, you cannot just look at a person and know that they are not in a good place mentally. You cannot just look at someone and determine that they are depressed or suicidal. This is especially true when dealing with athletes. Toughness in athletics is something that is taught from a very young age. Most athletes have been told ever since they were young to just “rub some dirt on it” and to “suck it up”. These comments are really about not showing weakness or vulnerability.

Athletes put everything they have into their sport and never want to do anything that could jeopardize their opportunity to play the game they love. Because of this, many athletes stay quiet when they are injured in some way and they just play through the pain, if they can, without anybody noticing. So why would they treat a mental illness any differently? The problem with mental illnesses is that often times you cannot tell that a person is drowning unless they come forward and say so themselves. And if the person struggling is an athlete who has been trained to deal with their pain by just sucking it up and not asking for help, they most likely will not come forward and say that they need help. Also, there are many reasons why people do not seek help. One of these reasons is due to a lack of insight and limited awareness about mental health. People who have a lack of insight often say that there is nothing wrong with them and that they do not need help. So, “if someone truly believes they aren’t sick, they feel no need to seek or accept treatment” (Susman). Along with this, they might also lack full awareness of the significance of their mental health issues. Often times, people will just “dismiss or minimize their issues and say, ‘everyone gets stressed out’ or ‘my problems aren’t that bad’ or ‘you’re making more out of this than you need to’” (Susman). So, if you are a coach or a teammate or just a friend of someone who is struggling with a mental health issue but they do not come forward and tell you about it, how are you supposed to know? And how are you supposed to help them?

Fortunately, many people dealing with some kind of mental health issue and suicidal thoughts often do show warning signs. Other people just have to know how to identify and address these warning signs. Each illness has its own symptoms, but there are many warning signs that can indicate a mental illness. Some of these symptoms include: “excessive worrying or fear, feeling excessively sad or low, confused thinking or problems concentrating and learning,

extreme mood changes, prolonged or strong feelings of irritability or anger, avoiding friends and social activities, changes in sleeping habits or feeling tired and low energy, changes in eating habits such as increased hunger or lack of appetite, abuse of substances like alcohol or drugs” and many more (“NAMI”). Along with warning signs of mental health issues, there are also warning signs for a person contemplating suicide. Some of the warning signs are, “threats or comments about killing themselves, increased alcohol or drug use, aggressive behavior, social withdrawal from friends, family, and the community, dramatic mood swings, talking, writing, or thinking about death, and impulsive or reckless behavior” (“NAMI”). It is so important that all people, especially college students or people who work with college students on a daily basis, can recognize these warning signs when they appear. In order to help the mental health of student-athletes, people must be able to identify when something seems off. According to the NCAA handbook on managing student-athletes’ mental health issues, “coaches should be involved in identifying mental health problems because [they]: are in an ideal position to identify when [their] student-athletes are having difficulty because [they] spend so much quality time with them; have considerable power and influence with [their] student-athletes that can increase the likelihood [their] student-athletes will receive timely and effective treatment; can minimize by early detection the effects of the disorder on [their] student-athletes’ health and performance; and can recommend prompt treatment to decrease [their student-athletes’ time away from training and competition” (Thompson and Sherman). Coaches have a huge influence on the lives of their athletes and it is incredibly important for coaches to know just how much of an impact they can make. As a coach dealing with a student who might be at risk for suicide, it is crucial that the coach takes this seriously and makes an immediate referral to a qualified mental health professional. It is so important for coaches to know that they must respond quickly because their

quick response shows their athletes that they take their health and well-being seriously. Also, “depressed individuals engage in negative thinking. They often feel unworthy, or worse yet, worthless. The lack of a quick response on [their coach’s] part may be interpreted as confirmation for the student-athlete that he or she is not worth the time or trouble, which could worsen the student-athlete’s condition” (Thompson and Sherman). Coaches need to recognize that every little thing they do and say and every little thing they do not do and do not say matter when they are dealing with a student-athlete who might be at risk for suicide.

As stated before, the little things that a coach does for a student-athlete who is contemplating suicide matter immensely. One of the little things that can make a huge difference is to have a plan already figured out in case the situation comes up. As pointed out in the NCAA handbook on managing student-athletes’ mental health issues, “a 2 a.m. telephone call about a suicidal student-athlete is not the best time to generate a plan” (Thompson and Sherman). It is important that coaching and sports medicine staffs have a suicide prevention plan in place and everyone involved knows and understands this protocol so they are all on the same page. Having the names and phone numbers of referral sources available is something that is so simple that can make things a lot easier if a situation with a suicidal student does come up. Coaches should have the names and phone numbers of daytime resources such as the student health center, campus counseling centers, and other local services along with after-hour options if the other sources are not 24/7 services. It is also critical to make sure that a suicidal student-athlete is not left alone. Especially if this student-athlete has actually attempted suicide. Many people are scared to talk to someone who has a mental health issue because they are scared that they are going to say the wrong thing and make the situation worse. However, “probably the most serious mistake that anyone can make in (mis)managing a student-athlete with a mental health problem is to respond

as if the problem is trivial or a sign of weakness” (Thompson and Sherman). Coaches should use the follow tips for how to respond when a student-athlete approaches them about a mental health issue: “the student-athlete’s approach indicates a need to talk with you; stop what you are doing, look at the person, and listen; listening is the most important part of communication; it is hard to talk and listen at the same time; if you listen well, you will know when to speak and what to say; accept what you are given, ask questions for clarification without judging; when it appears the person has finished talking, ask if there is anything else he/she needs to say; indicate that you are glad he/she came to you and that you want to help; and make the necessary referral and encourage/support its acceptance” (Thompson and Sherman).The most important thing a coach can do if approached by a student-athlete struggling with a mental health issue is to listen with empathy and make it clear that he/she matters and that what he/she is dealing with is real. Often times, people dealing with a mental health issue just want to be heard and understood. In addition to making sure coaches are prepared and capable of identifying and appropriately reacting to mental health issues, athletes should also be trained in identifying and reacting to mental health issues of their teammates.

Although research on suicide and mental health issues of collegiate student-athletes is underway, it is important to continue to discuss these issues openly and to make sure that the people who surround our student-athletes are equipped to handle their unique mental health challenges.

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