

# STUDENT-ATHLETES AND MENTAL HEALTH: RECOGNIZING CONCERNS AND UTILIZING BEST PRACTICES

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JIM HOWLAND ED.D., LICSW

MERRIMACK COLLEGE



# OVERVIEW

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- Who are our Student-Athletes?
  - Some Data on high school students and student-athletes
  - College student data/connections
  - What does this mean for us today?
- Common mental health concerns
  - Signs and symptoms that may indicate a problem
  - Depression, anxiety, eating disorders, use/abuse of substances
- Helping student-athletes
  - Talking to student-athletes
  - Best practices
  - Effective partnerships and programming to raise access and awareness

# REFLECTION/EXERCISE/BRAINSTORM

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- Think about a student-athlete who may be popping up on your radar.
  - Has there been a change in their personality or behavior?
  - Has there been a change in their mood?
  - What specifically are you noticing?
  - What has changed in their performance in sport?
  - What has changed in their academic performance?
  - Has there been any reports of concerns from teachers? Teammates? Parents?

# MA YRBS DATA HIGHLIGHTS 2017 (COMPARED TO 2015)

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- Fewer students in 2017 (compared to 2015) reported seriously considering suicide, 12% versus 15%
- Tried marijuana before age 13, 4% versus 6%
- Ever drank alcohol, 56% versus 61%
- 24% used marijuana in the month prior to the survey
- 41% reported using a vapor product (20% within the month)
- 15% report being bullied in the past year
- 12.4% reported symptoms of a sports related concussion



# BREAKING DOWN THE MENTAL HEALTH AND SUBSTANCE USE YRBS A BIT MORE

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- 80.9% think that most their age drink alcohol (actual: ever=56.2%, 30 days=31.4%, binge in past 30 days 15.9%)
- 82.4% think most smoke marijuana (actual 37.9%, past 30 days=24.1%, Parental disapproval 71.0%)
- 43.6% report using other drugs with 26% in the past 30 days (marijuana, inhalants, amphetamines, heroin, ecstasy, OTC)
- Feeling sad, hopeless, for 2 weeks or more 27.4%
- Self-injury 14.5%
- Seriously considered suicide 12.4%
- Plan of suicide 10.9%
- Attempted suicide 5.4%
- Attempt that required treatment at a ER or MD 1.9%

# THE GOOD NEWS

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- 75% of the sampled High School students reported having a teacher in school that they could talk to about problems
- 82% reported having a parent or adult family member that they could talk to about things important to them

# HIGH SCHOOL TO COLLEGE TRANSITION

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- Increase in students who have had prior counseling
- Increase in students who have been on medication
- Increase pressure to perform academically, in sport, and be independent
- More freedom, more choices, more decisions (nutrition, hydration, sleep schedule, study time, access to substances)
- Return to the “newbie” have to prove self again

# MORE STATISTICS ABOUT COLLEGE STUDENTS

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- During college years:
  - 40% of students fail to seek help
  - 80% feel overwhelmed by their responsibilities as a student
  - 50% have struggled greatly from anxiety
  - 30% reported that they had problems with school work due to a mental health issue
  - 50% rated their mental health below average or poor
  - But, only 7% of parents reported that their students suffer from mental health issues in college
  - 75% of students with depression do not seek help for it
  - There are more than 1,000 suicides on college campuses each year
  - Suicide is the 3<sup>rd</sup> leading cause of death among college students (also for age 15-24), 2<sup>nd</sup> for age 25-34.

Data is from the National Alliance on Mental Illness



# STATS AND FACTS ABOUT COLLEGE STUDENT-ATHLETES

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- National College Health Assessment surveys (2008, 2012) report
  - 31% of male and 48% of female NCAA student athletes report depression and/or anxiety symptoms.
  - Also at risk for:
    - Clinical or subclinical eating disorders
    - Substance use disorders
    - Gambling disorders
    - Sleep disorders
    - Mood disorders
    - Suicide

WHAT ARE THE CHARACTERISTICS OF  
STUDENT-ATHLETES THAT YOU HAVE  
INTERACTED WITH?

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# STUDENT-ATHLETES MAY BE

- 
- Confident
  - In good physical shape
  - Popular
  - Active socially
  - A good student
  - Disciplined
  - Motivated
  - A leader
  - Cooperative
  - Role Model

# STUDENT ATHLETES

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Define themselves/ identify as athletes

May put pressure on themselves to be the best on the field, court, track, Pool

Have a desire to play their sport in college, pro

**These can add to stress and cause difficulties in coping.**





# IMPORTANT FACTORS

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## Injuries

conflicts with coaches and teammates

loss of playing time

## Burnout

family stressors

sleep disturbance

violence (assault, domestic violence)

substance use

predisposition to depression, anxiety, or other mental illness can create serious concerns



# STUDENT-ATHLETES MAY BE AT RISK FOR MENTAL HEALTH PROBLEMS BECAUSE:

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- Their age increases the risk for certain disorders, such as eating disorders or substance-related disorders
- High School through college is a time of significant transition and change, and psychological disorders can often develop or worsen
- Some mental health problems can be triggered or exacerbated by pressure. These pressures are often unrelated to sport participation, but sport participation may also increase pressure of certain student-athletes.



**THERE IS STILL A STIGMA ABOUT  
ACCESSING HELP FOR MENTAL HEALTH.**

**FOR STUDENT-ATHLETES IT CAN MEAN  
A SIGN OF WEAKNESS AND, LIKE WITH  
PHYSICAL INJURIES, COULD MEAN A  
LOSS OF PLAYING TIME.**



General Signs  
and Symptoms  
that may

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Indicate a  
Possible Mental  
Health Problem



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# BEHAVIORAL SYMPTOMS

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- Disruption in daily activities
- Social withdrawal, more isolated, noticeable change in relationship with friends and teammates
- Irresponsible
- Lying
- Student conduct and/or legal issues, fighting, difficulty with authority
- Decrease in sport and/or academic performance
- Substance use

# COGNITIVE SYMPTOMS

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- Suicidal Thoughts
- Poor concentration
- Confusion/difficulty making decisions
- Obsessive thoughts
- All-or-nothing thinking
- Negative self-talk

# EMOTIONAL/PSYCHOLOGICAL

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- Feeling out of control
- Mood swings
- Excessive worry or fear
- Agitation/irritability
- Low self-esteem
- Lack of motivation

# PHYSICAL/MEDICAL SYMPTOMS

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- Sleep difficulty
- Change in appetite and/or weight
- Shaking/trembling
- Fatigue, tiredness, weakness
- Gastrointestinal complaints, headaches
- Overuse injuries



# DIFFICULTY IN IDENTIFICATION OF DEPRESSION

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- People with depression:
  - often withdrawal socially. Thus, there could be less opportunity to notice a problem.
  - may believe that they do not “deserve” your time and attention. They often do not want to bother others with their difficulties.
  - may hide their symptoms by smiling and acting as though nothing is wrong.
  - may engage in behaviors, such as alcohol or drug use, self-destructive behaviors or develop disordered eating or an eating disorder. These maladaptive coping mechanisms are used in attempt to help manage their depression.

# INTERVENTION FOR SUICIDAL THOUGHTS

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If a student-athlete:

- Expresses a suicidal thought
  - Indicates an intent or plan
  - Or makes a suicide attempt
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- Treat it seriously, do not assume it is “just talk”
  - Make this a priority
  - Follow Agency/school protocol (administration, school counselor, crisis support, parent notification)
  - Do not wait or keep this information to yourself
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- There is a reason the student-athlete shared this to you, coach, teammate

# REASONS FOR RESPONDING QUICKLY AND SERIOUSLY

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- Your quick response lets a student-athlete know that you take his or her health, difficulties and life seriously
- It is better to err on the side of responding too quickly rather than too late.
- Depressed individuals engage in negative thinking. They often feel unworthy or worthless. The delay in response on your part may be interpreted as a confirmation of this thought.
- Coaches, athletic trainers, and fellow teammates have the advantage of noticing the changes much earlier because of the daily contact and work together in sport. With this comes trust.

# SYMPTOMS OF ANXIETY

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- Excessive worry, fear or dread
- Sleep disturbances, especially difficulty falling asleep
- Changes in appetite, including either an increased need to eat when anxious or difficulty eating due to anxiety
- Feelings ranging from a general uneasiness to complete immobilization
- Pounding heart, sweating, shaking, or trembling
- Impaired concentration
- A feeling of being out of control
- Fear that one is dying or going crazy
- Disruption of everyday life.



# TYPES OF ANXIETY DISORDERS

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- Generalized Anxiety Disorder
- Panic Attacks/Panic Disorder
- Obsessive Compulsive Disorder (OCD)
- Phobias
- Post-Traumatic Stress Disorder

# STRESS

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- Stress refers to the tension, and pressure that is common to everyone.
- We all feel stress to some degree.
- Symptoms are both physiological and psychological.
  - Transition
  - Family
  - Pressure to perform
- Stress can affect sleep, eating, relationships, academic and athletic performance.
- Stress and anxiety are not the same thing

# EFFECTS ON PERFORMANCE

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- Not all anxiety is necessarily bad. It actually facilitates focus and improved performance. This is often called activation.
- Instruction and mental skills training can help student-athletes with this. This is not an anxiety disorder.
- Athletes with an anxiety disorder are less able to manage their anxiety in sport and non-sport activities properly and positively.
- Anxiety disorders can negatively affect concentration and focus.
- Negative thinking and negative displays of emotion can occur before, during, and after competitions.

# EATING DISORDERS AND DISORDERED EATING

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- Mental disorders that manifest themselves in a variety of eating and weight related symptoms.
- Anorexia Nervosa, Bulimia Nervosa, and disordered eating.
- More common among college-age females but 10-25% of individuals with eating disorders are male.
- Genetics, personality, socio-culture pressures regarding thinness, social learning, family issues, transition and pressure can influence this condition.
- Although sport participation is mostly a healthy experience, aspects of the sport environment can increase the risk for an eating disorder.

# FEMALE ATHLETE TRIAD

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- Disordered eating
  - Restricting, dieting
- Amenorrhea
  - Loss of menstruation
- Osteoporosis
  - Loss of bone mass



# EFFECTS OF PERFORMANCE

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- Because of inadequate nutrition, Student-athletes with eating difficulties tend to be more malnourished, dehydrated, depressed, anxious, and obsessed (with eating, food and weight).
- These problems decrease concentration and the capacity to effectively deal with emotions on and off the field.
- Physical effects can include decrease VO2Max and running speed, low energy and weakness, dehydration, and increased risk of injury.
- Major health risk to the student; academic performance and sport performance decline .

# SUCCESSFUL TREATMENT AND HEALTH CONSIDERATIONS FOR EATING DISORDERS

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- The health and safety of the student-athlete are always the primary consideration.
- A team approach with the student-athlete, parent, sports medicine/athletic training staff, coach, healthcare providers and counseling staff(in-school and community) is the most effective approach.
- Decisions on play, participation, and academics are best decided by the team mentioned above.



# SUBSTANCES OF ABUSE

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- Alcohol
- Marijuana
- Stimulant-Type
  - Cocaine and Crack
  - ADD medications (Concerta, Adderall, VyVance, Ritalin, Dexedrine)
- Opiates
- Anti-anxiety medications
  - Xanax, Klonopin, Ativan, Valium
- Steroids

# WHY USE SUBSTANCES?

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- Most individuals consume alcohol and drugs to:
  - feel good, have a good time
  - calm themselves
  - to avoid or manage their anxiety
  - Allow them to perform better by helping them relax, get stronger
  - To help them sleep
  - Reduce pain, play through the pain, return to playing quicker



# BRIEF BRAIN CHEMISTRY/SUBSTANCE USE CONNECTIONS

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- Teen brain still developing (until age 26 by some accounts)
- Brain is vulnerable to the effects of alcohol, THC, drugs
  - Brain structure is changed with neurotransmitters that help regulate memory, emotions, and motivation
  - Frequent alcohol use is related to suicide, unwanted pregnancy, school failure, delinquency, STD's, HIV
  - Heavy drinking among youth is a major contributor of violence and sexual assaults
  - Frequent and continuous marijuana use significantly impacts the brain in terms of:
    - Attention, learning, memory and the ability to quickly process information leading to poor academic achievement
    - Poor emotional functioning
    - Impulsivity
    - Decreased motivation
    - Psychological and physical dependence (coping/withdrawal)
    - Worsening of depression and anxiety



# BEST PRACTICES AND RAISING AWARENESS

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# TALKING WITH STUDENT-ATHLETES

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- Teachers, teammates, coaches, and athletic trainers are often the first to know there is a problem.
- Guiding Rule: When you see something, say something.
- Accept that this is a serious problem for the individual: These are illnesses, not choices.
- The student-athlete needs assistance and you are helping them get the help that they need.
- A positive, concerned, and supportive approach is most effective in linking the student-athlete to the support that they need.
- Consultation with school counselor may be available. They can help with a plan.

# WHAT TO DO WHEN A STUDENT APPROACHES YOU (NON CLINICAL SETTING)

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- Stop what you are doing, listen to what the student is saying.
- Accept what you are given and ask questions for clarification without judging.
- Indicate that you are glad that he/she came to you and that you want to help.
- Help them take the necessary next steps in connecting with counseling/support/resources.
- Follow-up with them.

# KNOW YOUR LIMITS

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- Be aware of what is reasonable to expect of yourself.
- You cannot expect to change the person as you have limited control.
- Your biggest role is to recognize the problem and refer to resources.
- When you begin to feel undue stress or worry, it is time to take care of yourself and turn the problem over to someone else.



# KNOW YOUR RESOURCES

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- Schools/Recreation/Coaching Environments/Counseling Center
- Administration
- Counseling Staff/Agencies/Specialists: in-house and community
- Emergency Number/Response
  - Is there a mental health emergency response protocol?
  - Is there a medical response protocol?
- Training for teachers, Para's, coaches, peers, colleagues

# CLINICIANS WORKING WITH STUDENT-ATHLETES

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- Assessment and listening for clues about whether sport is exacerbating symptoms
- Monitoring and evaluating symptoms and changes in mood when playing versus not playing (due to injury, off-season)
- Paying attention to where the motivation to play is coming from
- Assessment of sport/team culture (substance use, bullying, hazing)
- Supporting clients when they achieve goals (selection on elite team, nationals, recruited to college, scholarship) and when they do not

# 4 WAYS TO IMPROVE AWARENESS COMMUNITY AND SCHOOLS

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- Community Awareness Campaigns at the School
  - Newsletters, information nights, events, programming, community experts
- Curriculum-Based Learning (Health class, Biology, Psychology, elective)
  - Mental health topics, mindfulness programs, incorporate into classes
- Developing a safe and supportive environment
  - How inviting is the school counseling office, principal's office, AD's office?
  - How are coaches at handling communication to their team?
- Training for staff, coaches
  - Mental Health First Aid

# ACTION STEPS (COMMUNITY/SCHOOLS)

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- Education/Early Recognition
  - Coaches training/education
  - Information sessions for parents
  - Student-athlete awareness
  - sport psychology programming, mindfulness, stress management, promoting student-athlete wellbeing is the goal
- Effective Referral/Emergency Protocols
  - Who are the school resources?
  - Community resources? Community Mental Health Centers
  - National Suicide Prevention Hotline 1-800-273-TALK (8255)
  - Who knows this and how do they know it?
- Programming/Prevention/Awareness
  - Student programs, student led groups (Colleges have Active Minds, Student-Athlete Council)
  - Hope Happens Here/Student lead awareness campaigns
  - My recent work, “Conversations with College Men” have far exceeded expectations



# SOME EFFECTIVE PROGRAMS AND RESOURCES

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# PREVENTION/PROMOTION/AWARENESS

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- Movie: Angst, Raising Awareness around anxiety
- <https://angstmovie.com>

Features Michael Phelps

55 minute film about anxiety and coping. Interviews children (high school and younger). Excellent for in-service for schools. Just shown at Merrimack and Cabot Street cinema

It is being shown at YNS, LVO site in June

# MICHAEL PHELPS ON DEPRESSION AND GETTING HELP

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- <https://www.today.com/video/michael-phelps-opens-up-about-his-struggle-with-depression-and-how-he-s-found-happiness-today-1115670595783?v=raila&>
- Helpful interview with Michael “It is OK to not be OK”
- Good for CLINICIANS TO SEE AND SHOW CLIENTS YOU ARE WORKING WITH

# VIDEOS ON STUDENT-ATHLETES AND MENTAL HEALTH

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- Athletes Connected (University of Michigan)
- <https://athletesconnected.umich.edu>
- Excellent site with information and testimonials about student-athletes and mental health, videos on coping, other resources



# HOPE HAPPENS HERE

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- Program started at Saint Michael's college
- <https://hopehappenshere.co/index/>
- Won the NCAA Hockey Humanitarian Award
- Movement dedicated to removing the stigma of mental healthy on college campuses
- Has expanded to high schools (chapters are increasing in Vermont and new England)

# MENTAL HEALTH FIRST AID

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- Training, Inservice, National
- <https://www.mentalhealthfirstaid.org/>
- Educational trainings are being done at many schools throughout the country
- Helps identify the warning signs of mental health problems
- Builds and understanding of the important of early intervention
- Teaches individuals how to help a youth in crisis or experiencing a mental health challenge

# CLASSROOM MENTAL HEALTH

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- <https://classroommentalhealth.org/>
- Good resources for teachers and administrators in school settings

# SMALL GROUP DISCUSSION

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- List/discuss the mental health resources available to you and student athletes at your school and in the community?
- What is working well in terms of mental health services?
- What needs improvement?
- Are there any prevention programs/campaigns/student assistance programs/wellness programming offered at your school, agency (mindfulness, etc..)?
- Do you think that your school/agency is active in addressing mental health issues of students?
  - If yes, what is being done to inform, educate, and support students?
  - If no, what are the barriers and what needs to be done to improve this at your school?



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# THANK YOU

JIM HOWLAND  
HOWLANDJ@MERRIMACK.EDU

