









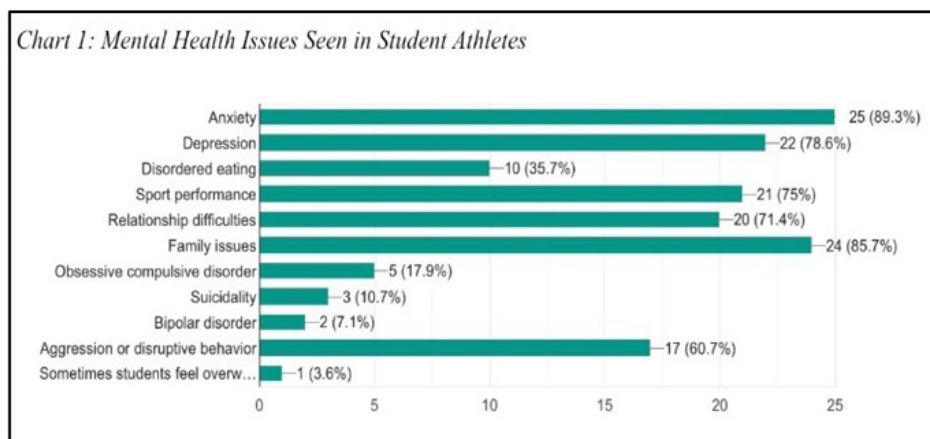


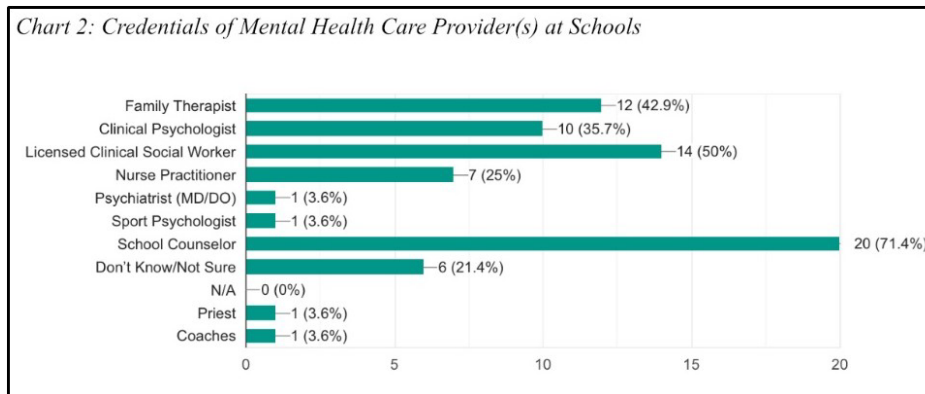


**Table 3.** Perceptions of Athletic Directors

Rate agreement with this statement:	1 (strongly disagree)	2	3	4	5 (strongly agree)
Mental health is important in the care of our student-athletes.	0	0	0	4 (14.3%)	24 (85.7%)
Having a mental health professional within the Athletic Department would reduce barriers for student athletes to receive mental health services.	1 (3.6%)	0	6 (21.4%)	10 (35.7%)	11 (39.7%)
Student athletes have unique stressors that can lead to mental health issues.	0	1 (3.6%)	2 (7.1%)	13 (46.4%)	12 (42.9%)
Mental and physical health are equally important to address in a student athletes' care.	0	0	1 (3.6%)	8 (28.6%)	19 (67.9%)
There is excellent communication at school between the Athletic Department and any mental health provider(s) regarding specific care of student athlete(s).	2 (7.1%)	2 (7.1%)	9 (32.1%)	7 (25%)	8 (28.6%)
A positive sports environment is essential to a student athlete's mental well-being.	0	0	0	8 (28.6%)	20 (71.4%)

In terms of their perceptions regarding mental health, as seen in Table 3, all of the respondents agreed or strongly agreed that mental health is important in the care of their student athletes and that a positive sports environment is essential. Most agree that student athletes have unique stressors that can lead to mental health issues (89.3%) and that mental health is equally important to address in a student athletes' care (96.4%). In terms of having a mental health professional within the athletic department, 75% of respondents believed it would reduce barriers for student athletes to receive mental health services. However, there were varied responses when directors were asked to rate the communication between the athletic department and mental health providers, ranging widely from “No Communication” (7.1%) to “Excellent Communication” (28%). Such communication is essential for providing care to student athletes with any mental health concerns and should be a key matter to address.





Athletic Directors are well aware that some student athletes struggle with mental health issues, as documented in Chart 1. The top five concerns that they have noted are anxiety (89.3%), family issues (85.7%), depression (78.6%), sport performance (75%), and relationship difficulties (71.4%). While not seen by many respondents, it is of high concern that 10.7% of them have seen some student athletes struggle with suicidality.

In response to these concerns, schools can provide important resources for student athletes seeking mental health services. Table 4 documents the responses of the Athletic Directors with respect to the mental health resources and practices at their particular schools. Regarding the availability of counseling for student athletes, 82.1% of respondents noted that their school offered mental health services by a licensed professional and 96.4% responded that all students were eligible to receive mental health services. The respondents further detailed the credentials of the main mental health providers at their schools, seen in Chart 2, as being school counselor (71.4%), licensed social worker (50%), family therapist (42.9%) and clinical psychologist (35.7%). Only one Athletic Director (3.6%) mentioned having a sports psychologist on staff. Furthermore, while a large majority of respondents believed it would be beneficial to have a mental health provider within the athletic department, as mentioned earlier, this was the case at only five of the schools (17.9%).

Regarding the identification and referral of student athletes to mental health practitioners, a large majority (82.1%) of respondents did communicate with their student athletes about the availability of mental health services at their school. However, while almost all Athletic Directors (92.9%) were able to refer students for counseling services, only 39.3% had documented procedures in place to identify when those referrals would be necessary. Similarly, only 14.3% of respondents confirmed using screening instruments to identify mental health issues among student athletes prior to their participation in sports. Finally, while communication within the athletic department about fostering a positive sports environment was carried out by 89.3% of respondents, only slightly less than half (46.4%) instituted concrete programs to create this environment in support of their student athletes' mental health.

It should be noted that there are significant discrepancies between the perceptions held by Athletic Directors regarding mental health and the actual resources made available at schools. Using the figures from the results mentioned above, Table 5 provides a side-by-side comparison of the perceptions of the Athletic Directors with the corresponding practices implemented. The differences are most stark with respect to mental health providers within athletic departments, programs to foster health-promoting environments, and documented procedures to identify mental health issues and make referrals. Further steps will need to be taken by the Athletic Directors to align the practices implemented at their schools with their beliefs on the importance of mental health.



**Table 4.** School Resources and Practices

Survey Questions	Yes	No
<b>Clinical Licensure of Practitioners</b>		
Does your school offer mental health services for students provided by a licensed professional?	23 (82.1%)	5 (17.9%)
Are all students eligible to receive mental health services at your school?	27 (96.4%)	1 (3.6%)
Is there a mental health provider within the Athletic Department that works specifically for student athletes?	5 (17.9%)	23 (82.1%)
<b>Procedures for Identification and Referral of Student Athletes to Qualified Practitioners</b>		
Do you have documented procedures in place to identify mental health issues that may arise among your student athletes during the sports season?	11 (39.3%)	17 (60.7%)
Do you or your staff communicate with the student athletes about the availability of mental health services by the provider(s) at your school?	23 (82.1%)	5 (17.9%)
Are you or your staff able to refer student athletes to the mental health provider(s) at your school for counseling services?	26 (92.9%)	2 (7.1%)
<b>Pre-Participation Mental Health Screening</b>		
Do you use screening instruments to identify mental health issues among your student athletes prior to participation in sports? Screening instruments can include pre-participation forms specific to mental health issues such as Patient Health Questionnaire-2 (PHQ-2), Mood Disorder Questionnaire (MDQ), etc.	4 (14.3%)	24 (85.7%)
<b>Health-Promoting Environments that Support Mental Well-Being and Resilience</b>		
Do you communicate to your staff within the Athletic Department, including coaches, about the importance of fostering an environment that promotes the mental well-being of your student athletes?	25 (89.3%)	3 (10.7%)
Are there programs that your athletic department offers to help foster an environment that promotes mental well-being of student athletes? These can include presentations, retreats, online programs, and mental health days.	13 (46.4%)	15 (53.6%)

**Table 5.** Comparison of AD Perceptions and School Practices

Perception	Practice
Belief that student athletes' mental health is important: 100%	Schools offering mental health resources by licensed professional: 82%
Belief that mental health professional within Athletic Dept is important to reduce barriers: 75%	Schools that have a mental health provider within Athletic Department: 17.9%
Belief that a positive sports environment is essential to student athletes' mental well-being: 100%	Schools that offer programs to help foster health-promoting environment: 46.4%
Belief that ADs can refer students for counseling: 92.9%	Athletic depts with documented procedures to identify mental health issues/make referrals: 39.3%

## Content Analysis of Handbooks

Of the 14 Handbooks chosen for content analysis, there were eight (8) public schools represented and six (6) private schools, with a fairly even split between schools with small and large student populations that ranged from 269 to 2,460. The majority of the Handbooks focus on issues like eligibility requirements, sports mission statement, physical participation forms, athletic fees and rules of conduct. They are modeled after the FHSAA rules and regulations published annually. Only one Handbook actually included the phrase “mental health.” However, there were references to some mental health practices in all but one of the Handbooks.

The coding sheet included in Table 6 documents all the references found in each of the 14 Handbooks relating to the four Mental Health Best Practices organized by category. As noted, there were not many references found. In fact, only five schools’ Handbooks had any mention of one of the first three Best Practices, and even then, the references were very minor and generally made in a separate context. For instance, Schools A and I included in their Handbooks a reference to services available to student athletes with a licensed professional such as a school counselor or guidance counselor. However, this was only briefly mentioned in the Handbook in sections related to assistance with college recruitment or in the event of threats of violence. Also, Schools D, L, and M mention reserving “the right to seek medical attention for all athletes should an emergency arise under our supervision.” While not specifically defined, such referral could be seen to apply to mental health emergencies. Interassociation recommendations and guidelines specify that events constituting a mental health crisis require a plan of action by the school; these mental health emergencies can include suicidal ideation, threatening behavior, acute psychosis, or intoxication and drug overdose (Neal, 2015). School A further specifies that referrals should be made in the event a student athlete makes a threat of violence to others. Finally, with respect to pre-participation mental health screening, none of the Handbooks make any reference at all.

The only Mental Health Best Practice that was consistently mentioned in almost all the Handbooks was the fourth category of Health-Promoting Environment. It is clear that schools understand that a “safe” sports environment with “wholesome competition” contributes to the “development of healthy minds” (Schools A and G). Schools want to promote such an environment by encouraging their student athletes to practice values like “teamwork,” “respect,” and “honesty” (Schools D, E, G, H, L and M), and recognize that “coaches and staff” have a role to play in ensuring such an environment (Schools C and H). Furthermore, one Handbook noted that “exemplary levels of sportsmanship” should be displayed by sponsors and fans as well to further this goal (School F). Finally, two of the schools specifically acknowledged that negative actions such as “hazing, harassment, and bullying” can adversely affect the mental health and safety of student athletes and will not be tolerated (Schools B and I).

**Table 6.** Coding Sheet of Athletic Handbooks

	1-Clinical Licensure of Practitioners Providing Mental Health Care:	2-Procedures for Identification and Referral of Student-Athletes to Qualified Practitioners	3-Pre-Participation Mental Health Screening	4-Health-Promoting Environments That Support Mental Well-Being and Resilience
	i.. Availability of Mental Health Services for Student Athletes at School ii. Licensure of School Mental Health Practitioner	i. Identification of Psychological Concerns ii. Procedures for Referral to Mental Health Practitioner by Athletic Department Staff	i. Use of Pre-Screening Forms Specific to Mental Health Concerns ii. Recommendations for Educational Materials for Student Athletes on Psychological Health	i. School-sponsored Programs that Promote Mental Well-Being for Student Athletes ii. Communication to Raise Awareness of Mental Health Services
A	"Treatment or consultation by a psychologist or psychiatrist at the parents' expense and/or by the school counselor, both of whom may be asked to submit a written evaluation."	"The disciplinary consequences for a student whose verbal or written comments...threaten serious bodily harm to another student or member of the faculty or staff or destruction of property, may include...Treatment or consultation by a psychologist or psychiatrist at the parents' expense and/or by the school counselor."		"Contributes positively toward the development of a young person's health, physical activity, social competence, and disciplines."
B				"Hazing, harassment, and bullying will not be tolerated in any form. Hazing and bullying is defined by the Athletic Department as: "Any type of activity that adversely affects the <b>mental</b> or physical safety of the student."
C				"It is the responsibility of each student/athlete, under the guidance of a coach, to prepare physically as well as mentally, prior to the sports season."
D		Reserve the right to seek medical attention for all athletes should an emergency arise while under our supervision.		"We will instill in our athletes a perspective of teamwork, commitment, respect, self-discipline, and a positive work ethic."
E				"We will instill in our athletes a perspective of teamwork, commitment, respect, self-discipline, and a positive work ethic."
F				"To enhance and promote our sportsmanship and citizenship goals, all students, sponsors and fans representing our school are expected to display exemplary levels of sportsmanship during all school-sponsored events and activities."
G				"We emphasize caring, honesty, respect, and responsibility. More than "winning," we focus on the experience of wholesome competition and the development of healthy minds and bodies."
H				"The athletic program at [our] School provides an opportunity to learn life lessons, develop character and skills that will help our student athletes reach their full potential while striving for excellence and developing future Christian leaders."
I	"Guidance counselors are available to assist with this process."			"Hazing or peer harassment that recklessly or intentionally endangers the mental health, physical health, or safety of a student for the purpose of initiation or membership in, or affiliation with any team will not be tolerated."
J				"Our coaches and staff will diligently and vigorously pursue a safe, competitive and Christ-like environment for your sons and daughters."
K				"Our goal is to help develop our student-athletes physically, psychologically, and socially while teaching them to strive for excellence."
L		"The School and its Athletic Department reserve the right to seek medical attention for all athletes, should an emergency arise while under the care of the Athletic Department "		"We will instill in our athletes a perspective of teamwork, commitment, respect, self-discipline, and a positive work ethic."
M		"Reserve the right to seek medical attention for all athletes should an emergency arise while under our supervision."		"To guide the student-athletes to build their character through sports by modeling...values: Self-esteem, Honesty, Attitude, Responsibility. Knowledge."

## Discussion

To assess the extent to which secondary schools in South Florida have implemented the recommended best practices to support the mental health of their student athletes, the results from the survey responses and the handbook content analysis will be jointly analyzed within the context of each of the recommended Mental Health Best Practices.

### Clinical Licensure of Practitioners

Schools should ensure that student athletes have access to a mental health care provider that is clinically licensed with special training specific to athletes (NCAA, 2020). While most schools have mental health practitioners on staff, a licensed or certified professional was more prevalent in public schools (92.9%) than in private schools (71.4). However, these practitioners were largely not located within the school's athletic department. As noted in Mental Health Best Practices, availability of a mental health provider within the athletic department is key because student athletes would be more likely to seek mental health services if the provider was easily accessible (NCAA, 2020). In addition, there was virtually no mention in the Handbooks of licensed mental health professionals at school. Without this information being provided in written form, it could lead to a decreased awareness among students and their parents of available mental health resources leading to an underutilization of these services at school.

### Procedures for Identification and Referral of Student Athletes to Qualified Practitioners

Athletic departments should have a specific written procedures and training to identify and refer student athletes with mental health concerns to qualified practitioners (NCAA, 2020). Although most Athletic Directors and their staff, including coaches, are able to refer student athletes to counseling services, 60.7% did not have documented procedures to do so. Similarly, only four of the Handbooks mention such referrals and solely in the context of physical emergencies and threats of violence. As noted in Mental Health Best Practices, athletic departments should have a written plan for management of mental health emergencies as well as routine referrals so that all staff members are aware of how the process should be conducted (NCAA, 2020). Furthermore, communication between the athletic department and school mental health providers is key for this practice. Unfortunately, such communication was lacking for 46% of athletic departments, with 7.1% having no communication at all.

### Pre-Participation Mental Health Screening

Schools should implement mental health screening tools for student athletes prior to their participation in athletic activities (NCAA, 2020). Pre-participation screening forms for mental health were used by only 14.3% of secondary schools even though these forms, such as PHQ-2, are routinely used at the collegiate level. None of the Handbooks had any reference to this practice. It is to be noted that the FHSAA Pre-participation Physical Evaluation Form required by all schools does include two questions related to mental health: one on the stress level of the student athlete and another on weight/eating patterns. The Mental Health Best Practices recommends a series of nine questions about mental well-being on pre-screening forms, including on anxiety, depression, disordered eating, and substance abuse, which could identify concerns prior to the start of athletic competition (NCAA, 2020).

## Health-Promoting Environments That Support Mental Well-Being and Resilience

Athletic departments should work to develop an environment for their student athletes that supports mental well-being and promotes mental health care-seeking (NCAA, 2020). While almost all the Athletic Handbooks included references to Health-Promoting Environments, they were principally found in the mission statements of the various schools and with relatively brief mention. Only two of the schools included a section on “Hazing, Harassment, and Bullying” which could negatively impact the mental health and safety of all student athletes. Furthermore, more than half of the schools lacked programs to foster a health-promoting environment with an emphasis on sportsmanship, inclusion, and positive interactions. Such programs are also key in conveying the importance of seeking care for mental health issues. As noted in Mental Health Best Practices, it is recommended that educational information be communicated to student athletes in order to “create a culture of awareness and sensitivity to mental health disorders” (NCAA, 2020).

## Conclusion and Implication

While there is some variability in the mental health resources available to support student athletes in secondary schools in South Florida, few schools have taken the necessary steps in accordance with the recommendations set forth by the interassociation work group as summarized in the Mental Health Best Practices published by the NCAA. Across the different categories, the secondary schools were largely lacking in the implementation of the recommended practices. Without these policies in place, student athletes may not have their mental health concerns fully addressed. This void presents serious implications in light of the increasing mental health issues among adolescent student athletes. In order to decrease variability in mental health best practices across schools, the national (National Federation of State High School Associations, NFHS) and state (FHSAA) governing bodies should take a stronger stance in prioritizing the implementation of these practices. A possible course of action may be to make the recommended practices mandatory similar to what these organizations have done with the online courses regarding concussions. Without such action, schools are left without specific guidance on developing appropriate policies on mental health.

## Limitations

There are limitations that should be discussed when analyzing the results of this study. First, the Athletic Directors that completed the survey represent only a portion of the schools in South Florida. Despite the email reminders, many directors opted not to participate. It is possible that directors from schools without good mental health practices may have been less inclined to respond to the survey, thereby affecting the results. In addition, some Athletic Directors may have been hesitant to discuss the concerns of their student athletes. One such Athletic Director replied to the initial email that while she appreciated the research project, she would not feel comfortable discussing the mental health issues of her student athletes, despite the assurance of confidentiality.

Another limitation of the study is the inconsistency of information included in the Athletic Handbooks. While some were very comprehensive in detailing the athletic department’s policies, others offered a simplified version. Some schools had no school handbook at all, but rather merely made reference to the applicable rules and regulations published by the FHSAA. This fact made it difficult to identify handbooks for the content analysis portion of the study.

## Future Direction

Future research on this topic can incorporate the perspectives of student athletes themselves as well as of school mental health practitioners in order to get a more complete view. It would be useful to understand whether student athletes view the practices implemented by their schools as sufficient to address their mental health needs. In addition, it may be useful to compare the results with other parts of Florida and/or the United States, as well as to examine differences between schools in rural versus urban areas.

## Acknowledgments

I would like to thank my advisor for the valuable insight provided to me on this topic.

## References

- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). <https://doi.org/10.1176/appi.books.9780890425596>
- Centers for Disease Control and Prevention. (2021, May 12). *Mental health*. CDC. <https://www.cdc.gov/healthyyouth/mental-health/index.htm#:~:text=Mental%20Health%20Is%20A%20Growing%20Problem,-chart%20bar%20icon&text=More%20than%201%20in%203,a%2044%25%20increase%20since%202009>
- Centers for Disease Control and Prevention. (2021, June 28). *About Mental Health*. CDC. <https://www.cdc.gov/mentalhealth/learn/index.htm>
- Etzel, E. F. (2006). Understanding and promoting college student-athlete health: Essential issues for student affairs professionals. *Journal of Student Affairs Research and Practice*, 43(3), 894-922. <https://doi.org/10.2202/1949-6605.1682>
- Kessler, R. C., Angermeyer, M., Anthony, J. C., De Graaf, R. O. N., Demyttenaere, K., Gasquet, I., ... & Üstün, T. B. (2007). Lifetime prevalence and age-of-onset distributions of mental disorders in the World Health Organization's World Mental Health Survey Initiative. *World psychiatry*, 6(3), 168. <https://pubmed.ncbi.nlm.nih.gov/18188442/>
- Kroshus, E. (2016). Variability in institutional screening practices related to collegiate student-athlete mental health. *Journal of Athletic Training*, 51(5), 389-397. <https://doi.org/10.4085/1062-6050-51.5.07>
- National Collegiate Athletic Association. (2020, January). *Mental Health Best Practices*. NCAA. <https://www.ncaa.org/sports/2016/5/2/mental-health-best-practices.aspx>
- National Federation of High Schools. (2021, November 10). *Surveys: Reduction in concussions, improvement in mental health of high school athletes*. NFHS. <https://www.nfhs.org/articles/surveys-reduction-in-concussions-improvement-in-mental-health-of-high-school-athletes/>

- Neal, T. L., Diamond, A. B., Goldman, S., Klossner, D., Morse, E. D., Pajak, D. E., ... & Welzant, V. (2013). Interassociation recommendations for developing a plan to recognize and refer student-athletes with psychological concerns at the collegiate level: an executive summary of a consensus statement. *Journal of Athletic Training*, 48(5), 716-720. <https://doi.org/10.4085/1062-6050-48.4.13>
- Neal, T. L., Diamond, A. B., Goldman, S., Liedtka, K. D., Mathis, K., Morse, E. D., ... & Welzant, V. (2015). Interassociation recommendations for developing a plan to recognize and refer student-athletes with psychological concerns at the secondary school level: a consensus statement. *Journal of Athletic Training*, 50(3), 231-249. <https://doi.org/10.4085/1062-6050-50.3.03>
- Pritchard, M., & Wilson, G. (2005). Comparing sources of stress in college student athletes and non-athletes. *Athletic Insight: The Online Journal of Sports Psychology*, 5(1), 1-8. [https://scholarworks.boisestate.edu/psych\\_facpubs/143/](https://scholarworks.boisestate.edu/psych_facpubs/143/)
- Robinson II, J. (2020). What Is the Availability, Accessibility and Scope of Mental Health Services for College Athletes? Where Do Social Workers Fit in? *School of Social Work Undergraduate Honors Theses*. <https://scholarworks.uark.edu/scwkuht/5/>
- Ryan, H., Gayles, J. G., & Bell, L. (2018). Student-athletes and mental health experiences. *New Directions for Student Services*, 2018(163), 67-79. <https://doi.org/10.1002/ss.20271>
- Substance Abuse and Mental Health Services Administration. (2020, December 30). *Behavioral Health Barometer: United States, Volume 6*. SAMHSA. <https://www.samhsa.gov/data/report/behavioral-health-barometer-united-states-volume-6>
- Sudano, L. E., & Miles, C. M. (2017). Mental health services in NCAA Division I athletics: A survey of head ATCs. *Sports health*, 9(3), 262-267. <https://dx.doi.org/10.1177%2F1941738116679127>
- World Health Organization. (2018, March 30). *Mental health: Strengthening our response*. WHO. <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>