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Risk Management of Mental Health of College Athletes

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Risk Management of Mental Health of College Student-Athletes

A Thesis Submitted to the Faculty of the University of North Georgia in Partial Fulfillment of the Requirements for the Degree Bachelor of Business Administration in Management with Honors

Renee VanHorn

April 2018

University of North Georgia
Abstract

Mental health is a prevalent and significant issue in college athletics today. In today's society, there is a great deal demanded from college student-athletes and they may feel pressured to cover up any mental health issues that they may be suffering. The purpose of this study is to examine different risk management strategies that an athletic department can implement to help prevent mental health issues. This study will survey college student-athletes at the University of North Georgia and examine how comfortable they are with completing these risk management strategies and if they believe that the strategies will be effective. If the student-athletes buy into the strategies implemented by the athletic department, then they will participate in them honestly and carefully. Thus, if the student-athletes honestly and carefully participate in the strategies, then the strategies will be able to reduce and prevent mental health issues.
Introduction

The mental health of college student-athletes has become an important issue that needs to be addressed as quickly and efficiently as possible. The athletic department at a university plays a key role in helping student-athletes’ suffering from mental health issues and responding to a student-athlete in need of help. If a student-athlete suffers from a mental health issue and the issue is not addressed, in severe cases, student-athletes can commit, and have committed acts of self-violence, including suicide. Annually, roughly one out of 100,000 college student-athletes take their own life (Rao et al., 2015). Considering that there are roughly 460,000 college student-athletes in the U.S. currently, the annual number of student-athletes that commit suicide is roughly four per year. By implementing various strategies to assist in educating about, preventing, and resolving mental health issues, athletic departments can ameliorate this horrific statistic and move it closer to zero.

Public and open discourse about mental health issues is an important step towards preventing it. There is a stigma regarding mental health that obstructs people from discussing the issue. At a young age, people are taught that having a mental health issue means that they are unstable and that, if discovered, will result in them being treated as outcasts in society. However, this stigma needs to be broken. Educating coaches and student-athletes is an important way to get assistance to student-athletes in need. Often times teammates and coaches do not recognize signs and symptoms of a student-athlete who is suffering or they do not know how to discuss the issue with a suffering student-athlete. An athletic department is responsible not only for producing winning teams and eligible student-athletes, but also for offering assistance to student-athletes that need psychological help.

This study seeks to advance educating on strategies to break the stigma of mental health issues, educating student-athletes and coaches about referring struggling student-athletes, and how to identify appropriate risk management strategies to prevent and solve mental health issues. This study will further help pinpoint which strategies student-athletes are comfortable participating in and believe will be effective. If it is detected that a student-athlete is struggling with a mental health issue, then athletic departments can get them the appropriate help they need.
Review of Literature

Breaking the Stigma

Student-athletes are taught at a young age that they need to be tough and push through pain and injuries. This “tough it out” mentality has encouraged student-athletes to treat their mental health in the same manner and has created a stigma around mental health issues. Bruce Blaine defines stigma “as a mark or flaw resulting from a personal or physical characteristic that is viewed as socially unacceptable” (2000). Roughly fifteen percent of college student-athletes suffer from some sort of psychological problem that is severe enough to need intervention (Watson, 2005). In a 2012 study, Sandy Ackerman investigated factors that can cause this stigma, emphasizing athletics’ “closed culture” and extremely tight scheduling as the two most significant factors (2012). Ackerman created a psycho-educational workshop that helps change the student-athlete’s perception of mental health. The workshop takes a little over an hour, so it is entirely time efficient and can be done in big or small groups. The results showed that in the post-completion period of the workshop there was a decrease of stigma among student-athletes (Ackerman, 2012). Ackerman’s study is important because it shows that perceptions can be changed in a positive manner.

Attitudes and opinions about mental health by student-athletes are shaped by the culture of an athletic department. While athletic administrators play a distant role in a student-athlete’s life, they have profound influence over the culture of the department. Several studies on this subject have been focused on the effects of the athletic culture on students’ mental health. Moreland, Coxe, and Yang (2017) assert that athletic departments should create room in their budget to help develop a sports psychology consulting program with appropriate staff. By providing this service, the athletic department is demonstrating that the student-athlete’s overall health is their top priority and they are creating a culture that does not have a negative perception of mental health.

One of the best ways to break down the stigma of mental health in college athletics is to change society’s attitude towards mental health. Whato, Swift, and Whipple (2016) claim that to change society’s view, the issue of mental health needs to become normalized. People also need to be taught that their
mental health issues are not their fault and that appropriate treatment can improve their issues (Wahto et al., 2016). Once student-athletes feel that getting help is nothing to be shameful of, the stigma of mental health will be improved.

**Educating Student-athletes, Athletic Trainers, and Coaches about Referrals**

In addition to research on the stigma that prevents student-athletes and administrators from addressing mental health issues, there has been some scholarly exploration of how mental health education should be handled to more effectively protect student-athletes. In 2014, Madison Holleran, a track student-athlete at the University of Pennsylvania, committed suicide. Madison’s coaches, parents, athletic trainers, and teammates all knew she was unhappy and struggling; however, they were unable to identify signs and symptoms that indicated she was mentally ill. Jayce Born (2017) argues in her article, “National Protection of Student-athlete Mental Health,” that the National Collegiate Athletic Association (NCAA) should take leadership in educating coaches and student-athletes about how to identify a student-athlete that is mentally unhealthy. By creating a national standard, the NCAA can help prevent cases such as Madison’s.

Identifying signs and symptoms of a suffering student-athlete is difficult. However, there are some basic behavioral triggers that coaches, athletic trainers, and teammates can be aware of. Claudine McCarthy (2016) argues that triggers that can cause a student-athlete to become mentally unhealthy are injuries, benching, and academic stress. Furthermore, there are more issues such as anxiety, depression, and substance abuse that can stem from these triggers. By educating coaches, athletic trainers, and student-athletes about these signs and symptoms, they can identify that a student-athlete is mentally unhealthy and begin the referral process. The referral process is an essential step in treating mental health. There are many training techniques available to help with the process. A website created by Van Raalte, Andrews, Cornelius, Diehl, and Brewer (2015) teaches techniques and strategies for properly referring a student-athlete. Athletic departments can easily encourage coaches, athletic trainers, and student-athletes to review this website for their own health and the health of all the student-athletes.
Educating coaches, athletic trainers, and teammates about how to correctly refer a student-athlete is a key step in providing the suffering student-athlete the appropriate professional help. Neal et al. (2013) says that when referring a student-athlete, the conversation should be about them as a person rather than them as a student-athlete. The conversation should be in private and confidential to make the student-athlete feel comfortable with seeking help (Neal et al., 2013). In some cases, a student-athlete may approach a coach or athletic trainer about their issues and coaches and athletic trainers will have the responsibility of helping the student-athlete.

When a student-athlete seeks for help, the most important thing is to practice active listening. The listener should ask questions without making the student-athlete feel as if they are being judged and indicate that it is good that they asked for help. The purpose of the conversation regardless of who initiated it, is to get proper help. Referrals are most effective when they are made to a specific person. Thompson and Sherman (2007) recommended that when setting up the first consultation, someone should help the student-athlete make the appointment. This step shows the student-athlete that they have a support system that will continue to support them throughout the process. Referrals are an important part in getting mentally ill student-athletes the proper treatment they need to become healthy again.

**Providing Appropriate Services**

In recent years, the University of Tennessee at Knoxville (UT) has added an in-house mental health component. Since the athletic department added the program, it has prevented at least three suicides and helped many other student-athletes who were suffering from mental health issues (Peters, 2006). Emmett Gill (2008) argues that programs such as the one at UT should be created at all universities. The purpose of social work is to promote the well-being of an individual and to assist them in maintaining a healthy life. By incorporating a sport psychologist, with knowledge of social services, into an athletic department, the risk of student-athletes developing mental health issues decreases (Gill, 2008). However, incorporating a sport psychologist or adding an in-house mental health component can be an expensive endeavor.
Not every athletic department can financially afford to create an in-house mental health program or hire a sports psychologist. Sudano, Collins, and Miles (2017) recommended that these athletic departments consider developing a relationship with the counseling services department already on campus. The athletic department should create a contact within counseling services that can serve as a sport psychologist for the department. Since this contact is already employed by the university, the athletic department will not have to financially compensate them for additional services. It is also suggested to develop a relationship with a local healthcare provider who has the resources to deal with mental health issues (Sudano, Collins & Miles, 2017). This opportunity gives the student-athlete an additional resource outside of the university if they feel the need to go find help in the private sector.

At the college level, there are a variety of mental health services provided to a student-athlete. However, there is a lack of standardization of these services across different universities. Sudano and Miles (2016) contend that there is an opportunity to create a standard that can be used across the country and the NCAA should pioneer the creation of that standard. The standard can be shaped by using an integrated care model and by increasing the use of validated screening tools to deliver constant treatment to student-athletes (Sudano & Miles, 2016). By forming a standard integrated care model, athletic departments at all levels with have the appropriate resources to provide their student-athletes with appropriate services to help with their mental health issues.

In addition to the strategies the NCAA has adopted when it comes to providing service to mentally unhealthy student-athletes, athletic departments should have a response plan for getting a student-athlete the appropriate help. Herb Appenzeller (1993) argues that this response plan should put the welfare of the individual first. This response plan should include the proper steps for identifying symptoms and signs of a mentally unhealthy student-athlete, referring the student-athlete to appropriate professional help, and following up after the student-athlete has been treated (Appenzeller, 1993). By having a response plan in place, the athletic department can act quickly if an issue arises.
Research Question

In recent years, there has been a push to break the stigma of mental health, educate student-athletes, coaches, and athletic trainers about referrals, and provide appropriate services. However, there are limited studies that discuss which risk management strategies will help prevent and reduce mental health issues and which strategies student-athletes are accepting of. Student-athletes were asked their opinions on what strategies an athletic department can implement or improve to help prevent mental health issues, specifically what risk management strategies they are comfortable completing and believe will be effective.

Since the topic of mental health is a recent concern, athletic departments are still learning how to manage the mental health of student-athletes. This research investigated risk management strategies from previous research and the results of the previous research was then analyzed to choose the best strategies. The strategies that are implemented must accepted by the student-athletes if they are going to be effective and worthwhile.

Method

Participants

To investigate the issue, this study surveyed current student-athletes. The student-athletes sampled were current, eligible student-athletes at the University of North Georgia (UNG) during the 2017-2018 academic year. UNG is a NCAA Division II institution that has thirteen different varsity teams that compete in three different championship seasons (fall, winter, and spring). This sampling produced a diverse group which included different genders, ages, races, and nationalities.

Materials

The survey (Appendix A) presented questions soliciting information about current strategies implement at the university, the effectiveness of those strategies, and other strategies that could potentially be implemented. Student-athletes were sent the survey electronically and asked to answer a series of questions. The types of questions asked were multiple choice and open-ended questions. The subjects took the survey on their own time and the location of their choice, away from a team atmosphere
where they answered the questions without any influence from others. The responses of the student-athletes were anonymous and complied together for comparison. Out of the 221 student-athletes who received the survey, 67 completed the survey for a 30.32% response rate.

The first four questions of the survey contained demographic questions. These demographic questions were collected for exploratory purposes. Questions five through fifteen were Likert scale questions that asked student-athletes about strategies to help prevent mental health issues and the effectiveness of the strategies. The remaining two questions were free response questions where student-athletes could provide other strategies and provide feedback regarding the survey.

By comparing the responses of the survey, it shows which strategies the student-athletes believe will be most effective. It also reveals what current strategies are working and how they can be fine-tuned to be more effective. The responses from the student-athletes are valuable because they give a first-hand account into what the student-athletes want and what they will respond to positively.

**Results**

A descriptive study was conducted to explore the responses from the surveys. Descriptive statistics allow the responses to be organized and presented in frequency tables. By summarizing the frequencies and percentages of the responses for each question, the data was structured so that trends can be appreciated and analysis can be completed.

Did student-athletes know that UNG requires all student-athletes to take a pre-participation mental health screening? Are the student-athletes comfortable completing the screening? The results of this question are listed in Table 1. The majority of student-athletes (67.16%) were aware that they had to complete a mental health screening before they were cleared to participate in their sport. Furthermore, out of the 45 that answered yes, 80.00% of the student-athletes were extremely or moderately comfortable with completing the screening. Out of the remaining responses, 20.00% was neither comfortable or uncomfortable completing the survey and 0.00% said that they were moderately or extremely uncomfortable.
Table 1. Pre-Participation Screening

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you know that UNG requires all student-athletes to take a pre-participation mental health screening?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>45</td>
<td>67.16</td>
</tr>
<tr>
<td>No</td>
<td>22</td>
<td>32.84</td>
</tr>
</tbody>
</table>

Student-athletes that said Yes (n=45)

<table>
<thead>
<tr>
<th>Are you comfortable completing the pre-participation screening?</th>
<th>Frequency</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely Comfortable</td>
<td>24</td>
<td>53.33</td>
</tr>
<tr>
<td>Moderately Comfortable</td>
<td>12</td>
<td>26.67</td>
</tr>
<tr>
<td>Neither Comfortable or Uncomfortable</td>
<td>9</td>
<td>20.00</td>
</tr>
<tr>
<td>Moderately Uncomfortable</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>Extremely Uncomfortable</td>
<td>0</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Are student-athletes comfortable with taking a mental health screening during their championship season? Do they think that the screening will be an effective way to assess the mental health of student-athletes? The results of this question are listed in Table 2. When asked about completing a mental health screening during their championship season, 79.10% of student-athletes said that they would be extremely or moderately comfortable taking the screening. While majority of student-athletes are comfortable with taking the survey, 17.91% said that they were neither comfortable and uncomfortable and 5.97% were moderately uncomfortable. None of the student-athletes said that they would be extremely uncomfortable with taking the survey during their championship season.

Furthermore, out of the 79.10% that said that they were comfortable completing the screening, 69.81% believe that screening student-athletes during their championship season would be an extremely or very effective way to assess the mental health of student-athletes.
Table 2. Championship Season Screening

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>How comfortable would you be with participating in a mental health screening during your championship season?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extremely Comfortable</td>
<td>29</td>
<td>43.28</td>
</tr>
<tr>
<td>Moderately Comfortable</td>
<td>24</td>
<td>35.82</td>
</tr>
<tr>
<td>Neither Comfortable or Uncomfortable</td>
<td>12</td>
<td>17.91</td>
</tr>
<tr>
<td>Moderately Uncomfortable</td>
<td>2</td>
<td>5.97</td>
</tr>
<tr>
<td>Extremely Uncomfortable</td>
<td>0</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Student-athletes that said Extremely/Moderately Comfortable (n=53)

Do you think this would be an effective way to assess the mental health of student-athletes since they are under greater stress during their championship season?

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely Effective</td>
<td>14</td>
<td>26.42</td>
</tr>
<tr>
<td>Very Effective</td>
<td>23</td>
<td>43.39</td>
</tr>
<tr>
<td>Moderately Effective</td>
<td>13</td>
<td>24.53</td>
</tr>
<tr>
<td>Slightly Effective</td>
<td>3</td>
<td>5.66</td>
</tr>
<tr>
<td>Not Effective at All</td>
<td>0</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Are student-athletes comfortable with completing a post-season mental health screening? Do they think that the screening will be an effective way to assess the mental health of student-athletes? The results of this question are listed in Table 3. When asked about taking a post-season mental health screening, 50.75% of the student-athletes said that they were extremely comfortable taking the screening and 34.33% were moderately comfortable. Despite most student-athletes noting their comfort level of the mental health screening, 11.94% were neither comfortable or uncomfortable taking the survey. Again, none of the student-athletes were extremely uncomfortable.

Additionally, out of the 85.08% that were comfortable taking the screening, 66.67% of the student-athletes believe that the screening would be an extremely or very effective way to assess the mental health of student-athletes. Only one student-athlete believed that the post-season screening would not be effective.
Table 3. Post-Season Screening

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Would you be comfortable with completing a post-season mental health screening a few weeks after the end of your championship season?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extremely Comfortable</td>
<td>34</td>
<td>50.75</td>
</tr>
<tr>
<td>Moderately Comfortable</td>
<td>23</td>
<td>34.33</td>
</tr>
<tr>
<td>Neither Comfortable or Uncomfortable</td>
<td>8</td>
<td>11.94</td>
</tr>
<tr>
<td>Moderately Uncomfortable</td>
<td>2</td>
<td>2.98</td>
</tr>
<tr>
<td>Extremely Uncomfortable</td>
<td>0</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Student-athletes that said Extremely/Moderately Comfortable (n=57)

<table>
<thead>
<tr>
<th>Do you think this would be an effective way to assess the mental health of student-athletes because some student-athletes go through post-season depression?</th>
<th>Frequency</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely Effective</td>
<td>16</td>
<td>28.07</td>
</tr>
<tr>
<td>Very Effective</td>
<td>22</td>
<td>38.60</td>
</tr>
<tr>
<td>Moderately Effective</td>
<td>16</td>
<td>28.07</td>
</tr>
<tr>
<td>Slightly Effective</td>
<td>2</td>
<td>3.51</td>
</tr>
<tr>
<td>Not Effective at All</td>
<td>1</td>
<td>1.75</td>
</tr>
</tbody>
</table>

Are student-athletes comfortable with participating in a mental health workshop? Do they think that the workshop would help student-athletes to be equipped with techniques and strategies to help them prevent mental health issues? The results of this question are listed in Table 4. When asked about completing a mental health workshop with a small group of student-athletes, only 47.76% of student-athletes said that they would be extremely or moderately comfortable with the mental health workshop. Surprisingly, 7.46% said that they would be extremely uncomfortable completing the workshop. While 20.90% said they were neither comfortable or uncomfortable, the remaining 23.88% stated they were moderately uncomfortable.

Out of the 47.76% of student-athletes that were comfortable with the workshop, majority (65.63%) of them believe that it would be an extremely or very effective way to equip student-athletes with techniques and strategies to help prevent mental health issues. From the remaining responses, 21.87% believe it would be moderately effective and 12.50% believe it would be slightly effective. Again, none of the student-athletes believe that is would not be effective.
Table 4. Mental Health Workshop

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Would you be comfortable with completing a mental health workshop with a small group of 5-7 student-athletes?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extremely Comfortable</td>
<td>11</td>
<td>16.42</td>
</tr>
<tr>
<td>Moderately Comfortable</td>
<td>21</td>
<td>31.34</td>
</tr>
<tr>
<td>Neither Comfortable or Uncomfortable</td>
<td>14</td>
<td>20.90</td>
</tr>
<tr>
<td>Moderately Uncomfortable</td>
<td>16</td>
<td>23.88</td>
</tr>
<tr>
<td>Extremely Uncomfortable</td>
<td>5</td>
<td>7.46</td>
</tr>
</tbody>
</table>

Student-athletes that said Extremely/Moderately Comfortable (n=32)

Do you think that a workshop would be an effective way to help student-athletes to be equipped with techniques and strategies to help them prevent mental health issues?

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely Effective</td>
<td>8</td>
<td>25.00</td>
</tr>
<tr>
<td>Very Effective</td>
<td>13</td>
<td>40.63</td>
</tr>
<tr>
<td>Moderately Effective</td>
<td>7</td>
<td>21.87</td>
</tr>
<tr>
<td>Slightly Effective</td>
<td>4</td>
<td>12.50</td>
</tr>
<tr>
<td>Not Effective at All</td>
<td>0</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Are student-athletes comfortable meeting with a certified mental health professional based on the results of their screening? The results of this question are listed in Table 5. The majority of student-athletes (70.15%), said they were extremely or moderately comfortable meeting with a certified mental health professional. Only 11.94% of student-athletes said that they were moderately uncomfortable and 17.91% said they were neither comfortable or uncomfortable. None of the student-athletes were extremely uncomfortable.

Table 5. Brief Intervention

<table>
<thead>
<tr>
<th>Response</th>
<th>Frequency</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Would you be comfortable in participating in a brief intervention with a certified mental health professional based on the results of your screening? (The brief intervention would only be for student-athletes who show potential signs/symptoms of mental health issues)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extremely Comfortable</td>
<td>17</td>
<td>25.37</td>
</tr>
<tr>
<td>Moderately Comfortable</td>
<td>30</td>
<td>44.78</td>
</tr>
<tr>
<td>Neither Comfortable or Uncomfortable</td>
<td>12</td>
<td>17.91</td>
</tr>
<tr>
<td>Moderately Uncomfortable</td>
<td>8</td>
<td>11.94</td>
</tr>
<tr>
<td>Extremely Uncomfortable</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Discussion of Results

This study sought to discover if student-athletes are comfortable completing mental health screenings during various times of the year, mental health workshops, and interventions with certified mental health professionals. It also sought to discover if student-athletes believe that these strategies are an effective way to prevent mental health issues. The results of the study conclude that the student-athletes are comfortable completing these strategies and believe that they would be effective.

Pre-Participation Mental Health Screening

UNG requires all student-athletes to complete a pre-participation mental health screening; however, this screening is given to the student-athletes in a 34-page packet along with other paperwork they must complete before they can play. Thus, student-athletes can overlook the screening because they are focused on completing the extensive packet and other paperwork so that they can begin to participate in their sport. While the majority of the student-athletes knew that they were required to complete the pre-participation screening, 32.84% did not know they had completed one prior to participation. Ideally, every student-athlete should know that they take a screening.

Therefore, moving forward, it is recommended that UNG should continue to conduct the screening, but apart from the pre-participation packet. The screening should be a stand-alone form and when given to the student-athletes, they should be told what they are completing and why they are completing it. Despite several student-athletes not knowing about the pre-participation screening, the majority of student-athletes were comfortable with completing the screening. This statistic is promising because the more comfortable the student-athletes are with completing the screenings, the more likely they will answer honestly.

Championship Season Mental Health Screening

Student-athletes are under greater stress during their championship season because there is more demanded from them; therefore, they may be more prone to suffer from mental health issues during that time. Conducting mental health screenings during championship seasons is something UNG has not implemented previously. However, 78.56% of the student-athletes said that they would be comfortable
taking a screening during their championship season. Furthermore, 69.81% of the student-athletes that said they were comfortable, believed that it would be an extremely or very effective way to assess the mental health of student-athletes.

This positive response to screenings during championship season is encouraging. If student-athletes are comfortable with the screening and believe it to be effective, then they will support the decision to implement this strategy. If student-athletes were uncomfortable and did not believe in the screenings, then they would not take it seriously and the screenings would be unsuccessful in identifying student-athletes with mental health issues. If a student-athlete is found to be showing signs and symptoms of mental health issues during their championship season, their coaches and athletic trainers can then take action and get the student-athlete the help they need.

Post-Season Mental Health Screening

The response to the post-season screening was similar to the response of the championship season screening. The majority of the student-athletes were comfortable completing the screening and that majority believe the screening would be effective in identifying student-athletes who are struggling with mental health issues. There were a few student-athletes that believed the screening would not be effective which may reflect the timing that the survey was conducted. Since the survey was conducted in March of 2018, some of the first-year student-athletes have not experienced what it is like after their championship season. The sudden change in routine once a season comes to an end can have a huge impact on the mental health of student-athletes. If a student-athlete has not been through this experience, they may not understand the struggles student-athletes may undergo once their season ends and they do not see a need to complete a post-season mental health screening.

Again, the positive response to completing the post-season screening is promising. Despite a few student-athletes believing that it would not be effective, the majority believes it will work and they are comfortable with it. Since they are comfortable with the screening and believe in it, they will be accepting of the screenings. They will then take the screenings seriously and answer them honestly; thus, the mental health screenings will be able to detect student-athletes that are struggling with mental health issues.
Mental Health Workshop

Surprisingly, the response to the mental health workshop was positive with 46.76% of student-athletes saying they would be comfortable participating in a mental health workshop with five to seven other student-athletes. With some encouragement, the 20.90% that said they were neither comfortable or uncomfortable could be swayed towards being comfortable with the workshop. If the environment (location, participants, facilitator, time, etc.) of the workshop is appealing to these student-athletes that are on the fence, then their opinion may change and they may become comfortable with the idea of completing the workshop.

By participating in a mental health workshop, student-athletes will be given techniques and strategies that will help them to prevent and identify mental health issues. The mental health screenings only have the ability to identify student-athletes that are struggling with mental health issues, whereas the workshop offers ways to prevent mental health issues. While not as many student-athletes were comfortable with participating in a mental health workshop, 87.50% said they believed the workshop would be extremely, very, or moderately effective. Again, this positive response is promising because the student-athletes are supportive of the idea of participating in a mental health workshop. However, offering mental health workshops requires more organization and resources than having student-athletes complete screenings and sending them to a certified mental health professional to solve the issue.

Intervention with Certified Mental Health Professional

If the mental health screenings are able to identify student-athletes that are struggling with mental health issues, then the struggling student-athletes could be asked to complete a brief intervention with a certified mental health professional. The majority of the student-athletes said that they would be comfortable meeting with the mental health professional based on the results of their screening. This response is promising because it shows that the student-athletes would be willing to reestablish their mental health. If the student-athletes are unwilling to work through their issues, then their mental health could deteriorate further and then they could potentially do something to harm themselves and/or others.
Limitations of the Study

Some of the limitations of the research are in the sample of the student-athletes. During the fall of 2017, a student-athlete at UNG took his own life due to mental health issues. This tragedy will affect the results of the survey because the feedback from the student-athletes will reflect their feelings about losing a fellow student-athlete and member of their community. Also, the timing of the surveys will affect the responses. The survey was conducted during the spring of 2018, therefore, some student-athletes were competing in their championship season while others were in their off-season. Since there is more demanded from student-athletes during their championship season, their feedback will reflect this demand. These two factors had the potential to affect the feedback given in the survey; however, the affect was not significant.

Another limitation of this research is time. Since there is a time constraint on this research, there will not be an investigation into how successful the implementation of the strategies would be. Further research should implement the risk management strategies and then spend a few years analyzing how successful the strategies are. If the strategies identified in this study are unsuccessful, then they should no longer be executed and other strategies should be researched and implemented.

Conclusion

What risk management strategies could be implemented to prevent mental health issues among college student-athletes? This study's results conclude that mental health screenings during different times of the year, mental health workshops, and brief intervention with certified mental health professionals are good risk management strategies that athletic departments can implement to identify and prevent mental health issues. The majority of the student-athletes surveyed said that they were comfortable with completing these different strategies and believe that they would be an effective way to identify and prevent mental health issues. As time goes on, these strategies should be implemented and the effects of these strategies should be studied further.
References


Sudano, L. E., & Miles, C. M. (2016). Mental health services in NCAA division I athletics: A survey of


Appendix

A. Survey Instrument

Q1. Are you a current student-athlete at the University of North Georgia?
   - Yes
   - No

Q2. How many years have you been a student-athlete at UNG?
   - 1st Year
   - 2nd Year
   - 3rd Year
   - 4th Year
   - 5th Year

Q3. Do you play a fall sport, spring sport, year-round sport, or multiple sports?
   - Fall
   - Spring
   - Year-round
   - Multiple Sports

Q4. Are you on a men's, women's, or coed team?
   - Men's
   - Women's
   - Coed

Q5. Did you know that UNG requires all student-athletes to take a pre-participation mental health screening?
   - Yes
   - No

Q6. If yes, do you think that the pre-screening was brief or extensive?
   - Brief
   - Extensive

Q7. Are you comfortable completing the pre-participation screening?
   - Extremely comfortable
   - Moderately comfortable
   - Neither comfortable nor uncomfortable
   - Moderately uncomfortable
   - Extremely uncomfortable

Q8. How comfortable would you be with participating in a mental health screening during your championship season?
Q9. Do you think this would be an effective way to assess the mental health of student-athletes since they are under greater stress during their championship season?

- Extremely effective
- Very effective
- Moderately effective
- Slightly effective
- Not effective at all

Q10. Would you be comfortable with completing a post-season mental health screening a few weeks after the end of your championship season?

- Extremely comfortable
- Moderately comfortable
- Neither comfortable nor uncomfortable
- Moderately uncomfortable
- Extremely uncomfortable

Q11. If yes, do you think that this would be an effective way to assess the mental health of student-athletes because some student-athletes go through a post-season depression?

- Extremely effective
- Very effective
- Moderately effective
- Slightly effective
- Not effective at all

Q12. Would you be comfortable in participating in a brief intervention with a certified psychologist based on the results of your screening? (The brief intervention would only be for student-athletes who show potential signs/symptoms of mental health issues).

- Extremely comfortable
- Moderately comfortable
- Neither comfortable nor uncomfortable
- Moderately uncomfortable
- Extremely uncomfortable

Q13. If yes, would you consider changing environmental factors (such as alcohol usage, drug usage, diet, etc.) in your everyday life to help prevent any mental health issues?

- Yes
- No

Q14. Would you be comfortable in completing a mental health workshop with a small group of 5-7 student-athletes?
Q15. Do you think that a workshop would be an effective way to help student-athletes to be equipped with techniques and strategies to help them prevent mental health issues?

- Extremely effective
- Very effective
- Moderately effective
- Slightly effective
- Not effective at all

Q16. Are there any other strategies that you think UNG could implement to help prevent mental health issues among student-athletes?

Q17. If you have any comments about the survey, please share them below