

Emerging Discourses: The Role of Coaches, Institutions, and Clinicians in Addressing Athlete Mental Health

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Introduction

Mental health, defined by the World Health Organization as “a state of wellbeing in which every individual realizes his or her own potential, can cope with normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community,” is an important concern for athletes.¹ In 2018, research findings showed that the prevalence of mental health symptoms and disorders among current elite athletes ranged from 19% for alcohol misuse to 34% for anxiety/depression, and from 16% for distress to 26% for anxiety/depression for former elite athletes.² Research suggests that while athletes have overall better physical health than their non-athlete counterparts, they experience similar rates of mental health symptoms and disorders.^{3,4}

Coaches occupy many roles in an athlete’s life and, as such, can have a considerable influence on their athletes’ lives^{5,6,7}. Given that coaches spend so much time with their athletes, they are in an ideal position to identify when an athlete is having difficulty with their mental health and can help athletes with receiving timely and effective treatment.⁸

Yet, coaches alone are not sufficient in preventing or addressing mental health symptoms and disorders in their athletes. Further, research has shown that many coaches are unsure what to do in situations concerning mental health, and express concerns that they may make an athlete’s situation worse.³ This commentary addresses the social, structural, and cultural shifts that not only coaches, but administrators, national federations, and clinicians can create to foster environments of athlete wellness.

Mental Health Challenges Experienced by Athletes

Athletes face unique challenges, including sporting pressure, injuries, competitive anxiety, body image (particularly in sports associated with a high focus on being “lean”), uncertainty about their status on a team (active, inactive, starting athlete), team challenges, uncertainty about retirement, and harassment and abuse (non-accidental violence) from unhealthy sporting environments.^{9,10}

In addition to the aforementioned challenges, athletes may experience further challenges stemming from discrimination in their gender, racial, sexual, and religious identities. Intersectionality, defined as “the complex, cumulative way in which the effects of multiple forms of discrimination (such as racism, sexism, and classism) combine, overlap, or intersect especially in the experiences of marginalized individuals or groups,¹¹” is an important framework to consider additional factors that may pose mental health challenges in athletes’ lives.

Mental health and its impact in athletes’ lives must be addressed on the individual, interpersonal, organizational,

community, and policy levels. Therefore, it is of utmost importance for coaches, clinicians, national federations, and institutions to address athlete mental health in policies, programs, education, and strategies.

Barriers to Mental Health Disclosure

Research from University of Toronto has shown there to be five key barriers that discourage student-athletes from disclosing psychological distress to coaches, including traditionally “tough” sport cultures.¹² With such a strong emphasis on mental toughness, an athlete may not disclose their mental health challenges for fear of being perceived as “weak.” Further, the power coaches hold in their relationship with athletes was identified as another barrier. Given coaches’ decision-making control, athletes with mental health concerns may feel that if they disclose, their playing time, position on the team, or role on the team may dissipate. Similarly, an athlete’s position on the team may impact their disclosure. An athlete who receives high playing time may perceive disclosure as a threat to their reputation as a leader, whereas an athlete who receives low playing time may perceive disclosure as a distraction from higher profile players. An additional barrier was previous negative experiences with disclosure. Finally, poor visibility of psychological distress exacerbates the lack of disclosure, due to the poor role modeling of help-seeking behaviors.

Strategies for Coaches

Given the integral contact a coach has with their athletes, there are several strategies coaches can employ to foster environments that promote positive mental health outcomes. First, coaches can create team cultures that support athlete wellbeing. Specifically, research from University of Toronto suggests that coaches implement a holistic coaching philosophy. Specifically, coaches can emphasize athlete wellness (such as recovery, nutrition, academics, and sleep).¹² Further, coaches can invest in the coach-athlete relationship, such as through mentorship, which can minimize power differentials. Additionally, coaches can use their platform to communicate that help-seeking may require temporary absence from sport, but that an athlete can earn their position again on the team. Part of this can include scheduling regular meetings with athletes to build stronger relationships.

Coaches can also focus on addressing team hierarchies. Strategies include using transparent selection criteria, providing skill development for athletes with less playing time, and assigning each athlete with a role that makes them feel valued (examples: captain, mentor, morale leader, etc.). Further, coaches can respond positively when addressing concerns from athletes to show that their feelings and experiences are valued. Lastly, coaches can enhance visibility of psychological distress, by having open conversations to destigmatize mental health challenges.

An additional strategy coaches can employ includes using language that promotes diversity, equity, and inclusion, such as asking for an athlete’s gender identity upon joining the team to mitigate the overlapping systems of oppression that an athlete may experience. Similarly, coaches can include other coaches and team personnel (such

as strength and conditioning coaches) of diverse backgrounds to increase the likelihood that their athletes will connect with at least one other coach on their team.¹²

It is important that coaches openly discuss mental health with their athletes and athletic teams, emphasizing that mental health challenges are intertwined with physical health, increasing risk of injury, delaying recovery from injury, and affecting athletic performance.¹³ One approach for discussing mental health with an athlete exhibiting concerning behaviors involves engaging the athlete from a non-judgmental perspective. It is important that this be done in a private space. The coach might say, “I noticed that you haven’t been yourself lately.” This essentially opens the conversation to go in whatever direction it can. Empathize with the athlete and normalize their experiences, such as by saying, “You are not the first person to feel this way.” Help the athlete feel cared about, making sure to know what the ‘next steps’ are for these issues to be professionally addressed. Refer to your team or national federation’s referral processes, making sure to not overstep the scope of your role and/or competence. Lastly, follow up with your athlete to ensure that the issues are being properly addressed.

For younger elite athletes, coaches can communicate the importance of mental healthcare to parents, thereby managing expectations, avoiding stressors, and seeking care when appropriate. Teach athletes about resilience and grit to help them actively believe in their own self-efficacy. This can occur by de-emphasizing achievements and outcomes, instead fostering a process-oriented mindset, in which effort and improvement are emphasized. Parents of elite athletes (particularly children) need to pay attention to children’s needs unrelated to sport. As part of this, athletes can develop other aspects and interests, particularly those not involving performance. Further, coaches can communicate the importance of mental health care to parents by helping them understand symptoms and encouraging open dialogue about their sport experience. For further coach resources on mental health athlete support, please visit the recommended resources below.

Strategies for Clinicians

In 2019, the International Olympic Committee, through convening 27 expert panelists, published recommendations in the International Olympic Committee Consensus Statement on Mental Health in Elite Athletes.¹⁴ These guidelines include recommendations for clinicians, including: being flexible about session timing, involving family or significant others when relational issues impact functioning or performance, recommending psychotherapy plus pharmacological therapy for moderate to severe cases, and guiding the athlete into substance use disorder treatment if needed. Clinicians should not agree to see the athlete’s coach or trainer for psychotherapy sessions and should not provide experimental treatments to athletes.¹⁴ If a clinician is considering prescribing medication, the clinician should consider potential negative impact on athletic performance, potential therapeutic performance enhancement, and potential safety risks.

Organizations, national federations, institutions, and teams should help coaches understand how to make a referral to a clinician and have well-communicated procedures in place. The clinical team should include qualified, licensed professionals. To maximize timely referral and linkage to care, coaches and organization should develop a Mental Health Emergency Action and Management Plan, which is a checklist of steps that list how to make a referral and respond to an athlete's concerns. More information on considerations for a Mental Health Emergency Action and Management Plan can be found via the NCAA's Mental Health Best Practices Guide.¹⁵

As a follow up to the International Olympic Committee Consensus Statement on Mental Health in Elite Athletes, researchers developed the Sport Mental Health Assessment Tool 1 (SMHAT-1). This tool can be used by sports medicine physicians and other licensed/registered health professionals. However, the clinical assessment and management within the SMHAT-1 must be conducted by sport medicine physicians and/or licensed/registered mental health professionals, including clinically trained sport psychologists. Physical therapists, athletic trainers, and not clinically trained sport psychologists working with a sports medicine physician are allowed to use the SMHAT-1; however, guidance or intervention recommendations must come from the sports medicine physician.¹⁶

Strategies for National Governing Bodies/Sport Organizations/Institutions

National federations, sport governing bodies, and institutions can foster positive mental health outcomes in athletes in a variety of ways. First, such organizations can require mental health literacy training (see resources below) in certification programs and continuing education. Mental health literacy involves building the skills of the individual (in this case, an athlete) and learning how changes in knowledge and attitudes can lead to improved help seeking and proactive, self-health behaviors.⁸ Additionally, institutions can provide guidance on how to build a mental health support team specific to your sport culture and organizational resources. By helping coaches know to whom they should report a concern, the severity of their athlete's concern, and relevant institutional policies and procedures, coaches may experience higher self-actualization in believing they are prepared and equipped to handle concerns about an athlete's mental health. This can be a time-saving form of preparation so that a coach can quickly execute a referral plan utilizing organization-wide predetermined policy to help the athlete as quickly as possible.

Further, organizations can promote athletes' well-being by promoting stories of athletes who are willing to share their mental health journey, with permission, through communication mediums congruent to the organization. This can help reduce stigma, promote visibility of mental health disorders, and thus help athletes feel safer in disclosing any concerns they may have. Moreover, institutions can measure their coaches' self-efficacy in knowledge, attitudes, and help-seeking intentions towards mental health through surveys to understand how they can improve in this arena. Lastly, sport organizations must ensure that training is age and developmentally appropriate. This not only mitigates injury, but minimizes comparison of athletes against one another, and ensures skills are rooted in biological, developmental milestones.

Conclusion

Increased mental health literacy, combined with the integration of mental health professionals into sporting organizations, are well established recommendations for the ongoing care of athletes.¹⁷ Coaches are positioned to take a leadership role, given their influence and access to athletes. The culture of athletes is at a crucial juncture in its efforts to acknowledge and embrace the psychosocial needs of athletes. This involves the integration of mental health into the overall conceptual framework of health care. Increased literacy, combined with access to services, begins to address the structural and systemic conditions that can cultivate athlete wellbeing. Utilizing existing resources, and committing to their implementation at the organizational, structural, clinical, and coaching levels, will address this critical issue on macro and micro levels, fostering healthy sporting environments. Addressing athlete mental health goes beyond the coach-athlete relationship, though this relationship is important to cultivate, since coaches play a significant role in their athletes' lives. Institutions and national federations must also consider the structural and systemic aspects that can cultivate athlete wellbeing. Whether you are a coach, provider, sport organization, or institution, we all have a responsibility to discuss mental health, incorporate mental health training, and create action plans so that we can foster healthy sporting environments.

Recommended Resources

1. National Collegiate Athletic Association's "Supporting Student-Athlete's Mental Wellness for Coaches" course, available for free: http://s3.amazonaws.com/ncaa/files/ssi/mental-health/toolkits/coach/story_html5.html
2. Mental Health First Aid: A variety of courses, ranging from free to low-cost, exist such as: <https://www.mentalhealthfirstaid.org/>, local and state public health departments, and through Johns Hopkins University's "Psychological First Aid" course on Coursera: <https://www.coursera.org/learn/psychological-first-aid>.
3. Safe Sport International-iProtect Resources: <https://uk.i-protect.eu/resources/> contain a variety of research, best practices, and educational courses.
4. Sportanddevelopment.org Child Protection and Safeguarding Resources: <https://www.sportanddev.org/en/toolkit/child-protection-and-safeguarding> contain a variety of resources for coaches, managers, development professionals, policy makers, parents, and children, along with tools for organizational assessment.
5. National Collegiate Athletic Association's Mental Health Best Practices: https://ncaaorg.s3.amazonaws.com/ssi/mental/SSI_MentalHealthBestPractices.pdf contains many examples of checklist items for inclusion in pre-participation mental health screenings and considerations for developing a mental health emergency preparation plan.

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