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Mental Health Presentation: An Instrument in Coach Education

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MENTAL HEALTH PRESENTATION: AN INSTRUMENT IN COACH EDUCATION

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MENTAL HEALTH PRESENTATION: AN INSTRUMENT IN COACH EDUCATION

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Abstract

While mental health is a prevalent and important topic in athletics, coaches often receive little to no training on how to recognize and manage mental health concerns or how to make good mental health a priority on their team. Thus, a mental health presentation that informs coaches at the University of Northern Colorado (UNC) on the main mental health disorders and concerns in student-athletes and their management was conducted. An investigation on the main mental health concerns in student-athletes and the best practices for athletic staff when managing these concerns was done to properly create the presentation and accurately inform coaches. The methodology consisted of a Google Slides presentation that explains the prevalence and some of the possible signs and symptoms of each mental health disorder or concern followed by specific guidelines for various scenarios on which a mental health concern is brought to a coach's attention. This presentation was presented to the coaches of fourteen athletic teams at UNC over three semesters (Spring 2021-Spring 2022). The conclusion of this presentation was that mental health literacy and the response to mental health in the athletic department at UNC was improved. This conclusion was evaluated through pre- and post-surveys that assessed changes in coaches' mental health literacy and management skills. Since this project led to an improvement in mental health literacy and management skills, it could serve as a framework for mental health education at other universities to ensure more coaches receive proper mental health education in the future.

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of your support and engagement.

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Introduction

Oftentimes, the mind and body become disconnected in sport. Too much time may be focused on improving an athlete's physical abilities without much consideration of their mental health. As our awareness and understanding of mental health continues to grow, it is imperative that athletic staff start to understand the main mental health concerns of student-athletes and how they can better assist a student-athlete who may be struggling. In fact, athletic staff are in a unique position with the student-athlete and play a critical role in normalizing care seeking and identifying and referring a student-athlete to treatment (NCAA Sport Science Institute, 2020). Despite their importance with mental health management, coaches and other athletic staff often receive little to no training or education on how to identify or manage a mental health disorder or concern in their student-athletes (Duron, 2017). This lack of training is critical to address since early identification and management of a mental health concern will lead to less disruption in the student-athlete's life, fewer consequences and complications, and a quicker recovery (Thompson & Trattner Sherman, 2007). Thus, the purpose of this applied project is to educate coaches in the UNC athletic department on the main mental health disorders and concerns in student-athletes and how they can best prevent and manage these disorders and concerns on their respective athletic teams. To create this project, detailed research needed to be done. The following literature review fulfills this need by answering the following question: What are the main mental health concerns in student-athletes and the best practices for athletic staff when managing these concerns? Upon completion of this research, this project aims at synthesizing the research into a Google Slides presentation to be presented to coaches in hopes of fulfilling a lack of training, while improving mental health literacy and mental health management in UNC athletics.

Literature Review

Mood and Anxiety Disorders

When addressing the main mental health disorders in collegiate student-athletes, mood and anxiety disorders cannot go unnoticed. In fact, the majority of the general undergraduate college student population experiences overwhelming anxiety at some point during their college career and the population of student-athletes is no exception (American College Health Association, 2018). In a survey of various student-athletes across all divisions, 30% of student-athletes reported facing overwhelming difficulties over the past month. Other athletic staff noticed this as well with 85% of athletic trainers reporting that anxiety was a concern in their student-athletes (Ryan et al., 2018). While anxiety can be associated with competition, it becomes a serious issue when it impedes on a student-athlete's ability to function in day-to-day activities. This can come in the form of panic attacks, phobias, obsessive compulsive disorder, etc. (Ryan et al., 2018).

While the prevalence of depressive symptoms appears to be similar between elite athletes (those who compete at a professional, Olympic, or collegiate level) and the general population, elite athletes may not accept their depressive symptoms or simply may not choose to seek support (Reardon et al., 2019). However, these symptoms can be recognized and addressed by athletic staff. Special attention must be given to athletes in an individual sport since athletes in an individual sport are more likely to present with depressive symptoms than athletes in a team sport (Wolanin et al., 2016). When athletes present with depressive symptoms, possible overtraining of the athlete should be considered (Reardon et al., 2019).

Unfortunately, the COVID-19 pandemic also has the potential to bring about or exacerbate mental health symptoms and disorders in student-athletes due to major changes in

their routines and athletic involvement. During the pandemic, athletes may see an increase in symptoms of obsessive-compulsive disorder with more compulsive hand washing or symptoms of anxiety with extreme worry about getting the virus. Additionally, depression and suicide ideation may increase in athletes as the pandemic brings uncertainty and potentially decreases their level of physical activity and involvement with their sport. When returning to the sport, an athlete will likely experience stress as well due to a previous lack of training and new social norms adopted to stop the spread of the virus (Reardon et al., 2020).

Sleep Concerns

Sleep plays a major role when it comes to overall human functioning and health. Unfortunately, many college students experience poor sleep with 60% reporting poor sleep quality and 14.9% reporting difficulties when falling asleep in one study done at a Midwestern University (Lund et al., 2010). Collegiate student-athletes also experience poor sleep with over half of collegiate student-athletes in the U.S. reporting insufficient sleep, which is defined as less than 7 hours (Reardon et al., 2019). According to one study on the sleep quality of student-athletes at Stanford University, collegiate student-athletes frequently experience daytime sleepiness, poor sleep quality, and insufficient sleep. This can lead to severe consequences on physical and mental health as poor sleep was associated with physical illness, stress, and negative moods (Mah et al., 2018). Other important findings indicated that first or second year student-athletes had the greatest levels of daytime sleepiness (Mah et al., 2018). Additionally, when traveling for competition, student-athletes experienced a better sleep quality than when on campus. Since student-athletes in the first or second year usually live on-campus, the high levels of daytime sleepiness seen in these athletes and better sleep quality reported during traveling was hypothesized to be due to the dorm environment on campus. Thus, coaches and athletic staff may

want to try to improve the dorm experience for the younger athletes and help set-up roommates amongst the team (Mah et al., 2018).

Another study confirmed that professional athletes suffer from poor sleep quality and daytime sleepiness, as well (Swinbourne et al., 2016). Early morning training before 8am was associated with less total sleep time, higher daytime sleepiness, and poorer sleep quality. Athletes also reported better sleep during their off-season when competition and practice were not taking place (Swinbourne et al., 2016). While collegiate athletes were not assessed in this study, collegiate athletes compete and train at a level similar to professional athletes, making research on professional, Olympic, and collegiate athletes similar and equally as important when assessing elite athletes overall (Reardon et al., 2019). By making sleep a priority and optimizing sleep quality in athletes, mental and physical health will be improved, thus, enhancing athletic performance (Swinbourne et al., 2016).

Development of the Student-Athlete

While collegiate student-athletes are similar to professional athletes, it is important to note that student-athletes are full-time students on top of being full-time athletes. Today, emerging adulthood (typically between 18-25 years of age) is marked by instability and emerging adults face high levels of perceived loneliness and psychological distress (Arnett, 2004). Since student-athletes are experiencing emerging adulthood while navigating new athletic demands, student-athletes face unique challenges as emerging adults (Houltberg & Scholefield, 2020). Collegiate student-athletes face academic, athletic, and personal challenges during their development in college, which can cause a lot of added stress and anxiety (Duron, 2017). In fact, an athlete's risk of developing a mental disorder is highest during the athlete's competitive years due to the intense physical and mental demands. These demands placed on a student-athlete in a

time of transition from high school to college are a likely factor in mental illness seen in student-athletes (Schinke et al., 2018). While many college students have to navigate major developmental changes, such as forming a sense of self or dealing with a new environment and routine, student-athletes must do this on top of transitioning to a new level of competition. Thus, difficulty with this transition can lead to the adoption of negative coping strategies or psychological distress (Houltberg & Scholefield, 2020). Furthermore, when adjusting to college, student-athletes must learn how to manage their responsibilities with academics and athletics on top of gaining functional and emotional independence away from their parents or known support systems. Controlling parenting during emerging adulthood can exacerbate mental health concerns during the college transition and has been associated with anxiety, indecisiveness, impulsivity, and lower levels of confidence in problem-solving abilities (Kaye et al., 2019).

Unfortunately, the support for student-athletes to navigate these challenges and new demands is not equal across universities due to differences in financial budgets and ability to provide support services. While some universities spend millions of dollars to support student-athletes with academic advisors, tutors, sport psychologists, and other support staff, other universities simply do not have the funding available to provide this additional support to student-athletes. Despite this, student-athletes across universities look to coaches for support and guidance since they see them as natural mentors (Duron, 2017). Looking for support from mentors seems critical since Schinke et al. (2018) argues that the direction of a student-athlete's development depends on how successfully they manage transitions and make decisions in life and sport. While poor mental health can inhibit the success of the student-athlete while handling these transitions and decisions, good mental health can contribute to their success (Schinke et al., 2018).

Overall, it is obvious that collegiate student-athletes face real challenges when navigating key developmental changes while adjusting to a new level of competition. During this navigation, it is possible that a student-athlete may begin to think about their interests outside of the sport. While this may be perceived as a lack of commitment by coaches and athletic staff, it is important to realize that this is simply a normal part of the developmental process while student-athletes are learning who they are in a new situation away from known social support (Houltberg & Scholefield, 2020).

Stigma, Attitudes, and Intentions of Seeking Help

Since the developmental challenges that student-athletes face can lead to anxiety, stress, and even more serious mental health concerns, getting student-athletes psychological support seems critical to their overall success and well-being. However, student-athletes, especially male student-athletes, may not always acknowledge or seek support for their mental health (Reardon et al., 2019). In fact, female athletes are about two times more likely to report depressive symptoms than male athletes (Gorczynski et al., 2017). Unfortunately this lack of help-seeking behavior leads to psychological services being widely underutilized by student-athletes partly due to stigma and negative attitudes surrounding mental health. While student-athletes with more positive attitudes toward seeking help have greater intentions to seek mental health counseling, those with more negative attitudes have little or no intentions of engaging in mental health counseling. Unsurprisingly, these negative attitudes are usually born from stigmas surrounding mental health and are a likely reason as to why psychological services are underutilized by student-athletes (Hilliard et al., 2020).

Unfortunately, there is a widespread stigma in athletics toward seeking sport psychology consulting especially for younger athletes, male athletes, or athletes that participate in sports with

high physical contact due to social norms. To combat this, athletic staff must help student-athletes develop proper help-seeking skills (Martin, 2005). However, athletic staff may not know the proper way to do this or be well-versed in mental health management overall. Thus, developing mental health literacy, or the knowledge and beliefs about mental disorders, in coaches and athletic staff may be vital to end the existing stigma and improve attitudes and intentions of seeking help. In fact, providing education to improve mental health literacy has been shown to promote help-seeking behaviors and decrease stigma by increasing overall knowledge and understanding of mental health disorders and concerns (Gorzynski et al., 2020).

Management and Prevention of Mental Health Concerns

While improving mental health literacy in coaches and athletic staff may provide a greater understanding of mental health concerns in student-athletes, it is critical that coaches and athletic staff know what to do with this information and how to manage a mental health concern if they suspect one. When managing mental health, a coach's role is not to evaluate or try to treat a student-athlete with a suspected mental health problem, but to assist the student-athlete in getting treatment. This may come in the form of a referral to a sport psychologist or taking the student-athlete to a counseling center on campus. However, getting the athlete to treatment may be difficult and referrals may not be accepted, possibly due to stigmas and attitudes as previously discussed. This is important for coaches and athletic staff to bear in mind and makes it imperative that the coach or athletic staff member encourages treatment when a mental health concern is suspected (Thompson & Trattner Sherman, 2007).

Having empathy and truly listening to a student-athlete's concern is another essential practice that coaches and athletic staff must follow (NCAA Sport Science Institute, 2020). In fact, according to Thompson and Trattner Sherman (2007), "the most serious mistake that

anyone can make in (mis)managing a student-athlete with a mental health problem is to respond as if the problem is trivial or a sign of weakness" (p. 33). Thus, while it may be impossible to understand what a student-athlete with a suspected mental health concern is going through, it is vital that coaches and athletic staff take a concern seriously.

By normalizing care seeking and communicating in a way that demonstrates a commitment to overall health and well-being of the student-athlete, athletic staff can support positive psychological well-being in student-athletes. Due to their frequent interaction with student-athletes, athletic staff are in a prime position to foster a healthy environment that encourages mental well-being and resilience (NCAA Sport Science Institute, 2020). To create this environment, the NCAA Sport Science Institute (2020), states that coaches and athletic staff should receive regular training on how to respond to mental health concerns, identify mental health disorders and concerns, and create a positive and supportive team culture. By being trained on these topics, coaches will be better able to foster a healthy environment, while being better equipped to handle a mental health concern if one arises.

While coaches should not be trying to evaluate and counsel a student-athlete with a mental health concern, Thompson and Trattner Sherman (2007) point out that coaches can still be involved with the treatment of the student-athlete. By continuing to promote a healthy environment and checking in with the student-athlete and their mental health professional throughout treatment, coaches can contribute to the success of a student-athlete's recovery. For instance, keeping an open dialogue with the student-athlete and their mental health provider without overstepping confidentiality boundaries will help a coach to better understand how to support a struggling student-athlete (Thompson & Trattner Sherman, 2007). Overall, it is clear that coaches and athletic staff have substantial influence in the environment of their student-

athletes and the potential management of mental health concerns. To ensure this power and influence is used appropriately, training surrounding mental health is vital.

In conclusion, the main mental health concerns in student-athletes include mood and anxiety disorders and sleep disorders and concerns, which may be exacerbated by key developmental processes and challenges faced in emerging adulthood. Since athletic staff are in a unique position with student-athletes and play a critical role in mental health management, coaches should be provided with training about the signs and symptoms of mental health disorders along with how to manage a suspected mental health concern (NCAA Sport Science Institute, 2020). However, it seems that there is a lack of training and education for coaches, despite its benefit to removing stigmas around mental health and managing mental health concerns (Duron, 2017; NCAA Sport Science Institute, 2020; Schinke et al., 2018). This could come from the lack of understanding on how to properly educate coaches and conduct training. In fact, when training was recommended in the literature discussed above, no specific methods were addressed on how to do this. Thus, this project aims to fill this gap by developing mental health education for coaches and athletic staff. Understanding how mental health literacy and management of mental health should be improved and communicated to coaches will help athletic departments better train and educate their athletic staff. Additionally, presenting this information to coaches and athletic staff will help fulfill the lack of training coaches receive, despite its importance. Hopefully, by educating coaches on the main mental health concerns and their management, coaches will improve their mental health literacy, stigmas will be reduced and attitudes will be improved, and student-athletes will receive proper treatment.

Project Design

Purpose

While mental health is a prevalent and important topic in athletics, coaches often receive little to no training on how to recognize and manage mental health concerns or how to make good mental health a priority on their team. Thus, this project aimed at informing coaches at the University of Northern Colorado (UNC) on the main mental health disorders and concerns in student-athletes and how to properly prevent and manage these disorders and concerns in hopes of improving mental health literacy and the response to mental health in athletics.

Methods and Materials

To educate coaches, I conducted a Google Slides presentation. Due to the COVID-19 pandemic, this powerpoint format left flexibility in how the presentation was presented to coaches. For instance, while it could've been done in person, it could've also been done over Zoom, Microsoft Teams, or another online platform. The specific way the Google Slides presentation was presented depended on the current situation of the COVID-19 pandemic and the comfortability of the coaches/athletic staff. Throughout and after the presentation, discussion was encouraged amongst coaches, athletic staff and myself.

For the first half of the presentation, I focused on addressing the main mental health concerns and disorders to improve mental health literacy. For each disorder and concern, I explained its prevalence and some of its possible signs and symptoms. For the second half of the presentation, I addressed the best management practices when addressing these disorders and concerns. This included general suggestions around the communication of mental health and specific guidelines for various scenarios on which a mental health concern is brought to a

coach's attention. Finally, further support and resources available for the coaches and athletic staff was discussed.

Participants

Seventeen coaches from the various Division I athletic teams at the University of Northern Colorado (UNC) agreed to hear the presentation and be involved in my applied project. As a member of the cross country and track and field teams at UNC, I utilized convenience sampling and reached out to the coaches via the UNC bearmail. If the coaches were interested, they could follow a Google Form link to determine a time and date that worked well for our schedules. Their participation was purely voluntary.

Evaluation Methods

To evaluate my presentation, pre- and post-presentation surveys were utilized. A 12-item, pre-presentation survey was sent to coaches via email to evaluate their current mental health literacy and knowledge on how to manage mental health concerns. Five questions were used to assess mental health literacy and five questions were used to assess mental health management. Two questions were demographic questions. Upon completion of the presentation, the same questions were asked to determine if mental health literacy and mental health management skills were improved. However, this post-presentation survey also included a feedback question that gauged the coaches' thoughts on the presentation. The actual survey questions are included in the appendices below.

Data Analysis Procedures

Upon completion of the presentations, the pre- and post-presentation survey responses were compared. The multiple choice questions were either scored as correct or incorrect. The answers to the question asking them to rate their level of comfortability remained unchanged.

The coaches were considered "knowledgeable" when answering the question, "Do you know where you can receive mental health support on campus or elsewhere? If yes, please explain. If not, just write 'no'," if they knew we had some sort of specific support for athletes and general students as well. It was considered an improvement in mental health literacy and management skills if the coaches' answers went from incorrect to correct, not knowledgeable to knowledgeable, or their level of comfortability increased from their pre-presentation survey responses to their post-presentation survey responses. Their mental health literacy or management skills were said to decrease if their answers went from correct to incorrect, knowledgeable to not knowledgeable, or their level of comfortability decreased from their pre-presentation survey responses to their post-presentation survey responses. Lastly, their mental health literacy or management skills were said to be unaffected if their answers from the pre-presentation survey to the post-presentation survey did not change.

Results

While twelve coaches completed the pre-presentation survey, only five of these coaches completed the post-presentation survey. The answers of the pre-presentation and post-presentation surveys from these five coaches were compared.

Mental Health Literacy

Ability to recognize signs and symptoms of depression improved in two coaches as they were able to correctly identify a student-athlete who was struggling with depression after the presentation, but not before. Ability to recognize the signs and symptoms of anxiety decreased in one coach as they were able to correctly identify a student-athlete who was struggling with anxiety before the presentation, but not after. General knowledge about mood and anxiety disorders and sleep concerns remained unaffected.

Table 1. Pre-Presentation Survey Responses for Mental Health Literacy Questions

Coach	Q1 (Mood Disorders)	Q2 (Sleep)	Q3 (Anxiety Disorders)	Q4 (Identify Depression)	Q5 (Identify Anxiety)
1	Correct	Correct	Incorrect	Correct	Correct
2	Correct	Correct	Correct	Correct	Correct
3	Correct	Correct	Correct	Incorrect	Correct
4	Correct	Correct	Correct	Correct	Correct
5	Correct	Correct	Correct	Incorrect	Correct

Table 2. Post-Presentation Survey Responses for Mental Health Literacy Questions

Coach	Q1 (Mood Disorders)	Q2 (Sleep)	Q3 (Anxiety)	Q4 (Identify Depression)	Q5 (Identify Anxiety)
1	Correct	Correct	Incorrect	Correct	Correct
2	Correct	Correct	Correct	Correct	Correct
3	Correct	Correct	Correct	Correct	Incorrect
4	Correct	Correct	Correct	Correct	Correct
5	Correct	Correct	Correct	Correct	Correct

Mental Health Management

General knowledge about mental health management decreased in one coach as they understood that it's not a coach's responsibility to treat psychological problems such as depression and anxiety disorders before the presentation, but not after. Management skills improved in one coach as they were able to correctly identify how to help student-athletes who were struggling with mental health concerns after the presentation, but not before. Comfortability with managing mental health disorders and concerns improved in three coaches as they were unsure of their level of comfortability before the presentation, but felt comfortable after the presentation. Knowledge of mental health support on campus improved in one coach as they were considered "not knowledgeable" before the presentation, but they were considered "knowledgeable" after.

Table 3. Pre-Presentation Survey Responses for Mental Health Management Questions

Coach	Q1 (Proactive vs. Reactive)	Q2 (Coach's Responsibility)	Q3 (Management Skills)	Q4 (Comfortability)	Q5 (Knowledge of Resources)
1	Correct	Correct	Incorrect	Not sure	Knowledgeable
2	Correct	Correct	Correct	Comfortable	Knowledgeable
3	Correct	Correct	Incorrect	Not sure	Not Knowledgable
4	Correct	Correct	Correct	Comfortable	Knowledgeable
5	Correct	Correct	Incorrect	Not sure	Not Knowledgable

Table 4. Post-Presentation Survey Responses for Mental Health Management Questions

Coach	Q1 (Proactive vs. Reactive)	Q2 (Coach's Responsibility)	Q3 (Management Skills)	Q4 (Comfortability)	Q5 (Knowledge of Resources)
1	Correct	Correct	Incorrect	Comfortable	Knowledegable
2	Correct	Correct	Correct	Comfortable	Knowledegable
3	Correct	Correct	Incorrect	Comfortable	Knowledegable
4	Correct	Correct	Correct	Comfortable	Knowledegable
5	Correct	Incorrect	Correct	Comfortable	Not Knowledgeable

Feedback Question

All coaches responded "yes" to the question asking if they felt the presentation improved their mental health literacy and potential response to mental health disorders or concerns on their team. Each coach left an explanation of their answer and general feedback, as well.

Table 5. Post-Presentation Survey Response to Feedback Question

Coach	Do you feel that this presentation improved your mental health literacy and your potential response to mental health disorders/concerns on your team? If so, how? If not, what do you think the presentation was lacking?
1	Yes thanks so much for taking the time to talk with us! This was such a challenging year for everyone but I think especially for the student athletes who felt like they didn't have control over the situation. I think after this year we won't see a pandemic bringing some of there problems out of kids and a more normal year will be better for even one.
2	Yes absolutely, learned Andrew's name who is our on campus support staff as well as useful tips for sleep habits. Also talking with our team in person will be a huge benefit I believe for them to feel more comfortable and heard on issues involving mental health.
3	yes. made it more clear on steps to help a SA. what steps to take to help the SA. where to get help (resources) for the SA to use
4	Yes, I felt that the presentation helped me gain more understanding and gave me a sense of well-being knowing my current practices on mental health are the proper thing to do. The biggest thing I learned from the presentation was to always listen to your athletes and then refer to professional help. I also liked how the presentation broke down each characteristic of mental health ailments. The only thing I would add is a chart, Venn diagram, or comparison image to see the differences between depression, anxiety, and sleep deprivation. A good picture never hurts!
5	Yes, great job displaying content that needs to be voiced more in the coaching realm

Discussion

As mental health concerns continue to arise among student-athletes, it is imperative that athletic staff understand the main mental health concerns of student-athletes and their management since athletic staff play a critical role in normalizing care seeking and identifying and referring a student-athlete to treatment. Despite this, coaches and other athletic staff often receive little to no mental health training or education. This project aimed to fill this gap and

improve the mental health literacy and management skills in coaches at UNC. While some regression was seen with coaches answering questions in the pre-presentation survey correctly then incorrectly in the post-presentation survey, more improvement than regression was seen when comparing the pre-presentation responses to the post-presentation responses. For instance, in regards to mental health literacy, all five of the coaches were accurately able to identify a student-athlete suffering from depression in the post-presentation survey, while only three were able to do this on the pre-presentation survey. Additionally, in regards to mental health management, coaches showed improvements in their mental health management skills and knowledge of campus resources on the post-presentation survey. Most notably, all coaches said that they felt comfortable when managing a mental health disorder or concern on the post-presentation survey, whereas only two felt comfortable when answering the pre-presentation survey. The feedback received from the coaches was very positive on the post-presentation survey. All of the coaches said that they felt that the presentation improved their mental health literacy and their potential response to mental health disorders and concerns on their team. Overall, when comparing the pre- and post-presentation surveys, it is clear that this presentation was well received and improved mental health literacy and management skills in the coaches.

While these results are promising, there are some obvious limitations with this applied project. First, it was done with coaches only at UNC. Additionally, I presented mainly to assistant coaches. While this still met my goal of presenting to at least one coach from every athletic team at UNC, I believe all coaches, especially head coaches, should be educated in mental health due to the significant power and influence head coaches have over student-athletes and other coaches. However, educating the assistant coaches is still imperative as they likely spend more time closely interacting with each athlete. Furthermore, other athletic staff that work

closely with student-athletes, such as weight coaches and athletic trainers, should be educated in the main mental health concerns and their management.

Conclusion

The purpose of this applied project was to educate coaches in the athletic department at the University of Northern Colorado (UNC) on the main mental health disorders and concerns in student-athletes and how they can best prevent and manage these disorders and concerns. While more data should be collected before concluding the effectiveness of the presentation used for educating the coaches on improving mental health literacy and management, it is clear that this presentation had positive effects on the coaches who completed both the pre- and post-presentation surveys. Thus, this presentation should serve as a framework for future mental health education and should be continued to be shared with coaches and athletic staff at UNC and other universities. Hopefully, with more education and training in athletics, mental health concerns will be identified and managed early and properly, causing less disruption in the student-athlete's life, fewer consequences and complications, and increased performance.

Appendix A: Pre- and Post-Presentation Survey Questions

Pre- and Post-Presentation Mental Health Literacy Questions with Key

1. Student-athletes can experience mood disorders like depression.

    a. True (Correct)

    b. False (Incorrect)

2. Sleep deprivation can impair performance.

    a. True (Correct)

    b. False (Incorrect)

3. Student-athletes with an anxiety disorder are more able to manage their anxiety in sport
   and non-sport activities.

    a. True (Incorrect)

    b. False (Correct)

4. Linh is a 20-year-old student-athlete who has been feeling unusually sad and miserable
   for the past several weeks. She is tired all the time and has trouble sleeping at night. Linh
   doesn't like eating and has lost weight. She can't keep her mind on her studies and even
   day-to-day tasks seem too much for her. In your opinion, what is going on with Linh?

    a. Attention-deficit hyperactivity (Incorrect)

    b. Cancer (Incorrect)

    c. Anxiety (Incorrect)

    d. Depression (Correct)

    e. Schizophrenia (Incorrect)

    f. Stress (Incorrect)

    g. I don't know (Incorrect)

5. Wu Wang is 18 years old and she is often worried. She worries a great deal about her athletic performance, her teammates' well-being, and her relationship with her boyfriend. In addition, she worries about a variety of minor matters such as getting to practice on time, keeping her dorm room clean, and maintaining regular contact with family and friends. It takes Wu Wang longer than necessary to accomplish tasks because she worries about making decisions. Wu Wang has trouble sleeping at night and finds that she is exhausted during the day and irritable with her family. In your opinion, what is going on with Wu Wang?

    a. Attention-deficit hyperactivity (Incorrect)

    b. Cancer (Incorrect)

    c. Anxiety (Correct)

    d. Depression (Incorrect)

    e. Schizophrenia (Incorrect)

    f. Stress (Incorrect)

    g. I don't know (Incorrect)

Pre- and Post-Presentation Mental Health Management Questions with Key

1. It is better to be proactive than reactive when dealing with mental health disorders and concerns.

    a. True (Correct)

    b. False (Incorrect)

2. It is a coach's responsibility to treat psychological problems such as depression and anxiety disorders.

    a. True (Incorrect)

    b. False (Correct)

3. If Linh or Wu Wang (from the above vignettes) were your student-athletes, how could you help them?

    a. Listen/talk to them

    b. Accompany them to professional help

    c. Contact professional help

    d. They do not need help

        Answer was considered correct if they chose "listen/talk to them," "accompany them to professional help," and "contact professional help"

4. Please rate your level of comfortability with managing mental health disorders and concerns in your student-athletes.

    a. Very uncomfortable

    b. Uncomfortable

    c. Not sure

    d. Comfortable

    e. Very comfortable

        No answer was considered correct or incorrect

5. Do you know where you can receive mental health support on campus or elsewhere? If yes, please explain. If not, just write "no".

Free response answer. Coaches were considered "knowledgeable" if they wrote about some sort of specific support for athletes and general students

Post-Presentation Feedback Question

1. Do you feel that this presentation improved your mental health literacy and your potential response to mental health disorders/concerns on your team? If so, how? If not, what do you think the presentation was lacking?

   Free response answer

Appendix B. Recorded Presentations

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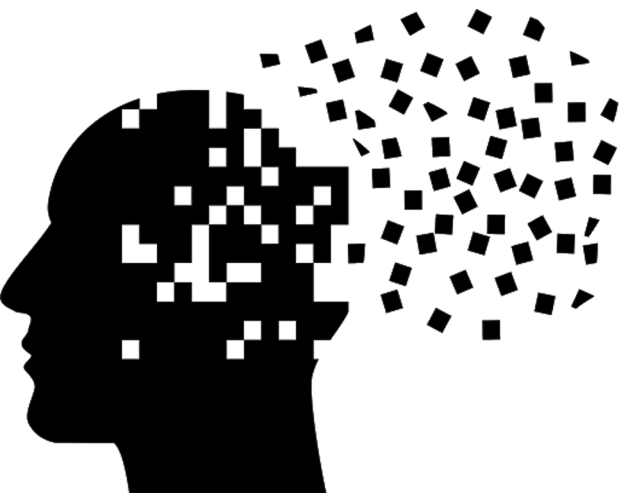
Coach Education: Mental Health

Alison Zigler (with supervision of Dr. Andrew Smith & Dr. Scott Douglas)

# The Coach and the Student Athlete

Coaches can be involved in identifying mental health problems because you:

1. Spend a lot of time with the student-athlete
2. Have considerable power and influence with the student-athlete
3. Can recognize signs/symptoms early
4. Can recommend prompt treatment

Student-athletes may be at risk for mental health problems because:

1. Their age/development
2. College is a time of transition!
3. They are under a new sense of pressure (sport participation, academics, etc)

"A student-athlete's "mental health" might be viewed as secondary to physical health; however, it is every bit as important for healthy performance."
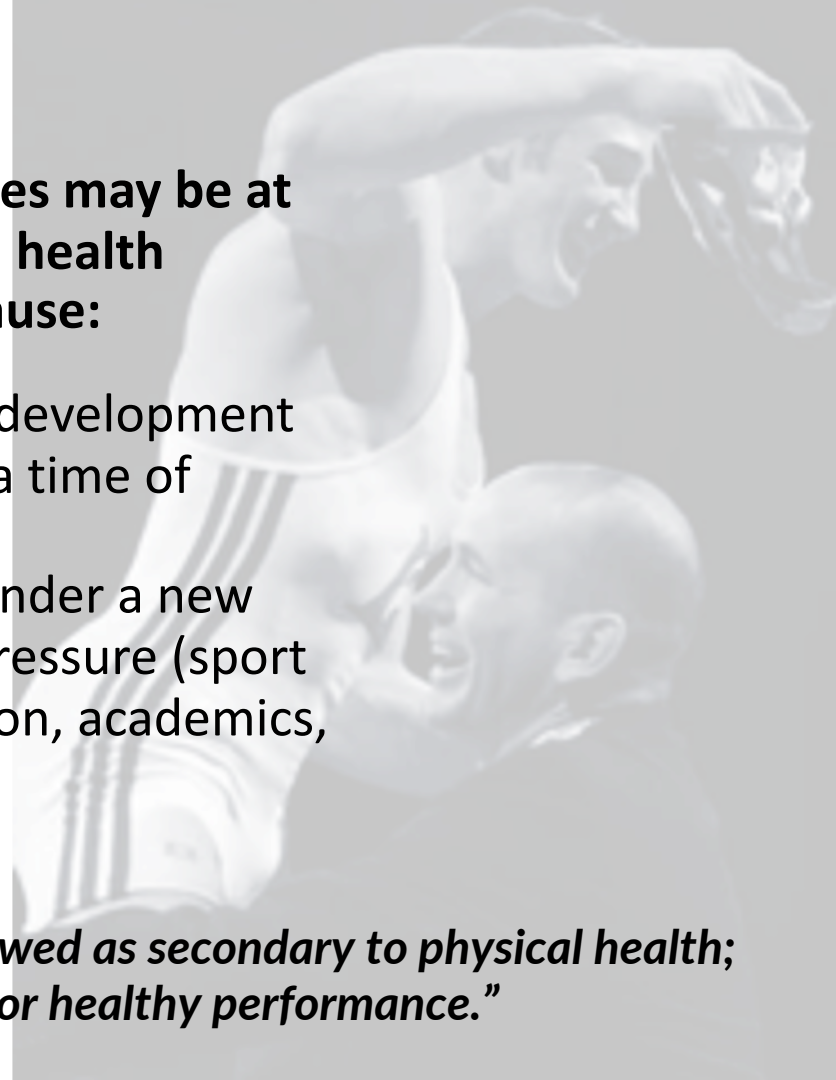
My Goals for You

1. Improve mental health literacy (What? So what?)
2. Respond to mental health in healthy ways (What now?)

Mood Disorders: Depression

What?

- Signs/symptoms: Low or sad moods, irritability or anger, feeling worthless, helpless, and hopeless, etc.
- Linh is a 20-year-old student-athlete who has been **feeling unusually sad and miserable** for the past several weeks. She is tired all the time and has trouble sleeping at night. Linh doesn't like eating and has lost weight. She can't keep her mind on her studies and **even day-to-day tasks seem too much for her**. In your opinion, what is going on with Linh?

So what?

"Depressive symptoms and MDD may result in decreased performance, adverse effects on personal life or an exit from sport."
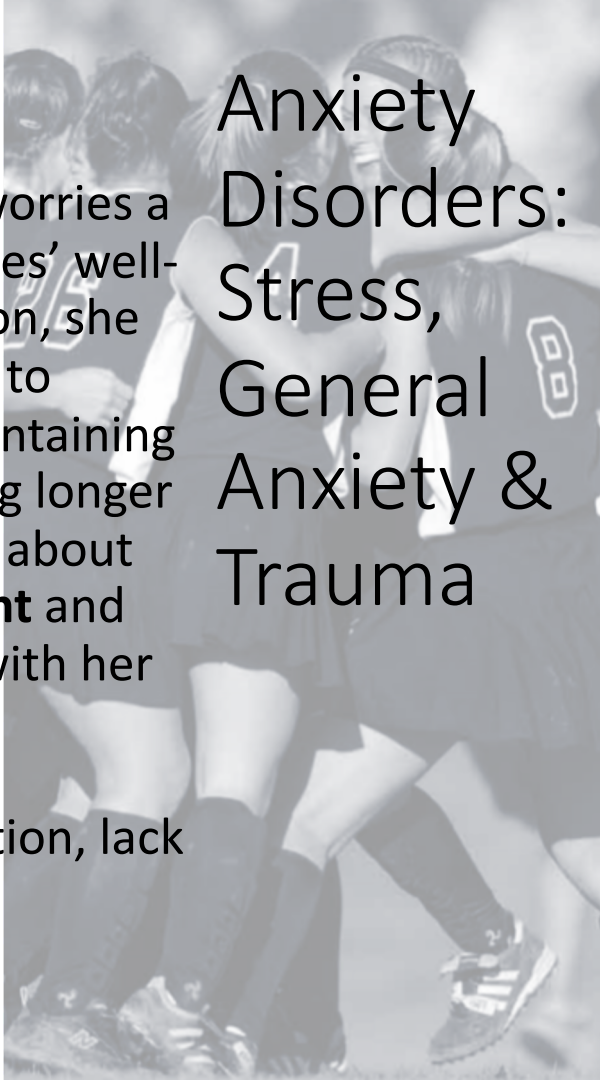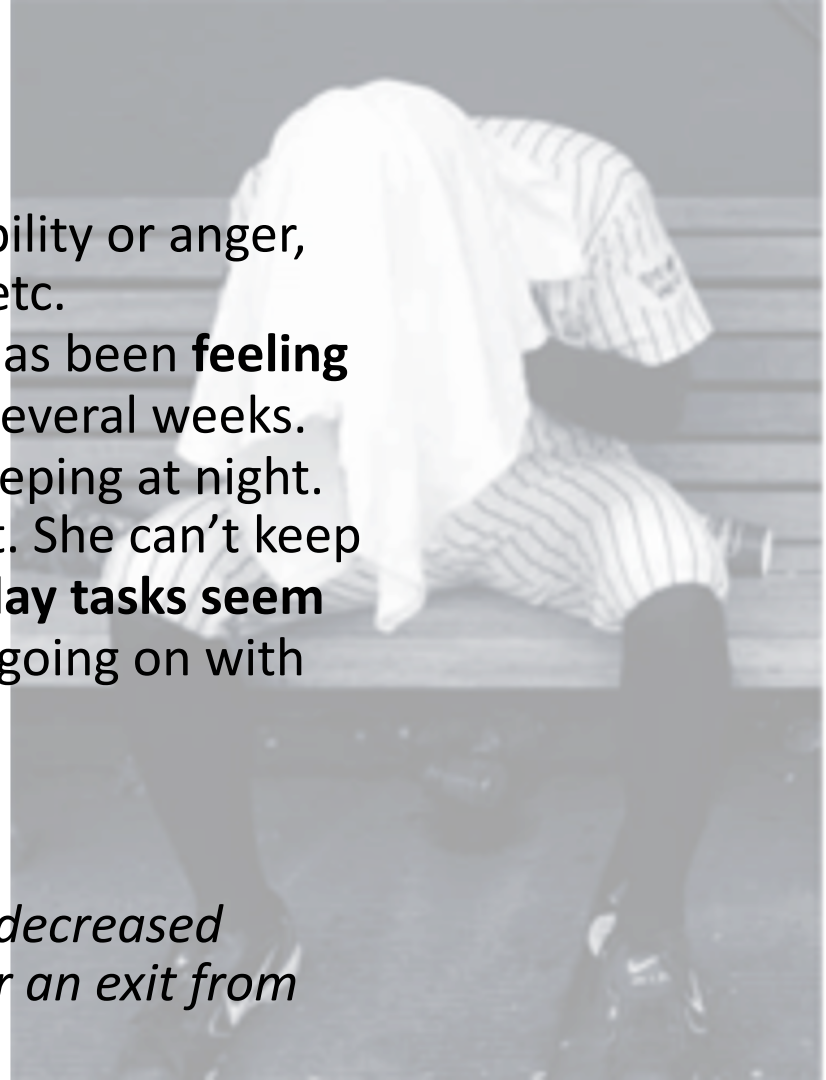
What?

- Signs/symptoms: Excessive worry, fear, or dread, sleep disturbances, changes in appetite, etc.
- Wu Wang is 18 years old and she is **often worried**. She worries a great deal about her athletic performance, her teammates' well-being, and her relationship with her boyfriend. In addition, she worries about a variety of minor matters such as getting to practice on time, keeping her dorm room clean, and maintaining regular contact with family and friends. It takes Wu Wang longer than necessary to accomplish tasks because she worries about making decisions. **Wu Wang has trouble sleeping at night** and finds that she is exhausted during the day and irritable with her family. In your opinion, what is going on with Wu Wang?

So what?

- Decrease in performance due to decreases in concentration, lack of focus, and negative emotions.

Anxiety Disorders: Stress, General Anxiety & Trauma

Sleep/Recovery in Student-Athletes

What?

- Over half of collegiate athletes get insufficient sleep.
- Elite athletes suffer from poor sleep quality and daytime sleepiness.

So what?

- Impairs performance!

What now?

- Model healthy sleep habits
- Make modifications (if possible) to training schedule

Development of the Student-Athlete

What?

- Emerging adulthood is characterized by instability, self-focus, and identity exploration
- *"There can be tension between the student-athletes' desire to engage in more activities or experiences outside of sports (e.g., summer abroad programs, internships) when it impedes on sport related activities. This desire may be perceived as a lack of commitment or motivation in sport even though **it is a part of the normal developmental processes**."*

So what?

- Internal discord

What now?

- Communication is key!

Managing Mental Health- WHAT NOW?

- Be proactive in addressing mental health
- Establish a dialogue around mental health and the resources available

If a student-athlete approaches you with a need to talk:

    MAKE AN EFFORT TO LISTEN.

    Indicate that you are glad they came to you and that you want to help.

    Refer student-athlete to available resources and encourage/support help-seeking behavior

If you believe a student-athlete is in need, but has not approached you:

    Approach the individual privately

    Begin by saying that you are concerned about the individual's welfare and would like to help.

    Refer

If the student-athlete resists treatment:

    Indicate that it is your responsibility to help and follow-up

WHEN IN DOUBT, REACH OUT

Communication with your Student-Athlete

Support

Bears Sports Psychology & Counseling Center Services

UNIVERSITY OF
NORTHERN COLORADO

NATIONAL

SUICIDE

PREVENTION

LIFELINE ™

1-800-273-TALK (8255)

suicidepreventionlifeline.org

Thank you!

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