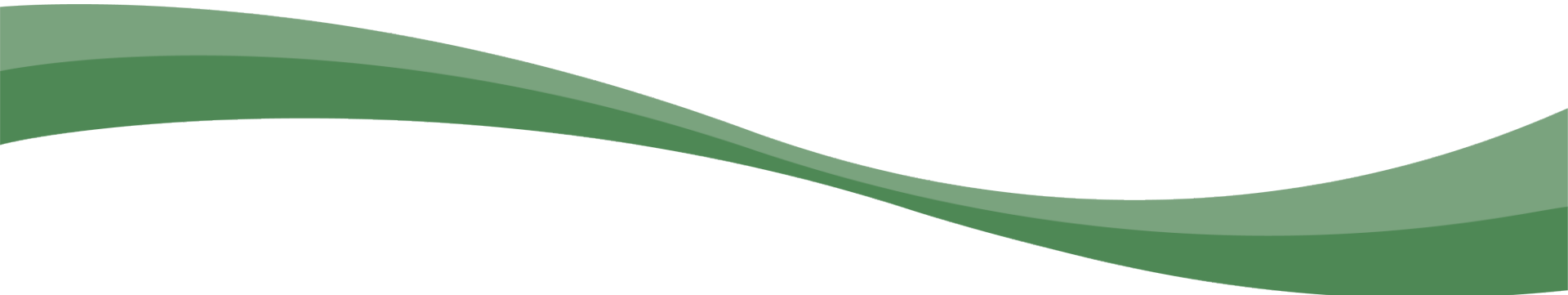




Mental Health and The Student-Athlete



Agenda

- Review common stressors
- Prevalence
- Barriers
- Reducing Stigma
- Sports Performance
- Assessment Tools



Stressors

- Sport injury
- Performance demands
- Training adaptation and burnout
- Coach-athlete relationship
- Body image/eating concerns
- Interpersonal relationships
- Team dynamics
- Family relationships
- Academic requirements (e.g., to maintain eligibility)

Lu et al. (2012)



This is at every level

- **Over half** (51.7%) of elite athletes have experienced some form of mental health problems in their life, per 2020 study (Sweden) (58% female, 42% male) (Åkesdotter a, et al., 2019)



American College Athletes

- NCAA Student-Athlete Health and Wellness Survey in 2020 found that nearly **44% of all student athletes** experience some form of mental health symptoms on a daily basis (NCAA Research, 2023)
- Athletes identifying as women, BIPOC, and LGBTQIA+ had the highest rates
- **2 in 5 female athletes** and **1 in 5 male athletes** reported feeling overwhelmed “constantly” or “most every day”



The Hard Facts

- Suicide rates have doubled over the past 2 years for cause of death for college athletes
- Now second leading cause of death for college athletes, rising from 7.6% to 15.3% of all deaths only behind accidents (Whelan BM, Kliethermes SA, Schloredt KA, et al, 2024)



Barriers

- Stigma
- Fear
 - Repercussions
 - Judgement
- Minimization



Reducing Stigma

- Whose responsibility is it?
- What steps can we take?
 - Normalization
 - Prevention
 - Education
 - Ask questions
 - Be open
 - Offer support



PHQ-2 and PHQ-9



Questions for Safety

To help determine which **Tier of Action** to take, utilize the Patient Health Questionnaire-2 (PHQ-2) and possibly the patient Health Questionnaire-9 (PHQ-9) if needed

Scoring: PHQ-2 is score from 0-6. Scores of 3 or more should be further evaluated with the PHQ-9.

PHQ-2: Over the past 2 weeks, how often have you been bothered by any of the following problems (circle one answer for each question):

	Not at all	Several days	More than one-half of the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed or hopeless	0	1	2	3

Total: _____

If above total is 3 or more, continue to PHQ-9:

PHQ-9: Over the past 2 weeks, how often have you been bothered by any of the following problems (circle one answer for each question):

	Not at all	Several days	More than one-half of the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed or hopeless	0	1	2	3
3. Trouble falling asleep, staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or over-eating	0	1	2	3
6. Feeling bad about yourself—or that you're a failure or have to yourself or your family down	0	1	2	3
7. Trouble concentration on things, such as reading the newspaper or watching TV	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed, or the opposite—being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead or hurting yourself in some way	0	1	2	3

Total: _____



PHQ-9 Student-Athlete Referral Flow

Below are the guidelines for the preferred referral pathways for student-athletes to seek behavioral health treatment based on PHQ-9 scoring criteria.

Suggested referral guidelines for Athletic Training Staff or Primary Care Provider:

Score	Referral Method
<ul style="list-style-type: none"> 0-4: No or minimal depression Tier 1 	No referral required, however services are available if requested
<ul style="list-style-type: none"> 5-9: Mild depression Tier 1 	Suggested self, or athletic training referral recommended.
<ul style="list-style-type: none"> 10-14: Moderate depression Tier 2 	Athletic training staff or Primary Care provider schedule through Dr. Martel or Josh's schedule.
<ul style="list-style-type: none"> 15-19: Moderately severe depression Tier 3 	Warm hand-off to behavioral health staff. If neither behavioral health staff have walk-in's open, please send Tiger Text to either Dr. Martel or Josh.
<ul style="list-style-type: none"> 20-27: Severe depression Tier 3; see below for suicidal ideation/plan/intent 	Warm hand-off to behavioral health staff. If neither staff are open for walk-in's, gently knock on door.

Question #9 disclaimer

Regardless of student-athletes overall score, answers at a 1 or 2 are highly recommended to be guided to behavioral health services for a warm hand-off. An answer of 3 for question 9 may warrant an immediate emergency department referral if active suicidal ideation or intent is apparent.



Beyond Anxiety and Depression

Working on our mental doesn't mean just addressing
anxiety and depression

Mental Preparation

Team building

Problem solving



Our relationships with athletes

- Being personable
- Delivering good, practical service
- Communication
- Knowledge and experience about sport and sports psychology
- Professional skills (approachable, perceptive)
- Honest and trustworthy



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How anxiety impacts performance

Distracted

Trouble breathing

Timing

Confidence

Over thinking

Body tightening

Reaction time

Aspects off
field/court/water



PULLMAN
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HOSPITAL

Sports Performance

Gives us an edge

**Hard work beats talent when talent doesn't
work hard**

Improves team cohesion



Sports Performance Services

Managing performance anxiety

Mental preparation

Visualization

Self-talk

Emotional regulation

Goal-Setting



Competitive State Anxiety Inventory-2

Competitive State Anxiety Inventory-2

Complete the following scale on two separate occasions: during a quiet time before a performance or rehearsal, or practice when you are fairly relaxed, and then immediately before or after an important performance or competition in which you feel highly stressed.

The following are several statements that performers use to describe their feelings before a performance or competition. Read each statement and circle the appropriate number to indicate how you feel right now—at this moment. There are no right or wrong answers. Do not spend too much time on any one statement.

	NOT AT ALL	SOMEWHAT	MODERATELY SO	VERY MUCH SO
1. I am concerned about this performance.	1	2	3	4
2. I feel nervous.	1	2	3	4
3. I feel at ease.	1	2	3	4
4. I have self-doubts.	1	2	3	4
5. I feel jittery.	1	2	3	4
6. I feel comfortable.	1	2	3	4
7. I am concerned I may not do as well in this performance as I could.	1	2	3	4
8. My body feels tense.	1	2	3	4
9. I feel self-confident.	1	2	3	4
10. I am concerned about losing or doing poorly.	1	2	3	4
11. I feel tense in my stomach.	1	2	3	4
12. I feel secure.	1	2	3	4
13. I am worried about performing well.	1	2	3	4
14. My body feels relaxed.	1	2	3	4
15. I'm confident I can meet this challenge.	1	2	3	4
16. I'm concerned about performing poorly.	1	2	3	4
17. My heart is racing.	1	2	3	4

NOT
AT ALL

SOMEWHAT

MODERATELY
SO

VERY MUCH
SO

18. I'm confident about performing well.	1	2	3	4
19. I'm worried about reaching my goal.	1	2	3	4
20. I feel my stomach sinking.	1	2	3	4
21. I feel mentally relaxed.	1	2	3	4
22. I'm concerned that others will be disappointed with my performance.	1	2	3	4
23. My hands are clammy.	1	2	3	4
24. I'm confident because I mentally picture myself reaching my goal.	1	2	3	4
25. I'm concerned I won't be able to focus.	1	2	3	4
26. My body feels tight.	1	2	3	4
27. I'm confident of coming through under pressure.	1	2	3	4

Scoring

This scale divides anxiety into three components: cognitive anxiety, somatic anxiety, and a related component—self-confidence. Self-confidence tends to be the opposite of cognitive anxiety and is another important factor in managing stress.

To score the CSAI-2, take the scores for each item at face value with the exception of item 14, where you "reverse" the score. For example, if you circled 3, count that as 2 points.

When totaling your rankings, you will arrive at the following three scores:

_____ **Cognitive State Anxiety:** (Sum of items 1, 4, 7, 10, 13, 16, 19, 22, & 25)

_____ **Somatic State Anxiety:** (Sum of items 2, 5, 8, 11, 14, 17, 20, 23, & 26)

_____ **Self-Confidence:** (Sum of items 3, 6, 9, 12, 15, 18, 21, 24, & 27)

Your scores for each will range from 9 to 36: 9 indicating low state anxiety and 36 indicating high state anxiety.

Martens, R., Burton, D.,
Vealey, R. S., Bump, L.,
& Smith, D. E. (1983)



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Eating Disorder Screen for Athletes (EDSA)

Eating Disorders Screen for Athletes (EDSA)

Please read each question carefully and select the appropriate response. Please note that "weight" refers to numbers on a scale, "shape" refers to amount and distribution of body fat and muscle, "body composition" refers to ratio of body fat to muscle, and "leanness" refers to low body fat-to-muscle ratio.

	Never	Rarely	Sometimes	Often	Always
1. Does your weight, shape, or body composition affect the way you feel about yourself?	1	2	3	4	5
2. Are you dissatisfied with your weight, shape, or body composition?	1	2	3	4	5
3. Do you worry that your weight, shape, or body composition will change if you cannot exercise?	1	2	3	4	5
4. Do you want to be leaner even if others may think you are already lean?	1	2	3	4	5
5. Do you worry about losing control over your eating because of how it may affect your weight, shape, or body composition?	1	2	3	4	5
6. Do you try to avoid certain foods to influence your weight, shape, or body composition?	1	2	3	4	5

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Scoring: Average responses across the 6 items. A score ≥ 3.33 indicates athlete may be at risk for an eating disorder.

Note. If athlete responded to at least 4 items, a score can be calculated by averaging the available items (i.e., dividing the sum of 4 available items by 4, or dividing the sum of 5 available items by 5). If athlete responded to less than 4 items, an overall score cannot be calculated.

Martens, R., Burton, D.,
Vealey, R. S., Bump, L.,
& Smith, D. E. (1983)



Services

Individual counseling

Sports Psychology Consultations

Support groups

Team Workshops



Athletics Resources

Cougar Student-Athlete Sport Psychology Staff



Located in the
Champions Center

Dr. Justin Martel

Sports Medicine Psychologist

Contact for Appointment

Justin.martel@pullmanregional.org

509-210-9281

Josh Clein, LICSW

Licensed Clinical Social Worker

Contact for Appointment:

Joshua.clein@pullmanregional.org

509-210-9283



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