Student-Athlete Mental Health and the Faculty Athletics Representative

Brian Hainline, M.D. | NCAA Chief Medical Officer | Senior Vice President Clinical Professor of Neurology, NYU Grossman School of Medicine





Faculty Disclosure

- Not-for-profit board member:
 - o Datalys Center
 - o United States Tennis Association
 - o Grand Slam Board (Australian Open, Roland Garros, Wimbledon, US Open)
 - o International Tennis Federation
 - International Tennis Integrity Agency (Observer)
- For profit medical advisory board:
 - 98point6
 - Spine Care

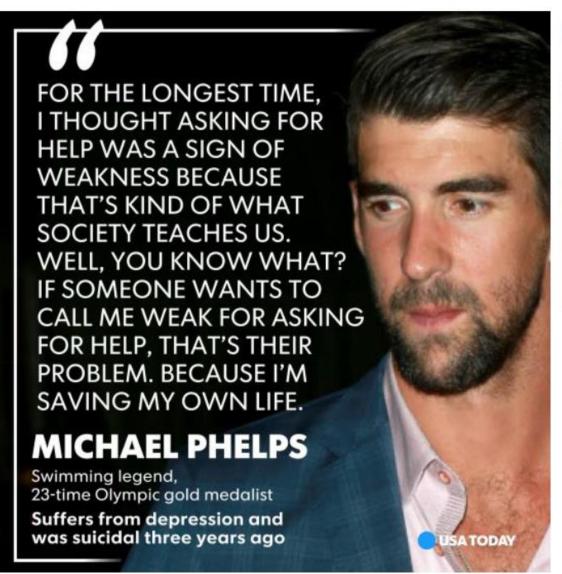
- Advisory board/panel/committee member:
 - o Concussion in Sport Group (Member)
 - o Expert Panel, 6th International Consensus Conference on Concussion in Sport
 - o DIAGNOSE CTE
 - o International Tennis Federation (Chair, Sport Science & Medicine Commission)
 - NBA Youth Health & Wellness Working Group
 - o WTA Player Development Advisory Panel
 - o USA Football Medical Advisory Board
- Neither Brian Hainline, nor any of his family members, have any relevant financial relationships to be discussed, directly or indirectly, referred to or illustrated with or without recognition within the presentation.



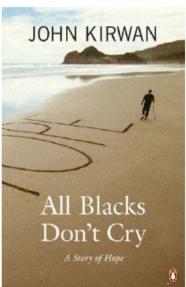


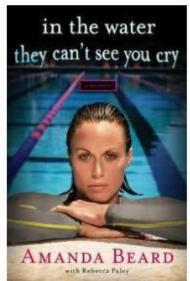




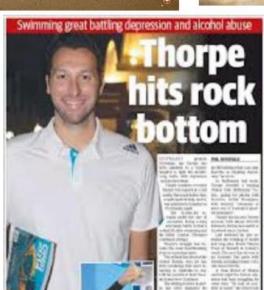


Skier Lindsey Vonn reveals she's battling depression











#MENTALLYFIT



Hainline talks mental health with Michael Phelps, Naomi Osaka and Surgeon General Vivek Murthy

NCAA Chief Medical Officer Brian Hainline led a forum at this year's U.S. Open Tennis Championships titled "Mental Health and Sport: Why It Matters" that featured U.S. Surgeon General Vivek Murthy, Olympic athlete Michael Phelps and Grand Slam champion Naomi Osaka.



Watch a recording of the panel as they discussed the intersection of mental health and sport, including a sport science detailed discussion regarding social media.

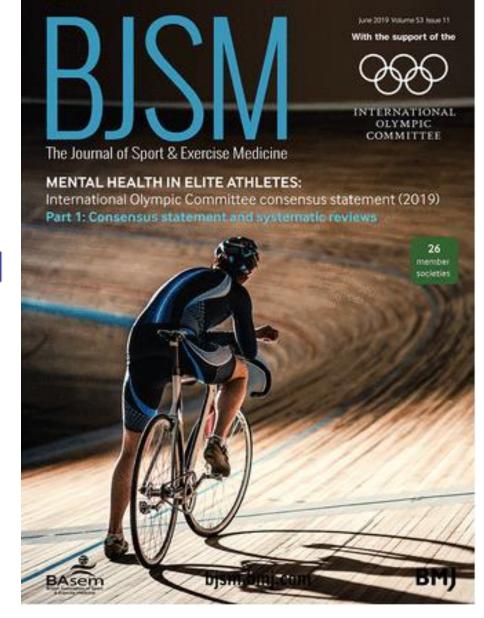
Breaking a taboo: why the International Olympic Committee convened experts to develop a consensus statement on mental health in elite athletes

Brian Hainline, ¹ Claudia L Reardon²

Consensus statement

Mental health in elite athletes: International Olympic Committee consensus statement (2019)

Claudia L Reardon, ¹ Brian Hainline, ² Cindy Miller Aron, ³ David Baron, ⁴ Antonia L Baum, ⁵ Abhinav Bindra, ⁶ Richard Budgett, ⁷ Niccolo Campriani, ⁸ João Mauricio Castaldelli-Maia, ^{9,10} Alan Currie, ^{11,12} Jeffrey Lee Derevensky, ¹³ Ira D Glick, ¹⁴ Paul Gorczynski, ¹⁵ Vincent Gouttebarge, ^{16,17} Michael A Grandner, ¹⁸ Doug Hyun Han, ¹⁹ David McDuff, ²⁰ Margo Mountjoy, ^{21,22} Aslihan Polat, ^{23,24} Rosemary Purcell, ^{25,26} Margot Putukian, ^{27,28} Simon Rice, ^{29,30} Allen Sills, ^{31,32} Todd Stull, ³³ Leslie Swartz, ³⁴ Li Jing Zhu, ^{35,36} Lars Engebretsen ^{37,38}







Breaking a taboo: why the International Olympic Committee convened experts to develop a consensus statement on mental health in elite athletes

Brian Hainline, 1 Claudia L Reardon²

Wake up call for collegiate athlete sleep: narrative review and consensus recommendations from the NCAA Interassociation Task Force on Sleep and Wellness

Emily Kroshus, ^{1,2} Jessica Wagner, David Wyrick, Amy Athey, Lydia Bell, Holly J Benjamin, Michael A Grandner, Christopher E Kline, Jessica M Mohler, Roxanne Prichard, Nathaniel F Watson, Brian Hainline

Attention-deficit/hyperactivity disorder in elite athletes: a narrative review

Doug Hyun Han, ¹ David McDuff, ^{2,3} Donald Thompson, ⁴ Mary E Hitchcock, Claudia L Reardon, ⁶ Brian Hainline ⁷

Mental health in elite athletes: International Olympic Committee consensus statement (2019)

Claudia L Reardon, ¹ Brian Hainline, ² Cindy Miller Aron, ³ David Baron, ⁴ Antonia L Baum, ⁵ Abhinav Bindra, ⁶ Richard Budgett, ⁷ Niccolo Campriani, ⁸ João Mauricio Castaldelli-Maia, ^{9,10} Alan Currie, ^{11,12} Jeffrey Lee Derevensky, ¹³ Ira D Glick, ¹⁴ Paul Gorczynski, ¹⁵ Vincent Gouttebarge, ^{16,17} Michael A Grandner, ¹⁸ Doug Hyun Han, ¹⁹ David McDuff, ²⁰ Margo Mountjoy, ^{21,22} Aslihan Polat, ^{23,24} Rosemary Purcell, ^{25,26} Margot Putukian, ^{27,28} Simon Rice, ^{29,30} Allen Sills, ^{31,32} Todd Stull, ³³ Leslie Swartz, ³⁴ Li Jing Zhu, ^{35,36} Lars Engebretsen ^{37,38}

Bipolar and psychotic disorders in elite athletes: a narrative review

Alan Currie, ¹ Paul Gorczynski, ² Simon M Rice, ^{3,4} Rosemary Purcell, ^{3,4} R Hamish McAllister-Williams, ⁵ Mary E Hitchcock, ⁶ Brian Hainline, ⁷ Claudia L Reardon ⁸

Determinants of anxiety in elite athletes: a systematic review and meta-analysis

Simon M Rice, ^{1,2} Kate Gwyther, ^{1,2} Olga Santesteban-Echarri, David Baron, Paul Gorczynski, Vincent Gouttebarge, Claudia L Reardon, Mary E Hitchcock, Brian Hainline, Rosemary Purcell, Rose





Management of mental health emergencies in elite athletes: a narrative review

Alan Currie, ¹ David McDuff, ² Allan Johnston, Phil Hopley, Mary E Hitchcock, Claudia L Reardon, Brian Hainline 7

Mental health symptoms and disorders in Paralympic athletes: a narrative review

Leslie Swartz, ¹ Xanthe Hunt, Jason Bantjes, Brian Hainline, Claudia L Reardon

Post-traumatic stress disorder (PTSD) and other trauma-related mental disorders in elite athletes: a narrative review

Cindy Miller Aron, ¹ Sydney Harvey, Brian Hainline, Mary E Hitchcock, Claudia L Reardon

Problem gambling and associated mental health concerns in elite athletes: a narrative review

Jeffrey Lee Derevensky, ¹ David McDuff, ² Claudia L Reardon, ³ Brian Hainline, ⁴ Mary E Hitchcock, ⁵ Jeremie Richard

Mental health symptoms and disorders in elite athletes: a systematic review on cultural influencers and barriers to athletes seeking treatment

João Mauricio Castaldelli-Maia, ^{1,2,3} João Guilherme de Mello e Gallinaro, Rodrigo Scialfa Falcão, Vincent Gouttebarge, Mary E Hitchcock, Brian Hainline, Claudia L Reardon, Todd Stull

Occurrence of mental health symptoms and disorders in current and former elite athletes: a systematic review and meta-analysis

Vincent Gouttebarge, ^{1,2} João Mauricio Castaldelli-Maia, ^{3,4} Paul Gorczynski, ⁵ Brian Hainline, ⁶ Mary E Hitchcock, ⁷ Gino M Kerkhoffs, ^{1,2,8} Simon M Rice, ^{9,10} Claudia L Reardon ^{11,12}

Psychotherapy for mental health symptoms and disorders in elite athletes: a narrative review

Mark A Stillman, ¹ Ira D Glick, David McDuff, Claudia L Reardon, Mary E Hitchcock, Vincent M Fitch, Brian Hainline

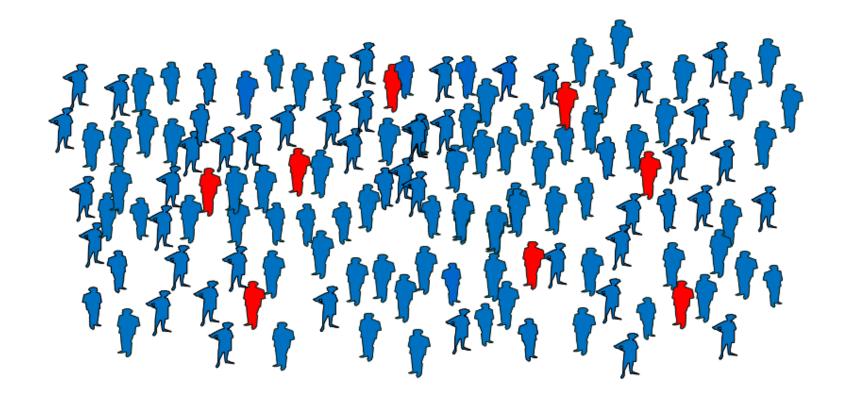
Recreational and ergogenic substance use and substance use disorders in elite athletes: a narrative review

David McDuff, ^{1,2} Todd Stull, João Mauricio Castaldelli-Maia, ^{4,5} Mary E Hitchcock, Brian Hainline, Claudia L Reardon





Compared to the general population, how common are mental health symptoms and disorders in elite athletes?





National College Health Assessment - Depression

Have you...felt so depressed that it was difficult to function? (Yes, in the last 30 days)

	STUDENT-ATHLETES	NON-ATHLETES*
Male	12%	18%
Female	18%	24%
White Male	10%	17%
Male of Color	16%	19%
White Female	16%	23%
Female of Color	23%	26%

^{*}Non-athletes are full-time undergraduate students between the ages of 18-24 attending NCAA-member institutions who do not identify as varsity athletes. Student-athlete N=14,134, Non-athlete N=138,695.

American College Health Association. American College Health Association-National College Health Assessment, Fall 2015, Spring 2016, Fall 2016, Spring 2017, Fall 2017 [data file]. Hanover, MD: American College Health Association [producer and distributor]; (2018-11-15).





NCHA - Anxiety

Have you...felt overwhelming anxiety? (Yes, in the last 30 days)

	STUDENT-ATHLETES	NON-ATHLETES*
Male	22%	29%
Female	38%	46%
White Male	21%	30%
Male of Color	23%	28%
White Female	38%	48%
Female of Color	39%	44%

^{*}Non-athletes are full-time undergraduate students between the ages of 18-24 attending NCAA-member institutions who do not identify as varsity athletes. Student-athlete N=14,134, Non-athlete N=138,695.

American College Health Association. American College Health Association-National College Health Assessment, Fall 2015, Spring 2016, Fall 2016, Spring 2017, Fall 2017 [data file]. Hanover, MD: American College Health Association [producer and distributor]; (2018-11-15).



Prevalence Studies

- Prospective studies report that mental health disorders occur in 5-35% of elite athletes over a period up to 12 months. (Schuring 2017; Du Preez EJ 2017; Foskett RJ 2018; Gouttebarge 2017; Gouttebarge 2017; Gouttebarge 2018)
- Evidence suggests these symptoms/disorders are *MORE common* in elite athletes:
 - o Eating disorders. (Sundgot-Borgen J, et al., 2004)
 - Some substance use disorders. (NCAA: National Study on Substance abuse habits of college student-athletes 2018; Schulenberg 2017; SICU/Core Institute 2013; Rigotti NA 2000)
 - o ADHD. (Putukian 2011; Wolraich 2011)
 - o Gambling disorder. (Derevensky 2012; Volberg 2010)
 - o Some **sleep disorders** (e.g., sleep apnea in American football players). (George 2003; George 2011; Rice 2010)



Prevalence Studies

- Evidence suggests these symptoms/disorders are probably <u>as common</u> as in the general population:
 - Sleep: insufficient sleep (Drew 2017; NCAA GOALS Stud 2015;
 Roberts 2018), circadian dysregulation. (Nédélec 2018; Laborde S 2015; Lastella 2016), insomnia disorder (Juliff 2015)
 - o Depression. (Gorczynski 2017)
 - o Anxiety. (GAD, SAD, OCD, panic disorder) (Schaal 2011; Gulliver 2015; Cromer 2017; Bandelow 2015; Goodman 2014)
 - o PTSD. (Bateman 2017)



Sport-specific risk factors for mental health symptoms/disorders in elite athletes

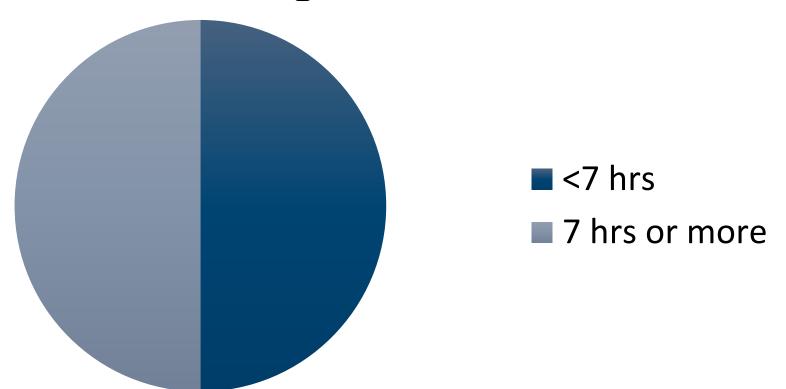
- Severe musculoskeletal injuries.
- Multiple surgeries.
- Decreased sport performance.
- Maladaptive perfectionism in sport.
- And many sport-specific risk factors for certain mental health disorders (as we'll see...).

Kilic 2018; Gouttebarge 2017; Prinz 2016; Gouttebarge 2015; Gouttebarge 2016; Hammond 2013; Li 2017; Rosenvinge 2018; Houltberg 2018



Sleep Concerns: Insufficient Sleep

Amount of sleep in-season by U.S. collegiate athletes





NCAA. NCAA GOALS Study, 2015. Indianapolis, IN: NCAA, 2016.

Health and Safety & NCAA

- Foundational components of NCAA mission.
- Priority for over 100 years.
- Embedded into the NCAA Constitution:
 - o Each member institution shall facilitate an environment that reinforces physical and **mental health** within athletics by ensuring access to appropriate resources and open engagement with respect to physical and **mental health**.







NCAA Health and Safety Priorities

Endorsed by the NCAA Board of Governors



Mental and Physical Health.



Sport-related Illness and Injury.



Training and Performance.



Education and Policy.









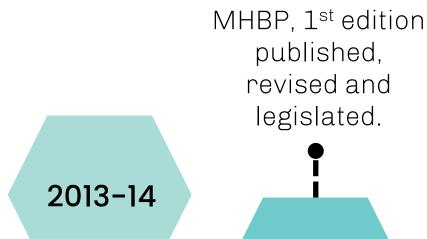
NCAA Committee on Competitive Safeguards and Medical Aspects of Sports



To provide expertise and leadership to the Association in order to promote a healthy and safe environment for student-athletes through research, education, collaboration and policy development.

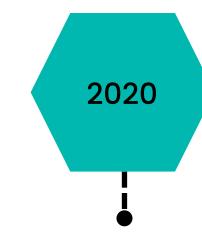


Mental Health Timeline



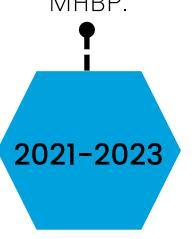
2016-19

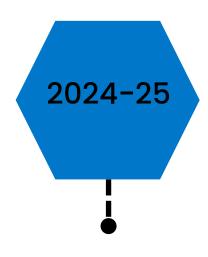
Mental Health Task Force created and convened.



Diverse Student-Athlete Mental Health and Wellbeing Summit conducted.

MHAG created by CSMAS to work on recommending updates to the MHBP.





Release of MHBP, 2nd edition, pending approval of BOG.





Interassociation Consensus Document

MENTAL HEALTH BEST PRACTICES

Understanding and Supporting Student-Athlete Mental Wellness





Important Considerations:

Each campus should establish an *interdisciplinary team* that supports student-athlete mental wellness; at many institutions, the coordinator of the team will be the team physician or director of medical services. The interdisciplinary team can include the primary athletics health care providers (athletic trainers and team physicians), licensed psychologists, social workers, life skills support staff, registered dietitians, peer support specialists working under the supervision of a licensed mental health provider, faculty athletic representatives, Student-Athlete Advisory Committee (SAAC) representatives and others that contribute to the overall team effort. Each member of the team has a distinct role in supporting student-athlete mental health, and the scope of that role should be defined within competency and licensure.

NCAA Legislation and Mental Health

Make mental health services and resources available consistent with the Mental Health Best Practices.

Distribute mental health educational materials and resources to student-athletes.

Include a guide to the mental health services and resources available and how to access them.

Bylaw 16.4.2





NCAA Mental Health Best Practices, 1st ed.

Endorsed by 25 of the leading mental health, sports medicine, and medical associations in the country.

1

Clinical
Licensure of
Practitioners
Providing
Mental Health
Care.

Procedures
for
Identification
and Referral
of StudentAthletes to
Qualified
Practitioners.

3

Pre-Participation Mental Health Screening. HealthPromoting
Environments
that Support
Mental WellBeing and
Resilience.

2

Rehearsed Mental Health Emergency Action Plan 4





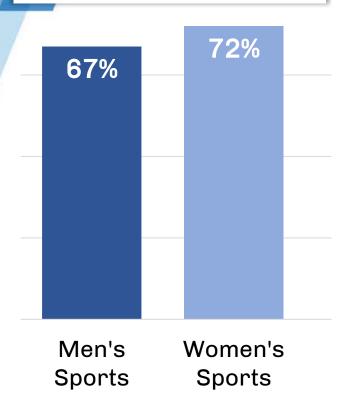
Campus Mental Health Support

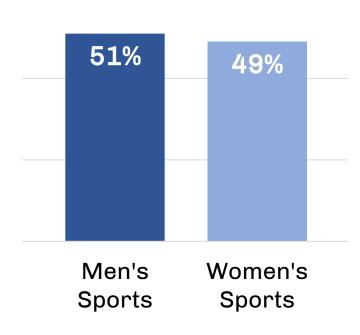
(Percentage of Participants Who Endorsed "Agree" or "Strongly Agree")

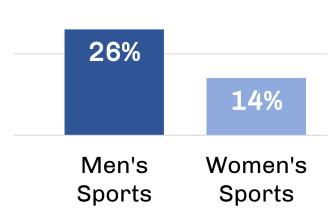
I know where to go on campus if I have mental health concerns.

I would feel comfortable seeking support from a mental health provider on this campus.

I would feel inadequate if I went to a therapist for psychological help.







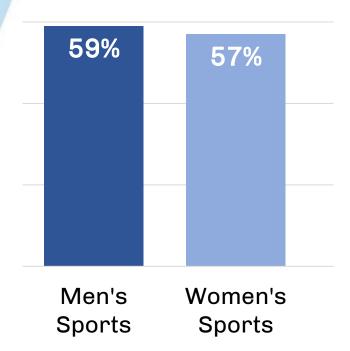


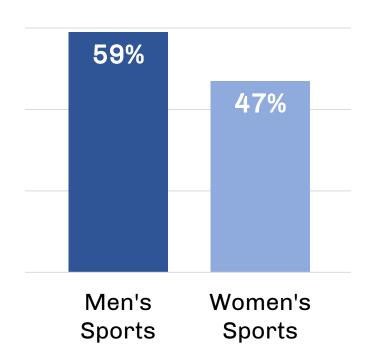


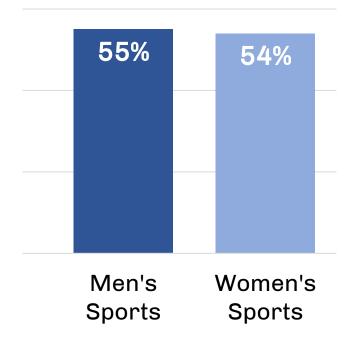
Mental Health Support in Athletics

(Percentage of Participants Who Endorsed "Agree" or "Strongly Agree")

I know how to help a teammate that is experiencing a mental health issue. I feel that student-athletes' mental health is a priority to our athletics department. Student-athletes on this campus take the mental health concerns of their teammates seriously.











MHAG Empowered by CSMAS to:

- Make recommendations on updating MHBP with specific consideration for:
 - Student-athletes of color.
 - Student-athletes with disabilities.
 - International student-athletes.
 - LGBTQ+ student-athletes.
- 2. Using data and literature, *update and create programming* to support student-athletes and provide *feedback on mental health topics*.
- 3. Establish *criteria for determining when to update* NCAA Mental Health materials.



Mental Health Advisory Group

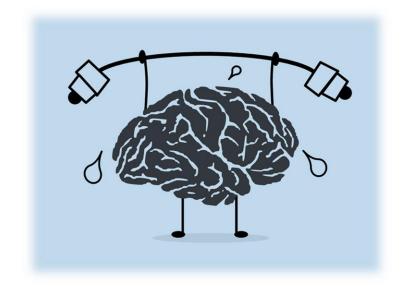
20External
Representatives

- Organizations with expertise in mental health, education, diverse student-athlete populations, and athletics.
- Representatives appointed by corresponding organization.

Membership Representatives

- Represent Divisions I, II and III.
- Over half are student-athletes.

Stressors and Environmental Factors that Impact Elite Athlete Mental Health



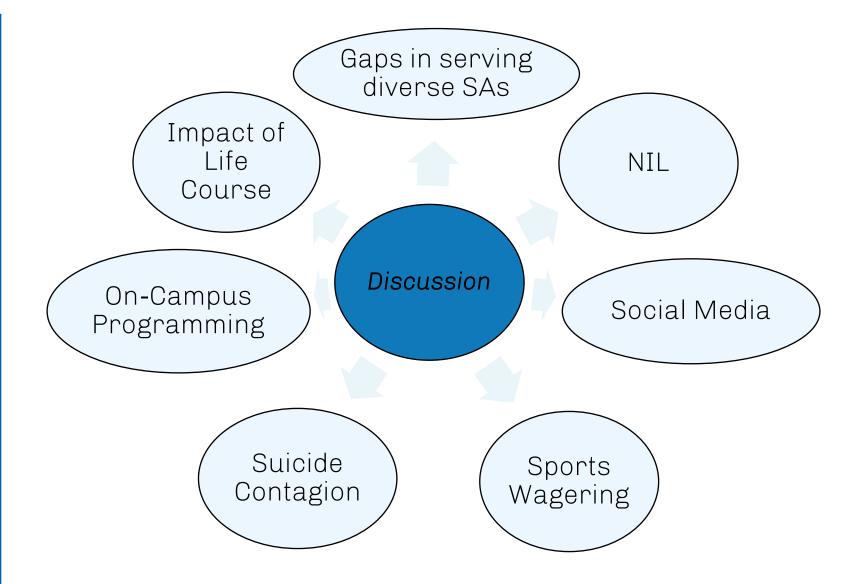




H E A L T H

Consensus process.

Statements rated for agreement and feasibility.







Reorganizing MHBP recognizes role of health promotion.

01

Creating healthy environments that support mental health & well-being.

02

Identification of SAs with mental health signs, symptoms, & conditions.

03

Action plans that address routine and emergency mental health care.

04

Licensure of provider(s) performing formal evaluation and treatment.

NEW

Foundational principles for understanding and supporting student-athlete mental health.



Additional considerations provide menu of options for campus to consider based on local circumstances/resources.





Foundational Principles

Mental health is an important dimension of overall health.

- It exists on a continuum.
- It is inextricably linked with physical health.

Risk and protective factors are multilevel and may vary over time.

- Emerging adulthood is a critical developmental period.
- Coaches play an important role.
- Discrimination, maltreatment, and psychosocial trauma have negative impacts.
- Social media is an evolving concern.

Collaboration and continuous improvement are essential.





Resources and Next Steps

Mental Health - NCAA.org

SSI Spotlight on MHBP

NCAA My Apps >> Learning Portal

Convention 2024

- Educational Session.
- Featured Session.







ncaa.org/SSI



