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An Analysis on Mental Health in College Sports at a Small Faith-Based Midwest University

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Presented to:

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Abstract

Throughout universities around the world, every day, the mental health of college students is tested. Specifically, collegiate athletes may feel uncomfortable, or uncertain seeking out resources to assess their overall mental health. There are numerous reasons athletes may be either comfortable, or uncomfortable seeking out these resources. Some reasons can include being seen as a sign of weakness, there are not resources for athletes, or they are uncertain about what resources are available to them. The researchers chose to investigate the mental health of two different sports teams at a university. Specifically, the researchers explored these athletes and their mental health state, whether or not they feel comfortable utilizing campus resources, and whether or not they have non-campus provided resource to assess their mental health state. Participants of the study hailed from a small, religious, and faith-based Midwestern university.

Introduction, Overview, and Focus

College athletes at universities across the world experience numerous ailments in regard to their mental health. Athletes may face several different mental health concerns including anxiety, depression, and even thoughts of suicide. The problem with all of these concerns and issues is that athletes may have these various conditions, but athletic programs, and these collegiate sports teams consistently push these athletes.

College sports teams push these athletes through demanding training schedules, potentially even strict diets and regimens, and high levels of physical activities for multiple hours on a daily basis. In a 2019 study on the observation and assessment of mental health, Castaldelli-Maia et.al (2019) detailed how “The seeking of mental health treatment among elite or college

athletes is low” (p. 1). The study details how athletes may experience one, or a culmination of mental health concerns consisting of “anxiety, depression, and even eating disorders” (Castaldelli-Maia et.al, 2019, p. 1). The strict diets and regimens, training schedules, and constant physical activity only worsen and enhance the risk for mental health concerns.

The focus of this study is to better understand the mental health of college athletes across different sports. We are intending to look for information pertaining to whether or not these college athletes are supported not only by their team and coaching staff, but by their universities as well. We also wanted to understand how significant mental health issues like anxiety, depression, and suicide are being observed and assessed at these universities. The review of literature encompasses four distinct themes related to this topic. Athletes and their overall access to mental health resources. Secondly, we uncovered information about different perspectives, continuums, and models on the mental health of athletes. Third, general beneficial mental health resources for collegiate athletes. Lastly, information on the stigma and well as practices to combat this stigma.

Literature Review

Athletes and their access to mental health resources

Mental health conditions are a growing problem throughout the U.S., particularly in young adults and college students. Gulliver et al. (2014) stated that “The prevalence of mental disorders is greatest among younger people with one-quarter of 16-34 year-olds meeting critical criteria for one or more disorders” (p. 255). College students are in the prime age range for succumbing to these mental disorders and have little to no way of resolving them. Gulliver et al. (2014) study, published in the 2015 Journal of Science Medicine in Sport detailed an

investigation of common mental health disorders like depression, stress, and anxiety in an Australian college student population. Results of the study showed that “Nearly 50% of the participants showed the prevalence of at least one common mental health disorder” (p. 255).

There are various reasons for athletes potentially not seeking out mental health resources. Rice et al. (2016) stated that: “Athletes tend to not seek support for mental health problems for reasons such as stigma, lack of understanding about mental health and its potential influence on performance, and the perception of help-seeking as a sign of weakness” (p. 1334). A review mentioned in the article found that; “Intense physical activity performed at the elite athlete level might compromise mental wellbeing, increasing symptoms of anxiety and depression through overtraining, injury and burnout” (Rice et al., 2016). Reardon et al. (2019) discussed how: “The state of the overall science of mental health in elite athletes as of right now stresses the overall need for more research” (p. 686). This article provides a handful of strategies for future research moving forward.

One of those strategies consists of Nuanced approaches, or approaches that look into specific areas of healthcare and find important details. “Specifically to the provision mental healthcare might be needed, for example by incorporating into the mental healthcare team people such as athletic trainers, physical therapists, coaches and others in the athlete’s entourage and community” (p. 686). College sports are played at such a high level of intensity against very high competition. Coupling that with practicing almost every day and waking up early every day. “Elite sport has specific stressors that potentially increase the likelihood of injury or illness, including mental health disorders” (Reardon et.al, 2019, p. 683).

College sports are no joke, athletes and their mental health should be treated seriously. While it may not be the most effective resource for athletes, support and reassurance can go a long way. Purcell et.al (2019) states: “Facilitative factors include support and acknowledgment from coaches who can help to create a non-stigmatized environment where help-seeking can be normalized” (p. 2). A big support system extremely important to athletes is their coaches. At the collegiate level, athletes are most likely to see their coaches every day whether it is games or practices. Building that relationship with one’s coach is something that can be vital to athletes and their mental health.

Perspectives, continuums, and models on the mental health of athletes

One model of mental health was the Mental Health Model of sports performance. In this model according to Lundqvist & Andersson (2021), “Psychopathology was examined by means of personality and mood assessments” (p. 2). Adding information about this model, Raglin (2001) stated; “The model postulates that as an athlete’s mental health either worsens or improves performance should fall or rise accordingly” (p. 875). There are also many holistic models of mental health. In those models, mental health is “Regarded as a highly complex and multidimensional construct” (Lundqvist & Andersson, 2021, p. 3). There are numerous different dimensions of the concept of mental health, and it can be hard to understand one’s mental health, especially for collegiate athletes.

There are also continuum models. These continuum models can be more helpful in understanding the mental health of an individual. American sociologist and psychologist Corey Keyes developed the concept of a two-continuum model; “Rather than seeing mental health and mental illness as residing at two ends of a single continuum, he suggested that mental illness and

mental health, are two distinct but related dimensions existing on two separate continua” (Uphill et al., 2016, p. 3). Keyes identified how mental health and mental illness are related concepts but are two different continuous sequences. Mental health and the disorders of it can never really be “complete.” Keyes’ Mental Health continuum model examines mental health through three different levels: flourishing, languishing, and moderate mental health. “Individuals with flourishing mental health report feeling at least one measure of hedonic well-being plus six or more of the measures of positive functioning almost every day” (Karaś et al., 2014, p. 105). Flourishing as in their mental health and well-being is consistent, and/or growing. “Individuals with languishing mental health, however, report feeling at least one measure of hedonic well-being with six or more measures of positive functioning never or maybe once or twice” (Karaś et al., 2014, p. 105). When you have languishing mental health you are stuck and stagnant in life overall mentally unhealthy. Lastly, moderate mental health is the mediator you are neither flourishing nor languishing you are right in the middle.

Well-being and mental health are two concepts that work together. The World Health Organization proposed in 2004 that “Mental health be defined as “a state of well-being in which the individual realizes his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community” (Uphill et.al, 2016, p. 3). Continuum models are highly valued in sports psychology culture. People’s mental health is essentially determined through a continuum. Overall, these are some examples of the mental health perspectives, models, and continuums. An interesting thing we noticed through research is that they can all essentially be connected.

Beneficial mental health resources for athletes

Through an examination of sources, a multitude of different mental health resources beneficial for athletes were apparent. One very prevalent aspect across sources is social work. Gill (2008) defines that the mission of social work is to “Enhance human well-being and to help meet the basic needs of all people” (p. 85). College sports are seen as an escape, especially for those who come from rough upbringings. Those upbringings that people have can contribute negative effects on their mental health. Another resource is assessing their subjective well-being. Morris et.al (2020) defined subjective well-being as: “The scientific term for happiness and life satisfaction. It is how individuals evaluate their own lives, where people identify positive feelings and believe their life is going well.” (para. 5). This study on subjective well-being analyzed subjective happiness on a multitude of different factors. This study used a scale with a sample of student-athletes at a university. Coaches could utilize this with their players by asking them to assess their mental health at the end of every week. This could give coaches near-immediate results, and they would be able to understand the further steps to take if necessary.

Resilience on the other hand, is another resource not necessarily tangible and on the surface, but rather a person’s own thought processes and behavior. Psychological Resilience in specific is defined as, “The role of mental processes and behavior in promoting personal assets and protecting an individual from the potential negative effect of stressors” (Fletcher & Sarkar, 2012, p. 675). “Research suggests that resilience has a positive and preservative effect in successful resistant and encounter with horrible situations” (Hosseini & Besharat, 2010, p. 634) Seyedeh Hosseini and Mohammad Besharat’s study on resilience within sport achievement and mental health, results of the study concluded that; “Resilience has positive effects on well-being and achievement” (Hosseini & Besharat, 2010, p. 635). A separate study comparing the mental health of athletes and non-athletes investigating resilience and athletic identity found that:

“Resilience is overall positively correlated with mental health” (Knowles et.al, 2021, p. 7).

Resilience is not a physical resource on the surface, it is one that an athlete builds up within themselves.

Stigmas, practices, comparing demographics, and two types of sports

The stigma(s) on the mental health of athletes have been long-standing. The “stigma” is essentially the perspective/the portrayal of athletes and their mental health status. “The stigma attached to athlete mental health issues are driven by many factors including social history, financial gain or loss, and even media outlets” (Baumann, 2016, p. 135). Many athletes tend to be reliant on themselves, specifically college athletes because they do not have a strong support system around them. Chang et.al (2020) describes a numerous amount of beneficial practices to combat mental health issues. “The sports medicine physician and other members of the athletic care network are uniquely positioned to detect MH issues early and intervene appropriately” (p. 218). Universities need to utilize physicians throughout their athletic programs. It is essential to have someone knowledgeable in the field of medicine. Medical physicians can help treat athletes suffering from medically diagnosed mental health problems. Kerr et.al (2014) compared men and women, along with different types of sports, and utilized a questionnaire that “Collected information on sports history, concussion history, current physical and mental health, and demographics of former collegiate athletes” (p. 2). Results of the study determined that former collegiate athletes' physical and mental health is similar to the overall U.S. population. Pluhar et.al (2019) created a study that compared team sport athletes compared to individual sport athletes and whether one was more likely to suffer anxiety or depression than the other. The study concluded that “Individual sport athletes suffer more anxiety and depression than people who play team sports” (p. 491). Looking back at it this makes a lot of sense. In sports, like

football, basketball, and baseball, players are collaborating, making connections working together as a team, and essentially bonding. There is a lot less pressure in those settings because you have others to rely on, not just yourself. This can help to ease your mental health. On the other hand, in individual sports such as swimming, and track/running the pressure is on you. You are required to take responsibility for the actions you take. If you make a mistake or create any problems, there will most likely be consequences that you will have to reap.

Research Question

RQ1: Why are athletes uncomfortable utilizing campus resources to manage their mental health?

Justification

Why are athletes uncomfortable utilizing campus resources to manage their mental health?

A majority of the research done throughout this study has been to determine whether or not athletes are utilizing mental health resources on campus, and whether or not they feel comfortable utilizing said resources. Cutler and Dwyer (2020) detailed “Research shows that there is a direct relationship between lack of self-seeking mental health support and a high level of personal stigma. In a separate study in 2005 results showed that student-athletes have fewer positive attitudes toward help seeking than their nonathlete peers” (p. 210-211). The article also details what goes into the decision-making procedure of these athletes when deciding whether or not to seek out mental health resources to assess themselves. “The athlete’s thoughts and feelings towards themselves seeking help, their perceptions of their fellow athletes’ thoughts on seeking help, and the general public’s thoughts on seeking help” (Cutler & Dwyer, 2020, p. 211).

Athletes and just people in general should not have to worry about being judged and looking

weak amongst their peers in order to improve themselves mentally. Researchers wanted to understand the reasoning behind why these athletes may have not been comfortable with seeking out and utilizing said resources at this small, faith-based university in the Midwest.

Methods

After we gained the approval of the Institutional Review Board, we administered our survey to a small sample of college athletes at a small, religious, and faith-based Midwestern university. The participants of our study consisted of 70 different athletes on the college campus. In terms of our “research design” our study was cross-sectional and field-independent. We administered our surveys in-person to two different sports teams at this university. The survey incorporated questions that do not require excessive amounts of thinking. Our sampling method was simple random because each participant has an equal chance of being represented in our data.

The survey mainly consisted of closed-ended questions, ones that did not involve too much thinking. This way, our participants were more inclined to provide responses to the questions within the survey. Utilizing a Likert Index Scale and basing some of our questions around this scale, we were able to evoke feelings from our participants through Strongly Agree, Agree, Undecided, Disagree, or Strongly Disagree statements and questions. We administered our survey in-person to a male as well as female sports team at this university. The benefit of administering the surveys in-person allowed for the researchers to have full participation from all participants in our study. The fact that we were able to oversee participants and make sure they respond to our survey truly helps to determine whether or not our research question held validity and accuracy. The survey helped us gain an understanding on whether or not athletes on this

university campus feel they have reliable access to mental health resources. Researchers also were able to understand whether or not athletes were both utilizing, and or comfortable utilizing resources on campus.

Results

Two different sports teams at the university (one male team, and one female team) were surveyed asking 12 questions to determine whether or not athletes feel as though they are able to adequately assess their mental health on campus, feel that the university has resources for them to assess their mental health, and whether or not they are comfortable utilizing those resources. Of the 70 undergraduate students who completed the survey in the fall of 2022, 70 participated in this study by responding to the survey (a response rate of 100%). Of those 70, 47% of participants were sophomores (N=33), 23% of participants were juniors (N=16), 26% of participants were seniors (N=18), while the remaining 4% of participants were super-seniors (N=3). The results of the participants were then analyzed.

To examine our research question, researchers compared participants' age/year in school to the question of "Have you utilized any mental health resources on campus?" We mainly wanted to see if participants who were older compared to those who were younger and vice versa tended to utilize mental health resources on campus more often than the other. To find out this information we utilized a chi-square test of association. Through this test, the researchers found that age/year in school and if they have utilized resources on campus had no significant association. ($P > 0.207$).

Researchers then wanted to see if race/ethnicity held weight in terms of being significantly associated with utilizing mental health resources on campus. The majority of our participants were either White/Caucasian (60%) or Black/African American (~33%), we

grouped everyone else who was not either one of those races into an “other” category (7%). The “other” category consisted of participants who are multi-racial, a different listed race/ethnicity, or a specific other one that was not listed in our survey. Using a chi-square test, the researchers found that race/ethnicity and if they have utilized resources on campus has no significant association. ($P > 0.55$). It is noted that White/Caucasian participants were less likely to utilize mental health resources on campus, but this could just be attributed to them being our largest group within our overall research population therefore more responses for more categories exist.

Researchers really wanted to focus on understanding whether or not athletes feel they have resources to assess their mental health. If their mental health state is not in the best place, we wanted to know what the resources are accessible to them whether provided by the university or not. After collecting our data, researchers found that 8 participants (~11% of our data) felt their friends were adequate mental health resources to improve their overall mental health state. 3 participants (~4% of our data) felt their teammates were the best resource. 1 participant (1% of our data) felt their coaches were the best resource. Lastly 58 participants (~83% of our data) chose “other” on our survey or selected multiple of the 3 resources above. Another common resource which participants specified along with either friends, teammates, or coaches was parents and or other family members (7%).

Discussion

Co-Cultural Theory

The Co-Cultural Theory was developed by a Western Michigan University communication professor named Mark Orbe. Razzante and Orbe (2018) detail the “Co-Cultural Theory examines the ways in which co-cultural groups (groups which have been historically marginalized) interact with dominant groups (groups which have been historically privileged)”

(Razzante & Orbe, 2018, p. 355). The historically marginalized groups consist of black males, LGBTQ, people with disabilities, and also women. On the other hand, the historically privileged group consists of white males. “The Co-Cultural Theory provides insight into how different factors (e.g., preferred outcome and communication approach) intersect to influence the specific communication practices that traditionally-marginalized group members enact in their interactions with others” (Razzante & Orbe, 2018, p. 355). Co-Cultural Theory closely aligns with Dominant Group Theory which is said to “complement, and subsequently extend, the work of Co-Cultural Theory using the parallel structures, concepts, and language” (Razzante & Orbe, 2018, p. 355).

Women and Black/African-American males are two groups of people apparent in our overall data, and it will be interesting to further understand how and why women and Black males responded the way they did in our survey, and how each of their results compare to our other White male participants. 34 of our participants (~49% of our data) were White males. 23 of our participants (~33% of our data) were Black/African-American males. 8 of our participants (~11% of our data) were Women. While the rest of our participants were either multi-racial, or specifically chose a different race/ethnicity that we had listed or wrote down the one they identify as (~7% of our data). The researchers asked participants if they have utilized any mental health resources on campus. Results detail that 4 Black/African-American male participants responded “Yes” while 19 responded “No.” 2 White male participants responded “Yes” while 32 responded “No.” Of our female participants 3 responded “Yes” while 5 participants responded “No.” This means that approximately 17% of our Black/African-American participants responded “Yes” while approximately 83% of our Black/African American participants responded “No.” Approximately 5% White male participants responded “Yes” and

approximately 95% White male participants responded “No.” 60% of our female participants responded “Yes” while 40% responded “No.” We are able to conclude from this data that women are more likely to utilize mental health resources on campus over both White/Caucasian and Black/African-American males according to this data.

The researchers asked participants if they feel, “There are adequate resources on campus for them to assess their mental health.” They also asked, “If the answer to the previous question was YES, do they feel comfortable utilizing those resources?” With these two questions a Likert Index Scale was utilized to gauge scores on a scale of Strongly Agree to Strongly Disagree. It was interesting to see participants responses We live in a generation where everyone stresses on and focuses on getting tasks, and work assignments/activities done quickly and efficiently.

Administering the surveys in person helped us understand participants mindsets at the time. They wanted to take the surveys and finish them as soon as possible whether they gave the questions a lot of thought, or little thought at all. The goal for them was to finish efficiently.

Participants were asked what specific non-university provided mental health resources do they utilize. Our options for this question were: friends, teammates, coaches, and other which consists of multiple of these, or something not specifically listed on our survey. The majority of participants from all groups fit in the other category. This can be attributed to the relationship they have built amongst their friends, teammates, and coaches. Being around your team every year, meeting new people, your coaches, new or returning teammates again it makes sense why the majority of groups fit into this category.

In a study relating to college athletes based on division levels of sports and whether or not they feel comfortable seeking mental health resources results showed that higher Division levels of college athletics are less comfortable seeking out mental health resources than lower

Division levels. Moore (2017) detailed “Division I college athletes experienced significantly lower levels of comfort in seeking behavioral health services than Division II and Division III college athletes. Division I athlete respondents listed that scholarship eligibility, concerns over losing playing time, and fear of disappointing teammates and coaches were the top reasons they did not feel comfortable seeking behavioral health services” (p. 137). These results from this study are very interesting as they contradict the researchers findings. The university participants were surveyed at was Division II. Division II athletes still have scholarships which was the top concern of participants as verified by this study.

This could also be attributed to race/ethnicity. Moore (2017) detailed “A majority of the college athletes identified as white (74%)” (p. 135). 60% of participants within our research study were White/Caucasian. Of those participants 21 agreed that they feel comfortable utilizing mental health resources on campus. 8 White/Caucasian participants disagreed while the other 13 were undecided. This data concludes that the majority of our White/Caucasian participants feel comfortable seeking out and finding ways to assess their mental health at this university. A good portion of our White/Caucasian participants were Undecided on whether or not they feel comfortable utilizing campus resources. This could be attributed to multiple different factors. Participants may feel uncertain about whether or not there even are resources on campus to assess themselves. Participants may not want to disclose information related to this question, or participants do not know.

Social Learning Theory

Black/African Americans being represented as our second largest group within our data set (~33%) researchers wanted to compare responses from Black/African Americans to White/Caucasians. Of those participants 13 agreed that they feel comfortable utilizing mental

health resources on campus. 1 White/Caucasian participants disagreed while the other 9 were undecided. This data concludes that as well as the White/Caucasian participants, the Black/African American participants as well are comfortable utilizing mental health resources at this university. In a research study relating to black football athletes, and their barriers of seeking out mental health resources. The theory of social learning was mentioned. According to Wilkerson et al. (2020) Social Learning Theory suggested that “Life experiences inform behavior. Furthermore, social learning theory intimates that individuals are not only learning from others but are learning from their environment. Social learning theory builds upon social cognitive theory because there are three elements that influence performance: behavior, environmental influences, and personal factors” (p. 57-58). The first section of the research details information about black male athletes relating to “life experiences informing behavior.” Wilkerson et al. (2020) detailed “A vast majority of Black male student-athletes enter campus in a disadvantaged state. Hardships, poverty, and poor schooling limit the overall college experience for Black student-athletes. Research shows such disadvantages leave Black male student-athletes feeling exploited and isolated” (p. 56). It is interesting learning about this research out there as our data goes directly against and contradicts this information. In both the research studies Moore (2017) and Wilkerson et al. (2020), Weakness was a significant barrier in whether or not participants chose to seek mental health assessing resources. Results of Wilkerson et al. (2020) study detailed that “The participants did not want to be viewed as weak, or less than their other teammates. Many of the participants felt as if it was their responsibility to always be ready to play despite their emotional state” (p. 64). Not only college athletes, but just college students in general want to handle everything on their own and asking for help is a “sign of weakness.” Weakness being one of the major themes that resulted in the Wilkerson et al. (2020)

study. The second major theme detailed was silence. Wilkerson et al. (2020) stated “Silence included awareness, community, and relationships with family and coaches. Some indicated a preference in talking to their families about mental health issues and conveyed the cultural aspect of Black families not talking outside of the family” (p. 63). Researchers wanted to compare their data to this research study on whether or not Black/African American participants mainly utilize their families as mental health resources over other resources either non-campus provided, or campus provided. Researchers asked participants what are some non-campus mental health resources they utilize? Out of our 23 Black/African American participants, 78% did not specify utilizing their families as resources while 22% specified utilizing their families as a mental health assessing resource. Results in this research study concluded that “Participants reported that mental health was not a topic of discussion in the locker room. In fact, mental health was rarely addressed by the coaches. One participant referred to “having to wear your mental health issue” to receive help” (Wilkerson et al., 2020, p. 72). This goes back to our data earlier, a majority of the Black/African American athletes within our overall data set feel comfortable assess mental health resources on this campus. This could be the result because their coach values each athlete and wants them to be in a beneficially healthy mental state.

Another prevalent group with our overall data set was women. ~11% of our overall data set consisted of women. We compared White/Caucasian participants as well as Black/African American participants, and we now want to understand women and their philosophies for seeking out mental health resources. In a research study relating to mental health preventative factors among Canadian women university athletes, the research conduct was one a pre-test/in-season test which Pankow et al. (2021) detailed “focusing on maintaining (rather than building) their global flourishing and used MH protective factors to respond to sport challenges

by managing their commitments, communicating with coaches, and looking for positives” (para. 1). 75% of our female participants reported “other” in terms of utilizing non-campus provided mental health resources meaning they used a combination of their either friends, teammates, coaches, or specified a specific other resource. Communicating with coaches is an interesting resource for participants to assess their mental health. Researchers asked participants what some non-campus related resources are they utilizes to assess their mental health. One participant specified in the “other” category that “you can’t talk to your coaches because they will not be real or straight up with you. While a majority of our participants responded that they use multiple resources, 8 only responded friends, 3 responded teammates, and only 1 responded coaches. In another related research study, detailing “Student-Athlete Perceptions of Stress, Support, and Seeking Mental Health Services,” Cutler and Dwyer’s (2020) study results detailed as follows “Student athletes are more likely to seek help from Non-Team Support Personnel than Team Support Personnel, and Coaching Staff. In general, on a five-point scale, student athletes would accept and trust teammates and perceive their teammates would do the same for other teammates” (p. 215). Results from these two studies detail that teammates are vital resources for collegiate athletes in efforts to assess their mental health. While our data resulted in participants utilizing coaches as a resource to assess mental health, they are not the most coveted sources overall. Participants rather would utilize their friends and teammates instead of their coaches.

Limitations

Our biggest limitation relates to the collecting data aspect of our overall research study. In order to avoid conflict with data collection already being conducted by the athletic office on this same subject, the researchers were limited to collecting data from only two sports on campus- rather than the entire student athlete population.

We came to the conclusion that it would be best to just administer our surveys in-person, instead of through email to avoid confusion, and also to only interview two sports teams on campus this way it limits the chance of participants information being compromised while still giving us the chance to collect valuable data.

We would have liked to survey the whole athlete population at this small, religious and faith-based university of the Midwest. This way we would have gotten significantly more responses and overall contribution from participants at this university. There are also significantly more male participants in our study compared to females. We would have liked to have the participation from both males and females to be somewhat similar or equal compared to being one-sided for the most part.

Suggestions for Future Research

This study while effective in helping the researchers find the answers they were looking for, definitely calls for the creating of future research. Future research could definitely be done and utilized for a larger group of individuals. Getting the chance to survey the whole athlete population on campus, and or potential giving the surveys to other universities in the nearby area and collecting their responses could help to overall refine our data. It would have been great to learn and understand about the responses from other universities, because our sample would be a lot bigger. Another suggestion relating to this is surveying all the universities in the state. Obviously surveying all the universities in the world is more likely than not nearly impossible to do, but just the state while it is a significantly large population, it is a lot more reasonable than each college university in the world.

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