

# Attitudes Towards Help-Seeking Behaviors Among Collegiate Student-Athletes

Jordan Morton

## Abstract

College students are experiencing problems with mental health at increasing rates, and student-athletes are a sample of this population that is being affected. In order to provide adequate resources for college students that are specific to their needs it is essential to understand their attitudes and what may be hindering them from reaching out to seek help. The current research examines and compares attitudes towards help-seeking behaviors in college students to determine the relationships among athletics and community support. Participants ( $N = 173$ ) completed a brief survey to measure attitudes towards seeking help and perceptions of support from the community. Results indicated that those who had more positive attitudes towards seeking help tended to be those who had sought professional help, those who were non-athletes, or those who were female. Athletes also reported seeking help at significantly lower rates than non-athletes. Future research should focus on implementing programs that are created around the needs of college students.

Problems with mental health will affect approximately one in four young adults who are college aged (Gulliver, Griffiths, & Christensen, 2012), and estimates of the prevalence of mental illness among student-athletes is similar, despite the belief that they are elite competitors and their mental toughness protects them from these problems (Hughes & Leavey, 2012). Research has shown student-athletes must balance the demands of multiple roles, primarily those of being a full-time student while competing in collegiate athletics, which may be detrimental to their mental health (Barnard, 2016; Beauchemin, 2014; Hughes & Leavey, 2012; Joshua, 2006). Little research has focused on the differences in attitudes and opinions about the resources available to athletes and nonathletes. Thus, the purpose of the current research was to examine attitudes towards help seeking behaviors among athletes and nonathletes and the rates at which each group sought help.

Having to sit out of competition or practice due to injury is a problem that athletes face. As such, responses to physical injuries are often worked into student-athletes' daily schedules, out of necessity, because athletes and coaches want to return to competition as quickly as possible, but the same cannot be said for personal issues requiring intervention, such as those with mental illness (Delenardo & Terrion, 2014; Neal et al., 2013). Team physicians report feeling pressured to return athletes to competition as soon as possible, even when it may be harmful to the athlete's physical or mental health (Kaier et al., 2015). This is largely due to the emphasis that is placed on mental toughness in the world of competitive athletics and poses a greater threat to the athlete than the initial injury does (Delenardo & Terrion, 2014; Kaier et al., 2015). Athletes must also overcome the fear of returning to competition and the potential of getting hurt again.

Approximately 6% of high school athletes move on to compete in college as part of the National Collegiate Athletic Association (NCAA), making student-athletes a very small, select

group of college students (NCAA, 2018). As such, they experience an array of demands and stressors unknown to the majority of college students such as balancing school and training, missing class due to traveling for competition, and attempting to retain a social life (Barnard, 2016; Beauchemin, 2014; Hughes & Leavey, 2012; Joshua, 2006). Researchers have compared athletes and nonathletes on many different wellness measures and repeatedly found that athletes score lower than nonathletes, especially in regards to mental health (Heird & Steinfeldt, 2013; Waston & Kissinger, 2007). This difference can be partially attributed to student-athletes' lack of leisure time to socialize on a daily basis and the requirement that they put their athletics above their own needs and desires (Heird & Steinfeldt, 2013; Waston & Kissinger, 2007). Collegiate athletes, especially at the Division I level, are often times idolized and made to appear larger than life by the media. This additional scrutiny can be a barrier to seeking help when problems do arise (Joshua, 2006).

Problems with mental health are not able to be seen visibly, so athletes feel an increased pressure to resolve the issues quickly, especially compared to physical injuries (Neal et al., 2013). When combined, the increased pressure and scrutiny creates a serious threat to the mental health of student-athletes because it creates an environment where admitting to problems with mental health or mental illness is akin to admitting weakness (Neal et al., 2013). Student-athletes report being influenced by fears of negative outcomes such as decreases in playing time or rifts in relationships within the team when deciding to return to competition, despite their own level of readiness, leading many to return before they should (Delenardo & Terrion, 2014). This increased stigma, though largely internally applied, is very real to the student-athletes it affects.

Student-athletes document a variety of reasons for not seeking help when symptoms of mental illness arise, the majority of which revolve around stigma (Beauchemin, 2014; Gulliver

et. al, 2012; Kaier et al., 2015). Fear or embarrassment of seeking help and the lack of leisure time students, including athletes and non-athletes, have on a daily basis can help explain why more people do not actively seek help (Barnard, 2016; Hughes & Leavey, 2012). Gender differences seem to remain consistent among college students, as females are more likely to seek help than males, even among athletes (Brockmyer, 2016; Coyle, Groczynski, & Gibson, 2017). Research has shown that programs aimed at reducing stigma and promoting education about mental health are effective at reducing the negative feelings associated with mental illness (Fischer & Farina, 1995; Gulliver et al., 2012; Heird & Steinfeldt, 2013). This should encourage collaboration between campus mental health services and athletic departments to create and implement such programs.

Another unique aspect of being a student-athlete is the level of involvement they have with the community around their university (NCAA, 2018). As a result, athletes are often subject to a variety of public opinions, most often those at one extreme or the other where they are either idolized or thought to be over privileged and lazy (Joshua, 2006). These expressions of public sentiment also make it difficult for athletes to act without being judged, no matter the action. For instance, seeking help is a relatively anonymous act for nonathletes, but athletes may delay or refuse intervention in an effort to protect themselves from negative reactions from peers, boosters, and fans (Joshua, 2006). Additionally, athletes who report higher levels of acceptance from their community, teammates, and coaches also have more positive attitudes towards seeking help (Martin et al., 2001). The involvement of the campus community can help or hurt athletes depending on the situation, and the programs created for athletes should focus on minimizing the negative influence the community can have. Athletes should be able to seek help with the same

level of anonymity as their nonathlete peers without consequences or negative pushback from the people around them.

There are many documented barriers that may prevent athletes from seeking help, but records indicate that student-athletes are more likely to seek treatment, and feel that it is beneficial, if the counselor is a sports psychologist or someone who understands what they face on a day to day basis (Barnard, 2016; Neal et al., 2013). Researchers have documented that college students, both athletes and nonathletes, have similar expectations about counseling and its effectiveness (Martin et al., 2001). These results do not seem to indicate the presence of increased stigma against mental illness in elite athletics and why there is a much lower help seeking rate among athletes than non-athletes.

Although there are resources available to athletes and non-athletes, researchers have found that college students significantly underutilize the services that are offered to them (Joshua, 2006). Additionally, more colleges are starting to expand the kinds of services offered to student-athletes to include resources that are more relevant to them such as hiring a sports psychologist (Beauchemin, 2014). However, the negative attitudes student-athletes have towards seeking treatment for problems with mental illness could be why they are not seeking help. Better understanding student-athletes attitudes towards seeking help would aid in the creation of programs that are both accessible and beneficial to the athlete.

Much of the previous research has focused on proving that the competitive drive found in elite athletes does not protect them from mental illness. Consequently, there has been little research that compares the attitudes of student-athletes about mental health with non-athletes. Thus, the purpose of this research was to examine the differences in help-seeking rates between athletes and non-athletes by measuring attitudes towards help seeking and perceived community

support. I hypothesized that athletes will seek help at significantly lower rates than non-athletes, and that they will have more negative attitudes towards seeking help because research indicates there is an increased stigma associated with mental illness in athletics (Beauchemin, 2014; Kaier et al., 2015). Additionally, I anticipate that athletes will perceive more support from the community due to the kinds of interactions they have with fans and boosters on a daily basis.

## **Method**

### **Participants**

Participants ( $N = 173$ ) were students at a private, medium-sized NCAA Division II University with a student body that consists of approximately 50% student-athletes. The majority of participants were female (57%), student-athletes (61%), and White (80%). Student-athletes who participated competed on 18 different varsity teams with the track and field (12 athletes), cheer/dance (12 athletes), and bowling (10 athletes) teams having the most people participate. The mean age of participants was 20.58 ( $SD = 3.80$ ) and 39% of the sample had sought professional help for problems with mental illness. Recruitment of participants occurred through contacting professors at the university and scheduling a time to come in a class section. There was no inducement or compensation offered for participating in the study.

### **Materials and Procedure**

The procedure consisted of a brief survey that was completed during the beginning of a class period. Participants gave their informed consent and instructions asked them to provide their opinions on a series of measures. The materials included the Attitudes Towards Seeking Professional Psychological Help Scale-Short Form (Fischer & Farina, 1995), a 10 question, validated measure that has been used in previous research. Researchers have demonstrated the validity of the measure in college students as it is positively correlated with the longer scale,  $r =$

.87. The test-retest reliability after one month was .80. The coefficient alpha for the current sample was .79. Sample items from the Attitudes Towards Seeking Professional Psychological Help Scale-Short Form questionnaire included “considering the time and expense involved in psychotherapy, it would have doubtful value for a person like me” and “the idea of talking about problems with a psychologist strikes me as a poor way to get rid of emotional conflicts.” Participants rated items on a scale from 1 (*disagree*) to 4 (*agree*). There was also an additional section created for the study consisting of 7 questions that examined feelings of community support,  $\alpha = .76$ . Sample items from the additional questions included “the adults in my life (parents, coaches, professors, etc.) would support me if he or she found out I was seeking professional help” and “I can talk openly to my peers about my mental health.” Participants rated items on a scale from 1 (*disagree*) to 4 (*agree*). Finally, a single *yes/no* question asked if participants had ever sought professional help for problems with mental illness.

## **Results**

Analyses explored relations between attitudes towards seeking help and community support. The hypothesis predicted that athletes will seek help at lower rates compared to non-athletes. A chi-square analysis examined the frequency with which athletes and non-athletes reporting having sought professional help for problems with mental illness. Consistent with the research hypothesis, non-athletes (55%) reported seeking professional help at significantly higher rates than athletes (28%),  $\chi^2(1,173) = 12.54, p < .001$ .

A second hypothesis predicted that athletes would have more negative attitudes towards seeking help than non-athletes. A factorial analysis of variance (ANOVA) explored if seeking professional help for problems with mental illness or if playing a sport affected people’s attitudes towards help-seeking. Scores on the Attitudes Towards Seeking Professional Psychological Help

Scale-Short Form served as the dependent variables in a 2 (Help seeking: sought help vs. not sought help) x 2 (Athletics: athlete vs. non-athlete) ANOVA. The results were consistent with the hypothesis and indicated that the main effect of seeking help was significant, as those had sought help ( $M = 2.99, SD = 0.55$ ) had more positive attitudes towards seeking help than those that had not ( $M = 2.58, SD = 0.48$ ),  $F(1, 168) = 18.93, p < .001$ . The main effect of playing a sport was also significant, as those who did not play a sport ( $M = 2.95, SD = 0.52$ ) had more positive attitudes towards seeking help than those that did ( $M = 2.60, SD = 0.51$ ),  $F(1, 168) = 12.11, p = .001$ . The interaction between seeking help and playing a sport was not significant,  $F(1, 168) = 1.16, p = .283$ .

A third hypothesis predicted that athletes will perceive more community support than non-athletes. A factorial ANOVA examined if seeking professional help for problems with mental illness or playing a sport affected people's perceptions of community support. Scores on the community support section of the survey served as the dependent variables in a 2 (Help seeking: sought help vs. not sought help) x 2 (Athletics: athlete vs. non athlete) ANOVA. Contrary to the hypothesis, the results indicated that the main effect of seeking help was not significant,  $F(1, 168) = 2.00, p = .160$ . The main effect of playing a sport was also not significant,  $F(1, 168) = 3.26, p = .073$ . The interaction between seeking help and playing a sport was not significant,  $F(1, 168) = .452, p = .502$ . The overall mean of the community support measure was 3.42 ( $SD = 0.45$ ).

Exploratory independent-samples  $t$  tests determined if any sex differences were present across perceived community support and attitudes towards seeking professional help. There was a significant sex difference on attitudes towards seeking help, as females ( $M = 4.88, SD = 0.45$ ) had more positive attitudes towards seeking help than males ( $M = 2.48, SD = 0.56$ ),  $t(163) =$



5.09,  $p < .001$ . Differences for community support between males ( $M = 3.37$ ,  $SD = 0.47$ ) and females ( $M = 3.47$ ,  $SD = 0.42$ ) were not significant,  $t(163) = 1.38$ ,  $p = .168$ .

## **Discussion**

The purpose of this research was to examine and compare attitudes towards help-seeking behaviors of college students, specifically between athletes and non-athletes. The first hypothesis predicted that athletes would seek help at rates significantly lower than non-athlete peers. This hypothesis was supported in the results as athletes reported seeking help at lower rates. The second hypothesis predicted that athletes would have more negative attitudes towards seeking help than non-athletes due to the stigma against mental illness that is heightened in competitive athletics. Consistent with the hypothesis, athletes had lower scores on the Attitudes Towards Seeking Professional Psychological Help Scale-Short Form than non-athletes did. The third hypothesis predicted that athletes would perceive more support from the community as a result of the daily interactions they have with each other. Contrary to the hypothesis, there was no significant difference in the amount of community support perceived by athletes and non-athletes. Although it was not a research hypothesis, sex differences are consistent with previous research as females had more positive attitudes towards seeking help than males (Brockmeyer, 2016).

The results of the current research broadly follow trends outlined in past studies. Previous research has documented that athletes feel treatment for a problem that is not a physical injury, such as a problem with mental illness, is directed towards improving performance related to sport as opposed to treating the underlying problem (Delenardo & Terrion, 2014; Neal et al., 2013), and this study exhibited more negative attitudes towards seeking help among athletes, which could be a direct result of these kinds of practices. Other studies indicate that there are a

variety of barriers that keep athletes from seeking help when problems do arise such as a lack of time, fear of negative consequences, or admitting a weakness (Hughes & Leavey, 2012; Joshua, 2006), and this study had significantly fewer athletes who reported ever having sought professional help. These barriers are part of a larger stigma towards mental illness, which is increased in competitive athletics (Gulliver et al., 2012), and understanding how to address this stigma is essential to providing resources that are both useful and accessible.

The current study adds to the established literature by bringing to light the drastic difference in help seeking rates among athletes and non-athletes. Previous research has documented that college students severely underutilize mental health services that are available to them (Neal et al., 2013), and this study demonstrates that athletes utilize these services at even lower rates than their non-athlete peers. Researchers have found that there are ways to help improve these rates of seeking help, such as bringing in a sports psychologist or someone else who can relate to what the athlete is going through, but other barriers such as a lack of free time still remain problematic (Barnard, 2016; Neal et al., 2013). Some institutions simply are unable to afford the services of a sports psychologist or related tools, but an alternative solution is to increase mental health training that is offered to athletic department staff such as athletic trainers and coaches. In the absence of a sports psychologist, coaches and trainers are other examples of people who the athlete might feel comfortable going to because they understand the stress of being a college athlete. If athletes feel that the authority figures in the athletic realm are more in tune with what is going on, it is likely to foster a more positive environment where these issues can be discussed without the fear of negative consequences. Additionally, athletes may be more inclined to listen to a coach's recommendation that they go to see a counselor who can evaluate the issue objectively and treat the athlete as a person first and an athlete second.

Although the current research offers insight that previous literature has not addressed there are some limitations worth noting. The survey concluded with a question that asked if the participant had ever sought professional help for problems with mental illness, which could have been interpreted in a variety of ways. Participants who had been to counseling but had never been diagnosed with a mental illness may not have known how to answer. The limited sample from one university may also not be representative of attitudes across schools of all sizes and divisions. Additionally, this study did not examine why people chose to seek help or not, it simply measured attitudes towards seeking help. It is unknown what participants would do if they were to start experiencing problems with their mental health.

Future research should focus on making the services that are currently available to college students more accessible, particularly to student-athletes. One way to do this would be to interview athletes who have considered seeking treatment to understand why they did or did not follow through. All participants had relatively positive attitudes towards seeking help, but the majority reported that they had never sought professional help, which could be indicative that they would not seek help if problems were to arise. In an experimental setting, researchers could manipulate the hours of availability of counseling services to see if that impacts the number of people who are utilizing them. Lastly, research should consider investigating other avenues such as providing more mental health training to coaches and athletic trainers to see if it creates a less hostile environment to discuss issues. Research has demonstrated that students, and particularly athletes, are not using the services that are available to them, so researches should try to find out why that is or tailor the programs to meet the needs of those that they serve.

In conclusion, the rate that college students seek help is consistent with their attitudes towards seeking help. The current research explored the relationships between help-seeking,

community support, and athletics. Student-athletes are seeking help at rates which are much lower than non-athletes, although both groups have a similar prevalence of mental illness (Neal et al., 2013). This should encourage athletic departments to work with the mental health services available on their campus to increase accessibility to these services.

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