

National Strength and Conditioning Association's Endorsement of the National Collegiate Athletic Association Sport Science Institute's "Mental Health Best Practices: Inter-Association Consensus Document: Best Practices for Understanding and Supporting Student-Athlete Mental Wellness"

Brian Gearth, PhD¹ and E. Whitney G. Moore, PhD²

¹Graduate School of Professional Psychology, University of Denver, Denver, Colorado; and ²Division of Kinesiology, Health and Sport Studies, Wayne State University, Detroit, Michigan

ABSTRACT

COLLEGIATE ATHLETES EXPERIENCE UNIQUE AND SIGNIFICANT STRESSORS THAT REQUIRE AN INFORMED, TEAM APPROACH TO SUPPORTING THEIR MENTAL HEALTH. AS INTEGRAL MEMBERS OF THE SUPPORT TEAM RESPONSIBLE FOR COLLEGIATE ATHLETES' HEALTH AND WELL-BEING, STRENGTH AND CONDITIONING PROFESSIONALS SHOULD UNDERSTAND MENTAL HEALTH BEST PRACTICES AND APPLY THEM WITHIN THEIR SCOPE OF PRACTICE. THUS, THE NATIONAL STRENGTH AND CONDITIONING ASSOCIATION ENDORSES THE NATIONAL COLLEGIATE ATHLETIC ASSOCIATION'S DOCUMENT ENTITLED, "MENTAL HEALTH BEST PRACTICES: INTER-ASSOCIATION CONSENSUS DOCUMENT: BEST PRACTICES FOR UNDERSTANDING AND SUPPORTING STUDENT-ATHLETE MENTAL WELLNESS." THE FOLLOWING PROVIDES A BRIEF REVIEW OF THIS DOCUMENT AND ITS IMPLICATIONS FOR STRENGTH AND CONDITIONING PROFESSIONALS.

INTRODUCTION TO MENTAL HEALTH

The National Collegiate Athletic Association (NCAA) published a document in January 2016 entitled, "Mental Health Best Practices (MHBP): Inter-Association Consensus Document: Best Practices for Understanding and Supporting Student-Athlete Mental Wellness." The best practices were created to provide NCAA member schools, regardless of size and resources, with recommendations for supporting and promoting the mental health of college athletes. The

Address correspondence to Carwyn Sharp, PhD, NSCA Chief Science Officer Carwyn.Sharp@nsca.com.

MHBP document consists of 4 best practices as well as a checklist and resource appendices to help schools implement integrated mental health care within athletics.

Collegiate strength and conditioning coaches often spend 8–20+ hours per week with collegiate student-athletes throughout the calendar year. Although many Certified Strength and Conditioning Specialists (CSCS) understand the scientific and practical knowledge and skills of athletic performance, understanding and applying best practices in mental health is a highly essential competency that the CSCS also needs to know. The purpose of this editorial is to briefly summarize the NCAA's MHBP document and encourage the CSCS to apply best practices in mental health. Best practices 2 and 4 are the most relevant for the CSCS, and it is within their scope of practice to activate them.

FOUR BEST PRACTICES

In this section, the 4 best practices provided in the MHBP are stated verbatim. Our brief synopsis of the CSCS's role in each practice follows:

CLINICAL LICENSURE OF PRACTITIONERS PROVIDING MENTAL HEALTH CARE

This best practice identifies that the standard of care for coordinating and managing mental health care should be led by a licensed mental health professional (e.g., clinical or counseling psychologist/psychiatrist, mental health counselor/licensed professional counselor, or licensed clinical social worker)

with training in the clinical, ethical, and cultural aspects of mental health. The licensed mental health professional should lead an interdisciplinary team, of which the CSCS should be included, to coordinate care for mental health disorder and wellness.

PROCEDURES FOR IDENTIFICATION AND REFERRAL OF STUDENT-ATHLETES TO QUALIFIED PRACTITIONERS

Because of their extensive interaction with student-athletes, the CSCS is well situated to identify and refer student-athletes to a licensed mental health professional. The CSCS can respond to a mental health emergency and refer student-athletes for routine (i.e., nonemergency) mental health care. It is the responsibility of the interdisciplinary mental health team to have a plan for emergency and nonemergency situations. This plan should outline how to identify, manage, and respond to a mental health emergency. A comprehensive and context-specific protocol can be developed and implemented to facilitate effective identification and referral, including identification of a member of the medical or athletic training staff, who coordinates and facilitates these and other medical referrals. As a member of the interdisciplinary team, the CSCS should possess knowledge of this referral process. The CSCS should receive continuing education on identifying the signs and symptoms of mental health disorders. The CSCS should understand, respect, and follow the legal and clinical best practices of

Table Highlights of MHBP's additional recommended resources	
Mental health topic	NCAA MHBP recommended resource
Mental Health Signs and Symptoms	www.NCAA.org/mentalhealth
First Responders for Suicide Prevention	www.qprinstitute.com
Hostile Environments (Sexual Assault and Violence)	www.NCAA.org/violenceprevention
MHBP = Mental Health Best Practices; NCAA = National Collegiate Athletic Association.	

mental health care, including aspects of confidentiality and release of information, which affects what information the CSCS may be made aware.

PREPARTICIPATION MENTAL HEALTH SCREENING

Although the CSCS will be familiar with the standard for student-athletes to complete a preparticipation physical screening and clearance before engaging in strength and conditioning activities, the MHBP recommends that student-athletes complete a mental health screening as part of their preparticipation examination. A licensed mental health care professional can select and administer a reliable and valid screening instrument.

HEALTH-PROMOTION ENVIRONMENTS THAT SUPPORT MENTAL WELL-BEING AND RESILIENCE

The MHBP states that high-functioning mental health can be fostered in positive environments that promote self-care, personal growth, acceptance, respect, autonomy, and positive relations with others,

including the CSCS. The CSCS should provide attentive and empathetic interpersonal communication with student-athletes and help to create a culture that encourages and normalizes seeking the support of licensed mental health professionals. The CSCS can aid in creating a culture that teaches student-athletes coping skills and reduces behaviors leading to sexual assault, violence, hazing, sleep deprivation, and suicide.

CONCLUSION

As an important professional on the front line of interaction with student-athletes, it is within the scope of practice for the collegiate CSCS to identify and refer possible mental health concerns and to promote a positive environment that supports mental well-being and resilience. The CSCS should work collaboratively with other members of the interdisciplinary mental health team such as the Certified Athletic Trainer (ATC), physician, and licensed psychologist to provide swift and responsive mental health care. Because it is outside their

professional standards and guidelines, the CSCS should not attempt to diagnose, treat, or provide mental health therapy to student-athletes. To review best practices on the professional and legal activities within the CSCS's scope of practice, the CSCS should review the NCAA's document on MHBP and the National Strength and Conditioning Association's recently updated document entitled, "Strength and Conditioning Professional Standards and Guidelines." The National Strength and Conditioning Association supports the NCAA's MHBP document and their efforts to provide collegiate student-athletes with the best mental health care. Other recommended materials that may be of assistance to the CSCS are given in the Table.

Conflicts of Interest and Source of Funding: The authors report no conflicts of interest and no source of funding.

This document was reviewed and approved by the National Strength and Conditioning Association Board of Directors.