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In the Huddle;

Experiences and Ethical Considerations of Mental Health Screenings with Athletes

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Overview

01

Applying
NCAA Mental
Health Best
Practices

02

Ethical
Exploration:
Screening &
Data Usage

03

Facilitated Group
Discussion:
Next Steps &
Brainstorming

LO

01

Participants will be able to describe the key components of a pilot mental health screening program and evaluate its alignment with the NCAA Mental Health Best Practices.

02

Participants will be able to identify three or more ethical considerations for implementing a mental health screening tool with athletics departments.

03

Participants will compare ways that other institutions are implementing mental health screenings with athletics and leave the session with ideas and resources for their respective institutions.

01

Applying NCAA Mental Health Best Practices



NCAA Commercial - March Madness 2024



NCAA Mental Health Best Practices

BEST PRACTICE 1

Create Healthy
Environments

BEST PRACTICE 2

Identification
& Screenings

BEST PRACTICE 3

Mental Health
Action Plans

BEST PRACTICE 4

Licensure of
Provider

24-25 Mental Health Screening

CCAPS-Screen

- 36 items, remote-supervised
- 23-24 over 40,000 athletes completed the CCAPS-Screen



- Depression
- Generalized Anxiety
- Social Anxiety
- Academic Distress
- Eating Concerns
- Frustration
- Alcohol Use
- Family Distress
- Suicidal Thoughts

Sample Profile Report

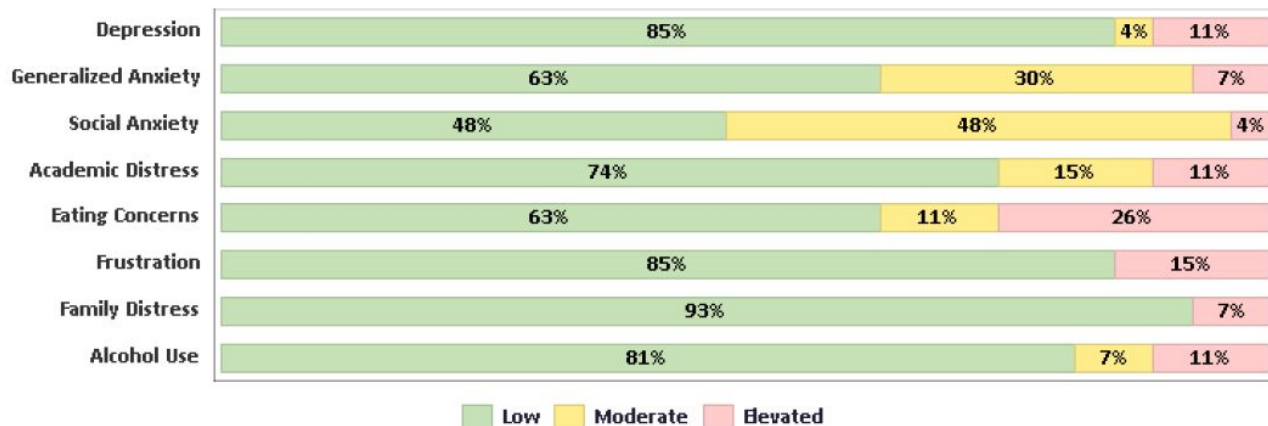
Sample #1 Profile Report

CCAPS — Screen <small>v 7/2021</small>		CCAPS Screen ID: 723344 Date: 6/18/2021
Area of Distress	Level of Distress	
Depression <i>(Feelings of isolation, apathy, worthlessness, sadness)</i>	Elevated	
Generalized Anxiety <i>(Racing thoughts, tension, possible panic attacks)</i>	Moderate	
Social Anxiety <i>(Feelings of shyness, self-consciousness, and social discomfort)</i>	Moderate	
Academic Distress <i>(Lack of confidence in academics, concentration difficulties, problems completing school-work)</i>	Elevated	
Eating Concerns <i>(Preoccupation with food, concern about overeating)</i>	Moderate	
Frustration <i>(Problems with temper, anger, irritability)</i>	Elevated	
Family Distress <i>(Stress in family relationships)</i>	Low	
Alcohol Use <i>(Overuse of alcohol, negative consequences from drinking)</i>	Moderate	
Thoughts of Ending My Life <i>(Ranges from benign passing thoughts to serious suicidal thoughts with intentions to act)</i>		Yes

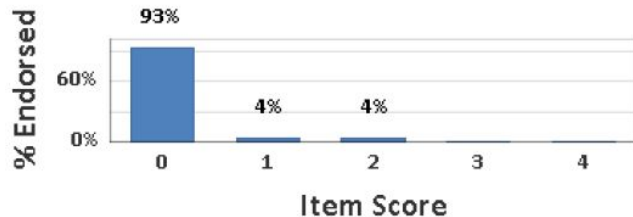
“Water Polo” Team Report



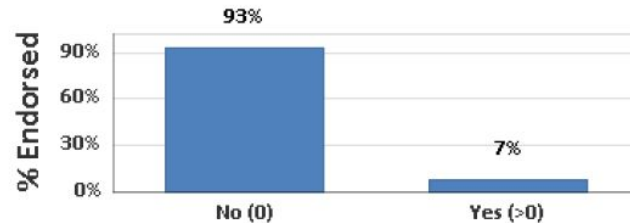
Elevated Scores by Subscale



Thoughts of Ending My Life



Thoughts of Ending My Life



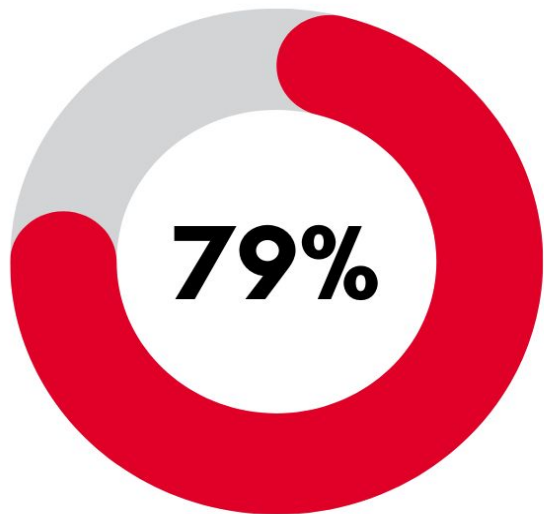
Colgate Screening Process

01 Preparation

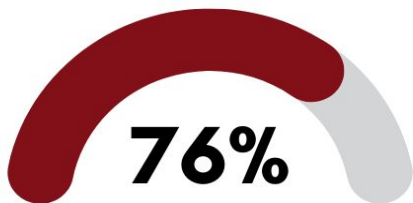
- Consulting to establish scheduling & workflow
- Outreach with coaches
- Create portals for teams and tracking processes

02 Implementation

- Student Outreach
- Screenings intervals September-February
- Athletic Screening Consultations

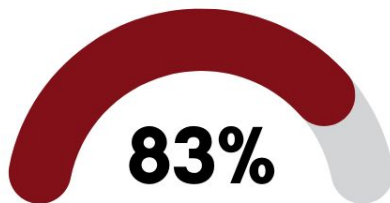


**2024-2025 Athlete
Response Rate**



**Men's Teams
Athlete Response Rate**

Women's Teams	291	242
Men's Teams	339	257
Totals	630	499



**Women's Teams
Athlete Response Rate**



60% Requested a
follow up session

24-25 Mental Health
Screening Results

Colgate Screening Process continued

03 Review

- Survey the athletics staff
- Panel & presentation with student athletes
- Outreach with coaches
- Meet with athletics to revise process for 25-26
 - Evaluate challenges
- Brainstorm & programming for 25-26
 - Outreach topics, services, resources

Future - compare results year to year

Challenges

- Establishing safety protocols and procedures
- Schedules
- Engagement
- Administrative time
- Tech Limitations

Successes

- Team trends were identified
- Contact with students
- Opened doors for off-season support.
- Student athletes & coaches were engaged
- Counseling & Athletics collaboration (unified front)
- Over 75% response



02

Ethical Exploration: Screening & Data Usage

Ethical _____ Considerations



Informed Consent

Confidentiality

Competence

Scenario 1:

When the athlete doesn't answer



1. Discuss the ethical dilemma.
2. Was it ethical and appropriate to involve the athletic trainer in conducting the safety screening? Why/not?
3. How do we balance confidentiality with the need to ensure immediate safety?
4. What are the implications of having a non-mental health professional conduct safety screenings?

Scenario 2:

Pressure or obligation to share results?

1. Discuss the ethical dilemma.
2. How can we respond to requests for team-level mental health data? What about the individual level?
3. How can we educate coaches on the limits of our roles and protect student-athlete trust?

Part 2...

Ethics

Informed consent

Use of data

Confidentiality/privacy

Cultural sensitivity/equity

Client welfare/misuse

Referral information

Interdisciplinary teams

...more!

03

Facilitated Group Discussion:
Next Steps & Brainstorming

Group Discussion

01

Share your initial reflections from what we have learned so far.

03

How have you navigated interactions with athletics surrounding SA mental health?

02

How is your center currently collaborating with athletics?

04

How do we promote a culture of mental wellness in athletics? What is our role in this?

Group Discussion

05

Based on today's discussion, how can your institution implement or respond to the changing athletics environment?

06

What resources have been helpful in implementing screenings or supporting SA mental health at your institution?

Thank you!

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