

IOC MENTAL HEALTH IN ELITE ATHLETES TOOLKIT

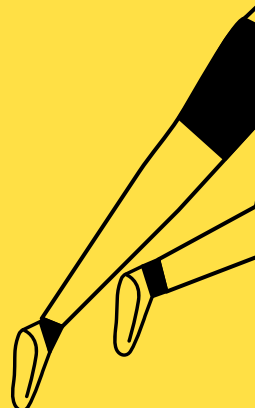
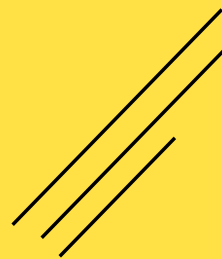
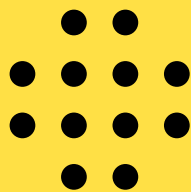


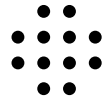


Human well-being must be at the heart of elite athletic performance. Athletes should feel empowered and nurtured both physically and mentally... mental health and physical health are two halves of a whole, and care for both must be seen as priority.

ABHINAV BINDRA

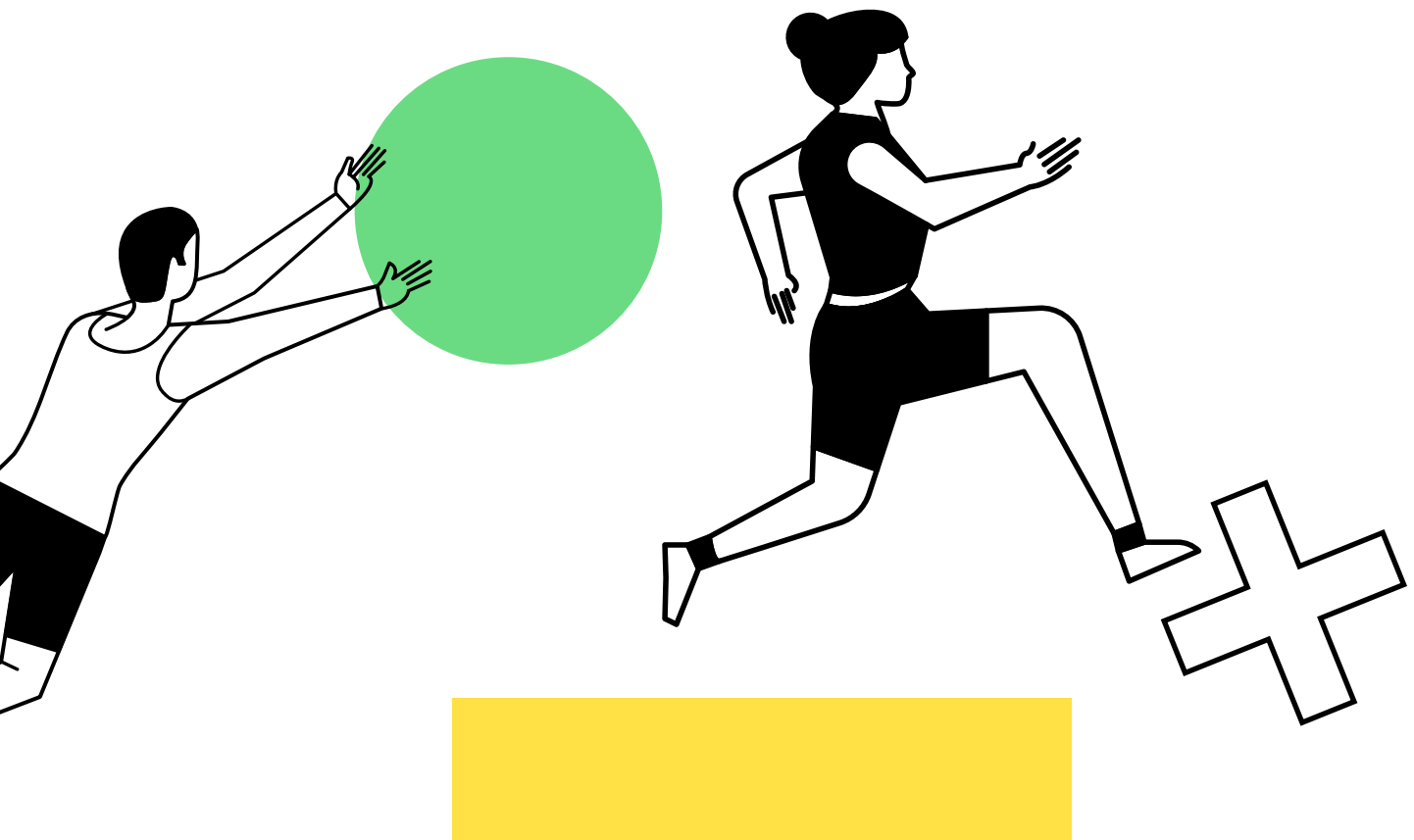
Olympic champion; IOC Athletes' Commission member;
IOC Mental Health Working Group member

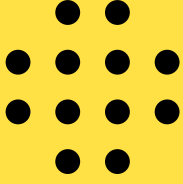




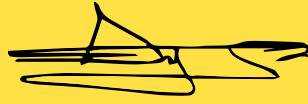
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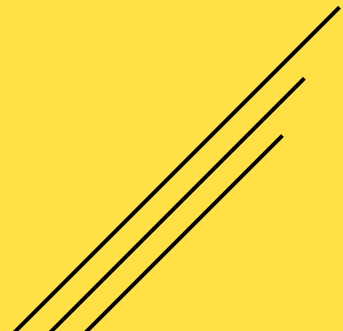
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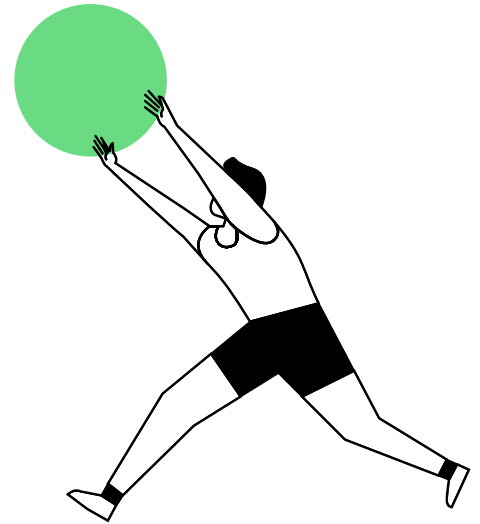
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MS KIRSTY COVENTRY
IOC Athletes' Commission Chair



FOREWORD



IOC Mental Health in Elite Athletes Toolkit

Foreword by Uğur Erdener, Sergey Bubka and Kirsty Coventry

The well-being of athletes has always been and will always be the top priority of the International Olympic Committee and the entire Olympic Movement. Athletes often seem to embody the feelings of joy and hope, and they give the very best of themselves to achieve their dreams; but like us all, they may also find themselves in need of mental health support. It is important to remember that elite athletes are people first, and that their mental health is just as important as their physical health.

It is with this understanding and knowledge that the IOC Mental Health in Elite Athletes Toolkit has been developed by the IOC Medical and Scientific Commission, the IOC Athletes' Entourage Commission and the IOC Athletes' Commission, which, respectively, we have the privilege to chair.

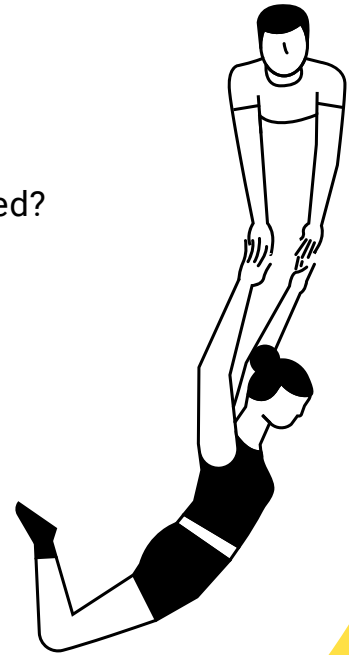
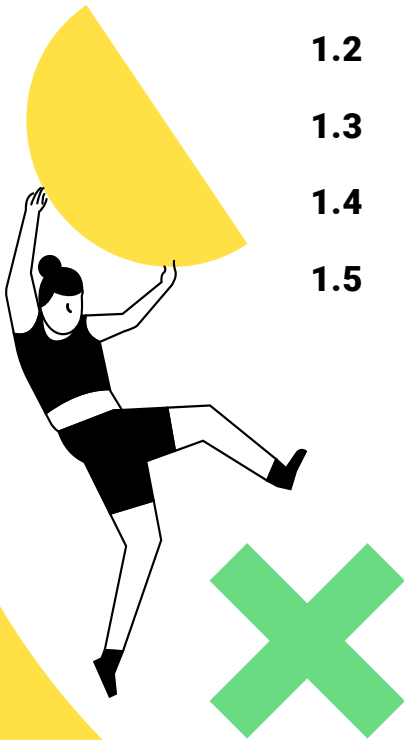
As a sporting community, we need to create a sporting environment that better supports athletes' mental well-being and mental health. This toolkit is the first step in that journey. It is a trusted and valuable resource for Olympic Movement stakeholders - IFs, NOCs, athletes' entourage members, healthcare professionals, national federations, clubs and teams - to be used in developing and implementing initiatives and best practices related to the protection and promotion of mental health and well-being in elite athletes.

We believe that the information available within this toolkit can and will make a difference to the lives of elite athletes around the world. We also strongly believe that athletes' mental health and wellness should be a collective concern, and we thank you for making it a priority within your organisation.



1. INTRODUCTION

- 1.1 Why develop this toolkit?
- 1.2 To whom the toolkit applies
- 1.3 Foundation
- 1.4 How was this toolkit developed?
- 1.5 How to use the toolkit



This toolkit is aimed at assisting Olympic Movement stakeholders, including International Federations (IFs), National Olympic Committees (NOCs), National Paralympic Committees (NPCs), athletes' entourage members, healthcare professionals and other stakeholders such as National Federations (NFs), clubs and teams, to develop and implement initiatives related to the protection and promotion of mental health and well-being in elite athletes.

1.1. WHY DEVELOP THIS TOOLKIT?

It is estimated that approximately 13 per cent of the global population experience some form of mental health disorder.⁽¹⁾ Indeed, mental health disorders have been found to be one of the leading causes of functional impairment worldwide, causing the highest disease burden.^(2,3,4)

Whilst evidence consistently demonstrates that regular physical activity is associated with improvements in physical and mental wellness, studies nonetheless show that just over one in three athletes may experience mental health symptoms.^(5,6)

Despite their unique sporting talents, athletes are not immune to mental health challenges, such as burnout, distress, anxiety, depression, unhealthy eating patterns, insomnia and alcohol or drug misuse.⁽⁶⁾

Many different factors can impact athlete mental wellness: Injury, performance pressures, dealing with failure and/or success, and career transition out of sport are all associated with mental health symptoms. This is in addition to the life challenges experienced outside sport, such as grief, relationship conflicts and financial difficulties.

Whilst it is estimated that the prevalence of mental health symptoms and disorders may be even higher in elite athletes than in the general population, it is important to note that **all athletes** can optimise their mental well-being and life balance.

This toolkit is intended to equip Olympic Movement stakeholders with the knowledge and guidance to protect and promote elite athletes' mental health and well-being.

13% OF THE GLOBAL POPULATION EXPERIENCE SOME FORM OF MENTAL DISORDER

1.2. TO WHOM THE TOOLKIT APPLIES

This toolkit has been developed for IFs, NOCs, athletes' entourage members, healthcare professionals and other stakeholders, including NFs, clubs and teams. The toolkit is intended to provide resources to benefit the health and mental well-being of athletes.

1.3. FOUNDATION

The protection and promotion of athletes' mental health and well-being is encompassed within the fundamental principles and frameworks of the Olympic and Paralympic Movements, including:

The Olympic Charter (in force from July 2020)⁽⁷⁾

Article 1.10: "The IOC's role is ...to encourage and support measures relating to the medical care and health of athletes;"

IOC Athletes' Rights and Responsibilities Declaration (2018)⁽⁸⁾

Article 1.7: promotes "the protection of mental and physical health, including a safe competition and training environment and protection from abuse and harassment."

IOC Code of Ethics (2020)⁽⁹⁾

Article 1.5: "Respect for the universal fundamental ethical principles is the foundation of Olympism. These include: ... Ensuring the participants' conditions of safety, well-being and medical care favourable to their physical and mental equilibrium."

IPC Code of Ethics (2016)⁽¹⁰⁾

Article 1.5: "Safeguard the athletes' physical and mental health and equilibrium."

Article 1.6: "Not tolerate any practice constituting any form of physical or mental injury. All forms of harassment including physical, mental, professional, or sexual, are prohibited."

Basic Universal Principles of Good Governance (2008)⁽¹¹⁾

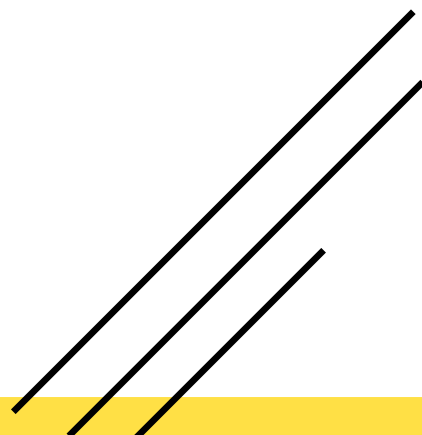
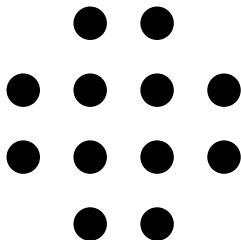
Article 6.3: "Sports organisations shall adopt rules for the protection of the athletes' health and to limit the risk of endangering the athletes' health."

The IOC Olympic Movement Medical Code (2016)⁽¹²⁾

Article 1: "The Olympic Movement, to accomplish its mission, encourages all stakeholders to take measures... necessary to protect the health of participants by minimising the risks of physical injury, illness and psychological harm."

Article 2.1.1: "Conditions and environments of training and competition must be conducive to the physical and psychological well-being of athletes..."

Article 2.1.4: "For the benefit of all concerned, measures to safeguard the health of the athletes and to minimise the risks of physical injury and psychological harm must be publicised."



***International Paralympic Committee (IPC)
Medical Code (2011)⁽¹³⁾***

Article 1: “The Paralympic Movement, in accomplishing its mission, should encourage all stakeholders to take measures... necessary to protect the health of participants and to minimize the risks of physical injury and psychological harm.”

Article 40: “No practice constituting any form of physical injury or psychological harm to athletes is acceptable. Members of the Paralympic Movement must ensure that the athletes’ conditions of safety, well-being and medical care are favourable to their physical and mental equilibrium. They must adopt the necessary measures to achieve this end and to minimize the risk of injuries and illness.”

Article 42: “For the benefit of all concerned, measures to safeguard the health of the athletes and to minimize the risks of physical injury and psychological harm should be publicized.”



The Olympic Movement, to accomplish its mission, encourages all stakeholders to take measures... necessary to protect the health of participants by minimising the risks of physical injury, illness and psychological harm.

THE OLYMPIC MOVEMENT MEDICAL CODE (2016)

1.4. HOW WAS THIS TOOLKIT DEVELOPED?

This IOC Mental Health Toolkit has been developed in collaboration with the IOC Mental Health Working Group and a Virtual Task Force composed of representatives from IFs, NOCs, NPCs and IOC Athletes' Entourage Commission members. The goal of this process is to provide recommendations that are relevant, applicable and aligned with research and international expert consensus.

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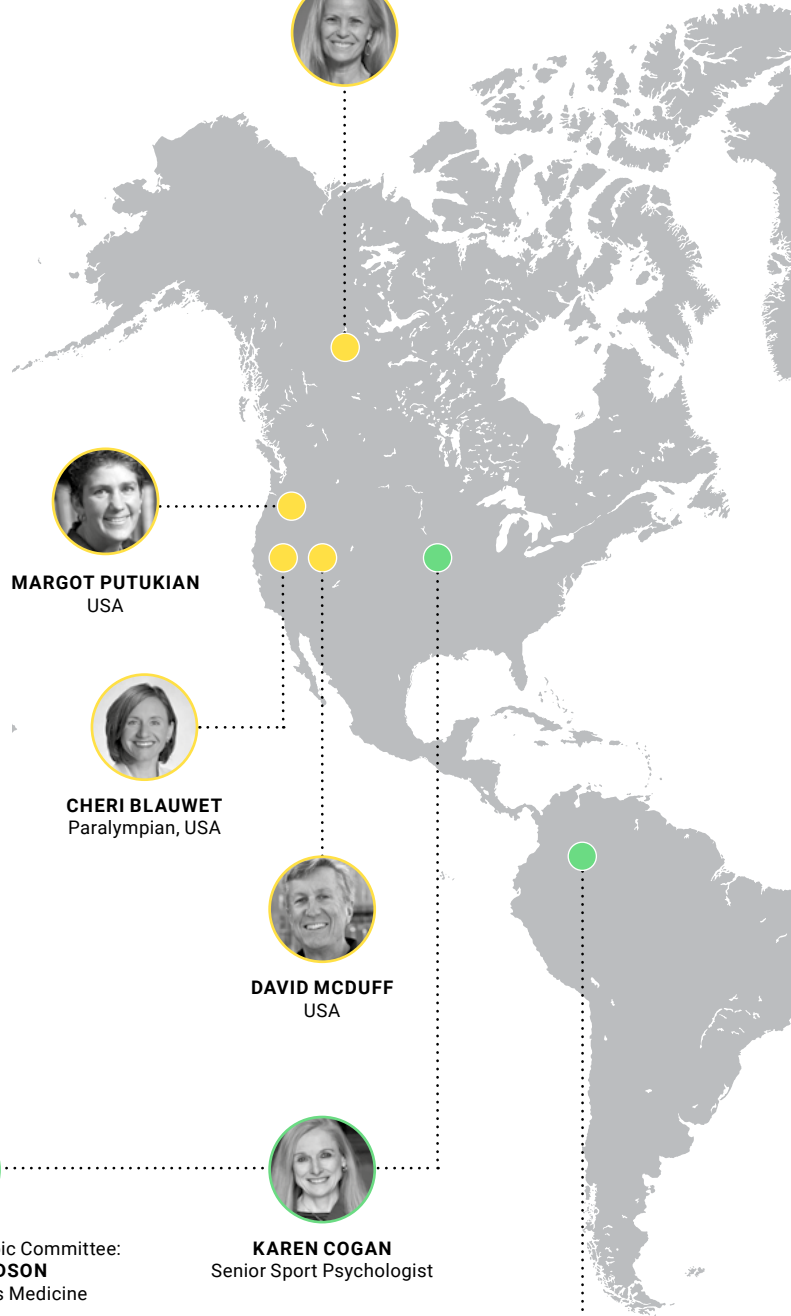
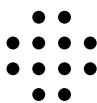
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The IOC Mental Health Working Group



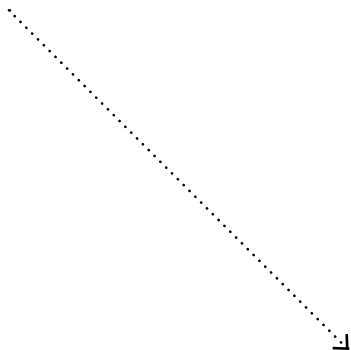
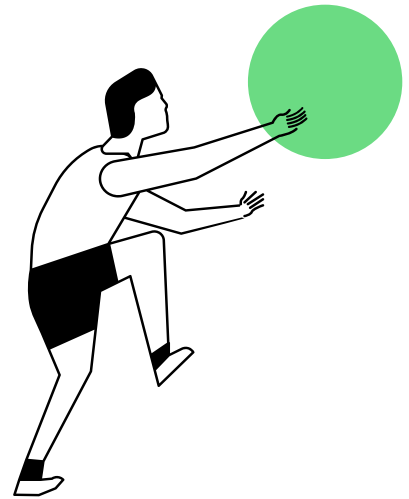
The Virtual Taskforce

1.5. HOW TO USE THE TOOLKIT

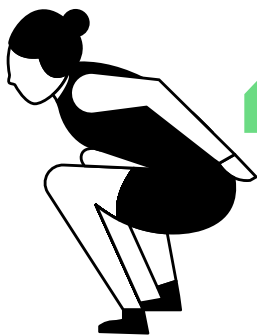
This toolkit is divided into four main sections:

1 INTRODUCTION

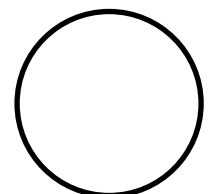
SECTION 1 outlines the objective and scope of the toolkit, to whom it applies and how it was developed. It also details the frameworks that provide the foundation and directives for Olympic Movement stakeholders to address this important topic.




2 MENTAL HEALTH SYMPTOMS AND DISORDERS IN ELITE ATHLETES

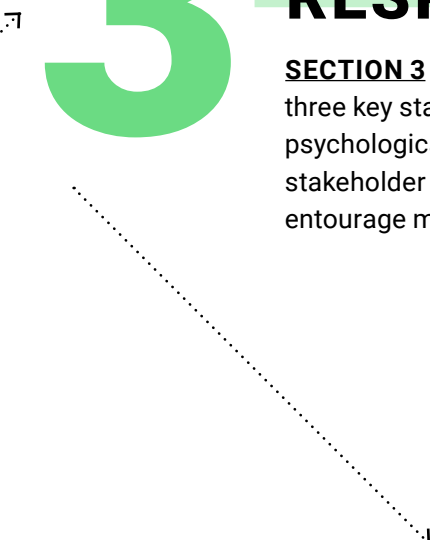


SECTION 2 provides an overview of the multifaceted aspects of mental health symptoms and disorders in elite athletes, including terminology, prevalence and an overview of the IOC Mental Health Consensus Statement (2019).

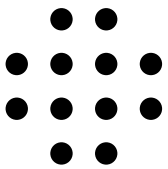





3 ROLES AND RESPONSIBILITIES

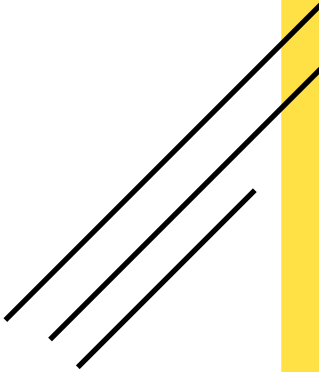




SECTION 3 outlines the roles and responsibilities of three key stakeholder groups related to the creation of a psychologically supportive athletic environment. These stakeholder groups are: sports organisations, athletes' entourage members and health care professionals.



4 RESOURCES

SECTION 4, the final section of the toolkit, highlights available resources and where to find further information.





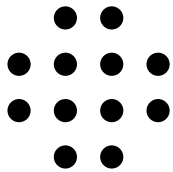
2. MENTAL HEALTH SYMPTOMS AND DISORDERS IN ELITE ATHLETES

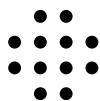
2.1. Terminology

2.2. International Olympic Committee Consensus Statement (2019)

2.3. Overview of mental health symptoms and disorders in elite athletes

2.4. Prevalence of mental health symptoms and disorders in elite athletes





This section provides an overview of the multifaceted aspects of mental health symptoms and disorders in elite athletes and an introduction to the IOC Mental Health Consensus Statement 2019.

2.1. TERMINOLOGY

Many terms are used when discussing mental health and occasionally these terms are used interchangeably. In this document we use the following terms with the following meanings:

Mental Health

A state of well-being in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.⁽¹⁴⁾

Mental health is personal and subjective, and includes:

1. a sense of internal well-being
2. feeling in line with one's own values and beliefs
3. feeling at peace with oneself
4. feeling positive and optimistic about life⁽¹⁵⁾

Mental Health Symptoms

Self-reported negative patterns of thinking, emotions and behaviours that can/may cause distress and/or interfere with functioning, including sports performance.⁽¹⁶⁾

Mental Health Disorders

Clinically diagnosed conditions which produce significant and persistent changes in a person's thinking, emotions and/or behaviours that are associated with significant distress and/or disability in social, occupational or other important activities, like learning, training or competition.⁽¹⁷⁾

Elite Athlete

The IOC Mental Health Working Group defined the elite athlete as an Olympic, Paralympic, professional or collegiate athlete, though it is acknowledged that this category is abstract and risks overlooking some individuals who have devoted significant time and effort to the pursuit of athletic excellence.⁽¹⁸⁾

REMEMBER:

Mental health exists on a continuum. An athlete can be mentally healthy, may have a mental health disorder, or may be in between experiencing mental health symptoms. Some mental health symptoms and disorders can have a wax-and-wane pattern, for example, periods of good mental health alternating with episode of sadness or depression.

Athletes experiencing a mental health disorder can recover and have periods of optimum mental health, while athletes without mental health symptoms or disorders can experience times of poor mental health (such as feeling stressed or overwhelmed).

Therefore, it is important to improve understanding and awareness of mental health symptoms and disorders in elite athletes, to recognise the signs, and to create a culture that supports help seeking. We shall discuss each of these points in **SECTION 3** of the toolkit.

**2.2. MENTAL HEALTH IN ELITE ATHLETES:
INTERNATIONAL OLYMPIC COMMITTEE
CONSENSUS STATEMENT (2019)⁽¹⁸⁾**

In 2018, the IOC convened a consensus meeting at which a panel of 23 experts from 13 nations reviewed the scientific literature addressing mental health symptoms and disorders in elite athletes.

The expert panel screened 14,689 published articles, analysing the current best evidence to provide a consensus statement to inform clinical practice, guide individual and systemic interventions and improve mental health among athletes.

14,689

SCREENED ARTICLES

23 13

EXPERTS

NATIONS



The consensus statement, which provides the foundation for this toolkit, addresses the following key areas:

Background and methods

Defines the mandate of the expert panel, the aim of the consensus paper, who it applies to, and the consensus process.

General prevalence of mental health symptoms and disorders in elite athletes

Provides an evidence-based overview of the prevalence of mental health symptoms and disorders in elite athletes.

General approaches to management of mental health symptoms and disorders in elite athletes

Outlines general management approaches including psychotherapy and pharmacological treatment.

Specific mental health symptoms and disorders in elite athletes

Considers specific mental health symptoms and disorders in elite athletes.

Major stressors and key environmental factors that influence elite athlete mental health

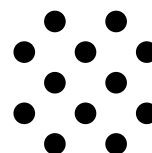
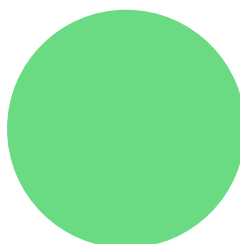
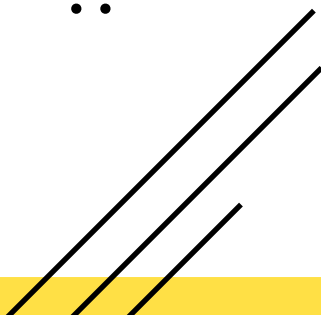
Shares the consensus findings on harassment and abuse; how injury, performance and mental health intersect; barriers to seeking care for mental health symptoms and disorders; the athlete’s transition out of sport; mental health emergencies and how it may be possible to create an environment that promotes mental well-being and mental resilience.

Special considerations: mental health in Paralympic athletes

Details specific considerations related to mental health in Paralympic athletes, including prevalence.

Future directions

Provides 13 suggestions for possible future direction for additional research, change in clinical practice, and optimisation of environmental factors.



2.3. OVERVIEW OF MENTAL HEALTH SYMPTOMS AND DISORDERS IN ELITE ATHLETES

Regular participation in sport has been demonstrated to have a great number of benefits, including for physical, psychological and social health.⁽¹⁹⁾ There is also a growing body of literature that recognises the positive effects of exercise on mood states such as anxiety, stress and depression.⁽²⁰⁾ However, despite these well recognised benefits, elite athletes appear to experience levels of mental health symptoms and disorders similar to the general population.⁽²¹⁾ Some conditions such as eating disorders have even been found to be more common in elite athletes.⁽²²⁾

NOTE:

Some of the hurdles for athletes seeking help for mental health symptoms and disorders are stigma, either self-imposed or perceived through others, and low mental health literacy, meaning knowledge and beliefs about mental health disorders that aid their recognition, management or prevention.⁽²³⁾

Research has demonstrated that improving mental health literacy can assist athletes in seeking help.⁽²³⁾ This is why it is so important for everyone involved in sport to have an understanding of mental health symptoms and disorders in elite athletes and of the role that they can play in creating psychologically safe sporting environments in which athletes may train and compete.

You can find further information on the barriers to seeking care for mental health symptoms and disorders in **SECTION 3.2.3.**

Studies have shown that the most common presentations of mental health symptoms and disorders in elite athletes include:

Anxiety

Excessive fear, anxiety-related behavioural disturbances (including phobias and panic attacks)

Depression

Persistent and pervasive sadness/low mood, excessive fatigue and loss of interest/pleasure

Sleep-related problems

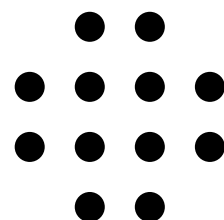
Such as insufficient sleep, difficulty falling or staying asleep, or misalignment of sleep-wake patterns

Alcohol misuse

Includes drinking despite impaired function, harm and alcohol dependence.

Eating disorders

Disturbance of eating and related behaviours including excessive restriction, compulsive exercise, and/or bingeing and purging.^(18,23,24,25)



The IOC Mental Health Consensus Statement (2019)⁽¹⁸⁾ further identifies the following mental health symptoms and disorders in elite athletes:

- **Post-traumatic stress disorder** and other trauma-related disorders
- **Attention-deficit/hyperactivity disorder**
- **Bipolar** and psychotic disorders
- **Suicide**
- Other **substance use** and substance use disorders (e.g., drugs)
- **Gambling disorder** and other behavioural addictions.

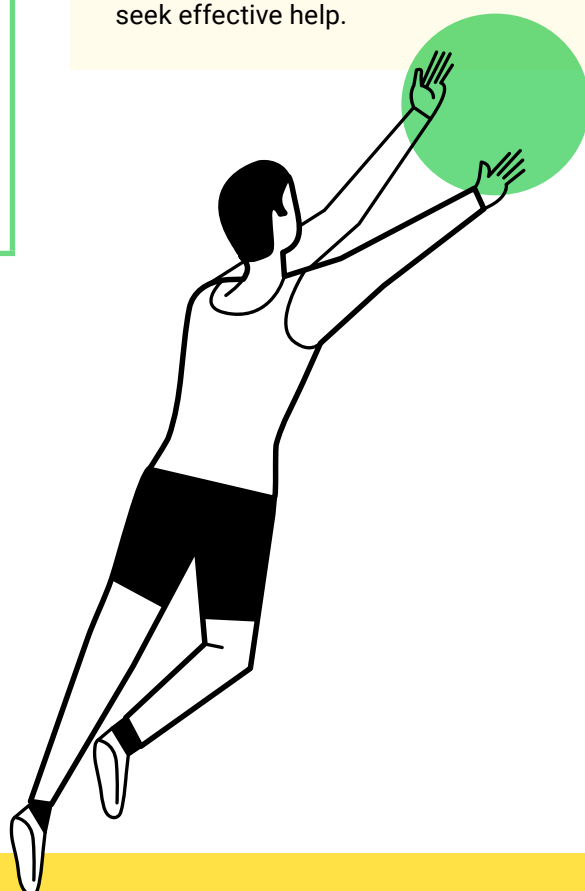
Just as in the general population, the impacts of mental health symptoms and disorders in athletes can be severe and debilitating. For athletes, those impacts may include poor performance, increased injury risk, delayed recovery from injury and decreased quality of life.⁽⁶⁾ However, with appropriate and timely support and intervention such impacts can be reduced.

Further information on mental health symptoms and disorders in elite athletes may be found in the IOC Mental Health Consensus Statement (2019). To read the full consensus statement, please follow [THIS LINK](#).

The IOC Mental Health Consensus Statement (2019) highlights factors likely to be associated with mental health symptoms and disorders in elite athletes. These include suffering severe musculoskeletal injuries, undergoing multiple surgeries, suffering from decreased sports performance or tending toward maladaptive perfectionism.^(26,27,28,29,30,31,32,33) These factors are discussed further in **SECTION 3** of this toolkit.

It is also important to consider that an athlete might have mental health symptoms or suffer from a mental health disorder with no apparent association between elite sports participation and the mental health condition.

It is incumbent upon those working with athletes to recognise the importance of athlete mental health and well-being to overall athlete health and performance, as well as educating athletes and all stakeholders surrounding athletes to recognise mental health symptoms and seek effective help.



2.4. PREVALENCE OF MENTAL HEALTH SYMPTOMS AND DISORDERS IN ELITE ATHLETES

Determining the prevalence of mental health symptoms and disorders in elite sport remains challenging, largely because elite athletes are not an easily reachable study population, and that reliable, valid, sport-specific screening instruments are scarce.

However, prospective studies have reported that mental health disorders occur in between 5 and 35 per cent of elite athletes.^(24,25,34,35,36,37,38) The infographic below details different mental health symptoms and disorders, and research results related to prevalence, as detailed in the IOC Mental Health Consensus Statement (2019).⁽¹⁸⁾

ANXIETY AND DEPRESSION

A 2019 meta-analysis found that 33.6% of elite athletes and 26.4% of former athletes reported symptoms of anxiety/depression.⁽⁶⁾

A 2020 study found a higher prevalence of anxiety and/or depression in female athletes (26.0%) compared to male athletes (10.2%).⁽³⁹⁾

33.6%



OF ELITE ATHLETES AND 26.4% OF FORMER ATHLETES REPORTED SYMPTOMS OF ANXIETY/DEPRESSION

SLEEP-RELATED PROBLEMS



49%

OF OLYMPIC ATHLETES WOULD BE CLASSIFIED AS "POOR SLEEPERS" (A TERM THAT INCLUDES MULTIPLE SLEEP PROBLEMS).⁽⁴⁰⁾

BIPOLAR AND PSYCHOTIC DISORDERS



A 2019 review notes that whilst evidence demonstrates that the typical age of onset of bipolar and psychotic disorders coincides with average peak performance in elite athletes, information on their prevalence in elite athletes and their impact on athletic performance is limited.^(40,41)

SUBSTANCE USE AND SUBSTANCE MISUSE DISORDERS



The substances most commonly used and misused by elite athletes across countries, sports and genders are alcohol, caffeine, nicotine, cannabis/cannabinoids, stimulants and anabolic-androgenic steroids.⁽¹⁸⁾

It is important to note that most of the prevalence studies cited on this page are from Europe and North America. They may therefore not be representative of all athletes. Further research to determine prevalence rates worldwide is required.



EATING DISORDERS

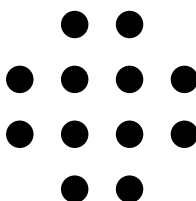
The estimated prevalence of eating disorders and/or disordered eating among athletes in general ranges from 0 to 19% in men and from 6 to 45% in women. These figures are higher than in non-athletes.^(43,44,45)

SUICIDE

In the largest study of suicide in elite collegiate student athletes in the USA, 7.3% of all athlete deaths were attributed to suicide. However, collegiate athletes still had a lower rate of suicide than individuals within the same age group in the general US population. A 2020 study found that 1 in 6 international athletics athletes reported having experienced suicidal ideation.^(46,47,48)

POST-TRAUMATIC STRESS DISORDER AND OTHER TRAUMA-RELATED DISORDERS

Athletes may encounter traumatic experiences from inside or outside sport, and such experiences may range from sports injuries to life events independent of a sports injury. Research on the prevalence of trauma-related disorders in elite athletes is limited.⁽¹⁸⁾



ATTENTION-DEFICIT/HYPERACTIVITY DISORDER

Though there is little data regarding the prevalence of ADHD in athletes, a 2020 study of 333 elite Swedish athletes found that 5.4% had symptoms of ADHD.⁽³⁹⁾

5.4%

OF ATHLETES HAD SYMPTOMS OF ADHD

GAMBLING DISORDER AND OTHER BEHAVIOURAL ADDICTIONS



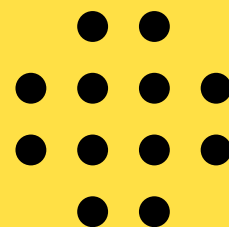
A 2016 study investigating gambling among European professional athletes showed that 56.6% had participated in some form of gambling during the past year, and 8.2% had a gambling problem (either current or in the past).⁽⁴⁹⁾

ALCOHOL MISUSE

A 2020 study reported that hazardous drinking was found in 25.8% of athletes.⁽³⁹⁾

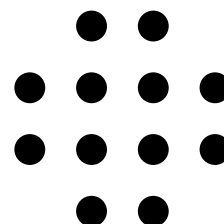
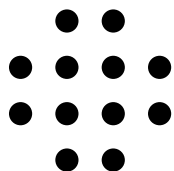
A 2018 meta-analysis found that 19% of athletes and 21.1% of former athletes reported symptoms of alcohol misuse.⁽⁶⁾





3. ROLES AND RESPONSIBILITIES

- 3.1 Working Together
- 3.2 Role of the Athletes' Entourage
- 3.3 Role of Sports Organisations
- 3.4 Role of Health Professionals



In this section we examine the roles and responsibilities of key stakeholder groups in creating psychologically safe athletic environments. The key stakeholder groups addressed here are the athletes' entourage, sports organisations and health professionals.

We explore a range of topics, including placing athlete mental wellness as a priority, creating a psychologically safe culture which supports help-seeking, considerations for sporting events, and understanding pathways to care.

3.1. WORKING TOGETHER

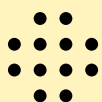
It is important to recognise that whilst various stakeholder groups may have different roles,

responsibilities or focus areas which influence the psychological safety of athletic environments, there are many areas of crossover that will require mutual understanding and support, as is seen in the diagram below. We therefore encourage all stakeholders to read this section in its entirety in order to gain a more comprehensive overview of their role and how it complements efforts by other key groups.



CORE COMPONENTS	SPORTS ORGS	ATHLETES' ENTOURAGE	HEALTH PROFESSIONALS
Prioritising athlete mental health	●	●	●
Mental Health Action Plan	●	●	●
Crisis competency	●	●	●
Education & prevention	●	●	●
Understanding mental health stressors	●	●	●
Post-career transition	●	●	●
Resources & funding	●		
Rules and regulations	●		●
Assessment & treatment competency			●
Establishing pathways to care			●
Understanding MH symptoms and disorders in elite athletes		●	●
Supporting safe return-to-play		●	●
Encouraging help-seeking behaviours		●	
Scheduling & event considerations	●	●	

Diagram demonstrating crossover of different stakeholder roles and responsibilities to foster psychologically safe athletic environments.



ROLE OF THE ATHLETES' ENTOURAGE: KEY LEARNING POINTS

- Entourage members should **foster psychologically safe athletic environments**; described as environments where athletes feel safe in taking interpersonal risks within the sports ecosystem, feel accepted as an integral part of the sports ecosystem, and feel respected by the sports ecosystem.⁽⁵⁰⁾
- The athletes' entourage plays an enormous role in **reducing the stigma** around the discussion of mental health. Particular attention should also be paid to deconstructing cultural and gender-based taboos and misconceptions.
- Entourage members should work with athletes to **better understand the stressors** they face in all aspects of their lives (e.g., competitive stress, personal stress and organisational stress) in order to help develop healthy coping strategies.
- **Mental health should have the same level of significance as physical health.** Mental health screenings should be included as a routine part of physical health screenings and be actively encouraged by athletes' entourage members.
- It is important that entourage members know how to **respond to an athlete who is in distress** and know how to help them determine the best course of action.
- Entourage members should be **knowledgeable of the referral pathways** available if they have concerns about an athlete's mental health. Positive discussions around these pathways can reduce barriers to help seeking.
- It is advised that all entourage members are familiar with the **IOC Sport Mental Health Recognition Tool 1 (SMHRT-1)**,⁽⁵¹⁾ which, although not a diagnostic tool, was developed to assist entourage members in recognising when an athlete may need further help and/or support.
- It is important to be mindful of any strategies, interventions or treatment that athletes may be following to improve their mental health, and to **facilitate a safe and supported return to play** in the event that an athlete has been absent from training or competition for physical or mental health reasons.



3.2. ROLE OF THE ATHLETES' ENTOURAGE

What is an athlete's entourage?

The entourage consists of all the people associated with an athlete including, but not limited to, managers, agents, coaches, physical trainers, medical staff, scientists, sports organisations, sponsors, lawyers and any person supporting the athlete's sporting career, including family members and friends.

In this sub-section we focus on all entourage members, with the exception of health care professionals and sports organisations, as these stakeholders are specifically discussed in **SECTIONS 3.3** and **3.4**.

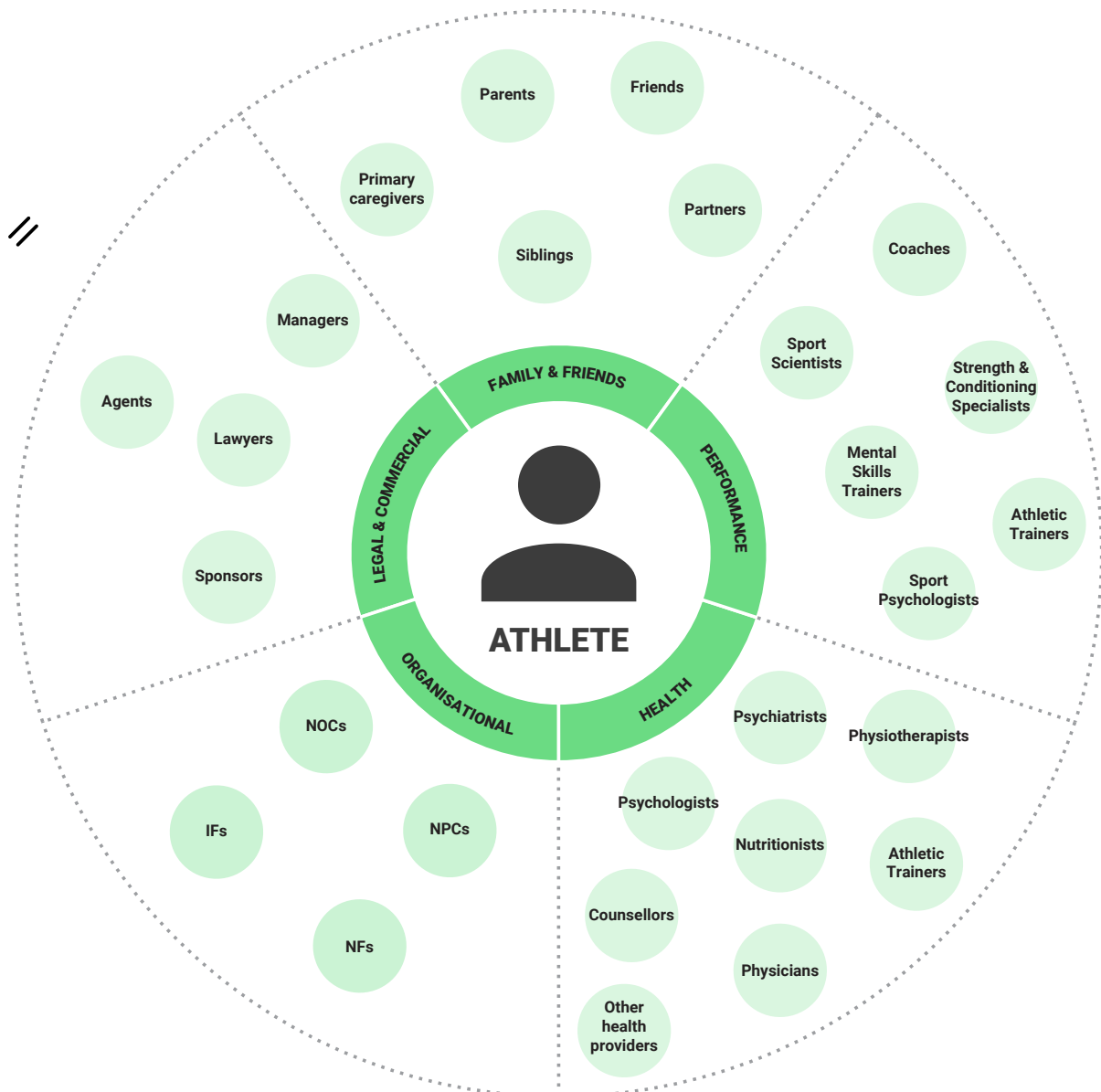


Diagram displaying an example of an athlete's entourage

Responsibility of the athletes' entourage

Members of the athletes' entourage often have a substantial influence on athletes. It is therefore important that they always act in their best interests.

In 2011, the IOC set out minimum standard Guidelines for the Conduct of the Athletes' Entourage.⁽⁵²⁾ The protection and promotion of athlete mental health is encompassed in these guidelines, as demonstrated in the following extract:

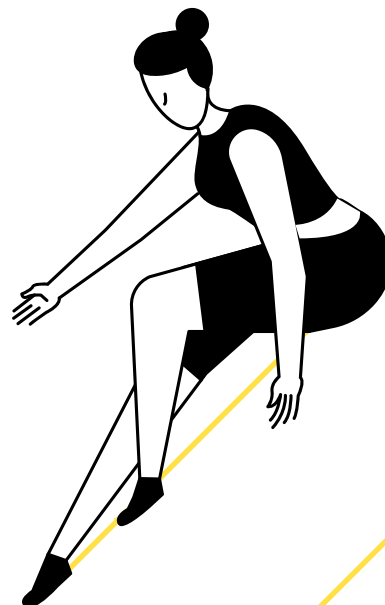
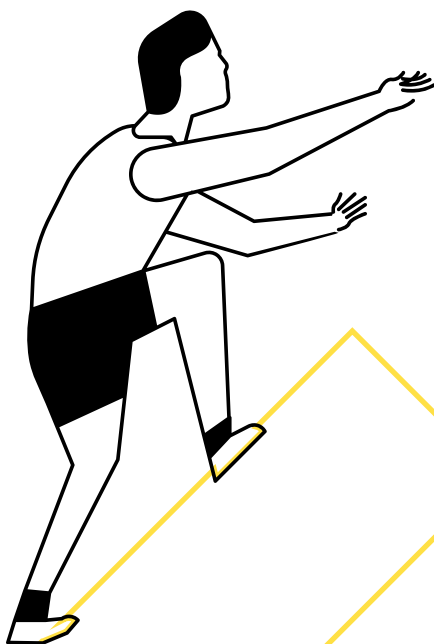
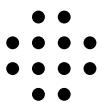
EXTRACT FROM THE IOC GUIDELINES FOR THE CONDUCT OF THE ATHLETES' ENTOURAGE

2. GENERAL PRINCIPLES

- 2.1. The Entourage must respect and promote ethical principles, including those contained in the Olympic Charter, the IOC Code of Ethics and the WADA Code.
- 2.2. The Entourage must, in accordance with such principles, always act in the best interests of the athlete.

3. RESPONSIBILITY/ACCOUNTABILITY

- 3.1. The Entourage must always respect the moral, physical and psychological integrity of the athlete.

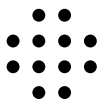
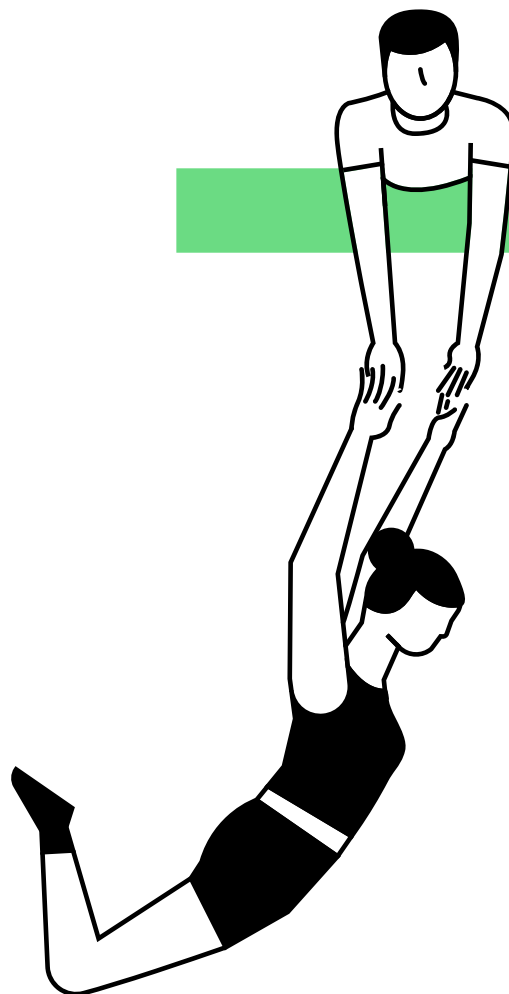


Entourage members have an important role to play in supporting athlete mental wellness. In the elite sporting context, it is essential that mental health symptoms are detected early and followed with swift intervention.⁽⁵³⁾ Entourage members, being in frequent contact with athletes, may therefore be in the best position to recognise when an athlete may be in need of support.

They also play an important role in fostering athletic environments which are psychologically safe and encourage help-seeking. Studies show, however, that when it comes to mental health, members of the entourage are often unsure of what to do and are concerned that they may unintentionally engage in behaviours that negatively impact athletes.⁽⁵⁴⁾ This is an important issue to address, and underlines why it is important to be aware of the tools available (such as the Sport Mental Health Recognition Tool-1) to assist entourage members in recognising when an athlete may be in need of specialist support, and to improve understanding of mental health symptoms and disorders in elite athletes. In this section we therefore examine:

- **Stressors and environmental factors** that influence elite athlete mental health
- How to foster **psychologically safe cultures** that support help-seeking
- **Understanding** pathways to care
- **Responding** to a mental health concern
- **Supporting** safe return to play

The International Olympic Committee Mental Health Working Group developed the **Sport Mental Health Recognition Tool** to assist entourage members in recognising mental health symptoms or disorders in elite athletes. The SMHRT-1 can be found [HERE](#).



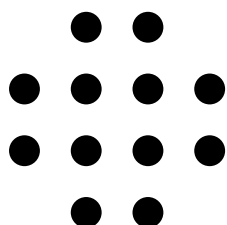
IN FOCUS: COACHES

Coaches are hugely influential stakeholders in an athlete’s entourage. The IOC’s “**Quality Of A Great Sports Coach**” guidelines⁽⁵⁵⁾ describe a good coach as being positive, enthusiastic, supportive, trusting, focused, goal-oriented, knowledgeable, observant, respectful, patient and a clear communicator.

As coaches tend to work closely with athletes on a day-to-day basis, they are afforded the opportunity to ensure that mental wellness is placed as a priority, and are in a position to recognise differences in moods, performance, social interactions and other changed or abnormal behaviours that might indicate further support is needed.⁽⁵⁶⁾ In addition, support by a coach when an athlete is seeking or in need of mental health treatment can greatly decrease stigma and improve help seeking behaviours for athletes.



The able coach attempts to instil confidence, inner peace, courage, ethics, initiative, discipline, concentration, and a sound respect for nutrition, training, a drug-free body, and a balanced lifestyle in their athletes – all of which have a profound impact on self-image. Finally, the proficient trainer seeks to promote efforts toward self-fulfilment and self-actualisation.⁽⁵⁷⁾





IN FOCUS: PARENTS/GUARDIANS/FAMILY/FRIENDS

Family and friends have a unique role in the life of an athlete and can create a strong and trusted support system. Athletes may feel more at ease opening up about mental health concerns or challenges to those closest to them, especially during their downtime when they have less direct pressure from training or the need to perform. This close circle may include parents, siblings, partners, friends, grandparents, etc.

Some symptoms and disorders (as well as life stressors) may be more readily identified by this group due to the closeness of their relationships. This may especially be the case for observing changes in mood or behaviour over time. This presents the opportunity to support athletes and communicate with support networks to discuss mental health with confidence while in a safe environment.

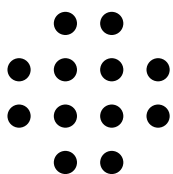
IN FOCUS: PHYSIOTHERAPISTS AND ATHLETIC TRAINERS

Injury is a risk factor associated with mental health symptoms and disorders, and is a risk faced by every elite athlete. When elite athletes are injured or ill and are not able to train or compete, there are often mental challenges to overcome in addition to physical healing.

Physiotherapists and athletic trainers may play a crucial role in the early detection of mental health symptoms and disorders. They may be in a position to notice changes in behaviour such as signs of self-harm or indications of eating disorders or substance abuse. Furthermore, this group may also be able to identify unhealthy training environments.



In a recent survey of sports medicine physicians, it was found that 80% of the time athletes coming to treatment for an injury also discuss psychological issues related to the injury.⁽⁵⁸⁾



3.2.1 ATHLETIC PERFORMANCE AND MENTAL HEALTH

The #MentallyFit continuum

It is important to recognise that mental health is on a continuum (FIGURE 1). Athletes who at one point may be mentally healthy may at other times experience mental health symptoms and disorders that are influenced by environmental and other factors.⁽⁵⁹⁾ This is the same for athletes as it is for the general population.

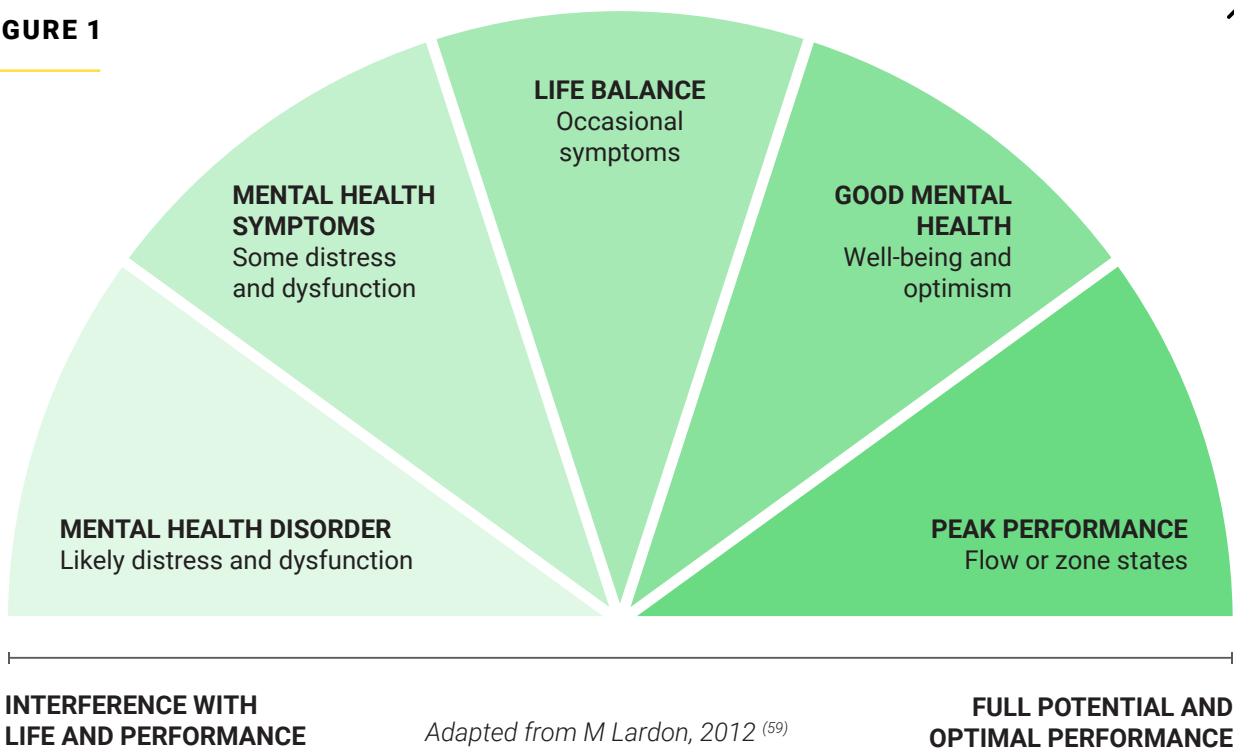
“Peak performance flows” or “zone states” are often correlated with full athletic potential and athletic performance, but athletic performance and quality of life can be negatively affected by the presence of a mental health disorder.

In sport, mental health is often overlooked. It is important to acknowledge that an athlete’s mental health needs are as important as their physical health needs, and that both contribute to optimising the athlete’s overall well-being in conjunction with performance excellence.⁽⁵⁶⁾

KEY TAKEAWAYS:

- An athlete’s mental health needs are as important as their physical health needs.
- In sporting culture, psychological illness should be accepted as readily as physical injury, and the same process of recovery and return to sport process should apply.

FIGURE 1



3.2.2 UNDERSTANDING STRESSORS AND ENVIRONMENTAL FACTORS

As for all of us, there are many stressors and environmental factors that can influence athlete mental health. At elite levels, the intensity of competition may lead to increased stress levels. Additionally, athletes may also experience adverse life events outside sport, such as relationship issues, financial trouble, etc. which can exacerbate their stress level.⁽⁶⁰⁾ Both life-event stress and high stress responses can in turn lead to an increased risk of injury.⁽¹⁸⁾ As members of an elite athlete's entourage are often closest to the athlete on a day-to-day basis, it is important that they are equipped with the knowledge and skill to understand and recognise key stressors and environmental factors which may impact elite athlete mental health.

What are the key stressors?

Key stressors can be split into three categories: competitive stress, organisational stress and personal stress.⁽⁶¹⁾ These three categories are not exclusive and can have knock-on effects or impacts on other categories.

Competitive stress

- the environmental demands associated primarily and directly with competitive performance

Personal stress

- the environmental demands associated primarily and directly with personal "non-sporting" life events

Organisational stress

- the environmental demands associated primarily and directly with the organisation within which an individual is operating

A 2014 study by Sarkar & Fletcher⁽⁶¹⁾ identified in excess of 640 organisational stressors during a professional sports career that may induce common mental health disorders. These are further divided into four categories: Leadership and personnel, cultural and team, logistical and environmental, and performance and personal.

Another important category of stressors which athletes may experience are **traumatic stressors**. These stressors, which can be experienced inside or outside sport, may include bullying, cyberbullying, physical abuse, psychological abuse or sexual harassment or abuse.

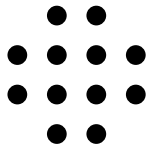
As noted by Lazarus in 2000,⁽⁶²⁾ the ways in which athletes appraise and cope with these stressors can be a powerful determinant of the impact the stressors have on both their mental health and their sporting success. As members of an athlete's entourage, it is important to recognise the impacts that such stressors can have on an athlete's mental health, and work with them to develop healthy coping strategies.



Examples of competitive, personal and organisational stressors are outlined in the below infographic:

FIGURE 2





3.2.3 CREATING A PSYCHOLOGICALLY SAFE CULTURE AND ONE WHICH SUPPORTS HELP SEEKING

In this context, when we speak of psychological safety, it is the creation of an athletic environment where athletes feel comfortable being themselves, can take necessary interpersonal risks, have the knowledge and understanding of mental health symptoms and disorders, and feel supported and comfortable in seeking help if needed.

In order to establish psychologically safe environments that encourage help-seeking, it is important to understand the key barriers that may be faced by athletes. A 2012 athlete survey by Gulliver *et al.*⁽⁶³⁾ identified the following key factors (listed from 1-10 in the order of most applicable to least applicable):

BARRIERS TO HELP SEEKING

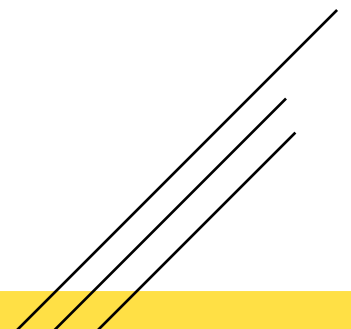
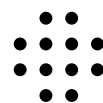
1. Stigma
2. Difficulty or unwillingness to express emotion
3. Lack of problem awareness
4. Lack of time
5. Denial of problem
6. Scared of what might happen
7. Impacts on ability to play or train
8. Not sure who to reach out to
9. Accessibility
10. Belief that it would not help

Breslin *et al.*, (2017)⁽⁶⁴⁾ argues that athletes have traditionally been poorly supported in managing their mental health, with the perceived “costs” of seeking help outweighing the benefits in a culture where strength and power are celebrated and weakness is shunned. Consequently, that stigma, either self-imposed or through others, inhibits the willingness of an athlete to express emotion and has a significant detrimental impact on an athlete’s willingness to seek treatment for mental health issues.^(63,65,66,67)

In addition to stigma there may be additional barriers depending on an athlete’s cultural background. Dr Jacqueline Nakiddu, Medical Commission Chair for the National Olympic Committee of Uganda, notes that: *“In Uganda and other African countries, mental wellness is rarely discussed and is surrounded by superstition. Talking openly about feelings or emotions is uncommon in most traditions, carries negative perceptions, and is seen as taboo to the male sex”*.

Indeed, studies have indicated that gender may also be a determinant in seeking help, especially in cultures where males may be conditioned to be “stoic”, which can inhibit the willingness to seek help and lead to maladaptive coping strategies.^(64,68,69)

It is clear that members of an athlete’s entourage have a vital role to play in addressing barriers to help-seeking, including reducing stigma and fostering environments where mental health self-awareness and expressing emotions is encouraged and supported.



In addition to identifying the key barriers to help-seeking, Gulliver *et al.*⁽⁶³⁾ also went on to determine the key facilitators to help-seeking behaviours in athletes. These were identified as:

KEY FACILITATORS TO HELP-SEEKING

1. Education and awareness raising of mental health issues and services
2. Social support
3. Encouragement from others
4. Accessibility (money/transport)
5. Positive relationship with entourage members
6. Confidentiality
7. Integration into athlete lifestyles and cultures
8. Openness and ease of expressing emotions
9. Time
10. Positive past experiences

Educational interventions aimed at improving mental health literacy have been widely recommended as a strategy to both prevent and treat mental health symptoms and disorders in elite athletes. It is important that these interventions are evidence-based, developed in collaboration with professionals (such as sports psychiatrists, sports psychologists and clinical psychologists), and are tailored and adapted to the cultural and social context.

Such educational interventions should consider knowledge and understanding of self-management strategies, including:⁽⁷⁰⁾

- challenging stigma
- improving awareness and understanding around mental disorders
- the use of mental health or psychological first-aid to assist others
- the facilitation of help-seeking behaviours



Over 40% of the barriers listed by participants related to stigma and the embarrassment an athlete would feel in seeking help... a lack of knowledge about symptoms of mental disorders was considered a major barrier.⁽⁶³⁾

Positive relationships with entourage members, social support and encouragement are all key facilitators to help-seeking. Studies have found that coaches – as leaders of the social group – have the opportunity to actively impact athlete mental health in a positive manner,⁽⁵⁴⁾ including taking steps to reduce stigma. These steps may include:

- Normalising conversations around mental health and psychological stress
- Easing access to mental health professionals and encouraging support seeking
- Practising communication skills such as empathic listening, which may contribute to creating greater ease and understanding when responding to an athlete raising concern
- Collaborating with athlete role models and educating them on how they may help others by addressing stereotypes and de-stigmatising mental health conversations⁽⁶⁴⁾

The National Collegiate Athletic Association (NCAA) has designed education materials specifically for coaches. These communication tools can be found [HERE](#).

In summary, whilst there are many barriers that athletes may face in recognising, acknowledging and seeking help for mental health concerns, members of the entourage play a crucial role in addressing these barriers and working to overcome them. Cultivating athletic environments where understanding and communication about mental health are encouraged and services are made available if an athlete needs support is key.

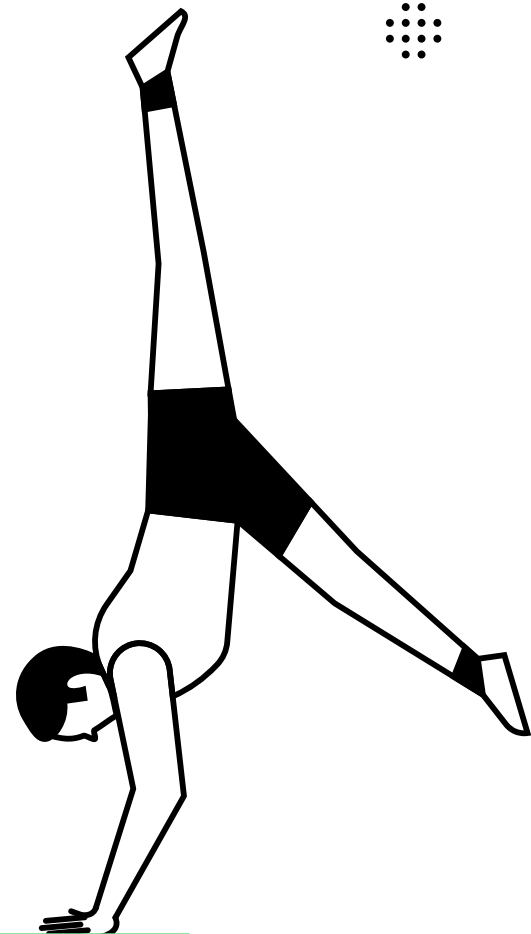
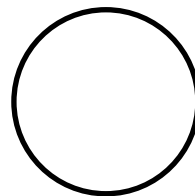
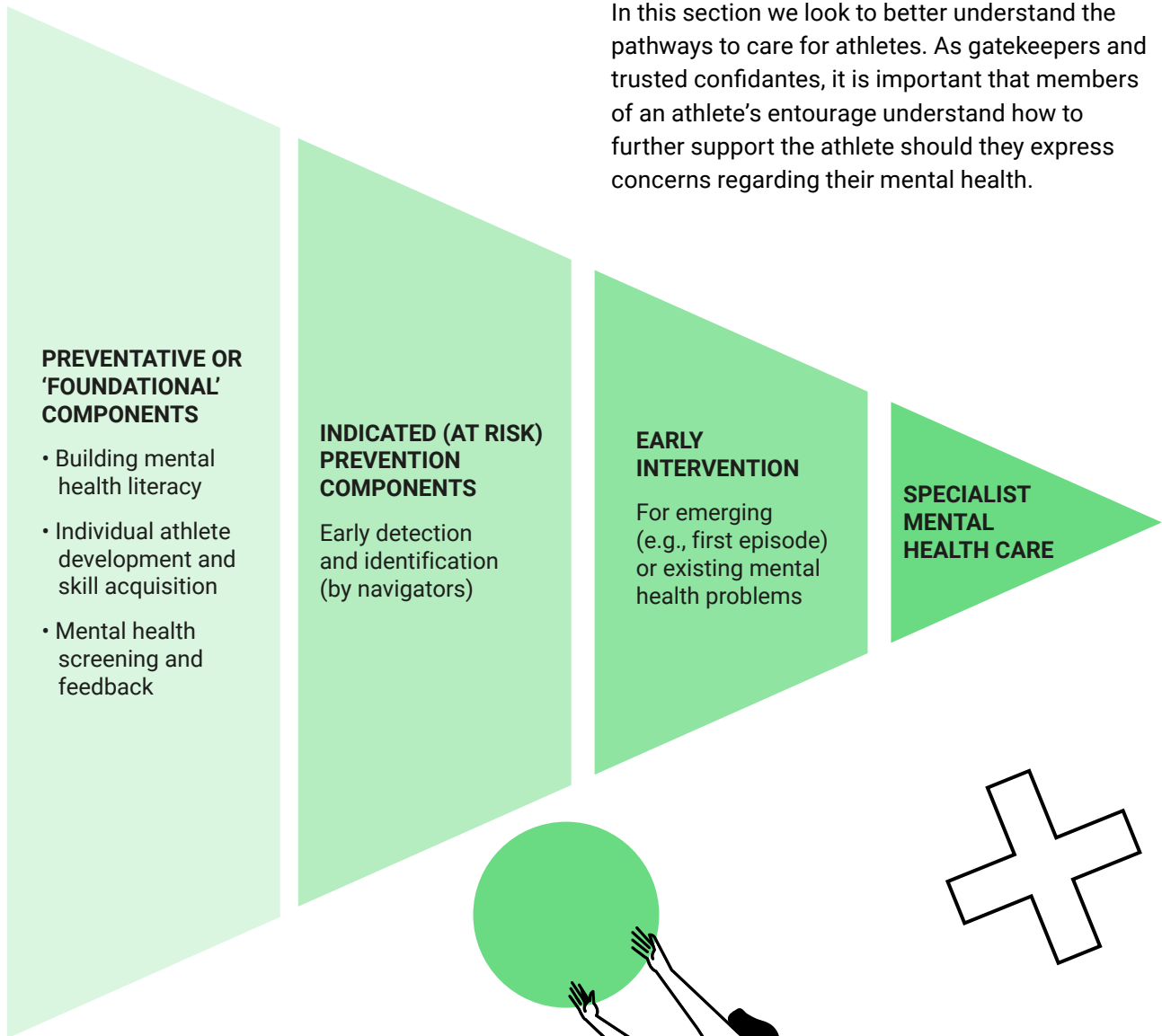


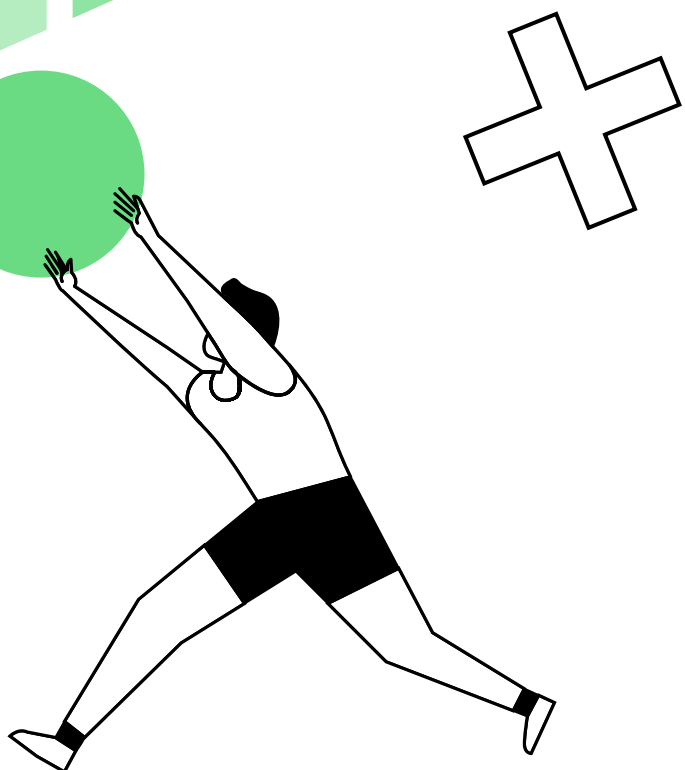
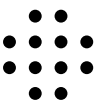
FIGURE 3



3.2.4 UNDERSTANDING PATHWAYS TO CARE

In this section we look to better understand the pathways to care for athletes. As gatekeepers and trusted confidantes, it is important that members of an athlete’s entourage understand how to further support the athlete should they express concerns regarding their mental health.

Purcell et al., 2019



It is important to mention that entourage members should not attempt to diagnose athletes' mental health without the appropriate background or training needed to do so. This is why a clear and structured pathway to determine the most effective route to assessment and treatment for each individual athlete should be established and followed.



1

PREVENTION:

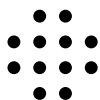
The first step in pathways to care, as shown in **FIGURE 3**,⁽⁵³⁾ encompasses prevention and foundation; establishing a safe environment for athletes and entourage members to recognise and promote the importance of mental health and well-being. This includes practices such as regular check-ins to discuss how athletes are feeling, standardised screening for mental health symptoms or disorders, education in mental health literacy, building supportive and trusting personal relationships, and removing the stigma surrounding requesting assistance for mental health care. Although each athlete is unique, these elements are the foundation of every athlete's pathway to care.

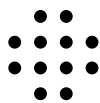


2

RECOGNITION/ EARLY DETECTION:

The earliest recognition of mental health symptoms or disorders may often be by those closest to the athlete: a family member/close friend, a coach, physio or other members of the entourage, who might notice changes in behaviour or other signs and symptoms, and to whom an athlete may disclose concerns. Because of their access and proximity, athletes' entourage members are therefore key stakeholders in an athlete's pathway to care and may find themselves responsible for taking the first steps. These first steps may include reducing stressors, adapting an athlete's immediate environment and/or promoting or facilitating access to professional care. But how do you know if an athlete needs further support? The IOC's Mental Health Working Group has developed The IOC Sport Mental Health Recognition Tool (SMHRT-1).⁽⁵¹⁾ The SMHRT, although not a diagnostic tool, was developed specifically for athletes, coaches, family members and all other members of an athlete's entourage to assist in determining if an elite athlete requires further professional assistance. You can find more information on this tool in **SECTION 3.2.5**.





3

EARLY INTERVENTION:

This is described as being “necessary in instances where the performance and life demands placed on an athlete exceed their ability to cope (i.e. major career-threatening injury or significant life stress)⁵³”. In this case, when you recognise that an athlete needs formal or professional care, early intervention by sports or clinical psychologists or psychiatrists, or medical staff where appropriate, is required. This should ideally be provided by in-house professionals or professionals who are known to the athlete and are part of the club/team’s network. As part of early intervention, mental health clinicians will offer individualised approaches specific to the context and situation of that athlete in order to target the psychological processes and other factors that are impeding the athlete’s return to mental health or wellness. More information for mental health professionals on early intervention can be found in **SECTION 3.4**.

4

SPECIALIST MENTAL HEALTH CARE:

The final step in pathways to care is seeking specialist mental health care. This is required when athletes experience severe or complex mental health problems that cannot be addressed purely by preventative measures or early intervention. The need for a referral to a mental health specialist will usually be made by the team doctor. In the case of a mental health emergency, clinicians should follow the club/team’s Mental Health Emergency Action Plan (MHEAP). The development of such action plans is discussed in **SECTION 3.3.2**. As a member of an athletes’ entourage, check that your team/club has a MHEAP and if so, understand your role in it.

Although you may wish to solve all of the athlete’s problems, there are limits to what you can do without specialised mental health training – being understanding and facilitating access to appropriate care are extremely important.

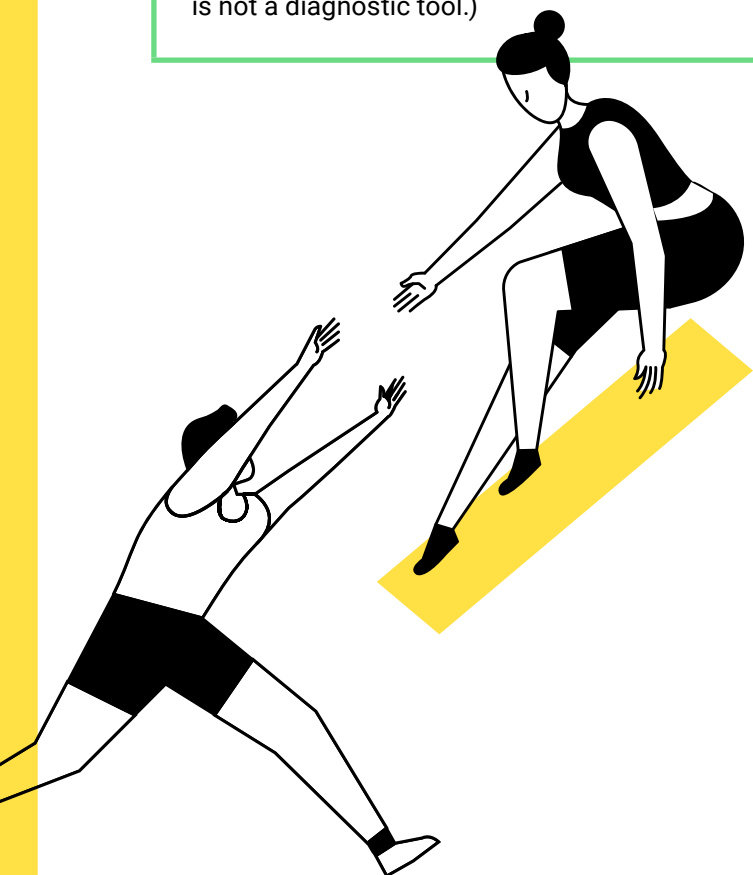
It is important to keep in mind that treatment cannot be forced. Aside from when an athlete poses an immediate danger to themselves or others, you can only encourage and support an athlete in seeking further help. For cases involving minors, primary caregivers (e.g., parents/guardians) should assume the responsibility of initiating help-seeking if an athlete may be unwilling.

3.2.5 THE IOC SPORT MENTAL HEALTH RECOGNITION TOOL 1 (SMHRT-1)

The IOC Sport Mental Health Recognition Tool 1 (SMHRT-1)⁽⁵¹⁾ was developed by the IOC Mental Health Working Group to assist athletes, coaches, family members and other members of an athlete's entourage to recognise mental health symptoms or disorders in elite athletes.

The SMHRT-1 presents a list of athlete experiences (thoughts, feelings, behaviours, physical changes) that could be indicative of mental health problems. If an athlete reports and/or displays these experiences and they are significant and/or persistent, you, as members of the athlete's entourage, have a crucial role in encouraging the athlete to get the support needed as early as possible.

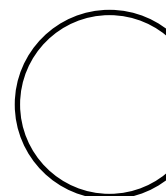
The tool is simple, easy to use, and can be found [HERE](#). (Please note that the SMHRT-1 is not a diagnostic tool.)



3.2.6 RESPONDING TO A MENTAL HEALTH CONCERN

The framework shown in **FIGURE 4** has been designed to assist members of an entourage to respond to an athlete who is in distress and may need help determining the best course of action. If you have concerns about an athlete's mental health or wellness and decide to speak with them about it, here are a few things to keep in mind:

- Practise empathic listening
- Focus and relate to them as a person and not as an athlete
- Let them know what specialist support is available
- Consider their culture, gender, age and social norms
- Respect their right to make their own decisions related to seeking further help (unless they present an immediate risk of harm to themselves or others)
- Don't judge or blame them for their symptoms or actions
- Don't promise things you cannot deliver or provide inaccurate/false information
- Respect their need for privacy and don't pressure them to share their story
- Provide a safe space and environment to share their concerns should they wish to
- Do not isolate or punish athletes for talking about their mental health concerns



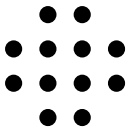
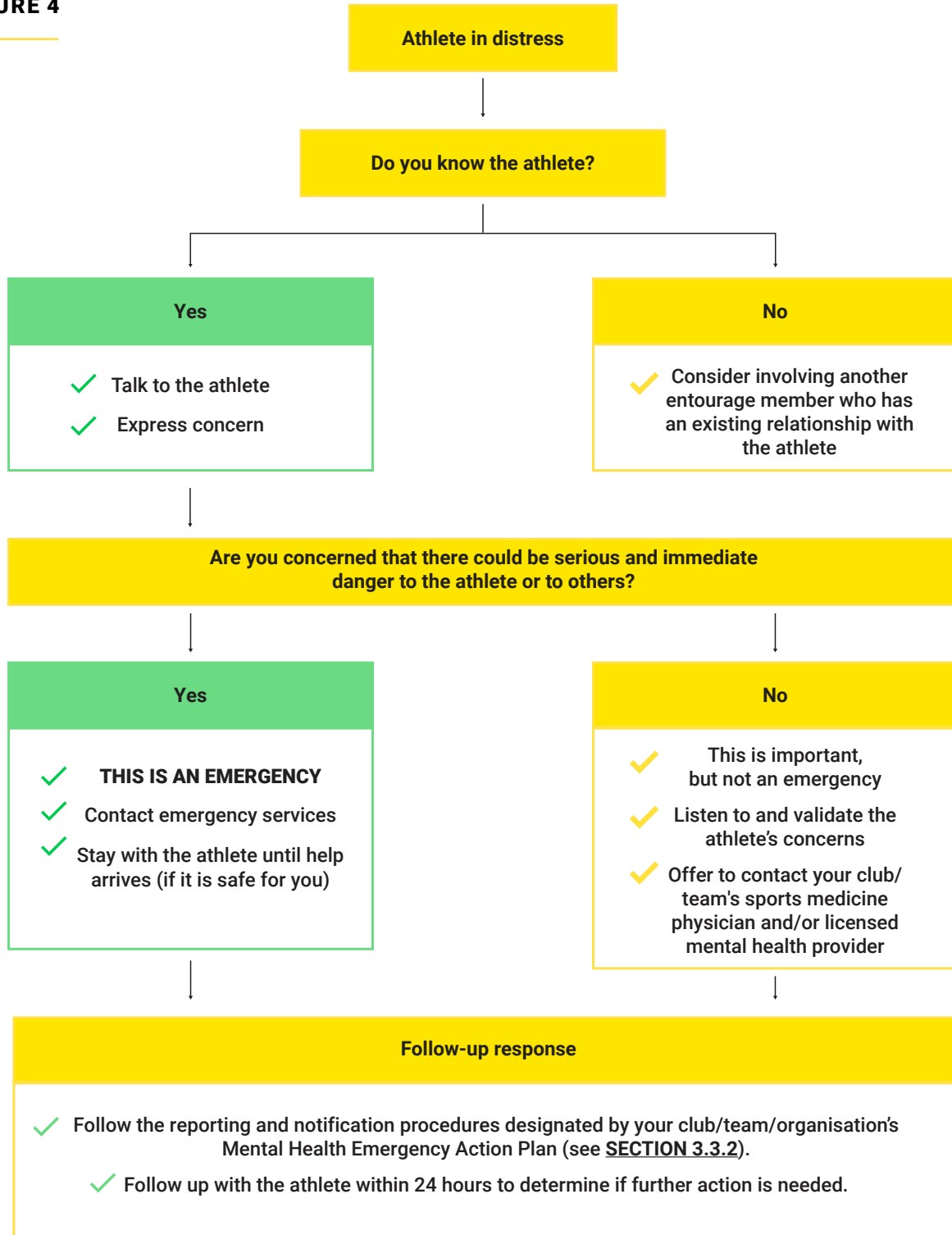


FIGURE 4



Adapted from the NCAA Mental Health Referral Decision Tree⁽⁷¹⁾

3.2.7 SUPPORTING SAFE RETURN TO PLAY

After an athlete has been absent from training or competition, whether it be for reasons of a physical or mental health problem, they need a safe and supported return to play. In this section, we will discuss supporting a safe return to play for athletes whilst a mental health problem is being addressed.

The first step in a supported return to play is simply checking in. Entourage members can support athletes on an emotional, informational and motivational level. Engaging in informal conversations regarding the athlete's progress and mental status, supporting self-monitoring techniques, encouraging goal setting, and helping to maintain motivation are strong initial steps of support during the rehabilitation process.⁽⁷²⁾

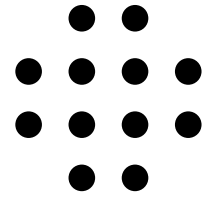


More formal check-up measures may include regularly scheduled appointments with a health care professional. Appointments should follow a similar procedure as would be applied to injury rehabilitation. Normalising these appointments by approaching the issue as akin to any physical injury can help athletes and stakeholders reduce stigma and encourage open and honest mental health conversations. During this time, coaches and trainers can take extra measures to ensure that athletes are not segregated from team environments, traditions or social interactions, making sure that athletes do not feel left out or as if they are being punished for their mental health issue.⁽⁷³⁾

Steps for a safe return to play should be created, initiated and supported as soon as long-term rehabilitation begins for either a physical injury or mental health disorder. Considering that many athletes have mental health symptoms during rehabilitation for physical injuries, a supported recovery can help aid in a faster and less complicated recovery.⁽⁷⁴⁾



It is important for coaches, athletic trainers and team physicians to provide support for injured athletes and keep athletes involved and part of the team. This might include keeping athletes engaged and encouraging athletes to seek help instead of “tough it out”.⁽⁷⁵⁾



3.2.8 EXERCISE: KEY TAKEAWAYS FOR ATHLETES' ENTOURAGE MEMBERS

We hope this section has helped to emphasise the crucial role that members of an athlete's entourage play in protecting and promoting elite athlete mental health. We recommend that you take some time to reflect upon the section and consider how what you have learnt may inform your own relationships and interactions.



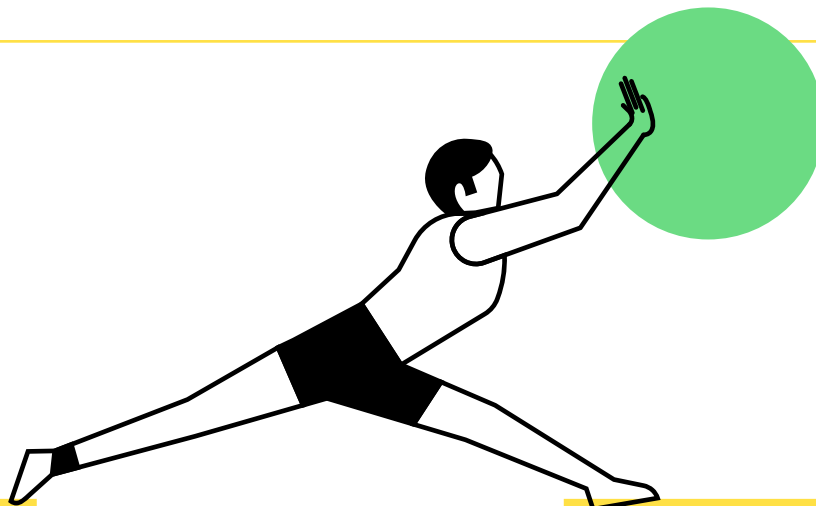
LIST THREE TAKEAWAYS (THINGS WHICH STOOD OUT TO YOU) FROM THIS SECTION.

KEY TAKEAWAYS:

1. _____

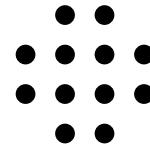
2. _____

3. _____



We now recommend that you complete this short traffic light exercise:

Thinking back to what you have read in this section, list three things that you will start doing, three things that you will stop doing and three things that you will continue to do related to cultivating and promoting psychologically safe environments for athletes that support help-seeking.



LIST 3 THINGS THAT YOU WILL START DOING:

1. _____

2. _____

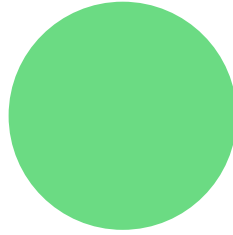
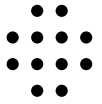
3. _____

LIST 3 THINGS THAT YOU WILL STOP DOING:

1. _____

2. _____

3. _____

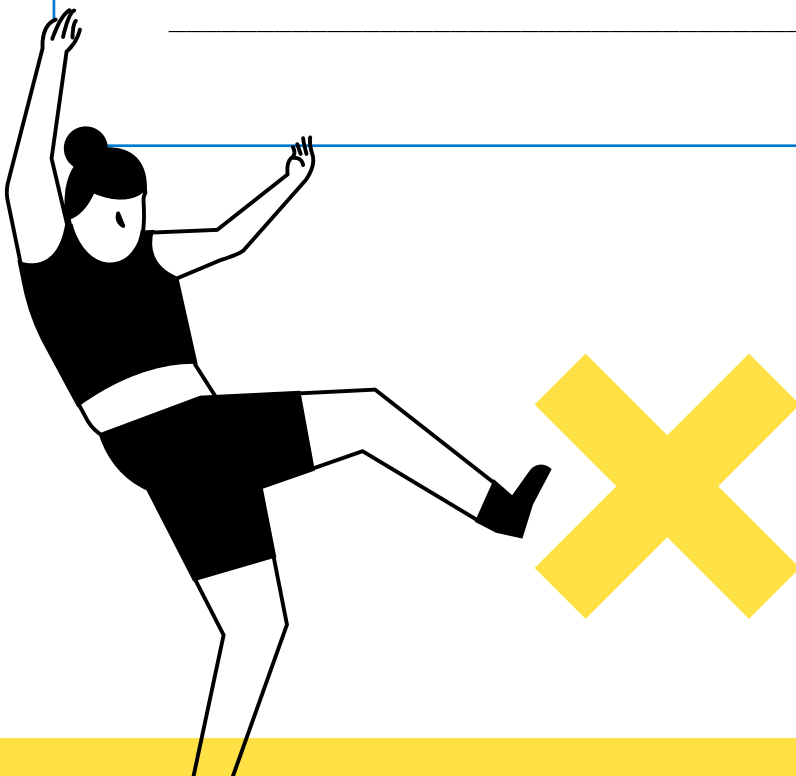


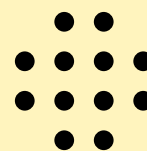
LIST 3 THINGS THAT YOU WILL CONTINUE DOING TO PROMOTE AND CULTIVATE PSYCHOLOGICALLY SAFE ENVIRONMENTS FOR ATHLETES:

1. _____

2. _____

3. _____





ROLE OF SPORTS ORGANISATIONS: KEY LEARNING POINTS

- Sports organisations have an essential role in facilitating a **safe and supportive environment** that allows athletes to feel comfortable in coming forward with concerns about their mental health.
- **A positive culture** surrounding mental health should be adopted at all levels of a sports organisation, and supported by the top leadership/management.
- Sports organisations also play a role in promoting **positive mental health values** within their local community, and should ensure that all internal policy is in line with public policy.
- Sports organisations must recognise their **duty of care** and how that extends to safeguarding athletes' mental health.
- Sports organisations should include the **protection and promotion of mental health** in formal written documentation alongside the protection of athletes' physical safety.
- Organisations should develop appropriate **mental health policies** and communicate those policies to all departments and stakeholders, regardless of the nature of their relationship with athletes.
- All sporting organisations should develop a **Mental Health Emergency Action Plan (MHEAP)** to support athletes in the event of a mental health emergency.
- Those in sports organisations with specific mental health roles and responsibilities for mental health should receive sufficient **training to support** them in exercising their role.
- Sports organisations should create and implement **career transition programmes** to support athletes' mental health as they make the transition out of sport.



3.3. ROLE OF SPORTS ORGANISATIONS

Sports organisations play a powerful role in facilitating the creation of psychologically safe environments, not just for elite athletes, but for all stakeholders linked to the organisation. In this section we will discuss the roles and responsibilities of sports organisations in supporting elite athlete mental health, and outline key recommendations.

Recognition of the importance of mental health and well-being by the top leadership and at executive levels helps to foster a supportive organisational culture that can positively impact employees and all of those who are influenced by the organisation.

Sports organisations also play an important role in supporting mental health in the wider community through the social support and resources available to members. This may be especially effective when:

- their organisations' activities are aligned with public policy concerning mental health and physical activity
- they seek to utilise the power of sport to help promote physical and mental well-being.^(76,77)

"Sports organisations" includes, but is not limited to: National Olympic Committees, National Paralympic Committees, International Federations, Continental Associations, National Federations, clubs and teams.



The Olympic Movement, to accomplish its mission, encourages all stakeholders to take measures... necessary to protect the health of participants by minimising the risks of physical injury, illness and psychological harm.

THE OLYMPIC MOVEMENT MEDICAL CODE (2016)



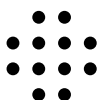
3.3.1 PLACING ATHLETE MENTAL WELL-BEING AS A PRIORITY

As discussed in **SECTIONS 2** and **3.2** of this toolkit, participation in sport has many benefits for both physical and psychological health. However, it is acknowledged that “the very nature of [sports] competition can provoke, augment or expose psychological issues in athletes”.⁽¹⁶⁾ Knowing this and considering the duty of care that sports organisations have towards athletes, it is incumbent upon them to make certain that athlete mental wellness is placed as a priority and that measures are in place to protect and promote mental health and well-being.

One way for this to be clearly demonstrated is by ensuring that the protection and promotion of athlete mental health and the requirement to minimise the risk of physical injury and psychological harm are included in the formal written documents that outline your organisation’s authorities, commitments and responsibilities, for example, your organisation’s statutes, code of ethics, medical code, code of conduct, etc. (hereafter, foundational guiding documents). By clearly stating this, your organisation is:

1. Demonstrating a commitment to placing mental well-being as a priority
2. Sending a strong message of support, which may help to raise awareness and reduce the stigma surrounding mental health
3. Providing a foundation on which your organisation’s mental health policies, guidelines and action plans can be developed.

*Examples of how such provisions are included in the foundational guiding documents of the Olympic and Paralympic Movements can be found in **SECTION 1.3**.*



QUICK CHECK:

Does your organisation specifically reference the protection and promotion of mental health and well-being in its foundational guiding documents?

3.3.2 DEVELOPING AND IMPLEMENTING MENTAL HEALTH POLICIES AND ACTION PLANS

The next step is to verify that appropriate mental health policies and action plans are in place.

Policies and action plans clearly define the approach your organisation intends to take to uphold the principles to which it has committed. Having policies related to “sports medicine support” and “athletic and post career support” (both of which should include athlete mental health) has also been shown to be a factor in influencing both individual and national athletic success.⁽⁷⁸⁾ Below we will seek to identify the key mental health policies, action plans and guidance that your organisation may look to develop and implement. These include:

- An organisational mental health action plan
- A Mental Health Emergency Action Plan (MHEAP)
- Mental health referral pathways
- Coaching frameworks and education related to athlete mental health

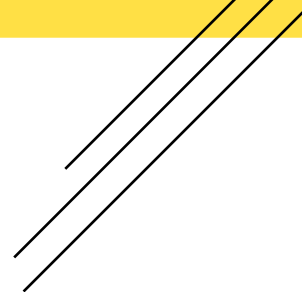
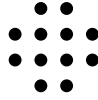
Other important organisational policies which also help to protect the mental well-being of members include those which address discrimination of all kinds – which underpin harassment and abuse in sport policies and diversity and inclusion policies.

BEST PRACTICE EXAMPLE:

The Mental Health Charter for Sport and Recreation, developed by the Sport+ Recreation Alliance, encourages sports organisations to help embed mental health and wellness in the sports and recreation sector by:

- ✓ Publicly promoting and adopting good mental health policies and best practice in sport and recreational activities.
- ✓ Using the power of sport and recreation to promote well-being, with a special focus on encouraging physical activity and social interaction due to their contribution to good mental health.
- ✓ Promoting positive public health messages using diverse role models and ambassadors to reduce the stigma attached to mental health issues.
- ✓ Actively tackling discrimination on the grounds of mental health to make sure that everyone is treated with dignity and respect.
- ✓ Supporting the establishment of a network to work closely with the mental health sector to develop resources and best practice.
- ✓ Regularly monitoring performance, assessing progress and taking positive action on mental health issues.





Developing an organisational mental health action plan

A mental health action plan will help your organisation to translate commitments made into tangible actions promoting and protecting athlete mental health. It will help you to set out key activities and/or initiatives that your organisation can implement in order to prioritise mental health, and support best practice such as:



Ensuring mental health and well-being is set as a priority



Developing organisational campaigns to raise awareness of mental health and the role of sport in protecting and promoting mental and physical well-being



Developing coach, athlete and other stakeholder educational programmes and tools



Developing and implementing key mental health policies such as an Emergency Mental Health Action Plan



Identifying champions of mental health, including athletes, entourage members, leadership and community champions, to tackle stigma and improve recognition



Building formal and informal external support networks, including referral pathways, links to community organisations, schools and mental health services



Creating and implementing effective athlete safeguarding policies, procedures and education



Developing initiatives embracing diversity and inclusion



Developing initiatives that build a culture of support, promote open lines of communication and foster mental wellness

Your organisational mental health action plan will provide a framework to help you outline the key initiatives to be developed, the resources and support required, timeframes, and how progress will be monitored. In essence, it provides a tangible roadmap to help you monitor your organisation's commitment and progress in protecting and promoting athlete mental health.

An example of a mental health action plan template for sports organisations can be found [HERE](#).⁽⁸⁰⁾

An example of a Governmental Mental Health and Elite Sport Action plan can be found [HERE](#).⁽⁸¹⁾

Ensuring the existence and effective implementation of a Mental Health Emergency Action Plan (MHEAP)

Mental Health Emergency Action Plans (MHEAPs) outline the steps that are to be followed when faced with an emergency or non-emergency mental health situation and the stakeholders who should be involved. MHEAPs are usually developed by an organisation's medical team in conjunction with licensed experts in mental health, such as clinical psychologists or psychiatrists.

This plan should be well communicated throughout your organisation and to your key stakeholders to make certain that they are aware of the procedure to be followed if faced with a mental health emergency.

As a sports organisation, it is your responsibility to ensure that your organisation has an MHEAP, and if not, to make sure that one is developed and that those who are responsible for its implementation are trained to do so.

Ensuring the existence and effective implementation of routine mental health referral pathways

Routine mental health referral plans are a key component in the recognition and diagnosis of mental health disorders in elite athletes. These plans define the referral procedures that should be followed in the event that an athlete presents with a non-emergent mental health concern. Within your organisation it is important to designate those people responsible for developing this plan and those responsible for facilitating referrals.

Designated persons should receive training in the recognition of signs and symptoms of mental health disorders. It is also important that the existence of key information related to the plan is well communicated to all those in your organisation.

Providing mental health education within the framework of coaching expectations and duties

Supporting the development of educational initiatives to improve mental health awareness and understanding for critical stakeholders such as coaches is another significant form of organisational guidance. This education should be embedded in the framework of a coach's expectations and duties established by the sports organisation – providing motivation, obligations and pathways for coaches to increase their awareness and adapt their responsibilities surrounding this issue.



3.3.3 RESOURCES AND FUNDING

In order to establish a solid and reliable mental health framework for athletes, sports organisations must first recognise the need to allocate resources and funding to support mental health programmes and initiatives.

Organisational resources and funding may refer to human resources, such as project managers, mental health specialists, etc., or to monetary funding earmarked for developing mental health initiatives such as educational programmes, seminars, communication campaigns, research or event-specific considerations.

That being said, there are often limitations to resources and available funding. In this instance, sports organisations may seek to request advice on developing organisational mental health policies and practices from external experts, such as professionals on your organisation's Medical Commission. You may also consider collaborating with community mental health services, charities and non-governmental organisations in order to establish a network of services and support for athletes. An example is the Australian Institute of Sport's Mental Health Referral Network.⁽⁸³⁾ This network was created to support high performance athletes in Australia's elite sports system who may be struggling with mental health or well-being concerns.

In addition, resources that have already been created to assist athletes and sports organisations, such as the IOC's #MentallyFit initiatives,⁽⁸⁴⁾ could be shared by your organisation to raise awareness and educate stakeholders.

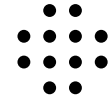


BEST PRACTICE EXAMPLE: NCAA

In 2017, the NCAA Sports Science Institute formed a task force to advance mental health best practice strategies. This task force included NCAA school presidents, administrators, coaches, student-athletes and mental health experts, and delivered a comprehensive database of Mental Health Best Practice educational resources.⁽⁸²⁾ The interactive tools, videos and training that were developed can be found [HERE](#).

3.3.4 CHOOSING THE TEAM

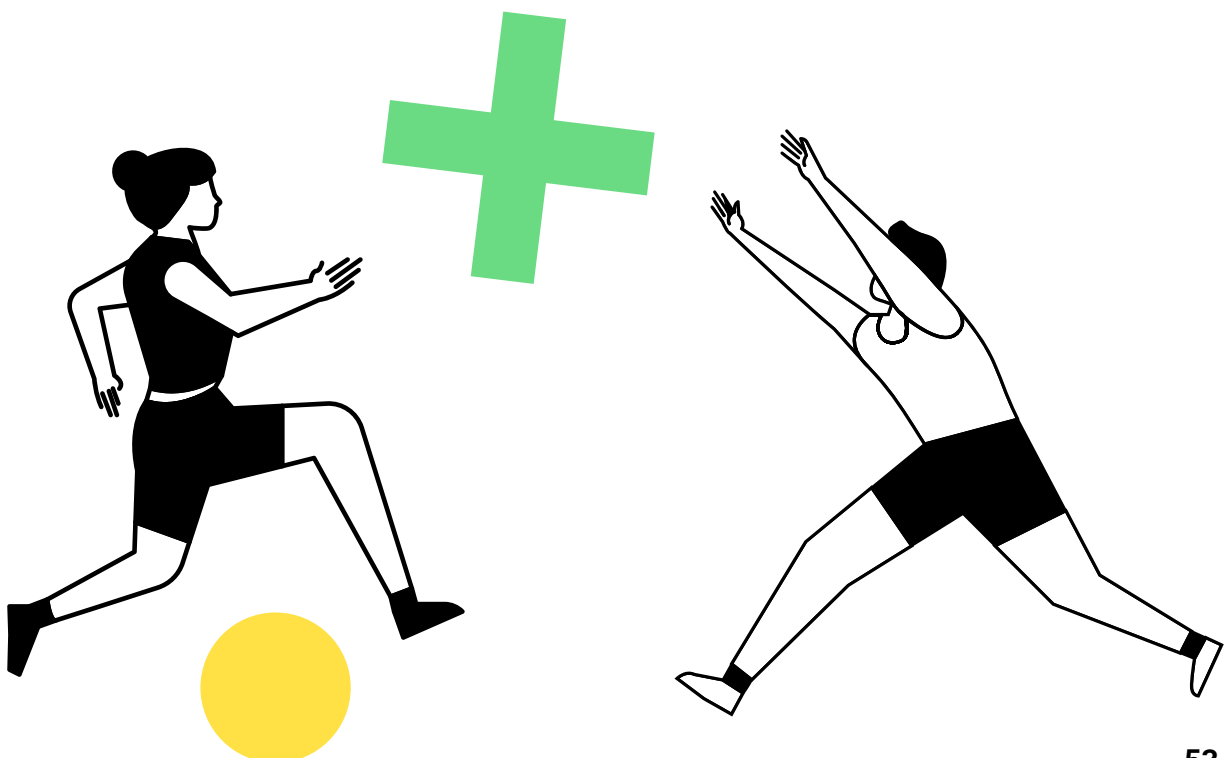
It is important to note that it is not just mental health practitioners or medical personnel who play a role in creating and promoting safe and psychologically supportive athletic environments. In fact, many members of your organisation and wider stakeholder network may play a direct or indirect role in influencing athlete mental health and well-being. Therefore, it is crucial to build a multi-stakeholder, multi-disciplinary team or task force when looking to monitor and/or implement mental health programmes and procedures in a sports organisation.

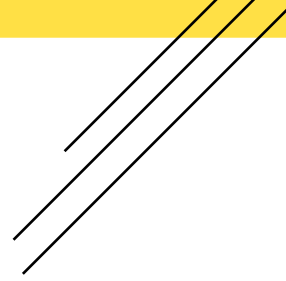


We need to tackle the day-to-day wellness of athletes rather than wait to intervene in critical situations. The Australian Institute of Sport's Mental Health Referral Network enables athletes to check in, to talk to someone outside the athlete's sporting environment in order to help them understand and manage any issue they may be facing.

MATT BUTTERWORTH

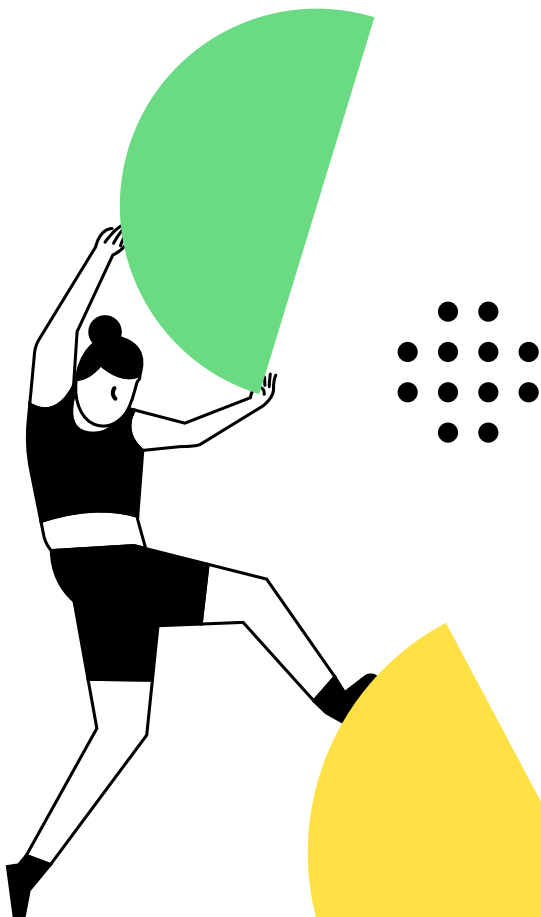
AIS Mental Health Manager



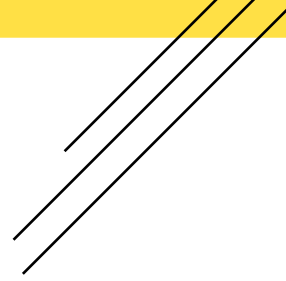


The planner, adapted from the **NCAA Mental Health Interdisciplinary Team Planner**,⁽⁸²⁾ may assist you in identifying the personnel to include in your organisation’s mental health task force and the roles they could play.

Note: When forming a team or network of support personnel, it is critical to ensure that individuals are trained and/or have the credentials needed to provide effective and safe treatment to athletes.



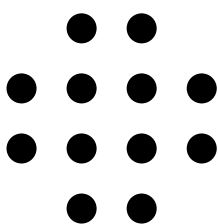
		Funding/Support	Policy Development
PERSONNEL	Sports Director		
	Medical Director		
	Athletics Medical Care Administrator		
	Athletics Health Care Providers		
	Human Resources		
	Medical Commission		
	Professional Mental Health Representatives		
	Coaching Representatives		
	Athletes’ Commission Representative		
	Entourage Commission Representative		
	Athlete Education Staff		
	Public Health Representative		
	Parent/Guardian Representative		
	Communications		
	Legal		
Other			



Inclusion of a mental health professional on the Medical Commission

If your organisation has a Medical Commission (or similar body), it is recommended that mental health professionals be represented in the composition of the Commission.

Establishing a seat for a mental health professional on your Medical Commission (or similar body) demonstrates your organisation's commitment to placing athlete mental health as a priority. Furthermore, this approach ensures that mental health considerations will be discussed at the organisation's decision-making level and will be integrated into organisational policies and standards from the outset.



3.3.5 CONSIDERATIONS FOR EVENTS, CALENDARS AND SCHEDULING

For many sports organisations, the hosting and organisation of and/or participation in sports competitions and events is one of its most fundamental roles and activities.

There are many different aspects of sports events that can directly impact elite athlete mental health. Examples include travel, sleep, accommodation, communication, nutrition, calendar and scheduling considerations, all of which should be factored into planning and operations when hosting a sports event or when travelling with a delegation. The IOC Consensus Statement on Load in Sport and Risk of Illness⁽⁸⁵⁾ suggests that frequent and prolonged air travel across multiple time zones may be associated with the risk of illness in athletes, suggesting that sports governing bodies concerned with athlete health need to consider the overall competition load when planning event calendars. It further recommends that more research is conducted on the impact of competition calendar congestion on the risk of illness, including psychological factors.



Athletic administrators should reassess metrics of success for the sport psychologist beyond athletes performing better on the field. On-field performance improvement is certainly key, but the overall betterment of athletes' mental health status and well-being is of utmost importance.⁽⁸⁶⁾

EXAMPLE APPLICATION: SCHEDULING IN ELITE PROFESSIONAL FOOTBALL

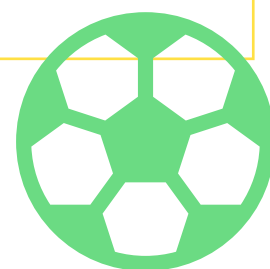
An example of reforms being made to sporting calendars following concerns for athletes' physical and mental health comes from elite professional football.

During a normal competitive season, individuals may play more than 60 matches per season, considering domestic leagues, domestic competitions and international competitions. This can see athletes travelling over 100,000km in a season.⁽⁸⁷⁾ Over the past few years, many leagues have taken measures to adapt competition schedules to allow for a winter break – providing a period for players and team staff to rest not only physically, but also

mentally. Studies have indicated that the inclusion of a winter break (or some form of break during the season) can have a positive effect on an athlete's health and well-being. Results pointed to the conclusion that athletes suffer fewer injuries throughout the entire season⁽⁸⁸⁾ and also benefit from psychological and physiological stress relief.⁽⁸⁹⁾ The entire FIFPRO report on athlete workload can be found [HERE](#).



When the rigours of training for professional sports teams or individual sports are combined with a comprehensive competition schedule, the risk associated with injuries and 'mental fatigue' is elevated.⁽⁹⁰⁾



Accommodation and sleep

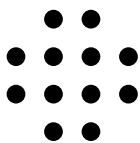
As highlighted in **SECTION 2**, a study by Drew in 2018⁽⁴⁰⁾ surmised that 49 per cent of Olympic athletes would be classified as “poor sleepers” (a term that includes multiple sleep problems). Poor sleep is strongly linked to poor mental health and can negatively impact athletic performance. Therefore, it is important for both event organisers and those managing travelling delegations to make certain that athletes have sufficient rest time and adequate rooms that encourage a good night’s rest. This may mean making sure that hotels in noisy locations are avoided, bedrooms are not overexposed to bright light, which can delay sleep onset, and educating athletes on how they can improve their sleep quality.^(91,92)

49%

OF OLYMPIC ATHLETES
WOULD BE CLASSIFIED
AS “POOR SLEEPERS”

Communication

When travelling away from home, communication with family and friends (or lack thereof) can be a stressor that can impact an athlete’s mental health, especially for those suffering from anxiety, depression or post-traumatic stress. Sports organisations can take measures to support athletes by ensuring easy and readily available access to good Wi-Fi connections.



Nutrition

Even for those people closest to an athlete, eating disorders or disordered eating by an athlete may be difficult to identify. Athletes have been shown to underreport this issue more frequently than non-athletes.⁽⁹³⁾ In addition to the multitude of health concerns caused by eating disorders, an athlete with an eating disorder can expect to be more prone to injury, and to have a shorter sports career that is troubled by inconsistent performances.⁽⁹⁴⁾

There are steps that can be taken during travel and/or events to monitor athlete nutrition, easing detection of signs that an athlete may need further support. One example is to ensure boarding locations have communal areas in which group eating can take place. It should also be guaranteed that the catering available to athletes is varied and nutritious and considers dietary restrictions and/or allergies. If boarding locations have on-site gyms, pharmacies or supermarkets in close proximity, the ability to observe athletes’ use of such facilities may also be a consideration in the selection of the location.



Alcohol and gambling

Studies have shown that even at the most elite level of sport, athletes may be prone to alcohol abuse, heavy drinking and/or binge drinking. A 2015 study of elite rugby league players over a competitive season found that 62.8 per cent had hazardous levels of alcohol use during the season.⁽²⁴⁾ This data highlights that even during competition and travel, measures should be taken to support healthy decision-making, particularly related to the avoidance of alcohol, gambling and substance misuse. Precautions might include vetting accommodation to ensure onsite casinos, bars, mini-bars or small arcade-type facilities that can encourage gambling or drinking are avoided.

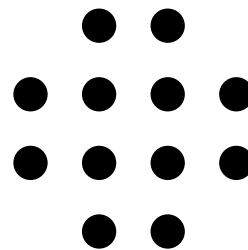
62.8%

OF ATHLETES HAD HAZARDOUS LEVELS OF ALCOHOL USE DURING THE SEASON

In summary, it is important that mental health and well-being is routinely considered when planning a sporting event, managing a competition calendar or making travel arrangements for a delegation.

3.3.6 SUPPORT FOR POST-CAREER TRANSITION

Elite athletes often live a life of structure and sacrifice that revolves around a full-time training schedule. Their identities (as seen by themselves and others) are often connected only to their athleticism. Due to their demanding schedule, athletes often forgo academic, personal, romantic or financial pursuits during their athletic career, making the transition out of sport into “regular life” overwhelming. While some athletes do experience a positive and healthy retirement transition, others find the process particularly difficult, potentially triggering pre-existing or previously unrecognised mental symptoms and disorders.⁽⁹⁵⁾



Sports organisations should view their athletes as whole persons from a life-span perspective and be especially vigilant in reducing threats to mental health during difficult career transitions.⁽⁹⁵⁾

Sports organisations need to support this chapter of an athlete's career in the same way they supported the chapters that came before. A study by Crook and Robertson⁽⁹⁶⁾ refers to this transition as “a discontinuity in one's life”, and highlights five career transition factors:



1. Anticipatory socialisation

The process of learning new norms in anticipation of taking on a new role. Organisations should consider the need for athletes to be involved and proactive in planning for their upcoming transition out of sport. In many cases athletes are so focused on their remaining sporting careers that they do not pay (or do not want to pay) much attention to life after sport.



2. Identity and self-esteem

When it's time to transition out of sport, many athletes are left feeling lost and disconnected from their identity which has been closely connected with their sport; they find that they have lost confidence to function outside the sporting world.



3. Personal management skills

Many elite athletes are surrounded by entourage, organisational, and coaching frameworks which dictate much of their life and many of their decisions. A lack of personal management skills (e.g., decision making, financial management, daily structure) can become a challenge area for athletes who feel the loss of systematic direction and support as they step out of organised sport.



4. Social support systems

Leaving sport can be a very emotional and psychologically taxing experience. This factor highlights the need for effective emotional support and communication from friends and family to assist the athlete during this time of change.



5. Voluntary versus involuntary retirement

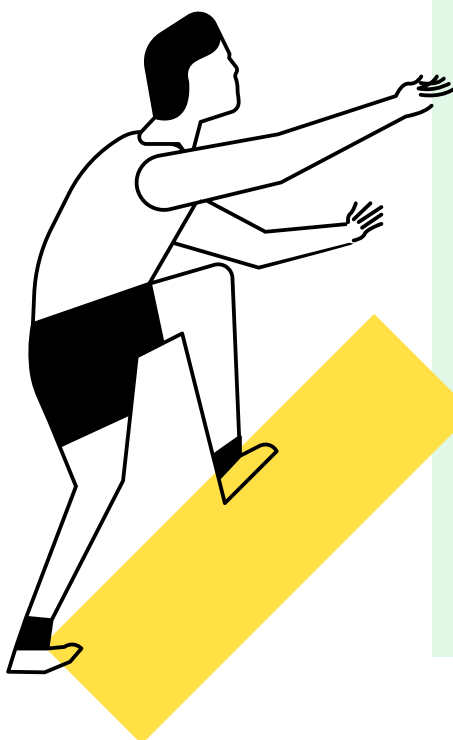
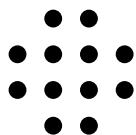
Unplanned or forced retirement (e.g., due to injury or being cut from the team) can be especially stressful for an elite athlete, made worse by the lack of an adjustment period.



All sports organisations should develop and implement a structured career transition programme that provides meaningful support to athletes transitioning out of sport.

These programmes may provide educational resources for both athletes and their entourage to increase awareness of the expected and unexpected stressors that may come with leaving sport, and/or workshops for athletes focused on the fundamentals of applying their skillset in the outside world, financial management, career services, coping skills, mentoring programmes, etc. Career transition programmes should also consider the experiences of retirement that are unique to Paralympic athletes (such as retirement due to declassification) in order to provide more targeted support.⁽⁹⁷⁾

The IOC has developed a number of resources to provide support for athletes during their career transition. You can find the Athlete365 “Life after Sport” courses [HERE](#).

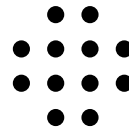


CAREER TRANSITION SUPPORT

practical suggestions for sports organisations

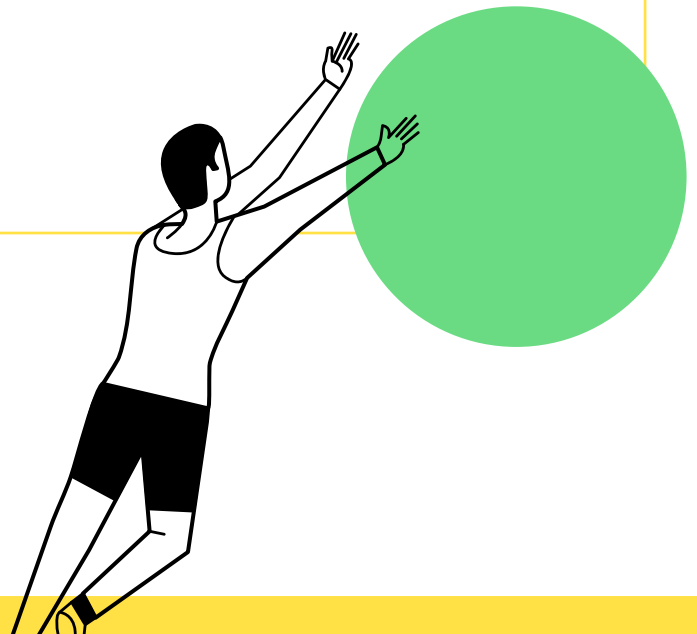
- Educate athletes and make them aware of the potential challenges that may occur during their transition into retirement
- Encourage the development of strategies that enable athletes to self-manage their previous injuries and lifestyle when they are outside the high-performance system
- Aim to increase the understanding of these issues amongst the high-performance team, and encourage open discussion, which in turn will benefit the athletes
- Raise awareness of this issue among governing bodies to help improve the post-retirement support they offer to athletes
- Encourage athletes to use their downtime effectively during their careers; optimising the development of a broader range of social identities outside sport, thus providing a stronger social support network before, during and after retirement
- Encourage athletes to develop life and lifestyle management skills in sports organisations throughout their athletic career
- Find ways to keep previously and/or soon-to-be retired athletes in the sports system. Coaching and ad-hoc mentoring programmes are viable options that sports organisations could fund

Hattersley *et al.*, 2019 ⁽⁹⁸⁾



3.3.7 CHECKLIST FOR SPORTS ORGANISATIONS

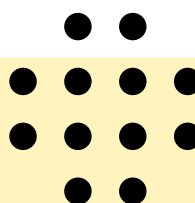
- Specifically reference mental health and well-being in organisations' foundational documents (code of ethics, etc.)
- Promote positive public health messages around mental health using diverse role models and ambassadors to reduce the stigma attached to mental health issues
- Develop an organisational mental health action plan, with clear key performance indicators (KPIs) and time frames against which progress can be monitored
- Ensure existence and monitor correct implementation of a Mental Health Emergency Action and Management Plan
- Ensure existence of a routine mental health referral plan and designate a referral lead
- Staff, coaches and athletes to receive mental health awareness training and support – which should also be included as part of induction processes
- Allocate resources and funding to support mental health initiatives
- Set up a multi-stakeholder and multi-disciplinary working group to develop mental health initiatives. This group should include athletes, mental health professionals and public health representatives
- Consider allocating a seat on your organisation's Medical Commission to a mental health professional (e.g., a psychologist or psychiatrist with sports specialisation or experience)
- Make certain that both mental and physical health is considered when looking at competition scheduling and planning events
- Develop and implement initiatives to prepare for and support post-career transition

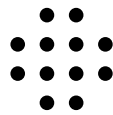




ROLE OF HEALTH PROFESSIONALS: KEY LEARNING POINTS

- There are many professionals who may be involved in managing the health of elite athletes. It is important to understand the roles and responsibilities of different professionals, how these interrelate, and how to quickly and appropriately refer if needed.
- All health professionals working with athletes should work together towards the common goal of protecting and promoting athletes' physical and psychological well-being.
- Those health professionals working with athletes should be cognisant of their own competencies and limitations related to the recognition, assessment and management of mental health symptoms and disorders in elite athletes.
- Health professionals working with athletes should have knowledge and understanding of referral pathways.
- Mental health screenings should be a part of an athlete's regular health and well-being check-up, just like physical health screenings.
- The Sport Mental Health Assessment Tool 1 (SHMAT-1)⁽⁵¹⁾ has been developed to assist health professionals in the assessment of mental health symptoms and disorders in elite athletes.
- Health professionals working with elite athletes should have additional training or experience of operating in a high-performance sports environment.
- Health professionals play a key role in developing and implementing mental health management strategies, ranging from general to targeted interventions.
- The voice of the athlete should always be taken into account when assessing the referral pathways available to them.
- Sports organisations should have a clearly defined Emergency Mental Health Action Plan. All key stakeholders should be aware of this plan, and the role and responsibilities that they have within it.





Benchmarking:

Specific suggestions in this section have been broken down using a Bronze/Silver/ Gold format. This is to demonstrate what may be considered as best practice (Gold), good practice (Silver) and minimum requirements (Bronze).

This format attempts to ensure universality in implementing the suggestions detailed in the toolkit, taking into account the many different contexts of stakeholders and organisations. The examples are not exhaustive, and further research is recommended.



Access to services and support

Access to primary care/sports medicine physicians delivering simple pharmacological interventions and brief psychological interventions.

OR

A licensed/registered healthcare professional with the skills to recognise mental health symptoms and disorders; training and experience in mental health support and/or knowledge of referral pathways.



Access to an extended network of services and support

Primary care/sports medicine physician with competency in providing mental health care and directing access to a mental health network (e.g., licensed/registered mental health professionals).



Integrated services and support

Primary care/sports medicine physician and consulting psychiatrist or clinical psychologist with knowledge and experience in mental health care and high-performance sport.

AND

Onsite and embedded (direct and timely) access to registered licensed mental health professionals with experience working in a high-performance sports environment.



DID YOU KNOW?

Additional opportunities to advance your knowledge of mental health in elite sport have been made available by the IOC Medical and Scientific Commission through:

- **The IOC Diploma in Mental Health in Elite Sport**

This postgraduate-level diploma programme is designed primarily to meet the needs of sports medicine physicians, psychiatrists, other physicians and other qualified mental health professionals.

- **The IOC Certificate in Mental Health in Elite Sport**

This certification course equips members of the athletes' entourage with the knowledge and skills to recognise potential mental health problems at an early stage and to appreciate the need for referral to professionals equipped to provide appropriate treatment.



3.4 ROLE OF HEALTH PROFESSIONALS

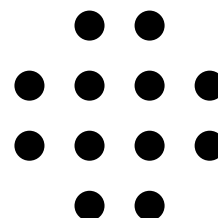
Health care professionals play a crucial role in ensuring that high quality mental health care and support is available for all athletes, from developing and implementing prevention strategies, to establishing referral pathways and managing crisis situations.

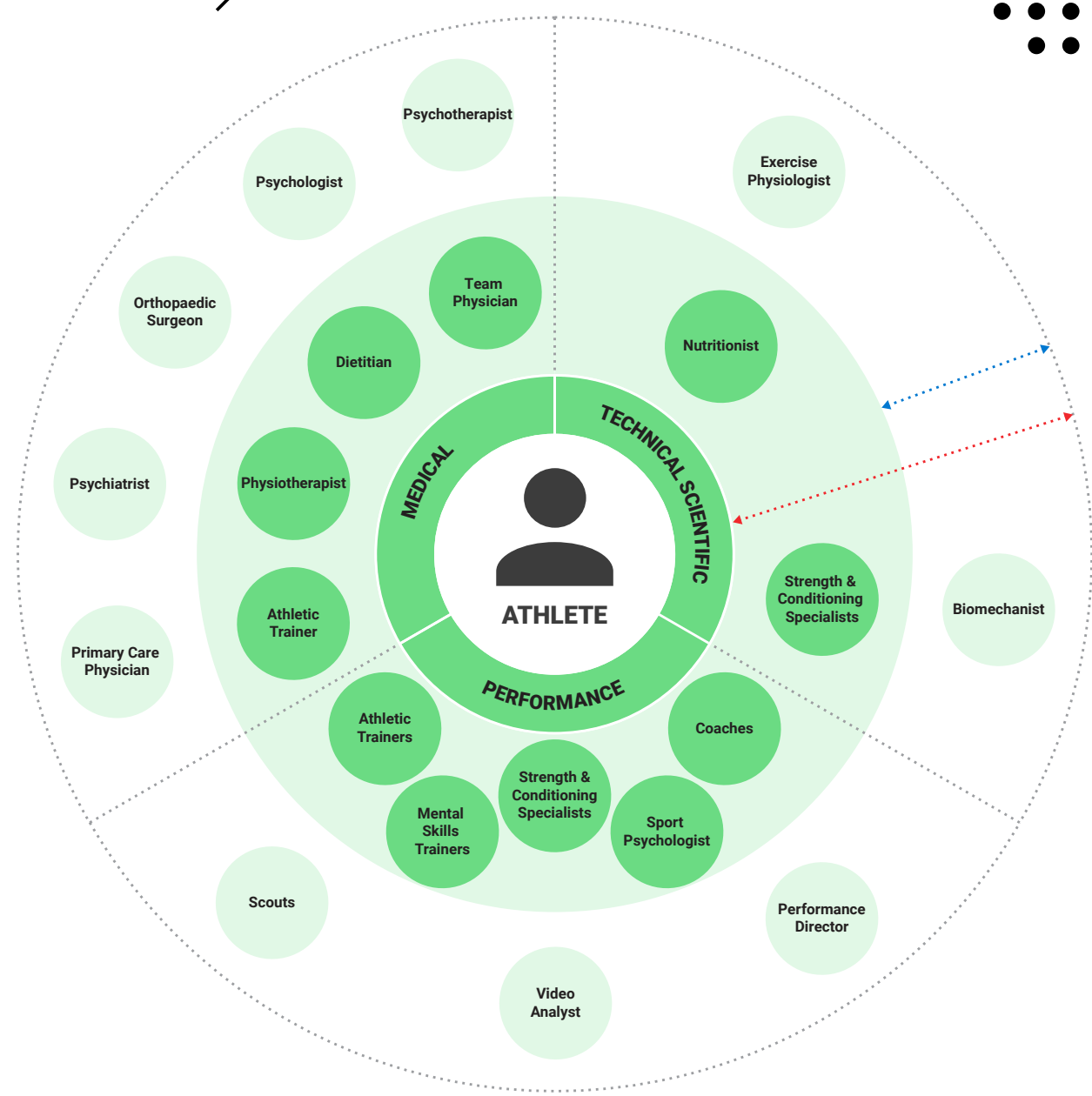
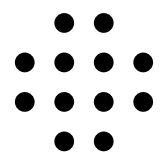
3.4.1 BUILDING YOUR TEAM

As is demonstrated by the diagram on the following page, there may be a great many professionals involved in managing the health of an elite athlete.

It is important that these professionals, whether they have a technical scientific role or are primarily concerned with either health or performance, work in collaboration towards a common goal that considers athletic performance and physical and mental well-being as equally important.

Oftentimes, athletes will not have or not require direct access to all of these health professionals. There is usually an inner circle of support staff and services that an athlete might have immediate access to, and an outer circle of professionals to whom the athlete is referred to as required (such as an orthopaedic surgeon or other medical specialist).



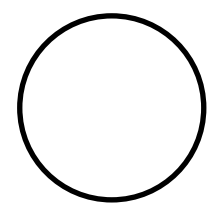


The professionals on the inner and outer circles change depending on the organisation/team/context, and professionals may be in either the inner or outer circle at different times.

This graphic shows that professionals are not always purely one category or another, there is a high degree of crossover, and variations in access and terminology.



Clear access pathway to professionals in the inner and outer circles.





Understanding and recognising the interrelatedness of the different roles and responsibilities of health professionals, and ensuring a clear pathway from the inner circle of healthcare professionals to those who may not be around the athlete on a daily basis is paramount.

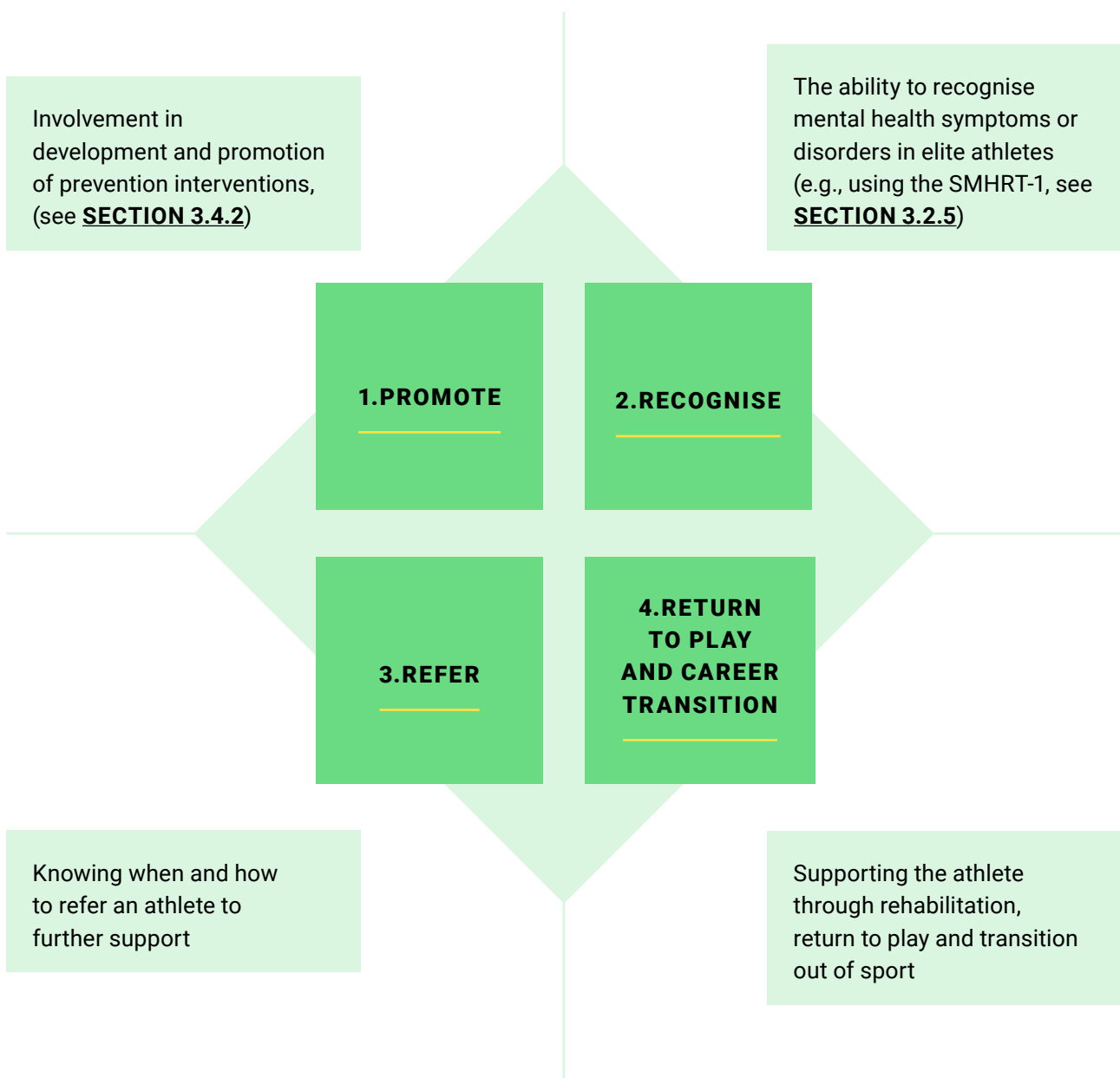
Health professionals involved in the mental health management continuum, from recognition and screening to treatment, recovery and return to play, include:



<p>LICENSED MENTAL HEALTH PROFESSIONALS</p>	<ul style="list-style-type: none"> • Clinical or counselling psychologists • Psychiatrists • Licensed clinical social workers • Psychiatric mental health nurses • Licensed mental health counsellors • Licensed family therapists/licensed marriage and family therapists • Primary care physicians with core competencies to treat mental health disorders
<p>MEDICAL GENERALISTS WITH MENTAL HEALTH MANAGEMENT KNOWLEDGE</p>	<p>Medical generalists or General Practitioners (GPs) typically include family or local community doctors. GPs provide care and treatment across the broad scope of health and well-being of individuals.</p>
<p>ALLIED HEALTH PROFESSIONALS</p>	<p>These professionals may include:</p> <ul style="list-style-type: none"> • Physiotherapists • Athletic trainers • Chiropodists • Dietitians • Osteopaths • Paramedics • Podiatrists

ALLIED HEALTH PROFESSIONALS

Allied health professionals may have frequent contact with athletes. Whilst they do not routinely have the specialist training to evaluate and treat mental health symptoms and disorders, they are often in a position to recognise indications that an athlete may need mental health support (see **SECTION 3.2.5**) and activate the referral pathway. They can also play an important role in the rehabilitation and return-to-play processes, and in ensuring that athletes regularly complete mental health screenings. Some of the key competencies of allied health professionals related to mental health include:



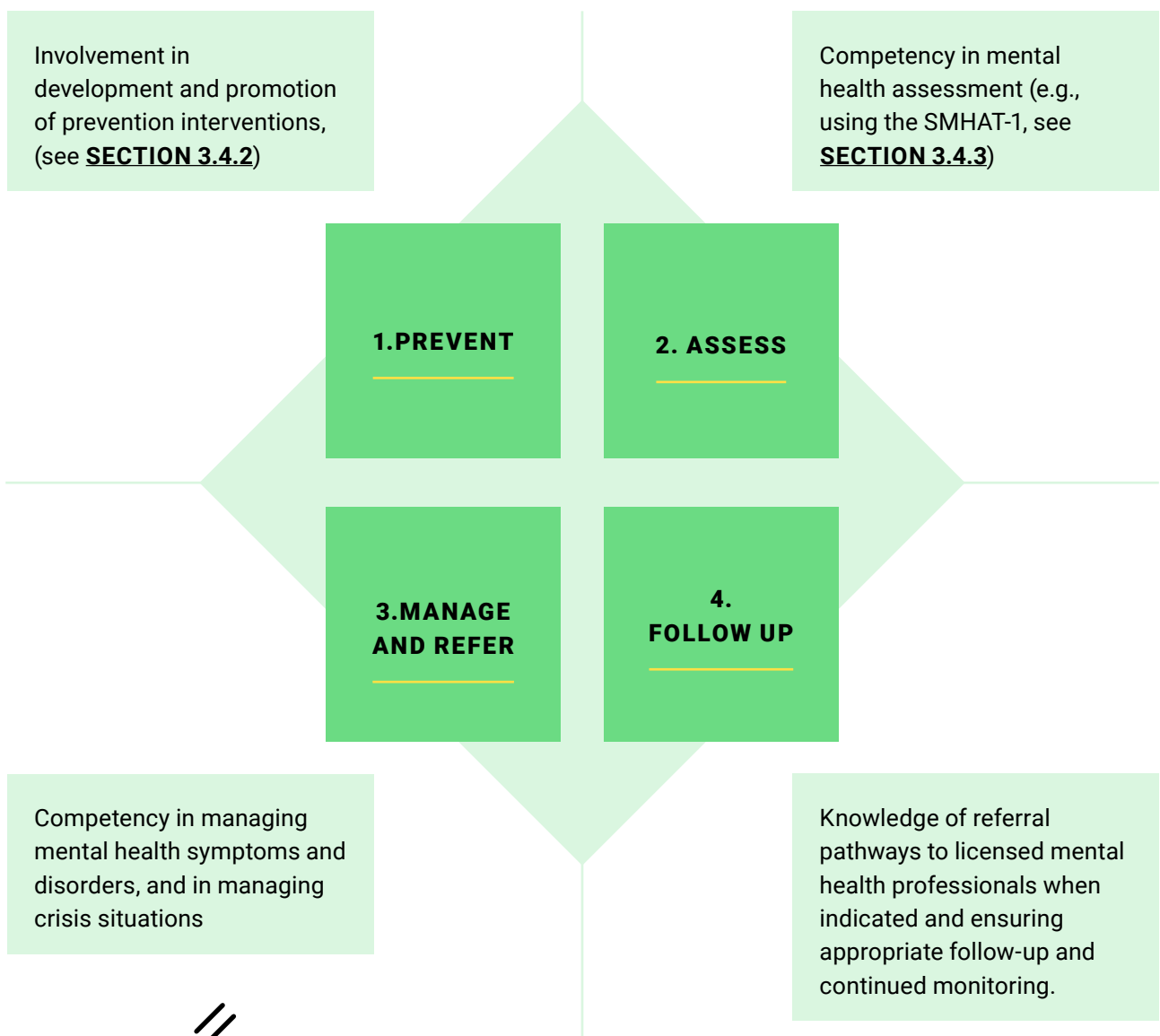


MEDICAL GENERALIST WITH MENTAL HEALTH MANAGEMENT KNOWLEDGE

The titles “Primary Care Physician”, “Medical Generalist” or “General Practitioner” typically include family or local community medical doctors practising general medicine.

Working with a medical generalist with mental health management knowledge can be beneficial as the athlete may already be familiar with the doctor associated with the team. If that is the case, there may already be an established relationship of trust, and the doctor will likely have a deeper understanding of the athlete’s individual environment and previous knowledge of their medical history.

In cases where a medical generalist does not have sufficient mental health management knowledge, referral to licensed mental health professionals should be the next step in treatment. Some of the key competencies of medical generalists with mental health management knowledge may include:

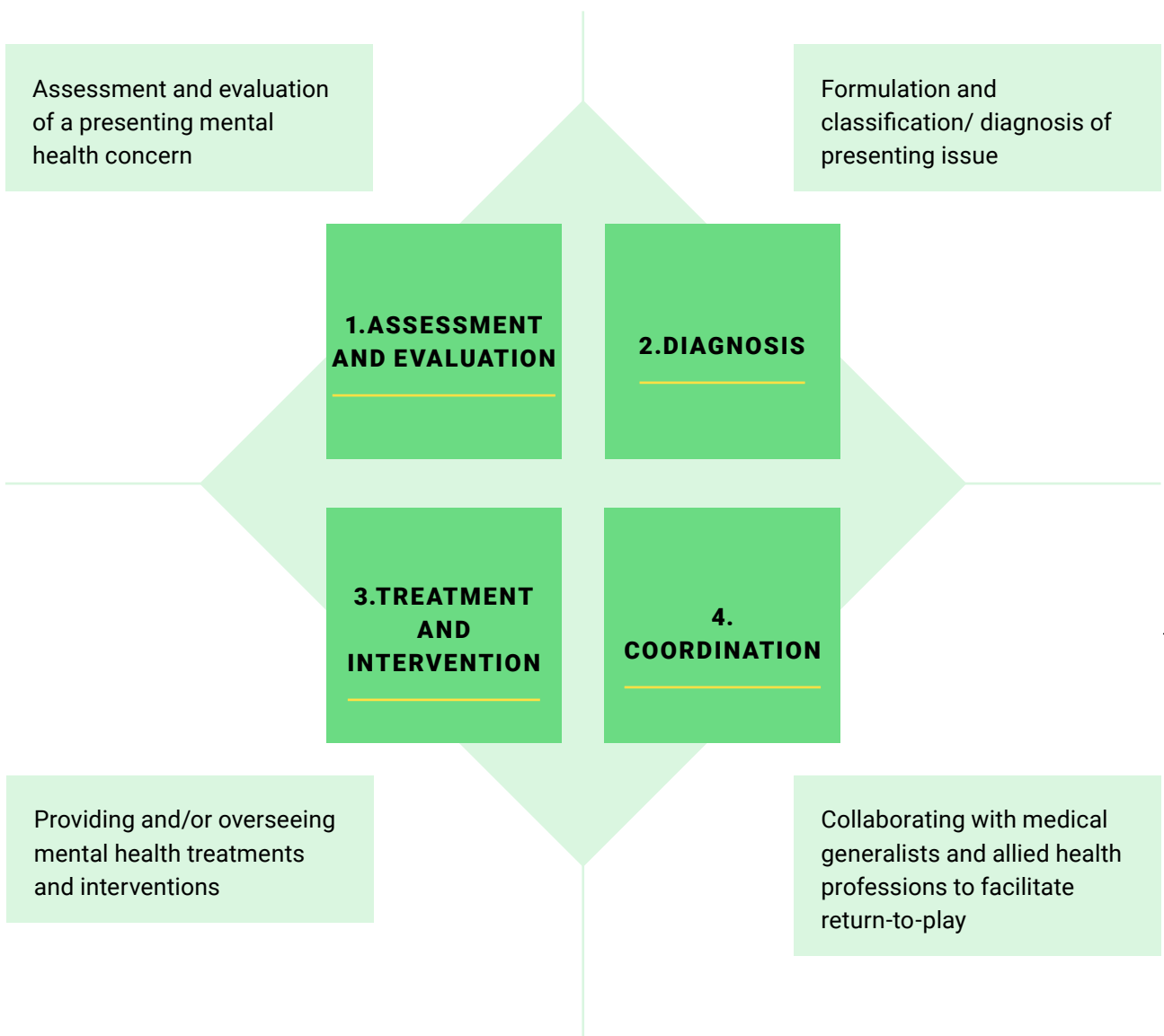




LICENSED MENTAL HEALTH PROFESSIONALS

When referring athletes to licensed mental health professionals, it is highly recommended that you make certain as much as possible that they have the additional training and/or experience required to treat athletes; work in sport-specific environments, and treat persons within the age group of the referred athlete. It is important to identify licensed medical professionals with the required competencies in advance, and establish an ongoing relationship with them, integrating them into the team dynamic or care pathway. This will improve familiarity of the athletes and team with the professional, thereby reducing barriers to seeking help and facilitating access to further specialist care as required.

Licensed mental health professionals should work closely with the team physician and/or medical generalist as well as the allied health professionals in the athlete's entourage when looking to facilitate return-to-play following a mental health referral and/or treatment.



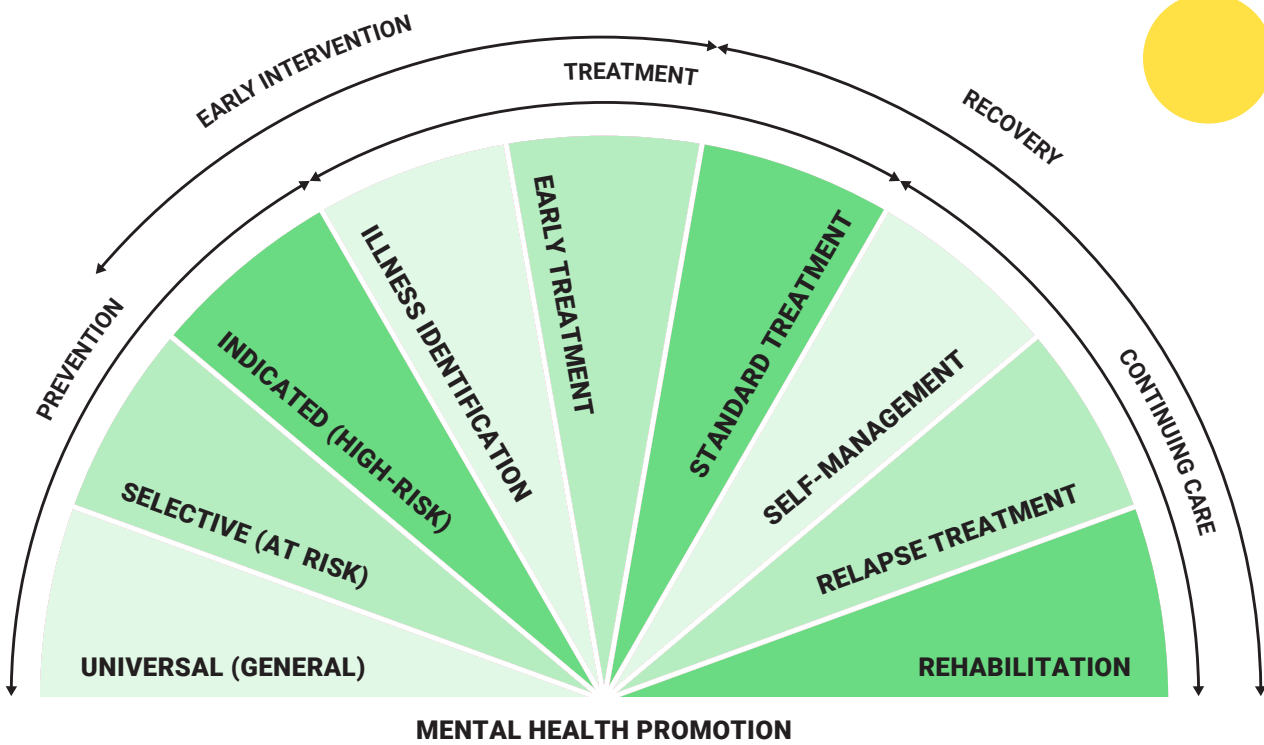
3.4.2 DEVELOPING AND IMPLEMENTING PREVENTION STRATEGIES

As we mention in the previous sub-section, health professionals play an essential role in developing and implementing mental health prevention strategies, which in turn form a foundational part of mental health promotion.

Prevention strategies aim to “reduce incidence, prevalence and recurrence of mental disorders”, and lessen the time spent with symptoms and lower the impact of the condition on the individual.⁽⁹⁹⁾

The three main types of preventative interventions are:

- **Universal prevention** – targeting an entire team, independent of risk
- **Selective prevention** – specifically targeting individual athletes displaying signs or symptoms but not yet meeting the diagnostic criteria of individuals or sub-groups who are considered at a high risk
- **Indicated prevention** – targeting individuals or sub-groups who are considered at high risk



Mrazek and Haggerty Mental Health Promotion Spectrum⁽⁹⁹⁾





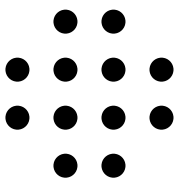
Universal preventative interventions

The integration of universal preventative interventions into sports culture may include:

- Making education available to both athletes and entourage members to improve mental health literacy, reduce stigma, and support early help-seeking
- Working with athletes and entourage members to establish career and personal development goals (and the skills to help them achieve them)
- Establishing routine mental health screenings that are integrated into an athlete's formal routine physical screenings, and/or into their rehabilitation programme post physical injury
- Ensuring that your sports organisation has specific and effective policies to prevent and respond to harassment and abuse in sport
- For allied health professionals, injury surveillance and prevention strategies and programmes may also be an important prevention tool due to the link between physical illness and injury, and psychological well-being in athletes

There are some general points that should be considered when considering the development and implementation of a mental health prevention strategy. The list below has been adapted from the World Health Organisation report on Prevention of Mental Disorders: Effective Interventions and Policy Options (2004)⁽¹⁰⁰⁾ to a sporting context:

- ✓ **Prevention strategies are part of a multi-pronged approach**
 - There are multiple factors that can impact elite athlete mental health which should be encompassed into prevention strategies. These include:
 - Social factors such as environmental stressors, barriers to help-seeking
 - Physical factors such as injury and illness
- ✓ **Implementation should be guided by available evidence**
- ✓ **Programmes and policies should be made widely available to all athletes**
- ✓ **Prevention needs to be sensitive to culture and to resources available**
- ✓ **Protecting human rights is a major strategy in preventing mental disorders**
 - This relates to, for example, the importance of ensuring your organisation has a policy in place to safeguard athletes from harassment and abuse in sport. For further information please see the **IOC Athlete Safeguarding Toolkit**.⁽¹⁰¹⁾



3.4.3 THE IOC SPORT MENTAL HEALTH ASSESSMENT TOOL 1 (SMHAT – 1)

As discussed in **SECTION 3.2.5**, the IOC Mental Health Working Group developed the IOC Sport Mental Health Recognition Tool 1 (SMHRT-1)⁽⁵¹⁾ to assist athletes, coaches, family members and other members of an athlete’s entourage to recognise mental health symptoms or disorders in elite athletes. **(As noted earlier, SMHRT-1 is not a diagnostic tool.)**

In addition to the SMHRT-1 tool, the IOC Mental Health Working Group developed the IOC Sport Mental Health Assessment Tool 1 (SMHAT-1)⁽⁵¹⁾. The SMHAT-1 is a standardised assessment tool to be used by sports medicine physicians and other licensed/registered health professionals to help identify at an early stage those elite athletes who may be at risk or are already experiencing mental health symptoms and disorders, and to help facilitate timely referrals for those in need of support and/or treatment.

Ideally, use of the SMHAT-1 should be scheduled as a routine screening alongside an athlete’s regular physical screenings or check-ups. It is recommended that the SMHAT-1 be used during the pre-competition period (i.e., a few weeks after the start of sports training), as well as within the mid- and end-season period. The tool may also be used when any significant event for an athlete occurs, such as injury, illness, surgery, unexplained performance concerns, after a major competition, at the end of a competitive cycle, if there is suspected harassment/abuse, if there is a sudden adverse life event, or if the athlete is transitioning out of sport.

As mentioned above, the clinical assessment (and related management) within the SMHAT-1 should be conducted only by sports medicine physicians and/or licensed/registered mental health professionals. You can find the SMHAT-1 [HERE](#).



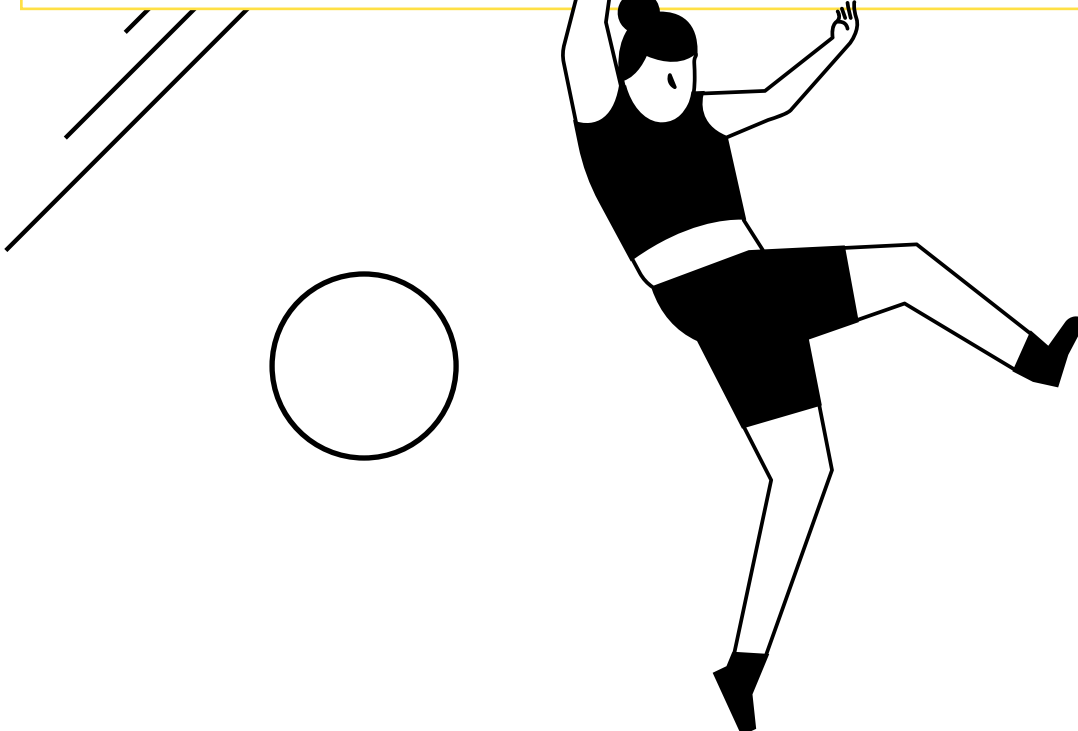


BEST PRACTICE EXAMPLE: WORLD RUGBY

On World Rugby's "Player Welfare" educational web portal, you will find "Mindset – A Mental Health Resource".⁽¹⁰²⁾ This mental health awareness and education programme was developed in conjunction with International Rugby Players to support team medical staff in the identification of mental health problems.

This resource:

- Supports early recognition of mental health problems
- Provides background information relevant to mental health disorders
- Provides overviews of different mental health disorders, and supports diagnosis by making mental health screening tools available
- Provides guidelines that support early and appropriate referrals to experts
- Available in six languages, "Mindset" was built as a resource for elite rugby medics and is a mandatory core component of World Rugby's Tournament Player Welfare Standards. You can find the Mindset programme [HERE](#).



3.4.4 COMPETENCY IN MANAGING MENTAL HEALTH SYMPTOMS AND DISORDERS

Once it has been decided that professional care is the best option for an athlete, the road to recovery may include psychological treatment, pharmacological treatment or a combination of the two. This is usually delivered by consultation in an out-patient/office setting. Occasionally, treatment may take place more intensively in a day-patient facility and, in rare circumstances, as an in-patient.

It is imperative that health professionals have the correct clinical competencies to manage mental health symptoms and disorders in the setting of high-performance sport or know when and how to refer to those in your organisation's network who do.

The Mental Health in Elite Athletes: International Olympic Committee Consensus Statement (2019)⁽¹⁸⁾ provides information on prevalence, assessment and treatment for elite athletes. This expert statement also discusses the clinical interventions recommended for a number of mental disorders, including depressive disorders, anxiety and related disorders, post-traumatic stress, bipolar and psychotic disorders, and substance abuse. The information below has been taken from this statement.

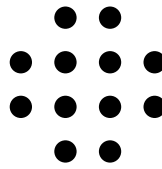
The consensus statement in its entirety can be found **[HERE](#)**.



When treating elite athletes, it is of utmost importance that care providers...

“...understand the physical, psychological and emotional demands placed upon athletes during training and competition, and the unique circumstances and pressures of the sport environment”.

THE OLYMPIC MOVEMENT MEDICAL CODE (2016)



Treatment

Psychotherapy or counselling is often the first step in professional mental health treatment. When psychotherapy has been prescribed as treatment, medical professionals are recommended to:

- be flexible about the timing of sessions (without allowing constant cancelling of sessions)
- urge couple's or family therapy when relational issues impact functioning or performance
- recommend psychotherapy plus pharmacological therapy where indicated for more severe or complex mental health symptoms or disorders

Medical professionals should not:

- agree to the use of a surrogate (such as a coach or athletic trainer) for psychotherapy sessions
- provide experimental treatments, which may give false hope to athletes

Along with psychotherapy, pharmacology may be considered for the treatment of symptoms, but significant consideration must be given when treating elite athletes. When prescribing, clinicians need to consider:

- Potential negative impact on athletic performance
- Potential therapeutic performance enhancing effects (i.e., based on improvement in the condition the medication is designed to treat)
- Potential non-therapeutic performance enhancement effects (i.e., ergogenic effects)
- Potential safety risks

All four of the above points should be considered, and experience working in sport and with athletes is especially important in relation to the first, third and fourth points.

In the event of a mental health emergency (presenting immediate danger to the athlete themselves or others), it is best practice to develop and rehearse a mental health emergency action management plan that involves all relevant sports stakeholders. This plan should include clarity on what constitutes an emergency, who should be contacted and when, and familiarity with local emergency services and mental health legislation. Information on the development of an MHEAP is coming up in **SECTION 3.4.6**.

3.4.5 KNOWLEDGE AND UNDERSTANDING OF REFERRAL PATHWAYS

Competency is critical when considering referral pathways. There may be health professionals on your team with the knowledge and training to diagnose mental health concerns and to offer some interventions. There may also be instances where even an experienced and licensed expert may not be able to provide full competency when addressing a specific mental health issue (e.g., eating disorders or drug abuse). It is important to keep this in mind when considering the best referral pathway in each specific situation.^(103,104)

All health professionals should be aware of the scope and limits of their competencies, including knowledge of when it is appropriate to refer to a mental health expert.

An athlete's reaction to suggestions of a referral should also be considered. During this scenario it may be useful to reach out to an athlete's entourage members, such as family, friends or coaches, to assist in providing a personalised approach when communicating with the athlete, provided you have consent to do so. Role plays may be a useful strategy to prepare for such sensitive communications.

NB. It is also important to document the reasons for referral, and considerations or consultations with persons surrounding the case and athlete.⁽¹⁰⁴⁾



3.4.6 COMPETENCY IN MANAGING A CRISIS SITUATION

Development and implementation of a mental health emergency action plan (MHEAP)

Here we discuss the development and implementation of a mental health emergency action plan (MHEAP). In this context, an MHEAP refers to the procedures to be followed when faced with a mental health crisis. It is important that each sports organisation/club/team has an MHEAP, and that you as health professionals are aware of it and of your role in it where applicable.

The NCAA Mental Health Best Practice Checklist⁽⁶⁵⁾ states that written procedures for managing emergency mental health situations should, at a minimum, include the elements listed below:

- Clear definitions of what constitutes a mental health emergency (scenarios, symptoms or behaviours to look out for)
- Clearly written procedures for handling mental health scenarios such as: suicidal or homicidal scenarios, sexual assault, threatening behaviours including psychosis, paranoia, delirium or confused states, and intoxication or drug overdose
- Clearly defined scenarios in which emergency services should be contacted. Additionally, scenarios in which an emergency counsellor should be contacted

- Contact details of consultative personnel able to provide direct crisis intervention in emergency and non-emergency scenarios
- Clearly defined roles and responsibilities of each stakeholder within the athlete's entourage and organisation in an emergency situation
- Clearly defined follow-up procedures in order to support athletes after the emergency
- Formal policy defining when to contact parents or guardians in the case of a minor's mental health emergency.

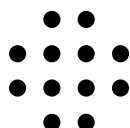
It should be clearly specified in the MHEAP who the first internal point of contact is for the mental health issue until an appropriate clinical referral can be made. In cases involving a minor, it is important that the contact details of parents or guardians are readily available, and that they are contacted at the earliest opportunity.

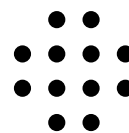
When identifying licensed professionals for a referral, the following points should be taken into consideration:

- ✓ Who is responsible for initiating the referral to the clinical professional?
- ✓ Where should the referral be made in the event of an emergency?

This is particularly important information to have when travelling with a delegation away from the usual team services and networks.

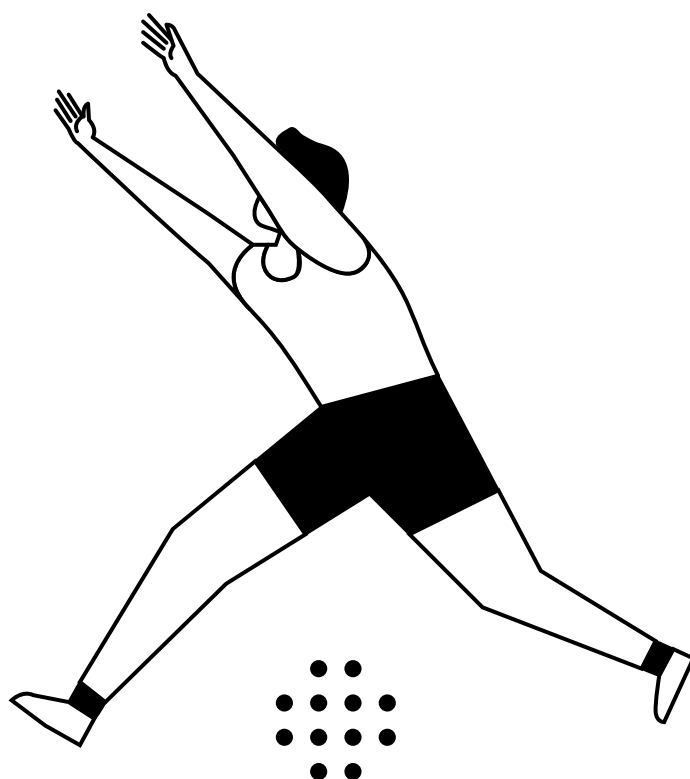
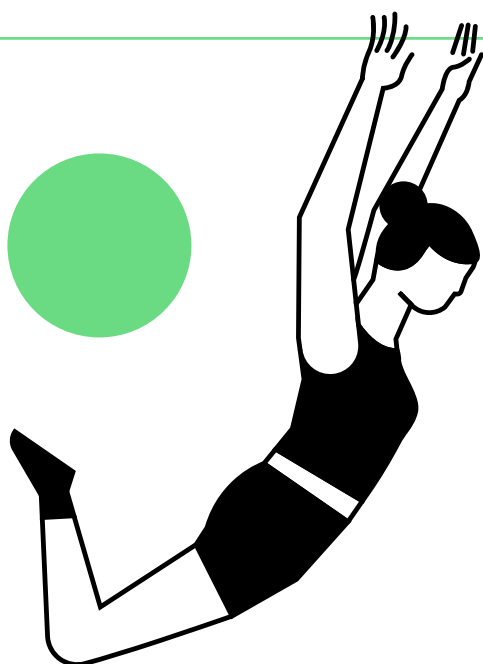
An example of an MHEAP, developed by the National Athletic Trainers' Association, can be found [HERE](#).⁽¹⁰⁵⁾

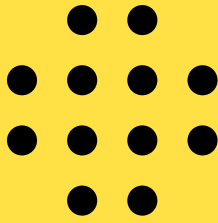




3.4.7 CHECKLIST FOR HEALTH PROFESSIONALS

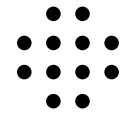
- I understand the importance of prevention strategies and my role in their development, implementation and promotion.
- I am knowledgeable of my own competencies and limitations related to the recognition, assessment and management of mental health symptoms and disorders in elite athletes.
- I understand the referral pathways available, how, when and where to refer an athlete, the importance of documenting why referral is necessary, and that different situations will require different clinical competencies and professionals.
- I know my role in responding to a mental health crisis and in ensuring that my organisation has a dedicated MHEAP available.
- I recognise the important role of health professionals in supporting athletes' mental health and well-being during return-to-play.

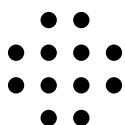




4. RESOURCES

- 4.1 Additional IOC tools and resources
- 4.2 IOC Diploma and Certificate Programmes
- 4.3 Courses
- 4.4 Safe Sport





In this final section of the toolkit, we present additional IOC tools and programmes which provide further information related to elite athlete mental health and well-being.

This Toolkit's aim is to provide guidance and information to Olympic Movement stakeholders on the development of initiatives to protect and promote elite athlete mental health, and to highlight the influential role that stakeholders play in fostering psychologically safe athletic environments.

As noted throughout, it is fundamental that athletes themselves are consulted in the development of initiatives designed to protect and promote their mental health and well-being. In addition, they should be afforded the opportunity to receive guidance and support to improve their own awareness and mental health literacy.

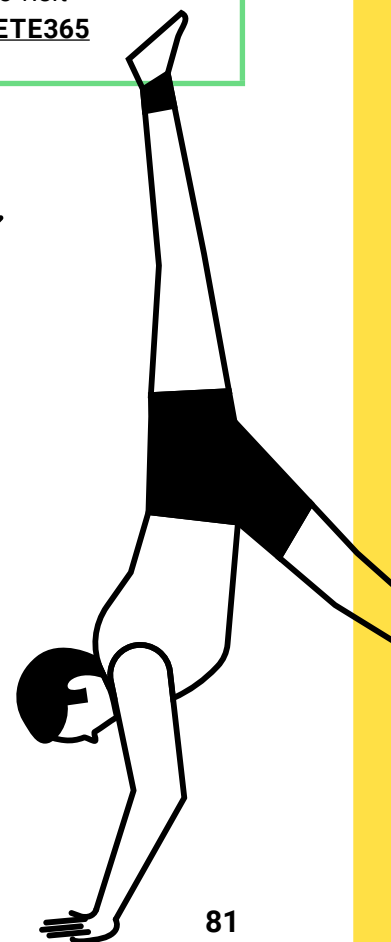
We therefore recommend encouraging athletes to visit the #MentallyFit section of Athlete365, where they will find information, guidance and support to help them navigate their #MentallyFit journey through high-performance sport.

Available tips and tools focus on:

- building psychological resilience,
- developing the non-athletic identity,
- managing competition stress,
- preparing for life after sport,
- promoting healthy sleep behaviours,
- and much more.

These resources are regularly updated in consultation with the IOC Mental Health Working Group and other international experts.

For more information, please visit [**#MENTALLYFIT ON ATHLETE365**](#)





4.1 RESOURCES



Sport Mental Health Assessment Tool 1 (SMHAT-1)

The International Olympic Committee Sport Mental Health Assessment Tool 1 (SMHAT-1) is a standardised assessment tool developed for sports medicine physicians and other licensed/registered health professionals. It assists in identifying, at an early stage, elite athletes (defined as professional, Olympic, Paralympic and collegiate level; 16 and older) potentially at risk for or already experiencing mental health symptoms and disorders in order to facilitate timely referral for those in need of adequate support and/or treatment.

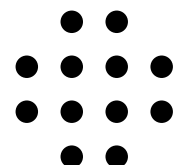
More information can be found [HERE](#).



Sport Mental Health Recognition Tool 1 (SMHRT-1)

The International Olympic Committee Sport Mental Health Recognition Tool 1 (SMHRT-1) was developed for athletes, coaches, family members and all other members of the athletes' entourage to help them to recognise mental health symptoms but not to diagnose them. The SMHRT-1 presents a list of athlete experiences (thoughts, feelings, behaviours and physical changes) that could be indicative of mental health disorders.

More information can be found [HERE](#).

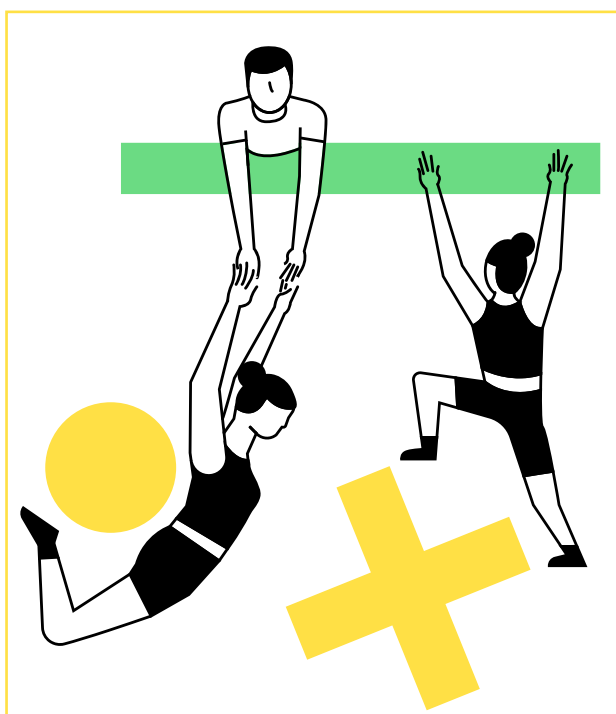




Athlete365 Career+

Athlete365 Career+ supports athletes while they prepare for and go through their career transition. It provides resources and training required to develop life skills, maximising education and employment opportunities.

More information can be found [HERE](#).

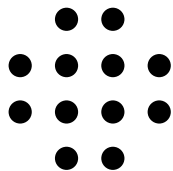


Mental health in elite athletes: International Olympic Committee consensus statement (2019)

The IOC Medical and Scientific Commission published a landmark consensus paper on mental health which is aimed at addressing the many different mental health issues that elite athletes may face.

More information can be found [HERE](#).





The Athletes' Declaration (2018)

The Athletes' Declaration outlines a common set of aspirational rights and responsibilities for athletes within the Olympic Movement.

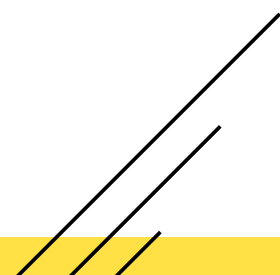
More information can be found [HERE](#).



Athlete365 Community App

This app helps to strengthen the athlete community by allowing the community itself to create and run its own private or public groups; share expertise, experiences and key documents; and stay in the know with regular updates from the Athlete365 community.

More information can be found [HERE](#).





4.2 IOC DIPLOMA AND CERTIFICATE PROGRAMMES



IOC Diploma in Mental Health in Elite Sport

Sportsoracle offers a one-year diploma programme aimed at licensed practitioners who are qualified to provide mental health services.

IOC Certificate in Mental Health in Elite Sport

In addition, a three-month certificate programme aimed at athlete entourage members (in addition to physicians and licensed practitioners) is also available.

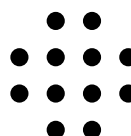
More information can be found [HERE](#).



IOC Certificate: Safeguarding Officer in Sport

The IOC Certificate: Safeguarding Officer in Sport course, available on sportsoracle, will equip those certified with the knowledge and tools needed to fulfil the role of Safeguarding Officer for their sports organisation.

More information can be found [HERE](#).





4.3 IOC COURSES



Career Transition

Learn why planning is fundamental to settling into a life after sport; what strategies to prioritise; how to better manage time; and the importance of networking to enhance employment opportunities and life after sport.

More information can be found [HERE](#).



Sports Psychology: Getting in the Zone

Gain an understanding of the fundamentals of focusing your energy, how to embrace and manage emotions and how to approach setbacks in a positive way.

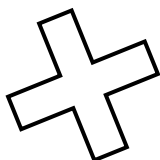
More information can be found [HERE](#).

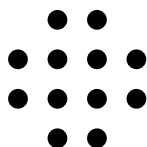


Physical Preparation

In this course you will gain a better understanding of exercise physiology and how it affects your training, explore the impact nutrition has on preparation, and learn how to create both high-performance training and recovery plans.

More information can be found [HERE](#).





The Measure of Success

Here you will learn aspects of taking your training to the next level, learning the importance of measuring fatigue, wellness and performance.

More information can be found [HERE](#).



Sports Medicine: Understanding Sports Injuries

Previous injury, fatigue or poor movement skills are just some of the factors that can contribute to an injury. In this course you will learn preparation, load management, and why general well-being is the key preventative element.

More information can be found [HERE](#).

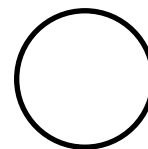


LinkedIn Learning

LinkedIn Learning is a platform that helps you not only discover and develop business, technology-related and creative skills through expert-led course videos, but also helps you with your mental well-being.

More information can be found [HERE](#).





4.4 SAFE SPORT

Sport which is fair, equitable and free from all forms of harassment and abuse.



IOC Safeguarding Toolkit (2017)

This toolkit is aimed at assisting National Olympic Committees (NOCs) and International Federations (IFs) in the development and implementation of policies and procedures to safeguard athletes from harassment and abuse in sport.

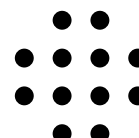
[**DOWNLOAD TOOLKIT**](#)



Athlete365 Safe Sport Webpages

Safe Sport - where athletes can train and compete in an environment which is respectful, equitable, and free from all forms of harassment and abuse. Visit Athlete365 for educational courses and modules, videos, and other resources and materials created to help support a safe sporting environment.

More information can be found [**HERE**](#).



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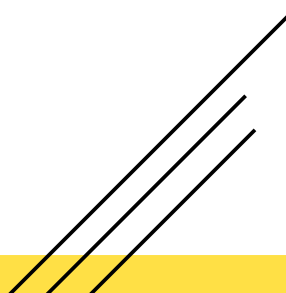
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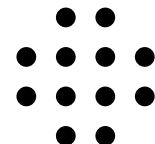
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