What are the athletic stressors and clinical implications experienced by first year Division III student-athletes: an exploratory study

Jennifer A. Johnson
Jennifer Anne Johnson

Follow this and additional works at: https://scholarworks.smith.edu/theses

Part of the Social and Behavioral Sciences Commons

Recommended Citation
https://scholarworks.smith.edu/theses/554

This Masters Thesis has been accepted for inclusion in Theses, Dissertations, and Projects by an authorized administrator of Smith ScholarWorks. For more information, please contact scholarworks@smith.edu.
ABSTRACT

This exploratory study was undertaken to investigate the ways that stressors from athletics may impact Division III female student-athletes emotional and cognitive states during their first year at college. Findings were compared to the experiences from various student-athletes from other divisions, assessing the extent to which they have coped and managed their stress.

Data was collected from Division III female athletes at two all-women’s colleges located in New England. With the help of five guided interview questions, narrative interviews were conducted with seven subjects who spoke about their first year experiences as a student-athlete. Interview questions were carefully designed to elicit both positive and negative emotional and cognitive implications experienced as a result from one’s involvement with sport. Data was organized around themes that highlighted affect changes and/or atypical or remarkable experiences. Additionally, experiences that closely aligned with symptom checklists from the *DSM-IV-TR* (American Psychiatric Association, 2000) were also noted.

Major findings of the study revealed that a majority of subjects experienced impaired emotional and cognitive states whose symptomology strongly resembled various diagnoses within the *DSM-IV-TR* (American Psychiatric Association, 2000). Findings also suggest that most of these student-athletes opted to cope with their impairments in an adaptive and healthy fashion. In order to continue supporting adaptive and health coping strategies, clinicians may
consider building stronger alliances with athletic department staff and coaches, whereby implementing both preventative and ongoing education and support for female student-athletes.
WHAT ARE THE ATHLETIC STRESSORS AND CLINICAL IMPLICATIONS OF
DIVISION III FEMALE STUDENT-ATHLETES?
AN EXPLORATORY STUDY

A project based upon an independent investigation, submitted in partial fulfillment of the requirements for the degree of Master of Social Work.

Jennifer A. Johnson
Smith College School for Social Work
Northampton, Massachusetts 01063
2011
This thesis is dedicated to my brother, Todd,

Who dries my tears with laughter & fills my heart with peace.

To my better half, I love you.

ACKNOWLEDGMENTS

In addition to my brother, I would also like to dedicate this thesis to my mother, a woman and friend who’s spirit, humor, and grace will inspire me for a lifetime. Additionally, I would like to thank my Dad. You are my rock and solid ground to walk on; you have been and always will be my Superman! And for everyone else who has played roles both big and small: Jess, Seema, Audrey, Talia, Christy, Minna, Emily, Annika, Michelle, Kelly, Coach, Bryan, Chris, Cathy, Tracey, Meg, Tamrah, Mandy, Randy, Bob, Lee, Cassie, Grandma Johnson, Grim and Grump Steinhauser, Susan, Caren, and Seth. Thank you for being there, even when I didn’t ask you to. Last, but certainly not least, I would like to thank my outstandingly supportive and enthusiastic research advisor, Elaine. Your praise, encouragement, and direction kept me on course when I felt that I had lost my way.

My gratitude to the faculty and staff of Smith College’s School for Social Work as you have made my head spin, heart stop, tears flow, and ignited my inquiry from within. It is because of you that I shall continue my engagement and quest for truth. I remain forever indebted to you.
# TABLE OF CONTENTS

**ACKNOWLEDGEMENTS** .................................................................................................................. ii

**TABLE OF CONTENTS** .................................................................................................................. iii

**CHAPTER**

I  **INTRODUCTION** .......................................................................................................................... 1

II  **LITERATURE REVIEW** ............................................................................................................... 3

III  **METHODOLOGY** ....................................................................................................................... 24

IV  **FINDINGS** .................................................................................................................................. 27

V  **DISCUSSION** ............................................................................................................................... 37

**REFERENCES** ................................................................................................................................. 44

**APPENDICES**

Appendix A:  HSR Approval Letters ................................................................................................. 52-53
Appendix B:  Recruitment Letter ........................................................................................................ 54
Appendix C:  Recruitment Flyer ........................................................................................................... 55
Appendix D:  Informed Consent Letter ............................................................................................... 56-57
Appendix E:  Demographic Questionnaire ......................................................................................... 58
Appendix F:  Guided Interview Questions .......................................................................................... 59
Chapter I

Introduction

This research study is a qualitative project utilizing the interviews of Division III female student-athletes to explore the athletic stressors encountered during their first year of college and the clinical implications that result. For purposes of this paper, the term “clinical implications” will be used in reference to symptoms that student-athletes present with as identified in various symptom checklists throughout the DSM-IV-TR (American Psychiatric Association, 2000). Additionally, the terms “clinician” and “campus mental health professional” will be used interchangeably to represent a licensed mental health professional who works to counsel and treat students with various diagnoses within the college population. Lastly, the term “athletic stressor” will be used as an overarching term signifying people, experiences, or events that impact a student-athletes’ ability to perform activities of daily living. The study focus has been directed toward Division III female student-athletes due to the minimal attention they receive from the fields of psychology, social work, and the NCAA (National Collegiate Athletic Association). Additionally, most research exploring the experiences of student-athletes has routinely marginalized female athletes in an often unacknowledged effort to consistently uphold the dominant “hegemonic masculine values that consistently perpetuate female subordination and gender inequity” (Harvey, 1999, p. 92). Due to this system of beliefs and inequitable framework, the experiences of female athletes remain unheard and undervalued, leaving significant gaps in our clinical knowledge. This study is designed to explore the first year
athletic stressors experienced by female student-athletes, enabling campus mental health professionals to better understand and treat the clinical implications of this frequently marginalized population.

These gaps in knowledge point to the need for further research and dissemination of clinical studies exploring the athletic stressors of first year female student-athletes, whereby creating deeper insight and awareness for our players, coaches and clinicians. One of the main objectives of this research is to explore the clinical implications resulting from athletic stressors and to identify the impact on female athletes emotional and cognitive health. Further, the study will contribute to a broader understanding of the unique stressors faced by Division III female student-athletes who may present to campus counseling services. With that, it is important to locate the researcher and inherent biases present in this study, as she was a former Division I female student-athlete as well as a former assistant coach for a Division III athletic team. This study was conducted at two all-women’s colleges located in New England and include current female student-athletes.
Chapter II

Literature Review

This chapter provides a review of the literature focusing on the athletic stressors encountered by female student-athletes and the clinical implications that result. In order to establish an overarching question within a body of inquiry, this literature review will evaluate the following: transitional stressors and clinical implications encountered by first year college students; the athletic subculture and athletic stressors pertaining to female student-athlete performance, time demands and role identity conflicts, identifying their clinical implications and ways of coping; and lastly the unique stressors relevant to Division III athletics, exposing the benefits and drawbacks of being less visible in the NCAA. In closing, the research will offer ways for coaches and campus mental health professionals to become better educated on these unique stressors so they may improve their awareness and interventions.

First Year Transitional Stressors and Clinical Implications

Stressful life events such as the developmental transition into adulthood, a process for some that is marked by the commencement of college and separation from home, can often be accompanied by the emergence of health problems. According to the Transactional Model of Stress, stressors are defined as “demands made by the internal or external environment that upset balance, thus influencing physical and psychological well-being and requiring actions to restore balance” (Lazarus, 1966, p.19). If a student’s physical and psychological well-being are disrupted for a period of three months or more after the onset of an identifiable stressor(s), campus mental health professionals are expected to make a diagnostic assessment for what the
DSM-IV-TR defines as an Adjustment Disorder. Adjustment Disorder is best understood as “... a psychological response to an identifiable stressor or stressors that results in the development of clinically significant emotional or behavioral symptoms” (American Psychiatric Association, 2000, p. 679). Evidence of Adjustment Disorder symptomology was found in a recent quantitative study conducted by Rodgers and Tennison (2009) that assessed first-year students transition into college. Data was collected from 426 students from two single-gendered Catholic liberal arts campuses that function as one college with joint academic curriculum and coeducational classes. Findings from the research concluded that 47% of study participants experienced emotional symptoms (i.e. depression, anxiety, homesickness), 38% suffered from sleep disturbances (i.e. sleeping too little, sleeping to much, environmental problems), and 26% of survey participants struggled with academic difficulties (i.e. problems relating to workload, specific courses, motivation, and time management). This study aligns with what other research and data suggests as some of the more noticeable implications traditional first year students experience during their transition into college.

Further research has documented freshmen attrition rates that can be traced to both poor academic standing after first semester grades as well as a student’s inability to successfully cope with social and emotional adjustments (McGrath & Braunstein, 1997). An expanded review of the literature exploring the first year stressors of undergraduate students found the following stressors to be most prominent: academic demands; being away from home; transitioning through a new developmental stage; pressure from peers; frustrations with achievement; and financial difficulties (Loughran & Etzel, 2008; Towbes & Cohen, 1996; Misra, McKeen, West, & Russo, 2000). These stressors are associated with increased levels of stress and anxiety that inevitably can cause greater personal responsibility and a perceived loss of social support.
(Greenleaf, Petrie, Reel, & Carter 2010). In addition to students having the opportunity to choose their courses, professors, and decide if and when they attend class, there are universal experiences of identity development, managing interpersonal relationships, experiencing cultural differences, solving problems and how students respond to these problems that create more complicated realities (Rodgers & Tennison, 2009). If a student’s presenting symptoms speak to a broader and more severe range of impairment beyond an Adjustment Disorder, further assessment will need to be made, more thoroughly evaluating for any and all presenting symptoms that may be causing impairment in one’s emotional and cognitive functioning.

**Impairments in Emotional and Cognitive Health**

“Excessive and prolonged stress can be harmful to students’ academic performance and their health in general” (Hamaideh, 2011, p. 71). With increased levels of stress comes a stronger likelihood of emotional and cognitive impairment. For purposes of this study, and to better orient the reader, emotional impairment will refer to feeling states of sadness, anger and apathy, while cognitive impairment will refer to experiences of hopelessness, guilt and memory loss (American Psychiatric Association, 2000). For first year college students, these impairments can easily serve as limitations in their ability to stay the course with their academic, extracurricular and social aspirations.

**Primary Insomnia and Sleep Disorders**

Diverting from one’s intended plan of involvement with academic, extracurricular or social aspirations is often caused by unmanageable amounts of distress. According to the American Psychiatric Association (2000) “When this distress becomes associated with increased physiological, cognitive, or emotional arousal in combination with negative conditioning for sleep,” Primary Insomnia ensues.
The essential feature of Primary Insomnia is a complaint of difficulty initiating or maintaining sleep or of nonrestorative sleep that lasts for at least 1 month and causes clinically significant impairment in social, occupational, or other important areas of functioning. (p.599)

Research supports that adolescents and young adults, including college students, appear to be one of the most sleep-deprived groups in the United States (Carskadon, 2002; Pilcher & Walters, 1997; Tsai & Li, 2004). It is no wonder our students are experiencing shifts in feeling states and impairments in cognitive functioning.

As one transitions from high school to college it is likely that several if not most of these factors will become disrupted. Among the more common causes for disruption of sleep, as voiced by students themselves, are: sleep that is voluntarily sacrificed due to social factors or a noisy residence hall, high variability or irregularity of schedules; and perceived stress (Jensen, 2003; Lund, Reider, Whiting & Prichard, 2010). Research has documented the effects of sleep deprivation as leading to symptoms of depression, anxiety, reduced physical health and general cognitive difficulties (e.g. poor problem solving and attention difficulties) (Gaultney, 2010; Pilcher, Ginter & Sadowsky, 1997; Pilcher & Walters, 1997). With that, findings from Lund et al. (2010) quantitative research sample of 1,125 students from a large private university in the Midwest measured the relationship between sleep, mood and stress. They concluded that perceived stress had the most explanatory power for poor sleep hygiene. Unfortunately, in an effort to combat perceived stress and sleeping difficulties, research has documented first year students resorting to alcohol and drugs as maladaptive efforts to self-medicate and cope (Jensen, 2003; Jean-Louis, von Gizycki, Zizi, & Nunes, 1998).
**Substance Use and Abuse**

Excessive use of alcohol and drugs, when ingested at unhealthy rates or amounts, is clinically known to mental health professionals as Alcohol and Substance Related Disorders. As defined in the *DSM-IV-TR*, Alcohol and Substance Related Disorders are “... related to the taking of a drug of abuse (including alcohol), to the side effects of a medication, and to toxin exposure” (American Psychiatric Association, 2000, p. 191). Research has cited several variables for why first year students’ may turn to alcohol and/or drugs as a means for coping with intolerable levels of distress: feelings of nervousness, loneliness, sleeplessness and excessive worry (Broman, 2005; Cooper, 1994). Additionally, “beliefs that alcohol is central to college life may prime motives such as social lubrication, enhancement of positive emotions, coping with negative emotions, and conformity to peer pressure” (Osberg, Insana, Eggert, & Billingsley, 2011, p. 334). Further, it has been reported that only 3% of the student population who struggle with alcohol-related problems seek help (Cellucci, Krogh, & Vik, 2006). These stressors coupled with students’ lack of awareness and resistance to seeking help unfortunately bear the potential of laying the foundation for a lifetime of maladaptive coping strategies.

**What can be done?**

As one can see, there are vast implications for how first-year college students are making attempts to cope with a multitude of environmental and transitional stressors. Pope, Miklitsch, & Weigand, (2005) offer opportunities for how the larger campus system can engage in creating more support,

... the first year must be structured in a way that encourages high-quality, frequent interactions between first-year students and faculty, staff and peers. Effective orientation programs, first-year seminars, small classes, living-learning communities, early
intervention programs, and peer mentoring programs are examples of strategies that colleges and universities can implement to help ensure first-year student success. (p. 68)

For clinicians, a frequent response to noticeable differences in a person’s emotions, cognition or behavior is to provide accurate empathic attunement to the lived experiences of an individual in a didactic or group setting. This type of response can often leave someone feeling heard, understood and validated. Levitz and Noel (1989) indicated “... first-year students who can name a campus-affiliated person they can rely on for help are more than twice as likely to return for the sophomore year as those who cannot.” In response to the increasing amount of emotional, cognitive and behavioral implications experienced by our first-year college students’, it is recommended that faculty and administrators think more strategically and creatively in their development of more integrative outlets for support.

**Student-Athlete Stressors**

While college faculty and administrators are working hard to ease the transition and clinical implications of normative first years stressors, there are an additional set of athletic stressors that student-athletes endure that make identifying and treating the presenting problem all the more complicated. By no fault of their own, it is not uncommon for campus mental health professionals to have little awareness or education around the pressures and severity of athletic stressors endured by our student-athletes. Thus in an effort to shed more light and to continue the dialogue, I will explore and expose both the athletic subculture and three stressors particular to collegiate athletic participation.

**Athletic Subculture**

As sport in intercollegiate competition continued to grow throughout the latter part of the twentieth and into the twenty-first century, profiles and stereotypes of student-athletes began to
emerge. While initially lauded for their ability to exemplify a healthy balance between athletic prowess and academic pursuits (Miller & Hoffman, 2009), attention quickly shifted toward a closer examination and scrutinization of the ‘athletic subculture.’ Parham (1993) argues that, “Athletes in many schools are not well integrated into campus life, forming a separate subculture with separate characteristics and values” (p. 425). Over time, this subculture that student-athletes were creating was beginning to be viewed as a special ‘at-risk’ and negative group by their non-athlete peers and faculty (Pinkerton, Hinz & Barrow, 1989; Watson, 2005).

Negative perceptions and stereotypes began to emerge from peers who felt that athletic pursuits were ruining the privilege and reputation of higher education (Simmons et al., 2007; Engstrom & Sedlacek, 1991). The prejudicial notions examined by Engstrom and Sedlacek (1991) found that student-athletes scandalous behavior and inability to perform academically greatly countered the intellectual expectations and standards attributed to higher education. At times student-athletes were viewed as ‘overly entitled’ or reaping the benefits of a ‘celebrity status’ erroneously earned (Watson & Kissinger, 2007; Fletcher, Benshoff, & Richburg, 2003). These perceptions align with what other research has found in acknowledging that significant negative attitudes held by non-athlete peers (Baucom & Lantz, 2001; DeFrancesco & Gropper, 1996) has created a pervasive and inaccurate stigma across campuses nationwide.

In addition to this stigma and other ‘dumb jock’ stereotypes imposed by non-athlete peers, student-athletes have also been forced to confront harsh ridicule and judgment from faculty and professors, some of whom have been known to carry a slighted attitude. Researchers Simmons, Bosworth, Fujita and Jensen (2007) surveyed 538 male and female Division I-A student-athletes in hopes of gaining a better understanding of the prejudicial and discriminatory remarks that were held by faculty. More than half of the responses from student-athletes
supported the notion that faculty and professors do in-fact carry a higher percentage of negative attitudes and inflexibility in regards to perceived academic and intellectual ability as well as classroom and assignment time demands (Simons et al.). Perceptions and degrading comments have resulted in the formation of an athletic subculture that is marginalized and ‘othered’ from the traditional student. Examples of faculty comments were cited: “In a big class (400 people). Before test professor said, ‘It’s an easy test. Even athletes can pass.’” Another comment from the same research sample was given by a basketball player, “Professor asked the student athletes to stand on the first day of class and said, ‘These are the people who will probably drop this class’” (Simons et al., 2007, p. 251). Inaccurate and degrading comments like these are what student-athletes are all too often forced to confront, sometimes on a daily basis. These imposed stereotypes and misguided assumptions can be unfavorable for various reasons: the desire for athletes to skip or not attend class, decreased self-esteem and questioning of one’s academic abilities, all of which inevitably contribute to a lack of motivation in school and future career aspirations (Pritchard & Wilson, 2005; Humphrey, Yow, & Bowden, 2000). As mental health professionals frequently working on university and college campuses with this marginalized population, it is our responsibility to conduct further research that will offer us a better understanding of the athletic subculture. In an effort to combat the harsh judgments held by non-athlete peers and faculty, I would now like to discuss three of the more prominent athletic stressors that have been noted for producing clinical implications within the student-athlete population: athletic performance, time demands and role-identity conflicts (Suinn, 2005; Storch, Storch, Killiany, & Roberti, 2005; Gould, Ecklund, & Jackson, 1992; Scanlon, Stein, & Ravizza, 1991).
Athletic Performance and Anxiety

There exists an expansive range of research examining both the facilitative and debilitative effects of various levels of anxiety on student-athletes (Jones & Swain, 1992; Perry & Williams, 1998; Hanton & Jones, 1999; Wiggins & Freeman, 2000; Hanton, Thomas, & Maynard, 2004). Additionally, there is a growing body of more recent data that examines the maladaptive effects excessive levels of anxiety can have on athletes and the clinical implications that result (Suinn, 2005; Grossbard, Geisner, Mastroleo, Kilmer, Turrisi, Larimer, 2009). “The appearance of stress responses during competition can result in anxiety becoming a conditioned emotional response to competition cues, leading to sleep disturbances, excessive precompetition worry, and impaired performance” (Suinn, 2005, p. 346). Suinn’s analysis of performance related stress responses is corroborated by previous research (Gould et al., 1992; Scanlon et al., 1991) supporting the presence of anxious impairments in cognitive health. This aforementioned research has cited “. . . negative self-thoughts, self-doubting thoughts, and worry about not doing well,” (Suinn, 2005, p. 353) all as cognitive clinical implications of performance-related anxiety.

In an effort to reduce the impact of these clinical implications, more recent research (Suinn, 2005; Storch et al., 2005) has introduced cognitive behavioral interventions to support stress reduction and improve athletic performance. The introduction of cognitive behavioral treatment thus allows student-athletes to manage their performance anxiety by heightening their awareness for how thoughts and emotions can impact behavior and therefore performance. In conjunction with cognitive behavioral approaches, deeper reflection and insight from theorist Kelly Forrest will offer the opportunity for a more reflective interpretation on previous patterns of attachment and their impact on performance anxiety.
Forrest (2008) eloquently speaks to the interplay between student-athletes pre-established patterns of attachment and how these ingrained behaviors interface with one’s ability to regulate traits and states of anxiety during high-level competition in sport. She argues, student-athletes attention to competitive sport “. . . is a temporary global event that reaches back to the earliest dyadic experiences of uncertainties accompanying separations from a primary caregiver” (p. 245). These uncertainties speak to the degree of reservation or aggressiveness with which an athlete feels comfortable performing during competition. Set within the framework of John Bowlby’s theory on childhood development and attachment, Forrest compares and contrasts how student-athletes inability to regulate their instinctive behavioral control system can inevitably lead to maladaptive approaches for coping with performance-related anxiety. In an effort to combat these maladaptive coping strategies, research has explored ways in which healthy attachment patterning between coach and athlete has proven imperative for an athlete’s ability to confidently translate a newly learned skill from practice to competition. Additionally, a coach’s ability to provide accurate and empathic emotional attunement throughout the skill development process is essential for the athlete to develop mastery and confidence of a new skill. Forrest contributes that by viewing a student-athletes performance through the lens of Bowlby’s attachment theory will grant both coaches and campus mental health professionals the opportunity for supporting the athlete’s ability to self-regulate. She goes on to outline Bowlby’s theoretical contributions in understanding sport-related anxieties by examining pre-established patterns of attachment present a deeper and more reflective acknowledgment for why some student-athletes may be susceptible to clinical implications. In conclusion, both Suinn’s analysis of performance related cognitive impairments and Forrest’s theoretical interpretation and application of attachment theory narrow the focus of our conversation for what clinicians and
coaches need to be aware of for why our student-athletes are susceptible to developing clinical symptomology.

**Time Demands**

In addition to performance related cognitive impairments, the regimented schedules and time demands that student-athletes endure have also been known to be additional contributors to emotional and cognitive clinical implications. Wilson and Pritchard (2005) corroborate this notion by focusing on first year student-athletes, offering, “Recent evidence suggests that athletes may experience even greater levels of stress due to the dual demands of athletics and academics placed on them during their freshman year” (¶ 1). These dual demands have amounted to the following clinical implications: lack of sleep, continuous tension, fatigue, headaches and digestive problems notes Humphrey et al. (2000). Additionally, it is not uncommon for student-athletes to experience frustration with time management, burnout, fear of failure, anxiety, depression, and self-esteem issues (Ferrante, Etzel, & Lantz, 1996; Hanton, Thomas & Maynard, 2004; Mignano, Brewer, Winter, & Van Raalte, 2006). These various clinical implications provide all the more reason for why coaches and mental health professionals should routinely check-in and observe how their players and clients are performing both on the field and off.

In one of several studies conducted by Adler & Adler (1987), findings revealed that involvement with athletics in larger institutions resulted in afternoon practices that would cut into certain lab requirements for specific majors, or exams and papers that were due while student-athletes were away traveling for a competition. Thus by the end of a student-athlete’s first year, they were able to notice how athletics had impacted previous career goals, consequently leading to increased levels of anxiety and frustration in an effort to make up lost
credits or coursework that they were unable to fulfill. An additional drawback to having inadequate time to complete tests or academic coursework is the perception of how these behaviors are seen by others (i.e. professors and fellow classmates). Not being able to meet academic obligations because of practice and/or traveling schedules feeds into the “dumb jock” stigma and negative stereotypes often held by faculty and non-athlete peers. Thus, the clinical implications are compounded as the student-athlete continues to be positioned as the symptom carrier and/or identified patient. It is findings like these that have begun to address not only the clinical implications that time demands have on student-athletes but also the conflict inherent in their roles as both student and athlete.

Role Conflicts and Identity Foreclosures

Throughout student-athletes’ first year of college they are confronted with various opportunities that challenge old roles and foster new ones. Identification with the athlete role is merely one of them. Research has acknowledged that over-identification with the athlete role can be defined as “exclusivity of the athletic role . . . thus, severely restrict[ing] the development of other roles within the self” (Wiechman, 1997, p. 200). Sport psychology research has supported the clinical implications inherent in this notion. “Athletic identity reflects cognitive, affective, behavioral, and social elements of identifying strongly and, more importantly, exclusively with the athlete role” (Murphy, Petitpas, & Brewer, 1996, p. 240). One’s self-proclaimed athletic identity and how strongly they attach themselves to it can have implications on their emotional, behavioral and cognitive health. Thus, “The individual with a foreclosed identity fails to evaluate internal needs and values and instead internalizes a socially acceptable role identity,” that of the student-athlete (Miller & Kerr, 2003, pg. 198). Consequently, by internalizing a socially accepted role identity, that of a student-athlete, they are foreclosing their
exploration and identification with others.

**Sexual Orientation**

One identity that frequently gets suppressed due to the primacy of the student-athlete role is sexual orientation. Student-athletes who do not identify as a member of the heteronormative culture have been known to be at an even higher risk for experiencing increased amounts of emotional, behavioral and cognitive distress due to the intolerant and homophobic atmosphere of intercollegiate sport (Loughran & Etzel, 2008; Sykes, 2001). Within the university context, the athletic department has been described as the most homophobic place on campus. “Bias and discrimination against gay and lesbian athletes has been found to occur through negative stereotypes, verbal comments, social isolation, homophobic harassment, discrimination in team selection, and negative media attention (Roper & Halloran, 2007, p. 919). Due to the unsafe and discriminatory environment, LGBT and questioning student-athletes are more likely to hide their sexual identities for fear of being ostracized by fellow teammates, coaches, and peers. Research surrounding the consequences of suppressing one’s sexual orientation has resulted in the following clinical implications: depressed mood, substance abuse, thoughts or plans of suicide, withdrawal from once enjoyable activities, and excessive worry (Ross, Doctor, Dimito, Kuehl, & Armstrong, 2008; Cochran, Sullivan, & Mays, 2006; Gilman, Cochran, Mays, Hughes, Ostow, & Kessler, 2001; Eliason, 2011).

**Religion**

A second marker of identity development that also bears the possibility for becoming suppressed due to the primacy of the student-athlete role is one’s religious affiliation. In addition to the homophobic culture of intercollegiate athletics, there also exists a sub-culture of religious and evangelical Christian student-athlete support groups. The Fellowship of Christian Athletes
(FCA) and Athletes in Action (AIA) are two well-known and well-documented antigay and antifeminist religious groups that exist on college campuses and are housed within athletic settings (Sykes, 2001). While the FCA and AIA might offer outlets of support and community amongst student-athletes who identify as Christian, they simultaneously oppress and discriminate student-athletes whose religion is not. Pat Griffin (1998), author, feminist and LGBT and questioning advocate has committed a significant portion of her life’s work to uncovering the hidden agendas of evangelical groups of Christian student-athletes, identifying their mission as wanting to “cure” homosexual acts and beliefs, thus attempting to lead LGBT and questioning individuals to a more moral and pure form of existence. Clinical implications that have manifested due to the homophobic and intolerant environment of intercollegiate athletics and conservative Christian-based support groups are as follows: poor self-esteem, isolation, self-injurious behavior, substance abuse, and poor body image (Krane, Surface & Alexander, 2005; Roper & Halloran, 2007; Sykes, 2001). Campus mental health professionals and coaches need to work collaboratively to raise awareness and become advocates for non-Christian student-athletes as well as those who identify as LGBT and questioning.

Race

Aside from the marginalization and discrimination that is a reality for non-Christian and LGBT and questioning student-athletes, athletes who identify as a race other than white may also be at-risk for experiencing clinical implications due to institutional racism and colorblind ideologies that are housed within athletic departments and institutions of higher education. White scholar and researcher Jennifer Simpson (2010) writes on the notion and myth of meritocracy, “. . . to hold everyone to the same standard,” (p. 150) arguing that without examining the structural biases and oppressive limitations within the bedrock of the institution,
students are paired against one another in a system that is founded and whose function is to uphold whiteness as the naturalized and normalized ideal. In 2004-2005, the NCAA reported the participation of the following intercollegiate athletes: African-American males (17.2%), African-American females (10.2%); Hispanic males (3.3%), Hispanic females (2.7%); Asian males (1.3%), Asian females (1.7%); and Caucasian males (70.4%), Caucasian females (77%) (Vicente, 2006). As evident in the NCAA’s 2004-2005 report of student-athletes, the standard and system of privileging whites continues to remain the status quo, thus making athletes of color the benefactors of oppressive microaggressions and clinical implications. Researcher Kevin Foster (2003) gathered data on the experiences of black female student-athletes at a large Midwestern University between 1999-2001. Foster’s research found, “. . . athletic department staff acted as agents for the process of transforming black female athletes, they operated with assumptions that were based on racialized expectations of behavior” (p. 301). These assumptions and racialized expectations are inevitably what continue to pervade and contribute to the limitations of identity development and career aspirations for student-athletes of color. He goes on to conclude, “. . . staff members routinely ascribed black student athletes with a racial identity that characterized them as immature, academically deficient, and sexually overactive,” (p. 303) thus further contributing to the negative stereotypes that already persist.

Foster’s more recent findings are corroborated by what research conducted by Sowa and Gressard (1983) has previously found in acknowledging,

“Black student-athletes on predominantly White campuses may experience feelings of isolation as a result of both ethnicity and student-athlete status. These feelings may place Black student-athletes at an even higher risk for psychosocial distress and hinder their ability to accomplish developmental tasks.” (p. 237)
In addition to the struggles with developmental tasks for athletes of color, other clinical implications have been known to result. Parnham (1993) highlighted the experiences of athletes of color acknowledging the opportunity for them to feel “. . . confused, angry, hurt or bitter,” (p. 419) thus creating a polarizing and marginalized experience when compared to their white teammates. Cogan and Petrie (2002) contribute to the discussion of racialized experiences of intercollegiate athletes by highlighting the experiences of female student-athletes, “Specific issues [they] may face in this environment include self-worth that is closely tied to athletic ability; lack of fame, fortune, and sport-related job opportunities after college; and failure to prepare for a non-sport career” (p. 420). Unfortunately the presence and pervasiveness of institutional racism and color-blind ideologies continues to limit the abilities and career aspirations for athletes of color.

White Privilege

In addition to the lack of diversity and mythical meritocratic authority that pervades institutions of higher education, there remains a separate but distinct risk factor that athletes of color are forced to confront on a daily basis, unexamined white privilege. While Lougハン and Etzel (2008) speak to the importance of campus mental health professionals developing cultural competency, they also emphasize,

“. . . when working with dominant culture members, the consultant must be sensitive to the athlete’s underlying attitudes and beliefs about race and ethnicity that may be the result of his or her prior experiences (or lack thereof in many cases) with teammates from other ethnic backgrounds” (Visible Differences: Ethnicity & Gender ¶ 3).

A student-athlete who is white and has a limited awareness to the privileges their race has acquired them, might require further support in learning how to examine those privileges while
also building cultural awareness for their non-white teammates.

One’s sexual orientation, religion, race and experience of privilege are only a few of various roles and identities that student-athletes may unknowingly foreclose due to the primacy of their student-athlete role. Learning how to balance and create time for further exploration of one’s multiple roles and identities inevitably becomes a juggling act, forcing athletes to negotiate friendships, career aspirations and at times causing them to resort to unhealthy coping strategies. Now that we have examined the stressors unique to the athletic subculture and student-athlete experience, we will narrow our lens even further to focus solely on the particular stressors and unique challenges specific to the female student-athlete population.

**Female Athlete Stressors**

Female student-athletes were not always present in the intercollegiate arena. In fact, it was not until 1896 when the first women’s intercollegiate competitions were held in basketball between the University of California, Berkeley verses Stanford, and the University of Washington verses the Ellensburg Normal School (Gerber, Felshin, Berlin, & Wyrick, 1974). Since women’s introduction into intercollegiate athletics, there has been a contentious balance of research examining the unique stressors pertaining to female student-athletes, acknowledging the benefits of sport and its ability to enhance overall physical, behavioral, emotional and mental health (Humphrey et al., 2000; Wilson & Pritchard, 2005; Miller & Hoffman, 2009) while also recognizing the stressors from athletics and the possibility for cognitive and emotional implications (Suinn, 2005; Fletcher, Benshoff, & Richburg, 2003; Jolly, 2008).

“Any dual social identity is vulnerable to splintering if one of the two component statuses overly heightens or damages self-esteem. Intercollegiate athletic competition has a profound power to do both” (Marx, Huffmon, & Doyle, 2008, ¶ 4). Admist the clinical
implications ascribed to student-athletes due to the pressures and stressors imposed by sport, female student-athletes experience an additional set of stressors pertaining exclusively to their sex. In an attempt to make sense of and cope with these stressors, we examine more closely the sometimes ‘risky’ and maladaptive behaviors female student-athletes exhibit. The female-athlete-triad, female athlete shame and ‘risky behaviors’ (i.e. alcohol, substance abuse and sexual promiscuity) have both been identified as pervasive and unhealthy ways female student-athletes have learned to cope.

**Female Athlete Triad**

The ‘female athlete triad’ is a syndrome and coping strategy employed by female student-athletes who struggle to cope with stressors pertaining to body image and sport. Reinking and Alexander (2005) have defined the ‘female athlete triad’ as a complex syndrome consisting of three conditions: disordered eating, amenorrhea and osteoporosis. Disordered eating in female student-athletes can develop for any number of reasons, “... self-imposed expectations of athletic perfection and a belief in the inverse relationship between body size and performance” (p. 48) and has been known to precipitate maladaptive behaviors. In addition, “The sports environment can heighten body and weight-related concerns because of factors such as pressure from coaches, social comparisons with teammates, team weigh-ins, performance demands, physique-revealing uniforms, and judging criteria” (Greenleaf, Petrie, Carter & Reel, 2009, p. 489). Parham (1996) contributes,

“Women athletes have been found to be more likely than men to struggle with eating disorders or weight management and to participate in sports that operate with smaller budgets (e.g., fewer scholarships, less media exposure) and to encounter societal biases regarding their participation in sports” (p. 418)
These various factors weigh heavily on female student-athletes, thus creating opportunity for the development and advancement of the following clinical implications: “refusal to maintain a minimally normal body weight and/or repeated episodes of binge eating followed by inappropriate compensatory behaviors such as self-induced vomiting; misuse of laxatives, diuretics, or other medications; fasting; or excessive exercise” (American Psychiatric Association, 2000, p. 785). Athletes at risk for developing the female-athlete-triad are: athletes who do an extensive amount of exercise and are very competitive, reserving a significant portion of their day for practicing their sport and/or training for their sport, athletes who participate in a significant amount of endurance training (i.e. runners), and sports that place a high demand on physical appearance (i.e. dancing and gymnastics) (Sherman & Thompson, 2004). In addition to the manifestation of the ‘female athlete triad,’ there are various other clinical implications that can present themselves in equally maladaptive ways.

**Female Athlete Shame**

As previously mentioned, in addition to Forrest’s theoretical orientation and interpretation of attachment patterning of both male and female student-athletes and its relationship to performance anxiety, researchers Partridge and Wiggins (2008) noticed an additional trait of sport-related anxiety and its impact on performance and the intrapsychic worlds of female student-athletes, shame. “Because sport is a highly visible and valued achievement context in which competitive anxiety is likely to exist, an athlete’s fear of failure may contribute to feelings of anxiety that can lead to performance problems,” thus resulting in shame (p. 704). Partridge and Wiggins surveyed 94 male and female athletes who competed at either the varsity high school or NCAA Division I levels in an effort to establish a better understanding of the relationships between facilitative and debilitating cognitive and somatic
anxiety and shame. By administering the *Competitive Trait Anxiety Inventory-2D* and the *Compass of Shame Scale-Sport*, Partridge and Wiggins assessed for how student-athletes were experiencing their anxiety and what methods they utilized to cope. Results of the study concluded that females reported a stronger likelihood to score higher on Attack Self and Withdrawal for coping styles. These findings collude with what other research has found in identifying female student-athletes who experience a decreased sense of self-worth, a drop in motivation, and at times withdrawal from sport (Schallert & Woodruff, 2008; Humphrey et al., 2000). Miller and Hoffman (2009) contribute, “Where physical activity is generally associated with reduced depression and suicidal ideation for males, frequent exercise may signal an elevated suicide risk in their female counterparts, possibly due to links among negative body image, low self-esteem, depression, and suicidality” (p. 337). Perhaps not as evident as one may suspect, it appears that female student-athlete shame has significantly pronounced clinical implications that should be considered when working with this marginalized population. In conclusion, the stressors unique to female student-athletes are not to be taken lightly. For coaches and campus mental health professionals to further their understanding of the intricate female athletic stressors, research and literature must continue to explore and expand how they are coping with a multitude of stressors.

**Division III Stressors**

In an effort to further our understanding for how coaches and mental health professionals can provide relief from the athletic stressors first year female student-athletes experience, one must also understand the implications of a larger system and structure under which sport is governed.

“The National Collegiate Athletic Association [NCAA] was founded in 1906 to protect
young people from the dangerous and exploitive athletics practices of the time . . . [it]

began administering women’s athletics programs in 1980 when Divisions II and III

established 10 championships for 1981-82” (History, 2008, ¶ 1 & 9).

Within the NCAA, there are three main divisions comprising different levels of competition:
Division I, Division II and Division III. Division’s I and II allow for scholarship money and
financial aid to be distributed to student-athletes in an effort to support recruitment and maintain
the nationally competitive status of an institution. With that, student-athletes competing in
Division’s I and II receive educational support and financial benefits above and beyond what is
offered to Division III athletes (Richards & Aries, 1999). In fact, Division III student-athletes
are not offered any scholarship money or any athletic aid; (Fletcher, Benshoff, & Richburg,
2003) rather, Division III student-athletes are expected to contribute a larger portion of their own
money and resources to support their athletic career. Thus, the stress of financing one’s
education and athletic career proves to be another added stressor for Division III athletes.

Conclusion

The significance and efficacy of exploring the challenges of female student-athletes is
relevant to the field of social work because it is so frequently a marginalized population that is
overlooked by the fields of psychology, social work and the NCAA. However, female athletes
are far from immune to the additional weight and pressures of performance anxiety, time
demands and role and identity conflicts inherent in intercollegiate sport. The present study seeks
to contribute to a growing body of research whose intent is to heighten awareness and create
insight for both coaches and mental health professionals supporting the Division III female
student-athlete.
Chapter III
Methodology

This research project explored the clinical implications experienced by Division III female student-athletes resulting from athletic stressors during their first year of competition. I chose to interview female student-athletes due to the girth of quantitative studies and lack of qualitative research conducted on student-athlete experiences, the extensive amount of data collected from male athletes only, and lastly because of the lack of attention or exploration on the experiences of Division III female student-athletes. Research consisted of 5-50 min. interviews conducted with seven female student-athletes who successfully completed their first year of schooling and participated on a Division III athletic team. Data was lost for one of the interviews, therefore only the transcriptioner’s notes from that interview were available for contributions to this study. The interviews focused on gathering information about the athletic stressors female student-athletes encountered during their first year of collegiate competition. Data from the interviews was analyzed and organized to highlight the clinical implications and findings presented in the literature review portion of the paper. For more information about my study, please see Appendix A for my Human Subjects Review Approval Letters.

Participant Characteristics

My research sample consisted of a non-probability sample of seven Division III female student-athletes. In order to qualify for this study, participants had to be registered as a full-time student, were required to be between the ages of 18-22yrs., speak English, and were willing to talk about the athletic stressors encountered during their first year. Participants were to be excluded if they were male, if they were currently pregnant, or if they were not a full-time
student. A sample size of twelve participants was desired.

**Recruitment Process**

Participants were recruited from two Division III all-women’s colleges located in New England. Recruitment emails were sent out to all second, third, and fourth year female student-athletes (see Appendix B). Additionally, flyers were hung to encourage recruitment at one of the two colleges (see Appendix C). Efforts to achieve diversity included graphics and images representing equity and diversity that were uploaded to the flyers. Potential participants then contacted me by email whereby I screened them for inclusion. 10 responses were received, of which 10 participants were selected through the screening process. Three of the 10 participants were not interviewed due to scheduling issues and time constraints. Participants were sent two informed consent forms through email prior to the interview (see Appendix D). Interviewees signed and dated both consent forms, keeping one copy for themselves and allowing me to keep one for my records. Interviewees were also given a list of counseling resources as specified in their informed consent letter, should they have needed to access additional support services outside of the interview.

**Data Collection**

Interviews with female student-athletes utilized guided interview questions (see Appendix F) that were applied to all participants as a basis for an open-ended conversation about their experience. Demographic data (see Appendix E) was collected regarding participants’ age, year in school, sport, race, number of years playing sport, and major. Interviews lasted between 5-50 mins. and took place in private spaces on both college campuses. I audio recorded and manually transcribed each interview. Open-ended questions based upon research of the current literature were utilized to capture the subjective experience of each participant. Interview
responses were then organized based upon common themes and concepts.

**Data Analysis**

Data analysis examined ways in which both emotional and cognitive implications resulted from stressors pertaining to athletics as experienced by Division III female student-athletes during their first year of college. Data collected during recorded interviews was transcribed and analyzed for content for common themes based on words and phrases as the unit of measure. The researcher took notes during interviews and reviewed transcriptions to note common themes, affect changes and atypical or remarkable responses. Interviews were transcribed to entirety in order to allow for full analysis of recorded experiences. Five themes were noted: 1) Athletes expressed emotions and/or experiences that met *DSM-IV* diagnostic criteria for various mood disorders. 2) Athletes expressed emotions and/or experiences that met *DSM-IV* diagnostic criteria for various anxiety disorders. 3) Athletes described stressors experienced from athletics as obstructions in their ability to focus. 4) Athletes described impairments in their academics resulting from stressors related to athletics. 5) Athletes cited experiences of sleep deprivation. The themes that emerged from interview content are described in detail in the findings chapter of this document and direct quotes are used to illustrate the participants’ experiences.
Chapter IV

Findings

The purpose of this study was to explore whether the stressors pertaining to athletics caused emotional or cognitive clinical implications in Division III female student-athletes. There were five major findings in this study. First, four out of seven participants noted feelings states or symptoms that resonate with various clinical pictures for mood disorders. Athletes stated experiencing the following changes during their first year: increased psychomotor activity, fluctuations in weight, feelings of insanity, feeling overwhelmed, experiencing apathy or disinterest, irritability, and excessive participation in a variety of other activities. It was also documented that during several of the interviews athletes demonstrated a shift in affect, appearing as though they were about to cry. Second, four out of seven athletes expressed feeling states or symptoms that met diagnostic criteria for anxiety disorders. This was described as pressure or perceived pressure placed on one’s self by their teammates, coaches or themselves that led to feelings of anxiety, worry or apprehension about athletic performance. Third, five out of seven interviewees noted various hindrances in their ability to focus, citing that their mind would wander elsewhere when doing homework, or thinking of class work when they were at practice. Fourth, five out of seven participants commented on their challenges with attendance to academic obligations, commenting that they struggled with time management, having to attend multiple practices per day, falling asleep during class, or missing class for practice or travel. Fifth, four out of seven athletes expressed episodes of sleep deprivation, stating that despite best efforts they were unable to catch up on lost sleep. Lastly, one participant presented with a consistently euthymic affect and stated her experience of having only positive emotional and
cognitive gains from her participation with college sport. Following the Demographics section below, the findings are described in greater detail. Direct quotes are used to illustrate the athletes’ experiences.

**Demographics**

Seven Division III female student-athletes participated in this study. Athletes indicated their membership on at least one or more of the following athletic teams: swimming and diving, volleyball, crew and field hockey. All seven student-athletes acknowledged their participation on high school athletic teams prior to joining collegiate athletics. Four student-athletes identified themselves as sophomores, one as a junior and the final two as graduating seniors. Participants were between the ages of 19-22yrs. Six student-athletes identified as White or Caucasian and one student-athlete identified as Asian. Student-athletes stated their academic interests in the following areas: religious studies, economics, psychology, American studies, political science and gender studies.

**The Student-Athlete Monologue**

Six of the seven participants affirmed that they had communication with either an assistant or head coach prior to starting college. Additionally, six out of seven student-athletes cited their involvement with sport as helping ease the stress of their transition into college. Five student-athletes spoke of the support they felt from their ‘sport family’ as being a pre-established social niche that they felt comforted by. Several interviewees stated that their choice for attending their respected school was due to their ability to continue playing on a sports team as well as stating that their decision to play was an overall worthwhile experience.
Athletic Stressors

As mentioned in prior chapters, the additional stressors from athletics can heavily impact other areas of a student-athletes' life and overall college experience (Suinn, 2005; Humphrey, Yow, & Bowden, 2000; Fletcher, Benshoff, & Richburg, 2003). Most commonly spoken about were the difficulties student-athletes experienced with time management due to sport and how that impacted both their academic and social life. One student-athlete commented on the following,

"I was really frustrated that I couldn’t do my schoolwork and I couldn’t really do things that I wanted to do and things that I wanted to spend time with people and I wanted to do other stuff but I couldn’t because of swimming. And weekends are basically gone and afternoons are gone."

With weekends spent traveling or preparing for a home competition, athletes spoke about the lack of time they had to focus on their studies or spend time with friends. Another student-athlete spoke of the stress she experienced from swimming and how that impacted her involvement with other extra-curricular activities on campus,

"In swimming it’s hard for me to always have perspective on situations so I like freak out really, really easily, because I’m not getting that much sleep and everything has to be really, really scheduled otherwise you don’t get it done. I’m also just hyperactive. Swimming and orchestra and I work at this school and I teach Hebrew and take a full course-load and special studies and research and stuff with professors. So I have a lot during swim season, everything has to be scheduled to the hour, otherwise, if something goes wrong it feels like a really big deal."

Often times student-athletes would speak of their rationale for choosing Division III athletics over Division’s I or II with the preconceived notion that it would be a less competitive environment and that they would have more free time to invest in other hobbies or areas of interest. Consequently, many of the athletes that I interviewed still felt that athletics took a primary role in their lives, often leaving little or no opportunity for anything else,
"It’s just like so much adrenaline all the time. Like, like racing for me is really, really stressful. I hate racing. If I could just go to practice and be happy with just going to practice and swimming really hard and swimming really fast I would do that."

Another athlete stated, "I had to really push myself to do my homework and to just sort of be actively working on my school work because I made swimming a bit of a priority towards the end of the year." All too often the result of the stressors endured from one’s participation on a collegiate athletics team might wind up looking something like this by the end of the day. "Like after practice is over in a day I can no longer do any work. I can no longer focus, I can no longer stay awake to read, I can no longer do anything other than watch the O.C." As one can see, an athlete’s experience of fatigue, whether it be mental, emotional and/or physical can often times cost them valuable study or social hours. Findings like these help to reveal the hidden stressors our athletes face on a daily basis. As one begins to look beneath the tough exterior that athletes are commonly known to portray, one begins to see the stress and strain that not only their bodies but also their hearts and minds are forced to endure.

**Emotional Impact of Athletic Stressors**

As previously mentioned, the emotional toll that athletes endure from stressors related to athletics has had costly implications. Four out of seven athletes expressed noticeable changes related to their mood. Several athletes spoke about their experience with sleep deprivation and the lack of time or energy they had to complete their homework,

"And if you have practices in the morning, like we did twice per week, there goes five hours of your day. That ends up being homework time or sleep time, and you’re often sleep deprived so it just drives you insane. So many times I would come back into the room and just like flop down on my bed crying, I was like ‘I want to sleep, but I have to do my homework,’ and that was probably the hardest part."

Another athlete spoke about her experience with sleep deprivation that eventually lead to a lack of time or care for herself,
"You’re supposed to be getting sleep so you can swim well. You’re supposed to be doing your homework so you can perform well in the classroom. And you’re supposed to be spending time with your house and your team and everybody wants something. Then you have to make time for you, but then there is no time. You feel just so overwhelmed all of the time. You’re trying to go in fifteen different directions and it’s way too much."

One student-athlete confided in her struggles and diagnosis with depression, stating that the amount of stress she endured from both academics and athletics eventually lead her to feelings of apathy and disinterest,

"My first year was wrecked by depression. I was able to perform both as a student and an athlete, but I was really unhappy . . . I worked hard, but how much I emotionally cared, yeah I just didn’t. I didn’t care as much. I remember thinking like when we were in the final tournament and I was just like, ‘Ok you know . . . either win or lose.’ . . . This sort of singular focus on performance really diminished my ability to communicate openly about what I was experiencing, because they say ‘mind over matter, right’ like you’re supposed to mentally will yourself through this like physical exertion that your body is barely capable of doing."

That same athlete spoke about the homophobic environment she experienced, commenting on how one is challenged to hide their sexuality for fear of not knowing how others will receive them,

"There were four of us that identified as queer, something other than straight, right. And the messages I got from them were, ‘Don’t tell this certain person, don’t tell that certain person,’ and that was good and bad because it provided me this sort of like safe space . . . but it contributed to sort of a culture of silence."

In addition to the negative emotional implications student-athletes experienced, there were also several positive comments athletes made about their transition into collegiate athletics. One student-athlete spoke about how her involvement with swimming was inevitably what contributed to her staying at the college. “I really like the people on my team and so they kept me involved, kept me inspired to keep swimming, and thus swimming meant staying at this school.” Another athlete commented on the importance of feeling as though her membership to the team closely represented that of the support one would receive from a family,
"A lot of what the team stressed was that we were a family, and that in and of itself ended up being a positive stressor in that you are new to this school and you have all this stuff going on and no matter what you have a group of twenty-two people, twenty-four, twenty-eight people who you can turn to who are in the pool with you every day."

One student-athlete spoke only to the positive experiences she had with athletics, commenting that if it were not for her involvement with sport, she was uncertain how her transition to college would have turned out.

**Cognitive Impact of Athletic Stressors**

In addition to both the positive and negative emotional experiences student-athletes spoke of, they were also challenged to deal with various cognitive implications that impacted their lives in a number of different ways. Two athletes spoke about how their lack of sleep caused them to experience difficulty focusing during class. “I had a hard time staying awake in my classes, for sure, like always, always, always, which would clearly effect my ability to absorb the material.”

Another commented on the implications of wanting to please her coach,

"So it started with team expectations and the stress of wanting to do good for the team and then realizing how much I had to please the Coach. Then, from wanting to please the Coach I put a lot of stress on myself to be better and it started affecting my academics because I literally could not catch up on sleep."

A third student-athlete commented on the primacy that athletics played in her life and how she found it difficult to think or concentrate about other things because of her concern over her responsibilities and role with crew,

"So I was thinking about crew 24/7 and I couldn’t help it. I hated it because I knew that it was crew that was consuming me and couldn’t help me focus on other things. So I hated the fact that I could only think about crew but the more I did to not think about crew, the more I felt guilty that I wasn’t thinking about crew because I should have been doing all of these other things. It became a vicious cycle that kind of became inescapable."
Another athlete commented on her trouble with focusing,

"I guess I did have trouble focusing, but not so much on just focusing on specific things, just sort of buckling down into one thing, you’re mind’s wandering somewhere else while you should be doing your homework. Or during practice you are thinking, ‘Oh I should have written that essay last night.’"

Lastly, one student-athlete reported struggles with her procrastination,

"I’m not going to do my homework. So academically I did fine but I wasn’t as focused, or I wasn’t as, I didn’t have as good time management. I procrastinated a lot more out of season, so it turned out fine, but I just procrastinated a lot.

Aside from the negative reports student-athletes made about the cognitive implications their experiences with athletics caused them, they also spoke to some of the positive results that were gained from their involvement with athletics,

"I think if anything it was less stressful being on a team because it was one time during the day, six, five days a week practicing, and then meets on Saturdays, that I was not focusing on school and just really had the time to relax . . . give my brain time to shut off . . . and it forced me to have very good time management. I actually had a lot more stress and problems once we ended the season."

Additionally, another student-athlete spoke about her frustration with not being able to play as much as she had originally anticipated during her first year, commenting that she found outlets to deal with that stress in a healthy way,

"If anything it may have been a good thing because I talked about it with a lot of my friends outside of field hockey and I got to be really good friends with some of the other people on the team. It made me really step outside of myself and to try and understand it from a different perspective because I had originally just been really frustrated."

As one can see, participation in collegiate sport is coupled with both positive and negative cognitive experiences, sometimes supporting the student-athlete to cope with the stresses of athletics and at other times causing impairments in their functioning.
**Coping Strategies**

In one’s best efforts to combat these emotional and cognitive implications, student-athletes commented on utilizing the following strategies to cope with various stressors related to athletics. One student-athlete spoke about how she utilized food as a strategy for coping with stress,

"The negative is a short list. I would say that I was eating a lot, eating a lot, like gained beyond the freshmen 15 . . . I think I would say that I gained maybe 30-35lbs. in like 15 months, maybe 12. I was binge drinking and doing lots of drugs. But the positive coping strategies would be using that safe space, that enclave, as well as the Counseling Center. I was also on the phone a lot with people from back home, especially like adult figures in my life."

Another commented on how swimming helped her to control her weight,

"Like I swim a lot, and probably one of the reasons that I swim and I know that a lot of girls on the team swim because it's an easy way to control your weight. And it literally will not allow you to gain weight at all, and like I know a lot of people who use swimming to control their weight, and like I don't do it to control my weight, but it's nice in swim season that I can literally eat whatever I want."

Turning to drugs and/or alcohol was another sought-out coping strategy. One student-athlete spoke of her experience with marijuana as a helpful way to relieve the stress and pressure she endured from athletics. “I smoke a lot of weed. And my first year I smoked a lot, like all the time.” Off the record, another student-athlete mentioned her choice of using cocaine and other drugs as an outlet for support from the stress and rigors of both athletics and academics.

Additionally, four student-athletes spoke of their choice to turn to their teammates for support,

"In my orientation group I met a girl who was also a swimmer and she said let's do this together, it will be great. I said okay, fine, we can try out. So the two of us went to every event the captains held and sometimes we were there and it was really awkward, but it was also a great experience so we went to captains practices and I joined the team and it was definitely the best decision I made since coming to school."

Another athlete spoke about her frustration with not getting as much playing time as she had
originally anticipated and the support she both received and offered to her fellow teammates,

"Even though I didn't get any playing time, which I understood because I was really bad at playing, I still felt really connected to the team and was the best cheerleader on the side. I was always just really encouraging to everyone else and I think in return they all really respected that I stuck with it. So I kind of created that field hockey family my first year."

Additionally, four student-athletes commented that being involved in other extra-curricular activities outside of athletics (i.e. work, orchestra, etc.) helped them cope with increased levels of stress. One student-athlete commented on the positive benefits of exercise and how it helped her to cope with her self-reported depression. Lastly, five of the seven student-athletes commented on having the support of their family as being critical to them surviving the challenges of balancing sport and academics. The findings of various coping strategies employed by Division III female student-athletes appear to acknowledge interviewed participants use of both adaptive and maladaptive methods for coping with stressors pertaining to athletics.

**Summary**

In conclusion, Division III female student-athletes experience unique emotional and cognitive implications. This chapter presented findings of seven semi-structured interviews with female student-athletes from two all-women’s colleges located in New England. Findings highlighted the ways that Division III female student-athletes appeared to be struggling and coping with emotional and cognitive stressors they encountered during their first year of college. Athletes reported various ways that their coping strategies aided them in attempts to contain and regulate emotions. Six out of seven participants felt that their choice to participate on a sports team helped them to find emotional and familial support in their transition to college. The following chapter will compare the findings of this study with the current literature highlighted
in the literature review chapter of this document. The text will discuss the similarities and
differences between normative stressors pertaining to the first year of college verses stressors
more specific to athletics, examining the clinical implications that result. Chapter V will also
address the clinical implications that arise from the findings. Lastly, the following chapter will
discuss the limitations of this study and will address ideas for future research.
Chapter V

Discussion/Conclusion

The objective of this exploratory study was to examine the experiences of Division III female student-athletes during their first year of college. The purpose of this study was to explore whether the stressors pertaining to athletics caused emotional or cognitive clinical implications. This study found that stressors pertaining to athletics do appear to cause both adaptive and maladaptive coping strategies employed by female student-athletes. The study aimed to compare the reported experiences of Division III female student-athletes with findings from previous research and literature that examined the emotional and cognitive experiences of both sexes from various Divisions of intercollegiate competition. This chapter discusses the findings in the following order: key findings, limitations of the study and recommendations for future research, and implications of the findings for clinical practice.

Key Findings

The majority of the findings identified commonalities between the emotional and cognitive implications that first year female student-athletes experienced and their relationship to meeting various diagnostic criteria in the DSM-IV-TR. Findings show that for Division III female student-athletes, stressors pertaining to athletics might impair various emotional and cognitive states. Various impairments to student-athletes emotional states were either visually or vocally discernable (i.e. crying, pressured and tangential speech, restricted range of affect), or stated as noticeable shifts in mood, interest, or level of engagement with sport during the retelling of their story. These findings are corroborated by what previous research (Gaultney,
2010; Jensen, 2003; Lund et al., 2010; Suinn, 2005) has documented as resulting emotional implications from stressors pertaining to athletics.

In addition, various impairments to student-athlete cognitive states were also visually distinguishable (i.e. easily distracted by external stimuli, difficulty recalling certain events from memory), or reported experiences in maintaining focus during class or a lack of motivation to complete homework. Corroboration of these findings has been affirmed by previous research and data (Suinn, 2005; Wilson & Pritchard, 2005; Humphrey et al., 2000). Overall, this study’s findings proved to be consistent with what prior research and data has identified as some of the clinical implications resulting from stressors pertaining to athletics.

There were also several strengths that this study appeared to address that other research had not previously identified. The five carefully constructed interview questions proved helpful in eliciting the necessary information and content to better understand the experiences of Division III female student-athletes. Additionally, researcher biases were kept to a minimum due to the narrative format with how interviews were structured. Unfortunately, the collected sample size was smaller and less diverse than what was originally intended, thus the results of the study appear to be less generalizable and reliable than what larger studies have found that more strongly speak to the oppressive experiences of student-athletes of color and student-athletes who identify as GLBT or questioning. In conclusion, findings illustrated both adaptive and maladaptive ways student-athletes chose to cope with emotional and cognitive implications pertaining to athletics. These results are best understood in what is closely resembled in current literature that identifies how student-athletes are attempting to integrate themselves into the college environment as successfully as possible.
Limitations and Recommendations for Future Research

“When thinking of vulnerable populations, social work theorists, researchers, and practitioners are not likely to think about college athletics” (Gill, 2008, p. 85). Unfortunately, by virtue and ethical focus of the profession, campus mental health professionals consistently overlook the student-athlete population as one rarely in need of clinical attention, often viewing this population as well resourced and supported within the structure and environment of athletics. This inadvertent oversight has proved to be a gap in knowledge and produce limited research on the significance of athletic stressors inherent in the student-athlete subculture. Additionally, most research and literature evaluating student-athletes perceptions of college counseling services and their willingness to seek help appear unfavorable (Ferrante, Etzel, & Lantz, 1996; Storch, Storch, Killiany, & Roberti, 2005; Watson, 2005). “However, for some student-athletes their participation [with athletics] may lead to issues of maladjustment, emotional illness, and psychological distress” causing all the more reason for them to seek support from counseling resources (Watson, 2005, p. 442).

Significant efforts were made by the researcher to recruit a twelve-student sample size. The researcher submitted her project proposal to several Division III colleges throughout New England. All but two denied their interest to participate. Thus, the researcher conducted her study at two Division III colleges and was able to recruit seven student-athletes to share their experiences. The rationale for why there was not a strong interest for participation in this study could be due to a number of reasons. Some of the more applicable reasons could be: discomfort in not knowing what information might be shared, an overwhelming consensus of positive experiences with athletic involvement, lack of time on behalf of the student-athlete and/or college, limited knowledge or insight into the emotional and/or cognitive impact of stressors.
pertaining to athletics, as well as various other inexplicable reasons. Thus, due to the limited number of participants in this study, findings offer more depth and less breadth regarding the commonalities across varied experiences of Division III female student-athletes.

This study examined the experiences of Division III female student-athletes who had been engaged in collegiate athletics during their first year of college. Future studies might seek different specificity regarding the year of involvement or Division of competition within collegiate athletics. The findings of this study suggest that external support and guidance is overwhelmingly imperative to help student-athletes make a healthy and successful transition from high school to college. Future studies might examine head coaches’ experiences with this specific subgroup of student-athletes and the interventions that were utilized in lieu of clinical psychotherapy. Most if not a significant portion of these attitudes can be attributed to a head coach’s experience and/or perception of the counseling profession and whether or not they view the field as a valid and viable resource for themselves or their players.

**Coaches**

Engstrom and Sedlacek’s (1991) research highlighting the prejudicial attitudes student-athletes are often faced with by their non-athlete peers and faculty offered supportive advice for how coaches can better address these concerns. “Student-athletes themselves should be educated to the ‘isms’ they may be facing in the classroom and be supported to confront the dumb jock stereotype employed by their peers” (p. 192). If coaches are more aware of the challenges and stigmas that student-athletes are combating they can position themselves in a more proactive stance, alerting them to inaccurate biases and teaching healthy ways for confronting and stopping prejudicial comments. Another suggestion is for head coaches to both encourage and support their players to explore other roles and identities outside of the student-athlete role. Miller and
Kerr (2003) suggest, “Workshops and other educational initiatives stressing the importance of balance and specifying means of achieving balance may be advantageous” (p. 216). Some of the best candidates to facilitate these educational initiatives and workshops are none other than campus mental health professionals.

**Campus Mental Health Professionals**

Watson’s (2005) research validates the findings from several other studies (Fletcher, Benshoff, & Richburg, 2003; Engstrom & Sedlacek, 1991; Loughran & Etzel, 2008; Wilson & Pritchard, 2005) in that he suggests, “to meet this expectation, counselors and student affairs professionals need to become familiar with the specific challenges student-athletes face, the demands and requirements associated with their sport participation, and the operating structure of the institution’s athletic department” (p. 447). In addition, he supports previous arguments indicating how a lack of familiarity with the athletic subculture can lead to ignorance on part of mental health professionals. There is also value in recognizing the importance of establishing, “A commitment to address institutional racism . . . addressing adverse prejudice toward the many cultures found within the institution” (Engstrom & Sedlacek, 1991, p. 191). Engstrom and Sedlacek (1991) suggest, “The challenge for counselors and advisers, however, is to confront these attitudes and encourage students to think in more open-minded, nonjudgmental ways” (p. 191). One area of concern that college counselors need to remain mindful of when counseling student-athletes is the open-mindedness (or lack thereof) within the athletic subculture for athletes who identify as GLBT or questioning or are in the process of “coming out” to their teammates and/or coach(es). Clinicians should discuss the dynamics of the team and the philosophies of the head coach with the student-athlete, determining together the most safe and appropriate way for them to feel comfortable in disclosing their identity (Loughran &
Institutional oppressions of race and heteronormativity in conjunction with sport-related stressors leave cause and concern for student-athletes to remain susceptible to clinical implications. “By gaining a greater understanding of the multiple systems within which college/university athletes must function, college counselors can more effectively help student-athletes negotiate the many challenges they may face” (Fletcher, Benshoff, & Richburg, 2003, p. 35). Additionally, “College counselors can serve as advocates and can assist athletes to cope with rules, policies, and procedures that are a part of the overall athletic system” (Fletcher, Benshoff, & Richburg, 2003, p. 42). These suggestions in conjunction with joint meetings between coaches and mental health professionals would inevitably create an exchange of valuable information and insight that could lead to an improved understanding and appreciation for the various athletic stressors first year Division III female student-athletes are expected to confront.

**Conclusion**

In conclusion, this study aimed to fill a gap in knowledge about the first year experiences of Division III female student-athletes and the stressors they encounter from their participation in collegiate athletics. It was revealed that several student-athletes who participated in this study did in-fact encounter both emotional and cognitive clinical implications as a result of the stress incurred through their participation with sport. Similarly, it was noted that several student-athletes attributed their desire to attend one of the two colleges used for this study because of the opportunity to continue athletic competition. Many of the participants went as far to state that their “sport family” offered them significant support to help ease their transition into college. Lastly, it was acknowledged on several occasions that many student-athletes did not feel heard or comfortable voicing their frustrations with either their coach of fellow teammates; thus, future
attention should be directed towards creating more safe spaces and attentive coaches who can address the needs our student-athletes are dealing with. In conclusion, this study produces the understanding that there is still a significant amount of research and data needing to be conducted on Division III female student-athletes in order to continue expanding our clinical knowledge and understanding of their vast experiences.
References


50


November 23, 2010

Jennifer Johnson

Dear Jennifer,

Your revised materials have been reviewed and I want to say that I am very impressed by your prompt and careful revisions. You have done a fine job and I know it must have been hard to get a letter requesting so much revision. You have simplified and focused your study and it should produce some very interesting and useful information. We are happy to approve your application. There is one addition I would like you to make. Please tell the potential participants in the Informed Consent what their participation will consist of (one interview and about what, plus some demographics.) Just send us a copy of the Consent when you have done that.

I have only one concern. I really do appreciate your wish to be collaborative and transparent and that you want to send a copy of the interview to your participants. My only concern is for you and what you will be taking on. Transcribing an hour interview is a big job and I know that usually when students do their own transcriptions, they do so selectively, transcribing only that material that is salient to their research. It would be problematic to share a selected version with the participant and I am concerned about you committing to do full detailed transcriptions of 12 to 15 interviews. But, of course, it is up it is up to you.

Please note the following requirements:

Consent Maintaining Data: You must retain all data and other documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished).

Good luck with your project.

Sincerely,

Ann Hartman, D.S.W.
Chair, Human Subjects Review Committee
TO: Jennifer Johnson  
Counseling Services,  

FROM: Nancy Marshall  
IRB Chair  

SUBJECT: Exemption of "What are the athletic stressors and clinical implications experienced by first year Division III female student-athletes? An exploratory study"  

DATE: March 23, 2011  

Your proposed protocol "What are the athletic stressors and clinical implications experienced by first year Division III female student-athletes? An exploratory study" is exempt from human subjects protections review by the [redacted] IRB, under §46.101 b, (2) "Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior." Please note that protocols that have been granted exemption from [redacted] IRB Review may still be subjected to review mandated by study sites, schools, or collaborating institutions.

[Signature]

cc: Andrew Shennan, Provost and Dean [redacted]  
Amick Mansfield, Office of Institutional Research  
Andrea Gordon, IRB Administrator
Greetings Student-Athlete!

I am writing to let you know about an exciting research study that is being conducted here at (Name of College)!

In an effort to reach out to our student-athletes and gain a better understanding of the athletic stressors you encountered during your first year here, a social work intern from Smith College’s School for Social Work is looking to conduct qualitative research for her master social work thesis. She is exploring the emotional and cognitive impacts of athletic stressors experienced by Division III female student-athletes during their first year of college and looking at the ways in which they coped. She will be recruiting twelve student-athletes to participate in one 50-minute narrative interview.

If you are a 2nd, 3rd, or 4th year student-athlete and would like to find out more information about this study, please contact Jennifer Johnson at jajohnso@smith.edu. She can also be reached directly at 413-585-2839.

Participation in this study is entirely voluntary and by no means an expectation of myself, your coach(es), or fellow teammates!

Go (College Mascot)!

(College Athletic Director)
ATTENTION STUDENT-ATHLETES!!!

* Are you a 2\textsuperscript{nd}, 3\textsuperscript{rd}, or 4\textsuperscript{th} year female student-athlete?

* Are you interested in sharing some of your first year athletic experiences?

If you answered YES to the first two questions, please consider signing up to be interviewed . . .

Interviews are designed to explore the athletic stressors first year female student-athletes experience.

For further information please contact
Jennifer Johnson, Researcher &
MSW Intern at Smith Counseling Services,
@ 413-585-2839 or jajohnso@smith.edu.
APPENDIX D

Dear Student-Athlete:

I would like to begin by introducing myself; my name is Jennifer Johnson and I am a master’s student enrolled in Smith College’s School for Social Work graduate program. During the 2010-2011 academic school year I will be conducting a study exploring the athletic stressors encountered by various Division III female student-athletes. I am requesting your participation for one 50-minute interview exploring how stressors related to athletics impacted you emotionally and cognitively during your first year of school and how you were able to cope. Prior to the interview I will ask several demographic identifiers that will allow me to locate you, the student, more appropriately in the research. The demographic identifiers are: age/year in school, race, sport, years playing sport, and major.

Eligibility requirements for participation in this study are as follows:

- must be between the ages of 18-22yrs.
- must be registered as a full-time student
- must be a full-time member of a Varsity Athletic Team
- must be fluent in English
- must be willing to talk openly and honestly about the athletic stressors encountered during your first year as a student-athlete

Participation in this study is entirely voluntary and by no means is an expectation of your coach, fellow teammates or the Athletics Department. Possible risks affiliated with involvement in this study are any anxiety and/or pain related to personal information revealed during this study. If any identified or unidentified risk or stress is incurred during the interview process or after completion of the interview, I strongly encourage you to contact your College or University’s Counseling Services. Benefits associated with involvement in this study are to gain a new perspective and/or insight into the athletic stressors you encountered during your first year as a student-athlete.

Information you provide during your interview will remain entirely confidential. The researcher will hold gathered data for up to three years as required by Federal regulations.

Again, I would like to state that participation in this study is entirely voluntary and by no means an expectation of your coach, the athletic department, or the University/College. You are welcome to withdraw from the study at any time prior to April 1, 2011. Should you have any concerns about your rights or any aspect of this study, please feel encouraged to immediately contact researcher Jennifer Johnson directly at Smith College Counseling Services at (413) 585-2839.
YOUR SIGNATURE INDICATES THAT YOU HAVE READ AND UNDERSTAND THE
ABOVE INFORMATION AND THAT YOU HAVE HAD THE OPPORTUNITY TO ASK
QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS
AND THAT YOU AGREE TO PARTICIPATE IN THE STUDY.

________________________________________________________________________
(Participant Signature) __________________________ Date

________________________________________________________________________
(Researcher Signature) __________________________ Date

Researcher contact info:
Jennifer Johnson
Social Work Intern
Smith College Counseling Services
69 Paradise Road
Northampton, MA 01063
413-585-2839 (work)
jajohnso@smith.edu

PLEASE KEEP A COPY OF THIS FORM FOR YOUR OWN RECORDS.

THANK YOU FOR YOUR TIME AND PARTICIPATION IN THIS STUDY👋
APPENDIX E

Student-Athlete Demographic Questionnaire

Any and all information collected on this questionnaire will be used to support the analysis and publication of collected research findings. Please be as open and honest as possible. If there is a question that you do not feel comfortable answering you are welcome to skip it.

1) Please select an interview code name.

2) Please identify your age and year in school.

3) Please identify your race.

4) Please identify what sport you play.

5) Please identify the number of years you have played your sport?

6) Please identify your major.
APPENDIX F

Guided Interview Questions

1) Tell me your story of being a first year student-athlete.

2) What were some of the athletic stressors you encountered? (i.e. pressure from self/coaches/teammates/parents, time management/travel, etc.)

3) How did these stressors impact you emotionally? (i.e. sadness, frustration, anger, fear, etc.)

4) How did these stressors impact you cognitively? (i.e. focus/attention, perceptions, etc.)

5) How did you cope?