Enhancing the Sport Counseling Specialty: A Call for a Unified Identity

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Athletes represent a unique population with a legitimate need for counseling services; yet, counselors have done little to define and promote sport counseling. This paper represents a call to counselors, educators, and researchers to advocate for a rigorous sport counseling specialization and clarified professional identity. Counselors need to identify required competencies, teaching guidelines, and ethical codes to provide optimal mental health services to athletes and effectively co-exist among other professionals in sport. The current state of mental health services for athletes, the potential for counselors to provide unique contributions to mental health in sport, and actionable steps regarding advocacy and research are discussed.

Keywords: sport counseling, professional identity, advocacy, athletes, mental health

Athletes represent a considerable segment of the American population. As of 2016, 40% of youth aged 6 to 12 participated in team sports, a 3% increase from 2015 (Rosenwald, 2016). Recent surveys show that 8 million high school students play sports (National Federation of State High School Associations, 2015), about 525,000 participate at the collegiate level (National Collegiate Athletic Association [NCAA], 2017a), and more than 11,800 are considered elite, professional athletes (Bureau of Labor Statistics, 2014). Over the past several years, researchers have recognized that athlete mental health concerns often go largely unaddressed (Ferrante & Etzel, 2009; Nattiv, Puffer, & Green, 1997).

Athletes at every level are often perceived to be privileged and idolized for their physical prowess; however, this perception leaves them especially vulnerable to be missed when it comes to mental health concerns. In fact, as a population, athletes are described as "at-risk" of experiencing a multitude of mental health concerns. Researchers have demonstrated that athletes are susceptible to alcohol abuse (B. E. Miller, Miller, Verhegge, Linville, & Pumariega, 2002), lower levels of wellness than non-athletes (Watson & Kissinger, 2007), risky behaviors (Nattiv et al., 1997), depression (Nixdorf, Frank, Hautzinger, & Beckmann, 2013; Storch, Storch, Killiany, & Roberti, 2005; Yang et al., 2007), social anxiety (Storch et al., 2005), eating disorders (Currie & Morse, 2005), and aggression (Benedict & Yaeger, 1998), among other mental health issues. Many of these mental health concerns may result from the demands and pressures experienced by athletes. For example, some athletes have been found to over-train, which may result in depression, decreased self-esteem, or emotional instability (Raglin & Wilson, 2000). Furthermore, athletes are less likely to seek professional help than their non-athlete counterparts for mental health concerns (López & Levy, 2013; Watson, 2005). Given the growth of sport from youth to adulthood and the challenges to mental health inherent in sport participation, mental health professionals can provide support to athletes that is currently lacking. However, in order to deliver optimal care, mental health professionals must commit themselves to fully understanding the athlete experience.

Counselors are in a position to provide unique, culturally responsive mental health services to athletes; however, the profession's presence in sport is limited due to a poorly defined professional identity and a lack of understanding of the unique skill set counselors possess. A lack of empirically derived competencies, teaching guidelines, and ethical considerations must be addressed if sport counselors hope to have a greater presence in sport. Additionally, competition with sport psychologists,

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who primarily address athletic performance optimization and are currently far more integrated into athlete culture, may be a barrier for counselors. However, because sport psychologists primarily educate athletes on mental skills for performance optimization and counselors directly address mental health concerns, there is room for these professionals to work together to address the overall wellness and performance needs of athletes.

The purpose of this paper is to discuss the current state of mental health services provided to athletes and to identify and address the potential barriers for counselors who wish to work in sport. In addition, the authors will provide a brief history of a vision for an integrated sport counseling specialty, gaps in counselor competence and identity necessary to establish sport counseling among widely recognized professions in sport, and suggestions for researchers, practitioners, and advocates to ensure a future for the sport counseling specialty.

The Evolution of Mental Health Services in Sport

The unique challenges of athletes were first identified in the early 1970s by a group of college counselors that would later form the National Association for Academic Advisors of Athletics (N4A; National Association of Academic and Student-Athlete Development Professionals, 2017). Their commitment to encouraging student athlete academic achievement led to an expansion of their initiative beyond academics and a moniker representative of their current mission (the National Association of Academic and Student-Athlete Development Professionals). N4A's impact is experienced by over 40,000 athletes annually, as the organization was integral in the development of the NCAA's CHAMPS/Life Skills (now NCAA Life Skills) program. N4A and the NCAA Life Skills program define their commitment as one that impacts athlete academic achievement, athletic performance, and personal well-being. Although there is little doubt that these programs positively impact athletes, their focus is not specific to mental health. In fact, until the early 2010s, sport organizations had done little advocacy for athletes experiencing mental health challenges. In 2013, the National Athletic Training Association (NATA) made a call for mental health practitioners to help increase mental health awareness within athletics organizations (Neal et al., 2013). NATA published recommendations for athletic trainers, who are considered the "first responders" to both physical and mental health (Burnsed, 2013a), to develop a collaborative plan to recognize and refer student athletes experiencing psychological concerns to the appropriate mental health professionals. In doing so, NATA catalyzed a long overdue shift in the philosophy and attention of stakeholders invested in the overall well-being of athletes. Soon thereafter, the NCAA (2014) recruited a Mental Health Task Force to demonstrate substantial commitment to the prioritization of mental health concerns experienced by student athletes. This task force is committed to working with coaches, medical providers, and student athletes to address the stigma commonly associated with mental health issues and how to break through barriers to mental health access (Burnsed, 2013b). Despite the positive goals the NCAA aims to achieve, counselors have yet to be represented on this task force.

Similar to these shifts at the collegiate level, professional organizations have made some strides toward recognizing the mental health needs of their athletes. For example, the National Football League (NFL)-affiliated Player Engagement Division currently provides active players with the "NFL Life Line." The NFL Life Line is a crisis hotline for current and former NFL players that offers independent, confidential support (NFL Life Line, 2016). The actions of NATA, the NCAA, and the NFL represent a significant investment in athlete mental health that had previously been missing from the history of health considerations in sport. Recent emphasis on addressing athlete mental health issues marks a necessary and exciting opportunity for the counseling profession; yet, sport psychologists currently dominate this work, despite noted differences in focus. In order to

become part of the solution to addressing the mental health needs of athletes at all levels, counselors must prioritize advocacy for athlete mental health and be able to competently describe how their involvement in sport will benefit athletes across the lifespan. A first step for counselors is to better understand the current mental health services that exist for athletes.

The majority of individualized attention to psychologically related services offered to athletes (both collegiate and professional) has historically been provided by practitioners of sport psychology. Two primary organizations exist within the sport psychology profession: the Association for Applied Sport Psychology (AASP) and American Psychological Association (APA) Division 47. AASP certifies master's-level "consultants" who display competence in kinesiology and psychology to educate athletes on the role of psychological factors in sport performance and teach mental skills that athletes can utilize within and beyond the context of their sport (AASP, 2017). In contrast, APA refers to sport psychology as a specialization within the general practice of psychology for doctoral-level psychologists (APA, 2017). Clinical sport psychologists with proficiency through Division 47 provide clinical interventions for eating disorders, substance use, grief, depression, sexual identity issues, aggression, career transitions, and more (APA, 2017). Practical, organizational, and philosophical differences between these two primary organizations have challenged the sport counseling specialty to establish a unique identity (Aoyagi, Portenga, Poczwardowski, Cohen, & Statler, 2012). Both AASP and Division 47 identify performance optimization as a primary responsibility of sport psychologists, though licensed psychologists with the Division 47 sport psychology proficiency claim specialized knowledge in clinical and counseling issues with athletes and biobehavioral bases of sport and exercise. As a result, athletes seeking mental health services are likely to receive services from sport psychologists with disparate levels of education, varying degrees of competence, and significant differences in their goals for treatment.

This lack of potential continuity of services, coupled with the unique contributions of counseling in sport, marks an opportunity for counselors to become a major resource among athletes. Counselors can address the current discrepancy in services by approaching athlete mental health concerns from a bottom-up, rather than top-down, approach. Counselors can utilize their strength-based, wellness-oriented philosophy to prioritize mental health needs over performance in efforts to enhance performance through improving overall wellness, rather than the reverse. Specialty training in sport can create a more streamlined set of competencies and standards that fall within the general counseling guidelines, but still cater to the unique needs of athletes. Acknowledging the limitations of sport counseling's history and its current status may encourage clarification of an identity, development of competencies and standards, and recognition of the important contributions that counseling can bring to the culture of athletics.

Sport Counseling: Past and Present

The idea of a sport counseling specialty is hardly new. In 1985, the Counselors of Tomorrow Interest Network of the Association for Counselor Education and Supervision (ACES) described a number of potential counseling specializations for exploration in their publication, *Imagine: A Visionary Model for the Counselors of Tomorrow* (Nejedlo, Arredondo, & Benjamin, 1985). This publication included a brief section that defined "athletic counseling" and listed associated skills (e.g., counseling, goal setting) and knowledge bases (e.g., NCAA regulations, group facilitation) necessary for practice (Nejedlo et al., 1985). Researchers and educators have since heralded the document as the foundation for defining sport counseling and the treatment of athletes. However, the purpose of this publication was not to establish fundamental principles and standards, but to outline trends, future work environments, and specialty roles in a number of different areas of counseling (Arredondo & Lewis, 2001). The authors did not intend for this list of knowledge bases and skills to serve as a rigorously developed set of

competencies for counseling athletes. The intent was to provide a primer for future considerations in sport counseling. The *Imagine* publication does promote an apparent commitment to a wellness orientation with athletes; however, it serves as the first brick in a foundation for counselors to stand upon, not a jumping-off point for pedagogy and practice.

Hinkle (1989a, 1989b) continued to push for an established sport counseling specialty in papers presented at the Southeastern Psychological Association and Southern ACES. Hinkle also established the ACES Sports Counseling Interest Network in 1992, and the first meeting of the group was held at the American Counseling Association conference in Baltimore (J. S. Hinkle, personal communication, November 13, 2017). In two separate publications, Hinkle (1994) and Petitpas, Buntrock, Van Raalte, and Brewer (1995) made similar arguments that sport counselors must focus on the developmental and emotional aspects of the individual rather than performance optimization and mental skills training. Hinkle (1994) continued by discussing integrated treatment for athletes that included sport psychology, counseling, and developmental and educational programming, highlighting the unique contribution of each profession and the importance of taking a team approach to fully address the diverse needs of athletes. In addition, Hinkle discussed how sport counselors may work with clinical issues, career and life planning, programs for children, and a research agenda.

Though little formal evidence exists, several hurdles have impacted forward progress in the sport counseling arena. For example, there is anecdotal evidence that counselors may view athletes as a population unworthy of services. When asked why G. M. Miller and Wooten's (1995) sport counseling proposal to the Council for Accreditation of Counseling and Related Educational Programs (CACREP) was never adopted, H. R. Wooten shared, "It appeared that working with athletes was a little 'boutique' for most counselors as athletes continued to be seen as privileged" (personal communication, May 27, 2014). Poor visibility among other health professionals working in sport, few opportunities for supervised internships due to a lack of licensed professionals working in sport, limited counseling research with athlete populations, and minimal commitment to athlete mental health until recent years all may have had an effect on the pace at which sport counseling has advanced. Despite counseling researchers' and advocates' efforts to move sport counseling forward, more than 20 years later, counselors remain committed to the descriptors of the *Imagine* publication, but need clarity in professional identity and service provision.

At present, counselors who desire specialized knowledge in working with athletes may be confused by the way that the specialty is being defined and marketed. For example, athletic counseling, is a term used to market academic programs that prepare students for AASP certification and employment in applied sport psychology. Graduates of these programs are not counselors; rather, they meet criteria necessary to be recognized as a Certified Consultant of the Association for Applied Sport Psychology (CC-AASP). A CC-AASP is recognized as an individual trained to enhance athletic performance through mental skills training (AASP, 2017), but it is not a credential that prepares individuals to provide counseling to athletes. A CC-AASP does not participate in many of the typical responsibilities of counselors, including the diagnosis of mental health disorders, substance abuse counseling, and marital or family counseling (AASP, 2017). Counseling certificate programs also utilize the athletic counseling moniker to market their specialized curriculum to licensed counselors, suggesting these programs see a benefit in providing additional training in athletics to individuals already trained as counselors. This model recognizes that the foundational knowledge and skills essential to licensed counselors are important regardless of population or setting. Thus, specialized training related to working in athletics in addition to the core training of licensed counselors may be the best way to maintain cohesion within the counseling profession while still providing athletes with the specialized services they need. Unfortunately, confusion among athletes, coaches, administrators,

and other professionals exists because there is a lack of significant knowledge of sport and mental health, which may be the result of a lack of a clear model within the mental health professions about what sport counseling should look like and the distinctive role sports counselors can have when working with athletes. We believe that a commitment to establishing a clearer sport counseling identity would distinguish sport counseling programs like those at Springfield College, California University of Pennsylvania, and Adler University from other programs and would provide enhanced opportunities for graduates wanting to work in athletics.

Implications and Future Directions for Sport Counseling Researchers and Practitioners

Counselors must consider the question: "If the need for sport counselors exists, why haven't they proliferated among sport organizations?" This question is not easily answered without significant inquiry; still, there is evidence that begins to tell the story. Certainly, the ubiquity of a stigma against mental health in athletics has historically inspired hesitation to seek help (Brewer, Van Raalte, Petitpas, Bachman, & Weinhold, 1998). In fact, counselors are no strangers to this stigma. Historically, individuals have hesitated to seek assistance for mental health concerns due to the societal stigma mental health carries. Over the years, education and awareness efforts have decreased mental health stigma; however, the profession of counseling has continued to struggle with identifying itself as a profession distinct from other mental health professions (Remley & Herlihy, 2016). To mitigate this struggle, counselors have worked tirelessly to educate and advocate for the professional identity of counselors. In doing so, counselors have utilized Nugent's (1980) guidelines for identifying a mature profession to gain professional distinction (Remley & Herlihy, 2016). These guidelines include having a clearly defined role and scope of practice, offering unique services, having specialized knowledge and skills, having a code of ethics, obtaining legal rights to offer services through licensure and certification, and having an ability to monitor professional practice (Nugent, 1980). In order to achieve these criteria, some members of the profession promote viewing counseling as the predominant profession with specialty areas that continue to support the primary profession (Remley & Herlihy, 2016). As one of the potential specialties, the area of sport counseling can learn from the progress the primary profession of counseling has accomplished. Utilizing the parallels present in the journey of the counseling profession as an example, sport counseling also can develop a mature identity within the counseling profession. Despite this area's history and obstacles to proliferation, there are many ways that counselors can play an active role in building the sport counseling specialty.

Counselors interested in working with athletes must focus on the development of a comprehensively developed identity. Sport counseling lacks dedicated documentation of the behaviors that practitioners perform. The values and beliefs that distinguish sport counseling from related professions need to be identified. At minimum, the development of competencies, teaching and practice guidelines, and ethical codes are necessary to establish an identity that is separate but compatible with existing services for athletes, while still remaining true to the overall counseling profession. As advocates of a sport counseling specialization begin to take concrete steps toward promoting professional identity, practitioners may be better able to market themselves to stakeholders and find opportunities to begin meeting the mental health needs of athletes.

The 20/20 Vision for the Future of Counseling (20/20; Kaplan & Gladding, 2011) marks an important step in the establishment of a clear and succinct philosophy representative of all counselors. The 20/20 research team used Delphi methodology, an approach to structuring and organizing experts to come to consensus on an area of incomplete knowledge (Powell, 2003), to invite leaders in counseling to determine an updated, more appropriate definition to clarify the profession's identity (Kaplan & Gladding, 2011). In an effort to unify as one counseling profession, counselors advocating for a

distinct sport counseling specialty must consider 20/20 as an opportunity to enhance its professional identity. The development of a disparate or duplicated area would result in further fragmentation. Ultimately, the authors believe that a sport counseling specialty would be best defined by starting with our already existing 20/20 philosophy: "a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals" (Kaplan, Tarvydas, & Gladding, 2014, p. 366). Further, 20/20 may serve as an important launching pad from which sport counseling advocates can begin to stake out their domain.

A first step in the establishment of the sport counseling specialty is the rigorous development of competencies that are germane to the practice of working with athletes. Competencies, knowledge, skills, and attributes that represent professional qualifications necessary for effective practice may help sport counselors understand and communicate their identity. A lack of an empirically derived set of sport counseling competencies limits sport counselors' ability to establish their identity and expertise. Researchers should consider the use of Delphi methodology to determine knowledge, skills, and attributes necessary to treat athlete mental health needs at the highest level. Delphi has been performed effectively to outline guidelines for competence in other areas of counselor education (Wester & Borders, 2014), providing evidence for its potential effectiveness in establishing sport counseling competencies. Future considerations for sport counseling competencies may include understanding the demands of the athletic experience, privacy concerns associated with athletic settings, the role of physiology in sport, the influence of competitive environments on mental health, sport culture, the importance of building relationships with athletes and associated individuals (e.g., coaches, athletic trainers, administrators), and additional athlete-specific issues. Researchers might consider querying counselors in practice with athletes, instructors teaching sport counseling courses in counselor education programs, clinical and applied sport psychologists, athletes, and other relevant parties in sport to establish specific areas of competence necessary for sport counselors.

Leaders in sport counseling must also revisit and revise G. M. Miller and Wooten's (1995) proposed teaching guidelines published in the *Journal of Counseling & Development* in 1995. G. M. Miller and Wooten cited Nejedlo et al.'s (1985) aforementioned publication and the Association for the Advancement of Applied Sport Psychology (now AASP) as foundational influences on curriculum development. The curriculum was meant to be integrated with the common core and clinical experiences required by CACREP to provide training standards necessary for practice in sport counseling. The 1995 teaching guidelines were ultimately published, but a plan for their adoption was never established. G. M. Miller and Wooten's publication serves as an important step toward the integration of sport counseling and counselor education that needs to be addressed more fully. A foundation of researched and well-reasoned competencies will eventually give way to curricular guidelines to anchor and clarify sport counseling identity, practice, and ethics.

The adoption of a new code of ethics may not be necessary; however, there are special circumstances for counselors to consider when working with athletes and sports organizations. For example, ethical standards related to confidentiality and relationships with other professionals can apply to working with athletes, coaches, and other athletic staff; however, more explicit statements related to exceptions to confidentiality and how to work effectively on behalf of the athlete while still respecting a referral from a coach may be helpful for counselors working in athletic settings. Sport counselors may find it prudent to learn from sport psychologists, who typically navigate similar work environments. According to sport psychologists Etzel and Watson (2007), several ethical challenges exist that may present themselves on a daily basis.

One primary ethical challenge that sport counselors may face is determining who their client is

when working with individual athletes on a professional or university team. Athletic departments responsible for paying for mental health services, as well as coaches and support staff, may assume that they should be made aware of an athlete's mental health status. Etzel and Watson (2007) pointed out that athletes are perceived by their managers as controlled investments; there is an expectation of being informed and in control. Ethical guidelines must be made clear for sport counselors to negotiate such challenging situations. Additional challenges include navigating multiple roles (e.g., counselor, team consultant, advisor to coaches), impromptu consultations that occur outside of the counseling session, NCAA and professional rules and regulations, and the likely possibility that other parties will notice an athlete seeking the professional's services if housed in a university or team setting, among countless other potential dual relationships. The establishment of competencies, training guidelines, and ethical standards that apply specifically to counselor–athlete and counselor–team relationships may appear to be a daunting task. Counselors and counselor educators interested in sport must collaborate and advocate for a strongly anchored position in athletics by committing to the development of these foundational elements of sport counseling practice.

Counselors must acknowledge existing and potential outlets for collaboration if sport counseling is to evolve. The ACES Sports Counseling Interest Network, started by Hinkle in 1992, provides a space for counselors interested in discussing present challenges and supports to the growth of sport counseling. Utilization of this medium for collaboration on future research and presentations is vital to the health and expansion of this specialty. Counselors must consider the importance of offering psychoeducational workshops, connecting athletes to mentorship, and developing other organizational supports for athletes in need. These efforts will help to rightly justify counselors' push for professional inclusion in sporting contexts. An early step will be to normalize the existence of sport counselors among other professionals advocating for improvements to athlete mental health. Counselor membership on the NCAA Mental Health Task Force is a necessary step to becoming a more widely known and respected entity. As sport counselors become more mainstream and accepted professionals in sport, licensed counselors could provide opportunities to counselors-in-training who require supervised internships before starting their careers as sport counselors. Without active networks for collaboration, counselors remain isolated and perhaps less likely to catalyze change.

Developing these professional relationships is critical to gaining entry and contributing to change in sport. Collaborations with organizations committed to athlete health could encourage other like-minded organizations to consider the expertise of counselors. For example, the Institute to Promote Athlete Health and Wellness (IPAHW) at the University of North Carolina at Greensboro, in collaboration with Prevention Strategies, LLC, is an organization committed to the improvement of athlete health and wellness through behavioral intervention programs, policy making, evidence-based training, and intervention evaluation. IPAHW has collaborated with the NCAA Sport Science Institute to ensure that student athletes have access to "myPlaybook: The Freshman Experience," a catalog of web-based trainings that facilitate behavior change in student athletes across topics like: social norms related to alcohol and drug use, bystander intervention, mental health, time management, hazing, sleep wellness, and sport nutrition (IPAHW, 2017; J. J. Milroy, personal communication, October 3, 2017). Additionally, IPAHW and the NCAA Sport Science Institute are rolling out a new sexual violence prevention course in response to the NCAA's new policy that requires coaches, student athletes, and administrators to receive sexual violence prevention education (NCAA, 2017a). Counselors have significant training and expertise that may enhance the work of these organizations advocating for health promotion among athlete populations.

Sport counselors must aim to publish athlete mental health research and seek grant funding for experimental research to further establish this specialty. Though relatively new itself, sport

psychology has established several journals that address both performance-oriented (e.g., Journal of Applied Sport Psychology) and clinical (e.g., Journal of Clinical Sport Psychology) issues in sport that have yet to be fully explored by counseling researchers. A solidly established sport counselor identity may lead to the eventuality of a sport counseling journal; however, there is a current lack of leadership committed to this task. As the foundational elements detailed above are established to move sport counseling forward, a journal will become a necessity for researchers to expand their knowledge of athlete mental health needs and counselor interventions. Sport counseling researchers publishing in counseling and related journals may need to consider opportunities to fund experimental pilots and larger scale projects. Opportunities for grant funding in sport, although few, are available and range in size and scope. The National Institutes of Health has committed significant funding to the diagnosis of chronic traumatic encephalopathy, a progressive, degenerative brain disease diagnosed at a high rate among deceased athletes of the NFL (Diagnose CTE, 2017). The Center for Healthy African American Men through Partnerships (2017) has expressed interest in funding research on head trauma in athletes. The NCAA annually supports researchers with pilot funding for alcohol abuse intervention and innovative projects designed to enhance student athlete well-being (NCAA, 2017b). Counseling researchers have not procured funding through these opportunities.

Conclusion

More than ever, Myers, Sweeney, and White's (2002) assertions that counselors must establish their professional identity, enhance their public image, and develop strong interprofessional, collaborative networks remain both relevant and necessary. Counselors currently attempting to break into the safeguarded culture of athletics may struggle to establish credibility and communicate a unified identity. Currently, counselors in sport have a small foundation to stand upon when discussing the specialization of their services to athletes and athletic staffs. The gaps to be filled are clearly labeled and ready to be addressed. The future of sport counseling requires bolstering the literature that outlines its professional development. Counselors involved in sport need to develop relevant research initiatives, obtain funding, and pilot experimental studies that show evidence of improved mental health outcomes with athletes. The marketability of a sport counselor relies on the ability to demonstrate effectiveness with athletes and collaborate with the professional fields that currently saturate sporting contexts. The prospect of a thriving sport counseling specialty is within the counseling profession's reach. Counselors must now cultivate a sport counseling identity that clearly projects their viability, marketability, and potential for positively influencing athlete mental health.

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