



"Gonna Mess with Your Head": The Role of Mental Health in the Lived Experiences of Black Male Football College Athletes

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Black college athletes are at an elevated risk of mental health struggles, and yet, have not received the same attention in the literature as their White counterparts. Cognitive-motivational-relational theory of emotion was used as the theoretical foundation to examine the role of mental health in Black college athletes. Through a phenomenological approach, this qualitative study sought to understand the views of Black college athletes regarding the extent to which mental health impacts their lives. Specifically, this study addressed the question: How do Black male NCAA Division I football college athletes describe the role of mental health within their lives? Eight Black football college athletes at an NCAA Division I power five university agreed to participate in this study. The data emerged into two major themes: stress (subthemes: stress, injury, and family) and "We don't need it!" (subthemes: support and performance). The results suggest the need for athletic department to offer stress management programs to support this specific college athlete population.

Keywords: Black college athletes, culture, football, mental health, race

College is demanding; it can foster opportunities to cultivate self-actualization, or it can generate a stressful, isolating, and stigmatized environment, which can adversely impact mental health and wellbeing. Approximately, 50% of college students indicated their overall mental health was below average and over 50% suffered explicitly from anxiety (College Stats, 2018). Among college athletes, 80% felt overwhelmed by student responsibilities at some point in college, with 30% struggling with coursework induced by mental health issues. Nonetheless, 40% of college students failed to seek health for their mental health issues (College Stats, 2018). College students report feelings of anxiety most frequently, followed by stress, depression, and suicidal ideation (Levines et al., 2017). Unsurprisingly, higher education magnifies pre-existing mental health issues such as depression and anxiety (Furr et al., 2001).

Psychological distress affects college athletes in a multitude of ways, such as sport-related stress, acclimation to a new living environment, binge drinking, risky behaviors, injuries, and eating disorders (Bruner et al., 2008; Gulliver et al., 2012; Nattiv et al., 1997; Noblet et al., 2003; Smith et al., 1990; Sundgot-Borgen, 1994; Sundgot-Borgen, & Torstveit, 2004; Wetherhill & Fromme, 2007). Additionally, increased academic pressures, longer playing seasons, pressure from coaches to win, and the commercialization of college athletics profoundly impacts college athletes' mental health (Brown, 2016). Conflicting demands of academics and athletics cause college athletes to have limited time for academic and career planning, which potentially diminishes their ability for a successful transition and may cause overwhelming amounts of stress (Bjornsen & Dinkle, 2017; Stokowski et al., 2019).

Black male college athletes, in particular, have been mistreated, misguided, stigmatized, and isolated at the universities they attend (Beamon, 2014; Cooper, 2019). Often Black college athletes are marginalized within non-athletic campus settings. Yet, enthusiastically included while participating in revenue generation activities for a Division I athletic team (Cooper, 2019; Hawkins, 2010). As a highly visible racial minority, Black college athletes, especially the top performers, bear the unreasonable burden of outsiders using them as a representative for their entire race on college campuses (Campbell, 2019; Cooper, 2019).

The majority of barriers in seeking mental health service (i.e., stigma, toughness, community, cultural context) identified by Black male college athletes were to adhere to expectations of other people, such as their coaches, teammates, family, and community (Wilkerson et al., 2020). Individuals who continuously encounter racism, discrimination, and oppression are predisposed to experiencing mental health issues (Pieterse et al., 2012). As such, Black college athletes are at an elevated risk of mental health struggles (see Castaldelli-Maia et al., 2019).

Wilkerson et al. (2020) study focused on Black football college athletes' barriers to seeking mental health services. It is important to note, Wilkerson et al. (2020) inquiry concentrated on external obstacles, such as societal expectations and the lack of information, regarding seeking mental health treatment. The participants in Wilkerson et al. (2020) study revealed that pursuing mental health services or even discussing mental health was viewed as a weakness, symbolizing the instability and stigmas often associated with mental health. The present study strives to expand upon Wilkerson et al. (2020) study by addressing the internalized factors that may influence the lived experiences of Black male football college athletes. Therefore, this study centers on investigating Black male college athletes' mental health perceptions. Specifically, this study was guided by the following research question: How do

Black male NCAA Division I football college athletes describe the role of mental health within their lives? To address this issue, we will first review the current research on mental health, college athletes and Black athletes more specifically. We then complete a phenomenological inquiry to better understand Black college athletes' views and experience with mental health. This has the potential to both add to the literature about mental health as well as provides information for collegiate athletic departments to better support and serve Black athletes.

Literature Review

Mental Health

Mental disorders account for the most common cause of disability within youth and young adults in the United States (World Health Organization, 2001; 2005). Statistics estimate upwards of 15 – 20% of adolescents and young adults suffer from a psychological disorder (World Health Organization, 2001; 2005). Data suggests that 70% of all mental illnesses transpire prior to age 25 (Kessler et al., 2005). Mental health conditions not treated during their onset can negatively impact relationships, wellbeing, social development, and overall health (McEwan et al., 2007). In the twentieth century, mental health care dramatically increased due to empirical breakthroughs such as medication and political awareness and infirmity of mental health illness. Within the last century, mental health has consumed as much as 12% of national health budgets for many countries (Singh, 2003).

Issues such as poverty and low socioeconomic status have shown a direct correlation with mental health illness and psychological disorders (Lund et al., 2010). Similarly, mental health and substance abuse disorders are among the leading causes of disability, and the number is expected to continue to increase (Murray & Lopez, 1996). Family background, culture, and environment can all influence an individual's emotional, social, and biological development. Moreover, an unstable environment can contribute to stress for an individual and is directly related to physical and mental health (Taylor et al., 2004). Whether in adolescence or adulthood, traumatic events can cause severe and ongoing mental health issues, including posttraumatic stress disorder (Taylor et al., 2004). According to Jennings (2004), 90% of all US mental health patients had at least one bout with trauma in their lives. Mental health illness can often be identified in adolescents as anxiety, depression, mood disorder, eating disorders, substance abuse, personality disorder, and psychosis (Paus et al., 2008). As a result, adverse mental health will affect interactions with others and overall daily functioning (e.g., Kansky & Diener, 2017).

Mental Health in College Athletes. Higher education institutions have been known to trigger or escalate students' pre-existing mental and physical health issues (Furr et al., 2001). In addition, college athletes face vast pressures and disadvantages, experiencing a 71% increased likelihood of dropping out within their first year compared to their non-athlete counterparts (Pratt et al., 2017). This increase may be attributed to lack of accessible support services, a top indicator for poor educational and athletic experiences (Horton, 2011).

Time demands on college athletes increase as money continues to pour into big-time college sports (Navarro et al., 2020; Rubin & Moses, 2017). For example, new conference alignments increased travel requirements for many programs (Navarro et al., 2020). The continual growth of television revenue has come with warfare against college athlete time for non-sport related activities, such as academic responsibilities, which led to issues with

depression and anxiety (Sutcliffe & Greenberger, 2020). NCAA rules require teams to take one day off a week during the traditional playing season; however, scheduled days off do not always equate to relaxation in the hypercompetitive world of college sports (Brauer et al., 2019; Navarro et al., 2020). For example, the overwhelming expectation for coaches to win has made many coaches reluctant to give their teams a day off. As such, many teams travel on their days off, taking advantage of an NCAA mandate that does not count travel time as part of the 20-hour restriction (Navarro et al., 2020).

Athletic events, specifically mid-week competitions, frequently stimulate stress on the college athlete population due to travel, missing class, and competition. These issues produce a direct weight on psychological wellbeing (Dubuc-Charbonneau et al., 2014). These time constraints and restrictions may cause problems in the classroom. Horton (2011) found Black male college athletes only earned credit for 72% of credit hours they attempted, which is less than all other races. Despite the time, energy, and effort invested in academics through educationally effective practices, racially marginalized individuals still underperformed compared to their White counterparts (Greene et al., 2008).

Athletic injury has been found as a source of stress among college athletes (Pettersen & Olson, 2017). In addition to the physical pain of an injury, the emotional stress from a number of sport related outcomes such as loss of fitness or skill development opportunities, loss of team-based activities to more individual rehabilitation time, or time spent as a substitute can all have a negative impact on the athlete's emotional wellbeing. Additional stress may be felt by an individual athlete who experiences the weight of their team's reduced performance on their shoulders (Olmedilla et al., 2018), and thus, seek to return to play too quickly. Males in particular tend to present higher levels of anxiety than females when they experience these added pressures (Olmedilla et al., 2018), lending further evidence that when addressing stress and wellness, gender differences, in some cases must be recognized.

Barriers for College Athletes. Literature concerning college athletes' pursuit and use of professional treatment for mental health issues does not produce much insight into the general concern of why college athletes are not seeking professional mental health services (Moreland et al., 2018). College athletes may be willing to pursue mental health services or counseling; however, many personal barriers such as relationships, perceptions, and societal factors limit their pursuit. Specifically, social standards and race are direct factors acting as constraints for individuals considering mental health services (Wang et al., 2005).

Many of the obstacles college athletes face when seeking mental health treatment are placed on them by coaches, parents, family, and other individuals within their sports community. Athletic staff members, including coaches, often have negative perceptions of counseling, and mental health services, creating additional barriers (Cutler & Dwyer, 2020; Halterman et al., 2020; Hatteberg, 2020). Similarly, a previous negative experience with mental health specialists hinders college athletes from seeking professional help (Moreland et al., 2018). Accessibility to mental health professionals and the ability to financially obtain care are overarching barriers in place regardless of personal and social perceptions of mental health services (Wang et al., 2005). For example, college athletes and athletic administrations expressed professional mental health services are not sufficiently available or conducive for college athletes on campus (Moore, 2016).

One's race and ethnicity help shape their attitudes, dispositions, comfort levels, and acceptance of mental health care (Alvidrez, 1999; Ojeda & McGuire, 2006). Mental health

stigma is often a deterrent for individuals who require care (Cooper et al., 2003). Trust of care provided for individuals within these communities serves as a barrier for receiving services, as an error in trust or judgment can cause poor help-seeking behavior, lack of willingness to return to the service provider, and adverse medication regimens (Ojeda & Bergstresser, 2008).

Mental Health and Black Communities

Black individuals overpopulate low socioeconomic communities (Gee et al., 2006). Higher rates of depression, anxiety, and stress were found in Black adolescents who resided in impoverished communities with low employment rates (Hurd et al., 2013). Likewise, the adolescents displayed depleted self-assertiveness required to seek help for their mental health issues. It was determined adolescents who lived in poor communities displayed lower levels of social support, which enabled them to isolate themselves from their community support system and ultimately led to adverse mental health.

Racism and discrimination place an immense burden on mental and physical health (Williams et al., 2003). Black individuals with mental health issues face healthcare discrimination, most prominently reported in minoritized communities regardless of mental health status; such discrimination directly and adversely affects mental health (Gee et al., 2006). Moreover, those who continuously encounter racism, discrimination, and oppression are predisposed to dealing with a mental health issue (Pieterse et al., 2012). Marginalized identities, specifically within ethnic, cultural, racial, and socioeconomic minorities, are often not receiving proper treatment regarding their mental health needs (Gee et al., 2006; Williams & Williams-Morris, 2000).

An individual's self-pride and a belief in their culture may help combat mental health issues resulting from discrimination (Mandara et al., 2009). However, home and community dynamics can do more harm than good. One's family or valued society may promote an attitude not conducive to help-seeking behavior. While stressors from one's home life tend to escalate mental health issues in Black females (Burton, 2007; Mandara et al., 2009), discrimination and judgment from their community, such as teachers, causes depression and low self-esteem in Black males (Chavous et al., 2008).

Perceptions of Mental Health

Beliefs, perceptions, and attitudes towards mental illness determine how people engage, advocate for, and provide social support (Kansky & Diener, 2017). Attitudes towards mental illness are cultivated through obtained knowledge, providing direct care for individuals with mental health issues, stereotypes, and media perception (e.g., Hansen et al., 2020; Jung et al., 2017). Societal perceptions and individual attitudes, whether positive or negative, come from many sources such as media (Carter, 2015), religion (Brewer et al., 1998), communities, and culture (Schnittker et al., 2000). Mental illness and mental health receive negative labels that promote a poor perception of individuals affected by mental illness (Angermeyer & Matschinger, 2003). Individuals with mental health illnesses are often seen as dangerous, unstable, and even scary (Angermeyer & Matschinger, 2003; Carter, 2015). Mental illness or mental health depicted on television create a culture of negative stereotypes, biases, and dangerous people (Carter, 2015).

Religion is seen to have a positive impact on mental and physical health (Brewer et al., 1998). Individuals suffering from mental illness who are involved in their religion are seen to have a positive chance of dealing with stressful situations. Religious support services believe positive involvement with their faith will enhance coping, positive health, and wellbeing, as opposed to negative involvement, which can lead to drinking and depression (Brewer et al., 1998).

Overall, society generally feels mental illness continues to increase, and it is now an epidemic in the United States (Borinstein, 1992; Putul et al., 2018). However, enhancements in medications and services equip the general public with more knowledge, which has decreased negative perceptions towards individuals with mental illness (Borinstein, 1992; Soltis-Jarrett et al., 2017). Borinstein (1992) suggested individuals in the United States are more likely to engage in conversation and reveal they are seeking mental health or currently seeing a mental health professional. Public employers now understand the need for mental health services and adequately provide health care that includes mental health provisions (Bhagabati & Kumar 2016; Borinstein, 1992).

Athlete Identity in Black Athletes

As a highly visible racial minority, Black male college athletes carried the unreasonable burden of outsiders using them as a representative for their entire race on college campuses (Campbell, 2019). Black male college athletes are regularly marginalized within non-athletic campus settings, yet warmly incorporated when participating in revenue generation activities within a Division I athletic team (Hawkins, 2010). As such, the intense contrast has led to identity crises that separates the Black male athlete from the non-male Black athlete (Hawkins, 2010).

Campbell (2019) identified five ways a Black male college athlete can be viewed from a skewed lens. Campbell reported Black males who participate in revenue-generating sports, play college basketball, are a Black male college athlete, have celebrity status with the potential to create financial security, and an athlete whose focus is purely athletics (Campbell, 2019). Black male college athletes are viewed as less than their White counterparts in the classroom (Beamon, 2014; Campbell, 2019; DeFrancesco, 1996). As a result, Black male college athletes are grouped in majors, expected to produce less than their white counterparts, and asked to focus on an athletic career as opposed to an overall identity of a college athlete (Campbell, 2019).

Cognitive-Motivational-Relational Theory of Emotion

Guided by Lazarus' (2000, 2006) cognitive-motivational-relational theory (CMRT) of emotion, this study examined the role of mental health in Black college athletes. There are four fundamental processes within the context of CMRT, appraising, coping, relational meaning, and the flow of actions and reactions (Lazarus, 2006). Appraising is the constant evaluation of meaning placed on one's relationships and physical environment. Coping is one's attempt to manage changing demands and subsequent emotions. Relational meaning applies to the emotions that depend on one's interactions with their social environment. The flow of actions and reactions is the reciprocating of interpersonal exchanges where at least one emotion is generated. Lazarus (2006) suggested every emotion is triggered by an appraising thought aligned to one's goals, which happens regardless of a potential impact on said goals. For example, stress develops

from an interaction between an individual and their environment (Leprince et al., 2018). Also, the appraisal and coping process are simultaneously initiated in an individual with the recognition of the emotionally relevant condition (Lazarus, 2006).

Method

Through a phenomenological approach, this qualitative study strives to understand the views of Black college athletes regarding the extent to which mental health impacts their lives. Qualitative research allows us to understand each other and build information off one another's lived experiences (Ravitch & Mittenfelner-Carl, 2016). Moreover, this study utilized a phenomenological approach to examine the role of mental health in Black male Division I football players. Phenomenology allows researchers to explore the subjective, lived experiences related to the phenomenon (Patton, 2015). A phenomenological approach focuses on the essence of a lived experience and the phenomenon's impact on everyday life (Creswell & Poth, 2018; Lester, 1999). The primary researcher expected increasing comprehension surrounding this phenomenon will help Black Division I college athletes navigate the complex role of mental health within their lives. Therefore, the purpose of this study was to gain insight into the phenomena of how Division I Black male football players define the role of mental health in their lives. Specifically, this study addressed the question: how do Black male NCAA Division I football college athletes describe the role of mental health within their lives?

Participants

After obtaining Institutional Review Board approval, the primary researcher recruited participants through purposeful sampling, which allowed for participant selection based on one's accessibility, an established rapport, and a direct connection with the research agenda. Eight Black football college athletes at an NCAA Division I power five university agreed to participate in this study. To conserve reasonable anonymity, each participant was assigned a pseudonym, selected from a Names (n.d.) list of most popular Black American baby names, and the primary researcher removed all identifying markers upon transcription. Two participants played offense, Reginald (18, Freshman) and Javon (21, Junior). The remaining six participants played defense, Tyrell (19, Redshirt Freshman), Jamar (19, Sophomore), Camron (20, Sophomore), Tyree (21, Junior), Jeff (21, Junior), and Braylen (22, Senior). Over the span of one week, the primary researcher conducted each of the interviews in a private office on campus. Each participant engaged in one interview, which ranged between 60 and 90 minutes. Each participant read and signed an informed consent statement and approved digitally recording their interview.

Data Collection

A semi-structured interview guide was utilized as the primary tool for data collection for this phenomenological study, which allowed for a smooth, adaptable interview process. The guide helped ensure that all interviews considered the same general questions while still enabling the participants to describe their lived experiences, perspectives, and attitudes regarding the phenomena in a conversational fashion (Kvale & Brinkman, 2009). Specifically, semi-structured interviews are helpful in phenomenological analysis as they are planned yet flexible interviews designed to obtain descriptions of the participants' lives while allowing themes to emerge

naturally with respect to the meaning of the phenomena (Creswell & Poth, 2018; Kvale & Brinkman, 2009).

Table 1

Participant Demographics

Pseudonym	Age	Eligibility Classification	Position
Braylen	22	Senior	Defense
Camron	20	Sophomore	Defense
Jamar	19	Sophomore	Defense
Javon	21	Junior	Offence
Jeff	21	Junior	Defense
Reginald	18	Freshman	Offence
Tyree	21	Junior	Defense
Tyrell	19	Redshirt Freshman	Defense

Data Analysis

After transcribing each interview, the researchers applied Saldana's (2009) two-cycle coding techniques to analyze the data. Similar to the purpose of a phenomenological research design, two-cycle coding techniques explore the essence of language-based data, which makes it a logical data analysis strategy for phenomenological studies. The first coding cycle consisted of attribute, structural, descriptive, and in vivo coding. Coding refers to the process of reducing data into meaningful pieces (Creswell & Poth, 2018). Attribute coding describes codes regarding the general setting of the interview, such as physical location (Saldana, 2009). Structural coding allowed for the creation of categories that are related to the research question (Namey et al., 2008; Saldana, 2009). Descriptive coding summarizes data with words and succinct phrases (Saldana, 2009). In vivo coding refers to the use of a participant's exact words to name a code. The second cycle of Saldana's (2009) involved the use of pattern coding. Pattern coding groups similarly identified codes from the first cycle of coding together (Creswell & Poth, 2018; Saldana, 2009). Code clusters that surfaced from pattern coding produced insight into the overall explanation of the data, such as the themes and subthemes.

Establishing Trustworthiness

Trustworthiness was established using a pilot study, reflective bracketing, member checking, peer debriefing, and triangulation of coding. The study was piloted with a former Division I Black football college athlete to increase the reliability of interview questions and overall study (Kim, 2011). Reflective bracketing is a strategy utilized within phenomenological research to identify and effectively set aside one's personal experiences with the phenomenon to allow the researcher to center their focus on participant experiences (Creswell & Poth, 2018). To limit the effects of personal biases and minimize the interaction of personal beliefs and participant responses, the primary researcher engaged in a bracketing interview to address researcher reflexivity during this research study to eliminate the presence of personal beliefs, mentality, and personality from intertwining with the participants' responses (Patton, 2015). Member checks were completed by re-examining the interview transcription alongside the

respective participant to gain clarification, verify accuracy, and ensure appropriate representation of the data (Merriam, 2009; Ravitch & Carl, 2016).

Peer debriefing involves using knowledgeable individuals outside the research team as an external check while maintaining the required amenity (Creswell & Poth, 2018). The primary researcher engaged in critical discussions regarding the methodological approach and interpretation of data. Analytical, theoretical triangulation was used to enhance the credibility of the findings through the back and forth between data, theory, and discussions among the research team (Ravitch & Mittenfelner-Carl, 2016). Multiple coders decrease latent biases, in qualitative analysis, by encouraging researchers to discuss their interpretations of the data. Four experienced qualitative researchers coded the data individually before meeting as a team to discuss, compare codes, and ultimately interpret the meaning within the data.

Results

This study explored the perceptions of Black male college athletes regarding mental health. Specifically, how do Black male NCAA Division I football college athletes describe the role of mental health within their lives? The data emerged into two major themes (see Figure 1). The first theme, stress, referred to the mental discomfort related to football, life, and school. Three subthemes were identified under stress- sacrifice, injury, and family. The second subtheme, “We don’t need it!”, indicated that participants did not find mental health as a vital part of their lives. “We don’t need it!” included two subthemes performance and support.

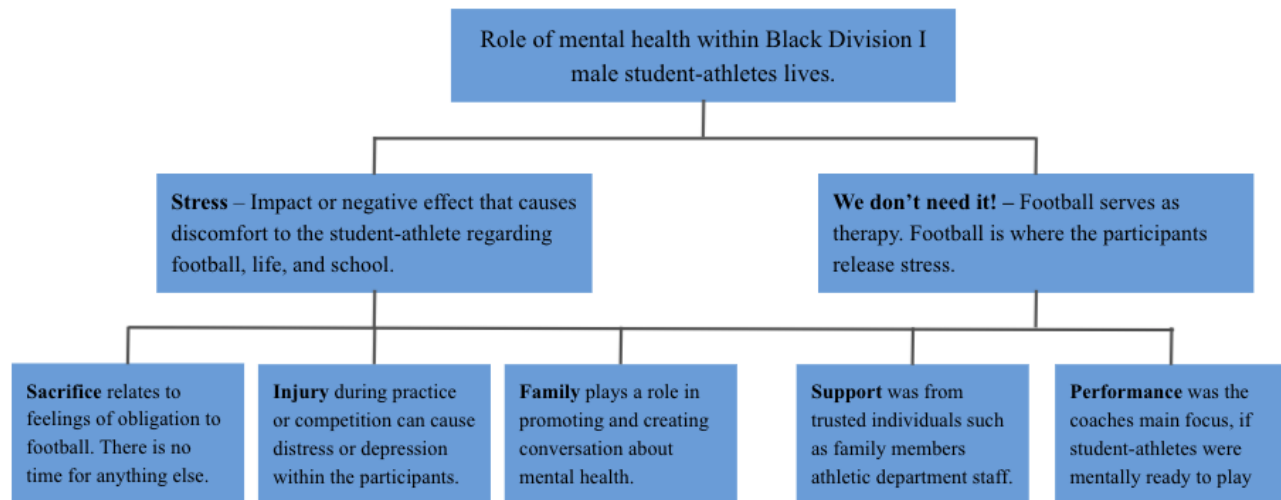


Figure 1.

Flowchart of Major Themes and Subthemes

Note. Themes and subthemes derived from Black Division I football college athlete interviews.

Stress

The participants discussed stress as a common factor within their lives. Stress was characterized as the mental burdens related to football, life, and school. While participants experienced transient stress from academic and athletic requirements, they further expressed lasting, immense stress related to their social identities and backgrounds.

Jeff revealed how in the “beginning of the week [he] was kinda stressed out, just trying to finish up school, but, you know, [a few days later he was] feeling ... good.” Tyree echoed the prevalence of stress within academic obligations. However, he further described the role of stress, stating it “plays a part of [his] life all the time like a death back at home, being up here, coming to school.” Similarly, Camron described how football and expectations related to football create stress, explicitly, “football and stuff like is going to mess with you a lot. Like they gonna mess with your head because you gonna be tired and having to get through stuff. It’s gonna stress you out.”

Similarly, Reginald explained his discomfort being labeled as a football player. Moreover, he firmly disapproved of the way outsiders perceived a particular social identity for all football college athletes, stating, “I dislike probably, um, I don’t know, uh, the social, the social title that we carry as football players, as athletes, as D-1 athletes, period.” Further, Tyrell talked about being evicted and having to move from house to house as a child. Tyrell explained, “me and my mom were just getting evicted like from house to house and then, uh, it came upon a time when we were damn near homeless.”

Sacrifice. Participants spoke candidly about feeling obligated to football. They identified as invested members and actively contributed to their respective Division I football programs. Overall, participants discussed their athletic sacrifice and the issues it evoked. Specifically, sacrifices were divided into two major categories: athletic demands and time constraints.

The highly visible nature of NCAA Division I football increases pressure on college athletes to win. Participants expressed feeling the weight of the athletic department, university, and community placed on their “shoulders” to succeed. For Braylen, that weight made him work harder. He felt others perceived him as the “poster child” for his community, which carried additional pressure, stating, “I feel like I’m not only making it for me, but I am making it for them, too. Like, [to] show people that someone can make it from like any kind of area.”

Participants communicated an internal pressure to benefit from football financially. For example, Javon voiced his belief that current payment from universities to college athletes (i.e., athletic scholarships, apparel, athletic development, tutoring) was in line with their responsibilities. He specified:

If we got paid the amount of money we deserve, because I feel like we don’t get paid enough for as much of the stuff that we do, um, because it’s like always football, football, football, school, football, football, workouts. It’s like, you know what I’m saying, I feel like we don’t get paid enough, and it’s like, on the living side of things, you know, when we are not doing football, it’s like, okay, you know we have the [athletic center], but you know sometimes that is not open on weekends.

Similarly, Braylen communicated a desire to use football for financial security; however, he saw college football as a vehicle to increase his chance of becoming a professional football player and provide financial security for his family. Braylen stated his “family really don’t have a lot of money so making it to the next level would, like, help provide them with money and also, like, for the future generation have a better life.”

Football-related activities were conveyed by participants as the top priority. Jamar detailed how athletic and academic expectations resulted in a “lack of sleep sometimes” as he weighted the importance of sleep with having a “life to live.” Camron talked about the obligation

to meet all expectations as a college athlete, saying, “You just gotta get through it. Really that’s it you just got to make it through.” Javon detailed the time-consuming responsibilities faced by college athletes. He said that football was at the center of “everything, like, just practice, workouts, uh, meetings, everything because pretty much everything is about football because you know that takes so much time and energy out of you, you know, it’s kinda hard to get your schoolwork done.” Camron further discussed a typical day starting with “wake[ing] up at 5:00 [for] 6:00 a.m. lifting weights and running. You not even really awake like that. So, it’s like really you just gotta find a way to get through it.”

Time requirements for football limit time available for academics. Javon believed football expectations hindered his potential for academic success, explaining that he had “dropped math at least three times” before finally completing the class. Similarly, Camron described his workload as a college athlete:

It wore on me a lot. Like especially towards the end, when classes started getting harder and you know we still working out and stuff like that, that’s when really, it’s like either at the beginning of the semester and then at the end of semester that’s really the hardest.

Injury. Seven of the eight participants experienced an injury, causing distress while competing as a Division I college athlete. Injury was characterized as physical damage limiting one’s engagement in practice or competition. Participants detailed both negative and positive mental health outcomes from enduring an injury.

Most participants mentioned the adverse mental health effects such as apathy and depression. Jeff detailed his struggles with lack of interest by lethargically “missing things” and “going to things late” amid his injury. Tyree questioned if the effort required to return was worth remaining a college athlete:

Do I really want to...after I do this little therapy I gotta go back and work my butt off. Then after that I gotta go back to class and after that I gotta go to study hall for another two hours. So, it was so depressing. It was just, it was something like, I don’t know, my mind was just everywhere.

Tyrell reiterated this internal conflict by sharing how he struggled with the team “not winning” as he watched from the sidelines. Explicitly saying his “body’s not feeling good and we not winning. Man, that can make you depressed.”

Conversely, participants described how enduring an injury resulted in resiliency and mental toughness. Tyrell felt he proved to himself that he did not need sport to stay mentally stable:

It made me more resilient because I thought I had already been through like a lot of stuff. Like everything. I thought I had seen everything, but in reality I think it was a test because it was showing me what you gonna do if your athletic ability is taken away before then? How you gonna do that? How you gonna operate? I’ve always had, you know, houses taken away, or not having food in my system, or money, or like something like that. How are you going to feel when that, something that you relied on as far as to get you in the right mental state, to be taken away? You see what I’m saying?

Similarly, Tyree expressed how adhering to external expectations resulted in mental and physical toughness:

It made me more mentally tough. More mentally and physically tough. I feel like mentally after I came back from that game I was hurt, and I was in pain. My wrist swelled up. I didn't know my wrist was fractured or broken or anything. I used to tell my Pops when we was benching, it was hard for me to put pressure on my wrist, and he thought I was complaining as a kid as a man, so it was something I had to suck up.

Family. Participants revealed the vital role their families played in molding and shaping their lives. Family is a cornerstone and sounding block of the Black community. Some participants described family relationships promoted positive mental health, while others described family dynamics as obstacles to their mental wellbeing.

Jamar expressed love and admiration for his godmother, who took him in while his mother and father were incarcerated. After his mother was released, Jeff went back to live with her, but he “just missed living with [his] god-mom,” so he would visit her on the weekends and eventually move back in with her to “keep [his] head right.”

Reginald spoke very highly of his family how his family “stuck together” and his mom’s selflessness:

My mom, my mom, she, uh, she could turn nothing into something, and she don't got a lot at all, don't get me wrong, but like she would take other people around as best as she can. So, I mean like she, you may as well say, you know what I'm saying, she don't really got nothing but at the same time she got enough to take other people around.

Javon discussed being raised by a single mom that “for the most part of my life being raised she was the mom and the dad.” He further expressed that “she wasn't just a mom. She was a coach too.”

Tyrell shared how his family and the struggles they faced caused him to self-evaluate his emotional and mental health. He was “homeless for near a year and a half” and explained that “seeing what my mom went through and seeing what we went through together as a family, that made me a better person. It made me appreciate life even more and made me appreciate others that were going through way worse than me.” Tyrell further explained academics and athletics allowed him to escape emotional hardships, “I guess I would say if I had to look back on my mental health ... what saved me was school and football.”

We Don't Need It

Participants expressed other forms of personal therapy that they readily substituted for mental health treatment. They believed through performance and support, mental health was not a vital issue within their lives, which equated to the major theme “We Don't Need It.” This theme generated the sub-themes performance and support. The performance subtheme was derived from game action, using football as therapy, and how some coaches want their players to be ready at all costs. The support subtheme referred to how participants felt supported on their campus and in their communities.

Performance. Athletics were used to reduce the impacts of stress on the participants. They felt their coaches only cared about performance, so it was not important to devote time to mental health allow “random people in [their] head.” Reginald described football as an escape where he could have fun and relieve stress. Tyrell depicted a similar experience with football “therapy” where he could resort back to and reduce stress. He further stated:

It’s just, it’s just fun, man. Running around, it’s like it’s a stress reliever for me. It’s just like when I’m playing football it’s just like I’m loose, all around the place. It’s like, whatever’s going on off the field, you know I don’t really think about it. I know people say that a lot, and it sounds kinda cliché, but it’s really true though. When you run out there, you so focused on winning, and you so focused on, you know, the next play and what’s going on, you just don’t even think about what’s going on off the field. When you get off the field, that’s when life starts happening again.

Jeff expanded on the stress relief, mentioning:

It’s just a sport that you can just release everything, like oh yeah, everything you going through, just relieve some stress. Uh, I tell some people like, man, when you holding in so much and you, and in off-season when you not hitting people or lifting weights, like lifting weights can only do so much for you, but it’s different when you out there hitting people, though.

Support. The college athlete participants viewed support as a crucial role in their mental health. Support was illustrated by the caring and trusted individuals within the participants’ lives. Moreover, the participants received support from university personnel, family, and friends.

Jeff conveyed comfort in talking to a university Educational Specialist, who helped him with anxiety and depression.

You really experience all that when you get to college, because I mean, with Education Specialist, by them being in ES and them working with like, students like that who got accommodations and stuff, you don’t really figure it out until you get to college. So, some people don’t know they got anxiety or depression until they finally get that test with that, and in high school, you know, people see you like you living fine but you really go on, you know, having these nervous breakdowns and going crazy but you don’t know what the problem is.

Conversely, Javon expressed that he had not heard university personnel mention mental health. Further, he described a desire to support, stating, “I wouldn’t mind being supported a little more.” Instead, he relied on “the people that [are] closest to me, talking to them almost every day, and them getting me through the day. The support and words of encouragement and stayed prayed up.

Like Javon, many participants turned to relationships outside of university staff to receive support. Reginald spoke of support from his family regarding mental health, saying, “my family, we kinda handle those things amongst each other. So, I mean, if I’m going through something.” He further explained he could “definitely talk to my mom about it or my brother about it.”

Camron felt support system at home but struggled with naming support within the university setting.

Tyree revealed he felt most comfortable talking to his friends. He discussed struggles talking to his parents but always felt his “college best friends” were there for him. He further described his relationship with his cousin:

I have my cousin, my best friend. He’s this dude I talk to almost every day. We talk to each other like it’s a regular phone call, like, you know, just, man, like you know it’s just hard. It’s hard. I can open up to him and everything but it’s just a hard subject to talk about just to anybody, just to anybody you been talking to for years. So, it’s just, it’s just things gotta happen and I gotta feel a certain type of way about a day. It’s just like another day, like, when that regular day hits and it’s just like, man, it’s that type of day, like, wow, like I really think about my auntie all day, like, man, I gotta talk to him about it. I gotta let it out. I gotta let it loose.

Discussion

This study investigated the role of mental health within Black Divisions I football college athletes lived experiences. Data analysis revealed two themes detailing a clear picture of how mental health influences their lives: stress and “we don’t need it!” These themes, derived from participant responses, highlighted how participants rationalized enduring persistent adverse mental health. The research question examined how Black male Division I football players viewed the role of mental health in their lives. The first theme, stress, included three subthemes sacrifice, injury, and family. While the second theme, “we don’t need it”, produced performance and support as subthemes.

All participants were fully immersed in the lifestyle of division I football college athletes. Football served as a way for some of these participants to earn a degree, change their families’ financial outlook, and potentially escape tough neighborhoods and communities. Consistent with previous research, participants of this study expressed that football, academics, campus life, socialization, and family create obstacles that make their journeys difficult (Beamon, 2014; Brown, 2016). Physical stress is expected and, in many cases, appropriate in athletic training however, the social pressures of upholding the reputation of the institution or the family for example, coupled with academic expectations can and will often lead to poor performance both academically and athletically (Hamlin et al., 2019). The participants in this study expressed their challenge with balancing their workload as college student athletes causing significant stress.

CMRT indicates fundamental processes influence emotion, including an appraisal of relational meaning, coping, and the flow of actions and reactions (Lazarus, 2006). In this study, participants highly appraised the relational meaning of their role within college athletics. As such, any flow of actions and reactions (i.e., interpersonal conflict, injury, academic ineligibility) that threatens their ability to compete would trigger an emotional reaction (e.g., stress). For example, if an athlete were to struggle with their academic load due to mid-week travel in a game, this places additional stress on their wellbeing as they are both wanting to compete but conflicted with missing class and the pressure of keep up with their grades. Greene et al. (2008) suggested that racially marginalized individuals are already at risk of academically underperforming and as such, this added pressure to perform academically, coupled with the challenges that minority athletes face in trying to balance all the components of their life

certainly would be cause for concern and heightened emotions. To manage negative emotions, participants indicated using support from trusted individuals and their athletic performance as coping mechanisms for the stressors within their lives.

Similar to Leprince et al. (2018), the present study highlights the importance of effective coping mechanisms. College athletes would benefit from stress management programs to provide mentally and emotionally supportive social environments, develop coping strategies to regulate adverse emotions, and enhance relationships with their coaches and teammates within demanding circumstances. Incorporating stress management programs within an athletic department provides an opportunity for character development within the college athlete population.

A number of the athletes discussed the impact that making sacrifices had on their mental health and the feelings of stress. Not only the sacrifice they make for the football program but also in their loss of opportunity to profit financially with outside jobs or in the amount they train and do not get paid for. The participants discussed something as simple as sacrificing sleep due to the high demands placed on them daily. Hamlin et al. (2019) spoke of the lack of sleep athletes experience, particularly near the end of the semester, due to the increased strains of the academic workload and in the case of football players, the physical demands of the late season and playoff schedule. While a reduction in the number of hours an athlete trains may have a negative impact on performance, there are steps that could be taken to help late season athletes continue to perform both athletically and academically at a high level. Dos Santos et al. (2020) discusses the importance of the strength and conditioning coach, particularly in late season training programs, but also in being able to monitor performance, season long endurance, and being able to adapt and adjust training to an exam schedule. By adjusting a few things such as late night or early morning training sessions to allow for optimal sleep patterns, athletes can have a sense of being able to keep up. Something as simple as altering a training schedule with intention may allow the sacrifices of being a college level student athlete to become more manageable physically and emotionally, particularly as the semester or season nears a close.

Similarly, with proper sleep and balanced training, injuries can be reduced. However, having to negotiate injury was a theme that emerged and the discussions around how injury was cause for symptoms of depression as it meant the athletes were not able to continue playing at their best. In many cases, looking forward to the athletic event is what drives them to perform in other areas like academics, but when an athlete is injured, the drive is often focused on rehabilitation, potentially at the expense of other things or in the case of many of these athletes, apathy and depression like symptoms are magnified. One supportive solution to an athlete being in a physical injury state in order to prevent them from being in a mentally injured state is to practice elements of mindfulness training in order to reduce the stress of both injury and the other associated pressures (Pettersen & Olson, 2017). Similarly, as Olmedilla et al. (2018) noted, male athletes tend to present with much higher levels of anxiety as a result of injury than female athletes might. Much of this anxiety can be traced to increased levels of fatigue related to the rehabilitation process, a lack of confidence in their ability to perform upon return to play, and to a lesser extent, a decrease in participation in practice, leading to feelings of being disconnected from the sport or the team (Olmedilla et al., 2018).

Remarkably, even with the clear indications of increased stress, anxiety, depression and apathy, "We don't need it" still emerged as a theme from many of the athletes in this study. This may actually affirm that in some sporting environments, the supportive family of football is enough to help the athletes at least feel as though they have enough coping mechanisms to

handle many of the challenges they face. Interestingly, the very people the athletes feel the stress from; coaches, parents, family and other individuals in the sport community, tend to be the types of individuals the athletes turn to for support in times of need (Fitriana & Xin, 2019). This clearly then creates a conflict, particularly when mental health is part of the discussion as athletes can be challenged with wanting to perform well to please their coach, family and friends and yet if something is not going well, rely on those same individuals to help them through the difficult times. Perhaps continuing to educate parents, coaches and family in being able to identify the mental health signs and symptoms of an athlete would allow the door to open for supportive conversations rather than increasing the stress and anxiety of the athletes. This likely puts an early mental health framework of support in place for athletes to look to for support before the mental health experiences get to sever (Purcell, 2019).

Limitations and Future Research

There are several gaps within the literature in regard to mental health issues within marginalized athlete populations. This paper aimed to describe how Black Division I college athletes from a single university viewed the impact of mental health within their lives. Results may be transferable to similar situations; however, they should not be widely generalized. Future research is needed to examine mental health within racial minority female college athletes, racial minority professional athletes, sexual minority athletes, and other marginalized groups across multiple athletic divisions, conferences, leagues, and sports. The use of in-person interviews allowed the researcher to be known, which maybe have caused participants to feel pressure in answering questions in a socially acceptable manner.

Future research should focus on strategies to limit the potential for response bias (i.e., internet surveys, validated instruments). Understanding athlete perceptions of mental health is vital in understanding overall athlete experience. This sample felt the expectations from athletics and academics compounded on and life in general. Future research is needed to explore the effect of outside burdens on college athlete mental wellbeing. The participants highlighted the impact of an injury on college athletes. As such, the relationship between an injury and adverse mental health symptoms within this population requires further examination.

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