

## **Unrecognized Grief: Counseling Interventions for Injured Student-Athletes**

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*Injured student-athletes often experience loss and grief due to not being able to participate in sports. According to Riebschleger and Cross (2011), when a person suffers a loss that is not understood, recognized, or socially supported, it is identified as disenfranchised or unrecognized grief. This experience of grieving without support or understanding has been described as “sadness in a vacuum” (Jackson, 2003, p. 12). The purpose of this article is to review the concept of unrecognized grief experienced by injured student-athletes, models of the grief process, and provide interventions for counselors working with those clients. Interventions include individual counseling models (e.g., Integrated Model, Life Development Invention Model), group counseling (e.g., Retired Athletes in Transition), advocacy, and collaboration with support services on a college campus (e.g., career and academic advising, learning assistance, disability services, and alcohol/drug prevention programs). Recommendation for ways counselors can gain competency in providing services to student-athletes are provided.*

*Keywords: counseling, unrecognized grief, student-athletes, athletics*

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“It was the day they wanted to avoid the most. The day they realized they were no longer athletes” (Brown et al., 2014, p. 69). Athletic injuries resulting in the discontinuation of involvement in sports can be traumatic for many student-athletes. In these situations, injured student-athletes may encounter a number of significant changes that impact self-concept and the way their life is structured. They may also lose privileges (e.g., access to athletic specific facilities, personnel, social status) they had when participating in their sport. Injured student-athletes may experience feelings of grief that may be unrecognized and unsupported by others (Brown et al. 2014; Putukian et al., 2013).

Grief is a normal response to loss and student-athletes who are injured may exhibit the following symptoms: denial, anger, guilt, and worry, as well as somatic symptoms such as loss of appetite and fatigue (Evans & Hard, 2005). Grief, when unresolved, may inhibit emotional recovery overtime and lead to the reoccurrence of other previously dormant mental health symptomology (Yang et al., 2010). The incongruence between the support provided by professionals, caregivers and/or friends to an injured student-athlete and the emotional support desired can influence whether they will experience unrecognized grief. While some losses may be publicly recognized and grieved (e.g., death of a teammate or coach), the loss of the ability to compete may be misunderstood and dismissed by friends, family members, teachers, student support professionals, and counselors who lack experience as student-athletes, or the understanding of how to address this loss with student-athletes. There is a lack of research regarding unrecognized grief experienced by student-athletes due to a sports injury. According to the National Collegiate Athletic Association (2020, April 8), nearly

500,000 students compete as NCAA athletes and close to 8,000,000 students compete in high school sports in the United States. There is a strong likelihood that counselors will work with a client who is or has been a student-athlete. The purpose of this article is to review the concept of unrecognized grief experienced by injured student-athletes, models of the grief process, and practical strategies for counselors working with clients.

### **Grieving Process**

An understanding of grieving process is important for counselors to be able to attend to the emotional needs of student athletes. Counselors often rely on the Kubler-Ross stages of grief and feel underprepared to work with grieving clients (Blueford & Adams, 2021). The Kubler-Ross model described by Blueford and Adams (2021) discussed the five stages of grief that included denial, anger, bargaining, depression, and acceptance. The five stages listed in the Kubler-Ross model are not linear and may not be fully experienced by all grieving clients. The model provides a framework for counselors to help clients identify their stage of grief while creating a treatment plan focused on moving towards the next stage in the grieving process. While this framework helps counselors with a broad approach, there are other contemporary theories of grief can offer further ways to conceptualize the process.

Klass (2006) outlined a model of grief that involves normalizing the concept of maintaining a connection with the loss and incorporating aspects into current areas of life. This framework helps professionals and clients to understand the grieving process, as a non-linear personal experience does not have to conform to what societal norms deem as appropriate. Injured student-athletes who are grieving the loss of their participation in sports can use this model to enhance the grieving process by working to continue the

bonds with their sport. This could be accomplished by staying active within the sport's culture through attending and watching games, helping to coach or provide support to the team, and/or staying involved with certain aspects of the sport by continuing work outs, stretches, and warm-ups with previous teammates. Supporting clients in continuing bonds after experiencing a loss helps to provide resources to the grieving clients that they can use to function in a healthy and satisfactory way in the present (Klass, 2006).

According to Holland et al. (2006), meaning reconstruction following a loss involves identifying the positives within the loss experience. Finding meaning in bereavement is a main predictor of adjustment to a loss and making sense of a loss is correlated to lower overall complications in the grieving process (Holland et al., 2006). Counselors may consider this model when helping injured student-athletes by helping them to find meaning in the loss of their ability to participate in their sport and assist them in identifying the potential benefits of experiencing this loss (i.e., gaining the role of coaching others, growing one's self-identity). Schut and Stroebe (2010) discussed a dual process model of coping with a loss that involves two classifications of stressors correlated with the grieving process: loss-oriented stressors and restoration-oriented stressors. Loss-orientation stressors pertain to the experience of focusing on and working to process a loss involving grief work. Restoration-orientation stressors involves examining secondary aspects that are the consequences of the grief including attempting to reorient oneself after change and making new life plans after a significant loss (Schut & Stroebe 2010). The Schut and Stroebe (2010) model uses aspects from Cognitive Stress Theory such as emotion-focused coping that helps to manage emotions caused from stress as well as problem-focused coping which is directed at understanding and

working towards changing the problem that is causing the stress. Counselors can assist grieving student-athletes by using this framework to create problem-focused coping strategies with clients that will allow them to handle the stressors that the grief is causing in their unique lives.

Rubin (1999) discussed another two-track model that focuses on both biopsychosocial functioning after a loss and the grieving individual's overall attachment to the loss. This model shows that an individual suffering from a significant loss must understand the ways that the loss has impacted their wellness and functioning while also realizing the importance of continuing the relationship they held with the person or, in the case of the grieving student-athlete, the sport. This multidimensional theory proposed by Rubin (1999) provides a coping, recovery, and resolution plan that emphasizes optimal biological, psychological, emotional, and social functioning throughout the mourning process. Counselors can use this two-track model when working with injured student-athletes to continue their relationship with sports culture while also focusing on improving current functioning within all the dimensions of wellness. Khosravi (2020) suggested using Worden's task-based model that involves four phases to help clients who are suffering from severe bereavement. The four phases that are outlined within Worden's model are first accepting the reality of the significant loss, then working through processing the pain and stressors of the grief, adjusting to a new life that has been changed due to the loss, and finally, identifying an appropriate way to continue the emotional attachment to the loss while maintaining healthy current functioning (Khosravi, 2020). Student-athletes who can no longer participate in the sport that shaped

their identity must work towards processing this change while also finding a new identity and restructuring their life.

### **Unrecognized Grief of Student Athletes**

This concept of unrecognized or disenfranchised grief (Doka, 1989) has been addressed within counseling literature (Protivnak et al., 2020); however, there is a lack of research that addresses unrecognized grief experienced by injured student-athletes.

Student-athletes may be disenfranchised as unrecognized grievers due to the belief of some individuals that they were “lucky” to have had opportunities to play a sport and to receive benefits as student-athletes. This perceived “privileged” population of student-athletes may at times receive less focus in the research (Lanning, 1982). Individuals in a student-athlete’s life may not understand the grief an injury can cause. According to Robson and Walter (2013), disenfranchised grief is not a dualistic concept where the grief is either recognized or not recognized. It is the perception of the individual that determines if they feel that their grief was fully recognized and acknowledged or if their unique emotional experience was misunderstood. The experience of being supported through the grieving process is a person-to-person experience (i.e., between student-athlete and their coach, parent, teammate, and other people who are significant within their life).

The student-coach relationship may also change when a student-athlete is injured. When a student-athlete experiences an injury and is not competing, there is often less time spent with coaching staff and teammates which can result in declining interpersonal support. Some student-athletes may feel ‘cast-off’ by coaches, training staff, or teammates who are no longer involved in their development. The relationship between

the student-athlete and the team may be different if the student-athlete is a high performer on the team or someone who has not yet produced but may have high potential to contribute in the future. A decline in perceived amount of support along with the inability to feel a sense of accomplishment and purpose from competing in sports can cause athletes to feel helpless, damaged, and even worthless at times. Student-athletes may view their team as a “family” (Parcover et al., 2009). When a student-athlete experiences an injury and they are no longer able to compete with their team, there is a disruption in the “family” relationship. Grief is not just about losing the ability to compete, but it is also losing these supportive and beneficial relationships with teammates, coaches, athletic staff, and their community (Parcover et al., 2009). Unresolved mental health symptoms may contribute to the overall loss of social connectedness with peers, causing student-athletes to experience a decline in self-esteem due to this negative self-concept and deterioration of social relationships (Storch et al., 2005). Injured student athletes may utilize unhealthy coping mechanisms - drugs, alcohol, or food to numb their pain or pass the time (Schwarz et al., 2005). A change in support systems can also result in the student-athlete engaging in unhealthy relationships during the post-injury recovery period (Schwarz et al., 2005).

Student-athletes may grieve their loss of identity, loss of physical abilities/health, financial support/scholarships, and relationships with teammates and coaches. Grief may be experienced as a result of the loss of something that a person may consider a part of his or her life and/or was a source of emotional gratification (Engel, 1964). For student-athletes, competing in sports, being considered an athlete, receiving the benefits of being a student-athlete, building relationships with teammates and coaches, and experiencing

appreciation from others can all be considered parts of their life that provided gratification.

Injured student-athletes may experience judgment from peers for being “weak” (e.g., sitting out of practices/games and not pushing through the injury), and they may feel isolated from their social supports. They may also struggle with the loss of their “athletic” body image as they discontinue their structured exercise routine (Armstrong & Oomen-Early, 2009; Schwarz et al., 2005). Specifically for women, Yang et al. (2010) found that injured female student-athletes received less social support than their male peers. Female student-athletes have also been found to have a greater risk for depression and competitive state anxiety (i.e., experiencing symptoms of anxiety due to the demands of the sport being higher than the athlete’s perceived abilities) (Gillham & Gillham, 2014; Yang et al., 2007).

A reemergence of dormant mental health issues may occur in competitive student-athletes such as unhealthy eating attitudes and body image dissatisfaction (Schwarz et al., 2005). When an injury occurs, a student-athlete is often concerned whether their injury will prevent them from being able to continue participation in their sport. Losing the identity of being a student-athlete as well as the outlet of playing a competitive sport can cause these mental health issues to overwhelm student-athletes as they lean on unhealthy mechanisms to cope with their grief. Due to this lack of purpose, feelings of isolation, and a sense of helplessness, student-athletes may be prone to experiencing symptoms of Post-Traumatic Stress Disorder (PTSD) when their ability to participate in sports is prohibited due to injury (Firestone, 2012).



Student-athletes who have sustained a career-altering injury tend to experience the following psychological symptoms: anxiety, decreased self-confidence, lack of concentration, depressive symptoms, and somatic symptoms (Sheinbein, 2016). These psychological effects arising after a traumatic life event, such as a sports-related injury, can severely impact the student-athlete's daily functioning as well as their development toward life goals. However, injured student-athletes may not receive the mental health support post-injury due to the fear of being viewed as emotionally 'weak' by their peers and coaches if they seek counseling services (Lopez & Levy, 2013). Maniar et al. (2001) reported that student-athletes with injuries preferred to seek help from coaches instead of mental health professionals. Similarly, Watson (2006) found that some student-athletes are not comfortable obtaining help outside of the athletic department due to the notion that mental health professionals would not understand the uniqueness of student-athlete concerns, needs, and/or pressures. While student-athletes should recognize the benefits of utilizing counseling services when they are experiencing mental and emotional pain, there is also a responsibility on counselors to be knowledgeable of the interventions appropriate for student-athletes (Lanning, 1982; Watkins, 2005). Understanding the characteristics of student-athletes and the demands of their athletic participation can help mental health counselors build rapport and identify successful interventions that will assist student-athletes to move through the grieving process (Broughton & Neyer, 2001).

### **Counseling Interventions for Student-Athletes**

Counselors can consider several approaches when working with an injured student-athlete who is experiencing grief. Cognitive-Behavioral Therapy (CBT) interventions can be a particularly helpful theoretical approach to use with injured

student-athletes by focusing on restructuring negative cognitions and assisting the client in creating new constructs congruent with the reality of their situation (Rizeanu et al., 2017). CBT techniques that focus on enhancing self-compassion, changing judgmental thinking, and increasing relaxation abilities have helped injured student athletes to better manage stress and anxiety, increase their ability to stay in control and focus on a task, and positively change self-critical thinking (Sheinbein, 2016).

Amos (2021) discussed the importance of counselors utilizing an existential theoretical approach to sports psychology and how to address maladaptive behavior, thought, and emotional patterns that may follow the loss of an athletic career. Gaining knowledge on existential sport psychology and ways to apply the major aspects of this type of psychology (i.e., loss, meaning, isolation, self-identity) to treatment plans with injured student-athletes can be beneficial in the process of helping student-athletes to understand, accept, and move forward from the loss of a sport-centered identity (Amos, 2021).

Counseling interventions that focus on mindfulness and imagery are effective with student-athletes who have sustained an injury (Beauchemin, 2014; Witt, 2015). Interventions that incorporate mindfulness can be helpful by allowing the student-athletes to focus on the experiences of the present moment rather than constantly dwelling on how life was prior to the life-changing sports injury (Beauchemin, 2014; Witt, 2015). Meditative mindfulness interventions work to influence not only student-athletes' abilities to cope with the struggles that occur within their athletic and academic careers, but also their abilities to regulate their emotions in the moment (Beauchemin, 2014).

Heird and Steinfeldt (2013) discussed the usefulness of counselors utilizing Interpersonal Psychotherapy (IPT), to assist with the case conceptualization of an injured student-athlete. The use of IPT strategies can be beneficial due to their brief nature and their overall focus on grief (Heird & Steinfeldt, 2013). The IPT approach involves a structured method where a counselor helps the client focus on the present moment instead of the past and provides education on how to deal with grief and changes in self-concept. These interventions acknowledge the negative feelings that the client is experiencing while also influencing them to stay in the current moment in an organized and encouraging manner (Heird & Steinfeldt, 2013). According to Heird and Steinfeldt (2013), IPT includes several phases of treatment which include the client understanding the diagnosis, agreeing to productive treatment goals, improving on current interpersonal issues in multiple social functioning areas, and reviewing progress made while planning for future maintenance of goals. Within the IPT approach, the focus should be on the person first, rather than a primary focus on the injury or a sport, as the client may be viewed by others as an athlete first in other settings.

Similarly to IPT, it can be beneficial for the counselor to have person-centered techniques as the foundation of their approach to ensure that the injured student-athlete feels that they are the primary focus, and that counseling is not viewed as just an intervention to get them back to competition in their sport. A person-centered approach should focus on empathy, congruence, and unconditional positive regard for the student-athlete. These core conditions of counseling communicate that they have individual worth, whether or not they are playing a sport, and that their situation is understood and their feelings regarding the injury are acknowledged.

There are two models that counselors can use when working with a student-athlete who is grieving their loss of ability to participate in a sport. First, the Integrated Model (IM) is an effective framework that encourages counselors to keep their focus on a student-athlete's reaction to their injury (i.e., negative or irrational thoughts), to rehabilitation, and to recovery (Clement et al., 2015). IM focuses on recognizing and understanding the student-athlete's grief while also examining a positive life view without current participation in a sport. The IM framework addresses the psychosocial challenges that may occur post-injury that have a potential to negatively impact the student-athlete's mental health (e.g., feeling depressed due to lack of social involvement). This model includes a variety of prompting questions that help to assess student-athletes' feelings towards the current process of recovery. The questions address the client's cognitive and emotional responses, behavioral responses, and readiness for return to participate in their sport (Clement et al., 2015). IM provides a framework that supports processing these negative psychosocial changes while focusing on the student-athlete's personal reactions to the process of recovery and treatment.

Another model that has been found effective when working with student-athletes is the Life Development Intervention (LDI) model. The LDI model encourages counselors to focus their interventions on the lifespan and human development perspective while emphasizing the continuous growth and developmental changes of the student-athlete (Danish et al., 1993). An injury can be considered a critical life event that results in physical, social, emotional, and psychological changes for a student-athlete that greatly impact their daily life functioning, their perceived level of support and worth, and/or their view of themselves. According to the LDI model, there are three important

factors to consider when addressing a critical life event: time, duration, and context of the event (Danish et al., 1993). These factors should be considered by counselors who are working with and/or helping student-athletes with life-altering injuries. Danish et al. (1993) discussed how the use of this LDI model can enhance the student-athlete's personal competence by providing the student-athlete with life skills, such as interpersonal and intrapersonal skills. The enhancement of personal competence within the LDI model promotes self-reliance, improves the ability of the client to take part in life planning, and shows the benefits of seeking help and support from others. These life-enhancing skills will help injured student-athletes to cope with the critical life event of a serious sports injury. The LDI model also includes a focus on identifying, creating, and working towards achieving reasonable and productive life goals (Danish et al., 1993). IM and LDI can be used by counselors working with student-athletes who are struggling from a serious injury by helping them to consider their own reactions to their recovery, treatment goals, and life skills to build a positive future.

Group counseling can be a helpful intervention when working with injured student-athletes. A support and skills-based group led by a counselor could provide participants with information about dealing with an injury and transitioning from an active to an inactive role in their sport while providing the injured athletes with support from others who can relate to the physical and emotional issues they are experiencing. Group members could attend on a short-term or long-term basis, dependent upon the severity of the emotional symptoms they are experiencing. Each participant could discuss their grief and work toward developing resiliency behaviors to promote their physical and emotional wellness. Group counseling sessions can give the injured student-athletes a

familiar (i.e., team) environment where they can work through negative symptoms, while also supporting others experiencing similar issues.

Constantine (1995) conducted an eight-session counseling group for female student-athletes who discontinued their participation in collegiate sports and were having difficulties adjusting to the transition. The group, entitled Retired Athletes In Transition (RAIT), combined psychoeducational exercises (e.g., relaxation training, guided imagery, and value clarification activities) and supportive group counseling techniques to assist these athletes who sustained a career-ending injury in coping with the lifestyle and self-identity changes that they were experiencing (Constantine, 1995). Constantine found that the group participants in RAIT reported high levels of satisfaction regarding their group experience and noted that the group was sensitive to the participants' need for support from other former student-athletes. Not only did these student-athletes value the support from those that could relate to what they were experiencing, but they also benefited from the group counseling techniques and resources.

### **Collaboration with Athletics**

The assessment and counseling of student-athletes is most effective if it is provided by a counselor who has connections with athletic departments as well as an understanding of and sensitivity to the characteristics of student-athletes (Birky, 2007). Neal et al. (2013) recommended that counselors connect with athletic departments. Counselors can learn about the unique experiences of student-athletes, advocate on behalf of their clients and serve as a resource for the athletic department. While this collaboration can help counselors understand the issues related to athletics, it can also help the athletic department staff learn more about mental health issues including

psychological signs and symptoms, common stigmas, and possible treatment options. Brown et al. (2014) provided suggestions for athletic trainers, coaches, and team physicians to support the emotional and mental health needs of student-athletes. This included mental health professionals educating athletic staff on common psychological responses to injuries, how to screen for mental health issues, and making mental health resources available to the student-athlete (Brown et al., 2014). Counselors could work with athletic staff to provide relevant knowledge, skills, and strategies to better meet the psychosocial needs of student-athletes before and after an injury (Yang et al., 2010). Providing adequate psychoeducation to student-athletes and athletic staff will ensure that they have opportunities to recognize and support student-athletes who are injured.

Counselors can also help coaches improve their responses to injured student-athletes by helping them and their staff to understand when athletes should be referred to counseling due to mental health concerns. Mental health knowledge should not be confined to the college counseling center and student support professionals across campus should have training in counseling related issues (Protivnak et al., 2013). A proactive approach could involve the athletic department requiring all injured student-athletes to participate in a meeting with a counselor rather than waiting for athletic staff to notice mental health symptoms or for the student-athlete to request counseling. Finch et al. (2001) assessed the course of recovery of injured student-athletes and found that physical health symptoms usually improve around six weeks after an injury, but mental health symptoms continued to persist after the six-week mark. According to Finch et al. (2001), the sports injury recovery and rehabilitation process should largely focus on the

psychological effects of the traumatic event rather than solely working toward physical recovery and returning to the sport.

### **Advocacy and Referral for Support Services**

In addition to providing counseling, it can be helpful for counselors to assist injured student-athletes with finding resources, provide psychoeducation to student-athletes and athletic staff, and educating other staff in methods to assist a student-athlete who may be experiencing unrecognized grief. Counselors can encourage student-athletes to participate in student support services, such as career and academic advising, learning assistance programs, alcohol and drug prevention programs, and accessibility services.

### **Career and Academic Advising**

A referral to Career and Academic Advising can be helpful for the student-athlete to discuss a change in their career goals and is particularly helpful if the student-athlete perceived they had a potential career in professional sports. Career counselors can provide the student-athlete with interests, skills, and values inventories; information on majors; and job outlook statistics in areas of career interest. It is important that student-athletes are aware of career decision-making skills that will help them to adjust to a new direction for their career. Wooten (1994) discussed the importance of counselors utilizing a cognitive decision-making model that involves gaining knowledge about oneself, different occupation routes, decision-making skills, analyzing costs and benefits, and formulating action plans regarding a new career choice. Career counselors provide guidance on these topics that can benefit the student-athlete after their athletic career has concluded.



Adjacent to career services is academic advising. Counselors should also encourage student-athletes to meet with their academic advisors (or school counselors in a k-12 environment) who can discuss options related to continuing in a current major or the consequences (e.g., additional credit hours) of switching majors. Academic advisors are important in monitoring a student's grades and academic performance. It is possible that if the injured student-athlete is no longer on the team and receiving scholarship, then they may lose access to the academic advisors within athletics (e.g., if student-athletes are advised by academic advisors specifically within athletics). The academic advisor could connect the student to a new academic advisor that is utilized by non-student-athletes and/or one that correlates with the student-athlete's new academic plan or major. Additionally, the academic advisor could help the student-athlete navigate the different support services on campus.

### **Learning Assistance Programs**

The symptoms of grief experienced following an injury may result in problems for the student-athlete to meet academic expectations. Counselors should broach a conversation with the client about their academic progress about their class attendance, completing of assignments, and grades. If a student-athlete is struggling academically, a counselor should refer their clients to available learning assistance programs on-campus or in the community. Some student-athletes may have difficulty with time management, as they often had their time structured by athletic staff but must now learn to balance their time on their own. Time management may be even more of a struggle if the injured student-athlete is also involved with additional extracurricular activities and/or must work to pay for college. Counselors can provide recommendations to the student-athletes

regarding the types of conversations to facilitate with administrators, athletic staff, and course instructors so that they can receive the guidance and support.

### **Alcohol, Tobacco, and Other Drug Prevention Programs**

Injuries often result in the student-athlete receiving some sort of medical treatment and prescription pain medication. It is important that counselors recognize any signs of substance abuse. Student-athletes may develop substance use disorders for a variety of reasons: for instance, attempts to self-medicate undiagnosed mental health disorders or efforts to cope with the stress and negative consequences of an injury (Reardon, 2017). According to Reardon (2017), the top three common substances utilized by student-athletes include alcohol, cannabis, and smokeless tobacco. Alcohol is the most overused substance by student-athletes. After sustaining an injury that impairs their athletic career, a student-athlete may turn to unhealthy substances to cope with rising mental health symptoms. It is important to note that in relation to the general college population, student-athletes are more prone to misusing substances, which may be due in part to sports culture (i.e., celebrating victories or consoling themselves after a loss) (Reardon, 2017). Thus, substance use may be a student-athlete's coping mechanism for mental health symptoms such as anxiety, depression, or isolation after suffering an injury that ends their ability to participate in a sport. Counselors can help clients who need to avoid substances or recover from substance abuse to find resources on campus and in the local community regarding alcohol, tobacco, and drug programs. Intentional or unintentional misuse or dependence on prescription pain medication is also a significant concern of student-athletes who were injured and are coping with pain. Counselors can provide interventions, such as education regarding substance use, motivational

interviewing, cognitive behavioral therapy, and relapse prevention techniques that are helpful for those using substances to cope with mental health disorders (Reardon, 2017). Counselors can implement these activities into their counseling sessions with student-athletes who are struggling, while they can also provide outreach to schools and community organizations regarding the topic of recovering from a sports injury while promoting pro-social and healthy coping behaviors.

### **Accessibility Services**

Sports injuries (e.g., broken hand, concussion, etc.) may result in student-athletes requiring temporary assistance from accessibility services (sometimes referred to as disability services) on campus. Academic difficulties, headaches, and dizziness have been found to be the three top-reported symptoms following brain injuries (Meske et al., 2019). Accessibility services for students who have a traumatic brain injury commonly make the following recommendations: a reduction in course load, an increase in task-completion time, quiet testing areas, and the ability to record lectures (Meske et al., 2019). Furthermore, Reardon (2017) discussed the link between concussion injuries and substance use, as athletes who have experienced a concussion may exhibit impaired cognitive functioning, increased disinhibition, and potentially extended intoxicating effects. Educating injured student-athletes on resources and encouraging them to pursue those services to assist with their short-term or long-term disabilities can reduce their anxiety and improve their ability to succeed.

### **Conclusion**

Student-athletes often experience grief due to the discontinuation of their relationships with their teammates, coaches, and peers following an injury that

temporarily or permanently ends their participation in athletics. While injuries and eventual discontinuation of participation in sports are seen as a normal part of most student-athletes' experience, student-athletes often desire to be independent and may be expected to grieve alone.

Counselors can gain competency to work more efficiently with injured student-athletes who are struggling with grief and life changes around the loss of the sport that previously shaped their identity. Other based in a separate profession, Hebard and Lamberson (2017) suggest that sport psychologists and sport psychology organizations (i.e., Association for Applied Sport Psychology) can be helpful resources to gain more resources to work with student-athletes. Counselors can become members of the National Collegiate Athletic Association (NCAA) Mental Health Task Force in order to better collaborate with athletic professionals and gain education on facilitating positive change. It is important that counselors collaborate with professionals in related professions (e.g., sports psychology) in order to gain more information related to counseling athletes and to make strides towards helping sports counseling to be more established in the counseling field (Hebard & Lamberson, 2017).

Further considerations for counselors to gain experience and knowledge working with student-athletes is more clearly defining sports counseling within the profession of counseling, offering psychoeducational programs on sports counseling, identifying mentorship resources to connect student-athletes, and working towards establishing a sports counseling specialty within the field (Hebard & Lamberson 2017). *The ACA Encyclopedia of Counseling* includes the following definition for sports counseling: "A process which attempts to help individuals in maximizing their personal, academic and

athletic potential. This is accomplished through a proactive, growth-oriented approach that incorporates the principles of counseling, career development, movement science, psychology and human development” (May, 2014, para. 5).

There are institutions and organizations that offer programs related to sports counseling. For example, a college in the northeast part of the United States offers a program where counseling students are able to receive a certificate in sports counseling with a focus on working with athletes suffering from mental health symptoms. Within that program, counseling students focus on improving their therapeutic relationships with student athletes while advancing their knowledge of the foundations, contextual dimensions, techniques, and considerations of counseling student-athletes (California University of Pennsylvania, 2021). Similarly, a college in the Midwestern part of the United States offers a Master of Education in counseling with a focus in sports counseling that will enable students to work with student-athletes, within student affairs, or in athletic departments (Salvia, 2021). Counseling students who complete specific coursework at an accredited university that offers a sports-related counseling program would then be able to apply for certification as a Certified Mental Performance Consultant (Association for Applied Sport Psychology, n.d.). While sports counseling masters level certification programs can be an efficient way of gaining knowledge of working with this population, there are not accessible for majority of practicing counselors. The most practical way is to seek out continuing education at workshops online or in-person and seek consultation and supervision from a counsellor with experience working with student-athletes.

This article provided an overview of the concept of unrecognized grief as applied to injured student-athletes, as well as individual, group, and system-wide strategies to help counselors recognize and address the grief experienced by injured student-athletes. Student-athletes who experience an injury are vulnerable to increased negative emotions and unhealthy coping mechanisms, which may result in the exacerbation of mental health concerns. Counselors can assist the recovery processes of injured student-athletes through recognition of loss, counseling interventions, advocacy, and referrals to other professionals to support their continued recovery.

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