

Legislative Commission on Fair Treatment of College Student-Athletes
October 3 Meeting Written Questions
Responses provided by the NCAA Sports Science Institute

The NCAA Sports Science Institute (SSI) was founded in 2013 to foster lifelong physical and mental development of student-athletes. The SSI works collaboratively with the NCAA Committee on Competitive Safeguards and Medical Aspect of Sports (which includes student-athlete representatives) as well as with conferences and NCAA member institutions. The SSI aims to provide college athletes with the best environment for safety, excellence, and wellness through research, education, best practices, and collaboration with member schools, national governing bodies, key medical and youth sport organizations, and the public and private sectors.

1. What mental health and medical services are provided to student-athletes beyond what is accessible to the general student population?

- Importantly, endorsed interassociation best practices do not call for dedicated mental health services reserved only for student-athletes. More important is an established system for referral of student-athletes with mental health issues, and that mental health professionals are accessible to student-athletes when they are needed. These may be mental health professionals who simultaneously serve the general student population.
- More generally, the answer depends on the resource availability of the school and varies significantly by NCAA division.
 - 63% of Division I institutions report having the services of a psychiatrist available to student-athletes. Comparative data are not yet available for DII and DIII.
 - However, only 27% of those schools provide full-time services of a mental health professional dedicated solely to student-athletes.

2. What processes or requirements are currently in place to prevent athletic injuries? For the purposes of this response, items that meet NCAA minimum requirements, such as time limits on athletics-related activity or conditioning, or athletic personnel certification, do not need to be included in the response.

- The NCAA Constitution establishes the Principle of Student-Athlete Well-being, which requires that:
 - Intercollegiate athletics programs shall be conducted in a manner designed to protect and enhance the physical and educational well-being of student-athletes, and;
 - It is the responsibility of each member institution to protect the health of, and provide a safe environment for, each of its participating student-athletes.
- NCAA playing rules across the 24 sponsored NCAA sports contain numerous provisions for which the primary purpose is injury prevention. Relevant examples include, but are not limited to:
 - Protective equipment requirements (e.g., helmets, shoulder pads, mouth guards)
 - Inclement weather policies (e.g., lightning policies)
 - Weight management and weight loss guidelines (wrestling only)
 - Skin check requirements to avoid the spread of skin infection (wrestling only)
 - Leniency in the injury substitution rule to make it easier for a student-athlete to seek medical attention during competition (soccer only)

- Concussion-specific education is required for all student-athletes, coaches, and administrators prior to every season with the purpose of increasing awareness about the signs and symptoms of concussion, as well as the importance of reporting suspected concussion to avoid complications and further injury.
- NCAA drug testing program contributes to a more equitable and safe competitive environment
- Various interassociation recommendations which inform athletic health care delivery practices by athletic trainers, team physicians, and other medical professionals involved in the care of student-athletes at individual member schools. Such recommendations include, but are not limited to:
 - Concussion diagnosis and management
 - Mental health
 - Cardiovascular care
 - Contact in pre-season, in-season, and spring football.
 - Sexual violence prevention and management
 - Substance abuse prevention and intervention

3. What is the process for identification, diagnosis, and treatment when an athlete first presents symptoms of an injury?

- NCAA rules require that each member school designate a team physician (MD or DO), who shall be authorized to oversee the medical services for injuries and illness incidental to participate in intercollegiate athletics.
- The delivery of medical services is the responsibility of the primary athletics health care providers (physicians and athletic trainers) on NCAA member campuses. Athletic trainers and physicians have primary responsibility for the delivery of athletic health care in a manner that is consistent with established standards of care and the laws that govern their respective practices in each state.
- Independent medical care legislation mandates that primary athletics health care providers have unchallengeable, autonomous authority for all medical decision-making.

Questions 4, 5, and 6 do not pertain to the expertise of the Sports Science Institute and thus no response has been provided.