

# HILINSKI'S HOPE FOUNDATION GAME PLANN

IN PARTNERSHIP WITH THE NCAA SPORTS SCIENCE INSTITUTE AND PREVENTION STRATEGIES



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# THE HILINSKI'S HOPE GAME PLAN ORDER OF OPERATIONS

## TRAIN-THE-TRAINER

A training for local mental health professionals with our partner, Prevention Strategies. This training readies each school's mental health professional to be able to facilitate the Mental Health Training (step 4) using the Facilitator Handbook (step 3).

# 2

## TYLER TALK

A conversation with student-athletes hosted by Mark and Kym Hilinski, to honor the life of their son Tyler and discuss the importance of taking care of oneself and ones teammates.

## **FACILITATOR HANDBOOK** This handbook provides a local mental health pro

This handbook provides a local mental health professional with the tools to debrief students after the Tyler Talk and discuss mental health with coaches, athletic directors, and student-athletes at their school or university.

A conversation between the local mental health professional and student-athletes. This training connects students with local resources and discusses common mental health stigmas and solutions.

5 SCORECARD The H3H Scorecard provide

The H3H Scorecard provides a road map for collective action to implement the NCAA Mental Health Best Practices.

#### **ADDITIONAL TRAININGS (OPTIONAL)** Hilinski's Hope partners with mental health organizations suc

Hilinski's Hope partners with mental health organizations such Step Up!, Beyond Happy Faces, and Prevention Strategies, which can be used to complement your Game Plan needs.





Facilitator Handbook

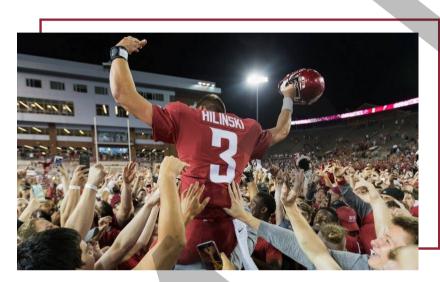






# Part One

Hilinski's Hope Tyler Talk



#### What is the Tyler Talk all about?

As Part I of Hilinski's Hope's involvement at your university, the "H3H Tyler Talk" introduces student-athletes, coaches, and athletics staff to Tyler Hilinski's story. Tyler was a quarterback on the Washington State University football team who died by suicide on January 16, 2018. His story links the life of a vibrant, genuine, and successful young man to the seriousness of mental health stigma and need for improved mental health literacy for everyone involved in collegiate athletics.

Tyler's parents, Mark and Kym, his brothers, Kelly and Ryan, and their extended family and friends have poured themselves into the Hilinski's Hope initiative. They continue to share their love and affection for Tyler through their desire to change a culture of collegiate athletics that often does not prioritize the mental health of student-athletes. Tyler's story, while unique in its own right, is a vehicle for describing the reality enveloping collegiate athletics. Mental well-being and mental illness are not currently as well understood, prioritized, validated, or addressed like physical injuries.

#### At the end of this presentation, student-athletes should...



Be motivated to challenge attitudes of mental health stigma in collegiate athletics



Feel as though they had the opportunity to ask questions about mental health in an open forum



Have a better sense of who you (a licensed mental health professional) are and your role within athletics and the greater campus context



#### Am I the right person for this role?

A group facilitator must critically examine their appropriateness for this role based on their relationship with the audience and the presented material.

#### Eligibility Criteria

In the cases of Hilinski's Hope's Tyler Talk and Team Trainings, we have outlined some criteria that will guide you in determining if you are the right person to facilitate the H3H offerings:





### Features of a Strong Facilitator

#### **Group Facilitator Responsibilities**

- Maintain neutrality and objectivity
- Prioritize comfort, safety, openness, honesty
- Set ground rules for discussion
- Skillfully use facilitation behaviors to catalyze depth of discussion and understanding
- Avoid becoming the focal point of the training. You are the bridge between the speaker and audience.

#### **Group Facilitator Roles**

Group facilitation is both unique and challenging. An effective facilitator can shift between roles and responsibilities seamlessly to support the learning environment. We summarize these roles and responsibilities by diving into the following four features of strong facilitation.





Foundation Focus Logistics



SAFEGUARD

Safety Equal Opportunity Advocacy

MODEL



Empathy Vulnerability Affirmation



CATALYST

Depth Challenge Idea Discovery





# Part Two

Hilinski's Hope Team Training



#### What is the H3H Team Training all about?

Whereas the Tyler Talk aims to heighten the importance of addressing mental health stigma through Tyler's powerful, personal story, the H3H Team Training was designed to result in specific action. This team-level training builds off of the Tyler Talk by making the conversation more personal, specific, and providing opportunity for group engagement. Student-athletes are asked to consider stigma and help-seeking within their own personal frame of reference (i.e. sport, team, gender, athletics program, etc.).

Coaches are involved in the training, as they represent leadership whose personal beliefs, values, and behaviors ultimately shape the team environment. Ultimately, the H3H Team Training was developed to increase student-athlete and coach adoption of mental health help-seeking and support behaviors.



By the end of the team training, student-athletes and their coaches will have determined a unique and authentic way of supporting one another and continuing the conversation about mental health stigma and helpseeking in the future.

Coaches and their student-athletes are involved in a process that helps them:

- Learn about mental health and determine when help-seeking is important
- Identify barriers to mental health help-seeking
- Work with teammates to generate ideas for addressing mental health stigma
- Build confidence in their ability to support teammates who may be struggling with a mental health concern

#### Who should be involved?

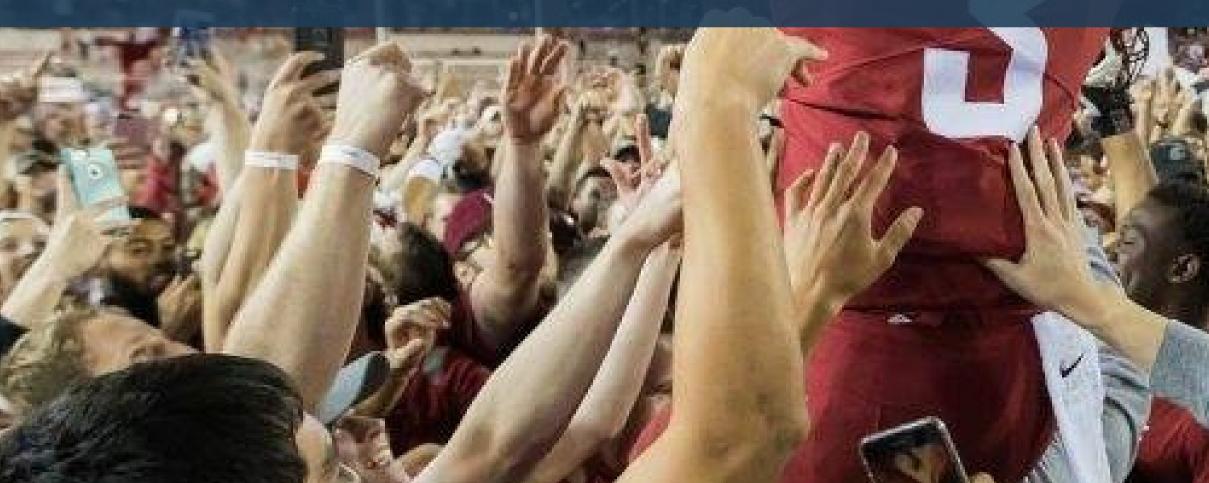
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The H3H Team Training is most suitable for small groups of studentathletes and coaches, and keeping the number of student-athletes to less than 25 will allow for more interaction and engagement. For very large teams (e.g., football, track and field, swimming and diving), consider splitting the team into functional groups representative of natural subgroups within the team context (e.g., offensive/defensive, event groups, or class year).

# HILINSKI'S HOPE TEAM TRAINING

NSW



ILTR ITTI



# MENTAL HEALTH IS

A state of well-being in which the individual realizes [their] own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to [their] community.

World Health Organization, 2005

# **MENTAL HEALTH CONTINUUM**

# HEALTHY **"FUNCTIONING ATHLETE"**

## EMOTIONAL

Happy/content, hopeful, satisfied with life, able to cope with challenges

# **PSYCHOLOGICAL**

Accepts the ups and downs, lives with purpose, has and seeks positive relationships, committed to self-improvement

## SOCIAL

Empathic and caring of others, feels a sense of belonging, contributes positively to their community

# REACTING

"SPRAINED ANKLE"

# EMOTIONAL

Irritable, nervous, worried, more feelings of sadness than before

# PSYCHOLOGICAL

Loss of interest in pleasurable activities, low energy, intrusive thoughts

SOCIAL Decreased social activity with friends

# CHALLENGED **"BROKEN BONE"**

# **PSYCHOLOGICAL**

Experiences feelings of hopelessness, worthlessness, poor/increased sleep; decreased performance

SOCIAL Avoiding social responsibilities, withdrawing from relationships

# EMOTIONAL

Anger, persistent sadness, tearfulness, anxiety

# S U F F E R I N G

**"TORN LIGAMENTS"** 

# EMOTIONAL

Feeling "empty" or "hollow," panic attacks, persistently overwhelmed

# **PSYCHOLOGICAL**

May experience suicidal thoughts, loss of touch with reality, constant fatigue

> SOCIAL **Complete isolation**

H3H Mental Health Continuum influenced by Keyes (2002) and (2005, 2007) Westerhof & Keyes (2010)

# BEHAVIORS

# **REACTING** "SPRAINED ANKLE"

Starting arguments with teammates

Anxiety impacting performance

Trouble getting energized for competitions

Fewer interactions with teammates

Increased likelihood of injury

# **CHALLENGED** "Broken Bone"

Escalated arguments/outbursts with teammates and/or coaches

Intrusive fear of failure impacting ability to participate

Repeated avoidance of team and team function

Clearly diminished performance

Further increased likelihood of injury

H3H Mental Health Continuum influenced by Keyes (2002) and (2005, 2007) Westerhof & Keyes (2010)

# S U F F E R I N G

**"TORN LIGAMENTS"** 

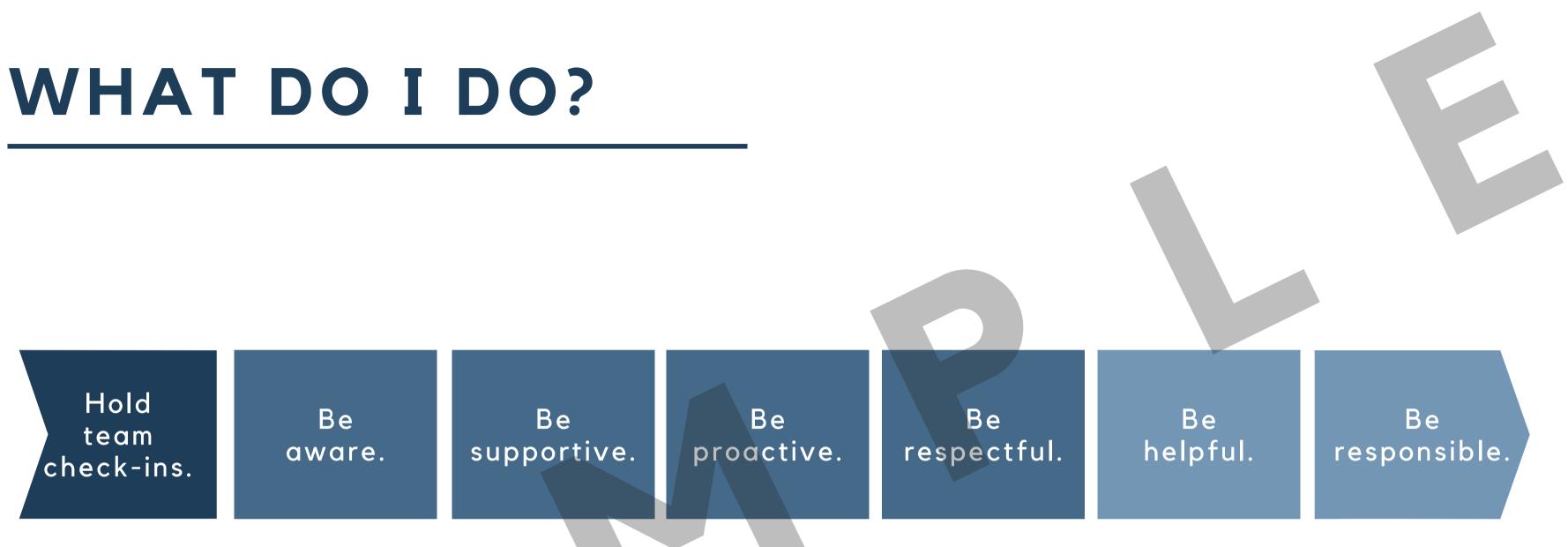
Incapacitated by attendance at team functions

Unable or unwilling to participate

Unresponsive to coach or teammates phone calls, texts, or other outreach

Disclosing suicidal thoughts

A pattern of persistent isolation/avoidance of team and team functions



Make it normal to talk about how you and your teammates are doing.

# **BREAK INTO TWO GROUPS**

# **SCENARIO** 1

Your teammate stops showing up to team meetings and practices. It doesn't appear that they've been leaving their apartment to go to class and they haven't been out with friends. When you've tried to reach out to them, you haven't received a response.

# **SCENARIO 2**

You notice that your teammate has seemed "down" at team functions. In the few times they have spent time with youand teammates outside of team activities, they haven't had as much as fun as usual. They haven't been bringing their normal level of intensity to workouts and coaches have been critical of them in front of the team.



# HILINSKI'S HOPE **SCORECARD**



# Welcome to the Scorecard.

#### What is it?

The H3H Scorecard provides a road map for collective action to implement the NCAA Mental Health Best Practices ("Best Practices").

#### Why is it needed?

The Best Practices are designed to encourage early identification and appropriate care of athletes experiencing mental health challenges.

Every institution will make different decisions about how the Best Practices are implemented (e.g., number of staff, type of education). What is critical is deciding on approaches to implementation that work for your setting your students, your staff, and your resources.

This requires getting all stakeholders together to identify needs and resources, to plan, and to check back in to see how that plan is working, and to make changes as needed. We call this an ongoing process of collective action.

#### What does it involve?

The H3H Scorecard asks, "What is your current commitment to studentathlete mental health and what needs do we have that require action?" not, "Are we in compliance?"

# Appendix A

## QUESTIONS TO ANSWER PRE-MEETING

Recommended approach to data collection:

**Student-athletes and coaches:** On an annual basis share a brief, anonymous, online "climate survey" that asks the questions below and any other questions of interest. We recommend that you also include openended questions that invite feedback about the mental health education, resources, or care they have received or observed at your institution.

Aim to collect data from as many student-athletes and coaches as possible at your institution. Aim to collected from a representative sample of student-athletes at your institution (i.e. your sample reflects the demographics of your athletics program in its entirety).

Make efforts to keep surveys anonymous and do not ask for identifying information when possible. Acknowledge that student-athletes on teams with small rosters may be more reticent to share their perceptions due to concerns about being identified.

Consult with your institution's Institutional Review Board to ensure you are collecting data in a way that is consistent with your institution's ethical requirements. We suggest partnering with your Faculty Athletics Representative or other faculty member at your institutions on this process.



**Mental health practitioner:** A licensed mental healthcare provider who works in or with athletics, in partnership with other athletic medicine staff (e.g., head athletic trainer or team physician) can source responses for the listed questions from existing documentation.

Data should be compiled into a report to be delivered prior to your first interdisciplinary meeting.

Please contact H3H if you need support with your data collection or reporting.

## A1. STUDENT-ATHLETE DATA COLLECTION (LINK)



## A2. COACH DATA COLLECTION (LINK)

("Athletics") refers to your specific athletics program.

## A3. MENTAL HEALTH CARE PROVIDERS AND SPORT MEDICINE STAFF DATA COLLECTION (LINK)

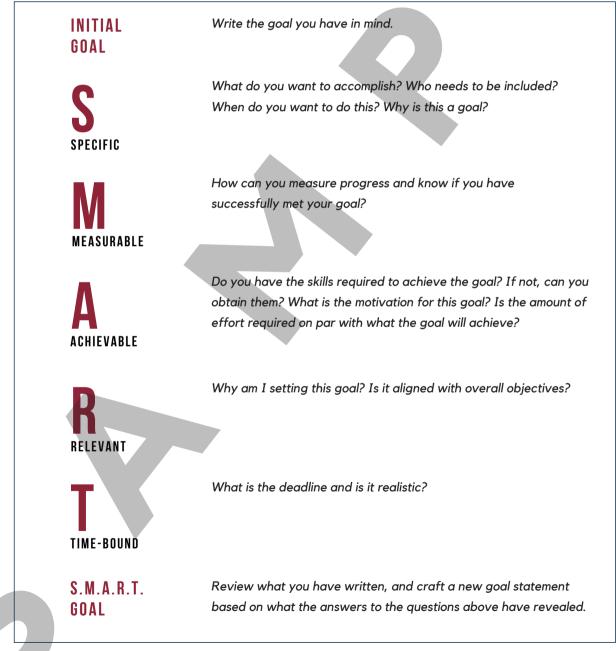
Identify leaders to participate in the following areas if and when applicable: Athletic Training, Physicians, Sports Psychologists, Licensed Mental Health Practitioners employed by athletics, Other professionals involved in health prevention and treatment of student-athletes.



# Appendix C

## S.M.A.R.T. GOAL TEMPLATE

Apply this template to determine action-oriented strategies relevant to aligning with the best practices.



H3H SCORECARD