



July 28, 2022

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[www.ncaa.org](http://www.ncaa.org)

Dr. Lydia Bell  
National Collegiate Athletic Association  
P.O. Box 6222  
Indianapolis, Indiana 46206-6222

Dear Dr. Bell:

I am pleased to inform you that the NCAA Research Review Board (RRB) conducted a Convened Board Review of, and approved, the "NCAA Student-athlete Health and Wellness Study."

The RRB also approved a Waiver of Documentation of Consent for this project.

According to the RRB Standard Operating Procedures, if the study persists beyond one year a continuing review must be scheduled. Therefore, to ensure adherence to the protocol, please forward all required documentation to the RRB Administrator by June 1, 2023 if necessary. The RRB Administrator will issue a reminder for you closer to the deadline.

Please let me know if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Steve Willborn", written in a cursive style.

Steven L. Willborn  
Chair, NCAA Research Review Board

SLW:mm

N a t i o n a l C o l l e g i a t e A t h l e t i c A s s o c i a t i o n

*An association of more than 1,200 members serving the student-athlete*

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## **NCAA RESEARCH PROJECT COVER SHEET**

(Please use this form for all new submissions, resubmissions, and major changes.)

### **SECTION A**

PROJECT TITLE: NCAA Student-Athlete Health and Wellbeing Study

PRINCIPAL INVESTIGATOR NAME: Lydia Bell

EMAIL: lbell@ncaa.org EXTENSION: \_\_\_\_\_

GROUP/DEPARTMENT: NCAA Research

CO-PRINCIPAL INVESTIGATOR NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_ EXTENSION: \_\_\_\_\_

GROUP/DEPARTMENT: \_\_\_\_\_

TODAY'S DATE: 06/20/2022

ANTICIPATED START DATE: 09/01/2022

ANTICIPATED COMPLETION DATE: 08/31/2023

### **SECTION B**

**Proposal.** Attach a detailed summary of the research to be undertaken; i.e., a clear statement of purpose, an indication of the practical application of the results and a statement outlining the importance of this research to the NCAA membership. Include any additional background or rationale pertinent to the request.

### **SECTION D**

**Human Subjects Certification.** If this research involves the use of human subjects, NCAA Research Review Board (RRB) must certify that this project has been reviewed to ensure the protection of human subjects. Please refer to the RRB Standard Operating Procedures should you have questions about the terms or general procedures herein. Consult the, RRB Administrator, Chair, or Vice Chair for more detailed information.

1. Is this a ☒ NEW PROPOSAL;  
☐ RESUBMISSION OF A PROPOSAL NOT PREVIOUSLY REVIEWED BY THE RRB;  
☐ resubmission of a proposal PREVIOUSLY REVIEWED BY THE RRB; OR A  
☐ submission of a MAJOR CHANGE TO AN RRB approved PROPOSAL?

2. Are human subjects involved? ☒ YES ☐ NO

*Human subjects* are defined as a living individual about whom an investigator conducting research obtains (1) data through intervention or interaction with the individual, or (2) identifiable private information.

If **NO** then skip to the end, sign and return the document to the NCAA Research Department.

3. Do you consider this research to involve greater than minimal risk? ☐ YES ☐ NO

"Minimal risk" means that the probability and magnitude of harm or discomfort anticipated in the research are not greater, in and of themselves, than those ordinarily encountered in daily life or during the performance of routine psychological examinations or tests.

4. Are you requesting: (please see the RRB Standard Operating Procedures for definitions)

☐ Exempt Status

☐ Expedited Review

☒ Full Board Review

*NOTE: The Research Review Board will make the final determination as to the level of review necessary for the proposed project.*

**No study can commence prior to RRB approval or waiver determination.**

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**Please sign and date the form: Today's Date:** \_\_\_\_\_

**PRINCIPAL INVESTIGATOR SIGNATURE:** \_\_\_\_\_

## **NCAA STUDENT-ATHLETE HEALTH AND WELLNESS STUDY**

### **Background and Purpose**

Historically, NCAA Research has partnered with faculty athletics representatives (FARs) to gain insight into student-athlete experiences and well-being through a range of national surveys. The tenth iteration of the NCAA Substance Use Study was planned for the 2021-22 academic year, but due to campus closures and ongoing restrictions for in-person gatherings because of the COVID-19 pandemic, the study was postponed for 2022-23. However, during the past year, the Sport Science Institute (SSI) and NCAA Research have identified a need to conduct a more comprehensive student-athlete health and wellness study in that expands beyond the scope of substance use to other areas of physical and mental well-being.

The newly designed comprehensive survey subsumes many of the items from the NCAA Substance Use Study and incorporates a range of well-being items previously used in other NCAA student-athlete survey instruments. The survey includes questions about student-athlete demographics and backgrounds, mental health and peer support, sleep behaviors, weight management and body image, competition and injury history, and substance use experiences. The results of this study will provide NCAA policymakers with data to inform and develop programming and educational initiatives.

### **Methods**

#### **Sampling**

A sample of student-athletes from each NCAA member school will be asked to participate. The sampling plan was devised to achieve an appropriate representation of all NCAA student-athletes while minimizing the burden to institutions. This will be accomplished by asking FARs to survey all student-athletes on between one and three teams selected by the NCAA research staff. The teams surveyed will be determined by a clustered randomized sample (that is, teams are chosen randomly and then all members of those teams are asked to participate). Schools may opt to replace teams only with the assistance of NCAA research staff. Approximately 15 percent of teams within each NCAA championship sport will be asked to participate under this plan. Any institution asked to survey football will only survey that sport due to the typical size of football squads.

#### **Survey Administration (See also attached FAR Directions)**

All surveys will be administered via paper and pencil. No online option will be provided due to the need to better protect participant anonymity than can be guaranteed in an online setting. Once institutions are contacted for participation and sports have been assigned, a letter will be sent to the FAR at each member institution. The letter will ask for the FAR's cooperation in administering the survey and indicate the athletics teams that are to be surveyed. Detailed instructions for administration of the survey will be provided to the FAR, including sample materials to assist with submission to their campus's institutional review board (IRB). These instructions, and the instructions that are printed on the survey form, make it clear to the student-athletes that cooperation in this study is completely voluntary and that all responses will be totally anonymous. The FAR will be instructed to give the survey to all members of a particular team in a classroom-type setting. The FAR will be provided with a pre-addressed, pre-paid envelope into which student-athletes will deposit surveys upon completion. Then, the last student-athlete to complete the survey is asked to seal the envelope and see that it is ready to send to the contracted data vendor (Scantron Corporation). No identifying information about the student-athletes nor the institution will be collected. It is intended that these procedures will reassure student-athletes that the process will be anonymous.

#### **Waiver of Documentation of Consent**

The research team is requesting a waiver of documentation of consent since documented consent forms would provide the only link between the individual subjects and the research study.

## Survey Instrument

The paper survey consists of eight sections: (1) demographics, (2) mental health and peer support, (3) sleep, (4) weight, body image and nutrition, (5) competition and injury, (6) alcohol, tobacco and other drug use, (7) supplement use, (8) support and additional feedback. The survey instrument has been reviewed by various stakeholders, including SSI. The primary topics include:

- Mental health concerns
- Peer, athletics department and campus mental health support
- Attitudes toward seeking mental health services
- Perceived ability to intervene when teammates and peers need help
- Sleep behaviors
- Attitudes toward weight management
- Diet and access to healthy foods
- Sport burnout
- Injuries
- Alcohol, tobacco and other substance use experiences
- Use of supplements
- Desired athletics support

Nearly all survey items have been used in previous studies and were either derived from standard scales or specifically designed for this study by subject matter experts. Many of the mental health questions were previously used in one or more of the NCAA Student-Athlete Well-Being (2020, 2021), Social Environments (2016, 2020), or GOALS (2015, 2019) Studies. The first item on days of restful sleep was used in NCAA Social Environments Studies (2016, 2020). The other sleep items are from the American College Health Association's National College Health Assessment IIC instrument, for which we have permission to replicate. Questions related to weight, body image, food access, youth sport participation and specialization, burnout, illness and pain, concussion history, and injuries were used in one or more GOALS Studies (2010, 2015, 2019). The items on healthy diet, comfort reporting concussion-like symptoms, and COVID-19 infections and lingering symptoms are new and have been reviewed by the SSI. The substance use questions were used in one or more Substance Use Studies dating back to 2005 with a few slight modifications or additions. The first tobacco question was expanded to ask about other methods of use (item f). The question asking about student-athlete perceptions of occasional cannabis use and health and well-being was modified from an item used on a SSI survey of membership health professionals. The question asking about reasons for cannabis use was expanded to gain a more detailed understanding of why student-athletes may be using cannabis. There is also a new question asking about days of alcohol use per week. This item will allow us to calculate drinks per week similar to an item on the Southern Illinois University CORE Survey. Finally, a few items asking about sedative (e.g., Xanax, Valium, Klonopin) use, abuse and misuse were added to this section.

## Data Preparation / Analysis

Once surveys are received by the data vendor (Scantron Corporation), survey data will be entered into an electronic database by Scantron. They will scan the forms and forward data to the NCAA in standard electronic database form. The data will then be checked for inconsistencies, and questionable data will be examined in detail based on pre-established methods developed during previous FAR surveys. Survey images will also be sent to the NCAA via encrypted flash drive to assist with data quality and accuracy checks. Scantron will shred the processed surveys after the NCAA has received and approved the final data and images. At no point will NCAA staff have access to the paper survey forms. Only select NCAA research staff will have access to the raw data and images; analyses will be conducted by select NCAA staff and contractors.



MEMORANDUM

<DATE>

TO: Faculty Athletics Representatives of NCAA Member Institutions.

FROM: Kelsey Gurganus-Wright, Assistant Director of Research.

SUBJECT: 2022-23 NCAA Student-Athlete Health and Wellness Study.

I am writing to ask for your assistance in administering the **2022-23 NCAA Student-Athlete Health and Wellness Study** to a sample of student-athletes at your school.

This survey consists of eight brief sections. Student-athletes will be asked about their mental health concerns and peer support, sleep behaviors, attitudes toward their weight and body image, nutrition, competition and injury history, and substance use experiences. This information will be used to assess trends and design appropriate educational initiatives for student-athlete well-being. The materials accompanying this memo will assist you in administering the survey. There is no online option for this survey due to participant anonymity requirements.

[NAME OF INSTITUTION] has been randomly selected to survey the following sports:

«SPORT1»

«SPORT2»

«SPORT3»

If, for any reason, you will be unable to sample any of the teams listed, please contact me at [kgurganus@ncaa.org](mailto:kgurganus@ncaa.org) or 317-917-6566, and we will develop a substitution plan.

Included in this package you will find:

- An approval letter from the NCAA Research Review Board (RRB). The complete RRB application is available on the NCAA research website at [www.ncaa.org/research](http://www.ncaa.org/research);
- Survey administration instructions;
- A scripted statement to read when administering the survey to the student-athletes at your school;
- Copies of the survey instrument;
- One FedEx return envelope per team sampled for returning the surveys to the third-party vendor that will scan the surveys; and
- Copies of a survey contact sheet to be distributed to student-athletes.

FARs are asked to provide student-athletes with contact information for their local campus IRB administrator and local support agencies. If you did not receive the items listed above or you need additional copies, please contact Kelsey Gurganus-Wright at [kgurganus@ncaa.org](mailto:kgurganus@ncaa.org) or 317-917-6566.

Completed surveys should be returned via the FedEx return envelope(s) provided by **June 1, 2023**. Please contact Kelsey Gurganus-Wright with any questions related to survey administration/procedures, human subjects issues or the study timeline. Thank you again for your willingness to participate in this important initiative.

KG:ld

Enclosures

**DIRECTIONS FOR ADMINISTRATION OF SURVEY INSTRUMENT  
FOR THE 2022-23 NCAA STUDENT-ATHLETE HEALTH AND WELLNESS STUDY**

1. The faculty athletics representative (FAR) at each NCAA member school participating in this study will receive the following materials:
  - Notification of study approval by NCAA Research Review Board (RRB);
  - Notification of the sports to be surveyed at each school (see cover memo);
  - Copies of the survey instrument;
  - Directions for administration of the survey instrument with a scripted statement for the FAR;
  - A contact information sheet for distribution to the student-athletes; and
  - Pre-printed packages for shipment of surveys to an independent processing company.
2. This study has been reviewed and approved for human subject considerations by the NCAA RRB. Individual campuses may still require this study be reviewed by their institutional review board (IRB). It is the responsibility of the FAR on each campus to ensure that institutional policies are followed. In addition to reporting any unanticipated problems to their own campus IRBs, FARs are responsible for reporting any such incidents to the NCAA RRB.

The FAR is asked to make arrangements with the athletics department to schedule a session to survey all student-athletes on the team(s) selected for participation in the study.

The survey should be administered by the FAR in a group setting with all members of the team(s) that are participating in the study present. If the FAR is being asked to survey more than one team, they may survey each team separately or combine the teams into one group. The time, date and location of the survey administration session should be made known to all student-athletes on the team(s) being surveyed. Most student-athletes should be able to complete the survey within approximately 30 minutes, but FARs should secure a room for 45 to 60 minutes.

**ALL SURVEYS SHOULD BE ADMINISTERED AND RETURNED BY June 1, 2023.**

3. Sufficient copies of the surveys should be included in each packet. Kelsey Gurganus-Wright (kgurganus@ncaa.org; 317-917-6566) at the NCAA national office should be notified if additional copies are needed. **The FAR should not photocopy additional surveys as the scanning devices will not be able to read responses on photocopied forms.**

The FAR will place the pre-printed, pre-paid return package supplied by the NCAA's survey vendor in a convenient location in the room where the survey is being administered so that each student-athlete may place their completed survey directly into the package without



anybody else handling the survey. **Completed surveys should not be handled by the FAR or anybody else in the room.**

4. Before administering the survey, the FAR should obtain a contact phone number for a campus or local counseling service that will offer free or low cost counseling to any student-athlete who may wish to speak with a counseling professional. This contact information should be clearly posted in the room in which the surveys are administered to supplement the national contact information sheet that is to be distributed to the student-athletes.
5. The FAR should bring No. 2 pencils or pens with blue or black ink for use by student-athletes during the survey administration. **The survey must not be completed in red ink.**
6. The FAR and any assistants from their staff will administer the survey to the student-athletes. All staff from the athletics department (e.g., coaches) are required as part of the protocol to leave the room before the survey is distributed. The FAR will read the attached scripted statement to the student-athletes detailing the purpose of the study and directions for the completion of the survey. Student-athletes who are not yet 18 years of age (or the age of consent in the state the institution is located) should be thanked for their time, but excused from study participation and asked to leave the room.

The FAR's script will explain the survey instrument to the student-athletes, describe the purpose of the national study and note that responses will not be personally identifiable once the survey is turned in. The student-athletes must be informed that participation in the survey is entirely voluntary and that they are free to turn in their survey at any time during the testing procedure. Student-athletes who do not wish to complete the survey in its entirety may complete only those questions they wish to answer (if any) and return the survey to the pre-printed return package. Student-athletes should be advised that the NCAA will begin publishing aggregate results of the survey in fall 2023. Those results, reports from previous NCAA studies and other student-athlete survey data are available to them via the NCAA website at [www.ncaa.org/research](http://www.ncaa.org/research).

The FAR will inform the student-athletes that they should place their completed surveys directly into the return package that is addressed to the survey processing company. Nobody, including the FAR, other teammates, or any member of the athletics department should handle any student's survey. The FAR should remain in the room to answer any questions that may arise.

7. The last student-athlete present should place their survey into the return package and seal the package. All surveys that are handled by a student-athlete (completed or not completed) should have been placed in the package. Survey forms must be returned before each student-athlete leaves the session. Extra surveys not administered to the student-athletes can be destroyed by the FAR.
8. The FAR will send the sealed package of surveys to the survey processing company in the pre-printed, pre-paid return package supplied by the vendor.
9. Questions regarding administration of the surveys or RRB concerns should be referred to:

Michael Miranda, NCAA Research Review Board Administrator, [michael.miranda@zoho.com](mailto:michael.miranda@zoho.com)  
(317-917-6409)

The NCAA research department thanks you for your assistance with this important research project!

## 2022-23 NCAA STUDENT-ATHLETE HEALTH AND WELLNESS STUDY

### SCRIPTED STATEMENT FOR FACULTY ATHLETICS REPRESENTATIVE

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*Instruct the students not to begin the survey until you finish reading the following statement:*

Thank you for your participation in the NCAA Student-Athlete Health and Wellness Study. Your participation in this study is greatly appreciated.

If there is anyone here who is under 18 years of age (*or the age of consent in your state*), you are excused from participation in this study and should leave at this time. Thank you for your time.

This survey must be completed in No. 2 pencil or black or blue ink. If you do not have the proper pen or pencil with you, please raise your hand now and I will supply you with one. (*Please distribute pencils/pens*).

This survey consists of eight brief sections. You will be asked about your background, mental health concerns and peer support, sleep behaviors, attitudes toward your weight and body image, access to healthy foods, competition and injury history, and substance use experiences. Your responses will be used by the NCAA to formulate effective strategies for programming, education and intervention among student-athletes, coaches, administrators and faculty.

Participation in this study is completely voluntary. You may choose not to answer any question, or to discontinue your participation at any time without penalty. Your voluntary completion of this study constitutes your informed consent to participate. This survey should take about 30 minutes, on average, to complete. When you have finished the survey, please place it in the return package located here. (*Show student-athletes where the package is located.*) The last person to complete their survey will be asked to seal the package to ensure that it is ready to be mailed and that nobody else has access to the completed surveys. Nobody besides you will handle your survey. **Do not return any surveys directly to me.** All surveys, whether you have completed them or not, should be put directly into the return package.

For this study to help future student-athletes, it is important that the responses you give be thoughtful and honest. **This information is being collected anonymously. We will not ask you to identify yourself or your school. That means nobody, including the NCAA and the researchers, will know your identity or be able to match your responses to your team or your school. The study protocols were designed specifically to help you maintain complete anonymity.** Do not write your name or your school's name anywhere on the survey form.

The surveys will be sent directly to an independent company for scanning and will be destroyed once a research database has been created. Results will only be reported in terms of national and subgroup (for example, sport, division, gender, race/ethnicity, etc.) averages and trends. National reports from previous student-athlete surveys are available from the NCAA's website (the address is listed at the end of your survey). We hope you will take a look at these interesting data provided by previous student-athlete participants.

Some of the questions in this survey deal with personal topics. You do not have to answer any question that you do not wish to answer. You have received a contact information sheet with information on national support organizations. I have also posted the contact number for a local

counseling center in case you should feel the need to discuss any issues raised by this survey. Thank you again for your participation in this very important study. Remember that you should not write your name or school name on your survey. Please take a few minutes now to complete the survey. If you have any questions, I will remain in this room until the last student leaves.

## **INSTITUTIONAL REVIEW BOARD GUIDE FOR THE NCAA STUDENT-ATHLETE HEALTH AND WELLNESS STUDY**

Dear Faculty Athletics Representative:

The purpose of an institutional review board (IRB) is to ensure that the rights and welfare of human participants involved in proposed research are adequately protected. IRBs have the right to approve, disapprove or require modification of all research involving students on their campus. While the NCAA has received approval from its own Research Review Board (RRB), a national external board consisting of faculty and community representatives, it is important that you consult with your campus IRB to determine whether additional approval is required to carry out this research on your campus.

The NCAA's full RRB materials and approval letter are included in an accompanying document. However, in order to make the IRB process at your school as simple as possible as you administer this study on behalf of the NCAA, we have also included summary information below that may be of use in answering questions posed to you directly by your campus IRB.

Please contact Kelsey Gurganus-Wright at [kgurganus@ncaa.org](mailto:kgurganus@ncaa.org) or 317-917-6566 if you have any questions or would like assistance in completing your IRB application.

Note that it is possible your local IRB will require changes to the standard study administration procedures as a condition for conducting the study on your campus. If this is the case, please contact Michael Miranda, NCAA Research Review Board administrator, at [michael.miranda@zoho.com](mailto:michael.miranda@zoho.com) or 317-917-6409 who will work with you in implementing such changes. In most instances, study procedures can be modified in ways that will meet the requirements of a particular IRB while maintaining the integrity of the study's research methodology.

### **Project Information**

#### **Project Title:**

2022-23 NCAA Student-Athlete Health and Wellness Study.

#### **Project Dates:**

Start Date (7-1-2022);

End Date (6-30-2023).

#### **Number of Participants:**

Previous large-scale NCAA student-athlete studies have included data from approximately 20,000 student-athletes surveyed at over 600 NCAA member institutions. We anticipate a similar number of respondents in the 2022-23 study.

#### **Project Description/Purpose:**

The 2022-23 NCAA Student-Athlete Health and Wellness Study will provide NCAA policymakers and member institutions with detailed information on the health and wellness of student-athletes. The survey consists of eight brief sections. Student-athletes will be asked about their mental health

concerns and peer support, sleep behaviors, attitudes toward their weight and body image, nutrition, competition and injury history, and substance use experiences. This information will be used to assess trends and design appropriate educational initiatives for student-athlete well-being.

**Project History:**

This is a new comprehensive health and wellness study that subsumes many of the survey items from the NCAA Substance Use Study and incorporates a range of well-being items previously used in other NCAA RRB-approved survey instruments (e.g., NCAA GOALS, Social Environments, Well-Being).

**Prior NCAA RRB Approval:**

The study commenced July 1, 2022, after it was approved by the RRB. The RRB is an external body composed of seven non-staff members who represent individual colleges/universities or the community and follows policies and procedures similar to a campus IRB. The RRB is assisted by an independent consultant who works with RRB members to communicate their decisions and concerns back to relevant NCAA staff and member institution representatives.

**Federal-wide Assurance:**

The NCAA is registered with the U. S. Health and Human Services Department, Office of Human Research Protections (IORG #0007717). The NCAA RRB is a registered IRB (IRB #00009263). The Federal-wide Assurance number is 00020028. Institutions interested in pursuing IRB Authorization Agreements are encouraged to contact Michael Miranda, NCAA Research Review Board administrator, at 317-917-6409 or michael.miranda@zoho.com.

**Scientific or Academic Merit of Current Study:**

Considerable care has gone into designing a study, survey instrument and sampling protocol that will lead to unbiased, generalizable results. From a sampling perspective, we attempt to minimize bias via strict stratified random sampling of teams, comparison of obtained demographic profiles of the sample versus known demographics of the student-athlete population and subsequent (as necessary) weighting of individual responses to create aggregate estimates that are likely to best represent the behavior of the national student-athlete population.

**Instruments:**

The only instrument in this study will be a survey taken by the participating student-athletes. The paper survey consists of eight sections: (1) demographics, (2) mental health and peer support, (3) sleep, (4) weight, body image and nutrition, (5) competition and injury, (6) alcohol, tobacco and other drug use, (7) supplements, and (8) support. Most survey items have been used in previous studies and were either derived from standard scales or specifically designed for this study by subject matter experts.

Testing of the survey indicates that it typically takes about 30 minutes to complete.

The survey will be administered anonymously. No attempt will be made by the researchers to tie individual responses to particular individuals or institutions.

**Study Administration:**

After the sample for the current study was determined by NCAA staff, an email was sent to the faculty athletics representative (FAR) at each NCAA member institution. The email solicited the FAR's participation in conducting the study and identified the athletics teams that the institution is being asked to survey. Detailed study materials are provided to each FAR that highlight appropriate study protocols for producing scientifically useful data and protecting the well-being of student-athlete participants.

**Survey Administration:**

To best ensure that student-athlete and institution anonymity are maintained, the survey will be administered in paper form only. Detailed instructions for administration of the survey will be provided to the FAR, this includes a script that the FAR will read aloud to the student-athlete participants about the study, their voluntary participation, and how materials will be handled. These instructions, and the instructions that are printed on the survey form, will make it clear to the student-athletes that their participation in this study is completely voluntary and that their responses will be totally anonymous. The FAR will be instructed to give the survey to all members of a particular team on the same occasion in a classroom-type proctored setting. All staff from the athletics department (e.g., coaches, trainers, etc.) will be asked to leave the room before the survey is distributed. The FAR will be provided with a pre-addressed, pre-paid envelope into which student-athletes are to deposit surveys on completion. The last student-athlete to complete the survey will be asked to seal the envelope in the FAR's presence and see that it is ready to send to the third-party vendor that will scan the survey forms and create a national database for analysis. After verification of the data entry, the paper surveys and any survey images will be destroyed. The resulting database will have no student or school identifying information.

**Other Frequently Asked Questions****Describe the setting in which the research will be conducted.**

It is suggested that the research take place in a classroom setting. The FAR on each campus is asked to administer the survey to the student-athletes. All staff from the athletics department (e.g., coaches, trainers, etc.) will leave the room before the survey is distributed. The FAR will read the attached scripted statement to the student-athletes detailing the purpose of the study and the directions for completion of the survey. All student-athletes who are not yet 18 years of age (or the age of consent in the state the institution is located) will be excused from further participation and asked to leave the room.

**Is this a collaborative project?**

Yes. All 1,100+ schools participating in NCAA athletics are asked to participate. In studies conducted previously using similar methods, institutional response rates have tended to be 50-70 percent. The NCAA takes the lead in IRB review, but each FAR must submit to their campus IRB as required.

**Please explain how you intend to manage information obtained in multi-site research that could be relevant to the protection of research participants, such as reporting unanticipated problems involving risks to participants or others**

In addition to reporting any unanticipated problems to their own campus IRBs, the survey administrators are instructed to also report any such incidents to the NCAA RRB. This will allow the NCAA RRB to track and correct unanticipated problems should they occur.

### **Sampling**

**Explain your recruitment process and enrollment procedures.**

All active member institutions of the NCAA will be asked to participate and a sample of the student-athletes at each institution will be surveyed. This sampling plan was devised to achieve an appropriate representation of all NCAA student-athletes while minimizing the burden to institutions by asking that all student-athletes on not more than three teams be surveyed on any campus. The teams surveyed will be determined by a computer-generated random draw that is stratified by sport and NCAA competitive division. Schools may opt to replace teams only with the assistance of NCAA research staff. The NCAA does its best to ensure that teams that have been recently sampled in other FAR-administered studies are not sampled again in this study.

The FAR will contact the coach and/or athletics department to arrange a time and place to administer the survey to all student-athletes on the sampled teams.

### **Participants**

**Will the subject's identity remain anonymous, confidential or other?**

The identity of specific schools, teams and student participants will be anonymous. That is, no identifying information is collected that could identify a school or an individual student-athlete participant. All results from this study will be reported in aggregate and in terms of national and subgroup (for example, sport, division, race/ethnicity, etc.) averages and trends. The identity of a particular school, team or student will not be known at any point by the researchers.

**Does your research involve an investigation into legal matters, illegal activities, admissions of guilt, breaches of duties or noncompliant matters?**

Possibly, as some questions deal with various activities (e.g., illicit drug use) that may be illegal in some jurisdictions. Additionally, some of the questions relate to behaviors that may violate NCAA regulations.

**Describe the informed consent process in detail.**

The participants will be read instructions that will make clear that they are consenting to participate by filling out the survey. The instructions on the survey also state that, by filling out the survey they are consenting to be a participant. A waiver of documentation of consent has been approved by the NCAA RRB.



**Do you intend to obtain a Certificate of Confidentiality?**

No.

**Please explain how you intend to protect the privacy interests of participants during the research.**

We have attempted to be sensitive to these issues in designing the suggested procedures for administering and collecting the survey forms. Only the participant will handle their own completed survey form until it is deposited and sealed in the return envelope that goes to the third-party data entry vendor.

**Please explain how you intend to protect the privacy interests of participants after their involvement in the research.**

Once the data are entered and checked, survey forms and any resulting images will be destroyed. Only NCAA researchers will have access to the database, but even that file will contain no identifying information. Any data shared with researchers outside of the NCAA will be completely unidentifiable at the individual or school level. Only aggregate information will be published.

**Describe the procedure(s) in place for research participants to ask questions and voice concerns or complaints to the research investigator(s).**

Participants can report concerns or ask questions to the on-campus survey administrator, to NCAA researchers or to the NCAA RRB administrator. Contact information is provided on the first page of the paper survey and on the informational handout sheet.

**How do you intend to minimize the risks to the subjects?**

In the event that any questions asked are disturbing to the student-athlete, they may stop responding to the survey at any time. Student-athletes who experience discomfort will be encouraged to contact their college student-health offices or one of the national hotlines listed on a contact sheet distributed at each site. The survey administrator is being instructed to provide information on local mental health resources at the beginning of the survey administration.

The questions contained in this survey are generally not expected to cause psychological discomfort or pose more than minimal risk. The primary risk in this study relates to possible violation of student-athlete anonymity if survey administration procedures are not followed as designed. This risk is minimized if on-campus survey administrators adhere to study protocols.

**What benefits to society may result from this research?**

The 2022-23 NCAA Student-Athlete Health and Wellness Study will provide NCAA policymakers and member institutions with detailed information on several health and wellness topics of interest within the college athletics community. Issues around mental health, bystander intervention, sleep behaviors, weight management, nutrition, injuries, and substance use are important to understand because prior research has shown that student-athletes are prone to certain attitudes and behaviors that could impact their well-being, their eligibility for athletics competition and the integrity of the sports they play. Currently, there are open questions about how to best design education/intervention programs that are optimal for student-athletes. It is hoped that the results

of this study will provide much-needed insight for coaches, athletics administrators and other campus officials into some infrequently studied issues that can strongly impact student-athletes and others involved in athletics.

**About the NCAA.**

The NCAA is a membership-led nonprofit association of colleges and universities committed to supporting academics and athletics opportunities for nearly 500,000 student-athletes at more than 1,100 member colleges and universities. Each year, more than 52,500 student-athletes compete in NCAA championships in Division I, II and III sports.



*National  
Study of  
Student-Athlete  
Health and  
Wellness*

*Thank you for your  
participation in this very  
important study.*

The NCAA Research Staff



# National Study of Student-Athlete Health and Wellness

Dear Student:

Thank you for your willingness to participate in the NCAA's National Study of Student-Athlete Health and Wellness. This study seeks to assess the experiences, health and well-being of current student-athletes. The survey includes questions about your mental wellness, peer support, sleep behaviors, weight management and body image, competition and injury history and substance use experiences. Survey results will be used by the NCAA membership and governing bodies for the purpose of further evaluating and better understanding the health and well-being aspects of the student-athlete experience. For this study to help future student-athletes, it is important that you read all questions carefully and give thoughtful and honest responses.

**This information is being collected anonymously. We will not ask you to identify yourself or your school. That means nobody, including the NCAA and its researchers, will know your identity or be able to match your responses to your team or your school. The study protocols were designed specifically to help you maintain complete anonymity.** Results that are reported will be in terms of national and subgroup (for example, sport, division, etc.) averages and trends, and items with small response sizes will not be reported to protect anonymity.

Your participation in this study is completely voluntary so you may choose not to answer specific questions, or to discontinue your participation at any time without penalty. The information about the study provided to you by your campus faculty athletics representative is intended to inform you of the purpose, benefits and risks associated with the study. Your voluntary completion of this survey indicates that you are consenting to participate in this study.

**If you are under 18 years of age, or below the age of legal consent to participate in this study in your state, you are excused from further participation in this research study.**

If you have questions regarding the study or survey instrument, please contact the survey administrator, Kelsey Gurganus-Wright, at 317-917-6566 or kgurganus@ncaa.org. For questions regarding the study procedures, please contact Michael Miranda, NCAA Research Review Board administrator, at 317-917-6409 or michael.miranda@zoho.com.

## SUBSTANCE USE SECTION DEFINITIONS

**Anabolic Agents and Related Hormone Modulators** – synthetic derivatives of **testosterone** or other hormonal agents that promote muscle growth, increase endurance and enhance recovery. Examples are andro or norandro products, bodenone, DHEA, dianabol, epi-trenbolone, methasterone and stanozolol. Some of these are commonly referred to as steroids.

**Cannabis and Related Products** – Cannabis and hemp products may be ingested in various forms, including smoked, via “edibles” or vaporized through THC oil or wax. Includes marijuana, synthetic cannabinoids and tetrahydrocannabinol (THC).

- **Marijuana** – may be ingested in various forms, including smoked, via “edibles” or vaporized through THC oil or wax.
- **Synthetic Cannabinoids** – also inaccurately called “synthetic marijuana” -- plant-based products that have been treated with artificial psychoactive compounds. Examples are Delta 8, K2 and Spice.
- **Tetrahydrocannabinol (THC)** – the primary psychoactive agent in marijuana.

**Dietary Supplement** – an over-the counter **product** (not food) intended to supplement one's diet, that contains herbs, botanicals or other dietary ingredients marketed to improve health, nutrition or performance.

**Narcotics** – pain relievers derived from **opium** and its synthetic substitutes. Examples are codeine, fentanyl, heroin, morphine, oxycodone, Oxycontin, Percocet and Vicodin.

**Stimulants** – drugs that stimulate the central nervous system. Examples are amphetamine, Benzedrine, cocaine, Dexedrine, ecstasy, ephedrine, methamphetamine and methylphenidate.

**Sedatives** – drugs that slow down or depress the central nervous system. Examples are barbiturates, benzodiazepines (Xanax, Valium, Klonopin, etc.), gamma-hydroxybutyrate (GHB), and sleep-inducing drugs such as zolpidem (Ambien) and eszopiclone (Lunestra).

### MARKING INSTRUCTIONS

Use Blue or Black ink pen or Black Lead Pencil Only

Incorrect Mark:



Correct Mark:



## PART 1: Demographics

### 1. Are you playing on a men's or women's team(s)?

- ☐ Men's
- ☐ Women's

### 2. NCAA sport(s) you are playing: (Mark all that apply)

- |   |   |
|---|---|
| <input type="radio"/> Acrobatics & Tumbling | <input type="radio"/> Rifle                     |
| <input type="radio"/> Baseball              | <input type="radio"/> Rowing                    |
| <input type="radio"/> Basketball            | <input type="radio"/> Rugby                     |
| <input type="radio"/> Beach Volleyball      | <input type="radio"/> Skiing                    |
| <input type="radio"/> Bowling               | <input type="radio"/> Soccer                    |
| <input type="radio"/> Cross Country         | <input type="radio"/> Softball                  |
| <input type="radio"/> Equestrian            | <input type="radio"/> Swimming & Diving         |
| <input type="radio"/> Fencing               | <input type="radio"/> Tennis                    |
| <input type="radio"/> Field Hockey          | <input type="radio"/> Track (Indoor or Outdoor) |
| <input type="radio"/> Football              | <input type="radio"/> Triathlon                 |
| <input type="radio"/> Golf                  | <input type="radio"/> Volleyball (Indoor)       |
| <input type="radio"/> Gymnastics            | <input type="radio"/> Water Polo                |
| <input type="radio"/> Ice Hockey            | <input type="radio"/> Wrestling                 |
| <input type="radio"/> Lacrosse              |   |

### 3. In what NCAA division does your team compete?

- ☐ Division I
- ☐ Division II
- ☐ Division III

### 4. What is your current academic standing?

- ☐ Freshman
- ☐ Sophomore
- ☐ Junior
- ☐ Senior
- ☐ Completed bachelor's degree

### 5. How do you describe yourself? (Mark all that apply)

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Hispanic or Latino/a/x
- ☐ Middle Eastern or North African
- ☐ Native Hawaiian or Pacific Islander
- ☐ White
- ☐ Other

### 6. Do you consider yourself to be: (Mark all that apply)

- ☐ Straight or heterosexual
- ☐ Gay or lesbian
- ☐ Queer
- ☐ Bisexual or pansexual
- ☐ Questioning or unsure
- ☐ Another sexual identity
- ☐ Prefer not to answer

### 7. What is your gender identity? (Mark all that apply)

- ☐ Man
- ☐ Woman
- ☐ Genderqueer
- ☐ Nonbinary
- ☐ Transgender
- ☐ Another gender identity
- ☐ Prefer not to answer

### 8. What is your current age?

- ☐ 18
- ☐ 19
- ☐ 20
- ☐ 21
- ☐ 22 or older

### 9. Do you qualify for a Pell Grant?

- ☐ No
- ☐ Yes
- ☐ Not Sure

### 10. This academic year, are you receiving an athletics scholarship in your sport?

- ☐ No
- ☐ Yes, partial athletics scholarship
- ☐ Yes, full athletics scholarship

### 11. Are you a member of a fraternity or a sorority?

- ☐ No
- ☐ Yes

### 12. Where do you currently live during the school year?

- ☐ Residence hall or other campus housing/apartment
- ☐ Fraternity or sorority house
- ☐ Off-campus apartment or house

### 13. Where did you attend high school?

- ☐ In the United States
- ☐ In Canada
- ☐ In another country

## PART 2: Mental Health and Peer Support

14. Within the last month, have you:

- |  | Most every day<br>Occasionally<br>Never   | Constantly            |
|--|---|-----------------------|
| a. Felt things were hopeless.....  | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |
| b. Felt overwhelmed by all you<br>had to do .....  | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |
| c. Felt exhausted (not from<br>physical activity) .....  | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |
| d. Felt very lonely .....  | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |
| e. Felt sad.....   | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |
| f. Felt so depressed that it was<br>difficult to function.....                                 | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |
| g. Felt overwhelming anxiety .....   | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |
| h. Felt overwhelming anger .....   | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |
| i. Felt a sense of loss .....  | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |
| j. Experienced sleep difficulties<br>(e.g., trouble falling asleep,<br>waking too early) ..... | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> |

15. How much do you agree or disagree that the following have negatively impacted your mental health within the last month?

- |   | Strongly Agree  | Somewhat Agree        | Disagree              | Strongly Disagree     |
|---|---|-----------------------|-----------------------|-----------------------|
| a. Academic worries.....                                    | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. COVID-19 health concerns .....                           | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. Financial worries .....                                  | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| d. Family worries .....                                     | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| e. Playing time.....  | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| f. Coach relationship .....                                 | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| g. Team environment.....                                    | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| h. Personal experiences of racism or<br>racial trauma ..... | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| i. Political disagreements with<br>family or friends.....   | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| j. Planning for the future .....                            | <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

16. How much do you agree or disagree with the following statements about mental well-being?

- |   | Strongly Agree        | Somewhat Agree        | Disagree              | Strongly Disagree     |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| a. I know where to go on campus if I have mental health concerns .....                                | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. I know how to help a teammate that is experiencing a mental health issue .....                     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. I would feel comfortable seeking support from a mental health provider on this campus .....        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| d. There are people on campus I can trust to give me support when I need it .....                     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| e. I feel that student-athletes' mental health is a priority to our athletics department .....        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| f. Student-athletes on this campus take the mental health concerns of their teammates seriously ..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| g. I would feel inadequate if I went to a therapist for psychological help .....                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| h. My self-esteem would increase if I talked to a therapist .....                                     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| i. Seeking psychological help would make me feel less intelligent .....                               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

17. Please indicate how strongly you agree or disagree with the following statements:

- |  | Strongly Agree        | Somewhat Agree        | Disagree              | Strongly Disagree     |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| a. My coaches care about my <u>physical</u> well-being .....   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. My coaches care about my <u>mental</u> well-being .....   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. I would feel comfortable talking with my coaches about <u>physical</u> <u>health</u> issues ..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| d. I would feel comfortable talking with my coaches about <u>mental</u> <u>health</u> issues .....   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

18. If the following situations came up, how likely do you think you would be to engage in the following behaviors?

- |   | Extremely Likely      | Somewhat Likely       | Unlikely              | Not at all likely     |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| a. Accompany a teammate home if they've had a lot to drink at a party .....           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. Seek help to stop a fight that involves a teammate .....                           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. Walk away from a confrontation even if your toughness is being questioned .....    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| d. Confront a teammate if you think they are treating a partner inappropriately ..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| e. Report a teammate's involvement in academic misconduct .....                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| f. Stop a teammate from driving after consuming alcohol .....                         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| g. Intervene in a situation that could lead to unwanted sexual behavior .....         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

19. Have you received training on your campus (e.g., bystander intervention, StepUP! or Green Dot) to prepare yourself to help someone in trouble?

- ☐ Yes  
☐ No

### PART 3: Sleep

20. In the past 7 days, how often have you:

- |   | 0 days                | 1 day                 | 2 days                | 3 days                | 4 days                | 5 days                | 6 days                | 7 days                |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| a. Gotten enough sleep so that you felt rested when you woke up in the morning? ..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. Awakened too early in the morning and couldn't get back to sleep? .....            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. Felt tired, dragged out, or sleepy during the day? ....                            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| d. Gone to bed because you just could not stay awake any longer? .....                | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| e. Had an extremely hard time falling asleep? .....                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| f. Fell asleep at an inappropriate time/place? .....                                  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

### PART 4: Weight, Body Image and Nutrition

21. How do you describe your weight?

- ☐ Very underweight for my sport  
☐ Slightly underweight for my sport  
☐ About the right weight for my sport  
☐ Slightly overweight for my sport  
☐ Very overweight for my sport

22. Which of the following are you trying to do about your weight?

- ☐ Gain weight  
☐ Lose weight  
☐ Stay the same weight  
☐ I am not trying to do anything about my weight

23. Please indicate how strongly you agree or disagree with the following statements:

- |  | Strongly Agree        | Somewhat Agree        | Disagree              | Strongly Disagree     |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| a. I think I have a good body .....          | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. I am happy with my current weight .....   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. I like what I look like in pictures ..... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |



24. Please indicate how strongly you agree or disagree with the following statements:

	Strongly Agree	Somewhat Agree	Disagree	Strongly Disagree
a. I make an effort to eat fruits and vegetables each day .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. I usually avoid eating fried foods .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. I generally try to have a healthy diet .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. I make an effort to eat at least three meals a day .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Healthy food options are readily available to me after practice and competition .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. I <u>can afford</u> to eat healthy meals each day .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. I <u>have time</u> to eat healthy meals each day .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## PART 5: Competition and Injury

25. How old were you when you started competing in your main sport?

- ☐ 6 years old or younger
- ☐ 7-9 years old
- ☐ 10-12 years old
- ☐ 13-15 years old
- ☐ 16 years old+

26. How old were you when you started specializing in your main sport (competing in only that sport)?

- ☐ 6 years old or younger
- ☐ 7-9 years old
- ☐ 10-12 years old
- ☐ 13-15 years old
- ☐ 16-18 years old
- ☐ Competed in multiple sports through the end of high school (or into college)

27. Please indicate how strongly you agree or disagree with the following statements:

	Strongly Agree	Somewhat Agree	Disagree	Strongly Disagree
a. I am accomplishing many worthwhile things in my sport .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. I feel so tired from the <u>physical</u> demands of my sport that I struggle to find energy to do other things .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. The effort I spend in my sport would be better spent doing other things .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. I am exhausted by the <u>mental</u> demands of my sport .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. I am performing up to my ability in my sport .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. I care about my sport as much or more than I ever have .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

28. During the last 30 days, on how many days did you have the following problems or symptoms?

	15+ days	8-14 days	4-7 days	1-3 days	None
a. Cold, flu or similar symptoms .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Headache.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Pain (non-headache) that made daily activities difficult .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. How many times have you been diagnosed with a concussion by a medical professional?

	0	1	2	3	4	5	6	7	8+
a. During college .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Before you entered college.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30. How comfortable do you feel reporting concussion-like symptoms to...

	Extremely Comfortable	Somewhat Comfortable	Not At All Comfortable
a. A coach? .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. A team trainer or doctor? .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

31. How many sport-related injuries have you sustained that required surgery, hospitalization or more than one month of time off from training or competition?

	0	1	2	3	4	5+
a. During college .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Before you entered college.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

32. Are you currently unable to compete in your sport due to a long-term (e.g., month or more) injury or health concern?

☐ Yes  
☐ No

33. Have you had COVID-19? (Mark ALL that apply)

☐ No  
☐ Yes, I had COVID-19 in the last three months  
☐ Yes, I had COVID-19 more than three months ago

34. Are any COVID-19 symptoms currently still impacting your ability to perform at your peak athletic level?

☐ Yes  
☐ No  
☐ I have not had COVID-19

**PART 6: Alcohol, Tobacco and Other Drug Use**

35. How often do you use tobacco or other nicotine products by the following methods? (Mark ONE for each substance)

	Never Used	Daily	Weekly	Monthly	In the last year	Used, but not in the last year
a. Cigarettes.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Cigars.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Vape/E-cigarettes.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Hookah.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Spit tobacco (e.g., dip, chew, pouch, etc.) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Other products (e.g., dissolvable, gum, etc.) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

36. How often do you use marijuana or other cannabis products by the following methods? (Mark ONE for each substance)

	Never Used	Daily	Weekly	Monthly	In the last year	Used, but not in the last year
a. Inhale (e.g., smoke, vape, dab) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Ingest (e.g., edibles, oils, tinctures) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Apply to skin (e.g., cannabis-infused lotions) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Use synthetic "marijuana" (e.g., Delta 8, K2, Spice, etc.).....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

37. Please indicate the reasons you have used marijuana or other cannabis products within the last year: (Mark ALL that apply)

- ☐ I have not used marijuana or cannabis products within the last year
- ☐ Coping with anxiety, depression or stress
- ☐ Experimentation
- ☐ Fun/enjoyment
- ☐ Help with sleep
- ☐ Medical use (e.g., alleviate physical pain, headache)
- ☐ Peer pressure
- ☐ Relaxation
- ☐ To be social

38. At the start of this school year, what were the marijuana laws in your college's state? (Mark ONE)

- ☐ Marijuana was legal for recreational and medical use
- ☐ Marijuana was legal for medical use only
- ☐ Marijuana use was not legal in this state
- ☐ I don't know

39. Do you believe that occasional (less than once per week) cannabis use by a student-athlete threatens their health and well-being?

- ☐ Yes
- ☐ No
- ☐ I don't know

40. How often do you use the following substances:  
(Mark ONE for each substance)

	Never Used	Daily	Weekly	Monthly	In the last year	Used, but not in the last year
a. Alcohol .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. LSD .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Methamphetamine .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Heroin.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Amphetamines .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Cocaine .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Ecstasy/Molly.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Anabolic agents or related metabolic modulators (e.g., HGH, testosterone) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Nonsteroidal anti-inflammatory drugs (e.g., ibuprofen, naproxen, aspirin, etc.) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Injectable Toradol (ketorolac) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Tylenol or acetaminophen .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. ADHD stimulants (e.g., Adderall, Ritalin, Concerta, Vyvanse, etc.)....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m. Narcotic pain medication (e.g., Vicodin, Oxycontin, Percocet, Dilaudid, Fentanyl, Morphine, Tylenol with Codeine, etc.) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n. Sedatives (e.g., Xanax, Valium, Klonopin, etc.) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o. Ultracet, Ultram or Tramadol .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

41. Within the last year, have you used the following substances specifically to prepare for a practice or competition? (Mark ONE for each substance)

	Yes	No
a. Spit tobacco .....	<input type="radio"/>	<input type="radio"/>
b. Marijuana .....	<input type="radio"/>	<input type="radio"/>
c. Amphetamines .....	<input type="radio"/>	<input type="radio"/>
d. Cocaine .....	<input type="radio"/>	<input type="radio"/>
e. Anabolic agents or related metabolic modulators (e.g., HGH, testosterone) .....	<input type="radio"/>	<input type="radio"/>
f. ADHD stimulants (e.g., Adderall, Ritalin, Concerta, Vyvanse).....	<input type="radio"/>	<input type="radio"/>
g. Narcotic pain medication (e.g., Vicodin, Oxycontin, Percocet, Dilaudid, Fentanyl, Morphine, Tylenol with Codeine, etc.) .....	<input type="radio"/>	<input type="radio"/>

42. If you drink alcohol, typically how many drinks do you have in one sitting? (Mark ONE)

- ☐ I do not drink alcohol  
☐ 1  
☐ 2  
☐ 3  
☐ 4  
☐ 5  
☐ 6  
☐ 7  
☐ 8  
☐ 9  
☐ 10+

One drink=  
 One 12 oz. beer  
 One 4 oz. glass of wine  
 One 12 oz. wine cooler  
 One mixed drink (w/ 1 shot)  
 One shot glass of liquor

43. If you drink alcohol, typically how many days per week do you drink? (Mark ONE)

- ☐ I do not drink alcohol  
☐ 1 day a week or less  
☐ 2 days a week  
☐ 3 days a week  
☐ 4 days a week  
☐ 5 days a week  
☐ 6 days a week  
☐ Every day

## PART 7: Supplements

44. On average, how many times per week do you drink more than 5 drinks in one sitting (if you are a male), or more than 4 drinks in one sitting (if you are a female)? (Mark ONE)

- ☐ Never
- ☐ 1 day a week
- ☐ 2 days a week
- ☐ 3-4 days a week
- ☐ 5-6 days a week
- ☐ Every day

45. Within the last year, under what conditions have you taken the following medications? (Mark ALL that apply)

- ☐ ADHD stimulants (e.g., Adderall, Ritalin, Concerta, Vyvanse) with a prescription
- ☐ ADHD stimulants (e.g., Adderall, Ritalin, Concerta, Vyvanse) without a prescription
- ☐ Narcotic pain medication (e.g., Vicodin, Oxycontin, Percocet, Dilaudid, Fentanyl, Morphine, Tylenol with Codeine, etc.) with a prescription
- ☐ Narcotic pain medication (e.g., Vicodin, Oxycontin, Percocet, Dilaudid, Fentanyl, Morphine, Tylenol with Codeine, etc.) without a prescription
- ☐ Sedatives (e.g., Xanax, Valium, Klonopin, etc.) with a prescription
- ☐ Sedatives (e.g., Xanax, Valium, Klonopin, etc.) without a prescription
- ☐ I have not taken any of the medications listed

46. Within the last year, have you taken any of the following medications outside of their intended use, taking a dosage different from or taking it longer than what was prescribed or recommended? (Mark ALL that apply)

- ☐ Ibuprofen, naproxen, aspirin or nonsteroidal anti-inflammatory drugs
- ☐ Tylenol or acetaminophen
- ☐ Adderall, Ritalin, Concerta or Vyvanse
- ☐ Vicodin, Oxycontin, Percocet, Dilaudid, Fentanyl, Morphine or Tylenol with Codeine
- ☐ Xanax, Valium or Klonopin
- ☐ Ultracet, Ultram or Tramadol
- ☐ Injectable Toradol or Ketorolac
- ☐ I have not used any of the medications listed beyond their intended use within the last year

47. Within the last year, have you taken any of the following performance enhancers? (Mark ALL that apply)

- ☐ Andro or norandro
- ☐ Clenbuterol
- ☐ Dehydroepiandrosterone (DHEA)
- ☐ DHCMT (oral turinabol)
- ☐ Epitestosterone
- ☐ Erythropoietin (EPO)
- ☐ Human chorionic gonadotrophin (HCG)
- ☐ Human growth hormone (HGH) – Injected form
- ☐ Human growth hormone (HGH) – Oral form
- ☐ Insulin (for performance enhancement)
- ☐ Prohormones
- ☐ SARMs (e.g., LGD-4033, ostarine)
- ☐ Testosterone boosters
- ☐ Other anabolic agents
- ☐ I have not taken any of the items listed

48. Within the last year, have you taken any of the following? (Mark ALL that apply)

- ☐ General multivitamin
- ☐ Multivitamin and mineral with other additives (e.g., caffeine, probiotics, herbal ingredients, etc.)
- ☐ Calcium
- ☐ Iron
- ☐ Probiotic
- ☐ Fish oil
- ☐ Glucosamine and/or chondroitin
- ☐ Amino acids (e.g., BCAAs, L-arginine, L-carnitine, beta-Alanine, etc.)
- ☐ Protein products (e.g., whey, casein, soy, etc.)
- ☐ Creatine
- ☐ Energy drinks (e.g., Red Bull, Monster, 5-Hour Energy, etc.)
- ☐ Brain/memory enhancer (i.e., nootropics)
- ☐ Diuretics (e.g., water pills)
- ☐ Prescription sleep aid (e.g., Ambien, Xanax, Ativan)
- ☐ Non-prescription sleep aid (e.g., Benadryl, Melatonin, Unisom, Valerian)
- ☐ Herbal supplements (e.g., turmeric, milk thistle, Echinacea, fenugreek, garcinia cambogia, etc.)
- ☐ Weight gain products
- ☐ Thermogenic/fat burners/weight loss products
- ☐ Sexual enhancers
- ☐ I have not taken any of the items listed

**PART 8: Support**

49. I wish the coaches or athletics administrators at my school talked more with my team about the following wellness topics: (Mark all that apply)

- ☐ Body image
- ☐ Concussion awareness
- ☐ Drinking/substance misuse
- ☐ Drug testing/NCAA banned substances
- ☐ Getting good sleep
- ☐ Mental wellness
- ☐ Proper nutrition
- ☐ Sexual violence prevention
- ☐ Weight management



**Thank you for your participation in this important study on student experiences!**

Results of previous student-athlete surveys are available on the NCAA Research website:

**<http://www.ncaa.org/research>**

## NCAA STUDENT-ATHLETE HEALTH AND WELLNESS STUDY

For information about the study, its administration or results, contact:

Kelsey Gurganus-Wright  
NCAA Research  
317-917-6566 or [kgurganus@ncaa.org](mailto:kgurganus@ncaa.org)

Michael Miranda  
NCAA Research Review Board  
317-917-6409 or [michael.miranda@zoho.com](mailto:michael.miranda@zoho.com)

Visit the NCAA Research Website at:  
[www.ncaa.org/research](http://www.ncaa.org/research)

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### Resources and Recommendations

For information or support related to any of the survey topics, please contact your campus student health office or visit the following sites:

#### *NCAA Sport Science Institute*

- For health and safety resources and recommendations, visit [www.ncaa.org/ssi](http://www.ncaa.org/ssi).

#### *Substance Abuse and Mental Health Services*

- The Substance Abuse and Mental Health Services Administration (SAMHSA) Behavioral Health Treatment Services Locator provides help to those seeking treatment facilities for substance use/addiction and/or mental health problems. For more information, visit: [www.findtreatment.samhsa.gov/](http://www.findtreatment.samhsa.gov/).
- The SAMHSA Disaster Distress Helpline provides 24/7 crisis counseling and support to individuals experiencing emotional distress related to natural or human-caused disasters. Call **800-985-5990** or text **TalkWithUs** to **66746**.

#### *Dating and Sexual Violence Support*

- Love is Respect advocates are available 24/7 to provide confidential support to those seeking help and information/resources related to healthy relationships and dating abuse. Call **866-331-9474**, text **LOVEIS** to **22522** or chat at [www.loveisrespect.org/get-relationship-help/](http://www.loveisrespect.org/get-relationship-help/).
- The National Sexual Assault Hotline provides 24/7, free and confidential support. Call **800-656-HOPE** or chat at <https://hotline.rainn.org/online>.

#### *Suicide Prevention*

- The 988 Suicide and Crisis Lifeline provides 24/7, free and confidential support for individuals in distress. Call or text **988** or chat at [988lifeline.org/chat/](http://988lifeline.org/chat/).
- A list of international suicide hotlines is available at <https://ibpf.org/resource/list-of-international-suicide-hotlines/>.

#### *Mental Health Support for Students of Color*

- For students of color, The Steve Fund and Crisis Text Line provide 24/7, free and confidential support for mental health and well-being. Text **STEVE** to **741741**.

#### *Mental Health Support for LGBTQ+ Individuals*

- For the LGBTQ+ community, The Trevor Project provides 24/7 counseling for crisis intervention and suicide prevention. Call **866-488-7386**, text **START** to **678678** or message a counselor online at [www.thetrevorproject.org/get-help/](http://www.thetrevorproject.org/get-help/).

