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FEATURED

'STRUGGLING IN SILENCE'

Following student-athlete suicides, answers remain difficult

Grant Johnson | The Breeze
May 31, 2022



Two people in the JMU athletics community share an embrace April 26 at the flower drop memorial in honor of Lauren Bernett.

Savannah Reger | The Breeze

Editor's Note: This story contains descriptive retellings of anxiety, depression and suicidal thoughts that may be triggering for some readers. If you or someone you know is struggling with their mental health in any way, please check out [these resources](#) from the American Psychological Association.

Her heart raced as dynamic stretching began. Then came 20 minutes of crying, hyperventilating and not being able to breathe.

She'd never thought it could happen in her "safe space," the field hockey field.

But there it did.

Lindsey Kilpatrick had a "full-fledged" panic attack before UMass Lowell's March 21, 2021, game versus Cal Berkeley. It didn't come because the senior wasn't in the starting lineup, she said, nor because her parents missed the game.

She wasn't being dramatic, she said — she was depressed and needed help.

"I can't do it, I can't do it, I can't do it," Kilpatrick recalled repeating during the attack. "The only reason why anyone knew how bad it was, was because it was in front of everybody."

After some phone calls, including to her divorced parents and 30 minutes with her therapist, Kilpatrick had to watch from the sidelines — those around her feared for her safety if she left.

When Kilpatrick called her parents, she told them they needed to contact each other and "figure it out" because she needed one of them.

The next day, Kilpatrick's coach asked if she needed to go home. Kilpatrick said yes, then broke down sobbing. She spent 2 1/2 weeks away from field hockey — a 1 1/2-week break at home was followed by another week in COVID-19 protocols.

Phone calls with her parents started two weeks prior to the on-field attack, when other panic attacks began. Kilpatrick said their severity progressively worsened. She said she was never fully honest with her parents about her mental health before the panic attack.

"You don't want to tell your parents that you're having suicidal thoughts," Kilpatrick said. "They kept being like, 'Oh, you have two more months'; 'You can do it'; 'You've always gotten through this type of stuff.'"

The then-junior just never thought a panic attack could happen in the place where she could escape the realities of the pandemic, missing class and failing grades, a first for the once-4.0 student.

Just never in her safe space.

Kilpatrick follows a similar undertone by almost everyone interviewed by The Breeze: Student-athletes often face unrealistic expectations and stress, both in and out of their sport.

And, six times since the beginning of this March, the stress, pressure, another factor or a combination of many has pushed a college student-athlete to commit suicide.

"They will get a lot of heat from the outside, like, they'll get DM'd by people that they don't even know that are giving death threats or something, forgetting that these are 18-22 year olds," James Houle, lead sports psychologist for Ohio State Athletics, said. "Those pressures are not fair."

A recurring crux

Kilpatrick lives to tell her tale. She wrote a letter to the NCAA Board of Directors dated April 28 [demanding better mental health support](#) for student-athletes.

The letter follows in wake of not only the death of [JMU softball player Lauren Bennett](#) but deaths at Stanford, Wisconsin, Northern Michigan, Southern and Binghamton. Student-athletes at these schools — Katie Meyer, Sarah Shulze, Jayden Hill, Arlana Miller and Robert Martin, respectively — have died by suicide in the last three months.

It hasn't just been this year: In September 2020, Ian Miskelley, a University of Michigan swimmer, committed suicide. Morgan Rodgers, a Duke women's lacrosse player, committed suicide in July 2019. [Thirty-five college student-athletes took their own lives](#) from 2003-12, according to a study by the Substance Abuse and Mental Health Services Association (SAMHSA), which was 7.3% of total student-athlete deaths during the time frame. Suicides were the [third leading cause of death](#) in the U.S. for people aged 15-24 in 2020, according to the Centers for Disease Control and Prevention.

"It's clearly an issue," Kilpatrick said. "There's no other issue in college athletics where people are dying like this."

JMU held a joint press conference May 2 with JMU Athletic Director Jeff Bourne and Vice President for Student Affairs Tim Miller to answer questions about Bennett and mental health resources at JMU.

The Breeze sent emails May 2, 4, 9 and 16 to Kevin Warner, assistant athletic director for communications at JMU, requesting interviews with student-athletes and JMU sports psychologists. Warner said May 4 that JMU Athletics was “not ready to facilitate this story”; later email exchanges didn’t result in interviews.

There were two other [on-campus suicides](#) at JMU Jan. 31 and Feb. 6, neither of whom were student-athletes and one who wasn’t a JMU student. Bourne wrote a [dialogue on mental health](#) May 23, in which he says mental health is an issue facing humanity — a “current societal issue” — not just student-athletes.

“What we have seen over the last decade [is] a significant increase in mental health concerns, lots more students coming to college with mental health concerns, and what we saw, really, in the last 2 1/2, three years of the pandemic is [an] exponential increase,” Miller said at the press conference. “Being social is a muscle. And when you don’t have a chance to use that, you’re at home with family and now suddenly you’re back around people again, that makes it harder. So, you don’t have those skills that you might have had before.”

The two psychologists interviewed by The Breeze said it’s hard to pinpoint one cause for any college suicide, and it’s complicated because mental health concerns can be difficult to spot, unlike a limp or bruise from an injury. Steve Miskelley, Ian Miskelley’s father, said doctors described Ian as a “highly functional depressed person,” one who a stranger wouldn’t notice anything wrong with in casual conversation.

Steve said the pandemic “absolutely, 100%” played a factor in Ian’s suicide. Between virus cases Ian and his team caught, the extroverted swimmer was forced to isolate multiple times — all the while, an autoimmune disease that Steve said developed because of Ian’s mental state, [EoE](#), attacked his esophagus and digestive system.

Kilpatrick said playing field hockey out of season in spring 2021 during the pandemic threw her off kilter because of the environment: Snow was on the ground, and the only time she saw her teammates was on the field competing, with locker-room socialization barred to limit virus spread. Faced with this, combined with online learning, Kilpatrick “slipped into a really bad depression.”

“One of the things that’s so hard about [COVID-19 is] it took physical exercise from athletes that were doing it a lot,” Houle said. “We saw it as, ‘Well, this was my No. 1 coping thing, and now I can’t even do that’ ... One of the No. 1 things to address mental health is physical exercise.”

Other stressors that could drive mental health issues, like the pandemic, aren’t specific to student-athletes. Alex Auerbach, director of wellness and development for the Toronto Raptors, said navigating a different routine, moving somewhere new and finding friends is something all college students experience.

But one stressor that sets apart the student-athlete burden, Auerbach said, is their schedules. Auerbach’s worked with regular college students at multiple universities and student-athletes as the director of clinical and sport psychology at the University of Arizona, and said athletes experience “just a different level of demand.” Frequently, he said, it’s a 5:30 a.m. wake-up to workout before eating, followed by class, then practice and film, then rehab. Additionally, Auerbach said, they’re frequently in the limelight on campus with pressures to maintain on-field performance, their GPA and scholarships.



Ian Miskelley poses with his father, Steve (left) and mother, Jill, on the pool deck with a high school trophy in 2018.

Courtesy of Steve Miskelley

"It is materially different being a student-athlete than being a, quote unquote, regular college student," Auerbach said. "I can remember myself, for example, being a more normal college student, there were days I didn't even have anything I had to do. And for most student-athletes, that day doesn't really exist, even in the offseason."

Vanderbilt sophomore women's lacrosse player Cailin Bracken wrote a letter published April 1 in *The Mental Matchup*, a platform that shares mental health stories of student-athletes, [confronting a question](#) central to the recent student-athlete suicides: "They were so successful, so full of life, how could they feel so lonely inside?" Within it, she detailed the demands of being a student-athlete.

"Playing a sport in college, honestly, feels like playing fruit ninja with a butter knife," Bracken wrote. "There are watermelons and cantaloupes being flung at you from all different directions, while you're trying to defend yourself using one of those flimsy cafeteria knives that can't even seem to spread room-temperature butter. And beyond the chaos and overwhelm of it all, you've got coaches and parents and trainers and professors who expect you to come away from the experience unscathed, fruit salad in hand."

Kilpatrick described a similar feeling to *The Breeze*, calling the daily student-athlete grind a "crockpot of emotions and stressors you don't like." For Kilpatrick at UMass Lowell, she said, this meant five classes per semester, lifting and watching film for 90 minutes, a 2 1/2-hour practice, then homework followed by "barely having time" to cook for herself.

And, with 2022 technology, Kilpatrick said, student-athletes don't have disconnect time anymore. She said they aren't always excused from classes on a road trip because of virtual learning, and that bus rides consist of "trying to do your homework without throwing up." Film can now be watched on phones independently and if someone isn't, Kilpatrick said, they're falling behind on the next game's preparation.

The only downtime, Kilpatrick said, is before bed. And for her, that sometimes came with depressive thoughts.

"You're not seeing your family usually," Kilpatrick said. "The games get harder and harder as you go farther into conference play and more stress is on your back as you just get more tired, more exhausted, mentally and physically. You're seeing the same people over and over and over again. You're competing against the people that are also your best friends that are also the only people you confide in."

The time demands don't mean that being a student-athlete is a "bad thing," Joe Kennedy, a Doctor of Psychology student at Springfield College and mental performance coach, formerly at IMG Academy and UMass Amherst, said. Being a student and an athlete — working two full-time jobs, as Kennedy said — improves time management. Houle said networking opportunities exist for student-athletes, like for himself, that don't for regular students — Houle said he got the blueprint for becoming a sports psychologist from his own when he was a student-athlete at Ohio State.

Bourne said at the press conference that he feels JMU has a "really strong support arm" with its student-athletes, who have relationships with academic advisors, nutritionists and sports psychologists, to name a few. However, he said, there's no firm indication whether someone's healthy, even if everything seems to be OK.

"At JMU, the student-athlete is the focal point of everything we do," Bourne said in his mental health dialogue. "The outcome of student-athletes graduating and leaving JMU poised for professional and personal wellness is more important than our competitive success."

JMU offers several mental health resources for student-athletes, many mentioned by Bourne in his dialogue. One is a Care and Recovery Enhancement Team (C.A.R.E.), a group of healthcare professionals who meet biweekly to discuss high-risk student-athletes; athletes can self-refer to the C.A.R.E. team or be referred by an athletics support staffer. Additionally, Dukes Let's Talk is a program designed for student-athletes to talk openly about mental health with professional staff support.

Dukes Lead, a [student-athlete leadership development program](#), is running a resilience-based training program for football players this summer adjusting to not being the star on the field, Bourne said. JMU is working to make its sports psychologist and doctoral students more present at team activities, Bourne said, and JMU's also considering adding mental health days to excuse student-athletes from practices who express a mental health concern.

The NCAA offers [mental health educational resources](#) on its website, a combined 19 fact sheets, checklists and toolkits, campus resources and video education modules ranging from anxiety and depression awareness sheets to a 68-minute video for coaches about how to have meaningful conversations about mental wellness with their student-athletes.

Still, Kilpatrick said she thinks the NCAA and its decision-makers can do a better job accommodating for the person and student behind the athlete.

“Any student-athlete will tell you that athletics is prioritized over academics in every program,” Kilpatrick said. “[Universities] want to win championships, they want money for the university, and if they want healthy student-athletes, that would be pretty great, too. It’s really sad how it’s come to this point, but I mean, I feel like it’s staring blatantly into the eyes of everyone in college athletics.”

Awareness, then what?

Bernett’s death April 25 sparked not just Kilpatrick’s letter but also support, grief and discussions about what’s valued in college athletics. Above all else, though, Bernett and the earlier deaths brought awareness to the mental health demands student-athletes face.

“These student-athletes are pushed and pressed and they have a lot of plates that are spinning and they’re trying to balance everything, and it can be absolutely overwhelming,” Oklahoma softball head coach Patti Gasso [said in a video the day after Bernett’s death](#). It amassed almost 135,000 views on Twitter. “It’s not about success [on the field]. It’s about all of the other things in life that go with it.”

ESPN posted a video May 5 on Twitter of [college softball players](#) sharing the sentiment: “It’s OK not to be OK.” It garnered over 637,000 views.

Former JMU baseball catcher/center fielder Travis Reifsnider changed his jersey from No. 6 to 22, Bernett’s number, for the season’s last seven games to bring awareness to student-athlete mental health, that “everybody has their battles and you [never know what every person is going through](#),” as he wrote in a statement shared on JMU baseball’s Twitter. Bridgewater College and Eastern Mennonite University [wore purple ribbons](#) in Bernett’s memory in the Old Dominion Athletic Conference (ODAC) softball tournament.

On top of it all, May is Mental Health Awareness Month.

But the deaths shouldn’t just bring awareness, Steve Miskelley said — there should be help on the other side.

“You almost can’t walk out the door without tripping over an awareness program,” Steve said. “The problem that I have with awareness programs is they stop with the ‘If you see all these things and you do all these things, tell someone and get help.’ Well, that just creates this tidal wave of patients with nowhere to go.”

Others interviewed by The Breeze agreed that mental health reform in college athletics goes beyond awareness, but they also said it’s a long road from advocacy to systemic change.

There are four “[mental health best practices](#)” for NCAA athletic programs, an outcome of a [mental health task force](#) created in 2013 and developed by 25 medical professionals in the NCAA Sports Science Institute and mental health organizations. The practices include clinical licensure of practitioners who provide mental health care, steps for identifying and referring student-athletes to qualified practitioners, pre-participation mental health screening and fostering environments that support mental well-being and resilience. These are recommendations, not mandated.

Warner said in an email May 31 that JMU meets NCAA’s mental health best practice guidelines. The C.A.R.E. team does pre-participation mental health screenings for all student-athletes at the beginning of the fall semester and sometimes additional screenings later on. C.A.R.E. also has a mental health action and management plan for emergency mental health situations to refer student-athletes to qualified practitioners, Warner said, and mental health care is provided to JMU student-athletes by licensed mental health professionals: a psychologist, professional counselor and psychiatrist, to name a few.

Kilpatrick proposed in her letter that a mental health practitioner be mandated at every university, for salaries of mental health practitioners at eligible universities to be subsidized and for increased education programs for staff and coaches.



Former UMass Lowell field hockey player Lauren Kilpatrick shoots the ball down the field during the 2021 season.

Screengrab from Lindsey Kilpatrick's Instagram

UMass Lowell didn't have a mental health counselor in athletics until this year, Kilpatrick said, and that counselor stepped down in early May.

The Breeze emailed UMass Lowell's assistant director for athletic communications May 30 asking where UMass Lowell student-athletes can go if they need mental health support but didn't receive a comment before publication. The Breeze submitted a media inquiry form on the NCAA's website for the Health & Safety/NCAA Sports Science Institute on May 29 to ask if Kilpatrick's proposals were feasible but didn't receive a comment before publication.

When Auerbach was at Arizona, he said, there were three full-time licensed mental health practitioners in the athletics department, along with behavioral, sleep and medicine specialists, a sports psychiatrist and community connections to make referrals to other specialized professionals. He said he remembers athletes used the resources "quite a bit" at Arizona because the mental health practitioners — one being himself — were embedded into athletics and therefore seen as part of student-athletes' teams, which leads to high usage.

Kilpatrick said UMass Lowell's lack of resources may be a result of what she believes is an issue central to the student-athlete mental health crisis: Money is allocated to the athletes' on-field needs first, then off-the-field well-being is second fiddle.

Auerbach said being mentally healthy and a high-performing athlete go hand in hand. But adding more resources — what Auerbach said is usually the answer to the NCAA's problems — doesn't apply to mental health change, he said.

"It can't just be put on the sports medicine professionals to solve this problem," Auerbach said. "This is a real crisis and a real issue college athletics has to figure out, and the way to do that is not by just asking the people who are giving everything they have to student-athlete health and welfare to give more, adding more of those people and hoping that that somehow magically solves the rest of the problems going on."

Solutions, however, are taking shape on grassroots levels. In Ian Miskelley's hometown of Holland, Michigan, Steve started [Be Better Holland](#) in June 2021, a service designed to "bridge the gap" to mental wellness, or to answer the question, "Now what?" following a mental health diagnosis or symptoms.

The grand vision, he said, is to have a mental health or wellness center for athletes built in Holland in 1-2 years, then eventually expand to other locations. Be Better Holland currently has one therapist who responds within 24 hours to families in crisis, so, Steve said, the patient gets serviced when it's needed most. Socialization and grief & loss support groups are offered, Steve said, and drop-in groups for socialization will be provided once the center's built.

JMU uses an anonymous messaging platform called [RealResponse](#) for student-athletes. It's anonymous so the athlete can overcome potential fear of reporting a concern, Warner said in an email, and it's used to communicate both individual concerns — mental health, family crisis, academic challenges — and issues a player may have with teammates or a coach.

RealResponse submissions go to the senior sport administrator and senior leadership team within the JMU Athletics administration, Warner said in a later email. This group never has access to which student-athlete submits a response and it can't force a student-athlete to identify themselves within RealResponse, Warner said — the student-athlete must elect to identify themselves if they wish. If a student-athlete expresses a severe mental health concern through RealResponse, Warner said the response back would encourage them to get help and list JMU-provided resources.

But as far as turning the page from awareness to action, Kilpatrick said, the idea and practice of student-athletes openly seeking help has to be more normalized.

Kilpatrick's had a therapist since spring 2020. But to justify to her mom that she needed one, Kilpatrick said, she felt she had to lie: She told her mom she was too angry on the field. Kilpatrick's dad didn't know she had a therapist because it wasn't billed to his insurance, she said.

"I could not ask to go to therapy ... even though I knew I needed a therapist," Kilpatrick said. "I don't know why that was such a hard front for me."

She said normalizing mental health struggles and therapy starts with simple conversation and being intentional about it: "I can't go to dinner. I have therapy at this time. Can we move it back a little bit?"

"Simple things like that and making it not this big taboo issue, you would be surprised how much that does," Kilpatrick said. She noted that student-athletes seeing others seek help could encourage them to do the same. "You see the psychiatrist and you're this crazy athlete that I feel like nothing can touch you on the field? Oh, then I can go see the psychiatrist."

More support, still stigma

Pushes to destigmatize athlete mental health have taken hold at the professional level. NBA forward Kevin Love [wrote about his struggles with mental health](#) in 2018 following an in-game panic attack. More recently, women's tennis player Naomi Osaka [dropped out of the 2021 French Open](#) citing mental health and Team USA gymnast Simone Biles [withdrew from the 2020 Tokyo Olympics](#) after suffering from the "twisties," a mental block where she'd lose awareness of the ground in midair.

In college, athletes stepping away for mental health also isn't unheard of. Ohio State offensive lineman Harry Miller medically retired March 10, citing an "[intention to kill](#)" himself the previous season. New JMU men's basketball transfer Noah Friedel stepped away from his 2021 season at South Dakota State to [treat depression and anxiety](#).

Even with mental health stigma changing around athletics, Auerbach said, there's still much work left to do. And, he said, age-old models like the American Medical System may be too ingrained in the culture at this point.

"In intercollegiate athletics, physicians and athletic trainers have more medical decision-making authority than mental health practitioners," Auerbach said. "So those things, until we start to think about mental health as equal to physical health, I don't know that we're going to get to that utopia."

Increased athlete-psychologist relatability, Houle said, is a step toward decreasing stigma. As a former Ohio State student-athlete, he said he's better able to relate to Ohio State's current ones.

"A lot of times where mental health professionals miss it, is that they don't get the culture of athletics," Houle said. "They might just go, 'Hey, it's really hard, your sport really sucks at times, why don't you just quit?' Well, if athletics is the way I pay for my college, or if athletics is the way I got to college and I'm a first-generation student, that's not really an option. So we need providers who understand the culture in order to provide the best care."

But not every student-athlete needs mental performance work, like positive self-talk, Joe Kennedy said. On the flip side, he said, some use it often — even some overutilize, he said — while some need to but don't realize it.

Parents of student-athletes are working to decrease the stigma that was prevalent in their generation, when knowledge about mental health wasn't as mainstream. Terri White Robinson ('87), a former JMU Dukette, has a son, Parker, on the swim & dive team at the College of Wooster, a Division III school in Ohio. She said Parker hasn't spoken directly to her about his stress but that she can sense it over text following a performance he isn't satisfied with — this is when she encourages Parker to talk through the result rather than internalizing it: "You're going to get it next time; let's see if you can get into the finals."

In wake of this year's suicides at JMU — White Robinson said she knew the student who took their own life Jan. 31 through shared friendships in their Virginia Beach hometown — White Robinson said she's constantly wondering whether she's missing signs of mental distress in her two sons. She also said, right now, her sons' grades don't matter to her.

"As a parent, my focus on them is, 'Are they happy? Can I get to them? Will they talk to me?'" White Robinson said. "The student-athlete part [of Bennett's death] didn't affect me as much as a mom of a student-athlete as just being a mom [did]."

For Ric McClure, JMU field hockey senior Kara McClure's father and a former Division III women's basketball coach, he said he'll touch on field hockey in 10-minute phone calls with Kara for maybe 30 seconds, keeping conversations about Kara's sport "light and positive." After the fall semester of Kara's freshman year, Ric said he felt Kara had a good handle on her student-athlete demands.

When Ric was coaching, he said, he'd make a point to briefly chat with each player before every practice and game about anything: basketball, classes, life or otherwise to get a feel for their attitude that day. But, he said, pressures persist for most student-athletes, sometimes having nothing to do with the coach or peers.

"JMU football is supposed to win; JMU lacrosse is supposed to win; softball's supposed to win — because that's how they are JMU," Ric said. "I think a lot of the kids can handle it pretty well — their mental health is pretty, pretty good — but it affects a lot of the other kids. Maybe they're reasonable expectations, maybe they're not."

Ric said very few coaches he knows are all about winning or put unreasonable expectations on their players; he said his favorite thing to do as a coach is build players back up when they feel overwhelmed. Yet, Auerbach said, college coaching culture "glorifies the grind," something he said many student-athletes think they have to emulate, even at the expense of their mental well-being. A coach never gets fired for working too hard, Auerbach said.

Steve recommended parents force their kids to take breaks if goals become too lofty, as he said that Ian didn't savor his accomplishments because he was always on to the next goal. Steve did tell The Breeze that Ian was an "extreme case" — Ian was diagnosed with depression and anxiety at age 12 and, despite extensive support, "couldn't overcome the demons in his head."

But, Steve said, the point remains: Destigmatizing student-athlete mental health begins with celebrating the person over the athletic accomplishment. Steve called this "athlete utopia," or when a student-athlete can walk away from their sport to work on their mental health, fearing no judgment from coaches, players or fans.

"We need to reward the brave athlete that steps forward and says, 'I can't do this anymore. I need some help,'" Steve said. "Are we ever going to get there? It's hard to say."

'Toughing it out'

Ric approached one of his players before practice during his routine check-ins midway through the 2016 season. This was a "rock," "one of the tough guys," he called her, a four-year starter who played three Division III sports.

He said something seemed wrong that day.

"She just broke down right in front of me," Ric said, "and to this day, I really don't know what her problem was ... It caught me by surprise because she's probably the last person I thought would have an issue like that."

Auerbach said, suicide aside, almost everyone goes through something we don't know about. He said those thoughts manifest themselves differently — some people can easily show vulnerability, while others can't.

It's been a common narrative with the recent student-athlete suicides: Katie Meyer's mother told FOX 8 that Meyer was in "great spirits" a few hours before she died. Bernett grinned and laughed during multiple interviews with The Breeze.

The personality, and perceived front, is where it gets tricky, Auerbach said. Instead of focusing on whether a suicide feels out of character or being in denial because the athlete seemed happy, Auerbach said to focus on what might've contributed to the athlete not feeling like they could express vulnerability.

"For student-athletes, there can be a concern about, 'If I speak up about what I'm experiencing, am I going to lose my scholarship? Am I gonna lose my place on the team? What are people gonna think of me?'" Auerbach said. "It's creating these conditions that lead to these outcomes [suicide] ... A lot of behavior's impacted by the environment."

One of those behaviors, "toughing it out," may have revealed itself in the SAMHSA study, Steve said: Of the 35 student-athlete suicides, 29 were male and 13 were football players; men accounted for 57% of the study's participants but 82.9% of the suicides.

More college football players compared to other sports might warrant its larger number, Auerbach said, but Steve said he thinks it's because male mental health is "absolutely" stigmatized, though he said the "tough it out" mentality isn't exclusive to men.

"You can see some of the kids when they get hurt in the field, they're not coming off. They don't want to come off — they wave the trainers off," Ric said. "There's always going to be tough kids, but the adult's got to be adult. They got to take control, and you got to know when to pull them out and know when to leave them in."

Changes in demeanor — "small red flags" like a once-outgoing athlete being more reserved — are primary triggers for Kennedy to check in with an athlete as a mental performance coach, he said. At a check-in, if he deems the athlete needs help beyond mental performance — more than confidence, goal-setting or focus, for example — Kennedy said, he sends them to a clinical sports psychologist for further evaluation.

But it's scariest when signs aren't noticed, Steve said.

"You're on crutches, it's very apparent that you need help, so people will open the door for you, or they'll help you pick up things that you dropped," Steve said. "You have a mental health issue, it is not obvious."

With Ian, front-end prevention was implemented to minimize his risk of suicide. Steve said Ian made a comprehensive suicide safety plan with his psychiatrist of who to call and what to do or avoid if feelings of anxiety, depression or suicide ideation arose.

The safety plan was taped to Ian's bedroom wall when he committed suicide, Steve said.

"The patient has to diagnose himself and reach out for help at a time when they're least able to do that," Steve said. "I think that, to me, is the crux of the issue."

Houle said if a student-athlete approaches him with thoughts of suicide or self-harm, he guides a discussion to create a 10-step safety plan, similar to what Ian had. The plan, he said, includes calling parents, friends, himself and going to the hospital.

Auerbach said supportive and comforting conversations are valuable after suicides, more so than dancing around the topic. However, he said, going into too much detail can cause distant and cold conversations.

And while these conversations can be challenging, peeling back the “tough guy” doesn’t show fragility, Tim Miller said — it shows vulnerability.



Tim Miller, JMU's vice president for student affairs, said mental health issues among college students, not just student-athletes, have increased exponentially during and coming out of the pandemic.

Breeze file photo

“Vulnerability is not weakness; the ability to ask for help is actually strength,” Miller said. “It's knowing yourself, knowing how to take care of yourself. And then you have those moments when you're in the field where you can be tough in those moments, but you need to be able to ask for that help. And that vulnerability, I think, is actually key to everyone's overall health and well-being.”

Houle said that after an athlete opens up about a mental health issue to him, he thanks them for sharing and tells them: “I believe you.”

For Kilpatrick, the fallout from her March 21, 2021, panic attack was almost as revealing as the attack itself. Kilpatrick said when she returned to play 2 1/2 weeks later, her teammates sat in a circle so she could address them. The conversation — “one of the hardest days of my life,” Kilpatrick said — moved her to tears. She explained to her teammates what a panic attack is and that her experience wasn’t their fault. She said she felt sorry that she left the team as a leader but said she’d be a hypocrite if she didn’t take a break, as she’d tell others to do the same.

But the revelation came afterward, from all the teammates who texted Kilpatrick saying they felt the same way but needed her to be their voice. Kilpatrick said she realized many mental health struggles could’ve been prevented with earlier communication.

“If someone just said something, we would all have been helping each other out or getting the help we needed and going to the appropriate resources so much sooner,” Kilpatrick said. “That's just so crazy, like, almost everyone's experiencing it, but you never know. You would never know.”

Despite her hardships, Kilpatrick calls her student-athlete experience worth it because she wouldn't have been the mental health advocate she is today without it. In a follow-up email to The Breeze on May 28, she said she thinks her mental health struggles and perfectionism still would've revealed themselves in college as a regular student, but maybe not as quickly as it did "in the pressure cooker that is college athletics."

After sharing her letter, Kilpatrick said she's had about 50 student-athletes message her their mental health stories. Since she's brought Morgan's Message — a platform named after Morgan Rodgers that [strives to eliminate mental health stigma](#) — to UMass Lowell, a handful have told Kilpatrick that her story has kept them from committing suicide.

"Right now, a lot of student-athletes feel that a lot of this is — they get so hard on themselves like this is their fault," Kilpatrick said. "They're struggling in silence."

This story was updated at 9:51 p.m., May 31

Madison Hricik contributed to this report.

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CORRECTION (9/29/2022 12:38 p.m.): A previous version of the article recorded an incorrect date for Lindsay Kilpatrick's panic attack toward the end of the story. The article has been updated to indicate Kilpatrick's panic attack occurred on March 21, 2021, not Sept. 26, 2021.



JMU, softball communities remember Lauren Bernett