The Role of NCAA Division I University Athletic Departments in the Transition of Their Career-Ending Injured Athletes Out of Sports

Kaitin Rohrs
Bowling Green State University

Follow this and additional works at: https://scholarworks.bgsu.edu/hmsls_mastersprojects

Repository Citation
https://scholarworks.bgsu.edu/hmsls_mastersprojects/23

This Article is brought to you for free and open access by the Human Movement, Sport, and Leisure Studies at ScholarWorks@BGSU. It has been accepted for inclusion in Masters of Education in Human Movement, Sport, and Leisure Studies Graduate Projects by an authorized administrator of ScholarWorks@BGSU.
THE ROLE OF NCAA DIVISION I UNIVERSITY ATHLETIC DEPARTMENTS IN THE TRANSITION OF THEIR CAREER-ENDING INJURED ATHLETES OUT OF SPORTS

Kaitlin Rohrs

Master’s Project

Submitted to the School of Human Movement, Sport, and Leisure Studies
Bowling Green State University

In partial fulfillment of the requirements for the degree of

MASTER OF EDUCATION
In
Sport Administration

April 20, 2015

Project Advisor

Dr. Amanda Paule-Koba

Second Reader

Dr. Ray Schneider
Table of Contents

Abstract .............................................................................................................................................. 3

Introduction ......................................................................................................................................... 4

Review of Literature .......................................................................................................................... 7
  Career Termination and Transitional Models ................................................................................ 8
  Athletic Identity ............................................................................................................................... 12
  Psychological Effects and Social Support of Career-Ending Injured Athletes ......................... 14
  Written Policies and Procedures in Collegiate Athletic Departments ........................................ 17
  The Need for Written Policies and Procedures for the Handling of Career-Ending Injuries ....... 20

Method .............................................................................................................................................. 23
  Sample ............................................................................................................................................... 24
  Data Collection Procedures ............................................................................................................ 24
  Data Analysis .................................................................................................................................. 25

Results .............................................................................................................................................. 26
  Table 1 Career-Ending Injury Policies: Inductively Developed Thematic and Sub-Thematic Categories ......................................................................................................................... 27
  Table 2 Procedures Guiding the Handling of Career-Ending Injury Policies: Inductively Developed Thematic Categories ......................................................................................................................... 28
  Table 3 Intervention Strategy Options: Inductively Developed Thematic and Sub-Thematic Categories ................................................................................................................................. 29
  Career-Ending Injury Policies ........................................................................................................ 30
    Decision Maker(s) of Medical Disqualification ........................................................................... 30
    Renewal/Non-Renewal of Athletic Aid ......................................................................................... 31
      Qualification ................................................................................................................................ 31
      Requirements ............................................................................................................................. 32
      Maximum Amount of Years of Aid .............................................................................................. 34
      NCAA Student Assistance Fund ................................................................................................. 35
    Medical Insurance ....................................................................................................................... 35
  Procedures Guiding the Handling of Career-Ending Injury Policies ........................................ 36
  Intervention Strategy Options ......................................................................................................... 38

Discussion ......................................................................................................................................... 40
  Relevance to Literature .................................................................................................................... 41
  Implications ...................................................................................................................................... 48
  Limitations ....................................................................................................................................... 53
  Directions for Future Research ...................................................................................................... 54

Conclusion ........................................................................................................................................ 55

References ......................................................................................................................................... 58
Abstract

The NCAA and member institutions claim the responsibility to support and protect collegiate athletes with a priority on their well-being (NCAA, 2014). Although the NCAA provides financial assistance to selected career-ending injured athletes, university athletic departments define the assistance they offer their athletes who obtain career-ending injuries before their athletic eligibility is up (NCAA, 2014). Therefore, there are no universal policies, procedures, or standards in place to ensure that each injured athlete’s well-being is supported and protected during this traumatic life event (Walsh, 2013). Due to the lack of knowledge on written policies and procedures enforced by athletic departments when an athlete sustains a career-ending injury (Rohrs & Paule-Koba, 2014), this research study investigated the current written policies and procedures related to handling the situation and transition of an athlete obtaining a career-ending injury enforced in the 2014-2015 student-athlete handbooks of 23 Division I NCAA university athletic departments from the B1G and MAC conferences. Using thematic textual analytic procedures (Braun & Clarke, 2006), findings revealed written policies used to guide the majority of NCAA Division I athletic departments’ handling of athletes with career-ending injuries were inadequate, and discovered scarce, inconsistent written procedures enforcing adherence to these policies. The majority of written policies focused on the renewal and non-renewal of athletic aid. Findings implied there is more the NCAA and its institutions can do to fulfill their mission in providing career-ending injured collegiate athletes with consistent protection and support for their overall well-being during their transition out of sport. Implications included increased mandates enforced by the NCAA and educating sport administrators, coaches, and athletes on the transitional process out of competitive sports due to a career-ending injury.

*Keywords:* career-ending injury, college athletics, sport administration, sport retirement
The Role of NCAA Division I University Athletic Departments in the Transition of Their Career-Ending Injured Athletes Out of Sports

The National Collegiate Athletic Association (NCAA) asserts that one of its main principles is to protect and support collegiate athletes with a priority on their overall well-being (NCAA, 2014). However, the association and its member institutions receive criticism for the exploitation of collegiate athletes to generate revenue and for the insensitive management of athletes sustaining career-ending injuries (Beamon, 2008; Walsh, 2013; Zirin, 2013). A career-ending injury is described as an injury or illness that restricts an athlete’s participation in further varsity competition in the collegiate sport(s) in which he or she obtained financial aid (NCAA, 2014). Even though the NCAA provides Catastrophic and Exceptional Student-Athlete Disability Insurance Programs, the majority of career-ending injured athletes do not meet the criteria to benefit from these programs (Walsh, 2013). Although the association claims their athletes are “students first, athletes second” (NCAA, 2014), their athletes’ athletic scholarships are normally up for renewal each year. An athlete that obtains a career-ending injury is not guaranteed to have their scholarship renewed in subsequent years, even if their academic status is up to par (Sack, 2008). In addition, problems due to the association members’ lack of attention to the psychosocial effects with career-ending injuries suffered by athletes in collegiate sport continue to exist (Rohrs & Paule-Koba, 2014; Stoltenburg, Kamphoff, & Lindstrom Bremer, 2011).

This is an important issue as forced early retirement caused by a career-ending injury is a unique and traumatic life occurrence for an elite athlete (Blinde & Greendorfer, 1985). After years of self-sacrifice and hard work, an elite athlete’s career ceases unexpectedly. This non-normative athletic retirement often entails significant psychosocial adjustments as these athletes often feel they face the mental and physical consequences of their career-ending injuries alone.
(Alferman, Stambulova, & Zemaityte, 2004; Lally, 2007; Pearson & Petitpas, 1990; Stoltenburg et al., 2011). In general, these athletes do not receive adequate attention from coaches, sports administrators, governing sports organizations, and other professionals who claim to be responsible for their overall well-being (Lavallee, 2005; Rohrs & Paule-Koba, 2014).

Scholars have utilized a variety of models to describe the transition process athletes undergo when adjusting to athletic career termination. Whether it is a normative or non-normative transition, these models classify similar phases and factors that influence the athlete’s ease of transition out of sport (Blinde & Stratta, 1992; Grove, Lavallee, & Gordon, 1997; Stephan, Bilard, Ninot, & Delignieres, 2003; Stoltenburg et al., 2011; Taylor & Ogilvie, 1994; Wooten, 1994). Over-identification of athletic identity significantly influences a career-ending injured athlete’s transition out of sport (Baillie & Danish, 1992; Stoltenburg et al., 2011; Webb, Nasco, Riley, & Headrick, 1998). Career-ending injured collegiate athletes with high athletic identity depend on social support to help them overcome psychosocial, physical, and emotional adjustments they experience following their exit out of sport (Grove et al., 1997; Malinsaukas, 2010; Rohrs & Paule-Koba, 2014; Stephan et al., 2003; Stoltenburg et al., 2011). Athletes without adequate support experience more emotional, physical, and psychological distress. A variety of multidisciplinary interventions and resources such as medical, psychosocial, educational, and spiritual practices must be available to help these athletes during their transition out of sport.

The NCAA allows individual universities to decide what assistance they offer their athletes who suffer career-ending injuries before their athletic eligibility is up (NCAA, 2014). Given the inevitability that university athletic departments will face this situation more than once (Walsh, 2013), university athletic departments must contain and maintain written policies and
procedures in their student-athlete handbooks to establish consistency and fairness in the handling of these non-normative forced retirements (Hums & MacLean, 2013). Currently, there is no research available related to the role of the university athletic department in the collegiate career-ending injured athlete’s transition out of college sports as well as there is a lack of knowledge on the common written policies and procedures that collegiate athletic departments enforce when an athlete sustains a career-ending injury.

In response to this gap in the literature, the purpose of this research study was to investigate the current written policies and procedures related to handling the situation and transition of a collegiate athlete obtaining a career-ending injury that are enforced by Division I university athletic departments. Since individual university athletic departments determine what happens to the status of their career-ending injured athletes within the athletic department and because there are no universal policies, procedures, or standards in place (NCAA, 2014; Walsh, 2013), it was significant to identify and analyze current written policies and procedures that individual universities have in place to guide their decisions. It was also important to identify and evaluate intervention strategies available and made known to their student-athletes through their student-athlete handbook in order to help their career-ending injured athletes transition as smoothly as possible out of sport. While it appears the NCAA places the responsibility for helping collegiate career-ending injured athletes transition out of sports upon its member institutions (NCAA, 2014; Walsh, 2013), if there are no written policies and procedures in place or intervention strategies available to support and protect the well-being of these athletes, than neither the NCAA nor its member institutions have fulfilled their mission in providing these collegiate athletes with consistent protection and support for their overall well-being during their transition out of sport.
In order to fulfill the purpose of this study, the 2014-2015 student-athlete handbooks of Division I NCAA institutional members belonging to the Big Ten and Mid American Conferences were collected and thematic textual analysis was conducted to answer the following research questions:

1. What current written policies are in place in NCAA Division I university athletic departments that guide their handling of athletes with career-ending injuries?

2. What current written procedures are utilized in NCAA Division I university athletic departments that enforce the adherence to the athletic department’s policies that guide their handling of athletes with career-ending injuries?

3. What currently documented intervention strategy options do NCAA Division I university athletic departments have available to their athletes that suffer career-ending injuries?

This study examined the current written policies and procedures in place in NCAA Division I university athletic departments that guide and enforce their decision-making and handling of athletes with career-ending injuries. It also explored the types of intervention strategies available and made known through documentation in the student-athlete handbook to these athletes by these institutions in order to assist their career-ending injured collegiate athlete’s transition out of college sports. Overall, this study provides evidence that determines if the NCAA and its member institutions have fulfilled their mission in providing these collegiate athletes with consistent protection and support for their overall well-being during their transition out of sport. Implications on how NCAA member institutions can fulfill their mission in providing these collegiate athletes with consistent protection and support for their overall well-being during their transition out of sport are also discussed.

**Review of Literature**

This section presents a review of the literature associated with career termination and transactional models, athletic identity, social support, and the psychosocial effects relating to
sport exit due to a career-ending injury. As demonstrated in the introduction of this study, the literature behind each of these topics interrelates with one another. Next, background literature associated with written policies and procedures in collegiate athletic departments is presented. The final segment contains the argument for the need of written policies and procedures related to the handling of career-ending injured athletes within the collegiate athletic department.

**Career Termination and Transitional Models**

Athletic career termination can be described as either a normative or a non-normative transition out of sport. Normative transitions are considered planned and often voluntary in nature, while non-normative transitions are unexpected and end with involuntary retirement from sport (Stoltenburg et al., 2011). An example of a normative transition would be Jim Brown’s voluntary retirement from the NFL at the peak of his career or a collegiate athlete’s choice not to pursue a professional athletic career upon graduation. Examples of a non-normative transition would be an athlete’s unexpected cut from an athletic team or a collegiate athlete suffering a career-ending injury (Kleiber, Greendorfer, Blinde, & Samdahl, 1987). Non-normative sport exits are generally more traumatic and disruptive than planned normative exits due to the sudden nature of their occurrence in the individual’s athletic career (Blinde & Stratta, 1992). Although much of the research on sport exit transitions involves normative events (Wylleman, Alfermann, & Lavallee, 2004), the focus of this review of literature is on the limited research available for non-normative events. It also includes selected studies on normative events that are applicable to the unexpected termination of an athletic career.

Whether an athlete undergoes a normative or non-normative athletic career retirement, each faces a transitional process (Alferman et al., 2004; Blinde & Stratta, 1992; Stoltenburg et al., 2011; Wooten, 1994). In general, Wooten’s (1994) Integrative Transition Model combines
Hopson and Adam’s (1977) Seven-Phase Model of Stages Accompanying Transition with the CASVE Model of Decision-Making (Peterson, Sampson, & Reardon, 1991) to identify emotional and cognitive factors associated with successful career transition. The main use of the Integrative Transition Model is counseling interventions for collegiate athletes in transition (Wooten, 1994). In research preceding the conceptualization of his integrative model, Wooten identified six factors that may hinder an athlete’s successful transition: high athletic identity, gap between aspiration and ability, little experience with transition, limited adaptability, lack of support systems, and lack of coping resources.

In a qualitative study conducted by Blinde and Stratta (1992) on athletes who had either been involuntarily cut from their collegiate athletic team or whose sports program was suddenly eliminated, the majority of athletes experienced a series of responses similar to the Stages of Grief Model (Kubler-Ross, 1969) associated with death and dying. Although this model consists of five stages (shock and denial, anger, bargaining, depression, and acceptance) that dying individuals commonly progress through during the termination of their life, Blinde and Stratta used the model as a framework to help understand an athlete’s exiting process out of non-normative athletic career termination based on their subjects’ experiences.

After experiencing the initial shock and instant denial of the sudden termination, Blinde and Stratta (1992) found that the majority of athletes felt angry and betrayed by those involved in the decision leading to the termination of their athletic career due to their sense of loss and powerlessness. Athletes cut from a team often responded with feelings of hopelessness due to the abrupt realization that intercollegiate sport does not always consider an athlete’s welfare. These feelings led to depression, which was generally the most prolonged stage of grief. Athletes who lacked a support group or resorted to extreme isolation due to thoughts that their non-sport
acquaintances did not understand their situation experienced the most severe forms of depression, which led to unusual behavioral and personality changes. The suddenness of the termination decision, sense of unfinished business, constant reminder of the sport exit due to continued life in the same environment that it occurred in, and the degree of athletic identity served as possible factors that influenced the longevity of the adaptability to the career termination through the transitional model (Blinde & Stratta, 1992). This model of adaptation may also relate to an athlete’s response to other non-normative athletic career terminations such as an athlete suffering a career-ending injury (Klieber & Brock, 1992; Stoltenburg et al., 2011).

In addition to the Stages of Grief Model (Kubler-Ross, 1969), the Conceptual Model of Adaptation to Career Transition (Taylor & Ogilvie, 1994) is a framework that some researchers used to examine the transitional process of an athlete who specifically suffered a career-ending injury (Stoltenburg et al., 2011). This model consists of five stages, each containing specific factors that contribute to an athlete’s successful transition (Taylor & Ogilvie, 1994). Stage 1 determines the reasons for athletic retirement, such as free choice or the consequences of an injury. Stage 2 focuses on factors such as self-identity; developmental contributors; environmental, personal, and social variables; and self-perception of control related to the adjustment to the transition. Stage 3 consists of the available resources athletes may utilize to adapt to the transition out of sport which include social support and coping strategies. Stage 4 determines the overall quality of the athlete’s adaptation to career termination, or how well (or unwell) the athlete is adjusting in life. Stage 5 is dependent on the first four stages. It discusses possible intervention strategies available for use by practitioners who work with athletes and are responsible for their well-being during this transition (Stoltenburg et al., 2011, p. 116).

Stoltenburg et al. (2011) utilized the entire model to explain the athlete’s transitional
process when suffering a career-ending injury. The researchers identified five distinct themes in their qualitative study conducted on seven Division I and II collegiate athletes who had recently suffered a career-ending injury. The five themes were consequences of the injury, social support, athletic identity, nature of the injury, and pre-retirement planning. Findings indicated that the Conceptual Model of Adaptation to Career Transition (Taylor & Ogilvie, 1994) could be used to describe the transitional process that these athletes go through during their exit out of sport. Stoltenberg et al. found that an athlete’s degree of athletic identity and the broadness of that social identity, tertiary factors (years of competing in the sport and overall health), and perceived control of the sport exit all affected the ease of transition out of sport for individual athletes (Stage 2). In addition, the majority of the subjects discussed the various coping strategies they utilized and the amount of social support they received that either facilitated or prolonged their transitional adjustment (Stage 3). Lastly, the quality of an athlete’s adjustment to life after sports was an actively discussed topic among the athletes (Stage 4). These researchers determined that a combination of Stage 2 and 3 components best determined the overall quality of the career transition (Stoltenburg et al., 2011).

Researchers use many different models in an attempt to explain the transition process athletes undergo when adjusting to an athletic career termination. Whether the process is a normative or non-normative transition, all of these models have identified similar stages and factors that influence the athlete’s ease of transition out of sport (Alferman et al., 2004; Blinde & Stratta, 1992; Stoltenburg et al., 2011; Taylor & Ogilvie, 1994; Wooten, 1994). As previously discussed, Wooten (1994), Blinde & Stratta (1992), and Stoltenburg et al. (2011) similarly identified athletic identity as one of the most important factors influencing a non-normative transition out of an athletic career. Due to personal investment and self-sacrifice for a major
portion of their life in sports, athletes, especially at the collegiate level, generally experience a sense of loss when their role as a player on a team is terminated (Hallinan & Snyder, 1987; Rohrs & Paule-Koba, 2014). This sense of loss intensifies as the athlete faces a forced sudden transition into a new self-identified role in society (Rohrs & Raule-Koba, 2014).

**Athletic Identity**

Some researchers believe an individual’s degree of athletic identity is the single most important factor affecting an elite athlete’s adjustment to either a planned or an unplanned retirement from sport (Baillie & Danish, 1992; Moshkelgosha, Tojari, Ganjooe, & Vaez Mousayi, 2012; Werthner & Orlick, 1986). Athletic identity is the degree to which the individual self identifies with the role of an athlete from both a cognitive and social aspect (Horton & Mack, 2000). It is said that athletic identity acts as the athlete’s Hercules’ muscles (strength) or Achilles’ heel (weakness) as it is the root of an athlete’s driving strength, both mentally and physically, yet it is also the athlete’s sole point of destruction (Brewer, Van Raalte, & Linder, 1993). The degree of athletic identity influences an athlete’s athletic performance, social network, self-esteem, and overall sense of well-being. However, over-identification of athletic identity may be detrimental to an athlete when an unplanned event such as a career-ending injury forces early retirement as the athlete is unprepared for the physical and psychosocial consequences (Baillie & Danish, 1992; Grove et al., 1997; Webb et al., 1998).

When suffering a career-ending injury, the athlete’s degree of athletic identity greatly influences their transition out of sport. Athletes who maintain a strong athletic identity experience a more difficult transition out of sport as the majority identify former teammates as their social network and feel the sport role as a whole has consumed a large portion of their lives (Blinde & Stratta, 1992; Rohrs & Paule-Koba, 2014; Stoltenburg et al., 2011). Athletes with a
weaker athletic identity find their transition easier as they usually maintain a support system outside of their athletic surroundings (Grove et al., 1997; Stoltenburg et al., 2011). Athletes with high athletic identity are more likely to seek social support and suppress the negative feelings associated with their former competitive activities than those who have low athletic identity (Grove et al., 1997).

Not only does the degree of athletic identity influence a career-ending injured college athlete’s social network during their transition out of sport, it also affects their emotional and social transitional adjustments, coping processes, anxiety level, and pre-retirement planning related to career decision-making after their career in the sport (Erpic, Wyelleman, & Zupancic, 2004; Grove et al., 1997; Rohrs & Paule-Koba, 2014; Stoltenburg et al., 2011). Grove, Lavallee, and Gordon (1997) found that athletic identity had a positive correlation with former elite athletes’ anxiety in regards to exploring options and making decisions regarding future career paths after sport retirement. However, anxiety was negatively correlated with pre-retirement career planning. Before their injuries occurred, many career-ending injured athletes did not think about their future, consider the possibility of a career-ending injury, or develop alternate career and financial plans in case their athletic career was cut short (Stoltenburg et al., 2011).

The effects of a high athletic identity are detrimental to both the emotional and mental aspect of a retired athlete, even in the absence of a career-ending injury. Moshkelgosha, Tojari, Ganjooee, and Vaez Mousayi (2012) found that changes in an individual’s athletic identity caused 85 percent of the changes in psychosocial problems experienced by Iranian elite male athletes that had retired in the previous three years. In addition, 65 percent of the changes in professional problems related to altered athletic identity. Moshkelgosha et al. found that athletes in the study who ranked their participation in their sport very highly were more likely to
experience these greater risks of psychosocial problems and experience difficulty succeeding in the transition out of their sport successfully. Based on these results, the researchers concluded that athletic identity was the most important factor in reducing problems associated to an athlete’s retirement as athletic identity formation was determined to be an evolutionary and long process for an elite athlete (Moshkelgosha et al., 2012).

Although the previous research studies describe the significance of athletic identity on an athlete’s transition out of sport, whether planned or unplanned, none of these research studies identify specific interventions that counteract the negative effects associated with a retired athlete’s over-identification of athletic identity (Baillie & Danish, 1992; Grove et al., 1997; Moshkelgosha et al., 2012; Stoltenburg et al., 2011). The ease of transitional adjustment out of sport for collegiate athletes who suffered a career-ending injury may be facilitated by increasing the athlete’s focus on other positive areas in their life while simultaneously minimizing the negative effects of the sudden identity change (Cosh, Crabb, & LeCouteur, 2013). Career-ending injured collegiate athletes with high athletic identity rely on social support as an intervention to help them make the emotional, physical, and psychosocial adjustments necessary to successfully transition out of sport (Grove et al., 1997; Rohrs & Paule-Koba, 2014; Stoltenburg et al., 2011).

**Psychosocial Effects and Social Support of Career-Ending Injured Athletes**

One of the most devastating non-normative experiences that most researchers who study sport career termination neglect to investigate is the transition of a college athlete forced into early athletic career retirement due to a career-ending injury (Wylleman et al., 2004). This non-normative athletic retirement is a traumatic life event, rather than a minor occurrence, as these athletes face a significant amount of emotional, psychosocial, and physical adjustments in their lives (Baillie, 1993; Blinde & Greendorfer, 1985; Klieber & Brock, 1992; Rohrs & Paule-Koba,
Researchers studying athletes’ reactions to career-ending injuries identify common effects including loneliness, loss of confidence, grief, identity loss, fear and anxiety, alcohol abuse, depression, and suicide (Alfermann et al., 2004; Lally, 2007; Pearson & Petitpas, 1990; Rohrs & Paule-Koba, 2014; Stoltenburg et al., 2011). These athletes with a high athletic identity and a limited social identity experience more severe reactions to their sudden exit out of sport compared to other athletes that have a high athletic identity that face other non-normative sport retirements (Erpic et al., 2004; Grove et al., 1997; Stoltenburg et al., 2011).

A study of life satisfaction following career termination conducted by Kleiber, Greendorfer, Blinde, and Samdahl (1987) determined that former collegiate male basketball and football players whose injuries were the cause for athletic career termination had lower life satisfaction due to the lack of control of their inability to successfully complete their role as a college athlete. Following this study, Klieber and Brock (1992) focused on the general well-being, specifically current life satisfaction and self-esteem, of collegiate athletes. Their results validated previous research that found athletes who suffered a career-ending injury had lower life satisfaction five to ten years following their retirement when compared to former college athletes who had not suffered a career-ending injury. In addition, Klieber and Brock found that athletes who originally planned to enter a professional sport career (high professional sport orientation) but sustained a career-ending injury had lower life satisfaction and self-esteem after college when compared to the career-ending injured athletes who had non-athletic professional career plans (low professional sport orientation). In addition, the high professional sport orientation group showed less concerns with their participation, success, and value of a college education as
they had a higher psychological investment in the future professional sport career that awaited them (Klieber & Brock, 1992).

Social support is essential in fostering a smooth transition out of sport for collegiate athletes that suffer a career-ending injury (Grove et al., 1997; Rohrs & Paule-Koba, 2014; Stephan et al., 2003; Stoltenburg et al., 2011). It can be described as the perception and actuality that an individual is cared for, is a part of a supportive social network, and has assistance available from others (Pearson, 1986). For instance, renewal of a career-ending injured athlete’s scholarship to cover his/her college tuition and counseling from a collegiate sport team’s psychologist could be examples of receiving helpful assistance and support from others (Rohrs & Paule-Koba, 2014). It also may include professional and non-professional social resources an athlete perceives as available and helpful such as informal everyday relationships or the use of a formal support group (Malinsaukas, 2010). Stoltenburg et al. (2011) and Rohrs and Paule-Koba (2014) found that career-ending injured collegiate athletes who are surrounded by a positive environment of coaches, teammates, athletic trainers, athletic administrators, friends, and family transition more smoothly out of their role as an athlete, while those who lack adequate support experience more emotional, psychosocial, and physical distress when trying to adapt to a life outside of sport. Overall, social support is very important in the everyday life of a career-ending injured athlete as it works in a global way to enhance the well-being of the athlete and prevent isolation. It functions to protect the athlete from harmful effects caused by the life event of suffering a career-ending injury (Rees, Smith, & Sparkes, 2003).

A career-ending injury often creates structural changes in an athlete’s current social network. Relationships established with college coaches, teammates, athletic administrators, trainers, fans, and boosters based on an individual’s athletic status may be lost when an athlete
no longer belongs to the network of college sport professionals, which brings about a profound loss of personal status and social roles (Rohrs & Paule-Koba, 2014; Wippert & Wippert, 2008). Rohrs and Paule-Koba (2014) found that Division I career-ending injured collegiate athletes who did not remain as members of their athletic teams felt more isolated during their transition process out of sport as well as appeared to receive less social support from their athletic administration, coaches, and teammates than those who remained as members of their teams.

College athletes suffering a career-ending injury may find their current social support interactions become more negative than positive. This social disintegration of the athlete’s social network represents a breakdown in the “social immune system” of the athlete (Wippert & Wippert, 2008, p. 3). In a study conducted by Udry, Gould, Bridges, and Tuffey (1997), researchers found that U.S. Ski team members that obtained season-ending injuries perceived a lack of sensitivity and concern from others about their injury and felt others became distant during their recovery. Individuals who surrounded the athlete on a daily basis often did not know how to provide helpful support and distanced themselves from the athlete. Besides distancing, Lehmen, Ellard, and Wortman (1986) believe many individuals surrounding an injured athlete minimize the importance of the injury, avoid talking about it, criticize the athlete’s attempts at coping and/or encourage a quick coping process, and give inappropriate advice.

**Written Policies and Procedures in Collegiate Athletic Departments**

It can be said that written policies and procedures should be at the core of every organization. Prior to the passage of the Sarbanes Oxley Act in 2002, the majority of organizations did not possess written documentation to support their policies and procedures (Widzinski, 2010). One of the mandates provided in the Sarbanes Oxley Act requires management of publicly traded companies to formally demonstrate the effectiveness of their
internal controls. Although by law private companies are not required to comply with these same mandates, it is believed to be in the best interest of all organizations, despite size, to provide formal, documented policies and procedures as well as periodically validate their effectiveness (Andrus, 1990; Conn, 1991; Hums & MacLean, 2013; Widzinski, 2010).

Policies can be defined as broad guidelines and/or procedures an organization follows as it progresses towards its objectives and goals (Hums & MacLean, 2013). Serving as guiding statements, they provide common direction for all parts of the organization. While having wide ramifications, policies are formal expressions of the organization’s stance on significant, and often persistent, issues. Hums and MacLean (2013) believe policies differ from procedures as they allude to procedures being established in order to direct the work of individuals, or a division, within an organization. Policies and procedures represent the “what” and “how” questions for stakeholders within an organization (Widzinski, 2010). For example, a company’s stance in regards to working from home is a policy, while the process to obtain permission to work from home is a specific procedure. Policies develop from the organization’s philosophy to provide a framework for solving issues consistently and directly (Hums & MacLean, 2013; Widzinski, 2010). Due to their relationship, organizations heavily rely on both policy and past practice to solve problems consistently and fairly.

Developing written policies and procedures permitting consistent and effective decision-making and step-by-step processes has never been more important for sports organizations such as collegiate athletic departments (Hums & MacLean, 2013). The mission statements of the athletic department and academic institution are significant to the development of policy as policies and procedures must circulate from the philosophy embodied in these mission statements (Andrus, 1990). Andrus (1990) describes three essential components of a policy and
procedure manual, also referred to as a handbook, in an athletic department. These three components are: 1) what has to be done (regulation), 2) the rationale why it has to be done (policy), and 3) how it has to be done (procedure). It is also believed that employees work better when expectations are objectively and uniformly stated in a written manual that is effectively communicated to all members of the sport organization (Andrus, 1990; Conn, 1991; Hums & MacLean, 2013; Widzinski, 2010). Policies in regards to funding, program breadth, recruiting, social media, competitive scheduling, and steroid usage are typically presented in student-athlete athletic department handbooks (Hums & MacLean, 2013).

Some researchers believe there is a relationship between written administrative policies and procedures and the first line of defense against initiation of athletic lawsuit (Baley & Matthews, 1989; Conn, 1991). Andrus (1990) claimed that many collegiate athletic directors bypassed the development of written departmental policies and procedures as they believed their development would unwarrantedly limit their creativity and decision-making. In addition, some legal counsels discouraged policy handbooks due to the fear that failure to reinforce existing policies would strengthen the claims of plaintiffs in a trial (Conn, 1991). However, other scholars strongly contend that athletic administrators are obligated to formulate policies, program regulations, safety rules, and programs associated with the orientation and training of their coaches in order to guide the actions of athletic administrators, coaches, athletic trainers, athletes, and other stakeholders of the sport organization (Frost, Lockhart, & Marshall, 1988). It has been suggested that it is essential for athletic departments to have not only adequate written policies, but also appropriate procedures to assure that they are enforced (Borkowski, 1987). Furthermore, Appetizeller (1987) believes that a written policy manual, such as a student-athlete athletic department handbook, is a useful reference tool, an authorized source of information, and
a communication medium for the entire athletic community. It should be used as a tool to ensure appropriate and suitable management, safety, and communication. In addition, it should be comprehensive and very detailed as well as readily available for athletic administrators, coaches, athletes, and other athletic department personnel to access (Andrus, 1990; Conn, 1991; Southall & Nagel, 2003).

The Need for Written Policies and Procedures for the Handling of Career-Ending Injuries

Collegiate athletes who suffer career-ending injuries constitute a unique minority group of dispersed athletes going through a non-normative transition out of sport (Wyelleman et al., 2004). As career-ending injuries affect every aspect of an athlete’s life, the quality of recovery from the psychosocial impact of the injury is just as crucial as the physical recovery in both the short-term and long-term. These athletes experience a range of negative emotional, psychosocial, and physical effects (Alfermann et al., 2004; Lally, 2007; Pearson & Petitpas, 1990; Rohrs & Paule-Koba, 2014; Stoltenburg et al., 2011) caused by multiple factors that hinder the adjustment process. Due to changes in athletic identity and social network, social support is essential during these athletes’ transition out of sport (Grove et al., 1997; Stephan et al., 2003; Stoltenburg et al., 2011). Career-ending injured athletes without adequate support experience more emotional, physical, and psychological distress (Blinde & Stratta, 1992; Stephan et al., 2003; Stoltenburg, 2011). A variety of multidisciplinary interventions and resources such as medical, psychosocial, educational, and spiritual practices must be available to help these athletes during their transition out of sport.

The NCAA and the majority of Division I university athletic departments emphasize in their mission statements and handbooks that they uphold the responsibility to support and protect collegiate athletes with a priority on their well-being (NCAA, 2014). Although the NCAA
provides Catastrophic and Exceptional Student-Athlete Disability Insurance Programs for selected athletes, the NCAA allows individual universities to decide what assistance they offer their athletes who suffer career-ending injuries before their athletic eligibility is up (NCAA, 2014). Therefore, there are no universal policies, procedures, or standards in place to ensure that each injured athlete’s well-being is supported and protected during this traumatic life event (Walsh, 2013).

Opinions vary about the role of the NCAA in the collegiate career-ending injured athlete’s transitional process out of sport (Rohrs & Paule-Koba, 2014). Rohrs and Paule-Koba (2014) found that recent Division I career-ending injured collegiate athletes believed this burden was the responsibility of their respective university rather than the NCAA. Many of the athletes suggested the NCAA should provide more support by using its governing power to implement policies mandating member conferences and universities to provide supportive programs and services to help collegiate career-ending injured athletes as they transition out of their respective college sport (Rohrs & Paule-Koba, 2014).

Whether or not the NCAA implements future policies mandating universities to provide additional supportive programs and services to aid their career-ending injured athletes’ transitional process out of sport, given the inevitability that university athletic departments will face this situation more than once (Walsh, 2013) university athletic departments must contain and maintain written policies and procedures in their department handbooks to establish consistency and fairness in the handling of these non-normative forced retirements (Hums & MacLean, 2013). These policies and procedures must be consistent with the philosophy embodied in the mission statements of the NCAA, athletic department, and academic institution (Andrus, 1990). They must be comprehensive and detailed as career-ending injuries entail unique
situations and transitions faced by athletes (Wyelleman et al., 2004). In addition, these policies and procedures must be clearly communicated to all current and potential athletes, athletic trainers, coaches, and athletic administrators (Andrus, 1990; Conn, 1991; Hums & MacLean, 2013).

Although it is known that collegiate athletes who suffer career-ending injuries face significant psychosocial adjustments when transitioning out of their sport (Alferman et al., 2004; Lally, 2007; Pearson & Petitpas, 1990; Rohrs & Paule-Koba, 2014; Stoltenburg et al., 2011), there is no current research available related to the role of the university athletic department in the collegiate career-ending injured athlete’s transition out of college sports. There is a lack of knowledge regarding the common written policies and procedures collegiate athletic departments enforce when an athlete sustains a career-ending injury (Rohrs & Paule-Koba, 2014). Given this gap in the literature, the purpose of this research study was to investigate the current written policies and procedures related to handling the situation and transition of a collegiate athlete obtaining a career-ending injury that are enforced by Division I university athletic departments.

Since individual university athletic departments determine what happens to the status of their career-ending injured athletes within their athletic department and because there are no universal policies, procedures, or standards in place (NCAA, 2014; Walsh, 2013), it was important to identify and analyze the current written policies and procedures universities have in place that guide their decisions as well as evaluate the intervention strategies they have available to help their career-ending injured athletes transition as smoothly as possible out of sport. While it appears the NCAA places the responsibility of helping collegiate career-ending injured athletes transition out of sports upon its member institutions (NCAA, 2014; Walsh, 2013), if there are no written policies and procedures in place or intervention strategies available to support and protect
the well-being of these athletes, than neither the NCAA nor its member institutions have fulfilled their mission in providing these collegiate athletes with protection and support for their well-being during their transition out of sport.

Given the above background literature and the proposition of the researcher regarding the importance of investigating written policies, procedures, and intervention strategies implemented by NCAA Division I university athletic departments to ensure they are fulfilling their mission in providing these collegiate athletes with protection and support for their overall well-being during their transition out of sport, the following research questions were explored in this present study:

1. What current written policies are in place in NCAA Division I university athletic departments that guide their handling of athletes with career-ending injuries?

2. What current written procedures are utilized in NCAA Division I university athletic departments that enforce the adherence to the athletic department’s policies that guide their handling of athletes with career-ending injuries?

3. What currently documented intervention strategy options do NCAA Division I university athletic departments have available to their athletes that suffer career-ending injuries?

**Method**

This section highlights the present study’s 1) sample, 2) data collection procedures, and 3) data analysis. Due to the lack of previous research published on this study’s research topic in addition to the nature of the research questions being sought, a thematic textual analysis approach was chosen to conduct the data analysis. This qualitative analytic method was chosen for its suitability to investigate exploratory data as it allowed the researcher to identify, analyze, and report patterns (themes) within the data and further, interpret various aspects of the research topic (Braun & Clarke, 2006). By using an inductive approach to thematic analysis, themes were allowed to emerge from the data, rather than needing to be pre-defined.
Sample

The 2014-2015 student-athlete handbooks (N=23) utilized in this study included 11 of the 12 full-time Division 1 NCAA institutional members of the Mid American Conference (MAC) and 12 of the 14 full-time Division I NCAA institutional members of the Big Ten Conference (B1G). Student-athlete handbooks were explored as these type of manuals are designed to provide members, specifically collegiate athletes, of the intercollegiate athletic teams of an athletic department with an immediate source of information regarding their institution’s, the NCAA’s, their affiliated conference’s, and their specific athletic department’s policies, guidelines, regulations, and operating procedures. Similar to employers issuing employee handbooks to their employees, collegiate athletic departments issue student-athlete handbooks to their collegiate athletes to communicate policies, procedures, and contact information of resources available to them within the athletic department, on campus, and community surrounding campus (Hoft, 2007). Student-athlete handbooks from the MAC and B1G conferences were chosen in an attempt to create a sample of equal representation from institutions in the NCAA Division I Football Bowl Subdivision (FBS) major conferences (B1G) and NCAA Division I FBS mid-major conferences (MAC).

Data Collection Procedures

Through the use of purposive criterion sampling (Patton, 2002), a list of the full-time NCAA Division I member institutions of the MAC (N=12) and B1G (N=14) conferences were obtained from the MAC website (http://www.mac-sports.com/) and B1G website (http://www.bigten.org/). The athletic department website for each full-time member institution of the MAC and B1G conferences was then visited to obtain the 2014-2015 student-athlete handbook. Current student-athlete handbooks (2014-2015 edition) were found on eight websites
of member institutions of the MAC and 8 websites of member institutions of the B1G (n=16). The Faculty Athletic Representative and Assistant Athletics Director of Compliance of each member institution of the MAC (n=4) and B1G (n=6) that did not contain a copy of their 2014-2015 student-athlete handbook on their website was contacted via email in order to seek a copy. The names and e-mail addresses of the Faculty Athletic Representatives and Assistant Athletic Directors of Compliance were obtained from their respective institution’s athletic website under their staff directory. As a condition of obtaining the handbooks, departmental anonymity was guaranteed. Handbooks could not be obtained from one member institution of the MAC and two member institutions of the B1G, leaving a total of 11 handbooks from member institutions in the MAC and 12 handbooks from member institutions in the B1G being represented in the total sample (N=23). These handbooks were then searched for policies, procedures, and intervention strategies related to athletes who obtain career-ending injuries. Once located, each set of policies, procedures, and/or intervention strategies was copied into a Microsoft Word document.

Data Analysis

Due to the lack of previous research published on this study’s research topic in addition to the nature of the research questions being sought, a thematic textual analysis approach was chosen to conduct the data analysis. This qualitative analytic method was chosen as it allowed the researcher to identify, analyze, and report patterns (themes) within the data and further, interpret various aspects of the research topic (Braun & Clarke, 2006). The data set was analyzed in accordance with Braun and Clarke’s (2006) and Patton’s (2002) strategies for data analysis. The first step involved immersion in the data. This included reading and re-reading the entire dataset before developing codes. After becoming familiarized with the dataset, an open coding method was utilized. The policies, procedures, and intervention strategies collected in the dataset
were coded by reading through each and writing key words or phrases in the margins. This led to the development of the raw data themes.

Next, an inductive analysis and axial coding method was utilized (Patton, 2002). This included identifying themes within each set of policies, procedures, and intervention strategies related to collegiate athletes with career-ending injuries and then comparing and contrasting these themes with other sets of policies, procedures, and intervention strategies employed (Braun & Clarke, 2006). By identifying “repeated” themes, the researcher was able to determine current written policies in place in NCAA Division I university athletic departments that guide their handling of athletes with career-ending injuries, written procedures utilized in these departments that enforce the adherence to these policies, and intervention strategy options available to these athletes. The process of identifying themes continued until raw data themes were combined to form the higher order themes. The entire process of coding and development of themes was reviewed by another researcher to ensure as much as possible that data analysis did not misrepresent the data but illustrated commonalities evident across the complete dataset and addressed the aims of this exploratory research.

**Results**

This section presents results of the data analysis conducted for each research question. Major themes and sub-themes rising from data pertaining to each research question are summarized in Table 1, Table 2, and Table 3. These major themes and sub-themes are discussed in further detail in the remaining portion of this section. Exemplars drawn from the data are included and presented anonymously.
Table 1

Career-Ending Injury Policies: Inductively Developed Thematic and Sub-Thematic Categories

<table>
<thead>
<tr>
<th>Research Question</th>
<th>Thematic Category</th>
<th>Sub-Thematic Category</th>
<th>B1G (N=12)</th>
<th>MAC (N=11)</th>
<th>Total (N=23)</th>
</tr>
</thead>
<tbody>
<tr>
<td>What current written policies are in place in NCAA Division I university athletic departments that guide their handling of athletes with career-ending injuries?</td>
<td>Decision Maker(s) of Medical Disqualification</td>
<td>5</td>
<td>5</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Renewal/Non-Renewal of Athletic Aid</td>
<td>Possibility of Receiving Athletic Aid</td>
<td>8</td>
<td>7</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Qualification(s) for Renewal</td>
<td>4</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Requirements for Continuous Renewal</td>
<td>4</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Maximum Amount of Years Aid Renewed</td>
<td>4</td>
<td>7</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Eligibility for NCAA Student Assistance Fund</td>
<td>4</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td>Medical Insurance Coverage (Applicable to All Athletes)</td>
<td>10</td>
<td>11</td>
<td>21</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>NCAA Catastrophic Injury Insurance Program</td>
<td>2</td>
<td>2</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>NCAA Exceptional Student-Athlete Disability Insurance Program</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

Note: a Total amount of Big Ten Conference (B1G) affiliated university athletic departments (out of 12 total B1G study participants) containing a policy related to the thematic category or sub-thematic category in their 2014-2015 student-athlete handbooks. b Total amount of Mid American Conference (MAC) affiliated university athletic departments (out of 11 total MAC study participants) containing a policy related to the thematic category or sub-thematic category in their 2014-2015 student-athlete handbooks. c Total amount of Big Ten (B1G) and Mid American Conference (MAC) affiliated university athletic departments (out of 23 total B1G and MAC study participants) containing a policy related to the thematic category or sub-thematic category in their 2014-2015 student-athlete handbooks.
Table 2

*Procedures Guiding the Handling of Career-Ending Injury Policies: Inductively Developed Thematic Categories*

<table>
<thead>
<tr>
<th>Research Question</th>
<th>Thematic Category</th>
<th>B1G ( (N = 12) )^a</th>
<th>MAC ( (N = 11) )^b</th>
<th>Total ( (N = 23) )^c</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Paperwork and Approval Process for Athletic Aid Renewal</td>
<td>4</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Filing Injury Claim Form for Medical Coverage (Applicable to All Athletes)</td>
<td>9</td>
<td>10</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>Appeals Process for Reduction, Cancellation, or Non-Renewal of Athletic Aid (Applicable to All Athletes)</td>
<td>10</td>
<td>10</td>
<td>20</td>
</tr>
</tbody>
</table>

*Note.* ^a^ Total amount of Big Ten Conference (B1G) affiliated university athletic departments (out of 12 total B1G study participants) containing a set of procedures related to the thematic category in their 2014-2015 student-athlete handbooks. ^b^ Total amount of Mid American Conference (MAC) affiliated university athletic departments (out of 11 total MAC study participants) containing a set of procedures related to the thematic category in their 2014-2015 student-athlete handbooks. ^c^ Total amount of Big Ten (B1G) and Mid American Conference (MAC) affiliated university athletic departments (out of 23 total B1G and MAC study participants) containing a set of procedures related to the thematic category in their 2014-2015 student-athlete handbooks.
Table 3

*Intervention Strategy Options: Inductively Developed Thematic and Sub-Thematic Categories*

<table>
<thead>
<tr>
<th>Research Question</th>
<th>Thematic Category</th>
<th>Sub-Thematic Category</th>
<th>B1G (N=12)(^a)</th>
<th>MAC (N=11)(^b)</th>
<th>Total (N=23)(^c)</th>
</tr>
</thead>
<tbody>
<tr>
<td>What currently documented intervention strategy options do NCAA Division I university athletic departments have available to their athletes that suffer career-ending injuries?</td>
<td>No Intervention Options Available (Specifically to Career-Ending Injured Athletes)</td>
<td></td>
<td>12</td>
<td>11</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>Available Resources within Athletic Department/Campus (Applicable to All Athletes)</td>
<td>Sport Specific Psychological Services (Within Athletic Department)</td>
<td>5</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Counseling/Psychological Services Center (On Campus)</td>
<td>10</td>
<td>7</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Exhausted Athletic Eligibility Exit Survey/Interview (Within Athletic Department)</td>
<td>3</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Life Skills/Career Development Program (Within Athletic Department)</td>
<td>11</td>
<td>9</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Center of Student Involvement/Campus Organizations (On Campus)</td>
<td>5</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Career Development Center (On Campus)</td>
<td>9</td>
<td>6</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Office of Student Disability Services (On Campus)</td>
<td>9</td>
<td>6</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Student Employment Office (On Campus)</td>
<td>2</td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

Note: \(^a\)Total amount of Big Ten Conference (B1G) affiliated university athletic departments (out of 12 total B1G study participants) containing a documented intervention option related to the thematic category or sub-thematic category in their 2014-2015 student-athlete handbooks. \(^b\)Total amount of Mid American Conference (MAC) affiliated university athletic departments (out of 11 total MAC study participants) containing a documented intervention option related to the thematic category or sub-thematic category in their 2014-2015 student-athlete handbooks. \(^c\)Total amount of Big Ten (B1G) and Mid American Conference (MAC) affiliated university athletic departments (out of 23 total B1G and MAC study participants) containing a documented intervention option related to the thematic category or sub-thematic category in their 2014-2015 student-athlete handbooks.
Career-Ending Injury Policies

As shown in Table 1, three main themes emerged from the data analysis on each handbook’s written policies that guided their respective athletic department’s handling of athletes obtaining career-ending injuries. These themes consisted of the decision maker(s) of medical disqualification, renewal/non-renewal of athletic aid, and medical insurance. Twenty of the 23 handbooks analyzed contained at least one policy related to the athletic department’s handling of career-ending injured athletes.

Decision Maker(s) of Medical Disqualification

To determine whether an injury or illness was considered career-ending, a total of 10 student-athlete handbooks from the MAC (n=5) and B1G (n=5) conferences contained a policy that identified this final authoritative figure(s) in this decision. In each of the 10 student-athlete handbooks, the authoritative figure(s) came from the respective athletic department’s medical staff. Eight of the handbooks specifically identified the team physician as having the final authority to determine whether an athlete obtained a career-ending injury. In most of the handbooks that specified the team physician as the main authoritative figure (n=6), the policy related to the qualification of the athlete having his/her grant-in-aid from the athletic department renewed. In the remaining two handbooks, vague terms were used to describe the final decision maker(s) such as the respective athletic department’s “medical director” and “medical personnel.”

Two student-athlete handbooks that included a policy identifying the decision maker(s) of medical disqualification also made reference to the health and safety of the collegiate athlete. For example, one policy referred to the athletic department’s purpose as the protection of the student-athlete’s health and safety:
Under medical regulations established by the Big Ten, the team physician has final authority to determine whether the student athlete is medically qualified to participate in practice and competition. The team physician’s decision shall be made bearing in mind one of the fundamental purposes of the program, namely, protection of the student athlete’s health and safety.

Another student-athlete handbook mentioned the importance of the long term health of the collegiate athlete in the decision of medical qualification by the team physician:

If it has been medically determined it is unsafe or detrimental to their long term health of a student athlete to continue participation in Intercollegiate Athletics, the Head Team Physician has ultimate authority to Medically Disqualify a student athlete from participation.

Renewal/Non-Renewal of Athletic Aid

Policies discussed in the student-athlete handbooks mainly focused on the renewal and non-renewal of athletic aid. A total of 15 student-athlete handbooks from the MAC (n=7) and B1G (n=8) conferences included policies that stated collegiate athletes had the possibility to continue receiving athletic aid following their career-ending injury. Along with these policies, additional policies included the qualifications in order for an athlete to be considered for renewal of athletic aid, requirements he/she must uphold to continue to receive athletic aid, maximum amount of years athletic aid could be received, and whether or not the career-ending injured athlete could qualify to receive funding from the NCAA Student Assistance Fund.

Qualification

Although not directly referring to career-ending injured athletes, however still applicable, a total of 12 student-athlete handbooks from the MAC (n=8) and B1G (n=4) conferences included NCAA policies stating if an athlete becomes injured or ill as a result of participation in intercollegiate athletics, his/her athletic aid cannot be reduced or cancelled in that academic year. These handbooks also included the NCAA policy if a collegiate athlete voluntarily chooses not to practice/compete with his/her team and does not qualify for a medical hardship (athletic aid
for medically disqualified athletes), the athletic department is no longer obligated to financially support the athlete. In order for an athlete to qualify for athletic aid following a career-ending injury, six student-athlete handbooks specifically stated the career-ending injury must be certified by the team physician, while one handbook vaguely stated it had to be certified by medical personnel in the athletic department. Very few handbooks provided further explanation of qualifications to be considered for renewed athletic aid. However, one athletic department’s policy emphasized the following:

The injury must have occurred during an official (Name of University omitted) varsity athletic authorized practice or competitive situation. Illness must have occurred subsequent to enrollment at (Name of University omitted). Both must be supported as “career ending” by appropriate medical documentation. Student-athlete must have been an athletic scholarship recipient at the time of injury/illness.

In regards to paperwork, another athletic department discussed medical documentation needed to be completed and signed by the athlete indicating he/she comprehended their medical condition and he/she could never compete in intercollegiate athletics again. Lastly, one athletic department included their state’s law, which explained that prior to graduation, a public postsecondary institution within the state’s borders cannot cancel, reduce, or refuse to renew athletic aid to a student during his/her period of eligibility to participate in intercollegiate athletics due to an injury which prevents the student from competing in athletics.

Requirements

A total of 10 student-athlete handbooks from the MAC (n=6) and B1G (n=4) conferences contained policies regarding requirements the career-ending injured collegiate athlete must follow in order to have their athletic aid continuously renewed each year until their intercollegiate athletic eligibility expired. These included meeting all NCAA, respective
conference (MAC or B1G), and respective University eligibility requirements. One student-athlete handbook stated:

The student must successfully complete a minimum of fifteen (15) hours with a grade that is acceptable towards satisfying graduation requirements. The student must maintain a cumulative grade point average of at least 2.0 or the GPA required by his/her college for graduation, whichever is higher. The student-athlete must not receive an “FS” or “FN” in any course during a particular year. If an “FS” or “FN” appears as a grade, funding will be pulled for subsequent years and the student-athlete will be charged the value of the course in which the “FN” was earned.

In addition, another student-athlete handbook contained a policy related to behavioral conduct, stating: “Behavior resulting in disciplinary action by the Office of Student Conduct, campus police, local police, or other law enforcement agency shall be subject for review of the athletic grant with the possibility of termination.”

Many policies dictated that in order to receive renewal of athletic aid, the career-ending injured athlete must remain involved in athletics by working in the athletic department in a position assigned to him/her \((n=8)\). In three handbooks, the policy specifically stated the position would be assigned by the Director of Student-Athlete Development, while one handbook’s policy specifically gave this responsibility to the athlete’s respective coaching staff. The policy regarding the number of work hours required in their assigned position varied amongst the handbooks. The number of hours varied from 10 hours \((n=2)\), 10 to 15 hours \((n=1)\), and 20 hours \((n=1)\) per week during the semesters of the awarded athletic aid. In three of the handbooks, the policy in regards to the number of hours required to work mentioned the required hours would be pro-rated for equivalency sports and/or amount of his/her scholarship. Policies also mentioned that if the athlete was unable to satisfactorily complete their work assignment, he/she may have their athletic aid relinquished \((n=6)\).
**Maximum Amount of Years of Aid**

Many of the student-athlete handbooks in the MAC \((n=7)\) and B1G \((n=4)\) conferences that included career-ending injury policies related to athletic aid also contained a policy stating the maximum amount of years athletic aid could be renewed. In regards to full-time members of the MAC conference, three student-athlete handbooks stated a collegiate athlete with a career-ending injury could obtain up to five years of athletic aid, while two handbooks stated this type of athlete could only receive up to four years of athletic aid from the date of their initial college enrollment in order to finish their primary undergraduate degree. In two student-athlete handbooks, it depended on individual circumstances. For instance, one of these handbook’s policy stated:

Student-athletes who have received two or more years of aid under "medical hardship" status, will not be given further consideration for "fifth" year aid. A student-athlete, who has only received one year of aid under "medical hardship" status, may be considered for one additional term of full tuition if he/she meets all requirements for 5th year aid recipients.

In comparison to the four full-time members of the B1G conference that included a similar policy, each of these policies allowed a career-ending injured athlete to be eligible for five years of athletic aid funding from the date of their initial college enrollment in order to finish their primary undergraduate degree. These policies were often grouped in the same section as exhausted eligibility athletic aid funding, so they were not specifically directed just to address career-ending injured athletes. However, in one handbook, the policy specifically stated:

Student athletes who are exempt for medical reasons will be awarded fifth year aid when extenuating circumstances prevent the student athlete from completing degree requirements within a four year period.

Interestingly, two B1G full-time members and two MAC full-time members that included this policy of whether a career-ending injured athlete could be eligible for fifth year athletic aid
funding did not include any section of specific policies that discussed athletic aid funding for career-ending injured athletes in general.

**NCAA Student Assistance Fund**

Seven student-athlete handbooks in the MAC (n=3) and B1G (n=4) conferences included a policy stating a career-ending injured athlete on athletic aid could be eligible for funding assistance from the NCAA Student Assistance Fund. This fund was established to provide assistance to collegiate athletes in meeting financial needs that arise in conjunction with participation in intercollegiate athletics, recognition in academic achievement, or enrollment in an academic curriculum. Two full-time members of the B1G and one full-time member of the MAC conferences included this policy, but did not include any specific policies that discussed athletic aid funding for career-ending injured athletes in general.

**Medical Insurance**

Although not specifically directed to collegiate athletes who obtain career-ending injuries, 21 of the 23 student-athlete handbooks reviewed in the B1G (n=10) and MAC (n=11) conferences included policies related to the collegiate athlete’s medical insurance coverage. For instance, these handbooks (n=21) included a policy stating the university will provide medical coverage for all injuries and illnesses sustained as a result of direct participation in the university’s intercollegiate athletics directed practices, conditioning/weight training sessions, competitions, and team travel. Coordination of benefits utilizes the collegiate athlete’s or his/her parent’s own health insurance as the primary insurance coverage. The university’s coverage provides secondary coverage and becomes primary when either the collegiate athlete has no coverage or his/her coverage is denied. Each of these handbooks also contains a policy that
affirms that the university will not cover medical bills that are for conditions that are not directly a result of athletic competition participation.

In addition, nine student-athlete handbooks from the B1G \((n=1)\) and MAC \((n=8)\)
conferences included a policy stating the athletic department is not financially responsible for any medical bills incurred by the collegiate athlete resulting from pre-existing medical conditions. Also, 17 student-athlete handbooks from the B1G \((n=7)\) and MAC \((n=10)\)
conferences contained policies regarding second opinions. The common policy was medical second opinions are permitted. However, if an athlete seeks health care advice or treatment on their own without pre-authorization from a member of the athletic department’s sports medicine staff, the athletic department cannot be held responsible to pay for those expenses. Four student-athlete handbooks in the B1G \((n=2)\) and MAC \((n=2)\) conferences included an explanation and the availability of the NCAA Catastrophic Injury Insurance Program, while only one full-time member of the MAC included an explanation and the availability of the NCAA Exceptional Student-Athlete Disability Insurance Program.

Procedures Guiding the Handling of Career-Ending Injury Policies

Out of the 15 student-athlete handbooks that included policies that stated collegiate athletes had the possibility to continue receiving athletic aid following their career-ending injury, only seven handbooks from the MAC \((n=3)\) and the B1G \((n=4)\) conferences contained procedures along with these policies as shown in Table 2. Procedures ranged from 35 to 216 words in length \((M=110)\). Following the certification of a career-ending injury by the team physician, each of the handbooks containing these types of procedures described the need of paperwork to be completed and approved by athletic department staff. In one handbook, the procedures for this paperwork and approval were simply described in the following way:
If you receive a career-ending injury or have a medical problem that no longer allows you to compete at any collegiate level, the University may file a Big Ten Medical Petition to grant you non-competing, non-counter status. Suitability for such aid will be determined by the team physician and coach and approved by the Director of Athletics.

In another set of procedures provided by a different student-athlete handbook, the process was described in the following way:

For the medical documentation to be complete, the student-athlete must sign a statement with the team physician indicating that they understand their medical condition and that they cannot participate in intercollegiate athletics again. All student-athletes who become permanently medically unable to participate and who continue receiving an athletics scholarship must sign a Nonparticipating Student-Athlete Agreement in addition to their scholarship agreement. The Nonparticipating Student-Athlete Agreement outlines what is expected of student-athletes who continue to receive an athletics scholarship and are no longer an active member of a team. The agreement is binding on the student-athlete and carries financial consequences for not adhering to the agreement. The agreement will be administered to student-athletes by the Office of Compliance.

However, in the majority of the handbooks (n=4), the athlete enduring a career-ending injury is in charge of submitting an application subject to review by athletic department members. Identified athletic department members making the final decision of athletic aid for a career-ending injured athlete included the Director of Athletics (n=3) or a scholarship committee consisting of various athletic department members including the Director of Athletics (n=2). Recommendations from sport administrators, team physician(s) and medical staff, the head coach of the career-ending injured athlete, and/or academic advisors were listed in the procedures of four student-athlete handbooks in regards to the consideration of approval of the athlete receiving continued financial aid. One handbook also mentioned the final decision would be made in the month of May and the athlete would be informed in writing.

Although not specifically applicable to just career-ending injured athletes, but to all collegiate athletes, procedures were listed in regards to properly filing an injury claim form for medical bills and insurance purposes as well as the procedures for the appeals process for
reduction, cancellation, or non-renewal of an athlete’s athletic aid. Specifically, 19 student-athlete handbooks in the MAC (n=10) and B1G (n=9) conferences included procedures in regards to properly filing an injury claim form for medical bills and insurance purposes. Procedures ranged from 78 to 573 words in length (M=275.52). In addition, 20 student-athlete handbooks in the MAC (n=10) and B1G (n=10) conferences contained procedures for the appeals process for reduction, cancellation, or non-renewal of an athlete’s athletic aid. Procedures ranged from 64 to 1,243 words in length (M=426.8).

**Intervention Strategy Options**

As shown in Table 3, none of the student-athlete handbooks reviewed from the MAC (n=11) and B1G (n=12) conferences contained written intervention strategy options available specifically to athletes that suffer career-ending injuries. Although not specifically addressed to collegiate athletes who obtain career-ending injuries, each of these handbooks did contain some sort of description and/or contact information of available resources within the athletic department or campus that could be utilized as intervention options for all athletes enduring various difficulties or struggles. For instance, eight student-athlete handbooks from the MAC (n=3) and B1G (n=5) conferences included a description and/or contact information of sport-specific psychological services available to all enrolled collegiate athletes of the respective university. These services were available within the university’s athletic facilities and included licensed psychiatrists, psychologists, and/or counselors. Each handbook described the privacy and confidentiality of the services as well as the wide range of issues that could be addressed. In addition, 17 student-athlete handbooks from the MAC (n=7) and B1G (n=10) conferences contained a description, address, and/or contact information for their respective university’s counseling and psychological services center on campus.
A total of 8 student-athlete handbooks from the MAC ($n=5$) and B1G ($n=3$) conferences included a section describing the opportunity for collegiate athletes to complete an exit survey and/or interview in regard to their athletic, academic, and experiences at the university. In each of these handbooks, interviews are collected from student-athletes who have exhausted their eligibility. The collegiate athletes have the opportunity to participate in an in-person exit interview with a sport administrator in addition to completing a survey. The surveys and interviews are used to evaluate the athletic department and provide improvements for current and future collegiate athletes.

Twenty student-athlete handbooks from the MAC ($n=9$) and B1G ($n=11$) conferences contained a section that described a life skills and career development program organized by the athletic department. Each program, although containing different activities and opportunities for its athletes, focuses on equipping collegiate athletes with the skills and knowledge necessary to achieve success during and after their collegiate sport careers by providing them with opportunities for career, academic, and personal development. Seven of the programs in the MAC ($n=2$) and B1G ($n=5$) implement a mentoring program. Mentors for the athletes consist of faculty/staff members, upperclassmen collegiate athletes, or former collegiate athletes of the university. In addition, nine of the programs in the MAC ($n=2$) and B1G (7) provide employment outreach, career fairs and networking events, job shadowing experiences, and/or internship programs for their collegiate athletes. Other campus resources that student-athlete handbooks in the MAC and B1G conferences included descriptions, addresses, and/or contact information for the center of student involvement/campus organizations ($n=8$; MAC=3, B1G=5), career development center ($n=15$; MAC=6, B1G=9), office of student disability services ($n=15$; MAC=6, B1G=9), and student employment office ($n=4$; MAC=2, B1G=2).
Discussion

The primary aim of this study was to investigate the current written policies and procedures related to handling the situation and transition of a collegiate athlete obtaining a career-ending injury that are enforced by Division I university athletic departments. It also attempted to identify available intervention strategies made known to these specific athletes through their athletic department’s student-athlete handbook in order to provide evidence that these universities help their career-ending injured athletes transition as smoothly as possible out of sport. The results of the data analysis showed that the majority of the student-athlete handbooks analyzed did contain at least one policy related to the athletic department’s handling of career-ending injured athletes. Career-ending injury policies discussed in the student-athlete handbooks mainly focused on the renewal and non-renewal of athletic aid. However, some handbooks specifically identified the team physician as having the final authority to determine whether the athlete’s injury was indeed a career-ending injury. On a broader scale, the majority of handbooks contained policies related to the collegiate athlete’s medical insurance coverage when sustaining an injury or illness during athletic eligibility.

Further findings revealed that while many student-athlete handbooks contain at least one policy related to the athletic department’s handling of career-ending injured athletes, there is little consistency and a scarceness of current written procedures that enforce adherence to the athletic department’s policies. Some procedures documented the need for official paperwork to be completed, approved, and signed by an athletic department staff member. However, written instructions were typically nonspecific and vague. Interestingly, the majority of handbooks analyzed contained detailed and specific procedural instructions for all collegiate athletes in regards to properly filing an injury claim form for medical billing and insurance purposes, as
well as for the appeals process for reduction, cancellation, or non-renewal of an athlete’s athletic aid. Similarly, while none of the handbooks reviewed contained written intervention strategy options available specifically to athletes suffering career-ending injuries, all of them obtained some sort of description and/or contact information of available resources within the athletic department or campus that could be utilized as intervention options for all athletes enduring various difficulties or struggles.

Overall, this study provides evidence that there is more the NCAA and its member institutions can do in order to fulfill their mission in providing career-ending injured collegiate athletes with consistent protection and support for their overall well-being during their transition out of sport. The following section will provide a discussion of the key findings and their relevance to previous literature. It will also identify important implications emerging from this study. In addition, it will provide a summary of the limitations of the study and offer directions for future research.

**Relevance to Literature**

As mentioned, the majority of the university student-athlete handbooks analyzed contained at least one policy related to the athletic department’s handling of career-ending injured athletes. The respective university athletic departments that included these policies in their handbooks did so as they most likely encountered the situation of an athlete obtaining a career-ending injury at least once (Walsh, 2013). By including these written policies, the athletic departments recognize, to an extent, the importance of establishing consistency and fairness in the handling of career-ending injured athletes (Hums & MacLean, 2013). Placing these policies in the student-athlete handbook allows the athletic department to communicate their policies to their collegiate athletes as well as all staff members in the athletic department. Essential policies
identify who in the athletic department has the final authority to determine an injury or illness is career-ending; whether athletic aid may be renewed and if so what requirements must affected athletes meet to retain it and for how many years are they eligible to receive it; and/or whether the university will provide any medical insurance coverage for an athlete’s injury or illness. Clear and consistent communication of this information in a handbook helps all involved individuals understand processes and implications prior to actual incidents, and ensures no career-ending injured athlete encounters inconsistent or unexpected treatment in comparison to other career-ending injured collegiate athletes at the same university (Appetizeller, 1987).

Policies discussed in the student-athlete handbooks mainly focused on the renewal and non-renewal of athletic aid. Previous research has shown that receiving an athletic scholarship is one of the most important determinants affecting a collegiate athlete’s choice of schools (Schneider & Messenger, 2012). Currently, the majority of parents and high school athletes are concerned about the affordability of a college education (McQuilken, 1996). Without the subsidy of a scholarship, it may be impossible for some athletes and families to meet the rising costs of education (Walsh, 2013). In addition to the tuition and fees required for degree completion, injured athletes and their families are often faced with financial and personal costs arising from the physical, psychosocial, and/or emotional consequences of their non-normative sport exit (Grove et al., 1997; Malinsaukas, 2010; Rohrs & Paule-Koba, 2014; Stephan et al., 2003; Stoltenburg et al., 2011).

Prior to 1973, athletic scholarships were awarded by the NCAA for four continuous years (Sack, 2008). Athletes could not have their scholarships taken away based on their athletic performance. If an athlete suffered a career-ending injury, he/she still benefitted from his/her athletic scholarship for the remaining years that were left on the award. In 1973, the NCAA
revised the scholarship system by requiring annual renewals of athletic grant-in-aid scholarships in each of the athlete’s four years of athletic eligibility (or five years depending on the situation) (Hakim, 2000). Even if the athlete performed well or up to standards academically, the implementation of this policy allowed an athlete to lose his/her scholarship due to non-stellar athletic performance or a career-ending injury.

Two significant events in 2010 brought extra attention to the NCAA’s one-year scholarship policy. The NCAA announced that the U.S. Department of Justice’s Antitrust Division was inquiring the reasoning behind its bylaw relating to multi-year scholarships (O’Brien, 2013). Later that year, single-year scholarships began receiving additional federal legal scrutiny in Agnew v. NCAA (2011). The plaintiff, a former Rice University football player whose coach refused to renew his athletic scholarship the summer before his senior year, sued the NCAA in federal court for alleged NCAA violations of Section I of the Sherman Act and sought to have one-year scholarships banned (Gibson, 2012). Likely due to the national scrutiny received, the NCAA Division I Board of Directors approved a new financial aid policy allowing Division I member institutions to offer both single-year and multi-year scholarships in 2011 (Hartman, 2014). However, this NCAA policy does not require all athletic teams to provide multi-year scholarships; it gives the school the option (NCAA, 2014). Division I schools tend to stand against offering multi-year scholarships (Hartman, 2014), leaving athletic scholarships of athletes who obtain career-ending injuries at the mercy of their athletic department as no NCAA policy exists that a school must renew their athletic scholarship.

Some student-athlete handbooks that included policies stating collegiate athletes have the possibility to continue receiving athletic aid following their career-ending injury also contained additional policies including the qualifications in order for an athlete to be considered for
renewal of athletic aid, requirements he/she must uphold to continue to receive athletic aid, the maximum amount of years athletic aid could be received, and/or distinguishing whether or not the career-ending injured athlete could qualify to receive funding from the NCAA Student Assistance Fund. According to the 2014-2015 NCAA Division I manual, if an institution renews a career-ending injured athlete’s scholarship, the institutional financial aid agreement must contain non-athletically related conditions the athlete must satisfy in order for their athletic aid to be renewed the following term (NCAA, 2014). The manual also states that if these specified conditions are satisfied by the athlete, the institution must continue to award the same amount of athletic aid for the next term. However, if an athlete does not satisfy the specified conditions and does not have athletic aid renewed, he/she must be given a hearing opportunity to appeal the decision. This opportunity is similar to any other athlete who has a non-renewal, reduction, or cancellation in athletic aid (NCAA, 2014). However, there was inconsistency regarding the amount of detailed information specifically related to career-ending injured policies regarding the renewal/nonrenewal of athletic aid amongst many of the handbooks. This could be a result of additional policies being written elsewhere in the athletic department, or it could be the result of the NCAA’s lack of guidance and/or enforcement in implementing detailed policies related to the renewal/nonrenewal of athletic aid for career-ending injured athletes in their own manual.

Although not specifically directed to collegiate athletes who obtain career-ending injuries, the majority of the student-athlete handbooks included policies related to the collegiate athlete’s medical insurance coverage. The 2014-2015 NCAA Division I manual requires that all institutions confirm that each of their collegiate athletes have medical insurance in place for potential injuries or illnesses prior to participating in team workouts, practices, or games (NCAA, 2014). It allows the insurance to be held by the athlete, his/her parents, or through the
institution. However, the NCAA allows each athletic department to determine its own policies on how to handle their collegiate athletes’ medical expenses. Under NCAA regulation, schools are not required to pay their collegiate athletes’ deductibles (NCAA, 2014).

Even though the NCAA provides Catastrophic and Exceptional Student-Athlete Disability Insurance Programs, the majority of career-ending injured athletes do not meet the criteria to benefit from these programs (Walsh, 2013). The lack of specific medical insurance policies directed explicitly to collegiate athletes who obtain career-ending injuries in the student-athlete handbooks is likely due to the NCAA not requiring its members to offer some form of worker’s compensation coverage to protect its athletes. The absence of NCAA action as well as the inconsistent efforts of individual states to statutorily exclude or include collegiate grant-in-aid scholarship athletes from obtaining workers’ compensation protection has led to inconsistent rulings by the courts (University of Denver v. Nemeth, 1953; Van Horn v. Industrial Accident Commission, 1963; State Compensation Insurance Fund v. Industrial Commission of Colorado, 1957; Rensing v. Indiana State University, 1983; Coleman v. Western Michigan University, 1983; Cheatham v. Workers’ Compensation Appeals Board, 1984; Waldrep v. Texas Employers Insurance Association, 2000). Although athletic scholarship agreements may not have included workers’ compensation benefits, courts allowing such benefits included scholarship athletes within the definition of employee in the state’s workers’ compensation statutes. Courts disallowing such benefits maintain that athletic scholarships are not “employee agreements” therefore, athletes are not employees protected under state worker’s compensation laws.

Historically, the courts have not viewed the relationship between Division I collegiate grant-in-aid scholarship athletes and their respective universities as an employer-employee relationship
(Gurdus, 2001). Therefore, career-ending injured collegiate athletes have usually been deprived of worker’s compensation benefits.

While findings from this study revealed the existence of written policies, although less than adequate, in place in NCAA Division I university athletic departments that guide their handling of athletes with career-ending injuries, it uncovered the lack of consistency and a scarceness of written procedures that enforce adherence to these policies. Most student-athlete handbooks that contained procedures following their career-ending injured policies were written nonspecific and vague. This could be due to the lack of set procedures following the few career-ending injured athlete policies provided in the 2014-2015 NCAA Division I manual (NCAA, 2014). The majority of handbooks analyzed did contain detailed and specific procedural instructions for all collegiate athletes in regards to properly filing an injury claim form for medical billing and insurance purposes as well as for the appeals process for reduction, cancellation, or non-renewal of an athlete’s athletic aid. However, the NCAA requires that all athletes, prior to participation in any intercollegiate athletic physical activities, have insurance coverage in case an injury does occur as well as it requires athletic departments to provide a hearing opportunity for collegiate athletes who have athletic aid reduced, cancelled, or non-renewed (NCAA, 2014). The NCAA does not require its institutions to keep a career-ending injured athlete a part of the athletic program nor force them to cover any medical expenses related to their career-ending injury.

Besides the lack of procedures given following career-ending injury policies, the student-athlete handbooks reviewed did not contain any written intervention strategy options available specifically to athletes suffering career-ending injuries. However, each included some sort of description and/or contact information of available resources within the athletic department or
campus that could be utilized as intervention options for all athletes enduring various difficulties or struggles. The 2014-2015 NCAA Division I manual requires member institutions to offer general academic counseling and tutoring services to all collegiate athletes (NCAA, 2014). These services may be provided by the institution’s general student support services or by the athletic department. The NCAA also requires each institution to conduct a life skills program on its campus. Other personal development, career counseling, or academic support services that promote the success of collegiate athletes may be sponsored by an institution, conference, or NCAA (NCAA, 2014). For example, in recent years, a handful of Division I athletic departments have hired in-house sport psychologists, while others have referred collegiate athletes to sport psychologists, and some have implemented a mental health component within their athletic department (Gill Jr., 2008).

However, it is unclear whether career-ending injured athletes maintain access to these intervention services and resources provided by the athletic program as they may lose these benefits when it is ruled they are unable to athletically participate in intercollegiate athletic events (Rohrs & Paule-Koba, 2014; Wippert & Wippert, 2008). Previous research revealed that Division I career-ending injured collegiate athletes who did not remain as members of their athletic teams felt more isolated during their transition process out of sport as well as appeared to receive less social support from their athletic administration, coaches, and teammates than those who remained as members of their teams (Rohrs & Paule-Koba, 2014). In addition, given that collegiate athletes who suffer career-ending injuries constitute a unique minority group of dispersed athletes going through a non-normative transition out of sport (Wyelleman et al., 2004), these athletes are likely to require intervention strategy options that differ from that of a normal, active collegiate athlete (Alfermann et al., 2004; Lally, 2007; Pearson & Petitpas, 1990;
Rohrs & Paule-Koba, 2014; Stoltenburg et al., 2011). Career-ending injured collegiate athletes who are surrounded by a positive environment of coaches, teammates, athletic trainers, and athletic administrators transition more smoothly out of their role as an athlete, while those who lack adequate support experience more emotional, psychosocial, and physical distress when trying to adapt to a life outside of sport (Stoltenburg et al., 2011; Rohrs & Paule-Koba, 2014).

The overall findings of this study support previous research that career-ending injured athletes do not receive adequate attention from coaches, sports administrators, and governing sports organizations, who claim to be responsible for their overall well-being (Lavallee, 2005; Rohrs & Paule-Koba, 2014). Findings also provide evidence that the NCAA should provide more support to collegiate career-ending injured athletes by using its governing power to implement policies and procedures mandating member conferences and universities to provide supportive programs and services to help these athletes as they transition out of their respective college sport (Rohrs & Paule-Koba, 2014). The results fill a gap in the literature by providing knowledge of common written policies and procedures collegiate athletic departments enforce when an athlete sustains a career-ending injury and reveals the insufficient role university athletic departments and the NCAA currently serve in the collegiate career-ending injured athlete’s transition out of college sports.

**Implications**

Given the lack of clear, consistent, and effective communication of policies, procedures, and intervention strategies available to athletes obtaining career-ending injuries in the student-athlete handbooks analyzed in this study, several implications emerge. First, there is a need for the NCAA to provide increased support to collegiate career-ending injured athletes by using its governing power to implement policies and procedures mandating member conferences and
universities to provide supportive programs and services to help these athletes as they transition out of their respective college sport. Policies currently in the 2014-2015 NCAA Division I manual do not provide guidance or clear and consistent direction in the handling of the situation of an athlete obtaining a career-ending injury. Although the NCAA offers Catastrophic and Exceptional Student-Athlete Disability Insurance Programs for selected athletes, the NCAA allows individual universities to decide what assistance they offer their athletes who suffer career-ending injuries before their athletic eligibility is up (NCAA, 2014). Therefore, there are no universal policies, procedures, or standards in place to ensure that each career-ending injured athlete’s well-being is supported and protected during this traumatic life event (Walsh, 2013).

Given the NCAA is the governing body among the NCAA Division I athletic institutions, its lack of specific and detailed policies, procedures, and intervention options present in the 2014-2015 NCAA Division I manual concludes the insufficient role the NCAA currently serves in the collegiate career-ending injured athlete’s transition out of college sports. It provides inadequate attention to the emotional, physical, mental, and psychosocial effects with career-ending injuries suffered by athletes in collegiate sport (Rohrs & Paule-Koba, 2014; Stoltenburg et al., 2011). Overall, it has failed in fulfilling their mission in providing all collegiate athletes with consistent protection and support for their overall well-being.

In order to provide career-ending collegiate athletes with consistent protection and support for their overall well-being during their transition out of sport, the NCAA could mandate member institutions to keep career-ending injured athletes on the same athletic aid they received prior to their injury if directly related to intercollegiate athletic participation for the remainder of their athletic eligibility; provide a list of reasonable, non-athletically related requirements athletic departments must choose to enact in order for the athlete to continue receiving athletic aid;
determine whether a career-ending injured athlete should be able to qualify for fifth year athletic aid or funding from the NCAA Student Assistance Fund; and/or force institutions to pay medical expenses of injuries and illnesses directly related to intercollegiate athletic participation.

The NCAA could also provide a set of consistent procedures and paperwork that must be followed and completed by NCAA conferences and schools in order for an athlete to be determined and labeled as a career-ending injured athlete. In addition, not only could the NCAA require its member institutions to provide intervention options for their career-ending injured athletes, but it could also require athletic departments to include a distinguishable section in their student-athlete handbooks listing the policies, procedures, and intervention strategy options available to career-ending injured athletes. This includes information on the NCAA Catastrophic and Exceptional Student-Athlete Disability Insurance Programs. The NCAA could implement a policy (with set procedures) enforcing member institutions to hold exit interviews with all athletes that obtain career-ending injuries. This would allow these athletes and their sport administrators to discuss the career-ending injured policies and procedures, provide the opportunity for social support, and determine intervention needs of the athlete.

Similar to the discussion above, there is also a need for the athletic department and its sport administrators to provide more support to collegiate career-ending injured athletes by providing explicit sections in their student-athlete handbooks that include a variety of policies that guide their handling of athletes with career-ending injuries, detailed procedures that enforce the adherence to these policies, and specific intervention options that are available to athletes with career-ending injuries in order to help them transition out of their respective college sport. This non-normative athletic retirement is often a traumatic life event, rather than a minor occurrence, as these athletes typically face a significant amount of emotional, psychosocial, and
physical adjustments in their lives (Baillie, 1993; Blinde & Greendorfer, 1985; Klieber & Brock, 1992; Rohrs & Paule-Koba, 2014; Stoltenburg et al., 2011; Wylleman et al., 2004). There are a variety of ways an athlete may obtain a career-ending injury and each transitional process out of sport for these athletes is unique. Positive support from athletic administrators, coaches, and teammates has been determined to be essential in a positive transition of these athletes out of sport (Rohrs & Paule-Koba, 2014). Due to the NCAA giving its athletic conferences and schools freedom to determine how they handle the situation of an athlete obtaining a career-ending injury, there must not only be a multitude of policies and procedures established in order to govern the situation consistently and fairly, but these policies and procedures must be effectively communicated in a document provided to the athletes. Student-athlete handbooks can serve as this document as athletic programs often hand them out to their student-athletes in the beginning of the school year. By implementing an explicit section in their student-athlete handbook that includes a variety of policies that guide their handling of athletes with career-ending injuries, detailed procedures that enforce the adherence to these policies, and specific intervention options that are available to athletes with career-ending injuries in order to help them transition out of their respective college sport, the athletic department and its sport administrators would be taking closer steps toward fulfilling their mission in providing all collegiate athletes with consistent protection and support for their overall well-being.

A final implication of this study is the need to educate collegiate sport administrators, coaches, and athletes on the research available on the non-normative retirement and transitional process out of competitive sports due to career-ending injury. Collegiate athletes that suffered career-ending injuries admit that, prior to their career-ending injury, they did not think about their future, consider the possibility of a career-ending injury, or develop alternate career and
financial plans in case their athletic career was cut short (Stoltenburg et al., 2011; Walsh, 2013). Being informed and prepared to make life adjustments, prior to a career-ending injury occurring, may ease the transitional process of collegiate athletes out of sports that do obtain this non-normative retirement. In addition, by educating collegiate athletes, coaches, and sport administrators on the topic, it would likely increase the positive support received by a career-ending injured athlete, which would increase the potential of a smooth transitional process for the athlete out of sport (Rohrs & Paule-Koba, 2014). It also may increase the likelihood of the existence of an explicit section of policies, procedures, and intervention options related to athletes obtaining career-ending injuries in the NCAA Division I, II, and III governance manuals, each NCAA athletic conference’s governance manual, and each NCAA athletic department’s student-athlete handbook.

The conduction of educational seminars to help collegiate sports professionals understand the psychosocial effects of career-ending injuries and how they can support these athletes during their initial transition out of sport could be mandated by the NCAA for its member schools. It is important for these individuals not to ignore these athletes when they initially learn of their athletic career termination, but instead foster a supportive environment to help ease their transition out of their role as a collegiate athlete and into a new societal role. This may help the injured athlete as they struggle to regain a high mental well-being. Also, tying into the NCAA mandated Life Skills Program, member schools could be required to hold an educational session on the effects of career-ending injuries with their collegiate athletes. By educating collegiate sport administrators, coaches, and athletes on the non-normative retirement and transitional process out of competitive sports due to a career-ending injury, the NCAA and its member
institutions would be closer in fulfilling their mission of providing all collegiate athletes with consistent protection and support for their overall well-being.

**Limitations**

This study examines current written policies that guide NCAA Division I university athletic departments handling of athletes with career-ending injuries. It reveals a lack of consistency and scarceness of current written procedures that enforce adherence to the athletic department’s policies that guide their handling of career-ending injured athletes. It also exposes the lack of documented intervention options these athletic departments have available specifically for these athletes. However, the following limitations inherent to the study must be acknowledged and discussed. First, the sample consisted of NCAA Division I 2014-2015 student-athlete handbooks from the majority of collegiate athletic departments belonging as full-time members to the MAC and B1G athletic conferences. Although this provided a suitable sample, it may be even more beneficial to examine current written policies, procedures, and intervention options (if any) specific to athletes with career-ending injuries from all Division I schools as other findings may emerge. It may be fruitful to analyze these types of policies, procedures, and intervention options (if any) across other athletic conferences (e.g. SEC vs. PAC-12) to identify differences and similarities between schools with similar-size athletic departments.

Second, only student-athlete handbooks from each athletic department were collected in order to analyze their current written policies, procedures, and intervention options (if any) specific to athletes with career-ending injuries. These athletic departments may have career-ending injured athlete policies, procedures, and intervention options, however, they may not be written in their student-athlete handbook. This information may be found in the athletic
department’s staff handbook, sports medicine handbook, and/or each specific athletic team’s handbook. Specifically, athletic departments that conduct exit interviews with career-ending injured athletes may supply these athletes with a document listing intervention options. This responsibility may even be given to the individual’s head coach or academic/athletic advisor. Just because this information is not listed in the student-athlete handbook, does not necessarily mean that this information does not exist elsewhere in the athletic department.

Third, this study focused on analyzing current written policies, procedures, and intervention strategy options specific to athletes with career-ending injuries within student-athlete handbooks from Division I institutions. It is important to remember that the NCAA is not only comprised of Division I athletic teams. Collegiate athletes that play for NCAA Division II and III institutions also suffer career-ending injuries. Just like Division I institutions, these smaller institutions must also provide protection and support to their collegiate athletes with a priority on their overall well-being. Their athletic departments must have written policies that guide their handling of athletes obtaining career-ending injuries, written procedures that enforce the adherence to these policies, and documented intervention strategy options available to these specific athletes. Findings from this present study cannot be generalized to NCAA Division II or III athletic departments due to the lack of their participation in the sample.

**Directions for Future Research**

Additional research is needed to confirm the findings of this study. Since this study only included student-athlete handbooks from NCAA members in the MAC and B1G conferences, future research should investigate policies that guide an athletic department’s handling of the situation of an athlete suffering a career-ending injury, procedures that force the adherence to these policies, and intervention options given to these athletes that are in all NCAA Division I
student-athlete handbooks. NCAA affiliated athletic conferences also contain handbooks that
govern their affiliated schools. These handbooks should also be researched in order to explore
the policies, procedures, and/or intervention options (if any) related to career-ending injured
athletes that are enforced.

The significance and validity of this study may be enhanced by extending the study to not
only include NCAA Division I student-athlete handbooks, but also NCAA Division II and III
student-athlete handbooks since collegiate athletes that compete at these levels also may obtain
career-ending injuries. Additionally, this study only searched for career-ending injury related
policies, procedures, and intervention options within NCAA Division I athletic department
student-athlete handbooks. However, they could be located and communicated through other
athletic department documents such as their sports medicine manual. Future research should
consider interviewing the head athletic directors of NCAA affiliated schools to investigate the
perceptions of university athletic administrators in regards to the role that the university athletic
department serves in the collegiate career-ending injured athlete’s transition out of collegiate
sports. Policies, procedures, and intervention options for career-ending injured athletes could
also be explored through this research method.

**Conclusion**

The NCAA does not provide adequate resources and support to collegiate athletic
departments and athletes experiencing career-ending injuries. Although the 2014-2015 NCAA
Division I manual includes more than 400 pages of mandates for its affiliated institutions, less
than one page is dedicated to the healthcare of athletes including the handling of career-ending
injuries. The NCAA allows individual schools to determine their own policies and procedures
regarding the medical expenses of their collegiate athletes and the management of athletes who
suffer career-ending injuries. In addition, the NCAA does not require athletic departments to publish these healthcare policies and procedures. Therefore, career-ending injured collegiate athletes may receive inconsistent treatment from their respective universities. Previous research has established that many of these athletes often feel they face the personal, physical, psychological, and financial consequences of their career-ending injury alone (Alferman et al., 2004; Lally, 2007; Pearson & Petitpas, 1990; Stoltenburg et al., 2011).

As long as intercollegiate athletic competitions exist, sports related injuries will occur. Given the inevitability that university athletic departments will face the situation of an athlete sustaining a career-ending injury more than once, the NCAA and its affiliated institutions must contain and maintain specific and detailed written policies and procedures in their student-athlete handbooks to establish consistency and fairness in the handling of these non-normative forced retirements. Each career-ending injury situation is unique, so a variety of multidisciplinary interventions and resources must be available to help these athletes during their transition out of sport. The type and amount of support these athletes require will likely differ from the support desired by athletes experiencing normative sport retirement. Clear and consistent communication of this information in a handbook introduces athletes to the possibility of this type of injury and guides the responses of the respective university and athletic department. It informs all involved individuals about their rights and responsibilities, expected processes and procedures, practical implications prior to actual incidents, and ensures all career-ending injured collegiate athletes receive consistent treatment. The mandatory inclusion of an explicit section in student-athlete handbooks that contains NCAA and respective collegiate policies that guide the handling of athletes with career-ending injuries, detailed procedures that enforce adherence to these policies, and specific intervention options that are available to athletes with career-ending injuries to assist
their transition out of their respective college sport would not only benefit collegiate athletes, but help the NCAA and its affiliated institutions fulfill their mission to provide all collegiate athletes with consistent protection and support for their overall well-being.
References

Agnew v. NCAA, 2011 WL 3878200 (N.D. Cal. 2010).


Rensing v. Indiana State University, 444 N.E.2d 1170 (Ind. 1983).


