

Running head: A mental health research agenda for sports match officials

Call-to-action: The need for a mental health research agenda for sports match officials

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Abstract

Despite the increased focus on the mental health of elite athletes, very little research has examined the mental health symptoms and disorders of sports match officials (judges, referees, umpires), in any sport, anywhere in the world. This lack of research has created a deficit of mental health knowledge for sports match officials and prevented the design, testing, and dissemination of mental health interventions that are evidence-based. The purpose of this paper is to briefly outline the limited research that does exist on the mental health symptoms and disorders of sports match officials and to establish a research agenda that begins to build an evidence-base for future multidisciplinary research and practice. Only through collaborative efforts, that aim to help both individuals and organizations, can poor mental health in this population be addressed and meaningful change begin to occur.

Keywords: mental health, mental disorder, research methods, intervention, mental health literacy, referee, match official

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Introduction

The mental health of elite athletes has received considerable research attention (see: Gorczynski et al., 2017; Reardon et al., 2019; Ströhle et al., 2018). Meta-analytic research shows that mental health symptoms and disorders range from 19% (alcohol misuse) to 34% (anxiety/depression) for current elite athletes, and between 16% (distress) and 26% (anxiety/depression) for retired elite athletes (Gouttebauge et al. 2019). Several consensus, expert, and position statements have not only raised attention about poor mental health in this population (see: Breslin et al., 2019b; Gorczynski et al., 2019; Henriksen et al., 2019; Moesch et al., 2018; Reardon et al., 2019; Schinke, Stambulova, Si, & Moore, 2018; Van Slingerland et al., 2019), but they have provided key guidance for multidisciplinary research and practice. These statements have proven effective with considerable attention now given to biological, social, and environmental etiological factors associated with poor mental health, leading to a shift in language and culture in how poor mental health is discussed and viewed (IOC, 2020; NCAA, 2020; Reardon et al., 2019).

Despite the increased focus on the mental health of elite athletes, very little research has examined the mental health symptoms and disorders of sports match officials (judges, referees, umpires). Consistent research shows that sports match officials experience considerable stress, both before and after their games (Anshel et al., 2013; Baldwin, 2013; Nicholls et al., 2009; Voight, 2009). Some stress originates from conflicts with other sports match officials, demands of the jobs, media scrutiny, lack of support and performance evaluations (Kim, 2017; Ridinger, Kim, Warner, & Tingle, 2017).

Most importantly, the greatest sources of stress come from threats of physical harm, verbal abuse, and aggression from athletes, coaches, and fans, both on and off the field (Webb, 2020a; Webb, Cleland, & O’Gorman, 2017; Webb, Rayner, & Thelwell, 2019; Webb, Dicks, Thelwell, van der Kamp, & Rix Lievre, 2020). The stress that arises from abuse has serious consequences. Some sports match officials have noted a decline in motivation, decreased job performance, and a diminished ability to cope with ongoing stressors (Folkesson, Nyberg, Archer, Norlander, 2002). There have been reports of sports match officials leaving their chosen sport in large numbers as a result of stress and abuse (Cuskelly & Hoye, 2013), rendering some amateur sports unsustainable. Other sports match officials have spoken out about being physically assaulted and fearing for their lives (Keogh, 2018). There have also been reports of sports match officials who have killed themselves as a result of the abuse they have received (Shaw, 2016).

Overall, it would appear that abuse and stress are major problems for sports match officials and contribute to their poor mental health, yet a dearth of research has adequately explored this phenomenon, let alone provide strategies to address it. Thus, the purpose of this paper is to briefly outline the limited research that does exist on the mental health symptoms and disorders of sports match officials and to establish a research agenda that begins to build an evidence-base for future multidisciplinary research and practice.

Review of mental health research involving sports match officials

Research from a large observational cohort study that examined the mental health symptoms of common disorders amongst European central or assistant professional football referees has shown that prevalence rates were lower than those indicated by elite athletes (Gouttebauge, Johnson, Rochcongar, Rosier, & Kerkhoffs, 2016). With respect to distress

(6%), anxiety/depression (undifferentiated) (12%), sleep disturbance (9%), and alcohol misuse (17%), the prevalence rates were all lower than those reported in a recent meta-analysis that compared the same symptoms for elite athletes (Gouttebauge et al., 2019). Results from another cross-sectional study, which examined the prevalence of mental health symptoms of common mental disorders amongst professional Egyptian football referees (El Bakry, 2013), found lower rates of mild or moderate levels of anxiety (16.9%) and mild symptoms of depression (4.7%) than those reported by elite athletes in the Gouttebauge et al. (2019) meta-analysis.

While rates of prevalence for these mental health symptoms and disorders for sports match officials are lower in comparison to elite athletes, caution must be taken when making any interpretations from these results. To date, only two studies have examined the prevalence of mental health symptoms and disorders of sports match officials, with both samples focusing on professional football referees and those who identify as men. Currently no studies have examined mental health symptoms and disorders in sports match officials who identify as women, or those who work at non-professional levels. Additionally, no research has ever directly compared the mental health symptoms and disorders of sports match officials and elite athletes, limiting any generalizations that can be made between these two populations.

Consequences of limited research

This lack of research has created a series of problems (Gorczyński et al., in press). First, through their exclusion in the research process, a mental health knowledge deficit has been created for sports match officials. From an epidemiological perspective, very little is known about the incidence or prevalence of mental health symptoms and disorders amongst sports match officials. At the moment, it is not clear which mental health symptoms or disorders cause the greatest disease burden amongst individuals in this population. Furthermore, little data pertains to key demographic information that would help indicate who may be at greatest risk for mental health symptoms and disorders and, thereby, who would need the greatest help. Additionally, no data exists on relationships between mental health symptoms and disorders and temporal (e.g., in-season vs. off-season, current vs retired) or geographic variables (e.g., country/countries of play).

This mental health knowledge deficit leads to the second problem: an unknown lived experience of mental health symptoms and disorders. With a lack of qualitative research that explores the impact of mental health symptoms and disorders, the lives of sports match officials is not documented, rendering their lives, and struggles, largely invisible.]

With no epidemiological understanding, and no qualitative research to better understand the lives of these sports match officials, this leads to the third problem: an inability to design and deliver evidence-based interventions to address mental health symptoms and disorders. What is needed is a mental health research agenda for sports match officials, one rooted in a process designed to create, test, and disseminate evidence-based interventions.

A proposed research agenda

Rooted in the behavioural epidemiology framework (Sallis, Owen, & Fotheringham, 2000), and based on previous recommendations for better understanding mental health symptoms and disorders in elite sport (Reardon et al., 2019), including strategies to develop culturally competent and contextually aware mental health literacy interventions for elite athletes (Gorczyński et al., 2019; Gorczyński et al., in press; Webb, 2020b; Webb &

Gorczyński, 2020), the following recommendations are provided to help start a dialogue to improve research and practice pertaining to the mental health of sports match officials across all sport.

- 1) Develop collaborative research agendas that span across disciplines including psychology, psychiatry, social work, education, sociology, sports medicine, and sport management in order to develop a collective awareness of mental health symptoms and disorders from multiple perspectives and help inform future interventions.
- 2) Collect data pertaining to the epidemiology of mental health symptoms and disorders in sports match officials using valid and reliable instruments. Currently, limited data on the prevalence of mental health symptoms and disorders exists only for a small group of football sports who identify as men. The collection of key demographic data is essential, including gender, sex, age, race, ethnicity, sexuality, (dis)ability, country of play, income, training level, sport, and level of play.
- 3) Collect qualitative data on the lived experiences of sports match officials who have reported mental health symptoms and disorders. Such data will contribute to an overall understanding of disease burden; help elucidate individual, social, and environmental causes of poor mental health, and help inform pathways to offer professional support.
- 4) Design mental health interventions with collective awareness that recognizes organizational responsibility and includes athletes, coaches, staff, fans, families, and all sports match officials involved in the sport. Some sports organizations have started to examine these inclusive approaches to addressing mental health symptoms and disorders (See: State of Mind, 2020; Football Association, 2020).
- 5) Mental health interventions need to be designed in a culturally competent manner rooted in contextual awareness of organizational values and goals where environments can be shaped to help individuals thrive.
- 6) Ensure mental health interventions, including mental health literacy programs, are designed and embedded in sports match official training programs in a manner that is pedagogically appropriate
- 7) The communication of any evidence pertaining to mental health symptoms and disorders and the promotion of any mental health intervention needs to uphold journalistic standards of reporting on mental health (e.g., Mind, 2013).
- 8) Lastly, a global perspective toward mental health understanding and intervention is needed (Rathod et al., 2019). This means that mental health research also takes place in low- and middle-income countries where a lack of resources currently exist to address poor mental health. Additionally, that multiple conceptualizations of mental health symptoms and disorders, along spiritual and religious lines, are acknowledged and accepted.

Conclusion

The mental health of sports match officials is a major concern, one that requires a detailed and organized research approach in order to produce meaningful and effective interventions. Collaborative efforts that recognize the need for diverse and comparative data, along multiple contexts and sports, can begin to address the deficits in knowledge of mental health symptoms and disorders among sports match officials. Only through these efforts, that aim to help both individuals and organizations, can poor mental health in this population be addressed and meaningful change begin to occur.

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