

Does the Mental Health and Well-Being of the Athletic Trainer Affect Patients?

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This special issue of the *Journal of Athletic Training* highlights the importance, extensiveness, and need for more research on mental health within our profession. Certainly mental health is stigmatized in athletics,^{1,2} and health care professionals also suffer from the stigma linked to mental illness.^{3,4} Specifically, researchers have indicated that health care providers often suffer in silence due to the fear of losing their medical license because of the stigma associated with mental illness and stress.³ Additionally, health care professionals have historically been hesitant to seek professional help for mental health illnesses.⁴ Putting patients first is a central tenet of contemporary medicine, but we should not forget the centuries-old adage of “doctor, heal thyself.” Consequently, this special issue also offers readers the opportunity to consider how increased awareness and willingness to talk about our own mental health and well-being could help destigmatize many of the challenges our peers, our patients, and we as individuals are facing. In doing so, perhaps we can better recognize signs and symptoms in the individuals to whom we provide care every day.

For nearly a decade, personal and professional advocacy have been at the center of my research agenda. Experiences related to my own personal and professional struggles early in my career led me to examine the *work-life interface*, which is the overlap between our personal and professional lives. When our lives become unbalanced, burnout is one of the potential negative consequences. *Burnout*, which was originally defined in the mid-1970s, is a psychological syndrome that encompasses emotional exhaustion, depersonalization of patients, and a decreased sense of personal accomplishment.⁵ Exhaustion, which has been described as the central component of burnout, can stem from physical and physiological fatigue and can be derived from work or from interactions with clients or patients.⁶ Burnout has been observed in all subsets of the athletic training profession that have been studied, including students, clinicians, and educators, regardless of employment setting.⁷ Individuals experiencing burnout reported more depressive symptoms^{8,9} and exhibited increased substance use,⁸ and recent researchers highlighted the link between burnout in athletic trainers and medical errors.¹⁰ Burnout has been linked to the mental health status of health care professionals, and emotional exhaustion is the dimension of burnout that is most closely linked to employees' mental health.¹¹

Although burnout is an important factor to consider, it is just one of a plethora of concerns athletic trainers may encounter that affect their mental health and well-being. High patient workloads, demanding administrative responsibilities, compassion fatigue, providing care for catastrophic illnesses and injuries, and coping with the death of a patient on or off the field

are all possible realities of experiences in the athletic training profession. We must also acknowledge that many athletic trainers have been diagnosed with mental health illnesses. Recent data revealed that 50.4% of health care workers self-reported depression and 44.6% self-reported anxiety.¹² According to the National Institute of Mental Health, approximately 1 in 5 US adults live with a mental illness, which equated to about 52.9 million people in 2020.¹³ In 2004, physician Suzanne Fiala wrote openly about her experience with bipolar disorder and described her fear of being “found out” and never again being taken seriously by her colleagues.¹⁴ She challenged her colleagues to examine their own biases and become leaders in compassion and eloquently wrote:

If I continue to live pretending to be other than who and what I am, how can I hope the world will evolve and become a better place for them? It is time to give mental illness a name, a face, a story. Only in doing so will the stigma of this disease lose its power.^{14(p2926)}

Yes, athletic trainers, as health care professionals, face many challenges, and we live in a taxing world. The COVID-19 pandemic likely intensified the stressors that have always been present, but the incidences of stress and burnout were higher among health care professionals than those among other US workers before the pandemic.¹⁵ If the COVID-19 pandemic had any positive results, one was the willingness of more clinicians to seek professional help and guidance for their mental health concerns.¹⁶

I will leave you with the following advice, and I hope it resonates: take a vacation, leave a toxic workplace environment, speak empathetically about mental health, have fun, ask for help when you need it, explore your passions outside of work, practice saying “no,” seek professional medical help when needed, treat yourself kindly, and prioritize your well-being. We can all destigmatize mental health by talking about it and recognizing our own vulnerabilities. In the end, everyone benefits, including our patients. To provide the best care for our patients, we must first take care of ourselves.

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