

Chapter 13

Hazing and Bullying in Athletic Culture



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Introduction

Over the past several decades, substantial attention has been given to occurrences of abuse in sports. Media coverage has fixated on accounts of harassment, bullying, and hazing in the athletic arena. In response, a number of governing bodies and sports medicine societies, including the International Olympic Committee (IOC), the National Collegiate Athletic Association (NCAA), and the American Medical Society for Sports Medicine, have presented position papers affirming that all

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athletes of any background have the right to engage in sport in a safe and supportive environment [1, 2]. Nonetheless, athlete maltreatment persists across a range of demographic groups. In this chapter, we will examine the complex and multifaceted aspects of both hazing and bullying in sport.

Hazing in Athletic Culture

Hazing is broadly defined as any act against someone joining or maintaining membership to an organization that is humiliating, intimidating, or demeaning, and endangers the health and/or safety of those involved [2, 3]. More specifically, it has been defined as “a secret, private, interpersonal process that reaffirms a hierarchical status difference between incoming and existing group members” [4]. It has the potential to encompass a range of potentially dangerous interactions, including psychological, sexual, and/or physical abuse [5–7]. While in some cases the victim of hazing may willingly engage in these rites, voluntary participation does not change the fact that hazing has occurred [2, 3]. Sexualized hazing is a form of abuse where the encounter includes a sexualized verbal, nonverbal, or physical violation, either with or without consent to engage in the hazing activity [8–10].

Hazing serves as an opportunity for inductees to demonstrate that they are willing to undergo dangerous or humiliating experiences for the opportunity to be included in team culture. It allows junior members of the team to demonstrate subservience and obedience, as well as other intangible traits that senior members may seek in teammates [11, 12]. In sport culture, hazing allows the victims to demonstrate how much they are willing to endure for their group, and what they are willing to sacrifice of themselves [13]. Athletes frequently express a need for an initiation or trial as a “team bonding experience” that serves to indoctrinate new teammates and bring the group together through some kind of transformative experience. Later sections will outline the common false belief that hazing will enhance group cohesion, and by proxy team success [2, 5, 11–14]. Existing team members may feel the need to prove of this level of dedication from new initiates, especially important in full contact sports where injury is common and a teammate can protect others from harm [15]. Athletes who have willingly subjected themselves to hazing have reported that it is endured in order to be accepted or respected by their peers and that it allows them to prove their dedication to the team [8, 16–19]. Hazing in sports often occurs after athletes have already earned membership into a team by demonstrating that they possess the physical and technical abilities necessary to compete [14]. While athletes who are trying out or have established roles on the team are rarely the targets of hazing activities [20].

Bullying in Athletic Culture

In contrast to hazing which is posited to enhance cohesion, bullying is an exclusionary form of treatment that intends to exclude a peer from the group. It is designed to perpetuate an imbalance of power and intends to force undesired prospects to the group margins [21].

Bullying lacks a consensus definition, but can generally be defined as any pattern of physical, verbal, or psychological maltreatment between peers or teammates that has the potential to be harmful or dangerous [22, 23]. Other emphasized criteria include: (1) it is repeated, (2) is deliberate, and (3) is intended to harm the target victim [24]. It notably exists in the absence of any kind of provocation, and similar to hazing is often directed at newer, less experienced, or less skilled members of the team [21]. In the absence of intervention, it may continue until either the target or abuser is removed from the environment. Bullying can include making unreasonable performance demands of the victim, threats to restrict privileges or opportunities, verbal or emotional abuse, excessive or unwarranted criticism, denying or minimizing accomplishments, excessive blame for mistakes, threats or physical violence, harassment via social media, intentional exclusion from team events, or spreading of rumors or demeaning information [25–27]. When bullying occurs in the sports setting, it is often influenced by gender, sexuality, and coaching behaviors. Literature demonstrates that athletes who are members of an organization led by a more authoritarian coaching structure are more likely to engage in bullying and other types of maltreatment [25].

Behavioral Basis

The rite of passage, coming of age ceremony, and many other forms of social initiation have a long history in human culture and across civilizations [28]. These inductions range from benign to brutal, and if successfully navigated can signal an individual's earned membership into a desired group. By design, they are intended to be transformative, characterized by a "destruction/creation" cycle where an old identity is destroyed and a new one is born in the mold of the dominant group [20]. While these rituals have a tendency to take on a self-perpetuating nature wherein the former initiates become perpetrators out of a sense of tradition, they are theorized to serve an important role in the structural formation of their respective cultures [29–31]. Painful and arduous trials that demonstrated the worth and value of a potential inductee into a group are believed to have been tremendously adaptive in the development of early hierarchies, and many of the underlying motivations of these behaviors are applicable to modern team sports [14].

An athletic team has several important corollaries to the groups that have historically participated in hazing practices. Teams often possess a hierarchy based on age, skill, experience, and clearly defined leadership structure (coach and staff, team captain, and assistant captain(s), varsity and junior varsity). The group's success relies on both the success of individuals and their ability to function as a unit. Affiliation with a team may signal an "elite" status demonstrating high social value and may be a highly coveted position. It is both entrance into this hierarchy and positioning within the hierarchy that may prompt forms of maltreatment in sport [11].

Hazing is a hyperbolic and potentially dangerous reinterpretation of traditional initiation rites. This behavior typically occurs for two reasons: (1) to provide the inductee an opportunity to demonstrate that they possess certain intangible qualities that will make them an asset to the team and (2) to serve as an experience that is

posited to enhance team cohesion between new and existing members which is in turn believed to improve team success [13, 25]. Hazing is often time-limited, and when these goals are felt to have been achieved may self-terminate until the next batch of recruits are initiated.

Athletic Culture

Aspects of modern athletic culture predispose participants to hazing and bullying behaviors. Because of the widespread perception that participation in sport is a positive “character builder,” hazing and bullying in the sports setting allows such behavior to be more widely accepted [32]. Athletes are expected to play through pain, accept orders, make sacrifices for team gains, take risks, and challenge their own limits in order to achieve success on the playing field. They may do so at the cost of other social and academic obligations [12]. While being exposed to hazing, they are expected to demonstrate an ability to endure upsetting or difficult experiences at the perceived gain of acceptance by the group. If an individual is unable or unwilling to participate in hazing rites, they may quickly become the target of bullying. The athletic community is known to be bound by a code of secrecy, as this type of self-governance is nearly always disavowed when exposed [1, 10, 33]. Typically, any violation of this rigid confidentiality structure signals that an individual will not conform to group norms and may be excluded.

In some circumstances, these types of behaviors can deviate toward sexual abuse. In many cultures throughout history, athletes have demonstrated the “standard for hegemonic masculinity” [20, 34]. The most masculine athletes are frequently the most dominant and well respected [20, 34]. Instances of sexual exploitation in both hazing and bullying exist in order to hyper-masculinize the perpetrator by placing him or her in the role of a sexual aggressor and de-masculinize the victim by making them passive and submissive [13]. By forcing the victims into this role, their status at the bottom of the team hierarchy is solidified. Likewise, the aggressor reasserts their dominance in an extreme way and places themselves as superior, one who possesses “status, hostility, control, and dominance” [12, 17, 35].

Bullying and hazing behaviors tend to self-perpetuate, often referred to in a light-hearted way as “tradition”. Through social learning, victims of sports-related hazing and bullying come to believe that these types of behaviors are “normal” and an appropriate means of self-governance. In this traditional pattern, victims may eventually become perpetrators as they turn to the same behaviors that they were subjected to upon achieving a status of superiority in their athletic community.

Institutional protection of the abuser is a concerning aspect of sport-related abuse. There are notable instances of high-profile organizations going to great lengths to either protect abusers or attempt to “cover up” instances of hazing or bullying [36–39]. The reasons for this are complex. In some cases, the abuser is a senior or more experienced athlete and may be perceived as more valuable to the team. Protecting the abuser in these instances may result from concern for the

immediate success of the organization. For any individual or institution to acknowledge that abuse has occurred among their athletes also invokes a degree of culpability and may tarnish reputations. A program may hope to settle these kinds of issues quietly and internally to avoid possible negative publicity or any legal implications.

In certain cases of bullying and hazing, the athletic community may feel inclined to blame the victim. The majority of research into hazing and bullying has been done on maltreatment in the general population, rather than the athletic community. Bystanders may hold on to the misconception that if the victim engaged in hazing willingly, then there should be no blame. Others may continue to see a benefit in hazing and disregard any issues caused by it. In cases of sexual assault where the aggressor and victim have a prior or currently close relationship, blame for the aggressor tends to be diminished compared to an unknown assailant [40]. When considering that a teammate may perpetrate against a peer, and that some may feel the abuse has the potential to enhance cohesion, it is very possible that the assault is viewed as benign and the victim is blamed for describing the behavior as abusive. Perhaps the biggest factor leading to the perpetuation of hazing is the misconception that hazing is normal or even beneficial [18, 19]. Although it has been demonstrated that hazing, bullying, and other forms of maltreatment impede individual and team performance, the belief that it is an important part of sport culture persists. In this context, individuals who report the maltreatment are often felt to be acting against the best interests of the team. In situations where hazing has been engaged in willingly, some even recommend that victims need to be punished for their participation [41].

Epidemiology of Hazing

The prevalence of hazing in sport is obscured by a veil of secrecy and hence is difficult to assess. Prevalence is further confounded by the significant variance with regard to what each individual considers as hazing. What one individual considers a harmless event and would never be reported may actually be far from it. Many athletes also admit to unwillingness to report any kind of hazing activity. For instance, 80% of National Collegiate Athletic Association (NCAA) athletes described experiencing events that would qualify as hazing. However, only 12% of these athletes actually felt that they had been hazed [42]. A follow-up study found that 60–95% of athletes who have been hazed have explicitly stated that they would not report the hazing event [19, 42]. These findings support the notion that the incidence of hazing in sports is likely underestimated.

In a study of United States High School students published in 2008, 47% of student athletes endorsed being hazed [19]. Similarly, 42% of NCAA athletes first experienced hazing while still in high school [42]. Other reports indicate that as many as 800,672 high school students are hazed per year, and 25% of those who had been hazed reported that the first incident occurred before the age of 13 years old [35].

It has also been reported that 55% of US college students who participated in clubs, teams, or other organizations experienced hazing of some degree during their collegiate experience [19].

Risk Factors for Hazing in Sport

Hazing in athletic populations is not limited to any gender, age range, or skill level [22, 43, 44]. Populations who are particularly vulnerable to the various forms of hazing include elite athletes [2, 12, 18, 42], high school athletes [35, 45], those of homosexual or bisexual orientation [12, 46], transgendered athletes [46], athletes with disabilities [1], or those with academic difficulties [35]. Certain team features also predispose groups to hazing practices. Teams where the athlete-leaders behave in a way that defies or challenges the authority of the coaching staff are particularly high risk. Any group that spends prolonged periods of time in an unsupervised team area or locker-room has more opportunities to engage in this type of behavior. Additionally, it has been posited that teams where there is an imbalance of power shifted toward a hyper-masculine authority experience higher rates of hazing.

Factors that have not been demonstrated to correlate with a greater hazing risk include any specific type of sport, the degree of physicality involved in play, or the type of uniform or body coverage [1].

Epidemiology of Bullying in Sport

A lack of standardized definition and a variety of ways to measure bullying have led to a range of reported prevalence rates [47]. Given that intimidation, aggression, and physical aggression have a place in some sports, detecting maltreatment can be particularly complicated [4, 26]. In a 2016 estimate of the general population, it was estimated that one out of every four children will experience bullying [48]. While there has been a considerable amount of study specific to the school environment, data concerning bullying in sports have been limited [49]. In a study of adolescent athletes (average age 14.5 years, 64% female) involved in Canadian team sports, 14% endorsed experiencing bullying in the context of sports, far lower than what is typically seen in the general population [49]. Much of the current existing literature corroborates that adolescent athletes may not engage in bullying as much as their peers, and that athletes who do experience bullying are more likely to be exposed to it in the school yard rather than the locker-room [27, 49, 50]. This is supported by research that identifies participation in team sport as pro-social and enhancing feelings of interconnectedness, community, and decreasing conditions such as anxiety and depression [51–54].

Cyberbullying is an emerging threat of special concern due to its ubiquitous nature, the permanence of the online reputation created, and the difficulty in detection by authority figures limiting their ability to recognize and respond to it.

Cyberbullying has been roughly defined as any form of abuse perpetrated using electronic communication or other forms of online social media [48, 55–57]. This phenomenon has been on the rise, with recent reports of 49% of children experiencing this kind of behavior at some point [48].

Risk Factors for Bullying

There are a number of potential factors that have the potential to put an individual at heightened risk to experience bullying. Lesbian, Gay, Bisexual, and Transgender youths in the general population are a particularly vulnerable group, with as many as 90% experiencing bullying [48]. Homophobia has been linked to sexual abuse and violence in sport [12, 24].

Bullying can also be heavily influenced by gender issues, masculine norms, and the moral atmosphere of the team. It has been reported that the strongest predictor of bullying behavior was whether or not an individual felt that “the most influential male in their life would approve of the bullying behavior” [27]. Individuals who perceive a lower moral atmosphere and demonstrate higher conformity to hegemonic masculine norms are more likely to perceive bullying as an acceptable behavior and engage in it [27].

Recognition of Bullying and Hazing

There are numerous barriers to the accurate and timely detection of hazing and bullying. One of the main barriers is the aforementioned “veil of secrecy” surrounding these events. Disclosure of any kind of abuse or maltreatment may break from expected social norms and may be grounds for expulsion from any group to which admission has been gained. Recent estimates suggest that less than 40% of bullying occurrences are reported to an adult [58]. There are many reasons a victim or bystander may not notify an adult or ask for help. They may experience feelings of helplessness due to the bullying. There is often fear of backlash or threats of repercussions made by the perpetrator. The victim may feel helpless or ashamed. Victims often express feelings of isolation and rejection that may be a barrier to them communicating these issues to peers or adults [24, 25, 49, 59].

Athletes who are being hazed or bullied may be forced to or voluntarily engage in embarrassing or humiliating situations. They may be expected to dress or act in a way that singles them out from other team members. Perhaps they are forced to act in a way that is subservient to senior team members such as cleaning their equipment, carrying gear, or running errands. Junior team members may be expected to greet or acknowledge senior team members in a specific way. Certain hazing practices involve modification of the body by cutting, branding, or tattooing team logos or other images. Athletes may be expected to shave their head or otherwise alter their appearance. Individuals may be expected to participate in activities involving

the excess consumption of alcohol, illicit or mind-altering substances, or other materials. Other potential signs of hazing and athlete maltreatment include unexplained injuries or injuries inconsistent with the sport being played, avoidance of certain teammates or locations, fear or avoidance of certain adults, coaches, or other authority figures, difficulty forming appropriate relationships with other teammates, and difficulty trusting other individuals who are part of the team structure [60]. Any behaviors consistent with these practices may be considered hazing or bullying, and therefore abuse, and any individual familiar with their athletes and team culture may be better able to perceive this behavior.

The disclosure of bullying and hazing by both victims and perpetrators is particularly challenging, and team medical personnel may benefit from using a set of questions to help detect such patterns of behavior.

The following questions can be asked to help detect any possible occurrences of hazing [61]:

- Are members of the group engaging in any kind of non-team sanctioned activity that involves a high level of secrecy?
- Are new members to the team under pressure to participate?
- Is there a specific group (rookies, freshmen, particular position group) or type of individual singled out for certain treatment?
- Do existing team members justify the practice as a “tradition”?
- What would outside individuals (coach, athletic director, parents) think about the activities?
- Is anything illegal, dangerous, embarrassing, or incriminating taking place?

Open communication is crucial in the detection and recognition of hazing and bullying. Incidences of bullying can be navigated using questions, such as “Do you feel safe at school or in your neighborhood? Has anyone been hurting, teasing, or harassing you? Are there people who have been making your life more difficult?” Signs of bullying and hazing include [59]:

- Are there unexplained injuries inconsistent with sport participation?
- Is there any lost or destroyed personal property?
- Does the potential victim experience frequent headaches, stomach aches, feel or feign sickness?
- Are there changes in eating habits, sleep patterns, declining grades, or activity level?
- Has there been a sudden avoidance of sport or social activities?

Impact of Bullying and Hazing

The effects of hazing and bullying have been well studied. Many of those who engage in hazing actually hold positive views of their experience. A study of hazing in NCAA athletes found that nearly one-third endorsed feeling a stronger sense of

identification with the group as a result of being hazed, while others endorsed a sense of accomplishment or reported feeling “stronger” [18]. Victims of bullying in athletic settings may deny negative feelings toward the perpetrators and feel that the abuser was acting out of beneficence, particularly when the abuser was a coach [26]. A positive response to these negative experiences can be explained in part by dissonance theory. Individuals who undergo an unpleasant experience to gain membership to a group often subconsciously distort their conception of what has been endured. By viewing either the abuse or the group to which membership has been gained in a more positive light, an individual can reconcile that the trauma they have gone through was worthwhile or even helpful [14, 62, 63].

Despite some perceived benefits, meta-analyses on the effects of bullying and hazing demonstrate that victims are at a significantly higher risk of developing serious physical and mental health disorders [8, 25, 64]. These individuals are prone to the development mental disorders including depression, anxiety, posttraumatic stress disorder, eating disorders, and suicidality [8, 56, 65–67]. Specific symptoms range considerably between individuals, but commonly include worsening of self-esteem, aggression toward self or others, interpersonal conflicts, emotional instability, impaired moral judgment and reasoning, delinquency/criminality, overly submissive behaviors, and worsening athletic and/or academic performance [1, 5, 15, 68]. Many individuals will voluntarily withdraw from sports in response to negative experiences. These victims of abuse may demonstrate changes in weight, fluctuating energy levels, or aberrant sleep patterns. Individuals enduring physical and sexual abuse may experience subsequent sexual dysfunction, sustain trauma to their internal or sexual organs, or be exposed to sexually transmitted illnesses [16, 69–73].

There is also abundant research to support considerable damage to teams and organizations due to hazing. There is some evidence for enhanced cohesion between the abuser and victim, though this is often one-sided with the victim harboring significant distrust and resentment [14, 18, 20, 74]. By subdividing a team into smaller units of hazers and victims, overall team unity and cohesion is actually fractured [11, 14]. A series of questionnaires administered to collegiate athletes found participation in hazing was inversely correlated with their perception of team cohesion, and that more appropriate forms of team building were directly correlated with cohesion [14]. Hazing has been demonstrated to promote unification through a “code of silence” among both abusers and victims, whether out of a sense of unity, fear, or other factors, and this has not been shown to enhance other aspects of team cohesion or success [15].

Treatment

A rapid, effective, and appropriate response is the critical first step that should be taken in the event of identified abuse [75, 76]. The victim(s) may still be in a position of potential harm, so removing them or the abuser from further interaction is crucial. By using active and empathic listening, one can safely encourage disclosure

of any events that have taken place. The provider should rely on asking open-ended questions and avoiding suggestive, judgmental, or leading lines of questioning. Acknowledge that the victim may experience shame, fear, or guilt, and work toward fostering an environment where the victim knows that they are safe. Provide abundant emotional and psychological support, and understand that what the victim may be experiencing can be difficult and complicated [8, 9]. It can be important to reinforce that what they have experienced is not a healthy part of team sports, nor is it their fault [11, 14]. Denigrating the perpetrator should be avoided, as it has the potential to distort accurate recollection of abuse [8].

Every responsible team should have an established Mental Health-Emergency Action Plan (MH-EAP) that can be applied in situations of abuse or other mental health crises. A MH-EAP should include roles, responsibilities, and plans of action for every member of the team with careful consideration of what resources are available. Contact information for local administrative, emergency, and medical services must be readily available. The MH-EAP should be updated frequently as staff and team members change, and not only reviewed but practiced on a periodic basis [77, 78]. It is important for team members to be knowledgeable about various statutes and regulations regarding the duty to report in their respective locale.

Litigating Abuse in Sport

Title IX has served as an important litigation tool in instances of sexual harassment or abuse involved in bullying and hazing. Established in 1972, Title IX states that, “No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance” [79]. It can be applied in any situation where verbal or physical aggression of a sexual nature, disparagement against a victim’s gender or sexuality, or any type of sexual assault occurs. This federal civil rights law has been important in challenging institutions and power structures that have created an environment where sexual abuse can exist [20].

As of 2018, 44 out of 50 states have anti-hazing laws [80, 81], though the practice continues to proliferate. Bullying continues to be a major concern, and easy access to the internet and social media has created another venue where abuse can take place [59]. Clearly increasing restrictions of laws and policies are unlikely to have a strong impact on hazing and bullying practices as a majority of states have passed laws and the practice continues to proliferate. As such, additional or stricter rules and regulations would be expected to have limited effect in reducing these kinds of abuse. Efforts should be made to enact a culture shift within the athletic community where hazing is not tolerated. Currently, the NCAA is promoting a zero-tolerance policy including a system for athletes to report abuse in a safe way, and disciplinary actions directed toward abusers. By fostering these structures, the NCAA hopes to mitigate future offenses and provide a groundwork for other organizations to do the same [2, 82].

Prevention

It is the responsibility of coaches, athletic administrators, teammates, and medical teams to foster an environment of emotional support and well-being for athletes entering the team community. In such an environment, hazing, bullying, or other forms of abuse are not condoned and are subject to severe penalties. Players, coaches, and family members should all be educated as to what constitutes healthy and appropriate behaviors, as well as what would be considered an unhealthy or dangerous interaction on or off the field of play [83]. Specifically, care should be given to distinguish the difference between healthy team building and unhealthy hazing rites which can quickly evolve into sexual abuse, substance abuse, and other dangerous behaviors. As bullying has been demonstrated to correlate with perceived attitudes of influential male figures, outreach should be made to coaches, fathers, brothers, and elite athletes to help foster a culture where bullying is not tolerated [27].

Parents, coaches, and trainers can benefit from information on the warning signs and symptoms that can manifest in athletes who have been exposed to abuse. Demonstrating that hazing actually harms team cohesion and success is important in changing public opinion about the practice. It is crucial to ensure that all athletes have access to a trusted individual to whom they can disclose any kind of abuse without fear of retribution.

Team sport athletes can always be expected to desire a sense of team cohesion and unity. By providing sufficient opportunities for healthy team building and self-governance, the use of hazing activities or unhealthy team rituals can be dramatically reduced [82]. Positive experiences that promote respect, team pride, and individual empowerment are proven to enhance team unity and subsequently success [5].

Conclusion

Participation in sport has the potential to impart numerous physical and psychological benefits for those involved [52, 53, 84]. Unfortunately, bullying and hazing remain a significant problem, being both prolific and having been demonstrated to create lasting damage to participants across all levels of play. While hazing and bullying do possess fundamental differences, they are both behaviors defined by abuse of peers and can involve physical, emotional, or sexual abuse, as well as violence and exposure to illicit substances. While some consider hazing to be harmless or beneficial to team cohesion and success, it has been empirically proven to harm both teams and individuals. Bullying, while more universally acknowledged as detrimental, still exists in the absence of appropriate adult supervision and intervention. Treatment for the victims of these kinds of abuses include immediate medical, psychiatric, and supportive care as needed. A MH-EAP can be developed specifically

for each athletic organization and for any kind of situation. Recognition of the types of athletic environments and risk factors that encourage hazing and bullying is crucial in the implementation of changes that can mitigate these behaviors. Actively engaging the community in a way that demonstrates the tremendous risks associated with hazing and bullying, as well providing education with regard to just how severely teams and individual athletes can be harmed, is essential in the development of an athletic culture where abuse is not tolerated, and athletes can thrive.

References

1. Mountjoy M, Brackenridge C, Arrington M, Blauwet C, Carska-Sheppard A, Fasting K, et al. International Olympic Committee consensus statement: harassment and abuse (non-accidental violence) in sport. *Br J Sports Med.* 2016;50(17):1019–29.
2. Wilfert M. Building new traditions: hazing prevention in college athletic. Indianapolis: The National Collegiate Athletic Association; 2007.
3. Allan E. “Hazing vs. bullying.” StopHazing Web site. [Internet]. Orono: StopHazing.Org; [Cited 2018 March 27]. Available from: <https://web.archive.org/web/20150906002200/http://www.stophazing.org/hazing-vs-bullying/>.
4. Coakley JJ. Sports in society : issues and controversies. 12th ed. New York: McGraw-Hill Education; 2017. pages cm p.
5. Diamond A, Callahan S, Chain K, Solomon G. Qualitative review of hazing in collegiate and school sports: consequences from a lack of culture, knowledge and responsiveness. *Br J Sports Med.* 2016;50(3):149–53.
6. Fields S, Collins C, Comstock R. Violence in youth sports: hazing, brawling and foul play. *Br J Sports Med.* 2010;44(1):32–7.
7. Hoover J, Milner C. Are hazing and bullying related to love and belongingness? *Reclaim Child Youth.* 1998;7(3):138–41.
8. Marks S, Mountjoy M, Marcus M. Sexual harassment and abuse in sport: the role of the team doctor. *Br J Sports Med.* 2012;46(13):905–8.
9. Cense M, Brackenridge C. Temporal and developmental risk factors for sexual harassment and abuse in sport. *Eur Phys Educ Rev.* 2001;7:61–79.
10. Kirby S, Greaves L, Hankivsky O. The dome of silence: sexual harassment and abuse in sport. London: Zed Books; 2000.
11. Johnson J. Through the liminal: a comparative analysis of communitas and rites of passage in sport hazing and initiations. *Can J Sociol.* 2011;36(3):199–227.
12. Anderson E, McCormack M, Lee H. Male team sport hazing initiations in a culture of decreasing homophobia. *J Adolescent Res.* 2012;27(4):427–48.
13. Waldron JJ, Kowalski CL. Crossing the line: rites of passage, team aspects, and ambiguity of hazing. *Res Q Exerc Sport.* 2009;80(2):291–302.
14. Van Raalte J, Cornelius AE, Linder DE, Brewer BW. The relationship between hazing and team cohesion. *J Sport Behav.* 2007;30:491.
15. Stirling A, Bridges E, Cruz E, Mountjoy M. Canadian Academy of Sport and Exercise Medicine position paper: abuse, harassment, and bullying in sport. *Clin J Sports Med.* 2011;21(5):385–91.
16. Waldron JJ, Lynn Q, Krane V. Duct tape, icy hot & paddles: narratives of initiation onto US male sport teams. *Sport Educ Soc.* 2011;16(1):111–25.
17. Lenskyj HJ. What’s sex got to do with it? Analysing the sex and violence agenda in sport hazing practices. Toronto: Canadian Scholars’ Press; 2004.

18. Allan E. Hazing in view: college students at risk: initial findings from the national study of student hazing: DIANE Publishing; Collingdale, PA, USA. 2008.
19. Allan E, Madden M. Hazing in view: college students at risk. 2008.
20. Stuart SP, Warriors, Machisom, and Jockstraps: sexually exploitative athletic hazing and title IX in the public school locker room. *West N Engl Law Rev.* 2013;35(35):377.
21. Ferrington D. Understanding and preventing bullying. *Crime Justice.* 1993;17:381–458.
22. Stirling AE. Definition and constituents of maltreatment in sport: establishing a conceptual framework for research practitioners. *Br J Sports Med.* 2009;43(14):1091–9.
23. Hospital BCs. Bullying prevention in sports 2016 [June 28th, 2018]. Available from: <http://www.beaumont.edu/childrens/specialties/bullying-support-for-children/>.
24. Brackenridge C, Rivers I, Gough B, Llewellyn K. Driving down participation: homophobic bullying as a deterrent to doing sport. In: Aitchison CC, editor. *Sport and gender identities masculinities, femininities and sexualities.* New York: Routledge; 2007. p. 122–39.
25. Fisher LA, Dzikus L. Bullying in sport and performance psychology. *Sport Psychology.* 2017.
26. Stirling AE, Kerr GA. Initiating and sustaining emotional abuse in the coach–athlete relationship: an ecological transactional model of vulnerability. *J Aggress Maltreat Trauma.* 2014;23(2):116–35.
27. Steinfeldt JA, Vaughan EL, LaFollette JR, Steinfeldt MC. Bullying among adolescent football players: role of masculinity and moral atmosphere. *Psychol Men Masculinity.* 2012;13(4):340–53.
28. Gennep Av. *The rites of passage.* Chicago: University of Chicago Press; 1960. 198 p.
29. Jones RL. The historical significance of sacrificial ritual: understanding violence in the modern black fraternity pledge process. *West J Black Stud.* 2000;24:112–24.
30. Weisfeld GE. An ethological view of human adolescence. *J Nerv Ment Dis.* 1979;167(1):38–55.
31. Nuwer H. *Broken pledges : the deadly rite of hazing.* Atlanta: Longstreet Press; 1990. 340 p.
32. Rees CR. Bullying and hazing/initiation in schools: how sports and physical education can be part of the problem and part of the solution. *N Z Phys Educ.* 2010;43(1):24–7.
33. Curry TJ. Reply to “a conversation (Re)analysis of fraternal bonding in the locker room”. *Sociol Sport J.* 2001;18(3):339–44.
34. Donaldson M. What is hegemonic masculinity? *Theory Soc.* 1993;22(5):643–57.
35. Hoover NCP, Norman J. Initiation rites in American High Schools: a national survey. *Alfred University.* 2000:26.
36. Razzi V. Hazing horror: Lawsuits allege female athletes at Catholic university forced to simulate sex acts. *The College Fix* 2015.
37. Gutowski C, St. Clair S. Player charged in Wheaton College hazing ‘frustrated’ and ‘disappointed,’ attorney says. *The Chicago Tribune* 2017.
38. Snyder S. St. Joe’s suspends softball team play amid hazing investigation. *The Inquirer* 2015.
39. Gutowski C, St. Clair S. 5 Wheaton College football players face felony charges in hazing incident. *The Chicago Tribune* 2017.
40. Freetly AJH, Kane EW. Men’s and women’s perceptions of non-consensual sexual intercourse. *Sex Roles.* 1995;33(11–12):785–802.
41. Taylor AN. Sometimes it’s necessary to blame the victim. *The Chronicle of Higher Education.* 2011.
42. Hoover N. National survey: initiation rites and athletics for NCAA sports teams 1999. Available from: http://www.alfred.edu/sports_hazing/docs/hazing.pdf.
43. Parrot A, Cummings N, Marchell TC, Hofher J. A rape awareness and prevention model for male athletes. *J Am Coll Heal.* 1994;42(4):179–84.
44. Hartill M. Sport and the sexually abused male child. *Sport Educ Soc.* 2005;10:287–304.
45. Gershel JC, Katz-Sidlow RJ, Small E, Zandieh S. Hazing of suburban middle school and high school athletes. *J Adolesc Health.* 2003;32(5):333–5.
46. Kirby SL, Demers G, Parent S. Vulnerability/prevention: considering the needs of disabled and gay athletes in the context of sexual harassment and abuse. *Int J Sport Exerc Psychol.* 2008;6(4):407–26.

47. Gladden RM, Vivolo-Kantor AM, Hamburger ME, Lumpkin CD. Bullying surveillance among youths: uniform definitions for public health and recommended data elements, Version 1.0. Atlanta: National Center for Injury Prevention and Control CfDCAp, and U.S. Department of Education; 2014.
48. Stompoutbullying.org. About bullying and cyberbullying 2016 [June 29th, 2018]. Available from: <http://www.stompoutbullying.org/>.
49. Evans B, Adler A, Macdonald D, Cote J. Bullying victimization and perpetration among adolescent sport teammates. *Pediatr Exerc Sci*. 2016;28(2):296–303.
50. Volk AA, Lagzdins L. Bullying and victimization among adolescent girl athletes. *Athlet Insight*. 2009;11(1):13–31.
51. Boone EM, Leadbeater BJ. Game on: diminishing risks for depressive symptoms in early adolescence through positive involvement in team sports. *J Res Adolescence*. 2006;16(1):79–90.
52. Dunn AL, Trivedi MH, Kampert JB, Clark CG, Chambliss HO. Exercise treatment for depression: efficacy and dose response. *Am J Prev Med*. 2005;28(1):1–8.
53. Eime RM, Young JA, Harvey JT, Charity MJ, Payne WR. A systematic review of the psychological and social benefits of participation in sport for children and adolescents: informing development of a conceptual model of health through sport. *Int J Behav Nutr Phy*. 2013;10:98.
54. Pedersen S, Seidman E. Team sports achievement and self-esteem development among urban adolescent girls. *Psychol Women Q*. 2004;28(4):412–22.
55. Sampasa-Kanyinga H. Co-occurring cyberbullying and school bullying victimization and associations with mental health problems among Canadian middle and high school students. *Violence Vict*. 2017;32(4):671–87.
56. Schneider SK, O'Donnell L, Stueve A, Coulter RW. Cyberbullying, school bullying, and psychological distress: a regional census of high school students. *Am J Public Health*. 2012;102(1):171–7.
57. Smith PK, Mahdavi J, Carvalho M, Fisher S, Russell S, Tippett N. Cyberbullying: its nature and impact in secondary school pupils. *J Child Psychol Psychiatry*. 2008;49(4):376–85.
58. Robers S, Kemp J, Truman J. Indicators of school crime and safety: 2012. Washington, DC; 2013.
59. stopbullying.gov. U.S. Department of Health and Human Services; [Available from: <https://www.stopbullying.gov/>].
60. Matthews D. Child abuse sourcebook. Detroit: Omnigraphics; 2004.
61. Signs of hazing and what to do: College of Saint Benedict/Saint John's University; 2018 [Available from: <https://www.csbsju.edu/hazing/signs-of-hazing-and-what-to-do>].
62. Gerard HB, Mathewson GC. The effects of severity of initiation on liking for a group: a replication. *J Exp Soc Psychol*. 1966;2:278–87.
63. Aronson E, Mills J. The effects of severity of initiation on liking for a group. *J Abnorm Soc Psychol*. 1959;59:177–81.
64. Hillberg T, Hamilton-Giachritsis C, Dixon L. Review of meta-analyses on the association between child sexual abuse and adult mental health difficulties: a systematic approach. *Trauma Violence Abuse*. 2011;12(1):38–49.
65. Rao AL. Athletic suicide - separating fact from fiction and navigating the challenging road ahead. *Curr Sports Med Rep*. 2018;17(3):83–4.
66. Rao AL, Asif IM, Drezner JA, Toresdahl BG, Harmon KG. Suicide in National Collegiate Athletic Association (NCAA) athletes: a 9-year analysis of the NCAA resolutions database. *Sports Health*. 2015;7(5):452–7.
67. Rao AL, Hong ES. Understanding depression and suicide in college athletes: emerging concepts and future directions. *Br J Sports Med*. 2016;50(3):136–7.
68. Newman BM, Lohman BJ, Newman PR. Peer group membership and a sense of belonging: their relationship to adolescent behavior problems. *Adolescence*. 2007;42(166):241–63.
69. Zierler S, Feingold L, Laufer D, et al. Adult survivors of childhood sexual abuse and subsequent risk of HIV infection. *Am J Public Health*. 1991;81:572–5.

70. Brackenridge C. "He owned me basically..." Women's experience of sexual abuse in sport. *Int Rev Sociol Sport*. 1997;32:115–30.
71. Brackenridge C. *Spoilsports : understanding and preventing sexual exploitation in sport*. London/New York: Routledge; 2001. xvii, 284 p.
72. Brackenridge C, Kirby S. Playing safe: assessing the risk of sexual abuse to elite child athletes. *Int Rev Sociol Sport*. 1997;32:407–18.
73. Kearney-Cooke A, Ackard D. The effects of sexual abuse on body image, self-image, and sexual activity of women. *J Gend Specif Med*. 2000;3(6):54–60.
74. Lipkins S. Preventing hazing: how parents, teachers, and coaches can stop the violence: Jossey-Bass; August 25th, 2006.
75. Banyard V, Plante E, Moynihan M. Bystander education: bringing a broader community perspective to sexual violence prevention. *J Community Psychol*. 2004;32(1):61–79.
76. Darley J, Latané B. Bystander intervention in emergencies: diffusion of responsibility. *J Pers Soc Psychol*. 1968;8(4):377–83.
77. Lew KM. Emergency action plans 2018 [Available from: <https://www.nays.org/resources/more/emergency-action-plans/>].
78. Medtronic. Emergency Action Planning Program - E-Learning Module 2015 [Available from: <http://www.anyonecansavealife.org/e-learning-module/index.htm>].
79. Christensen H, Batterham PJ, Mackinnon AJ, Anstey KJ, Wen W, Sachdev PS. Education, atrophy, and cognitive change in an epidemiological sample in early old age. *Am J Geriatr Psychiatry*. 2009;17(3):218–26.
80. States with Anti-Hazing Laws.
81. HazingPrevention.org. Hazing Law - Interactive State Map 2018 [Available from: <https://hazingprevention.org/home/hazing/statelaws/>].
82. Green L. School hazing investigations, reports yield prevention guidelines for schools 2017 [updated September 06, 2017. Available from: <https://www.nfhs.org/articles/school-hazing-investigations-reports-yield-prevention-guidelines-for-schools/>].
83. Associations NFoSHS. Sexual harassment and hazing: your actions make a difference!
84. Janssen I, Leblanc A. Systematic review of the health benefits of physical activity and fitness in school-aged children and youth. *Int J Behav Nutr Phys Act*. 2010;7:40.