

SHARPEN[®] ATHLETE

A Digital Triage & Therapeutics Platform
for Student Athlete Mental Health



Student Athlete Program Guide

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WHY SHARPEN[®]

ATHLETE

In response to the mental health challenges facing young people, the U.S. Department of Education released an extensive resource outlining serious challenges facing school mental health support systems and corresponding recommendations (U.S. Department of Education, 2021), including: (i) Prioritizing wellness for each and every child, student, educator, and provider (ii) enhancing mental health literacy and reducing stigma and other barriers to access (iii) implementing a continuum of evidence-based prevention practices (iv) establishing an integrated framework of educational, social, emotional, and behavioral health support for all.



Sharpen meets all four of the mental and emotional wellness priorities outlined by the Department of Education and can be deployed through schools or via community service organizations. Through the unique peer resiliency model, we are able to engage adolescents deeply into conversations about mental health (Hussa-Farrell, 2023; Biber & Rothman, 2023).

The more than 75 peer-to-peer videos within the SMHL program include psychoeducational modules on topics such as:

1

Humanistic mental health literacy

2

Stigma reduction

3

Suicide prevention

4

Disordered eating prevention

5

Strategies for building resilience and social-emotional skills



Based on nearly 20 years of leading mental health literacy training in schools, the content assembled into SMHL has been created utilizing the practices outlined by recent research (Semchuck et al, 2023) requiring assessment, deep community listening and robust engagement from stakeholders (Gruber et al, 2023).

Our History

Resiliency Technologies, Inc. developed the Sharpen technology platform in 2014 after nearly 20 years leading live mental health education / prevention programs in K12 schools. The Sharpen Athlete program, which is offered through the Sharpen platform, connects mental wellness training for students, educators, staff, and caregivers alike.

Our programs are designed intentionally to humanize mental health through peer stories of resilience and strength. Regardless of which audience is utilizing the Sharpen platform, we combine reading, video, reflections, and activities with multisensory integration, so everyone can learn and grow. Students can log in to the app and complete the activities at their leisure, using the Sharpen app.

Sharpen's programming is available for all audiences, including educators, staff, students, and caregivers, because all tiers of support around our students need to be integrated with a common language and strong foundation for wellness-informed communities.

ABOUT US

Our Unique Approach

We understand that as we take on the challenge of integrating mental health screening and training into the daily lives of students, we need to provide the support necessary to make it successful. We created the Sharpen system specifically to bring all of the local mental health resources, crisis lines, organizations and support material directly to the student's fingertips. A customized version of the Sharpen Athlete program for your campus, can be further integrated to ensure every student connects with student counseling or local providers in the area.

We provide everything you need to easily integrate in a way that meets the needs of your schedule and enables you to continually reinforce it through activities both inside and outside the Sharpen app.

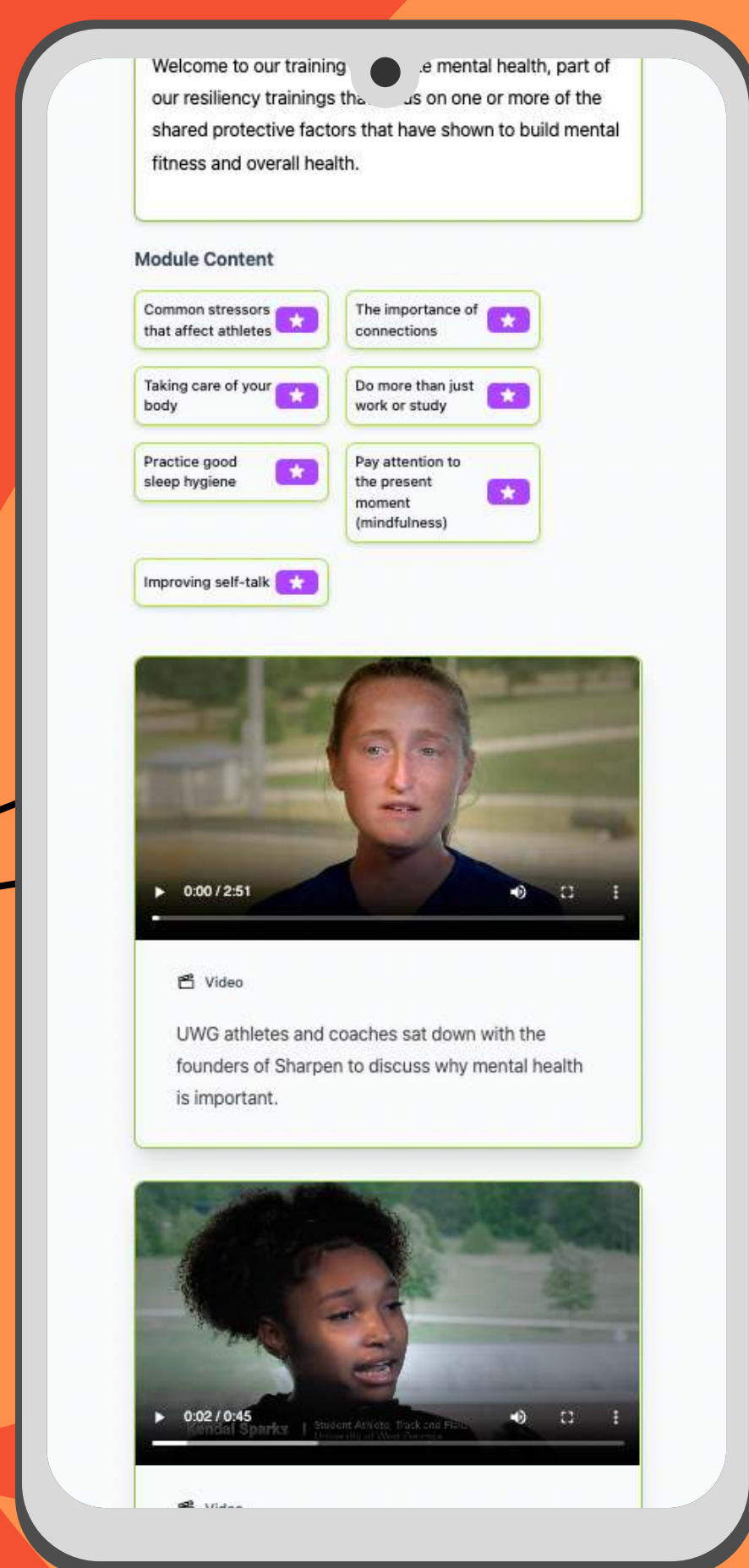
What makes Sharpen unique is our foundation in public health science and adherence to primary prevention (Tier 1 / universal support). Each module in Sharpen Athlete serves as a "toolkit" for improving mental and emotional wellness. By making the mental wellness toolkit user-friendly, applicable to teens and young adults through peer stories of resilience and strength, and through rigorous interviews with neuroscientists, clinicians and researchers who make learning about mental health easy to understand and apply, we provide a common, nonjudgemental language for communities to engage in productive conversations about mental health and understand how to make healthy choices.

[Learn more here.](#)



SHARPEN MENTAL HEALTH LITERACY

98% of college student athletes highly recommend the Sharpen program for others, and reported increased engagement with treatment along with improved understanding and passion for supporting a teammate who is struggling.



The Four Pillars of Mental Health Literacy

Comprehensive mental health literacy programs include four core concepts:

1. Understanding how to foster and maintain positive mental health
2. Understanding mental health disorders and their treatments
3. Understanding how to seek help effectively
4. Understanding stigma and stigma reduction strategies

Sharpen goes further

Enlisting various stakeholders to help with mental health stigma and suicide prevention, including school staff, may promote social interest, or feelings of belongingness and care for the school social system (Whisenhunt et al., 2022). The Sharpen program provides vetted, best-practice asynchronous content that can be adjusted with local, peer focused stories and topic areas that are uncovered via strategic listening sessions.

Trauma-informed

The 20 years of research informing the Sharpen program has impressed upon the Sharpen leadership team that mental health literacy training must be presented in a trauma-informed manner. Our program incorporates training on adverse childhood experiences, suicide prevention and strength-based techniques to help a friend or classmate who may be struggling.

Peer resiliency focus

Our program has shown to be an effective way to train peer facilitators (for example college student mentors) who then lead protective, strength-based resiliency trainings for younger students (Biber & Rothman, 2022). This model has also been implemented through high school students learning the material prior to mentoring middle school students as part of after-school resiliency programs.

SAMPLE SHARPEN ATHLETE MODULES

Athlete Health

100% ●

Optimizing Energy for Athletes*

In this module you will learn how to optimiz...

7% ●

Tips from Limestone athletes

In this module you will learn how to optimiz...

9% ●

Refuel, Refuel, Refuel

After exertion, restore your energy

100% ●

Female Athlete Triad Syndrome*

In this module you will learn what the femal...

16% ●


Exercise Addiction*


In this module you will learn about exercise ...


●


Sleep and Eating Disorders*


In this module you will learn about improv...


Home


Connect


Discover


Me


More

Sharpen Athlete contains an array of modules that cover topics ranging from mental health literacy, stress management, healthy coping skills to evidence-based dietetics models. We work with your leadership team to determine the appropriate blend of topics. Examples include:

Optimizing Energy for Athletes features national dietetics experts and specific discussions around healthy food choices for athletes.

In the **Tips from Limestone Athletes** module, 4 peer focused videos reflect on their experience with eating on the road and includes tips for shopping wise and staying healthy.

In the **Refuel, Refuel, Refuel** module, 2 expert videos outline refueling and the importance of maintaining electrolyte balance.

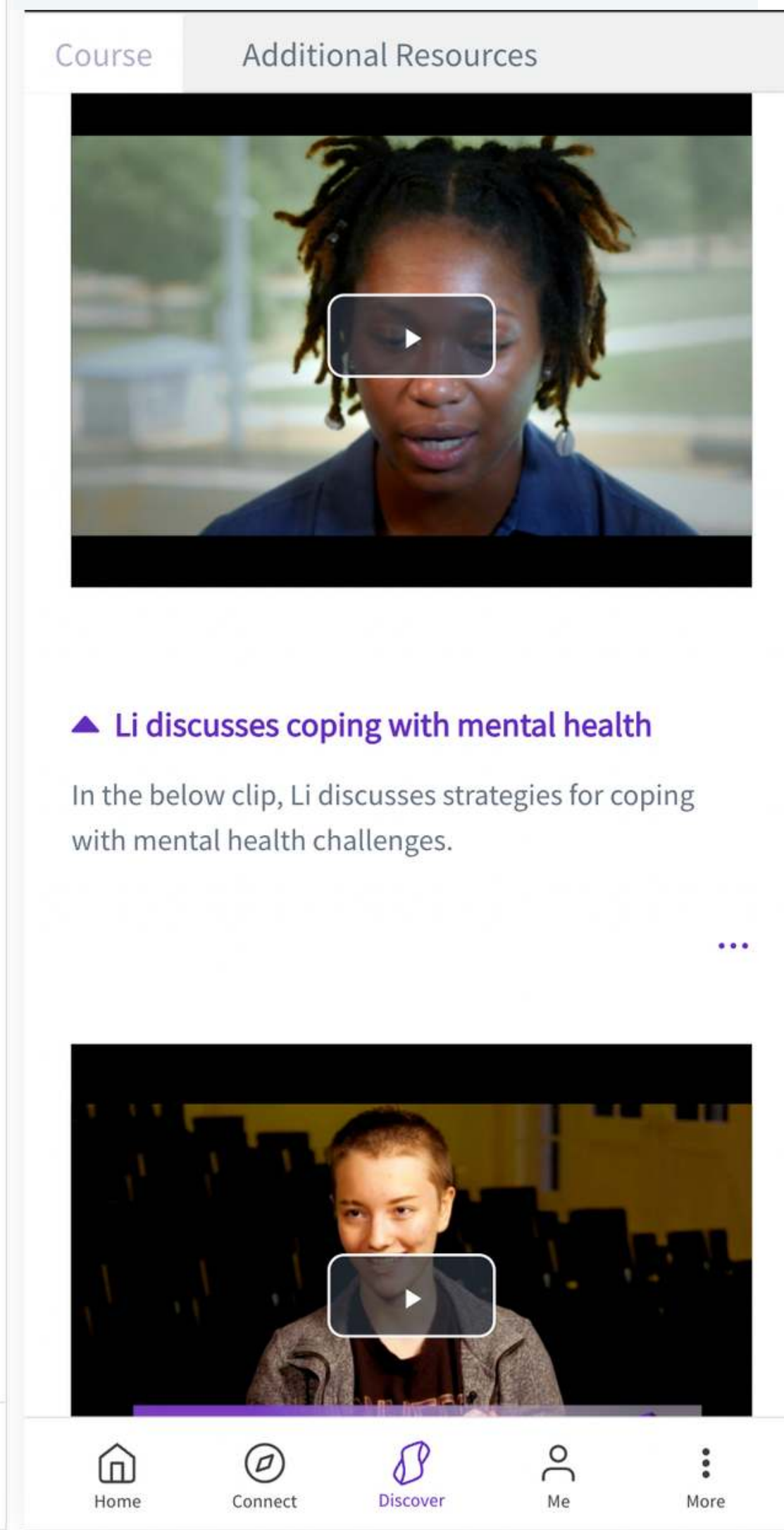
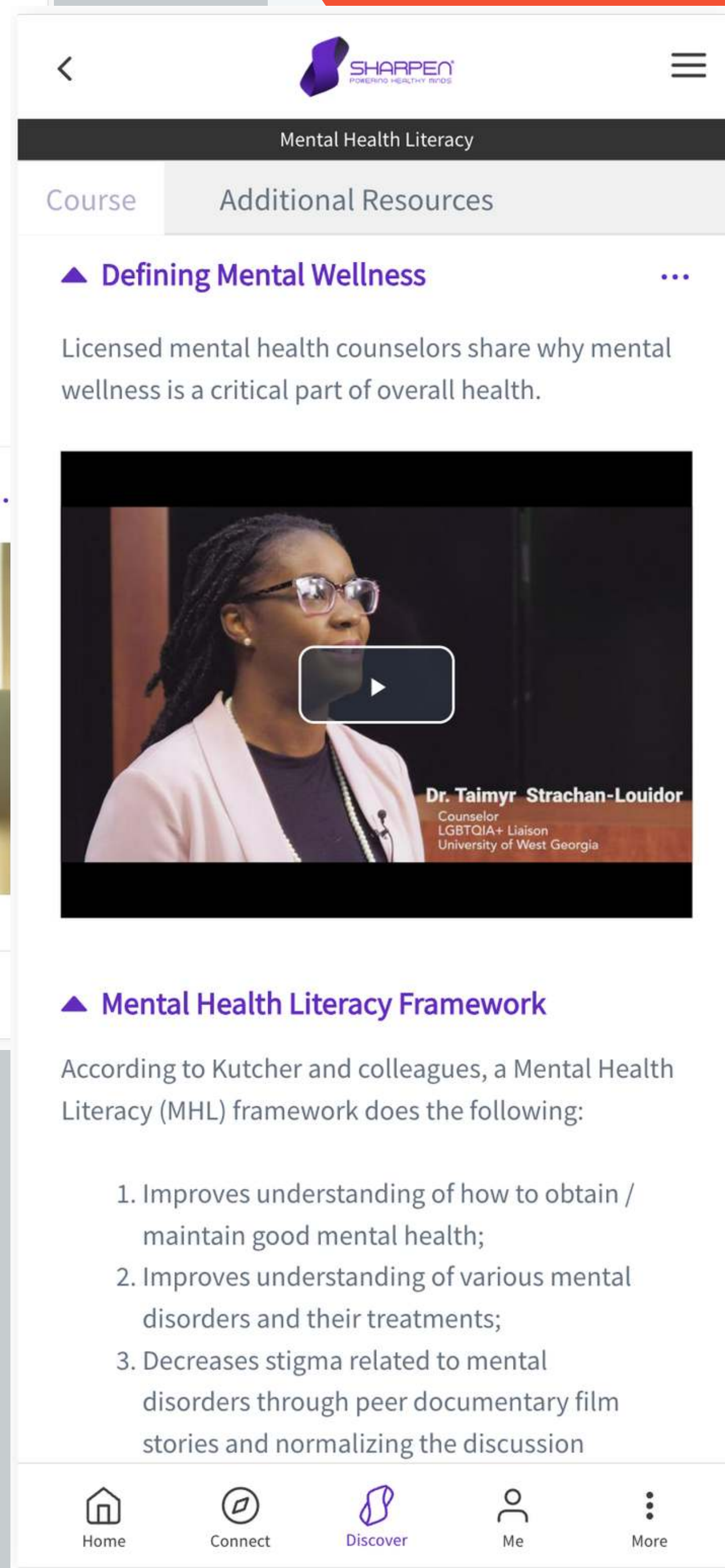
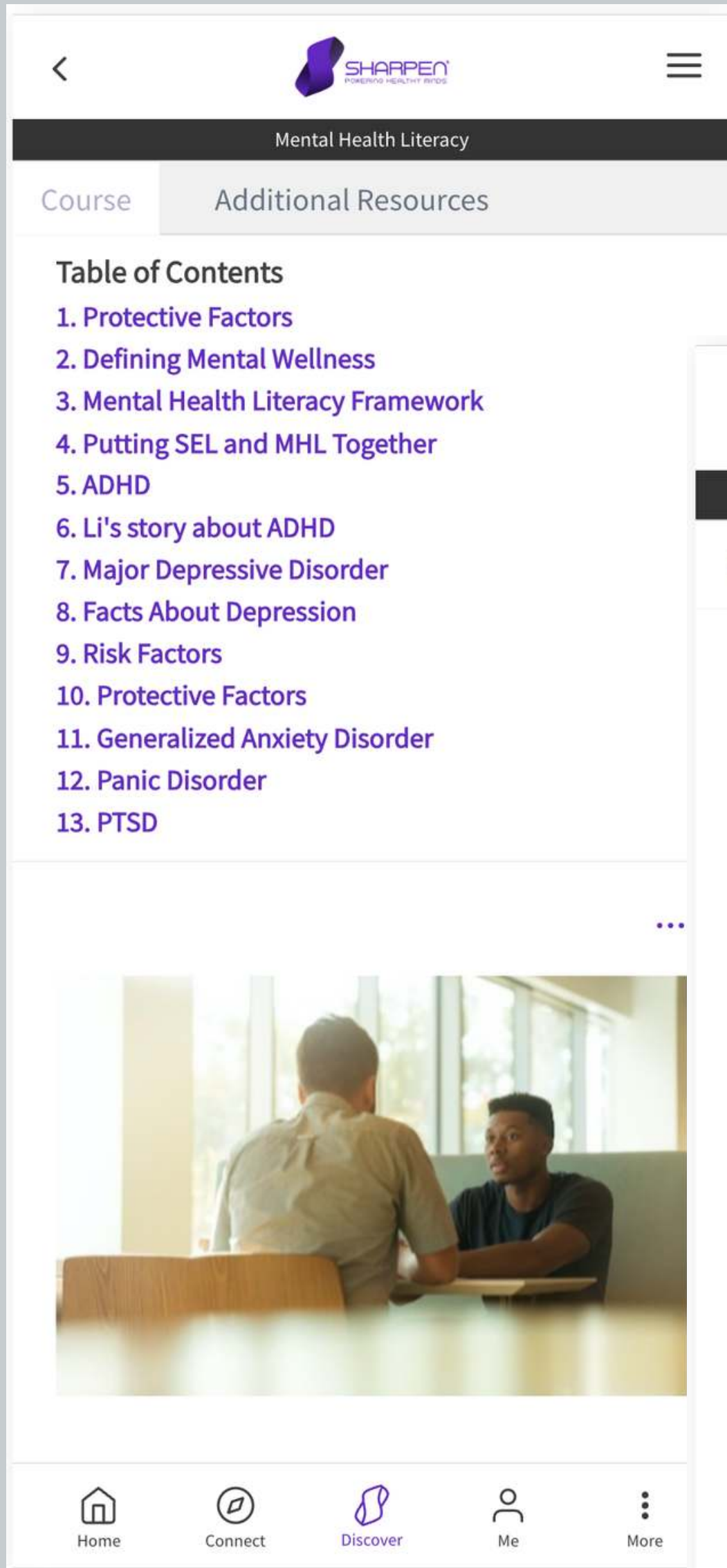
In the **How to Help Someone** module, 3 expert videos discuss tips for starting a conversation about mental health, sample phrases that can help, and ways to build protection for mental health.

In the **Mindfulness Based Treatments** module, 5 expert videos discuss why starting the mindfulness exercises now rather than later is preferable for treatment, the types of mindfulness techniques that a counselor teaches their patients, and how the timeframe for treatment can look different for everyone.

SAMPLE MODULE

Each module within the Sharpen system contains:

1. Peer videos highlighting stories of resilience and strength to humanize mental health and provide context (Hinshaw, 2023)
2. Connection to recent research and fact sheets
3. Resources for support and immediate help
4. Connection to local organizations and treatment



“If we can understand and empathize with mental illness and humanize it, that’s getting close to the magic bullet for reducing stigma.”

Stephen Hinshaw, PhD
Sharpen Scientific Advisor

SHARPEN[®] ATHLETE SUICIDE RISK AND TRIAGE PLATFORM

Sharpen[®] Athlete is a validated digital therapeutics platform designed to screen, support, and track the mental health of collegiate and youth athletes. Developed by Resiliency Technologies, Inc., it combines the CAT-MH[®] adaptive screenings (Gibbons et al., 2012) with evidence-based interventions to deliver a full continuum of care from early identification through clinical support and safety planning.



PROGRAM OUTCOMES

1,275 Student-Athletes Screened (3 Years)	9.9% Flagged for Elevated Risk	100% Received Same-Day Clinical Intervention	98% Platform Return Rate
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Over three years of implementation at a Division I university (2023-2025), 1,275 student-athletes completed mandatory CAT-MH[®] screenings followed by immediate interventions. Of those, 126 athletes (9.9%) were flagged for elevated suicide risk, and 100% received same-day clinical triage via real-time dashboard. By 2025, the fully integrated platform achieved a 98% return rate among 491 engaged athletes, averaging 7.2 visits and 104 actions per user (Davis et al., 2026).

WHY SHARPEN ATHLETE

- NCAA strongly encourages annual mental health screening for student athletes.
- Our combined integration with CAT-MH[®] produced 100% same-day clinical intervention for at-risk athletes, and is difficult to achieve through traditional workflows.
- Our joint model creates a replicable, scalable framework applicable across Division I, II, and III programs.

Davis, A., Biber, D., Stewart, B., Cosgrove, V., Minkel, J., Wulczyn, H., Farrell, T., Hussa Farrell, R. (2026). Integrated Clinical Triage Platform for Athlete Mental Health and Suicide Prevention: Real-Time Decision Support Enabling 100% Same-Day Intervention Across 1,275 Student-Athletes. Resiliency Technologies [white paper]. February 13, 2026, via <https://www.sharpenminds.com/post/integrated-clinical-triage-platform-for-athlete-mental-health-and-suicide-prevention>

Gibbons, R. D., Weiss, D. J., Pilkonis, P. A., Frank, E., Moore, T., Kim, J. B., & Kupfer, D. J. (2012). Development of a computerized adaptive test for depression. Archives of general psychiatry, 69(11), 1104–1112. <https://doi.org/10.1001/archgenpsychiatry.2012.14>



In response to empirically documented gaps in mental health literacy and stigma reduction across healthcare providers, educational leadership, and youth-parent dyads, Resiliency Technologies (RT) founder and CEO, Robyn Husa Farrell, initiated a systematic investigation and synthesis of evidence-based prevention science and stigma reduction methodologies. After working for four years in substance abuse and eating disorder treatment centers, Husa Farrell wanted to leverage established risk and protective factor frameworks incorporating suicide prevention¹, resiliency² and mental health literacy³ to bolster protection for vulnerable youth. She ultimately sought to improve eight primary protective factors for resilience that were inspired by the research of Neumark-Sztainer⁴ in 2006, Reupert⁵ in 2017 and Bhushan /Burke-Harris in 2020⁶ and to incorporate validated stigma reduction principles developed by Hinshaw and colleagues at University of California, Berkeley^{7,8}. Her work synthesized into a comprehensive psychoeducational intervention architecture incorporating 15 core evidence-based components optimized for enhancing protective mechanisms and mitigating stigma barriers.

This foundational framework was subsequently operationalized through Sharpen[®], an innovative digital implementation platform designed by the Resiliency Technologies team⁹. The platform's sophisticated infrastructure, grounded in social-ecological theory, enables precision delivery of prevention modules across multiple system levels and stakeholder interfaces - representing a significant methodological advancement in intervention dissemination science and digital therapeutic implementation.

Husa's initial deployment and systematic evaluation of Sharpen platform modules (2014-2024) demonstrated differential engagement patterns and stigma reduction outcomes across diverse demographic groups expanding across the social-ecological footprint. Sharpen modules have undergone rigorous validation through multiple studies encompassing medical students¹⁰, foster parents¹¹, college students¹², athletes¹³, children and adolescents, and is associated with multiple accreditation and regulatory bodies: (i) University of Washington's SMART Center validation for high school adolescent implementation; (ii) South Carolina Department of Social Services certification for parent education; (iii) integration into medical education curricula across four medical schools; (iv) professional training and parent / youth resiliency platform for five year New York City VNS Health Safe Pathway suicide prevention program, funded through NY Office of Mental Health; and (v) peer resiliency and mentoring training component for adolescents engaged in multiple youth serving organizations in GA, CA, CO and SC.

In 2024, after many years deploying the Sharpen consumer / prevention program, Resiliency Technologies determined that a digital therapeutic product that could integrate directly into electronic health records would bridge important divides in collaborative care. As such, the Sharpen DTX was created.

Research partnerships involving the Sharpen Athlete program have been led by inter-disciplinary research teams. A sampling of findings:

1. Title: Behavioral health screening for university student athletes

Investigators: Duke Biber PhD, Ashlee Davis, PhD, Bridgette Stewart, M. Ed
Conference: Presentation for the 2023 Society of Behavioral Medicine Annual Conference, Phoenix, AZ. April, 2023. Researchers presented on the use of the Heads Up Checkup mental health screening tool and Sharpen Athlete program to provide mental and behavioral health screening plus supportive resiliency programming to university athletes. The results of the screenings as well as best-practices for the protocol were presented at the 2023 Society of Behavioral Medicine Annual Meeting.

2. Title: Keep Your Head in the Game: The Effects of 8-Week Mindfulness Training on Adolescent Volleyball Athletes. Courtside Mindfulness

Investigators: Patrizi, J., Jones, A., Bishop, B., Stoner, AM., Fadel, NM., Bendyk, H.—American Psychiatric Conference: Association Annual Conference, San Francisco. Poster Presentation. May 2019. In 2018, working with researchers from Edward Via College of Osteopathic Medicine (VCOM), Sharpen trained staff and college facilitators led “Robyn Hussa Farrell’s 5 Minute Mindfulness” programs for adolescent athletes at Upward sports. The findings were presented at the 2019 American Psychiatric Association national conference in San Francisco. Athletes reported significantly more worry at baseline compared to the standard mean ($p=0.0364$). Somatic anxiety was significantly reduced at both the 4 week ($p=0.0089$) and 8 week ($p=0.0013$) time points compared to the standard mean. Athletes reported significantly higher levels of mindfulness at baseline ($p=0.0039$) compared to the standard mean. Adolescent athletes reported similar confidence to the standard mean for high school athletes ($p=1.878$), but were significantly less confident compared to elite athletes ($P < 0.001$). By the 8 week time point, athletes reported confidence levels statistically similar to elite athletes ($p=0.1115$)

3. Title: HCU and Sharpen: Early Identification and Mental Health Literacy to Support Mental Health Awareness, Prevention and Intervention for Youth.

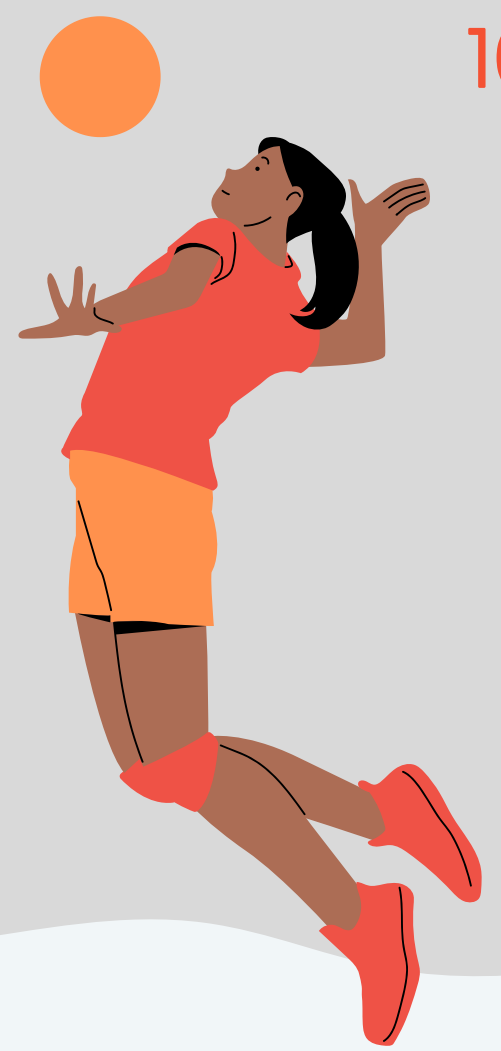
Investigators: Duke Biber, PhD; Ashlee Davis, PhD, Bridgette Stewart, M.Ed.
Description: Heads Up Checkup (HCU) which is a pediatric, self-report engaging children ages 9 and up into an innovative series of screenings. With HCU, Sharpen has impacted thousands of middle school, high school and college students. Collaborative interventions include:
Screenings for middle school aged children
Screenings for College Athletes
Publication link: [Journal of Sport Psychology in Action](#)

4. Title: Examining the relationship between a digital mental health literacy program and student athlete mental health

Investigators: Spence, E., Davis, A., Biber, D., Haedicke, A.
poster presentation February 22, 2024 at the 2024 Annual Meeting of the Southeast Chapter of the American College of Sports Medicine in Greenville, SC.
Elena Spence, presenter

5. Early work with ThinkEatPlay project in K12 schools

In 2013, Resiliency Technologies CEO, Robyn Hussa Farrell, assembled “Think Strong, Eat Well, Play Hard” advisory committee with over 25 researchers in disordered eating prevention and female athlete triad syndrome, to collaboratively create an evidence-based female athlete triad intervention for school coaches. As part of the initiative, the advisory committee built a survey for coaches. Data were obtained through an online survey of high school coaches ($n = 227$). Significant differences were found between male and female coaches in certain attitudes and communication behaviors related to eating and menstrual irregularity. School or district level policies may help reduce these differences and may help mitigate the health consequences for athletes related to possible differential prevention and detection of the comorbidities of the Female Athlete Triad. These training tools and protocols are delivered to college coaches and athletes through Sharpen. (Kroshus, E., Sherman, R.T., Thompson, R.A., Sossin, K., & Austin, S.B. (2014). Gender difference in high school coaches’ knowledge, attitudes and communication about the female athlete triad. *Eating Disorders*, 22, 193-208.)



1. Karydi, A., Davis, T., Husa-Farrell, R. The Spartanburg South Carolina suicide prevention task force was created and led by Robyn Husa Farrell for 4 years in collaboration with the Office of Suicide Prevention, led by Dr. Alex Karydi and Taylor Davis, Ed.S. who wrote the suicide prevention plan for the state of South Carolina and for SC schools through the Department of Education. This foundational research led to a 5-year deployment in New York in collaboration with the NY Office of Mental Health, currently being evaluated by Biber, Rios and colleagues.
2. Between 2017-2019 Sharpen was deployed to educators who participated in 3 day resiliency training including Adverse Childhood Experiences (ACEs) and primary prevention programs to build community resiliency, led by Dr. Jennifer Parker and the University of South Carolina Upstate Child Protection Training Center. RT's CEO served as the invited mindfulness / resiliency presenter on Day 3 of the Compassionate Schools / Resilient Schools summits between 2016-2019. The 5 Minute Mindfulness training for educators that is currently in the Sharpen service, was a 1.5 hour component of the 3rd day of the Compassionate Schools initiative. After each workshop, educators received access to Sharpen to explore more topics on childhood trauma and resilience, along with tools to increase their own self-care, mental health literacy and best practices for prevention mental health and substance use disorders in the school setting. (Parker, J., Olson, S. & Bunde, J. The Impact of Trauma-Based Training on Educators. *Journ Child Adol Trauma* 13, 217–227 (2020). <https://doi.org/10.1007/s40653-019-00261-5>.)
3. Every module in Sharpen's course library is created using the MHL framework and (1) improves understanding of how to obtain / maintain good mental health; (2) improves understanding of various mental disorders and their treatments; (3) decreases stigma related to mental disorders through peer documentary film stories; (4) increases connection to treatment and help-seeking (Kutcher, S., Wei, Y., Costa, S., Gusmão, R., Skokauskas, N., & Sourander, A. (2016). Enhancing mental health literacy in young people. *European Child and Adolescent Psychiatry*, 25(6), 567-569. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/27236662>)
4. Neumark-Sztainer, D. R., Wall, M. M., Haines, J. I., Story, M. T., Sherwood, N. E., & van den Berg, P. A. (2007). Shared risk and protective factors for overweight and disordered eating in adolescents. *American journal of preventive medicine*, 33(5), 359–369. <https://doi.org/10.1016/j.amepre.2007.07.031>
5. Reupert A. A socio-ecological framework for mental health and well-being. *Adv Ment Health*. 2017;15(2):105–7.
6. Bhushan D, Kotz K, McCall J, Wirtz S, Gilgoff R, Dube SR, Powers C, Olson-Morgan J, Galeste M, Patterson K, Harris L, Mills A, Bethell C, Burke Harris N, Office of the California Surgeon General. Roadmap for Resilience: The California Surgeon General's Report on Adverse Childhood Experiences, Toxic Stress, and Health. Office of the California Surgeon General, 2020. DOI: 10.48019/PEAM8812.
7. Hinshaw, S., Porter, P., & Ahmad, S. (2024). Developmental psychopathology turns 50: Applying core principles to longitudinal investigation of ADHD in girls and efforts to reduce stigma and discrimination. *Development and psychopathology*, 1–15. Advance online publication. <https://doi.org/10.1017/S0954579424000981>
8. Martinez, A. G., & Hinshaw, S. P. (2016). Mental health stigma: Theory, developmental issues, and research priorities. In D. Cicchetti (Ed.), *Developmental psychopathology: Risk, resilience, and intervention* (3rd ed., pp. 997–1039). John Wiley & Sons, Inc. <https://doi.org/10.1002/9781119125556.devpsy420>
9. Husa Farrell, R., Farrell, T., Painter, B. (2025). Since 2013 Robyn Husa Farrell has worked with her co-founders, Tim Farrell and Brian Painter (software engineer) to architect the Sharpen system. It has evolved from a learning management system (2014), to an app prototype (2015-18), to a fully working system in 2019 and in 2024 has evolved to encompass integration into electronic health records (EHR). The team met doing a Bloomberg Philanthropies-funded public art / public safety project called Seeing Spartanburg in a New Light. Husa and Farrell co-directed the award-winning Video Village installation for over 2 years. [See the amazing journey here \(4 min clip\).](#)
10. Berreta, K., Nguyen, C., Stoner, A. M., Ridgeway, L., Wilson, A., Fadel, N., & Biber, D. (2023). A RE-AIM Analysis of a Mental Health App for Undergraduate and Medical Students during the COVID-19 Pandemic: A Retrospective Cross-Sectional Study. *International Journal of Environmental Research and Public Health*, 20(13), 6266. <https://doi.org/10.3390/ijerph20136266>
11. Biber, D. The Impact of an mHealth Mental Health Literacy Training for Foster Parents Prepared for Trends in Psychology. *Trends in Psychol.* (2023). <https://doi.org/10.1007/s43076-023-00348-x>
12. Biber, D. and Rothman, R. (2024), "Mental health literacy training for college female peer mentors: a pilot study", *Higher Education, Skills and Work-Based Learning*, Vol. 14 No. 1, pp. 181-191. <https://doi.org/10.1108/HESWBL-06-2023-0148>
13. Biber, D. D., Davis, A., & Stewart, B. (2023). Heads Up! Using a Mobile Platform for Division II Student-Athlete Mental Health Screening. *Journal of Sport Psychology in Action*, 15(4), 263–273. <https://doi.org/10.1080/21520704.2023.2282191>
14. Davis, A., Biber, D., Stewart, B., Cosgrove, V., Minkel, J., Wulczyn, H., Farrell, T., Husa Farrell, R. (2026). Integrated Clinical Triage Platform for Athlete Mental Health and Suicide Prevention: Real-Time Decision Support Enabling 100% Same-Day Intervention Across 1,275 Student-Athletes. *Resiliency Technologies [white paper]*. February 13, 2026, via <https://www.sharpenminds.com/post/integrated-clinical-triage-platform-for-athlete-mental-health-and-suicide-prevention>
15. Gibbons, R. D., Weiss, D. J., Pilkonis, P. A., Frank, E., Moore, T., Kim, J. B., & Kupfer, D. J. (2012). Development of a computerized adaptive test for depression. *Archives of general psychiatry*, 69(11), 1104–1112. <https://doi.org/10.1001/archgenpsychiatry.2012.14>

