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Volume 5: Supporting the Athlete in Society Issue 2: Hazing in Sport

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Keeping Athletes Safe

Hazing in sport has been an ongoing issue, from the youth to elite levels, for many years. As Dr. John Heil says, “**any and all athletes** are vulnerable to hazing” (Heil, 2016), and it can be a **traumatizing experience** for those involved. Many athletes refer to hazing as “**team-building**” and “**tradition**”, while studies have shown that hazing can decrease team cohesion rather than improve it (Van Raalte et al., 2007). **Professionals, parents, coaches, and athletes** all should be informed about how to recognize and prevent hazing, and how to reduce hazing in sport.

According to Waldron (n.d.), hazing can diminish an athlete’s confidence by promoting **self-doubt, depression, low self-esteem**, and in the worst-case scenario, **suicidal thoughts**.

Some athletes think that hazing creates a group identity.

Fact: Research shows that **group identity** is established when the athlete joins the team (Van Raalte et al., 2007). Hazing does not build attraction to the group.

Some athletes claim that hazing is a tradition that builds character (Smith & Stellino, 2007).

Fact: New players may feel pressured into hazing if they want to be accepted by the older players on the team. This may be driven by a “**sport think**” phenomenon cultivated by veteran players, producing fear and persuasion. Once the new players become veterans, they often maintain the perspective of valuing hazing and create the **cycle of hazing**.



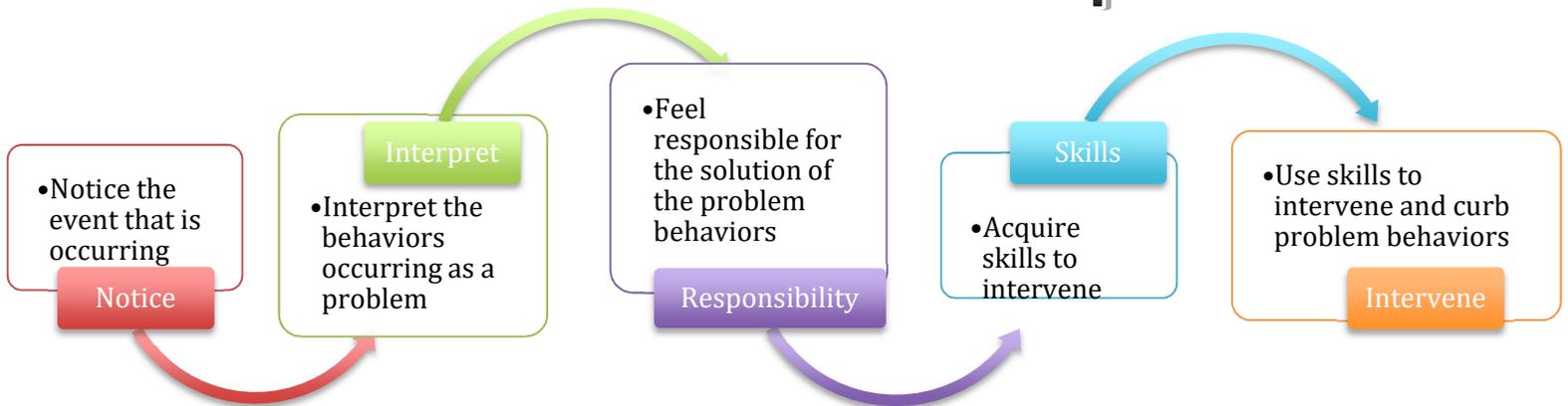
The Cycle of Hazing Violence, adapted from Kirby & Wintrup (2002)

Why Does Hazing Happen?

When new athletes are introduced to a team, promoting a **positive and constructive environment** is key to a fluid transition. When this outcome is not achieved, **harsh exclusion** and **hazing** may take place. Given the inherent need for **belonging** and acceptance by the “in-group,” athletes may be vulnerable to hazing (Maslow, 1971). Many may succumb to the hazing ‘sport think’ phenomenon and overlook potential consequences and risks. To justify these hazing behaviors to themselves, individuals frame them in a positive way through **displaced responsibility, attribution of blame, and diffusion of responsibility** (Heil, 2016).



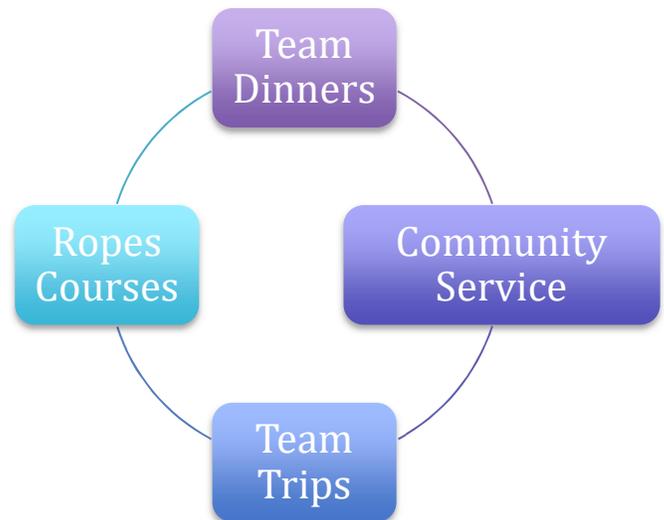
Hamilton's 5-Step Process



Focus on positive initiation into team culture:



Positive team-building activities facilitate team cohesion:



Where can I learn more hazing prevention strategies?

Hamilton, R., Scott, D., LaChapelle, D., & O'Sullivan L. (2016). Applying social cognitive theory to predict hazing perpetration in university athletics. *Journal of Sport Behavior*, 39(3), 255-277.

Heil, J. (2016). Sport advocacy; Challenge, controversy, ethics and action. *Sport, Exercise, and Performance Psychology*, 5(4), 281-295.

Kirby, S. L., & Wintrup, G. (2002). Running the gauntlet: An examination of initiation/hazing and sexual abuse in sport. *Journal of Sexual Aggression*, 8(2), 29-68.

Maslow, A. M. (1971). *The Farther reaches of human nature*. New York: Viking Press.

Smith, H., & Stellino, M.B. (2007). Cognitive dissonance in athletic hazing: The roles of commitment and athletic identity. *Journal of Sport & Exercise Psychology*, 29, 169-170.

Van Raalte, J.L. Cornelius, A.E., Linder, D.E., & Brewer. B.W. (2007). The relationship between hazing and team cohesion. *Journal of Sport Behavior*, 30(4), 491-507.

Waldron, J. Reducing hazing in sport teams, <http://www.appliedsportpsych.org/resources/resources-for-coaches/reducing-hazing-in-sport-teams/>.

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