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Mental Health Challenges and Coping Strategies among Elite Runners in Kenya

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Abstract: *This study examined coping strategies used by elite runners in the management of psychological demands associated with training and competition in selected athletics training hubs in Kenya. A cross-sectional survey was conducted in five hubs: Iten, Kapsabet, Eldoret, Nyahururu, and Ngong. The target population comprised elite middle- and long-distance runners. The study reported a sample of 367 runners selected using purposive, proportionate stratified, and simple random sampling techniques. Data was collected using a structured questionnaire on coping strategies, help seeking barriers, and perceived usefulness of psychological support. Biopsychosocial model guided interpretation of the interaction between physical, psychological, and social factors in athlete well-being. Adequate sleep (266; 85.0%), maintaining a healthy diet (260; 83.1%) were the most endorsed, followed by listening to motivational talks (256; 81.8%), avoiding situations that trigger negative emotions (254; 81.2%), and engaging in hobbies outside running (253; 80.8%). Writing down thoughts and feelings (144; 46.0%) and seeking professional help (170: 54.3%) were the least endorsed strategies. The findings suggest that runners use a combination of behavioral, personal, and interpersonal coping practices. The study recommends strengthening athlete support systems, providing mental health education and coach training, and improving access to qualified psychological services.*

Keywords: *Elite runners; Mental health; Coping strategies; Help-seeking; Psychological support*

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1. Introduction

Mental health is integral to overall well-being and performance in elite sports. According to World Health Organization [WHO] (2022), mental health is "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community." Elite runners in Kenya are celebrated globally for their dominance in middle and long-distance events. However, little is known about how they cope with mental health challenges experienced at such level of competition. The pressure to maintain performance, the isolation in training camps, and the weight of national expectations can lead to stress, anxiety, and depression among athletes (Readon et al., 2019).

Although sport can promote well-being, elite athletes may experience mental health difficulties while continuing to perform at a high level (Lundqvist & Andersson, 2021). Understanding Kenyan runners' experience in management of psychological pressures is therefore important in supporting their well-being and sustaining their sporting careers. Despite Kenya's international success in athletics, there limited evidence on how elite Kenyan runners cope with their mental health challenges. Training demands, fear of losing form, financial responsibilities, separation from family and friends, and uncertainty about sporting careers may place considerable pressure on elite runners (Kirkland et al., 2025).

Public disclosures by athletes have also drawn attention to the psychological challenges that exist behind successful sporting performances. More evidence is needed on the strategies Kenyan runners use, the barriers they encounter when seeking help, and their perceptions on professional psychological support. This study therefore examined coping strategies used by elite Kenyan runners to manage mental health challenges, alongside barriers to help-seeking and their perceptions of psychological support. The intention is to contribute evidence that can inform more responsive mental health support in athletics.

1.1 Statement of the Problem

Mental health symptoms among elite runners have been recognized as important determinants of welfare, recovery, training adherence and long-term sport participation (Ekelund et al., 2025). Cosh et al. (2024) noted that disclosure and help-seeking are often limited by stigma, confidentiality concerns, fear of deselection and limited mental health literacy. The IOC consensus statement released in 2026 calls for all actors in the sports industry to restructure the mental health support approaches and encourage shared responsibility (Reardon et al., 2026). Kenyan elite runners train at high-performance camps which increase the risks of mental health issues due to isolation, performance demands, family expectations and competition within camp. Despite the exposure to these conditions, confidential mental health support, routine screening and referral mechanisms remain limited or inconsistently available. The study sought to generate the evidence on coping mechanisms adopted by athletes and provide a system guided approach on athlete support mechanisms.

1.2 Significance of the Study

The study provides information about the coping strategies reported by elite Kenyan runners. The findings may help coaches, sports psychologists, camp managers, and other stakeholders better understand athletes' support needs and develop appropriate feedback mechanisms.

The study has demonstrated the application of the biopsychosocial model to the Kenyan athletics context. It has shown the relationship between physical factors, such as injury and training fatigue; psychological factors, including anxiety and self-esteem; and social factors, such as family expectations, relationships, and social isolation, that may shape athletes' mental health and coping experiences.

The findings may inform the Ministry responsible for Sports, Athletics Kenya, and athlete welfare organizations as they develop mental health initiatives. Possible measures include improving access to counselling, providing mental health education in training camps, and creating environments in which athletes can discuss concerns without fear of stigma or discrimination.

2. Literature Review

2.1 Empirical Review

Mental health is an important concern in elite sport. The 2026 International Olympic Committee consensus statement discusses a range of mental health concerns among athletes, including psychological distress, depression, anxiety, sleep disturbance, disordered eating, and substance-related problems (Reardon et al., 2026). Such evidence supports the need to treat mental health as an integral component of athlete welfare and to strengthen prevention, early identification, and support.

Studies have examined the strategies used by athletes to manage psychological pressure. Durand-Bush et al. (2023) discussed self-regulation and mental skills as components of sport psychology. These skills help athletes manage competitive demands, regulate emotions, and respond to setbacks during training and competitions. Coping is also influenced by sporting culture and attitudes towards help-seeking. Habeeb et al. (2022) noted that expectations of toughness may discourage athletes from discussing difficulties faced or seeking professional assistance. Studies on resilience and social support further suggests that coping is shaped by both personal skills and access to supportive relationships (Luo et al., 2025; Qiao & Chen, 2026).

In African sport, mental health support is influenced by social attitudes, cultural expectations, and the availability of specialist services. Malele and Noorbhai (2023) draws attention to mental health symptoms among semi-

professional cricket players in South Africa and highlighted on burnout and measures for life satisfaction.

In Kenya Kirkland et al. (2025) called for the need for local measures to manage mental health issues highlighting that most mechanisms are globally westernized. Such research findings reinforce the importance of examining elite runners' coping mechanisms.

2.2 Theoretical Framework

This study adopted the Biopsychosocial Model (Engel, 1977), which explains mental health as an interaction of biological, psychological, and social dimensions. Biologically, overtraining and injuries can trigger stress responses. The model is relevant to elite running because athletes' psychological well-being may be shaped by physical demands, individual experiences, and the environments in which they train and compete.

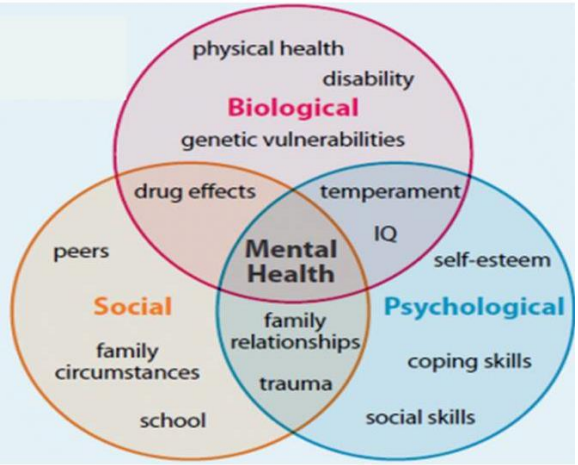


Figure 1 :*George Engel's (1977) Biopsychosocial Model*

The biological dimension includes injury, training fatigue, inadequate recovery, and the physiological demands of intensive training. The psychological dimension includes self-esteem, fear of failure, perfectionism, and emotional regulation. The social dimension includes family expectations, public scrutiny, relationships with coaches and fellow athletes, social isolation, and access to psychological support. These factors may increase psychological strain or provide resources that help athletes cope.

The model provides a basis for examining the interaction of physical, psychological, and social factors in athletes' mental health and coping experiences. It also recognizes the fact that runners facing similar competitive demands may experience and manage psychological difficulties differently.

2.3 Conceptual Framework

The conceptual framework links contributing factors, mental health challenges, coping strategies, and sports participation among elite Kenyan runners. Potential contributing factors include demanding training schedules, injury, performance expectations, financial pressures, and social isolation. Mental health concerns may include stress, anxiety, and depressive symptoms, depending on the measures used (Fig.2)

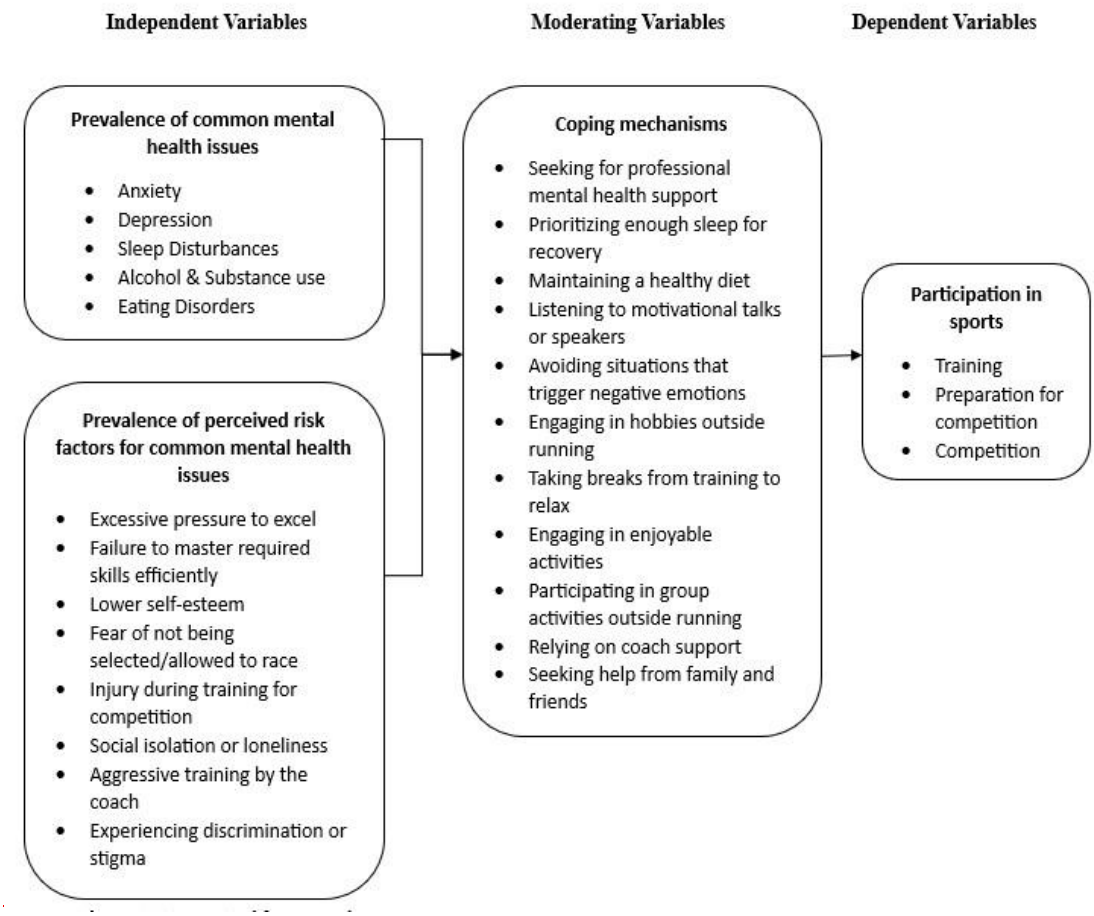


Figure 2: *Conceptual framework*

Coping strategies include behavioral and personal practices, social support, and professional counselling. The framework proposes that these strategies may influence how mental health challenges relate to participation in training and competition. Sports participation refers to continued engagement in training and competition despite psychological demands.

3. Methodology

3.1 Research Design

The study adopted a cross-sectional survey design, which enabled the collection of data from a large population at one point in time to examine coping mechanisms of mental health issues among elite runners.

The study was conducted in five major athletic training hubs; Iten - Elgeyo Marakwet County, Kapsabet – Nandi County, Eldoret - Uasin Gishu County, Nyahururu – Laikipia County, and Ngong – Kajiado County. The term hub referred to the broader geographical location which harbored training camps. The selected hubs are known for high-performance environment for the training of middle-and-long distance runners. The hubs also have a concentration of elite runners, have organized coaching and therefore they conduct group training withing the camps.

3.2 Target Population and Sampling Procedure

The target population comprised elite middle- and long-distance runners aged 18 and above years who train in the selected hubs. The total population of 7,913 runners was derived from all camps within the hubs; Iten hub - 18 camps 3000 runners, Kapsabet hub - 12 camps 2,800 runners, Eldoret hub - 8 camps 1,982 runners, Nyahururu hub - 3 camps 101 runners and Ngong hub – 1 camp 30 runners. Sample size was proportionately allocated to each hub using Adam's table for sample size determination for categorical data at 95% confidence level using the adjusted margin of error formular. A sample size of 367 was used;

Iten hub 139, Kapsabet hub 130, Eldoret hub 92, Nyahururu hub 5 and Ngong hub 1. Simple random sampling was used to identify runners from each of the training camps.

3.3 Data collection and Analysis

Data was collected using a structured questionnaire incorporating the IOC validated assessment tool - SMHAT-1 measuring mental health symptoms (e.g., PHQ-9 for depression, GAD-7 for anxiety) together with items on coping mechanism. The instrument's validity was ascertained using a local test-retest with 10 participants within a two weeks interval. The test-retest indicated strong stability with a Pearson's correlation of 0.82 ($p<0.001$).

The analysis was done on the fully completed data of 313 elite runners registering 85.3% response rate. Quantitative data were analyzed using descriptive statistics (percentages and frequencies) and correlation analysis to determine relationships between stress factors and coping strategies among elite runners.

3.4 Ethical Considerations

The researcher obtained Ethical approval from Masinde Muliro University of Science and Technology Institutional Scientific and Ethics Review Committee (MMUST-ISERC) (Appendix I). Further a research licence was received from National Commission for Science Technology & Innovation (NACOSTI) (Appendix II). The researcher worked with the local administration and camp managers to schedule meetings with elite runners. The participants filled a written consent which expounded on the voluntary nature of the exercise and the freedom to withdraw at will (Appendix III). To maintain confidentiality, the researcher allowed the participants to fill the forms privately without interference. The participants were requested not to fill their names on the forms which were coded instead. They were also allowed to skip any sensitive question. The researcher protected the collected data using a password where only authorized people would access it. The participants did not receive any monetary motivations but committed to disseminating the information from the study after analysis. All research assistants were taken through the ethical issues and adherence to safety of the participants.

4. Results and Discussion

The study comprised of 169 (54.0%) male 144 (46.0%) female respondents. The respondents with 18-24 years formed the largest group at 193 (61.7%) with 81 (25.9%) aged 25-29 years. 84 (26.8%) of the respondents had less than two years' experience while 175 (55.9%) two to four years of experience. This sample therefore engaged more early-career elite runners compared to experienced athletes.

The study established that elite runners in Kenya employ a diverse range of coping mechanisms to manage mental health challenges, with varying levels of adoption and effectiveness. Results show that 266 (85.0%) runners prioritized sleep, 260 (83.1%) preferred maintaining a healthy diet, 256 (81.8%) listened to motivational talks, 254 (81.2%) applied situation avoidance, 253 (80.8% engaged in hobbies, 252 (80.5%) took break from training to relax, 236 (75.4%) ~~s~~ought coach support, 227 (72.5%) were helped by family and friends, 225 (71.9%) practiced relaxation techniques, 218 (69.6%) applied positive self-talk, 179 (57.2) talked in confidence to a family member or coach, , 178 (56.9%) engaged a confidential teammate, 170 (54.3%) sought professional help, 144 (46.0%) wrote their thoughts down. Analysis of four main thematic areas namely stresses management, emotional regulation, social support, and self-care revealed both positive and negative coping behavior.

Table 1: ***Coping mechanisms used by elite runners***

Coping mechanism	Endorsement criterion	n (%)	Mean (SD)
Prioritizing enough sleep for recovery	Agree/strongly agree	266 (85.0)	4.44 (1.28)
Maintaining a healthy diet	Agree/strongly agree	260 (83.1)	4.38 (1.25)
Listening to motivational talks or speakers	Often/always	256 (81.8)	4.35 (1.31)
Avoiding situations that trigger negative emotions	Often/always	254 (81.2)	4.30 (1.37)
Engaging in hobbies outside running	Agree/strongly agree	253 (80.8)	4.35 (1.28)
Breaking from training to relax	Agree/strongly agree	252 (80.5)	4.34 (1.31)
Engaging in enjoyable activities	Often/always	249 (79.6)	4.26 (1.42)
Participating in group activities outside running	Agree/strongly agree	245 (78.3)	4.24 (1.36)
Relying on coach support	Agree/strongly agree	236 (75.4)	4.15 (1.45)
Seeking help from family and friends	Agree/strongly agree	227 (72.5)	3.98 (1.62)
Practicing relaxation techniques	Often/always	225 (71.9)	3.94 (1.62)
Practicing positive self-talk	Often/always	218 (69.6)	3.92 (1.59)
Talking to a friend, family member or coach	Often/always	179 (57.2)	3.57 (1.63)
Confiding in teammates about mental health challenges	Agree/strongly agree	178 (56.9)	3.50 (1.70)
Seeking professional help	Often/always	170 (54.3)	3.30 (1.86)
Writing down thoughts and feelings	Often/always	144 (46.0)	2.91 (1.90)

a) Stress management techniques

Through the structured camping system, the elite runners benefit from pre-performance routines which prepare them for upcoming events. Findings indicated that most athletes adopt adaptive stress management techniques. Relaxation practices such as deep breathing and mindfulness were "always" used by 71.9% of respondents, while 80.5% frequently engaged in enjoyable activities to restore mood. Talking to friends, family, or coaches (57.2%) and seeking professional help (54.3%) were also fairly common. These results suggest strong reliance on emotion-focused coping and informal social networks, but highlight stigma and limited access as barriers to professional help.

Through a systematic review and meta-analysis, Myall et al. (2023) evaluated 12 randomized control trials (RCTs) involving 614 elite athletes on mindfulness and concluded that mindfulness training protects and promotes elite athletes' mental health effectively. In low-income set-ups, it is easy to integrate mindfulness as it does not require equipment. The elite runners can easily teach themselves the required techniques without the use of a professional sports psychologist. This therefore make these coping strategies popular and significant. In a study of 65 Moroccan elite athletes, Naciri et al. (2025) associated task-centered coping with low stress. This emphasis on the usefulness of stress management techniques and elaborate on how mindfulness meditation promotes recovery for elite runners and lessen burnout.

b) Emotional regulation techniques

Athletes demonstrated a preference for cognitive-behavioral strategies, with 69.6% always practicing positive self-talk and 81.8% regularly listening to motivational talks. Avoidance of emotionally triggering situations was also common (81.2%), while journaling was less popular, with 46.0% never engaging in it. This indicates that Kenyan runners favor externally reinforced

or motivational forms of regulation over introspective methods like writing. In their study on coping under pressure, Qiao and Chen (2026) and Liao (2025) highlighted that mental resilience, and emotional regulation are important strategies for promoting effective athletes' coping and wellbeing. The application of situational fit model that require athletes to shift pressures – due to competition and other issues like financial scarcities may apply well in low-income setting like Kenya. This helps elite runners to build up strategies that are effective for various events and situations and avoid reliance on suppression. This was endorsed by Lulu, et al. (2025) in a study on shooters concluded that elite-level athletes performed better when they applied the right match of coping strategy.

c) Social support system

Social networks emerged as a key buffer against psychological distress. This is supported by Poucher et al. (2023) on the importance of coaches' attitude on mental health. A majority (75.4%) relied on coaches for guidance, and 72.5% sought support from family and friends. However, only 56.9% are frequently confided in teammates, suggesting that peer-level emotional sharing remains constrained by stigma or competition-related mistrust. Participation in community activities outside running was rated high at 80.8%. This underscored the importance of social support and the collectivist nature of Kenyan culture as a source of psychological resilience. This is confirmed by Luo et al. (2025) in their systematic review and meta-analysis of 40 studies covering 14,462 athletes that highlighted social support as a critical pillar backing athlete mental health and mitigation of stress. The elite runners use social networks as a resource for performance especially during challenging times.

d) Self-care practices

Self-care practices were widely embraced, with 85.0% strongly agreeing that they prioritized adequate sleep, 83.1% maintaining a healthy diet, and 80.5% taking breaks from training. Similarly, 80.8% engaged in hobbies and recreational activities, reflecting holistic awareness of physical and mental recovery needs. The results align with Durand-Bush et al. (2023) observation on self-regulation as a core competency which help athletes to shift from passive or maladaptive avoidance coping and engage in proactive approach-based coping which ensures that they maintain individual well-being. However, a small minority neglected rest or hobbies, potentially increasing vulnerability to burnout and psychological strain. Figure 3 shows choices sought by elite runners frequently.

The fact that most self-care practices require no financial investment makes this model easily applicable in low-income resource settings. A study by Küttel et al. (2024) on Danish elite athletes found financial insecurity as a persistent source of anxiety in athletes in all tiers with some athletes expressing fear about contract renewal. Having a buffer for the consequences of mental health issue therefore creates sustainable self-care for the elite runners. Figure 3 shows the Frequently endorsed coping techniques.

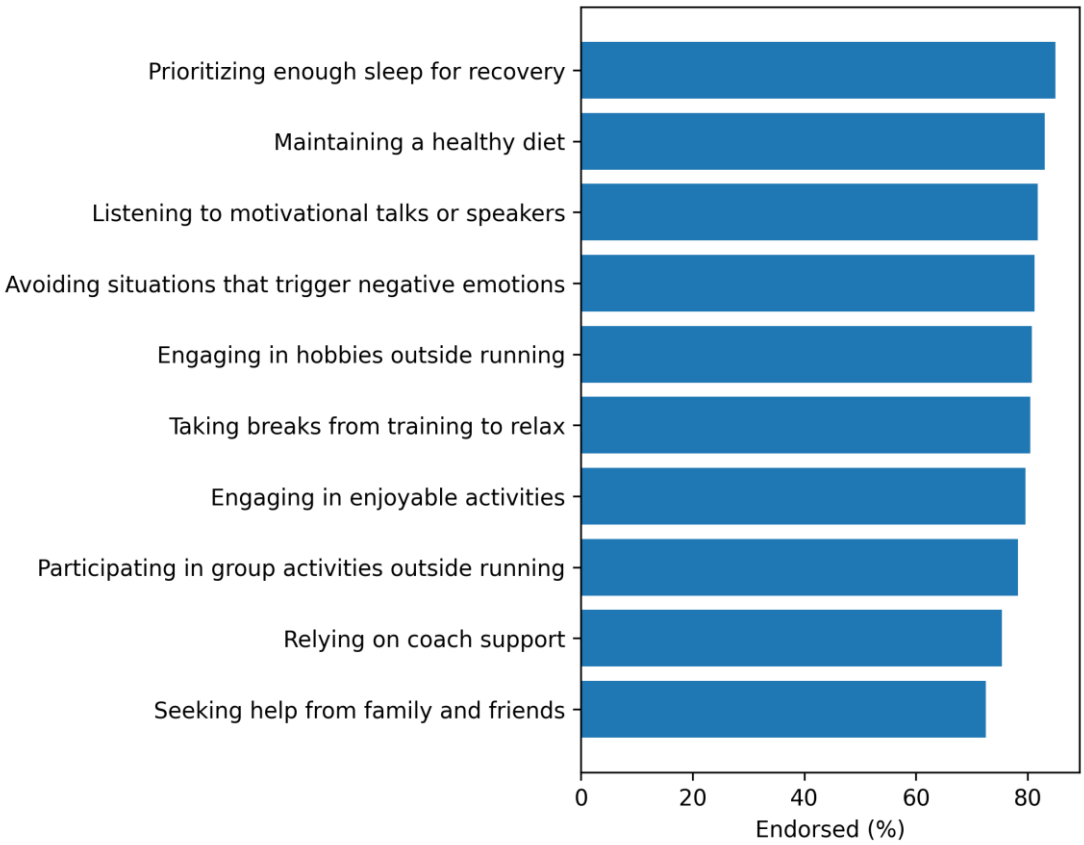


Figure 3: *Frequently endorsed Stress Management techniques.*

Overall, the study reveals that elite Kenyan runners rely predominantly on social, spiritual, and self-directed coping strategies, while professional psychological support remains underutilized. This is consistent with Cosh et al. (2024) findings that formal mental health help-seeking among athletes remain modest. This is compounded with barriers like stigma, concerns about confidentiality, team culture and fear of deselection. Emotional resilience is maintained through discipline, family cohesion, and cultural beliefs, but systemic interventions such as mental health education, coach training, and embedded psychological services are urgently required to enhance athlete well-being and performance sustainability. Reardon et al., (2026) echoes these findings with an updated consensus statement that shifts the burden from individual athlete responsibility. He posits that it is hard to train an athlete to endure unsupportive environment. Therefore, this calls upon all actors in the sports ecosystem to embrace long-term athlete health management.

5. Conclusions and Recommendations

5.1 Conclusion

In conclusion, the study highlights that coping with mechanisms among elite runners are largely informal and culturally grounded. The athletes mainly rely on social and spiritual support systems. Many athletes turn to family, peers, coaches, and faith-based practices such as prayer for emotional constancy, rather than seeking help from mental health professionals. This pattern mirrors both cultural attitudes toward mental health and limited access to professional psychological services within the sporting environment. The study underscores the need to integrate structured mental health education and professional counseling services for elite runners and support persons within Kenyan athletic training camps. These initiatives are aimed at normalizing mental health discussions, reducing stigma, and provide athletes with effective tools to manage psychological stress. Strengthening institutional support systems through mental health awareness programs and access to qualified professionals are among key significant contributors for enhancing the overall well-being and performance of elite runners in Kenya.

5.2 Recommendations

Based on the findings and conclusions of the study, the following recommendations were established:

1. The Ministry responsible for Sports, Athletics Kenya, and relevant athlete welfare organizations should develop or strengthen mental health programs for elite athletes. Programs should promote mental health literacy, address stigma, and support help seeking without discrimination.
2. Training camps should establish clear, confidential referral pathways and, where feasible, provide access to qualified sports psychologists or other appropriately trained mental health professionals. Any screening should be voluntary, explained to participants, and supported by appropriate confidentiality safeguards.
3. Coaches and camp managers should receive regular training to recognize signs of psychological distress, communicate sensitively, and facilitate timely referrals. Training should also promote supportive coaching practices and discourage practices that create avoidable psychological pressure.
4. Longitudinal research should examine how mental health and coping strategies change across athletes' careers, including injury rehabilitation, transitions between competitive levels, and retirement. Intervention studies should assess the effectiveness of mental health education, coach training, and access to psychological services.

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