

Preparing for Life After Sport: Exploring the Feasibility of Offering a Health-Related Transition Program for NCAA Division II Student-Athletes

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Health-related transitional programs can provide strategies for student-athletes to help them navigate the challenges they may face as they transition away from competitive athletics. However, few evidence-based transitional programs with a health-related focus exist, and even less research addresses program feasibility within specific institutional contexts. This study evaluated the feasibility of implementing a health-related physical activity (PA) transitional program for student-athletes at one NCAA Division II (DII) institution. Student-athlete alumni ($n = 85$) from the past five years were surveyed to gather information about their current PA and health-related quality of life. Additionally, these former student-athletes along with athletic department personnel ($n = 28$) responded to survey items assessing various dimensions of program feasibility. Results showed that over 90% of participants from both groups agreed more support is needed for the transition out of sport, particularly regarding PA and health resources. In addition to limited mental health resources, student-athletes perceived there to be a lack of resources related to post-career exercise guidance, highlighting a key gap given that 60% of former student-athletes in this sample were not engaging in recommended PA levels. Responses from athletic personnel suggested opportunities exist to integrate transitional programming within existing campus resources. These findings highlight the need for more health-related transitional support. As such, athletic departments should prioritize efforts to develop and evaluate programs that support health-related aspects of sport transition to optimize student-athletes' adjustment to life after sport. This feasibility study provides insights into the needs, resources, and barriers institutions face when developing transitional programming. These findings offer a foundation for implementing evidence-based support addressing student-athletes' health and wellness needs beyond competitive athletics.

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Introduction

Student-athletes often face challenges transitioning from sport-focused exercise to exercise for health, with many not maintaining high physical activity levels post-graduation (Plateau et al., 2017; Reifsteck et al., 2013). The National Collegiate Athletic Association (NCAA) estimates that only 2% of student-athletes each year go on to play sport professionally, leaving the majority to transition out of competitive sports participation after college (NCAA, 2021). Research on the challenges associated with athlete retirement has led to calls for the development of transitional programs to support this key life transition (Lavallee et al., 1997; Agnew & Pill, 2025). While researchers have advocated for proactive transitional practices, few evidence-based programs focused on post-competitive physical activity exist, especially within the Division II (DII) context (Lally, 2007; Petitpas et al., 1992; Reifsteck et al., 2018).

Programs that specifically focus on promoting lifetime physical activity and health prior to retirement from sport can help student-athletes cope with the transition and maintain a healthy lifestyle. While athletes are often seen as models of health, former student-athletes may not maintain a physically active lifestyle post-retirement and often report lower health-related quality of life compared to their non-athlete peers (Simon & Docherty, 2014; Simon et al., 2021). Despite their previous high levels of physical activity during competition, these individuals may struggle to sustain similar activity levels after their athletic careers end, with former athletes reporting less weekly aerobic exercise compared to recreational non-athletes (Simon & Docherty, 2017).

Several factors contribute to this decline in physical activity, including physical and psychological barriers resulting from injuries sustained during their athletic careers. Many former athletes experience pain, stiffness, and fear of re-injury, which impedes their ability to engage in regular physical activity (Russell et al., 2018). Additionally, the loss of identity as an athlete and difficulty with adapting to new roles post-retirement can further complicate their transition to a healthy lifestyle (Reifsteck et al., 2022; Tracey & Elcombe, 2004).

How well an athlete can transition out of sport can be affected by available resources and planning that took place in advance of the transition to help the athlete cope with post-competition life (Cecić Erpič et al., 2004). Empowering an athlete to prepare and have more control over their transition leads to a more positive transition out of sport (Alfermann et al., 2004; Cecić Erpič et al., 2004). In line with the NCAA's mission to "provide a world-class athletics and academic experience for student-athletes that fosters lifelong well-being" (National Collegiate Athletic Association, 2025, para. 2), it should be the responsibility of athletic departments to help student-athletes develop necessary coping strategies to support their transition out of sport, and these coping methods should be introduced prior to graduation (Hansen et al., 2019).

Some transitional programs have been developed to support student-athletes in adjusting to life after sport by equipping athletes with strategies to navigate the psychological, social, and physical changes they face (Bjornsen & Dinkel, 2017; Smith et al., 2020). Specific to health-related programming, the Moving On! program provides a framework for helping student-athletes transition to a healthy lifestyle by fostering self-efficacy, goal setting, and the exploration of new activities (Reifsteck & Brooks, 2018). Similarly, the Pilates Connect program helps student-athletes gain confidence in their ability to engage in post-competitive physical activity by promoting competence, autonomy, and relatedness (Smith et al., 2020). While such programs have shown promise, most have been tested with Division I (DI) and Division III (DIII) athletes (e.g., Brooks et al., 2019; Smith et al., 2020), leaving a gap in evidence for DII student-athletes.

DII athletics operates under the distinctive “Make it Yours” philosophy, which emphasizes student-athletes’ involvement across academic, athletic, and community domains (NCAA, 2025). Unlike DI’s focus on elite athletic performance or DIII’s emphasis on the student experience, DII uniquely positions practical career preparation and holistic development as central to its mission. This includes preparation related to health behaviors and lifetime wellness, areas directly aligned with the transitional programming examined in this study. The DII culture is characterized by collaborative relationships within athletic departments, shared investment in student-athlete wellbeing, and holistic support and development (NCAA, 2025). These contextual factors make DII a valuable setting for examining health-related transitional programming, as the division’s stated values emphasize the type of holistic, practical preparation such programs aim to provide. However, the extent to which these values are consistently translated into practice may vary across institutions, particularly given the resource constraints often faced by DII athletic departments (Hanson & Peachey, 2022).

DII student-athletes are often underrepresented in health-promoting programs and may have lower health literacy compared to their peers (Beasley et al., 2021). This may reflect structural differences across NCAA divisions, including fewer dedicated health promotion personnel, limited access to specialized programming, and competing resource demands within athletic departments. As a result, DII student-athletes may have fewer opportunities to develop the knowledge, skills, and resources needed to maintain physical activity and overall well-being after their athletic careers end. Given the distinct circumstances of the DII level, where a balanced emphasis on academics, athletics, and community engagement is central, it is important to explore the feasibility of implementing programs for this population specifically (NCAA, 2014).

The connection between physical and mental health during athletic transitions is particularly salient for DII student-athletes. Recent research has documented elevated anxiety and mental health concerns among DII athletes (Hebert & Newland, 2023), with many reporting inadequate mental health support and personal well-being challenges (Ryan et al., 2022). The transition out of sport can exacerbate these concerns, as student-athletes lose not only their athletic identity but also the struc-

tured support systems that promoted both physical and mental wellness. Understanding this interconnection between physical activity, mental health, and transitional challenges is essential for developing comprehensive programming that addresses the holistic needs of transitioning DII student-athletes. Research has shown that athletic departments vary widely in their mental health screening practices and support services (Drew et al., 2023), suggesting that intentional programming focused on the health-related aspects of transition may help fill critical gaps in student-athlete support.

Feasibility studies are critical for ensuring that interventions are designed to meet the specific needs of the target group before full-scale implementation (Bowen et al., 2009; Orsmond & Cohn, 2015). By conducting feasibility studies, researchers can assess the practicality, acceptability, and potential effectiveness of transitional programs for DII student-athletes, thereby ensuring that these interventions lead to positive behavioral changes and support long-term health outcomes. Demonstrating the feasibility of a health-related physical activity program at a DII university can provide a holistic framework for supporting student-athletes in their transition to lifelong health within this unique context.

The purpose of this feasibility study was to assess the potential for implementing a health-related physical activity transition program at an NCAA DII university. The feasibility study serves as a foundational step in understanding the viability of such a program within the university setting, gathering key insights from stakeholders including former student-athletes and athletic personnel. Guided by recommendations from Bowen et al. (2009), the study was designed to address five critical questions:

RQ₁: Acceptability: Do stakeholders (former student-athletes and athletic personnel) express interest in a student-athlete transitional program with a health-related physical activity focus?

RQ₂: Demand: Do stakeholders perceive a need for this program, and is there expected use of the program?

RQ₃: Implementation: What are the necessary steps to develop the program? What needs to be created or tailored for successful implementation?

RQ₄: Practicality: Are the available resources sufficient to deliver the program effectively, and what additional resources are necessary?

RQ₅: Integration: How could the program integrate with existing initiatives on campus, or is there a current program that could support the transition?

By exploring the feasibility of this type of program, findings will lay the groundwork for potential future implementation and help to ensure that the program is both practical and beneficial for student-athletes.

Method

A cross-sectional survey was administered to recent student-athlete alumni and athletic department personnel from the same institution to describe the current health-related quality of life and physical activity levels of recent student-athlete

alumni and to explore the feasibility of implementing health-related physical activity transitional programming at the institution.

Participants and Setting

The study was conducted at a liberal arts university in the southeast United States that competes at the NCAA DII level. The institution emphasizes student-athlete wellness, holistic development, and preparation for life beyond collegiate athletics. Two groups of participants were recruited from this institution for the study: former student-athletes and athletic personnel.

Group 1: Former Student-Athletes

Recruitment was limited to recent alumni (i.e., within five years at the time of data collection) to reflect advancements made within the athletics department that included expanded resources, while also providing insight into resources that may still be lacking. A total of 85 former student-athletes ($n = 45$ women, $n = 40$ men), ages 22-29, who participated in varsity sports at the university between 2017 and 2022, completed the survey, representing 17.4% of the potential pool of 490 student-athlete alumni. The majority identified as White (61.2%) or Black/African American (24.7%). A total of 14 different sports were represented in the sample (see Table 1). The demographic composition of our former student-athlete sample generally reflects the racial diversity of the broader student population and the athletic department's student-athlete demographics during this period. The gender distribution in our sample (52.9% women, 47.1% men) aligns reasonably well with the university's overall gender ratio. Our sample's representation across 14 different sports and balanced gender distribution suggests reasonable representativeness of the former student-athlete population at this DII institution.

Group 2: Athletic Personnel

A total of 28 athletic personnel, including coaches, administrators, and athletic trainers, participated in the survey, representing 35% of all athletic department staff. The sample was balanced by gender, with 82.1% identifying as White. Over half (53.6%) of the group was composed of coaches (see Table 2). The demographic composition of our athletic personnel sample reflects the broader patterns observed in DII athletic departments, where coaching staff typically comprise a substantial portion of athletic personnel. The balanced gender representation in our sample (50% women, 50% men) is notable given the historical underrepresentation of women in coaching and athletic administration within intercollegiate athletics (Acosta & Carpenter, 2014), including continued underrepresentation within DII athletic departments (Lapchick, 2022). The inclusion of multiple role types (coaches, administrators, and athletic trainers) across 35% of all department staff provides diverse perspectives on student-athlete transitional needs and departmental capacity for program implementation.

Table 1
Demographic Characteristics of Former Student-Athlete Survey Participants

	<i>n</i>	<i>%</i>
Gender		
Female	45	52.9
Male	40	47.1
Ethnicity		
White	52	61.2
Black/African American	21	24.7
Asian	2	2.4
Two or More Races/Ethnicities	4	4.7
Native American	1	1.2
Hispanic/Latinx	1	1.2
Other	1	1.2
Prefer Not to Answer	3	3.5
Sport Participation		
Baseball	12	14.1
Basketball	10	11.8
Football	10	11.8
Lacrosse	11	12.9
Volleyball	7	8.2
Track and Field	6	7.1
Swimming	6	7.1
Soccer	6	7.1
Softball	5	5.9
Track and Field/Cross Country	4	4.7
Golf	2	2.4
Tennis	2	2.4
Triathlon	2	2.4
Spirit Team	1	1.2
Track and Field/Football	1	1.2

Note. *n*=85

Table 2*Demographic Characteristics of Athletic Personnel Survey Participants*

	<i>n</i>	%
Gender		
Female	14	50
Male	14	50
Ethnicity		
White	23	82.1
Black/African American	2	7.1
Hispanic/Latinx	1	3.6
White & Hispanic/Latinx	1	3.6
Prefer Not to Answer	1	3.6
Primary Role in Athletics		
Coach	15	53.6
Athletic Trainer	4	14.3
Administration	4	14.3
Strength and Conditioning	3	10.7
Other	2	7.1

*Note. n=28***Measures**

Former student-athletes and athletic department personnel both provided demographic information and responded to feasibility questions. The survey administered to former student-athletes also collected information on their current physical activity levels and health-related quality of life to explore the need for relevant programming.

Physical Activity

The National College Health Assessment (NCHA III) is a questionnaire covering multiple health topics, including physical activity among college students within the United States (ACHA, 2022). Three questions from the NCHA III related to physical activity were selected for use in this study to ask participants about the number of minutes over the past 7-day period that they performed moderate-intensity cardiovascular or aerobic exercise, vigorous-intensity cardiovascular or aerobic activity, and how many days they did exercise to strengthen or tone their muscles. Based on their responses, participants were categorized according to whether they met (Yes/No) the U.S. recommended guidelines for physical activity for adults (i.e., at least 2 days of muscle-strengthening activity and 150 or more minutes per week of moderate aerobic activity, where 1 minute of vigorous activity equals 2 minutes of moderate activity; U.S. Department of Health and Human Services, 2018).

In addition to assessing weekly physical activity levels, the Stage of Exercise Questionnaire developed by Marcus and co-authors (1992) was used to assess exercise behaviors in five stages (precontemplation, contemplation, preparation, action, maintenance) based on individuals' intention to, and regularity of participation in, exercise. This measure has been widely used in literature to determine the stage of exercise relative to current physical activity levels (Dannecker, et al., 2003; Marcus & Simkin, 1993).

Additional questions were included to assess self-reported changes in physical activity levels and perceived difficulty in maintaining desired physical activity post-collegiate athletics. Self-reported physical activity measures are commonly used in research due to their practicality and ability to capture subjective experiences, despite potential recall bias (Craig et al., 2003; Prince et al., 2008). Participants were asked to report whether their physical activity had increased, decreased, or remained the same since their collegiate athletic career, as well as how easy or difficult it had been to maintain their desired level of activity. These questions provided insight into variability of post-sport changes to exercise behavior, complementing the standardized measures by capturing additional nuances of participants' experiences (Dishman et al., 2001; Helmerhorst et al., 2012).

Health-related Quality of Life

The Patient-Reported Outcomes Measurement Information System (PROMIS) Global Health version 1.2 was used to assess physical, mental, and social health (Hays et al., 2009). The questionnaire includes 10 items, including a pain scale, that assess overall health and quality of life. Raw scores for each subscale (i.e., Global Mental Health, Global Physical Health) were calculated and then converted to standardized T-scores ($M = 50$, $SD = 10$) using the PROMIS scoring manual. Higher T-scores indicated better health relative to the US general population norms.

Feasibility

Feasibility items incorporated modified questions from a study by DeFreese and co-authors (2021) with former collegiate women's soccer players to identify the resources, facilitators, and barriers student-athletes experience as they transition out of collegiate athletics. Additional institution specific questions were developed for the present study to evaluate key elements of feasibility identified by Bowen and co-authors (2009), including acceptability, demand, implementation, practicality, and integration of a health-related physical activity transition program. Questions were tailored to reflect the specific context of the university and its student-athletes. Additionally, open-ended questions were asked to athletic department personnel to gather feedback on the resources available or needed, and the challenges related to program implementation.

Procedures

Prior to administering the survey to student-athlete alumni and athletics department personnel, preliminary interviews were conducted with one former student-ath-

lete and one strength and conditioning coach from the university to help inform the survey design. These interviews aimed to gather initial insights into the views of the target groups regarding student-athlete transitional programming. These semi-structured and informal interviews helped refine the survey questions, especially those related to implementation, integration, and practicality of the proposed program (Kvale & Brinkmann, 2015; Turner, 2010). Sample interview questions included: *What health-related physical activity resources do you feel student-athletes need when making the transition out of sport? And, if a program were to be offered, what do you feel would be the best format?*

Cognitive interviews were then conducted with two individuals (i.e., one former DII athlete, one former coach) from outside the university. These cognitive interviews helped identify potential issues with survey phrasing, validity, and measurement (Willis, 2005). This technique enhanced the survey design by detecting misunderstandings, unclear wording, and format-related issues, particularly when adapting questions for different devices (Beatty & Willis, 2007). For example, feedback led to modifying a question for clarity when presented on mobile devices, breaking it into two separate questions.

Upon Institutional Review Board approval and completion of preliminary work, former DII student-athletes and athletic personnel from the university were recruited to complete the online survey via Qualtrics. Student-athlete alumni were recruited by email through the office of advancement and through athletic coaches, as well as using flyers distributed at homecoming events. Athletic department personnel were contacted via their university email. Participants reviewed consent information prior to beginning the survey and could choose to be entered into a drawing for a gift card or university gear to incentivize survey completion.

Data Analysis

Survey data were downloaded from Qualtrics and analyzed using SPSS version 26. Descriptive statistics (i.e., frequencies, means, standard deviations) were calculated separately for the two groups to allow for comparison of perspectives. Descriptive statistics were deemed most appropriate for this feasibility study given the exploratory nature of the research questions and the goal of understanding the current landscape of perceptions, needs, and resources rather than testing specific hypotheses or relationships between variables (Bowen et al., 2009). The focus on frequencies, percentages, and means allowed for a clear presentation of stakeholder perspectives that will inform future program development and implementation decisions.

Open-ended responses were systematically reviewed, coded, and grouped into common categories to identify key themes related to the feasibility of the transition program using qualitative content analysis (Elo & Kyngäs, 2008). Specifically, responses with similar concepts were grouped together to identify patterns in stakeholder perspectives regarding available resources, needed resources, and potential barriers to implementation. For example, responses mentioning “lack of staff,” “need

more personnel,” or “insufficient coaches” were grouped under personnel limitations. Three descriptive categories emerged from this process: funding constraints, personnel limitations, and time availability. These summative categories were used to provide contextual support for the quantitative feasibility findings specific to the institutional setting rather than to generate standalone qualitative themes. This approach allowed for a descriptive representation of site-specific feasibility factors while maintaining the study’s primary focus on quantitative feasibility indicators across the domains of acceptability, demand, implementation, practicality, and integration (Bowen et al., 2009). Results were integrated to discern the feasibility of implementing a health-related physical activity transition program for student-athletes at the university and guide future decisions for program design and delivery.

Results

The results for former student-athletes’ current physical activity and health-related quality of life are presented first to provide context for the potential need of this type of program at the university, followed by results for each of the guiding areas of feasibility.

Former Student-Athlete Physical Activity and Health-related Quality of Life

The majority of former student-athlete participants reported that they currently engage in less physical activity ($n = 72$, 84.71%) compared to when they were in college, and that it has been difficult ($n = 47$, 55.29%) or very difficult ($n = 24$, 28.24%) to maintain physical activity since the completion of their collegiate athletic career. Almost two-thirds (64.7%) of participants reported currently engaging in regular exercise based on their stage of exercise change (i.e., action or maintenance), which is presented on Table 3. Based on responses to the NCHA III physical activity questions, participants engaged in an average of 140.41 minutes of moderate physical activity and 73.26 minutes of vigorous physical activity per week. Over 40% of the sample ($n = 35$, 41.18%) reported engaging in no muscle strengthening activities, with 60% of participants ($n = 51$) not meeting the recommended physical activity guidelines. This information is presented on Tables 4 and 5.

A descriptive comparison of the means suggests participants scored close to the average global mental health and physical health scores ($M = 50$) for the general US population (Health Measures, 2023). Participants reported a global mental health T-score of 48.3 ($SD = 3.7$) that is slightly lower than the US population (mean difference -1.7 points) and a global physical health T-score of 50.8 ($SD = 4.6$) that is slightly above the US population (mean difference $+0.8$ points; Hays et al., 2009). Less than 6% of participants ($n = 5$) rated their overall health as excellent, but most participants (88.24%) rated their overall health as either very good ($n = 34$, 40%) or good ($n = 41$, 48.24%).

Table 3*Self-Reported Physical Activity Behaviors and Stage of Exercise Change*

	<i>n</i>	<i>%</i>
Change in PA		
I currently engage in more physical activity	2	2.35
My physical activity has stayed about the same	11	12.94
I currently engage in less physical activity	72	84.71
Maintaining PA		
Easy	2	2.35
Neutral	12	14.12
Difficult	47	55.29
Very Difficult	24	28.24
Regular Exercise Engagement		
I don't engage in regular exercise now, but I intend to start in the next six months	12	14.12
I don't engage in regular exercise now, but I intend to start in the next month	16	18.82
I have been engaging in regular exercise for less than six months	19	22.35
I have been engaging in regular exercise for more than six months	36	42.35
Missing	2	2.35

Table 4*Summary Statistics for NCHA III Weekly Aerobic Physical Activity*

	<i>M</i>	<i>SD</i>	<i>n</i>	<i>SE</i>	Min	Max	<i>Mdn</i>	Mode
Vigorous	73.26	80.91	85	8.78	0.00	300.00	50.00	0.00
Moderate	140.41	129.06	85	14.00	0.00	800.00	100.00	60.00

Table 5*Frequency for NCHA III Weekly Muscle Strengthening Activity*

	<i>n</i>	<i>%</i>
0 days	35	41.18
1 day	7	8.24
2 days	21	24.71
3 days	10	11.76
4 days	6	7.06
5 days	6	7.06

Feasibility of Implementing a Transition Program with a Health-related Focus at the University

Table 6 provides key results from each feasibility area (acceptability, demand, implementation, practicality, and integration) from the perspective of both former student-athletes and athletics department personnel.

Table 6
Summary Statistics for Sample of Findings within Each Feasibility Domain

	Former Student-Athletes		Athletic Personnel	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Acceptability				
A SA transitional program with a health-related focus is important in preparing SAs for life beyond sport	4.73	0.52	4.75	0.52
Demand				
The university should support SAs:				
Personal Development	4.89	0.35	4.71	0.46
Physical Development	4.85	0.42	4.71	0.46
Psychological Development	4.91	0.33	4.71	0.46
Implementation				
The university should offer the following resources to help the SA transition out of sport:				
PA/Exercise Guidance	4.85	0.42	4.68	0.61
Career Guidance	4.89	0.35	4.89	0.31
Mental Health Resources	4.91	0.33	4.93	0.26
Practicality				
A SA transition program with a health-related focus should be delivered				
As an Elective	4.45	0.85	4.43	0.69
Face-to-face	4.23	0.74	4.11	0.74
By health/exercise/sport faculty	4.38	0.77	4.36	0.73
Integration				
A SA transition program with a health-related focus can be integrated into existing programming at the university	4.38	0.72	4.14	0.80

Note. Former Student-Athletes: *n*=85, Athletic Personnel: *n*=28; SA = Student-Athlete; 1 = Strongly Disagree, 2 = Disagree, 3 = Neither Agree nor Disagree, 4 = Agree, 5 = Strongly Agree

Acceptability

Approximately 90% of former student-athlete and athletics department personnel agreed or strongly agreed that health-related transition programming is important for preparing student-athletes for life beyond sport and that programming should have a health-related physical activity focus, encompassing ways to help the student-athlete cope with the transition out of sport and maintain a physically active lifestyle upon graduation.

Demand

Results indicated a perceived demand for transition programming, with close to 90% of former student-athletes and 100% of athletic personnel participants strongly endorsing that athletics should support student-athletes' personal development, psychological development, physical development, transition out of sport, and health beyond athletics. Former student-athlete participants felt that access to resources/facilities ($n = 42$, 49.41%), financial resources ($n = 44$, 51.76%), knowledge of PA benefits ($n = 49$, 57.65%), and support from others ($n = 58$, 68.24%) were facilitators to maintaining their physical activity upon graduation.

Implementation

Most participants from both groups agreed that all example resources presented to them within the survey should be offered to aid the student-athletes transition out of sport. When asked to select the top three most important resources among a list of 12 options, participants from the student-athlete group most often chose career guidance ($n = 57$, 67.06%), mental health resources ($n = 45$, 52.94%), and physical activity/exercise guidance ($n = 43$, 50.59%). The athletic personnel also reported the same top three most important resources, but in comparison to the former student-athlete group reported mental health resources ($n = 19$, 67.86%) as their most important resource, followed by career guidance ($n = 16$, 57.14%), and physical activity/exercise guidance ($n = 12$, 42.86%).

Practicality

Approximately 80% of former student-athlete participants and more than half of athletics department personnel participants did *not* agree that support is currently being provided to student-athletes regarding transition out of sport and health beyond athletics. Former student-athlete and athletic personnel respondents perceived that the university is currently offering some key transitional resources such as social support, career guidance, and medical resources, but is currently lacking resources related to physical activity/exercise guidance and access to a sport psychologist. See Table 7.

Table 7.
Frequency for Resources the University Currently Offers

	Former Student-Athletes			Athletic Personnel		
	<i>Yes</i>	<i>No</i>	<i>Unsure</i>	<i>Yes</i>	<i>No</i>	<i>Unsure</i>
Social Support	50	19	16	26	0	2
Coaches/Athletic Personnel Support	38	30	17	26	0	2
Mentorship/Internship	54	13	18	25	1	2
Career Guidance	64	12	9	25	0	3
Mental Health Resources	40	39	6	17	9	2
Spiritual Guidance	63	10	12	18	5	5
Medical Resources	29	30	26	16	9	3
Time Management Resources	15	56	14	12	14	2
Nutritional Guidance	17	59	9	9	17	2
Financial Guidance	17	59	9	9	17	2
PA/Exercise Guidance	8	64	13	9	15	4
Sport Psychologist	9	51	25	3	17	8

Note. Former Student-Athletes: $n=85$, Athletic Personnel: $n=28$

Participants provided input on the most appropriate delivery method for a transitional program as well as who should deliver it. Most participants from both groups found an elective course in a face-to-face format to be the most ideal delivery format, with health, exercise, and sport faculty as well as athletic trainers viewed as the most appropriate individuals to deliver health-related programming.

Integration

Participants generally agreed that the university at large and the athletic department specifically would be supportive of a student-athlete transitional program with a health-related focus. Furthermore, over 90% of former student-athletes and 75% of athletic personnel respondents felt programming would be a good use of institutional resources and could integrate into existing programming at the university.

Qualitative Findings: Resources and Implementation Barriers

Open-ended responses from athletic personnel were systematically reviewed and coded using qualitative content analysis to identify patterns related to available resources, needed resources, and barriers to implementation (Elo & Kyngäs, 2008). Overall, three descriptive categories of implementation barriers emerged from the content analysis: funding constraints, personnel limitations, and time availability. These qualitative findings were used to provide contextual support for the quantitative feasibility results rather than to generate standalone qualitative themes.

Athletic personnel most frequently cited funding constraints ($n = 13$) as a barrier to implementation, with responses indicating limited athletic department budgets and the need for financial resources to develop and sustain programming. Personnel limitations were also frequently mentioned ($n = 11$), with respondents describing the need for additional staff, dedicated program coordinators, or faculty time to effectively deliver programming. Time availability ($n = 7$) emerged as a related barrier, as participants indicated that existing staff members are already managing multiple responsibilities and may not have sufficient capacity to assume additional programming demands. Together, these findings highlight the tension between recognizing the value of health-related transitional programming and navigating the practical realities of implementation within resource-constrained athletic environments.

Despite these challenges, athletic personnel identified several existing resources that expanded health-related programming, if implemented, could integrate with or build upon. Responses mentioning Health, Exercise, and Sport (HES) faculty ($n = 6$) indicated that existing faculty expertise could support program delivery. Participants also identified capstone courses ($n = 6$), personal health courses ($n = 4$), athletic training services ($n = 11$), strength and conditioning programs ($n = 6$), and existing student-athlete development initiatives as potential integration points. These responses suggest that rather than requiring entirely new infrastructure, health-related transitional programming could leverage existing university resources and personnel.

Discussion

This feasibility study explored the potential for implementing a health-related physical activity transition program for student-athletes at an NCAA DII university. Survey results from both former student-athletes and athletic personnel highlighted strong support for such a program, with most participants agreeing on its importance for preparing student-athletes for life after sport. These findings contribute to the limited literature on DII student-athlete transitions (Beasley et al., 2021) by documenting not only the need for health-related programming but also the practical considerations that must be addressed for successful implementation.

Demand for Health-related Transitional Programming

Both former student-athletes and athletic personnel identified career guidance, mental health resources, and physical activity/exercise guidance as the most critical resources for a successful transition, domains commonly identified as central to athlete career transition support (Lavalley et al., 1997; Stambulova et al., 2009). While former student-athletes prioritized career guidance, athletic personnel ranked mental health resources as the most essential. This alignment between stakeholder groups is particularly important, as successful program implementation requires buy-in from both the athletes who will participate and the personnel who will support the programming (Bowen et al., 2009).

The slight difference in prioritization between groups offers valuable insight. Student-athletes may be focused on immediate post-graduation concerns like finding employment, while athletic personnel recognize the foundational role mental health plays in supporting all aspects of the transition. This finding aligns with recent research documenting elevated mental health concerns among DII athletes (Hebert & Newland, 2023) and suggests that athletic personnel are increasingly aware of the psychological support needs of their student-athletes (Ryan et al., 2022).

Physical Activity Decline and Resource Gaps

Findings suggest that many former student-athletes struggle to meet the recommended physical activity guidelines, highlighting a need for health-related transition programs to support them in overcoming this challenge. Indeed, 60% of former student-athletes in this sample were not meeting recommended physical activity guidelines, and 84.71% reported engaging in less physical activity compared to their collegiate years. Over 80% found it difficult or very difficult to maintain physical activity post-sport. These findings reinforce previous research documenting significant declines in physical activity following athletic career termination (Reifsteck et al., 2013; Simon & Docherty, 2014).

While exercise guidance was cited as one of the top three most desired resources among both the student-athlete alumni and the athletic personnel, it was reported to be one of the least available resources currently offered to transitioning student-athletes. This gap between what student-athletes need and what is being provided supports previous observations that existing transitional resources focus primarily on career aspects while neglecting health-related components (Petitpas et al., 1992; Reifsteck et al., 2018; Stambulova et al., 2009; Wylleman & Lavallee, 2004). The current study extends this literature by documenting this gap specifically within a DII context and showing that stakeholders at multiple levels recognize the deficiency.

Understanding Feasibility: Barriers and Facilitators

While the strong demand for programming demonstrates that stakeholders see value in health-related transitional support, the feasibility findings help explain why such programs have not yet been implemented despite this widespread recognition. Athletic personnel identified three primary barriers: funding constraints ($n = 13$), personnel limitations ($n = 11$), and time availability ($n = 7$). These findings align with broader research on DII athletic department resource constraints (Hanson & Peachey, 2022) and reveal the tension between recognizing program value and having the capacity to implement it.

However, participants also identified existing infrastructure that could support program implementation. Athletic personnel mentioned Health, Exercise, and Sport faculty ($n = 6$), capstone courses ($n = 6$), personal health courses ($n = 4$), athletic training services ($n = 11$), and strength and conditioning programs ($n = 6$) as existing resources that health-related programming could integrate with or build upon. This is particularly important for feasibility because it suggests that effective programming might leverage existing services rather than creating entirely new structures, a

more sustainable approach given the resource constraints identified by stakeholders (Bowen et al., 2009).

Participants identified existing courses (e.g., Life and Career Planning, Personal Health) that could be adapted to integrate health-related content, which would help this athletic department, and other DII institutions like it, to overcome potential barriers like limited funding and personnel. Although financial constraints are often a challenge for DII programs (Hanson & Peachey, 2022), leveraging established courses offers a viable solution to incorporate health-focused components into the curriculum. This integration model reflects the collaborative, holistic approach characteristic of DII athletics' "Make it Yours" philosophy (NCAA, 2025).

Constraints to Program Implementation

The question of why such programs have not been implemented, despite widespread recognition of need, is answered by looking at the practical realities revealed in this study. The barrier is not lack of awareness or support, as both stakeholder groups strongly endorsed the importance of health-related transitional programming. Rather, the barriers are practical and structural: limited funding, insufficient personnel, and competing time demands, challenges commonly reported in DII athletic departments (Hanson & Peachey, 2022) and in feasibility-focused program development (Bowen et al., 2009). Athletic personnel are already stretched thin with existing responsibilities, and adding new programming without additional resources presents a significant challenge, particularly in resource-constrained athletic environments such as those typical of DII institutions (Hanson & Peachey, 2022).

Additionally, the finding that participants perceived the university as adequately providing career guidance but lacking in physical activity and health resources suggests a historical emphasis on certain aspects of the transition over others. This pattern aligns with previous observations that transitional programming has traditionally focused more heavily on career development while health-related components receive less attention (Petitpas et al., 1992; Reifsteck et al., 2018). The current study's documentation of this gap, combined with stakeholder endorsement of health-related programming, provides evidence that could support efforts to address these deficiencies.

Holistic Support and Interdisciplinary Collaboration

Collectively, these findings underscore a significant demand and need for transitional programs focused on holistic support, including career guidance, physical activity, mental health resources, and other services like financial and nutritional guidance. This holistic approach aligns with contemporary models of student-athlete development that emphasize the interconnection between physical, psychological, and social wellbeing (Stambulova et al., 2009; Wylleman & Lavallee, 2004) and reflects DII's emphasis on comprehensive student-athlete support (NCAA, 2025).

Findings also suggest that to be able to feasibly implement such transitional programming, there is a need for interdisciplinary collaboration across departments like student success, career services, wellness services, and alumni relations. This ap-

proach would ensure that transitional programs address the comprehensive needs of student-athletes, not just in terms of career but also their physical, psychological, and social well-being, consistent with holistic models of student-athlete development (Stambulova et al., 2009; Wylleman & Lavallee, 2004). Such collaboration also distributes implementation responsibilities across multiple units, potentially addressing the personnel and time constraints identified as barriers, and reflects the integrated, relationship-focused culture characteristic of DII institutions.

Division II Context

This study makes an important contribution by focusing specifically on DII student-athletes, a population that has been significantly under-researched compared to their DI counterparts (Beasley et al., 2021). The findings suggest that DII student-athletes face similar transitional challenges to those documented in DI populations: physical activity decline, identity loss, mental health concerns (Reifsteck et al., 2013; Simon & Docherty, 2014), but may have access to fewer formalized support resources (Hanson & Peachey, 2022; NCAA, 2025). However, the collaborative culture and existing infrastructure identified in this study suggest that DII institutions may be well-positioned to implement integrated, holistic programming that leverages existing resources. This approach may be more feasible and sustainable than resource-intensive standalone programs.

The identification of specific courses, personnel, and services that could support programming provides a concrete roadmap that other DII institutions facing similar resource constraints could adapt to their own contexts. While this study was conducted at a single institution, the barriers and facilitators identified likely resonate across DII athletics, where resource limitations are common but collaborative relationships and holistic support philosophies are central to institutional culture.

Limitations and Future Directions

This feasibility study reinforces the need for proactive transitional programs for student-athletes, aligning with previous research advocating for such initiatives (Lavallee et al., 1997). However, it uniquely highlights the specific needs of DII student-athletes, a group that has been under-researched. Despite a small sample size limited to one institution, the findings provide valuable insights into the feasibility of implementing a health-focused transition program in the DII context. The results indicate strong interest and commitment from both student-athletes and athletic personnel in supporting health-related transition programming.

Although the study's sample size was limited, it represented a significant portion of the athletic personnel at the university, suggesting that the athletic community is ready to embrace and support these types of programs. The positive findings from this sample provide a strong foundation for developing a health-promoting transition program, which could be applicable to other NCAA DII institutions facing similar challenges. By drawing on these insights, institutions can proactively implement evidence-based strategies that foster student-athlete well-being, personal growth, and a more supported transition beyond sport.

Looking forward, more research is needed to develop, implement, and evaluate specific health-related transitional programs for NCAA DII student-athletes. Focusing on resources for mental health and physical activity would be particularly of interest to student-athletes, and future studies should assess the effectiveness of these programs in enhancing their overall health-related transition experiences. The qualitative feedback from athletic personnel in this study also provides a foundation for future research examining implementation strategies and stakeholder perspectives on program design and sustainability within DII athletic environments. This will ensure that tailored resources are available to support their successful adjustment to life after sport.

Conclusion

In conclusion, while the university appears to provide strong career-related support for student-athletes, a gap remains in the provision of physical activity and health-related resources. This finding is particularly concerning given that 60% of former student-athletes in this sample did not meet recommended physical activity guidelines and over 80% reported difficulty maintaining physical activity after their competitive careers ended. This study contributes to the literature by providing needed evidence on DII student-athletes, a population that has been significantly under-researched compared to their DI counterparts. It documents both the demand for health-related transitional programming and the feasibility considerations that must be addressed for successful implementation. The identification of specific integration opportunities within existing courses, faculty expertise, and campus resources suggests that health-related transitional programming is both needed and feasible within resource-constrained DII environments. The current study provides an evidence-based foundation for such efforts and offers a roadmap that other DII institutions could adapt to their own contexts.

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