INTERNATIONAL JUDO FEDERATION

MENTAL HEALTH FRAMEWORK AND POLICY

Original version in English
Version 26 August 2026

Mental Health Policy and Framework

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Mandatory revision:	No
Recipient:	All those involved in the IJF and its affiliated structures
Qualification:	Unlimited distribution
Version:	1.0 (July 2026)
Validity:	Until withdrawn/modified
Number of attachments:	0
Issuing language:	English
Legally binding language version:	English

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Preamble

Judo, founded by Jigoro Kano, is a method of physical, intellectual and moral education aimed at the improvement of individuals and society. The principles of *seiryoku zenyo* (best use of energy) and *jita kyoei* (mutual welfare and benefit) form the foundation of all International Judo Federation (IJF) activities.

The IJF, as part of the Olympic Movement, recognises that the dignity, safety and wellbeing of all participants are fundamental rights. Mental health is an essential component of these rights and a prerequisite for safe participation, performance and positive long-term athlete development.

This policy builds upon and complements existing IJF frameworks, including, but not limited to:

- IJF Statutes (protection of dignity, safety and wellbeing).
- IJF Code of Ethics (respect, self-control, prohibition of harm).
- IJF Safeguarding Policy (protection from abuse and harm).
- IJF Sustainability Policy (health, wellbeing and social responsibility).

The IJF acknowledges its responsibility of care to ensure an environment that protects and promotes mental health across all levels of judo.

1. Introduction

The IJF is a not-for-profit organisation founded for an unlimited period of time and governed by Hungarian law.

The IJF is committed to creating a safe, respectful and supportive environment in which all participants can develop and perform. Mental health is recognised as equal in importance to physical health and is an integral component of athlete safety, wellbeing and performance.

2. Purpose of the Policy

This policy aims to:

- Protect participants from psychological harm.
- Promote mental wellbeing as part of performance and development, with mental health support being distinct from performance optimisation and prioritising wellbeing and safety.
- Reduce stigma and foster a culture where seeking help is recognised as a sign of strength.
- Ensure early recognition and appropriate response to mental health concerns.
- Establish clear procedures for support and emergency situations.
- Ensure access to qualified mental health professionals and clear care pathways.
- Prevent sport-specific risk factors in judo.
- Define roles and responsibilities across IJF structures.

The IJF provides support structures and facilitates access to care but does not replace the role of the healthcare systems or long-term therapeutic treatment.

3. Scope of the Policy

This policy applies to all individuals involved in IJF activities, including athletes, coaches, referees, medical staff, entourage, officials, IJF staff and event personnel.

It applies to all IJF-related environments such as competitions (Cadets, Juniors, Seniors and Veterans), training camps, educational programmes and travel and accommodation linked to IJF activities.

4. Definitions (see references)

- **Mental health**: A continuum of well-being in which individuals realise their personal potential, cope with normal stresses of sport and life, can work productively, contribute to the community, and function in daily life.
- **Mental health problem**: An umbrella term for any adverse thought, feeling, behaviour, or psychosomatic symptom that reduces an individual's state of full mental health, regardless of the cause. Mental health problems cover the spectrum from minor mental health symptoms to severe mental health disorders that are diagnosed according to clinical criteria like the DSM-5 or ICD-11.
- **Mental health emergency**: A situation involving an immediate risk to the health and/or safety of an athlete or others in the context of a disturbed mental state requiring urgent intervention.

5. Guiding Principles

- The IJF upholds respect for dignity and human rights as a fundamental principle.
- The policy adopts an athlete-centred approach that prioritises the wellbeing and needs of participants.
- The IJF acknowledges its responsibility of care to provide a safe and supportive environment.
- All mental health information must be handled confidentially, stored securely, and shared only on a need-to-know basis in accordance with applicable laws and safeguarding obligations.
- All actions should be guided by evidence-based practice.
- The IJF promotes early recognition of mental health concerns and timely intervention.
- Mental health support is integrated with existing safeguarding and medical systems.

Implementation of these guiding principles must consider cultural differences in attitudes towards mental health and help-seeking.

Any behaviour or practice that negatively impacts the mental health of participants is not tolerated. Athlete support personnel's behaviour must align with IJF values and must not create excessive psychological pressure or distress for athletes.

6. General and Judo-Specific Risk Factors

The IJF recognises specific risks within elite sports and judo, as mentioned below. These factors must be addressed through prevention, monitoring and support.

6.1 High-Performance Pressure in Judo as an Individual Sport

The IJF recognises that the individual and direct one-on-one nature of judo creates unique psychological pressure. Evidence indicates that individual sport athletes face a higher risk for mental health symptoms, such as depression, because failure is often internalised as a personal rather than shared responsibility.

Psychological strain is further intensified by external expectations from coaches, national federations, and the media, alongside extreme self-imposed standards. If unmanaged, these high-performance environments can lead to stress, anxiety, maladaptive perfectionism, and emotional exhaustion.

A healthy performance culture must balance competitive excellence with athlete wellbeing. The IJF is committed to prioritising long-term development, acknowledging that mental health is as critical to peak performance as physical fitness.

6.2 Weight Management

The IJF promotes safe and sustainable weight management practices. Rapid or extreme weight loss strategies that may negatively impact physical or mental health should be discouraged.

Recommended principles include:

- Education on safe weight management and nutrition.
- Avoidance of extreme dehydration practices.
- Monitoring of repeated or excessive weight fluctuations.
- Access to qualified support personnel (e.g. nutritionists, medical staff).

Weight management must not compromise athlete wellbeing, safety, or long-term health.

Existing IJF competition regulations, including random weigh-in controls, contribute to the prevention of extreme weight fluctuations and support athlete health and wellbeing.

6.3 Injury, Load and Recovery Culture

The IJF promotes a prevention-oriented performance culture that recognises the link between physical strain and mental health. Key principles include, among others:

- Encouraging early reporting of pain, overload or psychological distress.
- Avoiding normalisation of training or competing through injury when unsafe.
- Supporting adequate recovery, sleep and load management.
- Integrating psychological aspects into injury rehabilitation.

A healthy performance culture supports both physical and mental resilience. Adequate recovery time between contests, as defined in IJF Sport and Organisation Rules (**SOR**, **https://sor.ijf.org/**), supports both physical and mental recovery and must be respected.

6.4 Travel, Competition Load and Environment

The IJF recognises that frequent international travel and competition schedules may impact mental wellbeing.

Mitigation strategies include:

- Consideration of rest and recovery in scheduling.
- Awareness of jet lag, fatigue and environmental stressors.
- Support for athletes during prolonged competitions.

Competition structures and scheduling defined by the IJF **SOR** must consider athlete recovery, fatigue and psychological load.

6.5 Transition Phases for Elite Athletes

The IJF recognises that transitioning within competitive sport (e.g. into new age category) or out of sport is a major sport-specific stressor likely to induce mental health symptoms. These transitions, whether due to voluntary retirement, or involuntary factors like injury, represent a significant “discontinuity” in an athlete’s life that requires proactive management during their active career.

To protect mental wellbeing, athletes must be supported in developing a multi-faceted identity beyond sport. High levels of purely athletic identity are a primary risk factor for distress upon retirement; therefore, the IJF encourages athletes to pursue education, employment, and diverse social roles to ensure they do not feel “lost or disconnected” when they stop competing. Preparation should include life skills training, such as personal management and career services, to help athletes apply their unique skill sets in the outside world.

6.6 Pregnancy and Parenthood

The IJF recognises that pregnancy, parenthood and return to competitive sport after childbirth may present significant physical, emotional and psychological challenges for the concerned athlete.

Athletes should be supported in balancing elite sport with parenthood and family life, without stigma or unnecessary barriers to participation. Attention should be given to wellbeing during pregnancy, postpartum recovery, identity changes, sleep disruption and the transition back into training and competition.

The IJF supports evidence-based and health-oriented approaches to return to competition after pregnancy and refers to the “**IJF Guidance for Athletes Returning to Competition After Pregnancy**”.

7. Roles and Responsibilities

7.1 The responsibilities of the IJF Executive Committee

- Approving this policy and supporting implementation.
- Appointing a Mental Health Officer(s) within the IJF Medical Commission.
- Raising awareness of this policy across all participants of IJF activities.
- Providing leadership and resources.
- Acting as role models.
- Supporting media campaigns and media activities around the promotion of mental wellbeing and mental health when solicited.

7.2 The responsibilities of the IJF Medical Commission

- Overseeing clinical standards and pathways.
- Ensuring integration of mental health into medical services.
- Including a Mental Health Officer into their work.
- Promoting to nominate a Mental Health Officer in all continental unions.

7.3 The responsibilities of the IJF Mental Health Officer

- Annually reviewing, evaluating and updating this policy, if necessary, and on an ad hoc basis.
- Providing educational resources and training opportunities for stakeholders.
- Providing appropriate mental health awareness information for continental unions, national federations and the IJF Academy.

7.4 The responsibilities of the IJF Safeguarding Team

- Managing violence- and abuse-related concerns.
- Coordinating in cases involving risk or abuse.
- Clear referral and escalation pathways should exist where safeguarding concerns intersect with mental health risks.
- Working proactively together with the IJF Mental Health Officer at interfaces of both topics.

7.5 The responsibilities of the Event Organisers (Local Organising Committees)

- Implementing event-level requirements (see below).
- Ensuring communication around the event mental health emergency action plan.
- Ensuring appropriate location, minimum infrastructure, equipment and staffing and setup of Mind Dojos in line with the IJF Event Organisation Guide (EOG) standards.

7.6 The responsibilities of the IJF Member National Federations

- Defining and implementing their own policies adapted to their cultural background and in accordance with the applicable IJF policy.
- Providing cultural and age-appropriate mental health awareness training in coaches education, for medical staff and for athletes - trained to respond compassionately and effectively to mental health struggles.
- Preparing and maintaining up-to-date local resource lists with contact information for mental health professionals and support services.
- Connecting athletes, athlete support personnel and referees to mental health professionals if needed and provide or help to find funding within national structures for mental health treatment.
- Having a mental health emergency action plan for all national events.
- Including a qualified mental health professional within its medical structures or ensuring education in the field of mental health to their medical collaborators.

7.7 The responsibilities of the Coaches and Entourage

- Getting evidence-based training on mental health in elite sport.
- Supporting early recognition e.g. with recognised tools as Sport Mental Health Recognition Tool 1 (SMHRT-1).
- Referring mental health concerns appropriately.
- Avoiding behaviours that may create fear, humiliation, intimidation, or psychological harm.

7.8 The responsibilities of the Athletes

- Peer support plays a critical role and should be encouraged within teams and athlete communities.
- Athletes have the right to accept or decline support, unless there is a clear risk to themselves or others.
- Athlete ambassadors are encouraged to speak openly about mental health and to take an active role in prevention, awareness, education and stigma reduction initiatives. Athletes may contact the IJF Mental Health Officer, the IJF Safeguarding Officers, IJF Media Team or the IJF Athletes' Commission if they believe that sharing their experiences or story could positively support others.

8. Mental Health Management at IJF Events

8.1 Pre-Event Planning

There must be:

- A designated mental health contact.
- A defined referral procedure.
- Coordination between medical staff, mental health contact person and safeguarding officer.
- Confidentiality and data protection considerations should form part of all event planning and referral procedures.

8.2 Communication

Participants must be informed about available on-site and additional support in a clear and non-stigmatising manner. Mechanisms should be available for participants to raise concerns related to their mental wellbeing, including:

- Confidential reporting channels.
- Access to designated contact persons.

8.3 Implementation Framework for Events

To ensure global applicability across different contexts, the IJF defines three implementation levels. Event organisers should aim to progressively move towards higher implementation levels over time.

Bronze (Minimum Standard)

- Designated and trained mental health contact person on-site.
- Clear referral pathway to medical and safeguarding services.
- Access to a quiet space (not necessarily fully equipped) for confidential conversations.
- Basic communication (e.g. who to contact, where to go).

Silver (Intermediate Level - Grand Prix, Continental Championships)

All requirements of Bronze-level plus:

- Dedicated mental health space (basic setup with access to basic self-regulation tools (e.g. breathing cards, simple materials).
- Clear signposting throughout the venue (e.g. toilets, common areas) for mental health and safeguarding support.

Gold (Full Implementation - Olympic Games, World Championships, Masters, Grand Slam)

All requirements of Silver-level plus:

- Fully equipped Mind Dojo meeting operational standards with full set of equipment (relaxation areas, creative tools, ambient lighting, hydration, hygiene products) as written in the Mind Dojo Event Organisation Guide.
- Continuous staff presence (minimum two during peak times) with psychosocial or safeguarding background and specific training.
- Private consultation room near the Mind Dojo.
- Structured communication strategy (pre-event, on-site, and post-event).

9. Mental Health Emergency Action Plan (MHEAP)

There needs to be a MHEAP for all IJF events. Emergencies include situations such as:

- Suicidal ideation or behaviour.
- Acute severe distress or disorientation.
- Psychosis or severe behavioural disturbance.
- Risk to self or others.

The MHEAP displays the decision tree to support the recognition, management and disposition of an athlete presenting with signs and symptoms of mental distress.

Guidelines for the MHEAP are:
1. Ensure safety.
2. Do not leave the individual alone.
3. Inform the Mental Health Officer in charge.
4. If needed, contact medical professionals on-site for clinical decision-making and emergency services. In emergency situations involving immediate risk, confidentiality may be limited where necessary to protect the safety of the individual or others.
5. Initiate referral to appropriate local emergency services or medical facilities.
6. Where appropriate, continuity of care must be ensured through coordination with continental unions, national federations or designated healthcare providers.

10. Education and Capacity Building

The IJF commits to:
- Evidence-based practice based on the International Olympic Committee (IOC) consensus statement "Mental health in elite athletes" (2019) and further research.
- Mental health awareness training for coaches and medical staff with integration into certification systems.
- Awareness programmes for athletes.
- Education in mental health first aid for coaches and support staff.
- Athlete surveys on mental health needs and support.
- Evaluation of event-based initiatives (e.g. Mind Dojo usage and feedback).
- Collaboration with research institutions.
- Evaluation of effectiveness of interventions.
- Development of evidence-based best practices.

Athletes are encouraged to use available international resources, including:
- IOC Athlete365 mental health learning and support tools.
- Confidential helplines (like IOC Mentally Fit Helpline) and counselling services where available.

References

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