GLOBALIZATION is here and continues to accelerate by the day. The international opportunities available to clinicians, faculty, and students continue to expand, so international journals are an important avenue for increased communication by sharing scientific and clinical knowledge. Forums such as these clearly indicate that athletic trainers and therapists work in a global environment. But how did we get here and where do we go from here?

That Was Then

Interest in the international athletic training and therapy community began in North America with the creation of the NATA International Committee under the presidency of Denny Miller in 1993 and formation of the CAT A International Relations Committee, also in the 1990s. As athletic trainers and therapists continued to travel and work in the international sports arena, common themes began to emerge. In 1998, NATA President, Kent Falb, added to the international endeavors of the NATA committee by appointing a task force to determine the status of the athletic training profession internationally. In addition, the group was tasked with the investigation of the feasibility of global education and credentialing programs, and they were asked to answer three questions:

1. What was the current status of athletic training education in the world?
2. Is there a systematic method of international education for athletic training?
3. Could an international system of credentialing athletic training professionals be developed?

The group worked with a global team of experts in the collection and analysis of data for two years. Health care leaders from around the world participated in the initial World Congress meeting and several other sessions to discuss conceptual issues and develop an action plan. At that time, it was determined that the profession of athletic training did not exist globally. While the USA and Canada had athletic trainers and athletic therapists that were similar in competencies and education, it was found that in other areas of the world, athletes and physically active individuals were treated by a myriad of health care practitioners, including physical therapists, nurses, emergency medical technicians, massage therapists, and coaches. Another finding was that other countries used a different structure for post-secondary educational programs, and it would be difficult to develop and implement a global education program due to governmental and political barriers. The formation of a global organization to promote information dissemination between health care professionals was indicated, however.

The World Federation of Athletic Training and Therapy (WFATT) was created in 2000 with seven charter member organizations. Since that time, the WFATT has successfully managed several World Congresses hosted by member organizations in the United States in 2001, Canada in 2003, the United Kingdom in 2005, Japan in 2007, USA in 2009, and with Canada to host the next World Congress in Banff in May 2011 (http://conference.athletictherapy.org/). Italy will host the Congress in 2013.

In answer to this interest, and working with member organizations, the WFATT has launched two major initiatives to further expand the knowledge and understanding of the profession. The mutual recognition arrangement (MRA) between the Board of
Certification (BOC) and the Canadian Athletic Therapists Association (CATA) was signed in 2005. The MRA included a multiyear, intensive review of organizations, whereby both groups (BOC and CATA) evaluated the educational and credentialing processes to identify the similarities and differences between countries. After extensive examination, it was determined that the educational and credentialing processes were similar enough to support the signing of the MRA. The MRA enables clinicians credentialed in their home country to be eligible for examination and certification in another country. Ireland and Taiwan have been performing a study of their systems for possible entrance into a MRA.

The second initiative that continues is the investigation of a global practice analysis, a method to define the specific roles and responsibilities of the athletic trainer and therapist in a global health care community. The initial development of the research instrument brought together experts from South Africa, Canada, Spain, Japan, United States, and United Kingdom to prepare the blueprint for the global practice analysis. The WFATT continues in the second phase of data collection and requires expansion of the number of countries providing data.

This Is Now

As part of the 2009 WFATT World Congress, an International Educational Summit was held. Each nation presented their educational and credentialing model along with future goals and opportunities. While in 2000 it did not seem possible to establish a global educational system, in 2010 this notion does not seem unattainable as countries and organizations continue to share this interest and work together. As previously stated, a common core body of knowledge is essential in defining the profession. Then each country/region could develop additional education competencies specific to that region or country. It will be interesting to watch this idea develop and evolve in the coming years.

An additional response to the sustained interest in the globalization of the athletic training and athletic therapy profession is that the BOC and WFATT have assembled the Task Force on Global Credentialing with the purpose of investigating whether a global credential is possible. Under the leadership of Task Force Chairperson, Dexter Nelson, from the CATA, leaders from around the world again assembled for a multiday conference and began the investigation of the complex issues inherent in this “simple question.” In an attempt to develop a workable international process, and as a first step in this investigation, the Task Force is formulating a global ethics document for use by all health care providers for physically active individuals to use in their practice around the world. This process is being led by Alexandro Falcioni of the Federation of International Fisotherapists (FIF), an Italian WFATT member organization. The goal is to have a draft document to present at the WFATT World Congress in Banff (May 2011) for review by all international attendees. Another goal of the Educational Task Force is to continue to collect more data to establish the global practice standards for the profession. The current database is primarily information from North America, and more data is needed to represent the international community and more realistically reflect global practice and develop an international standard.

So Where Are We Now?

As the BOC expands, the above initiatives and WFATT continue to work with member organizations to meet member needs. Many countries have taken steps to develop and implement educational programs for athletic trainers and athletic therapists. While the professionals that are educated may have different names, the content and competencies appear to have similar components. Further, these professionals have the common goal to provide the best health care for their patients. The global trend toward similar educational components will most likely continue as communication and program exchange opportunities escalate in number. The momentum of globalization continues to accelerate, expanding the educational opportunities and propelling the profession to greater heights of achievement.

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