Strategies for Athletic Trainers to Find a Balanced Lifestyle Across Clinical Settings

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Work-life balance has become a central issue in the U.S. Americans work longer hours and experience more work-family conflict than people in other industrialized countries. Moreover, work-family conflict does not discriminate between economic levels; it affects individuals in all job settings, especially those in health professions, including physicians and athletic trainers. The long hours and the demands associated with patient care have been reported as factors influencing work-life balance for physicians as well as athletic trainers. Work-family conflict has become an increasing concern, particularly due to its impact on retention. In athletic training, work-family conflict has been documented in the collegiate, secondary school, and clinical rehabilitation settings, and it is often referred to as lack of harmony between work, home, and personal life. The NATA has established quality of life as a component of its strategic plan, illustrating its importance in the field.

Long work hours are seemingly the major catalyst for consideration of career change among athletic training preprofessionals and professionals, as work responsibilities limit the time available for personal interests and family activities. Dodge et al. and Maze-rolle et al. identified limited time for family and parenting as a reason for many athletic training students choosing to abandon their undergraduate studies in athletic training for pursuit of a more family-friendly career. This is consistent with the literature examining athletic trainers employed at the collegiate level, which found that female athletic trainers leave their positions in order to find more time to meet their family needs. Similarly, female physicians desire a work schedule that provides more time for parenting and family responsibilities. Although professional attrition is less for female physicians than athletic trainers, many female physicians select part-time hours to find a work-life balance. Male athletic trainers appear to make a setting change later in life to find a more balanced lifestyle, which often includes a shift to the rehabilitation setting or secondary school setting.

Recognizing the critical link between work hours, life balance, and retention, many
athletic training scholars have investigated ways to improve the quality of life for the athletic trainer. For example, time management, prioritization of daily responsibilities, support systems, and workplace policies have been identified as important factors that affect life balance for the athletic trainer, which are also important to physicians, nurses, and midwives. The feasibility for implementation of favorable policies and programs, however, is dependent on the organizational structure of the workplace and the philosophy of key supervisors and administrators. Administrative support and work-life balance philosophy have been identified as fundamental to an individual’s positive perception of his or her working conditions. Furthermore, supervisors who share the same professional role and family values as their work colleagues have been found to ease conflicts between work and life obligations, because they are more accepting of the personal or family needs of staff members.

The organizational structure of the workplace has also been identified as an important factor affecting work-life balance. Policies relating to family leave, childcare options, and flexibility with work schedules need to be structured in a manner that will allow for fulfillment of both work responsibilities and family needs. An organizational culture that provides a supportive infrastructure is a critical factor that minimizes conflicts between professional and personal obligations. Until recently, a majority of the literature pertaining to work and life balance in the athletic training profession has been focused on the collegiate setting, which is often associated with a demanding work schedule that creates a major catalyst for conflicts. Many athletic trainers may argue that a career in any work setting is demanding, because many positions demand long hours and present inflexible work schedules. A better understanding now exists regarding the demands of the secondary school setting as well as those presented in the rehabilitation clinic setting.

Because the roles and responsibilities of athletic trainers vary among employment settings, a work-life balance strategy that may work at the collegiate setting may not be feasible in the secondary school setting. A strategy utilized by an athletic trainer in the clinical rehabilitation setting may be useful for an athletic trainer in the collegiate setting, but it has never been considered a possibility. The purpose of this review was to synthesize the existing literature on successful strategies for promotion of work-life balance across employment settings for athletic trainers.

**Procedures and Findings**

We searched Medline and CINAHL using the following search terms: (a) work-family conflict, (b) athletic training, and (c) work-life balance. We included studies that utilized cross-sectional surveys and other qualitative methods. Of the five studies included in this review (Table 1), two utilized a mixed methods approach, two were qualitative investigations, and one utilized a survey instrument with open-ended questions.

Three strategies were identified for attainment of work-life balance across employment settings: Two strategies were identified that are specific to a nontraditional clinical setting and one that was specific to the traditional setting (Figure 1). Our operational definition of nontraditional clinical setting refers to the clinical rehabilitation setting, which can include clinic outreach to athletic programs or clinic duties only, whereas we defined the traditional clinical setting as either a collegiate and secondary school setting. Table 2 provides supporting data for each identified strategy for promotion of work-life balance.

**Work-Life Balance Strategies Common to all Work Settings**

Establishing boundaries, creating personal time, a support network, and separation have been consistently reported in the literature as effective strategies to promote a balanced lifestyle. In essence, boundaries refer to creation of a relatively stable work schedule and acquisition of some control over work hours. Balance was achieved by learning to say “no” to additional responsibilities at work, instituting off-season medical coverage, and developing established treatment hours. Lack of control and inflexible scheduling often leads to work-life conflict.

Finding the time to get away from the athletic training professional role was very important. Prioritizing personal time (e.g., scheduling workout time or time away from the office) was identified as an important stress reduction strategy. Time management and protecting personal time was reported by both Kahanov et al. and Mazerolle et al. as a key for realization of a balanced lifestyle.

Support systems and a cohesive work environment were identified as fundamental factors for athletic trainer success in multiple roles, such as clinician,