Athletic training services are typically delivered by personnel administratively assigned to an athletic department. A high percentage of ATs consider leaving the profession due to poor salary, heavy workload, and lack of time for family. Stress scores ≥ 39:

Responses analyzed
Traditional model (TM) n = 23; Medical model (MM) n = 21

Results compared to unsolicited responses to the same survey posted by ICSM; ATs who work in the TM setting are less likely to report job satisfaction than those who work in the MM setting.

Laursen
Minimizes conflict of interest, with patient care decisions based upon an athlete's medical needs

AT role and job security would likely be

Years of experience responses were more evenly distributed within TM

Most frequent hours/week response was greater for TM

Most frequent salary range response (unadjusted for cost of living) lower for TM

Increases compensation for ATs, elevates quality of patient care, and improves work satisfaction, work behavior.

The results of this study strongly support a transition from TM to MM for improved job satisfaction.

Clinical Relevance

ATS who work in the TM setting are less likely to report job satisfaction than those who work in the MM setting.

- May be due to longer working hours and lower salaries, unrelated to years of professional experience
- Survey responses suggest greater professional respect and more desirable work-life balance among MM-ATS
- Large divergence in survey responses between MM-ATS and TM-ATS in relation to specific job stressors
- Rapid-program changes (time, schedule)
- Job requires nonsensical/irrational tasks
- Get angry or irritated easily
- Feel overwhelmed
- Lack funds to accomplish objectives

The results of this study strongly support a transition from TM to MM for improved job satisfaction.

- Sharing of clinical duties may decrease
- Clinical duties may decrease
- Athlete stress score (43.65) significantly greater than mean MM-AT score (32.43); t(42) = 2.96; P < 0.005

Stress score ≥ 39:

• Greater proportion of TM-AT reported job dissatisfaction compared to MM-AT (Figure 3)
• Most frequent hours/week response was greater for TM-AT than MM-AT (Table 2)
• Years of experience responses were more evenly distributed within TM-AT than MM-AT (Table 4)

ATS in relation to specific job stressors

Table 2

Annual Salary ($) Traditional Medical
30-49K 66% (15/23) 5% (1/21)
50-69K 26% (6/23) 52% (11/21)
70-99K 4% (1/23) 14% (3/21)

Table 3

Hours Worked/Week
Traditional Medical
≤50 95% (22/23) 62% (13/21)
≥50 5% (1/23) 38% (8/21)

Table 4

Years in the Profession
Traditional Medical
0 to 5 22% (5/23) 33% (7/21)
6 to 10 26% (6/23) 24% (5/21)
11+ 26% (6/23) 38% (8/21)

Figure 1: Stress Scores (0-100) Comparison

Figure 2: Average Stress Score

Figure 3: Frequency of “Satisfied” Response

Satisfied, Very Satisfied, Extremely Satisfied

REFERENCE


