

Athletic Training Student Socialization Part I: Socializing Students in Undergraduate Athletic Training Programs

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Context: Professional socialization is a key process in the professional development of athletic training students. The published athletic training education research has focused on many perspectives regarding socialization; however, it has yet to investigate the program director's (PD's) opinion.

Objective: To gain insights from the PD on methods used to socialize students into the athletic training program and profession.

Design: Qualitative study.

Setting: One-on-one telephone interviews.

Patients or Other Participants: A total of 16 PDs at accredited undergraduate athletic training programs volunteered for our study. Our participants had, on average, 6 ± 4 years of experience in the role of the PD, and they were 44 ± 8 years old.

Data Collection and Analysis: We conducted one-on-one phone interviews, which we transcribed verbatim. We performed a general inductive analysis of the data and completed member checks, multiple analyst triangulation, and peer review to establish data and methodological credibility.

Results: Two major themes emerged regarding the socialization process used by athletic training programs: *formal* and *informal* processes. The formal processes can be categorized into 5 distinctive methods, including (1) an introductory course to athletic training that often includes observation hours, (2) orientation sessions, (3) student handbooks, (4) athletic training student club activities, and (5) organized peer mentoring programs. The informal processes can be classified by 2 distinct practices: (1) social outings and (2) mentoring or peer groups.

Conclusions: The use of formal training sessions emerged as a popular method with which to socialize athletic training students into their impending role, particularly because these sessions allow for effective communication regarding program expectations and methods with which to be successful. In addition, an opportunity to gain a realistic impression of the role of the athletic trainer is necessary for successful role inductance and again permeates all aspects of athletic training.

Key Words: Mentorship, formal training, professionalism

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Introduction

Preprofessional athletic training students (ATSS) are initially drawn to a career in athletic training as a result of an interest in medicine, a sports-oriented and team-oriented atmosphere, and mentoring received from a high school athletic trainer (AT).¹ This initial exposure, or inductance, is often referred to as *anticipatory socialization*,² whereby an individual explores or gains knowledge about a particular role he or she is interested in pursuing by gaining firsthand or personal experience. Anticipatory socialization is often very informal and involves observation and/or mentoring from an individual serving in that role, such as the high school AT providing medical care to the injured athlete.³ This interaction can lead to interest and pursuit of a career in athletic training. The informal inductance to the role of the AT before educational training can often lead to an incomplete understanding of the role and career of the AT as well as of the expectations of the student enrolled in a degree program.^{1,4} The most common method for achieving informal inductance is often a sports medicine experience, such as daily interactions with a high school AT based on an interest in sports or an injury sustained during high school competition.¹ These interactions, however, may provide limited contact or exposure to the profession, as they often capture only a small portrait of the complexities associated with the role of the AT.

Proper and early socialization has been suggested as a means by which to help the ATS gain a full appreciation of the professional responsibilities of the AT as well as to learn about the diversity offered in clinical employment settings.⁵ Despite the positive benefits of early socialization, this technique is often one-dimensional and includes mentoring received during a high school experience or through a standard period of general observation conducted at the host institution of the athletic training program. Many potential preprofessional ATSS are drawn to athletic training because of an interest in sports, health care, and personal experiences with an athletic injury or a high school AT.¹ Consequently, the preprofessional ATS makes a decision to pursue the educational training to become an AT without a clear understanding of the complexity of the role or the demands possibly associated with different athletic training clinical settings.

After an initial inductance into the professional role, an individual often undergoes formal educational training to acquire the attitudes, knowledge, skills, and behaviors related to his or her intended role, a process often referred to as *professional socialization*. Fundamental to this process for the ATS is the time spent in a Commission on Accreditation of Athletic Training Education (CAATE)-accredited athletic training program. This experience involves both academic and clinical training, in which the mentorship received is paramount to the ATS's development. To date, and because of the documented importance of time spent in the clinical education setting, a majority of the empirical literature has focused on the professional socialization of the ATS while he

or she is engaged in a clinical setting.⁶ Klossner⁷ reported that the ATS values the opportunity to gain affirmation in his or her clinical abilities and being acknowledged as a professional, which is accomplished in the clinical setting by individuals such as preceptors, peers, coaches, and athletes. Furthermore, formal role preparation, which involves hands-on learning, is a necessary socializing agent for the ATS as it allows for the development of confidence and understanding of the role of the AT.³

Without question, the clinical education setting allows for the ATS to gain valuable knowledge and experiences regarding the profession and the critical decision-making skills necessary to succeed professionally.⁷ Just as important as the practitioner's clinical skills are the professional behaviors and attitudes of the AT, which the ATS must also develop. Although this occurs in the clinical setting, the discussion of appropriate behaviors often begins in the classroom and early in the educational training for the ATS, most likely in an introductory course or orientation session. As the result of a limited understanding of the role that the athletic training program plays in integrating the student into the culture of athletic training, our purpose was to uncover the socialization tactics used by the faculty of athletic training programs. Specifically, the purpose of our study was to understand how athletic training programs educate their students on program and professional expectations. As Klossner⁷ suggested, athletic training programs should make efforts to familiarize the student with program goals and expectations, which may coincide with professional expectations and responsibilities. Gaining this knowledge will help provide a more holistic understanding of the anticipatory socialization process, particularly if it is from a programmatic standpoint rather than just from the ATS perspective.

METHODS

Participants

A total of 16 program directors (PDs) at undergraduate CAATE-accredited athletic training programs volunteered for our study. After a criterion sampling procedure,⁸ we recruited PDs via e-mail to participate in the study. We selected the role of the PD because of their role in programmatic administrative and supervisory tasks, the expectation of the PD to have knowledge regarding current educational practices, as well as because of the current literature regarding clinical education.

Our participants had, on average, 6 ± 4 years of experience in the role of the PD and were 44 ± 8 years old. We had even participation from each sex, with 8 females and 8 males participating. Four (25%) of the PDs were at research-level institutions, 6 (37.5%) were at master's-level institutions, and 6 (37.5%) were at baccalaureate-level institutions. The Table provides additional descriptions of the colleges and universities represented in our study. The participants lead athletic training programs that enrolled 37 ± 28 ATSS.

Table. Institution Demographic Information

	n	%
Carnegie classification		
Research	4	25
Master's	6	37.5
Baccalaureate	6	37.5
Enrollment		
1000–3000	8	50
3000–5000	2	12.5
5000–10 000	3	18.8
10 000–20 000	3	18.8
Institution type		
Public	4	25
Private, nonreligious	3	18.8
Private, religious	9	56.3
Athletic affiliation		
NCAA Division I	4	35
NCAA Division II	5	31.3
NCAA Division III	7	43.8

Data Collection

After we secured institutional review board approval, we sent an e-mail to 19 randomly selected PDs of undergraduate athletic training programs across the United States to seek their participation in our study. We scheduled audio-recorded, semistructured telephone interviews with those PDs who were interested in participating. We chose to use telephone interviews as the participants came from a broad geographic area, and we wanted the ability to prompt participants for additional information or ask follow-up questions to add to the robustness of the data. Before the telephone interview, the participants faxed a signed informed consent agreement to the secondary author. The secondary author completed all of the interviews, which lasted approximately 30 minutes apiece. We pilot tested the questions on 3 separate occasions with athletic training faculty to improve content and clarity. We finalized the questions when we received no new suggestions for improvement. We allowed data saturation to guide recruitment by reviewing the interview recordings continuously throughout data collection, and we terminated recruitment when no new themes emerged. At the conclusion of data collection, we had the interviews transcribed verbatim using pseudonyms, and we removed other identifying information to facilitate data analysis while maintaining the confidentiality of our participants.

Data Analysis

Existing literature and the research questions helped guide the general inductive coding process we followed during analysis. The general inductive approach, as described by Thomas,⁹ is a very logical, purposeful, and efficient means by which to evaluate raw data, particularly when one is concerned with determining the prevailing themes, which relate to the research objectives of the study. We grounded our analysis process in continual readings of the transcripts to identify the common topics emerging from the data. To help organize the data, we wrote notes, called *memos*, as we read the transcripts. We used the memoing strategy, which simply required journaling small notes in the margins of the transcripts, to help record repetitive findings within the transcripts and to help verbalize the analytical process. Our field notes aided us in formulating

the final categories as they related to the research agenda. During the first read of the transcripts, we did not assign labels to the data; however, we assigned labels to the raw data on the two subsequent reads. We then assessed the labels to determine redundancy. Specifically, we assessed which labels could be grouped together versus those that would remain seceded. We included in the final codes only those themes that we determined to be predominant and that spoke to the research question.

Credibility Strategies

We completed member checks, multiple analyst triangulation, and peer review to establish data and methodological credibility. Member checks are one of the most common methods used in qualitative methods to secure trustworthiness.⁸ We completed member checks before analysis by having 2 randomly selected PDs review their transcribed interviews for accuracy and consistency. Multiple analyst triangulation was completed by the 2 lead authors, who independently coded the data following the same procedures as outlined above. After the independent data analysis, we negotiated on the coding scheme until we achieved complete agreement on the final categories. We used a peer to confirm the findings that were agreed upon by the first 2 authors. The peer was provided the coding sheets, transcripts, and the themes, as determined by the analysis process. The peer, an AT and scholar with educational training in qualitative methods, was in agreement with the analysis and presentation of the results.

RESULTS

Two major themes emerged regarding the socialization process used by athletic training programs: *formal* and *informal* processes. The themes presented materialized from questions including (1) “How are students socialized into your program?”; (2) “When does the socialization process begin?”; (3) “Can you give some specific examples?”; (4) “How are the expectations that your program has for students explained to them?”; and (5) “Can you give some examples of that?” The formal processes or methods can be categorized into 5 distinctive methods, including (1) an introductory course to athletic training, which often includes observation hours; (2) orientation sessions; (3) student handbooks; (4) athletic training student club activities; and (5) organized peer mentoring programs. The informal processes can be classified by 2 distinct practices: (1) social outings and (2) mentoring or peer groups. One theme, as illustrated in the Figure, transcends both informal and formal processes. Each theme is defined and supported by participant quotes in the following sections.

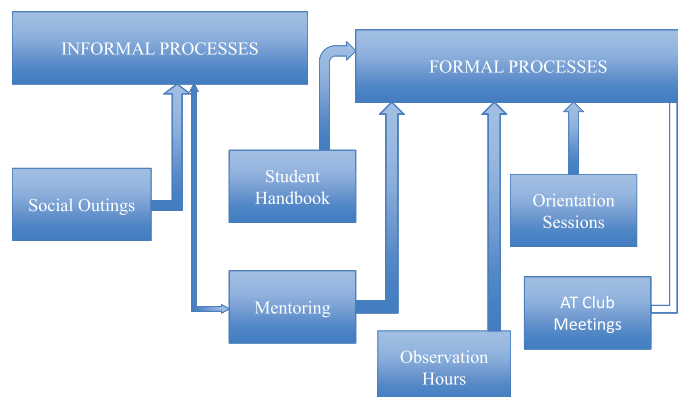
Formal Processes

Formal socialization occurred during planned and structured activities facilitated and moderated by athletic training program faculty. The purpose of those activities was to integrate the ATS into the roles and expectations of the athletic training program and profession. Each of the processes is outlined next.

Introductory Course/Observation Hours. The majority of our participants noted that introductory coursework helped socialize students to the AT profession. One PD shared how his ATSs were initially introduced to the profession.

Figure. Two major themes emerged regarding the socialization process used by athletic training programs.

Orientation to the AT Profession and ATP Program Director Perspective



Our students take an introduction to athletic training/sports medicine class during their first year. It is a required course to apply to our program. And during that class they must complete 50 contact hours with the athletic training program on campus.

This was a similar process for another athletic training program, as discussed by this PD:

It [the socialization process] really all starts in the fall of their sophomore year. They take an introduction to athletic training class. During that class they have a lot of history of athletic training and talking about what athletic trainers are and what they do. And then, as a requirement for that class, they have to do observation hours, like 2 hours per week. It is a pretty minimal requirement [hours wise] I [personally] think, but enough to get them to see what they do and what athletic training is about at our institution.

The use of an observation period to help acclimate the student to the profession was also discussed by a majority of the PDs. This period was considered minimal but lengthy enough to expose the ATS to the roles of the AT in the clinical setting. Take, for example, this PD's comment regarding the early socialization of the ATS:

We try to get people [pre-athletic training students] in during the freshman year. That way they could spend more time in the [athletic] training clinic, find out if they like it or if they do not like it.

Similar comments were made by other PDs, which included, "they do the typical observation or shadowing for hours"; "they do the observations in the athletic training clinic"; and "they perform observation hours." The observation period was most often a requirement for admission into the athletic training program, which was a part of the secondary application process and/or a part of an introduction to athletic training course.

In summary, this cohort of PDs communicated that formal socialization into the athletic training education process is

facilitated by an introduction to athletic training course and observation hours. They believed the activities helped familiarize the ATS with the history of the profession, and the activities gave the ATS firsthand experience with the duties of the athletic trainer.

Orientation Sessions. Many of the PDs spoke about formal orientation sessions held to familiarize the student with athletic training program policies and procedures as well as an introduction to the athletic training profession. For example, one athletic training program used a meeting before the start of the semester to discuss the program's requirements and professional responsibilities. The PD said, "We do an orientation just with those new incoming students on a Friday, before school starts." This process of integrating the new students into the athletic training program during an orientation before the beginning of school was commonplace, but it was particularly common for smaller institutions with direct admission into the athletic training program, as noted by this PD:

Every student coming into our school has to come to orientation. [During] their orientation, they meet with the PD and the clinical education coordinator. We sit them down and we tell them what the athletic training program is about from the academic rigors as well as hands-on time. We do an additional orientation when they [officially] start.

Another PD shared a similar means by which to orient the underclass students by using a welcome to campus/orientation session:

It starts from the first month that our freshmen come in [to campus]. We hold a beginning-of-the-year welcome session to [institution name] and welcome to the athletic training program for students. We want them to become socially comfortable in a professional way.

Another PD discussed using an orientation session in combination with early advising sessions to socialize the students.

Students are actually socialized into our program from day 1, when they get on campus. We actually make contact with all of our incoming students prior to their arrival here on campus, through e-mail or a phone call or something. Once they get here, they take an orientation [session] regarding athletic training.

Orientation sessions provided the PD and athletic training programs the chance to explain the role of the AT and the expectations of the program. They were often conducted as a formal induction into the program and as a means by which to educate the student on all aspects of the program and background information of the profession. We did not gather data regarding how athletic training programs conducted their orientation sessions (eg, how long each session lasted); however, it appears as though the structure of these sessions was one means by which to formally socialize the ATS.

Student Handbooks. The use of a student handbook, which contained program expectations and policies, was used as a means to educate the student on the athletic training

program. When asked to discuss methods to socialize their ATSs, many PDs spoke of the use of a student handbook. One PD simply said, “We have our athletic training student handbook, and so that has information in it [about our program].” Comparably, another PD discussed that

The first thing that happens is in the preseason when we pull out the updated athletic training student handbook. Each person is given a new copy and we go through each section, highlighting the updates.

When discussing the socialization process and explaining program expectations, other PDs also referenced the use of their student handbooks. A common response was summed up by one PD, who stated, “We have a student handbook [for giving that information].” The student handbook was a formal method used by our PDs to provide specific program policies and expectations. As one PD stated,

And the first thing that happens in the preseason review is we actually pull out the updated athletic training handbook, student handbook. And each student is given a new copy and they [our students] have to [review and understand our policies] before we even start every year, they need to know what we expect of them.

This quote speaks to a tactic to ensure compliance and understanding.

Athletic Training Student Club Activity. Many PDs capitalized on student club meetings as a way to socialize the ATS into the athletic training profession and program. One said, “we really get them [underclass athletic training students] more involved with the program/students by bringing them into the athletic training student club meetings.” Another PD also felt involvement with the athletic training student organization was a great method with which to socialize the ATS. This individual stated, “we get them engaged early in our sports medicine [student] club within the first week they are on campus.”

Several other PDs shared similar sentiments regarding the use of the student organization, as it encouraged peer socialization, which was believed to help acquaint the student with the professional program. One PD said,

The sophomore year is when they are invited [or eligible] to participate in our student athletic training organization. We try to socialize them a lot with athletic training activities as sophomores.

Several PDs discussed using the athletic training student organization as a means to socially integrate the ATS into the program. The social integration was structured, often preplanned, and involved both student members and athletic training program faculty or preceptors. The integration helped promote program and professional commitment.

Organized Peer Mentoring. Mentoring is a very important socializing tool, as it allows for observation of the modeling of appropriate behaviors, attitudes, and skills of the professional.³ In the case of the ATS, peer mentor programs were viewed as helpful in the socialization process. Many of

the PDs discussed the use of mentorship as essential in facilitating integration into their professional program. Several of the PDs discussed being more formal with their mentor programs, such as taking control of making peer assignments each semester. For example, one PD detailed the mentor program as follows:

I assign them to an upper-class student, not necessarily to a preceptor or a site, but obviously that student is assigned to a site and a preceptor. So they're really shadowing the student just as much as they're shadowing the preceptor. And so there's a bit of socialization there. They start to make that connection. And on a given semester, they will do 3 rotations. So if a student comes in from day 1 in the fall as a freshman, that student will be under 3 different upper-class students during the fall semester and then 3 different upper class students in the spring.

Another PD admitted to just having begun a mentor program to help the socialization process for the ATS:

This past year was the first time when we started the student mentor program, where we assign an upper-level student and a younger student—during their observation times, they would kind of shadow that particular student.

Informal Processes

Informal socialization may occur during unplanned or unintentional activities, which allow for an individual to learn the specific behaviors, skills, or attitudes related to his or her role. In this case, informal socialization occurred in a social context, which allowed for the ATS to develop personal relationships among peers, faculty, and clinical staff. The PDs discussed 2 main ways in which their ATSs were informally socialized, which, as previously presented, included social outings/activities and mentoring.

Social Outings. Peer groups that have common interests and consist of individuals of similar age can be powerful socializing agents. Many of the PDs discussed a variety of informal activities designed to sponsor an athletic training community. One PD said the following:

They go bowling and they play paintball. They do those kinds of things. They actually had a party the other night where they dressed up as their favorite staff person. I wasn't there, but I've seen some pictures. It was pretty funny. That's important for our program, I think. They spend so much time together in the same kind of environment that they need to integrate as people outside of work as well.

A different PD discussed adding more “fun” and “social” activities as a means to integrate the ATSs into the athletic training community.

But lately, what we've been doing—like I said, we tried to—we do a lot of fun types of things. We have a beginning-of-the-year picnic, and that's mainly for the juniors and seniors.

Another PD spoke about being involved with the social activity as a way for the faculty and preceptors to be involved

in the socialization process by allowing the ATSs to get to know them personally. He said,

But we play intramural sports with the students. We have an athletic training team. And sometimes we have 2 teams, and that kind of gets—when they see that student A's playing or student B's playing, or [AT's name] playing—who's one of the certified staff members—or [AT faculty name] is playing, they kind of like that. Sometimes we're the only faculty playing. I think that that helps. And then also too, in a way, I think the kids really appreciate the fact that I've [gotten involved].

Another PD mentioned involving program faculty and preceptors as a way to allow the ATS to get to know everyone involved in the program outside of the daily grind of athletic training responsibilities. They shared,

We usually try to go have something fun where we invite everyone to come. This past year it was bowling, so we took them out for burgers and then we all went bowling. And so some of our staff came, most of our upper-class students came to that.

Activities not involving athletic training duties may afford PDs and athletic training programs a means to informally socialize the ATS into the program, as they foster personal development and communication skills.

Peer Mentoring. While some programs provided structure to their mentor programs, others allowed the students the chance to organize the peer program. When student driven, the mentoring program took on a more informal means by which to accomplish the socialization of the ATS. The peer mentor groups were facilitated by the students, typically the upper-class students, as a means to help the underclass students feel more comfortable regarding the athletic training program's expectations and demands placed on the student. Unlike the more formal mentoring, the student-driven mentoring programs were void of consistent faculty interactions. For example, this PD discussed being removed from the mentor program:

They [our students] run a mentor program and it is strictly student led. We found that it was best that the professionals just kind of stay out of it unless there is some kind of conflict There is a small group of students who actually run this program and it changes every year.

Another PD shared the importance of integrating the younger students with the upper-level students early on. The PD assessed the program as informal in comparison to the more formalized mentorship programs previously discussed. The PD said,

We get our new students involved right away with our upper-class students. We typically partner a new student with 1 or 2 upper-class students—nothing that's very formal, where they have to meet once a week or anything, but just here's a person you can really go to if you have any questions or needs. Not that they can't go to anybody else, but try to give them somebody, maybe, that they might feel a little more comfortable with going.

Although PDs created an initial mentor assignment, they describe taking a backseat role to let the students facilitate the program in these examples. Mentor programs between upper-level and lower-level students allowed the ATS to gain some form of role inductance.

DISCUSSION

Although a complex and lengthy process, socialization is necessary for the development of the athletic training professional. Much like the existing literature among other health-care providers¹⁰ and athletic trainers,^{3,11} the process begins before formal entry into an education program and often includes formal and informal processes. Our investigation of academic socialization for the ATS from a programmatic standpoint revealed a blend of structured, planned activities coupled with amorphous and fun activities as ways to introduce the ATS to the profession and the roles and attitudes required. Specifically, athletic training programs formally socialize their ATSs by using processes such as academic and clinical mentoring, introductory courses and observation hours, orientation sessions, student club activities, and student handbooks. Informally, the athletic training programs encourage social activities and student-driven peer mentoring as ways to facilitate role learning.

Formal Processes

Our findings align with the previous body of literature on the topic of socialization in athletic training.^{11,12} Specifically, there is a need for a formal mechanism to train and educate an individual during his or her initial introduction to the role she will assume. Common tactics to provide formal training to a new employee or recruit include orientation sessions or workshops designed to familiarize the individual to the expectations, responsibilities, and values associated with her position.¹³ Formal orientation sessions have been long revered as an effective means with which to communicate a company's policies, performance expectations, and expected behaviors.¹³ Likewise, athletic training programs use orientation sessions and student handbooks as a means to convey expectations for performance in their programs as well as professional behaviors that are necessary for success in the athletic training program and profession. Athletic training programs also use workshops to train their preceptors, similar to the orientation sessions described by our participants, and to introduce the foundational knowledge and skills needed to succeed as a preceptor,¹² findings from this previous study transfer to educating ATSs on their future roles and expectations for success during their educational training.

Our findings also support the work of Pitney et al,¹¹ who discussed the importance of formal role inductance through on-the-job training. Athletic training programs used an introductory course, often coupled with observation hours, as a way to provide initial socialization into the role of the AT. This structured activity helped the programs provide a realistic impression of the role and responsibilities of the AT working clinically, which is important in role inductance and the socialization process. Moreover, ATSs appreciate a clinical education experience that boasts a realistic but honest perspective of what professional practice will entail. In fact, this experience can foster an increased professional commit-

ment.¹⁴ Through the observation experience, the ATS is able to witness acceptable behaviors while gaining an appreciation for what will be expected of him professionally. These findings are also comparable with the socializing agents used in physical therapy programs, whereby time spent engaged in clinical practicum experiences allows for a realistic understanding of that role.¹⁵

Encouraging attendance in ATS organizations was another formal activity used by athletic training programs to socialize students into the profession. Social acceptance has been acknowledged as an important way for a new employee to be successful in assuming his or her professional role.¹⁶ By providing opportunities for peer mentorship and communication with program faculty in this venue, the athletic training program helped provide some role clarity and exposure to the breadth of the program. Furthermore, exposure to the ATS club allows the student to gain a sense of the athletic training program's mission and vision as well as the organization's climate and culture.¹⁷

Mentorship has been consistently identified as paramount to the professional development of the AT, as it provides insights into expectations and necessary skills and attitudes to succeed.^{3,7,11} In athletic training, mentoring includes an ATS and clinical preceptor while engaged in clinical education experiences, whereby the ATS is able to witness the preceptor model appropriate behaviors, knowledge, and skills. In this case, our participants used peer mentoring as a means to help the underclass ATSs to gain knowledge of program expectations as well as professional roles and expectations. Mentoring is not only effective as a socializing agent but it also improves the communication skills of both individuals, the confidence of the mentee, and the leadership skills of the mentor. Some organizations use structured mentoring as a means to help employees feel supported and to more effectively transition them into their role.¹⁸ Our findings continue to support the use of mentorship as a means to socialize an ATS, but they also highlight the benefit of using peer mentoring in combination with the traditional mentoring relationship between clinical preceptors and ATSs.

Informal Processes

Unlike formal processes, informal socialization is less structured and can be viewed as more observational or as "learning through doing" or trial and error.^{3,19} Our findings suggest that informal socialization also occurs during peer mentoring as well as in social settings. The underpinnings of socialization simply relate to the ability of an individual to learn, develop, and grow through a social context or social integration with peers or others.²⁰ Our findings indicate that social outings are helpful in providing opportunities for lower-level students to integrate into the athletic training community as well as to develop, in a relaxed setting, communication skills with peers and faculty. It is suggested that peer or group socialization can influence one's development of attitudes and behaviors,²⁰ which supports the idea illustrated by our PDs that social outings can be influential.

As has been identified in previous work,³ learning networks are helpful in allowing the ATS to learn the expectations and roles of athletic training. Pitney³ reported that the secondary-school AT was able to learn and manage his new role by

leaning on colleagues with more experience in that clinical setting, which is similar to the experience of ATs who serve in a clinical preceptor role and use mentors and peers as a means to navigate their role.¹² Both studies yield support for our findings that show peer mentoring as a way to socialize the ATS early into their academic studies. The new ATS, like the clinical preceptor or secondary-school AT, is able to learn from those who have gained a degree of role inductance and clarity and is able to impart his or her knowledge as well as provide support.

Our findings also have implications for student retention. Tinto²¹ suggests that those students who are able to develop learning communities, like peer mentoring, are more likely to become integrated into the fabric of the academic program and, consequently, are more committed to the program. Regardless of the type of mentoring program offered or endorsed by an athletic training program, mentoring is beneficial, not only as a socialization tactic but also a means to promote retention and professional commitment.^{5,7,14} Previous research has identified the personal relationships that students make with others, particularly classmates, as a factor leading to academic success²² and, ultimately, persistence in the athletic training program.^{23,24} Furthermore, preceptors have been identified as mentors to ATSs,²⁵ and students gain legitimation from patients, coaches, preceptors, and peers.⁷ A student who can visualize his or her role as a future AT is more likely to be able to identify with that particular role and develop an interest and passion for the role, which will likely bolster his or her professional commitment, a known facilitator for retention.^{23,26}

Limitations and Future Direction

Our study is solely from the perspective of the PD, which limits the transferability of the findings. Their insights are helpful in determining factors they perceive to be effective in socializing the ATS; however, their insights may not parallel those of the ATS. Future research to help validate the findings of the study should include the perspective of the student regarding early socialization into the athletic training program and profession. Our participants also reflect athletic training programs in a wide range of Carnegie classifications and institutional types, which is important to gaining a holistic impression of the socialization strategies used in athletic training. A more narrowed approach, however, may illuminate strategies specific to comparable institutions. Future studies should include specific cohorts of institutions with paired characteristics to identify commonalities among institutional type. Moreover, because we had a diverse group of athletic training programs in regard to program size and other distinctive factors, future research should examine a more homogeneous sample of programs to allow better comparisons.

CONCLUSIONS

Professional socialization does not occur in one single event; rather, it is an ongoing process that allows an individual to understand role behavior, fundamental knowledge regarding clinical practice, and the values and attitudes associated with a role.²⁷ The use of formal training sessions is becoming a popular method in athletic training as a means to professionally socialize an AT or ATS,^{12,28} particularly because it can

effectively communicate program expectations and ways to be successful. In addition, gaining a realistic impression of the role of the AT is necessary for successful role induction. Moreover, social engagement and peer mentoring can help the young ATS learn to navigate his or her future role.

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