

Organizational Infrastructure in the Collegiate Athletic Training Setting, Part I: Quality-of-Life Comparisons and Commonalities Among the Models

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Context: Some anecdotal evidence has suggested that organizational infrastructure may affect the quality of life of athletic trainers (ATs).

Objective: To compare ATs' perspectives on work-life balance, role strain, job satisfaction, and retention in collegiate practice settings within the various models.

Design: Cross-sectional and qualitative study.

Setting: National Collegiate Athletic Association Divisions I, II, and III.

Patients or Other Participants: Fifty-nine ATs from 3 models (athletics = 25, medical = 20, academic = 14) completed phase I. A total of 24 ATs (15 men, 9 women), 8 from each model, also completed phase II.

Data Collection and Analysis: Participants completed a Web-based survey for phase I and were interviewed via telephone for phase II. Quantitative data were analyzed using statistical software. Likert-scale answers (1 = *strongly disagree*, 5 = *strongly agree*) to the survey questions were analyzed using the Kruskal-Wallis, Mann-Whitney *U*, and Cohen *f* tests. Qualitative data were evaluated using a general inductive approach. Multiple-analyst triangulation and peer review were conducted to satisfy data credibility.

Results: Commonalities were *communication, social support, and time management and effective work-life balance strategies*. Quantitative data revealed that ATs employed in the athletics model worked more hours (69.6 ± 11.8 hours) than those employed in the medical (57.6 ± 10.2 hours; $P = .001$) or academic (59.5 ± 9.5 hours; $P = .02$) model, were less satisfied with their pay (2.68 ± 1.1 ; $\chi^2 = 7.757$, $P = .02$; $f = 0.394$), believed that they had less support from their administrators (3.12 ± 1.1 ; $\chi^2 = 9.512$, $P = .009$; $f = 0.443$), and had fewer plans to remain in their current positions (3.20 ± 1.2 ; $\chi^2 = 7.134$, $P = .03$; $f = 0.374$). Athletic trainers employed in the academic model believed that they had less support from coworkers (3.71 ± 0.90 ; $\chi^2 = 6.825$, $P = .03$; $f = 0.365$) and immediate supervisors (3.43 ± 0.90 ; $\chi^2 = 6.006$, $P = .050$; $f = 0.340$). No differences in role conflict were found among the models.

Conclusions: Organizational infrastructure may play a role in mediating various sources of conflict, but regardless of facilitators, ATs need to be effective communicators, have support networks in place, and possess time-management skills.

Key Words: hierarchy, retention, professional development

Key Points

- Athletic trainers in the 3 organizational infrastructures must communicate their personal and professional needs, create and rely on support networks, and implement time-management strategies to achieve work-life balance.
- Communicating professional and personal needs can stimulate organizational support.
- Time management is essential to efficiently attend to work and personal responsibilities.
- Having and relying on a support system, including coworkers, supervisors, family, and friends, are critical to achieving work-life balance.

The collegiate practice setting is the largest employment setting for National Athletic Trainers' Association (NATA) members, with 19.3% of total members.¹ Initial attraction and subsequent retention within this setting include the desire to be a part of a team and around sports,² being fit and enjoying the collegiate setting,^{3,4} love of the competition and atmosphere of the collegiate setting,⁴ and coworker and supervisor relationships described as supportive and enjoyable.^{3–5} Despite these factors, turnover and attrition occur in this setting, as highlighted by Kahanov and Eberman.⁶ Researchers have suggested the natural decline away from the collegiate

setting is due to a myriad of factors^{3,4,6} but most notably due to the working conditions or nature of the work athletic trainers (ATs) encounter in the setting.^{7,8}

Athletic trainers in this setting work long hours that have been described as demanding and inflexible.^{3,9} In fact, the culture of collegiate athletics has become institutionalized: working excessive hours is an expectation and a sign of commitment and productivity.¹⁰ Researchers^{6,9} have indicated that ATs in the collegiate setting can accrue up to 70 h/wk. Beyond long work weeks, ATs must often cope with travel requirements, unplanned schedule changes, and coaches' demands and expectations that can be incongruent

with their own as health care providers and individuals trying to balance nonwork obligations and personal interests.^{9,11–13} These combined factors often serve as a catalyst for conflict among work, life, and family, which is coined *work-life conflict*.

Balancing work, family, and life commitments can be challenging for collegiate ATs.^{12,14–17} However, researchers^{11,12,14,18} have recently highlighted the importance of establishing boundaries at work, seeking personal time away from the AT role to rejuvenate, having support networks at home and work, and creating a separation between work and home life to promote work-life balance. Supervisor support is also critical for ATs seeking work-life balance.^{15,17,19} Mazerolle et al¹¹ investigated the work-life balance culture at a National Collegiate Athletics Association (NCAA) Division I university and found the head AT was critical to developing professional autonomy, work-life balance, and a family-friendly workplace. Mazerolle and Goodman²⁰ also noted that head ATs who not only promoted but also modeled work-life balance created a positive, balanced environment for their staffs. Supervisors (in athletic training, head ATs) are the gatekeepers to establishing a workplace environment that promotes a family-friendly atmosphere and to helping their employees realize work-life balance. In organizational research, investigators¹⁴ have also suggested that, in addition to formal workplace policies, such as those previously mentioned, informal workplace policies are necessary for achieving work-life balance. For ATs, informal policies appear to be more prevalent and helpful. As Mazerolle et al¹¹ reported, a supervisor who fosters professional autonomy and support of staff members can promote cohesion, satisfaction in the workplace, and retention. However, criticism of the existing literature includes a lack of understanding of the organizational hierarchy and the role it plays in professional issues and retention in athletic training.

Collegiate athletic training staffs usually comprise a head AT and associate or assistant ATs. Staff hierarchies and numbers vary greatly nationwide and depend on various factors, such as division, school size, and academic and athletic support. From an organizational perspective, most athletic training staffs follow the athletics model: they are part of the athletics department and the head AT reports to the athletics director. This model may create an unfavorable infrastructure, as highlighted by Laursen,²¹ because it can negatively affect patient care and the overall wellbeing of the AT; such an environment can be dictated by coaching demands and expectations that may be incongruent with those of the AT. This incongruence has been demonstrated in media reports about medical clearance of student-athletes after injury and a recent *USA Today*²² article about the relationship between ATs and coaches. Some universities have transitioned to alternative models to improve both patient care and ATs' quality of life by removing the hierarchy that can create the perception that the coach has power and influence over the AT.²³ A few athletic training clinical programs have either always followed or recently transitioned to an academic model, whereby clinical ATs and athletic training educators are part of the athletic training education program. The academic model can include practitioners who serve multiple or dual roles, balancing clinical and teaching responsibilities. Several

programs have transitioned to a medical model. Within this model, the athletic training staff is aligned with campus health services, and the head AT reports to another health care professional, such as the team's medical director or physician. Anecdotal evidence has suggested that the medical model is not only more patient centered²¹ but has improved collegiate ATs' overall quality of life, including workload, job satisfaction, and salary.²³ However, no one, to our knowledge, has published an empirical study comparing the 3 main collegiate athletic training models regarding quality-of-life concerns, such as job satisfaction, role overload and conflict, work-life balance, and retention.

We wanted to examine perceived benefits, challenges, and workplace topics that may arise within 3 organizational infrastructures. Therefore, the purpose of our study was to explore and compare the quality of life ATs experience among the athletics, medical, and academic organizational infrastructures. The research questions that informed our exploration were 2-fold: (1) What differences in quality-of-life concerns existed among ATs employed in different organizational infrastructures? (2) When examining professional challenges, regardless of the organizational infrastructure in which the AT was employed, what commonalities emerged?

METHODS

Research Design

This study was part I of a larger study that was grounded in methodologic triangulation, using both quantitative and qualitative methods. Creswell²⁴ suggested using mixed methods to expand the understanding of the research agenda, especially in less-explored research areas, such as professional topics in organizational infrastructures. In our study, the quantitative method was the first method (phase I) used but was regarded as ancillary to the qualitative portion (phase II). We capitalized on the strengths of each method to neutralize its weaknesses. The survey instrument used in phase I provided objectivity in previously validated measures, whereas the telephone interviews used in phase II afforded flexibility and the opportunity to further explore the experiences of our participants regarding work-life balance, role strain, job satisfaction, and retention. The larger investigation was designed to be exploratory, as very little is understood about the concept of organizational hierarchy (ie, who hires the athletic training staff), so the study was founded as primarily qualitative, with the quantitative measures providing additional information. Data were collected sequentially; Web-based survey questionnaires were completed first, and telephone interviews were conducted second.

Participant Recruitment

We recruited our participants from each of the 3 organizational infrastructures identified as hierarchies in collegiate athletics. Initial recruitment for phase I (survey instrument) involved e-mailing 109 ATs from colleges and universities that were predetermined to have an athletics, medical, or academic organizational infrastructure. Each school's model was identified through researcher knowledge and professional networking. The athletics model is commonplace, so those schools were randomly selected; we

Table 1. Participant Demographics for Phase I (N = 59; Mean \pm SD)

Organizational Infrastructure	Total Experience, y	Time		
		In Current Position, y	Peak Worked, h/wk	Off-Peak Worked, h/wk
Total	13 \pm 9	8 \pm 8	63 \pm 12	40 \pm 11
Athletics	14 \pm 10	8 \pm 9	70 \pm 12	43 \pm 13
Medical	12 \pm 8	7 \pm 9	58 \pm 10	38 \pm 6
Academic	15 \pm 10	8 \pm 8	60 \pm 10	37 \pm 13

were more purposeful in selecting schools using the other 2 models. Through this process, we identified 20 schools (athletics = 8, medical = 8, academic = 4) and obtained e-mail addresses from Web-based searches of these schools' athletics Web pages.

Participants

From our initial recruitment, 59 ATs (athletics = 25, medical = 20, academic = 14; response rate = 54%) completed our Web-based survey. Participant demographics are displayed in Table 1. At the end of the survey, participants were instructed to share their contact information if they wanted to be included in phase II (telephone interviews). With data saturation as our participant guide, we used a snowball sample from the initial pool of potential applicants meeting our inclusion criteria in addition to individuals who indicated interest in phase II participation. A total of 24 (15 men, 9 women) ATs, 8 from each model, completed phase II. We provide their demographic information and pseudonyms in Table 2. Completion of the survey implied informed consent, and the study was

approved by the University of Connecticut-Storrs Institutional Review Board.

Data-Collection Procedures

Recruits were contacted via e-mail and sent a link to participate in phase I of the study. The e-mail was sent directly from the Web site Qualtrics (Qualtrics, LLC, Salt Lake City, UT) and included a description of the study and steps for study completion. The telephone interviews were scheduled on completion of phase I and were arranged at the convenience of the participant. We digitally recorded all interviews for transcription purposes. All interviews were conducted by 1 researcher (C.M.E.) to ensure consistency during the data-collection process.

Instrument

Our Web-based survey instrument had 3 main facets: background information, closed-ended Likert-scale questions, and open-ended questions. During phase I, participants were instructed to provide basic demographic information and to respond to a series of Likert-scale questions anchored by 1 (*strongly disagree*) and 5 (*strongly agree*). The instrument was adapted from previously validated measures and included an assessment of work-life balance (Cronbach α = 0.88); intentions to stay (Cronbach α = 0.94); supervisor or administrative support and coworker support (Cronbach α = 0.82)²⁵; job satisfaction (Cronbach α = 0.94); and role strain, including role incongruity, overload, and conflict (Cronbach α = 0.83).^{26,27} The selection of these scales was purposeful, as a review of current literature^{26,28,29} in athletic training suggested that these topics are part of an ongoing empirical discussion. Researchers^{26,28,29} studying AT role strain have shown role incongruity, overload, and conflict are the

Table 2. Participant Demographics for Phase II (N = 24)

Pseudonym	Sex	Organizational Infrastructure	Age, y	Experience, y	National Collegiate Athletic Association Division
Alex	Male	Medical	34	10	I
Bret	Male	Medical	31	10	I
Bruce	Male	Athletics	40	15	I
Callie	Female	Medical	25	3	I
Chloe	Female	Athletics	40	18	I
Christopher	Male	Academic	28	3	I
David	Male	Academic	29	7	II
Edward	Male	Athletics	29	6	I
Grant	Male	Athletics	64	41	III
Jacob	Male	Athletics	32	9	I
Janet	Female	Medical	26	5	I
Jared	Male	Athletics	57	35	I
Jessica	Female	Athletics	27	4	I
Jordan	Male	Academic	32	10	I
Kimberly	Female	Academic	34	12	II
Kristen	Female	Medical	25	8	I
Lindsay	Female	Academic	29	6	I
Mary	Female	Medical	39	16	I
Melissa	Female	Athletics	42	18	I
Michael	Male	Academic	47	25	I
Nathan	Male	Academic	27	3	I
Sam	Male	Medical	42	20	III
Tristan	Male	Medical	33	9	I
Zeke	Male	Academic	35	11	I

Table 3. Comparison of Peak Hours

Organizational Infrastructure	Organization Infrastructure Comparison	Mean Difference	Standard Error	P Value	95% Confidence Interval
Athletics	Medical	11.95000 ^a	3.23071	.001	4.1719, 19.7281
	Academic	10.00000 ^a	3.59481	.02	1.3453, 18.6547
Medical	Athletics	-11.95000 ^a	3.23071	.001	-19.7281, -4.1719
	Academic	-1.95000	3.75265	.86	-10.9847, 7.0847
Academic	Athletics	-10.00000 ^a	3.59481	.02	-18.6547, -1.3453
	Medical	1.95000	3.75265	.86	-7.0847, 10.9847

^a Indicates difference ($P < .05$).

strongest contributors to role strain. Hence, we focused on these subscales in our instrument.

Phase II involved one-on-one interviews using a semi-structured format. We developed an interview guide, which reflected the research agenda and the existing literature on the previously discussed subjects. Similar questions have been used by Mazerolle and Goodman,¹⁷ Goodman et al,³ and Mazerolle et al⁹ with the exception of the questions related specifically to perceptions of organizational infrastructure. An athletic training scholar (A.G.) with expertise in work-life balance and organizational infrastructure established content validity by reviewing the interview guide. The feedback gained during the peer-review process was used to make small adjustments to the instrument, including wording, order of questions, and the addition of a few questions pertaining to the literature. We present our instrument and interview guide in the Appendix.

Data Analysis

Quantitative Data. Participant demographic information (age, years of experience, years in current position, and hours worked) was averaged and reported as mean \pm standard deviation. To determine if any differences existed among years of experience, years in current position, and hours worked among the different organizational infrastructures and the Likert-scale questions, we used a Kruskal-Wallis test. We selected the Kruskal-Wallis test because the Shapiro-Wilk test result for normality was less than 0.05 for all variables, indicating our data were nonparametric. If a difference was identified among the models, we used a Mann-Whitney U test to determine which models differed. A Cohen f test for effect size was calculated for items that were different. The α level was set a priori at .05. Quantitative data were analyzed using SPSS (version 20; IBM Corp, Armonk, NY).

Qualitative Data. Following the guidelines of general inductive analysis,³⁰ 2 researchers (S.M.M., C.M.E.) evaluated the qualitative data by conducting multiple readings of the data. We used this approach to allow a representative understanding of the emerging data to develop. We believed this process would allow us to demonstrate the common experiences within the athletics, medical, and academic models via inductive coding. The general inductive approach enabled us to create a link between our research questions and the data collected during the interviews and to develop a better understanding of organizational hierarchy as it pertains to work-life balance in collegiate athletics.³⁰ We used the initial readings of our data to pinpoint patterns that were developing within the transcripts. On subsequent readings, we began to combine those common themes and make

greater connections among the experiences of our participants.

Trustworthiness

Using multiple methods of inquiry in concert helped establish credibility of the findings, as it allowed us to exploit the benefits of each method while minimizing its limitations. In addition to methodologic triangulation and based on the recommendations of Creswell,²⁴ we used a minimum of 2 strategies, including peer review and multiple-analyst triangulation. These strategies are discussed in detail in part 2 of this study.³¹

RESULTS

Quantitative Findings

Demographics. Our data analysis revealed no differences in total years of experience, years in current position, or off-peak hours worked per week among the 3 models (Table 1). However, ATs employed in the athletics model worked more peak (in-season) hours (70 ± 12) than those in the medical (58 ± 10) or academic (60 ± 10) model. On average, our sample worked 63 ± 12 h/wk during their peak seasons. A comparison of peak hours worked is provided in Table 3.

Likert-Scale Items. Analysis of the mean Likert-scale data revealed differences among organizational infrastructures for 7 items (Table 4). Athletic trainers employed in the athletics model were less satisfied with their pay, believed they had less support from their administration, and had fewer plans to stay with their current employer than ATs employed in the medical model. Athletic trainers working in the academic model believed they had less support from coworkers and immediate supervisors and did not believe they worked in a family-type atmosphere compared with ATs working in the medical model.

Given that we were also looking for similarities among the 3 organizational infrastructures, we report responses to Likert-scale questions in which we found no differences among the models (Table 5). Overall, no differences were observed among the models on the role-strain items (eg, role conflict, incongruity, and overload). In addition, our participants were receiving support from their coworkers; they enjoyed and could rely on their coworkers and appreciated the team-like atmosphere, regardless of the clinical setting. Participants in all 3 models were neutral regarding the amount of time they had at work to meet their role expectations (ie, role overload: athletics = 2.7, medical = 3.1, academic = 3.5).

Table 4. Comparison of Responses to Survey Instrument and Interview Guide Items: Differences Among Organizational Infrastructures^{a,b}

Item	Organizational Infrastructure, Mean \pm SD			χ^2	P Value	Post Hoc Mann-Whitney U Difference	Cohen f Value
	Athletics	Medical	Academic				
I am satisfied with my pay.	2.7 \pm 1.1 ^c	3.7 \pm 1.3	3.2 \pm 1.4	7.757	.02	0.017	0.394
I plan to remain with my present employer as long as possible.	3.2 \pm 1.2 ^c	4.1 \pm 0.8	3.1 \pm 1.5	7.134	.03	0.037	0.374
I experience a family-type atmosphere with my co-workers.	4.1 \pm 0.8	4.5 \pm 0.8	3.4 \pm 0.9 ^c	11.480	.003	0.002	0.497
My co-workers care about my well-being outside the workplace.	4.1 \pm 0.7	4.5 \pm 0.6	3.7 \pm 0.9 ^c	6.825	.03	0.029	0.365
My co-workers are willing to listen to and help with my job-related problems.	4.2 \pm 0.5	4.6 \pm 0.5	4.1 \pm 0.5 ^c	8.074	.02	0.035	0.401
My immediate supervisor really cares about my well-being outside of the workplace.	3.9 \pm 1.0	4.2 \pm 1.0	3.4 \pm 0.9 ^c	6.006	.050	0.043	0.340
Generally, the administration here shows a lot of support for their employees.	3.1 \pm 1.1 ^c	4.1 \pm 1.0	3.3 \pm 1.1	9.512	.009	0.019	0.443

^a The selected survey instrument and interview guide items are presented in their original form.

^b Responses to the 5-point Likert-scale items were anchored by 1 (*strongly disagree*) and 5 (*strongly agree*).

^c Less than the medical organizational infrastructure ($P < .05$).

Qualitative Findings

Our analyses revealed 3 commonalities among the 3 organizational infrastructures that helped create a suitable work environment, which augmented satisfaction and work-life balance (Figure). Together these 3 facets created the right fit for the AT. Our findings suggested that a blend of organizational and individual factors produces a suitable workplace in the collegiate practice setting. We discuss each finding, with supporting text to illustrate quality-of-life enhancement. We present the relationship of our 3 themes in the Figure.

Commonalities Among Models

Communication. Effective and direct communication emerged as an essential part of creating a workplace environment that offered satisfaction and work-life balance. Our participants, regardless of organizational infrastructure, recognized that being able to directly discuss each staff member's role within the organization, as well as sharing personal and professional needs among staff members, helped them accomplish work and personal responsibilities and obligations. For example, Alex, an AT working in the medical model, reflected on achieving work-life balance and happiness within the workplace: "Well, I think we do a great job of communicating with each other. I think just being able to really communicate has really helped us as a staff." The ability to communicate professional and personal needs emerged within the data as helping the AT create work-life balance. Christopher, who worked in the academic model, commented that the most effective strategy was communication:

My biggest strategy for work-life balance is communicating with whoever my supervisor is on my needs and why I need it. I try not to be argumentative and communicate the need for this request.

Communication even helped to facilitate strong relationships with coaches to improve the workplace atmosphere. Bruce believed his ability to communicate with his

coaching staff was pivotal to developing a professional relationship, which he attributed to his satisfaction in the workplace:

My coach is very type A. I think a challenge was . . . gaining his trust. I knew as long as I communicated with him, what I was going to do, what my expectations were of a student-athlete, and you know what my goals were, both short term and long term, with each rehabilitation, or whatever my needs were, it helped out.

Communication set the foundation for satisfaction and work-life balance, as it enabled ATs to share their needs as a means to meet them.

Support Networks. Finding and building support networks in the workplace has grown as a necessary component for satisfaction at work and achieving work-life balance, and our participants agreed that it was true for them. They discussed the collegiality within their work environments, as well as using job sharing to increase their time away from the job. Bret, who worked in the medical model, highlighted the concept of collegiality:

I am lucky to work with a number of individuals that I know are more than willing and able to help out when needed wherever may be needed. I am lucky that I am in a situation professionally that we have a very share-the-load type mentality.

Further developing the idea of collegiality, Jared, who worked in the athletics model, noted the importance of helping one another and recognizing that outside obligations and responsibilities exist; that is, teamwork can ensure ATs meet both personal and professional demands:

If something needs to get done, if it's my wife's birthday, and I really want to go do something, somebody will cover it. We have a good relationship, sort of a scratch-each-other's-backs kind of mentality.

Table 5. Comparison of Responses to Survey Instrument and Interview Guide Items: Similarities Among Organizational Infrastructures^a

Item	Organizational Infrastructure		
	Athletics	Medical	Academic
Survey instrument^b			
I like doing the things I do at work [my job is enjoyable].	4.4	4.6	3.7
I like the people I work with.	4.3	4.7	4.3
I am satisfied with my current position.	3.8	4.3	3.2
I plan to leave my present employer for another position in the SAME athletic training setting.	2.4	1.7	1.8
I plan to leave my present employer for another position in a DIFFERENT athletic training setting.	1.8	1.9	2.1
I plan to leave my present employer for another position OUTSIDE of the athletic training profession.	1.6	1.7	2.5
Generally, my co-workers and I work as a team and assist each other when necessary.	4.4	4.5	4.1
My co-workers can be relied on when things get tough with my job.	4.0	4.3	4.1
My immediate supervisor is willing to listen to and help with my job-related problems.	4.0	4.4	3.6
My immediate supervisor creates a positive, supportive working environment.	3.9	4.2	3.4
My immediate supervisor can be relied on when things get tough on my job.	3.9	4.2	3.5
Generally, the administration here is not concerned with their employee's well-being outside of the workplace.	2.5	2.2	2.9
The demands of my work interfere with my personal and family life.	3.8	3.4	3.8
The amount of time my job requires makes it difficult to meet my personal and family needs.	3.4	3.2	3.6
Things that I need/want to get done in my personal and home life do not get done because of the demands of my job.	3.5	3.2	3.5
Due to work-related responsibilities I have to make changes to my personal/family activities or miss out on those personal/family activities.	4.0	3.5	3.7
There is a conflict between my job and the commitments to those responsibilities, and the responsibilities I have at home and with my family.	3.2	3.0	3.4
Interview guide^c			
Coping with the number of expectations of my job.	3.0	3.5	3.6
Having to participate in work-related activities outside regular working hours in order to meet job expectations.	3.0	3.2	3.6
Thinking that the amount of work I have to do interferes with how well it gets done.	2.6	3.2	3.5
Coping with the complexity of my job expectations.	2.4	2.7	2.9
Having job demands interfere with other activities of personal importance (family, leisure, other interests).	3.5	3.2	3.6
Having adequate time to meet role expectations.	2.7	3.1	3.5
Feeling unable to satisfy the conflicting demands of my various work-related constituencies (i.e. administration, colleagues, students, clinical agencies, funding agencies, athletic departments, and patients).	2.8	3.1	3.4
Feeling pressure for better job performance over and above what I believe is reasonable.	2.3	2.2	2.1
Feeling that the goals and values of the institution/department are incongruent with personal goals and values.	2.5	2.1	2.4
Feeling that there is a lack of consensus among athletics administration on the expectations of my role.	2.7	2.3	2.6
Feeling that there is a lack of consensus among my direct supervisor(s) on the expectations of my role.	2.0	1.8	2.4
Feeling that my current level of performance/productivity is incongruent with my supervisor's expectations.	2.0	1.6	1.9
Feeling that my current level of performance/productivity is incongruent with my administration's expectations.	2.1	1.9	2.0
Feeling that I am not respected by my various constituencies.	2.1	1.9	2.5
Feeling that my salary does not reflect my current level of performance.	3.5	2.8	3.0

^a The selected survey instrument and interview guide items are presented in their original form.

^b Responses to the 5-point Likert-scale items were anchored by 1 (*strongly disagree*) and 5 (*strongly agree*).

^c Responses to the 5-point Likert-scale items were anchored by 1 (*never*) and 5 (*nearly all the time*).

Another example of job sharing or substituting for a colleague was described by Kimberly, who worked in the academic model:

Coworkers helping, like I said, I went to a wedding and others, like I, have gone to weddings, and we help cover each other for stuff like that. You have to help fill in for each other so that people can do that. And you return the favor.

Jordan, another AT working in the academic model, illustrated the concept of support within the workplace as allowing for workplace satisfaction and balance:

I think that we all back each other really well. One of our staff members has been having some family issues and stuff comes up, and their family is in another state. It may come up the day before a game, and they let us know what they need, and we handle it. So that [help] goes in all directions. There is a lot of really good support here. It is kind of the understood rule that you really don't necessarily owe anybody, but if someone needs the day off or needs to go do something, then somebody's going to cover.

Each of these statements emphasizes the concept of support networks in the workplace that can facilitate satisfaction and work-life balance. The concept was founded on the premise that coworkers provide support

through job sharing or serving as a substitute when outside obligations arise.

Time Management and Effective Work-Life Balance Strategies. Effective time management is often discussed as a useful tool to help individuals balance their responsibilities in and out of the workplace. Our participants observed that time management was necessary in their pursuits for satisfaction and balance. “Manage your time wisely” was a mantra discussed by many participants. For example, Nathan said:

I guess the big thing [for me] is better time management. So making time for myself. Being able to take 45 to go get a quick workout in or go have lunch with my wife or something like that, just to make sure that I am not around work all the time.

Nathan’s time management helped create separation from the role of the AT, promoting me time, and at times integrating family time during the workday. He elaborated by providing his thoughts on persisting in his position:

It is being able to do things that I like to do, exercising and spending time with my family and friends. I mean, you need to not be afraid to take a vacation. I have found that you have to put it on the calendar. You set it up and you can’t change it because you have paid for your vacation and you have to go. [It is all about] making those plans and sticking with it.

Sam discussed being a self-advocate through time management:

Professionally ... [you] need to manage your expectations. The personal side of it, I think it is important to steal 1 of the 7 habits of highly effective people, which would be to understand and know your values, what is important to you. Then look for a situation that allows you to live up to those values, and then be an advocate for those values and stand up to fulfill them.

Edward believed “controlling your schedule as much as you can” was a means to creating balance in his life and satisfaction with his job. During his interview, he was candid about using time-management skills to facilitate balance and create a suitable work environment:

I think it does, as long as you are willing to set up your own schedule. You know that sometimes athletic trainers are a little bit too accommodating. It doesn’t always have to be about the athlete. It has to be about you, if you are not taken care of, you can’t take care of other people.

His comments illustrate the need for both time management and creating personal time, a work-life balance strategy.

The importance of making time for outside activities, such as personal interests, family events, or healthy lifestyle choices, was evident from the interviews. Jared discussed the theme of time management and work-life balance strategies:

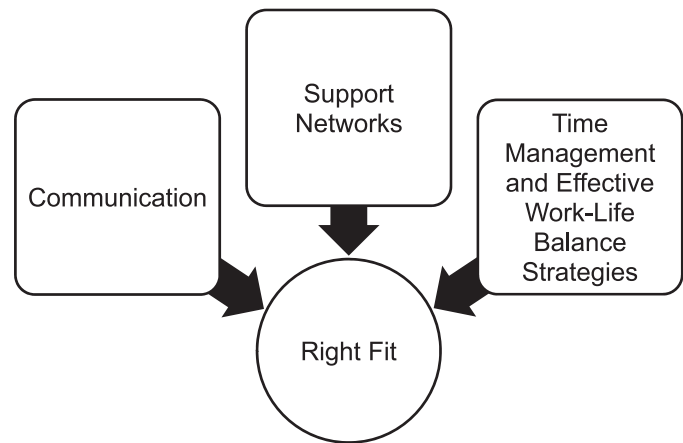


Figure. Model of workplace satisfaction and life balance.

I strongly believe in, if people need to go for a wedding, or whatever, some family function, let them go. You know there is enough [staff members] here to cover for each other. In terms of vacations, it’s the same thing, so in terms of it, I actually force it on [my staff]. I tell them, “Get out of here, leave. Take some time. Go home and take care of your families.” I don’t, per se, have a family, but I do have dogs, and I go home to them and spend time with them, and I really enjoy that.

Time management that allowed for more personal and family time was discussed by participants across all 3 models as a way to create balance and satisfaction with their positions. The strategies were individually driven but appeared to be supported at the organizational level by supervisors and staff members. Despite challenges from the demands placed on them by long hours and other expectations, participants needed time-management skills for work-life balance.

DISCUSSION

The impetus to our study was anecdotal reports that a medical model may improve the quality of life for ATs, as it can mitigate some of the negative factors associated with employment in the collegiate setting (ie, long hours, inflexible work schedules, and coaches’ disputes and demands). Our findings demonstrated that ATs employed in the athletics model worked more hours per week than those in the other 2 models. It was not unforeseen that those in the medical model worked the least number of hours per week, as this has often been discussed as a benefit of the model.²¹ Athletic trainers working in the athletics model were concerned with longevity, a growing apprehension for this group.^{6,27} Moreover, the medical model appeared to be viewed as more family oriented and supportive, as well as offering better financial compensation than the other models. Again, these findings provide some credence to the anecdotal and growing support for the transition to a patient-centered model of care.²¹

Role strain relates to the stress encountered when one is unable to fulfill the expectations placed on him or her.³² Role strain theory includes various subscales. Based on previous research,^{28,29} we examined role conflict (clear but competing expectations), role incongruity (expectations

contradict self-perception and values), and role overload (not enough time to fulfill expectations and demands). Whereas researchers have indicated that collegiate ATs commonly experience these aspects of role strain^{28,29} and conflict with coaches and other athletics personnel,²² we observed no differences in role conflict, incongruity, or overload measures among the models. However, this was a small, exploratory, mixed-methods study, and more research on role-strain differences among the models is warranted.

Whereas some differences in the models were detected regarding aspects of the workplace, particularly hours worked and some views of the workplace atmosphere, several common experiences emerged. Our participants expressed personal strategies they used to promote work-life balance, including a strong support system, communication, and time management, regardless of the organizational infrastructure. Therefore, despite some organizational challenges and inherent aspects of the AT role in collegiate athletics, individual strategies and personal outlook can help mediate workplace experiences. Our findings support the research of Dixon and Bruening,³³ who suggested a multifactorial approach to examining work-life balance and navigating the workplace. Interestingly, investigators^{9,34} have reported that lack of communication is an antecedent to work-life imbalance. Our participants, however, discussed the importance of good communication for maintaining balance between their work and personal lives.

Communication

Athletic trainers are expected to possess and demonstrate effective interpersonal communication skills; therefore, we were not surprised that this concept emerged as a tactic that promoted a positive workplace and stimulated work-life balance. As work-life balance continues to be a central concern, more organizations and scholars are examining ways to promote it, and effective professional communication within the workplace appears to be necessary.³⁵ Simply stated, communication is the platform whereby the employee and employer can share their goals and needs for an effective workplace. The importance of this communication was evident in our participants' discussions of their current positions and navigating work-life balance as they advocated for their personal and family needs. Mostly, this centered on time off for attending special occasions. In the literature, ATs have cited missing family time and other personal, family, or social outings due to work-related demands⁹; therefore, using professional communication to gain shared coverage may be a way to alleviate conflict. Our results give credence to the development of the NATA's³⁶ position statement on work-life balance, as several of its recommendations focused on supervisors and ATs communicating their personal and professional needs.

Often, a lack of control over work schedules and the demands and expectations of coaching staff stimulate conflict for ATs^{14,37}; however, professional communication appears to increase a sense of work-schedule control and ease the pressures that coaches can place on ATs. Researchers^{14,38} have found that supervisors and coworkers play an integral role in creating a culture of informal

support within the workplace, which is described as an atmosphere that allows an individual to believe that family and work roles are valued equally. Kossek et al³⁸ suggested this cultural work-life support occurs at the individual and organizational levels, whereby employees share and invest in the same work-life values, and supervisors provide support and resources that allow for balance. Perceptions of increased work-life balance have been related to cultural work-life support.^{38,39} To achieve work-life support, it appears that ATs must use professional communication with peers and supervisors that clearly articulates their personal and professional needs. This communication and proactivity must occur regardless of the organizational infrastructure in which ATs are employed.

Support Networks

Our results coincide with the literature⁴⁰ and show that a support system is the critical element to achieving work-life balance. This support system includes coworkers, supervisors, family, and friends. In recent studies,^{15,19} investigators have observed that head ATs play a critical role in creating and enforcing work-life balance for ATs. Supervisors are the gatekeepers to establishing a family-friendly atmosphere in the workplace and helping their employees realize work-life balance. In addition, supervisors are responsible for enforcing the organization's work-life balance policies. Goodman et al¹⁹ observed that supervisors influenced and emphasized this support by possessing personal work-life-balance strategies and visibly implementing them in their daily lives.

Laursen²¹ presented the idea of a patient-centered model of sports medicine care (ie, medical model) to not only improve the quality of care provided to the student-athlete but also to improve the work-life balance of the ATs delivering the care. He suggested that the model can boost collaboration by job sharing, which can yield more time outside of the workplace. Whereas we did not observe differences among the 3 models regarding the concept of collegiality and job sharing, our findings indicated that ATs did share the concept of teamwork in the workplace. This is critical, as it appears that the concept of job sharing can be beneficial for ATs to promote work-life balance. In fact, in its position statement on work-life balance, the NATA³⁶ recommended using job sharing to promote work-life balance in the workplace and to help ATs manage the demands of patient care in a challenging work setting. This recommendation is based on literature addressing not only the collegiate athletics setting but also the health care setting. In response to the concerns surrounding work-life balance and its apparent challenges within the collegiate setting, the NCAA⁴¹ developed a handbook on the topic. As did the NATA,³⁶ the NCAA recommended a blend of strategies, including the presence of workplace-support networks.

The concept of support networks is an informal workplace practice that can be simply accepted and encouraged at both a personal and an organizational level. Researchers^{14,20} have suggested that the collegiate setting offers this type of support and that job sharing or teamwork provides ATs with the flexibility that is often limited due to the nature of their role in the work setting.

Relying on others when a personal conflict or obligation arises allows ATs to continue to balance roles that often diverge.

Time-Management and Effective Work-Life Balance Strategies

Researchers⁵ have established that personal strategies, such as time management and establishing boundaries, can help ATs in a variety of clinical settings achieve work-life balance. Our participants identified prioritizing “me time” as important to achieving work-life balance. Several authors^{5,14,15} have found that saying *no* to extra responsibilities is a highly effective method to help attain work-life balance. Strategically using the word *no* is critical to creating time away; however, as highlighted by Mazerolle et al,¹⁴ it should not be used at the expense of coworkers and their workloads but rather by all ATs to create time away and flexibility in the work schedule. Athletic trainers know the importance of teamwork and compromise to help achieve work-life balance, but these do not mean saying *yes* to every short-notice schedule change.⁵ Lack of control over schedules and long hours increase ATs’ needs for sound time-management skills. This time efficiency is essential to complete all required responsibilities at work and home. Our results agree with those of several studies^{5,14} in which time management and prioritizing personal and family time were identified as key strategies to having a balanced lifestyle.

Limitations and Future Directions

We presented data from the perspective of individual ATs working in the various organizational infrastructures. Collectively, we gained a sense of what each model offers its employees, but we did not gain the perspective of all members working within each setting. That is, we could have conducted focus-group sessions with all staff members working within 1 institution to gain an appreciation for the working dynamics within that organizational infrastructure. This method of collection, in the future, can help triangulate the findings of our study. We used a mixed-methods design that was guided by the qualitative data and supplemented by the quantitative data. In the future, we can use the information gained in this study to generate an instrument that can investigate the 3 models from a larger perspective. Whereas role incongruity, overload, and conflict are strong predictors of role strain, all subscales (ie, role ambiguity and role incompetence) should be included to gain a more holistic perspective of role strain among the models. As with most investigators examining professional issues in athletic training, we captured only 1 point in time, and as researchers^{32,38} have suggested, time of year can affect perceptions of work-life balance and workplace dynamics. Whereas our quantitative results produced large effect sizes for important items involving ATs’ satisfaction with various aspects of their employment, one should interpret these results with caution given the small sample size.

CONCLUSIONS

We wanted to understand ATs’ work-life balance and the influence that organizational infrastructure can have on it. Some have suggested that working in a medical model can

be more advantageous for ATs’ quality of life. To create work-life balance, organizational and individual policies and practices must be in place, and our results showed that, regardless of the organizational infrastructure, ATs must be able to use professional communication to advocate for their needs; without it, supervisors and colleagues who can help promote balance will be unaware of how they can assist. Moreover, creating and relying on support networks and implementing time-management strategies are necessary for ATs in their quest for work-life balance.

Appendix. Survey Instrument and Interview Guide^a

Phase I: Background Information

Age: _____ Current Position: _____
 Gender: _____ Years of Experience: _____
 Years in Current Position: _____ Average # Hours Worked [per week]: _____
 Marital Status: _____ Average # Hours Worked [per week-Off-Peak]: _____
 Family Status: _____ [children]
 Childcare: _____
 Highest Academic Degree Earned: _____
 Athletic Training is housed under:
 Athletics Department
 Campus Health Services
 Academics (ATEP)
 Combination: _____
 Who is your direct supervisor (give title)? _____

Who is the direct supervisor of athletic training? _____

Phase I: Close Ended Questions

Please indicate your level of agreement or disagreement with the following statements.

1=SD 2=D 3=Neutral 4=A 5=SA

- ☐ I like doing the things I do at work [my job is enjoyable].
- ☐ I like the people I work with.
- ☐ I am satisfied with my current position.
- ☐ I am satisfied with my pay.
- ☐ I plan to remain with my present employer as long as possible.
- ☐ I plan to leave my present employer for another position in the SAME athletic training setting.
- ☐ I plan to leave my present employer for another position in a DIFFERENT athletic training setting.
- ☐ I plan to leave my present employer for another position OUTSIDE of the athletic training profession.
- ☐ Generally, my co-workers and I work as a team and assist each other when necessary.
- ☐ I experience a family-type atmosphere with my co-workers.
- ☐ My co-workers care about my well-being outside the workplace.
- ☐ My co-workers are willing to listen to and help with my job-related problems.

^a This survey instrument and interview guide is presented in its original form.

- ☐ My co-workers can be relied on when things get tough with my job.
- ☐ My immediate supervisor is willing to listen to and help with my job-related problems.
- ☐ My immediate supervisor creates a positive, supportive working environment.
- ☐ My immediate supervisor can be relied on when things get tough on my job.
- ☐ My immediate supervisor really cares about my well-being outside of the workplace.
- ☐ Generally, the administration here shows a lot of support for their employees.
- ☐ Generally, the administration here is not concerned with their employee's well-being outside of the workplace.
- ☐ The demands of my work interfere with my personal and family life.
- ☐ The amount of time my job requires makes it difficult to meet my personal and family needs.
- ☐ Things that I need/want to get done in my personal and home life do not get done because of the demands of my job.
- ☐ Due to work-related responsibilities I have to make changes to my personal/family activities or miss out on those personal/family activities.
- ☐ There is a conflict between my job and the commitments to those responsibilities, and the responsibilities I have at home and with my family.

Role Strain Items:

Please mark the descriptor that most accurately represents the frequency with which you have experienced stress from each item.

1=Never 2=Rarely 3=Sometimes 4=Frequently 5=Nearly all the time

- ☐ Coping with the number of expectations of my job.
- ☐ Having to participate in work-related activities outside regular working hours in order to meet job expectations.
- ☐ Thinking that the amount of work I have to do interferes with how well it gets done.
- ☐ Coping with the complexity of my job expectations.
- ☐ Having job demands interfere with other activities of personal importance (family, leisure, other interests).
- ☐ Having adequate time to meet role expectations.
- ☐ Feeling unable to satisfy the conflicting demands of my various work-related constituencies (i.e. administration, colleagues, students, clinical agencies, funding agencies, athletic departments, and patients).
- ☐ Feeling pressure for better job performance over and above what I believe is reasonable.
- ☐ Feeling that the goals and values of the institution/department are incongruent with personal goals and values.
- ☐ Feeling that there is a lack of consensus among athletics administration on the expectations of my role.
- ☐ Feeling that there is a lack of consensus among my direct supervisor(s) on the expectations of my role.
- ☐ Feeling that my current level of performance/productivity is incongruent with my supervisor's expectations.
- ☐ Feeling that my current level of performance/productivity is incongruent with my administration's expectations.
- ☐ Feeling that I am not respected by my various constituencies.

- ☐ Feeling that my salary does not reflect my current level of performance.

Phase II: Interview Questions

1. Could you give me a little bit of background about your professional career and what made you pursue a position in the collegiate setting?
2. Explain the model your athletic training program is currently operating under:
 - a. Where and how is athletic training aligned (i.e., under athletics, campus health services, or the athletic training education program)?
 - b. Explain how your "model or system" works
 - c. What is your opinion of the current model you are under?
 - d. Elaborate on your relationships with the people you work with (i.e., medical director, coaches, athletics administration)
 - i. Describe your role.
 - ii. Are your job expectations clear?
 - iii. To what extent do your job expectations/demands compete with the expectations/demands of others (coaches, administration, etc)?
3. Describe an ideal working environment in athletic training? Is it obtainable in your current work environment or another work setting?
4. What do you feel is, or has been, your greatest challenge as an athletic trainer?
5. Reflect on the challenges that you have faced and describe what you have done to effectively deal with those challenges.
6. How important is a balanced lifestyle to you? Please describe to me, if it is, how you are able to maintain a balance between your professional and personal life?
7. Have you experienced challenges finding a balance between your personal and professional life? If so, share an instance when you have faced this challenge.
8. What factors have contributed to the challenge? If not, why haven't you had challenges?
9. In what way have coworkers helped or hindered your ability to maintain life balance?
10. In what way has your administration helped or hindered these challenges?
11. How does your family (support system) help or hinder in these challenges?
12. Discuss if working in the athletic training profession provides a suitable working environment to achieve a balance.
13. If a new athletic trainer was just about to enter this work setting, what advice would you give him/her to help them maintain a balanced life?

Abbreviations: ATEP, athletic training education program; SD, strongly disagree; D disagree; A, agree; and SA, strongly agree.

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