

## BACKGROUND AND PROBLEM

- Only 36% of all U.S. high schools, and only 22% of rural high schools, had a full-time Athletic Trainer (AT) in 2019<sup>1</sup>
- Many coaches (particularly in rural areas) are responsible for the identification, evaluation, and management of athletes' injuries, medical conditions, and emergencies.

This interpretive interview case study explored the experiences and perspectives of two rural high school football coaches in managing players' medical emergencies, acute and chronic injuries, and illnesses.

## PRELIMINARY FINDINGS



\*\* Codes in the Word Cloud emerged from Inductive Analysis. The size/boldness of words indicates the frequency of appearance in the transcripts.

## DISCUSSION

- Neither coach has had to personally handle a true emergency medical situation without the assistance of an AT but both have managed orthopedic and other injuries on their own.
- The coaches had little confidence in their ability to handle an emergency medical situation on their own but had a high level of confidence in their ability to handle orthopedic injuries due to their experiences as both players and coaches.
- Both coaches stressed the importance of community involvement when coaching in a rural area with fewer resources. Coach #2 discussed the impact of a lack of a local hospital on their decision-making process when serious injuries did occur.
- The online training that is required for high school football coaches in Tennessee may be adequate for coaches who have an AT on staff, but although these coaches expressed familiarity with the material, it was clear that this limited training was no substitute for professional education and experience.
- Both coaches discussed the importance of having an AT on staff since it reduced their responsibilities as a coach and their liability when an injury or emergency occurred.
- Both coaches thought that ATs were "overly cautious" when making return-to-play decisions when a player became injured.
- A common discourse observed in these interviews was that the coaches perceived that football players were too "soft" and they needed to "tough it out" more often when they sustain an injury.

## RESEARCH QUESTIONS

- RQ 1.** What are the experiences of football coaches in two rural Tennessee secondary schools—one that employs an athletic trainer and one that does not—in managing medical emergencies, acute and chronic injuries, and illnesses in football players?
- RQ 2.** What are the perspectives of participants on their ability to manage medical emergencies, acute and chronic injuries, and illnesses in football players without the assistance of an athletic trainer?
- RQ 3.** What are the previous/past experiences and training of the participants that have influenced or shaped their ability to manage these situations?
- RQ 4.** What are the coaches feelings about having an Athletic Trainer (AT) on staff?

## METHODS

- Purposeful sampling used to recruit two rural high school football coaches
- Two one-hour interviews were conducted with coaches
- Interviews were transcribed verbatim for analysis
- Transcripts were open coded and analyzed using Inductive Analysis
- 75 codes were produced and organized into 6 thematic categories.

Research Question	Finding	Direct Quotes
RQ 1	Community support and resources were important in a rural setting	<b>Coach #1:</b> "All kind of people chipped in to help...I don't have any doubt that we would have people willing to come help...the community would be willing to help."
		<b>Coach #2:</b> "We have a lot of former players that want to help with the program...they volunteer their time 'cause they want to see it have success."
		"We use to have a hospital...now we don't. So now ...we can't run the kid down to the ER...it's being out in an area like this it's...that is a tough situation...especially a serious injury"
		<b>Coach #1:</b> "I've really not been in that situation much...I've always had somebody there."
RQ 2	Both coaches had high levels of confidence in their ability to handle orthopedic injuries but little confidence in handling medical emergencies	<b>Coach #1:</b> "For a medical emergency, I'd like to have somebody with me." "...ankle, knee joint, tendon, something like that. So yes, I do feel confident there" "I wouldn't be worried at all about anything like that."
		<b>Coach #2:</b> "I can check, I kinda can tell myself if it's broke or not ya know, I've had broken bones myself so I know what that feels like."
RQ 3	Online training is helpful, but no replacement for medical professionals	<b>Coach #1:</b> "I don't know that you could give me enough training. I don't think that we could be trained for that"
		<b>Coach #2:</b> "Coaches can take all the classes and online stuff you know they want, but that still isn't gonna make him; we're still not trainers and doctors necessarily"
RQ 4	Both coaches thought it was beneficial to have an AT on staff	<b>Coach #1:</b> "I think it's invaluable – gotta have it", "I probably would not coach if I didn't have a trainer."
		<b>Coach #2:</b> "I don't know if it's necessary, but I would highly recommend it if you can get one"

## RECOMMENDATIONS

- Stakeholders and lawmakers should be urged to:
- improve the required training for high school football coaches to include in-person training sessions, interactive sessions, and hands-on scenarios;
  - update the required training annually; and
  - require schools that have athletics to have a full-time AT to remove the burden and liability on coaches.

Future research with coaches regarding ATs should involve more coaches, specifically those without a full-time AT, no matter the setting (urban, suburban, rural) or sport. There is a need for research focused on players' perspectives of ATs and their experience with coaches making medical and return-to-play decisions.

## ACKNOWLEDGEMENTS

I would like to thank Dr. Janet Isbell for her time, patience, constructive criticism, and understanding throughout this research project.

## CONTACT

Bobbi Severt, MA, ATC  
Email: bsevert@tntech.edu  
Phone: 931-372-3468

## REFERENCES

1 Huggins, R. A., Coleman, K. A., Attanasio, S. M., Cooper, G. L., Endres, B. D., Harper, R. C., Huemme, K. L., Morris, R. F., Pike Lacy, A. M., Peterson, B. C., Pryor, R. R., & Casa, D. J. (2019). Athletic trainer services in the secondary school setting: The athletic training locations and services project 2<sup>nd</sup> annual report. Korey Stringer Institute [https://ksi.uconn.edu/wp-content/uploads/sites/1222/2019/11/ATLAS-2019-Full-Report\\_06.18.19.pdf](https://ksi.uconn.edu/wp-content/uploads/sites/1222/2019/11/ATLAS-2019-Full-Report_06.18.19.pdf)