**Professionalization of Exercise Physiologyonline**

ISSN 1099-5862

**November 2015**

**Vol 18 No 11**

**American Society of Exercise Physiologists**

**The Professional Organization of Exercise Physiologists**

The Professional Organization of Exercise Physiologists

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**Dare To Be Different**

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**Our Greatest weakness lies in giving up. The most certain way to succeed is always to try just one more time.**

**--** Thomas Edison

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 n sports, without the “will to try” – hardly anyone would be an athlete. Failing is okay as long as we get up and keep trying. How else would we learn (whether it is sports or life)? In academia, the courage it takes to speak up to upgrade an exercise science degree to an accredited exercise physiology degree isn’t all that different from a gymnast who is uncomfortable with trying for the first time a full twisting double back off the high bar.

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| *The greatest mistake you can make in life is continually fearing that you’ll make one.**-- Elbert Hubbard* |

Not everyone is willing to do what it takes to be a gymnast, an artist or a Board Certified Exercise Physiologist. However, one thing is certain, if you don’t “dare to be different” … You will have little to say about the future of exercise physiology. So,how did this thinking get started in my life? In short, it was my turn to do a demonstration speech in high school. As God would have it, the Northwestern State University gymnastics team from Natchitoches, LA put on an exhibition at my high school.

That day I decided to teach myself how to do a handstand, which sparked my interest in “anatomy”. I went to the Library and checked out an anatomy book and taught myself the muscles of the chest, shoulders, and arms. As they say, “The rest is history.” I got an “A” on the speech, and I went on to become an All-American gymnast at Northwestern.

After coaching men’s gymnastics at the University of LA at Monroe and after 3 years of teaching gymnastics at the University of Florida, I decided it was time to move to Tallahassee to get the doctorate degree at Florida State. During my 2nd year of PhD work, I dissected cadavers that led to my decision while teaching at Wake Forest University, the University of Southern Mississippi, and the College of St. Scholastica to develop an Anatomy Laboratory with cadavers.

The idea of having access to cadavers was so uncommon that some of my exercise physiology colleagues laughed at me, which is the 1st point to emphasize (i.e., don’t let the behavior of others stop a good idea). Interestingly, the anatomy faculty at Wake Forest Bowman Grey School of Medicine thought it was a great idea. They believed my students should have the same hands-on opportunity to learn anatomy as PT, OT, nursing, and other healthcare students have. That is also why my college text, *Introduction to Exercise Physiology,* has three chapters dedicated to anatomy.

Aside from the usual “exercise physiology chapters” in such a text, there are also three chapters about the American Society of Exercise Physiologists (ASEP), exercise physiologists as healthcare professionals, and exercise medicine. Being able to talk the same anatomical language as other healthcare professionals is important for referrals, respect, and professional success.

As healthcare professionals, we must stop limiting ourselves to just physiology, especially when the exercise physiology academic course work is so much more? As an example,andmy 2nd point to highlight, is thatI agree with Dr. Sugarman and Lucy Freeman (who pointed out in their book), *The Search for Serenity*, “The body and mind are different sides of the same coin.”

Their thinking and authors of similar books led me to publish, *Integrating Spirituality and Exercise Physiology*. The fact is … I cannot help but be impressed with the power that spirituality plays in health and disease. Perhaps, the person who gets this point the best is Larry Dossey, a distinguished Texas medical doctor who wrote: “In response to the evidence showing a positive role of prayer and religious practices on health, nearly 90 of ~125 medical schools currently offer courses in this area.”

No doubt there is the belief that it will help the medical students be better medical doctors. I wonder … with today’s global emphasis on “exercise medicine” … how many exercise physiologists are teaching in medical schools? I have to say, I don’t know, but probably very few if any! However, my point is, even though exercise physiologists are not teaching medical students the specifics of exercise medicine, I am confident there is no way that medicine is going to be able to stand on the sidelines and ignore exercise physiologists as the experts in prescribing exercise medicine.

As to my 3rd point, there is intense pressure on college teachers to bring in grants and publish papers. That is why professors spend a lot of their time on research and the minimum they can get away with on their teaching. Bear with me. Recently, I read the following statement: “The faculty in our PhD program in Exercise Physiology is ranked 7th across the U.S. by the Chronicles of Higher Education. This ranking is based on research publications, research citations, and federal funding for our graduate faculty.”

While research is obviously important, my concern is this: Why wasn’t the ranking interested in the faculty’s commitment and/or quality of teaching! Maybe, part of the answer is because it is common knowledge that faculty members with strong research records and below-average teaching routinely get to be full professors, while outstanding teachers with below average (and sometimes average) research productivity don’t get tenure?

It shouldn’t come as a surprise that most colleges and universities emphasize research and not teaching. Perhaps, that part of the reason that ~70% of college teachers are adjunct teachers (who are paid an average of $2,500 per course)! Today, academic institutions are businesses driven by the number of research papers published more so than an academic environment that drives a higher level of intellect, critical thinking skills, and credible career options. Yet, as Dr. Karen Kelsky, author of the blog, *The Professor Is In* said, “Academic publishing is no guarantee of anything, except possibly the paywalled obsolescence of your work….”

This does not mean that academic publishing has no value. Teaching “what is known” without producing “new ideas from research” makes no sense. Research clarifies and reshapes our understanding of important topics, and it can help save lives. What it cannot do is get you a job and this is my point, especially if you are a graduate student. Also, however difficult it is to accept, what if I said to you, “It is very likely that a great many research papers are not read by anyone other than their authors, referees, and journal editors.” While disappointing for sure, the emphasis on research at the expense of the students’ education and planning for a credible career after college is also disappointing.

Dare I say that my 4th pointis equally problematic and that is the exercise physiology faculty’s conformity to theexercise sciencedegree title and course work. Why exercise science and not exercise physiology? More than once, I have been told “because that is the way it has always been.” Others have said, “You need a master’s degree to be a “clinical exercise physiologist” and you need the PhD to be an “exercise physiologist”.

In fact, a PhD exercise physiologist said to me at a popular national meeting, “Just because your students graduate with an academic degree in Exercise Physiology, you cannot allow them to refer to themselves as an “Exercise Physiologist with just an undergraduate degree.” I can only say to you that it is likely that the PhD – exercise physiologist has not had an original thought in her life for fear of not being like everyone else.

Equally troubling is the unanalyzed titles such as “clinical exercise physiologist” as though it is somehow different from an “exercise physiologist”. An exercise physiologist can work with a clinical population and/or healthy subjects, so what is the point? The idea of a distinction between the two is thinking caught in the inertia of failed rhetoric.

We within ASEP agree with Mathew Henry who wrote, “None so blind as those that will not see.” Vision always demands a high price! The bumps and bruises and the darkness of people’s opinions stay with us, but only if we are willing to pay the price for our vision. This is true even when there is very little distinction in academic course work between some exercise physiology degree programs and the exercise science degree that is little more than the course work of physical education students over the past 60+ years.

Here is an idea, and it isn’t complicated. Why not update the exercise science degree in the 3,000+ colleges and universities in the U.S. to an ASEP accredited exercise physiology degree? Why not acknowledge that we are “exercise physiologists” and not “exercise scientists” or, as commonly heard, a “physiologist”. Simply stated, a person is not a “physiologist” unless he or she has a degree in physiology. Moreover, the fact that doctorate students are not taught how to teach or how to think about professionalism, professional development, and ethics is a huge problem.

It is no wonder they graduate with the belief that research is the only thing important and there is little to no discussion regarding ethical thinking. No wonder exercise physiologists with an interest in sport nutrition are confused. Should they teach sports supplements or sports nutrition? Perhaps, the reason we don’t change (i.e., think outside the box) is because we do not “dare to be different” … which raises the question: What does being different mean? The answer is:

* Not being afraid to challenge the norm.
* Being willing to take a chance.
* Asking why.
* Charting your own destiny; and
* Having the audacity to consider new realities.

Being different is about “believing in yourself” and “living your dream”. I believe it was Debbie Millman who said, “If you imagine less, less will be what you undoubtedly deserve.” Well, it should be obvious that the students of exercise physiology, exercise science, kinesiology, and 20 or so other PE-related degree titles and programs are getting less simply because their teachers, chairs, deans, and administrators have settled for less.

But, I believe there is more to academia. There is more to exercise physiology than viewed as a “pre-professional” preparation for physical therapy, or nursing. I look forward to the day that teaching promotes ideas and changes behavior and brings us together as professionals.That day means exercise physiologists will no longer do what is commonly expected of them by non-professional (i.e., generic) organizations. They will also ask the question: “What can we do to take charge of exercise physiology as a profession that empowers our students and contributes to the well-being of society?”

My 5th point is that it is common knowledge many undergraduate students find themselves after college as personal trainers or fitness instructors. Then, too, there is the big push by the academic advisors to get as many seniors as possible to complete graduate applications to different graduate programs. Please appreciate that I have no problem with someone who honestly wants to be a personal trainer or a physical therapist. Rather, my point is that no one should have to default to being a trainer or a PT because there are few good career options or information as to how a college graduate can survive financially, especially after paying into the academic system $60,000 to $120,000 in tuition fees. There is no reason that the students cannot be supported by academic exercise physiologists who understand the importance of their own profession-specific organization to help promote credible careers.

Thinking positively, the ASEP Board of Directors believe there will be more exercise science degrees converted to exercise physiology that are accredited by ASEP (such as most recently, the DeSales University). Members of ASEP believe that Father Doug Burns and Dr. Rebecca Kudra of DeSales are helping to build the foundation of a new exercise physiology reality, which is the profession of exercise physiology. This brings me to the 6th point: “Life is short”.

If you don’t like something, you must do what you can to change it. Living your dream is 100% better than working on behalf of another person’s self interest!I would like to say to the skeptics, that is, those of you who are likely to say, “Oh, what a loser! He’ll get over it, and then he’ll be just like everyone else.” No! No way! I am here to stay! ASEP is here to stay! The members have the desire, strength, and determination to ride it out to the end. Why, because we dare to be different.

It’s up to you**.** It’s up to me. If you have ever had dreams of leadership, now is the time to get involved with ASEP. The ASEP organization is the place. Ask yourself the following questions: (a) Do you have the courage to be different? (b) Do you have the commitment to follow the path to professional success as an exercise physiology healthcare professional? (c) Do you have what it takes to be part of the social process that transforms exercise physiology into a true profession of the highest integrity and competence?

We must believe in who we are, what we do, how we do it, where we do it, and why we embrace the ASEP exercise physiology standards of professional practice. Understandably, forming a professional identity across such diverse divides as exercise physiology, exercise science, sports science, kinesiology, human performance, health and wellness, physical education, and dozens of other degree titles as offshoots of the health and physical education degree is not an easy task.

No doubt you know that change happens slowly, often, student by student … teacher by teacher … decade by decade. But, we can make a difference! We can help exercise physiologists who are paralyzed by their fear of disapproval from colleagues and personal doubts. It will not be easy, but we must try. Perhaps, we can learn what binds us (if anything). Is it sports and physical activity? Is it health and fitness? Is it exercise is medicine? Is it “exercise medicine” or is it “medicine is exercise”? Is it lifestyle medicine? Are they the same? How are they different?

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| *I want you to start a crusade in your life – to dare to be your best. I maintain that you are a better, more capable person than you have demonstrated so far. The only reason you are not the person you should be is you don’t dare to be. Once you dare, once you stop drifting with the crowd and face life courageously, life takes on a new significance. New forces take shape within you. New powers harness themselves for your service.**-- Excerpt from* ***I Dare You*** *by William Danforth* |

If they are more alike than unlike, it seems reasonable that the different academic programs should agree on one powerful title (Exercise Physiology). Otherwise, by remaining as we are with different degree titles across hundreds of universities in the United States, we fail to engage new ideas and possibilities. In fact, we isolate ourselvesfrom career opportunities that will allow us to grow as credible healthcare professionals. Also, sadly, we continue to marginalize our students and, frankly, others see this and they are taking advantage of our lack of purpose, perspective, knowledge, and service.

I understand that the path of change and challenging ideas is neither easy nor clear. At times, we lose our friends and, most certainly, we create enemies. Yet, it is still a path worth taking. Dare to be different and you will live the future of a healthcare entrepreneur. Dare to speak up for the right reasons. Dare to manage your dream of something better. Remember, “We become what we think about.” So, why not think “exercise physiologist”. As an ASEP Board Certified Exercise Physiologist, you have the credibility to start your own “Exercise Medicine Clinic” -- just as other healthcare practitioners do in their profession.

Did you know that “The United States Bureau of Labor Statistics” estimates that the public’s interest in fitness and wellness will increase by ~30% by 2018?Did you know that the same department identifies “Exercise Physiology” as a healthcare profession? In short, the “Bureau” states that “Exercise physiologists are nationally recognized as practitioners who provide an important healthcare service to the public sector”. This point is important.

I know you realize that the “lack of regular exercise” is the 4th leading cause of global mortality, illness, and suffering from chronic diseases? Yet, theExercise Medicine prescription can:(a) reduce mortality and the risk of recurrent breast cancer by ~50%; (b) lower the risk of colon cancer by over 60%; (c) reduce the risk

of developing of Alzheimer’s disease by ~40%; (d) reduce the incidence of heart disease and high blood pressure by ~40%; (e) lower the risk of stroke by ~30%; (f) lower the risk of developing type II diabetes by ~60%; (g) can decrease depression as effectively as Prozac or behavioral therapy; and (h) adults with better muscle strength have a 20% lower risk of mortality (33% lower risk of cancer specific mortality) than adults with low muscle strength.

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| *No one can make you feel inferior without your consent.**-- Eleanor Roosevelt* |

I am convinced that if we continue exercise physiology in accordance with the 20th century exercise science thinking, it is a sure means of sacrificing our future as exercise physiologists (and that of our students). To highlight this point, Matthew Wattles (the 2004-2005 ASEP President) said 14 years ago in an article published in the *Professionalization of Exercise Physiologyonline*journal: “The sad fact is exercise physiologists have no sense of themselves, no sense of a profession.  We need people to step forward with a vision – a vision of creating a dynamic new Profession of Exercise Physiology.

* A profession that we can all be proud of and get the respect we have all worked so hard to achieve.
* A profession that will give us financial as well as career stability.
* A profession that can educate clients/patients on the necessity for exercise to improve their quality of life and prevent the debilitating diseases caused by lifelong, sedentary living.”

As Shirley Steele and Vera Harmon said in their book, *Values Clarification in Nursing*, “There comes a time when it is necessary toquestion, to argue, to challenge.” This means that it is not just okay, it is imperative that we questionand challenge our present day academic conditions and the lack of meaningful career opportunities that are available to other healthcare practitioners.

I understand that Board Certified Exercise Physiologists can work in hospitals, rehab centers, out-patient clinics, community, corporate, commercial, and university fitness and wellness centers, in nursing homes, and senior citizens centers, but what puts a big smile on my face is their work as healthcare entrepreneurs. Think about it: This means they are taking responsibility as “Exercise Physiology Entrepreneurs” to help ensure their financial future. To help with the transition process, why not take a look at the book, *The Business of Exercise Physiology*.

Are you willing to pay the price for your success? If you are, then, success means that you have take the time to learn specific business skills and you stop with your persistence to be an independent professional only after you have realized your vision of something better for you and those you care about. With a daring attitude, action, tenacity, commitment, and sheer perseverance, exercise physiologists will become everything they dream to be when they and their parents talked about why they should go to college.

Dare to be different. Try one more time!