SOCIETY. INTEGRATION. EDUCATION
Proceedings of the International Scientific Conference. Volume II, May 24th, 2024. 615-625

WELL-BEING AND WORK SPECIFICS FOR FITNESS TRAINERS IN LATVIA

Aleksandra Ķeizāne

Leonīds Čupriks
Latvian Academy of Sport Education

Abstract. *The work-related load can cause serious health issues and discomfort. Ligament and muscle sprains and inflammations, psycho-emotional issues, burnout, and other problems among trainers are not treated in due course and contribute to the inability to work in the future. The profession of a fitness trainer is quite challenging – heavy workload, highly changing environment, noise, the risk factors, high responsibility, high flow of people, high competition, and a relatively low salary. Every day, fitness trainers help others to improve their health and appearance. However, trainers often forget about how much the specifics of their work can harm themselves. Therefore, the purpose of this study is to investigate the work specifics of fitness trainers and how it affects the well-being of trainers in Latvia. An anonymous online survey was conducted to achieve this goal. The survey consisted of 26 closed-ended questions with multiple-choice answers and the possibility to add one's own response option. The survey was divided into blocks, namely qualification and work experience, work specifics and conditions, rest and recovery, and characteristics of well-being. In total, 141 fitness trainers from Latvia participated in the study, of which 92 were women and 49 were men. For data analysis, the SPSS 18.0 software was used for performing mathematical and descriptive statistics. Analysing the obtained results, it can be concluded that fitness trainers in Latvia have a very heavy workload on a daily basis, there is practically no opportunity to rest and recover between the training sessions, there are very few or no days off at all, there is often no time and energy to fully and qualitatively focus on one's own body and physical form, and often there are no regular visits to qualified specialists who could help trainers to improve their own well-being. All of this contributes to the discomfort, pain, and ill health among fitness trainers on a daily basis. Therefore, this issue needs to be addressed at the industry level.*
Keywords*: fitness trainers, health issues, injuries, well-being, work specifics.*

Introduction

The work-related load can lead to serious health issues, musculoskeletal injuries, and related discomfort. Ligament and muscle sprains and inflammations, psycho-emotional issues, burnout, and other issues are not treated in due course and contribute to the inability to work in the future. Furthermore, musculoskeletal disorders are one of the most common work-related health issues among trainers (Malliou et al., 2013a, 2013b; Malliou et al., 2014). Diseases of the musculoskeletal system significantly affect the quality of life for a person, while causing financial losses due to treatment. Sick leaves, absence from work and also

https://doi.org/10.17770/sie2024vol2.7911

the inability to continue working in the chosen profession are frequent outcomes for people with such health issues (Bonato et al, 2020; Shinde & Sahasrabuddhe, 2021; George & Abraham, 2022).

In the past 10-15 years, the fitness industry has seen an increase in the number of specialists and clients. People are starting to think more about their appearance and health, and the services have become available to more people. In fitness, one can improve their physical fitness – endurance, muscle and bone strength, mobility, coordination, as well as the immune system, posture and figure. Fitness also provides the opportunity to communicate and spend one's free time actively. Therefore, several insurance companies and workplaces are starting to offer fitness training to their clients and employees.

Nonetheless, the profession of a trainer is quite challenging for everyone involved in this field due to the heavy workload, highly changing environment, noise, the risk factor, high responsibility, high flow of people, high competition, and a relatively low salary (Gjestvang et al., 2021).

Every day, fitness trainers help others to improve their health and appearance. However, trainers often forget about how much the specifics of their work can harm themselves.

Therefore, the purpose of this study is to investigate the work specifics of fitness trainers and how it affects the well-being of trainers in Latvia.

Methodology

In order to study the work specifics of fitness trainers in Latvia and its impact on their well-being, an anonymous developed by current study authors online survey was conducted. In addition, data was collected on the level of qualification, age, and work experience of the trainers. The survey was sent to fitness trainers through social networks and e-mail. The survey consisted of 26 closed-ended questions with multiple-choice answers and the possibility to add one's own response option. The survey was divided into blocks: qualification and work experience, work specifics and conditions, rest and recovery, and characteristics of well-being. In total, 141 fitness trainers from Latvia participated in the study, of which 92 were women and 49 were men. For data analysis, the SPSS 18.0 software was used for performing mathematical and descriptive statistics.

Results of the Research

By analysing the data obtained, it can be concluded that all surveys were valid for further data processing and inclusion in the study. The average age of the respondents was 34 years.

By analysing the respondents' qualifications and work experience in the field, it can be concluded that the largest number of respondents - 47 (34.1%) have

been working in the field for more than 10 years, 19 respondents (13.8%) have been working for less than 1 year, 36 respondents (26.1%) have been working from 1 to 5 years, and 36 respondents (26.1%) have been working from 5 to 10 years. A larger number of respondents have obtained the trainer category B – 22.5%. Nonetheless, there are also trainers with a scientific degree and category B. Furthermore, 24.6% have a Bachelor's degree, 10.9% have a Master's degree, and 1 trainer has a Doctoral degree. There were 35.5% of trainers with category C, and there were also trainers with no special education – 6 (4.3%) (see Fig. 1).

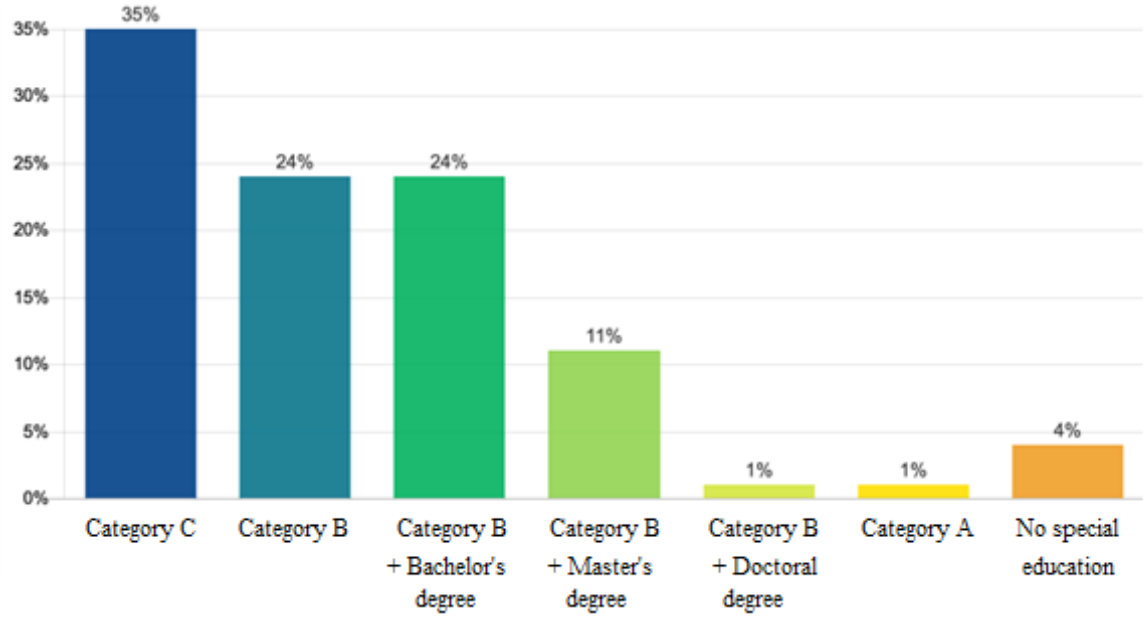

Figure 1 ***Qualification of Fitness Trainers***

By analysing the work organization form of fitness trainers, it can be concluded that the largest number of trainers lead individual training (47.8%) and group training (29%) in person. Some coaches lead both individual and group training in person (18.1%). A very small number of trainers lead small group training (4.3%) and online training (5.7%) (see Fig. 2).

The largest number of trainers conduct daily classes in the gym (31.9%). In turn, 23.7% of trainers lead the training in a group training hall, while 19.4% of trainers – in a functional-type hall. Furthermore, 5.7% of trainers lead classes in a cross-training hall, and 5.7% work online from home. Nonetheless, 1 trainer mentioned that they visit clients for the training (see Fig. 3).

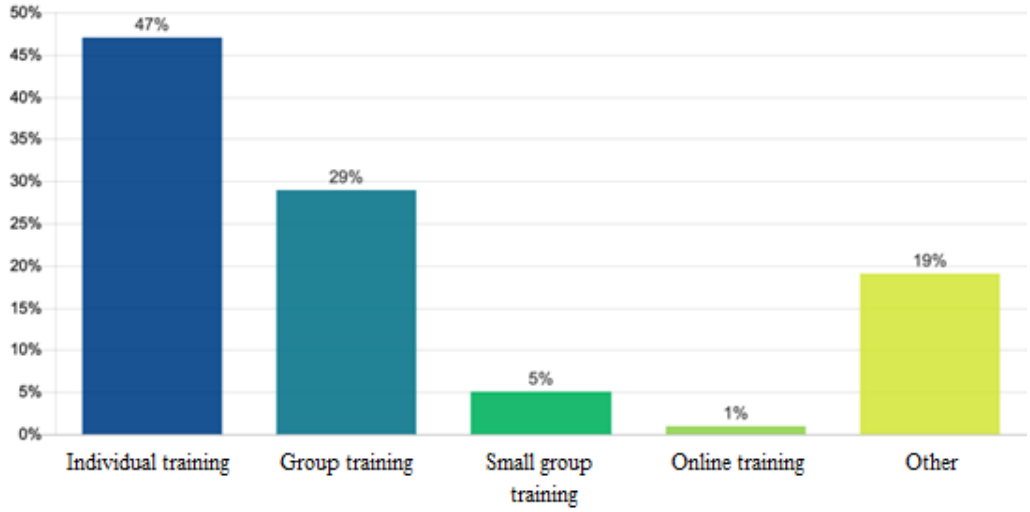

Figure 2 ***Work Organization of Fitness Trainers***

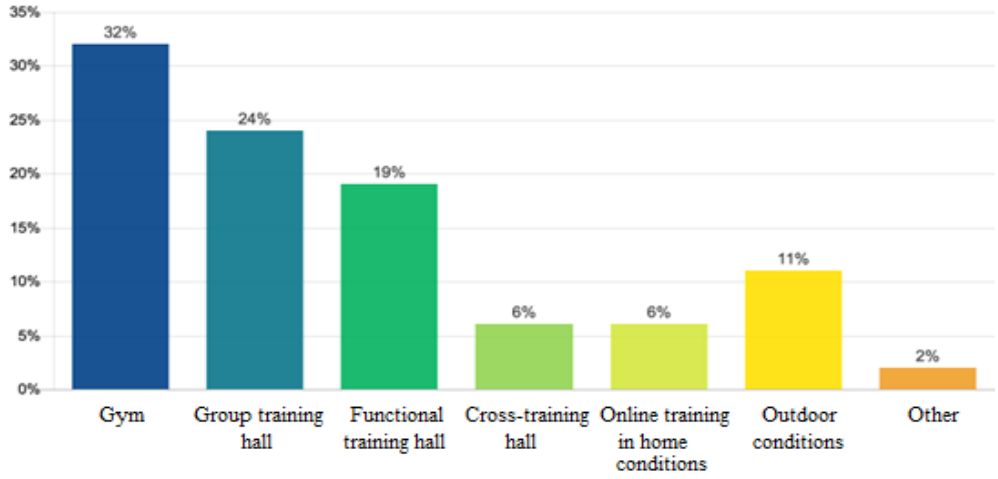

Figure 3 ***Working Environment of Fitness Trainers***

Analysing the working conditions, it can be concluded that almost all trainers have access to high-quality training equipment (90.6%). However, 9.4% of trainers mentioned that they do not have access to high-quality and diverse equipment.

The largest number of trainers conduct strength training (28.1%) and functional training (25.4%) on a daily basis. Cardio training is led by 17.2% of trainers, and training of the body and mind type is conducted by 12.4% of trainers. It was also mentioned that trainers lead trainings such as dance fitness (2.5%), other sports such as boxing, wrestling, and other integrative trainings (8%), and training of the cross-training type (5.2%) (see Fig. 4).

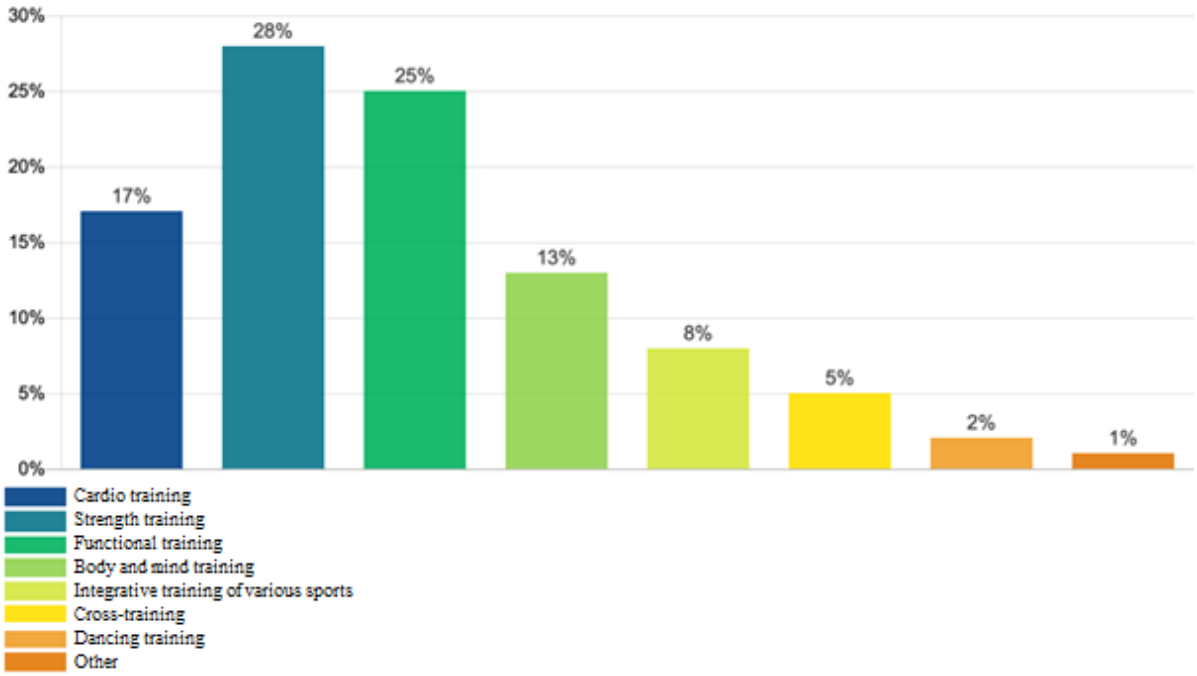

Figure 4 ***Training Style of Fitness Trainers***

By analysing the duration of each training session, it can be concluded that 70.3% of trainers conduct training sessions that last 30-60 min, while 26.1% lead training sessions that exceed 60 min. Moreover, 26.8% of trainers mentioned that they perform tasks together with clients during the training sessions, and 49.3% of trainers sometimes perform tasks together with clients.

By analysing the everyday well-being of fitness trainers, it can be concluded that 26.8% regularly feel discomfort on a daily basis, and 39.1% of trainers sometimes experience it (see Fig. 5).

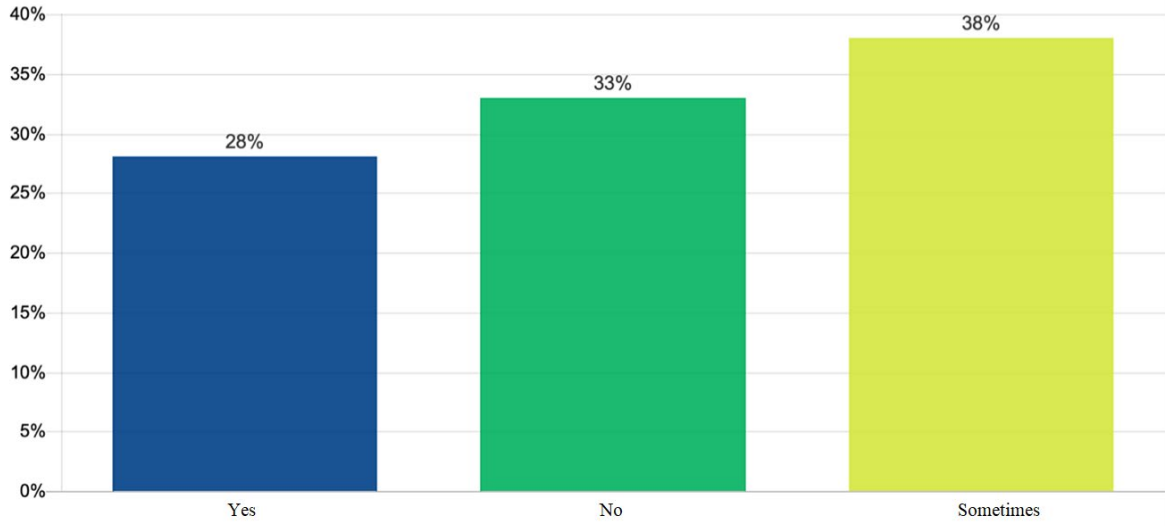

Figure 5 ***Feeling Discomfort Everyday***

The most frequently mentioned discomforts were weakness and fatigue (23.7%), stiffness in the body (12.6%), sleep disorders (12.9%), psycho-emotional tension (12%), burnout (10.8%), and vocal cord overload (7.6%). Furthermore, it was also mentioned that some trainers were experiencing dizziness (2.3%), appetite disturbances (3.5%), shortness of breath (1.4%), muscle cramps (2.9%), and reduced amplitude in the joints (3.5%) (see Fig. 6).

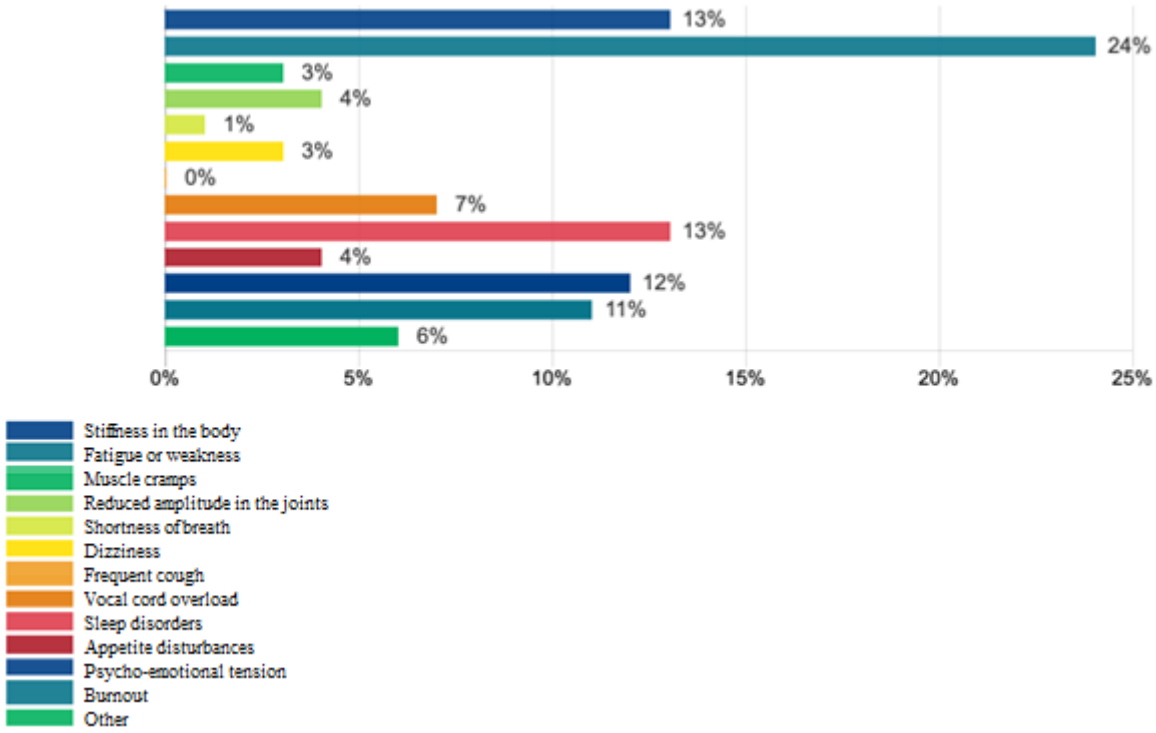

Figure 6 ***Discomfort of Fitness Trainers***

Furthermore, 16.7% of trainers regularly and 42.8% of trainers sometimes feel body aches. The most frequently mentioned body parts where trainers feel pain are lower back (24%), shoulders (13.9%), knees (14.6%), upper back (9.4%), pelvis (7.5%), neck (5.2%), foot (5.2%), palm (4.1%), elbow (2.2%) (see Fig. 7).

Trainers believe that they feel such discomfort and pain due to lack of full-fledged rest (27.3%), due to high daily stress (24.1%), due to heavy workload (19.5%), and due to the high flow of people (12.7%) (see Fig. 8). Moreover, 24% of trainers have a chronic injury, and 9.6% have an acute injury. Furthermore, 25.4% of trainers have had an injury related to work or at the workplace in the last 2 years. In turn, 10.8% of trainers have postural disorders that worsen their well-being at work and in everyday life.

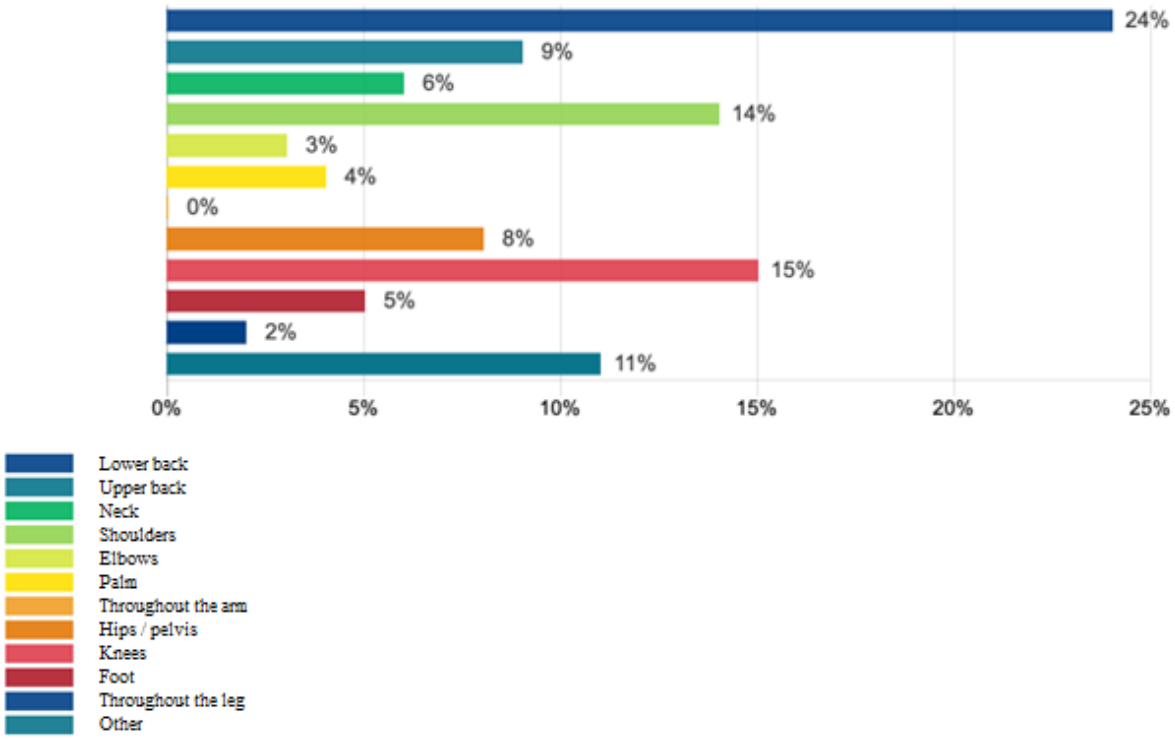

Figure 7 ***Pain in Fitness Trainers***

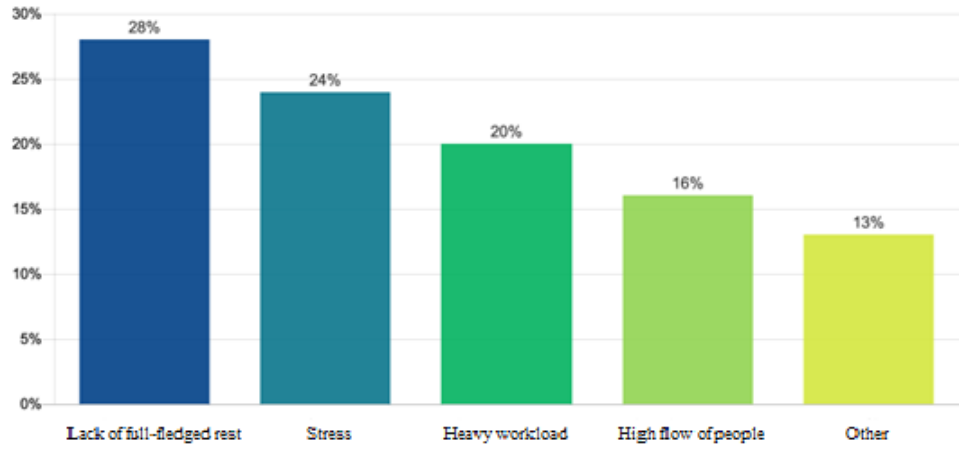

Figure 8 ***Cause of Pain and Discomfort in Trainers***

A large number of trainers have a very high training volume per week, as 39.9% of trainers conduct more than 15 training sessions per week. Furthermore, 20.3% of trainers lead between 10 and 15 training sessions per week, and 26.1% of trainers conduct up to 10 training sessions per week. By analysing the intensity of the trainings conducted, it can be concluded that a larger proportion of trainers conduct medium-intensity training sessions (43.3%). Nonetheless, 28.2% of trainers conduct only high-intensity training, and 26.5% lead only low-intensity training.

Moreover, 30.5% of trainers claim that the workload is too heavy. By analysing the daily rest opportunities of trainers during the workday, it can be concluded that 5.1% of trainers do not have a rest break between training sessions at all, 29.7% only sometimes have the opportunity to rest during the day, and 43.5% have small rest breaks during the day. Furthermore, 56.5% of trainers do not have access to a rest area at their workplace where they could spend time between training sessions. By analysing the number of days off per week, it can be concluded that 5.8% of trainers have no days off at all, 82.6% have 1 or 2 days off, and 11.6% of trainers have 3 or 4 days off per week.

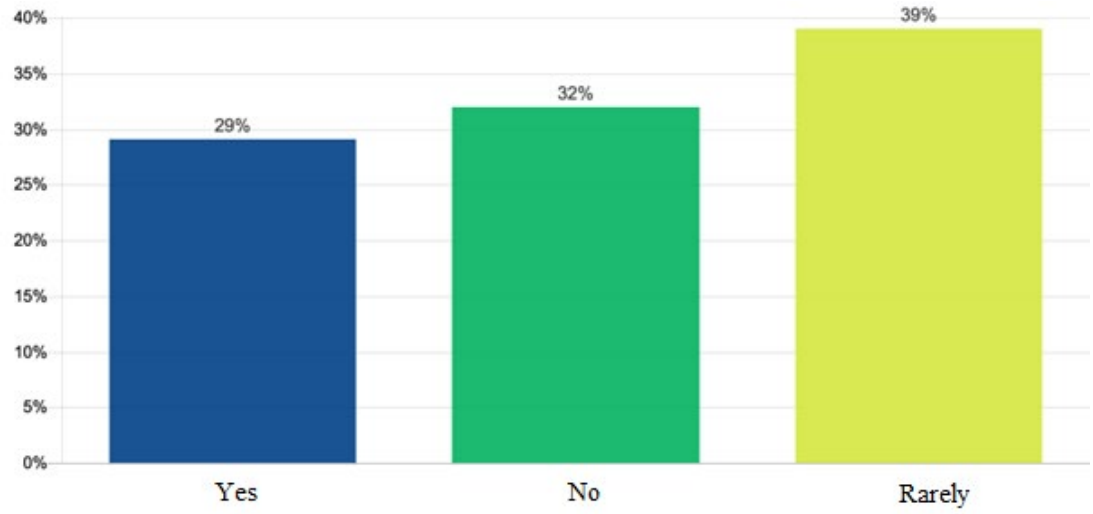

Figure 9 ***Do Fitness Trainers Visit a Specialist to Reduce Pain or Discomfort?***

By analysing the actions of trainers to reduce pain or discomfort in the body and to reduce the risk of injuries, it can be concluded that only 28.3% regularly visit a physiotherapist and similar specialists, 32.6% do not visit them at all, and 39.1% visit them very rarely. Furthermore, 14.5% of trainers do not have time and energy to train themselves, 30.4% of trainers sometimes get to train by themselves, and only 55.1% of trainers regularly find time for themselves (see Fig. 9).

Discussion

This study demonstrates that the high risk of injury and deterioration of well-being among fitness trainers is largely due to the heavy workload and changing environment. For fitness trainers, the salary depends on their work abilities, the amount of work, and the number of hours each trainer spends at the fitness club. That is why trainers are forced to work more than they would like and could afford based on their well-being.

As this study showed, trainers work practically without days off, without a lunch break, and without breaks between clients. All this contributes to discomfort and disorders of well-being, body aches, and also burnout (Gjestvang et al., 2021).

Trainers who work with private clients often show exercises without warming up, and support the client in exercises with high resistance without thinking about their own body position. Trainers also move heavy equipment several hours a day, and are in an uncomfortable position for a long time. They also have no time and energy to fully exercise and harmoniously develop their own body (Shinde & Sahasrabuddhe, 2021).

The study also showed that many fitness trainers perform very heavy loads, perform exercises with groups for several hours a day, talk loudly during exercises, do not breathe properly, and motivate, supporting, and working with loud music (Klimek et al., 2018).

Trainers work in several workplaces, and after the training, they run in a hurry, sweaty and tired. Only in the evening do they realize how much fatigue has been in the background throughout the day.

Moreover, the societal pressure on fitness trainers is enormous. Trainers are dictated how to look, how to eat, and how people are allowed to behave in order to promote a healthy lifestyle. However, trainers are in a risk group because they have very little time for themselves (George & Abraham, 2022).

Many fitness instructors lack knowledge about how to organize their work to reduce risks, what injuries and illnesses can occur, what to do when an issue has already occurred, what is the prevention of injuries and illnesses. Furthermore, trainers also do not treat injuries for a long time, go to work during illnesses, and do not pay attention to their posture, focusing more on their clients.

Research show that injuries among trainers depend on the specifics of training and workload. Very often strength and resistance trainers complain of lower back pain and knee joint injuries (Bonato et al, 2020; Shinde & Sahasrabuddhe, 2021; George & Abraham, 2022). At the same time, high-intensity cardio trainers complain more about hip injuries and also knee injuries (Bratland-Sanda et al., 2015; Klimek et al., 2018; George & Abraham, 2022). Studies have found that such health issues in the representatives of these trainings begin due to the monotonous repetitive activity in training. In turn, research on the training type “CrossFit” or “cross-training” show that traumatism is greater and more serious among the trainers of this direction than in Olympic weightlifting, short-distance running, rugby, and sports gymnastics (Bratland-Sanda et al., 2015; Klimek et al., 2018; George & Abraham, 2022). Many trainers do not warm up or cool down after training, quickly perform the exercises of the main part of the training between clients, and continue working.

Conclusions

By analysing the results obtained, it can be concluded that fitness trainers in Latvia also have a very heavy workload on a daily basis, practically no opportunity to rest and recover between training sessions, very few or no days off at all, often lack the time and energy to fully and qualitatively focus on their own body and physical form, have no opportunity to visit qualified specialists who would help to improve their well-being. All this contributes to discomfort, pain and well-being disorders in the daily life of fitness trainers.

This issue needs to be addressed at the industry level, by raising the salary of trainers, and organizing seminars on work environment and work organization in fitness clubs and other places where trainers conduct training sessions. There is also a need to develop guidelines for implementing optimal maximum work volumes in the field of fitness. This will help trainers to work less, but with better quality, without harming their health.

References

Bonato, M., Merati, G., Agnello, L., Grevers, D. (2020). Occupational injuries, daily workload, and fitness levels among fitness and swimming instructors. Retrieved from: https://www.researchsquare.com/article/rs-16496/v4

Bratland-Sanda, S., Sundgot-Borgen, J., & Myklebust, G. (2015). Injuries and musculoskeletal pain among Norwegian group fitness instructors. *European journal of sport science*, *15*(8), 784-792. Retrieved from: doi: 10.1080/17461391.2015.1062564

George, S. A., & Abraham, A. T. (2022). A Review on Musculoskeletal Pain and Injuries among Fitness Instructors. *Int J Health Sci Res*, *7*(2), 150-156. Retrieved from: https://doi.org/10.52403/ijshr.20220422

Gjestvang, C., Bratland-Sanda, S. & Mathisen, T.F. (2021). Compulsive exercise and mental health challenges in fitness instructors; presence and interactions. *J Eat Disord 9*, 107. Retrieved from: https://doi.org/10.1186/s40337-021-00446-0

Klimek, C., Ashbeck, C., Brook, A.J., Durall, C. (2018). Are Injuries More Common With CrossFit Training Than Other Forms of Exercise? *Journal of Sport Rehabilitation*, *27*, 295-299. Retrieved from: https://doi.org/10.1123/jsr.2016-0040

Malliou, P., Rokka, S., Tsiganos, G., Mavromoustakos, S., & Godolias, G. (2013a). Dance aerobic instructors' injuries in relation to external risk factors, part II. *Journal of Human Sport and Exercise*, *8*(3), 813-819. Retrieved from: doi: 10.4100/jhse.2013.83.06

Malliou, P., Rokka, S., Tsiganos, G., Mavromoustakos, S., & Godolias, G. (2013b). Profile of dance aerobic instructors' injuries, part I. *Journal of Human Sport and Exercise*, *8*(3), 806-812. Retrieved from: doi: 10.4100/jhse.2013.83.05

Malliou, P., Rokka, S., Beneka, A., Gioftsidou, A., Mavromoustakos, S., & Godolias, G. (2014). Analysis of the chronic lower limb injuries occurrence in step aerobic instructors in relation to their working step class profile: a three year longitudinal prospective study. *Journal of Back and Musculoskeletal Rehabilitation*, *27*(3), 361-370. Retrieved from: doi: 10.3233/BMR-140456

Shinde, N., & Sahasrabuddhe, P. (2021). Prevalence of musculoskeletal pain and injuries in gym instructors. *Int J Health Sci Res*, *11*, 62-7. Retrieved from: https://doi.org/10.52403/ijhsr.20210408

Stephen, K., Van Woerden, H., & MacRury, S. (2019). Assessing prevalence of urinary incontinence in Scottish fitness instructors and experience of teaching pelvic floor muscle exercises: an online survey. *Journal of Public Health*, *41*(1), e44-e50. Retrieved from: doi:10.1093/pubmed/fdy102