

Starting Strength

Should Personal Trainers and Coaches Be Licensed by the State?

by
Mark Rippetoe

What is the difference between me and the kid at Gold's with a BA in some version of Physical Education and a piece of paper from the National Strength and Conditioning Association? Besides the 40 years experience, the books, the journal publications, the number of athletes and clients we've trained, the seminars I've conducted, and the organization of coaching professionals my company has educated, developed, and maintained? In the event the State of Texas passes a law requiring that exercise prescription be administered by a "Licensed Professional," he can be licensed and I cannot.

Licensure is a method used by governments to regulate the practice of certain professions. Medicine, Law, Physical Therapy, Athletic Training, Accounting, Physicians Assistancy, Pharmacy, Nursing, Dentistry, Dental Hygiene, Speech Pathology, Dietetics, Chiropractic, Optometry, Podiatry, Petroleum Geology, Veterinary Medicine, Architecture, Counseling, Psychology, Irrigation, Massage Therapy, Social Work, Cosmetology, Engineering, Plumbing Inspection, Private Security, Pest Control, Manicure/Pedicure, and countless other activities are restricted to "Licensed Professionals" in Texas, and most other states enjoy a much higher level of state regulation. I happen to know that cake bakers in Iceland are required to be licensed.

In most cases, this regulation by the state is performed at the behest of the professionals in charge of the activity, more as a way to control the level of competition and access to the supply of their particular commodity than to ensure competence. The market is quite capable of ensuring competence, but the state is much better suited to restricting the number of other people competing with you.

I do not have a PE degree, and I am not a member of an exercise organization like the American College of Sports Medicine, the National Strength and Conditioning Association, the Pilates Method Alliance, the American Council on Exercise, or the National Exercise Trainers Association. A visit to their websites will show you why: they don't approach the problem the way we do, and we fundamentally disagree with their approach.

But their organizations are accredited and ours is not. Accreditation is a procedure by which your organization submits to a review by another organization that is supposedly in a better position to evaluate the honesty, integrity, and competency of your organization than either you or your customers.

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The primary concern of the accrediting body is your office procedures – at no point in the process are the accreditors concerned with the quality, the accuracy, or the veracity of the actual material you teach.

We lack the corporate structure necessary to comply with the Byzantine procedural requirements and layers of bureaucratic administration which are inherent in obtaining accreditation through a national or international agency. And in the event of a state law that requires the establishment of a State Exercise Prescription License, a PE degree and membership in one of these organizations will be almost certainly a requirement. Colleges and universities are interested in having a better reason to offer the degree, and national associations are interested in having more members.

I have been in the fitness industry since 1977, I have owned a gym since 1984, and I have personally taught thousands of people how to lift weights safely and productively. The methods taught in my books and videos have been used by millions of people and thousands of other exercise professionals, most of whom are in possession of a voluntary certification that I do not hold.

Sure, I could join. But the bigger question remains: why should there be a State License for the practice of exercise prescription? Or cutting hair or doing manicures or massage or plumbing or Physical Therapy, or any number of other activities about which adults are capable of making a decision on who they hire for the job?

State licensure of exercise would start with the establishment of a State Board of Exercise Prescription Examiners (The SBEPE, acronyms being very important to The Government). On this august panel would sit a number of orthopedic surgeons, perhaps a nurse practitioner, a couple of Athletic Trainers, Certified, a couple of exercise physiology professors, an aerobics instructor or two, a Pilates teacher, a token health club chain owner, and most importantly, several Physical Therapists. The SBEPE would be tasked with the production of a document that would serve as the Standards of Practice for the business of exercise prescription in the state.

Our emphasis is strength training using the classic barbell exercises, the most effective exercises in existence for increasing strength – the most critical physical attribute for athletic performance, functional integrity, and longevity. But barbell strength training remains poorly understood by doctors, Physical Therapists, Athletic Trainers, Certified, as well as exercise physiology professors, aerobics instructors, and, amazingly enough, many professional strength coaches.

What do you suppose the SBEPE would say about full squats, as we perform them in our method? Bad for the knees. Despite the fact that they are not, as my experience with them for 40 years, and the experiences of countless thousands of trainees have indicated. Deadlifts? Destroy the back. Shears the spine. Instant paralysis. Barbell presses overhead? Destroys the shoulders. Impingement. Olympic lifts, like the snatch and the clean & jerk? Too dangerous, too difficult to coach.

What do you suppose their Standards of Practice document would approve of?

Such a government authority would be placed in a position to regulate that with which they have absolutely no experience. Because – believe it or not – orthopedic surgeons, nurses, Athletic Trainers, Certified, aerobics instructors, Pilates teachers, chain health club owners, exercise physiology professors, and most importantly Physical Therapists are not qualified to evaluate either the merits or the negative aspects of barbell strength training. Unless they have personally participated in it, none of these professionals have had any educational exposure to it, because barbell strength training is absent from the standard curricula of these professions' preparatory education.

Perhaps the most compelling argument that will be used in this effort to regulate exercise prescription through licensure will be Safety – always the first thing out of the regulator's mouth. The SBEPE will be The Experts. They can judge what is safe. You can't, because you are not an expert, and

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you cannot possibly know what will or will not hurt you. You must be protected. They must protect you. You want to be protected, of course. So you must be in favor of state licensure.

The difference between state licensure and voluntary certification is very important. In the field of exercise prescription and strength training – and in most fields in which professionals are proud of their profession – people acquire education, experience, and subsequently certification, because they are interested in bettering themselves professionally, not because licensure requirements force them to do so. Voluntarily certified professionals keep up with continuing education opportunities because they strive to remain competitive and are interested in their field, not because they will lose their state-granted license if they don't.

And voluntarily certified trainers are free to explore the rapidly-evolving options for the exercise specialty they wish to employ as their professional emphasis. A Standards of Practice document has the potential to drastically restrict the market for the kind of physical activity you as the consumer prefer to participate in. Unlike the already thorough, complete, and utterly faultless understanding of climate science, the science of exercise is not settled, at all. Human physiology is a study always in flux because of the astronomically high number of variables in the system, and what we knew 30 years ago was far from correct.

The writing in stone of a Standard of Practice will stifle our profession and limit the options available to the market. Before any attempt at the control of one more segment of voluntary market activity progresses any further, think about the broader question: How much more of your ability to judge for yourself are you willing to cede to yet another bureaucracy? Does your state know better than you do whether full squats are “bad for your knees”?

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