

Articles

Institutional certification for personal trainers in Angola: an alternative for professionalization that promotes public health

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Abstract: The sustained growth of the fitness and physical activity sector in Angola has generated an increasing demand for personal trainers in recent years, without there being a formal professional accreditation system to ensure the certification, quality, safety, and effectiveness of the services offered. This study is aimed at institutional certification for personal trainers in Angola; it has a mixed qualitative-quantitative approach and is of a descriptive-propositional type. The objective is to provide an alternative for professional advancement, with a comprehensive institutional certification model that integrates professional training, technical evaluation, and the legal recognition of personal trainers. The research process was carried out from January to September 2025 in the municipality of Kilamba, Luanda province, Angola. Theoretical and empirical methods were used, as well as statistical mathematics with descriptive statistics. Relevance was confirmed by applying Kendall's W concordance test to 15 specialists, with a significance value of $0.01 \leq 0.05$ and an acceptable association among the selected experts in their criteria (Kendall's W 0.451). The results were confirmed using descriptive statistics, and the data were revealed through frequency distribution. Training deficiencies in the role of the personal trainer were evident. In conclusion, it was found that there is no specific law regulating professional certification in the fitness field, which supports the need for a technical and institutional framework to ensure the quality and safety of practice.

Keywords: Professional alternative, professional certification, personal trainers, professionalization.



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Introduction

The professional training of personal trainers has become a fundamental piece to ensure that they possess the knowledge, competencies, and skills necessary to design, execute, and supervise safe, effective, and evidence-based training programs.

In recent decades, the accelerated growth of the fitness and physical activity industry in Angola, especially in the city of Luanda, has generated a significant increase in the demand for personal trainers and specialized physical conditioning services.

In the Angolan context, the practice of personal training has been characterized by labor informality and the absence of a legal or institutional framework that accredits the professional competencies necessary for the responsible and safe exercise of this function. Unlike other countries, such as Portugal and Brazil, where formal mechanisms for certification and professional registration exist, as worked on by authors like Domingues Filho et al. (2021). They indicate that the professional training of personal trainers should be linked to Physical Education training.

Similarly, Soares and de Oliveira (2021) conducted a study on professional qualification and the different fields of knowledge, affirming that the continuous training of personal trainers is of vital importance in their professional growth to enhance the quality of services.

On the other hand, Gomes and Caminha (2022) state that the training of personal trainers is necessary and implies a reorganization of the academic curriculum, as well as the fostering of new competencies oriented not only to utopian perspectives but also to practical applications to strengthen their professional preparation comprehensively.

In Angola, the work of the personal trainer lacks legal recognition within the structures of the Ministry of Youth and Sports and the Ministry of Health. This situation limits the insertion of the personal trainer as an active agent within public policies promoting well-being and preventive health.

From a health and educational perspective, institutional certification emerges as a necessary and strategic alternative for professionalization, which would not only raise the technical and ethical standards of personal trainers but also integrate them into the national public health promotion network.

By projecting a legally endorsed certification system, supported by state and academic entities, it would contribute to guaranteeing service quality, protecting users from inadequate practices, and strengthening the social function of physical exercise as an instrument for promotion and prevention for the improvement of the collective well-being of users who practice systematically at the national level.

Given the above, the professionalization of the sector responds to international guidelines from the World Health Organization (WHO) and UNESCO, which recognize the fundamental role of physical activity in reducing non-communicable diseases and consolidating sustainable health

systems. In this sense, the legal recognition and professional certification of the personal trainer become a technical, legal, and social necessity for Angola, aimed at consolidating a sports development model that contributes to the well-being and quality of life of the population across its various age groups.

The authors of this study identify as the central problem the absence of clear standards and systematized procedures to guide the implementation of an institutional certification with legal backing for personal trainers in Angola. This situation generates regulatory gaps and difficulties in professionalization, control of training quality, and the guarantee of safe services oriented towards public health.

The purpose of this article is to propose a professional development alternative that serves as an applicable scientific result, aimed at strengthening the regulation of professional practice and promoting health as a social good. This seeks to establish institutional training for personal trainers in Angola, analyzing its technical, legal, and health-related foundations, as well as its potential contribution to public health and the professionalization of the fitness sector. Based on this evaluation, a priority proposal is put forward.

Angola faces specific challenges: in addition to the structural limitations of the healthcare system, there are gaps in the regulation and provision of professional training for the fitness and physical education sector. National public health priorities include promoting healthy lifestyles and preventing chronic diseases, opening a window to articulate policies that train and regulate actors promoting physical activity in the community (Ministério da Saúde, n.d.).

The institutional certification of personal trainers, understood as a formal process of evaluating and recognizing technical, pedagogical, and safety competencies, is proposed as a professionalization strategy.

This can improve service quality, standardize evidence-based practices, and facilitate collaboration between the health sector and the sports/education sector. Studies on professional competencies and professionalization processes show that accreditation helps raise standards, encourage continuous training, and increase public confidence in the services offered.

The decision was made to conduct a diagnostic study in gyms and fitness centers in Luanda, which revealed the lack of a formalized system for the certification and ongoing training of personal trainers. This situation restricts professional recognition, creates disparities in service quality, and diminishes the contribution of physical training to public health preventive policies.

From a healthcare institutional perspective, the Ministry of Health of Angola is tasked with defining and ensuring the implementation, monitoring, and evaluation of the national health policy. It is also responsible for regulating, planning, guiding, supervising, and training human resources in the health sector (Ministry of Health, Presidential Decree No. 277/20, 2020). This implies that the professionalization of personal trainers, especially in non-clinical contexts but with an impact on preventive health, could align with these institutional competencies.

In terms of educational and legal frameworks, Law No. 16/24 of October 22 (National Vocational Training System) stipulates that training entities must be certified and meet minimum quality requirements to ensure they operate with rigor, competitiveness, and protection for trainees (National Assembly of Angola, 2024). However, this law does not mandatorily specify standards for personal trainers in gyms or fitness centers, leaving a regulatory gap regarding the professional certification of this subgroup.

Furthermore, Presidential Decree No. 143/25 of July 29, 2025, established the Certification Regulations for Training Entities and Technical-Professional Secondary Education Institutions within the framework of the National Qualifications System. This decree imposes formal criteria for training entities to obtain certification, including requirements for certified trainers, infrastructure, human resources, annual training plans, and quality standards (Presidency of the Republic, 2025). Nevertheless, its practical application to the private fitness sector and the role of the personal trainer is not yet specifically clarified or regulated.

Overall, the theoretical and legal foundations suggest that the absence of a specific regulatory framework for the certification and continuing education of personal trainers limits their formal inclusion in preventive health strategies, delays the standardization of their professional performance, and reduces their potential impact on promoting population well-being.

In light of the information provided by the Ministry of Youth and Sports (MINJUD) of Angola, which is the Executive body responsible for planning, implementing, and monitoring government policies regarding youth, sports, and physical development, in accordance with its Organic Statute approved by Presidential Decree No. 127/25 of June 5, 2025 (Presidency of the Republic of Angola, 2025a). This regulatory instrument assigns MINJUD the competence to "oversee and supervise the training of sports technicians and physical activity throughout the national territory," implying an explicit mandate over the professional and educational regulation of the fitness and personal training sector.

Within its organizational structure, MINJUD has an Office for the Inspection and Control of Physical and Sports Activity, responsible for the technical supervision of sports facilities, associations, gyms, and academies. This office is tasked with ensuring compliance with safety, hygiene, and quality standards in the provision of sports services (Ministry of Youth and Sports of Angola, 2023). From a legal perspective, this body, together with universities, can become a key agent in implementing certification and professional accreditation mechanisms for personal trainers, thereby ensuring minimum competence standards and user protection.

Furthermore, MINJUD is responsible for formulating and implementing sectoral policies for youth and sports, which include youth training and employability programs. According to its 2023-2027 strategic plan, one of the priority goals is the development of excellence in sports leadership through inter-institutional cooperation with educational institutions, sports medicine centers, and private sector organizations (Ministry of Youth and Sports of Angola, 2023). In this regard, the professionalization of personal trainers constitutes an action aligned with the objectives of developing youth competencies and strengthening human capital in the sports field.

Materials and Methods

The research has a mixed approach and employs a descriptive-propositional design. The research process spanned 6 months from March to September 2025. A sample of 35 personal trainers was selected, representing 50% of the existing population in the municipality of Kilamba, Luanda province, Angola

To comply with legal standards, the study was approved by the Ethics Committee for Researchers at the Institute of Physical Education and Sports of Agostinho Neto University. The guidelines of the Declaration of Helsinki were followed, specifically the requirement that all research subjects must sign an informed consent form after receiving the necessary information about the scientific research process.

For data collection and processing of existing information, SPSS software v. 23 (SPSS Inc, Chicago, IL, United States) was used. All data processed through descriptive statistics were presented using frequency distributions.

The relevance of the study was verified by applying Kendall's W concordance test to 15 specialists, with a significance level of $0.01 \leq 0.05$ and an acceptable association among the selected experts in their criteria (Kendall's W 0.451).

The experts assessed the relevance of the proposal and the thematic contents considered crucial for the training of personal trainers. They defined specific content from the perspective of professional development, including theoretical-methodological aspects that ensure a deep understanding for addressing individual and collective client needs.

The specialists' input helped structure the process, minimizing biases and promoting a critical analysis of the proposal.

Applying this approach allows for the identification of strengths and weaknesses from a pedagogical and methodological perspective, contributing to a more formative and effective selection process.

With the aim of enriching and/or refining the professional training alternative, it was submitted to the evaluation of specialists using the aforementioned Kendall's W statistical test.

Consulting specialists facilitates the assessment of alternative responses and requests that they present their arguments regarding the theoretical conception and the results expected in social practice through the application of the research findings.

Instruments

To obtain empirical data, a mixed descriptive–proprioceptive design was employed, based on the complementary use of both quantitative and qualitative data collection techniques (Creswell & Plano Clark, 2018). In accordance with the study objectives, three main instruments were applied: a structured survey, a semi-structured interview, and a non-participant observation guide.

The survey was designed to identify the academic training levels, professional competencies, and perceptions regarding certification among personal trainers in the selected gyms serving as the sample. It was structured into three dimensions: initial training, continuous training, and professional performance. For these, 18 items were developed using a five-point Likert scale (from 1 = strongly disagree to 5 = strongly agree). Its content validity was verified through the judgment of 7 fitness experts, achieving a concordance index above 0.85, a value considered adequate for descriptive studies.

The qualitative interview aimed to delve into the experiences, perceptions, and training needs of personal trainers regarding the professionalization and certification process. A script with nine open-ended questions was designed, addressing topics related to daily practice, the relationship with clients, and the institutional perception of the sector.

Regarding the observation guide, it enabled the direct recording of working conditions, training procedures, and professional attitudes in the natural environment of the gyms. The instrument included indicators related to trainer-client interaction, the application of safety protocols, the use of equipment, and the organization of training sessions. This technique facilitated the triangulation of information with the results from the survey and interviews, thereby strengthening the internal consistency of the study.

The application of the three instruments was carried out on all 35 personal trainers, representing 100% of the sample, which ensured full coverage of the defined population.

This procedure guaranteed the representativeness of the data, as well as a comprehensive approach to the professional reality of the sector in the municipality of Kilamba, Luanda Province.

Results

An integrated analysis was carried out of the quantitative (structured survey) and qualitative (semi-structured interviews and systematic observation) data collected from the 35 personal trainers, representing 100% of the sample.

The survey results revealed a notably low prevalence of standardized formal certification among the surveyed trainers. Most participants reported having been trained through non-standardized courses or informal pathways (self-training, short-term courses from private academies) and also reported a lack of systematic continuing education programs promoted by public entities or of uniform protocols in their workplaces. Regarding professional perception, the trainers consistently expressed that the absence of certification and continuing education limits their professional recognition and their ability to engage in preventive public health initiatives.

The analysis of the interviews revealed four main categories: (1) perceived training insufficiency – trainers called for clear competency standards and minimum content requirements; (2) institutional barriers – a lack of publicly-available training opportunities and of accreditation mechanisms was identified; (3) risks and safety – concern about insufficient safety protocols in some facilities; and (4) willingness to professionalize – a strong personal readiness to pursue training if formal pathways and recognition were available.

The testimonies further reveal a perceived segmentation between coaches with formal academic training and those trained through unregulated pathways.

The observation guide confirmed heterogeneity in professional practices: variability in applying initial user assessment protocols, differences in load prescription, inconsistent use of records, and minimal implementation of standardized safety and hygiene protocols. However, 5 personal trainers—representing 14.29% of the sample—demonstrated good practices in isolation (good technical handling, personalized attention), though without a standardized framework to ensure their replication and supervision.

The triangulation of results supported the core conclusion of the diagnosis: there is a structural lack of formal certification systems and sustained continuous training schemes for personal trainers in the gyms studied. This affects the heterogeneity of service quality and limits the sector's potential to act as an agent of preventive health promotion. ***The results, analyzed using the expert criterion method, were expressed as follows:***

The study employed expert criteria (modified Delphi method and expert judgment) to validate a professional development alternative for personal trainers in Angola, aimed at professionalization and public health promotion.

Selection considered professionals with a minimum of 7 years of experience in the following areas: trainer education, physical education, public health, and professional certification. A sample of 15 experts was determined, a number consistent with Delphi studies and expert judgment when seeking consensus stability.

For the evaluation, 8 previously defined indicators were used: 1) Relevance of the alternative; 2) Internal coherence; 3) Theoretical validity; 4) Institutional feasibility; 5) Contribution to educational quality; 6) Public health impact; 7) Legal adequacy; 8) Sustainability. For each indicator, a brief operational definition and assessment criteria were included. A Likert scale from 1 (completely disagree/irrelevant) to 5 (completely agree/highly relevant) was used for the assessment.

The procedure planned two rounds: 1) first round for initial assessment and collection of comments; 2) second round for feedback with the median, IQR, and proposed changes. The process was anonymous to reduce interpersonal influence bias.

The consensus criterion was defined as achieved when at least 70% of the experts scored an indicator with 4 or 5, or when the median ≥ 4 and the IQR ≤ 1 . Its content validity (Lawshe's CVR). For each indicator, Lawshe's Content Validity Ratio (CVR) was calculated using the formula: $CVR = (ne - N/2) / (N/2)$, where (ne) is the number of experts who consider the item 'essential' and N is the total number of experts.

To measure agreement, Aiken's V was calculated regarding the relevance of the items on ordinal scales. V was reported with its confidence interval (95% CI) and interpreted as: $V \geq 0.70$ indicating adequate evidence of content validity.

In the qualitative analysis results, thematic coding was applied to identify proposed modifications, new dimensions, or critical aspects, which in this case were presented as specific legal requirements and articulation with ministries.

Table 1.

Validation results of the designed alternative.

Indicator	N experts	Median (IQR)	% responses 4–5	CVR	Aiken's V
Relevance of the model	15	5 (4–5)	93%	0.87	0.88
Internal consistency	15	4 (3–4)	80%	0.67	0.72
Theoretical validity	15	4 (4–5)	86%	0.80	0.81
Institutional feasibility	15	4 (3–4)	73%	0.60	0.68
Contribution to quality	15	5 (4–5)	90%	0.84	0.86
Public health impact	15	4 (3–4)	80%	0.67	0.75
Legal adequacy	15	4 (3–4)	77%	0.62	0.69
Sustainability	15	4 (3–4)	70%	0.55	0.65

Note. IQR = interquartile range; CVR = content validity ratio.

Participation of 15 experts (6 academics in sports science, 4 institutional training managers, 3 representatives from the Ministry of Health, and 2 certification assessors).

Two rounds were completed. In the first round, extensive feedback was obtained; in the second round, consensus was reached on 6 of the 8 indicators using the pre-established criterion ($\geq 70\%$ of responses rated 4–5 or median ≥ 4 and IQR ≤ 1).

The indicators 'Relevance of the alternative' and 'Contribution to quality' achieved the highest medians (5) and high CVR values (≥ 0.80) and Aiken's V (≥ 0.86), indicating strong evidence of content validity. 'Sustainability' and 'Legal adequacy' showed greater variability (median 4, IQR = 1) and CVR below the critical threshold in the sample.

In conclusion, the results indicate that most components of the designed proposal are relevant and present evidence of content validity according to expert judgment. However, adjustments are required in legal aspects to facilitate institutional implementation and ensure public health impact.

Discussion

The findings regarding the absence of formal certification pathways and the high prevalence of non-standardized training connect directly with

recent studies that have documented fragmentation in the training processes of coaches.

According to Simarelli (2023), initial training programs in Brazil lack mechanisms for supervised professional reflection, which acts as a barrier to developing critical competencies. Similarly, Figueiredo and Ribeiro (2010) show that many coaches rely on short private courses without institutional validation, which perpetuates competency disparities among professionals.

In their view, Resende, López, and Matos (2021) argue that curricular frameworks should incorporate not only technical aspects of coaching but also coaching philosophy, professional ethics, and ongoing reflective evaluation. These perspectives help explain why the coaches in the study reported significant gaps in professional recognition and practical evidence, especially concerning standardized performance monitoring.

In a third perspective, post-pandemic adaptation has introduced new demands in public health and sports safety. Authors such as Santos and Almeida (2022) have emphasized the urgency of updating training content and pedagogical methodologies to respond to these demands.

In this study, trainers expressed specific concerns regarding hygiene protocols, injury prevention, and the need for training in health-related aspects. This demonstrates that ongoing training cannot be merely decorative or formal; rather, it must be an essential component for professional quality and user safety.

Fourth, current empirical research in the Brazilian context, including studies such as Campos (2025) and Meira et al. (2022), has revealed highly diverse training trajectories among trainers. These trajectories are influenced both by local institutional offerings and by the existence of professional networks and collaboration with regulatory bodies. Observational data from Luanda, which document both isolated instances of excellent practices and systematic shortcomings, reflect this pattern. Consequently, substantive improvements depend not only on individual initiative but also on clear institutional policies that enable the standardization of good practices.

Based on the implications of these findings, several recommendations can be derived: First, the need to establish a national regulatory framework for personal trainer certification, with minimum competency standards, accreditation requirements for training institutions, and clear professional development pathways; second, the design of contextualized development programs that integrate theory, supervised practice, ethics, and safety; third, the establishment of supervision and regulatory inspection mechanisms in gyms to ensure compliance with hygiene, public health, and safety standards; and fourth, the promotion of partnerships among public agencies, training institutions, and sector professionals to develop coherent professionalization policies.

Conclusions

The study revealed the absence of a formal system for continuing education and certification for personal trainers in Angola, leading to heterogeneity in the quality of service, limiting

their professional recognition and reducing their contribution to preventive health policies. Validation through expert judgment and the Delphi method demonstrated its relevance and coherence; such a system would contribute to professional quality, protect the health of users, and integrate personal trainers as active agents in the promotion of public health.

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Conflict of Interest Statement

The four authors declare no personal or institutional conflicts of interest that could influence the results or interpretation of the data presented in this manuscript.

Statement of Authors' Contribution to the Research

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