



KA220-ADU - Cooperation partnerships in adult education

IMPROVING MUNICIPAL SERVICES IN THE FIELD OF

CULTURE, ART, SPORTS FOR PEOPLE WITH DISABILITIES



IO1 SPORTS SERVICES MODULES

Lead: Clubul Școlar Sportiv Târgu Jiu

1. Introduction

Disability encompasses significant limitations in both cognitive functioning and adaptive behavior expressed through conceptual, social, and practical skills. "Disability is the result or effect of complex relationships between the health status of the individual, personal factors and external factors that represent the life circumstances of this individual. Due to this relationship, the impact of various environments on the same individual, with a given state of health, can be extremely different". From this perspective, all people with disabilities must have access to a curriculum /service modules that facilitate cognitive, socio-emotional development and adaptive behaviors".

Sport for people with disabilities has been around for more than 100 years. It was introduced on a large scale after World War II to help the large number of wounded veterans and civilians. At that time it was considered a rehabilitation sport, going on to evolve into a recreational sport and later, a competitive sport.

The sports service modules are a response to the needs of municipalities to provide sports and sports-recreational activities for people with disabilities regarding bio-psycho-social development, with a view to the best possible social integration and a viable socio-professional insertion, which ensure an autonomous and dignified life.

By far the objectives of all physical and sports activities are for people with disabilities or who have suffered psychological trauma a means of escape from a sedentary existence, sometimes also from the isolation often imposed by this disability.

For people with disabilities, sport can play an essential role in regaining independence and in developing physical and mental capacities that allow a better adaptation to everyday life.

Sports and sports-recreational activities must be carried out according to a framework plan, the activity being based on the application/respect of the principle of adaptation to age and



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individual characteristics, aiming for a permanent relationship with the psycho-physical potential of each individual.

Adapted sports, also known as sports for people with disabilities, are modifications of sports that are already known with the intention of removing barriers and opening this type of activity to everyone, regardless of the type of disability they have.

Physical activity is one of the essential coordinates of a healthy life. Moreover, for people with disabilities, it proves its therapeutic capabilities, whether we are talking about recovery sports, performance sports, or simply about movement for recreational purposes.

The most important benefits that physical activity offers to people with disabilities

Recovery

Sport is used as complementary therapy, associated with physiotherapy. For example, sports such as weight lifting or archery help develop muscles in the case of paraplegics. Wheelchair basketball requires teamwork and coordination. Swimming is perhaps one of the most used sports in the recovery of physical disabilities, the buoyancy of the water helping the affected limbs to move more easily.

Social integration

People with disabilities have special needs and feel the need for independence, group membership and acceptance in society.

Sport creates the framework for establishing contacts between people who have the same needs and problems and helps to make new friends. By interacting with other people who face the same kind of difficulties on a daily basis, disabled people can understand that they are not alone and can easily share their experiences.

People with disabilities often have low self-esteem and are prone to depression and isolation, but physical activity can restore their ability to feel valued.



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Recreation

Physical activity is relaxing, being a suitable way of spending free time. In this sense, people with disabilities, depending on the nature of the dysfunction they have, can enjoy either sports specially created for them, such as boccia (a game that involves hitting a target with the help of balls), or adapted sports, such as darts, wheelchair basketball, javelin throwing, weightlifting, or even regular sports that have not undergone changes: archery, bowling, swimming, table tennis, etc.

Therefore, disability should not be seen as a disease or as a barrier to physical activity, but only the types of sports beneficial for each type of disability should be identified.

The municipalities in our project, through the departments dealing with disabled people living in their regions, will form a team with the participation of experts from their own institutions to determine the level of disability and living standards and will carry out feasibility studies on access to sports of disabled people.

By carrying out the sports modules and piloting the activities by the sports organizations and the municipalities partnering in the project, the quality of the sports services that the municipalities will offer to people with disabilities will increase along with the functioning, environment, trained experts and work models specific to the types of disabilities that will be offered to disabled people.

Sport laughs at any kind of discrimination and goes beyond all barriers: this is the goal we tried to follow. Doing sports together means leaving aside all the differences, personal grudges, all the differences that may be there, it must become an opportunity to grow in relationships with others, respecting people of different cultures.

Nelson Mandela says that "sport has the power to change the world", in fact it is able to bring back, even if for a short period, the smile in those boring eyes, pained by pain and violence.



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The language of sport addresses everyone without distinction, it speaks a universal language, it promotes and disseminates fundamental values for integration such as merit, commitment and equality.

All sport-focused organizations and municipalities recognize the value of sport as a powerful means of improving education, health, inclusion and contributing to sustainable development. Sport has come to have all these valences due to its global popularity and the major force it has in promoting the importance of movement for various aspects of a person's life, a community or a society.

2. International Disability Sport Policies

The Council of the European Union and the representatives of the member states, gathered within the Council, regarding the access to sports for people with disabilities

- ☐ recognizes the value and importance of physical activity and sport for people with disabilities, as well as its effective contribution to the achievement of the strategic objectives of the EU, especially the Europe 2030 Strategy;
- ☐ calls for the organization of coordinated awareness campaigns regarding the possibilities of practicing sports;
- ☐ emphasizes that all students should have access to physical education and sports and that a disability should not be an obstacle to integration into school sports programs;
- ☐ agrees that sport for disabled people is largely based on voluntary work and emphasizes the need to improve activities by using human resource management and quality enhancement tools;
- ☐ suggests that specific actions be encouraged by the Commission in favor of sports promotion projects for people with disabilities, at local and regional level;
- ☐ underlines the need for a more intense participation of local and regional authorities, based on a program jointly developed with the European Commission, the Council and the national authorities dealing with sports, disabled people and sports activities organized for them.

POLICY RECOMMENDATIONS

Presentation of the context

1. draws attention to the fact that, according to estimates, the number of disabled people in the EU amounts to approximately 80 million, equivalent to approximately 15% of the population. People with reduced mobility represent, according to estimates, over 40% of the population;
2. points out that, due to the increased risk of disability in the case of the elderly and the increase in general of chronic diseases, the number of people in a situation of disability could increase. Therefore, in the future, European regions will face new challenges;
3. draws attention to the fact that there is no common definition of disability in the EU and that the legal definitions of this notion have been the subject of numerous debates and semantic interpretations. Handicap is a complex phenomenon and a multifaceted experience, being the result of the interaction between the physical and intellectual characteristics of the person and the state of the society in which he lives. For this reason, the notion of "disabled person" must be introduced;
4. highlights the lack of knowledge and misconceptions about the real effects of disability and emphasizes the need to focus on 'abilities' that can be considered in the context of sporting performance;
5. recognition of the value and importance of physical activity and sport for people with disabilities, and its effective contribution to the achievement of the strategic objectives of the EU, in particular the Europe 2030 Strategy and the disability rights strategy 2021-2030. In recent years, adapted sport and specific sports for disabled people have made significant progress.
6. draws attention to the fact that sport has an undeniable value for the general well-being of people and the exercise of positive influence on the possibilities of recovery and ability of disabled people and that, for disabled people, to practice sports activities, in the first row, a fundamental human right;

7. draws attention to the fact that "sport for disabled people" involves a wide range of activities, from performance sport to recreational sports activity and from adapted physical education to recovery processes through sport, a range as varied as it is complex the definition of the term "sport" or perhaps even more than that. This is also one of the reasons why there are different definitions in the various regions of Europe. In the context of physical activity practiced in a sports setting, there are a number of nuances depending on which activity can be sports, recreational, health-oriented, etc. This orientation is always at the choice of the one who practices it. The type of activity is determined by the practitioner, with the mention that, in sports, as a rule, practice leads to the improvement of health, whether physical or mental, regardless of the type of person;

8. draws attention to the fact that the different terms and different concepts related to this sector or used by its actors are the subject of intense debates. In the present context, the term used is that of "sport(s) for persons with disabilities", so that the approach is focused on the person, while giving a general meaning to this topic;

9. recalls the need to fully respect the principle of subsidiarity and the autonomy of governing bodies in the sports sector, including independent sports organisations. The recommendations set out in this opinion aim to act as a catalyst to increase the impact of actions taken by Member States and local and regional authorities and to bring about a change in perception among people with disabilities, valuing their capacities within the community, in general;

The political context

10. expresses its satisfaction and also supports the statements made by EU policies regarding the recognition of sport for people with disabilities, in particular the European Strategy 2030 and the strategy on the rights of people with disabilities 2021-2030. The Commission's communication entitled "Developing the European dimension of sport" and the European Commission's White Paper on Sport;

11. agrees that national, regional and local authorities can play, within the limits of their competences and financial possibilities, an important role in the development of sport for disabled people, especially in terms of promotion and investment in infrastructures and activities



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sports in the long term, and emphasizes the need to secure funds for projects in regions where the infrastructure of schools and other educational institutions is poorly developed, and children with disabilities do not have the opportunity or have limited opportunities to play sports;

12. in the case of the use of public infrastructures, public bodies must take due account of the interests of sport for persons with disabilities, so that the requirement to create equal living conditions for persons with disabilities is taken into account. In this sense, accessibility is an essential element;

13. insists on the specific role that actors in the sports sector for disabled people play in capitalizing on its potential to favor social inclusion, integration and equal opportunities;

14. highlights the fact that, in many cases, sport for disabled people does not seem to be mentioned explicitly except in the context of social inclusion. It calls for a clearer distinction to be made between the different facets of sport for disabled people, namely performance sport, sport as a way of spending free time, physical education, opportunities for education and training through sport, adapted physical activity, recovery through sports or sports activities for specific therapeutic purposes;

15. advocates for a better recognition of the qualified representatives of this sector in all the development and evaluation activities of mass sports supported by the European institutions. Consideration should be given to the allocation of specific resources to make such participation possible, as well as to the specialized training of sports professionals;

16. calls for the elaboration of a detailed strategic document based on existing policies, but dedicated in particular to sports for disabled people, in order to identify, among the main issues specific to this sector, the priority aspects;

Specific challenges: sports practice

17. reveals that, despite the growing political interest in the participation of disabled people in sports activities, the participation rate in these activities remains very low. Among other things, this is due to the limited access to sports infrastructure adapted to the needs of disabled people;

18. takes note of the fact that, beyond physical, socioeconomic and communication barriers, the practice of sport is hindered by cultural barriers and psychological factors, in particular the attitude towards disability of the organizers and actors in mainstream sports activities. These attitudes reflect the lack of knowledge and the lack of resources necessary to deal with a different situation, and it is necessary to carry out information and training campaigns to facilitate the acceptance of disabled people's participation in sports activities. It is recommended that any measure to improve access to them be developed following in-depth consultation with actors in the sector, as different groups may need different ways of support;

19. improving access possibilities, in terms of adequate physical access to sports facilities and better communication, is a primary condition if the participation rate in sports activities is to be increased;

20. calls for the organization of coordinated awareness campaigns regarding the possibilities of practicing sports. Such campaigns could be launched at the European level, but must be brought to the local and regional level, where the concrete offer is presented. It is important that disabled people themselves are targeted and informed. Ideally, these campaigns would be organized with the support of the governing bodies of the mainstream sports movement, national level sport and disability sport, as well as organizations (or associations) of disabled people; in addition, it is important to organize information campaigns not only for disabled people, but also for the rest of the population, to help citizens understand, accept and integrate fellow citizens with disabilities, but also to learn to support them. It is necessary to favor the acquisition of a maximum degree of autonomy by persons with disabilities, as well as to encourage and support them in proposing, promoting and organizing actions in this sense;

21. Stresses that an individual approach to different target groups may be necessary, taking into account their capabilities, their respective age group and their social situation; it is especially important that young people are considered and supported. It is also important to respect both the structure of sport in each member state and the local and regional specifics. The provision of quality, accessible and regularly updated information should be supported, so that the various target groups can be constantly informed about the range of sports activities they can access.

Encouraging and supporting locally organized movements in this regard can facilitate the dissemination of this kind of information and increase accessibility;

22. it is necessary that, at the local and regional level, there is an adapted transport network, which allows disabled people to move to sports infrastructures to practice amateur or performance sports;

23. points out that parents play an essential role in encouraging young people to participate in sports activities and that volunteers are the backbone of this sector. That is why it is necessary to raise awareness about the importance of voluntary work, and then consider the establishment of platforms for the recruitment and training of volunteers, as well as the adoption of measures to recognize and reward their contribution;

24. recommends the creation of an information platform on sports facilities in the EU, as well as a fully accessible website, to inform disabled people about sports infrastructures, technical possibilities, etc. from their localities;

25. draws attention to the fact that certain population groups face double or triple discrimination, if they have not only one disability but several, are immigrants in origin, belong to a minority or are victims of social exclusion related to homophobia or gender criteria. It is important that everyone is guaranteed adequate support and equal access to sports activities;

26. takes note of the fact that sport for disabled people must not remain isolated from the mainstream sports system and that its mainstreaming, namely the sharing of organizational responsibility with the major organizations in the field, already seems to be a prime political objective -plan. As such, there must be certainty of inclusion of disability sport in mainstream sports programs and that different models, formulas and organizational structures could be adopted in parallel, depending on the actual capabilities of disabled people and the objective of integration;

27. the practice of a sport by people with disabilities must be facilitated within the sports federation in which the respective sports discipline or specialization falls, in connection with sports federations whose activities are mainly dedicated to people with disabilities and respecting

the role of these federations, whose indispensable vocation in terms of providing services to people with disabilities must be encouraged;

28. sports federations should encourage the participation in their meetings, with a consultative function, of those sports organizations which, although they do not have the status of membership, deal with the promotion of sports activities practiced by disabled people;

29. notes, based on the examples identified, that the approach of combining tourism with sport perceived as a way of spending free time for all is a suitable tool for disabled people to establish a first contact with sport, in order to increase the participation rate of them in sports activities and of raising the awareness of the general public about their capabilities;

30. the inclusion of quality and up-to-date information regarding the organization of sports activities adapted for disabled people and the means of transport and access adapted to sports facilities, as sports tourism advertising;

Specific challenges: education

31. recognizes that the proper development of sport for disabled people requires specialists with a high level of education and training;

32. considers that, even if they are not stigmatized, disabled people are constantly at risk of exclusion, since many people do not know how to approach them and how to integrate them into sports activities and structures. The committee calls for a concerted information, through education and training initiatives, that addresses not only the people directly involved in the organization of sports activities, but also, in general, the general public, using for example easily accessible online training tools. For this, it is necessary, in parallel, to increase the level of awareness towards the rights, needs and skills of disabled people;

33. stresses that all students should have access to physical education and sports and that a disability should not be an obstacle to integration into school sports programs. Many times, young people get a taste for sports activities and become passionate about sports during physical education classes at school, this also applies to young people with disabilities. In addition, the sports environment in the school provides the opportunity to educate the Welsh students and

make them aware of the capabilities of their classmates. In this context, the encouragement, above all, of running "sports programs accessible to all" will be welcome. The idea of reverse integration, i.e. the integration of young Welsh athletes into sports for disabled people, is a good example, as it allows a change in attitude towards the capabilities of other athletes. "Sports together" initiatives must also be supported and developed. In order to achieve this objective, a specialized education and training of teachers in educational institutions, with special attention given to physical education teachers, as well as ensuring the access of parents of disabled children to information related to the various sports activities available, are essential;

34. finds that the knowledge and skills of coaches are often not capitalized on due to a lack of exchange and coordination between disability sport actors and those of mainstream sport. It is proposed that these organizations launch cooperative training initiatives, with support from training bodies and public authorities;

35. recommends the closer involvement of higher education representatives in the adjustment processes aimed at preventing the social exclusion of disabled people. The aim of such involvement would be to create mutations in the training of future physical education teachers, enabling them to better understand the various health issues facing their students;

36. believes that the image of sports for disabled people must be revalued. A performance sport for elite disabled athletes must be promoted. Thus, their status will be comparable to that of elite athletes without disabilities. It is unanimously shared that raising awareness of the performance of disabled athletes in performance sports can only lead to a change in this perception. In this sense, the communication strategy regarding the Paralympic Games and high-level sports events for people with disabilities is very important;

37. agrees that disability sport is largely based on voluntary work. It recognizes that quality training for these volunteers needs to be further promoted. In some respects, this training must be tailored to the needs of the parties involved. In addition, managing the activities of volunteers is increasingly important. Organizations dealing with disability sport need to operate more efficiently by using human resource management and quality enhancement tools. It is necessary to train professionals if we want to improve quality. They are absolutely indispensable, insofar as



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the beneficiaries belong to special categories. Structures must aim for genuine professionalization;

38. regrets that the potential of disabled people is often underestimated. The committee emphasizes that a sports activity favors the development of the personality of disabled people, making an important contribution to the successful professional integration of these people;

39. Approves the EU guidelines on the dual careers of athletes, which confirm that "the fair implementation of measures in favor of dual careers for all athletes would represent a considerable advance for sport in general and for sport practiced by people with disabilities in particular". The CoR also fully shares the view expressed in the guidelines that "as many sports for people with disabilities are integrated into mainstream sports organisations, special attention must be paid to this group so that there is a guarantee of fair treatment and that specific streams can be created, when it is not possible to use the streams for the Swiss athletes";

40. points out that from now on, the sector should strive to empower younger athletes and support them in their personal development. For this, the specific educational actions proposed for young athletes should be supported in the framework of sports events;

Specific challenges: health

41. Recognizes the value of sport in promoting health education and emphasizes the specific relationship between adapted physical activities and the rehabilitation of disabled people to the extent that their physical and mental health is at stake;

42. supports the work of the EU's "Sport, health and participation" expert group, mandated by the Council to propose measures to promote physical activity for health maintenance and participation in mainstream sports; The CoR insists that physical activity and sport be explicitly recognized and supported as therapeutic tools for people with disabilities;

43. takes note of the results of the work of the EU Anti-Doping Expert Group, mandated by the Council to develop EU observations on the revision of the World Anti-Doping Agency's World Anti-Doping Code, and recognizes the importance of good governance in sport. The CoR

recommends that stakeholders within the Paralympic movement be more closely associated with them;

44. Considers that all funding instruments included in the new multiannual financial framework should take into account the issue of accessibility for disabled people; Provocări specifice: sprijin financiar și structural

45. take note of the proposal for a budget line dedicated to sport in the Erasmus+ program. However, calls on the European Commission to make explicit reference to sport for disabled people in the guidelines for beneficiaries of the Erasmus+ program and to recognize sport for this segment of the population as a priority under the "Sport" Actions in the programme;

46. suggests that specific actions be encouraged to the Commission in favor of sports promotion projects for people with disabilities, at local and regional level;

47. is of the opinion that the sector is characterized by a certain fragmentation of different EU instruments that pursue similar objectives. Better harmonization accompanied by long-term financing commitments would be very beneficial, at least for the main representatives of the sector at European level;

48. encourages the use of structural funds for the development of sports infrastructures accessible and open to all at the local and regional level. Investments in research and innovation, carried out mainly through universities and companies in the sector, are fundamental. Indeed, many professionals in orient to submit their doctoral theses to this field. A special effort must be made in relation to sport as a therapeutic tool, for example echinotherapy;

49. calls on the EU institutions to continue to support in the long term sports events open to all, and in particular to young people with disabilities;

The role of local and regional authorities

50. believes that local and regional authorities play a fundamental role in the development of the European dimension of sport for disabled people, within the limits of their institutional powers;

51. underlines the need for a more intensive participation of local and regional authorities, based on a program developed jointly with the European Commission, the Council and national authorities dealing with sport, disabled people and sports activities organized for them, in order to integrate them in general sports practice. Local and regional authorities are able to bring the EU closer to the local level, to establish a link with initiatives promoted by clubs, schools and parents;

52. acknowledges that, especially at local and regional level, there is experience and structured partnerships to promote the development of sport and sports practice for people with disabilities. It pleads for the exchange of good practices and declares itself in a position to disseminate them, with the support of the European institutions and the respective involved parties. Translation of existing materials is a major challenge and as such should be encouraged. A system of rewarding "outstanding practices" should be considered;

53. supports the system of regional managers for the development of sports for disabled people. The exchange and transposition of good practices into reality could start from them, for example through ICT tools, as well as the connection of European policies to regional realities. The promotion and development of European projects for the exchange of best practices will allow the application of successful solutions to common problems, as well as knowledge of the needs of other regions and countries;

Additional conclusions

54. takes note of the first initiatives to promote a "European Week of Sport" and insists on the need to provide in this context for special sports intended for disabled people to be integrated into sports activities open to all. Insists that the annual celebration of a "European Day of Sport for Persons with Disabilities" should also be considered;

55. notes the lack of comparable regional information in this sector and calls for the establishment of reliable data culture processes. To this end, a specific Eurobarometer survey on sport for disabled people should, for example, be commissioned or at least more specific questions on this topic should be introduced in future Eurobarometer surveys on sport and/or disability;

56. warmly encourages the establishment of a European expert group on this topic, which recognizes the distinct mission of this sector and draws on the contributions of a wide range of actors in the sector. This expert group could initiate with the help of the following actions:

- semantically:

- ☐ to propose a common definition of the notions of "Handisport" (for people with physical disabilities), "Adapted Sport" (for people with intellectual disabilities) and "Sport together" (for people with and without disabilities), in order to facilitate their development . ;

- on a technical level:

- ☐ to inventory and collect the most significant regional and local experiences, to encourage their modeling and dissemination;

- ☐ to provide the political factors with the technical tools indispensable for their awareness and to allow the Committee of the Regions to act in accordance with its ambition to constitute the engine of mobilization in this field, in local and regional care it plays a first-rate role.

SPORTS FOR PEOPLE WITH DISABILITIES IN TARGU JIU,

THE PERSPECTIVE FROM ROMANIA

"Sport is one of the few things that can unite people across differences. In everyday life, people operate in their own worlds and environments. When they wear sneakers and go outside, they step into a new reality, a world where it doesn't matter where they come from, how they start, participation is everything. Anyone can participate. Sport has no barriers to entry, there are so many disciplines that everyone can find their place and their own way of practicing it. Team sports allow you to feel a great sense of belonging. Individual sports allow you to reach and push your own limits. Considering the above, we can risk a statement that, looking at the whole society while practicing sports, no one should be excluded and everyone can find their place in it. Is it really so? What about people with disabilities? What about poor people? From Romania's



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perspective, playing sports is one of the activities we like to do the most in our daily lives, regardless of whether we have some kind of disability or not. For people with disabilities, sport has more meaning because it is a way to overcome and seek new goals to achieve.

The sports movement in Romania is a phenomenon of tradition. Its characteristics took shape over time, as a result of the succession of social realities: diversity, adaptability, inventiveness, originality and opportunism, but also a certain rigor developed over time out of necessity. Its purpose is both physical and mental health, as well as increasing the quality of life.

Thanks to adapted sports, people with disabilities can strengthen not only their bodies, but also their minds. Therefore, it is our duty to support this type of sport not only in school, but also in other areas of life.

The Târgu Jiu Sports School Club carries out numerous sports activities for students and young people from the community, both with and without disabilities, to ensure their social inclusion. It has numerous partnerships with associations, schools, sports clubs, with the Târgu Jiu City Hall and the Municipal Sports Club. The latter is established and supported by the municipality.

Related to the branch of sports for disabled people, the Municipality considers the following guidelines:

- ☐ Reorganization of the sports system for people with disabilities by the county institutions and organizations, as well as the development of their activity programs, suitable for different types of disabilities;
- ☐ Concluding partnerships with the specialized public administration body for disabled people, in order to support the sports activity of the people included in this social protection category;
- ☐ The development of a national program dedicated to sports for disabled people, in which minimum conditions are provided for the practice of various branches of sport, in an organized framework, as well as the possibility of practicing performance sports for this category of people.
- ☐ Setting up special places for the practice of sports by disabled people;
- ☐ Co-opting specialists to prepare and organize sporting events dedicated to disabled people



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- ☐ Development of projects and programs to encourage the practice of physical exercises and sports by people with physical, sensory, mental and mixed disabilities, in order to develop their personality and social integration;
- ☐ Supporting disabled people to participate in national and international competitions for disabled people.

There are numerous projects at the local and county level, competitions, sports Olympics for people with disabilities. Local and county authorities finance projects in the field of sports and recreational activities from the local budget.

Public administration requires increased forecasting and adaptation capacities. For this, public actors must monitor social processes, collect and analyze information from the social area, and develop policies and measures optimized for the evolution of society. The municipality aims to put these wishes into practice by correctly evaluating the current state of Romanian sports and the factors that can influence the future, based on which to perform the institutional reaction. The increase of sports indicators (qualitative, quantitative and financial) requires a joint effort of both the central and local public administration and the social partners. Increasing the proportion of the population that does sports regularly can result in considerable savings for the state by reducing various health expenses (medical leave, various treatments, compensation for prescriptions, etc.). In conclusion, for the successful implementation of the proposed measures in the field of sports, priority will be given to increasing the quality of sports infrastructure and mass sports programs, actively encouraging and supporting sports performance, redesigning current legislation and re-establishing the system on principles of transparency and performance.



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SPORTS FOR PEOPLE WITH DISABILITIES IN THE VENETO REGION, - THE PERSPECTIVE FROM ITALY

We work in coordination with various universities, NGOs, local governments and voluntary organizations to support sports activities in the Veneto region of Italy and to ensure the participation of disabled students in these activities. We see elimination of the problem of inactivity as our main goal, which is one of the biggest problems of our age, for both non-disabled and disabled students. We would like to show you some examples of them.

Università degli Studi di Padova which located in the Veneto region, runs a project titled "*leisure, sport and volunteering*" under the umbrella of a science club. Under the *sports* title, **CUS** (University Sports Center of Padova), **CIP** (Comitato Italiano Paralimpico" -> Italian Paralympic Committee), **The Student Services Office (Inclusion sector)** through the **collaboration with the Department of Medicine, Baskin Association** (a type of sport) based on basketball) and **STEP ABONO** are working together.

- The CUS - University Sports Center of Padova - is the most articulated sports center in the province (www.cuspadova.it/it/agonismo/basket-carrozzina). In collaboration with the University, the "Wheelchair Basketball" project has been developed, for which training and competitive activities are planned.
- The main tasks of the CIP are the recognition of any sports association for people with disabilities in Italy and the guarantee of maximum dissemination of the Paralympic idea and the fruitful introduction of people with disabilities to the practice of sport. The sports available in Padova and its province are: athletics, wheelchair basketball, bowls, 5-a-side football, 7-a-side football, table football, rowing, cycling, cycling with hand bikes, dance, horseback riding, artistic gymnastics, swimming, weight training, powerchair hockey, wheelchair rugby, fencing, tennis, wheelchair tennis, tennis, target shooting, shooting, archery, trail-orienteeering, triathlon, baskin.
- The Student Services Office (Inclusion sector), through the collaboration with the Department of Medicine, wants to promote the culture of movement and physical activity among students with



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disabilities enrolled at the University of Padova. The activity consists in a personalized approach to movement, physical activity or sport that must give the students with disabilities an opportunity to perceive their body, optimize residual capacities and make the most of them for a positive insertion in the study and work environment.

- Baskin is a sport inspired by basketball and suited for anyone because, thanks to the changes made to some rules, it adapts to the diversity of people allowing them a real participation in the game. This sport is based on the principle of equity and both males and females can actively participate with any kind of disability that allows shooting in a basket. (<https://baskin.it/>)
- STEP ABANO is a non-profit organization which promotes sport among people with disabilities, thanks to technicians, volunteers and the families of athletes. This association carries out activities in the pool (swimming), in the gym (mainly basketball, but also other recreational or sporting activities) and on the track (athletics is practiced only in the period of May/June). Each training session is attended by 10 to 20 athletes who are followed by a technician and by several volunteers. STEP ABANO regularly participates in the regional basketball championship organized by SOI (Special Olympics Italy) in Veneto. One of the days of the championship - which is a travelling one- takes always place at the sports hall of Abano, in collaboration with this association. Depending on the availability of athletes and volunteers, STEP ABANO also takes part in other events and sports tournaments of basketball, athletics or swimming. (www.stepabano.it)

Additionally, we have *“Fishing Sports Association”* in Veneto. The recreational fishing association A.S.D. Lago delle Rose has gained the certification for sports activities by the Italian authority for sports promotion C.S.A. in Veneto, which is recognised by Coni, and which has as its goal the development and spread of the amateur sport activity linked to the recreational fishing discipline, by means of every form of competitive, amateur, recreational, or every other kind of sports activity, and not, suitable to promote and encourage the knowledge and practice of this very discipline, as well as to promote activities in recreational fishing lakes in Veneto. It aimed to promote sports and educational activities for disabled and/or sick people, or in inconvenient conditions, with animals aid also.



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As *Kızııl Elma APS*, we work in cooperation with different associations and local governments working for disabled students in our region. We provide financial and moral support by meeting with an association that builds special playgrounds for disabled children in our region. In addition, we organize various organizations for the adaptation of disabled students in the kindergarten, which is only 10 minutes walking distance from our headquarters to the school and to carry out sports activities simultaneously with their peers. Additionally, we voluntarily support Erasmus+ activities carried out for the development of sports competencies of disabled students.

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SPORTS FOR PEOPLE WITH DISABILITIES IN SERRES, THE PERSPECTIVE FROM GREECE

The phenomenon of obesity plagues today's children. Research in recent years has shown increased levels of obesity, which is partly linked to the fact that today's children are not participating in sport. Participation in even low-intensity sporting activities has been shown to not only reduce obesity rates but also promote a model of healthy lifestyles and well-being. Physical activity and sport are a complex issue when it comes to a person with a disability. It has been estimated by researchers that children on the pervasive developmental spectrum (PD) are less likely to develop a consistent, moderate level of physical activity in their daily lives compared to typically developing children.

Whitehead (2010) proposes a model of physical activity consisting of a wide range of elements that are crucial to a child's life on many levels. A key requirement for the integration of physical activity into a child's lifestyle is the provision of adequate opportunities to develop children's performance capacity and motor skills (Whitehead, 2010). Furthermore, coaching a child by separately learning individual skills does not appear to be effective (Whitehead, 2010). This is a common method when dealing with a child with a disability, however it becomes inadequate because it often does not reach the level of generalization. This is where it falls short: isolating the athlete and not connecting the individual skills into a whole which is the integrated exercise. The child therefore needs to practice at all levels, in a complex way, for example on different courts, with different teammates and in variations of exercises of the basic learning exercise.

Related research was conducted by Collins and Straples (2017), at the University of Regina, which aimed to examine the effectiveness of engaging children with intellectual and developmental disabilities in a ten-week program to develop children's physical fitness at the level of basic sports skills. The structuring factors of this programme, such as the timing and selection of sports skills to be developed, were based on the structure of similar programmes for children without disabilities. Thirty-five children, 25 boys and 10 girls aged 7- 12 years



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participated in the programme. Children were randomly selected from families who volunteered to participate. The selection of the exercise program was initially based on the parents' assessments of all their children's abilities and difficulties-weaknesses in many areas (cognitive, behavioral, social skills, independent living, self-care, communication, motor skills, sports participation). Because the structure of the program was based on participation and inclusion, only those children were selected who did not have disabilities that prevented them from participating independently, with any necessary adaptation, without assistance, and children with chronic health problems that made the program dangerous, such as epilepsy. Participants had the following disabilities: Pervasive developmental spectrum (23), Down syndrome (3), fragile X syndrome (2), general developmental delay (5) and 2 other rare syndromes. Finally, program outcomes were assessed by evaluating their respective performance before and after the program. The children were divided into 4 groups with similar levels of motor abilities and the program lasted ninety minutes once a week for 10 weeks. Two different sports were chosen each week based on which they were also used to catechize the exercises.

The results of the study showed that 26 participants significantly improved their performance in the specific sports activities, compared to their performance in the same Exercise Log before and after the intervention programme, while 6 showed no differences in their performance and 3 who performed lower compared to their results before the programme. Muscle strength and its duration improved significantly in a large proportion of participants, with 27 showing much improved performance after the programme, 5 showing no improvement in these areas and 3 boy participants' performance dropped. Performance in isometric exercises again was improved in 26 participants, 2 participants remained unchanged and in 7 performance decreased. Finally, in the flexibility exercise there appeared to be significant improvement at the end of the programme for 22 participants, for 2 boys their performance remained the same and 11 showed lower performance and participation (Collins&Staples, 2017).

The following conclusions were drawn from this research: all the children who participated showed an improvement in their athletic abilities in at least one area - muscle group. In addition, the boys' performance was slightly higher, overall, than that of the girls. However, overall across all groups there were no noticeable differences in performance. A key benefit of exercise is the avoidance of obesity to which a child with a disability is most vulnerable.



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Improving the physical fitness of children with intellectual disabilities seems to be further improved by incorporating short training sessions at regular intervals into the children's programme.

Another area of a person's life that is positively influenced by their involvement in sport is their psychology. Specifically, the person with a disability, through his/her involvement in sport, interacts with other people and thus significantly improves his/her social skills. In addition, this has a positive effect on their psychology as their social interactions increase, this gives them more self-confidence and as a result an improved self-image. For people with disabilities, finding an identity is a more difficult process due to socio-cultural constraints that do not allow them to participate in activities that contribute to the creation of a personal identity. One of these activities is sport which brings an element of personality and identity definition to each athlete (Groff&Kleiber, 2001). Participation in sport presents an area in which people with disabilities are provided with many opportunities to try different activities, commit to specific choices and engage in the process of challenging cultural norms (Groff&Kleiber, 2001).

Specifically, the results showed that the identity of athletes with disabilities was determined by their athletic status, which is expected from related research on typical athletes. It was found that they also perceived sport as a way of expression. Regarding the impact of sport on their lives, the mean of the athletes stated that it usually affects them positively with feelings of enjoyment of life and the environment (with a score of 4.4/ 5.00), while a lower frequency stated that it affects them negatively with feelings of shame, anxiety and fear (1.7/5.00). Regarding their relationships with their peers, the average stated with a score of 5.00/5.00 that they have good relationships with other children their age, have many friends and make friends easily (Shapiro, Martin, 2010). In a better analysis there were other conclusions about the results. Specifically, it was found that the athletes judged themselves to have a strong sport identity.

The positive impact of sport on the lives of athletes with disabilities may reflect their enjoyable interaction with other athletes, which makes them more extroverted. Finally, the finding of the research on the good social relationships of disabled athletes with their peers shows that through sport they are more confident and develop their social skills. This social interaction has been found by similar research to broaden the social relationships of disabled



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people with typically developing people and thus integration is also achieved (Shapiro&Martin, 2010).

The overall benefits of sport on the psychology and social life of athletes with disabilities are increased social support, the development of friendships, personal satisfaction, self-confidence and drive, an integrated sporting identity and lower levels of depression.

Another study, related to the impact of sport on the lives of people with disabilities, was conducted by Shapiro and Malone (2016). The aim of this study was to examine perceptions of parents and disabled people in relation to the impact of sport on disabled people, the impact of sport on the psychology of disabled athletes and the relationship between the psychological state of athletes and their quality of life. The survey involved 70 disabled people aged 8- 21 years, with an average level of intelligence to be able to read and complete the questionnaire on their own. The majority of disabled athletes, 70% of them, stated that their participation in sport has positive results overall by improving their quality of life. The results of the parents' perceptions of the benefits of sport for people with disabilities seem to show a large discrepancy compared to those of athletes with disabilities, both in the area of psycho-emotional and physical effects and in the social area.

Parents' perceptions of the above were therefore significantly more negative, with the exception of the social area where they had slightly less positive perceptions than those of the athletes. Another finding of the research is the interaction found between quality of life and well-being and mental health and social life. This finding by the researchers, regarding the negative trend in parents' perceptions of the aforementioned issues, calls into question whether parents, in the long term, will continue their children's involvement in sport.

The role of physical education in the school context is as important as the role of other subjects. This applies to both typically developing pupils and pupils with disabilities. The main objective of the physical education course is "using sports, gymnastics and other movement activities to develop in a balanced and harmonious way the physical, mental and spiritual strengths of pupils and to enable them to integrate harmoniously and beneficially into society as a whole" (IEPP Physical Education, 2003).

The principle of accessibility, as provided for in the European Union Convention on the Rights of Persons with Disabilities, also applies to the field of education. Every school must

ensure equal participation in learning for all children. This means necessary adaptations in all subjects that will contribute to the inclusion of people with disabilities. In addition, efforts must be made to remove existing prejudices in order to achieve a uniform inclusive education method. A teaching programme in physical education, with the aim of inclusion, should be based on some principles: individualised educational objectives, for each student; adaptation of the method and content of teaching to the individual potential of each student and not to the average student; individualised assessment according to the objectives of each student (Kalyvas, 2007). In reality, people with disabilities face several barriers to participating in physical education. People belonging to the pervasive developmental spectrum (PD), also known as invisible disability, face a greater number of barriers due to the nature of their disability. These barriers according to the social model can be identified in levels of influence. To begin with, the childhood of a student with ASD often involves severe difficulties in motor skills and behavioural problems. Other possible barriers are difficulties in accessibility to facilities and social factors related to public structures.

The successful integration of a student with a disability, not only in physical education but also in the whole educational context, depends on some basic conditions regarding the educational material, the environment, the attitudes of parents and teachers. Moreover, it is necessary that those involved in the integration programme for students with disabilities are completely free of prejudice and other feelings of pity and charity, as this is not the way to achieve equality and effective integration. On the contrary, feelings of respect and understanding towards children with disabilities are desirable and necessary. The school needs to be located in the child's immediate surroundings and equipped with the appropriate material and technical equipment as adaptations will be needed, such as in physical education lessons, for which the school should be fully prepared with special aids. The acceptance of diversity by all students and teachers, creating a close-knit atmosphere between students with and without disabilities, characterised by the concept of teamwork rather than simple coexistence. Education and training of teachers is necessary to carry out the inclusion programme successfully as they need specialised knowledge. Mediation interventions on the part of typically developing children are very helpful in promoting model communicative and social behaviours for children with disabilities. Their teaching should be based on their chronological age, cognitive and intellectual

level and should aim to develop both cognitive and social skills of the student in a systematic and methodical manner. Finally, the individualization of the integration program of the student with disabilities, the evaluation of his/her progress, and the collaboration of a multidisciplinary team and parents to structure the program is necessary (Thanopoulou,2013).

In physical education classes, in order to achieve equal participation of all children, some adjustments need to be made so that children with disabilities can participate fully, without feeling ashamed and without being mocked or ridiculed by other children. The main purpose of adaptations in physical education lessons is to reduce the gap between the individual motor characteristics of students and to reduce the chances of failure and negative reactions for students with disabilities. The first necessary adaptation is to structure the environment with the appropriate logistical equipment. In addition, it is necessary to structure individualised teaching programmes, to structure classes with fewer children and to provide the necessary support for physical education teachers through special seminars. The last necessity is the regular evaluation of the programmes in order to make immediate changes where necessary.

Block (2000) recognises the value of adaptations in PE lessons and even bases it on the principle of partial participation. He considers partial participation preferable to zero participation. Recognizing the diversity that characterizes a school environment, he considers that activities in which some students cannot participate due to motor or intellectual disabilities can be performed through physical assistance from a person or through modifications to the external environment. In some cases of pupils, physical assistance from a classmate is useful and constructive, applying the co-teaching method. With the physical assistance of the person with a disability from another student we have a double benefit: the partial participation of the student with a disability in the physical activity, but also the familiarization and activation of the empathy of the student without a disability regarding the necessity of adjustments for the participation of students with disabilities in school sports. Adaptations may also involve equipment for activities or some changes to the rules of a game (Block, 2000). In co-educational environments, a combination of methods is suggested so that everyone benefits and there is equal participation of all students.

Two specialised models have been proposed for the implementation of adaptations in the curriculum: the overlapping curriculum and the multilevel curriculum. In the multilevel

curriculum, a subject area is selected by the physical education teacher on which different objectives are identified and matched to the individual abilities of all students. Thus during the same PE lesson different objectives are achieved for the students. According to the overlapping model, students are taught the same group activity while practicing different motor goals according to their abilities- weaknesses.

The physical education lesson, for a class with a student with a disability, is structured differently and has different pedagogical objectives. At the basis of the entire physical education curriculum is always equal participation and the development of acceptance of disability without prejudice. Basic activities that are usually chosen are activities that develop balance skills, orientation, motor and audiovisual coordination, body awareness, sports, spatial perception, rhythm and dance. The factors of intensity, frequency and duration of exercise are critical to determine when organizing the lesson. Motivation and rewards are necessary when engaging students with disabilities in the lesson as well as simplifications in the drill. It is necessary that the activities are not competitive but participatory and the drill is chosen with the aim that children with disabilities can participate without assistance so that they feel accepted.

The school life of students with disabilities is more complex than the school life of typically developing children. This is a result of both the school context and the nature of their disability. Despite all efforts to raise awareness about disability and efforts to integrate them into the mainstream, there are many times when people with disabilities experience exclusion, without this being readily perceived by their social environment. In the school environment, there are not a few times when the treatment of children with disabilities by children without disabilities has led to a general negative attitude of disabled people towards school.

The control group attended 10 standard physical education classes, while the experimental group received an intervention programme on "Sport and Disability" inspired by the Paralympic movement. The experimental group included students with disabilities. The organisation of the activities was based on the experiential method and had an interdisciplinary character. Thus, the themes of the activity were approached from the perspective of physical education, history, language, visual arts, computer science and environmental studies. The first activity of the intervention program included watching an educational videotape of all the Paralympic sports, which aimed to familiarize the students with them and how athletes are categorized. The second



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activity involved experiential practice of the Paralympic sports, aiming to give students the experience of participating in these sports with impaired senses, as well as the disabled athletes themselves, thus developing students' empathy. In the third activity, students had to collect historical information about the Paralympic movement in order to understand all the principles underlying the Paralympic Games. The fourth activity was to collect and present information about distinguished persons with disabilities who excelled in various fields with the aim of highlighting the greatness of their personality despite all the difficulties of the nature of their disability. During the fifth activity, the children met with a Paralympian with whom they discussed various issues related to his disability and championship and had the opportunity to practice a Paralympic sport under his guidance. The sixth activity concerned learning how to communicate orally on the basis of material provided by the Hellenic Paralympic Committee. The aim of this activity was to eliminate errors of expressive speech that often imply prejudice or feelings of pity. The seventh activity consisted of the production of written discourse on the subject of the students' thoughts and feelings from their encounter with the Paralympian. The eighth activity was related to the topic of accessibility, carried out through the environmental education lesson, and aimed to have the students evaluate accessibility to structures and services, moving around the city and recording accessibility difficulties. The ninth activity was carried out through the visual arts lesson where the aim was for the students to create some artistic works inspired by the conversation with the Paralympian. In the last activity, and as an evaluation of the programme, the students created an electronic poster about the programme they attended and a three-minute video about the Paralympic Games.

In order to integrate a student with a disability into the physical education class, it is necessary for the physical education teacher to create an environment with the most suitable conditions possible. The first basic condition of structuring these conditions is the simplification of instructions. Many times the failure of students to cope with an activity lies in the difficulty of the teacher's understanding of the instructions rather than in carrying out the exercise itself. In addition, another prerequisite of participation of the child with a disability in physical education class is motivation. The physical education teacher with the main goal of practicing the motor skills of the student with disabilities needs to structure the most appropriate conditions, the main one being the existence of motivation so that there is a meaningful participation for the student.



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Finally, the variety of stimuli, multisensory method, is the third condition for structuring the appropriate conditions.

The purpose of physical education, as defined by the Ministry of Education, is not only the physical development of students but also the mental and spiritual cultivation of students and their smooth integration into society. Adapted physical education is a separate branch of physical education in which students with disabilities develop, improve and maintain their physical and motor skills, are entertained, improve their mental health and socialize through a wide range of activities, games and exercises.

Students with disabilities, attending either special or general education facilities, in order to be able to participate in adapted physical education and to assimilate the objectives and stimuli given to them, an individualised teaching programme should be implemented. In order to implement an individualised programme, an assessment of the student's abilities, aptitudes, wider family environment and perceptions of the student's disability and psychological state must first be carried out. Then, based on the assessment, the objectives of the physical education intervention programme are identified, which are divided into short-term and long-term (Winnick, 1995).

With the aim of developing the educational process, the Pedagogical Institute created new curricula and a Unified Interdisciplinary Framework according to which the autonomy of the subjects is abolished and the opportunity is given for an interconnection approach of all learning subjects (Pedagogical Institute, 2003). This decision also opened the horizons for the physical education subject, whose objectives are multiple, and through the interdisciplinary framework space was also given for the development of adapted physical education. In order to successfully implement the objectives of adapted physical education, it is necessary to make all the necessary modifications to the equipment, duration, rules and structure of the programme. Specifically, these modifications to physical education activities are called adaptations and are aimed at the most successful and maximum participation of students with disabilities, according to Block (2000). An adapted exercise program should meet the individual needs of the exerciser and provide incentives for participation to give the exerciser the opportunity to gain inspirational and social experiences. A necessary role is played by the teacher's proper assessment of the student's

perceptual abilities, emotional stability and the student's ability to adapt in order to be able to structure an individualized program for the student in the most appropriate way (Dovolis, 2019).

In particular, each teacher must evaluate the student in terms of his/her physical and motor abilities, his/her individual medical and educational history, but also to take into account the psychological state of the child and how he/she perceives his/her disability. In relation to the adapted physical education curriculum, specific objectives are highlighted in three separate areas: physical, emotional and cognitive. According to the Pedagogical Institute (2003), in the physical domain, the goal of the ASP curriculum is the integrated development of spatial perception, motor skills, sensory integration (particularly for students on the pervasive developmental spectrum of autism), and kinesthetic awareness. In terms of motor skills to be developed, these include those of rhythm, speed and flexibility. In addition, the emotional domain has the same weighting as the physical domain in the ASD classroom. Specifically, the mental and social development of the individual is sought through the cultivation of virtues such as self-discipline and cooperation, reducing tension and improving concentration of attention, developing motivation to participate and improving their self-perception and self-awareness, improving their perception of fairness, Through cooperative games and activities it is possible to develop the student's sociability, which is a primary role. Finally, in terms of the cognitive domain, the objectives are related to the development of communication skills, imagination, the development of the ability to generalize problem-solving methods, the development of self-care skills and the understanding of the importance of sport and lifelong exercise (Dovolis, 2019).

The selection of activities is based on the objectives set by the teacher, and for their implementation in the adapted physical education lesson, the following activities are usually selected, always adapted:

- games of musical-motor or just motor skill development
- learning sports, adapted to school structures
- traditional dances
- learning to swim and water activities, in cooperation with local structures and parents.
- logistical preparation for the appropriate design of the environment for the implementation of the personalised teaching programme.



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The mapping of inclusion in physical education and recreation activities is based on the structuring of a tailored programme and according to Black & Stevenson (2012) has the following principles:

1. Everyone can play when inclusion activities are structured. Some modifications must be made so that everyone can participate in some way.
2. changes for inclusion: many different adaptations are made to an activity so that everyone participates in the same activity and is both supported and challenged to practice different skills. The STEP programme is a programme for modifying activities which provides a structure and a basis for integrated and organised activities.
3. ability-based groupings: participants in the activity are grouped according to their strengths and weaknesses. Thus, each group does a version, of the same activity, which matches the capabilities of each group member individually.
4. modification or separation of each activity: each participant works temporarily on specific possibilities which leads to a more successful integration into the group as a whole. Sometimes it is necessary to practice individually first in order to achieve the best possible performance in the group.
5. in adapted physical education or sport for people with disabilities, programmes should be individualised from all perspectives. This means that new opportunities will be provided to both students with disabilities and students without disabilities (for example, students with disabilities can teach their peers a Paralympic sport and play it as an activity) (Black&Stevenson, 2012).

4. Olympic education in the special school

Paralympic sports and Olympic education programmes can help both to encourage children with disabilities to participate in physical education and to integrate them into the school community. The integration of Olympic education into the school environment makes physical education activities more interesting and brings children into contact with sport, in particular Olympic and Paralympic sports.

This contact with paralympic sports can introduce children with disabilities to school sports, sports in general and there can be a higher percentage of disabled athletes, giving some disabled people a more active role.



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An additional activity that was applied in the context of learning Paralympic sports to these students was painting. Specifically, all students were divided into small groups of four, and on canvases they were asked to paint athletes participating in various Paralympic sports. For the students who did not have such developed fine motor skills, ready photocopies - photos were given to draw the sport on them only. Watercolour paper, crayon markers and tempera crayons were used for the drawings. For the inspiration of the students there were pasted photographs and related drawings on the wall. Then students with and without intellectual disability were invited to paint with the brush in their mouth or holding it with their foot. The experiential approach to painting people with motor disabilities is done to better understand the achievable adaptations (Dykos, 2018). At the final stage, some activities were carried out to summarise what the students had learned. Worksheets were given to the students about the Paralympic sports, the mascots of the Paralympic sports and the Greek Paralympians. After they were answered by all the students, a discussion was held in order to solve any misconceptions and questions (Daikos, 2018).

Regarding the city of Serres, the Laboratory of Adapted Physical Education was founded in 2003 at the Department of Physical Education and Sports Science of the Aristotle University of Thessaloniki in Serres. The laboratory deals with the study of individual differences that create psychomotor problems throughout the human life span. The aim is to develop teaching programs and to conduct basic and applied research and evaluation of the athletic level of athletes with disabilities. This is carried out through physical education, recreation, high sport as well as therapeutic gymnastics and rehabilitation. The places of realization of these purposes are special schools, institutions, adapted gyms, hospitals as well as typical schools. In the last year, co-training programmes have been implemented between groups of pupils with disabilities and pupils of typical development in the subject of physical education. The students of the TEFAA with specialization in adapted Physical Education have the opportunity to implement their practical training in the structure of the K.E.D.S. Also, the beneficiaries of our structure participate in activities and programs implemented by the TEFAA.

In 2004 the association MGS PANSERRAIKOS AMEA was founded, which is one of the 70 associations that the National Sports Federation for People with Disabilities has in its power. It is active in the sports of swimming, athletics, weightlifting on the bench and boccia. In



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2017 the basketball department with wheelchair was founded, which belongs to the Federation of Greek Basketball Players with Wheelchair (O.S.E.K.A.). Every year the team participates in all the National Championships of the above sports with great success.

In 2005, the "Therapeutic Riding Centre of Serres - KETHIS" was established in N.Skopos of Serres after the Municipal Council of the Municipality granted the use of 12 acres of land. KETHIS is a voluntary, non-profit association with substantial social activity and is mainly based on volunteerism. Therapeutic riding is based on alternative rehabilitation programmes that use the horse as a means of therapy, improving the health and quality of life of people with physical, mental or emotional disabilities. The horse becomes an extension of their body, helping them to discover new emotions, such as the joy of a walk, a ride in the open air and, above all, motor and personal independence. When the horse walks, it imitates the human gait, transmitting to its rider's torso the same movement that the legs transmit to people with normal mobility. In this way, the trunk muscles of people with mobility difficulties are significantly developed, while sitting upright facilitates breathing. It is a unique experience for people with disabilities who had never even dreamed of being able to ride a horse.

Therapeutic riding is the result of teamwork, involving, depending on the case, volunteer physiotherapists, occupational therapists, speech and language therapists, trainers, psychologists, social workers, special educators and side assistants. Their role is critical to the success of this effort! To date, 4 Special Olympics athletes from Serra who train free of charge at KETHIS have achieved significant distinctions at the Special Olympics World Games in Shanghai in 2007 (4 bronze medals) and at the Special Olympics World Games in Athens (10 medals), which were held for the first time in our country in June 2011. The costs of organizing and operating the Centre, the equipment and care of the horses, as well as the training of the assistants and trainers, are just some of the costs that KETHIS is called upon to cover on a daily basis, in order to help people with disabilities to enhance their quality of life.

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SPORTS FOR PEOPLE WITH DISABILITIES IN PARNU, THE PERSPECTIVE FROM ESTONIA

Pärnu, a city in Estonia, is home to a diverse population, including people with disabilities. Disability is a complex and multifaceted issue that affects individuals, families, and society as a whole.



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The most common types of disabilities are mobility impairments, hearing and vision impairments, and intellectual disabilities. Despite the efforts to promote accessibility, many public spaces, buildings, and transportation systems in Pärnu are still not fully accessible to people with disabilities.

The Psychiatry Day Center in Pärnu has been operating for a total of 23 years. The Day Center was established in Pärnu almost at the same time as the psychiatric clinic was established.

Different services are provided to a total of about 110 people with special mental needs from the age of 18. Some clients receive several different services, depending on the particular client's need for assistance.

Different services:

- Three special welfare services are financed by the Social Insurance Board.
- The daily life support service is the main one through which clients reach the house.
- The supported living service is provided mainly in the client's own home.
- The employment support service. The purpose of this service is to help a person look for a job and keep that job later.
- Support person service is ordered and financed by the city of Pärnu. The content of the service is comprehensive assistance to the client in his life arrangements and household matters, communication with authorities, payment of bills, etc.
- Day inpatient service, which is financed by the Health Fund, is constantly present at the service. The main idea of this service is to ensure the daily coping of the client in terms of mental health, to provide feedback to the client's psychiatrist in order to respond to changes in the state of health in a timely manner, in the joint work of the day center's nurses and activity supervisors. Clients for this service come usually after the end of active psychiatric hospitalization.
- Clients of the ISTE service, i.e. person-centered special care service. Basically, it is like a daily life support service, but in the big picture with somewhat wider options. Day center provides the



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same components as the daily life support service. This service is also organized by the Pärnu City Government through a project.

All those different support services enable people with disabilities to participate different cultural and sport activities.

Activities of the Day Center in terms of sports

In addition to mental health, there is also a great value to physical health, because one cannot exist without the other.

- From spring to autumn people with disabilities The Psychiatry Day Center have an opportunity to play disc golf every week.
- Basketball trainings for disabled people are available all year round (once in a week or two)
- Disabled people in Pärnu can play bowling all year round. Thanks to the responsiveness of the entrepreneur, they have been able to play it for free for years. The day center itself organizes a Bowling tournament, in which institutions dealing with people with special needs from all over Estonia participate.
- The annual national sports day. Every year people with different disabilities can also participate in the annual national sports day, organized by Vändra Social house (various service providers all over Estonia gather).
- In previous years they have participated in a boccia (petanque-like ball game) tournament for people with special needs in Rapla.
- Daily people with special needs also take on a walking tours during lunch.
- Participating in the „2 Bridges Race“ and walking tour in September is also very popular among people with special needs.

The role of local government in the development of sports for people with special needs:



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- Pärnu City Government maps suitable conditions for people with special needs to play sports (accessibility, supporting services - these are basically available through social media)
- Gather information about different sport clubs that are ready to include people with special needs in their activities.
- Monitor which activities require some adaptations
- Financial support for teachers and coaches for taking part of special courses to apply for Trainer certificate or have some additional lessons to learn how to teach children and other people with learning difficulties or different disabilities.
- Financial support for NGO-s who organize sports competitions or other moving related events.

Pärnu City Government cooperates:

- Local Sports Association, which is an on-site executor/partner;
- Paralympic Committee- to share experiences and training opportunities at the national level;
- Pärnu County Chamber of Disabled People, an umbrella organization for disability organizations in Pärnu region.

Improving sport services for disabled people in Pärnu county

Our main partner for improving sport services in Pärnu and creating a network for all local and national organizations is Pärnu Spordiliit – the local sport coordinating organization that unites all the sports clubs in the region of Pärnu. From the beginning of year 2023 they have started many activities:

- * regular circuit trainings in the gym of Pärnu Social Center
- * workshops, lectures about healthy lifestyle and the importance of moving in a seminar organized by Pärnu County Chamber of Disabled People.
- * organizing a sports day for students with special educational needs in cooperation with a local school (ages 12-16).



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* for better coordination of sports activities for people with special needs, they have also founded a council to plan further activities.

* supporting clubs and organizations to participate in Bowling trainings and tournaments

In addition to previous actions coordinated by the local union of sports clubs we also have some sports club who offer different training and competing activities. For example one tennis club organizes wheelchair tennis lessons and a club of people with hearing disabilities organize bowling, discgolf and novuss trainings and tournaments for locals and also for people from all over in Estonia. They also organize local championships which the Pärnu City Government helps to finance.

Most exclusive sport activity for people with physical disability is wheel-chair line-dancing, that is organized by a local line dance enthusiast and Culture Center.

SPORTS FOR PEOPLE WITH DISABILITIES IN CORSICA, THE PERSPECTIVE FROM FRANCE

Access to sports for people with disabilities in France is part of the framework of the law of February 11, 2005 for the "equality of rights and opportunities, participation and citizenship of disabled people". Furthermore, the national strategy "Sports and Disabilities 2020-2024" recalls Article 30 of the International Convention on the Rights of Persons with Disabilities, which requires States parties to take measures to promote "participation in cultural and recreational life, leisure and sports". Moreover, the Sports Code indicates that "the promotion and development of physical and sports activities for all, especially for people with disabilities, are of general interest. Consequently, there is a real consideration and a national commitment to improve access for people with disabilities to sports by informing and raising awareness among target audiences, developing the media coverage of parasports, and supporting and guiding people with disabilities in accessing sports.



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Thus, access to sports for people with disabilities in Corsica is part of this national framework. The development of the "Sports and Health Houses" program by the Ministry of Sports and the Olympic and Paralympic Games and the Ministry of Solidarity and Health allows the target audience, especially those distant from sports, to be supported and accompanied by health and sports professionals to follow a personalized sports and health program that meets their specific needs and enables them to engage in a sustainable practice of physical and sports activities. Corsica has two branches of "Sports and Health Houses" in Upper Corsica in Lucciana and in Southern Corsica in Ajaccio.

Although the government implements certain measures to support and promote access to sports for all, the execution of these actions is almost exclusively carried out through associations advocating for people with disabilities, whether they have a local, regional, or national scope. The associative network tends to substitute for the government's inaction in this field. However, it should be noted that sports in France, although overseen for almost all sports by national federations, are organized around sports associations in their day-to-day operations. Most sports activities at the local and regional levels are generally taken care of by sports associations and local authorities, although the State can play a role in supporting and supervising the overall development of sports in France. Consequently, the same applies to sports practiced by people with disabilities. Here is a list of the main associations operating in the field of access to sports for all:

- Paralyse Cérébrale France: An association recognized as being of public interest by the government, which aims in particular to represent, defend, and support collectively and individually people, children, and adults with cerebral palsy with or without multiple disabilities, as well as their families.
- APF France Handicap: APF France Handicap is a national associative movement for the defense and representation of people with disabilities and their families
- Handisport Fédération Française: The purpose of this federation is to offer adapted sports activities to any person with a physical or sensory disability.



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- Fédération Française Sport pour Tous: The federation is developing initiatives aimed at reaching out to the populations furthest from sports practice
- Centru di u Sport è di a Ghjuventù Corsa (CSJC): It is a tool designed to meet the needs of young people, vulnerable populations, and all stakeholders in the fields of sports and popular education, and it supports the Corsican Collectivity in implementing its policy on sports, youth, and popular education for these audiences. The Center has participated in and organized numerous inclusive sports events such as "Rolling for All," an event promoting health sports and accessible sports for all for awareness and initiation into outdoor activities. The center also regularly participates in Erasmus youth mobility on this theme. It offers training in the fields of Sport and Youth.

At the local level, in Upper Corsica, here are some sports activities that people with disabilities can practice in clubs or associations:

- Judo/Tai Chi Chuan/Taiji Quan
- Outdoor activities/hiking
- Gymnastic Maintenance and Expression Activities
- Rugby
- Aquatic Activities

An example of a regional project is the "Sport-Health 2020" project developed around adapted physical activities in the great outdoors, born out of a partnership between professionals from the medico-social sector (ISATIS) and professionals practicing adapted physical activities in the great outdoors (such as the Corsican Sailing League and the Ajaccio Nautical Society, CSJC, and CAP Corsica Handicap).

However, it should be noted that access to sports for people with disabilities is underdeveloped in Corsica and is still in its early stages for several reasons. Firstly, Corsica is one of the least densely populated regions, and as a result, implementing initiatives can be more challenging than in more populous areas, although Corsica concentrates more than half of its

population in the Bastia and Ajaccio regions, the two largest cities on the island. Furthermore, the physical geography of Corsica can present additional challenges for people with reduced mobility, due to physical demands and natural obstacles, as well as the almost obligatory need to have a vehicle to get around, which is due to the nature of its transportation network, which is not as developed and efficient as in other major French cities. Moreover, the distances between cities can sometimes be significant, making travel more complex, especially for people with disabilities who rely on accessible and adapted means of transportation. In Corsica, the transportation network mainly consists of winding mountain roads, country paths, and scenic routes, which can make travel more difficult, especially for people with specific accessibility needs. However, it should be noted that adapted transport services do exist, allowing people with disabilities or reduced mobility to get around. Additionally, as mentioned earlier, over half of the Corsican population is concentrated in the two major urban areas of the island. Thus, this population has access to a full range of modern services in the Bastia and Ajaccio regions, similar to those found in most other major cities in France.

Finally, according to the territorial diagnosis of the offer in sports activities and adapted physical activities, it reveals a significant need for training to enter the Prescription Sport program and ensure compliance of the practice with the current texts related to the conditions for dispensing adapted physical activity. 33% of the surveyed structures do not develop health sports actions due to the lack of training offered in the area.

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SPORTS FOR PEOPLE WITH DISABILITIES IN ANTALYA REGION, THE PERSPECTIVE FROM TURKEY

Sports transcend physical abilities and unite people from diverse backgrounds, making it an inclusive and vital part of life. The European Development and Change Association firmly believes in this ethos, emphasizing the need for sports participation for everyone, including those with disabilities. In Turkey, where sports form an integral part of the cultural fabric, we see an opportunity to make a significant impact.

Our association recognizes that sports offer a unique avenue for people with disabilities to overcome challenges and pursue new goals. We embrace diversity, adaptability, and innovation to ensure that sports are accessible and rewarding for all. This includes reorganizing sports programs to be more inclusive, developing comprehensive national initiatives, and creating specialized sports facilities designed for various disabilities.

Our commitment extends beyond infrastructure and programs. The European Development and Change Association actively supports disabled athletes in their pursuit of excellence in both national and international arenas. By collaborating with public administrations, we aim to enhance sports policies and allocate resources effectively, thus boosting sports infrastructure quality and promoting widespread participation in sports activities.

Moreover, we work tirelessly to integrate sports into the daily lives of individuals with disabilities. This includes a wide range of sports activities within the community, ensuring that everyone, regardless of their physical capabilities, can find a sport they enjoy and can participate in. We place a strong emphasis on team sports to foster a sense of belonging and individual sports to help people push their personal limits.

The European Development and Change Association also recognizes the significant role of public administration in the realm of sports. We advocate for proactive policy development, resource allocation, and the creation of a supportive environment that encourages regular sports



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participation. This approach not only enhances the physical and mental well-being of individuals but also contributes to broader societal benefits, including reduced healthcare costs and improved overall community health.

In collaboration with various organizations, our association supports a myriad of sports activities, ensuring the active participation of disabled students. We are dedicated to promoting a culture of movement and physical activity, adapting sports to accommodate all abilities, and organizing diverse activities in swimming, athletics, and other sports. Our partnerships with non-profit organizations are crucial in promoting sports among disabled individuals, focusing on inclusivity and equitable participation opportunities.

The European Development and Change Association also places a strong emphasis on education and awareness. We organize workshops, seminars, and awareness campaigns to educate the public about the importance of inclusive sports. These initiatives aim to break down barriers and misconceptions about disabilities in sports, fostering a more inclusive and understanding community.

Our efforts extend to providing training and support for coaches and volunteers who work with disabled athletes. We believe that knowledgeable and empathetic coaching is key to creating a positive and effective sports environment. This training includes specialized techniques for coaching disabled athletes, understanding the psychological aspects of sports participation for individuals with disabilities, and promoting a culture of respect and inclusivity in sports.

In conclusion, the European Development and Change Association's mission in Turkey is to make sports accessible and enjoyable for all, particularly for those with disabilities. By enhancing sports infrastructure, promoting inclusive policies, and fostering a supportive community, we strive to make sports a unifying and empowering experience for everyone. Our vision is a society where everyone, regardless of their physical abilities, can enjoy the benefits of sports and contribute to a healthier, more inclusive community.

4. SPORTS TRAINING MODULES

The role of sport in social integration can also be found in the strategy on the rights of people with disabilities 2021-2030, launched by the European Commission. Equality is one of the European values provided for in our treaties. The strategy also calls for equal and non-discriminatory access to sport for people with disabilities, considering it essential for inclusion and full participation in society. We want to strengthen a European Union that puts the citizen at the center, puts ethics and human rights at the center, puts respect for differences at the center of sales actions. Our role, of governmental and non-governmental institutions, is to work in solidarity to ensure the necessary conditions for these fulfillments of destiny and potential".

Adapted sport is a sport that adapts to the group of people with disabilities or special health conditions, either because a series of adaptations and / or modifications have been made to facilitate their practice, or because the sports structure it self allows its practice.

Therefore, we can point out that some sports have adapted their structure and rules according to the group that is going to practice it. On other occasions, a new modality has been created based on the characteristics of the disabled group that will be playing. An example would be basketball, which has been fully adapted for people with physical disabilities and can now be played in a wheelchair.

There are several adaptations or changes that must be made in the sports we know to become an adapted sport:

- The rules or regulations must be changed from the first moment, if the persons who take care of a disability probably considering their conditions, cannot comply with them adequately.
- On some occasions, we cannot use material that is used in conventional sports. For example, when we want this sport to be played by people with sensory disabilities such as visual. In these cases, the material to be used will be solid so that it can locate where it is.



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- You will also have to make adaptations such as technical-tactical, without forgetting the demands of the sport that is being adapted.
- Another important aspect is the sports facility which, in addition to the current access adaptations, will also have to adapt to the sport to be played within it. Because of this, the playing field will need some inexpensive modifications, such as highlighting the field lines.

Sport for the blind

The difficulty in blind people lies in the rigidity of the movements and in the uncertainty of the gestures, caused by the team not to hit the surrounding objects or the possibility of falling. However, many of the blind develop a "sixth sense", it manifests itself through a good orientation in space, therefore, the most suitable sports for them are field sports, as well as those that take place on the track.

Blind people can experience throwing sports (eg javelin), archery, long and high jump, or running. Ball sports and even swimming are also options to consider, but the latter require the guidance and supervision of another person, both for reasons related to the smooth running of the game and safety.

Team sports can also be practiced, such as goalball, especially for people with no sense of sight. Goalball is a six-man indoor sport based on attack and defense, similar in principle to soccer. In order to be able to orientate in space, the markings are provided with tactile stimuli. Also, so that the players can sense the movement of the ball in the field, it contains some bells inside that make a noise with each touch.

The benefits of all these activities consist in developing orientation, socializing with other people and avoiding a sedentary lifestyle.

Sport for deaf people

People who do not have the sense of hearing have difficulties to communicate, which makes their social life difficult.

However, people with hearing impairments are the ones with the highest degree of participation in physical activities among all disability categories. A clinical study showed that out of 164 hearing-impaired participants, 87 of them perceived themselves as active, 49 as having moderate physical activity, while only 28 believed themselves to be sedentary.

They can participate in most common sports, but are advised to avoid those that require good communication between participants and special balance. However, it should be borne in mind that difficulties related to maintaining balance can be improved through the assisted practice of gymnastics, martial arts and even dance.

The main benefits of playing sports for deaf people are related to social interaction, but also to the spirit of competition and maintaining a good physical shape.

Suggested sports: athletics, basketball, badminton, bowling, cycling, handball, martial arts, volleyball, tennis, water polo, soccer.

Sport for people with locomotor disabilities

Forms of locomotor disability are often associated with the inability to play sports, but in reality, there are a variety of sports that can be played by affected people. Here are some of the most handy:

Wheelchair basketball - is one of the most popular sports for people with locomotor disabilities, regardless of whether it is paralysis, muscular dystrophy or amputation of the lower limbs. It is famous for its ability to develop team spirit and for promoting coordination and socialization.

Archery - can be practiced without problems by people in wheelchairs or who have difficulty moving due to amputated or paralyzed limbs.

Table tennis - because it primarily trains the arms, table tennis can be easily played by people with mobility issues.



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Swimming - It is the only sport addressed equally to those who suffer from dystrophies and paralysis, or have amputations. In the case of people with amputated lower limbs, special prostheses can be used, with good buoyancy.

In addition to these, you can also practice sports that require special conditions, usually adopted within the Paralympic competitions, such as: weight lifting, shooting, volleyball and wheelchair tennis.

We must not lose sight of the fact that any of these sports requires a prior consultation with the specialist doctor, to avoid incidents of any kind, but also a permanent supervision by the companions or coaches.

Adapted or disabled sports

As we already know, there are currently many types of sports adapted to each type of disability. Below we will detail a few, not because they are more important than others, but because they are included in the Paralympics.

Athletics

Athletics is one of the sports included in the Paralympic Games and has been one of the fastest growing, bringing together blind, paraplegic and quadriplegic athletes, people with cerebral palsy and some amputees.

Some athletes even compete in a wheelchair, with prostheses or with the help of a guide tied to a rope. Athletics events can be divided into jumps, throws, as well as pentathlon and marathon competitions, as well as races. Therefore, as we can see, it includes all the Olympic events except the hurdles, hurdles, as well as the pole vault and hammer throw events.

If a disabled person uses a wheelchair, they will be designed with specific and light materials to be able to compete without any problems.



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Wheelchair basketball

This sport is adapted for people who have a physical disability either due to the amputation of a limb, paraplegics, etc.

As a rule, they are governed by the same regulations as basketball, although with different adaptations, such as, for example, that players must pass or jump the ball after pushing the chair twice.

Boccia

The origins of this pétanque-like sport date back to classical Greece. Although it is quite an old sport, it is very popular in the Nordic countries and is usually played in the summer season, being adapted for people with cerebral palsy.

If there's one thing to highlight about this sport, it's that its tests are mixed. It can also be played both individually and in groups. It is played on a rectangular court where participants try to throw their balls as close as possible to another target while trying to keep rivals away, so it can be considered a game of tension and precision.

Cycling

It consists of both track and field events and, although relatively new, can be considered one of the most popular Paralympic Games.

Its different types of tests are conducted in groups classified according to the type of disability of the participants.

The groups can be made up of people who are blind, have cerebral palsy, visual impairments as well as people who have motor problems or who have an amputation.

Fencing

Fencing as it is known today dates back to the 19th century. This type of sport is played by people with physical disabilities, so they will participate in a wheelchair with mechanisms that will allow them to move forward and backward.



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It can be thought of as a combination of different skills such as tactics, strength, technique and speed. There are different ways such as: sword, foil and sword. The inclusion of this type of wheelchair sport in the Paralympic Games dates back to 1960 in the games held in the city of Rome.

Fotbal-7

It has very few differences from conventional football. People who usually practice this type of sport adapt to varying degrees of cerebral palsy. The rules usually differ slightly from the original game as the rules of the International Federation of Association Football (FIFA) are followed:

- In this case, the teams consist of seven people instead of 11 with the goalkeeper.
- Only one single can be used for throws. Unlike conventional sports, offside plays do not exist. Matches are usually a bit shorter, lasting 30 minutes per life.
- Finally, another discrepancy is that the players taking care of the teams must have different handicap levels.

Goalball

It comes from countries like Germany and Austria. It is considered a three-player team sport and, like soccer, is played on a rectangular field with a goal at each end. Unlike this, the feet will not be used to play, but the hand. It is practiced by people who have some type of visual disability, and the ball used is healthy.

Allowing the participation of people with different degrees of visual impairment in Goalball and to guarantee conditions between the blind and visually impaired; all players will wear a mask covering their eyes. Finally, it should be noted that for the proper development of the game you must be silent and applause is only allowed when a team has scored a goal.



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Weight lifting

It is characterized by the speed with which it spread throughout the world. It is practiced by amputees, cerebral palsy, paraplegics. When people to participate in this type of sport have already been selected, they are usually divided according to their body weight instead of their injury, in both female and male categories. It consists of several modalities: powerlifting and weifhlifting.

This sport consists of being able to position the bar made of weights on the chest, then leave it still and raise it until the elbows are extended. The contestants have three attempts each time the weight is added and the one who managed to lift the most kilos wins.

Judo

This sport is a martial art that requires participants to balance attack and defense. In Paralympic fashion it is practiced by people with visual disabilities. It differs from the conventional game because in this case the players start holding the lapels and the referee's directions are audible.

Swimming

It is one of the most popular sports for people with disabilities. There are usually two groups: one for people with physical disabilities and one for people with visual disabilities. Different styles are practiced in Paralympic swimming: backstroke, breaststroke, butterfly and freestyle. These modalities can be combined into existing style tests.

Archery

This type of sport is also prominent among people with disabilities. It is practiced by people with physical disabilities and/or cerebral palsy. It usually features two modalities: standing and wheelchair. Individual and team events are held in both men's and women's categories.



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This method of Paralympic archery usually has the same conditions in terms of rules, procedures and distances as those contested in the Olympic Games.

What are the psychological and social benefits of sport?

Sport, like any recreational activity, has important benefits for our daily lives. This can be very important for people with disabilities, because even today they have to overcome many barriers in their daily lives and this can cause them some problems.

For this reason, sports can be a good option to get rid of the problems that these people have in their everyday life, because in addition to clarifying, it can also strengthen their body and mind. It can also contribute to self-creation and search for new goals to fulfill daily, thus strengthening their social life (Lagar, 2003).

Adapted sport is the branch of sport that uses the motor structure, specific rules, material and organizational conditions modified and appropriate to the requirements of different types of disabilities.

These objectives are:

- maximizing the existing biometric potential;
- facilitating the expression of deficient subjects according to their own abilities and capacities;
- achievement of therapeutic, sanogenetic effects (corrective, recreational therapy, sports-therapy, health programs);
- adaptation of sports activity for recreational purposes (free time);
- creation of a new image of the group or of one's own person, of a superior valorization of existing skills.

The organization of adapted sports is differentiated in the specialized literature, as follows:

1. Sports activities that do not differ in structure, rules, organizational conditions and material - from the known sports branches and events;

2. Sports activities that keep the usual structure and rules, but benefit from material conditions that compensate to a certain extent for the competitor's deficiency (a blind person participating in a puppet competition benefits from a prominent delimitation of the ball launch lane);
3. Sports activities in which both disabled and normal competitors participate, the disabled subjects having some regulatory facilities (subjects participating in tennis competitions have the right to return the ball after two successive falls of them);
4. Sports activities in which competitors with and without disabilities participate; all submit to a modified version of the test or the respective sports branch (competitors of any type participate in wheelchairs in any basketball game);
5. Sports activities of the Special Olympics type in which subjects with disabilities of the same type and degree participate exclusively.

In adapted sports, depending on the objectives that are to be achieved, different types of programs are used: recovery, which include specific exercises and activities to correct physical and other deficiencies; adapted programs, which include motor activities that maximize existing potential and development programs, in which individualized activities based on specific needs aim to improve movement capacity, fitness and socio-emotional integration.

Adapted physical activities are based on the adaptation of exercises, physical activities to the conditions and possibilities of the individual. It is addressed to:

1. people with disabilities (motor, sensory, intellectual);
2. people with chronic diseases (cardiovascular diseases, rheumatism, respiratory diseases-asthma, epilepsy, muscle diseases, etc.);
3. pensioners (old, sick).

The concept of the work strategy within adapted physical activities starts from the following 3 levels:

1. sensory: vision, hearing, kinesthetic sensitivity, touch;



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2. level of motor skills:

- a. motor perception: balance, body integration, direction of movement;
- b. physical fitness: muscular strength-resistance and exercise training (cardio-respiratory endurance);
- c. motor skill, coordination.

3. skill level:

- a. sports (throwing the ball, hitting a ball with the foot, with a racket, etc.);
 - b. functional (walking, running, climbing or descending stairs or a slope).
- Special motor, sensory and intellectual needs

Special Olympics

"I want to win! But if I'm not going to win, I want to be brave in my attempt!"

The Special Olympics movement appeared in the United States at the beginning of 1968, on the initiative of Eunice Kennedy Shriver, the sister of President John F. Kennedy.

The Kennedy Foundation organized the first edition of the Special Olympics International Summer Games in Chicago, a moment that marks the beginning of the Special Olympics movement. In Romania, the Special Olympics Foundation was established in 2003 as an integral part of the international sports movement Special Olympics International (SOI) with the mission "to offer training and sports competitions throughout the year in a variety of Olympic sports for people with intellectual disabilities, offering them constant opportunities to develop their physical condition, to demonstrate their courage and joy to participate and above all to demonstrate their abilities despite their disabilities".

The included sports are divided into winter sports (alpine skiing, cross-country skiing, figure skating, floor hockey, snowboarding, snowshoeing and speed skating) and summer sports (athletics, swimming, badminton, basketball, bocce, bowling, cricket, cycling, horse riding,



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floorball, football, golf, artistic gymnastics, rhythmic gymnastics, handball, judo, kayak, netball, powerlifting, roller skating, sailing, softball, table tennis, tennis, volleyball, motor games, motor activity training program, unified sports).

People with intellectual disabilities are able to carry out physical activities and are capable of sporting performances, having the chance to become accepted and respected citizens. Special Olympics proposes through the programs it develops the social integration through sports of people with special needs.

Special Olympics offers people with special needs the chance to discover and develop their potential and sports qualities through training programs and sports competitions.

Special Olympics athletes thus have the opportunity to become active members of the family and community they belong to. Special Olympics is an experience that instills energy, health, self-confidence and the joy of living.

The Unified Sports Program develops the skills of Special Olympics athletes and promotes their social involvement alongside non-disabled partners to demonstrate that there are no barriers in sports. Special Olympics athletes are children on the unified team who have intellectual disabilities and Special Olympics partners are children on the unified team who do not have intellectual disabilities. The objectives of the Unified Sports program are:

- ☐ Development of sports skills of both categories of participants
- ☐ Gaining experience in sports competitions
- ☐ Social inclusion
- ☐ Participation in community and voluntary activities
- ☐ Education of young people from boarding schools regarding people with disabilities
- ☐ Involvement of families of Special Olympics athletes
- ☐ Personal development of athletes and partners



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For the orientation and development of the sports activity for disabled people, the following directions of action are followed:

I. CREATING THE CONDITIONS TO GUARANTEE THE RIGHT AND ACCESS OF PEOPLE WITH DISABILITIES TO PRACTICE FREELY WITH CONSENT THE FORMS OF PHYSICAL ACTIVITIES PREFERRED AS A FUNCTION OF INTEREST, POSSIBILITIES, CAPACITIES AND DESIRE

1. ENSURING THE ORGANIZATIONAL FRAMEWORK

- a) Sports associations and clubs are called upon to contribute to guaranteeing the right and access to the freely consented practice of some sports activities by its own members and to the extent that the own budget allows the skills and training of the respective athletes to confirm a level compatible with the level sports competitions national and international to ensure their participation.
- b) Issuing, in accordance with the changes in the specialized legislation, regulations, norms for the organization and operation of sports structures.
- c) Continuation of stimulating the establishment of sports associations and clubs for disabled people where they can carry out a sustained, periodic activity, independently and/or collectively.
- d) Establishing relationships and exchanges of information with public and private organizations that deal either with sports or with disabled people for the joint implementation of the program.
- e) Stimulating and supporting the organization of table sports activities, competitions, cups with wide participation, tables for people with disabilities of all types.

2. INSURANCE OF THE NECESSARY STAFF

- a) Attracting qualified personnel: physical education teachers, trainers, doctors, physiotherapists, etc. in supporting the organization of sports-recreational activities, their involvement in the sports activity of disabled people.



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- b) Carrying out training courses with sports instructors-references from associations and clubs by type of disability regarding the sports activity of people with disabilities: regulations, organization of competitions, internal and international competition system.
- c) The training and improvement of special education teachers in the direction of adapted sports activity.
- d) Ensuring specialized staff for the sports activity of disabled people - of all types - at training and training levels, with strictly defined attributions, through preparatory courses for this purpose, to ensure at all levels of training staff for adapted sports activity.

3. INSURANCE, DEVELOPMENT AND MODERNIZATION OF THE MATERIAL BASE

- a) The maximum efficient use of the sports bases, the lands belonging to the special education schools.
- b) Facilitating the access of disabled people to the sports facilities free of charge, depending on their operating schedule.
- c) Determining the assurance of accessibility to sports facilities for disabled people practicing sports activities or in the situation of spectators.
- d) Orientation of the effective use of sports bases and according to the existing agreement, sports installations and materials in favor of disabled people.
- e) Determining the inclusion in the systematization plans of the localities, of the spaces necessary for the development of simple sports bases for the practice of sports activities by disabled people.
- f) Carrying out initiation programs in the sports activity of disabled people and offering them to associations and society for disabled people.

II. KNOWLEDGE AND PERMANENT DEVELOPMENT OF SPORTS ACTIVITY FOR PEOPLE WITH DISABILITIES

- a) The continuation of the creation of individual forms and their inclusion in the data bank for the realization of the record of practical sports activities persons, as well as the record of the legitimate ones for each type of handicap.
- b) Keeping the web page up-to-date with information from all fields of activity.
- c) Establishing contact with different similar bodies from the country and abroad, in order to exchange experience and information for the knowledge, adaptation and application of the most effective forms and methods in the sports activity of disabled people.
- d) Ensuring, to the extent of the annual income and expenses budget, the preparation and participation of representative teams of disabled people of all types, ages and categories, in official domestic and international sports competitions.
- e) Creating sports programs by type of disability for young beginners and encouraging their application in sports associations and clubs for disabled people.

III. FORMING THE POPULATION'S CONCEPT ON THE NEED FOR THE PRACTICE OF SPORTS BY PEOPLE WITH DISABILITIES AS A MEANS OF THEIR INTEGRATION INTO SOCIETY

- a) Stimulating the interest in practicing individual physical exercises in the family or in different groups based on disability criteria, by printing sports programs, leaflets, brochures, posters, advertising materials, etc.
- b) Publication in the press of some articles on the beneficial influences of practicing physical exercise, movement, sports for disabled people, as well as the results obtained by them in domestic and international sports competitions.
- c) Using every opportunity offered by radio and television to publicize the positive influence of sports programs for different types of disabilities, special initiatives, actions carried out for the



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benefit of disabled people, promotional video tapes about initiation into the practice of various sports.

d) Participating and/or organizing together with other bodies that have privileged attributions for disabled people, of round tables, symposia, scientific communication sessions on topics related to the influence of sports activity on improving the health of disabled people, as well as on the integration of disabled people into the community.

e) Organizing, together with the non-governmental organizations that deal with children and young people with disabilities, sports education actions and promoting the positive effects of practicing physical education on the physical and mental health of the population of all ages, but especially of children and young people with disabilities . .

f) Attracting young people as volunteers to sports competitions in order to get to know disabled people, their real needs and acceptance include that.

Sport, as a multidiscipline, produces solutions to overcome physiological, psychological-social and economic barriers identified as problems within the concept of disability.

5. Sports Module: Recreational sports activities

The sports module for recreational sports activities for people with disabilities focuses on providing a friendly and fun environment in caring for people to engage in physical activities and sports in a relaxing and recreational way, focuses on providing accessible options and adapts to the individual needs of . these people. The goal is to provide opportunities for participation and involvement in recreational sports activities, regardless of the type or level of disability.

Here are some examples of recreational sports activities adapted for people with disabilities:

Boccia: Boccia is a precision sport, similar to petanque or bowling, that can be adapted for people with disabilities. It can be played in a specially designed room, where the participants have to throw the balls in the direction of a target, using strategy and precision.



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Wheelchair Dance: Wheelchair dance is a recreational activity that provides opportunities for artistic expression and movement for people with locomotor disabilities. Adapted dance classes or sessions can be organized where specific techniques are taught and different dance styles are explored.

Goalball: Goalball is a sport developed especially for visually impaired people. Players are equipped with opaque glasses and are in a specially designed room where they try to throw or bell balls into the opponent's goal. It is a tactile and auditory sport that requires concentration and coordination.

Adapted Horse Riding: Equestrian activities can be adapted for people with disabilities, giving them the opportunity to interact with horses and benefit from the therapeutic effects of riding. Rides with adapted horses, riding lessons or animal-assisted therapies can be arranged.

Adapted team games: Various team games such as football or basketball can be adapted for people with disabilities. For example, wheelchair soccer or wheelchair basketball provide opportunities for participation and competition in an adapted and accessible environment.

Soccer in the Park: Organizing informal soccer matches in a park or open field where people can join and play in a relaxed way without strict rules and competitive pressure. This is an excellent place to socialize and spend time outdoors.

Badminton and table tennis: Creating a space where people can play badminton or table tennis recreationally. Friendly matches can be organized where competition is less important than fun and social interaction.

Hiking and cycling: Organizing walks in nature or on specially designed cycle paths where people can enjoy outdoor exercise and explore the surroundings in a recreational way. These activities can be adapted according to the fitness level of the participants.

Team games: Organizing recreational games such as volleyball, basketball or handball where people can join and play in mixed teams or according to their preferences. The main purpose is fun and collaboration, and the rules can be adapted to suit the level and abilities of the participants.



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Outdoor Yoga and Pilates: Offering yoga or pilates classes outdoors in a park or beach where people can relax, stretch and work on their flexibility and balance. They are excellent for reducing the stress of activities and creating general well-being.

These are just a few examples of recreational sports activities. The main idea is to create a pleasant and accessible environment where people can enjoy physical activities in a relaxed and fun way, without the pressure of competition. It is important to provide options and adapt activities according to the type of disability and the individual needs of the people involved, to enable them to enjoy the physical, social and emotional benefits of sports activities.

d) Weight. To slow down the actions or for protection, it is necessary that the game balls be replaced by balloons (volleyball), sponge balls (soccer), or other material that does not inhibit the practitioner or predispose him to injuries.

e) The rules. Game rules should adapt to existing situations, especially when non-disabled people participate in the game. The markings in such cases should delimit the playing areas, so that those without disabilities compete with each other, and those with disabilities assist, in the case of the same game. The teams must be combined, support from both is a means of emulation. Pushing the ball instead of love can be a way to change the rules.

Description of some games and group activities

Games for kids

The hot potato (grasping, transferring, grasping, developing tactile, auditory, visual, attention)

The participants are seated in a small circle, and transfer as quickly as possible an object (hot potato) from one to another, to the music. When the music is interrupted, the one to the left of the one left with the hot potato must shout: "hot potato, hot potato is on". It resumes with the start of the music.

Musical circles (moving, grasping, releasing the object, attention)

The participants are determined to walk through the hall to the background music, and when the music stops, to grab a "musical circle" that are scattered in the hall. At the beginning, the number

of circles is equal to the number of participants. Along the way, the circles must be numerically reduced, so that the participants share the circle with their friends. Participants must be encouraged to move around the room in any way (crawling, walking, bending, pushing the chair, with the electric chair).

Pushing the ball on the ground (push)

The participants are organized in a small circle, and push a ball that comes to them towards a friend. The ball is put into play by one of the participants. Pushing can be done with any part of the body.

keep it up (hit, attention)

The participants are seated in a small circle. Several balloons thrown by the teacher must be kept in the air by the participants, by hitting, without falling. Help the participants to send the balloons into the air. Hitting can be done with any part of the body.

Spider web (grab and pull, caution)

The participants are seated in wheelchairs with a strip of elastic on each side of the chair, which leads to another partner. After all the partners are thus seated, they must lift and pull the elastics to form a spider's web. Balloons can be placed on the canvas and can be lifted off the canvas by the movement of the participants.

Bombardment (grab, hold, throw)

The participants are scattered around the hall. On some trays placed in their arms, they receive several cotton balls, which they have to throw at the other participants.

Poisonous spiders (grab, hold, throw)

The participants receive on trays, five bags filled with various materials, which represent the "poisonous spiders". At the "throw" command, they must throw down the bags, one by one. The assistants must help those with problems in execution.

Relay (combinations of motor activities)

The participants, seated in two rows, will participate in a movement race (about 2 m) to a support where there is a ball that they must hit, after which they return to their turn, touching the teammate who must perform the same movements. The assistant must place the ball on the support. Participants must be helped as often as needed. Other motor activities can be used in the relay.

Caught (move, attention)

One of the participants (the catcher), who differs from the others in terms of equipment (a hat, T-shirt), has a paper stick, with which he must touch the others. When a participant is touched, they remain motionless until another participant is touched. The game is repeated several times, changing the catcher as well. The movements of the participants must be as independent as possible.

The trapped game can be played by changing the way of movement and touch. Music or other stimuli can also be included.

Water games:

The sponge game

- let the sponge fill with water, squeeze it and moisten your face
- let it fill with water, moisten your face without squeezing it
- fill it with water, put it on your head and do not squeeze it
- fill it with water, put it on your head and squeeze it
- play in a circle, throwing the sponge from one to the other

Playing with the table tennis ball or plastic boats

- stand up and blow the ball on the water
- bring your mouth close to the water and blow the ball



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- put your chin in the water and blow the ball

- competition to move the ball first breath, without touching it

Simon says

The participants are in a circle, and a leader (in turn, one of the participants) commands movements or skills by saying "Simon says sa". Commands are given even without saying "Simon says sa.". The participants must only perform the movements with the command "Simon says sa.". Any movement adapted to water can be used. The game is engaging and useful.

Water volleyball in a circle

In a circle, the players play volleyball looking for as many passes as possible, not to let the balloon or plastic ball) fall into the water.

Games for youth and adults

Modified volleyball

A volleyball net, tennis net or a simple rope to divide an adapted volleyball court in two. The participants are divided into two teams, trying to hit the balloon or the beach ball, sending it over the net, into the opponent's field. Players can use any part of the body, or means of support to hit the ball.

Players can be helped by assistants for moving or hitting. They must stay as close as possible to the net. You can play for points, or keep the balloon in the air as much as possible.

Modified Handball/Football

On a playing field, at a distance of 10 m from each other, place two goals of 3 m. It can be played either with the hand or with the foot, the goal is to insert the ball into the opponent's goal. Players are in wheelchairs or on the floor, pushing, kicking or hitting the ball, or moving it in any way towards the opponent's court.



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Participants must be helped to move in the field and touch the ball. Play may be interrupted to allow a player to hit the ball. The game can be modified by introducing more balls.

Modified basketball

The participants sit in two teams facing each other at a distance of 2 m. In front of each team, a box (basket) measuring 1.20 X 1.20. The goal is to insert the balloon or plastic ball into your own "basket".

Help the participants to hit the ball with any part of the body. It can also be played with more balls (balloons), when both teams try to insert more balls into the box.

Modified hockey

Two goals with a width of 10 m, at the edges of a field of 10 m. With clubs, the participants must move and hit the ball, introducing it into the opponent's goal.

Help the participants to move and hit the ball as needed. Participants with quadriplegia can play by fixing the stick to the wheelchair, being able to hit the ball by moving the wheelchair.

Bowling

Prepare two bowling alleys by using the boards and divide the participants into two teams. The popicles must be placed approximately 5 m from the launch site. Use basketballs to launch.

It is played until all participants have thrown 10 times.

In aerobics

The participants should be around a leader. On a slower music at first, isolated movements of the body segments, at an interval of 30 seconds. The same movements are performed on a faster rhythm, after which it ends on a slower music. Help the participants to perform the movements, depending on the needs.

Pair dance

The pair consists of the participant who can move and the participant in the wheelchair. To the music, the participants will try to move, the one with free movement pushing the cart of the partner who, to the music, can make gestures with the hand, head or trunk towards the partner. The movement must be as independent as possible.

6. Sports module: Sports activities for a healthy life

Practicing physical activities helps to maintain health and vigor. When a sport is practiced and the body is subjected to a controlled effort, breathing becomes intense, sweating occurs, the heart works better and a state of well-being occurs on a physical and mental level.

Any practical sports activity requires preparatory and muscle stretching exercises.

The benefits of exercising are:

- increase in muscle mass and strength, implied and an athletic appearance;
- maintaining mobility, balance, and hardness and density of the bone system;
- reduces the risk of degenerative diseases (arthritis) and avoids the occurrence of cardiovascular diseases;
- helps to burn fat efficiently;
- reduces the percentage of cholesterol;
- helps maintain well-being by activating a healthy and strong psyche, increasing the ability to concentrate;
- increases the chance of longevity and quality of life.

The fundamental benefit of leisure-time physical activity practices is health. Research supports the idea that daily exercise and a balanced diet are the foundation of a healthy life.



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Starting from the principle of accessibility, the first activity that can be tackled very easily is walking - "an excellent way to exercise intelligently, with the aim of maintaining health and longevity or athletic training, can be a very well designed" (K. Cooper, 1997)

Walking best solves the problem of physical exercise for a sedentary person who wants to practice motor activities on a regular basis. The objective of the second stage is to improve the physical condition, in which case the grading of the effort must be done progressively.

Sporting activities are equally important for people with disabilities, as they can have many health and wellbeing benefits. Here are examples of sports activities adapted for a healthy life of people with disabilities:

Adapted Swimming: Swimming is a great full body activity and can be adapted to suit individual needs and abilities. Through adaptive swimming, people with disabilities can build cardiovascular endurance, muscle strength and flexibility.

Boccia: Boccia is a Paralympic sport that involves throwing balls at a target. It is suitable for people with locomotor disabilities and can develop fine motor skills, coordination and strategy.

Wheelchair rugby: Also known as "muribasket", this adaptive sport offers people with locomotor disabilities the opportunity to participate in an action-packed team game. Wheelchair rugby improves physical endurance, muscle strength and coordination skills.

Wheelchair Dance: Wheelchair dance combines movement and artistic expression, helping to increase flexibility and muscle strength. This can be a joyful and creative activity for people with disabilities.

Adapted archery: This sport can be adapted for people with visual impairments or mobility problems. By developing the skills of concentration, coordination and balance, adapted archery promotes healthy living and well-being.

It is important to find sports activities adapted to the individual needs and abilities of people with disabilities so that they can enjoy the physical, mental and social benefits of an active and healthy life.



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Regarding games and motor disabilities:

We can never start from the child's disability, but from his capacity, that is, from what he can do.

Even if the person has a physical disability, it is not convenient to abuse the accommodation. You only need to provide the means and support when it is essential and necessary.

It is convenient to combine different types of games, depending on how little or not the performance of minor features affects their performance. This is related to the enjoyment of the game, which increases because it no longer requires attention to learn.

If the child will be doing an activity that is cared for, it is not necessary to provide help. Sometimes it can create impatience and feelings that slow down the pace.

Sometimes a partner may be needed to help, so the monitor needs to know how to equate equipment, timing and rhythms.

If it is not possible to adapt the game, the monitor will assign a role to the minor that is compatible with mobility problems.

Some examples of games:

1 - Face and Cross

title: Face and Cross

Main content: Basic motor skills and speed.

Material: It is not necessary to perform the activity.

Number of participants: 2 teams of 10 players will be required at most.

Development:

After forming two teams of ten players, they should be placed separating the rows with a distance of approximately 1.5 to 2 m and 1 m between each student.



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Then the teacher will assign a name to each group, "face" or "cross". The activity is that if he calls the face or passes the team named as such, he must try to catch the members of the other group before they reach an area that they have previously named as safe. Each student must try to catch their partner next to them.

adaptations:

It must be taken into account that there is a homogeneity in couples. In addition, the teacher must pay special attention to the way in which traps should be carried out, so as not to endanger their physical integrity. On some occasions, materials such as balls will be added so that the disabled person can catch their partner simply by throwing them.

You also need to take into account how your peers catch you, so you should know how to do this and the ways that exist. One way would be by tapping her on the shoulder.

2 - The Sculptor

title: The Sculptor

Main content: Body awareness and relaxation

Materials: No materials are needed to complete this activity.

Number of participants: Between 20 and 22 participants (in pairs) will be required.

Space requirements: As flat a space as possible.

Development:

The children must form pairs and one of them will be the sculptor and the other the sculpture. The first has to make a sculpture with his partner's body, because he will have to move both his arms and legs, as well as the other parts of his body.

The sculpting partner must be aware that they cannot move during the activity.

Once the sculptor has finished, the other partner should guess what the figure is. They can switch roles.



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adaptations:

If there is a child with physical disabilities, you need to get account of the movements that you can do not.

It will also have to be taken into account if there are people who have balance problems, in which case they will do the activity down.

On the other hand, if there are children who have a big problem in the extremities, they will participate by giving the order to the teacher so that they can make the sculpture of another class college.

3- The giant ball

title: The Giant Ball

Main content: Basic motor skills and tactile perception.

Material: A giant ball for each group.

Number of participants: There will be groups of 10 people.

Initial situation: All together in groups located in different parts of the room.

development: The game consists of moving the ball to prevent it from falling to the ground. First, you must agree on the place where you intend to take it.

adaptation:

- If a person with a physical disability is participating, they must pretend to touch the ball at the same time as their teammates while moving.

4- Divorced

title: Divorced

Main content: Basic motor skills and spatial organization.



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Number of participants: maximum group of 10 people.

Development:

Since the children form a couple, one member of the couple acts as a persecutor and the other as the persecuted. The second can be saved when he searches for it, holding the hand of another member of another couple. The remaining partner will become chased and so on until the chaser catches them.

adaptation:

- Sometimes they may not be able to shake hands, so it will be considered valid that they are close to each other.

5- Land, sea and air

title: Earth, Sea and Air

Main content: Spatial perception.

Number of participants: between 15 and 20 people maximum.

Material: benches and carpets.

developmental: The teacher will call the land, the sea or the air and for each word the child should go to a certain place. If you call out the word "earth", you can move through the space where the activity is taking place. If, on the contrary, he shouts "big" he should go to the mats. Finally, if you shout the word "air", you should go to the benches and try to raise your legs.

adaptation:

For participants with physical disabilities, actions such as lifting their legs by touching the bench will be replaced, as with the mats, their mission will be to touch it as quickly as possible.

6- The emperor

title: The King



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Main content: Basic motor skills and visual perception.

Materials: No materials are required to complete this activity.

Number of participants: Groups of 5 people can be made.

development: Before starting, players must be positioned in a certain way. They should be lined up one behind the other, leaving a distance of one meter between them. Then the first in each row will act as king.

The companions of each group must imitate their actions, and the one who fails is eliminated. The role of the king will be rotated among the group members.

adaptation:

In principle, there is no need to adapt this activity. The only thing you need to keep in mind is that the person playing the role of king is considering what your partner can and cannot do to avoid discomfort.

7 Cut the thread

title: Cut the thread

Main content: Spatial organization and basic motor skills.

Material: You will not need to use any material.

Number of participants: between 20 and 25 people.

development: Students will be distributed in the room where they will carry out their activity randomly. One player will be responsible for stopping teammates and specifying the name of the person to follow.

The above must flee, while the other companions help him to do so by crossing into the straight imaginary line joining the persecutor and the persecutor. Once he has done this, the stalker must follow the one who cut the wire.



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adaptation:

No adaptation is required to perform this activity, as the student should only have an agility of movement. If the teacher deems it appropriate, the student can have an assistant to help him move more easily and quickly.

Previous considerations in games for people with intellectual disabilities

In general, people with intellectual disabilities process information more slowly than other people. This makes their responses even slower.

The game is highly recommended for these people as it can shape the brain function and cause some substantial as well as lasting changes that facilitate learning.

In addition, it is advisable because it stimulates them, helps them relate to others, offers them psychological benefits and can generate new learning (Antequera et al., 2008).

Some characteristics and implications to consider for leisure and leisure activities and monitor intervention according to (Costa et al., 2007):

People with intellectual disabilities need supervision and support in a generic way because they lack initiative and lack of control.

They have a hard time marking the distance from things, making abstractions... They were sticking to the concrete.

We must avoid any kind of paternalistic relationship in which the child feels inferior, protected or different from other peers.

You must be sure that you have understood the messages.

Games for people with intellectual disabilities

Here are some games that can be used with people with intellectual disabilities:



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1- Dance, dance

title: Dancing, Dancing

Main content: Temporary organization.

Material: Scarves or fabric, CD with songs that encourage dance and movement.

Number of participants: A maximum of 10 people.

development: Everyone should have a handkerchief. These should be distributed as desired on the site where the activity will take place. When the music starts playing, they can move and dance with the handkerchief as they wish.

The teacher will have to quote the body parts and the students should go point them out with the handkerchief in addition to at the same time.

adaptation:

- If necessary, a more relaxed type of music will be used so that the student can identify body parts without stress, as well as classmates.

2- The bank game

title: The bank game.

Main content: Basic motor skills and auditory perception.

Materials: A bench and an audio player.

Number of participants: There will be groups of a maximum of 12 players.

development: The activity is that when you listen to the music, everyone should stand up and turn the bench clockwise.



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When it stops, they will have to quickly sit down to avoid being the last one. Whoever arrives last will be eliminated.

adaptation:

- As in the previous activity, you should use music with rhythms that are not very fast, to give you time to act.

3- Draw in space

title: Draw in space

Main content: Basic motor skills

Material: Ribbons similar to those used in rhythmic gymnastics.

development: Once all the children have tape, they will have to sit freely in the space where the activity will take place.

They will then have to perform band movements both in motion and without motion. They can also imitate the movements of other classmates.

adaptation:

- When necessary, the monitor should help the child with arm movements or even do this activity with him.

4 - The flying balloon

title: The flying balloon

Main content: Coordination skills.

Materials: Large balloons and a volleyball net or similar.

participants: Groups of 12 people.



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development: Once the participants have been divided into two groups, each team must hold their balloon while sending it to the opposite group. Balloon can be sent by hand taps.

adaptation:

- For disabled participants, you may be given guidance on how many times you need to touch the balloon before passing it to the other team.

5- The pump

title: Pump

Main content: Speed and basic motor skills

Material: A ball or any object that can be passed.

development: Children are placed in a circle, while one person remains in the middle of that circle. The attendants who form it will have to pass the ball clockwise, while the one in the middle will count from one to ten.

When it reaches the number ten, the person who has the content will be penalized move to the center of the circle.

adaptation:

If people with a high degree of disability participate in the activity, the account will be expanded to twenty or thirty, to give them time to understand how the game works.

If you cannot understand it, you will need the help of a partner or even the monitor if necessary.

6 Go home

title: Go home

Group content: Reaction speed

Number of participants: two or three groups with between 12 and 15 people.



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Materials: No materials will be needed to complete this activity.

development: Children will be placed in pairs. The first two circles of different sizes will be formed, in the smallest way, "A" will be placed very close to each other. While their "B" pairs form the other circle at a medium distance from them.

"B's" are the only ones who can move, so they will start moving around the room when the teacher calls "go home". When this happens, everyone will have to look for their partner in the small circle they formed earlier.

adaptation:

In the case of moderate disability, both people forming the couple will wear or coat of the same color so that both members can be identified. If it is not possible to use an article of clothing, any material that does not obstruct the activity can be used.

7- Rain of balls and net

title: Rain of balls and net

Group content: Cooperative game that develops motor skills.

Material: a volleyball net and as many balls as they have.

development: the net will be placed at a height of approximately 50 cm-1 m above the players. While the balls will be scattered around the room. Participants should capture all the balls and throw them into the net.

Because they are divided into two teams, who will win the layup before all the balls that were previously assigned a color for each group.

adaptation:

- To adapt this activity is not necessary. If there are problems it is the teacher who must make the appropriate adjustments.

7. Sports Module: Sports activities for rehabilitation

Rehabilitation has been defined by the WHO as "The use of all means to reduce the impact of disabling and handicapping conditions and to enable the optimal social integration of persons with disabilities".

This definition includes clinical rehabilitation, also importantly, supporting the concept of social participation that requires adapting the social environment to the needs of people with disabilities to remove social or professional barriers to participate.

In the context of health, rehabilitation has been specifically defined as "a process of active change through which a person with disabilities acquires the knowledge and skills necessary for optimal functioning from a physical, psychological and social point of view". This definition provides an explicit indication of the process that people with disabilities go through to develop their own capacities, the effectively promoted field of medical rehabilitation.

Particularities of treatment:

- ☐ **autonomy or self-determination:** services that, in parallel with the monitoring of clear symptomatology, preserve and promote the patient's ability to make independent decisions and choices by discovering the stimulation of positive and "healthy" aspects of behavior, despite the presence of a clear disability. and emphasizes;
- ☐ **empowerment:** beneficiaries have the opportunity to choose and make decisions that have an impact on their lives, they should be educated and encouraged in what they do;
- ☐ **individualization and orientation to the person's needs:** although there are a multitude of recovery paths, the individual is unique in terms of preferences, training, needs, culture and deviant experience;
- ☐ **the integrative vision:** rehabilitation encompassing a variety of aspects of individual life including mind, body, spirit and community;



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- ❑ **bad on the practical problems of everyday life:** disabled people aspire to the same things as normal people, namely to have friends, to work, to have their own home and privacy, to drive a car, to travel, etc.;
- ❑ **targeting positive results in good functioning:** by minimizing the negative expectations generated by the disease and the phenomenon of stigmatization;
- ❑ **education/improvement of existing skills** - with better results if these take place in locations located in the community, "as close to home as possible" than in the hospital;
- ❑ **changes in the living environment** (kindness, community): knowing that a lasting face depends not only on the efforts of the community multidisciplinary team and the individual, but also on the support of others - family, relatives, colleagues, friends. Thus, trust, respect for the community, tolerance from a social point of view, respect for the rights of their children, elimination of discrimination and combating stigma are essential;
- ❑ **accessibility:** the use of services, easy and quick access by the school and its members, whenever and wherever necessary;
- ❑ **comprehensibility** is a two-dimensional characteristic of services, providing horizontally, measured in which a service covers a wide variety of mental disorders with different degrees of severity and a wide variability of individual characteristics. Vertical – the availability of the essential elements of the treatment and their priority access by certain groups of people;
- ❑ **the multidisciplinary team** is absolutely necessary, we want a real rehabilitation of people with disabilities that includes a variety of professions, to be flexible in composition (mandatory - physiotherapist, psychologist, social worker, speech therapist, occupational therapy instructor) with a good relationship between members and a clear definition of responsibilities;
- ❑ **continuity and quality of services**, a fundamental principle in the success of rehabilitation programs, characterize services that offer coherent therapeutic interventions at an individual level, referring both to the activities of the members of the multidisciplinary team, which complement and match each other, without being redundant, to the series uninterrupted contact

necessary for a longer period of time for the purpose of assessment, monitoring and relapse prevention;

□ **effectiveness:** the extent to which a specific intervention, carried out under usual conditions, achieves its objectives;

□ **equity:** the correct distribution of resources. This implies the transparency of the decision criteria (establishment of priority needs) and of the methods used to establish the allocation of human and financial resources;

□ **accountability refers to the set of expectations** (expectation based on certain rights, promises, probabilities or calculations) that children, their families and the general population have regarding the functioning of health services. Thus, any patient expects the professional who is being treated to respect the ethical and deontological norms (eg, to ensure confidentiality). At the same time, beneficiaries are responsible for their own care and how they participate in the rehabilitation process;

□ **are involves the creation of coherent treatment** plans for each patient, which must contain clear goals and provide for the interventions related to what is addressed and the services necessary to coordinate an episode of care, as well as references to the relationships between staff and various institutions. during a longer period of treatment;

□ **efficiency characterizes** a service that achieves optimal results with minimal resources;

□ **orientation** towards supporting treatment and community integration, strengthening the hope of recovery: being essential and motivational, the message for people with disabilities can and must overcome the barriers and obstacles they face.

The action of rehabilitation on the body

Rehabilitation refers to a spectrum of programs for people with different disabilities. These programs aim to strengthen an individual's skills, skills necessary to – and meet the needs to live, engage in work, socialize and develop. The goal of rehabilitation is to increase the quality of life of individuals with disabilities by supporting them in assuming a maximum number of



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responsibilities in their daily life and involving them as actively and independently as possible in social life.

Any rehabilitation action aims at compensating the state of deficiency, improving the condition of the sick or the disabled, reintegration into the family, profession, society. In order to achieve these objectives, the rehabilitation of the sick or people with deficiencies will be carried out in a differentiated way, in three directions, namely: medical, professional and social rehabilitation.

Means of rehabilitation:

1. Medical recovery

2. Mental rehabilitation

3. Professional education and re-education

4. Social readjustment

1. Medical recovery is based on modern therapeutic concepts, its efficiency being inversely proportional to the time period required for healing, and in the case of defined morphological or functional injuries, to the time period required for the formation of convenient compensatory mechanisms.

2. Mental rehabilitation or maintaining a normal mental state is the essential condition that makes it possible to apply the medical recovery program

3. Correct medical re-education is only possible in orthopedic hospitals or centers for the establishment of motor impairments equipped with the necessary investigative and therapeutic departments.

4. Professional education and re-education and Social rehabilitation are closely interdependent with mental rehabilitation. The quality and pace of the rehabilitation process depend primarily on the possibilities and willingness of the disabled person to cooperate. The patient's mental state, will, mental qualities or defects, complexes, repulsions and the entire mental life of the patient must be well known before the therapeutic activity is undertaken. The

rehabilitation process must be considered as a psycho-motor therapeutic program based on three main elements, which come into action simultaneously, having a pronounced individual character: - early postoperative or post-injury physical therapy - actions on a social line - psychopharmacological therapy with effects. syndromal. The mental evolution of the deficient during the entire rehabilitation process or after it must be monitored and possibly directed. The motor impaired must consistently practice, for the rest of his life, specific training not only somatic but also mental. Social rehabilitation interferes with the other forms of re-education and area through which deficient conditions are created for him to take full advantage of all the benefits of the societies of which he is a part. The progressive organization of a rehabilitation network as strong as possible social needs and reflects the degree of development achieved by the respective country: Greece, Romania, Turkey, Italy, France.

Any patient rehabilitation program must consider the following types of objectives:

- ☐ **the main objective:** rehabilitating the physical health of the sick;
- ☐ **general objective:** physical, professional and social rehabilitation;
- ☐ **secondary objective:** reducing physical impairment, regaining work capacity and social readaptation.

As for rehabilitation methods, they are numerous and different from one author to another. V. J. Baltazar proposes the following rehabilitation methods:

- a) **physical rehabilitation** all forms of treatment for physical readaptation (physical, motor, sensory, etc.);
- b) **mental rehabilitation** is addressed, first of all, to the mentally ill and consists in creating a favorable psychological climate and training them in their activity;
- c) **professional rehabilitation** consists in readapting the deficiency to a professional-school activity appropriate to its type of deficiency;
- d) **social rehabilitation** is a complex action aimed at the patient's family, school-professional and social re-adaptation.



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Sports activities can play an important role in the rehabilitation process, helping to restore physical functionality and increase the quality of life of people recovering from an injury or medical condition.

The main forms of application in physical therapy:

1. Imitations and games

It is applied to children up to the age of 10, who tend to move within the limits imposed by the severity and stage of evolution of the injury, even if they have undergone an operation or immobilization.

It is recommended that the exercises take on a free and attractive form, the physiotherapist finding here a practically unlimited field of exercises.

2. General and respiratory gymnastics

3. Selective medical gymnastics

The exercise program mainly aims to improve the function of the segment or segments affected by the injury and consists of movements with a direct purpose.

All kinetotherapeutic means are used: imaginary movements, isometric contractions, alternating positions, active and passive movements, active movements with resistance:

Imaginary movements are especially applied to deficiencies immobilized for a long time in plaster casts, constituting a useful means of preventing the installation of joint restorations.

Isometric contractions are especially recommended postoperatively, when the operated limb is immobilized in bed in cast devices or in special splints. It is applied to the main muscle groups of the operated segment, being performed on the second day after the surgical intervention.

Alternating postures are recommended after a series of interventions and begin with isometric contractions. They consist of the alternative change of position, generally flexion and extension movements of the respective segment.

Passive movements are performed late after the resumption of active movements. There are situations where passive movements start simultaneously with active ones. Passive movements have a role in preventing the installation of postoperative phlebothrombosis of the lower limbs, which appear especially after interventions on the hip and knee.

Active movements must be performed depending on the type of intervention, after obtaining sufficient muscle tone.

4. Re-education of walking

It addresses complex movements that train the kinematic chains of the entire body. For people whose deficiencies remain definitive, the development of compensation mechanisms and the creation of dynamic stereotypes is aimed at.

5. Re-education of prehension

Medical gymnastics program succeeds. The grip is a complex movement and trains the entire upper limb, shoulder girdle and trunk.

The basic exercises in the re-education of prehension are:

Abduction and adduction in the metacarpophalangeal joints of the last four fingers

Finger flexion and extension

Grasping various objects

The use of a specialized device in order to facilitate the re-education process.

6. Hydro-kinetic therapy

It offers multiple possibilities of recovery for deficiencies with vicious attitudes of the spine representing an ideal means especially through the movements of swimming on the back. The resumption of walking in the water is done in favorable conditions, the exercises can be started even during the immobilization. By lowering the water level, progressive loading conditions of the lower limbs can be achieved.



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7. Curative sport

It represents a special form of physical therapy for the motor impaired, they benefit from a high degree of sports activity representing an excellent means of maintaining an optimal physical and mental condition.

8. The healing dance

It can be successfully applied to all ages representing a valuable means of physical therapy, recommending those rhythms and movements that correspond to recovery needs. Circle dancing is an excellent exercise for mobilizing the spine and pelvis and the twist can be used with caution as an exercise for toning the thigh muscles. In this form of physical therapy, the fantasy and experience of the physical therapist find a wide field of application.

9. Occupational therapy

It is a prolonged and specialized form of physical therapy being a medical method. It calls for the use of a whole series of devices, installations, for the purpose of re-education by improving the possibilities of moving, of performing some work and of learning some fun games.

10. Ergotherapy

It is a prolonged and specialized form of physical therapy, being defined as the use of work for therapeutic purposes.

It aims to restore functional capacity and takes place outside the hours of the intensive therapeutic program.

It represents a specific method of socio-professional readaptation and aims to prepare the patient for the resumption of professional activity.

Hydrotherapy: This involves exercise performed in water in a controlled environment that reduces impact on joints and supports gravity-free movements. Hydrotherapy is beneficial for the recovery of muscle and joint function, especially in the case of serious injuries or chronic conditions.



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Assisted cycling: The use of assisted bicycles or light-pedaling bicycles can be beneficial in the rehabilitation of people with heart conditions or balance problems. This allows for light but effective physical activity without putting too much pressure on the cardiovascular system.

Therapeutic Yoga and Pilates: These practices focus on stretching, correcting posture, coordination and conscious breathing. They can help reduce pain, improve flexibility and stability, and manage the stress and anxiety associated with the rehabilitation process.

Balance and coordination exercises: These exercises may include walking an obstacle course, using balance balls, or proprioception techniques. They are useful in recovery from injuries to the lower limbs or the central nervous system and contribute to the restoration of balance and motor coordination.

It is important to always consult a rehabilitation specialist or physical therapist to obtain recommendations and create an appropriate program of sports activities based on individual needs and conditions.

The rehabilitation potential of a person (i.e. the ability to benefit from rehabilitation) cannot be formulated without knowing the history of the patient's condition. Some recover spontaneously, so an early intervention can give the impression that the treatment was effective. On the other hand, for most, the lack of rehabilitation will reduce their degree of independence and quality of life. Controlled studies, in which these factors have been taken into account, show that early intervention tends to be associated with an improved final outcome, whether total rehabilitation occurs or not; even later intervention can confer useful benefits.

The main goal of rehabilitation is to enable people with disabilities to lead the life they want, with all the inevitable restrictions imposed on their activities by the impairments resulting from illness or injury. In fact, this is best achieved through a combination of measures to:

- overcome or improve these damages,
- eliminate or reduce barriers to participation in the environment chosen by the person and
- supports their reintegration into society.



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Since it is a patient-centered process, it is right to optimize both activity and participation.

The main goals of Rehabilitation are to optimize social participation and quality of life. This involves helping to empower the individual to decide and achieve the degree of autonomy and independence they wish to have, including participation in professional, social and recreational activities in accordance with human rights.

Rehabilitation is effective in five ways:

- treatment of basic ailments;
- reduction of impairment and/or disability;
- prevention and treatment of complications;
- improving functioning and activity;
- allows participation.

All these activities take into account the personal, cultural and environmental context of the individual following the principles of ICF (WHO).

Rehabilitation is a continuous and coordinated process that begins with the onset of an illness or injury and continues when the individual achieves a role in society that matches his aspirations and desires.

The right to rehabilitation

The Council of Europe has proposed legislation on disability rights, which includes the following:

- Disability prevention and health education;
- Identification and diagnosis;
- Treatment and therapeutic aids;



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- Education;
- Professional guidance and training;
- Employment;
- Social and environmental integration;
- Social, economic and legal protection;
- Training of people involved in rehabilitation and social integration of people with disabilities;
- Information;
- Statistics and research.

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