

# **Sports CONNECT**

## Disability sector education resource project

Consultation phase report

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on behalf of

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*NB: To create a more user-friendly document, references and comments are placed as footnotes at the bottom of the relevant page, rather than in a bibliography or reference section at the end.*

## Executive summary

This report represents the extended consultation phase with the disability services sector to gather views about the potential development of sport-based educational resource material to assist practitioners and service users to access more opportunities in physical recreation and sport.

This is a sector representing the vast majority of people with disabilities in Australia, characterised by a plethora of national and state-territory based organisations from the voluntary and statutory sector.

This specific consultation process is part of a concerted effort by the Australian Sports Commission, through the Disability Sport Unit and Sports CONNECT network, to engage with this important sector with the aim of facilitating and supporting effective system partnerships between sport and disability.

### *Process*

- The consultation consisted of three elements:
  - focus group and one-to-one meetings;
  - follow-up questionnaire;
  - specific research targeting service users.
- 38 consultation meetings in total were conducted across every state and territory.
- 73 disability sector organisations and agencies participated.
- 196 people took part, including disability service organisation administrators and practitioners, service users, parents and carers, state-territory departmental representatives and a small number of sport and disability sport organisations.
- The meetings were conducted between 25<sup>th</sup> June and 30<sup>th</sup> September 2009.
- 55 follow-up (including a few first-time) questionnaires were received from disability services personnel, parents and carers, and members of the Sports CONNECT network.
- 31 service users took part in a specific interactive information gathering session.
- The meetings were conducted using an 'emancipatory' and participant-focused method and using a semi-structured interview technique.

## *Main findings*

(see also summary and recommendations)

The focus of the discussions and questionnaires was to elicit views and comments about the proposed development of educational resources to facilitate the inclusion of people with disabilities in sport.

However, the focus group discussions, although based around a number of specific themes, enabled participants to contribute observations and comments without restriction.

This report reflects some of the wider topics that emerged.

- Participants felt that a broader concept (or definition) of sport would enable them to better meet the needs of individuals with diverse abilities, interests and preferences. This is an important message for sport to consider in order that it can promote, and where necessary, modify, its services to a wider population.
- Two major factors were crucial in motivating service users:
  - social interaction, which was given as the main reason people participated; making friends, team spirit and 'mateship' were very important, and
  - the best way to generate enthusiasm for sport was to enable people to take part; experiencing an activity had the most impact.
- There was a concerted call for more information about local opportunities in sport and physical recreation.
- There was also a request for help in establishing local organisational and practitioner networks. This would enable organisations, and the practitioners working within them, to share expertise and pool resources.
- Most suggestions about resources fell into three main categories:
  - calls to create a *platform* whereby local information and local networking can take place; this could be virtual in nature, although there was a high degree of support for regular, physical get-togethers providing that these had purpose;
  - resources to assist practitioners working at point-of-contact with service users, giving them ideas and strategies they can use (for example, modifying existing sports); this presents an opportunity to engage sport in support of the development of these practical tools;

- gathering and of sharing good practice case studies; many examples of good practice in the field aired during meetings, and included in questionnaires, should act as the basis of developing this important aspect of the resource.
- It was interesting to note that the most commonly used method of receiving information within organisations, and particularly between staff and service users, was word of mouth.
- However, most participants thought that any resource produced should be available in a range of formats, including web-based, printed (for example, activity cards) and electronic media (for example, DVD/CD ROM)
- There was a plea from organisations representing people with specific sensory or cognitive impairments to ensure that all resources were produced in accessible formats (including web-based material).
- Many suggestions were made about the content of the resource. The most frequently suggested were:
  - sports-specific information;
  - information about how to adapt and modify activities for a range of abilities;
  - information about specific impairments;
  - a 'home pack' for parents and carers to enable them to play constructively with their children.
- The development of a specific resource can act as a catalyst for bringing the disability and sport sectors together in cooperation.
- Many participants expressed their approval towards the Australian Sports Commission for providing them with the opportunity to give their views.

## Part one: General background

This project report should be seen in the context of:

- the evolution of Sports CONNECT;
- the existing relationship between people with disabilities and physical recreation and sport; and
- the creation of a new interface between Sports CONNECT and the disability services sector.

### *Evolution of Sports CONNECT*

Sports CONNECT can be considered as the most recent phase of a process of evolution and refinement through which the Australian Sports Commission (ASC) has addressed the inclusion of Australians with disabilities in sport and physical recreation.

Its roots lie in Coaching Athletes with Disabilities program, and the development of the parallel Willing and Able program in 1995, which provided education and training workshops specifically targeting the inclusion of young people with disabilities in physical education and sport.

Willing and Able evolved into the Disability Education Program (DEP) in 1999, which delivered, and continues to deliver, an extended portfolio of workshops designed to address inclusion in specific settings. These include sports clubs and leisure facilities (Opening Doors), sports coaches (Inclusive Coaching) or inclusive activities, particularly for those with higher support needs (Sports Ability).

Project CONNECT emerged in 2003 as a vehicle for more intensive interactive development with National Sporting Organisations (NSOs). Initially a three-year process whereby sports worked towards the creation of inclusive policy and practice at national and state-territory level. Project CONNECT was supported by limited funding and by the staff of the Disability Sport Unit (DSU).

In 2005, by which time 16 NSOs were involved in the process, Project CONNECT made the transition to Sports CONNECT which extended the process to five years, with additional funding and the support of a dedicated Case Manager. There are now 25 NSOs involved in the Sports CONNECT network.

For further information about the background and history of the work of the Disability Sport Unit, see: <http://www.ausport.gov.au/participating/disability/about/history>

#### Keynote

Perhaps the crucial component in the evolution of the Sports CONNECT framework is its dependence upon a network of agencies, coordinators and presenters in each state and territory. This human resource is the foundation upon which the work of the DSU and

CONNECT is built, and has important significance within the context of the disability sector education project and this report.

### ***People with disabilities, physical recreation and sport***

The 2003 Survey of Disability, Ageing and Carers estimated that one in five Australians had a disability (3,951,000 or 20%).<sup>1</sup>

However, there are very few studies that provide an indication of national participation levels in sport and physical recreation.

Packer et al, in a 2006 study into physical activity levels in children and adolescents with a disability in Western Australia found that only 50% of over 300 subjects surveyed had physical activity levels above Australian guidelines.<sup>2</sup> For young people aged 5-12 and 12-18 this is 60 minutes per day, and for adults the recommendation is 30 minutes on *most* days.<sup>3</sup>

There have been large-scale surveys of participation in physical activity amongst the general population in Australia. For example, the Exercise Recreation and Sport Survey (ERASS), a joint initiative of the Australian Sports Commission (ASC) and the state/territory departments of sport and recreation, estimated in 2007 that 43.5% of the population participated in regular physical activity (at least 3 times per week).<sup>4</sup> However, this survey does not specifically include data concerning the participation rates of people with disabilities, but focuses on age and gender demographics.

The Australian Bureau of Statistics reported in 2006 (based on 2002 General Social Survey figures) that only 54.6% of people with a disability or long term health condition

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<sup>1</sup> Australian Bureau of Statistics: **Disability, Ageing and Carers: Summary of Findings, Australia, 2003** (cat. no 4430.0)

<sup>2</sup> Packer, T.L. and Briffa, T. and Downs, J. and Ciccarelli, M. and Passmore, A.. 2006. **PASCAD - Physical Activity Study of Children and Adolescents with Disabilities in Perth, Western Australia**. : Curtin University of Technology

<sup>3</sup> Department of Health and Ageing: **Australia's Physical Activity Recommendations for 5-12 year olds; Australia's Physical Activity Recommendations for 12-18 year olds; National Physical Activity Guidelines for Adults** - <http://www.health.gov.au/internet/main/publishing.nsf/content/health-pubhlth-strateg-phys-act-guidelines>

<sup>4</sup> Published by the Australian Sports Commission and the Department of Health & Ageing; [http://www.ausport.gov.au/data/assets/pdf\\_file/0008/241865/ERASS\\_Report\\_2007\\_FINAL.pdf](http://www.ausport.gov.au/data/assets/pdf_file/0008/241865/ERASS_Report_2007_FINAL.pdf)

participated in sport and physical recreation compared to 70.2% of those without a disability.<sup>5</sup>

Sport England commissioned a survey, published in 2001, that targeted participation rates of 'disabled people' (sic) in England in physical activity and sport. The overall rate of participation in adults was 22% of the disabled population (based on activity on at least four occasions in the four weeks prior to interview).<sup>6</sup>

The most extensive recent comparison is provided in the Active People and Taking Part surveys in the UK.

The Taking Part survey, conducted in 2005-6 by the Department of Culture Media & Sport and National Statistics, showed that the participation rate of people with a 'limiting disability' aged 16 and above was 31.3% as compared to 51.9% of the non-disabled population.<sup>7</sup>

The Active People survey, developed by Sport England and ongoing since 2005, revealed that as little as 9.1% of people with disabilities participated in regular physical activity (30 minutes on at least 3 occasions per week) compared to the national average of 21.3%.<sup>8</sup>

Both of these surveys are significant for their very large sample groups (360,000 subjects in the case of Active People).

The main message emerging from all of these data collection exercises (notwithstanding some issues around methodologies that excluded a significant minority of people with disabilities) is that the participation in sport and physical recreation of people with disabilities is much lower than that of people who do not have a disability.

#### Keynote

There is a lack of significant, targeted information about the sport and recreation habits of people with disabilities across Australia. The ABS 2006 report, for example, is generalised from existing national figures. A more detailed national and state-territory focus would be helpful in determining trends and enabling sports administrators to respond more strategically. An enhancement of the ERASS process may be one option.

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<sup>5</sup> ABS/National Centre for Culture and Recreation Statistics: **Sport and Recreation Participation Among Persons with a Disability**, 2006

<sup>6</sup> Sport England: **Disabled Adults Participation in Sport** (2001); [http://www.sportengland.org/research/tracking\\_trends.aspx](http://www.sportengland.org/research/tracking_trends.aspx)

<sup>7</sup> DCMS/National Statistics 2006; [www.culture.gov.uk/Reference\\_library/Research/taking\\_part\\_survey/](http://www.culture.gov.uk/Reference_library/Research/taking_part_survey/)

<sup>8</sup> Sport England: Active People survey 2007-8; [www.activepeoplesurvey.com/](http://www.activepeoplesurvey.com/) and [www.sportengland.org/index/get\\_resources/research/tracking/active\\_people\\_survey.htm](http://www.sportengland.org/index/get_resources/research/tracking/active_people_survey.htm)

More importantly, direct input from a significant population of people with disabilities would provide up-to-date information about their needs and preferences. Information of this nature provides much of the basis of this report. However, a more extensive empirical study is needed. Some further focus group consultation is planned, and this should include a wider representation from people with disabilities.

### ***Sports CONNECT and the disability services sector***

The Sports CONNECT framework, and its predecessor programs and initiatives, previously concentrated on providing support about inclusive activity to sports providers: NSOs, state-territory sporting associations, disability sport organisations, sports clubs and leisure facility management and providers. This represented emphasis on the 'supply' side of the sporting equation.



However, a determined and concerted effort is now being made to establish an effective engagement with the disability services sector or 'demand' side of the equation; in other words, the vast plethora of organisations supporting people with disabilities in the community, service users and their parents, carers.

Therefore Sports CONNECT is now concerned with helping both people with disabilities and the sports industry to prepare for inclusion.

As mentioned above, a significant element of the CONNECT system is delivered through the state-territory coordinators and their regional and local links.

One example of this at local level is the Building Inclusive Communities (BIC) model. Here the coordinator may work with a state-based sports association to develop a Disability Action Plan. At the same time, the coordinator may be following a similar process with a number of local disability services organisations who are looking for opportunities in sport and physical recreation for their clients.

The aim is to connect the two elements of the sporting equation and enable both the sport and disability organisations to begin to build an interactive relationship with benefits for all.

This project report represents part of this engagement process.

## Part two: Project outline

In 2008, the decision was taken to develop an initial information gathering exercise through interactive forum sessions conducted in each state and territory. The forum sessions involved the use of Turning Point interactive keypad technology in order to garner general opinion on people with disabilities, sport and recreation from representatives of the community organisations providing them with support. Over 100 organisations took part in the process which concluded in September 2009 (see Appendices).

The disability sector education resource project represents a specifically targeted follow-up to this initial information gathering exercise.

### *Aims*

The Sports CONNECT disability sector education resource project had three initial main aims:

- to identify factors that impact upon the participation of people with disabilities in sport and recreation;
- design and develop a flexible education package suitable for delivery to the sport and disability sectors;
- test the delivery of the education resource material to the sport and disability sectors.

These aims were to be achieved through a process of

- review of existing material<sup>9</sup>,
- consultation with the disability, and where relevant, sports sectors,
- design, development and testing of new material.

However, in discussion with the Disability Sport Unit, the consultant felt that the project should consider some additional issues:

- a more extensive consultation process was required; the 'supply' side had received the greater majority of support through the Disability Education Program and the Sports CONNECT framework, therefore the emphasis should be

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<sup>9</sup> Some material had been developed and reviewed by members of the Sports CONNECT network prior to the commencement of the project. A few examples are shown in the Appendices and reference is made to this material in the Recommendations.

on consultation with the 'demand' end to gather views about the need for, and nature of, the proposed resource;

- in addition to resource material already produced (see *Pre-project feedback* below), the concept of sport-based educational material for use *by* the disability sector should be explored; and
- that the process should commence from the position that the views of those consulted would have a direct bearing on the direction of the project; in other words, that the end result of the project was not pre-determined and other outcomes may be possible (see reference to 'Emancipatory Disability Research' under 'Methodology').

It was decided, therefore, with the assistance of the Sports CONNECT network, in particular state-territory coordinators, to embark on an extensive consultation with disability services organisations, service users and their parents and carers.

The sub-text behind this focused consultation was to ask individual participants representing these groups what kind of resource would:

- help them to build on previous sports background;
- develop positive perceptions of sport and physical activity;
- recognise and develop solutions to perceived barriers to participation;
- understand and enjoy the benefits of sport and physical recreation.

## ***Methodology***

A number of parallel consultation methods were employed:

- interactive focus group meetings using a semi-structured thematic format;
- one-to-one discussions based on the themes used in the focus groups;
- follow-up questionnaire;
- additional questionnaire material developed for those unable to attend focus group meetings.

Questionnaire material was amended to address three distinct populations:

- disability services personnel;
- parents and carers of service users;
- Sports CONNECT network personnel.

The focus group sessions were based on a semi-structured interview incorporating a number of common themes (see below under *Feedback*). Around 32 hours of focus group and one-to-one meetings were digitally recorded. This was in order to facilitate the checking of details and enable the use of verbatim quotations, some of which are used in this report.

Service users attended meetings in almost all of the states and territories visited, however, a specific feedback exercise was developed targeting adults who have intellectual impairment. This utilised the Turning Point interactive keypad technology but was designed to maximise participation of the target group. The results of this specific feedback exercise will be discussed below.

#### Keynote

The philosophy guiding the consultation was based on the ‘emancipatory disability research’ approach.

This approach is based on principles of empowerment that places the subjects (in this case those who were consulted) at the centre of the research<sup>10</sup>.

The significant aspect within the context of this project was that the comments and suggestions of the focus group and individual meetings moved the initial emphasis on the development of educational material towards the creation of a human resource network.

### *Organisations, agencies & individuals*

These consisted of a number of broad groups.

- Disability services organisations
- Service users
- Parents & carers
- State & territory departmental personnel
- Disability sport organisations
- Special education staff

One session was attended by two Active After-School Communities staff.

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<sup>10</sup> See Colin Barnes: ‘**Emancipatory’ Disability Research: project or process?** Public lecture, Glasgow City Chambers, 21<sup>st</sup> October 2001

The disability services representatives were the most varied and reflected the plethora of organisations working in support of children and adults with disabilities. They included organisations supporting adults with disabilities in community settings, children’s services, disability specific organisations and others with a direct recreation and sport focus. (The full list of organisations who attended sessions is shown in the Appendices).

The participants from these organisations and agencies varied in role from administrators to point-of-contact practitioners.

### *Participant numbers*

The numbers attending feedback sessions also varied. The largest single group consisted of 11 people, and there were also a large number of one-to-one meetings.

**Table 1: Focus group and one-to-one interview sessions**

Disability services administrators and practitioners	111
Service users*	47
Parents/carers	18
State/territory Departmental staff**	9
Disability sport organisation staff	5
Special education	4
Other	2

Total: 196

\* Includes service users who participated in the modified keypad sessions

\*\* Excluding staff involved in facilitating the meetings

### *Follow-up questionnaire*

Following focus group of one-to-one meetings, a follow-up questionnaire was sent to everyone who had participated. (An example is shown in the Appendices).

Additionally, a modified version of this questionnaire was sent to parents and carers.

To gather views directly from the Sports CONNECT coordinators, who had facilitated the meetings but had not taken part in the feedback process, a third version of the questionnaire was developed to enable them to comment on the resource project from a state-territory strategic viewpoint.

## ***Locations***

Focus group and individual meetings were held in every state and territory.

Locations were: Adelaide, Brisbane, Canberra, Hobart, Melbourne, Perth and Sydney.

There was also an effort made to consult in regional settings, so meetings were also held in Alice Springs (NT) and Toowoomba (QLD).

A total of 38 group or one-to-one meetings were held.

As mentioned above, these sessions were organised through the Sports CONNECT state-territory coordinator network. Without their help the project would not have been possible.

## ***Timeline***

The timeline for the consultation phase of the project ran over a 3-month period. The first meeting was held on the 25<sup>th</sup> June 2009 and the last on the 30<sup>th</sup> September 2009.

## Part three: Feedback

### *Pre-project feedback*

#### Consultation with the sports CONNECT network

Prior to the commencement of the consultation conducted as part of this project, the Sports CONNECT network were asked to review some material initially developed by the Disability Sport Unit and later revised and enhanced by the Sporting Wheelies & Disabled Association, responsible for Sports CONNECT coordination in Queensland.

Comment on the final version of the material was provided by state-territory Sports CONNECT personnel.

This material can best be represented as a tool or mechanism for use by the Sports CONNECT network to facilitate engagement with the disability services sector.

In this regard, this report will not focus on its content as it has already been extensively reviewed. However, once the focus of the resource development has been clearly established, the material should be incorporated and utilised.

A revised aim of *this* project was to determine the demand and nature of resources that could be employed *by* the disability sector to help facilitate the inclusion of people with disabilities in physical recreation and sport within their own networks and programs.

#### Interactive keypad research

As mentioned above (under *Project outline*), a series of forum sessions employing Turning Point interactive keypad technology were held in each state and territory (in 2008-9).

The main difference between the interactive keypad approach and that of the focus group meetings covered in this report is that the keypad sessions used multiple-choice options from which participants selected a preference. The focus group sessions, although following a semi-structured theme format, enabled more open-ended comment.

In order to stimulate comment, and as part of a comment verification process, the findings of the interactive keypad forum sessions were referred to from time to time during focus group meetings. (The merged report of the original keypad research is shown in the Appendices).

### ***Focus group and one-to-one interviews***

As mentioned above, these sessions were based on a semi-structured format.

Although participants were encouraged to comment freely, a number of broad discussion areas were identified from the outset in order to facilitate a comparison across all the meetings.

The broad discussion areas were:

- an agreed definition of sport
- attitudes around participation in physical recreation and sport
- barriers to participation
- format of the proposed resource
- users and recipients of proposed resource
- content (broad themes)
- sharing of good practice.

Discussion around these topic areas was based on the underlying theme of the efficacy of a sport and recreation based educational resource.

In addition, a section has been added noting the most commonly mentioned sport and recreational activities. This could provide a basis of future engagement with the sports (supply) sector.

Each session began with a brief explanation of the background to the Disability Education Program and Sports CONNECT (see *General Introduction* in this report).

Each topic area lists key or frequent comments and, where relevant, proposed solutions. Comments quoted below (and in the Executive Summary) are mainly based on those mentioned in at least two different states or territories, but in most cases, they were raised in at least half of the states/territories visited.

## Definition of sport

The sessions began with this topic as a means of establishing perceptions in the disability services sector towards sport. It seemed sensible to clarify from the outset the way in which both the supply and demand sides viewed sport. In the context of a resource development project, it was important to check that there was a common understanding.

## Responses

### Nature of sport

One participant felt that there should be a project mission statement that precedes any sport definition – to inspire people to be involved and promote inclusion.

Many felt that ‘sport’ means different things to different people – it is ‘individualised’.

There was a strong feeling that it should reflect the physical nature of activity. The physical element was seen by some as vital - passive spectating is not sport. Sport involves some kind of movement. However, others thought that there should be an active *and* passive aspect.

### Social

The social aspect was continuously highlighted – the nature of activity and sport as a ‘social vehicle’.

Key quote

‘The social aspect of sport is its most valuable gift’ (forum participant, NSW)

There was an emphasis on play and having fun. Sport should be an enjoyable activity. There was a recognition that some people with disabilities enjoy the moment – an existentialist definition of play.

Key quote

Sport is about ‘Getting out and having fun’ (participant, ACT)

Sense of achievement was also important, however.

For others, sport should be about ‘anything that promotes physical well-being’. Participation was about improving quality of life.

It was also a kind of self-affirmation – a unification of mind, body and spirit.

### Health

There was a feeling that the health link was underplayed and should be emphasised more strongly. Any resource should emphasise the ways that physical recreation and sport can contribute to the wider health and social development. The definition should address allied health needs, with exercise as a key component, along with diet and social skill development.

### Sports culture

Some participants thought that sports rules, regulations and culture could create barriers. However, some saw this as a positive. Sport has 'structure' – teams, rules, pathways – which can give participants structure and meaning. The importance of maintaining the integrity of sport and its values was mentioned in a number of sessions.

The terminology of sport could be applied to other aspects of people's lives. The rules and etiquette of sport can have a positive influence, for example, dress code, turn-taking, and respect for decisions of officials.

Sport was seen as something that is 'organised'.

There were also contrasting views raised about team sport. Team sport requires others – although the notion of individual activity is also important. The team setting can generate competitiveness, but competition could also be seen as an individual competing against themselves.

Being part of a team was important to some, engendering 'mateship', helping people to make friends.

Sport could be seen as 'sharing and learning how to share' - an experience shared with others.

Sport was about striving for a goal - the competitive nature of sport was inherent. Another factor was the Australian 'macho' culture seen in professional sport which filtered down even to school level and sometimes generated negative behaviour.

Less competitive or physical people can be alienated by this attitude.

### Interpretation

For many, the meaning of sport has changed. It is now more about participation and community. Schools focus more on the health and fitness aspects.

It was suggested that the definition should recognise other roles in sport (as seen in the Sports CONNECT Inclusion Spectrum), such as facilitating opportunities for others, coaching and officiating.

Key quote

‘It’s about being part of the sporting community’ (Disability service practitioner, VIC)

### **The nature of people**

The point was made that disability sport can be seen as representing only the Paralympics. This was not necessarily a reflection of the everyday lives of most people with disabilities.

In people with disabilities, sport can often be defined by their limitations. A narrow concept of sport could be associated with these limitations and a sense of failure.

### **Broad definition**

There was a strong view that traditional definitions do not engage people who have profound and complex needs. Therefore, a broad definition was more useful across diverse a population of users.

For some, a broad definition meant more choice.

Definition should emphasise pathways that enable participation at appropriate levels. It should reflect ‘all stages, all ages’.

A range of settings and range of needs emphasised the need for a multi-faceted definition.

Sport has to be seen as having meaning across the age range – the majority of people with disabilities are older Australians.

Definition has to be wider creating a continuum from community to elite level.

Key quote

Sport is competition, winning & losing;

Recreation is participation, fun, exercise and physical activity;

Leisure is more passive – hobbies, entertainment.

(Local government authority participant, NSW)

## Suggested solutions

- Create less structured opportunities.
- The aspect of skill development and individual achievement should be included – this is a motivating factor.
- There are positive aspects to competition that should be included.
- Sport creates a ‘power of purpose’ (Recreation facilitator, NT) – something for people to anticipate, feel part of, raising self-esteem.

At the conclusion of this part of the discussion, participants were shown a broad definition of sport from the UN Inter-agency Task Force on Sport for Development and Peace.

Sport is ...

*‘..all forms of physical activity that contribute to physical fitness, mental well-being and social interaction. These include: play; recreation; organised, casual or competitive sport; and indigenous sports and games.’<sup>11</sup>*

In virtually every case this kind of broad definition was seen as being more applicable in the disability sector, with the exception of a few people who felt that overt reference to ‘indigenous’ games was unnecessary, preferring the use of ‘traditional’.

## Attitudes around participation in physical recreation and sport

This question sought to explore attitudes, positive and negative, with regard to participation in physical recreation and sport. These included participants’ views on the perceptions of services users, parents and carers, those providing sports opportunities, and the personnel of disability services organisations. It was interesting to contrast the varied views of members of these groups, particularly when meetings had representation from one or more.

In the resource context, the identification of personal experiences of both positive and negative attitudes could form the basis of valuable case studies.

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<sup>11</sup> UN Inter-agency Task Force on Sport for Development and Peace; **Sport as a tool for Development & Peace – Towards Achieving the United Nations Millennium Development Goals 2003**

## Responses

Key quote

'We can include anyone – if we want to!' Marsha Forest

(suggested by friend of service user, WA)<sup>12</sup>

Clients don't fit the mould seen in the media.

### Time

It should be remembered that it takes time to create leisure opportunities. There is a long-term process involved in assisting some people to accept even limited physical activity.

### Service user and family attitudes

Physical activity can be seen by some as a chore – not something to be enjoyed. Clients' views are based on previous experience – which can be negative and build resistance to future participation.

There can also be hesitancy due to lack of competence - people withdraw themselves as a coping mechanism. Additionally, some activities highlight difference.

Lack of participation means that service users may be unaware of their potential abilities and skills.

Parents and carers often feel children would be unable to participate (could 'come and try' days show them this is not the case?).

There is cultural resistance to anything new due to previous failures, and a resultant parental anxiety. This can stimulate caution and anxiety in service users too.

Parents, who may also be disabled, may not have skills or have had exposure to physical activity. Therefore they do not imbue positive messages about sport in their children. Families sometimes 'program' individuals into sedentary behaviour by modelling it themselves.

The issue of 'routine' was raised at one interview. Individuals may have well-established support mechanisms and have a regular 'activity' routine (which could mean shopping trips). Disturbing these routines can cause a negative response.

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<sup>12</sup> Inclusion network; <http://www.inclusion.com/ttcriteria.html>

The important influence of the family attitude to physical activity was repeatedly seen as a crucial factor.

### **Influence of staff**

Support staff were also considered to be key in supporting, or hindering, leisure opportunities. Attitudes of staff crucial to successful participation

Service users can be victims of variables. For example, a change of support worker to someone who is less motivated about physical activity can affect participation.

### **Organisational culture**

Within the administration of disability services, there was a view expressed that case managers are often under-resourced about sport and physical recreation. They don't know where to get information or ideas about physical activity for their service users.

This is due in part to a lack of consistent culture that embraces sport within disability services organisations. It is very often dependent on individual interest and commitment.

A point reflected in discussions and questionnaire returns (see *Questionnaire material* below) was that sport and physical recreation was not a high priority in the scale of needs (for example, accommodation, food, education, employment, health).

There is a limited understanding within disability services about what sport and physical recreation can contribute (for example, how it can open people up in a social or emotional sense).

#### **Key quote**

'Personal and inter-personal spheres are important to young people' (Disability service provider, ACT)

### **Duty of care and safety**

On both the disability sector and sport sides of the equation, there were concerns around safety and duty of care issues. For example:

- perceptions of safety and physical danger;
- concerns around exposing people with disabilities to risk situations;
- pre-conceptions about the limitations of people with disabilities;

- fear of litigation – duty of care v client choice.

### Clubs and leisure providers

The majority of people felt that most responses from leisure providers are positive.

Key quote

‘Most clubs are welcoming – but terrified’ (Parent, WA)

Some leisure providers have issues with challenging behaviour and when high support levels are required. There is a fear factor amongst many community providers.

However, other comments showed a more positive side. For example, some clubs preferred parents to drop their kids and leave. There was a perception that parents tend to be over-protective and inhibit the participation of the child/adult.

A major issue was that the demand often exceeded the ability of community clubs and organisations to deliver. More support was needed to enable even the willing clubs to include.

Culture of sport can be a barrier. For example, the culture of post-game alcohol may be inappropriate for recovering alcoholics or former drug-abusers (who are included within the service coverage of many disability organisations).

There can be an impression that involving people who have mental health issues may have negative impact on club image and future recruitment.

Lastly on club issues, some sports have the impression that on occasions they are used as ‘baby-sitting’ service by disability services, organisations and families.

### Connectivity

As mentioned under *Definition*, There is a need to be, and feel, connected. Many people with challenging behaviours are not connected to anything. The feeling of wanting to be part of the group can motivate participation in sport, but the group mentality can also reduce participation if dominant peers are not interested.

### Cost

Regarding costs, there is often an expectation on behalf of service users and families that service providers will apply reduced rates or free-of-charge access – even from

volunteer-run clubs. There are many examples of leisure providers staging free or low cost opportunities, but this should not be seen as 'usual' or 'typical' in wider society.

### **Passion of the individual**

There was a consistent view that opportunities in community sport and recreation were reliant on the passion of individual practitioners. This is characterised by:

- commitment to action; individuals taking responsibility;
- personal approach; getting to know people as individuals;
- personal sacrifice; regularly giving up time to run sessions, for example, a rowing coach working with people with disabilities in WA has been coaching twice a week, free of charge, for 20 years!

### **Gender**

There are gender differences in relation to sport participation. There is resistance to participate of some women in particular due to poor body image. Strategies linking to other women's provision could be explored.

### **Elitist image**

The elite image of sport can be de-motivating. This extends also to elite disability sport.

On the other hand, some participants felt that there was still a lack of serious coverage of disability sports events, even when they are included in a mainstream competition.

The image of sport as an 'elite' activity can start at an early age. Role models in sport are mostly from the sport elite.

### **Specific impairments**

There were issues around specific impairments; for example, people who have acquired vision impairment and whose ability to adapt to their new situation requires specific support. The issue was raised about the need for awareness of the different approaches that are necessary when including people with acquired or congenital impairments.

However, linked to the impairment issue, it was also critical that the categorising of people based on assumptions was avoided and challenged.

### **Legislation**

On the topic of challenging assumptions, there is a perceived reluctance to utilise existing legislation – there is a lack of a class action option, for example. This was seen by some as a product of the Australian 'get on with it' and 'don't whinge' mentality. However, the legal option was there and was under-used.

## Other issues

Lack of awareness within teacher and coach education was seen as a major problem. The 'educators are not educated' (participant, NSW).

Leisure education (lifelong leisure skill development) should be part of any program. 'Sport' in the narrow sense may only form a small part of a person's life, whereas lifelong leisure preparation enables people to adapt and change over their life span.

There was regular comment concerning the inability of national policies about inclusion in sport to filter down to state-territory level.

A lack of equity in provision between urban and regional and rural Australia was perceived, particularly by those in regional settings.

An interesting observation made in a number of meetings was that young people often resist the introduction of modified activities – they don't see these as representative of the sport they see on the media. Therefore the focus on 'modified' or 'adapted' games can be counter-productive.

## Suggested solutions

- Staff in leisure outlets will become more aware of individual needs over time. Therefore extended and continued visits should be maintained.
- Include real world examples about the importance of 'budgeting for sport' and making a financial contribution.
- Some attitudinal barriers can be seen as generational – these may improve with time – younger people more aware (arguable).

## Clubs

- Identify the 'can do' people within clubs.
- Work with clubs to explain nature of impairments.
- Some clubs have narrow perspective about nature of impairments.
- Build on the organisational strengths of sports and clubs.
- Discuss client needs with leisure providers to arrive at solutions

## Goals

- Accentuate fun element.
- Important to provide achievable goals (for example, for young people who are obese and sedentary).
- Goals can be more effective if individually targeted.

## Individual approach

- Good understanding required of individual issues – key to providing good support.
- Assessment should include people's *hopes and aspirations*
- Create an individual *formula* of participation – how each person can succeed.
- The client should be at the centre and focus of support.

## Staff interests

- Try to align interests of the service users and their support staff – match interests.
- Audit of staff interests and sports qualifications to find out what they may be able to offer

## Supporting

- Parents/carers who are unsupportive may need to be by-passed (adults).
- Buddy systems – utilise college students (short-term)
- Family carers may use sporting opportunities as a respite situation (positive and negative aspect to this).

## Taking part

- Personal experience of activities may be the best method of overcoming resistance in the individual.
- Physical experience is the best reinforcement

## Key quotes

'Experiential effect is the biggest motivating factor' (disability service providers, SA)

'Motivation comes from experiencing activities' (special educationalist, NT)

- Social aspect can be a motivation to continue.
- This practical participation model also applies to staff – they can get a better 'feeling' about how to use activities by trying them themselves.

## Role models

- Inspirational people with disabilities in sport can be motivating.
- Ordinary people with disabilities who have achieved can be a more credible inspiration.

## Human resources

- Community 'champions' can provide a focal point.
- Trained advocates to act as 'go-betweens'
- Emphasis on developing human resources

## Awareness

- Important to start to influence positive attitudes towards physical recreation and sport in school – links to opportunities outside of school at an early stage.
- Increased exposure of people with disabilities in public settings is needed to improve awareness and acceptance.

## Other issues

- There is a need to provide constant change or challenge – once one or two activities are identified as suitable, sometimes that is ALL the person with a disability does.
- Avoid stimulating demand that cannot be met – i.e. ensure exit routes are in place before showcasing activities.
- Support requires an ongoing, continuous effort on behalf of providers and users.

## **Barriers to participation**

Barriers to participation were considered during the interactive keypad forum sessions, and the discussion flowed naturally from the previous topic on attitudes. Here the participants were asked to think about obstacles that had hindered their attempts to access, or provide, opportunities in physical recreation. An important corollary of this was to highlight ways in which barriers had been addressed and overcome.

Again, in the resource context, positive examples of this nature could be an important addition to the proposed resource.

## **Responses**

Key quote

'Lack of imagination is one of the biggest barriers' (Service user, WA)

One of the questions asked in the original interactive keypad research was:

*What do you consider is the main factor that prevents people with disabilities in sport - the nature of impairment or the nature of sport?*

This question was asked at the outset of the barriers section to stimulate initial discussion. On every occasion participants felt that it was a combination of both or changed dependent on specific situation.

(In the keypad research, across the eight sessions that were held around the country, 69.2% of participants, almost all from the disability services sector, felt that the nature of sport was the biggest barrier).

## Transport

The transport barrier was mentioned frequently. This was a particular issue in rural and remote settings. For example, in Alice Springs there are only two taxis adapted for use of physically impaired people – and, even the special school bus can only transport 5 children at a time.

However, access to transport affected people in every kind of setting: urban, regional, rural and remote.

There was a suggestion that sometimes resources and other literature avoided big issues of this nature. It was important that grassroots realities need to be addressed.

Some people with disabilities require an enormous support mechanism, including specialised or accessible transport, to access opportunities whereas non-disabled people would have few problems.

In relation to transport issues, the ‘tyranny of distance’ was mentioned – bringing widely dispersed people together to do sport. Examples were not restricted to rural situations. In Tasmania, the difficulties in travelling between the north and south were given to illustrate difficulties. But even in a urban environment around a city like Adelaide, lack of access to transport or escorts was equally problematic.

## Cost

Cost was seen as a major factor in many different ways.

For example, there were spiralling costs of support workers from caring organisations.

The low disposable income of individuals was common (one example from South Australia was an organisation whose clients had an average disposable income of \$12 per week once they had paid for accommodation, food, travel and medication).

Funding for sport in disability services was seen as negligible (‘a luxury item’, practitioner, SA). However, funding for sport was seen as affecting the sports sector too. For example, lack of funding for non-Paralympic or Olympic sports was considered an example of unequal treatment that directly damaged the choices of people with disabilities who wanted to do community-based recreational sport.

## Legal issues

Child protection and volunteer clearance issues were mentioned as creating hurdles for clubs and organisations.

The Mandatory incident report process was also seen to reduce opportunities – particularly due to its elongated procedures during which activity was often suspended.

The issue of confidentiality was also raised, as was public liability. Providers were often unaware of their responsibilities.

## Volunteers

The traditional profile of volunteers is middle-aged to retirement, whereas many service users are much younger. However, young volunteers (for example, school age) are not available day time when services are offered. There were ongoing problems about recruiting and retaining volunteers.

In this regard, the age of families and carers had to be considered. Many are older people with their own health and financial issues.

## Attitudinal barriers

### Key quote

‘The nature of attitudes is the real barrier – other issues, like resources and safety, can be circumnavigated’ (Disability services provider, VIC)

Not being ‘part of the gang’ can be big barrier. Many opportunities are accessed through being part of a group – if someone does not belong to any social group, it is very difficult to get into a team. Michael, a young service user from Perth, mentioned that his initial approach to a sports club was easier because he knew someone who was already a member. New environments can create anxiety.

## Uncertainty and fear in providers

The fear factor, especially about the perceived unpredictable nature of some people (for example, those who have epilepsy) can prevent providers from offering services. This ‘fear factor’ extends to young people who have challenging behaviour.

Social interaction difficulties, especially associated with some young people with specific issues (for example, Autistic Spectrum Disorder) can grow from lack of understanding.

One parent made the point that individual differences can be *very* specific – stereotypic descriptions were unhelpful. An individual approach was always more desirable.

The need for 1-to-1 support can be an issue – clubs may be willing but unable to provide support of this kind.

The question was asked by one participant: *How can very severely, multiply-impaired people be included in sports systems?*

Fatigue, effect of medication, low muscle tone and other factors affect motivation of people with disabilities.

### **Bureaucracy**

In every state and territory, the Monday-Friday, 9am-5pm structure of much day service provision was mentioned. A plea for more activities between these hours, when staff were more available to support, was made by a number of participants.

There was a perceived lack of interface between day-based services and voluntary sports clubs who operate at evenings and week-ends.

The plethora of committees, decision-makers and stakeholders within disability and sport sectors led to inactivity. Identifying a key contact within each organisation was seen as essential.

Local legislation was seen as a barrier. The example was given of an integrated dance group from Tasmania whose self-built ramp onto the stage was banned by the local council as it did not meet planning requirements. The group were unable to perform.

### **Care issues**

Week-end and evening activities are facilitated by families and are therefore dependent on their ability and motivation. There can be logistical issues that face professional and familial carers, such as how to balance individual needs with those of everyone else in the house.

Those in an individual care situation may have less access to organised programs provided to those who are supported by an organisation.

Sometimes people attend activities as part of a residential group rather than as an individual, which is much more difficult to organise. However, this means that individual preferences may have to give way to the consensus of the group as a whole.

Many people with disabilities experience limited interaction and participation. Their social networks can be based entirely on centre or day-service organised activities. They are isolated once in home environment.

Sport delivered through disability services is often ad hoc – no consistency or continuity.

The transient nature of support workers can be a problem, but there can also be a high client turnover, which makes it difficult for staff to maintain levels of involvement.

In order to motivate parents there has to be a meaningful end product or exit route. They have to see real benefits for their children. Part of this is to ensure that preparation precedes integration, especially to overcome poor attitudes to physical activity in the home environment.

### **In-betweeners**

The specific problem of higher functioning children and adults was identified. When these individuals are 'grouped' with more severely impaired peers it can lead to frustration.

Similarly, young people with minimal cerebral palsy can sometimes find themselves in a limbo between segregated and integrated provision.

Related to this is the issue of those who have hidden impairments, for example, hearing impairment.

Young people and adults in these situations could become isolated in secondary education and in the community.

Team selection (schools) based on performance – excludes low-achieving non-disabled children as well as those with disabilities

### **How sport is organised**

Sports provision is often based on age categories into which the ability level of service users does not fit (for example, adults at level of much younger participants). Opportunities for meaningful social interaction are correspondingly reduced.

The dependence on volunteer support for the governance of sports and sport clubs has to be recognised.

Equally, the way that many sports clubs are organised is not inclusive, even with regard to other 'minorities' in society.

### **Something lacking**

There is a lack of opportunities within sport for people who just want to do the recreational version (e.g, cycling).

Other thought that here was a lack of decent equipment available to people with disabilities in community sports settings.

A lack of awareness about local opportunities was seen as a major barrier by many participants.

Lack of information – participation is often based upon what families, service users and professional staff *thinks* is available, not what is actually available.

There is an information gap between sport and disability services and the consumer – information is often ‘filtered’ by parents, carers, professional staff, based on their interests or availability, before reaching the service user.

#### Other issue

Cultural diversity issues – eg resistance to expose people with disabilities within their communities

### Suggested solutions

#### Selling the product

- How can clubs ‘advertise’ their willingness to include? Perhaps some kind of ‘club mark’ status (as in the Sports CONNECT RATs & charter process) could be awarded. Clubs and sports providers should be encouraged to be pro-active.
- Sports and clubs start from the possible; begin with a few sessions targeting people with disabilities and work from there.
- ‘Push on open doors’ in the hope that some of them become beacons – this can include inclusive training in education, sport, and examples of inclusion in sport clubs and programs.
- Child protection and similar issues can be part of RAT/charter process.

#### Keeping it real

- Behaviour management needs to be on an individual basis
- Simple guidelines illustrating ‘real world’ solutions, for example,
  - attitudes to space;
  - withdrawal;
  - lower exercise tolerance;
  - low persistence.
- Community education needs to precede inclusion
- Simple strategies, for example, this bowling example from NT:
  - client visits bowling centre and just watches – short visit;

- 2<sup>nd</sup> visit, watches friends play – longer visit;
- 3<sup>rd</sup> visit – play themselves.
- Gradual withdrawal of volunteers should be a goal enabling more natural inclusion
- Isolation solution – ‘Key ring’ concept – linking individuals to local communities or groups

#### Professional develop & training

- More help for service providers about *how* to include
- Game design workshop for practitioners and families (and service users)
- Create ability within the sector through up-skilling. This could include orientation visits by experts on specific impairments, for example, accommodating to people who have a vision impairment
- Develop an audit of community expertise – who in the community is trained in how to include people in sport?

#### Bridging sessions

- There is a place for a bridging role – linking people with opportunities through an intermediary session to establish skills and confidence.
- Segregated sessions can act as a stepping stone – service users may feel more comfortable initially and move on when ready.
- Note: encouragement to move on must be part of the process to avoid ghetto-isation.
- Expos, come and try events and bridging sessions can let people gather confidence and interest.
- Individual differences can influence choice of activity, so opportunities should reflect choice on this basis.
- Where possible, link disability sports teams or individuals with mainstream teams to help them develop their skills further. An example of this is the Special Olympics Unified Games program.
- Rather than continue to try and adapt sports, develop new integrated sports.
- Help the person with a disability to adopt valued roles and responsibilities within a club or program.

## Other issues

- There is a need for constant advocacy – the inclusion process does not stand still.
- Here should be input on benefits of physical activity and sport into initial teacher training and also formal training of disability services staff.
- Adopt, emulate and, where necessary, adapt successful programs.
- Link to useful resources to help overcome ‘roadblocks’.
- More sports medicine research related to physical activity needs of people with disabilities is required.
- More *local* information.

## Format of the proposed resource

In this section, participants were asked to look at some of examples of educational resources, in a variety of formats, from existing DEP and Sports CONNECT resources, and well as some examples from other programs. These included workshop booklets, manuals, posters, interactive and storage media (CD-ROM and DVD) and virtual options (email, websites and information sharing and discussion platforms).

Participants were encouraged to share ways in which they shared information or supported training within their own organisational settings.

## Responses

### Language

Most communication is based on face-to-face contact – with parents or end users.

Participants felt that Plain English should be used in resources – aimed also at people with disabilities (intellectual impairment included). The Plain English approach would also benefit those for whom English is a 2<sup>nd</sup> language (for example, migrant or indigenous communities)

Language used by disability services and sports organisations and clubs is different and this had to be taken into account and adapted.

Differences like this might require the possible use of parallel content for different layers of the sector. Key messages and information could be developed for different layers of the organisation.

## Images

Visual representations of sport, adaptations and other ideas would be best, in the view of many, as they help illustrate possibilities more clearly, in particular to some service users. These visual representations would be even more effective if they were based on the moving image.

A number of people thought that templates that enabled disability services, clubs and leisure providers to develop their own resources would be beneficial. This could include 'blank' resources onto which the images of service users could be superimposed to create their own personal activity resource.

Some disability services participants considered that 'hard copy' material, for example, activity cards, is better for practitioners than internet-based information that involves research.

Images using 'real' people – relating to their everyday experiences – would be more effective. Role models from amongst the service users themselves could be motivating. Localised images and pictures would enable service users and families to relate better to the resource.

(For example, one disability service in South Australia uses individual photos for their personal exercise programs).

Using photos or video of the kids themselves, for example, their own aerobic work-out video, could be an effective tool.

Elite athletes with disabilities could have a positive effect, but this should be balanced with images of ordinary people 'having a go'.

## Resource for the home

A lot of participants were interested in the suggestion of a 'home pack' for parents – or variety of packs that can be rotated around groups of parents. The therapeutic benefits of sport and activity would be an important selling point.

Other components of a home pack included:

- ideas for parents and carers about activities they could do around the house with their children;
- a 'motor skills' pack with information and activities around the development of basic movement skills (FUNdamentals approach proposed by Istvan Balyi).

In a similar vein, an 'Access pack' aimed at facility providers was suggested showing how to create a welcoming and inclusive facility (this is similar to the Sports CONNECT HUB process).

### Accessible formats

The view was expressed that assistive technology should be *de rigueur* in any web-based material. All resources should be available in accessible formats.

The quality of the audio material has to be high to ensure inclusion of people who have vision impairment.

Electronic media or virtual information has to be 'readable' by speech synthesising technology

### Personal experiences

A video showing an individual's story – from initial fears to a successful conclusion – would highlight barriers that were overcome. Video clips with service users talking about their experiences in their own words would send a powerful message, to sport providers, parents, disability service staff *and* service users.

Video clips should go to both the supply and demand side showing positive inclusion examples.

It would be particularly effective to have a person with a disability as narrator or guide.

It is also important to show where inclusion has been more difficult – not just glossy success stories.

### Visual basic

Manuals should be less wordy, more like cartoon books (as in a graphic novel). The observation was made that 'people don't read detail anymore'.

Basic information should be used – not too technical, (for example, classification for disability sport).

Information was best if delivered in 'bite-size' chunks. For example, a series of CDs on specific topics could be gradually released to avoid overkill.

### Activities

Activity cards with drills and games linked to specific sports would be useful, some participants felt. These should show real people with disabilities doing sport.

Service users (children and adults) could be involved in the development of material, for example, video diaries, personal stories.

### Other ideas

Create a communication 'collection point' – places where people can access information. This could be virtual or actual.

'Imagination starters' were needed, whether videos, cards or other, information should stimulate people to be creative in their thinking.

Harvest material from other people's resources (for example, a provider in Tasmania mentioned an instructional DVD that had been produced by her organisation).

### **Users and recipients of the proposed resource**

This part of the discussion looked at participants' views on the optimum target or targets for the resource material. At whom should the resource material be aimed? This could include management and administrators, middle management and supervisory staff, point-of-contact practitioners, volunteers, service users or their families.

### **Responses**

There was a division of opinion about at whom any proposed resource should be aimed. Some felt a multiple level resource, multi-layered approach would be best. Others felt strongly that information has to be *targeted* and *specific*.

#### **Start with the family**

A common view was that families could be influenced by influencing young people first.

Many thought that the family and child should be the targets, others placed emphasis on parents and carers. It was vital to gather the views of parents and carers based on real life experiences and use these as examples.

#### **Disability services**

Another viewpoint was that resources should be aimed at point-of-contact clients and staff. Their interaction was seen as key.

Management should also be targeted to encourage more understanding of the benefits of physical activity and sport for service users.

However, another view was that many resources, in whatever format, end up in the organisation office.

#### **Other targets**

Local government authorities (LGAs) should be the target of a component of the resource.

A separate component or part of the resource should be aimed at ways of securing commercial sponsorship, with examples; flyers aimed at potential sponsors.

## Content

This topic was not so much about the specific detail of resource content, but more about the broad themes that it would be important to include. Another aspect raised was about ways in which sport and physical recreation could address important existing issues on the agenda of disability service organisations. Again, examples of this nature could be an informative inclusion in the resource.

## Responses

### Local knowledge

A large number of participants signalled their preference for basic information about local opportunities. The national perspective did not impact on their day-to-day activities.

Some state-territory Sports CONNECT and individual organisations were already creating their own contact resource, sometimes simple matrices of relevant sporting and support organisations.

There was a demand for web-based links that sign-posted existing local opportunities and networks.

It was suggested, however, that expiry dates should always be built into web-based information to avoid old material lingering on sites.

The main message and request was for easy to access basic information.

### Specific information

There should be lots of case studies – these could be in the form of *activities*. (The draft material developed prior to the commencement of this consultation and mentioned above contained activity cards built around key messages about inclusion).

Participants from the disability sector thought that sports providers should have access to basic knowledge about inclusion and disability awareness.

The need for information about specific impairments was suggested – particularly those conditions that are now becoming more prevalent but are misunderstood (for example, Autistic Spectrum Disorder).

### Person centred

Young people should be targeted to imbue positive attitudes from the start. This means using platforms and language that is part of their familiar everyday experience.

Information, it was suggested, should be about life choices, not programs.

One participant suggested a 'learning log' or personal activity diary, adapted in various formats, to record progress, interests and preferences of service users.

The resource must show how to contact clubs and explain needs – like a sophisticated introductory letter.

The resource should explain in simple terms, aimed at service users and their families, about club and leisure facilities, explaining what to expect in the new environment.

### 'How to' guides

Various 'how to' guides were suggested.

- a 'how to do it' pack showing how to run activities - and/or how to access existing training opportunities.
- A home pack for parents showing:
  - basic contacts, for example, sports providers, Sports CONNECT;
  - funding sources;
  - physical activities at home, using things around the house.

These activities could be introduced to parents via a workshop.

- A home pack to help parents play with their kids more constructively.
- Video clips that explain impairment and how to include for parents and /or organisations to use with clubs. As one parent said, this would help overcome the 'constant fatigue' of explaining to every provider.
- Educate and empower people in the disability field about how to adapt - 'You are the expert'.
- Ideas about variations, modifications and different ways to adapt specific sports for people of varying abilities.
- How to develop activities ourselves – how to modify games rules

Some people mentioned that models like TREE can be very useful and simple to apply. However, most people were unaware of these inclusion tools.

Many felt that sports-specific resources – how to adapt common activities for people with different abilities – should be made available to practitioners.

Information on basic motor skills and ways to adapt them was seen as important, particularly as many people with disabilities did not have the opportunity to develop fundamental movement naturally through play.

### Engaging the organisation

A template for conducting a 'sports audit' of the organisation was suggested – current and projected provision based on service users' views.

Others thought that point-of-contact staff's own fitness and physical activity levels should be addressed. For example, one disability service organisation in Tasmania has instituted an annual fitness assessment for staff.

A number of participants thought that it was essential to look at existing successful programs and adapt and adopt the best ideas.

The resource should contain staff development tools; these could be used to inform and enthuse co-workers.

Content should show how physical activity (not necessarily sport) can facilitate community access and engagement, for example, through dance, movie visits, garden walks.

There should be examples about how sport has a 'transfer of skill' effect whereby a commitment to a regular sports opportunity can improve commitment in other parts of a person's life.

Examples could be given about how sport can be a tool for breaking down barriers. The positive experiences of both service users and service providers should be included.

As mentioned above, the use of role models can be an excellent motivating factor.

The resource should show ways of de-bunking myths and assumptions, with examples from the 'real world'. Point-of-view examples should be gathered from all levels of service – users to administrators.

Resource tools should show how therapy-based targets can be met through engagement in physical activity. This kind of evidence can help to raise interest in disability organisations.

There should also be evidence about ways in which people can work towards sport from non-traditional activities – 'surreptitious' exposure to sport as one practitioner from South Australia put it.

Link activity to a skill-development pathway; emphasise progressive development, not just one-off participation.

Parents, carers and professionals could use information about health, social and fitness benefits of sports participation.

Key quote

'Re-engagement through sport' (Disability service, ACT)

### Doing your own thing

A simple strategy that can be included is how to work from what is recognised and known towards new experiences.

One practitioner involved in an out-of hours sports club for his clients thought that people would find guidelines on how to set up a sporting group useful. Or better quality local information might reveal that there were existing opportunities that would be duplicated by a new group.

A number of groups who had already set up their own clubs thought that a 'how to' guide on developing a sponsorship package or business plan for self-help inclusive sporting groups would be very useful.

Equipment sources and information about devising alternatives would assist groups and individuals. There could also be information about groups who can help with this, for example, Technical Aids for the Disabled (TAD).

A service user recognised that there are people who want to organise their own programs, so information on independent ways of accessing sport and physical recreation would assist them to arrange their own opportunities.

### Other issues

A parent thought that information on how to achieve work-life balance, with additional pressures of disability or caring for person with a disability, should constitute an element of any resource.

Pathways to participation *beyond school-age* should also be included – a world of opportunity stops for some people with disabilities on the day they leave school.

A tool kit could be developed for sports clubs to enable them to become self-supporting of people with disabilities.

Finally, a number of participants thought that there was an urgent need for a framework that shows how *everything* links up!

## Sharing of good practice

The final 'official' part of the session considered ways in which examples of good practice could be effectively shared, not just in the context of a 'written' resource, but also through an ongoing interactive network.

## Responses

The key to the 'sharing' process was seen as highlighting examples of success stories within a local network.

Partnerships and buddy systems were also seen as important; for example, partnerships between mainstream clubs and disability services groups. They could share success stories and show what can be achieved.

## Virtual sharing

The idea of a blog was raised in a number of meetings, or the development of an E-newsletter to link local groups.

It was also suggested that web-based information should be role-specific – targeted at specific sections of an organisation.

### Key quote

Computers can create a 'digital divide' (Disability service coordinator, SA)

To offset lack of internet access, some participants suggested finding a way of linking non-web users with information gathered by those who have web access. A very small percentage of service users have direct access to internet themselves.

A frequently made point was for any web-based information to be maintained and kept up-to-date.

## Getting together

There was a strong feeling across most meetings that there should be physical get-togethers to 'show and tell'.

There should also be 'sports weeks' where organisations and service users can come together to see examples of good practice, activities available in the local community.

It was vital, however, that networking meetings had a planned purpose, perhaps leading to a jointly organised event in the future.

Service users and their families should be involved in networking to avoid the creation of a 'professionals only' network.

The point was repeatedly made that the vast majority of service users get information from their service providers ('word of mouth' concept).

#### **Points of contact**

The LGA network should be utilised more as a means of disseminating information and sharing good practice.

Health care specialists and facilities, for example, GP surgeries, other therapies, can be utilised as places to post information.

Information about opportunities should be located at venues that are used by people with disabilities.

A centralised data-base linking to more localised information sites could be created.

Examples of good information sharing practice should be shared. For example, the 'active search' website in New South Wales was mentioned.

The concept of an 'ideas bank' where people can access, and deposit, successful strategies, came up in a number of different ways in different meetings.

#### **Sports leadership**

There was a good example given through a meeting involving a sports leadership group under the auspices of Eastern Region Leisure Services in Melbourne. They recruited and engaged young people with disabilities as sport leaders through a clear process:

- discussed aspirations with athletes/players with potential to become young leaders;
- coach development program emerging from the consultation;
- competition organisation (parallel athlete track for participants);
- link leadership course to employment program (initially short-term work placements).

The idea of having locally-based sport adaptation consultants was also frequently raised. There should be a move towards the establishment of a community of like-minded people, from all backgrounds.

## Other points

Avoid 'parallel program' syndrome – duplication through ignorance.

Find means of sharing new research findings – in lay-person language.

Put ideas, videos and case studies on You Tube (this was mentioned in particular in South Australia and Western Australia). The inspirational video of the autistic basketball player was mentioned in this regard.

A key idea raised in numerous meetings was to establish a contact person within each group – whether disability or sports sector – who will take responsibility for information dissemination.

## Sport & recreation activities

This section highlights some of the sport and recreation activities most frequently mentioned as well as some examples of more unusual and eclectic activities.

### Responses

In no particular order, the kinds of activities that were currently accessed by people with disabilities through their disability service organisations were included:

Use external agencies to provide sport opportunities, for example, RAID in ACT, ReLink in Alice. The ReLink example, using AFL as the vehicle for community re-integration of marginalised individuals, sends particularly strong messages.

Circus training

Biking trails – not just participation, but how assist in setting out trails.

Snow-boarding

Dance and dancesport

Swimming, including hydrotherapy

Tenpin – mentioned in every state/territory. In some cases organised (local league) or semi-organised, in many cases ad hoc and recreational.

Many said that tenpin was popular because:

- the activity has a simple objective
- easy to access (use of ramps or side-bars)
- easy to organise

The downside:

- becomes only option as it is easy and straightforward for staff to organise

Tee-ball was mentioned in similar vein; it presents a very flexible format.

Cycling (NSW & WA) was an activity many people did as an individual pursuit.

Baseball: a big attraction mentioned by one group was the concept of team identity (uniform, social interaction with other teams).

Multi-sensory trails

Riding for the Disabled

Modified surfing – towed on a body board in shallow water

Martial arts, for example, the Brazilian ‘martial art’ of capoeira (mentioned in the ACT and in Northern Territory)

Golf driving range

Indoor climbing

Lawn bowls

Indoor football (soccer)

Wheelchair basketball was mentioned, but in the context of giving an example of resistance from facility managers, on this occasion due to perceived damage it would cause to gym floor.

Alternative ways of exercising, for example, dog-walking, were suggested. (Singing was also mentioned as an example of a physical activity).

Walking for pleasure, for example, the mall-walking concept – early morning linked to opening time.

The important need for stillness, passivity and inactivity during physical recreation sessions – many people do not know how to relax – different from being sedentary

Power chair sports, particularly for young people with neuro-muscular conditions which tended to restrict their inclusion in mainstream activities. These included indoor football (soccer), hockey and rugby league! The Western Electric Sporting Association in Perth is an example of a group of young people with a common profile coming together to do sport.<sup>13</sup>

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<sup>13</sup> See [www.wesa.com.au](http://www.wesa.com.au)

Finally, two off the wall ideas:

- use of the median strip as an outdoor facility (for example, walking)!
- Roller skating with wheelchair users (pusher is on skates!)

## Suggested solutions

### Integrating disability sport

'Reverse integration' to engage non-disabled kids

Disability sport variations in coach education of all sports

The use of disability sports, such as goalball, as a vehicle for inclusion in school and community

Reverse integration can also help solve the 'numbers' issue, for example, siblings clubs

Research: compare traditional PE program with one using wider inclusive activities (if this exists)

### Motivation

A number of people mentioned the motivating nature of sports uniforms.

*Motivation tools:*

- *certificates*
- *improved personal scores*
- *interactive motivation*

### Family activity

Show ideas whereby families can recreate together ('Contact-a-Family' approach in the UK)<sup>14</sup>

Including the whole family can also address 'staffing' and 'volunteer' issues – although issues of respite need also to be considered.

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<sup>14</sup> See [www.cafamily.org.uk](http://www.cafamily.org.uk)

## Other

Use of specific activity therapies, like Brain Gym and educational kinesiology, to stimulate movement in 'hard to reach' young people.

Show how 'exercise by accident' can occur by exposing people to alternative activities, for example, dance.

Sport can provide basis for interaction between disability services and the wider community

More information about supported programs, for example, free swimming programs, should be made available.

There is a demand among some groups for organised competition.

## General comments

These final comments in this section constitute a number of points raised frequently and repeatedly across all states and territories, or those that did not necessarily fit in other categories.

### Individual Service Plan related

There is a general perception that people are doing more sport, but diversity of opinion between those who think more took place under the old 'segregated' group access approach, and those who feel that participation has increased since organisations adopted an individual access approach.

Most Individual Service Plans contain a sport and recreation component.

Others stated that this kind of component often represented a lip-service approach.

### Human resources

There was a consistently expressed view, across all states and territories, that people resources might be more valuable than educational resources.

Human resources and inter-personal relationships are the key

A view was expressed in two states in particular that resources are seldom used once developed. Practitioners cannot absorb the huge amount of material thrown at them – material in 'bite-size' chunks would be more readily accepted.

Current resources were under-used – maybe it was more a case of re-promoting/updating existing resources.

## Do it yourself

A number of meetings discussed funding to develop a local information network. This must be coordinated, for example, network of local coordinators – sources of support and information at very local level.

Another idea mentioned frequently was funding to help organisations develop their own websites and resources – and link these locally.

Creating a network of local community working groups was a common idea raised across all states and territories.

### Key quote

Use the money to be spent on a resource to train people and create a network

(Practitioner, QLD)

## Training

There should be access to training for support workers and volunteers.

Accessing in-service training through existing opportunities, for example, in Victoria, one organisation mentioned that they accessed in-service training through ACHPER.

MOUs should be established; for example, Disability Sport Victoria has an arrangement with some Universities to provide inclusion training with students used to support events.

Access training in sport, disability and education sectors – these operate in parallel.

Training should *lead* resource development (although training resources will need to be developed).

Include ‘soft’ skills, like empathy, within training aimed at sports providers.

## Local sports leaders

Create a network or team of activity outreach ‘motivators’ who can operate at a local level.

Identify and recruit people whose role and responsibility is to promote physical activity amongst service users, their families and professionals who support them.

Identify potential community sports leaders from the disability sector.

Create an expert network from within disability services.

The possibility of *paid* sports specialists within disability services should be considered – rather than expect general staff to take on this role too.

A support network of sports and volunteers can be involved in the wider inclusion framework.

Disability specific information can be delivered by specialist groups.

Generic (social model) inclusion information to establish an inclusive environment and mentality, followed up with impairment-specific organisations.

### Joined up thinking

There was a need for ‘connect ability’ – seen by some as a wider aspect than the sport-based CONNECT concept. For example:

- facilitate links to the physical activity and sport in the community;
- link to therapy & rehabilitation services;
- special events to accentuate linkages.

Another comment on this theme pointed out that sports need partners from other sectors if they are going to succeed in including.

Collaboration was seen as the key.

### Changing the culture

Influence the integration of activity as core part of people’s care plans (note: there was some evidence of this occurring with some organisations supporting people on an individual basis).

Cultural change needed across disability services – physical activity as a fundamental component of care

It was important to change mind-sets – so networking has to *precede* resource development.

Resource development should grow out of a wider development program.

Resources should encourage creative thinking and not be prescriptive.

## Raising money

Information about sponsorship – for example, ‘time’ or ‘in kind’ sponsorship and ‘social’ fund-raising are needed.

‘Athlete / person with disability’ sponsorship schemes to encourage sports to ‘adopt’ on an individual basis

Coordinated support from the business community

## Other

The need for an intermediary program or organisation to facilitate opportunities and create positive relationships between providers and users (In Victoria, for example, ERLS acts as the facilitator – but there were other examples from other states).

LGAs should be seen as a source of support.

Build disability sport component into coach education

People’s interests change over time – opportunities should be available to reflect these changes.

Importance of ‘personal touch’

Importance of continuity

Finally, is there a need for a ‘campaign’ type approach, where benefits of participation at local level are part of a national message (for example, see the Change4Life campaign in the UK – initially aimed at families).

## Two final points

There is a positive under-current and willingness to include!

There is a need to articulate to service users that they do have a choice – about everything! Our goal should be to make this a reality.

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<sup>15</sup> See [www.nhs.uk/Change4Life](http://www.nhs.uk/Change4Life)

## Questionnaire material

As discussed above, each participant in the focus group sessions was sent a follow-up questionnaire to enable them to expand on the views they had expressed during the meetings or articulate any new ideas.

There were three slightly modified versions of the questionnaire:

- follow-up questionnaire for those who had attended focus group or one-to-one meetings; these were almost all representatives of disability services organisations, plus disability sport, government departmental staff and similar; parents and carers and service users also attended, sometimes in a dual role;
- amended version for parents and carers; some questions omitted;
- third version to gather the views of Sports CONNECT coordinators and practitioners, who had facilitated the meetings but whose views had not been included in the focus group feedback.

Questionnaires were also sent on request to people who had been unable to attend the sessions covering all three of these categories.

### *Completed questionnaires returned*

Focus group attendees	30
Non-attendees	11
Parents and carers	2
Sports CONNECT network	12
Total:	<u>55</u>

There were a number of multiple option questions (not multiple choice, respondents could choose as many options as they felt applied). These mirrored the themes explored in group and one-to-one discussions.

There was also ample opportunity for people to make subjective comment. In most cases, the subjective views expressed paralleled those revealed in the focus group sessions. However, there were some interesting and unique comments and a selection of these have been included below. This section of the report will concentrate, however, on the aspects of the questionnaires common to all the groups who responded.

**Table 2: What do you think the word ‘sport’ represents?**

	Disability services attendees (30)	Disability services Non-attendees (11)	Parents-carers (2)	Sport CONNECT Network (12)	Merged % (53)
Competition	26	6	Not asked	9	77.3%
Fun & enjoyment	26	11	“	9	86.7%
Play	17	8	“	5	56.6%
Recreation	22	11	“	7	75.4%
Exercise	26	10	“	8	83.0%
Health	22	9	“	8	73.5%
Personal achievement	20	6	“	9	66.0%
Social interaction	27	10	“	10	88.6%
Well-being	20	8	“	6	64.1%
Physical fitness	22	9	“	8	73.5%
Mental & emotional balance	18	8	“	7	62.2%

Other definitions mentioned: activity; choice; connecting with the community; employment; inclusion; non-sporting roles; participation; sense of belonging; skill & physical development; structure & rules; volunteering

**Table 3: The respondents were asked to rank the three meanings of sport that they felt were most important.**

In the 53 respondents who were asked this question, those most mentioned were:

	Disability services Attendees (30)	Disability services Non-attendees (11)	Sports CONNECT Network (12)	Merged % (53)
Social interaction	19	6	7	60.3%
Fun & enjoyment	17	7	7	58.4%
Exercise	11	5	4	37.7%
Competition	8	0	4	22.6%
Well-being	4	3	5	22.6%
Health	4	4	3	20.75%
Physical fitness	6	2	2	18.8%
Personal achievement	6	0	1	13.2%
Mental & emotional balance	5	1	0	11.3%
Recreation	3	1	0	7.5%
Play	1	0	0	1.8%

**Table 4: Where do you get information about services and opportunities available to service users?**

	Disability services attendees (30)	Disability services Non-attendees (11)	Parents-carers (2)	Sport CONNECT Network (12)	Merged % (55)
Television	4	0	0	0	7.2%
Radio (national)	1	1	0	0	3.6%
Radio (local)	2	0	0	1	5.4%
Newspapers/magazines	12	3	1	4	36.3%
Specialist magazines (disability focus)	11	4	1	4	36.3%
Newsletters (eg from disability sector)	22	8	1	9	72.7%
Internet	26	8	1	8	78.1%
Word of mouth	25	7	2	10	80.0%

Other sources mentioned: local government (7); professional networks (6); email (3); sporting websites (3); ASC (2); colleagues (2); community centres (2); community literature (2); posters/noticeboards (2)

**Table 5: What kind of recreational or sport activities are most requested/successful with service users?**

	Disability services attendees (30)	Disability services Non-attendees (11)	Parents-carers (2)	Sport CONNECT Network (12)	Merged % (55)
Individual (eg walking, swimming)	20	9	1	3	60.0%
Group (eg recreating with others)	26	8	2	5	74.5%
Indoor	23	8	2	4	67.2%
Outdoor	18	8	2	1	52.7%
Games & play	20	7	1	6	61.8%
Competition	18	3	1	1	41.8%
Physical activity	20	7	2	3	52.7%
Screen-based (eg PC)	14	2	1	0	30.9%
Watching sport	20	3	2	0	45.4%
Therapeutic activity	14	4	0	0	32.7%
Other involvement (eg supporting, helping)	11	2	0	1	25.4%

Other activities mentioned: social interaction/visits (5); fitness/gm programs (2)

**Table 6: What benefits are disability services/service users looking for through their participation in sport?**

	Disability services attendees (30)	Disability services Non-attendees (11)	Parents-carers (2)	Sport CONNECT Network (12)	Merged % (55)
Improved fitness	21	9	2	3	63.6%
Social interaction with others	30	11	2	10	96.3%
Better health & well-being	26	9	2	8	81.8%
Feeling better about themselves	23	10	2	7	76.3%
Getting out of the house	17	10	2	7	65.4%
Respite for the carer	9	4	0	3	29.0%
Opportunity to do new sports activities	16	7	2	4	52.7%

Other benefits mentioned: community inclusion (5); developing new skills (2)

**Table 7: What are the things that prevent people with disabilities from participating in sport & physical recreation?**

	Disability services attendees (30)	Disability services Non-attendees (11)	Parents-carers (2)	Sport CONNECT Network (12)	Merged % (55)
Transport	23	10	0	5	69.0%
Cost	17	10	0	4	56.3%
Lack of information	14	4	0	8	47.2%
Lack of specialist equipment	8	6	0	0	25.4%
Attitudes	21	4	0	7	58.1%
Lack of trained staff	16	4	0	5	45.4%
Time	8	2	1	2	23.6%
The nature of the person's impairment	12	4	0	1	30.9%
The way sport, sport clubs & leisure facilities are organised	8	3	0	2	23.6%

Other barriers mentioned: lack of awareness(2); lack of out-of-hours options(2)

**Table 8: Perhaps a resource would help you to provide better opportunities for people with disabilities to participate in sport & physical recreation?  
What should it contain?**

	Disability services attendees (30)	Disability services Non-attendees (11)	Parents-carers (2)	Sport CONNECT Network (12)	Merged % (55)
Information about national sport programs	9	4	0	1	25.4%
Information about local recreation & sport programs	27	7	1	11	83.6%
Ideas about physical activities & games you can do yourself	16	4	1	5	47.2%
Competitive opportunities	10	3	0	3	29.0%
Clubs or groups you can join	18	6	1	8	60.0%
Sources of funding	20	8	1	4	60.0%
Ideas about adapting & modifying games	16	4	0	4	43.6%

Other aspects mentioned: funding to develop own website (2); resource not needed (2); training & professional development (2)

**Table 9: If a resource was needed, what would be the best format?**

	Disability services attendees (30)	Disability services Non-attendees (11)	Parents-carers (2)	Sport CONNECT Network (12)	Merged % (55)
Web-based (eg internet site)	21	7	1	6	63.6%
Printed material (eg books, booklets, cards)	17	5	1	4	49.0%
CD ROM (with links to websites, downloadables, etc)	12	3	0	2	30.9%
DVD (with ideas on recreation & sport activities)	12	3	1	2	32.7%
Combination of two or more of these	16	6	1	7	54.5%

Other formats mentioned: information on local opportunities (2); You Tube

## *Some discussion points*

There was a broad range of agreement across the topic areas, but some interesting divergence of opinion on some specific areas.

### *What do you think the word 'sport' represents?*

The views expressed in the questionnaire mirrored those of the focus groups by supporting a broader, less competition-oriented definition (see Tables 2 & 3).

'Social interaction' (88.6%) and 'fun & enjoyment' (86.7%) were the two most preferred meanings across all the questionnaire groups, with 'exercise' (83.0%) third most popular above 'competition' (77.3%).

When the respondents were asked to rank their three most preferred definitions or meanings, the four mentioned above were in the same order, but the weighting given to competition dropped to 22.6%.

Interestingly 'health' was ranked 5<sup>th</sup> equal or 6<sup>th</sup> in Tables 2 and 3 (20.75% when ranked). *Where do you get information about services and opportunities available to service users?* (See Table 4)

As had been mentioned frequently in the focus groups, the most common means of finding out about sport and recreation opportunities and activities was by word of mouth (80.0%) or the internet (78.1%). Newsletters from the disability services sector were the next most important information source (72.7%).

National radio and the ubiquitous television were not rated as useful sources of information about physical activities for people with disabilities (3.6% and 7.2% respectively).

### *What kind of recreational or sport activities are the most requested (disability services/parents) or successful (Sports CONNECT network) with service users? (See Table 5)*

There was an interesting contrast in this question between the views of the practitioners who answered the questionnaires and those of the young adults who participated in the interactive keypad exercise (see 'Specific service users feedback' below).

Where there was agreement that most people with disabilities preferred to participate in group recreation. The practitioners ranked this highest with 74.5%.

They rated screen-based activity relatively lowly (30.9%). However, the keypad exercise indicates that two-thirds of the young adults with intellectual impairment who participated in the session preferred (or spent the majority of their time) some kind of screen-based entertainment.

The social inclusion factor around watching sport led to a fairly high rating of 45.4%.

*What benefits are disability services/service users looking for through participation in sport?*

By far the most suggested benefit (see Table 6) was that of 'social interaction with others' (96.3% of respondents).

This was echoed in the views expressed by service users in the focus group and one-to-one meetings, and in the keypad exercise, where most rated 'being with friends' as the main reason they did sport.

'Better health & well-being' were given a high rating in this question. This supports evidence amongst people with disabilities themselves that health is a main reason for participating in activity.

In a 2006 study, the author interviewed 22 older people with disabilities (mean age 68.6) about their motivation for doing exercise. 21 of 22 subjects rated health as the prime motivator (and the other subject rated it 2<sup>nd</sup>).<sup>15</sup>

*What are the things that prevent people with disabilities from participating in sport & physical recreation?*

Table 7 shows that the big issues of transport and cost dominate the barriers to participation (69.0% and 56.3% respectively). A number of focus group members made that point that these 'old chestnuts' needed to be considered and addressed, and not only in regional, rural and remote settings.

'Attitudes' was also given a high rating. 58.1% felt that attitudinal barriers were still a major factor in preventing people with disabilities from accessing sports opportunities. The perception of where negative attitudes originate varies depending on the respondent.

*Perhaps a resource would help you to provide better opportunities for people with disabilities to participate in sport and physical recreation? What should it contain?*

By far the most suggested element was for information about local recreation and sport programs (see Table 8) which was selected by 83.6% of respondents.

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<sup>15</sup> Black K 2006; paper **Motivational aspects affecting the status of older disabled people participating in the Inclusive Fitness Initiative (IFI) programme** presented at 'The State of the Art of Assessment of Physical Activity in Elderly People' conference, Oslo, 25/26 September 2006

Related to this desire for localised information, information about clubs or groups that people could join was identified by 60.0% of respondents, with information about sources of funding (another one of the 'old chestnuts') also rated at 60.0%.

Two interesting alternative suggestions were:

- funding to groups to develop their own local websites; and,
- a resource was not needed – use re-launch and/or update *existing* resources.

*If a resource was needed, what would be the best format?*

This question sought the views of respondents about the best medium or format for any proposed resource (see Table 9).

More than two-thirds of respondents felt that a web-based vehicle (for example, an internet site) would be the best platform through which to disseminate information or new ideas (63.6%).

However, there was still a sizeable group (49.0%) who felt that printed material was an option (for example, books, booklets or activity cards).

Over half of respondents, however, felt that any resource should contain a combination of formats, including web-based, printed, CD-ROM or DVD elements.

Finally, there was an interesting divergence of views of the issue of the importance given to sport and physical activity by service users and the disability service providers who support them.

Whilst disability services personnel, parents and carers considered that it was either 'very important' or 'quite important' (65% merged), representatives from the Sports CONNECT network felt that sport and physical recreation was either of 'low importance' or 'not a priority' (66.6%), even for service users.

## Specific service users' feedback

As mentioned above, the opportunity arose during the course of the project to gather the views of two groups of young adults (20-40 years approximately), all of whom have moderate to severe intellectual impairments. In both cases, these young adults were from the local community, living independently, semi-independently with support, or with their families. There was a balance of female and male participants, averaged across both groups.

One group comprised of 25 people using the services of the Endeavour Foundation in Brisbane; the other was a smaller group of 6 young adults who are part of a feedback group coordinated through Catholic Care in Canberra. The sessions were held in July (Brisbane) and October (Canberra).

The Turning Point interactive technology utilises software operated through a keypad system, enabling large groups of participants to give their opinions based on selections from multiple-choice questions.

This format was adapted by the author by substituting photographic images linked to multiple-choice options in order to facilitate the engagement of the participants in the process. To the knowledge of the consultant, this is the first time that the Turning Point technology has been used with this population.

Turning Point uses Powerpoint as a vehicle – the presentation used in both cases is attached in the Appendices.

The cumulative results across both groups are also shown.

### Procedure

The aim of the sessions was to gather from the participants their views about sport and physical recreation, including their attitudes to participation, and some of their preferences about the ways in which they accessed sporting opportunities. The process was kept fairly short in order to maximise participation without boredom or disengagement. In both cases this was around 50 minutes.

Prior to showing the options from which the participants could make a choice, they were familiarised with the keypads. These are quite small, about the size of an average mobile phone, so it was important to give participants the opportunity to try out the buttons to make a choice and to understand how the session was going to proceed.

The key to the process was to initiate a short discussion with the group around each theme prior to asking them to decide. To illustrate each theme and stimulate discussion, a group of photographic or cartoon images were shown to illustrate the options they had.

For example, in order to find out if the participants preferred doing sport indoors or outdoors they were shown pictures of someone playing table tennis in an activity room and another of a group of people outside doing archery.

Once a brief discussion had been held, where they talked about their own personal preferences and listened to those of others, they made a selection by pressing either button 1 or 2 on the keypad, corresponding to their choice of indoor or outdoor participation.

Although it could be argued that by holding a short discussion before each decision individuals would be subject to the influence of others, this factor was superseded by two more important elements.

First, the discussion enabled the author to ensure that the theme of each choice was understood. Secondly, the discussion created an important social element to the process, which was considered by the support staff present to represent a key underpinning aspect enabling participants to listen to, and respect, the views of others, and having heard these differing opinions, make their own choice from a more informed opinion.

In the view of the author, this latter factor brought with it benefits not possible if the session had been conducted in silence or on an individual basis.

The use of the keypads proved to be a novel and engaging element. Support staff present assisted individuals who had difficulties with identifying the correct button to press to indicate their preference. However, the staff refrained from making any suggestions themselves, but where necessary reiterated the options from which the participants could choose.

One or two individuals who had particularly large hands found the buttons on the keypad to be a bit small, but with the assistance of staff they were able to make their choice. At the conclusion of both sessions, the participants expressed how much they had enjoyed the exercise.

### ***The views of the participants***

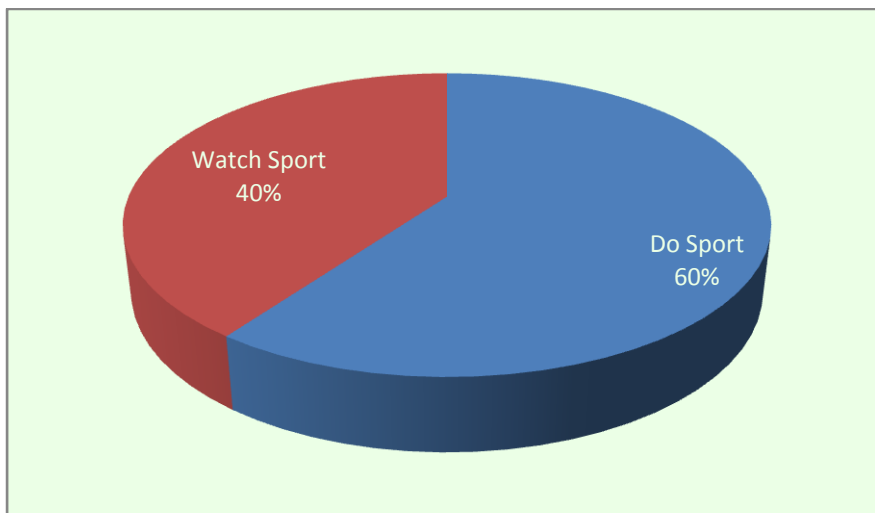
There were a total of nine questions about participation in sport and physical recreation, and a light-hearted 'joke' question at the end.

The questions mostly involved a choice between two options. Previous research by the author has found that multiple choice questions involving nuances of opinion (eg strongly agree, agree, not sure, disagree, strongly disagree) tended to create confusion and uncertainty. People tend to respond more positively when they have a more straightforward choice.

However, towards the end of the session, questions involving choices between 4 or 5 options were used as participants became more comfortable with the procedure.

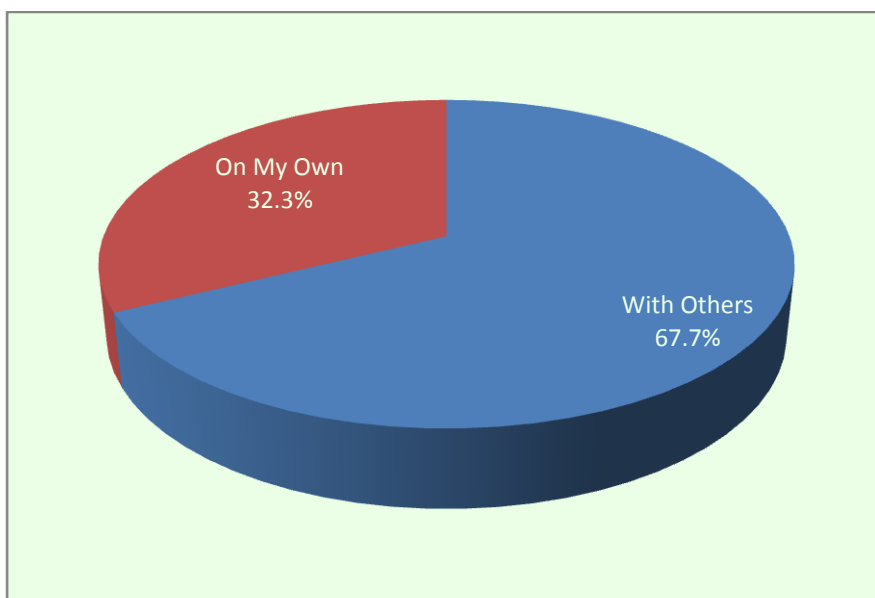
The questions and responses (cumulative across both groups) are given below. The number of subjects was 31.

1. *Do you like to do sport or watch sport*



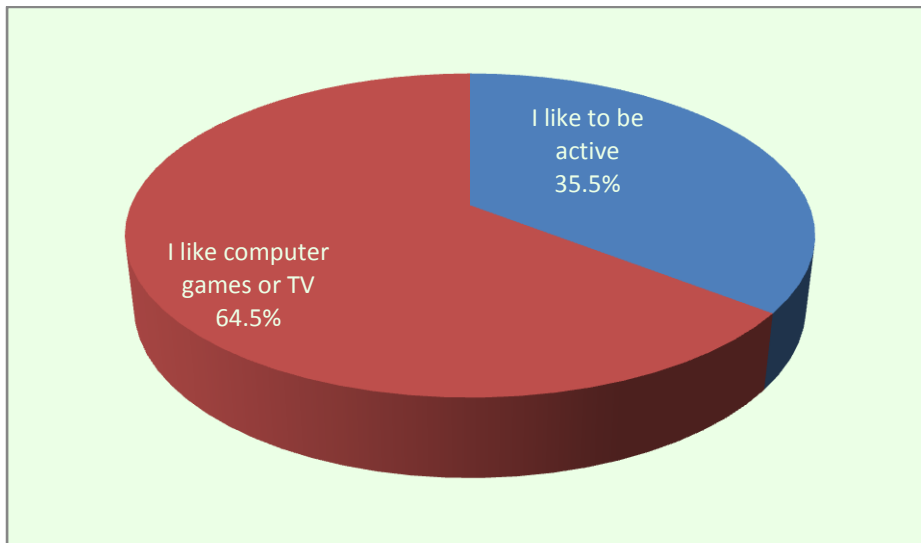
Do sport = 12; Watch sport = 18; 1 no answer

2. *Do you like doing sport on your own or with other people?*



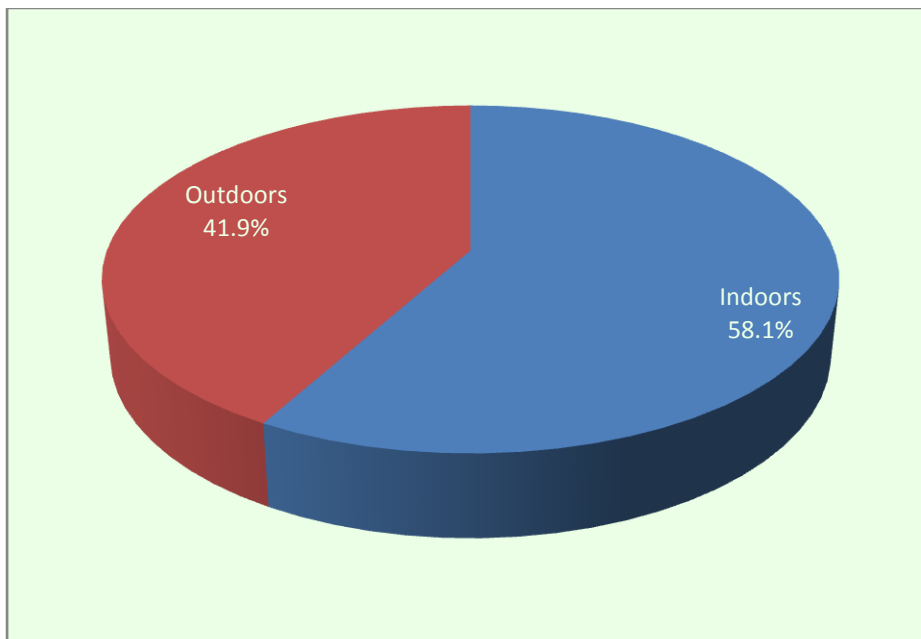
On my own = 10; With others = 21

3. *Do you like to be active or do you like computer games/TV?*



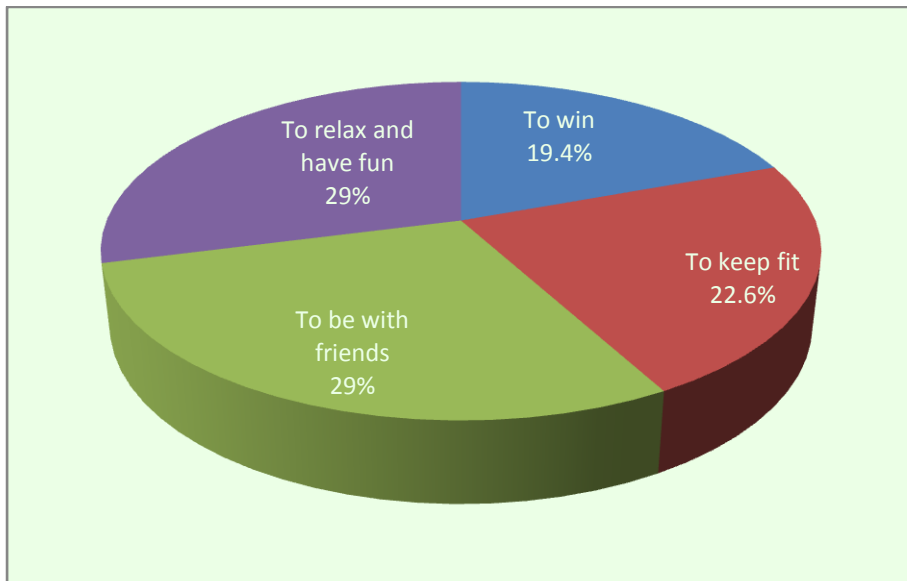
I like to be active = 11; I like computer games or TV = 20

4. *Do you like to do sport indoors or outside?*



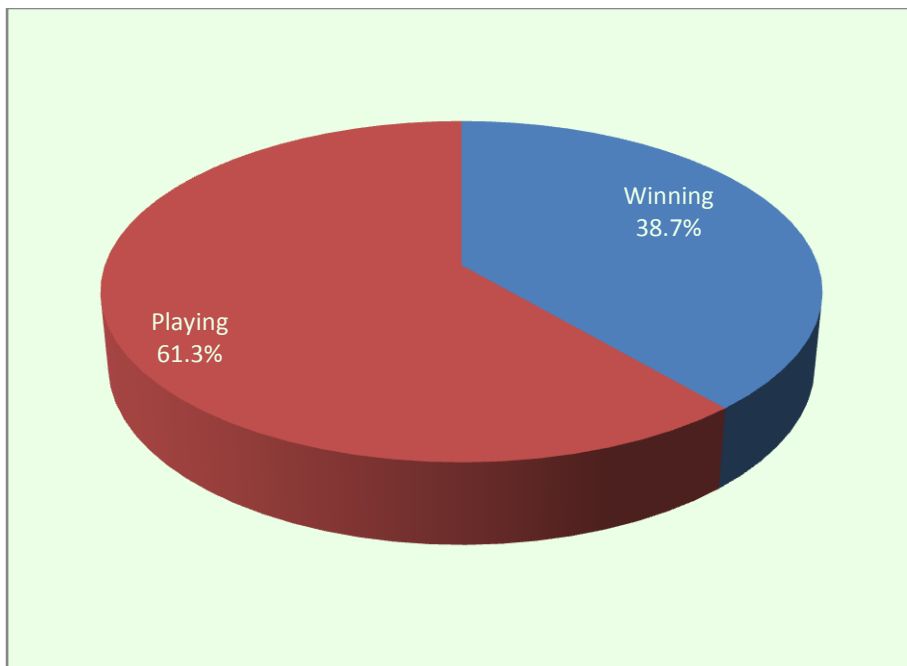
Indoors = 18; Outside = 13

5. *Why do you like to do sport?*



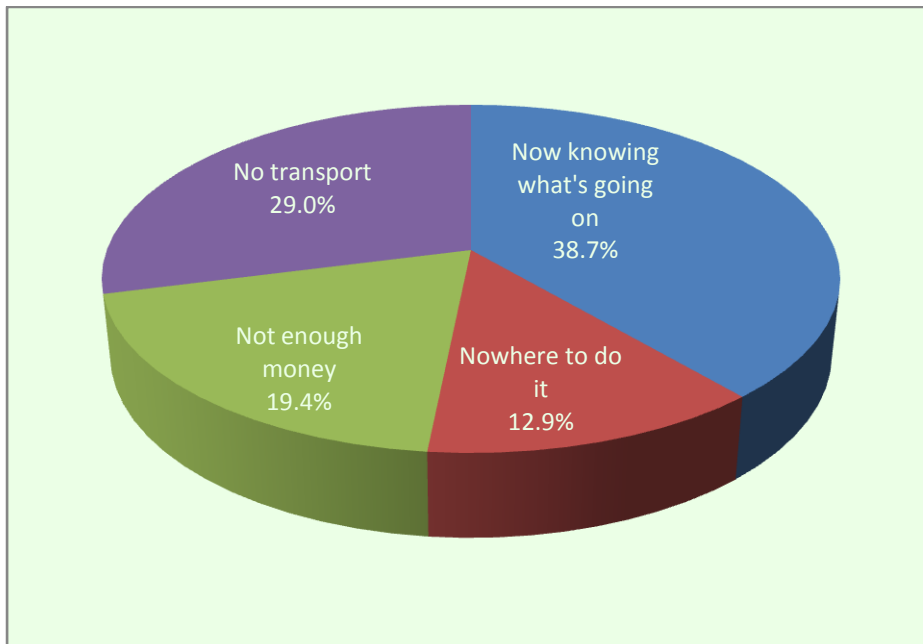
To win = 6: To keep fit = 7: To be with friends = 9: To relax and have fun = 9

6. *When you do sport, do you like winning or playing?*



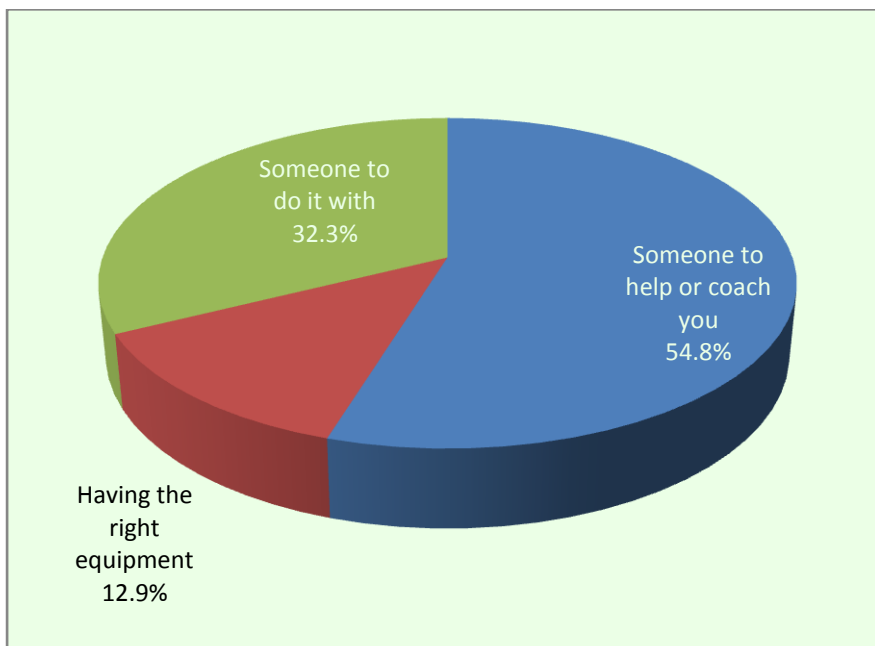
Winning = 12; Playing = 19

7. *What stops you from doing sport?*



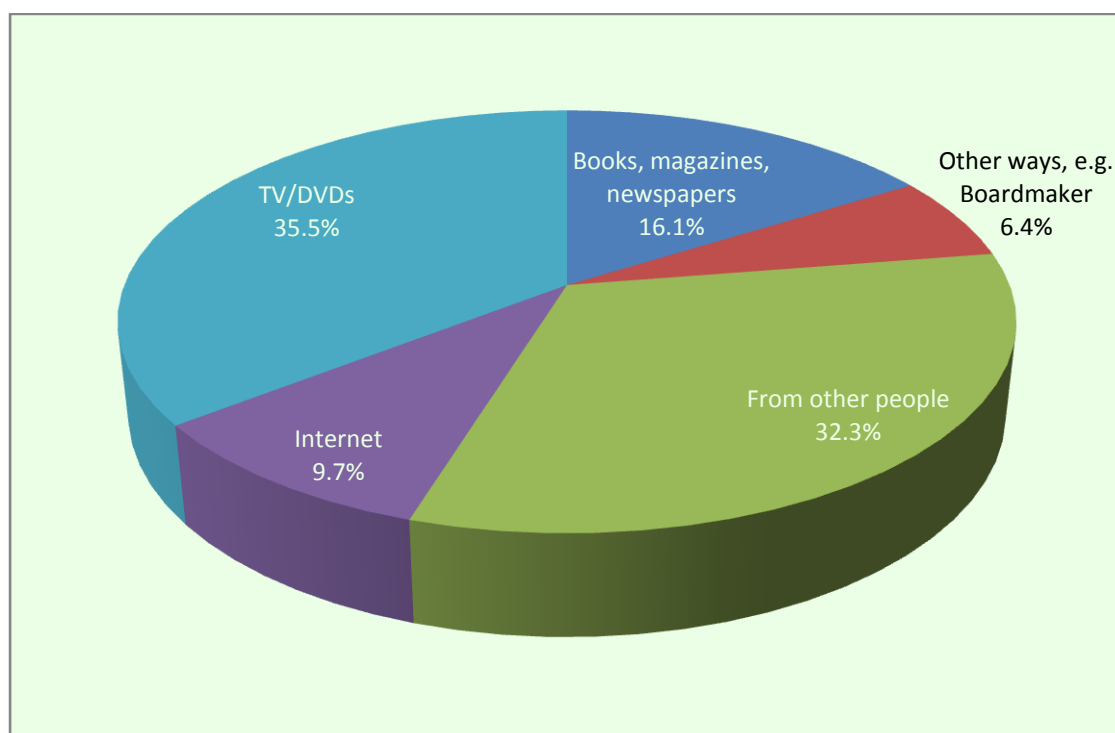
Not knowing what's going on = 12: Nowhere to do it = 4: Not enough money = 6:  
No transport = 9

8. *What helps you to do sport?*



Someone to help or coach you = 17: Having the right equipment = 4: Someone to do it with = 10

## 9. How do you find out about things?



Book, magazines, newspapers = 5: Other ways, eg Boardmaker = 2: From other people = 10: Internet = 3: TV/DVDs = 11

### ***Discussion***

This process succeeded in engaging the interest and the participations of individuals with a range of moderate to severe intellectual impairments.

The support staff who were present, and based on their knowledge of the participants as individuals, felt that the views they expressed were in line with their everyday preferences and interests.

However, it would be interesting to conduct this method of opinion gathering with a larger number of subjects in order to establish more dependable trends.

However, in the context of this report, it was interesting to note the following:

- individuals tended to prefer more passive indoor activities; however, was this caused by other issues like lack of choice or transport?
- they preferred participation to competition;
- they liked participating with friends; not having someone to be active with was seen as a barrier to participation;

- although transport was seen as an issue by a significant minority, the biggest barrier given was lack of information about what was available
- having someone to help or coach them was seen by a significant majority as the biggest support to participation.

Post-session, the subjects suggested some amendments to the conduct of the research. These included:

- being able to choose more than one option (perhaps ranking the options); this was a minority view but worth considering to avoid frustration;
- one female participant in Canberra felt that in one multiple choice (4 option) question she did not agree with ANY of the suggestions; she asked if there could be a 'none of these' option.

This last point is a valid one, but care would have to be taken, again in the light of experience of working with people who have intellectual impairments in this kind of decision-making process, that the neutral option was not too frequently offered to avoid a non-committal result.

More research of this nature is required to refine the process and give young people who have intellectual impairments more opportunities to express their opinions.

## Part Four: Summary & recommendations

Taking into account the focus group meetings, questionnaires and specific service user research, a number of clear messages emerged.

### *Networking and training*

- Across a wide range of settings, participants felt that a broader concept (or definition) of sport would enable them to better meet the needs of individuals with diverse abilities, interests and preferences. This is an important message for sport to consider in order that it can promote, and where necessary, modify, its services to a wider population.
- Two major factors were crucial in motivating service users:
  - social interaction, which was given as the main reason people participated; making friends, team spirit and 'mateship' were very important; and, the best way to generate enthusiasm for sport was to enable people to take part; experiencing an activity had the most impact. Sport must acknowledge and adapt to these perceptions.
- There is a clear demand for local information.
- Many people stressed the creation of a local human network as a first step before the development of educational resource material. The concept of a network had two elements:
  - to bring organisations together to share information and pool resources; and
  - to create a practitioner network where expertise and advice could be shared.
- There is subjective evidence of a wealth of expertise within the disability sector. An audit of this talent pool would help identify community 'champions'.
- Access to specific Sports CONNECT training, or suitable training provided by sport and other agencies, should be made available to disability sector practitioners.
- Sports opportunities are mainly delivered in an ad hoc manner. There is a clear need for increased coordination between supply and demand.
- The disability sector would benefit from support from intermediary agencies to link them to the sports sector. Where this is already occurring, these examples should be highlighted and shared.
- Access to training that provided practitioners, parents and carers with ideas about sport and recreational activities they could do with service users was a frequent request.

## Resources

- The specific purpose of this consultation was to gather people's ideas about educational resources that could assist them in providing more opportunities in sport and physical recreation for their service users.
- Most suggestions about resources fell into three main categories:
  - a platform whereby local information and local networking can take place; *this could be virtual in nature, although there was a high degree of support for regular, physical get-togethers providing that these had purpose;*
  - resources to assist practitioners working at point-of-contact with service users, giving them ideas and strategies they can use (for example, modifying existing sports; *this presents an opportunity to engage sport in support of the development of these practical tools;*
  - gathering and of sharing good practice case studies; *the many good examples aired in meetings and included in questionnaires can act as a start-point for the development of this aspect of the resource.*
- A strategy for the targeting and developing of the media, platforms and content of these resource options should be set in place.
- It was interesting to note that the most commonly used method of receiving information within organisations, and particularly between staff and service users, was word of mouth.
- However, most participants thought that any resource produced should be available in a range of formats, including web-based, printed (for example, activity card) and electronic media (for example, DVD/CD ROM); a favourite was to put all the various formats in one place, for example on a CD, from where everything could be accessed.
- There was a plea from organisations representing people with specific sensory or cognitive impairments to ensure that all resources were produced in accessible formats (including web-based material).
- Many suggestions were made about the content of the resource. The most frequently suggestions were:
  - sports-specific information;
  - information about how to adapt and modify activities for a range of abilities;
  - information about specific impairments;

- a 'home pack' for parents and carers to enable them to play constructively with their children.

### ***Research***

- There is a lack of up-to-date data about the physical recreation and sport habits and preferences of people with disabilities.
- The planned continuation of the Sports CONNECT research with disability services, including end users, will be a good start point and provide an overall view.
- Specific research, accounting for demographic, geographic and specific impairment factors would also be valuable.
- A literary search of all current relevant research from Australia, including relevant international comparisons, should also be considered.

### ***Reaction***

- Finally, many participants expressed their appreciation towards the Australian Sports Commission for providing an opportunity for them to articulate their views.
- It is essential that this positive reaction is rewarded by ensuring that these views are considered and an implementation strategy formulated.

## **Thanks**

In conclusion, I would like to thank most sincerely all the participants, Sports CONNECT personnel and colleagues from the Australian Sports Commission for giving time and effort in support of this project.

Ken Black

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October 2009

## Appendices

1. Consultation schedule
2. Sample questionnaire (disability services)

**Appendix 1: Sports CONNECT disability sector educational resource project - consultation**

**State Participating organisations & agencies Participants(no.)**

<b>ACT</b>	Advocacy for Inclusion; Catholic Care Feedback Group (service users modified keypad consultation); Centre for Community Health & Well-being, CiT; Disability ACT; Epilepsy ACT; Disability Services Commission – Local Area Coordination (Gungahlin); LEAD; Marymead; People with Disabilities ACT; Sharing Places; The Spastics Centre, ACT; Therapy ACT (Early Childhood & School Age teams); Women’s Centre for Health Matters; Women with Disabilities ACT; <i>Sport &amp; Recreation Development ACT</i>	34
<b>NSW</b>	Autism Spectrum (Aspect); Day of difference Foundation/parent; Department of Ageing, Disability & Home Care (DADHC); Department of Education & Training; Disability Services Australia (NSW); Disability Trust; House With No Steps (NSW); Sunnyfield Independence; Technical Aid to the Disabled NSW; Wheelchair Sports NSW; <i>Department of Sport &amp; Recreation</i>	15
<b>NT</b>	Acacia Hill School; Central Australia Supported Accommodation (CASA); Department of Health & Families (supported accommodation); Life Without Barriers; RecLink; Red Dust role models; Riding for the Disabled Association (Alice Springs); Special Souls (parent/carer group); parent/service user; <i>Sport Development-Sport &amp; Recreation</i>	13
<b>QLD</b>	Breakaway; Department of Communities; Endeavour Foundation (service users modified keypad consultation); Toowoomba parent/carers group; <i>Sporting Wheelies &amp; Disabled Association</i>	34
<b>SA</b>	Anglicare SA; Carers SA; Disability SA (Western); Novita Children’s Services; SA Health; <i>Office for Recreation &amp; Sport</i>	6

<b>TAS</b>	Active After-school Communities; Cosmos Recreation Services; Department of Economic Development; Disability Bureau; Parkside Foundation; Speak Out Association of Tasmania; Tasmanian Deaf Society Incorporated; <i>Sport &amp; Recreation Tasmania</i>	8
<b>VIC</b>	Access All Abilities; Disability Sport Victoria; Doncaster All Abilities Basketball; Eastern Recreation & Leisure Services (ERLS); ERLS Leadership Group; Extended Families Australia; Heatherwood School; Nadrasca; SCOPE; Vision Australia; service users; <i>Sport &amp; Recreation Victoria</i>	44
<b>WA</b>	ACTIV Foundation; Centre for Cerebral Palsy; City of Melville; Crosslinks; Disability Services Commission-Local Area Coordination (Beaconsfield); Good Samaritan Industries; Id-entity WA; Intework WA; My Place WA; Perth Home Care Services; Recreation Network; Rocky Bay Employment Services; Valued Independent People; Western Electric Sporting Association; Wheelchair Sports Association WA; parents/carers; service users; <i>Department of Sport &amp; Recreation</i>	42

**Total organisations & agencies: 73\***

**Total participants: 196**

\* This figure does *not* include the Sport & Recreation departments and Sporting Wheelies who facilitated the sessions but were not included in the feedback figures. An earlier estimate has been reduced as some individual parents/ carers and service users also identified themselves as being part of various organisations (some of which are represented). In order to differentiate their feedback as distinctly that of service users and parents/ carers the organisations are not mentioned. (The exceptions are the modified keypad sessions which were organised through the agencies supporting the service users).

## Disability service providers (practitioners & volunteers)

Sports CONNECT is a national framework that works to build pathways for people with disabilities to get involved in sport by creating and developing relationships between sports and disability organisations.

It is coordinated by the Disability Sport Unit at the Australian Sports Commission, and supported in each state and territory by a network of coordinators.

A wide range of educational resources - books & booklets, activity cards, CD-ROM, DVD, posters, equipment & web-based information – has been developed to support programs associated with Sports CONNECT. Most of these resources have been aimed at those providing opportunities in sport (eg national and state sporting organisations).

A new educational resource is planned for use by disability service providers, service users (children and adults with disabilities) and their families.

Your views will shape the development of this resource. This will ensure that what is produced will provide people with disabilities, and the families and organisations that support them, with better information about physical recreation and sport opportunities.

### What do YOU think?

Answer these questions by circling or marking answers that are closest to what *you* think. There is also space in most questions to write additional thoughts. All material received will be treated confidentially.

Name (optional): \_\_\_\_\_

*Also, it will help if you can provide the following.*

Role (formal & informal): \_\_\_\_\_

\_\_\_\_\_

State/territory: \_\_\_\_\_ Region (if applicable): \_\_\_\_\_

First one or two demographic questions

### What age are you?

16-19

20-29

30-39

40-49

50-59

60-69

70 and older (*circle as appropriate*)

**Gender**

Male or female (*circle as appropriate*)

-----

**What do you think the word 'sport' represents?**

(Circle or tick *all* that applies)

Competition

Fun & enjoyment

Play

Recreation

Exercise

Health

Personal achievement

Social interaction

Well-being

Physical fitness

Mental & emotional balance

Other \_\_\_\_\_

Please rank **three**, including your own suggestions, in order of importance to *you*.

1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

**Where do you get information about services and opportunities available to the service users for whom you are working?**

(Circle or tick *all* that applies)

Television

Radio (national)

Radio (local)

Newspapers/magazines (general)

Specialist magazines (eg those concerning disability)

Newsletters (eg from disability service organisation)

Internet

Word of mouth

Other (please explain)

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**Does the organisation for which you work, or are most associated with, have a 'corporate commitment' towards the importance of physical activity & sport for service users?**

**Yes**

**No**

Please explain: \_\_\_\_\_

---

**How important is physical recreation and sport in the life of the people/person on whose behalf you are working?**

(Circle or tick *one* answer)

Very important

Quite important

Low importance

Not a priority

Please explain your answer \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

-----

**What kind of recreational or sport activities do the people/ person on whose behalf you are working want/like to do?**

(Circle or tick *all* that applies)

Individual (eg swimming, walking)

Group (eg recreating with others)

Indoor

Outdoor

Games and play

Competition

Physical activity

Screen-based (eg computer)

Watching sport

Therapeutic physical activity

Being involved in some other way (eg supporting a team, helping at events)

Other \_\_\_\_\_

Please add any other thoughts about what they like doing

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**What benefits are you or the people / person for whom you work looking for through their participation in physical recreation and sport?**

(Circle or tick *all* that applies)

- Improved fitness
- Better health & well-being
- Getting out of the house
- Opportunity to do new sports activities
- Social interaction with others
- Feeling better about themselves
- Respite for you (the carer)

Other \_\_\_\_\_

\_\_\_\_\_

-----

**What are the things that most prevent the person you are caring for from participating in physical recreation and sport?**

(Circle or tick *all* that applies)

- Transport
- Lack of information
- Attitudes
- Time
- The way sport, sports clubs and leisure facilities are organised
- Cost
- Lack of specialist equipment
- Lack of trained staff
- The nature of the person's impairment

Please add your own thoughts \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Perhaps some kind of resource would be helpful to you in providing better opportunities in physical recreation and sport for the people / person for whom you are working.**

**What should it contain?**

(Circle or tick all that applies)

Information about national sport programs

Information about local recreation and sport programs

Ideas about physical activities, games or play you can do yourself

Competitive opportunities

Clubs or groups you can join

Sources of funding

Ideas about adapting or modifying activities or equipment for sport

Other (please add your own ideas)

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**What would be the best format for you to use?**

(Circle or tick *all* that applies)

Web-based (eg internet site)

Printed material (eg books, booklets)

CD ROM (with links to websites, information/ideas you can download, etc)

DVD (with ideas on recreation activities you can do)

Combination of one or more of these (eg a 'home pack')

Other \_\_\_\_\_

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**Please add any additional thoughts about the kind of information material that would be of most use to you in supporting the people / person for whom you work to access physical recreation and sport opportunities**

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**Perhaps you feel that a resource is not the answer. What would you prefer to see being developed?** (Eg, opportunities in professional development or training in inclusive activities and sport, or establishing a practitioners' network).

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**Finally, two last questions.**

**1. Do you have any examples of good practice, personal success stories, or ways in which barriers to participation have been overcome that you would be able to share? No need to go into detail here, just a quick explanation and I will get back to you.**

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**2. Do you have any photographic or video images of people with disabilities enjoying physical activity and sport that you would be able to share in any proposed resource?**

**Yes**

**No**

Please return this questionnaire to:

Ken Black

c/o Disability Sport Unit

Australian Sports Commission

PO Box 176

Belconnen

ACT 2616

Email as an attachment to: [ken.black@ausport.gov.au](mailto:ken.black@ausport.gov.au)

**Thank you for taking time to complete this questionnaire!**

