

Abstract

Academics and practitioners are often at a loss when it comes to understanding the ethical socio-political and cultural contexts that invades the world of adapted physical activity (APA). Ethical practice is *situated* in the local and the specific. In this paper we highlight that both academics and practitioners need to be ever mindful that the cultures surrounding the education, sport and rehabilitation components of APA are distinctive environments that vary across the globe. Because of the cultural diversity surround APA, we set out an embryonic framework for ethically *thinking* about practice in our field. Ultimately we hope that this framework will go some way to illuminate questions of situated ethical importance that are becoming increasing conundrums within APA.

Keywords: professional practice, disability, ethical framework, adapted physical activity

24 Framing Cross-cultural Ethical Practice in Adapt[ive] Physical Activity
25 Reflecting on our *thinking* in adapted physical activity (APA) would be incomplete
26 without consideration of the internal and external moral compasses that guide our professional
27 practice.¹ Diverse perspectives can be achieved, in part, by bringing an ethical lens to the
28 premises, actions and rituals of APA. As “practical ethics is not the type of inquiry to be
29 advanced by the lone thinker or narrow scholar,” (Higgins, 2010, p. 255) we invite others to
30 engage with our ethical thinking in APA.

31 This paper explores the contribution that human science² can make to our thinking about
32 the ethical professional practice and the role of universities in preparing professionals for
33 increasingly complex workplaces. Adapted physical activity is a field of passionate and
34 dedicated professionals and researchers and for this reason; we feel that open dialogue about
35 difficult issues is possible. Kagan (2009) reminds us that the function of humanistic scholarship
36 is “to provide divergent perspectives on the human condition...by inviting students to brood
37 more deeply on the causes of the ethical void in modern society” (p. 231). Whereas humanist
38 recognize uncertainty as a prevalent human emotion, those in the natural or social sciences may
39 be less comfortable with understanding feelings in themselves and others, inconsistencies in their
40 beliefs, or choosing behaviour among several possibilities (Kagan, 2009). Ethics is a language
41 of ambiguity and one may be more or less comfortable with the uncertainty inherent in questions
42 of right and wrong and goodness and badness.³ Its vocabulary may take time to be understood
43 and applied within the cultures of APA research in the natural science, social science, and the
44 humanities (Kagan, 2009).

45 Thinking ethically may not garner high prestige from colleagues or university leadership
46 who adhere to science traditions other than human science as it does not require large grant

47 support, or reap academic funding notoriety to engage deeply in reflective and reflexive ethical
48 thought. It relies on philosophy, the semantics of language and texts, and pragmatic
49 consequences (*knowing* rather than *doing*) that may not be quickly realized (Kagan, 2009).
50 Nonetheless, thinking ethically using the tools of humanistic science brings the extraordinary
51 particularity of people's lives and events to light (Silva & Howe, 2012). It creates a window for
52 viewing the culture premises, hierarchical power structures, decision making configurations, and
53 moral dilemmas embedded in the how, why, what, and where of APA that can have profound
54 impacts on dignity⁴ (Goodwin, Johnston, & Causgrove Dunn, 2014).

55 Ethical judgements are inherent in the complex environments in which professional
56 practice and field research occurs. Further, ethical judgements are mediated by (*situatedness*)
57 the social-political context in which they transpire (e.g., schools, disability sport, community
58 recreation centres, fitness facilities; Simons & Usher, 2000a). Ethical decisions are taken against
59 a backdrop of personal beliefs, organizational complexities, and potentially conflicting
60 expectations. We all have a role to play in contributing to a deeper understanding of the human
61 condition because as professionals we work with people who are often disadvantaged by the very
62 values we may hold (Goodwin, 2008; Goodwin et al., 2014; Peers, 2012a, 2012b).

63 As the title of this paper illuminates, we feel 'Adaptive Physical Activity' (over adapted physical
64 activity) is more in line with a reflexive ethical stance in which practitioners should continually
65 engage. The use of a different suffix is significant. The term adapted implies that adaptation has
66 occurred. On the other had adaptive implies that practitioners are 'able to do or doing'⁵ which we
67 believe is paramount for a reflexive ethical position to be developed. The gains we have made in
68 our field over the past decades have been due to the placement of the individual in the middle of
69 our understanding (e.g., individualization of our instruction). We have done this by modifying,

70 adapting, and accommodating to “meet unique needs and achieve desired outcomes” (Sherrill,
71 2004, p.7). The danger that is becoming apparent with the “top-down instructional (or
72 intervention) model based on adaptation theory” (Sherrill, 2004, p. 84) or *individual in the*
73 *middle approach* is that focus is upon changing the individual, with little impetus to change the
74 social and cultural influences that gave rise to the creation of the *individual* (e.g., assessment,
75 prescription, intervention, evaluation, classification, labeling, monitoring). By placing the
76 individual with the marginalizing forces (including professional beliefs, attitudes, and practices),
77 the focus shifts to changing that which excludes, devalues, and Others – rather than changing the
78 individual.

79 To quote Sherrill (2004), “...education and service delivery are *adapted*, but behaviour is
80 *adaptive*” (p. 9). Adaptive physical activity then, we propose is what we do to *ourselves*
81 [behaviours] that fosters flourishing in others (Seligman, 2012). As professionals and scholars,
82 *our* behaviour is adaptive. The work (project) of adaptive physical activity (professionals) is to
83 reflect on our ableism, disablism, perpetuation of the normate as the desired state of being,
84 ethical responsiveness, and desire for relationship building. We have been influenced by scholars
85 working in disability studies in our suggestion that it the professional practitioner who should be
86 *adaptive*, and not the person experiencing disability who should *adapt* (e.g., Titchkosky, 2003,
87 2011; Shakespeare, 2006; Withers, 2012). An interdisciplinary approach to adaptive physical
88 activity may deepen our understanding of our belief systems and ethical knowing.

89 In other words, our field of endeavour is not static, but alive and constantly changing. We urge
90 readers to engage in this debate and consider the benefits of explicitly articulating our field as a
91 dynamic one.

92 **Reflexivity in APA: Moral Discomfort**

93 Ethical judgements are part of professional life. We contend that there are times (pre-
94 service and in-service) when deep internal reflective self-evaluation that involves debating,
95 arguing, and bargaining with ourselves is a professional imperative (DePauw, 2009). Inherent in
96 applied ethics (ethics in action as well as thought) are the concepts of *external* and *internal*
97 integrity. “Being true to one’s self and one’s most cherished values (internal integrity) is
98 integral to a ‘moral career’” (Simons & Usher, 2000b, p. 3). External integrity involves
99 relationships with others as compromises in practice are made between people, social groups,
100 and organizations and debates, negotiations, and evaluations of policies and practices occur.
101 “Maintaining moral careers involves regular changes in how persons view themselves and their
102 criteria for judging themselves and others” (Glen, 2000, p. 13). The moral complexities of APA
103 settings are further complicated by external practical professional constraints such as time,
104 staffing, educational backgrounds, energy, or policy.

105 Researchers and teachers in higher education have a moral obligation and social
106 responsibility to incorporate questions of ethical practice and conduct into their teaching and
107 share their own moral discomfort when there is not a clear answer (DePauw, 2009; Goodwin &
108 Peers, 2012). The apparent disregard for reflexivity in ethical pedagogy in APA may be due, in
109 part, to adherence to a school of thought called virtue ethics. Virtue ethics is based on the
110 premise that good people will make good decisions and as such, it “...appeals to our intuitive
111 sense that one who cares for vulnerable people ought to demonstrate particular personal
112 characteristics” (Oberle & Raffin Bouchal, 2009, p. 11). Virtues can be learned, so if APA
113 attracts people who believe themselves to be virtuous and are reinforced for their *good work*
114 (practice) toward those considered to be *vulnerable* (e.g., persons experiencing disability), the
115 need for reflection on ethical professional practice may seem to become redundant. The very

116 assumption of virtuous professionals has profound ethical consequences.

117 Virtuous professionals can lead to the creation of two groups of people – the benevolent
118 *us*, and the vulnerable *them*. The creation of services for those who are vulnerable, marginalized,
119 and excluded from the activities and benefits of the community, by that very community, created
120 a *disability industry* that provides jobs and creates profits for those without impairments
121 (Albrecht, 1992). Arguably, few professionals would articulate APA as part of the disability
122 business and yet, some from within still refer to APA as a family thus presupposing a *nurturing*
123 relationship between professional and ‘client.’ Unpacking the ethical *minefield* that surrounds
124 APA may enable us to move the field forward toward mutually respectful and ethical
125 engagement (Bergum & Dossetor, 2005).

126 Two distinct yet inter-related approaches may move an ethical agenda in APA forward
127 (Goodwin & Standal, 2012). In a top-down approach, ethical theory as reflected in philosophy
128 and contemporary social theory is applied to issues of ethical concern. In the bottom-up
129 approach, APA practice is informed by empirical knowledge of the participants’ perspective on
130 aspects of psycho-social and cultural interactions prevalent in professional practice (e.g., use of
131 ‘help’ [Goodwin, 2001], ‘peer learning’ [Standal & Jespersen, 2008] or ‘disability simulations’
132 [Leo & Goodwin, 2013, 2014]). Analysis of evidence gathered from the bottom-up perspective,
133 may illuminate the ethic being applied to APA professional practice (Goodwin & Rossow-
134 Kimball, 2012). Yet to be addressed bottom-up (lived experience) questions of importance to
135 understanding the moral integrity of APA practice include: (a) Are we, and how do we, diminish
136 dignity or resistance to the remove of obstacles to active lifestyles (Malloy & Zakus, 1995)? (b)
137 How we assess and apply supports to enhance or delimit personal agency (Anderson, 2006;
138 Carnevale, 2004; Rossow-Kimball & Goodwin, 2009)? and (c) What is the position of lived

139 disability knowledge (embodied knowledge) in the research process (Austin, Bergum, &
140 Dossetor, 2003; Wadensten & Ahlstrom, 2009)?

141 Important top-down questions to illuminate the moral contexts of APA include: (a) What
142 role can ethical theory (e.g., care, principlism, relational ethics) play in our understanding of the
143 knowledge landscape of APA (Austin, 2007)? (b) Do we partake in thoughts and actions that
144 create and perpetuate, or dispel and reject the creation of the Other through expertism and
145 professional entitlement (e.g., engage in discourses of disability objectification, tragedy and
146 catastrophe) (Banja, 2005; Clapton, 2003; MacDonald, 2002), and (c) Do interventions modify
147 and accommodate the person or the social and political context (Sullivan, 2005)? Working
148 through practical predicaments and the pragmatic realities may offer practitioners distinctive
149 *good* in four areas: “outstanding works or performances to appreciate, a rich moral
150 phenomenology to experience, excellences of character to display and on which to rely, and a
151 biographical genre through which to shape a meaningful life” (Higgins, 2010, p. 250).

152 **The Experience of Disability Ethics**

153 Research approaches that embrace lived experiences provide insights into first person
154 perspectives (Howe, 2009), that although frowned upon by some as mere subjectivism, or at their
155 worst, symbolic violence of outsiders trying to empathize with that which they have played a role
156 in creating, can serve as a critical lens to view the experiences of ability and disability
157 (Anderson, 2006; Jespersen & McNamee, 2008). The *ethical work* required of APA
158 professionals involves understanding how ethical issues *arise*, how they are *structured*, and how
159 they are *managed* (Borry, Schotsmans, & Dierickx, 2005; Updale, 2008).

160 The ascent of humanist research and postmodern challenges to the validity of prediction
161 and group models in the social science contributed to an alternate way of understanding

162 disability influenced by an implicit ethical ideal. Humanists reminded society of its
163 contradictions, cultural premises, the place of emotion, and the presence of moral dilemmas.
164 Further, postmodernism brought a questioning of unquestioned premises, historically favoured
165 methodological tools, and core concepts (theories) of explanation (Kagan, 2009). Higgins
166 (2010) states that understanding professional practice requires a back and forth shuttle between
167 views from the practice and depictions of the practice from the outside.

168 A good starting point, then, is to collect internal descriptions of putative practices....
169 thick, phenomenological evocations of...settings, goals, episodes, communities,
170 traditions....What such first-person reports offer is an introduction to vocabulary and
171 sensibility of the practice....Without joining the practice, and on the basis of such reports
172 alone, we cannot truly know what it is like to participant in the practice. (Higgins, 2010,
173 p. 255)

174 Case studies of situated texts can be used to bring new interpretations to participants' life
175 worlds (Prosser, 2000). This interpretation of these narratives is not meant to find *the* meaning
176 of a text rather it is about creating another text by remaining open to multiple meanings in a
177 process that does not have boundaries, since interpretation is socio-politically and culturally
178 embedded (Usher, 2000).

179 Ethical understanding of (counter)stories⁶ or stories constructed from the lived
180 experiences of persons with impairments may offer alternative understandings and an
181 appropriate ethical platform from which to engage in crucial discussions (Clapton, 2003).
182 Hearing (counter)stories is arguably fundamental to our understanding of professional practice in
183 | APA [so as to bring tact to our instruction \(van Manen, 1991\)](#). It is a place for the teller and the
184 listener to come together to begin to undermine the dominant story, undoing it and retelling it in

185 a way that invites new interpretations and conclusions. We contend that more (counter)stories
186 need to be heard in APA. Ethical understanding constructed from the lived experiences of
187 persons with impairments will offer alternative understandings to practice tradition and an ethical
188 platform from which to engage in crucial discussions.

189 The significance of naming reality (interpretation) is a cultural activity and
190 deconstruction of the reality seeks to unleash the concealed metaphors within, or theorise and
191 disrupt the ideology that reproduces itself through texts of stories. “Text is any organized
192 network of meaning, a field of contending differential forces whose characteristics is that it is
193 always interpretable, capable of being read and re-read...” (Usher, 2000, p. 168). Post
194 structuralism (deconstructionism) may provide an exemplification of the ethical moment, one
195 that does not involve pre-existing norms and guiding rules, “Deconstruction is an ethics,” not in
196 the sense that ethics is the application of ethical codes, but rather there are ethical moments and
197 the deconstruction of those moments *is* an expression of ethics (p. 162). Deconstruction
198 becomes an ethics through the assumed responsibility marked by an obligation to listen as a way
199 of showing respect for the Other and being with the Other, not trying to assimilate or incorporate
200 the Other through programming, silencing, or neglecting the Other (Popke, 2003).

201 **Disquieting the Expert**

202 Ken Davies, (1993) in his article: “The Crafting of Good Clients,” states that
203 professionals “...learn about disability by doing courses and reading books. Some of them are
204 given diplomas for doing this....These paper qualifications help them get jobs and make careers
205 out of our needs” (p. 197). Davies, among others, has questioned the ethical motivations of
206 people who work in the disability field (Fitzgerald, 2009, Macbeth, 2010, Shakespeare, 2006).
207 Professionals through their expertise have the power to control and exclude. Some argue that the

208 process of professionalization creates individuals who, on the basis of knowledge they assume to
209 be objective, believe they are acting in the best interests of others. This suggests that the key
210 activities of “ethical work” are the deconstruction, criticism, and professional beliefs including
211 how we come to know, speak, interact with others (Trussell, 2010). Activities in APA develop
212 into *practice* and are aligned with four social criteria: (a) they are social in origin (vocabulary
213 and shared understanding), (b) social in execution, (c) based in historical traditions (what it is
214 and what can be achieved), and (d) they are passed along to others (initiation and teaching)
215 (Benner, 2004). In Figure 1, we illustrate the interaction of the four social criteria as a way of
216 looking at professional ethics, not as something that is applied *to* professional practices: it is
217 something that *is* fundamentally practical and there may be not right course of action, but rather
218 action that is done admirably with tact and integrity (Higgins, 2010, p. 237). Professional
219 practice in APA is bound by social and cultural influences and the values it holds, for example,
220 the ideology of inclusion is good for society. In spite of having multiple meanings in the field
221 inclusion has become an ethic for the knowledge landscape of APA. Further, professional
222 activities that support inclusion (e.g., individualized support) are acted out in particularistic and
223 contextually specific settings that bring about ends. As practitioners apply their knowledge
224 landscape through action, their practices become normative as they are evaluated and synthesised
225 by individuals (moral traditions). Tension arises however, when the knowledge landscape
226 (moral traditions), normative professional practice (professional life narratives), and outcomes of
227 practice (disability lived experiences) do not lead to flourishing or well-being of the practitioner
228 or the participant (Higgins, 2010). An (upward) reliance on the lived experiences of people with
229 impairments gives rise for reflection on individual, communal, and societal norms thereby
230 providing fabric for questioning what is worth striving for, the potential for innovation in our

231 *doing*, and new ideas to refocus and invigorate our thinking.

232 By working alongside fellow practitioners in professional practice, we come to learn
233 about the profession and the dynamic interplay between *professional* and *practical* knowledge,
234 in essence the good and the bad of the practice (Clandinin & Connelly, 1996). *Professional*
235 *knowledge* is information of what is right given theory driven or ideological views of practice
236 that is reinforced by policy makers and administrators. The professional knowledge landscape
237 becomes the *sacred story* that tells us who to ‘be’ and what to ‘do.’ Sacred stories can be
238 problematic since they often transform into ‘truths’ that are ritualised in APA circles – that are
239 rigid, unchallenged and unchanged. As professionals, we need to work tirelessly to avoid this
240 ritualization of sacred stories. The *professional knowledge landscape* is comprised of a dynamic
241 interaction of professional knowledge that includes codes of conduct learned through theory and
242 formal educational contexts with normative rules, some of which are the product of ritualised
243 sacred stories and ethics of duty that guide our action. *Practical knowledge* is comprised of
244 stories created by practitioners where they are generally free from scrutiny and live stories of
245 practice – a place of *secret story* where professional life narratives emerge. *Practical knowledge*
246 of what is good or bad is learned through practice in a space that is private and integrates
247 personal virtues with relational knowing.

248 If a practitioner is aware of, or anticipates dissension between the sacred story and the
249 secret story, one can live and tell a *cover story*. Moral discomfort may arise when the domains
250 of ethical life, that is the sacred stories we are told, secret stories we live, and cover story we tell
251 are different. Unpacking stories of sacredness, stories of secrecy, and stories used for ‘cover’ is
252 an essential part of the ethical work required in APA.

253 Well-established and intuitively sound “best practice” such as use of peer tutors (Standal &
254 Jespersen, 2008; Goodwin, 2009), adaptations of rules and equipment (Doubt & McCall, 2003),
255 and providing choice (Morphy & Goodwin, 2012), reduce pressures that exclude disabled
256 students (Goodwin, 2009). For example, peer tutoring in inclusive physical education is an
257 effective strategy for providing supplementary assistance socially, physically, and instructionally
258 (Klavina & Block, 2008). Peer tutoring as it is depicted in much of the APA literature assumes
259 the tutor will be a student without impairment who ‘helps’ the student with impairment.
260 Embedded within this practice are questions of dependency, marginalizing, and Othering of the
261 student with impairment that are carried by the student well beyond the lesson? Further, what
262 power, privilege, and authority for the student without impairment do these scenarios create in
263 her or his eyes and that of fellow classmates? Would the student with impairment ever be
264 selected to be the tutor? We are not advocating the elimination of peer tutoring. However,
265 unreflected practices may create what has been termed “special education damage” in the forms
266 of dependency, perceptions of incompetence, and stigmatization (Allen, 2005, p. 286). Research
267 into the experiences of those who receive (endure) being the tutee will bring a balanced
268 perspective to the benefits and dangers of the use of peer tutors (Standal & Jespersen, 2008).

269 The ethical work of inclusion involves the critical reflection upon values such as autonomy,
270 integrity, influence, and participation. In full fairness to teachers, we know they also fall victim
271 to ethically questionable practices such as inadequate preparation (Hodge, Ammah, Casebolt,
272 LaMaster, & Sullivan, 2004), inadequate classroom support (Lienert, Sherrill, & Myers, 2001),
273 and administrative abandonment (Goodwin, 2009). One must ask whether perceptions of “best
274 practice” have replaced ethical discussions, and whose responsibility it is to re-open this dialogue
275 (Austin, 2007). We are aware of the insecurity that turning back on traditions and long standing

276 practices creates and the desire to replace the old with something that is new or better. Rather
277 than shying away from the insecurity induced by internal self-evaluation however, Standal
278 (2008) celebrates the openness to new *understanding* that it creates. “Understanding is a
279 practical-moral activity that is concerned more with engaging with that which is to be
280 understood, than grasping the content of it” (Standal, 2008, p. 211).

281 **Foundations for an Ethical Community in APA**

282 A focus on ethics can be framed by empiricism, focusing on empirical description,
283 reconstruction, and analysis of lived experiences reflected in the cultural context of the disability
284 community and the community of professional practice in APA. It can also be guided by
285 normative principles that are themselves ethical in formulation (Skrtic, 1995). Although
286 universal principles (e.g., nonmaleficence, beneficence, autonomy, and justice) (Beauchamp,
287 1994) can assist in the process of reflecting upon internal integrity, they can be self-limiting if
288 they replace thinking and problematizing the *situatedness* of the interactive context (Glen, 2000).
289 The two ethical approaches are not to be regarded as successive stages in professional
290 advancement, but as co-existing in ethical practice – offering a way of envisioning and
291 conceptualizing the practice of adapted physical activity (Gadow, 1999). Knowledge of ethical
292 theory and principles facilitates our conceptualization of ethics. Such knowledge alone however,
293 is not sufficient for ethical professional practice. We need both - objective abstract knowledge
294 (e.g., principle of autonomy is liberating) and subjective knowledge (e.g., lived autonomy can be
295 isolating; Bergum & Dossetor, 2005). “To understand the direction of moral decisions in any
296 person’s life; we need as much knowledge as possible of the forces that shape that person’s life
297 story” (Pellegrino, 2000, p. 644).

298 **Conclusion**

299 Practice within APA contexts can result in harm, but it also offers practitioners distinctive
300 *goods* of a least four types: outstanding works or performances to appreciate, a rich moral
301 phenomenology to experience, excellences of character to display and on which to rely, and the
302 biographical genre through which to shape a meaningful life (Higgins, 2010). Our aim was not to
303 lecture about all that is bad in adapted physical activity practice, but rather to bring awareness of
304 the need to trouble taken-for-granted professional practices – of both what is *right* and *wrong*
305 and *good* and *bad*. The *subject* of our professional practice, disability, is a value-laden,
306 contested and cultural construct.

307 The cultural politics that surrounds APA facilitates the telling and retelling of sacred
308 stories that can be transformed into rituals and their associated behaviour that profit the disability
309 business and discourage new recruits to the ‘family’ from being reflexive on our practice. This
310 creates a field that has the potential to stagnate and reproduce itself – because this is considerably
311 easier than the alternative. Secret stories that we tell ourselves need to be removed from our
312 daily practice as do cover stories that hide the institutional practices from the public gaze. What
313 we need to see is a removal of the barrier between sacred and (counter)stories, thus freeing us
314 from the potential of sacred stories becoming ritualized practices. In this way, the field of APA
315 becomes more active – with people with impairments at its heart. Not *adapted* to the client base
316 in a static and formulaic matter but *adaptive* to the every changing counter(stories) that need to
317 be our *raison d’être* – the place that we begin using both our practical and professional
318 knowledge to facilitate the enhancement of the lives of people with impairments.

319 This is a starting point, a change in approach, but one we believe is simple enough to
320 make in isolation. We certainly feel we could encourage our students to follow us with a more
321 adaptive approach to physical activity – our own biographies tell us this is the case. Across the

322 APA field – we are likely to meet structural and agential resistance. How we transform our field
323 ethically is not as simple as leading by example. We depart with several ethical questions:

- 324 • How can we resolve the criticism that knowledge in APA is primarily generated from a
325 non-disability power base, which perpetuates a colonialist ethic?
- 326 • In what ways does APA name, classify, divide, mark, delineate, limit and create
327 boundaries? What relational power hierarchies are at play and what are the impacts?
- 328 • Who are the meaning and sense-makers in storytelling regarding disability experiences
329 and how might that influence interpretation and perpetuation of the Other?
- 330 • How has the ethic of political correctness (e.g., person first language) misrepresented the
331 socio-political reality of disability? ([Peers, Spencer-Cavaliere, & Eales, 2014](#))
- 332 • What is our responsibility toward others and what politics are brought to bear on that
333 responsibility?

334

References

- 335
336 Albrecht, G. L. (1992). *The disability business: Rehabilitation in America*. Newbury Park,
337 CA: Sage.
- 338 Allen, J. (2005). Inclusion as an ethical project. In S. Termain (Ed.), *Foucault and the*
339 *government of disability* (pp. 281-297). Ann Arbor, MI: University of Michigan Press.
- 340 Anderson, (2006). Teaching (with) disability: Pedagogies of lived experience. *The Review of*
341 *Education, Pedagogy, and Cultural Studies*, 28, 367-379.
- 342 Austin, W. (2007). The ethics of everyday practice. *Advances In Nursing Science*, 30, 80-88.
- 343 Austin, W., Bergum, V., & Dossetor, J. (2003). Relational ethics. In V. Tschudin (Ed.),
344 *Approaches to ethics* (pp. 45-52). Woburn, MA: Butterworth-Heinemann.
- 345 Banja, J. D. (2005). Reflections on the ethical dimensions of outcomes research. *Rehabilitation*
346 *Psychology*, 50, 79-86.
- 347 Beauchamp, T. L. (1994). The 'four principles' approach. In R. Gillon (Ed.), *Principles of health*
348 *care ethics* (pp. 3-12). Hoboken, NJ: John Wiley & Sons.
- 349 Benner, P. (1997). A dialogue between virtue ethics and care ethics. In C. D. Thomasma
350 (Ed.). *The influence of Edmund D. Pellegrino's philosophy of medicine* (pp. 47-61).
351 Boston, MA: Kluwer Academic Publishers
- 352 Benner, P. (2004). Relational ethics of comfort, touch, and solace – Endangered arts? *E-Journal*
353 *of American Journal of Critical Care*, 13, 346-349. Retrieved from
354 <http://ajcc.aacnjournals.org/content/13/4/346.short>
- 355 Bergum, V., & Dossetor, J. (2005). *Relational ethics: The full meaning of respect*. Hagerstown,
356 MD: University Publishing Group.
- 357 Borry, P., Schotsmans, P., & Dierickx, K. (2005). The birth of the empirical turn in bioethics.

- 358 *Bioethics*, 19, 49-71.
- 359 Carnevale, F. (2004). Listening authentically to youthful voices: A conception of the moral
360 agency of children. In J. I. Storch, P. A. Rodney, & R. C. Starzomski (Eds.), *Toward a*
361 *moral horizon* (pp. 396-413). Toronto, ON: Prentice Hall.
- 362 Clandinin, D. J., & Connelly, F. M. (1995). *Teachers' professional knowledge landscapes*. New
363 York, NY: Teachers College Press.
- 364 Clandinin, D. J., & Connelly, F. M. (1996). Teachers' professional knowledge landscapes:
365 Teacher stories – stories of teachers – school stories – stories of schools. *Educational*
366 *Researcher*, 25, 24-30.
- 367 Clapton, J. (2003). Tragedy and catastrophe: Contentious discourses of ethics and disability.
368 *Journal of Intellectual Disability Research*, 47, 540-547.
- 369 Davies, K. (1993). The crafting of good clients. In J. Swain, V. Finkelstein, S. French, & M.
370 Oliver (Eds.), *Disabling barriers – Enabling environments* (pp. 197-200). London: Sage.
- 371 DePauw, K (2009). Ethics, professional expectations, and graduate education: Advancing
372 research in kinesiology. *Quest*, 61, 52-58.
- 373 Doubt, L., & McCall, M. (2003). A secondary guy: Physically disabled teenagers in secondary
374 schools. *The Canadian Journal of Occupational Therapy*, 70, 139-151.
- 375 Fenton, E., & Mitchell, T. (2002). Growing old with dignity: A concept analysis. *Nursing*
376 *Practice*, 14, 19-21.
- 377 Fitzgerald, H. (2009). Are you a 'parasite researcher'? Researching with young people. In H.
378 Fitzgerald (Ed.), *Disability and youth sport* (pp. 145-159). London: Routledge.
- 379 Gadow, S. (1999). Relational narrative: The postmodern turn in nursing ethics. *Scholarly Inquiry*
380 *for Nursing Practice: An International Journal*, 13, 57-70.

- 381 Glen, S. (2000). The dark side of purity or the virtues of double-mindedness? In H. Simons & R.
382 Usher, *Situated ethics in educational research* (pp. 12-21). New York, NY: Routledge.
- 383 Goodwin, D. L. (2001). The meaning of help in PE: Perceptions of students with physical
384 disabilities. *Adapted Physical Activity Quarterly*, 18, 289-303.
- 385 Goodwin, D. L. (2008). Self-regulated dependency: Ethical reflections on interdependence and
386 help in adapted physical activity. *Sport, Ethics and Philosophy*, 2, 172-184.
- 387 Goodwin, D. L. (2009). The voices of students with disabilities: Are they informing inclusive
388 physical education? In H. Fitzgerald (Ed.), *Disability and youth sport* (pp. 53-75).
389 London: Routledge.
- 390 Goodwin, D. L., Johnston, K., & Causgrove Dunn, J. (2014). Thinking ethically about inclusive
391 recreation: A narrative of lost dignity. *Sport, Ethics and Philosophy*, 8, 16-31.
- 392 Goodwin, D. L., & Peers, D. (2012). Disability, sport, and inclusion. In S. Dagkas (Ed.),
393 *Inclusion and exclusion through youth sport* (pp. 186-202). Oxon, UK: Routledge.
- 394 Goodwin, D. L., & Rossow-Kimball, B. (2012). Thinking ethically about professional practice in
395 adapted physical activity. *Adapted Physical Activity Quarterly*, 29, 295-309.
- 396 Goodwin, D. L., & Standal, O. (2012). Informing ethical practice in adapted physical activity
397 through research. In C. Boursier (Ed.), *Adapted physical activity: Translating theory and*
398 *evidence into practice* (pp. 25-36). Paris, France: The New Review of Adaptation and
399 Schooling (NRAS).
- 400 Higgins, C. (2010). Worlds of practice: MacIntyre's challenge to applied ethics. *Journal of*
401 *Philosophy of Education*, 44, 237-273.
- 402 Hodge, S. R., Ammah, J. O., Casebolt, K., LaMaster, K., & Sullivan, M. (2004). High school
403 general physical education teachers' behaviors and beliefs associated with inclusion.

- 404 *Sport, Education, and Society*, 9, 395-419.
- 405 Howe, P. D. (2009). Reflexive ethnography, impairment and the pub. *Leisure Studies*, 28, 489-
406 496.
- 407 International Federation of Adapted Physical Activity (IFAPA). (2004). *By laws*. Retrieved from
408 <http://www.ifapa.biz/imgs/uploads/PDF/IFAPA%20By-Laws.pdf>
- 409 Jespersen, E., & McNamee, M. (2008). Philosophy, adapted physical education and dis/ability.
410 *Sport, Ethics and Philosophy*, 2, 87-96.
- 411 Kagan, J (2009). *The three cultures: Natural sciences, social sciences, and the humanities in the*
412 *21st century*. Cambridge, NY: Cambridge University Press.
- 413 [Klavina, A., & Block, M. E. \(2008\). The effect of peer tutoring on interaction behaviours in](#)
414 [inclusive physical education. *Adapted Physical Activity Quarterly*, 25, 132-158.](#)
- 415 Leo, J., & Goodwin, D. L. (2013). Pedagogical reflections on the use of disability simulations in
416 higher education. *Journal of Teaching in Physical Education*, 32, 460-472.
- 417 Leo, J., & Goodwin, D. (2014). Negotiated meanings of disability simulations in an adapted
418 physical activity course: Learning from student reflections. *Adapted Physical Activity*
419 *Quarterly*, 31, 144-161.
- 420 Lienert, C., Sherrill, C., & Myers, B. (2001). Physical educators' concerns about integrating
421 children with disabilities: A cross-cultural comparison. *Adapted Physical Activity*
422 *Quarterly*, 18, 1-17.
- 423 Macbeth, J. (2010). Reflecting on disability research in sport and leisure settings. *Leisure*
424 *Studies*, 29, 477-485.
- 425 MacDonald, C. (2002). Relational professional autonomy. *Cambridge Quarterly of Healthcare*
426 *Ethics*, 11, 282-289.

- 427 Malloy, D. L., & Zakus, D. (1995). Ethical decision making in sport administration. *Journal of*
428 *Sport Management*, 9, 36-85.
- 429 Morphy, L. Y., & Goodwin, D. (2012). The experience of choice in physical activity contexts for
430 adults with mobility impairments. *Adapted Physical Activity Quarterly*, 29, 132-150.
- 431 Nelson, H. L. (1995). Resistance and insubordination. *Hypatia*, 10, 23-40.
- 432 Oberle, K., & Raffin Bouchal, S. (2009). *Ethics in Canadian nursing practice: Navigating the*
433 *journey*. Toronto, ON: Prentice Hall.
- 434 Oliver, M. (1990). *The politics of disablement*. London: Macmillan Education.
- 435 Peers, D. (2012a). Interrogating disability: The (de)compositin of an recovering paralympian.
436 *Qualitative Research In Sport, Exercise and Heath*, 4, 175-189.
- 437 Peers, D. (2012b). Patients, athletes, freaks: Paralympism and the reproduction of disability.
438 *Journal of Sport and Social Issues*, 36, 295-316.
- 439 Peers, D., Spencer-Cavaliere, N., & Eales, L. (2014). Say what you mean: Rethinking disability
440 language in *Adapted Physical Activity Quarterly*. *Adapted Physical Activity*
441 *Quarterly*, 31, 265-282.
- 442 Pellegrino, E. D. (2000). Bioethics at century's turn: Can normative ethics be retrieved? *Journal*
443 *of Medicine and Philosophy*, 25, 655-675. doi: 0360-5310/2506-0655
- 444 Popke, E. J. (2003). Poststructuralist ethics: Subjectivity, responsibility and the space of
445 community. *Progress in Human Geography*, 27, 298-316.
- 446 Prosser, J. (2000). The moral maze of image ethics. In H. Simons & R. Usher, *Situated ethics in*
447 *educational research* (pp. 116-132). New York, NY: Routledge.
- 448 Rossow Kimball, B., & Goodwin, D. L. (2009). Self-determination and leisure experiences of
449 _____ women living in two group homes. *Adapted Physical Activity Quarterly*, 26, 1-20.

- 450 [Seligman, M. \(2012\). *Flourish: A visionary new understanding of happiness and well-being.*](#)
451 [New York, NY: Free Press.](#)
- 452 Shakespeare, T. (2006). *Disability rights and wrongs*. London: Routledge.
- 453 [Sherrill, C. \(2004\). *Adapted physical activity, recreation, and sport: Crossdisciplinary and*](#)
454 [*lifespan.* New York, NY: McGraw-Hill.](#)
- 455 Silva, C. F., & Howe, P. D. (2012). Difference, adapted physical activity and human
456 development: Potential contribution of capabilities approach. *Adapted Physical Activity*
457 *Quarterly*, 29, 25-43.
- 458 Simons, H., & Usher, R. (2000a). *Situated ethics in educational research*. New York, NY:
459 Routledge.
- 460 Simons, H., & Usher, R. (2000b). Introduction. In H. Simons & R. Usher (Eds.), *Situated ethics*
461 *in educational research* (pp. 1-11). New York, NY: Routledge.
- 462 Skrtic, T. (1995). *Disability & democracy: Reconstructing [special] education for*
463 *postmodernity*. New York, NY: Teachers College Press.
- 464 [Standal, Ø. F. \(2008\). *Celebrating the insecure practitioner. A critique of evidenced-based*](#)
465 [*practice in adapted physical activity. Sport, Ethics and Philosophy*, 2, 200-215.](#)
- 466 Standal, Ø. F., & Jespersen, E. (2008). Peers as resources for learning: a situated learning
467 approach to adapted physical activity in rehabilitation. *Adapted Physical Activity*
468 *Quarterly*, 25, 206-227.
- 469 Sullivan, M. (2005). Subjected bodies: Paraplegia, rehabilitation, and the politics of movement.
470 In S. Termain (Ed.), *Foucault and the government of disability* (pp. 27-44). Ann Arbor,
471 MI: University of Michigan Press.
- 472 [Titchkosky, T. \(2003\). *Disability, self, and society.* Toronto, ON: University of Toronto Press.](#)

- 473 | [Titchkosky, T. \(2011\). *The question of access: Disability, space, meaning*. Toronto, ON:](#)
474 | [University of Toronto Press.](#)
- 475 | Trussell, D. E. (2010). Gazing from the inside out during ethically heightened moments. *Leisure*
476 | *Studies*, 92, 377-395.
- 477 | Udale, E. (2008). The ethics of the everyday: Problems professors are too posh to ponder.
478 | *Clinical Ethics*, 3, 34-36.
- 479 | Usher, R. (2000). Deconstructive happening, ethical moment. In H. Simons & R. Usher (Eds.),
480 | *Situated ethics in educational research* (pp. 162-185). New York, NY: Routledge.
- 481 | van Manen, M. (1997). *Research lived experience: Human science for an action sensitive*
482 | *pedagogy*. London, ON: The Althouse Press.
- 483 | Wadensten, B., & Ahlstrom, G. (2009). Ethical values in personal assistance: Narratives of
484 | people with disabilities. *Nursing Ethics*, 16, 760-774.
- 485 | [Withers, A. J. \(2012\). *Disability politics and theory*. Halifax, NS: Fernwood Publishing.](#)

486 **Notes**

¹ Professional practice is defined as “a coherent, socially organized activity with notions of good practice within the practitioners’ understanding and skillful comportment. A practice has shared understandings about goals, skills and equipment and is continually being worked out in new contexts” (Benner, 1997, p. 50).

² “Human science aims at explicating the meaning of human phenomena (such as in literary or historical studies of texts) and at *understanding* the lived structures of meanings (such as in phenomenological studies of the lifeworld)” (van Manen, 1997, p. 4).

³ For this paper we have adopted the following understanding of ethics: Ethics relates to the values underpinning human conduct; the rightness and wrongness of actions and the goodness and badness of the motives and ends of actions. “A good is something we judge to be worthwhile to have, achieve, attend to, or participate in” (Higgins, 2010, p. 239).

⁴ The dignified self is “a state of physical, emotional and spiritual comfort, with each individual valued for his or her uniqueness and his or her individuality is celebrated. Dignity is promoted when individuals are enabled to do the best within their capabilities, exercise control, make choices and feel involved in the decision-making that underpins their care” (Fenton & Mitchell, 2002, p. 21).

⁵ [For full detail on the suffix *ive* see *The Oxford Shorter English Dictionary on historical principles*, Oxford: Clarendon Press \(1990 edition\). Vol. 1, p. 1122](#)

⁶ Nelson (1995) describes a (counter)story as a story in which the moral self-definition of the teller can be redefined by “undermining a dominant story, undoing it and retelling it in such a way as to invite new interpretations and conclusions” (p. 23).