

EDUCATIONAL ALLIANCES TO PROMOTE PARTICIPATION IN SPORT IN CHILDREN AND ADOLESCENTS WITH DISABILITIES

ALLEANZE EDUCATIVE PER PROMUOVERE LA PARTECIPAZIONE ALLA PRATICA SPORTIVA NEI MINORI CON DISABILITÀ

Claudia Maulini

Department of Sport Sciences and Wellness Parthenope University, Naples, Italy
claudia.maulini@uniparthenope.it

Emanuele Federici

Department of Sport Sciences and Wellness Parthenope University, Naples, Italy
emanuele.federici@uniparthenope.it

Enrico Miatto

IUSVE – Salesian Pontifical University, Venice, Italy
e.miatto@iusve.it

Abstract:

Starting from the need for a widening of opportunities to practice sport for children and adolescents with disabilities, useful to support physical and social wellbeing, the article highlights, on the level of theoretical reflection, salient aspects of sport for all that lead to valuing the construction of significant educational alliances between families, the network of educational and social-health services and sports associations, in the perspective of co-education to include the practice of sport in the life project of the person with disabilities, from childhood. This alliance is also determined by the commitment of national and supranational policies to promote inclusive actions.

A muovere dalla necessità di un allargamento delle occasioni di praticare sport rivolte a minori con disabilità utile a sostenere benessere fisico e sociale, l'articolo mette in luce, sul piano della riflessione teorica e degli studi in materia, aspetti salienti dello sport per tutti che portano a dar valore alla costruzione di alleanze educative significative tra famiglie, rete dei servizi educativi e socio-sanitari e associazioni sportive del territorio, nella prospettiva della co-educazione per includere la pratica sportiva nel progetto di vita della persona con disabilità, fin dall'infanzia. Tale alleanza è determinata anche dall'impegno delle politiche nazionali e sovranazionali a promuovere azioni inclusive.

Parole chiave: sport, inclusione, partecipazione, co-educazione, alleanza educativa

Keywords: sport, inclusion, participation, co-education, educational alliance

Introduction

Participation in sport improves the psychological well-being of children and adolescents with disabilities by providing opportunities to make friends, express creativity, develop a personal identity and promote meaning and purpose in life. Research highlights how sport positively impacts social skills, emotional well-being, as well as, physical well-being with improvements in aerobic capacity, physical and cognitive function and physical development, and long-term benefits on functional abilities and quality of life (Ash, Bowling, Davison, & Garcia, 2017; Blick, Saad, Goreczny, Roman, & Sorensen, 2015; Lai et al., 2020). Furthermore, exercise has been shown to counteract behavioural difficulties, reducing, for example, stereotypical and repetitive behaviour and increasing sociability in children and adolescents with autism spectrum disorder (Lai et al., 2020).

Sport has to be understood as an activity targeted at the entire population, as it can be adapted and modified according to different health conditions. Sport for all' marks a complete break with the outdated meaning that understood it solely as a competitive activity for a few champions, related to a concept of a body without physical defects and limitations (Kiuppis, 2018). Despite this, the results of the 2019 ISTAT survey indicate that in Italy, people with severe disabilities who participate in sport, either continuously or occasionally, are still only 9.1%. The share of sportsmen and women increases significantly when the disabilities are less severe, reaching 20.5%. In contrast, the proportion of the population without any disability is 36.6%. People with severe disabilities who, while not practising sport, do engage in some physical activity, are 14.4% (less than half of the value reached by the population without disabilities, which is 29.1%). Among people with less severe disabilities, those who engage in physical activities are 27.6%. Out of 10 people with severe disabilities, about 8 declare to be totally inactive, i.e. sedentary, and to engage in neither sport nor physical activity, compared to 34.1% recorded among the population without disabilities. In line with a general trend in Italy, significant differences in gender (13.7% of men practice sport, but only 6.0% of women) and age (20.7% of people under 65 years of age practice sport, as opposed to 2.7% of the elderly) are also evident among people with severe disabilities. Moreover, territorial distances with a marked North-South gradient are observed: 11.9% of people with severe disabilities living in the North play sport, compared to 6.3% of those living in the South (ISTAT, 2019, pp. 102-103).

These data highlight the importance of what is reiterated in Article 30 of the United Nations Convention on the Rights of Persons with Disabilities, namely, the importance to encourage and promote the participation, to the fullest extent possible, of persons with disabilities in mainstream sporting activities at all levels and to ensure that persons with disabilities have an opportunity to organize, develop and participate in disability-specific sporting and recreational activities and, to this end, encourage the provision, on an equal basis with others, of appropriate instruction, training and resources.

The present work aims to offer a theoretical contribution regarding the importance of including sports practice in the life project of the person with disabilities, starting from childhood. This requires the establishment of an educational alliance between families, the network of educational and social-health services and local sports associations in the awareness that the

effective functioning of this alliance is also determined by the commitment of national and supranational policies to promote inclusive actions.

Co-education and educational alliances for the life project

People's access to the sporting experience, beyond the differences they bring and their personal levels of functioning, especially at a developmental age, is not to be considered an automatic factor within sporting contexts, just as the passage in children and adolescents from the dimension of play to that of sporting activity is not. What connotes and accompanies such a transition, in fact, is precisely the intentional action of the adult with an educating vocation, which originates from an original concern inherent in the desire for a flourishing, a development to be possible.

Faced with children and adolescents with disabilities who are about to experience sport, support for the launching of inclusive actions, capable of widening the net of participation to each and every one, necessarily passes through the involvement of the actors directly concerned: children and adolescents, their families, sporting organisations and professionals who, in terms of health and rehabilitation, contribute to supporting the child's development.

Research into the involvement of parents of their children and adolescents with intellectual disabilities or neurodiversity in sporting activities has highlighted how the absence of meaningful alliances between the actors involved, the lack of a careful look at understanding the specificity of the needs of each child with a disability, acts of stigmatisation, low values of sport and a lack of information and opportunities for participation, are all factors that negate the opportunities for inclusive sport (Tai, & Funf, 2009; Shields, & Synnot, 2016; McMahon et al., 2020, Victoria Harlem et al., 2022). On the contrary, the attitudes and inclusion skills of professionals, educators and sports coaches, as well as, the social skills of people with disabilities, are facilitating factors for inclusion and access to the sport experience. As highlighted in Shields and Synnot's study (2016), in fact, facilitating factors for the inclusion of children and adolescents with disabilities in sports contexts and their active participation are not only their motor and social skills and the motivation to increase them, but also the willingness and ability of technical and sports figures to be inclusive.

From these analyses, it emerges, the importance of care to promote, in the experience of children and adolescents with disabilities in their approach to sport and their families, the presence of unique and interacting contextual factors (Victoria Harlem et al., 2022), starting from the joint construction of inclusive, educational pathways, capable of capturing the specific needs of children and adolescents but also of their parents. The perspective of co-education offers itself as a viaticum for building bonds and close networks of solidarity (Pourtois, et al., 2013; Pourtois, & Desmet, 2017), capable of supporting the development and active participation in sport of children and adolescents with disabilities. This perspective, in fact, implies the realisation of an educational alliance capable of holding together, also in the prospective dimension of the life project as a common referential, family, school and community, in order to reach a goal: «the optimal psycho-social development of the child» (Pourtois, & Desmet, 2017, p. 124) in the community where he/she lives.

Parents, educators, teachers, coaches, social, health and rehabilitation professionals, are all considered as partners in a unique, inclusive educational enterprise, capable of placing the expansion of children's growth opportunities at the centre. Understood in this way, the perspective of co-education opens up the maturation of a sense of cohesion and interdependence that in reciprocity becomes a condition of acceptance and tolerance of differences and divergences. The construction of educational alliances, in this way, represents a progressive, dynamic and collective process, implying participation, the shared construction of specific objectives, but also involvement, «an aspect that differs from mere participation since it implies a sense of belonging, motivation to participate, a desire for sharing, cooperation, commitment, responsibility» (Pileri, 2017, p. 59).

Based on these elements, it is possible that every child with disabilities who approaches the sporting experience, and with him or her the adults of reference, can be guaranteed the possibility of making sense of their experience in an open, continuous communicative climate of trust and acceptance in order to share trajectories of meaning that open up self-discovery, new opportunities, but also the sharing of everything that recalls the sporting experience, failures included.

The elements considered, which refer to co-education, contribute to the promotion of positive and facilitating contextual factors, such precisely because intersubjective variables are enhanced, reducing barriers and obstacles. This allows for the transformation of contexts and the creation of conditions to promote the right to sport, the right to education, participation, processes of self-determination, and the enhancement of differences (Malaguti, 2017). In this way, the sports experience of children and adolescents with disabilities feeds the possibilities of exercising active citizenship and processes of inclusion and cohesion of each person in society, beyond the specificities that characterise it.

Educational alliance and participation in sport of children and adolescents with disabilities

It is important that the promotion of sports practice for people with disabilities takes place from childhood in order to promote the acquisition of an active lifestyle throughout life as much as possible. Promoting the inclusion of all children and adolescents with disabilities in appropriate sporting activities and supporting their families so that the risks are not overstated or the benefits neglected is crucial. For this, the creation of a good alliance between the family and the territorial educational, social, health and sports network is an indispensable factor, allowing analysis of the general state of health, individual or group activity preferences, safety precautions and the availability of appropriate programmes and equipment. «The family is an open system that permanently interacts with all the subsystems that make up society [...]; it is capable of profoundly influencing, through educational communication, both the intrinsic motivation (linked to the satisfaction of personal needs and interests in the context of a life project) and the extrinsic motivation (linked to social recognition, rewards and gratifications from outside) of young people to participate in leisure time sports» (Isidori, Migliorati, & Maulini, 2016, p. 10, 14).

It therefore becomes important to raise awareness among families and to build educational alliances with the aforementioned network, in the logic of co-education and mutual involvement and development, capable of jointly addressing the challenge of the educational and inclusive potential of sport in promoting a higher quality of life. As argued by Magnanini «sport can orientate, can help build for and with the child one of the building blocks of a broad and dynamic life project, where skills, competences, relationships can be tested on the field, which become the elements on which to build models of participation, growth and social inclusion» (Magnanini, Cioni & Bolzan, 2018, p. 493).

Participation, as defined by the WHO in the International Classification of Functioning, Disability and Health has to do with «involvement in a life situation» (WHO, 2004, p. 22), implying taking part, being included in or engaging with an area of life, being accepted or having access to necessary resources (WHO, 2004, p. 29).

Participation in activities allows people to make friends, develop skills and competences, express creativity, achieve mental and physical health, determine the meaning and purpose of life (Law, King, et al. 2006) and access that something more that opens up a sense of belonging (Triani, 2018). Sport can be one of the contexts in which these goals can be achieved.

For all the reasons outlined above, it is important to include sporting activity in the life project of the person with disabilities as an opportunity to promote flourishing life projects (Visentin, 2016a) and able to contribute to their emancipation in the context of life (Miatto, 2022). The life project «represents the main tool through which to ensure that the person's needs are taken care of globally, taking into account the different phases of the existential cycle, avoiding inauthentic care that does not pay attention to the specific nature of the person and the relationships that exist between different contexts: family, school, training, work, leisure, health, rehabilitation, social assistance. [...] The school, the family, the territory and the associations represent the indispensable synergies for a project that is phenomenologically understood as a throwing over, a project that constitutes a place of meaning and not a bureaucratic formality» (Gaspari, 2021, p. 144).

The Ministry of Health itself, in its *Guidelines on physical activity for the different age groups and with reference to physiological and pathophysiological situations and specific population subgroups*, emphasises that all operators (health and non-health) have a crucial role to play in encouraging people with disabilities, discomfort and mental disorders to continue or start a physical activity programme and in facilitating participation in motor and sports activities. Therefore it is of particular importance that they work through awareness-raising activities to motivate the family about the benefits of regular physical activity (Carbone et al., 2021). Parents and, in a broader sense, families of children and adolescents with disabilities are often overprotective, worried about possible injuries and thus about their child's worsening health condition (Boufous, Finch, & Bauman, 2004; Shields, & Synnot, 2016). In particular, as emerges from the study by Magnanini, Cioni & Bolzan (2018), «parents of children who do not participate in sport have more 'negative' opinions, are more frequently concerned about possible problematic consequences their child might face by participating in it, and appear less convinced of the value of sporting activity» (p. 500). For this reason, it is important that paediatricians, together with medical specialists and sports physicians, are involved in the

planning of actions related to sports practice in order to «inform the family about the opportunities to practice physical activity, indicate the type of activity most suitable for the child at different ages, recommend professionals and qualified facilities to practice physical exercise and/or sports activities, monitor and evaluate the effects of exercise» (Ministry of Health, 2019, p. 22). This means making sure that the network of educational and socio-health services supporting the family, in which one or more members are persons with disabilities, strives to build a life project that also contemplates participation in sporting activity through a systematic comparison, a space of common reflection between the educational and socio-health levels and the sporting level. The good functioning of such a network makes it possible to co-construct prescriptions of activities that are targeted (Murphy, Carbone, & Council on Children with Disabilities, 2008) and inclusive, capable of responding adequately and without risk to the sporting and physical exercise needs of the person with disabilities, systematically integrating them with the complex of other activities of interest to the person himself, who is called upon to participate in decision-making processes and thus in the design of his own life project and educational interventions that concern him.

Placing the person at the centre of the planning, calling him or her to choose and decide on the basis of his or her own interests but also of his or her own possibilities that also emerge from the confrontation with specialists in the social, educational, health and sporting fields, favours the development of empowerment and the capacity for self-determination (Giacconi, Soggi, Fidanza, Del Bianco, d'Angelo, & Capellini, 2020). The latter, in particular, is a process of construction of the self, which allows the subject to approach and achieve what he or she most desires from his or her life and which is achieved precisely through effective educational relationships (Cottini, 2016; Del Bianco, 2019) capable of triggering processes of personal empowerment, which allow for the strengthening of the person's skills and competences, and of community empowerment, in which the greatest acquisition of "power" is given by participation in community life (Maulini, 2014). Self-determination and empowerment are both interdependent processes that interface with the capacity of contextual and institutional factors to increase the role of disability in society.

Moreover, it is important to work through the provision of all the necessary tools for overcoming obstacles or reducing restrictions to participation (MacEachern, Forkert, Lemay, & Dewey, 2022) or disabilities, i.e., problems that children and adolescents or their families may experience in their involvement in sporting activities, so that environmental factors understood as «aspects of the external and extrinsic world that form the context of an individual's life and, as such, have an impact on the person's functioning» (WHO, 2004, p.183), not being an impediment to it.

In this regard, as also emerged from the results of Visentin's survey (2016b), there is an urgent need to «increase the professional skills of coaching instructors» through specific training courses for the practice of sport for persons with disabilities that integrate the medical-therapeutic-rehabilitation approach with the pedagogical one, thus allowing a real possibility of inclusion through sport. This would also allow for the construction of an educational relationship between coach and athlete that would allow the person with disabilities to achieve not only physical benefits, but also social-relational ones, thus promoting «adequate levels of

Quality of Life in terms of independence, social participation and well-being» (Giacconi, 2015, p. 127).

In addition to this, Magnanini, Cioni, & Ferraro (2019) and Visentin (2016b) indicate, among the main environmental factors found in the literature, correlated with levels of participation at a developmental age: the availability, accessibility, and cost of sporting offers in the area; the dissemination of information regarding available activities; the presence of means of transport; peers with whom to practice sport; inclusive attitudes on the part of able-bodied people; positive attitudes and specific skills of sports educators; attitudes and support of parents; the possibility of combining family and work time with sporting commitment; economic and socio-demographic variables of the family unit to which they belong; awareness of the benefits of sporting activity; as well as the presence of adequate infrastructure.

Typical barriers that prevent people with disabilities from participating in sport include lack of awareness among people without disabilities on how to properly involve them in teams, lack of opportunities and programmes for training and competition, insufficient number of accessible facilities due to physical barriers, limited information and access to resources (DePauw, & Gavron, 2005).

In addition to these factors, Visentin's survey shows, among others, that the high cost of sports aids for people with disabilities can be an obstacle to playing sports.

The DPCM of 16 April 2020 is an example of how the Italian government is trying to operate in order to overcome this obstacle, allocating financial resources to the provision, free of charge, of aids aimed at initiating the practice of sport for persons with disabilities.

This is because the educational alliance is built within a broad systemic framework that implies a co-responsibility that is not only of the family and the network of educational, health and sports agencies, but also and first and foremost of the policies that must commit themselves to providing the legislative and economic-financial tools necessary to encourage the participation of persons with disabilities in sport.

Conclusions

From what has been analysed so far, regarding the opportunity to broaden the involvement of children and adolescent and their families in sporting experiences in the territories of their lives, what also emerges from the research observed, is a plurality of factors that, between endogenous and exogenous elements, still leave considerable space for action for the dissemination of the culture of a "sport for all" (Kiuppis, 2018) and the opportunities for all and each one related to it. Starting from the analyses considered and from the need to broaden participation in the sports experience to children and adolescents with disabilities, as also highlighted by the ISTAT survey (2019) on the side of pedagogical reflection, the importance of promoting their development through support for the construction of educational alliances, in the perspective of co-education, capable of involving the family and the network of educational, health and sports agencies as agents competing to support access and participation in sports activities in their plurality, is pregnant with meaning. However, it is necessary to widen the net of research, including pedagogical research, which on the level of school

inclusion for the development of the personal life project in recent years has produced considerable literature on the enhancement of the educational alliance dimension. On the other hand, the field of sports inclusion of children and adolescents with disabilities still remains to be explored and, in particular, the contribution, also in terms of evidence, that participation in sports activities, in a co-educational perspective, guarantees to the development of growth paths and personal life projects. This implies investigating the awareness that the actors of the sports sector possess with respect to their role and responsibility in building an authentic and competent educational alliance with the territorial network of services, both formal and informal, for persons with disabilities.

All this being aware that the contribution of the research can also bring elements to the political decision makers, more than ever called upon to support the diffusion of sports inclusion, through legislative and even financial instruments, necessary to favour the participation of persons with disabilities in sport.

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