Research and education for the promotion of physical activity

AUGUST 2005

VOLUME 16/NUMBER 4

WellSpring

Active Living and People with Disabilities

The Broader Context of Access

Dr. Garry D. Wheeler, C.Psych., Vice President, Edmonton Chapter, Alberta Division MS Society.







Jillian Sawler's article in this issue is interesting in the context of a mostly physically inactive and aging Canadian population (with an increased risk for conditions such as cardiovascular disease, diabetes, hypertension, and stroke) at a time of spiralling health-care costs.

Sawler correctly points out that because of various barriers, people with disabilities do not enjoy the same access to physical activity as the able-bodied population. As a result, this population is generally more inactive than the able-bodied population. This inactivity may further complicate functional limitations by increasing risk for a variety of diseases.

How do we overcome barriers and increase physical activity levels in people with disabilities? Clearly, increasing simple physical access to facilities is not enough. For truly inclusive opportunities to be available, first it is important to recognize that people with disabilities need to be free to make choices about the types of opportunities they want (e.g., a specialized or integrated/inclusive setting). The issue is the right not to be excluded from any setting, rather than (or as well as) the right to be included.

Second, it is important that the opportunity provided fosters the experience of feeling included, welcomed, and accepted. Simple physical access to opportunity does not guarantee acceptance.

Feelings of inclusion are enhanced when people with disabilities are confident in the training,

knowledge, and competency of service providers. We are making strides in this regard, e.g., the National Health and Fitness Program (CSEP) supplementary training module to the Canadian Physical Activity Fitness and Lifestyle Appraisal: "Health, fitness and lifestyle assessment for persons of all abilities."

Although the emphasis on the functional adaptation of programs is an important piece of the adoption and maintenance puzzle, we must not forget the importance of the medical classification of disability types. For example, the knowledgeable provider should be aware of the contra-indications to exercise in people with cerebral palsy, multiple sclerosis, or spinal cord injury. All these conditions might be classified as primarily functional/ ambulatory impairments. As liability issues become more significant, providers of health, fitness, and lifestyle services need more than ever to be knowledgeable and competent.

As the population ages and health-care expenses increase, it is increasingly necessary that we all —whether able-bodied or with a disability—pay attention to optimizing health status through an active living philosophy.



Encouraging the Abilities of People with Disabilities in Recreation and Active Living

JILLIAN SAWLER, MA, INCLUSIVE SERVICES COORDINATOR, ALBERTA RECREATION AND PARKS ASSOCIATION (ARPA).

Although some people and organizations actively support the talents and abilities of everyone in recreation and active living settings, a startling number of people still do not support the abilities of people with disabilities.

Facilitating healthy lifestyles for people with disabilities does not necessarily require more money or expertise. Being inclusive is really about being open-minded. Having an open mind means recognizing that people with disabilities are whole beings. Rather than looking at people solely from the perspective of disease, injury, or limitations (Kristen, Patriksson & Fridlund, 2002), this perspective realizes that their collection of talents and abilities help define who they are.

Being inclusive is about extending the same courtesy of respect to everyone.

More Alike than Different...

Although people with disabilities may not have the same opportunities to participate in active living as their able-bodied peers, people with disabilities experience many of the same gains from recreation, physical activity, and active living. Physiologically engaging in an active lifestyle below

Physiologically, engaging in an active lifestyle helps people with disabilities to

- reduce heart-rate and blood pressure;
- maintain and enhance healthy bone density, muscles, and joints;
- improve muscular strength and endurance; and
- increase flexibility (Durstine, Painter, Franklin, Morgan, & Pitetti, 2000).

Active lifestyles also help reduce secondary conditions often experienced by people with disabilities, e.g., obesity, hypertension, and pressure sores (Rimmer, 1999).

People with disabilities experience social and psychological benefits from an active lifestyle, such as

- experiencing their bodies and personal abilities in new ways;
- gaining valuable social experiences;
- increasing personal confidence in pursuing new physical activities;
- using experiences that have supported their participation to challenge negative stereotypes about their disabilities (Blinde & McClung, 1997; Sawler, 2005; Sherrill, 1984, 1998).

Encouraging Active Living Together with People with Disabilities

People with disabilities often experience environmental barriers to participating in physical activity (e.g., lack of accessibility) or attitudinal barriers (negative stereotypes and stigmatization) (Imrie, 2001; Meyers, Anderson, Miller, Shipp, & Hoenig, 2002; Rimmer, Riley, Wang, Rauworth, & Jurkowski, 2004).

However, practitioners working with people with disabilities can minimize some barriers to participation and facilitate active healthy lifestyles together with their clients. Keep in mind that there is no all-encompassing "recipe-card" approach to ensure successful, inclusive, and meaningful participation by clients.

There are some guidelines to consider in encouraging people with disabilities to engage in active living. (Much of the material in this section comes from *Adapt the Fun for Everyone!* (New York State Department of Health, 2001), which you can find at www.health.state.ny.us/nysdoh/fun/0954.htm.)

As is true for any client, regardless of ability, it is important to be supportive but not pushy. Starting a new activity might be intimidating for your client and he or she may not know what to expect of the activity or themselves.

Ask your clients if there is any personal information that would help to ensure that they have a positive experience and get the most out of the activity. Are there any medical concerns or allergies you might need to be aware of in case of an emergency? Ask your clients if they have had previous experiences in recreation, physical activity, or sports. If so, what did they like or dislike about the activity?

Find out about your clients' interests, needs, goals, and expectations. Ask how you can be most helpful in facilitating recreation and active lifestyle planning for them. Would they prefer a segregated environment, an integrated experience, or an inclusive community setting?

Encourage feedback and listen to their concerns. Where possible, be willing to accommodate their needs or alleviate concerns. Remember your client's perspective: no one sees obstacles to access like someone who must overcome them.

Keep in mind that although two people may have the same disability, their needs, preferences, and abilities will vary. Consciously treat each person with a disability as an individual while recognizing that they are the experts in their own lives.

Facilitating the inclusion of diverse abilities means thinking of different ways of achieving a goal or participating, as well as choosing diverse activities. Be creative! With imagination, innovation, and in some cases, technology, people with disabilities can participate in many of the same recreational opportunities and activities as people without disabilities.

Activities ranging from art making, film production, acting classes, and gardening to rock climbing, team sports, solo-sailing, white-water rafting, and sky diving are all possible opportunities for people of all ages and abilities. Recognize the "possible" in what you might once have thought "impossible."

Adapting activities to include people with disabilities is often simple and inexpensive. Be brave and relax! Adapting is nothing more than using your professional skills and natural creativity

in a different way. You may only have to move an activity to an accessible room with a doorway wide enough for a wheelchair.

For activities involving specialized equipment such as sit-skis, TrailRiders, goal balls, or sport wheelchairs, local disability sport and recreation organizations are often happy to lend their equipment and/or invite you to try new activities during a scheduled workshop or activity session. (For some examples and contact information, visit www.diversity.arpaonline.ca.)

As is true for any client, regardless of ability, it is important to be supportive but not pushy. Starting a new activity might be intimidating for your client, and he or she may not know what to expect of the activity or of themselves.

If there seems to be some hesitation with starting a new activity alone, your client may like to work with a buddy or to be paired with another client. Some people feel more at ease when a supportive, friendly person is there for encouragement and assistance. Have fun, and let your creative juices flow!

Where to Find out More

If you're interested in more information, please visit www.diversity.arpaonline.ca for more resources on facilitating active lifestyles with people with disabilities in your community.

Additionally, consider attending our 2005 National/International Symposium on Active Leisure for Citizens with Disabilities, hosted by the Alberta Recreation and Parks Association (ARPA), Chrysalis, and the Alberta Therapeutic Recreation Association on October 12–15, 2005, in Edmonton, Alberta.

Over 50 speakers from across Canada, the United States, and abroad will present on topics such as adaptive technology, advocacy and disability policy, best practices, tips for activating community inclusion, and much more.

Log on to www.2005.arpaonline.ca to view the program guide and to register.

References

Blinde, E. M., & McClung, L. R. (1997). Enhancing the physical and social self through recreational activity: Accounts of individuals with physical disabilities. *Adapted Physical Activity Quarterly*, 14, 327–344.

Durstine, J. L., Painter, P., Franklin, B. A., Morgan, D., & Pitetti, K. H. (2000). Physical activity for the chronically ill and disabled. *Sports Medicine*, *30* (3), 207–219.

Imrie, R. (2001). Barriered and bounded places and the spacialities of disability. *Urban Studies*, 38 (2), 231–237.

Kristen, L., Patriksson, G., & Fridlund, B (2002). Conceptions of children and adolescents with physical disabilities about their participation in a sports programme. *European Physical Education Review*, 8 (2), 139–156.

Meyers, A. R., Anderson, J. J., Miller, D. R., Shipp, K., & Hoenig, H. (2002). Barriers, facilitators, and access for wheelchair users: Substantive and methodologic lessons from a pilot study and environmental effects. *Social Science and Medicine*, *55* (8), 1435–1446.

New York State Department of Health. (2001). Adapt the fun for everyone!—Physical activity and people with disabilities. Retrieved May 30, 2005, from www.health.state.ny.us/nysdoh/fun/0954.htm.

Rimmer, J. H. (1999). Health promotion for people with disabilities: The emerging paradigm shift from disability prevention to prevention of secondary conditions. *Physical Therapy*, 79 (5), 495–502.

Rimmer, J. H., Riley, B., Wang, E., Rauworth, A., & Jurkowski, J. (2004). Physical activity participation among persons with disabilities. *American Journal of Preventative Medicine*, 26 (5), 419–425.

Sawler, J. (2005). The experience of youths with physical disabilities in sport and physical activity settings. Unpublished master's thesis, University of Alberta, Edmonton, Alberta, Canada.

Sherrill, C. (1984). Social and psychological dimensions of sports for disabled athletes. In C. Sherrill (Ed.), *Sport and disabled athletes*. Champaign, IL: Human Kinetics.

Sherrill, C. (1998). Adapted physical activity, recreation and sport: Crossdisplinary and lifespan. (rev. ed.). Dubuque, IA: McGraw-Hill.

WELLSPRING EDITORIAL ADVISORY COMMITTEE

Claudia Emes, University of Calgary Greg Hart, Beyond Compliance, Inc. John Valentine, Grant MacEwan College Maria Tan, Canadian Health Network Judy Newman and Kathy Garnsworthy, Alberta Centre for Active Living

The Alberta Centre for Active Living is the
CHN Active Living Affiliate.

www.canadian-health-network.ca

Mission Statement of the Alberta Centre for Active Living

Working with practitioners, organizations, and communities to improve the health and quality of life of Albertans through physical activity.

IF YOU HAVE ANY SUGGESTIONS OR QUESTIONS, WE'D LIKE TO HEAR FROM YOU

Alberta Centre for Active Living Percy Page Centre 3rd Floor, 11759 Groat Road Edmonton, AB T5M 3K6

Phone: 780.427.6949 or

1.800.661.4551 (toll-free in Alberta)

Fax: 780.455.2092

Web site: www.centre4activeliving.ca *E-mail*: active.living@ualberta.ca

STAFF

Director: Judith Moodie Research: Ron Plotnikoff, PhD Education Coordinator: Judy

Newman

Older Adult Coordinator: Jennifer

Dechaine

Communications and Marketing Coordinator: Kathy Garnsworthy Centre Coordinator: Betty Lee Resource Coordinator: Rosanne Prinsen

Financial Administrator: Carol Knull Administrative Assistant: Margaret Burns

Office Assistant: Gilda LaGrange Canadian Health Network: Pauline Poon, Maria Tan, Sally Press Health in Action Project: Karena Apps Eccles, Gwen Farnsworth

WellSpring is published six times/year. ISSN 1187-7472



Research and education for the promotion of physical activity