

Coaching Players with Disabilities

Common Disabilities (Defined & Described)

Attention Deficit Hyperactivity Disorder (ADHD):

<u>Definition:</u> A condition that describes players who display hyperactive behaviors, have difficulty attending to the task at hand, and tend to be impulsive.

Characteristics:

- Inattention, poor listening skills, and restlessness
- Impulsive
- Hyperactivity
- Onset before age 7
- Inappropriate excessive motor activity

Coaching Strategies:

- Highly structured environment
- Reduce coaching space
- Control extraneous stimuli
- Larger number of activities, shorter time on each

- Positive behavior modification program
- Use brief instructions

Autism:

<u>**Definition:**</u> Classic autism is defined as a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age 3.

Characteristics:

- Impairment in social interaction
- Impairment of verbal and nonverbal communication
- Restricted, repetitive and stereotypical patterns of behavior, interests and activities
- Impaired imitation
- Lack awareness of the existence of feelings of others
- Absence of imaginative activity

Coaching Strategies:

- Use a consistent behavior modification program
- Coach in a less stimulating area
- Use an established routine with repetitive transition strategies
- Use a predictable routine
- Be consistent in use of terms, equipment and training organization
- Use vigorous aerobic exercise to reduce self-stimulating behavior

Behavior Disorders:

<u>Definition:</u> A condition of disruptive or inappropriate behaviors that interferes with a player's learning, relationships with others or personal satisfaction to such a degree that intervention is required.

Characteristics:

- Poor coordination
- Refusal to practice

- Loss of emotional control
- Hostility
- Noncooperative Behavior
- Disorientation in space and time
- Destructive

Coaching Strategies:

- Remove distracting objects
- Impose limits on use of equipment and facilities
- Use games of social interaction
- Expect aggressiveness and monitor it closely
- Use activities that provide immediate feedback

Cerebral Palsy:

<u>Definition:</u> A disorder of movement and posture caused by a defect in the developing brain.

Characteristics:

- Primitive reflexes are still evident
- Slow to develop postural reflexes
- May have the following:
 - o Mental retardation
 - Convulsions
 - Speech problems
 - Oculomotor defects
 - Hearing and vision loss

Coaching Strategies:

- Work on muscle stretching
- Develop range of motion

- Develop postural alignments
- Use ramp climbing
- Work on gait training

Hearing Impairments:

<u>Definition:</u> An overall term that includes all levels of hearing loss, both deaf and hard of hearing.

Characteristics:

- Balance may be affected
- Information processing time is longer
- Physical fitness may be lower
- Possible delay in social/emotional development
- Speech can range from intelligible to none

Coaching Strategies:

- Make sure the student can see your lips when you talk
- Use visual demonstrations
- Coordinate your communication method with the rest of the coaches and buddies
- Learn basic signs and use them
- Use captioned videotapes
- Stand still when giving instructions

Learning Disabilities:

<u>**Definition:**</u> A disability in which the individual possesses average intelligence but is substantially delayed in academic achievement.

Characteristics:

- Poor spatial orientation
- Clumsiness
- Figure-background problems

- Rhythmic problems
- Problems with body awareness
- Difficulty with motor proficiency

Coaching Strategies:

- Work on body/space problems with action songs, games, mirrors and tactile activities
- Work on balance and upper/lower body coordination for motor proficiency
- Work on obstacle courses/circuit training for spatial orientation
- Use brightly colored objects for contrast
- Give opportunity for rhythmical problems

Mental Retardation:

Definition: The American Association on Mental Retardation (AAMR, 1992) defines a person as mentally retarded when the following three criteria are met: cognitive level (IQ below 70-75), significant limitations exist in two or more adaptive skill areas; and the condition is present from childhood (age 18 or less).

Characteristics:

- Cognitive learning area where players differ most
- Learn at slower rate
- Achieve less tactically

Social/emotional:

- Exhibit same range but more frequently exhibit inappropriate responses to social/emotional situations.
- Do not fully comprehend what is expected of them in social situations

Physical/motor:

- Delayed development of physical skills
- Usually overweight because of less activity levels

Coaching Strategies for individuals with mild retardation:

Put individual in less demanding position

- Over teach the cognitive information
- Emphasize fitness activities

Coaching Strategies for individuals with severe retardation:

- Emphasize range of motion exercises
- Have individual propel himself/herself as much as possible
- Concentrate on postural righting activities
- Use resistance training with therabands
- Concentrate on vestibular activities

Visual Impairment:

<u>Definition:</u> An overall term that includes all levels of vision loss, from partially sighted to complete blindness.

Characteristics:

- Physical fitness is below those of sighted peers
- Balance development is impaired
- Fundamental motor patterns and skills are delayed
- Physical growth and maturation may be impaired
- Wide variation in residual vision

Coaching Strategies:

- Use other sensory modalities for providing information
- Use games for social development
- Use a beeper, constant sound source, etc.
- Place players where they can best hear instructions
- Use contrasts between figure and background
- Increase or decrease the training surface grade to indicate play boundaries
- Begin new game in slower motion

What is Adapted Physical Education?

Change the word "adapted" to "modified" and you have the idea of Adapted Physical Education, which is essentially the modified soccer we do in training sessions and matches in TOPSoccer. It is **GOOD** teaching/coaching which adapts (modifies) the curriculum, task, and/or environment so that **ALL** players can fully participate in physical education through soccer.

Physical education is defined as the development of:

- · physical and motor skills
- fundamental motor skills and patterns (throwing, catching, walking, running, etc).
 and
- skills and strategies in individual and group games and sports

For all practical purposes, Adapted Physical Education **IS** developmentally appropriate physical education at its finest. It is adapting, modifying, and/or changing a physical activity so it is as appropriate for the person with a disability as it is for a person without a disability.

Adapted Equipment Resources

Flaghouse Special Populations

Flaghouse's equipment catalog features a variety of items for coaches of players with disabilities.

Flaghouse, Inc. (800) 793-7900 info@flaghouse.com 601 Flaghouse Drive Hasbrouck Heights, NJ 07604-3116

Ablenet 414-691-3476

17700 West Capitol Dr. Bldg. 31 Brookfield, WI 53045

Communication Aids for Children and Adults 414-352-5678

6625 N. Sidney Place Milwaukee, WI 53209

Rifton Equipment 800-777-4244

PO Box 901 Rifton, NY 12471

Sportime Catalogs 800-477-5075

One Sportime Way Atlanta, GA 30340

Pedal Pal 1-888-PEDAL PAL

140 Plastics Rd. PO Box 321 Corry, PA 16407

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Tom Hart, Director of Recreational Coaching Education (2001)

P.E. Central (http://pe.central.vt.edu/)