PHYSICAL ACTIVITY AND SPORT FOR PEOPLE WITH DISABILITIES

Symposium and Strategic Planning

JUNE 21, 2011

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Inclusive Fitness Coalition
District of Columbia Developmental Disabilities Council
Children’s National Medical Center
Quality Trust for Individuals with Disabilities
University Legal Services
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The Inclusive Fitness Coalition (IFC) is a national coalition of over 150 organizations dedicated to addressing the policy, environmental, and societal issues associated with the lack of inclusion and access to physical activity among people with disabilities. The IFC works to facilitate an expanded coordination of organizations and individuals to address the complexity of personal, social, cultural, political, and economic factors that influence—positively and negatively—the participation of people with disabilities in physical activity, fitness, sport, and recreation. As part of this work, the IFC has created a Policy Working Group overseeing a comprehensive initiative to advance systemic change for individuals with disabilities by coordinating policy, advocacy, and education efforts. A core issue for this group is to address the barriers preventing individuals with disabilities from participating in sports and physical activity programs, while simultaneously creating a national advocacy movement for the inclusion of people with disabilities in physical activity and sport. [www.incfit.org](http://www.incfit.org)

Through an interdisciplinary approach to service, training, research, community outreach, technical assistance, and public policy, the Georgetown University, Center for Child and Human Development, University Center for Excellence in Developmental Disabilities (GU-UCEDD) improves the quality of life for all children and youth, especially those with special needs, and their families. The Center is part of a national network of universities that provide interdisciplinary training, community service, technical assistance, research, and information dissemination activities. The Center promotes capacity building within the diverse network of individuals, programs and organizations concerned with developmental and other disabilities at the local, state, national and international levels. The GU-UCEDD provides knowledge and leadership in the development of policy that impacts systems of services and supports for individuals with disabilities and their families. The GU-UCEDD has a long history of providing an array of community services and supports to the District’s most vulnerable populations. The GU-UCEDD has devoted a significant portion of its resources to address the multiple needs of these populations and the personnel and agencies that serve them. [http://gucchd.georgetown.edu](http://gucchd.georgetown.edu)

The Protection and Advocacy (P&A) agency provides information and referral services and uses legal, administrative and other remedies to resolve problems for individuals and groups of clients. The P&A reaches out to members of minority groups that historically have been underserved. In addition to the Protection and Advocacy program for Individuals with Developmental Disabilities (PADD), the P&As also receive Federal grants authorized by seven additional laws,
to help individuals with other disabilities or special needs secure services from agencies such as the Rehabilitation Services Administration, understand benefits programs, and the voting process. The P&A for the District of Columbia is University Legal Services. **www.uls-dc.org**

The District of Columbia Developmental Disabilities Council (DD Council) is composed of people with significant disabilities, parents and family members of people with developmental disabilities, and representatives of State agencies that provide services to individuals with developmental disabilities. Together, the DD Council develops and implements a statewide plan to address the Federally-mandated priority of employment for people with developmental disabilities, and optionally any of three other Federal priorities (case management, child development, and community living) as well as one optional State priority. The emphasis of the DC DD Council is to increase the independence, productivity, inclusion and integration into the community of people with developmental disabilities, through a variety of systemic change, capacity building, and advocacy activities on their behalf, including development of a State Plan; training activities; information dissemination; and support to people with disabilities, their families, and service providers. **http://odr.dc.gov/DC/ODR/DDC**

Leadership Education in Neurodevelopmental and Related Disabilities (LEND) programs provide long-term, graduate level interdisciplinary training as well as interdisciplinary services and care. The purpose of the LEND training program is to improve the health of infants, children, and adolescents with disabilities. They accomplish this by preparing trainees from diverse professional disciplines to assume leadership roles in their respective fields and by insuring high levels of interdisciplinary clinical competence. The DC LEND at Children’s National Medical Center is a consortium of DC universities, including Georgetown University, George Washington University, Howard University, and Catholic University of America. DC LEND provides interdisciplinary training to advance knowledge and provider skill, provides state of the art services that are community based, and promotes innovative cost effective service systems for children with developmental disabilities. **www.dclend.org**

**Advocacy is the foundation of Quality Trust’s mission and the work done for residents of the District of Columbia with developmental disabilities and for families who have a family member with disabilities.** Quality Trust advocates work one-on-one with individuals and take the lead from them on what to focus on to meet their desired needs. Quality Trust advocates support each person to tell his or her story and empower the person to speak up and share their concerns. Quality Trust advocates work with the family, government, and other stakeholders to keep the focus on the individual and what they desire. Quality Trust advocacy also includes identifying the systemic issues related to providing services and supports to people with disabilities. With a focus on healthcare, education, and life choice planning the Quality Trust offers support, training, and information dissemination to disability support professionals on best-practices training on how to better support people live positive, person-centered lives. **www.dcqualitytrust.org**
IN TRO D U CTIO N

Executive Summary

The Inclusive Fitness Coalition and the University Center for Excellence in Developmental Disabilities at Georgetown University hosted the Physical Activity and Sport for People with Disabilities Symposium and Strategic Planning Meeting on June 21-22, 2011. The symposium and strategic planning meeting brought together key stakeholders to create a community blueprint for action. Experts in the field of activity, fitness, sports, and athletics for people with disabilities collaborated with athletes with disabilities, service providers, and advocates to develop a strategic plan for how to expand physical activity, fitness, and sports for people with disabilities and advance the forthcoming policy recommendations of the Department of Education, specifically for students with disabilities. The plan includes a multi-prong initiative targeting parents, youth, administrators, athletic directors and coaches, policy makers, national and local community advocates, and the media through the following platforms:

- Legal Consultation and Research
- Community Organizing and Program Development
- Education & Technical Assistance
- Advocacy of National and State Policy

There is an important need to expand physical activity and athletic opportunities for individuals with disabilities. The benefits of physical activity and athletic programs are equally important for individuals with disabilities as they are for all individuals. Physical activity is an effective intervention for addressing the obesity epidemic that is especially problematic for individuals with disabilities. Individuals with disabilities who participate in physical activity have higher self-esteem, better body images and higher rates of academic success. They are more confident and more likely to graduate from high school and matriculate in college and experience greater career success and more options.

Despite these benefits, individuals with disabilities are not getting the same amount of physical activity and athletic opportunities as individuals without disabilities. Although individuals with disabilities have made significant gains since the passage of the Americans with Disabilities Act of 1990 and the Rehabilitation Act of 1973, people with disabilities are still facing pervasive inequities in physical activity programs and sports programs, particularly in our educational institutions. We know that comprehensive change is needed to address the systemic exclusion and discrimination students with disabilities face in terms of physical activity opportunities and resources for sports participation.
Disability and Physical Activity

For youth to develop into self-aware, civically engaged, contributing members of society, they require equal access to resources that will enable them to feel safe, healthy and included in all areas of society. Individuals with disabilities, however, are consistently excluded from participating in mainstream society and fully accessing these resources. An individual with a disability would tell you that their exclusion is manifested in:

- physical and attitudinal barriers
- stigma and stereotypes
- a chronic lack of opportunity

THE BENEFITS

Physical activity and sport hold the potential to serve as a unique conduit to facilitate the inclusion of persons with disabilities within the mainstream community. We know the benefits of physical activity and sports participation are significant for girls and women. Since reducing barriers of inclusion for women in athletics and physical activity, they have experienced the benefits such as higher self-esteem (Richman & Shaffer, 2000) and reduced health risks. Girls and women who participate in sports have higher graduation rates (Sabo, Melnick, & Vanfossen, 1989) and are less likely to be involved in an unintended pregnancy (Dodge & Jaccard, 2002).

The benefits of physical activity and sport participation for people with disabilities are also significant. Physical activity and sport participation for individuals with disabilities prevents health problems by reducing the risk of developing heart disease, controlling weight, building lean muscle, reducing fat (US Dept. of Health and Human Services, 1996) and preventing osteoporosis (Kannus, 1999). It reduces the risk of developing secondary conditions that are related to a primary disability, such as fatigue, obesity, social isolation, deconditioning, etc.

In addition to prevention of secondary conditions and promotion of overall health and well-being, physical activity can be important in the day-to-day life of people with disabilities. The strength and stamina that is developed by participating in physical activity can help maintain a higher level of independence. Increases in physical activity may also affect a person’s ability to go to school, work, and participate in all aspects of community life.

Individuals with disabilities who participate in sports have higher self-esteem, better body images and higher rates of academic success; are more confident and more likely to graduate from high school and matriculate in college. Furthermore, sport is where skills like teamwork, goal-setting, the pursuit of excellence in performance and other achievement-oriented behaviors necessary for success in the workplace are developed.
THE BARRIERS

Despite these benefits, however, individuals with disabilities are not getting the same amount of physical activity and athletic opportunities as individuals without disabilities, particularly in our educational institutions. Section 504 of the Rehabilitation Act of 1973 (the Rehab Act) prohibits discrimination on the basis of disability in any educational institution that receives federal funding and Titles II and III of the ADA require programs and services in public places or that are funded by the government to be accessible and equally available for individuals with disabilities. Although individuals with disabilities have made significant gains since the passage of these statues, they still face pervasive inequities in opportunities for physical activity (IFC Policy Briefing):

• Individuals with disabilities are almost three times as likely to be sedentary as individuals without disabilities (29% vs. 10%).
• Nearly 56% of people with disabilities do not engage in any physical activity, compared to 36% of people without a disability.
• Only 23% of people with disabilities are active for at least 30 minutes three or more times per week.
• Nearly 1.5 million students in public primary and secondary schools with physical impairments are excluded from having access to participate in athletic competitions.
• People with disabilities are more likely to experience attitudinal, social and programmatic barriers that may limit their inclusion in physical activity, fitness, sports, recreation and physical education.
• Healthy behaviors are just as important for promoting health and wellness and preventing disease in people with disabilities as they are for those without a disability. Yet, people with disabilities have been left out of many health promotion efforts.
• Many fitness and recreation facilities, outdoor spaces, and some types of fitness equipment are not accessible to people with disabilities making efforts to participate in physical activity very difficult.

Furthermore, opportunities to participate in athletics for students with disabilities are virtually non-existent. High school athletic associations in less than ten states and fewer than fifteen colleges and universities offer adapted interscholastic or intercollegiate sports programs for students with disabilities. The limited programs that do exist are often created as a result of the advocacy efforts from non-profit organizations, who partner with athletic associations to provide adapted programs. This demonstrates that, when left to their own devices, schools have not and will not assume the responsibility for creating athletic programs for students with disabilities. We know from students and their families that students with disabilities are frequently not being included in athletic programs with students without disabilities, are discouraged from participating, or are encouraged to assume less physically active roles with school programs. The limited cases of inclusion that do exist tend to be a result of lawsuits or challenges brought by the students with disabilities invoking their rights.
INTRODUCTION

This problem is exacerbated for youth in urban settings and for girls. In urban settings, infrastructure problems limit safe transportation, adequate field and play space, and well-trained coaches, thus youth in urban settings have one-third the opportunity to participate in sport than their suburban counterparts.

Girls participate in physical activity and sports even less than the boys. They participate at half the rate as boys (Hannon, Cradock, Gortmaker, Wiecha, El Ayadi, Keefe, Harris, Finkelstein, Fitzgerald, & Sobol, 2002).

Youth with disabilities are the last to reap the physical, emotional and social benefits of sport, all of which support their development into successful, contributing members of society.

Key Issues

The key barriers to participating in sport and physical activity for students with disabilities include:

- **Lack of policies** detailing a program or educational institution’s obligations to provide physical activity and sport opportunities for individuals with disabilities.
- **Lack of resources and training** to administrators and program providers in how to create programs and inclusive environments for individuals with disabilities.
- **Absence of** inclusive and disability specific physical activity programs in schools, colleges and universities.
- **Lack of awareness by parents and youth with disabilities** of their rights to access and participate in physical activity and sport programs.
- **Lack of persistent advocacy and outreach** to policymakers and administrators of physical activity and sport programs on behalf of individuals with disabilities.

The Solution

Both programmatic and policy level changes are needed to fully eliminate the disparities in access for individuals with disabilities to participate equally in physical activity and sport. For the past five years, efforts have been underway to unite the disability in sport stakeholders in a broader movement to collectively advance the rights of individuals with disabilities in school-based sport and physical activity programs. In this short time, the leadership in this movement has:

- **Passed the Fitness and Athletic Equity Act** for Students with Disabilities in Maryland in 2008, groundbreaking legislation that for the first time clarifies the obligation of schools to provide sports and physical activity opportunities for students with disabilities.
- **United** over 100 organizations from the civil rights, sports, health and fitness, and education communities into the **Alliance for Athletics Equity** for Students with Disabilities.
Facilitated the commissioning of a Government Accountability Office study in 2008 to examine the state of physical education and athletic opportunities for students with disabilities in secondary and post-secondary educational institutions. The findings of this study, released in June, 2010, confirmed the need for continued action and advocacy on behalf of students with disabilities.

Secured the commitment of the Department of Education to provide resources to assist states and schools in serving students with disabilities in physical activity and sport settings and to produce guidance to clarify a schools’ responsibilities under Section 504 of the Rehabilitation Act of 1973 to provide athletic opportunities for students with disabilities.

Building on this momentum, the Inclusive Fitness Coalition (IFC) provides an organizational platform that has launched a comprehensive initiative that will advance systemic change for individuals with disabilities through a coordination of policy, advocacy and education efforts. A core issue for this group is to address the barriers inhibiting individuals with disabilities from participating in sports and physical activity programs, while simultaneously creating a national advocacy movement for the inclusion of people with disabilities in physical activity and sport. As part of this advocacy effort, IFC partnered with the University Center for Excellence in Developmental Disabilities at Georgetown University to host the Symposium on Physical Activity and Sport for People with Disabilities.
Conference Overview

The Inclusive Fitness Coalition and the University Center for Excellence in Developmental Disabilities at Georgetown University hosted the Physical Activity and Sport for People with Disabilities Symposium and Strategic Planning Meeting, June 21-22, 2011. The symposium and strategic planning meeting brought together key stakeholders to create a community blueprint for action. Experts in the field of activity, fitness, sports, and athletics for people with disabilities worked together to develop a strategic plan for how these various sectors can collaborate to expand physical activity, fitness, and sports for people with disabilities and advance the forthcoming policy recommendations of Department of Education, specifically for students with disabilities.

The one day strategic planning meeting (June 21, 2011) followed by a one day Capitol Hill Education and Advocacy Day (June 22, 2011) served as a key opportunity to follow-up on the June 2010 Government Accountability Office (GAO) study on the status of physical activity and athletic opportunities for students with disabilities. (See Appendix for complete study and accompanying policy recommendations). As a result of the recommendations put forth by the GAO study, the Department of Education has committed to:

• Clarifying schools’ obligations under the Rehab Act to provide athletic opportunities for students with disabilities.
• Providing resources and facilitating information sharing to assist states and schools in serving students with disabilities in physical education and athletics.

On June 21, key stakeholders, representing a variety of interest groups (youth sports, disability rights, disability sports, civil rights, research/academia, government, health and fitness, and grassroots organizations), met in Washington to develop a comprehensive strategic plan. The attendees represented key sectors of the community that are needed to mobilize a comprehensive strategic plan for improving physical activity access for individuals with disabilities. Attendees committed to actively engage in the execution of the strategic plan. (See Appendix for complete list of attendees).

The key purpose of the Physical Activity and Sport for People with Disabilities Symposium and Strategic Planning Meeting was to create a blueprint on how key stakeholders will collaborate to advance physical activity opportunities for people with disabilities. The Symposium was designed
so that following this meeting, the participants would:

• Identify key disparities in sport, fitness, and athletic opportunities for people, especially students, with disabilities.
• Be aware of a variety of local and national initiatives that have been developed to advance sport, fitness, and athletic opportunities for people, especially students, with disabilities.
• Commit to executing the strategic plan developed at the meeting.

Keynote/Opening Panel

The conference commenced with an opening panel of experts and key stakeholders to provide the attendees with an overview of the issues surrounding physical activity and sport for people with disabilities. Below is a summary of the panel discussion.

WELCOME & OVERVIEW

TERRI LAKOWSKI, IFC Policy Chair, moderated the panel and opened with a discussion of the purpose of the Symposium and goals for the day’s sessions.

TERRI LAKOWSKI is the Director of Active Policy Solutions, a consulting firm that works with clients to provide special expertise in social change, government relations, and community outreach. Prior to starting Active Policy Solutions, Terri served as the Public Policy Director for the Women’s Sports Foundation, where she was responsible for the operation of the Foundation’s Public Policy Department, which provides education and advocacy to combat discrimination in sport. In this capacity she oversaw the execution of all of the Foundation’s advocacy and public policy projects, participated in press conferences and Congressional lobbying activities to advocate on behalf of Title IX and other gender discrimination laws, and developed state and local education and advocacy initiatives to improve athletic opportunities for girls and individuals with disabilities in both school and community recreational athletic programs.

JIM WHITEHEAD, Executive Vice President, ACSM and Executive Committee Co-Chair, IFC followed Lakowski and provided background information on the mission and purpose of the IFC and its Policy Working Group. Whitehead summarized the health and physical activity landscape for people with disabilities, emphasizing the need for increased advocacy and action to expand physical activity opportunities for people with disabilities—particularly among youth.

JAMES R. WHITEHEAD is the Executive Vice President of the American College of Sports Medicine (ACSM) in Indianapolis, Indiana, a position he has held since 1990. Prior to his appointment at ACSM, Whitehead served in executive roles at the American Academy of Otolaryngology—Head and Neck Surgery in Washington, D.C. (1987-1990), and with other health-related foundations and associations. Whitehead also has served as consultant and adviser to officeholders and candidates at national, state, and local levels. Whitehead has published in health, public policy, and organizational literature. His area of research and practice focuses on innovation within planning processes, as well as health policy and administration. He has served in leadership capacities for more than 125 organizations, including the Joint Commission on Sports Medicine and Science, Wilderness Medical Society, National Association for Health and Fitness, National Coalition for Promoting Physical Activity, and the National Institute for Fitness and Sports.
IM PACT O F SPO RT FO R PE O PLE W ITH  D ISABILITIES

LISA FO LLO W AY, a parent of an eighth grader with spina bifida, spoke about the personal struggle she and her family is undergoing to gain access to athletic participation opportunities at her son’s school. Followay’s son Casey, an avid racer in track and field, wanted to participate on the mainstream track team at his school in Ohio. After persistent advocacy with the school and high school athletic association, Followay was able to secure his ability to train with the team—but the school still denied Casey the right to compete with the other student athletes. Followay spoke eloquently about how much it meant to Casey to be able to participate with his peers, as well as the struggles he faced dealing with the stigma and barriers of not having equal access to the team.

LISA FOLLOWAY received a Bachelor of Science Degree from Ashland University and currently serves as the Executive Director of the Adaptive Sports Program of Ohio which she founded in 2009. As a parent of a child with a disability she is passionate about advocating for the rights of people with disabilities.

STATE O F H EALTH  IN  YO UTH  W ITH  D ISABILITIES

JAM ES RIM M ER , PhD, Director of NCPAD and the Executive Committee Co-Chair, IFC, discussed the prevalence of obesity and obesity-related secondary conditions in youth with disabilities. According to Dr. Rimmer, youths with disabilities account for 9.2%, or 6 million, school-aged children in the United States. The epidemic of childhood obesity observed in youths without disabilities is an even more serious health issue for youths with disabilities. Compared with youths without disabilities, youths with disabilities are generally less physically active and their lifestyle health behaviors (eg, social participation, parent supervision, diet) are often markedly different. (See Appendix for Dr. Rimmer’s PowerPoint Presentation).

JAMES RIMMER, Ph.D., is a Professor in the Department of Disability and Human Development of the College of Applied Health Sciences at the University of Illinois at Chicago, and adjunct professor in the Department of Physical Medicine and Rehabilitation at Northwestern University Feinberg School of Medicine and Rehabilitation Institute of Chicago. He is Director of two federally funded Centers, the National Center on Physical Activity and Disability (funded by CDC) and the Rehabilitation Engineering Research Center on Recreational Technologies and Exercise Physiology Benefiting Persons with Disabilities (funded by the National Institute on Disability and Rehabilitation Research). Dr. Rimmer’s research has focused on the effects of physical activity and nutrition on reducing secondary conditions, including obesity and deconditioning, in adults and youth with physical and cognitive disabilities. He has published over 90 manuscripts and book chapters and given over 100 invited presentations to national and international audiences on topics related to physical activity, health promotion, rehabilitation engineering, secondary conditions and disability. He is also principal investigator of a 5-year NIH clinical trial examining the impact of the built environment on obesity in people with mobility disabilities. He has received over $23M in federal funding since 1997. Dr. Rimmer was recently appointed by HHS Secretary Leavitt to the Scientific Board of the Coordinating Center on Health Promotion of the Centers for Disease Control and Prevention, and was one of 13 members selected to the HHS Physical Activity Scientific Advisory Committee.
PRO FILE OF SCH O O L S P O RTS & PH YSIC AL ACTIVITY PRO G RAM S

BEV ER LY  VAUGH N, Executive Director, AAASP, provided an overview of the state of school based physical activity opportunities for students with disabilities. She discussed the fact that despite existing laws, like the Rehab Act, which mandate schools provide physical education and sports opportunities for students with disabilities, they continue to face pervasive inequities in terms of accessing programs and being provided with equal resources and benefits in these programs as their peers without disabilities.

EX AM PLES O F FED ERAL EN G AG EM EN T

K AR EEM  D ALE, Special Assistant to the President for Disability Policy, discussed how government officials can become more engaged in supporting efforts to advance athletic opportunities for students with disabilities. Emphasizing his own personal experience as an athlete growing up, Dale spoke about the important impact and benefits that youth with disabilities derive from sports and physical activity participation.

AAR O N  BISH O P, the Executive Director of the National Council on Disability, also highlighted the need for coordinated government efforts to promote health and physical activity for individuals with disabilities.
AARON BISHOP is currently the Executive Director of the National Council on Disability—an independent federal agency that advises congress and the President on disability policy. Aaron has almost 20 years of experience working with and for individuals with disabilities in both the direct practice and public policy sectors. Most recently he was professional staff for the U.S. Senate Health, Education, Labor and Pensions (HELP) Committee for Senator Mike Enzi. Aaron moved to Washington in 2001 accepting a position as the Site Coordinator for the National Service Inclusion Project for the Association of University Centers on Disabilities (AUCD) before becoming the Director of Technical Assistance for AUCD. In January of 2003, he received a Kennedy Foundation Public Policy Fellowship to work on federal disability policy and legislation and was placed as committee staff for Senator Judd Gregg, Chairman of the Committee on Health, Education, Labor and Pensions (HELP) and Mike Enzi, Chairman and Ranking Member of the HELP Committee. In addition to these positions, Aaron has worked as a researcher at several laboratories across the country. He has conducted numerous presentations on disability and race, and has volunteered with several sports and charitable organization such as the Madison Memorial Youth Basketball League, the Committed 100 Black Men Helping Boys, and People First of Wisconsin.

SUMMARY AND QUESTIONS FROM THE PARTICIPANTS

TERRI LAKOWSKI, IFC Policy Chair, concluded the panel with a discussion of the need for coordinated efforts to support the forthcoming action from the Department of Education, which includes:

• Clarifying schools’ obligations under the Rehab Act to provide athletic opportunities for students with disabilities.
• Providing resources and facilitating information sharing to assist states and schools in serving students with disabilities in physical education and athletics.

Lakowski summarized the remarks of the other panelists and then opened the panel for questions and comments. The discussion that followed centered on the barriers currently limiting access for participation of students with disabilities and the need for coordinated efforts to move this effort forward.
Work Group Sessions

Following the opening panel, the Symposium participants broke into Work Groups. The Work Groups focused on developing a strategic action plan for how their sector could contribute to advancing physical activity, fitness, and sports for people with disabilities and advancing the recommendations of Department of Education, specifically for students with disabilities.

THE BREAKOUT GROUPS INCLUDED:

- **Disability Sport**—organizations providing sports opportunities for individuals with disabilities
- **Disability Rights**—organizations serving individuals with disabilities across a variety of needs
- **General Sport**—sports organizations/entities that are not disability specific
- **Research/Academic**—academics and researchers in the disability, health, or sports arena
- **Health/Fitness**—organizations working on promoting access to physical activity and/or healthy lifestyles
- **Grassroots**—organizations working with individuals with disabilities on the ground level by providing services and/or sports and physical activity programs

The goal of each group was to create a strategic plan, identifying what their sector could do to advance school-based sports and physical activity opportunities for students with disabilities. Each of the work groups addressed the following focus points:

- What contributions can organizations like ours make to educate, provide resources, and support parents and students in accessing school based physical activity programs?
- How can groups in our sector provide information and technical assistance to school officials, coaches, and administrators to encourage or support the provision of physical activity programs for students with disabilities?
- What other organizations in our sector need to be engaged to execute the strategies identified above and how can we engage them in this effort?
- When the Department of Education releases its new policy recommendations this year, what information will organizations in our sector need to know and how can we deliver it to them?
- What can organizations in our sector do to promote, provide education and technical assistance to identified stakeholders on the new ED policies?

WORK GROUP REPORTS

The discussion on the following pages highlights the key points/recommendations that came out of each working group.
## DISABILITY SPORTS

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<tr>
<th>ISSUE</th>
<th>DISCUSSION POINTS</th>
<th>RECOMMENDATIONS</th>
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<tbody>
<tr>
<td>Inclusion</td>
<td>Need to define inclusion in relationship to sports and athletics</td>
<td>Training and Education: provide OCR and others with training curriculums • Toolkits, multimedia technical assistance, webinars, resource lists of key contacts/material</td>
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<tr>
<td>Best Practices</td>
<td>Includes key components of: • Choice • Opportunity • Access Mainstream sports opportunity that take into consideration functional ability</td>
<td>Needs Assessment: plan for program design should be based on a community needs assessment that includes opportunities and needs of disabled student population • In collaboration with disability sport organizations and policymakers</td>
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<td>Focus on the longer term athlete/youth development model (not just competitive sports)</td>
<td>Long term athlete development model: (see below) A model of students as athletes for life promotes fitness and participation in competitive and/or community sports and recreation opportunities</td>
<td>Surveillance Information: need for stakeholders to design or modify existing methods used to monitor and identify students with disabilities, and their physical activity participation</td>
</tr>
<tr>
<td>Key Tenets</td>
<td>• Importance of learning the fundamentals of sports so everyone can have a good time • Educational component v. competitive focus • Introduce physical activity for children with disabilities at the same time as their peers • Focus on fundamental skills for a life time of sports and physical activity • Train educators for skill acquisition</td>
<td>National Campaign: to promote awareness and education • Potential sponsorship from an elite champion/key event (especially in conjunction with release of ED recommendations) • Campaign must include key stakeholders: – National Federation of State High School Associations – NCAA – Olympics/USOC – National Association of College Presidents – National School Board Association – Physical education teachers – Coaches associations</td>
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### LONG TERM ATHLETE DEVELOPMENT MODEL

<table>
<thead>
<tr>
<th>Awareness/Recruitment</th>
<th>ACTIVE START: 0-6 year olds</th>
<th>LEARN FUNDAMENTALS: 7-9 year olds</th>
<th>LEARN TO TRAIN: 10-13 year olds</th>
<th>TRAIN TO TRAIN: 13-16 year olds</th>
<th>TRAIN TO COMPETE: 16 and older</th>
<th>LEARN TO WIN: Competitive Recreation</th>
<th>TRAIN TO WIN: Active for Life</th>
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### THE SYMPOSIUM

#### DISABILITY RIGHTS

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<th>ISSUE</th>
<th>DISCUSSION POINTS</th>
<th>RECOMMENDATIONS</th>
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| Language                   | The group discussed at length the importance of making sure the policy guidance that comes out of the Department of Education uses the appropriate language to emphasize inclusion of students with disabilities in school based physical activity settings | • Emphasis on mainstream v. separate programs for students with disabilities  
• Clear definition of what it means for schools to provide equal opportunities  
• Recognize where Title IX analogies can be used for comparative language-and when distinctions need to be drawn |
| Inclusionary Programming   | How can the Rehab Act requirements be emphasized/taught to better ensure compliance and expand school based opportunities  
Creating a culture of pro-active compliance with the overall mandate | • Training of Legal Obligations for 504 coordinators, special education teachers, athletic directors, coaches, administrators  
• Training on how and when to develop adapted or unified program |
| Data Collection            | Need for improved and long term data collection on students with disabilities—and their participation rates in school based physical activity programming. Use data systems for both understanding gaps and looking at outcomes | • Initial focus should be on K-12 collection  
• Need to create categories that are broad and encompassing to promote students with disabilities to think of themselves as athletes |

#### GENERAL SPORTS

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<tr>
<th>ISSUE</th>
<th>DISCUSSION POINTS</th>
<th>RECOMMENDATIONS</th>
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| Education and Awareness    | Identify key groups with a single point of contact  
Expand/connect constituency base | Develop best practices or model programs to share with other programs  
• Webinar as a key tool to help promote education and awareness |
| Expansion of Membership    | Need to grow to maximize reach | Groups that should be at table include rehab associations, able-body sport organizations, self-advocates, community groups, foundations, parent groups, teacher groups, teaching institution reps, legal reps  
Need to develop benchmarks  
• What does a successful communication strategy look like?  
• What does success of ED recommendations mean? |
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<th><strong>ISSUE</strong></th>
<th><strong>DISCUSSION POINTS</strong></th>
<th><strong>RECOMMENDATIONS</strong></th>
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<tr>
<td>Reframe message of school based sports to include colleges and advocacy within our own institutions</td>
<td>Growth should be expected at collegiate level including scholarship and competitive options Higher education institutions need to find ways to disseminate the information from research to parents and caregivers, etc. who won’t necessarily read the research or know how to apply it</td>
<td>Better use of resources: • ED information dissemination OCR guidance for inclusion and consequences for non-compliance • PATEAS: summarizes all these concerns by giving the conversation structure (Policy Awareness Training Education Advocacy Science and Surveillance)</td>
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<td>Take the information into the public health arena</td>
<td>• Obtain useful data on disability • Need accurate disability identifiers • Surveys • Be proactive in getting folks to participate in community v. waiting for the person to come to you and ask for accommodations • Need good surveillance so we can bring this into the health and wellness policy discussions • Need to pair with social inclusion • Research and higher education help make the argument why sports and physical activity need to be funded on federal level • Good place to start: GA and MD model with data on what worked and then collect data on places that have not been able to implement • Need to create a centralized data base and make it available nationally, include physical activity, nutrition • Include a database of opportunities that exist in schools and communities, etc. that can be searched by age, disability, etc.</td>
<td>Establish a national surveillance system that considers physical activity for people with disabilities • Fund research and create a research agenda and build in student participation from the various fields to find out where to target effort and money in places that would be effective in decreasing disparities for children, youth and young adults. • Create National Databases (may be able to leverage some existing databases) • Provide National data with disability identifiers • Opportunities in schools and communities on the way the system works including Federal, State, Regional, Local (youth sports, community opportunities), not just special programs, but how all programs should be accessible for all, spectrum of options • Convince agencies to put disability identifiers in physical activity (DOE, CDC) YRBS, MCH, Special Needs Survey—assess GAO report and see if we can influence the identifiers in this survey in future • Create a data base that is accessible and useful to parents, athletes, educators, consumers, administrators, coaches, sports industry, etc.</td>
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<tr>
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| Have to get students within our disciplines to understand the value of learning and research in this area. However, the research cannot become the domain of one discipline | • Eliminate perceived barriers  
• Cost/Economics—highlight the economics of discrimination  
• Perceived competence and confidence for teachers and coaches in providing PE and physical activity for children, youth, and young adults in providing these services and sport opportunities  
• There are levels of this—volunteers have/need different knowledge than a coach of competitive sports | Embed this within training and graduate program curricula |
| Base funding for interdisciplinary research in critical gaps in data/research to show value on this issue | • Funding at a federal level makes this research and information a priority  
• Use of databases | Create funding opportunities  
• Base funding for interdisciplinary research to determine gaps in data/research. Solicit partners in the research to include a broad coalition including people with disabilities.  
• Identify what are the processes in the government’s various departments for setting the agenda for grant funding and including or creating a space for competitive funding?  
• Can we make disability and health a new research priority area for funding?  
• Look to non-traditional funding sources like sports industry, NCAA, professional associations etc. |
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<tr>
<td>Research/Training</td>
<td>• How to best use what is being done in this area of research and expand</td>
<td><strong>Research Areas:</strong></td>
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<td>• How to best disseminate research findings (knowledge translation)</td>
<td>• ED policy implementation</td>
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<td>• How to train new researchers and attract interest to this area of research</td>
<td>• Report card</td>
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<td>• Best Practices</td>
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<td>– What is the progression of opportunity (continuum from inclusive to</td>
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<td>specialized programs) for children as they age and transition into adulthood?</td>
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<tr>
<td>Training</td>
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<td></td>
<td>• Develop a manual on how to work with people with disabilities for coaches</td>
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<td></td>
<td>• Create regional technical assistance centers to provide training and</td>
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<td></td>
<td>technical assistance to implement inclusion</td>
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<td>– Use or leverage what has already been created. If there is no TA center</td>
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<td>we create it or use what exists. Can be similar to the Disability Business</td>
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<td>Technical Assistance Centers (DBTACs)</td>
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<td></td>
<td>– Link resources and users</td>
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<td>– PR campaign to make them known</td>
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<td>– Map what TA Centers exist, who their contact is, and disseminate</td>
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<td>information and materials</td>
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<td>– Advocate for more training programs, not enough info as part of the data</td>
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<td>(GAO and others)</td>
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## HEALTH AND FITNESS

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| Build Awareness            | Support physical activity programs for students with disabilities by focusing priorities:  
   Effective Outreach        | • Education of best practice, models and behavioral theory,  
   Community Resource        | • The need to provide resources and  
                               | • Garner support from vendors                                                        | • Provide information about effective models and programs  
                               |                                                                                 | • Technical assistance to school officials, coaches, and administrators  
                               |                                                                                 | • Disseminating information via databases, newsletters (organizational, etc.),  
                               |                                                                                 | parent/community organizations (PTA/PTO), faith based organizations, community health centers, school boards, other networks  
                               |                                                                                 | • Train the Trainer (person interacting with the child)                              |

## GRASSROOTS

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| Education                  | Increase awareness of basic rights  
   Disseminate information on best practices  
   • Best practices—shared for replication  
     – Families/Caregivers/People with disabilities  
     – Schools and teachers  
     – Public                                                                 | Develop training for people with disabilities, patients, providers  
   Provide electronic tool-kit that includes:  
   • Workshop template  
   • List of resources  
   • List of experts  
   • Personal stories on impact of physical activity/sports |
| Membership Base            | IFC needs to grow the coalition of members to maximize effect of an education and outreach campaign | Reach out to: Special Olympics, ARC, NPRA, AAHPERD, NFHSA, NCPERID, school nurses  
   Need mass distribution using a variety of new social media and traditional media | • Social Marketing—social media, webinars  
   • Messaging to specific audiences  
   • Deploying a “Train the Trainer” Model  
   • Publicizing the public policy messages both federally and locally  
   • Identifying a champion/key messenger to be the face of the issue  
   • Educate public at community events—PTA, “Taste of____” & other community events that are highly visible for more grassroots exposure |
Based on the working group reports, the following recommendations represent an integrated strategic plan for the Inclusive Fitness Coalition to advance school-based sports and physical activity opportunities for students with disabilities.

Key Issues
The key barriers to participation that was consistently discussed throughout the work group sessions that prevent students with disabilities from participating in sport and physical activity include:

- **Lack of policies** detailing a program or educational institution’s obligations to provide physical activity and sport opportunities for individuals with disabilities.
- **Lack of resources and training** to administrators and program providers on how to create programs and inclusive environments for individuals with disabilities.
- **Absence of** inclusive and disability specific physical activity programs in schools, colleges and universities.
- **Lack of awareness by parents and youth with disabilities** of their right to access and participate in physical activity and sport programs.
- **Lack of persistent advocacy and outreach** to policymakers and administrators of the benefits of physical activity and sport programs on behalf of individuals with disabilities.

Project Goals

**LONG TERM**
- Increase opportunities for individuals with disabilities across the United States to participate in sport and physical activity programs.

**SHORT TERM**
- Build sustainable infrastructure to provide a clearinghouse of resources and center for advocacy on behalf of individuals with disabilities in sport and physical activity.
Target Audiences

- **Parents/youth.** Empower individuals directly impacted by the ADA and the Rehab Act through education and advocacy training to become advocates for change within their respective educational institutions and community programs.

- **Administrators/Athletic Directors/Coaches.** Engage school and community-based officials and leaders on the issue of inclusion for individuals with disabilities through targeted meetings and trainings and the provision of assistance in developing and auditing disability equity plans.

- **Educators and Related Service Providers.** Engage education and related service providers under IDEA to advocate for students they are serving and to include activity, sports, and athletic participation on Individualized Education Programs.

- **Policy Makers.** Cultivate and work with federal and state policymakers to advance policies that support individuals with disabilities to participate in sport and physical activity programs.

- **National and Local Community Advocates.** Identify and mobilize a national, state, and local community of activists who can provide technical assistance, education, and resources.

- **Media.** Employ communications outreach to support advocacy campaigns and promote awareness and education on the rights of individuals with disabilities to participate in sport and physical activity programs.

Activities

**ADVOCACY OF NATIONAL AND STATE POLICY**

- Collaborate with the Office for Civil Rights to produce guidance that clarifies schools’ responsibilities under Section 504 of the Rehabilitation Act of 1973 to provide athletic opportunities for students with disabilities.

- Assist the Office of Special Education and Rehabilitative Services with the development of a database of best practices and resources to assist state and school officials in serving students with disabilities in sport and physical activity settings.

- Collaborate with champions in Congress and other executive agencies to integrate inclusive policies for individuals with disabilities into relevant legislation or executive policies and activities dealing with health, physical activity and sport.

- Monitor and explore opportunities to advance state and local legislation and policies to promote sport and physical activity opportunities for individuals with disabilities.

**EDUCATION & TECHNICAL ASSISTANCE**

- Develop a *Disability in Sport and Physical Activity Advocacy Toolkit* for parents and students to use when advocating for disability equity policies within their schools.

- Develop *Know Your Rights* workshops to train students and parents on their rights to participate in school-based sport and physical activity programs.
• Develop targeted position papers, webinars and policy briefings to educate policymakers, program administrators and people with disabilities on the importance of healthy lifestyles and physical activity participation for individuals with disabilities.
• Develop technical assistance centers.
• Establish an 800 Advocacy Hotline and website to provide a central clearinghouse for technical assistance and resources on sport and physical activity programs for students with disabilities to students, parents, coaches, and school administrators.
• Develop a sustainable network and plan to deploy educational resources and provide training and technical assistance to target audiences that effectively uses social media tools and grassroots advocacy/networks.
• Develop an assessment tool to track that learning has occurred during technical assistance and educational outreach.

COMMUNITY ORGANIZING AND PROGRAM DEVELOPMENT
• Expand IFC membership to increase participation of a broader cross sector of stakeholders committed to advancing physical activity opportunities and improving treatment for individuals with disabilities in sport and physical activity programs.
• Engage coalition members to function as a brain trust of key national, state and local “players” who will provide their experience, contacts, institutional access and credibility in implementing national, state, and local advocacy and education to increase physical activity opportunities for individuals with disabilities.
• Identify parents, coaches and students who will advocate for expansion and improvement of individuals with disabilities sport and physical activity opportunities.

LEGAL CONSULTATION AND RESEARCH
• Identify and develop a referral network of attorneys and legal professionals who can provide legal advice and counseling to students, partners, and school and program administrators dealing with legal questions surrounding sport and physical activity for individuals with disabilities.
• Develop and provide legal trainings and workshops to state education officials and school administrators pertaining to accommodating students with disabilities in school-based sport and physical activity programs.
• Develop and provide legal trainings and workshops to community sports and physical activity administrators pertaining to accommodating students with disabilities in community based sport and physical activity programs.
• Perform ongoing research to study the state of opportunities for individuals with disabilities in sport and physical activity programs.
• Identify and create funding opportunities for interdisciplinary research to determine gaps in data/research for physical activity and health for people with disabilities.
• Create a national surveillance system that creates an online map and database, utilizing GIS/GPS technology to map and make accessible information about existing physical activity and sports programs for individuals with disabilities and track changes throughout the development of the project. Use of existing surveys and databases with better identifiers for disability and physical activity may be an efficient way to set this up and make widely available to researchers across the country.

Measures of Success

The Inclusive Fitness Coalition will evaluate the success of this strategic plan by studying the immediate short term impact, as well as longer term outcomes of the proposed activities. In addition to increasing programs and opportunities for participation, success will be measured by the level of sustainability of any infrastructure that is created in local communities, educational systems (e.g., elementary, secondary and post secondary) at local and state levels, as well as the success of policy changes on a national level and the extent of their effects.

SHORT TERM OBJECTIVE

Improve the knowledge, awareness, and skills to collaborate under a shared mission of youth development through inclusive sport and physical activity programming of advocates, teachers, coaches, and other key people in the lives of students with disabilities.

Indicators

• Knowledge of the beneficial relationship of physical activity to health and the barriers preventing youth with disabilities from participating in physical activity and sport.
• Knowledge of national, state and local resources and programs available to increase opportunities for inclusive and disability specific programming and an understanding of how to utilize those resources to better connect students with disabilities with them (e.g. parents know how to advocate for physical activity).
• Knowledge of best practices and policies for making sport and physical activity programs and facilities more accessible.
• Specific skills and tools for coaching/working with and integrating youth with disabilities within sport and physical activity programs.
• Network of advocates and organizations that are a resource and voice for students with disabilities at elementary, secondary and post-secondary institutions and community sport and physical activity programs.

MID-TERM OBJECTIVE

Communities involved will develop collaborative oversight, whereby organized systems will ensure that every child has the opportunity to participate in physical activity.
Indicators

- Increases in the number of inclusive/disability specific sport and physical activity programs in schools and community physical activity programs.
- Increases in collaborative systems for connecting individuals with disabilities and their families to appropriate programs, such as referrals to legal and technical experts to work with administrators or parents in developing sport and physical activity programs for individuals with disabilities.
- Increases in adapted athletic and physical education programs for students with disabilities (e.g., wheelchair basketball, wheelchair rugby, goalball).
- Increases in sustainable partnerships that bring training, resources, and advocacy to state and local education officials.
- Increases in national and state policies to promote sport and physical activity programs for individuals with disabilities.

LONG TERM

*Entire communities will take responsibility* for the healthy development of their youth by working together to ensure that *every child, adolescent and young adult*, has the opportunity to be physically active in healthy, safe and inclusive environments. Programs will have sustainable funding, leadership, and capacity. As a result, individuals with disabilities in these communities will become *self aware, contributing members of society*.

Indicators

- Increased capacity and sustainability of school systems, policymakers, and organizations making inclusion of individuals with disabilities in sport and physical activity programs a priority will be seen through:
  - strong leadership
  - systemic organizational infrastructure developments
  - increased accessible and safe physical spaces
- Individuals with disabilities and their families develop life-long appreciation for physical activity and healthy living.
- Individuals with disabilities feel safe and included in physical activity and athletic programs.
- Developed networks of leaders working to ensure universal access to sport/physical activity.
- Development of workforce pipeline program for community advocates for physical activity and life skills leadership with knowledge and skills to focus specifically on creating inclusive environments for individuals with disabilities.
- Increased social capital for students with disabilities, who advance to college (as athletes) and professional jobs.
- Individuals with disabilities become self-aware, civically engaged, contributing members of society.
References


APPENDICES

Click a title below to view the document

UNDERSTANDING THE ISSUE
Inclusive Fitness Coalition (IFC) Policy Overview
U.S. Government Accountability Office (U.S. GAO) Study
IFC GAO Study Highlights
Congressional Letter-GAO Study
Department of Education Letter-GAO Study
IFC Policy Recommendations-Overview
Q and A
Healthy Disparity Statistics

SYMPOSIUM DOCUMENTS
Conference Agenda
Participant List
IFC Overview
Jim Rimmer PowerPoint Slides