# ADAPTING SOCCER INSTRUCTION: INCLUDING STUDENTS WITH DISABILITIES IN PHYSICAL EDUCATION



Soccer is one of the fastest growing sports in the United States today because of its availability to those of all ages, ability levels, and sizes. It offers a chance to improve cardiorespiratory endurance, specific types of agility, eye-foot coordination, and a chance to have fun. After receiving instruction, practice, and acquiring the skills needed for soccer, students can partake in one more physical activity with family and friends.

The activity can be adapted for individuals with disabilities. With instructional emphasis on personal skill development and a classroom environment that encourages everybody to participate to the best of their

ability, each student can benefit and inclusion can flourish.

It is in physical education at the junior high/middle school level that the foundation of sport skills are established and then applied during intramural and community recreation programs. Whether students with disabilities go on to join a disability sports program in the community or recreate with family and friends, they need the same instructional opportunities as their classmates without disabilities.

#### **Assessment**

Evaluate each student's present level of soccer skills for probability of success. Assess previous experience, fitness level, motor functioning, attitude toward his/her disability, and willingness to participate.

## **Safety Considerations**

- 1. Present activities according to the student's physical characteristics and capabilities, as well as his/her mental age.
- Deafness and hearing impairment: In cases where hearing loss is present, it is advisable to avoid participation when there is excessive change in temperature, excessive wind, or dampness. If exposure is unavoidable, the student should wear earplugs.
- Orthopedic impairment: Be sure the soccer field is free from foreign objects or obstacles. Instruct students with amputations and other physical disabilities on the proper methods of falling.
- 4. Asthma: Activity should occur in areas that are minimal in dust and allergic substances.
- 5. Know the difference between insulin shock and diabetic coma and how to administer first aid. Coordinate activity with food intake and insulin injections.
- 6. Visual impairments: Use bright colored equipment when students are partially sighted. Be sure to establish audio signals for a ball coming towards the individual.

# **Instructional Adaptations**

The following ideas are designed to facilitate the inclusion of students with disabilities into general physical education during instruction of soccer. Successful participation for some students requires equipment which has been adapted to their particular needs. Requests for purchase or construction of equipment can be facilitated through the Individual Education Program (IEP). If special equipment is necessary to help a student progress in physical education, then it should be identified at the Case Conference and included on the IEP form.

# General adaptations can include:

- 1. Use kinesthetic teaching.
- 2. Employ the buddy system.
- 3. Allow rule modifications or adjustments due to ability level.
- 4. Use visual aids or hand signals.

Specific adaptations for associated disabling conditions are listed below. The adaptations are provided in categories by disability in order to facilitate easy access to the information. However, each student with a disability is unique and capable and should not be limited within a category.

# **Cognitive and Sensory Disabilities**

## Deaf/Hearing Impairment

- 1. Establish basic hand communications.
- 2. Have a general outline of what will be covered in class written out in advance.
- 3. Employing the buddy system.
- 4. Physical demonstrations of the skills.
- 5. Face the student so it is easier for him/her to read your lips.
- 6. Minimize background noise.

## Mental Retardation

- 1. Present instruction slowly and clearly.
- 2. Use demonstration and emphasize imitation.
- 3. Give brief directions and repeat them often.
- 4. Enhance successful experiences (larger ball, shorter distance to kick, larger goal).

## Visual Impairment

- 1. Kicking
  - a. Allow to kick with toe.
- 2. Throw In

- a. Talk louder so student can hear direction of voice.
- 3. Goalie
  - a. Reduce the height and width of the goal.
- 4. Allow student to work with a partner.
- 5. Minimize background noise.
- 6. Use larger and/or beeping ball for better tracking.
- 7. If the student is partially sighted,
  - a. Use brighter soccer ball (pink, bright orange, yellow).
  - b. Paint the field lines with a bright color.
  - c. Have student's teammates wear bright colored clothing.
  - d. Have a bright colored net or goal posts.

#### **Affective Disabilities**

#### Autism

- 1. Use demonstrations or pictures for the student to see.
- 2. Do not use too many verbal cues because student may have trouble understanding.
- 3. Practice with a partner and then in smaller groups; gradually work towards larger groups.

#### Emotional Disturbance

- 1. Encouragement is always essential.
- 2. Individual, partner, and then small groups work best.

# **Psychomotor Disabilities**

## Orthopedic Impairment

- 1. Wheelchair
  - a. Allow student to pass with his/her hands.
  - b. Allow student to use the footrests to dribble the ball.
  - c. Have student wear protective footwear.
  - d. Allow student to dribble ball by tossing ball into the air.
- 2. Wrist and elbow supports would also aid in throwing the ball in.
- 3. Use smaller ball or foam ball for easier gripping for those with gripping difficulties.

## One Arm Involvement

- 1. Throw-In
  - a. Student can use one arm motion to throw the ball, like throwing a baseball.
  - b. Use smaller ball for easier gripping.
  - c. Use wrist support for student with limited hand strength.

#### Two Arm Involvement

- 1. Throw-In
  - a. Allow student to kick the ball instead of throw.
- 2. Goalie
  - a. Shorten the height and width of the goal area.
  - b. When student traps ball with both feet, do not allow other players to kick the ball from them (i.e., when the goalie has possession of ball with both hands no one can touch the ball).
- 3. Place student in a field position, rather than in the goalie position.

# One Leg Involvement

- 1. Allow student to use a crutch or assisting device to balance self.
- 2. Allow student to stop the ball with his/her crutch or assisting device.
- 3. Use larger ball so it is easier to kick and trap.
- 4. Allow student to work with a partner.
- 5. Allow student to play fullback, forward, or goalie where a lot of dribbling does not occur.

## Two Leg Involvement

- 1. Allow student to pass with his/her hands.
- 2. Dribbling
  - a. Toss ball in hands (up and down) while moving.
  - b. Push ball with footrests of wheelchair.
- 3. Trapping
  - a. Use soft ball so they can trap between chest and lap.
  - b. Use lighter ball so the ball floats in the air and is easier to trap.
- 4. Goalie
  - a. Play in a chair.
  - b. Lay down in the goal area to cover more distance.
  - c. Make the goal area smaller so there is a smaller area to cover.
- 5. Allow student to work with a partner.

## Other Health Impairment

#### **Asthma**

- 1. Avoid or reduce exposure to cold.
- 2. The field should be located in an area that is as dust free as possible.
- 3. Avoid fields that have recently had the grass cut.
- 4. Place student in a position where a lot of running does not occur (i.e., goalie).

#### Cardiovascular Condition

- 1. Allow student to take all the throw-ins for each team.
- 2. Allow the student to be the goalie where a lot of physical activity is not required.
- 3. Do not rush student to do activities or drills.
- 4. Have a buddy with the student to retrieve far balls.

## **Diabetes**

- 1. Be sure the shinguards are not restricting circulation.
- 2. Students need to check their blood sugar levels a half hour before activity.
- 3. Always have some type of food around.
- 4. Always have water around and encourage student to drink.

Barriers to participation in soccer and other sports by individuals with disabilities are decreasing. More than ever, physical education teachers must endeavor to read professional journals, attend conferences and workshops, and join professional organizations to avail themselves of information on how to teach specific sports to their students of varying skill levels. Being an informed professional is half the battle in allowing students with disabilities to gain access to team sports like soccer.

#### Resources

- Dunn, J. M., & Leitschuh, C. A. (2006). *Special physical education* (8<sup>th</sup> ed.). Dubuque, IA: Kendall/Hunt.
- Philbin, R. (2008). Youth soccer player enjoys competition. *Children With Diabetes*. Retrieved May 4, 2008 from http://www.childrenwithdiabetes.com/sports/Kenny.htm
- Rudy, L. (2008). How to coach a child with autism. *Autism Blog.* Retrieved May 4, 2008, from http://autism.about.com/b/2007/07/09/your-advice-requested-how-to-coach-a-child-with-autism.htm
- Schmottlach, N., & McManama, J. L. (2006). *The physical education activities handbook* (11<sup>th</sup> ed.) San Francisco, CA: Benjamin Cummings.
- Stopka, C. (2008). Adaptations for physical activity. *PE Central*. Retrieved April 24, 2008 from http://www.pecentral.org/store/soccerexcerpt.pdf

This information was developed by Sarah Purdy,
Adapted Physical Education student at Manchester College, Spring 2008.
The adaptations and teaching strategies contained in this document are only suggestions. Each student must be considered individually, and in many cases, a physician's written consent must be obtained.