Research on the leisure sporting habits and issues of access to leisure sport among 18-65-year-old individuals with VI living in Budapest

Abstract of PhD Thesis

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INTRODUCTION

Every single individual should have equal access to regular physical activity. However, many populations with fewer opportunities, individuals with disabilities among others, cannot enjoy sports on equal terms to all. In Hungary it is mostly unknown by members of the society, as well as sport professionals, that people with disabilities wish to get engaged in leisure sports, and that meeting their special needs is not only an obligation, but may as well be profitable for leisure sport service providers. While the moral and financial prestige of professional parasports have constantly been increasing since the 1989-1990 political and economic changes of the regime, the involvement of individuals with disabilities in leisure sports is still paid little attention. Rising activity levels of the inactive Hungarian population is crucial, as healthy and fit employees are a key to overall national economic improvement. The European Union considers sport as an efficient tool of social inclusion, which is of special importance for individuals with disabilities. Leisure sport must be available for all, including people with disabilities, and their special needs must be taken into consideration. Leisure sport participation of individuals with VI is little investigated by both international and national researchers.

OBJECTIVES

In my doctoral thesis I am analysing visually impaired individuals' leisure sport participation habits and factors it is influenced by. In my research I identified factors which support and others which inhibit participation, for instance the educational background of sport socialization.

In my research I sought for answers to the following questions:

1. In what proportions do students with VI studying in mainstream settings take part in physical education lessons or other extracurricular sport activities?
2. Do adults with VI, who were physically active children, get involved in physical activity more frequently than those who were not active in their childhood?
3. Which free time activities are typical in the population?
4. In respondents' opinions which factors support and which inhibit their sport participation?
5. Doing sport together with sighted peers encourages or discourages individuals with VI to take part in leisure sport activities?

6. What are visually impaired people's impressions about sport professionals' attitudes towards the sport participation of people with disabilities in general, and about their knowledge on sport participation of individuals with VI in particular?
7. In the respondents' opinion, does regular sport participation have a beneficial effect on disabled individuals' social acceptance and prestige?
8. Which sports are popular among people with VI?

The following **hypotheses** were set:

H1 It was assumed that a significant number of students with VI do not participate in physical education lessons or other extracurricular sport activities, and physical inactivity in childhood determines adult leisure sport participation rates.

H2 It was assumed that adults with VI characteristically get involved in indoor, sedentary leisure activities.

H3 It was assumed that the lack of accessibility and adapted equipment contribute to physical inactivity of adults with VI.

H4 It was assumed that fear from sighted peers' and sport experts' ignorance on VI discourages individuals with VI to take part in physical activities together with them.

H5 Inclusive leisure sport activities, in which sighted and non-sighted individuals participate together, were assumed to promote social inclusion.

METHODS AND SAMPLE

In my empirical research quantitative and qualitative research methods were combined. Quantitative data were gathered via a survey, while open questions of the same survey provided material for qualitative analysis. The research was completed with a case study which I carried out as a participant observer at Sports and Leisure Association for the Visually Impaired (Látássérültek Szabadidős Sportegyesülete). Data analysis was carried out by the SPSS12.0 software.

The results of the survey were compared to those of a representative, layered sample of Budapest citizens, carried out in the framework of the International Social Survey Programme by TÁRKI in 2007, which mapped leisure sport participation and health status of the Hungarian population. A limited number of items of the TÁRKI survey were embedded in my questionnaire, since my goal was to gather VI-specific information, too. However, the comparison of data gathered from sighted and non-sighted respondents may show important tendencies.

The survey research was carried out in spring 2012. It contained 43, predominantly closed items. Respondents were 19-65 years of age, all individuals with VI who live in Budapest (N=140).

Several challenges appeared in the process of finding respondents. First, a significant part of the population has limitations in written communication – a large amount of people with VI do not read print or Braille and an unknown percentage of the population, especially elderly individuals, do not use the computer either. Further, the exact number of the population is unknown, because people with disabilities are not obliged to register their disability during a population census and joining a disability-specific organisation is also optional. For these reasons the survey is not representative for Budapest citizens with VI.

RESULTS

The majority of respondents were aged 19-35 (69.3%), had a college/university degree (44.2%). 69.3% had a congenital VI. 49.3% were legally blind, 30% were partially sighted and 20.7% low-vision.

Correlation between school sport socialisation and adult sport participation

20% of respondents attended a segregated kindergarten, 60% a special primary school for students with VI, and 4.3% a special secondary or vocational school. In my research I found it important to map in what proportion students were exempted from attending P.E. lessons, and in what proportion they participated in curricular or extracurricular sport activities. During their primary school studies only 8.6% of respondents were exempted from P.E., all other respondents took part in curative P.E. (8.6%) or general P.E. lessons (82.9%). However, negative tendencies are seen in secondary-school, where 44.3% were exempted, 47.1% took part in general P.E. and 8.6% participated in other physical activities.

The degree of leisure sport participation in adulthood may directly be determined by childhood involvement in physical activity. 61.4% said they took part in extracurricular sport, while 38.6% said they did not participate in any afternoon sport activities. 58.1% of those who were involved in afternoon sports currently do sports on a weekly/daily basis, while only 40.8% of inactive children do so now in their adulthood.

Free time activities

In my research I assumed that individuals with VI have a preference of sedentary free time activities and are physically less active than their sighted peers. Data were gathered by using

related items of the TÁRKI survey. 27.9% of respondents said they do sports, walk or hike every day or at least three times a week. Considering that 27.1% said they do sports at least once or twice a week, the proportion of active individuals with VI is conspicuously high. 30.7% do sports once or twice a year or never. In 2007 35.9% of TÁRKI respondents confirmed doing physical activity on a daily basis or at least three times a week, this percentage is lower among respondents with VI, 27.9%. The 27.1%, who get involved in sports once or twice a week, may easily boost their activity levels by increasing the frequency of participation. Increasing the willingness of participation is crucial among those who do sports once or twice a year or never (13.6%). The TÁRKI survey highlighted even poorer activity levels in 2007, 34.8% of respondents never got involved in physical activity. 14.2% did not specify the most frequent physical activity. 16% walk, and the second most popular activities are, with similar numbers of votes, gymnastics, running and swimming.

Internal and external factors determining leisure sport participation

Parallel to the TÁRKI survey, respondents were asked to mark to what extent different factors motivate their sport participation – 1 meant very important, 4 meant ’not important at all’. Except for the ’looking good’ factor all other factors show a clear difference with the two-sample T-test. ’Physical and mental health’ is important for both populations, but is especially important for TÁRKI respondents (mean=1.52), most of whom marked 1 or 2. ’Meeting people’ is more important for TÁRKI respondents than for the visually impaired sample. ’Competition’ is not important for either population, most respondents with VI marked 4, so recreation seems to be the main goal of physical activity. Getting at the venue of the physical activity may be expected to be a discouraging factor, however, respondents did not find it a relevant problem (mean=1.9). Possible dangers in sport do not discourage members of the visually impaired population (mean=1.6), and respondents do not complain about the lack of help either (mean=1.8). Although the physical danger of sport is not feared from, various other sources of fear appear in answers given to the open questions, e.g. fear from not having enough information, fear from the lack of visual feedback or the difficulties of orientation on the spot. Individuals with VI characteristically go to sport clubs or centres with a sighted guide – only 27.1% said they’d go alone. Qualitative answers clearly show that the dependence on sighted volunteers and the difficulties of fixing times discourage people with VI to do leisure sport.

Physical activity with sighted peers

In both professional parasport and adapted leisure sport non-disabled volunteers are the key to accessibility. 43.6% of respondents believe that non-disabled people help them with pleasure. 46.4% are uncertain about it, which may be linked to varying experience with sighted volunteers. Only 10% do not believe sighted people are not open to help them during sport. The importance of accompanying people often appears in answers to the open questions. Many respondents say it is difficult to find sighted guides, especially in activities (e.g. running) for which each participant with VI needs a guide. Answers show that an individual's openness to accept help depends both on the personality and on whether the person has already got used to the visual impairment. Volunteers, however, appear among the motivating factors, too: many respondents enjoy meeting new people and socialising during sport activities. 80.7% believe sport is a powerful tool for promoting inclusion, and less than 6% believe it is not.

73.6% say sport experts are unaware how to help individuals with VI during sport activities, while only 5.7% find sport experts' knowledge satisfactory. Results of the research show that

LÁSS: a Hungarian good practice

Sports and Leisure Association for the Visually Impaired (LÁSS) is a non-governmental, non-profit organisation, entitled to promote inclusive leisure sport activities among people with and without visual impairment. The NGO is run via the cooperation of sighted and non-sighted volunteers, who share tasks in accordance with individual special needs. Members may choose from a wide range of different weekly sport activities, e.g. aerobics, pilates, belly dancing, 5-a-side football, yoga) and LÁSS arranges numerous national and international sport activities and camps.

DISCUSSION

In today's modern democracies respect for human dignity, equal rights and opportunities must be provided for all. Individuals with disabilities are at the risk of segregation and marginalisation. Although the social status of people with disabilities has improved in Hungary since the political and economical changes of the regime, their opportunities for equitable education and work have been increasing, equal opportunities are still far from being achieved and efforts need to be made at every scenario of life. Only a small number of individuals with disabilities participate in

professional sport, while leisure sport offers a complex experience of recreation to all, regardless of their abilities. Unfortunately, individuals with disabilities face a great number of barriers when trying to get involved in leisure sport and the importance of leisure sport participation in improving the quality of their lives is not acknowledged, though the power of disabled and non-disabled people's joint sport activity in achieving real social inclusion is clear. Before spring 2012 when this survey was carried out, no survey had examined leisure sporting habits of the Hungarian disabled population in general and the VI population in particular. The fact that the field has very little Hungarian literature made setting hypotheses even more difficult.

Experts of special pedagogy and adapted sport experience in their everyday work that only a small number of individuals with VI take part in leisure sport activities on a regular basis. This is why I was really surprised by the finding, according to which around 50% of respondents do sports or walk on a daily/weekly basis. A possible reason for this high percentage is that blind or low vision adults cannot go to work by car, so they need to use the public transport and walk. Unfortunately, the answers do not clarify how much they walk and if walking is part of their free time activities, too. The high proportions may therefore be misleading.

Data show that those students who studied in segregated settings took part in higher numbers than those who attended mainstream institutions. In case of the latter P.E. was often substituted with curative P.E. or swimming. In secondary-school more than half of students did not participate in P.E. lessons. P.E. teachers did not learn at university about how to include students with disabilities in mainstream classes and about adapted physical education. As a consequence, they are afraid of the unknown situation and rather choose to stay away from educating students with disabilities. The fact that students with VI are not included in P.E. may originate in an instinctive act of overprotection, nurtured by the lack of knowledge and understanding of related subject matters. P.E. teachers' openness, positive attitude and creative problem solving skills are fundamental, but further factors are also crucial in providing students with VI access to P.E. These factors are adapted equipment (e.g. bell balls), the accessibility of the gym (e.g. is there satisfactory contrast provided for low vision students), and the number of students in a class is vital – the bigger the group is, the less time the P.E. teacher has for the VI student.

Answers clearly show that there is a need for well-trained sport professionals. It is also crucial that while individuals with VI fully trust their teacher or coach, sport professionals are aware that self-determining individuals with disabilities know their needs best. Results also show that both parties keep distance: while sport professionals are afraid of taking the responsibility of working with VI individuals, the latter keep away from inconvenient situations and do not get involved in leisure sport activities, because they fear from refusal and do not want to be treated in a strange way by inexperienced teachers or coaches. The social model of disability emphasizes that each and every person has the same rights and the focus is not on individual abilities but on participation.

Results of the research clearly show that, though varying levels of policy support are provided, individuals with Vi still do not have equal access to leisure facilities with sighted individuals. The number of opportunities is undoubtedly increasing and together with further attempts for inclusion positive changes are foreseen.

CHECKING THE HYPOTHESES

My assumptions were based on my daily positive and negative experience I have as a person with VI, and my professional knowledge of theory and practice working in adapted sport. After checking my hypotheses I got the following results:

My **first hypothesis**, according to which a significant number of students with VI do not participate in physical education lessons or other extracurricular sport activities, and physical inactivity in childhood determines adult leisure sport participation rates, was fully accepted. All data certified my hypothesis: more than 44% of students were exempted from P.E., in secondary-school 52.9% did not participate in any physical activity with their peers, and activity rates are higher among those who were physically active children.

My **second hypothesis**, according to which adults with VI characteristically get involved in indoor, sedentary leisure activities, was partly accepted. Although more than 90% of respondents said they used the computer every day (this percentage is higher than the frequency of leisure sport participation), which is undoubtedly a sedentary activity, it provides information concerning leisure sport programmes, too.

The **third hypothesis**, according to which the lack of accessibility and adapted equipment contribute to physical inactivity of adults with VI, was accepted.

The **fourth hypothesis**, according to which fear from sighted peers' and sport experts' ignorance on VI discourages individuals with VI to take part in physical activities together with them, was in part accepted.

The **fifth hypothesis**, which states that Inclusive leisure sport activities, in which sighted and non-sighted individuals participate together, promote social inclusion, was only partly accepted; it is a complex hypothesis which I examined only from the perspective of individuals with VI.

RECOMMENDATIONS

The novum of my research is that it maps leisure sport opportunities of people with VI, a topic which is not investigated in the Hungarian literature of sport sciences. It is an interdisciplinary research, since physical activity levels of the population may only be boosted with the active cooperation of various different experts. As described above, the lack of VI-specific knowledge is a barrier for several reasons. Both experts need more specialised information, as much as individuals with VI need information on leisure sport opportunities. Information on the leisure sport involvement of the population should be spread among ophthalmologists, since they are the first source of information most people with eye conditions first meet. Brochures on leisure sport opportunities with contacts to related NGOs should be spread at eye care centres, because seeing that life does not stop after developing a disability, may motivate patients.

Nowadays the vast majority of children with disabilities, students with VI among them, study in integrated institutions. Their participation in P.E., as good practices in Western countries show, is mostly promoted by educating adapted P.E. professionals. Without this special training it is important to deepen special needs teachers' knowledge on adapted sport, who are also qualified to teach P.E. With this special knowledge they may also support fellow P.E. teachers more successfully as itinerant teachers.

The main goal of leisure sport is to give people a chance for entertainment, refreshment and active relaxation. It is a source of joy for participants, therefore they need to have an opportunity to find the activity that fits them most. In Hungary blind and visually impaired people are still believed to have abilities only for doing goalball or judo. I am convinced that this population must be provided equal opportunities to all to be able to fully enjoy leisure sport. It is, of course, important to be realistic about the limits of adaptation; sports like volleyball or handball cannot be adapted to blind people's special needs. There are, however, adaptations, soundball tennis for instance, which surprise even individuals with VI. Thanks to

the processes of globalisation similar creative solutions arrive in Hungary, too, inspiring the population's sport participation.

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