

KOHUT I., IARMOLENKO M.

National University of Physical Education and Sports of Ukraine

Social aspects of teaching and training Special Olympics football in Ukraine

Abstract. Purpose: definition social effect of sports for footballers with abnormal mental development. **Material and Methods:** the study was conducted based on a survey of parents of players of Special Olympics (n=45). **Results:** there were analyzed the importance of joint with healthy peers training sessions for players with disabilities mental development. Football training sessions are seen as a means of social integration for this contingent. There were identified social relationships in the system: «athlete – an athlete», «athlete – coach». **Conclusions:** the necessity of implementing «Unified Sports» program in training process for people with disabilities mental development, which significantly contributes to the social integration of persons with disabilities. Develop social skills and relationships in the team are due to mutual understanding and cohesion of the team.

Keywords: Special Olympics, social impact, social integration, the players with disabilities mental development.

Introduction. The number of people with disabilities mental development (DMD) increases every year [6; 13]. The number of people with such disorders has exceeded 300 million according to the World Organization of Health (WHO) in 2013 year. “Special Olympics” is the largest international organization which providing training and competitive experience by summer and winter sports for people with DMD. Football is one of actively developing priority sports in the program “Special Olympics of Ukraine” (A. Perederiy, A. Pavlos., 2014).

The new and effective ways of social integration for these persons is finding recently by many experts in the field of correctional pedagogy, special psychology, adaptive physical education. Most authors believe that sport is one of the most effective means to achieve this goal [1; 4; 7-10; 12]. T.R. Tenkachova (2014), I.A. Kohut, S. Primenko (2012-2014), K. Vasilyeva, Y.D. Boychuk, L.V. Green, S. Yermakov (2012) conducted social integration researches for persons with DMD; P.Y. Korolev (2009), N.L. Babich, V.A. Rymak, E.M. Kalenyk (2007) T.V. Voskresenska (2011), O. Chernyavska (2012) involved issues of social adaptation for persons with disabilities mental development by means of physical culture and sport; A.N. Nikiforov (2012) analyzing psychosocial adaptation of athletes with abnormal mental development by specially-organized football playing; E.S. Karasev (2013) studied impact of training sessions with a mini-soccer interpersonal communication for young people with moderate mental retardation; F. Baran, A. Aktop, D. Özer, S. Nalbant, Ağlamış E., S. Barak, Y. Hutzler (2012-2013) studied the impact of the program “Unified Sports” on indicators of anthropometry, physical and special training and psychosocial characteristics of athletes with DMD and healthy partners.

This problem is not enough investigated for people with DMD in society through active involvement in sports. This tendency is particularly acute in Ukraine, where from 1 million of people with such disorders involved in various sports only about 19 thousands according to Ukrainian public organization “Special Olympics of Ukraine”.

Communication with scientific programs, plans and subjects. The work is carried out in accordance with the “consolidated plan of research in the field of physical education and sport for 2011-2015 years” on the topic of 1.10 “Social and humanistic foundations of adaptive sports in Ukraine» opened by Ministry of education and sports of Ukraine (state Registration is 0113U004011).

The aim of the research is definition social effect of sports for footballers with abnormal mental development

Tasks of the research:

- 1) To analyze the importance of joint training sessions with healthy peers for players with disabilities mental development.
- 2) To identify the impact of the training process at the level of social integration for Special Olympics players.

Material and methods of the research. Such methods were used for the solution of the put tasks: the analysis and synthesis of the specific and methodological references, materials of the Internet; interview,

methods of the observation, comparison and analysis the social aspects of the training process for Special Olympics players.

There were surveyed 45 parents of players with DMD to determine the social impact of football playing. The survey was carried out during the competition "14th European Football Week Special Olympics Europe / Eurasia in Ukraine" in Kharkov. The age of the surveyed respondents children was in the range from 9 till 19 years; sport experience averaged from 3 to 4 years; 51.1% of players had mild degree of DMD, 35.6% – moderate; 11.1% – heavy; 2.2% – deep. The sportsmen had other diseases too: 42,2% had Down Cyndrom; 34,4% – autism; 11,1% – cerebral palsy; 6,7% – phenylketonuria; 2,2% – Martin Syndrom; 2,2% – Apert Cyndrom; 2,2% – Prader-Willi Syndrome.

Results of the research and their discussion. The European Union (EU) is an active supporter of integrated education and calls on its members and countries that want to join the EU and create conditions for improving the quality of life of people with disabilities by creating opportunities for learning in regular classes with healthy peers together. Inclusive education has been progress around the world, ranging from full inclusion where students with DMD study together with their healthy peers in regular classrooms, and in some classes in secondary schools and specialized institutions [3; 11].

Europe has significant achievements in this direction. For example, most students with DMD are educated together with their healthy peers in inclusive classrooms in Austria. Poland provided opportunities for people with these disorders to study together with healthy peers. Romania has started to promote the integration of students with disabilities in regular schools, but now includes a comprehensive process only for people with mild DMD. Slovakia is working on the implementation of inclusive education at special schools, which still remain the norm for the majority of students. Many countries of the post - soviet space are observed a similar trend, including Ukraine [2; 5].

Inclusion is considered as a complex process to facilitate the integration of people with disabilities but it is not only one means to achieve this goal. Experience of inclusion in the United States shows that the physical location of students with the DMD in regular classes will not lead to theirs social integration. Students with DMD isolated from their healthy peers. Practical experience for over 30 years has shown that young people in the United States perceive students with these disorders, as much "other" and does not want to socially interact with them. There are many problems in promoting social integration at school and United States with many other countries began to consider alternative ways of attracting healthy peers and people with DMD to work together outside classrooms, also including through sport. International organization "Special Olympics", as a global leader in providing opportunities to attend training sessions and participate in competitions for people with DMD, has developed a volunteer program to promote social integration for this category of people that's called "Unified Sports". This program combines healthy people and those have DMD with similar age and ability to train and compete on an equal footing in the sports team. The program "Unified Sports" was approved in three sports: bowling, softball and volleyball in 1988 year [14; 15]. Positive results has contributed to its integration in other sports, including football. The critical factor in improving the efficiency and quality of the Special Olympics training process is to develop social skills and positive relationships in the team.

There were determined the effect of athletes with DMD by a survey of parents: 75.6% of respondents gave their children to football section in order to improve their health; 48.9% – consider playing football as a form of social skills and relationships; 15.6% – wanting that their children acquired football skills; were observed at the team that is able to give a positive social experience. Social skills are one of the most important skills that may be required according to people with disorders in the life, because people are social and need to communicate with their peers. There were identified the basic social skills of Special Olympics players during conversations with parents: the ability to observe personal hygiene; to talk about their feelings and emotions; recognize risky situations; know and be able to use the rules of communication, but also be able to find ways to resolve conflicts; have the skills to listen and have a conversation with someone, analyzing the information; to make decisions; avoid wrong behaviors (smoking, alcohol, conflicts, etc.); respect themselves, have self-regulation and emancipation.

A survey of parents of Special Olympics players showed the presence of certain trends that may affect the possibility of building a positive attitude to sport these athletes in Ukraine (fig. 1).

A small number of players (6.7%) are not willing to attend training sessions due to the fact that they have considerable difficulties in communicating with peers and it's mostly people who suffer from severe autistic

diseases spectrum; 17.8% of parents say that their children attend training sessions with more bad mood; 23.8% of people with these disorders are mostly have good mood; 51.7% of children attend training sessions with a good mood.

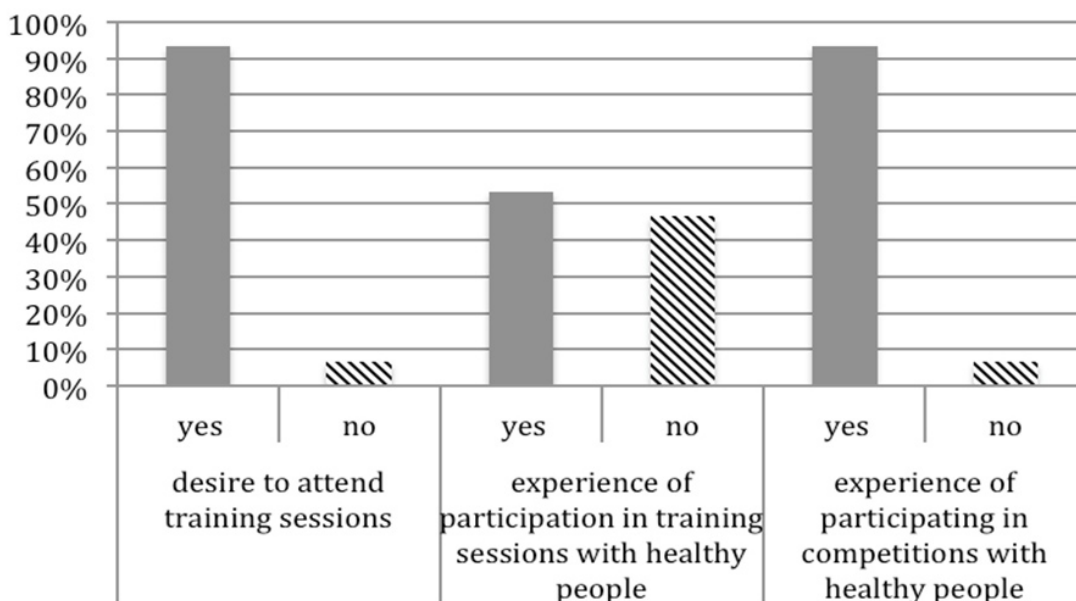


Fig. 1 Players positive attitude in sports (according to the survey, n = 45), %

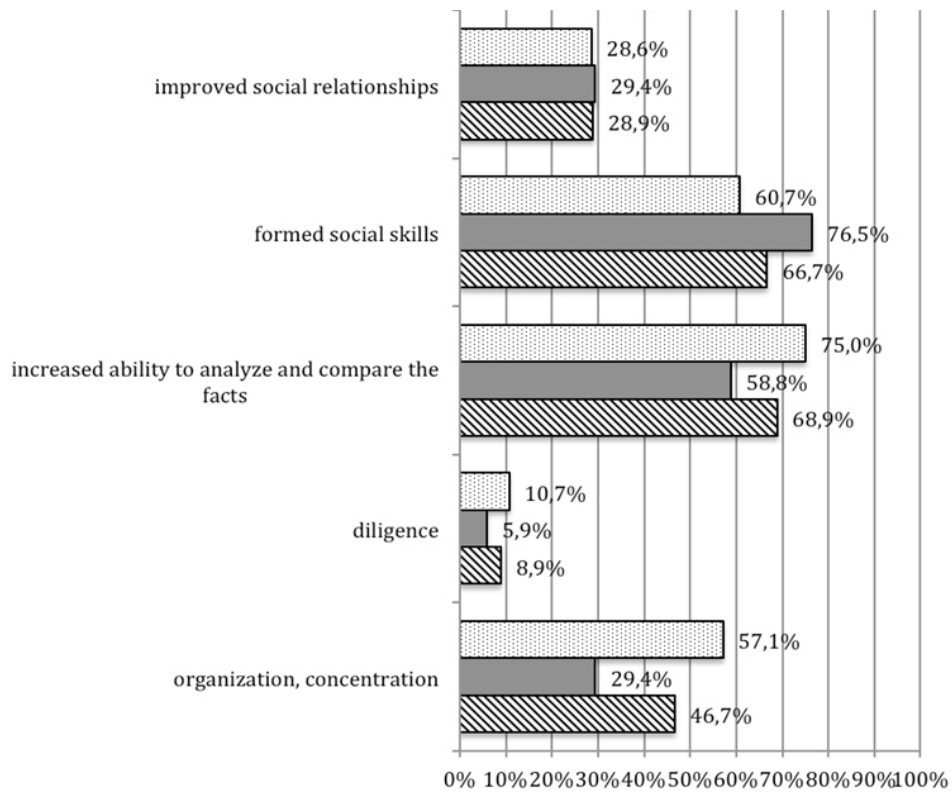
Most of children who playing football are orphaned and living in special correctional institutions and that's influence on low rates of participation in training sessions with healthy people.

The program "Unified Sports" primarily aimed at the inclusion of social life for people with DMD thought destroying historical barriers while enhancing sports skills and prepare for Special Olympics football competition. The purpose of this program are: improving self-esteem of people with such disorders, the establishment and development of friendly relations in the team. Coaches are also provide for families of players to participate in training sessions and competitions with athletes. When training sessions and competitions conducting joint, the players with DMD follow healthy peers and they exhibit: building motivation to active sports; mastering expertise; faster social development through social integration in mikrosotsium, which consists of the immediate environment: parents, coaches, teachers, caregivers, doctors and others.

The survey of parents revealed that 37.8% of children involved only in one kind of sport - football, and 62.2% are engaged in several kind of sports. The most popular of them are: basketball, athletics, swimming, bowling, table tennis and others. There is a higher increase for some indicators of social skills in people with DMD after two or more sports classes simultaneously (fig. 2).

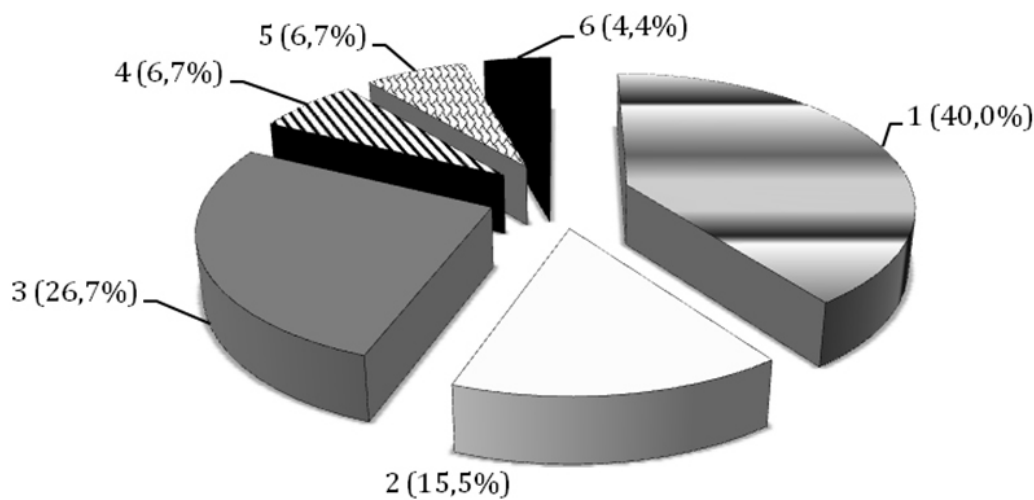
It was found that football promotes largely social skills (76.5%) and relationships in the team (29.4%) thought analyzing questionnaire as to changes in social skills that occur as a result of sports activities of people with DMD. According to the observations of parents, athletes with this disabilities which engaged in several sports besides football, they have a large motor experience which increasing the level of organization and discipline (57.1%), contributed a good ability to analyze and compare cases (75%).

The football team is a small social group, but the problems of relation's research in the team are always relevant because there is a determining factor in sports activities. Successful performance of Special Olympics players in competitions driven by motives that determine interpersonal relationships "athlete – an athlete" and "athlete – coach." If the coach doing adequate selection and improvement tools, methods, forms of organization training process, than employment relations in the football team will be strengthened and the group will be friendly and organized. Polls of parents allowed us to establish the relationship between athletes from the football team with DMD (fig. 3).



 – People who played football and other sports;
  – Persons who engaged only in football;
  – General trend

Fig. 2 Changes in social skills of people with DMD who engaged in sports (according to the survey of parents, n = 45),%



1 – friendly; 2 – with most friendly; 3 – with some friendly; 4 – no friends; 5 – conflict; 6 – Your version

Fig. 3 The relationship between Special Olympics players in the team (according to the survey of parents, n = 45),%

Team compatibility and cohesion depends on social, psychological and biological factors. Biological depend from the neural processes that occur in humans with DMD, which determine or distinguish sympathy between team members. Psychological factors include similarity in the emotional sphere, different habits, feelings, and perceptions of the outside world. Social factors include: the same assessment of reality and the views of people who are engaged in the same type of football activities. Sports team that has inconsistencies at least one of the

factors groups may have conflicts. Reaction of the coach (which implements leadership function) on the existing conflicts in the football team is an important part of optimizing training process in the Special Olympics system. According to the parents survey of Special Olympics players: most of coaches (55.5%) have tried to understand and establish justice; 15.6% of managers did not react to differences in the team; 11.1% of coaches pretended that they didn't know about them and the same number of teachers found guilty of conflict and conducted preventive talks with them; 4.5% of respondents indicated that teachers do not even know about them; 2.2% of football instructors punish all parties of the conflict; 11.1% of respondents were unable to identify a variant of the answer. Special Olympics coach is a teacher and educator, which must don't prevent of conflict in an athletic team. Conflict ignorance, suppression and punishment is unacceptable for athletes with DMD. Survey parents of athletes allowed to determine them ratio to Special Olympics coaches: with great respect (62.3%); many regards, but some are not (8.9%); some regards, but the majority were not (22.2%); mostly feared and only few respected (2.2%); no definite with answer option (4.4%). This trend shows that the vast majority of coaches established positive relationships with their wards, despite the fact that many people with such disorders have serious behavioral problems in the socium through theirs existing disease. However, using individual approach to athletes with DMD and organizational - methodical proper selection of maintenance for training process promotes social relationships in the team which is an important factor for the effective conduct of training sessions with this contingent.

Conclusions. There were substantiating to inclusive the program "Unified Sports" in the training process for footballers with abnormalities of mental development, which significantly contributes to the social integration of persons with this disability.

Occupation in various sports, including football has a significant social impact for people with abnormalities of mental development. Formation of social skills and relationships in the team and creativity of coach to organize, conduct and attitude towards him Special Olympics athletes are very important element of training sessions. Training process and competitions are considered as instrument of social integration but not as an end in itself.

The subsequent researches is to examine the organizational methods and technical, tactical level of players with different degrees of deviation mental development, best practice of coaches and create own approach to organizing and conducting training sessions for Special Olympics players.

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Irina Kohut: *PhD (Physical Education and Sport), Associate professor; National University of Physical Education and Sport of Ukraine: Phizkultury str. 1, Kyiv, 03680, Ukraine.*

ORCID.ORG/0000-0002-8862-9545

E-mail: Kia_best73@mail.ru

Maksym Iarmolenko: *National University of Physical Education and Sport of Ukraine: Phizkultury str. 1, Kyiv, 03680, Ukraine.*

ORCID.ORG/0000-0003-2181-4022

E-mail: muxyar@gmail.com