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ADAPTIVE SPORT AS REAL ALTERNATIVE FOR IMPROVING LIVES OF PEOPLE WITH DISABILITIES

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Abstract

The article examines adaptive sport as alternative for improving lives of people with disabilities. Domestic and foreign experience of working with disable people have shown that physical education and sport are the most efficient methods of rehabilitation among mentioned contingent. Sanative physical education and adaptive sport generally allow realizing possibilities of people’s organism for full life, self-realization, social activity and integration into society, with the help of rationally organized motor activity as natural incentive of livelihoods, using preserved functions, remaining health, natural sources, and mental forces. Aim of the article is to consider main characteristics of sanative physical education as kind of active activity, define its aims, functions, theoretical principles and efficient realization on the practice. The article uses the following research methods: abstraction and generalization, induction. Conclusions. Sanative physical education and adaptive sport generally allow realizing possibilities of people’s organism for full life, self-realization, social activity and integration into society, with the help of rationally organized motor activity as natural incentive of livelihoods, using preserved functions, remaining health, natural sources, and mental forces.

Key words: adaptive sport, sanative physical education, sports measures, disabilities.

Introduction. Humanity remains at the stage of development and technical progress, when personality is tightened into urbanistic noise and ecological contamination, when stress border and emotional tension lead to the fact that every second person suffers total psychological and physical exhaustion. “Growth of disablement is world tendency. About 650 million of officially registered disabled are counted in the world. Due to World Health Organization disabled people compose 10 percent of earth population. Despite successes in medicine, their amount slowly but inflexibly increases, especially among children and teenagers. For comparison: 54 million of disables in the USA, or 19%; 60 million in China, or 5%” [3].

Sanative physical education must help in this case, that is intended to return personality to harmony with body and soul, discharge from enormously difficult conditions of modern life. People come to the sole opinion that person’s health is the highest value, regardless of race, gender, social status and religion. Sitting continuously all days in front of gadgets’ monitors, children weaken their organisms, and take the risk of their health. Such behavior increase level of morbidity and general weakness of the generation, and as a result, of the whole nation. Developed countries started giving more and more resources and material costs for programs of sanative direction. Including adaptive physical education, that is spreading developing. Perennial experience of domestic and foreign practice in the branch of disabled sport evidences that training process and participation in competitions are active ways of physical, psychological, social adaptation for the given contingent (I.O. Rubtsova, 1998). Educationally-training process is considered as medicinal-pedagogical discipline where therapeutic and pedagogical factor are functioning in optimal correlation, that provide realization of physical, intellectual, emotionally-psychological potential of disabled sportsmen that satisfy aesthetic and ethical needs, the desire to physical improvement (B.V. Sermeev, V.H. Hryhorenko, etc., 1991).

Aim of the article is to consider main characteristics of sanative physical education as kind of active activity, define its aims, functions, theoretical principles and efficient realization on the practice.

Method. Method of acquirement and development of practical skills is approved by standardized approaches as well as by authorial private methodologies of adaptive physical education that are intended for people with certain deviations. Various health deviations

require individual approach. What is recommended for one group of people with limited abilities can be contraindication for another one. Due to this, private methods are developed of adaptive physical education depending on pathology. Health deviations are classified into such large groups: vision deviation; intellect deviation; hearing deviation; deviation of work of muskulo-skeletal apparatus: amputation, spinal and cerebral character. So, complex methods of adaptive physical education are developed for each type of disease. Aims and tasks are indicated there, as well as ways and methods, recommendations, contraindications, necessary skills and habits of a certain direction of physical education for disabled people.

Results. “Complex rehabilitation” in sport means implementation of medical, pedagogical, psychological measures for rehabilitation of sportsmen, that is undergone to great and sometimes marginal physical loadings. The necessity of restoration and increasing of reserves of different functional processes of the organism lies in the basis of this process (A.H. Dembo, 1981; V.I. Dubrovskiy, 1991). *Pedagogical* means of rehabilitation include: rational building of training process, optimal rotation of activity and relaxing, inclusion of exercises for muscular relaxation, game elements, etc. (V.N. Platonov, 1987). *Psychological* means of rehabilitation include the means directed on the regulation and correction of psychological states (H.D. Horbunov, 1986). *Medical* means of sportsmen rehabilitation include means directed on increasing of immune-reactivity, stability to the impacts of external environment, the removal of general and local fatigue (A.V. Chohovadze, L.A. Butchenko, 1984), as well as rational nutrition and vitaminization (Yu.A. Detkov, E.L. Druz', 1997) [3].

The possibilities of social integration in adaptive sport are revealed in adaptive physical culture (Paralympic and special) that breaks its integrative potential in incomplete extent. The necessary searching of models and grounding of the structure of social integration in adaptive physical education, of adaptive motor reaction, adaptive sanative sport. The existed methodologies which are used in adaptive physical education and sanative sport for unvoiced children and adults are impossible to promote optimal improvement of their psychophysical anger and preparation to social integration in short period of time, which defines the searching of technologies, based on exclusively knowledge of formation of sensitive periods of the development of physical qualities.

Adaptive physical culture is the complex of measures of sports-sanative character, attached into rehabilitation and adaptation to normal social environment by people with limited possibilities, overcoming of psychological barrier, that prevent the feeling of complete life, and even conscious necessity of the own contribution to society. Of course, the sphere of its implementation is comprehensive, especially in nowadays conditions of life, when the

health of population catastrophically deteriorates in general and on the youth in particular. Social event „adaptive sport” is the component of physical education as the part of general culture of the society and international Olympic movement as the biggest social movement of modern epoch also it arises and functions under the impact of various social factors and in its turn implements significant impact on society. These factors are socially-cultural, ideological and socially-political, socially-economical and personal ones. Adaptive sport as socially meaning branch provides the possibility to achieving the mentioned aim at different effective levels – as general sanitation, overcoming of uncertainty in own forces and the victory of own „disability”, and achieving of maximum sports result, setting the records, demonstration of the highest human abilities.

There is the opinion, that disabled sport is often identified with sanative physical culture, physical rehabilitation, adaptive physical education. However, for disabled sport, in contrast to the mentioned social branches, specific competitive activity is peculiarity, that appears in conformity with peculiarities of the sport in general, appears to be its system-forming factor. The aim of adaptive sport is socialization of disabled people, satisfaction of their needs as members of society in self-actualization and realization of the abilities in the conditions of competitive activity.

Correctional-compensational function of adaptive sport is the basis of all sports activity of people with special needs. It is clearly, that invalidity as resistant violation causes the necessity of maximum possible correction of violations. Sports training promote the correction and development of sensory functions (visual, auditory, kinetic, tactile, vestibular), psychological functions (attention, memory, language, emotionally-willed realm, behavior, personal instructions, etc.), somatic ones (posture, deformations of articular apparatus, breathing, cardio-vascular system, etc.) and motor ones (deviations in development of physical qualities, coordination of movements, etc.) violations.

Sanative physical education is reasonably to consider as range of sports measures, which are directed into general strengthening of organism, activation of its immune strength. Sanative and adaptive physical education are similar concepts, however they have different aims and ways of realization. It is not allowed to confuse the concept of sanative physical education with therapeutic, rehabilitation gymnastics. Healthy, strong people do physical education for preservation and strengthening their physical form and health. Leading task of adaptive sport consists in formation of sports education for disabled people, their involvement into social and historical experience in this sphere, familiarization with mobilization, technological, intellectual and other values of physical education. Meaning of adaptive sport

is directed mainly into formation of high sport skills in disabled people and achieving the highest results by them in its different kinds at competitions with people who have similar health problems [4, 50].

Basic objectives of sanative physical education are: provision and preservation of high level of health of population; improvement of physical skills and abilities; increasing of immunity; psychological realization of needs in physical activity, competition, achievement of goals; regulation of normal body weight and proportions; active relaxation and communication. Adaptive physical education follows another aim, that's why it is applied only for people with resistant health infringements. Methodology single outs such basic functions of generally developing physical education: sanative: complex of exercises is selected with consideration of individual abilities of person's organism, age and other factors; educational: it is realized by spreading and agitation of healthy lifestyle; educational function is consisted in giving theoretical and practical material of sanative physical education course by professional trainers, based on approved methodical and experimental data. Depending on the age of mentees, sanative physical education is classified into infant, teenage, youthful, for elderly people. There are sanative systems of different nations, for example, yoga and Ayurveda. Authorial methods are developed, for example, by Ivanov or by methodology of Strelnykova. There are complex sanative measures as well as those that are concentrated on specific sanative target. There are also notorious modern tendencies in adaptive sport: aerobics, fitness and etc.

It is necessary to point out 1996 year among symbolic events for mentioned kind of sport, when physical education for people with deviations in their state of health was included to state register of specialties for higher education. Nowadays, specialization calls "Adaptive physical education". Appearance of it is directly connected with mass deterioration of health of county's population, increasing the level of disablement. Adaptive physical education differs from sanative or therapeutic ones by theory and realization on practice. If the first one is directed into general sanitation, and the second one aims to restore violated functions of organism, then adaptive physical education is intended on socialization of people who have serious health infringements, marked on adaptation and self-realization of people with limited abilities in society.

Adaptive physical culture is integrated science, that combines several individual branches. Physical education for disabled people links knowledge from such spheres as general physical education, medicine, correctional pedagogy, psychology. Adaptive system aims not only to improve state of health of people with limited abilities, but also to restore

their social functions, correct psychological state. In many cases, adaptive physical education is the only opportunity to become member of society for people with disablement. Doing and competing with people who have similar physical abilities, people can realize themselves as individuality, develop, achieve success, learn how to cooperate in society. That's why main goal of special physical education is adaptation of people with limited abilities in society, working activity.

There are different tasks for adaptive physical culture, taking into account individual physical abilities of people, state of provision of professional staff, material and equipment, technique, etc. However, basic directions of activity stay constant. In many cases, such activity is conducted for principal disease, as well as for attendant problems. For example, while taking about cerebral palsy, attention is paid not only on development of muscles, joints, coordination of movement, but also on vision, language and other revealed health problems. Prevention of problem consists in conduction of measures directed into general improvement of people's health, increasing of strength and abilities, removal of oppression, etc.

Educational, disciplinary and developing tasks of adaptive physical education are also important. The aim is set up – to impart the concept of physical activity as everyday integral part of livelihoods for people with limited abilities; to teach the culture of sport, rules of behavior in the team and during competitions. Specific tasks directly depend on nosology and functional violation (including motor ones) that are conditioned by it. In many cases, they are connected with problems of people's interaction with environment: perception and acquirement of space, manipulative activity of objects, overcoming of problematic situations in everyday life, at work, etc.

Correction and compensation of motor violations is implemented with the help of physical activity in the process of training, where general and local impacts are varied, as well as coordinating complexity of exercises implementation, power, direction, amount, intensity, intervals of restoration at repeated impact. The main principles are adequacy and optimality, realization of which is defined by specific and timely setting of pedagogical tasks, rational planning and operative control of the state of disabled sportsmen.

Psychological tasks are important components of physical education for disabled people. Anti-socialization of people often occurs not because of any health deviation, but for reason of uncertainty in their own strength, inability to interact with other people, incomprehension of their place in society. Special education provides teaching people with limited abilities theoretical and practical basics of physical education. Rehabilitative direction

includes development of integrated complexes of sports exercises, directed on socialization of people with limited abilities by disclosure and improvement of physical skills.

The concept of adaptive sport has relatively long history. In ancientness, people with physical disablements were patronized by centers of spiritual life of that time, namely monasteries on the territory of Ukraine. With development of society, shelters for unfortunate people were appeared. Since XIV century, common education of healthy and diseased people was conducted. In the middle of XVIII century, special groups for children with specific needs were created at educational houses. At the beginning of XIX century, the first specialized institutes were established for deaf-mute and blind children, and later for children with deviation in mental development. It is known, that in XIX century, special educational organizations for blind people were created on the territory of modern Russia. Special gymnastics was included to educational program, except of general subjects. In 1914, football competitions for people who suffers deafness were conducted for the first time. In 1932, competitions in different kinds of sport were conducted among disabled people. Various associations and organizations were created directed into development of APE (adapted physical education). Subsequently, sport for people with limited abilities had periods of decline and revival with appearance of new directions.

Since 2000, adaptive sport moved to new stage of reloading Soviet system and development in independent Ukraine. There are certain problems now, that are connected with deficiency of state financing, however the direction is being promoted, extended; trainers and instructors borrow experience of nations that have ramified structure of this kind of sport, sportsmen achieve high results at international competitions. Ukraine received new turn in correcting and rehabilitation sanative physical education after the problem in professional and qualitative help for soldiers from Antiterrorist Operation, as a result of military actions in the East of the country.

There are various classifications of directions of adaptive sport. It is necessary to note, that only several large basic groups were distinguished at the beginning. Later new kinds were created in connection with division by a type of health deviation.

However, 3 groups are basic and the largest:

- Paralympics sport – competitions of people with violation of musculo-skeletal apparatus and vision;
- Surdu-olympic sport – for people with hearing violations;
- Special – with intellectual violations;

Each of above-mentioned directions is divided into sublevels. For example, there are distinguished competitions between people with amputated limbs, paralysis, traumas of cord on Paralympics sport. Also, competitions are organized on general requirements, typical for Olympic games, as well as on special ones, adapted to abilities of specific group of people with violations in physical health. Authorized profile organization must carry on development of criteria of estimation of competitions. Paralympics, special and surdu-olympic direction are distinguished. Due to appearance of kinds of sport for disabled people, tens of thousands of people with limited physical abilities could realize their potential and become socially active members of society, get rid of complexes and have the feeling of usefulness.

Goals of adaptive physical education and sport are intended to create maximum comfort conditions for people who have certain disabilities. They must be realized on practice with perfect knowledge of special pedagogical methods. The following methods are effectively used during the work with disabled people at physical education. Learning necessary amount of information – this method includes development of psychological and physical motivations, definition of individual values and inducements. It is necessary to note, that instruments are verbal and figuratively-visual methods of transferring information at this level. Depending on type of disease of the person who receives help, it is necessary to select the most effective method or rotationally combine and consolidate verbal information by visual example. Means of adaptive physical education can be: blind person needs to induct the model of skeleton or separate muscles in tactile way, teaching basics of anatomy and physiology in this way. Verbal method is conducted together with audiologist or with the help of tables, various videos, slides, etc.

The methodology of adaptive physical education has significant differences, conditioned by abnormal physical development and psychology of children. These basic positions concern medical-physiological and psychological peculiarities of children of different groups. Typical and specific violations of motor sphere, special-methodological techniques of working with this category of children, correctional direction of pedagogical process define conceptual approaches of building and content of private methodologies of adaptive physical education. In order to from pedagogical process, to define didactic lines, set and implement the tasks of educational activity, it is necessary to mention the state of health, physical, psychological, personal peculiarities of children with development violation, as characteristics of the object of pedagogical impacts is the original condition of any process of education. According to the numerous investigations, abnormal development of children is

always accompanied with the violation of motoric functions, retardation and deficit of motor sphere.

Adaptive physical education is intensively investigated in recent years and provides scientific grounding of wide spectrum of problems: normative-legal provision of education-training and competitive activity; the management of activity and rest; pharmacological support of disabled sportsmen in the period of marginal physical and psychological tensions; unconventional means and method of restoration; socialization and communicative activity; technical preparation as new type of sports preparation and many other.

Discussion. The main reasons of weak development of physical education and sport among disabled people are the absence of specialized physically-sanative and sports equipment, disadvantage of outfit, not developed of the chain of physically-sports clubs, children-youthful sports schools and department for disabled; these reasons prevail in all types of institutes of additional education of physically-sports direction. Involvement to intensive athletics of the biggest number of disabled in the aim of using of physical education and sport as the most important principle of adaptation and integration in the life of society, as these lessons create psychological settings which are necessary for successful entering of disabled people into public environment [2].

Such pedagogue as L.V. Shapkova made the biggest contribution into development of private methods of this direction. Adaptive physical education is considered as social phenomenon in her works, that requires multilateral approach from professionals, who work with disabled people. It is necessary to distinguish investigation of L.N. Rostomashvili, by method of adaptive physical education for people with visual defection. N.H. Baykina, L.D. Hoda, Ya.V.Kret, A.Ya. Smekalov investigated the problem of physical activity for people with limited abilities. A.A. Potapchuk developed methodology of adaptive physical education with Cerebral palsy. A.I. Malyshev and S.F. Kurdybailo investigated the problem of complex of specific physical education for people with amputated limbs and innate anomalies. The manual written by such pedagogue as L.P. Yevseyev is table book for students from pedagogical institutions with sports specialties. Adaptive physical education is regarded from the point of practical realization. Basics of adaptive physical education are revealed for people with various infringements: aims, tasks, principles, concepts, kinds, methodologies, content, other recommendations.

Conclusions. Domestic and foreign experience of working with disable people have shown that physical education and sport are the most efficient methods of rehabilitation among mentioned contingent. Physical activity prevents returning of people with limited

abilities back to their diseases in perfect way, that starts while disabled people are at hospital and continues after their excerpt [3, 16-18]. Sanative physical education and adaptive sport generally allow realizing possibilities of people's organism for full life, self-realization, social activity and integration into society, with the help of rationally organized motor activity as natural incentive of livelihoods, using preserved functions, remaining health, natural sources, and mental forces.

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