



Special Olympics

Motor Activities Training Program

Coaches Guide



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SECTION I

Special Olympics Motor Activity Training Program:

AN OVERVIEW



INTRODUCTION

Which Athletes are best served by a Motor Activity Training Program?

The Special Olympics Motor Activity Training Program is designed for athletes with severe or profound intellectual disability who are unable to participate in Official Special Olympics sport competitions because of their skill and/or functional abilities. The Motor Activity Training Program is designed to prepare athletes with severe or profound intellectual disability, including athletes with significant physical disabilities, for sport-specific activities appropriate for their abilities. Athletes with significant disabilities are those who, because of their physical, mental, or emotional problems, need highly specialized training programs. As a unique sport-based program, The Motor Activity Training Program does not exclude any athlete. It is designed to provide individualized training programs to all athletes with significant disabilities. The Motor Development activities presented in this manual correspond to Official Special Olympics sports. **These activities are offered as a starting point when designing specialized training programs for each athlete.** The closer one comes to performing the activities outlined here, the closer one comes to acquiring skills considered essential in the recognized skill progressions leading to participation in Official Special Olympics competitions.

Objectives of the Motor Activity Training Program

The objectives of the Special Olympics Motor Activity Training Program are to:

- A) Provide training opportunities for athletes to acquire skills considered essential in the recognized skill progressions leading to participation in Official Special Olympics competitions.
- B) Create opportunities for athletes to perform their personal best effort in those skills in a culminating event during a regular Special Olympics competition or during a separate Motor Activity Training Program activity.

Purpose of the Motor Activity Training Program

1. The purpose of the Motor Activity Training Program is to provide training for athletes in skills that are related to and may lead to participation in a traditional Special Olympics event.
2. All individuals with severe or profound intellectual disabilities can, with activities designed to meet their individual abilities, participate in the Special Olympics Motor Activity Training Program.
3. All Motor Activity Training Program athletes are provided opportunities to train for and perform their personal best at culminating Motor Development activities, without comparison to others.
4. The Motor Activity Training Program athlete qualification process is used to ensure that each athlete who comes to Special Olympics is provided the most challenging and rewarding sport experience appropriate for him or her.
5. **All Motor Activity Training Program coaches must successfully complete Special Olympics Motor Activity Training Program coach certification training in order to ensure safe and effective individual training programs for Motor Development athletes.**

Benefits to Athletes

There are numerous benefits for athletes who participate in the Special Olympics Motor Activity Training Program. They include:

- increased physical activity that leads to improvement in motor skills, physical fitness and functional ability.
- more opportunities to perform sport activities,
- development of a more positive self-image through skill acquisition



- greater family interaction through sport involvement,
- more opportunities to develop friendships with other athletes, their families and the larger community

Special Olympics Motor Activity Training Program athletes transfer these benefits into their daily activities at home, and in the community. Additionally, family bonds strengthen as family members develop an appreciation for their athlete's ability to participate in a sport activity.

Sport Activity Selection

It is particularly important that Motor Activity Training Program athletes be involved in the selection of their own sport activities. With advanced planning, the athlete can choose from several carefully selected sport activities. Everyone, no matter how significant the disability, can express happiness or disinterest. The challenge for the Motor Development coach is to expose athletes to a variety of participation options and determine which activities elicit expressions of interest. To assist in determining the sport interests, it is helpful to know the athlete's sport heroes. For example, a sixteen year-old who lives for his favorite basketball star should have the opportunity to participate in a modified basketball activity. Coaches should also consider the following:

- ♦ Resources available through their local Special Olympics Program
- ♦ Sport activities that are available and accessible in the community
- ♦ Sport activities that are seasonally appropriate
- ♦ Opportunities to participate at their maximum ability, utilizing MATP exercises.
- ♦ Feedback from parents, caregivers, siblings, peers, etc.

Ways to Reach Athletes

Contacting potential Motor Activity Training Program athletes is not always easy. Many individuals who would qualify to participate in MATP activities live at home or in residential setting. Also, cultural beliefs, national and state laws, and transportation difficulties may be challenges to participation.

One way to access potential athletes is to create a program information sheet or flyer with your program's address on it, and ask school personnel or specific support groups, such as a Family Committee, to distribute it. Other techniques include:

- Offer MATP demonstrations during other Special Olympics competitions.
- Presenting to and distributing information to parent support groups
- Presenting to and distributing information to national or local associations that provide services for individuals with intellectual disability
- Using advertising and media promotions to increase public awareness of Special Olympics, highlighting the Motor Activity Training Program and the population it serves.
- Distributing information via booths set up in grocery stores, shopping centers and major retail outlets
- Educating parents or caregivers of school-aged children through presentations to Parent-Teacher-Associations
- Presenting educational workshops to local organizations that serve potential Motor Activity Training Program athletes
- Distributing information through medical and social service agencies and other health professionals



-
- Meeting with the principals of general schools and special education schools and the directors of residential centers to encourage adoption of MATP within their facility.

Once potential Motor Activity Training Program athletes and their caregivers have been contacted, coaches should introduce them to the program and assist them with participating in Special Olympics by:

- Scheduling with parents or caregivers a time to introduce eligible athletes to Special Olympics and to the Motor Activity Training Program
- Scheduling a time to evaluate eligible Motor Activity Training Program athletes
- Insuring that an Application for Participation is completed with a medical review for each eligible athlete.
- Assigning the athlete to a coach and activity group
- Insuring the parents/guardians have all the information on when practices will be conducted and when the Motor Activity Training Program Day is scheduled.
- Assigning participation in Official or Recognized Special Olympics sports for eligible athletes whose skills exceed the Motor Activity Training Program.

Community Involvement

Finding community support for Motor Activity Training Programs must be a part of the total outreach plan for the local Special Olympics Program. Actively seeking community involvement is an important step for increasing public awareness of the Special Olympics Motor Activity Training Program, and the athletes' capabilities, interests and needs.

Motor Activity Training Program coaches must determine who, from the local Special Olympics Committee, is responsible for community outreach for the local Special Olympics program. In accredited programs, where the Area Director is responsible for community outreach, MATP coaches should provide frequent updates through the channels of communication in place in their accredited program about the progress and needs of the local Motor Activity Training Program.

Volunteers are the most important community resource. Through their continual support, volunteers provide Motor Activity Training Program athletes with opportunities to interact with members of the community. Individual volunteers and members of local businesses and civic organizations can provide financial support, facilities, equipment, and transportation. Local radio stations and newspapers, as well as individual members of the community, should be invited, on a regular basis, to be spectators at Motor Activity Training Program training and culminating activities.

SECTION II

Special Olympics Motor Activity Training Program:

PERSONNEL



Coaching Staff

The coaching staff often includes a Motor Activity Training Program Sports Manager at the Program or Area Level. This person oversees multiple Motor Activity Training Programs and coordinates multi-program activities. The Motor Activity Training Program Head Coach, Assistant Coaches, Peer Coaches and volunteers are also part of the Motor Activity Training Program Team. **All Coaches must successfully complete certification requirements to be a Special Olympics Motor Activity Training Program Coach. Head Coaches must also have prior experience and certification in the field of Adapted Physical Education, Physical Therapy or a related field specializing in work with persons with severe or profound disabilities.** In some countries, coaches are required by their government to also be a graduate from an institution of higher education or to have received other special qualifications in order to coach Special Olympics athletes. The following section outlines the roles and responsibilities of the Motor Activity Training Program Head Coach, assistant coaches and peer coaches.



Responsibilities of Motor Activity Training Program Head Coach

The Motor Activity Training Program Head Coach is responsible for the following duties.

1. Obtain knowledge of the athlete's background (e.g., medical, behavioral, etc.)
2. Obtain knowledge of the athlete's activity preference and family sport goals
3. Administer the Motor Activity Training Program Athlete Evaluations (see Evaluation section)
4. Develop and oversee the training program of each athlete
5. Manage all of the activities involved in training athletes, other coaches, peer coaches and volunteers
6. Consult with members of the athlete's multidisciplinary team prior to and throughout the development of the training program to ensure the athletes' safe participation.
7. Meet with administrators or supervisors of local schools or residential facilities to discuss their support and assistance with the Motor Activity Training Program. With the support of the facility's administrative staff, Head Coaches should give a short presentation on the Motor Activity Training Program to interested personnel and potential assistant or peer coaches.
8. Obtain permission from parents/guardians of peer coaches for them to participate in the Program.
9. Conduct training programs for assistant coaches and peer coaches.
10. Ensure that there is a certified Motor Activity Training Program coach supervising each training session.
11. Maintain confidential files and sport activity records on each athlete throughout the training program and activity participation.
12. Complete all the registration forms for Motor Activity Training Program participation in accordance with Special Olympics rules.



Assistant Motor Activity Training Program Coaches

Within a Special Olympics program there may be several assistant coaches in different communities. Assistant Coaches work closely with both the Head Coach and the Peer Coaches. Major responsibilities of the Assistant Coach are to:

- Secure facilities
- Find, evaluate and register athletes
- Under the supervision of the head coach: work with athletes on individual skill development and training programs
- Plan and conduct Motor Activity Training Program Days

Peer Coaches

A peer coach is an individual of similar age to the athlete who, under supervision of a certified Motor Activity Training Program coach, assists with the athlete's eight-week training program. Peer coaches may be recruited from public and private schools, colleges, recreation centers, religious organizations or clubs in the local area. Peer coaches must commit to attending all of the training sessions and Motor Activity Training Program Days. In some cases, peer coaches may be one or two years younger than the athlete. The exception to this is in the case of very young athletes. Peers who are below ten years of age may lack the maturity to serve as peer coaches.

The following checklist is intended to assist coaches with the training of their peer coaches. Coaches should spend sufficient time with their peer coaches to ensure that their athletes have rewarding training experiences.



Peer Coach Checklist

Things Peer Coaches Should Know

- Similarities between themselves and the athletes (i.e. both enjoy sports, are same age.)
- Goals of the Motor Activity Training Program
- Concerns related specifically to the athlete's safety (i.e. limited range of motion, may tire easily, medication side effects).
- Need for peer coaches to be respectful and caring when working with the athletes

For a successful experience, the peer coach should:

- Make a commitment to his/her athlete
- Be on time and prepared for each training session
- Greet the athlete; “see” the person not the disability
- Stay with athlete throughout the training session or Motor Activity Training Program Activity
- Smile and be friendly
- Face the athlete when providing instruction
- Talk with the athlete about your interests when you are not involved in the activity
- Learn athletes’ preferred forms of communication (speech, sign language, pictures or symbols, etc.)
- Encourage athletes with specific, positive feedback – name something they did well.
- Be patient
- Have fun - Enjoy the time spent with your athlete
- Demonstrate the activity correctly
- Give athlete time to learn one skill before starting a new sport skill
- Find ways athletes can perform the activity with maximum independence
- Ask for help, if needed
- Keep a positive attitude and be proud of your accomplishments with each athlete
- Say goodbye to the athlete and remind him/her of the next training session
- Talk with your friends and family about your experiences
- Attend a seminar to learn about Special Olympics mission and philosophy.
- Remember - Behind every great athlete is a great coach!



Remember that virtually every athlete participating in the Motor Skill Development Program is surrounded by a support network that includes parents, care givers, Physical Therapists, Occupational Therapists, Adapted Physical Education Teachers, Classroom Teachers, Social Workers, etc. All these people are potential resources on questions of what the athlete likes, dislikes, is interested in and capable of. Include as many of them as possible in the process of coaching.

Responsibilities of Head Coach to Peer Coaches

The head coach meets with newly recruited peer coaches and explains their duties and responsibilities during training programs and Motor Activity Training Program culminating activities. Prior to meeting their athletes, peer coaches should be aware of the various steps used in the sport activity in which their athletes will participate. Additionally, they need to know how their athlete's specific disabilities will affect the performance of the activity. Head Coaches should reassure all peer coaches that a trained Motor Activity Training Program coach will supervise each training session. The Motor Activity Training Program Head Coach is responsible for the following duties when training and working with peer coaches:

- Demonstrate how to position and cue the athlete
- Discuss the athlete's preferred method(s) of communication (i.e. speech, sign language, picture cards, etc.)
- Provide information related to walkers, wheelchairs, or other mobility equipment specific to the athlete
- Demonstrate proper and safe use of any assistive devices
- Create an atmosphere in which peer coaches can ask questions, make suggestions and develop a positive relationship with the athlete
- Encourage peer coaches to allow sufficient time for athlete responses (avoid acting too quickly to assist the athlete)
- Be realistic with peer coaches about the progress rate of the athletes' skills (allow enough time in the training program for the athlete to develop)
- Inform peer coaches of procedures to be followed in case of an emergency (i.e., fire alarm, injury, illness, etc.)
- Establish a format and routine for debriefing sessions
- Recognize and honor peer coaches at Motor Activity Training Program Days by way of:
 - Certificates of Recognition
 - T-shirts
 - Ribbons or MVP awards
 - Recognition in the printed Motor Activity Training Program Day programs

Educational and Therapeutic Personnel

The role of a Special Olympics Motor Activity Training Program coach is to provide training and culminating activities for athletes with significant intellectual disability. In addition to their Special Olympics Motor Activity Training Program training, these athletes probably also receive services from a variety of professionals. These multidisciplinary professional teams can include special educators, adapted physical educators, physical therapists, occupational therapists, respiratory therapists and speech pathologists/therapists. Members of an athlete's multidisciplinary team should be consulted prior to and throughout the development of the athlete's training program to ensure the athletes' safe participation and to recommend opportunities for reinforcement in all aspects of an athlete's life. For example, this team of professionals may have insight into favored activities or areas of recent progress. Likewise, they will know of any positions or movements the athlete should avoid. Therefore, the athlete's training program should be designed so that it complements and doesn't interfere with the athlete's overall therapeutic program.

SECTION III

Special Olympics Motor Activity Training Program:

EVALUATION OF ATHLETES



Determining Placement of Athletes

When determining whether the Motor Activity Training Program is appropriate for an athlete, several factors must be considered. Basic motor skills are obviously a critical factor; but equally important are social skills, ability to participate in group activities, ability to attend to a specific task, and receptive language abilities.

The following evaluation tools are recommended to help determine whether an athlete is best suited for the Motor Activity Training Program, or has the skills to compete in Official Special Olympics sport events for athletes with lower abilities.

The first two forms are used to determine whether the athlete will be best served by the Motor Activity Training Program or competitive activities for athletes with lower abilities found in traditional Special Olympics sports.

- a) Motor Activity Training Program Athlete Qualification form
- b) Athlete Social Adaptability Questionnaire (Quick form)

The next three forms help you gather necessary information on athletes who will be participating in the Motor Activity Training Program.

- c) Athlete Information form
- d) Motor Skills Assessment Form
- e) Functional Assessment Protocol

The Motor Activity Training Program Athlete Qualification Form

The Motor Activity Training Program Athlete Qualification Form contains five items and is used to determine if an athlete's abilities qualify him/her for the Motor Activity Training Program or the Official Special Olympics sports program. If a potential athlete cannot perform any of the five items, he/she qualifies for the Motor Activity Training Program. If an athlete can accomplish any of the five items, he/she has the basic motor skills to compete in Special Olympics events for athletes with lower ability levels. The Athlete Questionnaire can then be completed to determine social and adaptability readiness.

Remember that virtually every athlete participating in the Motor Skill Development Program is surrounded by a support network that includes parents, care givers, Physical Therapists, Occupational Therapists, Adapted Physical Education Teachers, Classroom Teachers, Social Workers, etc. All these people are potential resources on questions of what the athlete likes, dislikes, is interested in and capable of. Include as many of them as possible in the process of determining appropriateness of MATP participation.

The Athlete Social Adaptability Questionnaire

The Athlete Social Adaptability Questionnaire is helpful in evaluating the social and adaptability skills of athletes. This is critical especially in cases where the athlete seems to have the basic motor ability to perform the tasks in isolation. The results of this questionnaire will help determine the appropriateness of the Motor Activity Training Program vs. Competitive Events for Lower Ability Athletes.



The Athlete Information Form

The Athlete Information Form includes information about the athlete's reflexes and reactions, activities of daily living and communication skills. Therefore, a family member or a professional who is familiar with the athlete's reflexes and reactions must complete the form. Motor Activity Training Program coaches should not test reflexes or reactions unless they have had professional training in fields such as special education, adapted physical education, nursing, physical therapy or occupational therapy. Working with the athlete's family and multidisciplinary team to complete the Athlete Information form is also a good way to build rapport among those involved in the athlete's life.

The Motor Skills Assessment Form

The Motor Skills Assessment Form is a quick assessment of strengths and weaknesses in the seven motor skill categories that are the focus of this guide. Once completed, a coach can use this information to identify strengths as well as skills that the athlete might want to improve upon.

The Medical/Health Background Form

The Medical/Health Background Form is designed to identify information that coaches should be aware of in planning and conducting training programs. It should be completed by the athlete's coach in conjunction with the athlete's parents or care giver as well as the athlete's therapists or adapted physical education specialist.

The following pages are designed to assist a coach in completing the Motor Activity Training Program evaluation forms.

A completed sample of each of the forms has been provided. Note that general comments have been entered at the end of the sample Athlete Information Form.



MOTOR ACTIVITY TRAINING PROGRAM - SAMPLE

ATHLETE QUALIFICATION

Smith

Athlete Surname/Family

John

Given/First

MI

Athlete Birth date (dd mm yy)

Female Male

Gender

Please mark (✓) Yes or No for each of the following questions.

Qualifying Abilities

Yes No Throws a tennis ball

Yes No Walks independently or with assistive aides (walker, cane, etc.) for a minimum distance of 10 meters.

Yes No Moves a manual wheelchair for a distance of 10 meters

Yes No Controls a motorized wheelchair for a distance of 10 meters

Yes No Swims a distance of 15 meters with or without the use of flotation devices

If your athlete is able to do any of the above,

he/she qualifies for Special Olympics sport events for athletes with lower abilities.

Please mark (✓) one statement.

This athlete qualifies for Special Olympics sport events for athletes with lower abilities

This athlete qualifies for Special Olympics Motor Activity Training Program

Janice Smith

Completed By (Signature)

2/28/03

Date



Environment

Yes No Athlete is comfortable in the training environment

Activities of Daily Living

Yes No Athlete identifies five (5) familiar objects that he/she uses daily

Yes No Athlete uses the toilet with or without assistance

Yes No Athlete puts on a T-shirt and pulls on shorts/pants

Yes No Athlete moves effectively in living space

Awareness

Yes No Athlete vision concerns _____

Yes No Athlete hearing concerns _____

Yes No Athlete attends to an object placed in front of him/her

Basic Communication Skills

Yes No Athlete performs simple problem solving

Yes No Athlete communicates through speech or other method

Yes No Athlete attends to instruction for _____seconds

Yes No Athlete understands one-part verbal or signed directions (language skills)

Yes No Athlete performs a two-part command

Yes No Athlete responds when his/her name is spoken or signed

Behavioral Issues

Please describe major behavioral issues related to your athlete

General Comments to Assist with Training of the Athlete:

I, _____ have consulted with the following people in the completion of this form.

Signature

Date



MOTOR ACTIVITY TRAINING PROGRAM - SAMPLE

ATHLETE INFORMATION EVALUATION

Smith

Athlete Surname/Family

John

Given/First

MI

21

Athlete Age

Female Male

Gender

Please mark (✓) Yes or No for each of the following questions.

Note: Coaches should consult with the athlete's multi-disciplinary team (parents, guardians, special education, adapted physical education and physical education teachers, occupational and physical therapists) when completing this form.

Does the athlete exhibit any of the following:

Reflexes

Yes No Palmar Grasp

Yes No Startle Reflex

Yes No Tonic Labyrinthine Prone

Yes No Tonic Labyrinthine Supine

Yes No Asymmetrical Tonic Neck

Yes No Symmetrical Tonic Neck

Yes No Positive Support Reflex

Reactions

Yes No Propping Reaction to the Front

Yes No Propping Reaction to the Side

Yes No Propping Reaction to the Back

What are the functional abilities of the athlete?

Positions

Yes No Athlete can maintain a seated position

Yes No Athlete can maintain a standing position

Environment

Yes No Athlete is comfortable in the training environment (i.e. For aquatics, pool)



Activities of Daily Living _____

- Yes No Athlete identifies five (5) familiar objects that he/she uses daily
- Yes No Athlete uses the toilet (with or without assistance)
- Yes No Athlete puts on a T-shirt and pulls on shorts/pants
- Yes No Athlete moves effectively in living space

Awareness _____

- Yes No Athlete vision concerns ___None_____
- Yes No Athlete hearing concerns ___None_____
- Yes No Athlete attends to an object placed in front of him/her

Basic Communication Skills

- Yes No Athlete performs simple problem solving
- Yes No Athlete communicates through speech or other method
- Yes No Athlete attends to instruction for ___10___ seconds
- Yes No Athlete understands one-part verbal or signed directions (language skills)
- Yes No Athlete performs a two-part command
- Yes No Athlete responds when his/her name is spoken or signed

Behavioral Issues

Please describe major behavioral issues related to your athlete:

John becomes frustrated very easily and may act out. This is especially true when he becomes fatigued.

General Comments to Assist with Training of the Athlete:

John has difficulty keeping his head up and must be reminded frequently to lift his head and attend to the activity. He also fatigues easily. John functions best when in his wheelchair. John prefers larger, softer balls or wiffle balls to a tennis ball or smaller ball – they are easier for him to release. John enjoys watching basketball and prefers to be called by his nickname, which is “J” or “Big J”.

I, Janice Smith, have consulted with the following people in the completion of this form.

Sarah Larson, John’s PT; Angela Guerrero, John’s APE teacher; Marc Schwarz, John’s Special Education teacher

. Janice Smith
Signature

2/28/03
Date



Motor Skill Assessment

Each test item is broken into a hierarchical progression of subtasks from lowest to highest ability. To administer the assessment, observe the participant as he/she performs each test item. If there is some question as to the participant's competence in a particular skill, require the participant to perform the task five times. Give the participant credit for the skill level if he/she can perform the activity four out of five times. You may also want to make notes for yourself on the instruction required as you performed the assessment.

Any athlete who can perform the highest level of one or more of the seven test items should be considered for inclusion in events for athletes of lower ability within one of the Official or Recognized Sports in the rule book.

Skill Assessment Purpose

1. Determine participant's present level of performance.
2. Determine where to begin teaching student.
3. Determine if student may qualify for Official Special Olympics Sports.

Athlete Name: _____

Mobility

- Attempts to lift head off mat when placed on stomach
- Lifts head off mat when placed on stomach
- Rolls over to back when placed on stomach
- Performs two consecutive log rolls

Dexterity

- Attempts to grasp and hold small objects
- Grasp and holds small objects
- Grasps and moves small object away from body
- Grasps, moves, and releases small object
- Tosses object of soft shot put

Striking

- Attempts to touch ball that is placed next to hand
- Touches ball that is placed next to hand
- Pushes ball off batting tee with hand
- Hits ball off tee with hand
- Hits ball off tee with striking implement



Kicking

- Attempts to touch ball with foot
- Touches ball with foot
- Pushes ball forward with foot
- Kicks ball forward less than one meter
- Kicks ball forward three meters or more

Manual Wheelchair (Optional)

- Places hands on wheels of wheelchair
- Pushes wheelchair with assistance
- Pushes wheelchair forward one rotation
- Pushes wheelchair forward less than one meter
- Pushes wheelchair forward three meters or more

Electric Wheelchair (Optional)

- Attempts to touch controls of electric wheelchair
- Touches controls of electric wheelchair
- Pushes controls of electric wheelchair
- Propels wheelchair a few feet without direction
- Propels wheelchair forward one meter

Aquatics (If Available)

- Tolerates water
- Floats with assistance
- Floats independently
- Floats and attempts to propel self
- Propels self forward one meter

Person completing this form: _____ Date: _____

Did this athlete achieve all five skills in any of the categories? YES NO

If YES – this athlete should be considered for Events for Athletes with Lower Ability in one of the Official or Recognized Sports found in the Special Olympics Rules Book.



Medical/Health Background

Name: _____ School: _____ DOB: _____ Date: _____
Tester: _____

What is the athlete's primary disability?

What is the athlete's secondary disabilities?

Are there any movements or positions athlete should or cannot do? Describe.

Is the athlete on medication?

If yes, describe type and purpose

Does the athlete have any allergies? Describe.

Does the athlete have a feeding tube?

Does the athlete have a shunt?

Does the athlete have scoliosis?

If yes, does the athlete have rods in his back?

Does the athlete have any dislocations?

If yes, where?

Does the athlete receive Physical Therapy and/or Occupational Therapy?

If yes, how often and who is the PT/OT?

SECTION IV

Special Olympics Motor Activity Training Program:

Motor Activity Training Program Training



Motor Activity Training Program Training Goals: Consistency and Adaptation

The Motor Activity Training Program encourages a high level of consistency for the athlete and a high level of flexibility for the coach to modify activities to meet the athlete's abilities and interests. Consistency involves establishing a routine within the athlete's training program. This allows the athlete to know what is expected, which in turn enables him or her to relax and enjoy the familiarity of the training routine. Consistency is especially important when an athlete participates in Motor Activity Training Program Days at locations other than his or her training facility. Consistency of the routine helps the athlete to be familiar with the activity regardless of the facility in which the sport activity is conducted.

Flexibility refers to the way that a training program is prepared and developed. When an athlete has difficulties with a particular sport activity, coaches should use different training methods and modify the activities so that the athlete can enjoy participating in the activity. Coaches must be creative and remember that there are a variety of ways to train an athlete to learn a sport skill.

Training programs should include only a few skills, recognizing that several activities may be utilized to teach each sport skill. It is better for an athlete to make a lot of progress in one or two sport skills rather than make only a small amount of progress in five or six sport skills. After establishing the goals and objectives for the training program, coaches should decide on the number of sport skills to work on at any one time. Start the program utilizing only one or two activities to teach each skill. Add other activities as the athlete gains competence in that skill. If an athlete trains in more than one Motor Activity Training Program skill, set up the equipment for those skills close to each other. This decreases the amount of "down time" he/she will have during the process of moving to the second skill. When possible, athletes who plan to participate in a Challenge Day, should focus their training program on the official Motor Activity Training Program Skills described in this guide. This begins the progression to participation in Special Olympics Events for Athletes with Lower Ability and beyond. Adaptations of the skills should be clearly documented. This will enable future coaches to continue the training consistency and set-up activities at organized Challenge Days to match the adaptations the athlete has been practicing.



Goals and Objectives of Training Programs

Training programs for Motor Activity Training Program athletes should include one or more of the motor/sport skills described in this guide. After evaluating the athlete and selecting one or two motor skills and training activities, coaches are encouraged to set long-term goals for each motor skill and short-term objectives for each selected training activity. Goals focus on the specific motor skill achievement the athlete will accomplish by the end of the training program. Short-term objectives are small, progressive steps that the athlete can achieve within two to three weeks. It should be noted that it might take longer than a few weeks for some athletes to achieve even small short-term objectives. In order to set goals, short-term objectives, and select appropriate training activities coaches should:

1. Determine the athlete's present ability level on each of the seven motor skills by using the Motor Skills Assessment found in the previous section.
2. Identify motor skills on which the athlete will train and develop goals and short-term objectives for the training.
3. Design activities that compliment existing skill levels and targeted short term objectives.
4. Determine any specialized instructional strategies, specialized equipment, or activity modifications necessary to help the athlete reach his/her objectives.



Principles to keep in mind:

A. Motor Skills and their corresponding Special Olympics Sports

Mobility..... leads to gymnastics

Dexterity..... leads to athletics/softball

Striking..... leads to softball/bowling/volleyball/tennis/badminton

Kicking..... leads to football/soccer

Manual wheelchair.....leads to athletics

Electric wheelchair.....leads to athletics

Swimming..... leads to aquatics

- ◆ Each motor activity is written in behavioral terms so that they can be used as Individual Education Plan/Individual Home Plan objectives. Also, each motor skill has been task analyzed into smaller, teachable components.

- ◆ The seven motor skills should always be taught in the context of a particular sport; NEVER in isolation. For example, never just teach a participant to grasp and release. Such a skill should be taught in the context of a sport such as softball or basketball, and how the student performs the skill (with a head stick, pushing the ball, using a beanbag instead of a ball) will be how the student plays the sport.



B. Motor Activity Training Programs are Non-competitive

1. Motor Activity Training Programs are non-competitive programs. There are no rules that govern competitions, and there is no award system for first, second, etc.
2. The purpose of this program is to provide all participants the opportunity to participate in sport-related activities.
3. To enable safe and successful participation, you may use adapted equipment, and/or physical assistance.
4. You may organize fun competitions such as modified relay races, bowling tournaments, or team sports, but the emphasis should be on fun and accomplishment rather than winning and losing.



C. Age-Appropriateness

1. Teach skills that are geared to participant's chronological age, not mental age or functional abilities.
 - Activities selected should be based on chronological age (e.g. choosing lifetime leisure sports such as bowling and/or golf for older children and adults rather than games and/or activities that are more appropriate for elementary-aged children).
 - How these activities are presented should be based on participant's abilities.
 - Whenever possible, equipment should also be geared to participant's chronological age (do not give stuffed animals or baby toys to adults).
 - Interact with participant based on chronological age, not assumed mental abilities (e.g. talking to and treating older students and adults with severe disabilities like you would interact with older students and adults without disabilities. For example, not using baby talk or stroking the hair or back of a high school aged student with a severe disability).
2. Focusing on chronologically age appropriate skills provides participants with dignity and helps them learn skills that will help them be more accepted by their peer group and their community.

D. Activities that stress or focus on functional abilities are those that are useful in a variety of environments.

1. Teach skills that will be used most often by participants now and into adulthood.
2. Functional skills are useful in a variety of environments.
 - Teaching a 16 year-old participant to toss a beanbag is not functional.
 - Teaching the student to push/toss that beanbag so that he can play a game of softball is more functional.
 - Better yet, determine what sports or recreational activities are available to the athlete in his/her current and future placements, and then teach skills necessary to participate in those activities. (for example, if the athlete will have access to bowling and swimming when he/she graduates, then these are the most functional sports to teach. If the participant is going to a group home where others play basketball and bocce, then these sports [with adaptations] are most functional to teach).
3. To best determine if an activity is functional:
 - Determine where athlete lives and what recreational activities will be available.
 - Ask parents/care givers about recreation interests of the family and/or the athlete.



- If possible, try to get input from the athlete directly.

E. Community-Based Instruction

1. The ultimate goal of teaching participants age appropriate, functional skills is giving them the opportunity to use these skills in the community.
2. If you are teaching swimming, ultimately you would like the participant to swim in an integrated environment at a local recreation center (with flotation devices and assistance as needed). Similarly, teaching bowling should lead to bowling at a local bowling center (with a ramp and assistance as needed).
3. Since the ultimate goal is to use recreation skills in the community, whenever possible instruction should take place in the community setting where the participant ultimately is placed. Teach 10-pin bowling at the local bowling center, teach basketball or softball at the local recreation center, teach lawn sports at the local group home where the participant will likely be placed.

Length of Training Sessions

Each training session should last 30 to 45 minutes. The major part of the session will involve practice in selected sport skill training activities. At the end of the session, a fun activity that the athlete is proficient in is often enjoyable for athletes.

A sample lesson plan for a coach working with an individual athlete might look like this:

- Warm-up: 4-5 minutes
- Sport Activity selected from the following section: 10-20 minutes
- Range of motion or other fun activity that athlete already has mastery of: 5-6 minutes

Following each training session, update the training activity sheet, recording improvements made and how they were made. Indicate how much assistance the athlete needed, the number of times the sport activity was attempted and completed as well as what can be done to elicit an improved performance from the athlete. Avoid trying to plan the entire training program at the beginning, based on long-term goals. Use the training activity sheets to plan activities on a daily/weekly basis, keeping the short-term objectives and long-term goals in mind. Each athlete is an individual and progress will be determined by the athlete's mental, physical and functional ability. Be prepared to revise long-term goals, short-term objectives and training activities based on how the athlete performs.

Each of the training sessions comprised of four components:



Sample Lesson Plan for small groups working together (approximately 45 min.)

1. Warm-Up Activities (Prepare participants for training.)
(10-12 minutes)
 - Sensory awareness and general awareness activities
 - Relaxation activities
 - Range of motion/stretching activities
 - Strengthening activities

2. Skill Stations (Work on specific skills used in functional sport-related activities.)
(15-20 minutes)
 - Because athletes may be at varying levels of skill development, set up activities that develop basic motor skills of Mobility, Dexterity, Striking, and Kicking.

 - For those athletes with emerging sport skills, set up stations based on Special Olympics Events for Athletes with Lower Ability in the selected sport. Those events are found in the Official Special Olympics Sports Rules Book. (for example, skills used to play basketball such as Spot Shot, Speed Dribbling, Target Pass, and 10 m Dribble)

 - Have available at each station a variety of equipment so that students with a variety of abilities will be challenged and successful (for example, different size balls and basket height for basketball shooting).

 - Participants remain at each station for several minutes; Long enough to have several repetitions but not long enough to lose interest.

 - Rotate through 3-4 stations. Stations can be revisited as time permits.

 - Make activities fun and motivating (For example, use brightly colored objects and interesting targets, use music, be enthusiastic, have fun competitions.). Measure participant's progress on data sheets supplied at each station.

3. Group Game (Apply skills worked on in stations to a group activity.)
(10-12 minutes)

A group game is a fun way for participants to apply the skills practiced at the various stations. It also can be structured so participants learn rules of the game and interact with peers and volunteers.

4. Conclusion (2-5 minutes)
 - Conduct range of motion/stretching and relaxation activities to cool down.
 - Review skill training activities of the session.



Location of Training Sessions

Motor Activity Training Program training sessions can be conducted indoors or outdoors. In some cases, it may be easier to have training sessions at the facilities in which the athletes live because of transportation and administrative issues. Often when caregivers and residential staff see the benefits of the program, they are more likely to assist with activities such as transporting athletes to other locations for training or Motor Activity Training Program Days.

Training Techniques

Cues

A cue is a request, signal or sign given to an athlete that indicates a desired movement or action. Coaches use a variety of verbal, tactile or visual techniques to cue athletes. It is essential that cues be short, simple and easily understood. Cues should be introduced at the beginning of the training program, and used throughout each training session. At various times during the training program, athletes may be given the following cues.

- Verbal cues can be used while demonstrating the activity or when an athlete is practicing the skill. They are words or phrases that emphasize movements or tell the athlete what you would like him/her to do, such as, “lift your arms” or “hold the racquet longer.”
- Visual cues are used when demonstrating a movement or sport skill. Visual cues should be used even if the athlete has no voluntary control over movement and needs total assistance to complete the skill. For athletes that require total assistance, two coaches or other volunteers may be needed in order to provide both visual cues and safe total assistance. Visual cues can include performing the skill along side of the athlete, or using sign language to signal the athlete.
- Physical prompting or tactile cues are used to initiate movement or encourage a desired movement without the coach assisting the athlete through the total movement or sport skill. An example of physical prompting is to touch the back of the athlete’s knee to encourage him/her to move the leg for walking.

Levels of Assistance

Motor Activity Training Program athletes may have little or no control over their movement and may need assistive devices and/or other assistance to perform a sport activity. Assistive devices, such as gait trainers and wheelchairs, are considered part of the athlete and should not be thought of as a part of the levels of assistance provided. The Motor Activity Training Program allows coaches to assist their athletes with performing a sport skill. However, coaches must be careful to provide the appropriate level of assistance. Four levels of assistance in the Motor Activity Training Program are provided in the Activity Section of this manual.

The goal of assisting and cueing athletes is to help all athletes, regardless of their abilities, to participate in functionally appropriate sport-oriented activities. The following are three basic guidelines for the coach to assist a Motor Activity Training Program athlete.

- 1) Know athlete’s ability and determine how much assistance the athlete needs.
- 2) Allow time for athlete to perform as much of the movement as possible
- 3) Provide only the assistance needed

Total assistance involves considerable cueing and prompting from the coach as he/she assists the athlete with the entire sport activity movement. For example, a coach may need to place the athlete’s hands on the badminton racquet



and physically move the athlete's arms through the stroke. Whenever possible, coaches should provide assistance at the joints so that the athlete's neurological system may receive specific sensory information about the movement. However, to avoid potential harm to the athlete, coaches should never grasp and pull only the fingers, hands or feet when attempting to encourage movement.

Partial assistance involves the coach cueing, prompting, or physically assisting the athlete through initiating or executing movement. Some Motor Activity Training Program athletes may be able to start a basketball push, but lack the ability to follow through. Coaches then need to provide assistance in completing the last part of the basketball push. Other athletes can complete the basketball push but need verbal and tactile cues such as touching the elbow in order to start the movement. Touching the back of the knee or ankle or verbally prompting athletes to kick the soccer ball are other examples of partial assistance.

The amount of partial assistance needed varies from athlete to athlete and will lessen as the athlete progresses. For example, after assisting an athlete with grasping and rolling a ball, the coach notices that the athlete is beginning to move his/her fingers independently. The coach may then be able to place the athlete's fingers on the ball and just slightly curl the fingers towards the ball. This prompts the athlete, allowing him/her to finish the task without assistance.

Some athletes may progress to the point where they complete the sport activity without assistance from the coach. An athlete may be able to propel his/her wheelchair forward with verbal encouragement from the coach but is unable to travel more than one meter. While this athlete is participating independently in the Motor Activity Training Program Wheelchair Push, he/she lacks the ability to participate in Official Special Olympics sports for athletes of lower ability levels.

The levels of assistance are of value as they provide opportunities for the athlete to:

- Participate in FUN activities and events
- Participate in a sport-oriented activity
- Interact with peers
- Be exposed to different types of equipment
- Experience different environments and sounds
- Participate in group activities and games
- Experience belonging to a group

Positive Reinforcement

The most powerful reinforcement tool for anyone, Motor Development athletes included, is self-gratification. The second most powerful reinforcement tool is praise that comes from an authority figure. Thus, it is extremely important for coaches (authority figures) to praise athletes after each performance of a movement, whether the movement was totally assisted or not. Many Motor Activity Training Program athletes are able to understand positive reinforcement expressions such as "Great Job" or "Well Done", gestures such as clapping or cheering, and physical reinforcements (patting on the back; high five). The reinforcement should be specific and offered immediately after the movement. (i.e. You really did that release well!) Like other athletes, Motor Activity Training Program athletes appreciate and need positive reinforcement and encouragement.



Athlete Sport Skill Progression

The following suggestions will help coaches identify an appropriate skill progression for each athlete.

1. Know the athlete in order to maximize the athlete's potential
2. Be flexible and creative when developing training methods
3. Ensure that training activities follow the progression of the sport activity to more advanced levels
4. Teach skills that can be used by an athlete throughout life and in the community
5. Challenge the athlete to attempt new skills
6. Communicate with parents, therapists, and teachers in order to enhance the athlete's ability to perform the sport activity
7. Keep concise records of athlete's progress for each training session and training program

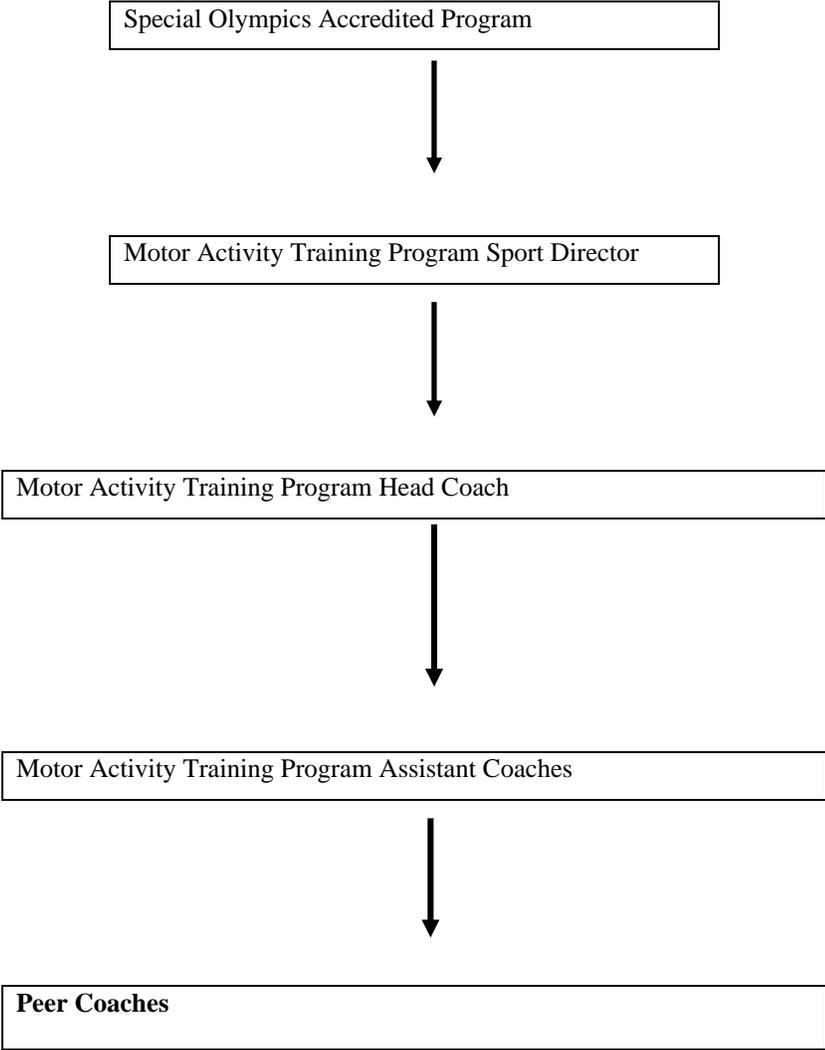
Proper Clothing

Motor Activity Training Program athletes are Special Olympics athletes. Therefore, they should be dressed like their fellow Special Olympics athletes, to the greatest extent possible. This is especially important when they are participating in Motor Activity Training Program activities as well as Regional and World Games. Clothing should be comfortable and appropriate for the weather conditions but should also allow athletes to move freely in their sport activity.



Motor Activity Training Program Structure

A Motor Activity Training Program (MATP) coach is usually designated by the accredited program to serve as the MATP Sport Director/Coordinator. The MATP Sport Director is in charge of MATP Program development. Local training programs must be developed using the official Motor Activity Training Program manual. Procedures need to be established for participation in any Motor Activity Training Program Days that are in line with Special Olympics, Inc. guidelines. It is important for the MATP Sport Director to create a well-organized program in which all participants have a rewarding experience. The relationships between Special Olympics accredited programs, the MATP Sport Director, and Motor Activity Training Program local coaches are outlined below.





The MATP Sport Director is responsible for:

- Securing accessible facilities that have a positive training environment and the equipment needed for the athletes
- Training Special Olympics coaches for the Motor Activity Training Program
- Recruiting and training volunteers
- Conducting athlete outreach
- Supervising the evaluation & registration of qualified athletes
- Supervising the training of athletes
- Conducting Motor Activity Training Program activities

With assistance from the MATP Sport Director, the head coach and local coaches are responsible for:

- Securing facilities
- Finding, evaluating, and registering local MATP athletes
- Training and coaching MATP athletes
- Conducting Motor Activity Training Program Days

Length of Motor Activity Training Program Training Programs

Motor Activity Training Program athletes must train prior to participating in a Challenge Day. It is recommended that athletes attend training sessions three times a week for eight weeks. However local programs have the right to alter the duration and frequency of training sessions according to the needs of their athletes

Equipment Needed for Motor Activity Training Programs

Equipment is an important part of the Motor Activity Training Program. Equipment enables athletes to perform sport skills and thus feel a sense of accomplishment. Some equipment is adaptive in nature such as bowling ramps or bumpers. Other equipment is exactly the same as would be used by any athlete learning or practicing a sport.

Below is a list of equipment needed to offer all of the Motor Activity Training Program sport activities. A local Motor Activity Training Program does not need all of the equipment to begin a training program. Coaches will only need the specific equipment required for the activities in which their athletes participate.



Equipment:

- Large bag or containers for transporting equipment
- Tape for marking courses or targets
- Flags
- Cones
- Mats
- Spring Board or 4 inch (10cm) high block or platform
- Badminton racquet-shuttle cocks
- Basketball
- Plastic bowling pins and bowling ramp
- Floor hockey stick-pucks-goal
- Football (soccer ball)
- Golf putter-plastic golf balls-plastic cup
- Balls and bean bags
- Batting tees
- Bat or stick of appropriate weight and size for athlete
- Table tennis paddle or a paddle of similar size-table tennis ball-large table
- Trainer volleyball of size similar to regular volleyball-net
- Ramps for bowling or bocce training.
- Bolsters for support during activities
- Scooter Boards for independent movement
- Toys and switches to get and keep athlete interest
- Stretch bands for muscle development
- Pool with depth no more than one meter and floatation devices such as devices that circle the athlete. Flotation boards, earplugs, webbed swimming gloves, and extra towels may be of assistance.



Training Log:

The following training log for Motor Activity Training Program athletes is designed for coaches to use each week of the eight-week training program to track the attendance, activity participation, and assistance needed by an athlete. Coaches who meet with an athlete one, two or three times a week can use the form.

Motor Activity Training Program Weekly Training Log

Athlete _____ Sport _____ SO Program _____
 Circle Training Week 1 2 3 4 5 6 7 8

Under Assistance Level please indicate if:

- a) the skill is accomplished with Total Assistance (TA), Partial Assistance (PA) or it is Independent (I); and
- b) describe the exact type of assistance used and when the assistance is needed.

Noting this information is of particular importance because as an athlete progresses in his/her training program, the amount and type of assistance needed may change.

Please describe any warm-up activities or group games used with the athlete:

Please list movement concerns, health conditions and/or safety issues that should be considered when working with the athlete:

Date	Skill	Assistance Level	# Attempted	# Completed	Coach



Challenge Days

As previously stated, the Motor Activity Training Program emphasizes participation, rather than competition. Challenge Days are culminating activities that are intended to include the sport skills listed in this manual or modified to meet each athlete's individual needs. Challenge Days are designed to provide athletes with opportunities to demonstrate their personal best in sport skills. Often skills will have been modified to meet individual athlete's capabilities. These adaptations should be forwarded to coaches of all participants so that they can use the adaptations in their own training programs.

Many accredited programs have previously offered or cooperated with other programs that offer artistic, social, and cultural experiences. These activities can be offered alongside Challenge Days. This does not lessen the experience for the athletes but provides program directors with the opportunity to offer additional activities.

Awards & Recognition

Athletes like to be recognized for their efforts. This is true of Motor Activity Training Program athletes who put as much effort into their sport skill development as other athletes. At the end of a training program, all athletes who participate in a Challenge Day are presented with a participation award. Awards at Challenge Days can be almost anything such as specially designed medals, certificates, pictures, hats or T-shirts. Motor Activity Training Program athletes are not eligible to receive Official Special Olympics Games medals indicating first, second or third place. Other medals may be awarded, but the presentation of soft toys is inappropriate.

Event Management

This section is being developed in conjunction with the new Event Directors Guide to avoid duplicating materials. The new guide will be distributed with the Motor Activity Training Program Guide.

SECTION V

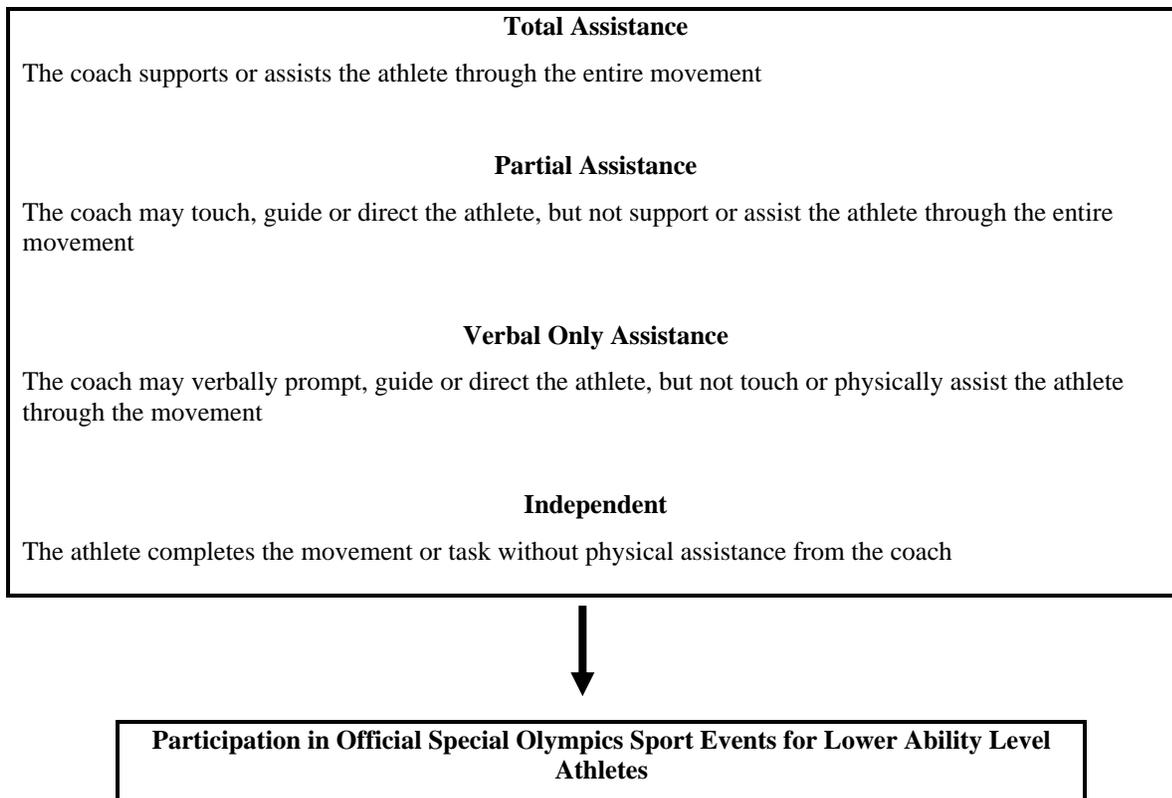
MOTOR ACTIVITY TRAINING PROGRAM ACTIVITIES



The activities presented in this manual are based on Special Olympics events for lower ability athletes. While Motor Activity Training Program athletes have not gained the skills needed to compete in Special Olympic Events for lower ability athletes, this program provides them an opportunity to perform their personal best, without comparison to other athletes. Motor Activity Training Program activities allow the athletes to develop the skills needed to move toward independent participation. With proper training and encouragement, some of these athletes may eventually develop skills that will allow them to qualify for participation in Official Special Olympics events designed for athletes with lower abilities

Levels of Assistance

In order to provide sport opportunities for athletes with severe or profound intellectual disability, assistance may be required for athletes to perform many of these activities. four levels of assistance are recommended here. These levels enable coaches to assist athletes with the progression from dependent participation to more independent participation.





Special Olympics Motor Activities Training Program Coaching Guide

Motor Activity Training Program activities are sport based, and designed to be in line with Special Olympics events for lower ability athletes. It is recognized that the tasks will be modified to meet the challenges and abilities of each individual athlete. Lead-up activities have been designed for Motor Activity Training Program athletes and are suggested and presented in a simple format. These should be viewed only as suggestions. Coaches are encouraged to be creative and to enrich the experiences offered to the athletes. Terms used to describe various components of the Motor Activity Training Program include:

Official Special Olympics Sports	Refers to	Special Olympics events for lower ability athletes	WHERE	Focus is on training and preparing for competition – to ensure fair competition, modification is discouraged
Motor Activity Training Program Sport Activity	Refers to	Motor Activity Training Program Activities	WHERE	Focus is on challenging athletes via motor tasks associated with sport participation. Modification and personalization is encouraged.
Equipment	Refers to	Either sport or assistive devices used by athletes while performing activities.	WHERE	Needs change based on the activities offered and the modifications needed for each athlete.
Levels of Assistance	Refers to	Amount and type of help an athlete requires to successfully complete an activity: Total Assist, Partial Assist, or No Assist	WHERE	The focus is on the athlete performing at his/her most independent level, not merely being moved through a task. Total assistance may be necessary but athletes should be encouraged to respond.
Event Description	Refers to	Description of the official Motor Activity Training Program sport activity	WHERE	The standard for successful mastery of the task and skill progressions for achieving those standards are identified.
Lead-up Activities	Refers to	Skill progressions that may help athletes achieve mastery of Motor Activity Training Program Activities.	WHERE	Activities are outlined that assist in introducing athletes to sport activities and helping them prepare to attempt the activity.
Possible Modifications	Refers to	Suggestions that can be used to help the athlete perform the activity	WHERE	Modifications that have been successful with other athletes are outlined.
Safety Precautions	Refers to	Conditions essential for safe participation	WHERE	These are reminders of venue safety as well as guidelines for working with athletes who need differing levels of assistance.



The following chart presents an overview of the Special Olympics sports, the related sport events for lower ability athletes and the corresponding Motor Activity Training Program sport skills. Each Motor Activity Training Program sport skill has been designed to match and, for some athletes, lead into Special Olympics events for lower ability athletes.

Sport	Event for Lower Ability Athletes	Motor Activity Training Program Sport Skill
Aquatics	15 Meter Flotation Race	Float
	15 Meter Walk	Pool Walking
	10 Meter Assisted Swim	Beginning Assisted Swim
Athletics	10 Meter Assisted Walk	Walking
	Standing Long Jump	Two Foot Jump
	10 Meter Wheelchair Race	Manual Wheelchair Propel
	25 Meter Motorized Wheelchair Obstacle course	Motorized Wheelchair Short Obstacle Course
Badminton	Badminton Target Serve	Badminton Strike
Basketball	Basketball Target Pass	Basketball Push
Bowling	Frame Bowling	Target Bowling
Floor Hockey	Floor Hockey Target Shot	Puck Shot
	10 Meter Puck Dribble	Puck Dribble
Football	Football Dribbling	Football Push
	Football Shooting	Football Kick
Golf	Short Putt	Putting
Roller Skating	30meter straight line race	Stand and March
Softball	Softball Fielding	Softball Fielding Event
	Softball Throw	Softball Propel
	Softball Hitting	Softball Strike
Table Tennis	Return Shot	Table Tennis Strike
Volleyball	Overhead Passing	Volleyball Throw
	Volleyball Serving	Overhead/Underhand Serve

Please Note:

The lead-up activities and modifications included in this manual are just suggestions that are designed to help coaches provide more community-based sport opportunities for their athletes. The key to success is to be creative, modify activities for each athlete as necessary. Avoid getting discouraged, and find ways to motivate your athletes to improve upon their personal best.



WARM-UPS

In Official Special Olympics as well as other sport programs, warm-ups are used to prepare muscles and soft tissues for the demands of an activity. While all of the Motor Activity Training Program sport activities involve physical movement, some do not place strenuous demands on the entire body. Athletes with significant intellectual disability may have a limited range of motion or lack sufficient strength to participate in a sport skill for a long period of time. Motor Activity Training Program athletes should participate in warm up activities with the coaches concentrating on warming up the specific body part(s) involved in the activity. Warm-ups can also be used to assist the athlete in developing as much independent movement as possible.

Active range of motion involves the athlete moving his/her body part without the assistance of a coach, trainer or therapist. The athletes should perform active range of motion activities slowly and smoothly taking care to avoid jerking or moving body parts too quickly. Joints should not be stretched beyond their normal range of motion. When the desired position is reached, the athlete then holds the position for 10-15 seconds to help relax and lengthen the muscles.

WARM-UP ACTIVITIES: (First 10-12 minutes of the training session) Select activities that will warm up the parts of the body you will use in this session.

- **Breathing Activity**

Determine the most comfortable starting position. Demonstrate and then ask the athlete to inhale deeply, through their nose if possible, and hold it, then demonstrate and ask participant to forcefully exhale through their mouth. Repeat five times.

- **Accepts tactile stimulation:**

Using a soft towel, yarn ball, nerf ball, or other soft object, gently rub the object up and down the participant's arm. Repeat with other body parts.

- **Independent muscle relaxation**

Have participants work on tightening muscles for five seconds and relaxing muscles for 15 seconds on their own. It is sometimes helpful to suggest images for the athlete to focus. Raw spaghetti is rigid, cooked spaghetti is relaxed.



Sample Active Warm-ups for Athlete Lying Supine on Mat

Arm Lifts

- Lift one arm straight up and over until it touches the mat over your head, and return it to starting position
- Repeat with the other arm and return it to starting position
- Repeat with both arms at the same time and return them to the starting position
- Repeat arm movements several times
- Cross left arm over to the right side of the body (left to right)
- Cross right arm over to the left side of the body (right to left)
- Repeat cross over arm movements several times

Leg Lifts

- Lift one leg up to a 45 degree angle and return it to starting position
- Lift the other leg and return to starting position
- Lift both legs and return to starting position
- Repeat leg movements several times
- Cross left leg over right leg
- Cross right leg over left leg
- Repeat several times

Massage techniques by professionals can be effective as a warm up activity for athletes with severe or profound intellectual disability. Massage involves applying a small amount of pressure to the muscles that are to be used in the Motor Activity Training Program activity. The hands of the therapist are firmly placed on the athlete and then moved over the muscle gradually applying a small amount of pressure to the muscle. At all times, the professional should be aware that an athlete might have skin tissue that can be easily damaged.



Coaches are also encouraged to keep athletes warm. This assists in maintaining muscle elasticity, joint range of motion, and preventing injuries during participation. Athletes should wear adequate clothing prior to the start of an activity, between sport activities and following participation.

- **STRETCHING**

Stretching and 'Range of Motion' activities are important but not to be done before consulting with the athlete's parents and/or Physical Therapist to learn specific ways this athlete is used to stretching.

- **Passive stretching by coach**

The coach, if properly trained, may provide passive stretching and massage techniques to warm-up and stretch an MATP athlete. However, Special Olympics MATP Coach Certification does NOT qualify the coach to perform these activities. That certification must come through a physical therapist, adapted physical educator, occupational therapist, nurse or other licensed professional.

STRENGTH AND CONDITIONING ACTIVITIES:

For many Motor Activity Training Program athletes, the act of being mobile is good strength and conditioning exercise. If an athlete is ambulatory, they should be encouraged to walk without assistance to help core muscle development and control. If an athlete uses a wheelchair, he/she should be encouraged to self-propel that chair.

The exercises listed first involve the use of an exercise band. Caution must be used when introducing exercise bands to your training. They can be dangerous if the athlete does not have the strength to hold and maintain any level of tension in the band. Consult the athlete's physical therapist before introducing exercise bands into the program.

EXERCISE BAND ACTIVITIES

- **Chest and Shoulders:**

While sitting in a stable chair, hold exercise bands at both ends with the band wrapped across the back of the chair. Extend arms as fully as possible, then bring hands together in front of your chest, then reverse the action. Repeat 8 – 12 times.

- **Shoulders:**

Hold the band at both ends and in front of your body so that arms are shoulder width apart and extended so that the band is taught. Slowly pull your arms apart trying to keep your arms straight, then slowly return to the starting position. Repeat 9 – 12 times.

- **Abdominal (core) Muscles:**

While sitting in a sturdy chair with a full back, wrap the band around the back of a chair and hold it at both ends. Extend arms in front of you to make the band taught. Without bending your arms, lean forward keeping your back as straight as possible. Slowly return to the starting position. Repeat 8 – 12 times.

- **Shoulders:**

Hold the band to the side of a chair so that one hand is holding the band against the seat of the chair and the other hand is parallel to the floor and extended outward. Re-grip the band with the lower hand at different positions on the band to change the tension. Slowly lift your upper hand away from the lower hand. Hold the upper hand up for a few seconds and then slowly return it to the starting position. Repeat 8 – 12 times with each side.

- **Triceps:**

Hold the band so that one hand is anchoring the band to your chest while the elbow of the other arm is resting on the arm of the chair; hand gripping the end of the band. Keeping the elbow on the arm of the chair, palm facing out, push



the palm of your hand down until both the wrist and elbow are on the arm rest. Slowly return to starting position. Repeat 8 – 12 Times for each arm.

STRENGTH AND CONDITIONING ACTIVITIES WITHOUT AN EXERCISE BAND

- Continuous, self-propelled movement:

Explain to the athlete that they are going to walk/push themselves in their wheelchair, or move on a scooter board on their own for ____ minutes. Start with a 30 second “walk” followed by 10 seconds of rest. Repeat five times. As they improve, increase the walking time until they can maintain this activity for a total of 10 minutes.

- Toe Touches:

Have the athlete either stand or sit tall if they use a wheelchair. Demonstrate bending slowly over to touch your toes and then ask the athlete to copy your actions. Repeat 10 times. Knees should be straight but not locked. Do not bounce. Hold the position for a count of five and then slowly return to starting position.

- Sit-ups:

Athlete should lie on their back on a mat with arms folded across the chest, knees bent and feet flat on the floor. Have the athlete attempt a sit up. They may need to start by doing a crunch (just lifting head and shoulders off the mat) and returning to the start position.

You may also assist the athlete in sitting up and have them work on controlling the down motion (reverse sit-up).

- Dance Activity

Put music on and ask athletes to move with the music. Start with arm movements and then move to other body parts. The point is to extend the amount of time engaged in continuous movement.



SENSORY MOTOR AWARENESS ACTIVITIES

These activities are designed to assist athletes in development of the awareness of visual, auditory and/or tactile stimulation necessary for sports participation. They should be incorporated into regular training.

- Visual Tracking:

Be sure the athlete is comfortable, with clear field of vision. Hold or place a colorful object in their field of vision and ask that they “Look at the _____”. Once they have focused on the object, move it slowly up or down or side to side to encourage the athlete to visually ‘track’ the object.

- Auditory Attention:

Once the athlete is comfortable and ready to begin, ask them to, “Listen for the sound.” Use bells, sticks, Tambourines – you can also attach ribbons to these which add color. (anything that you can bang together to make noise). Start softly so you don’t startle the athlete or those around them. Once the athlete responds to the sound, move from side to side making the noise and watch for recognition of the direction from which the noise is coming.

- Tactile Stimulation

Some athletes are ‘tactile defensive’ and may not be receptive to this exercise. It will be helpful to know their history with tactile stimulation before starting.

Once the athlete is comfortable (either prone/supine or sitting) and ready to begin, tell them, “I am going to touch your arm with a soft object.” Once the athlete responds to the touch on one part of their body, you can move to another part such as head, hand, leg, etc.

MOTOR ACTIVITIES

MOBILITY

- Head Lift

Athlete is lying prone (face down) on a mat or soft surface. Give the verbal cue, “Lift your head.” If necessary, provide visual stimulation (something to look at during the exercise) to provide focus and motivation. “Keep looking at _____.”

If the athlete still is unable to lift his/her head, gently stroke their spine from the neck down several times.

Once the athlete can raise his or her head, start working on holding it up for longer periods of time.



- Rolling to back

Athlete is lying prone (face down) on a mat or soft surface. Arms are at their sides or extended over head. Give the verbal cue, “Roll over” to a supine (face up) position. If necessary, provide visual stimulation to provide focus. If assistance is needed, start by turning the athlete’s head in one direction and pushing with the hand at the shoulder and hips in the direction the athlete is facing. With each attempt, reduce assistance as much as possible.



- Body Roll

Athlete is lying prone (face down) on a mat or soft surface. Arms are at their side or extended over head. Give the verbal cue, “Roll over” to a supine (face up) position, then have them continue rolling in the same direction back to the prone (face down) position. If necessary, use visual stimulation to provide focus. If assistance is needed, start by turning the athlete’s head in one direction and pushing with the hand at the shoulder and hips in the direction the athlete is facing. With each attempt, reduce assistance as much as possible.



DEXTERITY

- Grasp and Hold:

Once athlete is in comfortable position, place an object (bean bag or ball works best) beside or in front of the athlete’s hand and then give the verbal cue to, “Grasp the _____.” If the athlete has trouble opening his or her hand to grasp, assist by pushing down on the back of their hand to help open their fingers. Encourage the athlete to hold the object for 10 seconds and then release it. If they have trouble with the release, assist the same way as before by pushing down on the back of the hand.





- Grasp and Move:

Once athlete is in comfortable position, place an object (bean bag or ball works best) beside or in front of the athlete's hand and then give the verbal cue to, "Pick up the _____ and give it to me." Be sure to provide an obvious target in the form of cupped hands or a bowl to catch the object. If the athlete has trouble opening his or her hand to grasp, assist by pushing down on the back of their hand to help open their fingers. Encourage the athlete to hold the object for 10 seconds and then release it. If they have trouble with the release, assist the same way as before by pushing down on the back of the hand.

- Grasp, Move, and release toward a target:

Once athlete is in comfortable position, place an object (bean bag or ball works best) beside or in front of the athlete's hand and then give the verbal cue to, "Pick up the _____ and move it closer to the target." Demonstrate the act of picking up the object and rolling or tossing toward a target a few centimeters away. Be sure to provide an obvious target in the form of a colored plate, mat or cupped hands to catch the object. If the athlete has trouble opening his or her hand to grasp, assist by pushing down on the back of their hand to help open their fingers. Encourage the athlete to hold the object for 10 seconds and then release it. If they have trouble with the release, assist the same way as before by pushing down on the back of the hand.

- Shot Put

Once athlete is in comfortable, 'ready' position, give the athlete a softball, bean bag or other small, round object. Give the verbal cue to, "Put the shot." If the athlete has trouble starting the motion, assist by holding their shoulder and forearm and assisting them in moving in a shot-put pattern.



<i>Water Adjustment Activities</i>

- Transfer the athlete to the edge of the pool
- Use a sponge, water bottle or your hand, and gently wet the athlete's arms and legs
- If athlete accepts this, wet his/her back and stomach
- If athlete accepts this, carefully wet his/her face
- If athlete accepts this, prepare him/her to enter the water feet first with verbal, visual or tactile cues. Make it very clear to the athlete that he/she is entering the pool, feet first
- Use "Tips for Transferring" to safely move athlete into the shallow end of the water
- Gently lower the athlete so that his/her feet enter the water first
- If the athlete accepts this, gently and gradually lower the athlete into the pool
- Encourage the athlete to relax and enjoy the water
- For the first few times, keep the amount of time the athlete spends in the water brief (5-10 minutes)
- If a flotation aid is used, the coach should be familiar with how the device works and how to use and remove it safely.
- Gradually increase the time the athlete spends in the water
- Repeat the adjustment activities, as needed
- Talk to athletes as you go through each stage to gauge interest and to explain each activity.



MOTOR SKILL TRAINING ACTIVITIES BY SPORT:

<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program Activity</i>
Aquatics	<i>Float</i>
Motor Activity Training Program Float Leads to the 15 Meter Flotation Race	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Pool preferably with depth no greater than 1 meter (3.25 ft.) 2. Flotation device that wraps around the body 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

<p>Description for the Motor Activity Training Program Float Activity</p> <ol style="list-style-type: none"> 1. Assist athlete with flotation 2. Position athlete in a pool with a depth no greater than 1 meter (3.25 ft.), with or without assistance 3. Direct athlete to float on front or back depending upon the capability of the athlete 4. Athlete floats, with or without assistance

<p>Lead-up Activities for the MATP Float</p> <ul style="list-style-type: none"> • Review Water Adjustment Activities (on previous page) with the athlete, if needed • Assist the athlete with lowering his/her body in the water • Support the athlete by placing one hand under his/her chest and the other hand on his/her back, lower your body to the same level as the athlete (athlete may be touching the floor of the pool with his/her feet) • Assist the athlete by moving the hand that is on the athlete's back under his/her legs, lifting the athlete's feet off the floor of the pool • Move hands back under the athlete's torso to encourage floating as athlete assumes supine position. • Allow the athlete to float momentarily by himself/herself, if possible
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Possible Modifications for the Motor Activity Training Program Float

- Use floating board as needed
- Use peers to model float and as assistants
- Reduce dependence on floating/supporting aides

Safety Precautions

- Ensure that the athlete is adjusted to the water
- Use proper techniques when transferring athlete in and out of pool. Where hoists are used, knowledge of their use, or staff knowledgeable in their use should be available for transferring athletes into and out of water.
- Maintain a minimum of one coach for every athlete in the water
- Fasten athletes securely into appropriate flotation devices
- Monitor athlete for fatigue
- Allow athlete to rest during training sessions
- Use ear plugs, if needed
- Maintain one observer on the pool deck for every two athletes in the pool
- Wrap athlete in towel as he/she leaves the pool
- Ensure that athlete does not become chilled



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program Activity</i>
<i>Aquatics</i>	<i>Pool Walking</i>
Motor Activity Training Program Pool Walking Leads to the 15 Meter Walk	

Equipment	Levels of Assistance
1. Pool with depth no greater than 1 meter (3.25 ft.)	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

<p>Description for the Motor Activity Training Program Pool Walking Activity</p> <ol style="list-style-type: none"> 1. Position athlete in a pool with a depth no greater than 1 m. (3.25 ft.), with or without assistance 2. Direct athlete to walk 3. Athlete walks in water, with or without assistance
<p>Lead-up Activities for the Motor Activity Training Program Pool Walking Activity</p> <ul style="list-style-type: none"> • Review water adjustment activities with the athlete, if needed • Place an object in the water or have a coach or volunteer stand in front of athlete as a target • Encourage athlete to stand in water facing one of the coaches



Possible Modifications for the Pool Walking Activity

- Use parallel bars in pool as needed
- Use flotation boards as needed
- Use peers to model pool walking and as assistants
- Decrease/increase distance according to athlete's ability
- Reduce dependence on flotation/support aides as athlete progresses

Safety Precautions

- Ensure that the athlete is adjusted to the water
- Use proper techniques when transferring in and out of pool
- Maintain a minimum ratio of one coach for every athlete in the water
- Fasten athletes securely into appropriate flotation devices
- Monitor athlete for fatigue
- Allow athlete to rest during training sessions
- Use ear plugs, if needed
- Maintain one observer on the pool deck for every two athletes in the pool
- Wrap athlete in towel as he/she leaves the pool
- Ensure that athlete does not become chilled



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program Activity</i>
<i>Aquatics</i>	<i>Beginning Assisted Swim</i>
MATP Beginning Assisted Swim Leads to the 10 Meter Assisted Swim	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Pool with depth no greater than 1 meter (3.25 ft.) 2. Flotation device that wraps around the body 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

<p>Description for the Motor Activity Training Program Beginning Assisted Swim Activity</p> <ol style="list-style-type: none"> 1. Assist athlete with flotation device 2. Position athlete in a pool with a depth no greater than 1 meter (3.25 ft.), with or without assistance 3. Direct athlete to swim, correcting his/her body position as needed 4. Athlete swims, with or without assistance
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<p>Lead-up Activities for the Motor Activity Training Program Beginning Assisted Swim Activity</p> <ul style="list-style-type: none"> • Review water adjustment activities with the athlete, if needed • Place an object in the water or have a coach/volunteer stand in front of athlete as a target • Assist athlete to the extent required (verbal, partial, or full) in moving arms without the use of the legs • Return athlete to upright position and allow athlete to rest • Assist athlete in holding onto the side of the pool and moving just the legs • Return athlete to upright position and allow athlete to rest



Please Note:

Forward movement without assistance from the coach qualifies the athlete for Special Olympics Assisted Swim activity.

Possible Modifications for the Motor Activity Training Program Beginning Assisted Swim Activity

- Use kick or flotation boards
- Use swimming webbed gloves
- Use other flotation devices
- Use variety of bright and noisy objects as reinforcement

Safety Precautions

- Ensure that the athlete is adjusted to the water
- Use proper techniques when transferring athlete in and out of pool
- Maintain a minimum of one coach for every athlete in the water
- Fasten athletes securely into appropriate flotation devices
- Monitor athlete for fatigue
- Allow athlete to rest during training sessions
- Use ear plugs, if needed
- Maintain one observer on the pool deck for every two athletes in the pool
- Move the athlete's limbs with care
- Do not move any of the athlete's joints or segments beyond their normal range of motion (stop when you feel resistance)
- Wrap athlete in towel as he/she leaves the pool
- Ensure that athlete does not become chilled



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Athletics	<i>Walking</i>
Motor Activity Training Program Walking Leads to the 10 Meter Assisted Walk	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Appropriate shoes 2. Walking aids needed by athlete 3. Tape or flags and cones to mark starting/finishing line 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

Description for the Motor Activity Training Program Walking Activity

1. Mark start/finish lines less than 10 m. apart and two lanes wide
2. Position athlete with walking aide and coaches at the starting line
3. Direct athlete to walk toward finish line
4. Athlete walks with aide towards finish line with coach's assistance

Lead-Up Activities for the Motor Activity Training Program Walking Activity

- Athlete stands with assistance for 5 seconds
- Athlete stands with assistance for 10 seconds
- Athlete walks with assistance for 2 meters
- Athlete stands without assistance for 5 seconds
- Athlete stands without assistance for 10 seconds



Possible Modifications for the Motor Activity Training Program Walking Activity

When ever possible, either use a real track or prepare a simulated track with lanes, start and finish lines. If flags or cones are used to assist athletes with staying in a lane, they should be gradually removed as the athlete becomes more skilled at staying in the lane.

- Increase/decrease distance as needed
- Mark start/finish line with other materials/objects
- Use visual aids (flags, cones) as needed

Safety Precautions

- Stay within reach of athlete at all times
- Use wide lanes with no obstacles
- Use hard, flat surfaces
- Assist the athlete with forward movement as needed



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
<i>Athletics</i>	<i>Two-Foot Jump</i>
Motor Activity Training Program Two-Foot Jump Leads to the Standing Long Jump	

Equipment	Levels of Assistance
1. Appropriate shoes 2. Tape for take-off line 3. Mats (for landing area)	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

Description for the Motor Activity Training Program Two-foot Jump Activity

- Mark a take-off line
- Position athlete with or without assistance behind the take-off line
- Direct athlete to jump
- Athlete jumps with or without assistance-*athlete does not need to jump forward*

Lead-up Activities for the Motor Activity Training Program Two-Foot Jump Activity

- Athlete stands with assistance for five seconds
- Athlete stands and swings arms with assistance
- Athlete stands without assistance for five seconds
- Athlete stands and swings arms without assistance



Please Note:

A two-foot take-off and landing with forward movement without assistance from the coach qualifies the athlete for the Special Olympics Standing Long Jump activity.

Taking off from one foot and landing on one or two feet is a “leap” as opposed to a jump.

Possible Modification for the Motor Activity Training Program Two-Foot Jump Activity

- Use a spring board or 10 cm (4 in.) high block or platform for the athlete to jump “off of” to assist with initiating jump

Safety Precautions

- Place sufficient mats around landing area
- Secure any platform/block to the floor
- Stay within reach of the athlete at all times
- Assist the athlete in maintaining his/her balance



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
<i>Athletics</i>	<i>Manual Wheelchair Propel</i>
Motor Activity Training Program Manual Wheelchair Propel Leads to the 10 Meter Wheelchair Race	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Manual wheelchair 2. Tape, cones or flags to mark the start/finish line 3. When possible, use actual track and equipment. 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

Description for the Motor Activity Training Program Manual Wheelchair Propel Activity

1. Mark start and finish lines less than 10 m. apart and 2 lanes wide
2. Position athlete's front/first wheels behind the starting line
3. Use starting commands according to official Special Olympics Rules
4. Athlete propels forward toward finish line with or without assistance

Lead-up Activities for the Motor Activity Training Program Manual Wheelchair Propel Activity

- Athlete places hands on wheels with assistance for 5 seconds
- Athlete pushes wheels with assistance for 10 seconds
- Athlete places hands on wheels without assistance for 5 seconds
- Athlete pushes wheels without assistance for 10 seconds

Possible Modification for the Motor Activity Training Program Manual Wheelchair Propel Activity

- Use auditory or visual signals to assist athletes
- Place an object, coach or volunteer at the end of the lane as a target
- Increase/decrease the distance to the end of the lane/target, if needed

Safety Precautions

- Use a flat, hard surface
- Use clear wide lanes without obstacles
- Stay within reach of athlete at all times
- Assist the athlete with maintaining control of the wheelchair



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
<i>Athletics</i>	<i>Motorized Wheelchair Activity</i>
Motor Activity Training Program Motorized Wheelchair Activity Leads to the 25 Meter Motorized Wheelchair Obstacle Course	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Motorized wheelchair 2. Tape to mark lanes 3. Cones and flags to mark obstacle course 	<p>Total Assistance</p> <p>The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance</p> <p>The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent</p> <p>Athlete completes the movement or task without assistance from the coach</p>

Description for the Motor Activity Training Program Motorized Wheelchair Activity

1. Mark obstacle course less than 25 meters in length with 1 turning box and 2 cones
2. Position athlete, with or without assistance, with front/first wheel behind starting line
3. Signal athlete to start by using starting commands
4. Athlete maneuvers wheelchair with or without assistance through course (may use 2 lanes to complete course)

Lead-up Activities to the Motor Activity Training Program Motorized Wheelchair Activity

- Athlete moves wheelchair with assistance for 10 seconds
- Athlete moves wheelchair through one turning box with assistance
- Athlete moves wheelchair through two cones with assistance
- Athlete moves wheelchair without assistance for 10 seconds
- Athlete moves wheelchair through one turning box without assistance
- Athlete moves wheelchair around two cones without assistance



Please Note:

The ability to complete a 25-meter course with 2 turning boxes and 4 cones without assistance from the coach qualifies the athlete for the Special Olympics 25 Meter Wheelchair Obstacle Course.

Possible Modifications for the Motor Activity Training Program Motorized Wheelchair Activity

- Use visual signals to assist athlete as needed
- Modify obstacle course according to the athlete's needs
- Train athlete for the obstacle course by sections

Safety Precautions

- Use a flat, hard surface
- Use wide lanes
- Stay within reach of athlete at all times
- Assist the athlete with maintaining control of the wheelchair



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Badminton	<i>Badminton Strike</i>
Motor Activity Training Program Badminton Strike Leads to the Badminton Target Serve	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Racquet 2. Shuttle cock (suspended) 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

Description for the Motor Activity Training Program Badminton

1. Position the athlete, seated or standing
2. Suspend shuttle cock within reach of athlete between waist and shoulder.
3. Position racquet in athlete's dominant hand with or without assistance
4. Direct athlete to strike shuttle cock
5. Athlete strikes shuttle cock with or without assistance

Lead-up Activities to the Motor Activity Training Program Badminton Strike Activity

- Athlete grasps racquet with assistance
- Athlete grasps and holds racquet for 5 seconds with assistance
- Athlete swings racquet for 5 seconds with assistance
- Athlete grasps racquet without assistance
- Athlete grasps and holds racquet for 5 seconds without assistance
- Athlete swings racquet for 5 seconds without assistance



Possible Modifications for the Motor Activity Training Program Badminton Strike Activity

- Suspend a balloon, nerf ball, or fluffball to teach strike
- Use adaptive devices to assist athlete with holding racquet
- Adjust height of suspended shuttle cock to athlete's needs
- Vary the size and color of shuttle cock as needed
- Modify size and length of racquet as needed (i.e. extend length of the shaft if the shuttle cock is coming to close to the athlete's body)
- Modify distance to shuttle cock
- Attach a small bell to the inside of the suspended shuttlecock so the athlete hears a bell ring when he/she strikes the shuttlecock.

Safety Precautions

- Ensure athlete maintains a balanced position
- Avoid being hit when athlete attempts to strike the shuttle cock
- Ensure that the returning shuttle cock does not hit the athlete



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Basketball	<i>Basketball Push</i>
MOTOR ACTIVITY TRAINING PROGRAM Basketball Push Leads to the Basketball Target Pass	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Basketball 2. Clearly marked target 3. Tape 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>





Description for the MOTOR ACTIVITY TRAINING PROGRAM Basketball Push Activity

1. Mark a target on the wall no less than 1 meter (39 inches) square and at a height on the wall equal to the athlete's torso.
2. Position athlete less than 2.4 meters (7'9") from target with or without assistance
3. Provide athlete with the ball (place in hands or offer to athlete)
4. Direct athlete to push ball toward target
5. Athlete pushes ball forward from chest towards target with or without assistance

Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Basketball Push Activity

- Athlete places hands on ball and holds ball for 5 seconds with assistance
- Athlete places hands on ball then releases ball with assistance
- Athlete places hands on ball and pushes ball away from chest/body and across a surface with assistance
- Athlete places hands on ball and holds ball for 5 seconds without assistance
- Athlete places hands on ball and releases ball without assistance
- Athlete uses one or both hands on ball and pushes ball away from chest/body and across a surface without assistance

Please Note:

The ability to pass/project the ball more than 2.4 meters (7'9") toward a target without assistance qualifies the athlete for the Special Olympics Basketball Target Pass.

Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Basketball Push Activity

- Vary size, weight, color and texture of ball
- Increase/decrease the distance between the athlete and the target
- Use a suspended ball or balloon at the level of the athlete's chest to teach the push
- Mark the target on the floor and gradually move toward a wall target as athlete progresses.

Safety Precautions

- Ensure that athlete maintains a balanced position
- Ensure the athlete is securely positioned in his/her wheelchair before pushing the ball
- Protect athlete from rebounding/returning ball



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Bowling	<i>Target Bowling</i>
MOTOR ACTIVITY TRAINING PROGRAM Target Bowling Leads to the Frame Bowl	

Equipment	Levels of Assistance
1. Plastic bowling ball (30 cm. In diameter)	Total Assistance The coach supports or assists the athlete with the entire movement
2. Plastic Bowling pins	Partial Assistance
3. Bowling ramp as needed	The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement
4. Tape	Independent Athlete completes the movement or task without assistance from the coach



<p>Description for the MOTOR ACTIVITY TRAINING PROGRAM Target Bowling Activity</p> <ol style="list-style-type: none"> 1. Set-up pins less than 5 meters (16'3") from foul/bowling line 2. Position athlete standing or seated behind the bowling line with or without assistance 3. Place ball in athlete's hand or on a bowling ramp as needed 4. Athlete rolls ball toward pins with or without assistance

<p>Lead-up activities for the MOTOR ACTIVITY TRAINING PROGRAM Target Bowling Activity</p> <ul style="list-style-type: none"> • Athlete holds ball for 5 seconds with assistance • Athlete holds then releases ball with assistance • Athlete holds ball for 5 seconds without assistance • Athlete holds then releases ball without assistance



Please Note:

The ability to bowl the ball (with or without the bowling ramp) but without the assistance of the coach qualifies the athlete for the Special Olympics Frame Bowl.



Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Target Bowling Activity

- Reduce distance to the pins
- Vary size, weight and color of objects used for pins
- Mark lanes to guide ball roll
- Use a plastic bowling ball with modified grip as necessary

Safety Precautions

- Ensure that athlete maintains a balanced position
- Stay within reach of athlete at all times



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Floor Hockey	<i>Puck Shot</i>
MOTOR ACTIVITY TRAINING PROGRAM Puck Shot Leads to the Floor Hockey Target Shot	

Equipment	Levels of Assistance
1. Floor hockey stick	Total Assistance
2. Floor Hockey Pucks	The coach supports or assists the athlete with the entire movement
3. Tape for shooting line	Partial Assistance
4. Floor Hockey Goal and net	The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement
	Independent
	Athlete completes the movement or task without assistance from the coach

Description for the MOTOR ACTIVITY TRAINING PROGRAM Puck Shot Activity

1. Mark shooting line
2. Place goal net less than 3 meters (9'9") from shooting line
3. Position athlete standing or seated behind shooting line with or without assistance
4. Place floor hockey stick in athlete's dominant hand with or without assistance
5. Place puck on floor to the stick side of athlete
6. Direct athlete to shoot puck towards goal
7. Athlete shoots puck toward net with or without assistance

Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Puck Shot

- Athlete holds the stick with assistance for 10 seconds
- Athlete uses the stick to push the puck forward with assistance
- Athlete holds the stick without assistance for 10 seconds
- Athlete uses the stick to push the puck forward without assistance



Please Note:

The ability to shoot the puck a distance of three meters without assistance from the coach qualifies the athlete for the Special Olympics Floor Hockey Target Shot Individual Skills activity.

Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Puck Shot

- For motivation, have horn blow or lights light up when a puck enters the goal.
- Use cones instead of goal
- Use a straw broom and gym ball instead of a hockey stick and puck; then move to regulation equipment.
- Vary size, weight, and color of puck
- Increase/decrease distance between athlete and goal
- Modify length of stick as needed
- Provide assistive devices to help athlete hold the floor hockey stick

Safety Precautions

- Provide adequate space for the athlete to perform the activity
- Stay within reach of athlete at all times
- Ensure that athlete maintains a balanced position
- Avoid being hit when athlete is using the floor hockey stick
- Provide a helmet for all athletes just as is done for regulation Floor Hockey.



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
<i>Floor Hockey</i>	<i>Puck Push</i>
MOTOR ACTIVITY TRAINING PROGRAM Puck Push Leads to the 10 Meter Puck Dribble	

Equipment	Levels of Assistance
1. Floor hockey stick	Total Assistance
2. Floor Hockey Pucks	The coach supports or assists the athlete with the entire movement
3. Cones	Partial Assistance
4. Tape to mark start and finish lines and lanes	The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement
	Independent
	Athlete completes the movement or task without assistance from the coach

Description for the MOTOR ACTIVITY TRAINING PROGRAM Puck Push Activity

1. Mark start and finish lines less than 10 m. (32'6") apart
2. Use tape or cones to mark lanes between start/finish lines. Lanes should be 1m (3'3") wide.
3. Position athlete standing or seated behind starting line with floor hockey stick in dominant hand, with or without assistance
4. Place hockey puck on floor to the stick side of athlete
5. Direct athlete to dribble/push puck forward with floor hockey stick, toward the finish line, but staying in their lane.
6. Athlete dribbles puck toward finish line with or without assistance

Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Puck Push Activity

- Athlete holds the stick with assistance for 5 seconds
- Athlete uses the stick to push the puck one time with assistance
- Athlete holds the stick without assistance for 5 seconds
- Athlete uses the stick to push the puck one time without assistance



Please Note:

The ability to dribble the puck a distance of 10 meters without assistance from the coach qualifies the athlete for the Special Olympics 10 Meter Puck Push.

Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Puck Push Activity

- Vary size, weight, and color of puck
- Modify length of stick as necessary
- Use assistive devices to help the athlete hold the hockey stick as needed

Safety Precautions

- Provide adequate space for the athlete to perform the activity
- Stay within reach of athlete at all times
- Help athlete keep hockey stick under control



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Football	<i>Football Push</i>
MOTOR ACTIVITY TRAINING PROGRAM Football Push Leads to Football Dribbling	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Football 2. Tape to mark start/finish lines and lanes 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

Description for the MOTOR ACTIVITY TRAINING PROGRAM Football Push

1. Mark start and finish lines less than 15 meters (49') apart
2. Position athlete standing or seated behind starting line with or without assistance
3. Place ball on floor in front of athlete
4. Direct athlete to dribble/push ball toward finish line
5. Athlete uses feet to move ball toward finish line with or without assistance

Lead-up Activities for MOTOR ACTIVITY TRAINING PROGRAM Football Push Activity

- Position athlete in front of ball in his/her most functional position for leg movement-athlete then makes contact with ball with his/her foot with assistance
- Position ball in front of athlete who makes contact with the ball with his/her foot, without assistance



Please Note:

The ability to dribble the football for a distance of 15 meters (within a 5 meter lane) without assistance from the coach qualifies the athlete for Special Olympics Football Dribbling.

Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Football Push Activity

- Use football that is tethered to the athlete's ankle
- Increase/decrease distance to goal as needed
- Change balls as athlete progresses
- Adjust width of lane as needed
- Use a walking aid as needed
- Have a horn, bell or flashing lights go off when football crosses the finish line.

Safety Precautions

- Be sure that athlete can walk without tripping if using a tethered ball.
- Use flat, hard surface
- Use lane clear of obstacles
- Assist athlete as necessary
- Help athlete maintain control of ball
- Stay within reach of athlete at all times

<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
<i>Football</i>	<i>Football Kick</i>
MOTOR ACTIVITY TRAINING PROGRAM Football Kick Leads to Football Shooting	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Football (soccer ball) 2. Goal with net 3. Tape to mark starting line 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>



Description for the MOTOR ACTIVITY TRAINING PROGRAM Football Kick Activity

1. Mark a starting line
2. Place goal/net less than 8 meters (26') from starting line
3. Position athlete standing or seated behind starting line with or without assistance
4. Place ball on floor in front of athlete
5. Direct athlete to kick ball towards goal
6. Athlete kicks ball towards goal with or without assistance

Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Football Kick Activity

- Position athlete in front of ball in his/her most functional position for leg movement-athlete makes contact with the ball with his/her foot, with assistance
- Position ball in front of athlete-athlete makes contact with the ball with his/her foot, without assistance



Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Football Kick Activity

- Increase/decrease distance between athlete and goal as needed
- Position a coach/volunteer or object at goal for motivation
- Vary size, weight, and color of ball as needed
- Use a walking aid as needed
- Have horn, bell or flashing lights go off when ball enters the goal.

Safety Precautions

- Do not allow athlete to head the football when shooting
- Ensure athlete maintains balance position
- Stay within reach of the athlete at all times



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Golf	<i>Putting</i>
MOTOR ACTIVITY TRAINING PROGRAM Putting Leads to the Short Putt	

Equipment	Levels of Assistance
1. Plastic golf ball	Total Assistance
2. Golf Putter (traditional, rubber or plastic)	The coach supports or assists the athlete with the entire movement
3. Flat surface	Partial Assistance
4. Plastic cup	The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement
	Independent
	Athlete completes the movement or task without assistance from the coach

Description for the Putting Activity

1. Position athlete standing or seated facing the ball with or without assistance
2. Place target/practice cup less than 2 meters (6'6") from athlete
3. Place athlete's hands on club, lined up so that preferred hand is below non-dominant hand, with or without assistance
4. Direct athlete to swing putter and hit ball into a practice cup.
5. Athlete swings putter making contact with the ball, with or without assistance

Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Putting Activity

- Athlete grasps putter in both hands with assistance
- Athlete grasps and holds putter for 10 seconds with assistance
- Athlete swings putter with assistance
- Athlete grasps putter in both hands without assistance
- Athlete grasps and holds putter for 10 seconds without assistance
- Athlete grasps and swings putter without assistance



Please Note:

The ability to putt the golf ball two meters towards the target qualifies the athlete for the Special Olympics Short Putt activity.

Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Putting Activity

- Perform the putt to the side of the wheelchair as needed
- Perform the putt using one hand, if needed
- Vary size, weight, and color of ball
- Increase the size of the plastic cup
- Increases/decrease length of putter as needed
- Have horn, bell or flashing lights go off when the ball enters the plastic cup.

Safety Precautions

- Use caution when selecting the athlete's putter to insure they don't injure themselves or others.
- Provide adequate space for the athlete to perform putt
- Avoid being hit when an athlete is holding the putter, by moving away or assisting with hand over hand during the putting action.



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Roller Skating	<i>Stand and March</i>
MOTOR ACTIVITY TRAINING PROGRAM Leads to: standing/marching steps on skates	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Level surface, 2. Railing to hold onto to progress to skating surface 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

Description for the Motor Activity Training Program – roller skating
<ol style="list-style-type: none"> 1. Position athlete on floor with legs extended in front of him/her 2. Practice getting up and down (as if on skates) by rolling over onto knees, putting both hands on one knee with head up and push up and put feet side by side. 3. While in the standing position, arms should be extended out for balance with knees bent and eyes facing forward. 4. Practice small marching steps in place 5. Practice holding one foot, shin height, for 3 seconds, then the other. 6. Practice marching steps 2 – 3 meters (6 - 10 feet)

Lead up skills
<ul style="list-style-type: none"> • Athlete is able to stand in an upright position • Athlete is able to walk 2-3 meters (6-10 feet).

Safety Precautions

- Have two coaches help stabilize athletes during early standing activities.
- Stay within reach (spotting) athletes at all times.
- Start activity training on a non-skid surface such as rubber mats.
- Athletes may need assistance with rolling over.



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Softball	<i>Softball Fielding Activity</i>
MOTOR ACTIVITY TRAINING PROGRAM Softball Fielding Activity Leads to Softball Fielding	

Equipment	Levels of Assistance
1. Ball of appropriate size and weight (foam, softball, wiffle ball, plastic) 2. Fielder's softball glove	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>



<p>Description for the MOTOR ACTIVITY TRAINING PROGRAM Softball Fielding Activity</p> <ol style="list-style-type: none"> 1. Position a coach/volunteer rolling the ball less than 6 meters (19'6") from the athlete 2. Position athlete with or without assistance in standing or seated position facing coach who has the ball 3. Coach rolls ball toward athlete 4. Direct athlete to catch/field the rolled ball 5. Athlete catches ball using hands or hand and glove with or without assistance
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<p>Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Softball Fielding Activity</p> <ul style="list-style-type: none"> • Athlete stands or sits facing the coach, while wearing the softball glove, with assistance for 10 seconds • Athlete uses the softball glove to stop a softball, rolled from 2 meters (6'6") away, with assistance • Athlete stands or sits facing the coach, while wearing the softball glove, without assistance for 10 seconds • Athlete uses the softball glove to stop a softball, rolled from 2 meters (6'6") away, without assistance
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Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Softball Fielding Activity

- Increase/decrease distance between athlete and person rolling ball
- Vary size, texture, color, and weight of ball
- Modify size, weight or shape of glove
- Line glove with Velcro and use a tennis ball or appropriate ball that will stick on the Velcro
- Start by having coach/volunteer place ball in athlete's glove.
- Gradually increase distance between coach/volunteer and athlete
- Direct athlete to "Watch the ball".

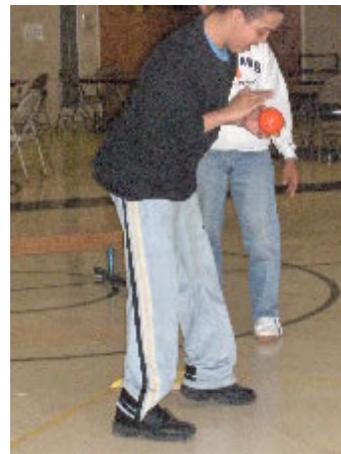
Safety Precautions

- Provide ample room for activity
- Roll ball at a safe speed towards athlete
- Stay within reach of the athlete at all times



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
<i>Softball</i>	<i>Softball Throw</i>
MOTOR ACTIVITY TRAINING PROGRAM Softball Throw Leads to Softball Throwing	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Ball of appropriate weight and size (foam, softball, wiffle ball, plastic) 2. Distance marker (tape for floor, cones, hoops) 	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>



Description for the MOTOR ACTIVITY TRAINING PROGRAM Softball Throw Activity

1. Position athlete in standing or seated position behind a throwing line with or without assistance
2. Provide athlete with the softball (placed in athlete's dominant hand or picked up by athlete)
3. Direct athlete to throw ball
4. Athlete throws softball with or without assistance

Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Softball Throw Activity

- Athlete holds softball for 5 seconds with assistance
- Athlete holds and releases softball with assistance
- Athlete holds and then pushes softball across table with assistance
- Athlete holds softball for 5 seconds without assistance
- Athlete holds and releases softball without assistance
- Athlete holds then pushes softball across table or surface without assistance



Please Note:

The ability to throw a softball in an intended direction without assistance from the coach qualifies the athlete for Special Olympics Softball Throwing.

Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Softball Throw Activity

- Vary size, weight, color, and texture of ball
- Use a box, basket or coach as an incentive for increasing distance
- Have a horn, bell, or flashing lights go off when athlete successfully throws ball.

Safety Precautions

- Provide ample room for activity
- Ensure athlete regains balance after throwing ball (does not fall)
- Stay within reach of the athlete at all times



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
<i>Softball</i>	<i>Softball Strike</i>
MOTOR ACTIVITY TRAINING PROGRAM Softball Strike Leads to Softball Hitting	

Equipment	Levels of Assistance
1. Ball of appropriate weight and size	Total Assistance The coach supports or assists the athlete with the entire movement
2. Bat of appropriate weight and size	Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement
3. Batting tee/stand/ cone	Independent Athlete completes the movement or task without assistance from the coach



<p>Description for the MOTOR ACTIVITY TRAINING PROGRAM Softball Strike Activity</p> <ol style="list-style-type: none"> 1. Position athlete in standing or seated position facing the ball on the batting tee/stand, with or without assistance 2. Position athlete in batting stance holding bat on dominate side, with or without assistance 3. Direct athlete to strike ball off tee/stand 4. Athlete strikes ball off tee/stand with or without assistance
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<p>Lead-up Activities for the Softball Strike Activity</p> <ul style="list-style-type: none"> • Athlete grasps and holds bat with both hands for 10 seconds with assistance • Athlete holds bat in batting position for 5 seconds with assistance • Athlete makes swinging movements with bat with assistance • Athlete grasps and holds bat with both hands for 10 seconds without assistance • Athlete holds bat in batting position for 5 seconds without assistance • Athlete swings bat without assistance
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Please Note:

The ability to hit a Softball off a tee without assistance from the coach qualifies the athlete for Special Olympics Softball Hitting.

Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Softball Strike Activity

- Allow athlete to strike ball using one arm
- Vary size, weight and color of ball
- Vary size, weight and length of bat
- Suspend ball within athlete's reach as needed
- Use ball with bell inside so bell rings when ball is hit.

Safety Precautions

- Provide ample room for activity
- Ensure return of a suspended ball does not hit athlete by having a second string that allows the coach to control the flight of the ball.
- Ensure athlete regains balance after hitting ball (does not fall)
- Stay within reach of the athlete at all times
- Avoid being hit while athlete is using bat by stepping away or using hand over hand assistance.



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Table Tennis	<i>Table Tennis Strike</i>
MOTOR ACTIVITY TRAINING PROGRAM Table Tennis Strike Leads to the Return Shot	

Equipment	Levels of Assistance
1. Racquet (paddle) of appropriate size and weight 2. Ball 3. Large table top/surface	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

<p>Description for the MOTOR ACTIVITY TRAINING PROGRAM Table Tennis Strike</p> <ol style="list-style-type: none"> 1. Position athlete in standing or seated position facing a table, with or without assistance 2. Place paddle in athlete's dominant hand 3. Roll ball to athlete. 4. Direct athlete to strike ball with racquet (paddle) 5. Athlete strikes ball with or without assistance

<p>Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Table Tennis Strike</p> <ul style="list-style-type: none"> • Athlete grasps racquet with assistance • Athlete grasps and holds racquet for 5 seconds with assistance • Athlete swings racquet for 5 seconds with assistance • Athlete uses racquet to strike a stationary ball with assistance • Athlete grasps racquet without assistance • Athlete grasps and holds racquet for 5 seconds without assistance • Athlete swings racquet for 5 seconds without assistance • Athlete uses racquet to strike stationary ball without assistance



Please Note:

The ability to return a tossed ball to the tosser without assistance from the coach may qualify the athlete for the Special Olympics Return Shot.

Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Table Tennis Strike

- Use forearm or backhand strike
- Use hand to return ball
- Select racquet of appropriate size and weight
- Vary size, weight and color of ball
- Vary size of table surface
- Suspend ball to teach strike
- Vary speed of rolled ball
- Place bell inside ball to elicit athlete's attention
- Have a horn, bell or flashing lights go off when the athlete successfully strikes the ball with the paddle.

Safety Precautions

- Stay within reach of the athlete at all times
- Ensure athlete maintains balanced position
- Provide adequate space for activity
- Avoid being hit while athlete holds racquet



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Tennis	<i>Tennis Strike</i>
Motor Activity Training Program Tennis Strike Leads to the Tennis Target Stroke	

Equipment	Levels of Assistance
<ol style="list-style-type: none"> 1. Racquet (junior size; 17"-23" in length) 2. Foam tennis ball 	<p>Total Assistance</p> <p>The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance</p> <p>The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent</p> <p>Athlete completes the movement or task without assistance from the coach</p>

<p>Description for the Motor Activity Training Program Tennis</p> <ol style="list-style-type: none"> 1. Position the athlete, seated or standing 2. Place the foam tennis ball on a stand or batting tee within reach of athlete 3. Position racquet in athlete's hand with or without assistance 4. Direct athlete to strike foal tennis bal 5. Athlete strikes foam tennis ball with or without assistance
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<p>Lead-up Activities to the Motor Activity Training Program Tennis Strike Activity</p> <ul style="list-style-type: none"> • Athlete grasps racquet with assistance • Athlete grasps and holds racquet for 5 seconds with assistance • Athlete swings racquet for 5 seconds with assistance • Athlete grasps racquet without assistance • Athlete grasps and holds racquet for 5 seconds without assistance • Athlete swings racquet for 5 seconds without assistance
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Possible Modifications for the Motor Activity Training Program Tennis Strike Activity

- Use adaptive devices to assist athlete with holding racquet
- Use a balloon to teach strike
- Suspend a foam tennis ball to teach strike
- Adjust height of suspended foam tennis ball or balloon to athlete's needs
- Vary the size and color of foam tennis ball as needed
- Modify size and length of racquet as needed

Safety Precautions

- Ensure athlete maintains a balanced position
- Avoid being hit when athlete attempts to strike the foam tennis ball



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
Volleyball	<i>Volleyball Throw</i>
MOTOR ACTIVITY TRAINING PROGRAM Volleyball Throw is a Lead Up Skill to Overhead Passing	

Equipment	Levels of Assistance
1. Volleyball (trainer) 2. Net	<p>Total Assistance The coach supports or assists the athlete with the entire movement</p> <p>Partial Assistance The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement</p> <p>Independent Athlete completes the movement or task without assistance from the coach</p>

Description for the MOTOR ACTIVITY TRAINING PROGRAM Volleyball Throw Activity

1. Position athlete in standing or seated position less than 2 meters (6'6") from a 1.5 meter (5 ft) high net, with or without assistance
2. Provide athlete with a volleyball (placed in athlete's hand or picked up by athlete)
3. Direct athlete to throw the volleyball over net
4. Athlete throws volleyball up over the net with or without assistance

Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Volleyball Throw Activity

- Athlete grasps and holds volleyball for 5 seconds with assistance
- Athlete grasps and releases volleyball with assistance
- Athlete grasps and throws volleyball toward net with assistance
- Athlete grasps and holds volleyball for 5 seconds without assistance
- Athlete grasps and releases volleyball without assistance
- Athlete grasps and throws volleyball toward net without assistance



Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Volleyball Throw

- Vary size, weight, color and texture of ball
- Lower net height if necessary
- Increase/decrease distance between athlete and net
- Increase/decrease height of net
- Have a horn, bell, or flashing lights go off to reward athletes when the ball successfully passes over the net.

Safety Precautions

- Ensure athlete maintains balanced position by monitoring stance.
- Stay within reach of the athlete at all times
- Provide adequate space for athlete to complete activity



<i>Official Special Olympics Sport</i>	<i>Motor Activity Training Program</i>
<i>Volleyball</i>	<i>Overhead/Underhand Serve</i>
MOTOR ACTIVITY TRAINING PROGRAM Overhead/Underhand Serve Leads to Volleyball Serving	

Equipment	Levels of Assistance
1. Modified volleyball	Total Assistance
2. Volleyball suspended within reach of athlete, if needed	The coach supports or assists the athlete with the entire movement
3. Net	Partial Assistance
	The coach may touch, guide or direct the athlete, but not support or assist the athlete in the entire movement
	Independent
	Athlete completes the movement or task without assistance from the coach

Description for the Volleyball Serve

1. Position the athlete in standing or seated position less than 9 meters (29') from a 1.5 meter (5 ft) high volleyball net, with or without assistance
2. Provide athlete with a volleyball (held by coach or athlete)
3. Direct athlete to hit a volleyball with overhead/underhand hit
4. Athlete serves ball with or without assistance

Lead-up Activities for the MOTOR ACTIVITY TRAINING PROGRAM Overhead/Underhand Serve

Underhand Serve

- Athlete moves arm backward and forward with assistance for 10 seconds
- Athlete moves arm backward and forward in underhand serve pattern with assistance
- Athlete moves arm backward and forward in underhand serve pattern without assistance for 10 seconds
- Athlete moves arm backward and forward in underhand serve pattern without assistance

Overhand Serve

- Athlete moves arm backward and forward with assistance for 10 seconds
- Athlete moves arm backward and forward in overhand serve pattern with assistance
- Athlete uses overhand serve to hit a ball held by coach with assistance
- Athlete moves arm backward and forward in overhand serve pattern without assistance for 10 seconds
- Athlete moves arm backward and forward in overhand serve pattern without assistance
- Athlete uses overhand serve to hit a ball held by coach without assistance



Possible Modifications for the MOTOR ACTIVITY TRAINING PROGRAM Overhead/Underhand Serve Activity

- Vary size, weight and color and texture of ball
- Increase/decrease distance between athlete and net
- Increase/decrease height of net
- Have a horn, bell, or flashing lights go off to reward athletes when the ball passes successfully over the net.

Safety Precautions

- Suspend ball within reach of athlete at waist level for underhand serve and just above head level for overhand serve.
- Ensure athlete maintains balanced position before/after hitting ball
- Ensure returning ball does not hit athlete, when using a suspended ball by having a stick or hook to catch the tether and stop the ball.

SECTION VI APPENDIX



Appendix A – Glossary

Athletes with Severe Disabilities: are those who do not have the prerequisite skills to successfully compete in Special Olympics lower ability events.

Functional Ability refers to the amount of flexibility and/or strength the athlete has to perform desired movements, as well as their ability to understand what they are asked to do..

Independent: athlete completes the movement or task without assistance from the coach.

MOTOR ACTIVITY TRAINING PROGRAM *is a sport-based program designed for athletes with severe or profound intellectual disability who are unable to participate in Official Special Olympics sport competitions because of their skill and/or functional abilities. This does not refer to regular physical therapy that an individual receives for stimulation or rehabilitation purposes.*

Multidisciplinary Team: a diagnostic team selected on the basis of the individual's suspected problem. The team may include doctors, psychologists, social workers, teachers, physical therapists, speech therapists, nurses and other personnel.

Partial Assistance: the coach may touch, guide or direct the athlete, but not support or assist the athlete with the entire movement.

Peer Coaches: a peer coach is an individual of similar age to the athlete who, under the supervision of an MOTOR ACTIVITY TRAINING PROGRAM coach, assists with the athlete's eight-week training program.

Tactile Cues: Touching or physically moving a body part before, during or after the individual moves. These cues are designed to influence the occurrence of a behavior.

Total Assistance: the coach supports or assists the athlete with the entire movement.

Verbal Cues: verbal direction before, during or after the individual moves, designed to influence the occurrence of a behavior..

Visual Cues: visual signals or conditions occurring before, during or after the individual moves. Designed to influence the occurrence of a behavior..



APPENDIX B - References

Books - Journal Articles

Auxter D., Pyfer J., and C. Huettig. 2005. *Principles and methods of adapted physical education and recreation*. St. Louis: Mosby.

Block, M.E., Conatser, P., Montgomery, R., Flynn, L., Munson, D., & Dease, R. (2001). Effects of peer tutoring on the motor and affective behaviors of students with severe disabilities. *Palaestra*, 17(4), 34-39.

Block, M.E. (1992). What is appropriate physical education for students with the most profound disabilities? *Adapted Physical Activity Quarterly*, 9, 197-213.

Block, M.E., & Block, V.E. (1999). Functional v. developmental motor assessment for children with severe disabilities. In P. Jansma (Ed.), *The psychomotor domain and the seriously handicapped* (4th. ed.) (pp. 89-100). Lanham, MD: University Press of America.

Bowe, F. 1995. Birth to five: *Early childhood special education*. New York: Delmar.

Bredenkamp S. 1992. *Developmentally appropriate practice in early childhood programs serving children from birth through 8*. Washington, DC: National Association for the Education of Young Children.

Cowden, J., and C. Torrey. 1995. *A ROADMAP for assessing infants, toddlers, and preschoolers: the role of the adapted motor developmentalist*. *Adapted Physical Activity Quarterly* 12:1-11

Dummer., Et al. 1987. *Attributes of athletes with cerebral palsy*. *Adapted Physical Activity Quarterly* 4:278-292, 1987.

Fraser, B, Hensinger., R., and J. Phelps. 1987. *Physical Management of multiple handicaps*: Baltimore: Paul H. Brookes Publishing Company.

Gallahue, D.L. & Ozum, J. (1998). *Understanding Motor Development: Infants, Children, Adolescents, Adults*. Boston: McGraw-Hill.

Haley S. 1986. *Postural reactions in infants with Down Syndrome: relationship to motor milestone development and age*. *J AM Phys Ther* 66:17-22

Myall J., and G. Desharnair. 1995. *Positioning in a wheelchair, a guide for professional caregivers of the disabled adult*. Thorofare, NJ. Slack.

Meisels S., and S. Provence. 1989. *Screening and assessment: guidelines for identifying young disabled and developmentally vulnerable children and their families*. Washington DC: National Center for Clinical Infant Programs.



Payne, V., and L. acs. 1995. *Human motor development: A lifespan approach*. Mountain View, CA: Mayfield.

Sherrill, C. 2005. *Adapted physical activity, recreation and sport: Cross disciplinary and lifespan*. Madison, WI: McGraw-Hill.

Piper M., and J. Darrah. 1994. *Motor assessment of the developing infant*. Philadelphia: WB Saunders.

Ruoti, R., Morris, D., and A. Cole. 1996. *Aquatics rehabilitation*. Baltimore: Lippicott, Williams and Wilkins.

Schlein., S, and M. Ray. 1988. *Community recreation and persons with disabilities*. Baltimore: Paul H. Brookes Publishing Company.

Tecklin, J. 1998. *Pediatric physical therapy*. Baltimore: Lippicott, Williams and Wilkins.

Trombly, C., and M. Radomski. 2001. *Occupational Therapy for physical dysfunction*. Baltimore: Williams and Wilkins.

Winnick, J. (Ed) (2000), *Adapted Physical Education and Sport*. Champaign, IL: Human Kinetics.

Woollacott, M. 2000. *Motor control - theory and practical applications*. Baltimore: Lippicott, Williams and Wilkins.



Organizations

American Alliance for Health, Physical Education, Recreation and Dance, 1990 Association Drive, Reston, VA 22091.
<http://www.aahperd.org/>

American Foundation for the Blind, Inc., 15 West 16th Street, New York, NJ 10011. <http://www.afb.org/>

Association for Persons with Severe Handicaps, 7010 Roosevelt Way, N>E>, Seattle, WA 98115. www.tash.org

Epilepsy Foundation of America, 4351 Garden City Drive, Suite 406, Landover, MD 20785.

<http://www.epilepsyfoundation.org/>

Council for Exceptional Children, 1920 Association Drive, Reston, VA 22091. <http://www.cec.sped.org/>

Information Center for Individuals with Disabilities, 20 Providence St., Room 329, Boston, MA 02116

National Down Syndrome Society, 141 5th Avenue, New York, NY 10010. <http://www.ndss.org/>

National Easter Seal Society, 2023 W. Ogden Avenue, Chicago, IL 60612. <http://www.easterseals.com/>

National Head Injury Foundation, 280 Singletary Lane, Framingham, MA 01701. <http://www.headinjury.com/>

National Paraplegia Foundation, 333 North Michigan Avenue, Chicago, IL 60601 <http://www.sp-foundation.org/>

National Spinal Cord Injury Foundation, 369 Elliot Street, Newton Upper Falls, MA 02164. <http://www.spinalcord.org/>

National Wheelchair Athletic Association, 2107 Templeton Gap Rd., Suite C, Colorado Springs, CO 80907.
<http://www.wsusa.org/wsusa/>

Special Olympics, Inc., 1325 G Street, NW, Suite 500, Washington, DC 20005. www.specialolympics.org

United Cerebral Palsy Association, 66 E. 34th Street, New York, NY 10016 <http://www.ucp.org/>

United States Association for Blind Athletes, 55 West California Ave., Beach Haven Park, NJ 08008.
<http://www.usaba.org/>



Appendix C - HEALTH AND SAFETY CONCERNS

MOVEMENTS THAT INTERFERE WITH ATHLETE PERFORMANCE

Some MOTOR ACTIVITY TRAINING PROGRAM athletes may have very limited motor skill development. We are all born with approximately 100 reflexes including primitive reflexes, which are involuntary responses to stimuli. Stimuli for a reflex can include the position in which the athlete is placed, bending or turning of the head, a touch or a noise. At this early stage of development, athletes will have little control over their posture and a limited amount of voluntary control of movement. Further motor development depends upon the existence of these reflexes and the athlete's increasing ability to control them. Failure to lose or integrate these reflexes into a higher level of motor skill development interferes with more advanced movements. When a MOTOR ACTIVITY TRAINING PROGRAM athlete remains at the early primitive stage of motor development, his/her athletic performance will be affected.

In order to plan appropriate activities for MOTOR ACTIVITY TRAINING PROGRAM athletes, Certified MOTOR ACTIVITY TRAINING PROGRAM coaches must have knowledge of the movements that interfere with an athlete's performance. Some of these movements create problems during the performance of sport activities while others prevent an athlete from doing a sport skill without assistance. Athletes may have a limited ability to rotate or move their trunk, poor balance or poor head control. Others may start a movement for a sport skill and have some part of the movement, a noise or other stimulus in the room trigger an abrupt movement of part of the body or the whole body. This causes unwanted, uncontrolled movements that can jeopardize the safety or positioning of the athlete. Along with severe or profound intellectual disability, some MOTOR ACTIVITY TRAINING PROGRAM athletes may have signs of damage to their central nervous system including:

- Altered muscular tone
- Poor head control
- Retention of primitive reflexes and reactions
- Limited ability to rotate or move their trunk
- Involuntary movements
- Altered gait
- Poor balance
- Lack or altered awareness of their body parts

MOTOR ACTIVITY TRAINING PROGRAM coaches must have knowledge of the differences in muscle tone and reflexes and reactions in order to prevent serious injuries to the athletes and to help them perform as many sport activities as possible. In order to obtain this information, coaches should consult with parents, caregivers, adapted physical educators, physical therapists, occupational therapists, and/or nurses. The following muscle tones, reflexes and reactions are included in the MOTOR ACTIVITY TRAINING PROGRAM Coach Training Program.

Muscle Tone

Muscle tone, the tension (stiffness) in a muscle, is controlled by the central nervous system. Muscle tone is used to maintain posture and provide coordination for movement and activities in general. Although muscle tone is controlled



by the central nervous system, individuals may voluntarily change the tension of a muscle (i.e. flex a muscle). Abnormal muscle tone may affect an athlete's strength, flexibility, agility, fitness, endurance, cardiovascular ability and overall performance of a sport skill.

There are three types of muscle tone created by problems of the central nervous system that may influence the movement of an MOTOR ACTIVITY TRAINING PROGRAM athlete. They are hypotonic, hypertonic and fluctuating muscle tone. Hypotonic muscle tone is a condition in which there is too little or no tension in the muscle. These athletes are said to have low muscle tone. Many of the athletes with Down syndrome have very flexible joints (floppy joints) because the muscles surrounding the joints are hypotonic. Hypertonic muscle tone is a condition in which there is too much tension in the muscle or muscle groups. This interferes with the athlete's ability to move the limbs or joints controlled by the hypertonic muscles. Fluctuating muscle tone is a condition in which an athlete may have muscles that shift back and forth between too little and too much muscle tone.

Palmar Grasp

The Palmar Grasp is a reflex that causes an individual to grasp an object placed in the palm of his/her hand. Athletes who are functioning at the first developmental stage should be able to grasp a finger or object placed in the palm of their hands. If they have progressed to the second developmental stage, they can grasp a ball and release it to pick up another object or ball. Many athletes may be able to grasp a ball or racquet but cannot release it because of the reflex (perseveration of the reflex). It may take a lot of patience on the part of the coach and a considerable amount of time for the athlete to learn to release the object.

Startle Reflex

The startle reflex causes the athlete to suddenly arch the back and extend the arms and legs. The stimulus for the startle reflex can be a loud noise, a sudden movement of the athlete's head, a bright light or even a touch on the abdomen. After the initial reflex occurs, the athlete will relax and assume his/her original position. It is important for a coach and/or peer coach to know which athletes retain the startle reflex. An athlete who has the startle reflex and is left unattended or improperly secured in his/her chair may sustain severe injury.

Response to Gravity

Responses to gravity are triggered when you place an athlete on his/her back or stomach. Gravity acts on the head and pulls the athlete toward the support surface (floor). These responses to gravity are designed to help individuals develop the ability to voluntarily move limbs, and maintain posture and balance. Movements include straightening the arms and legs, folding them into the body and lifting them against the pull of gravity. The following reflexes and reactions can interfere with an athlete's performance.

Tonic Labyrinthine Prone Reflex (TLP)

The Tonic Labyrinthine Prone Reflex occurs when the athlete is placed on the stomach. The athlete's limbs and head will be involuntarily pulled toward the support surface in a flexed position. In this case the head bends toward the chest while the hips, knees, elbows and shoulders bend or fold toward the surface or under the athlete's stomach. The reflex may be so strong that the hips are raised off the floor. The Tonic Labyrinthine Prone Reflex is more obvious when you place an athlete on a scooter board and the limbs and head bend toward the floor.

Tonic Labyrinthine Supine Reflex (TLS)

When an athlete who retains the Tonic Labyrinthine Supine Reflex is placed on his/her back, the response to gravity causes the head and limbs to extend. The back of the head presses into the floor and the arms and legs are also pulled



toward the floor/support surface. In extreme cases, the back may arch so much that the trunk lifts off the floor leaving the athlete's weight resting on the shoulders and hips.

Some MOTOR ACTIVITY TRAINING PROGRAM athletes may continue to demonstrate the TLP and TLS reflexes. When these two reflexes are present, athletes will have difficulty lifting the head or any limb against the force of gravity. They do not have the muscular strength to overcome the force of gravity, which is pulling them toward the ground. Placing these athletes on their backs and asking them to lift their head or raise an arm to hit a ball creates a situation in which they will often fail. Coaches should observe them carefully since they will become fatigued in a short time and have trouble sitting up or standing for any length of time. If they are sitting in a chair trying to hit a ball, they may slowly give into gravity and slide out of the chair or rest heavily on the support surface/table/tray.

Asymmetrical Tonic Neck Reflex (ATNR)

The Asymmetrical Tonic Neck Reflex occurs when the head is turned to the right or left. When the athlete's face is turned toward the right side of his/her body, the right arm and leg extend and the left arm and leg flex. This position is similar to a fencer's position. If the athlete's head is turned to the left, the opposite occurs. The arm and leg on the left side extend while the arm and leg on the right side flex.

When the Asymmetrical Tonic Neck Reflex is retained, athletes are unable to do certain movements. If an athlete attempts to throw a ball and turns his/her head to look at the ball, the arm on that side will extend. Since the arm is straight, the only way he/she can throw the ball from that position is to move the whole arm forward from the shoulder. Athletes could also avoid looking at the throwing arm, which would allow them to bend (flex) the arm and throw the ball. Retaining this reflex also interferes with the ability of athletes when they walk. Looking toward one side of the body may cause the opposite leg to collapse and the athlete to fall.

Athletes with the asymmetrical tonic neck reflex may also have trouble using the two hands or arms together. Turning their head toward one side or the other causes one arm to extend and the other arm to flex. Athletes who retain this reflex must have a ball or other piece of sport equipment placed at the midline of their body so that the head does not have to turn. If a ball or sport equipment is not placed near the middle of their body, the reflex will be triggered and they will be unable to perform the sport skill.

Symmetrical Tonic Neck Reflex (STNR)

The Symmetrical Tonic Neck Reflex occurs when the head (neck/chin) is bent forward or backward. The arms do the same movement as the head while the legs do the opposite movement. For example, when the athlete's head (chin) is bent toward the chest, the arms also flex while the legs extend. If you extend the athlete's neck, moving the head toward his/her back, the arms extend and the legs flex.

Athletes who still have this reflex will have trouble performing a variety of sport skills. For example, when an athlete attempts to putt a golf ball and bends his/her head down to look at the ball, the movement of the head triggers the symmetrical tonic neck reflex. This causes the athlete to not only flex the arms, which pulls the putter away from the ball but also causes the athlete to straighten his/her legs.

The Symmetrical Tonic Neck Reflex also interferes with walking. If an athlete is walking and looks up, the arms will extend and the legs will flex. This causes the legs to collapse, and the athlete to fall. The only way an athlete can walk is to keep the head in a neutral position without bending it down (forward) or backward. Activities for athletes demonstrating the Symmetrical Tonic Neck Reflex should be carefully selected in order to avoid putting the athlete in danger or interfering with the success of the athlete.



Positive Support Reflex

The stimulus for the Positive Support Reflex is contact of the ball of the foot with the ground or support surface. Athletes who have not integrated the Positive Support Reflex will lock their knees when the balls of their feet make contact with the floor or a hard surface. This rigidity or stiffness of the legs interferes with their ability to walk. Athletes who still retain the Positive Support Reflex have a tendency to walk on the balls of their feet and will not be able to put the heel down first in walking.

Retention of the Positive Support Reflex is also obvious when an athlete tries to sit down in a chair or rise out of a chair. If the ball of his/her foot hits the floor, the legs will extend forcefully (shoot out) and the athlete will fall into or out of the chair. Therefore, to get in and out of a chair, the athlete must put the whole foot or the heels down first. To do this, an athlete who is attempting to stand moves forward in the chair before placing his/her foot on the floor; while an athlete attempting to sit on a chair moves the hips back over the seat of the chair before sitting down.

Propping Reactions

The Propping Reactions, also called the Parachute or Protective Extension Reactions, are used to maintain balance. The first to appear is the Propping Reaction to the front. The athlete's hands are placed on the floor, in front of the body, with the palms down on the surface. At the first developmental stage, athletes will have the ability to maintain a balanced sitting position by placing their hands on the floor out to their sides. By the second developmental stage, they can sit by placing their hands on the floor in back of them.

Athletes who have only developed the ability to support themselves with the hands in front of their body should be watched carefully. If they take one hand off the floor to push a ball, it is highly possible that they will lose their balance and fall to the side or back. Coaches should be ready to provide additional support on each side and to the back of the athletes.



Health Issues

Athletes with severe or profound intellectual disability may have a number of health related problems. Common conditions include decreased heart function, poor blood circulation, asthma, an inability to tolerate extreme temperatures and severe allergic reactions. The following sections provide the MOTOR ACTIVITY TRAINING PROGRAM coach with information on some of the basic health concerns.

Pressure Sores

Pressure sores (decubitus ulcers) are an irritation or sore on the skin caused by constant pressure. These occur on the part of the body that constantly touches a surface such as a chair, wheelchair or bed. While a pressure sore is not caused by the sport activity, it can interfere with the athlete's ability to participate. Once pressure sores occur, they are difficult to control and can interrupt an athlete's training program. Treatment should be provided by the athlete's parents and trained medical personnel.

Medications

Coaches should be aware of the medications their athletes are taking, and what side effects are associated with those medications. A variety of medications prescribed for athletes with severe disabilities cause side effects that could disrupt an athlete's participation, such as drowsiness, double vision, balance problems and cramps. Some medications also increase the athlete's sensitivity to heat or sun exposure. Exposure to the sun, for even a short time, may cause an athlete to become sunburned or suffer from extreme dehydration, heat cramps, heat exhaustion or heat stroke.

Hydration

Hydration is a concern for all athletes but is a more complicated health issue for MOTOR ACTIVITY TRAINING PROGRAM athletes who cannot express a need for fluids. Dehydration can cause the athlete's body temperature to rise and may result in muscle cramps, heat exhaustion or heat stroke. Coaches should take steps to keep their athletes hydrated. Watch for athletes with excessive sweating, an indication of heat exhaustion, and for athletes who stop sweating or have hot but dry skin, an indication of heat stroke. These conditions require that the athlete be quickly removed from the sun, covered with cool towels, and replenished with fluids.

Seizures

Some MOTOR ACTIVITY TRAINING PROGRAM athletes may have seizure disorders. Coaches of athletes with seizure disorders should request information from parents/caregivers regarding specific care for their athlete during and after a seizure. While the cause of seizure disorders may not always be known, coaches must be aware of their athlete's condition, understand how the seizure will manifest itself, and protect the athlete during a seizure. There are several types of seizures but only petit mal and grand mal seizures (different terms may be used in different parts of world for these types of seizures) are discussed below.

Petit mal seizures occur suddenly and result in a loss of awareness for a few seconds up to a few minutes. The athlete usually has no warning and will not be aware that he/she has had a petit mal seizure. In most cases, the athlete will not fall down; he/she will continue standing or sitting in his/her chair.



Grand mal seizures are more serious. Athletes may experience warning signs of the seizure called an aura. The aura or warning signs can include a particular smell, an itching sensation or a visual disturbance. Grand mal seizures usually last a few minutes during which time the athlete will fall on the floor and experience jerking or thrashing movements of the body along with a loss of consciousness. Athletes who have grand mal seizures may wear a helmet since falling can cause head injury.

Protecting the athlete from injuring him/herself during a grand mal seizure is a serious concern. When possible, coaches should lower the athlete to the floor and then remove all furniture or potentially harmful objects away from the area. Once the seizure ends, coaches should allow the athlete to rest.

Involuntary Movements

Some athletes with severe or profound intellectual disability experience involuntary movements that can harm themselves or others. These movements range from mild muscle spasms to intense full body spasms. They can be in response to a loud unexpected noise, sudden bump or movement (startle reflex); or a muscle stretched beyond its normal range of motion or stretched too quickly (stretch reflex). An example of the stretch reflex can be seen if a coach assists an athlete with reaching for a ball beyond their normal range. In response, the athlete experiences a strong muscle contraction that pulls the arm back toward its original position. To prevent a stretch reflex, coaches are urged to help the athlete slowly move the limbs within the athlete's normal range of movement, hold the position for a few seconds, and then slowly return the limb to its original position. Also allowing the athlete to rest periodically helps to prevent unwanted muscle contractions that could interfere with the development of sport skills. Coaches should be careful not to confuse this response with angry or aggressive behaviors.



Mobility Devices

Motor Activity Training Program athletes who have severe or profound intellectual disability may need assistance from mobility devices such as gait trainers, canes, braces, walkers or wheelchairs. Since these athletes will be participating in the MOTOR ACTIVITY TRAINING PROGRAM, a coach needs to gain an understanding of the athlete's mobility devices. This includes learning about the function of the device and the way in which the device helps the athlete perform the sport skill. Coaches also should have a knowledge of the maintenance of mobility devices used in their program (i.e. brakes functioning properly, battery charged, etc.).



Transferring an Athlete

Transfer is a term used to describe moving the athlete from one place, a wheelchair or piece of furniture to another. The MOTOR ACTIVITY TRAINING PROGRAM coach is responsible for providing and/or supervising any assistance needed by an athlete participating in Motor Activity Training Program sessions or activities. In order to fulfill this responsibility, the coach must be aware of local training requirements for people serving in a personal assistant or transferring assistant role. These requirements vary by nation and locality. MOTOR ACTIVITY TRAINING PROGRAM athletes vary in the amount of strength and ability they have to move without assistance.

Things to Consider Prior to Transferring an Athlete

1. How much does the athlete weigh? How much does the coach weigh? A general guideline for lifting is one lifter for every 50 pounds (22 kg) of weight. Using this guideline, an athlete that weighs 100 pounds (45 kg) should be transferred by 2 coaches.
2. Does the athlete have a seizure disorder?
3. Does the athlete have joint deformities, joint dislocations, and/or muscle contractures?
4. Does the athlete have Harrington rods in his/her back to correct scoliosis?
5. Does the athlete exhibit abnormal reflex activity such as an extensor thrust or startle reflex?
6. Does the athlete have any ability to aid in the transfer?
7. How does the athlete prefer to deal with a transfer situation? Be sure to talk to the athlete when ever possible about preferences.

Some athletes may need or want to perform the sport activity from their wheelchairs while others may want to be moved to a chair or the floor. Athletes may also need assistance when transferring to and from their wheelchairs to a pool, car, or toilet. Coaches should consult with the athlete's parents, caregivers, physical therapist, occupational therapist and/or nurse to determine the safest way to transfer the athlete. The following tips, descriptions and illustrations cover the most common transfers needed by MOTOR ACTIVITY TRAINING PROGRAM athletes.

Transferring from Wheelchair to Floor

1. Face the athlete and explain what you are doing
2. Arrange all transfer equipment and furniture before starting the lift (chair, mat etc.)
3. Shorten the distance between the athlete and where he/she will be transferred
4. Lock the wheelchair brakes
5. Remove all moveable parts of the wheelchair that interfere with the transfer
6. Loosen all straps that secure the athlete to the chair
7. Allow the athlete to assist in the transfer
8. Use one or two coaches, as needed, to ensure the safety of both the athlete and coach
9. Choose one of the coaches to take control of the lift
10. Use a signal by the control coach, such as counting, to synchronize the lift
11. Prepare for the lift by having one coach stand next to the side of the wheelchair and slide both arms under the upper legs of the athlete (supporting the athlete near the hips)
12. Conclude with the other coach standing at the back of the wheelchair, reaching under the athlete's arms, grasping the forearms of the athlete and pressing the athlete's forearms against his/her trunk. The upper body of the athlete will rest on the arms of the coach, so it is critical that the coach has a firm grip on the athlete's forearms.

One Person Transfer from Floor

A one or two person transfer can be used to move the athlete from a mat to a wheelchair. As you lift the athlete, it is important that you do so by straightening your knees and hips while supporting the athlete close to your body. This way you can avoid unnecessary strain on your back. Follow the steps below to execute a two-person lift from the floor.



1. Explain to the athlete what you are going to do
2. Place the wheelchair close to the athlete and lock the brakes
3. Remove all moveable parts of wheelchair that interfere with the transfer
4. Squat next to the athlete's hips bending both the knees and hips of the athlete
5. Slide one arm under the upper legs (near the hips) of the athlete and the other arm around the back of the athlete's waist
6. Straighten your knees and hips, walk to the wheelchair and lower athlete into chair

Two Person Transfer from Wheelchair

1. Explain to the athlete what you are doing
2. Lock the wheelchair brakes
3. Remove all moveable parts of the wheelchair that interfere with transfer
4. Position a coach on each side of the athlete
5. Slide arms of one coach under the athlete's armpits and grasp the athlete's forearms in front of his/her body. The coach's forearms press the arms of the athlete against the athlete's trunk while the upper body of the athlete rests on the arms of the coach. It is critical for the coach to keep a firm grip on the athlete's forearms.
6. Slide both arms of the other coach under athlete's legs making a forearm lock close to the hips
7. Choose one of the coaches to take control of the lift
8. Synchronize the lift straightening the knees and hips simultaneously

Two Person Transfer into the Pool

1. Follow up with all transfer tips from wheelchair to mat (floor)
2. Assign coach one to support athlete's back and bring athlete to sitting position with legs in the pool
3. Position coach two in pool facing the athlete with both arms under the upper legs of the athlete (supporting athlete near the hips)
4. Squatting behind the athlete, coach one reaches under the athlete's arms and grasps the top of the athlete's forearms keeping the arms of the athlete pressed against his/her trunk. It is critical to retain a firm grip on the athlete's forearms.
5. Designate one coach to take control of the lift
6. Use a signal such as counting to synchronize the entrance into the pool
7. Support athlete with arms of coaches as athlete enters water

Two Person Transfer out of the Pool

1. Bring athlete close to the edge of the pool (use back float, walk, etc.) positioning the athlete with his/her back to the deck of the pool
2. Use coach one (who is not in the pool) to squat down at the edge of the pool, reach under the athlete's arms and grasp the top of the athlete's forearms. Keep the forearms against the athlete's trunk while resting the body of the athlete on the coaches' arms. Maintain a firm grip on the athlete's forearms.
3. Use coach two to face the athlete in the pool and place both arms under the upper legs of the athlete (support athlete near the hips)
4. Use one coach to take control of the lift
5. Decide on a signal such as counting to synchronize the exit out of the pool
6. Position athlete in sitting position with legs in pool

Please Note:

A variety of equipment may be used to assist with transfers including hoists, slings and ramps. Coaches should consult with the athlete's parents, caregivers, physical therapist, occupational therapist and/or nurse to determine the equipment the athlete uses regularly, and the appropriate way to use that equipment.



Appendix D – Sample Coaches Training Agenda



Special
Take It to the



Olympics Motor
Next Level



Activities School –



Where:

When:

Agenda:

8:30-9:00 AM		Registration (bagels, fruit, juice and coffee available)
9:00-9:45	I:	Introduction to MATP <ul style="list-style-type: none">• Program Emphasis• 7 Basic Activities• Program Philosophy
9:45-10:15	II:	Training Needs <ul style="list-style-type: none">• Techniques• Equipment• Assessment• Transferring & Positioning Review – Current Practices
10:15		Break
10:30-11:30	III:	Designing Activities <ul style="list-style-type: none">• Warm-Up and Stretching Activities• Sport-Related Motor Activities
11:30-12:15 PM		Lunch
12:15-12:50	IV:	Seeing MATP in Action – Demonstrations by XXXXXX School Students



12:50-2:00	V:	Putting Theory into Practice (Self-Selected Break in Middle) <ul style="list-style-type: none">• Small Group work (Designing MATP Activity in Subgroup and Demonstrating to Group)• Sharing Best Practices Among Group
2:00-2:45	VI:	Implementing the Program <ul style="list-style-type: none">• Becoming a Part of Special Olympics• Conducting a Challenge Day – How To/How To Improve• Involvement of Students as Partners/Coaches
2:45-3:00	VII:	Debrief Training; Evaluation and Certification

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