PART I. A Guide to Inclusive School Physical Activity Programs

An Addendum to the Comprehensive School Physical Activity Programs: A Guide for Schools

About this Guide

National efforts have been implemented to reverse the trends of youth physical inactivity and childhood obesity by focusing on increasing physical activity during the school day. Children and youth with disabilities are often not fully included in these efforts, yet often experience even greater rates of physical inactivity and obesity.

The Comprehensive School Activity Program (CSPAP) provides the national framework for increasing physical activity in schools. To insure youth with disabilities are included in these efforts, this Guide provides additional information on the implementation of the CSPAP in each program area.
The goal of the *Guide to Inclusive School Physical Activity Programs* is to promote inclusion of children and youth with disabilities in school physical activity programs. Inclusion assumes that all children, regardless of ability or disability, have the right to:

- Be respected and appreciated as valuable members of the school community
- Fully participate in all school activities
- Interact with peers of all ability levels with opportunities to develop friendships and learn and respect differences

**Guidelines for Disability Inclusion**

The *Guidelines for Disability Inclusion in Physical Activity, Nutrition, and Obesity Program Initiatives* were developed to assist in the updating of community health programs and policies to be inclusive of the needs of people with disabilities. Schools, as part of the community, can use these same guidelines to promote inclusion within the school setting for children and youth with disabilities. The guidelines are as follows:

1. **Objectives Include People with Disabilities:**
   Program objectives should explicitly and unambiguously state that the target population includes people with a range of different disabilities (cognitive, intellectual and other developmental disabilities, mobility, visual, hearing, and mental health disabilities).

2. **Involvement of People with Disabilities in Development, Implementation and Evaluation:**
   Program development, implementation, and evaluation should include input from people with a range of different disabilities and their representatives (e.g., community members or other experts with disabilities, potential participants with disabilities and their family members, personal assistants, and caregivers).

3. **Program Accessibility:**
   Programs should be accessible to people with disabilities and other users socially, behaviorally, programmatically, in communication, and in the physical environment.

4. **Accommodations for Participants with Disabilities:**
   Programs should address individual needs of participants with disabilities through accommodations that are specifically tailored to those needs.

5. **Outreach and Communication to People with Disabilities:**
   Programs should use a variety of accessible methods to outreach and promote the program(s) to people with disabilities.

6. **Cost Considerations and Feasibility:**
   Programs should address potential resource implications of inclusion (including staffing, training, equipment, and other resources needed to promote inclusion).
7. **Affordability:**
Programs should be affordable to people with disabilities and their families, personal assistants, and caregivers.

8. **Process Evaluation:**
Programs should implement process evaluation (with transparent monitoring, accountability and quality assurance) that includes feedback from people with disabilities and family members, personal assistants, caregivers or other representatives, and a process for making changes based on feedback.

9. **Outcomes Evaluation:**
Programs should collect outcomes data, using multiple disability appropriate measures.

### Inclusion Resources

**Guidelines for Disability Inclusion in Physical Activity, Nutrition, and Obesity Program Initiatives**

**Commit to Inclusion**
[www.committoinclusion.org](http://www.committoinclusion.org)

### How to Use the Guide to Inclusive School Physical Activity Programs

This Guide should be used in conjunction with the Comprehensive School Physical Activity Program: A Guide for Schools. The Guide includes section headings followed by a page number, which refers to a corresponding page in the CSPAP. Original material from the CSPAP are in the **highlighted green areas**. You will want to read this section in its entirety and then return to the Guide to consider the additional concepts specific to inclusion. Some sections do not require further information on inclusion.

### Introduction

The purpose of this guide is to provide step-by-step guidance to schools and school districts to develop, implement, and evaluate comprehensive school physical activity programs. The guide can be read and utilized by a group that either already exists (e.g., school health council or wellness committee) or a new group or committee that is made up of physical education coordinators and teachers, classroom teachers, school administrators, recess supervisors, before- and afterschool program supervisors, parents, and community members. It can be used to develop a new comprehensive school physical activity program or assess and improve an existing one. This document was developed to provide guidance and evidence to support voluntary school efforts that are focused on youth physical activity programs. **CSPAP Page 5**
Full inclusion begins with the recognition that children and youth with disabilities are integral members of the school community and must be more than just acknowledged as an afterthought. Physical activity programs within a school should address the needs of all students in the school community including those with a disability. In doing so, it is important to bring together those that represent needs of children and youth with disabilities. An existing group or new committee must actively recruit people with disabilities, family members and others that represent and understand the needs of people with disabilities. Committee members with disabilities and/or family members should participate in all aspects of the CSPAP alongside other school and community members.

Section One:
Overview of Youth Physical Activity

Benefits of Physical Activity for Youth

Participation in regular physical activity produces multiple physical and mental health benefits. For youth, regular physical activity participation:

- Builds healthy bones and muscles.
- Decreases the likelihood of obesity and disease risk factors such as high blood pressure.
- Reduces anxiety and depression and promotes positive mental health.

In addition to the above mentioned benefits, children and youth with disabilities experience additional physical, social and emotional benefits from increased physical activity. Improved strength and fitness can enable a greater independence and ability to perform activities of daily living. Physical activity is an important factor in the prevention of secondary conditions. Secondary conditions occur as a result of a primary disability and can include pressure sores, pain, diabetes, hypertension, osteoporosis, and obesity. Obesity can be especially problematic for youth with disabilities because can it exacerbate secondary conditions, decrease independence and limit mobility.
National Guidelines for Youth Physical Activity

In 2008, the U.S. Department of Health and Human Services issued physical activity guidelines for Americans, ages 6 and older. These guidelines include the following recommendations for youth:

- **Children and adolescents should do 60 minutes (1 hour) or more of physical activity daily.**

- **Aerobic Activities:** Most of the 60 or more minutes per day should be either moderate- or vigorous-intensity aerobic physical activity. Vigorous-intensity physical activity should be included at least 3 days per week.

- **Muscle-strengthening Activities:** Include muscle-strengthening physical activity on at least 3 days of the week as part of the 60 or more minutes.

- **Bone-strengthening Activities:** Include bone-strengthening physical activity on at least 3 days of the week as part of the 60 or more minutes.

- Activities should be age-appropriate, enjoyable, and offer variety. CSPAP Page 9

It is important to understand that children and adolescents with disabilities are included in these guidelines. These guidelines can be met with increased accessibility, accommodations and support and should not be dismissed as unattainable or unnecessary. The specific activity recommendations in these guidelines also apply to children and youth with disabilities. Aerobic activities, muscle-strengthening activities and bone strengthening activities are vital to the health and well-being of children and youth with disabilities.

Youth Participation in Physical Activity

Despite national guidelines for physical activity, many children and adolescents are not physically active on a regular basis. CSPAP Page 9

Adults with disabilities are more likely to live a sedentary lifestyle and 3 times more likely to have heart disease, stroke, diabetes, or cancer than adults without a disability. The obesity rate for children with a disability is 38 percent higher than children without a disability. Focusing on health promotion and increasing physical activity during childhood can encourage lifelong habits that can decrease the risk of chronic disease in adulthood.

In many cases, increasing physical activity for children and youth with disabilities is easier said than done. It is important to acknowledge the barriers to physical activity for children and youth with disabilities.

- Lack of community accessibility and accessibility of existing facilities and programs
- Lack of knowledge of existing programs
- Transportation
- Lack of knowledge of importance of physical activity and health benefits
- Inadequate family support

**Current Status of Physical Activity in Schools**

Available evidence suggests that an overwhelming majority of schools do not provide opportunities to support youth in achieving the physical activity guidelines. **CSPAP Page 10**

Children and youth with disabilities are even more at risk of not receiving the services and support needed to achieve physical activity guidelines. According to the Government Accountability Office (GAO), children and youth with disabilities were found to have much lower rates of participation in physical education and sports compared to their peers. Moreover, according to the Health and Lifestyle of Youth with Disability Survey, only 40% of youth with a physical disability and 77% of youth with a cognitive disability felt they had the same level of participation as other students in physical education class.

**Physical Activity Resources**

**National Center on Health, Physical Activity and Disability**
www.nchpad.org

**A Report of the Surgeon General Summary: Physical Activity and Health, Persons with Disabilities**

**CDC- Disability and Physical Activity**
http://www.cdc.gov/ncbddd/disabilityandhealth/pa.html

**2010 GAO Study on Students with Disabilities**

**Physical Activity Guidelines for Americans**
http://health.gov/paguidelines/guidelines/

**PAG Midcourse Report: Strategies to Increase Physical Activity Among Youth**
http://health.gov/paguidelines/midcourse/

**National Physical Activity Plan**
http://www.physicalactivityplan.org/index.html

**The Aspen Institute’s Project Play**
http://www.aspenprojectplay.org/

**Let’s Move!**
http://www.letsmove.gov/get-active
**DO YOUR KIDS GET ENOUGH?**

**Physical Activity in the U.S.**

- 74% of children do not get enough
- 38% higher obesity rates for kids with disabilities
- 12.5 MILLION kids classified as obese

**ALL Kids Need 60 Minutes of Activity a Day**

*but reality is.....*

- <25% of children get 60 minutes a day
- Physical activity is 4.5 times lower for children with a disability
- Only 29% of children with a disability have P.E. classes 5 days a week

Overweight adolescents have a 70% chance of becoming overweight or obese adults. 1 in 3 children born in 2000 or later will develop diabetes at some point. Since 1980, the number of overweight adolescents has tripled.

**Physical Activity Can Help**

- Be active during commercials
- Ride a bike or handcycle
- Walk or run to school
- Play a game

Physical Activity is for **EVERY**body

Section Two:
Overview of a Comprehensive School Physical Activity Program

The goals of a CSPAP are:

- To provide a variety of school-based physical activities to enable all students to participate in 60 minutes of moderate-to-vigorous physical activity each day.

- To provide coordination among the CSPAP components to maximize understanding, application, and practice of the knowledge and skills learned in physical education so that all students will be fully physically educated and well-equipped for a lifetime of physical activity.

Students can accumulate the recommended amount of physical activity through the provision of the multicomponent CSPAP. The following sections describe each component of a CSPAP in greater detail.

Quality Physical Education

Physical education is an academic subject and serves as the foundation of the CSPAP, by providing the opportunity for students to learn knowledge and skills needed to establish and maintain physically active lifestyles throughout childhood and adolescence and into adulthood.

Quality physical education:

- Meets the needs of all students.
- Is an enjoyable experience for all students.
- Keeps students active for most of physical education class time.
- Teaches self-management.
- Teaches skills to maximize movement proficiency.
- Emphasizes knowledge and skills for a lifetime of physical activity.
• Can increase student participation in physical activity, increase physical fitness, and enhance student knowledge and skills about why and how they should be physically active. CSPAP Page 12

Physical education is not optional for children and youth with disabilities. Physical education must be available in all schools in order to increase the amount of physical activity among students with disabilities. Current laws ensure the appropriate provision of physical education for students with disabilities and should be understood by administrators, teachers, staff and families.

• The Americans with Disabilities Act (ADA) bans discrimination on the basis of disability in the areas of employment, public accommodation, public services, transportation and telecommunications. In order to be able to provide appropriate physical education services for students with disabilities, schools should comply with the accessibility requirements of the ADA

• Section 504 of the Rehabilitation Act of 1973 states that “no qualified individual with a disability in the United States shall be excluded from, denied the benefits of, or be subjected to discrimination under” any program or activity that receives Federal financial assistance.

• The Individuals with Disabilities Education Act (IDEA) requires public schools to make available to all eligible children with disability a free, appropriate public education in the “least restrictive environment” alongside their peers without disability as is appropriate to their individual needs. In addition, the law forbids substituting physical or occupational therapy for PE in order to increase physical activity and requires that students with disabilities are only removed from PE to increase participation when there is written justification by an expert.

• An Individualized Education Plan (IEP) is a legally binding document that has been tailored specifically to a child’s educational needs, including his or her physical education needs. An IEP should state specific goals and objectives for physical education. Additional training and support may be needed for teachers and families to fully utilize IEPs to increase physical activity.

As defined by SHAPE America, a quality physical education program includes the opportunity to learn, meaningful content, appropriate instruction, and student and program assessment. CSPAP Page 12

CSPAP lists the components of quality physical education. For each component, there are ways to ensure the inclusion of students with disabilities. The following table outlines these specific components discussed and the pathway for inclusion.

<table>
<thead>
<tr>
<th>Physical Education Component</th>
<th>Inclusion Pathway</th>
</tr>
</thead>
<tbody>
<tr>
<td>All students are required to take physical education.</td>
<td>Utilize physical education goals in an Individualized Education Plan (IEP) for students with disabilities.</td>
</tr>
<tr>
<td>Recommendation</td>
<td>Action</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Qualified physical education teacher provides developmentally appropriate program.</td>
<td>Provide additional training for physical education teachers to include provision of services to students with disabilities, including assessment, instructional principals and adaption techniques.</td>
</tr>
<tr>
<td>Adequate equipment and facilities.</td>
<td>Ensure outdoor spaces, gyms and playgrounds are accessible to students with disabilities. Provide adapted equipment.</td>
</tr>
<tr>
<td>Instruction in a variety of motor skills designed to enhance the physical, mental and social/ emotional development of every child.</td>
<td>Provide training, resources, or equipment necessary to adapt motor skill activities for students with disabilities.</td>
</tr>
<tr>
<td>Fitness education and assessment to help children understand; improve and/or maintain physical well-being.</td>
<td>Adapt instructional techniques for students with learning or other mental disabilities to ensure they understand and are participants in maintaining their physical well-being.</td>
</tr>
<tr>
<td>Opportunities to improve emerging social and cooperative skills and gain a multi-cultural perspective. Utilize buddy system and peer mentoring.</td>
<td>Ensure students with disabilities are participating in same classes with peers without disabilities.</td>
</tr>
<tr>
<td>Promotion of regular amounts of appropriate physical activity now and throughout life.</td>
<td>Ensure that teachers and other staff understand the benefits of lifelong physical activity for children and youth with disabilities and have an expectation that they will continue to be physically active.</td>
</tr>
<tr>
<td>Students are physically active for at least 50% of instructional time.</td>
<td>Adapt activities and class design to ensure students with disabilities participate and do not sit on sidelines.</td>
</tr>
<tr>
<td>Out of school assignments that support learning and practice.</td>
<td>Research community-based sports or adapted sports programs and encourage participation.</td>
</tr>
<tr>
<td>Formative and summative assessments of student progress.</td>
<td>Assessments should include physical testing of motor performance, as well as understanding of the disability, strengths and weaknesses, and personal goals. Physical fitness testing can be adapted.</td>
</tr>
</tbody>
</table>

Many recommendations are mentioned briefly in the above table, but it is important to highlight some of the areas that are vital for an inclusive physical education program.

- Schools should provide accessible physical education facilities that comply with the ADA and allow students with physical disabilities to fully participate by ensuring access to all indoor spaces and outdoor play environments. The school environment should be carefully assessed for accessibility and changes made if needed.
- Schools should be committed to providing inclusive physical education by providing the necessary supports, utilizing IEP’s, and adapting activities.
- Schools should provide ALL staff with training on importance or physical activity for students with disabilities and policy requirements of ADA, IDEA and Section 504.
Training and education of staff in order to reduce barriers and increase participation for students with disabilities should be a policy and priority for the school.

- Schools should provide adapted equipment that increases participation for students with disabilities. Adapted equipment should not be viewed as a “bonus” or “extra” but a necessity to provide appropriate physical education. A lack of equipment or the resources to acquire equipment is not a reason to fail to provide inclusive physical education.

**Physical Education Resources**

**Discover Inclusive Physical Education Guidebook**

**SHAPE America- Adapted Physical Education Resource Manual**

**Pocket Tool for Adapted Physical Education Teachers**
http://www.nchpad.org/1475/6407/Pocket~Tool~for~Adapted~Physical~Education~Teachers

**GRAIDS- Guidelines Recommendations and Adaptations Including Disability**
http://new.reduceobesity.org/strategy-04/

**Physical Activity Before and After School**

Physical activity before and after school provides opportunities for all students, including those with special needs, to: 1) practice what they have learned in physical education, 2) work toward the nationally recommended 60 minutes of daily physical activity, 3) become more adequately prepared for learning, 4) engage in safe, social, and supervised activities, and 4) identify activities they enjoy and might engage in long term. **CSPAP Page 14**

Before and after school programs create a unique opportunity for inclusion in the school community. There can be an increased interaction between students with and without disabilities of varying ages and ability levels along with opportunities for friendships and benefits to students with and without disabilities. This environment allows for use of peer to peer programs or buddy systems to increase physical activity. This might include a program such as I Can Do It, You Can Do It! (ICDI). ICDI is an innovative mentoring initiative that has been adopted and sustained by the President’s Council on Fitness, Sports & Nutrition (PCFSN).

**Before- and after-school physical activity programs offer students an opportunity to be physically active instead of waiting in a sedentary setting for the school day to begin or end. **CSPAP Page 14**

The CSPAP guide provides a good list of ideas for including physical activity into the before and after school time periods. Below are some ideas and resources that create a more inclusive environment for students with disabilities.
Walking and biking to school

- Assess community accessibility, such as curb cuts or safety crossing streets.
- Communities should support walking/wheeling and biking to school by enhancing accessibility of infrastructure including paths and public rights-of-way.
- Utilize Safe Routes to Schools (SRTS) program materials.

Physical activity clubs or intramural programs or other extracurricular activities

- Offer club opportunities that allow for students with and without disabilities to play together and promote inclusion.
- Ensure that extracurricular activities use accessible facilities and provide accessible equipment to promote participation.
- Increase awareness that students with disabilities have a right to participate in extracurricular activities under Section 504 of the Rehabilitation Act.

Informal recreation or play on school grounds

- Assess the accessibility of playgrounds and outdoor play areas and make changes to improve access.
- Provide equipment that allows for inclusion of students with disabilities into activities.

Coordinated with community-based programs and delivered in school settings

- Seek out extracurricular, community-based programs that are accessible and inclusive of people with disabilities.
- Access the NCHPAD website to link to community resources.

National AfterSchool Association HEPA Standards

- Adopt the healthy eating and physical activity standards in out-of-school time which include students with disabilities.

Before and After School Resources

I Can Do It, You Can Do It!
http://www.fitness.gov/participate-in-programs/i-can-do-it-you-can-do-it/

Involving Students with Disabilities in SRTS
www.saferoutesinfo.org/sites/default/files/.../Involving_students_with_disabilities.pdf
Physical Activity During School

Schools can facilitate increased physical activity during the school day by encouraging students to be active; providing students with space, facilities, equipment and supplies that make participating in activity appealing; and providing organized times and structured physical activities for interested students.

Recess

Recess or physical activity breaks offer an excellent opportunity for youth at all grade levels to engage in free play or semi-structured physical activity during the school day, and allows youth the opportunity to apply skills learned in physical education. Recess should not, however, replace physical education or be used to meet time requirements set forth in physical education policies. Participation in recess is associated with academic benefits, such as improving attentiveness, concentration, behavior, and time on-task in the classroom.16 CSPAP Pg. 14

Recess, in the elementary school setting, often centers around a playground or outdoor play structures. For a child with a disability the lack of accessibility of a playground can present a barrier to participation and limit opportunities for physical activity. It can also further segregate the child with a disability from classmates during the recess period which may have social consequences. Accessible playgrounds can promote inclusion and increase opportunities for physical activity.
Physical Activity Breaks in the Classroom

Studies have found that offering physical activity breaks during standard classroom instruction may have favorable associations with some indicators of cognitive functioning (e.g., test scores). Examples of physical activity breaks in the classroom include:

- Taking a 5-minute stretch break
- Marching in place
- Jumping with an invisible jump rope
- Doing semi-squats followed by knee lifts.
- Taking 2-3 laps around or throughout the classroom. CSPAP Page 15

It is important to consider activity breaks in the classroom that do not just involve walking, marching or jumping. Stretching can be an important form of physical activity that can be performed on some level by most every student. An activity involving moving arms, hands and heads in addition to legs also includes children and youth with disabilities. These classroom breaks are often called “brain boosters” or “brain breaks” and involve physical activity as well as learning and social interaction activities. Like physical education teachers, classroom teachers may benefit from instruction on adaptive techniques for students with disabilities.

Activity Break Resources

Go Noodle
www.gonoodle.com

Playworks
www.playworks.com

Active Play-Active Learning Brain Breaks Guide
https://sph.uth.edu/research/centers/dell/.../Active-Play-Active-Learning_web.pdf
Staff Involvement

School employees play an integral role in a school’s CSPAP. School employee wellness programs improve staff health, increase physical activity levels, and are cost effective. When school staff commit to good health practices, they are positive role models for students, and may show increased support for student participation in physical activity. Support for school employee wellness and leadership training contribute to the overall culture of physical activity at a school. Teachers and other school staff members can integrate physical activity into classroom academic instruction and breaks, and support recess, intramurals, and other physical activity offerings. Additionally, school employees can be positive role models for students by demonstrating active lifestyle choices in and out of school.

CSPAP Page 15

Being a positive role model involves participation in employee wellness programs. It is important to consider the disabilities, hidden or visible, of staff as it pertains to their own health and physical activity. Employee wellness programs should be inclusive. Programs such as a walking lunch or counting steps may not be appropriate for all staff, so offer alternate activities to increase physical activity.

In addition to being a positive role model, various staff will likely be involved in incorporating elements of physical activity in the school setting and interacting with students with disabilities. In order for students with disabilities to be fully included in this process, it is important to make sure that all staff has a basic understanding of disabilities. Staff training on disability awareness including person first language and communication tips is essential to making children and youth with disabilities feel included.

<table>
<thead>
<tr>
<th>Words to Say</th>
<th>Words to Avoid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person who has...</td>
<td>Suffers from...</td>
</tr>
<tr>
<td>Person with a disability</td>
<td>Disabled, handicapped, physically challenged</td>
</tr>
<tr>
<td>Person with an intellectual disability</td>
<td>Mentally retarded</td>
</tr>
<tr>
<td>Person with a brain injury</td>
<td>Brain damaged</td>
</tr>
<tr>
<td>Person who has diabetes</td>
<td>Suffers from diabetes or diabetic</td>
</tr>
<tr>
<td>Person who uses a wheelchair</td>
<td>Crippled, wheelchair-bound, confined to a wheelchair</td>
</tr>
<tr>
<td>Person with epilepsy</td>
<td>Epileptic</td>
</tr>
<tr>
<td>Person who has had a stroke</td>
<td>Stroke victim</td>
</tr>
</tbody>
</table>

Employee Wellness Resources

NCHPAD: A Culture of Inclusion in Worksite Wellness
http://www.nchpad.org/1499/6453/Employee“Wellness“Month

NCHPAD: How I Walk Campaign
http://www.nchpad.org/howiwalk/
Community and Family Engagement

Family and community engagement in school-based physical activity programs provides numerous benefits. Research shows that youth participation in physical activity is influenced by participation and support of parents and siblings. **CSPAP Page 16**

Research also suggests an association between the physical activity level of youth with disabilities and their parents or caregivers. Improving levels of physical activity among parents and caregivers could have great benefits for youth with disabilities. It is important to educate parents about physical activity and how it can be incorporated into their lives in an effort to change attitudes and increase levels of physical activity. It is also important to encourage parental involvement within the school and increase parent knowledge about what is available in the community.

Community engagement can take many forms and provides a greater opportunity for inclusion of children and youth with disabilities. Community and family activities such as health fairs and 5K fun runs that are inclusive of children and youth with disabilities can promote education and awareness opportunities and further expand and define efforts to implement a CSPAP.

Resources

*Parents Advocating for School Wellness Toolkit*

*NCHPAD: Guidelines for Inclusive Road Races*
[http://www.nchpad.org/fppics/InclusiveRoadRacesBrochure.pdf](http://www.nchpad.org/fppics/InclusiveRoadRacesBrochure.pdf)
Section Three: Step-by-Step Strategies to Develop, Implement, and Evaluate a CSPAP

Many of the concepts in Section Three do not need detailed explanation to be inclusive of children and youth with disabilities. There are six key concepts to keep in mind in the development, implementation and evaluation of the CSPAP.

1. Involve people with disabilities or representatives on committees.

It is vital that any group or committee convened to implement CSPAP includes people that understand and represent the needs of students with disabilities. The phrase “Nothing about us, without us” is often used to represent the inclusion of people with disabilities in program planning. Committee members representing the needs of students with disabilities can include special education teachers, parents of students with disabilities, and students with disabilities. Parents of students with disabilities are an especially important voice and resource, as they can not only bring representation, but also support implementation in the classroom and within the family. A committee should also include representatives from community based disability organizations such as adapted sports programs or Centers for Independent Living, which can support community engagement.
2. **Educate committee members about inclusion, accessibility and health disparities of people with disabilities.**

In order to facilitate the full inclusion of students with disabilities, it is important that all committee members understand the broader issues. All members must understand the importance of accessibility and inclusion, the laws that protect people with disabilities, and understand health disparities and strategies to promote health.

3. **Keep people with disabilities or those that represent the interests of people with disabilities involved in all aspects of the CSPAP from development through evaluation.**

The involvement of people with disabilities does not end in the planning stages. The inclusion of people with disabilities and/or their representatives throughout the CSPAP process demonstrates a commitment to the effort to make physical activity in school relevant to students with various disabilities. In doing so, it’s possible that a committee might need to address accessibility or transportation needs.

4. **Assess inclusion of students with disabilities and other issues specific to physical activity and students with disabilities.**

Assessments must include some measure of inclusion and participation specific to children and youth with disabilities. Most assessments discussed in the CSPAP do not include a detailed assessment of the inclusion of children and youth with disabilities in physical activity programs. Module 3 of the School Health Index includes some general questions about accessibility and a section on “special health care needs.” In order to fully assess existing physical activity programs and practices as they relate to children and youth with disabilities, it may be necessary to develop additional questions. Here are some examples:

- Are physical activity goals included in IEP’s of students with disabilities?
- Do physical education teachers receive additional training on working with students with disabilities?
- Do students with disabilities participate in physical education classes with peers without disabilities?
- Is a minimum recess time required for all students, including students with disabilities?
- Do teachers and other staff receive disability awareness training?
- Are intramural or after-school adapted sports programs available to students with disabilities?
- Are playgrounds or outdoor play spaces accessible?
5. Provide specific wording throughout that includes children and youth with disabilities.

Avoid relying on the word “all” as the only indication that children and youth with disabilities are included. Include goals and objectives and outcomes that are specific to children and youth with disabilities in each area of the CSPAP.

6. Be creative. Fully including children and youth with disabilities might require “thinking outside of the box.”
PART II.

National Initiatives Supporting CSPAP

National programs that support schools in developing, implementing, and evaluating comprehensive school physical activity programs.

Active Schools

As the national solution to ensure that 60 minutes of physical activity a day is the norm in K-12 schools, Active Schools equips schools with the resources and tools to increase physical education and physical activity opportunities for students, and to cultivate an Active School environment. Active Schools is powered by an innovative collaborative of health, education and private sector organizations that strives to bring these benefits to every child across the country.

Active Kids Do Better.
Physical activity not only helps kids stay healthy and strong, but it can also lead to:

- Higher test scores
- Improved attendance
- Better behavior in class
- Lower rates of childhood obesity
- A lifetime of healthy habits

An Active School integrates physical activity before, during and after school for at least 60 minutes every day.

Alliance for a Healthier Generation: Healthy Schools Program

Healthy kids have higher attendance rates, higher test scores and behave better in class. More than 31,000 schools nationwide are using the Healthy Schools Program to make this the norm.

The Alliance for a Healthier Generation has taken the latest research on childhood health and combined it with the most effective school policies to maximize impact. The divided approach into wellness modules helps to create a workable
framework that sets specific actions to help make schools healthier. The program includes information on:

- Wellness Policies
- Snacks and Beverages
- Breakfast and Lunch
- Health Education
- Physical Education
- Physical Activity
- Employee Wellness
SHAPE America

SHAPE America is the nation’s largest membership organization of health and physical education professionals. SHAPE America works with its 50 state affiliates and national partners to support initiatives such as the Presidential Youth Fitness Program, Let’s Move! Active Schools and the Jump Rope For Heart/Hoops For Heart programs. Additional information including training and professional development for CSPAP is available on the SHAPE America website.

Physical Activity Leader (PAL) Learning System

The first of its kind, the Physical Activity Leader (PAL) Learning System is a cutting-edge, all-inclusive professional development resource within the Let’s Move! Active Schools framework. Adaptable to individual school environments, the PAL Learning System develops and supports individuals who will champion an effort to ensure 60 minutes a day of physical activity for all school-age youth. The learning system is provided free of charge and begins with a one-day in person leadership workshop.

Presidential Youth Fitness Program

The Presidential Youth Fitness Program helps schools achieve excellence in physical education through quality fitness education and assessment practices by providing tools to:

- teach fitness concepts
- assess fitness and understand results
- plan for improvement or maintenance of fitness levels
- empower students to be fit and active for life.

Physical Educator’s Guide for Working with Paraprofessionals


PYFP Resource Library


Centers for Disease Control and Prevention (CDC)

CDC supports efforts nationwide to reduce the risk factors associated with childhood and adult obesity, diabetes, heart disease, and stroke. Through a federal grant, all 50 states and the District of Columbia receive funds to help prevent these chronic diseases. This program focuses on healthy environments...
in workplaces, schools, early childhood education facilities, and in the community.

http://www.cdc.gov/chronicdisease/about/state-public-health-actions.htm

*National Framework for Physical Activity and Physical Education*

PART III.

Additional Resources for Inclusion in Physical Activity & Youth with Disabilities

ARTICLES

Inclusive Out-of-School Time

Physical Activity, Leisure and Recreation for Youth with Disabilities: A Primer for Parents

Program Considerations for Integrating Children with Disabilities into Community Sports and Recreation Programs

504 Inclusive Physical Activity Contest

Principles for Adapting Activities in Recreation Programs and Settings

The Rationale and Benefits of Sport Participation for Youth of All Abilities

Sitting Volleyball: A Skill Enhancing and Physically Demanding Activity

Inclusive Physical Education: Disability Awareness

Inclusive Physical Education: Teaching Style and Format

Inclusive Physical Education

Peer Tutoring in General Physical Education

Assessing Your Child’s Health Related Physical Fitness

What is Section 504 of the Rehabilitation Act?

Eating Healthy Through the Lifespan: Preschool to Adolescence

Mastering the School Lunch

Spring into Action

Autism and Exercise
GUIDEBOOKS

• *Discover Inclusive Physical Education*: A Guidebook for Educators

• *Discover Accessible Fitness*: A Wheelchair User’s Guide to Using a Fitness Center

• *Discover Inclusive Safe Routes to School*: A Guidebook for Including Students with Disability in SRTS

• *Discover Camp*: Considerations for sending youth with a disability to camp for the first time.

• *Discover Leisure*: Understanding and appreciating the value and importance of leisure time physical activity for youth with disabilities.

• *Guidelines for Disability Inclusion in Physical Activity, Nutrition and Obesity Programs & Policies*: A guidebook to assist in the updating of community health programs and policies to be inclusive of the needs of people with disabilities.

• *Community Health Inclusion Sustainability Planning Guide (CHISP)*: The CHISP is a supplement to the Sustainability Planning Guide for Healthy Communities (CDC, 2011) and may be used in conjunction with it.

• *Get the Facts*: an online magazine that will help you become more physically active or, if you are a service provider or family member, equip you with the knowledge to provide a more enriching physical activity program.

VIDEOS

• *Know Your Rights: Sports are for Everyone!* video series

• *Disability Awareness: Sensory Disability*

• *Disability Awareness: Intellectual Disability*

• *Disability Awareness: Physical Disability*

• *General Disability Awareness*

• *Inclusive Class Design*

• *Adapting the Alabama Physical Fitness Assessment Test*

• *Alabama 504 Inclusive Activity Campaign*
• Mary’s Top 10 Communication Tips
• Kids Adaptive Yoga
• Autism and Exercise video series
• Zumba Fitness® (Inclusive)
• How I Walk: A Campaign to Rebrand Walking video series
• Kids Korner Nutrition: Quick and Healthy Lunches
• Kids Korner Nutrition: Heart Healthy Snacks
• Kids Korner Playlist
• Sports Series
• Inclusion in Every Play

TARGET AUDIENCES

Educators: www.nchpad.org/Educators - On this page you will find tailored information for physical education, schools athletics, and out-of-school time.

PROGRAMS

14-Week Program to a Healthier You! - A free, personalized, web-based physical activity and nutrition program for individuals with disabilities and chronic health conditions.

Champion’s Rx - A high-intensity daily workout program designed to challenge all ability levels. This workout program is geared towards individuals who are currently active and have access to a fitness facility or minimal exercise equipment.

CAMPAIGNS

Commit To Inclusion: A global campaign to end the exclusion of people with disability from physical activity and all associated areas. #CommitToInclusion

How I Walk: A campaign to rebrand the word walking. #HowIWalk
**NEWSLETTER**

*inclusive.health.connection*- An e-news resource for transforming your community
A monthly e-newsletter highlighting current news and research on physical activity and disability, events and conferences, and featured columns for all populations including youth.

*Kids Korner*- This column was created to engage youth, parents, and professionals working with youth with disabilities.

*Nutrition Spotlight*- This column features nutritional considerations for people with and without disability.

*Training Corner*- This column features articles related to fitness, wellness, and training topics.

**TRAINING**

NCHPAD has the ability to support physical activity programming for in school, out of school, and community settings that offer access to sports, nutrition, and fitness for students with disabilities designed to improve wellness, self-esteem, and independence. To request a virtual or in-person training or training resources, please contact us.

**TECHNICAL ASSISTANCE**

NCHPAD offers a free information service on a wide variety of topics related to physical activity, fitness, recreation, sports, leisure, nutrition, disability and chronic health conditions. Contact one of our talented information specialists to help you locate the resources you need. Technical assistance is available between the hours of 9:00 am- 5:00 pm CST on Monday-Friday via telephone 800-900-8086, live chat at nchpad.org, and email at email@nchpad.org.

To view more resources and services which can benefit all ages and populations, connect with us:

- [www.nchpad.org](http://www.nchpad.org)
- [email@nchpad.org](mailto:email@nchpad.org)
- 1-800-900-8086
- [nchpad](https://www.facebook.com/nchpad)
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