SPORT AS A MEANS OF INCLUSION AND INTEGRATION FOR "THOSE OF US WITH DISABILITIES"

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Abstract:
Can sport provide a platform for disability awareness as regards both social and biological dimensions? How can sport serve as a tool or means of social inclusion for persons or athletes with disabilities? To address these questions our qualitative study begins with a review of current research on the social dimensions of disability, namely diverse forms of social exclusion experienced by "those of us with disabilities" (McCall, 2016), such as attitudinal, institutional and environmental barriers, subsequently followed by a case study in Greece. Initially, we discuss today’s shift to inclusion—which advocates a more inclusive and people-first perspective as well as a more empowering language—and distinguish between two concepts/approaches, integration and inclusion, mainly through educational schemes, so as to facilitate the analysis that follows on sport’s role in eliminating social and institutional barriers and promoting inclusion. Inclusive education is a central objective of the UN Convention on the Rights of Persons with Disabilities (CRPD), and other UN and UNESCO initiatives. In this context researchers have been examining sport and physical education as tools, instruments or means of social inclusion and/or integration. Accordingly, to determine whether—and to what extent—sport participation contributes to the inclusion and integration of people with physical disabilities, interviews were conducted with 20

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athletes in Athens: semi-structured interviews with 14 male and 6 female Paralympic and World Champions. The findings confirm that both genders confront many forms of social exclusion (attitudinal, environmental and institutional), however their sport participation plays a significant and positive role in their lives. All 20 acknowledge or report sport gives them a social identity, a sport identity and a meaning in life, in addition to contributing to their social integration/inclusion. **Conclusions:** The lack of disability awareness, information and knowledge accounts for many of the barriers. Recognizing both the social and biological dimensions of disability is important. The disability community needs visibility, i.e. coverage in mainstream media to cultivate inclusion, promote and reproduce role models and mentors, along with a wider disability awareness campaign, in which sport could play a vital role in changing stereotypes and attitudes, in addition to eliminating the supercrip identity.

**Keywords:** integration, inclusion, inclusive education, physical disability, supercrip identity, sport identity, social exclusion, empowering language-terminology, mainstream media

1. Introduction and Background

"The progress which has been made thus far in disability sport has been in that of integration: providing platforms for those with disabilities to have a stage to compete and participate on" (Kiefer, 2019).

The number of people with disabilities in the world today is growing at an alarming rate. Over a billion people, about 15% of the world’s population, have some type of disability, and 110 million (2.2%) to 190 million (3.8%) people, 15 years and older, have significant difficulties in functioning. Population ageing, the steadily increasing lifespan, and the upsurge in chronic health conditions are also increasing disability rates (WHO, 2018). People with disabilities require and seek more health care services than people without, but their needs are not met, although article 25 of the UN Convention on the Rights of Persons with Disabilities (CRPD) emphasizes their rights to the highest standard of health care, without discrimination. Moreover, people with disabilities are more vulnerable to deficiencies in health care services and constantly neglected or overlooked in health prevention and health promotion activities. Research highlights that strategies are required to eliminate these gaps and guarantee that health care personnel support and protect the rights and dignity of persons with disabilities, in addition to incorporating disability education into undergraduate and continuing education for all health care professionals and personnel (United Nations, 2019; United Nations, n.d.; WHO, 2018).

In this context, addressing inequalities and challenges to social inclusion and empowerment through social protection, fiscal and wage policies was the priority theme at the 57th session of the United Nations Commission for Social Development at which delegates discussed: i.e. unsustainable inequalities; the needs of persons with
disabilities; people-centered development; the concept of social inclusion through employment, fiscal and social protection policies; promoting health care, equality, and equity. During the ministerial forum on social protection, delegates highlighted the need to include persons with disabilities in social protection and health care schemes—particularly those living in poverty—and to support their specific needs through tailored education and skills training. The 57th session, held 7 February 2018 and 11-21 February 2019, was dedicated to the differential impact and effects of natural and manmade disasters on persons with disabilities, older persons and youth (United Nations, 2019: 7).

As regards national levels, Eurostat data for 2016 reports the following disability percentages (%population aged 16 over): 41% in Latvia; 36% in Slovenia; 35% in Estonia; 34% in Finland and Austria; 33% in Croatia and Portugal; 32% in Slovakia; 31% in the Netherlands; 30% in Denmark and Lithuania; 28% in Romania, the Czech Republic and Luxemburg; 26% in Hungary; 25% in Belgium and France; 24% in Greece, Italy, Poland and the United Kingdom; 22% in Germany; 20% in Cyprus; 19% in Spain and Bulgaria; 17% in Ireland; 13% in Sweden; 12% in Malta. Why does Malta have the lowest percentage and Latvia the highest is another question for experts in the medical, biological, environmental and other sciences. We, as social scientists, examine the transforming socio-cultural, multi-dimensional and complex magnitudes of disability, such as social expectations, social inequalities, and the socioeconomic impact of disability on our institutions (education, employment-unemployment, labor market, civic engagement, health behaviors, social leisure activities such as sport, etc.).

Returning to national levels, we need point out here that in Greece, for example, research shows that people with disabilities are among the most vulnerable at risk of social exclusion, the latter inextricably linked to poverty and lack of employment, in addition to limited access to health care, education, vocational training, accessible transportation, assistive technologies, to name but a few (Asonitou, Koutsouki & Charitou, 2010; Bonias, 2019; Charitou, Asonitou & Koutsouki, 2010; Kalyvas, Koutsouki, Skordilis, 2011; Magoulios & Trichopoulou, 2012).

In the UK, 13.9 million people (22%) reported a disability in 2016/17, an increase from 11.9 million people (19%) in 2013/14 (UK Work and Pensions, 2018). The UK Labor Force Survey for January to March 2018 reports that people with disabilities are twice as likely to be unemployed than those without.ii Disability is a fact of life in Canada as well, for almost one-quarter of Canadians (22%), about one in five (6.2 million), aged 15 years and over, have one or more disabilities that limit them in their daily activities (Statistics Canada, 2018). Numerous studies in the United States also show the alarming rise in the numbers of people with disabilities, and school budgets are depleting rapidly due to the increased number of children requiring special education and related services. The overall rate of people with disabilities in the USA population

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in 2016 was 12.8% (11.9% in 2010), according to the American Community Survey (ACS), percentages varying greatly by state, as do levels of health behaviors, earnings, poverty and employment. Moreover, as the population ages, disability percentages increase, i.e. ages 65 and older (35.2%) have a disability (UCED, 2017; Marino, 2017).

"What is happening to our children?" is the question Sheri Marino (2017) puts to the table after emphasizing that disabilities affect 1 in 7 children, according to the US Centers for Disease Control and Prevention (CDC). In her discussion on the rising demand for health care professionals needed to care for children with chronic physical and mental health issues in the schools, she points out that if we look into the future, when these children are adults, many sectors will be affected, such as the workforce and the housing industry, and every tax-payer, with or without a child with special needs, will also be affected or bear the burden. In her article, part of a five-part series, which examines the "epidemic of children with special needs" in the United States and its effects on schools, the economy, and life after the age of 21, Marino (2017) presents statistical data, according to which, in the last two decades, the number of children with chronic health conditions doubled from 12.8 percent in 1994 to 26.6 percent in 2006. Public schools, with limited resources, she continues, are dealing with this epidemic which includes physical disabilities, learning, behavioral, and mental health disorders, as well as chronic health issues like autism, ADHD, seizures, severe food allergies, asthma, diabetes, and more. Mental health disorders among children, according to the 2013 Morbidity and Mortality Weekly Report, published by the CDC, she adds, are "serious deviations from expected cognitive, social, and emotional development."

On a global level, mutually reinforcing to the advancement of social development for all, remain the Millennium Development Goals and other internationally agreed development goals for persons with disabilities, such as the fulfilment of the obligations of States and Governments under the UN Convention on the Rights of Persons with Disabilities (CRPD), the UNESCO Guidelines for Inclusion: Ensuring Access to Education for All, and the Council of Europe Disability Strategy 2017-2023 – Human rights: A reality for all (UNESCO, 2008; United Nations, 2016; United Nations, n.d.), including the social dimensions of the 2030 Agenda (United Nations, 2019). Certainly, they are all vital strategies for eliminating the social exclusion confronted by people with disabilities, namely the institutional, attitudinal and environmental barriers that obstruct inclusion:

Institutional barriers denote inadequate laws, policies, practices, or strategies that discriminate against people with disabilities, such as obstacles to employment and social services (Chabot, 2013; Kiuppis, 2018; United Nations, 2019). Attitudinal barriers comprise bullying, social stereotyping, prejudice, fear, being perceived as disabled as opposed to enabled, in other words lack of disability awareness. For example, as regards
attitudinal barriers to employment, Laura Chabot’s (2013) literature review indicates that employment rates for individuals with disabilities in the United States are significantly lower than those for individuals without disabilities. She argues that a variety of factors influence the decision of an employer to hire, retain or accommodate an individual with a disability, such as the employer’s knowledge of the Americans with Disabilities Act, however, as regards attitudinal barriers, many employers discriminate or are influenced by disability bias and stereotypes.

Environmental barriers are inaccessible occupational, social and recreational settings, such as physical obstacles to participation in sports or areas of athletic activity, difficulties accessing public transportation, getting on buses or in taxis, parking, leaving the house, going shopping, high counter tops, stairways and narrow doors, the latter major obstacles for wheelchair users (Bonias, 2019, Sherrill, 2004). According to the World Health Organization (WHO, 2018), the physical barriers to health care facilities (hospitals, health centers) are inaccessible buildings and internal steps, inadequate bathroom facilities and narrow doorways, as well as inaccessible parking areas and medical equipment. For instance, women with mobility difficulties are often unable to access breast and cervical cancer screening because mammography equipment accommodates women who are able to stand and examination tables are not height-adjustable.

Another example of social exclusion (an environmental barrier) was the inaccessible Parthenon, namely the recent incident (June 7, 2019) at the Acropolis, which led to the dismissal of officials because parents had to carry their 12-year-old son in his wheelchair up the Acropolis hill to see the Parthenon—one of the most important monuments of world civilization—the authorities having neglected to repair the wheelchair lift/elevator.

To promote inclusion, disability awareness-raising campaigns are needed focusing on eliminating such barriers (institutional, attitudinal and environmental), clearly illustrated in a recent discussion and interview with a Paralympic athlete in Greece:

“The State, our Government does not provide equal opportunities […] We confront obstacles in accessing public transportation […] When we go shopping they bring out the garments/clothing in the street so we can try them on […] When I was a student, my father had to carry me on his shoulders up the stairs of Panteios University [a public/state university in Athens] to take me to class […] I had to hire people to take me to the Tax Office [Internal Revenue] and carry me up the stairs, which was extremely costly…”

1.1 People-First language
Unquestionably, people with disabilities confront a series of attitudinal, institutional and environmental barriers. To meet the United Nation’s Sustainable Development Goals, Karen McCall (2016) highlights the need to establish a global standard of
inclusive education for "those of us with disabilities", pointing out that in her study she purposely replaces the more generic "people with disabilities" with the term "those of us with disabilities" (McCall, 2016: 22, 24, 26), in order to promote the use of a more inclusive language.

Florian Kiuppis (2018) also discusses the issue of different wording and the tension observed in Disability Studies over the use of the terms 'people with disabilities' versus 'disabled people'—commonly used in the UK—which is viewed as objectifying language. In the 1980s an organization named People First language emerged in the United States to counteract objectifying language, such as the disabled (as opposed to enabled), and to cultivate the importance of the personhood. Such thinking, argues Kiuppis (2019: 7), "is in line with the 'person-first' terminology used by international organizations such as the UN, WHO and UNICEF." The Disability Studies community in the United States, he maintains, prefer the wording 'people with disabilities', which is based on a human rights perspective that removes the social stigma linked to impairment, illness or disease, and implies that disability is determined by cultural, social, economic, and political factors, since certain conditions cannot be explained biologically or by biological science. Studies also argue that we should avoid using terms like differently-abled, diverse-ability, and normal (Wilson & McColl, 2019).

People-first language, also advocated by the Canadian government, emphasizes putting the person first and the disability second, specifically not using the term "the disabled" as this objectifies people. Clarke Wilson and Mary Ann McColl (2019), who use the term "disabled" in their study, compare integration and inclusion between Canadians and Americans with disabilities, their findings showing that "disabled Canadians" are more integrated into their wider society than "disabled Americans", the latter enjoying greater equity and opportunity as regards paid work and social leisure. However, "disabled Americans" remain disadvantaged compared to the "non-disabled" in work, education and travel (Wilson & McColl, 2019).

As regards the distinction between the terms impairment and disability, Dimitris Anastasiou and James M. Kaufmann (2013) provide an exceptional and extensive critique of the discourse on the social model of disability, discussing the dichotomy between impairment (physical/bodily/mental or sensory dysfunction) and disability (as a social construction/social situation). They argue that advocates of the social model use the distinction between disability and impairment to reduce disabilities to a single social dimension—that of social oppression—consequently downplaying the biological and mental conditions and difficulties in the lives of disabled people.

"People will benefit most by recognizing both the biological and the social dimensions of disabilities," they argue, adding it is society which disables physically impaired people since "disability is imposed on top of our impairments by the way we are unnecessarily isolated and excluded from full participation in society" (Anastasiou & Kaufmann (2013: 441-442). We need argue here that changing social expectations is vital as this would lead to eliminating the needless isolation and social exclusion of people with disabilities.
To understand this perspective, Anastasiou and Kaufmann (2013) maintain, it is necessary to recognize the distinction between the social situation called, disability (a form of oppression) and the physical impairment. Therefore they define impairment "as lacking all or part of a limb, or having a defective limb, organism or mechanism of the body and disability as the disadvantage or restriction of activity caused by a contemporary social organisation which takes little or no account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities. Physical disability is therefore a particular form of social oppression" (2013: 442).

These arguments were subsequently extended to all disabilities, chiefly by the British sociologist Michael Oliver. The meaning of disability, they add, lies in both biology and society, as well as in their interaction, but we cannot ignore our common human biological limitations, namely "the hyperbole of phrasing, used by proponents of the social model, cannot hide the fact that impairments are not pleasant and comfortable situations for many people" (Anastasiou & Kaufmann, 2013: 451). Moreover, they do acknowledge the inevitability of labeling, which is required in offering special services to specific individuals, although labeling or categorizing, major issues in the disability and special education debate, is often misguided.

We need point out here that definitions, phrasing and terminologies, such as the handicapped, the impaired, the disabled, persons with disabilities, those of us with disabilities, the enabled, and the differentially-abled, are socially constructed and reconstructed and consequently vary in meaning according to the language, the culture, the society, the social order or the paradigm in time and space. Moreover, as regards the previous reference concerning the importance of personhood, we feel it is necessary to add here that personhood is also an existential-philosophical construct as well as a relational construct that is defined by society.

In other words, as social scientists, we use linguistic tools to explain our world: meaningful and dynamic social, political and cultural tools which contribute to our understanding of concepts, facilitating our grasping segments or problematic aspects of a social reality which is in a constant state of transformation-change. Consequently, language is not static, but a carrier of meanings, a conveyor of ideas and a symbolic system which creates, recreates or reconstructs social relationships and social expectations (Kamberidou, 2019).

Undeniably, "those of us with disabilities"—using McCall’s (2016) terminology—confront many forms of social exclusion. But, before focusing on disability and sport participation as a means of promoting or cultivating social inclusion and integration, it is important to briefly define and/or distinguish between the two approaches/models and discuss today’s shift to inclusion, which implies a policy vision for a global context on inclusivity and Education for All, along with a more inclusive language.
2. Integration and Inclusion - What is the difference?

"To promote role models and include those of us with disabilities in the learning environment, we must hire teachers with disabilities… Teachers with and without disabilities must receive education that establishes them as inclusive educators… The built environment must be accessible to students and teachers with disabilities. This includes sports fields, areas of athletic activity and auditoriums used for physical education" (Karen McCall, 2016: 25).

A plethora of studies discuss integration and inclusion, two approaches, concepts and notions, used in Western societies, that are repeatedly mixed, considered synonyms, overlapping or purely a linguistic modification, especially after the Salamanca Statement (UNESCO, 1994), that is the shift in policy focus from special education to diversity within a common school for all students, which includes the use of a language or terminology that moves the global community towards an inclusive education standard (Bridgeway Education, 2019; CSIE, 2002; Sherrill, 2004; Harman, 2016; Kamberidou, 2019; Kefi Chatzihamperi, 2019; Kiuppis, 2018; McCall, 2016; Patsantaras, 2013, 2015; Tiendra, 2013; UNESCO, 1994, 2008; United Nations, 2016, 2019; Vislie, 2010).

Undeniably, these two approaches do not apply only to the education sector, or exclusively to people with disabilities. Studies have been addressing the issue of integration in the framework of multiculturalism (pluralistic societies) for decades. Although it is not in the scope of this paper to examine the complex and multifaceted factors of the long-standing debate in Western societies on integration versus assimilation due to large scale immigration patterns and population flows, we will refer to it briefly in order to facilitate our analysis.

The long-standing issue of multiculturalism (pluralist society/ integration/ coexistence) versus assimilation has been examined by many scholars, repeatedly inquiring: Should immigrants preserve their traditions and culture while living in the host country or should they absorb themselves (assimilate) into the ways, culture, traditions and manners of their host country? Vani K. Borooah and John Mangan (2009) address this question in their study, which uses the Human Beliefs and Values Survey, offering governments a snapshot of contemporary views (at that time) and future possibilities, namely what is to come and how these views could shift due to demographic changes. Their study provides detailed analyses of views on immigration policy in Europe, mainly the extremes of multiculturalism versus assimilation so as to determine future trends and policy implications. For example, their findings show that the majority of respondents in the Mediterranean countries, such as Greece (77%), Italy (60%), Malta (55%) and Spain (52%) favored multiculturalism. On the other hand, respondents from Austria (82%), Germany (78%), Denmark (77%), Iceland (73%), Belgium (72%) and the Netherlands (70%) favored assimilation, meaning immigrants being absorbed into the host culture.
It seems the main differences were not between middle class and working class or males and females, argue Borooah and Mangan (2009), but between nationalities grouped together into Northern and Southern Europe. They also point out that the results indicate that predictions in this area are not so simple: "The inevitable conclusion from the results is that the development of a unified-European policy on this important immigration question may not be easy to define or direct" (Borooah & Mangan, 2009: 41), which seems to be the case today. In other words ten years later, we can now confirm the validity of this concluding remark.

We need highlight here that their study examines various degrees of integration and coexistence within the two polar cases of multiculturalism and assimilation. Integration, they argue, allows for the coexistence between the majority culture and the minority cultures whereas assimilation requires the absorption of minority cultures into the majority culture, specifically a monoculture. They examine studies on multiculturalism as a natural extension of liberal democracy, democratic values of tolerance and respect for diversity, or at least the acknowledgement and toleration of a variety of cultural expressions. Conversely, they refer to research that focuses on multiculturalism as a threat to liberal democratic values or as endangering social unity.

Borooah and Mangan (2009) discuss strict assimilation; the "US-style melting pot situation"; partial assimilation with preconditions; integration and cohesion in the UK; structural assimilation; cultural assimilation; separate development with a common institutional, legal and economic framework; quasi-assimilation countries, quasi-multicultural countries, or those in between; post 9/11 that led to a re-awakening of a debate on immigration; the European Commission’s concern in 2003 about the lack of common approaches to the immigration issue, and so forth.

2.1 Integration: Fitting in
An analysis of current literature (Bridgeway Education, 2019, et al.) indicates that integration refers to fitting in, namely the incorporation into a society, a country, an institution or an organization of people from specific or diverse underrepresented, less privileged or vulnerable social groups, and always in reference to eliminating discrimination due to race, ethnicity, color, gender, disability, sexual orientation, age or class. The integration model denotes the process of becoming part of a group, a society, a country, an institution, etc. To illustrate, when an institution (the military, a university, a school) provides extra adaptations and strategies, supplementary support services, additional personnel, volunteers or workers to help someone or members of a specific social group fit in—i.e. helping a child or a student with a disability fit in or fit into a classroom or a university, or else helping women in the Armed Forces fit in—then it is integrating (focusing on integration).

An integrated classroom setting means students with refugee, immigrant or migrant status learn together with their peers who are not refugees, immigrants or migrants, and may receive extra help (i.e. tutoring, language classes) to help them adapt to the mainstream-general curriculum. An integrated approach may also include
specialized classes or segregated group activities outside of the mainstream classes. The same applies to students with disabilities who learn together with their peers without disabilities, and when necessary receive extra supports to help them adapt to the regular curriculum, such as separate special education programs within the classroom or through pull-out services (federally-supported special education programs where specialists work closely with students). Integration means changing, remedying or modifying the subject or the curriculum to benefit or accommodate, for instance, students with disabilities, so that they fit into the mainstream education system. It is a process that enables students with disabilities or special needs to be absorbed into mainstream-general education. In short, an integrated approach serves the needs of a specific social group, person or child. It involves change and adjusting or modifying a school system. Integration seeks to help students be part of the larger group, which theoretically is a positive approach.

One need point out here, as regards students with disabilities or those with refugee status, that both approaches—integration and inclusion—aim to bring them into the mainstream classroom. However, studies also argue that the differences in the way people learn can make this education system less effective overall. In a word, when students are expected to adapt to the pre-existing school structures, this is defined as integration, whereas the inclusion model ensures that the existing education system or structures will adapt to each and every student, so everyone benefits.

The trend today, especially as regards education and the school environment, is moving away from integration and toward inclusion, which focuses on helping everyone, and creating "A World of Inclusion" (UNESCO, 2008: 4). In the last two decades UNESCO has been focusing on inclusion as a guiding principle in education systems, at all levels.

2.2 From integration to inclusion: "We leave no one behind" (McCall, 2016)
The concept of inclusion denotes eliminating social exclusion and celebrating diversity, as opposed to tolerance and assimilation, to wit that everyone has the same human rights, social privileges, civil and constitutional liberties and rights, such as equal access to education, health care, and employment. Inclusion focuses on helping everyone and leaving no one behind. As defined by the Indian, Nobel-Prize-winning economist Amartya Sen: “Inclusion is characterised by widely shared social experience and active participation in society, by widespread equality of opportunities and life chances available to people on the individual level and by all citizens reaching an elementary level of well-being"(UNESCO, 2008: 6).

Inclusive educational systems explore how to improve or change the school and classroom to support the success of a child (with a disability, migrant or refugee status, etc.) together with, in common with or alongside the other children. Discussions regarding inclusion emphasize supplementary or extra adaptations, changes or services that will benefit All, the entire class, so that all students succeed and excel, without any exceptions. It means respecting the rights of all students—regardless of disability,
gender, race, religion, sexual orientation—and changing the school structure to benefit all. Inclusive schools and classrooms are sensitive-aware to the needs of every student. School personnel focus on changing the classroom or even the school to serve and support the success of a child while discussions involve services and adaptations that will benefit everyone. Inclusion is about helping everyone. The focus is not in fitting in (integration): fitting into the mainstream educational system or institution, but changing it and improving it for the benefit of All. Inclusion means full-time enrollment/engagement in general education and making the system adapt to each and every student’s uniqueness or difference, i.e. students with disabilities of all ages being educated in mainstream-general education settings together with students without disabilities. It involves a commitment to remove all barriers to participation, valuing each individual difference and celebrating diversity.

Though, one could argue that diversity does not necessarily lead to inclusion—which means ensuring a basic minimum standard for all—and frequently both models (integration and inclusion) are necessary, especially in accordance with the circumstances. Moreover, integration is not an automatic by-product of diversity, therefore, to harness the benefits of diversity, we have to first achieve "meaningful integration" (Tiendra, 2013) so that no one is left behind (inclusion).

Marta Tiendra (2013) examines the challenges for achieving meaningful integration, both academically and socially in Higher Education, as campuses are becoming more racially diverse. She focuses on ethnic programming and evidence about students’ social interaction patterns. In her discussion on campus diversification, the enrollment of a diverse student body, race-sensitive admissions, and self-segregation, she argues that institutional leaders must pursue deliberate strategies that promote inclusion. Accordingly, she spotlights organizational practices and strategies that promote such meaningful academic and social interactions among students who differ in their experiences, traits and views.

In her study from integration to inclusion, Lise Vislie (2010) focuses on global trends and changes in western European societies, arguing that both notions (integration and inclusion) are usually considered as overlapping, especially after UNESCO’s Salamanca Statement on inclusive education approaches, to be exact the shift in policy focus from special education to diversity within a common school for all students: Education for All. Vislie (2010) examines whether the new terminology that came into use after the Salamanca Statement signified a new educational policy agenda or merely a linguistic shift. She argues that the move to inclusion served a double purpose: 1) UNESCO’s actions in the early 1990s implying a policy vision for a global context; 2) A new term needed to avoid sending the wrong signals and messages to significant actors in the international scene or the wider global arena.

What is the Salamanca statement? Over 300 delegates representing 92 governments and 25 international organizations were at the meeting in Salamanca, Spain June 7-10, 1994. They discussed the fundamental policy shifts that are required to promote inclusive education approaches that would further the objective of Education
for All, enabling schools to serve all children, and “particularly those with special educational needs” (UNESCO, 1994: iii). What led to the concept of an inclusive school? According to the Salamanca statement:

“Every person with a disability has a right to express their wishes with regard to their education […] schools should accommodate all children regardless of their physical, intellectual, social, emotional, linguistic or other conditions. This should include disabled and gifted children, and working children, children from remote or nomadic populations, children from linguistic, ethnic or cultural minorities […] children and youth with special educational needs should be included in the educational arrangements made for the majority of children. This has led to the concept of the inclusive school […] capable of successfully educating all children, including those who have serious disadvantages and disabilities” (UNESCO, 1994: 6).

This focused interpretation of inclusion, based on the English Index for Inclusion (CSIE, 2002), which has received international attention, should not be mixed with integration, but used as an instrument or tool for moving practice towards more inclusive schools, observes Vislie (2010), adding, that arguments on whether to focus strategies on diversity or on innovations in special education still continue in Western societies.

Indeed, inclusion represents a good measure of the democratic health of a country and respect of human rights and democracy, affecting primarily the directions of the country’s general policies and not, in the first place, education or teaching. This statement is in line with the report of the 48th Session of the International Conference on Education (ICE), on the theme of "Inclusive education: the way of the future" organized by the UNESCO International Bureau of Education in Geneva. The 48th session also highlights that social justice, social inclusion and inclusive education seem to be inextricably linked and the tendency towards an inclusive society seems to be the basic foundation of sustainable social development. As was argued at the session, the value of a democracy is measured by the way it treats its minorities and marginalized populations, providing them with greater autonomy so that they can participate fully in social life (UNESCO, 2008).

One of the biggest development challenges of our time remains that of providing quality education for all, argues Koichiro Matsuura, Director-General of UNESCO, adding that "with effective legislation and policies it is possible to build a world of inclusion. Awareness-raising will move us in that direction. So we undertake both efforts—to raise awareness and to develop effective policies for a World for Inclusion" (UNESCO, 2008: 4).
2.3 A more inclusive language: "Those of us with disabilities"

"First, we must agree on the elements of inclusive education in the global context…A priority in creating the global inclusive education standard is the consultation and participation of those of us with disabilities in creating the standard" (McCall, 2016: 24).

Inclusive education has become the goal of many advocates and international organizations. The United Nations, and specifically Goal 4 of the Post 2015 Sustainable Development Goals (SDGs) stipulates that we must "ensure inclusive and equitable quality education and promote lifelong learning opportunities for all," argues McCall (2016). She also points out that although the term inclusive education is representative of Education for All, meaning we leave no one behind, a definition is require in a global context "for those of us with disabilities" (2016: 22).

It is important to note here as regards language, that the terms and concepts such as integrated education, special education, accommodated for, and mainstream education are used interchangeably with inclusive education in many models of education. Consequently, her paper highlights the need for a global standard that clearly defines the implementation of inclusive education in both developed and developing nations. She also spotlights the significant role of technology in inclusive education, and specifically the technology "used by those of us with disabilities to access learning material" (McCall, 2016: 24), namely options for learning, such as the use of adapted learning tools: i.e. Learning Path (LeaP) by Desire2Learn.⁷

A global inclusive education standard must also recognize that not every region or country has access to the same level of technology, connectivity and digital learning material. A global inclusive education standard, as technological availability increases, will assist countries and regions to ensure that technology is accessible, and students and teachers with disabilities have access to adaptive technology. However, McCall (2016) observes that if the SDGs are to be realized by 2030, we need to begin graduating students who are already able to design, create, deploy, and invent products in addition to physical and digital environments that are inclusive.

These graduates, she argues, "need to be able to accept those of us with disabilities as part of all professional practices. Developing a global inclusive education standard creates the infrastructure for a human rights model of disability. It will ensure that those of us with disabilities are an integral part of our communities socially, professionally, and politically“ (McCall, 2016: 26).

She also emphasizes that all teachers—with and without disabilities—must receive education that establishes them as inclusive educators. This could include professional development programs in sign language, adaptive technology, Braille, and so forth. It seems her recommendations spotlight the need to promote role models,

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specifically hire teachers with disabilities and include them in the learning environment:

"The built environment must be accessible to students and teachers with disabilities. This includes sports fields, areas of athletic activity and auditoriums used for physical education. A by-product of this component is in providing opportunities for Paralympian’s to train and compete locally nationally and internationally" (McCall, 2016: 25-26)

3. The social space of sport and sport identity: Case study in Greece

"We introduce ourselves as Athletes…We have an identity, that of an Athlete!"

Inclusive education is a central objective of the UN Convention on the Rights of Persons with Disabilities (CRPD), the first legally binding international instrument to address the rights of persons with disabilities and sport, along with other UN and UNESCO initiatives. Article 30 of the CRPD addresses both mainstream and disability-specific sport and stipulates that “States Parties shall take appropriate measures to encourage and promote the participation, to the fullest extent possible, of persons with disabilities in mainstream sporting activities at all levels”, and that children with disabilities be included in physical education within the school system “to the fullest extent possible” and enjoy equal access to “play, recreation and leisure and sporting activities” (United Nations, n.d.).

In this context researchers have been examining sport and physical education as tools, instruments or means of social inclusion and/or integration, in addition to showing that the social space of sport provides an excellent platform for eliminating cultural, social and linguistic barriers (Bonias, 2019; Kamberidou, 2019, 2012, 2011; Kefi Chatzihamperi, 2019, 2018; Kiuppis, 2018; Patsantaros, 2103, 2015; Patsantaras, Kamberidou & Panagiotopoulos, 2009).

Sport is an ideal tool for promoting and cultivating the inclusion and well-being of persons with disabilities, who confront a great number of societal barriers—social stigma, negative perceptions, exclusion from employment, educational prospects, and community life—depriving them of many opportunities which are essential to their social development, health and well-being (United Nations, n.d.).

Yet, unlike education, sport is not mandatory or compulsory but a matter of choice, with the exception of compulsory Physical Education, which is more or less voluntary, as Florian Kiuppis (2018) points out in his discussion on what sport participation as an aspect of inclusion means or could mean in general, and what it could mean in Quality Physical Education (QPE). Sport ranges from separate activities for persons with disabilities to modified activities designed for all. As a result, this makes it necessary to attribute each approach equal importance and validity instead of discrediting or disputing segregated structures and glorifying supposedly inclusive ones. Moreover, he argues that non-participation does not equal social exclusion "as this
occurs when people want to participate but cannot. Indeed, not everyone, regardless of whether they have disabilities, wants to take part in sport" (Kiuppis, 2018).

This may be true—not everyone wants to participate in sport or even likes sport—yet in the case of people with disabilities that do like it and do participate, research confirms that it contributes to their social inclusion-integration, social development, self-improvement, self-empowerment, well-being, and health, in addition to improving their social interactions and relationships, or serving as an "escape", the latter highlighted in Swanson, Colwell, Zhao (2008) and Bonias (2019).

To determine whether—and to what extent—sport participation contributes to the social inclusion of athletes or persons with disabilities, as part of his Master’s thesis, Alexandros Bonias (2019) interviewed athletes with physical disabilities in Athens, Greece. He conducted semi-structured interviews with 20 Paralympic athletes and World Champions—14 male, 6 female, aged 18-55 years—from October 2017 to March 2018 (a five month period). In line with their preference or request, the interviews were held at sport installations/sites, in their homes, and in one case at a cafeteria. His study also included a series of non-participant observation sessions. Prior to this, in a pilot study Bonias (2019) had interviewed seven Paralympic athletes and World Champions. According to the findings regarding major difficulties, the respondents report environmental/architectural and attitudinal barriers, such as inaccessible public transportation, public spaces, universities, hospitals and sport spaces, as well as constant or daily bullying at school. Nineteen, the overwhelming majority, report they confront or have confronted many forms of social exclusion or exclusionary practices, and especially those born with their physical disability. All 20 highlighted the significant role and contribution of sport in their social inclusion and integration, also acknowledging that sport gave meaning to their lives; it gave them a reason for living, getting up in the morning and a purpose in life; it gave them an identity, a social identity and a sport identity.

As verified in the study, the social and psychological benefits varied, depending on the level of their sport activity, skill level, years of participation and the support of their social environment. More analytically, Bonias (2019)—who uses the terms inclusion and integration interchangeably and as synonyms—begins with an examination of sociological theoretical perspectives on social exclusion, social pain, and social inclusion, as well as the effects of social exclusion and social pain on people with disabilities. He continues with a detailed analysis of European, national and local legislation and policies for the social inclusion of people with disabilities, confirming the need for disability awareness. He subsequently focuses on physical disability and sport participation. His study confirms that sport is a tool or means of social inclusion/integration for people with physical disabilities. Moreover, all 20 respondents—whose names and gender are concealed in this article and in the excerpts that follow—seem to appreciate, feel or acknowledge the fact that sport has given them an identity, a social/sport identity. For example, World Champion G. S. said:
"Sport helps me in my personal life, allowing me to be better, to see the world better and to achieve my integration through social interactions [...] We all need to feel we are good or successful at something [...] here we feel we are doing something, accomplishing something, getting out of the house, we have an [sport] activity and we introduce ourselves as Athletes. In other words we have an identity, that of an athlete! [...] nowadays identity is A to Z, it’s everything [...] when a person cannot work because of their disability [...] or cannot complete their university studies [...] being an Athlete gives them an identity, helps look at the world differently and introduce themselves to the world.”

The results indicate that the family environment and friends were also significant or major factors that contributed to their social inclusion. To reiterate, all 20 participants acknowledged or declared that sport gave meaning to their lives and contributed to their social integration/inclusion, along with their family and friends. For example, World Champion O. T. with acquired physical disability said:

“I was in despair and felt disappointment in the beginning [...] but I was not one to sit and cry for my fate because of an accident [...] I looked to the future, and Sport is what helped me move on, move forward, and especially my first [sport] victories.”

The findings indicate that social exclusion and social pain is present in the lives of all 20 participants, but at different levels and according to the circumstances. Bonias (2019) notes that each case (each individual) was different and required a more personalized approach. Social exclusion and social pain, he argues, are experienced differently from person to person and in relation to their physical disability, i.e. whether it was acquired or they were born with it, as well as other considerations, such as financial limitations and family support.

Respondents born with their physical disability report experiencing stronger, more intense social pain than those who acquired their disability later in life, e.g. after an accident or an illness. We need stress here, as regards the socialization process, that respondents with acquired physical disability had already cultivated and experienced social relationships and friendships before acquiring their disabilities. On the other hand, they had suicidal thoughts, whereas respondents born with their physical disability report not having suicidal thoughts. Participants who acquired their physical disability later in life told Bonias (2019) that sport and professional counselling helped them move on and get out of the depression and suicide stage. For example, Paralympic Champion A. T. said:

“I went through the depression phase and the suicide phase [...] some of us have committed suicide, not being able to cope with [...] the unbearable pain, having no choices [...] Now however, I am a winner, a champion, my life has a purpose [...] I visit schools, elementary, junior high and high school, to convey my experience to the students
and the teachers on the power of will, the power of decision-making and the enormous and unlimited power that we have inside us […] there is no ocean without a storm.”

World Champion A. H. confessed:

“Of course I felt anger, disappointment, and despair. I was angry, mad at myself asking ‘why am I this way’? I’ve been like this since I was 18 years old […] I went through depression, I took medication. I need tell you, it’s difficult to look at yourself in the mirror and see the difference, it’s not easy.”

As regards her/his experience with school bullying, World Champion K. H. said:

"I was frequently bullied at school as a child, pushed down the stairs almost every day, and when I went to my teachers to complain and ask them to help me, they were indifferent, unable to deal with my situation or take any type of responsibility. They did nothing!"

It seems even teachers require disability-awareness. As regards educational schemes, all teachers must be appropriately trained and educated as inclusive educators.

The need for disability awareness is also clearly demonstrated in the discussion/interview with Paralympic and World Champion, A.N. (Boccia-Spastic Quadriplegia), who complained about public transportation (environmental barriers), bus-driver treatment (attitudinal barriers) and state negligence (institutional barriers):

"The buses are completely inaccessible. Some have a ramp, but they usually do not use it, and I’ve had many arguments with the bus drivers, since I have an electronic wheelchair and they won’t take out the ramp for me, so I can get on the bus. One bus driver told me the ramp was out of order, but when I pressed the button, the ramp came out (was working), he lied […] Honestly, I understand, they want to make their job easier, but it’s the responsibility of the State, the government to solve this problem…”

World Champion G. F. talks about the importance of support from the social environment, namely family and friends:

“My family environment embraced me and made me feel there is nothing wrong with me […] my mother was very tough on me. She did this on purpose, I can say now, to make me stronger and not feel hurt or allow anyone to insult me or put me down. I believe she did this intentionally to make me tough and help me ‘stand on my own two feet’ [make me independent].”

World Champion O. M. who was born with his/her physical disability argues:
"You fall and then you get up again [...] When I did not qualify/pass to go the Olympic Games in Rio I was very upset. But I didn’t give up, I stubbornly persisted, I told myself I would continue [...] and I finally went to the World Games in London [...] However here [in Greece] we have no audience, no media coverage or support."

Out of the 20 participants, only one, World Champion K. L. (Wheelchair Fencing) reports she/he has never felt social exclusion because of her/his personality:

"My personality is such, that I would never allow it [...] I refuse to feel inferior to any other girls/boys just because they can walk and don’t need to use a wheelchair. [...] When someone looks at me for the first time, they do not see my wheelchair first! They see me first, they look at me K.L. in the face and then they notice my wheelchair. This probably occurs because I do not allow my physical disability to represent me, it isn’t my identity!"

We need point out here that World Champion K. L. is obviously referring to attitudinal barriers, such as disability stereotypes and negative perceptions.

The results indicate that a primary reason individuals with physical disabilities choose to participate in sport is to achieve their social inclusion and to change disability perceptions and stereotypes. Bonias (2019) also confirms the lack of disability awareness in Greece, and the need to promote visibility and social awareness, especially through the mass media and the promotion of role models.

4. Inclusion and Visibility: Eliminating the "supercrip" stereotype

"Supercrip-related praise for Paralympians can unrealistically raise expectations for all people with disabilities, including many who cannot do many of the things athletes with disabilities can do" (Martin, 2017).

The integration and awareness platforms provided today for athletes with disabilities include events and organizations such as the Special Olympics World Games, the Paralympic Games, and the Deaflympics, but then again they do not receive the same media coverage as the games or sport events for people without disabilities. The "disabled community" is underrepresented in mainstream media, including television and fictional film, as opposed to the media attention and treatment of the gay community, ethnic minorities and women who also receive considerable academic attention, argues Alison Harnett (2000), adding that "no such priority has been given to the nature of the portrayal of the disabled, or the lack of proportional visibility on our screens."

Why is media coverage so important? Need we go back to decades of studies on women’s sports and the consequences of their underrepresentation in the mainstream.

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vi To secure their anonymity, as requested, we do not reveal their gender.
media (Duncan, Messner & Williams, 2005; Duncan, Messner, Williams & Jensen, 1994; Kamberidou & Chroni, 2016; Messner, Cooky, Hextrum, & Nyad, 2010; Messner, Duncan & Cooky, 2003; Messner, Duncan & Wachs, 1996). For instance, even though women’s sport participation in the Olympic Games today is nearly equivalent to that of men’s—and women’s sport fans seem to be growing—women’s sports remain underreported. Sport editors, journalists, reporters and columnists are mostly men who apparently have not been gender sensitized. In Greece, for example, there is extensive coverage of men’s sports and male athletes in contrast to the comparative underreporting or invisibility of women’s sports and female athletes, with the exception of the minority of commercialized female athletes who are portrayed as sex-symbols or super-feminine fashion models, and not for their sport achievements or sport identity (Kamberidou & Chroni, 2016).

A current example of what media attention can accomplish—as regards societal awareness and pressures to eliminate barriers—is the recent incident at the Acropolis, which, as previously cited, led to the dismissal of two officials over the wheelchair lift failure in June 7, 2019. Public outrage was provoked following media coverage of state negligence when parents had to carry their 12-year-old son, in his wheelchair, up the Acropolis hill to see the Parthenon because the wheelchair lift was out of order for months, the authorities having neglected to repair it. It seems the Parthenon was off-limits to people with disabilities, was the story in the headlines, digital and hardcopy, including television. Consequently, the Ministry of Culture apologized and explained in a statement that the lift was old, having been installed in August 2004, shortly before the Athens Olympic Games, and promised that a new elevator/lift would be installed which “will meet all accessibility standards and will cover all forms of disability.”

The Ministry of Culture also asked for the resignations of the head of the Department of Archaeological Works and Studies and that of the director of the Antiquities Ephorate of the City of Athens.

Without a doubt, media coverage/visibility creates social awareness along with pressures and opportunities to implement measures. It seems that if it’s not covered in the mainstream media the problem doesn’t exist. The lack of awareness around the issue of sport and disability accounts for many of the barriers discussed earlier in this paper and confirmed in Mitchell Kiefer’s (2019) study which emphasizes that this lack of experience and awareness also applies to sport governing bodies (SGBs), in other words the officials directing sport institutions as well as those involved in the lives of people with disabilities. Moreover, he adds, every person experiences disability and sport barriers differently, and in accordance to the society, the country, and the belief/value systems.

Opportunities for people with disabilities to participate in disability sport increased significantly in the 20th century. Policies and institutions developed in order to promote sport participation and sport events, while studies focused on how sport

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could serve as an empowerment tool for people with disabilities, positively impacting their quality of life and functional status. Accordingly, research showed that people with disabilities who engaged in sport, not only improved their self-esteem and self-confidence, but also served as role-models since their visibility provided social awareness, and in so doing reproduced engagement/participation. However, even today, in the 21st century, as Kiefer (2019) points out, "there are still many barriers to participation", such as infrastructural policies, lack of technology and equipment, in addition to social beliefs and attitudes towards those with disabilities.

With regard to academic attention, research in disability sports is also limited, argue Sarah McMaster, Diane Culver and Penny Werthner (2012) who examine studies on coaches of athletes with physical disabilities. Their data includes two semi-structured interviews and two non-participant observation sessions with two coaches who noted the lack of resources and learning opportunities specific to disability sport. Florian Kiuppis (2018) observes that typical barriers for people with disabilities to participate in sport include lack of opportunities and programs for training and competition; limited accessible facilities due to physical-environmental barriers; limited information on and access to resources; and lack of awareness on the part of people without disabilities.

This ignorance or lack of awareness, experience, knowledge and information is clearly emphasized in the supercrip identity. Undeniably, disability sport is underrepresented in mainstream media, but when they do decide to provide coverage, professional athletes are portrayed as supercrips (super-cripples). The supercrip stereotype, discussed in many studies, refers to the portrayal of athletes with disabilities as inspiring, as inspirational or as defeating and overcoming their disabilities through heroic and super-human feats or gold-medal winning performances. However, they also receive the exact same attention or the same excessive praise for accomplishing minor, daily and routine tasks, like going to the supermarket, doing the dishes, shopping, cooking, or cleaning their room, consequently reflecting low expectations about what a person with a disability can do (Bonias, 2019; Chatfield & Cottingham, 2017; Harnett, 2000; Martin, 2017; Silva & Howe, 2012).

As regards such attitudinal barriers and stereotype, Sheryl L. Chatfield & Michael Cottingham (2017) challenge the supercrip identity in their study which explores different perceptions of athletes in disabled and non-disabled sports. They compare participant descriptions of role models with and without disabilities, pointing out that the term supercrip suggests extraordinary feats or achievements. However, it is also applied to anything, any skill, proficiency or expertise demonstrated by an athlete with a disability, consequently undermining spectator appreciation for their achievements.

It is important to note here that perceptions vary, based on the type of disability, the education level and the experiences of those making judgments, as indicated in Chatfield and Cottingham’s (2017) study in which the research participants consisted of undergraduate students at a large southwestern university. The students viewed video
recorded scenarios of athletes with and without disabilities and participated in focus group interviews. The findings suggest that the participants were most likely to describe relatable circumstances as inspiring. Moreover, Chatfield and Cottingham (2017) identified negative attitudes in both those with disabilities and those who provide services for individuals with disabilities, as did Bonias (2019) in his study.

Although researchers argue that increasing visibility could raise awareness and improve perceptions of disability, the "supercrip label" (Silva & Howe, 2012) could limit or distort this potential change, as well as create exaggerated or unrealistic expectations and role models for people with disabilities. In other words, the implications of language, terminology, and labelling, along with the supercrip iconography, narratives and representations in the media of Paralympic athletes or athletes within the context of elite sport, irrefutably have a negative impact, reinforcing the "achievement syndrome" which means "the impaired are successful in spite of their disability" (Silva & Howe, 2012: 174).

 Appropriately Kiuppis (2016) observes that sport is an area of life in which people with disabilities have less favorable experiences than their "non-disabled" peers and competitors, although studies emphasize that athletes with disabilities within the Olympic Movement should be respected and valued as athletes first, since all athletes are equally Olympians. As regards the inclusion debate in sport, taking into account the variety of meanings attributed to inclusion, Kiuppis (2016) as previously cited, explores the meaning of sport participation "as an aspect" of inclusion in general, and what it could mean realistically in sport, and particularly in Quality Physical Education (QPE). Inclusion, he argues, does not necessarily relate to people with disabilities, although he focuses on inclusion in sport and the participation of people with disabilities in sport once their access has been secured. In his study he asks: "Does inclusion in sport mean the same as inclusion in education?" To answer this question he follows the basic assumption and principle borrowed from other studies which focus on justice, fairness, equity and equality of opportunity in education, according to which inclusive approaches could mean ensuring a basic minimum standard for all. His discussion covers a range of opportunities and options: i.e. sporting activities for people with disabilities together with their "non-disabled" competitors; inclusion within mainstream settings; inclusion within disability-specific opportunities, among others.

Researchers also examine motivations or reasons for participating in disability sports. Scott R. Swanson, Tom Colwell and Yushan Zhao (2008) discuss the importance of motives, arguing that disability sports organizations could benefit from a better understanding of the factors leading individuals with disabilities to participate in sport. Their study, conducted with 133 male and 60 female wheelchair athletes 13–34 years old explores four sources of motivation (escape, self-esteem enhancement, self-improvement, and social interaction) and six forms of social support (emotional challenge, emotional support, listening support, reality confirmation, task appreciation, and task challenge).
Swanson, Colwell and Zhao (2008) examine the different needs and the differences in social support and in motivation, according to the athlete’s age, gender, playing level, skill level, years of participation, and future playing intentions. Their results show that male athletes were more motivated by the desire for escape, as opposed to female athletes. Long-term sport participants were more motivated as regards self-esteem enhancement than novices (beginners). Stronger motivators for high school athletes than for collegiate athletes were escape, self-improvement, and social interaction. The importance of social support differed according to skill level, playing level, years played, and future playing intentions.

Claudine Sherrill (2004) examines the involvement of young people with disabilities in physical activity (sport in and out of schools and physical education), documenting trends, benefits and values, on behalf of the International Council of Sport Science and Physical Education, and at the time as President of the International Federation of Adapted Physical Activity (IFAPA). Sherrill (2004) discusses adapted physical activity as a profession and as an empowerment/service delivery system. She records proposals, relevant data and websites from both the developed and developing world, to provide the foundation for global change strategies which include references to future demand for well-prepared professionals due to the steadily increasing lifespan impacting society, namely people over 70 who should be targeted for adapted physical activity.

As regards the importance of physical education, she argues it is necessary "to start with ALL children in general physical education, conduct assessment, and exclude only those who cannot meet criteria, even with adapted physical education supports" (Sherrill, 2004: 2). Those excluded from general physical education, she continues, will be assigned to the adapted physical education services, as opposed to the old and traditional policy which excluded children "who looked or acted disabled" to separate settings. After special education, which comprises adapted physical education, the children will be moved to integrated classrooms.

Additionally, Sherrill (2004) argues that policy changes that foster active living of people with disabilities are required, along with disability information—and particularly that on adapted physical activity—which should be disseminated throughout the world. Her recommendations, which follow below, are still current and needed today. It seems that we still have a long way to go since the same topics, questions, issues and recommendations remain current, such as her proposal on the renovation of community structures and neighborhoods to serve the needs of people with disabilities. This indicates that disability awareness has not been promoted effectively in the mainstream media to raise social awareness and create pressures for actions and policy implementation. Here are some of her recommendations which still apply today:

- Among the new leaders should be adults with all kinds of disabilities, and with university degrees. Paralympic athletes and especially those who are retired, are also an excellent source of promising professional leaders.
• Conferences and workshops on physical activity for persons with disabilities should have as speakers, as presenters, as discussion leaders and as an audience, people with disabilities, and should address issues like aspirational barriers; Efforts should be made to have at least at least a 10% sample (with the goal of 50%) of people with disabilities participating or involved.
• Committees and meetings should adopt guidelines to ensure decision-making is no longer controlled chiefly by able-bodied persons.
• Young people with disabilities should be provided with opportunities to view female and male role models of all ages engaging in systematic or daily physical activity and sports, and be provided with accessible and inviting facilities for physical activity in their neighborhoods and/or free or inexpensive transportation to physical activity facilities.
• Supports or supplementary services and resources should be offered in a general physical education environment to enable students with disabilities to be educated with their classmates without disabilities. Supports could be peer tutoring, extra helpers, team teaching, consulting by adapted physical activity specialists, adapted equipment or classroom materials like sport wheelchairs and rails on walls to help with balance.

5. Concluding remarks and future directions: Social development for all

"Many individuals view their impairment as part of their identity and not something to overcome or defeat" (Jeffrey J. Martin, 2017).

This study confirms that sport provides a platform for raising awareness and serves as a tool or a means of social inclusion and/or integration for persons and athletes with physical disabilities, and not only. It also spotlights the crucial role of visibility, namely mainstream media attention in creating disability awareness, and reproducing role models and future directions. Eliminating the attitudinal, environmental and institutional barriers experienced by people with disabilities through media campaigns could prove fruitful in changing stereotypes, ensuring accountability and exerting pressures for the implementation of policy measures and legislation.

An excellent example of such a media campaign was the coverage in Greece of the project Make Place for One More Woman in Sport, which has been promoting gender equality in sport and physical education, empowering girls and women—including

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those with disabilities—through mentoring, providing successful female role models (Olympic champions, elite athletes), and cultivating-preparing women for sport governing bodies, consequently changing attitudes and gender stereotypes. In this framework, the disability community could also benefit from such positive media attention to promote role models and mentors—and eliminate the supercrip stereotype. In other words, media coverage should respect social identity and sport identity, the latter, for example, by portraying athletes with disabilities in the Olympic Movement as athletes first and not as supercrips (super-cripples).

As documented in this paper, people with disabilities experience many forms of social exclusion, especially as regards employment, health care, education and inaccessible physical spaces. Strategies to eliminate these gaps, such as media exposure, the implementation of models of inclusion and/or integration are needed. Social justice, social inclusion and inclusive education are intimately linked, and the current movement towards an inclusive society appears to be the foundation and groundwork for sustainable social development.

As regards educational schemes, all teachers—with and without disabilities—must be appropriately trained and educated as inclusive educators. Developing a global inclusive education standard to create the infrastructure for a human rights model of disability (McCall, 2016), together with a series of global change strategies (Sherrill, 2004) could be a significant contribution in ensuring that people with disabilities—those of us with disabilities, the disability community or whatever terminology is determined socially and politically correct in this human rights model—are included in community life politically, economically, socially and particularly in leadership roles and decision-making bodies.

Specifically, a participation quota of people with disabilities would be instrumental in dialogue, decision-making positions, media, conferences, and meetings regarding issues, subjects and questions that directly concern them, such as physical education, disability sports, inclusive terminologies, institutional-environment-attitudinal barriers, and in particular awareness-raising campaigns and actions that promote inclusion, respect and dignity. Collaborations, partnerships and discourse with the disability community could prove productive in formulating strategies and proposing useful and good practices to policy-makers and practitioners for sensitizing a wide range of stakeholders.

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Conflict of interest
The authors declare that they have no conflict of interest.

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