ABOUT ATHLETICS FOR ALL

History

The Office for Civil Rights (OCR) of the U.S. Department of Education issued a Dear Colleague Letter on January 25, 2013 clarifying elementary, secondary, and postsecondary level schools’ responsibilities under the Rehabilitation Act of 1973 (Rehab Act) to provide extracurricular athletic opportunities for students with disabilities. The guidance clarifies when and how schools should include students with disabilities in mainstream interscholastic athletic programs, defines what true equal treatment of student athletes with disabilities means, and urges schools to create adapted interscholastic athletic programs for students with disabilities.

The OCR Dear Colleague Letter helps clarify the existing regulations and statute under the Rehabilitation Act of 1973 (Rehab Act) to provide interscholastic, club, and intramural athletics for students with disabilities. The Rehab Act protects the rights of students with disabilities from discrimination in educational programs and activities in colleges and universities. The Rehab Act requires that students with disabilities be provided equal opportunity for participation in interscholastic, club, and intramural athletic programs offered by a school.

What the Athletics for All Task Force Offers

Introductory sport guidelines and best practices for adapted sports considered easy to adapt to mainstream interscholastic sports

Facilitation of training for your coaches and officials with adaptive sports experts

Access to hundreds of community based adaptive sports organizations, resources and tools for specific sports

Decades of experience in disability sport training, sport adaptations and adaptive equipment

Sports Are Important for Students with Disabilities

Benefits for students with disabilities who participate in sports are similar to students without disabilities:

· More likely to have better grades, school attendance and lower dropout rate

· Build discipline, self-esteem, confidence, and independence

· Learn team work, skill development and goal setting

· Promote healthy lifestyle

· Can be a predictor of later successes in college, career and community
Students with disabilities do not receive the same amount of physical activity and athletic opportunities as students without disabilities.

According to the CDC, youth with disabilities are twice as likely to be physically inactive, resulting in obesity rates almost 40% higher than in youth without disabilities creating much higher risks for health-related diseases.

Due to the resources available, it is possible to add adapted sports within school athletic programs without creating an undue administrative burden for State High School Associations or requiring the association to change existing rules for the athletes without disabilities.

OVERVIEW

Court dimensions: Standard basketball court dimensions and hoop height.

Equipment: Standard regulation basketball

Rules: Standard basketball rules with a few modifications. The wheelchair is considered part of the player for contact, inbounds and out of bounds purposes, and position in the front or back court. To dribble, a player may place the ball on their lap and take two pushes on their wheel(s). The player may then coast or change direction without putting movement on the wheels. The player must bounce the ball to the floor, pass or shoot before taking a third push.

Time limits: 4 periods of 10 minutes or 2 halves of 20 minutes.

Scoring: Standard basketball scoring. Front wheels of the basketball chair may be in front of the free throw line; only rear wheels must be behind the free throw line.

Modifications: The field of play, time limits, and equipment can be modified to accommodate students of varying abilities. An 8.5’ basket, women’s ball or a Spalding NBA Rookie Composite Ball are standard modifications used to help students achieve success in wheelchair basketball.

Strength Training and Conditioning

Athletes with disabilities benefit from the same strength training and conditioning protocols as athletes without disabilities. In general, the same program used for athletes without disabilities can be used for their peers with a disability. There are a few considerations when developing a program for an athlete in a wheelchair sport.

Disability Specific Concerns

Shoulder Imbalance

What is it? Athletes who participate in wheelchair sports and particularly those athletes who use a wheelchair for everyday mobility are susceptible to shoulder imbalance issues. Just as a nondisabled athlete may experience knee imbalance by overdeveloped quadriceps and underdeveloped hamstrings, a wheelchair basketball player is susceptible to overdeveloped anterior upper body muscles and
underdeveloped posterior upper body muscles. This is a result of utilizing the arms and shoulders for all movement within the sport and the vast majority of that movement resulting from a pushing motion.

**How do you address it?** Training program should emphasize more pulling movements (3:1 ratio) than pushing movements in order to promote a well balance shoulder joint as well as balanced trunk and core muscles where appropriate.

**Depressions/Weight Shifts**

Athletes who use a wheelchair for everyday mobility are more susceptible to pressure ulcers (sores). A pressure ulcer is an injury to the skin and underlying tissues that results from prolonged pressure on the skin. Pressure ulcers most often develop on skin that covers bony areas of the body, such as the heel, ankles, hips or buttocks. To help prevent the formation of pressure ulcers on athletes and in order to promote good health behaviors, the practice plan for a wheelchair basketball practice should include depressions/weight shifts every 30 minutes. The weight shift should last 30 seconds to one minute and involve the athlete raising their buttocks completely off of the seat cushion by pushing down on the top of the rear wheels of the chair and raising their upper body off of the chair.

**Autonomic Dysreflexia (AD)**

This is a potentially life threatening condition which can be considered a *medical emergency* requiring immediate attention. AD occurs most often in *spinal cord-injured* individuals with spinal lesions above the T6 spinal cord level, although it has been known to occur in patients with a lesion as low as T10.

Acute AD is a reaction of the *autonomic* (involuntary) nervous system to overstimulation. It is characterized by *paroxysmal hypertension* (the sudden onset of severe high blood pressure) associated with throbbing headaches, profuse sweating, nasal stuffiness, *flushing* of the skin above the level of the lesion, *slow heart rate*, anxiety, and sometimes by *cognitive impairment*. The sympathetic discharge that occurs is usually in association with *spinal cord injury* (SCI) or disease (e.g. *multiple sclerosis*).

AD is believed to be triggered by *afferent* stimuli (nerve signals that send messages back to the spinal cord and brain) which originate below the level of the spinal cord lesion. It is believed that these afferent stimuli trigger and maintain an increase in blood pressure via a sympathetically mediated *vasoconstriction* in muscle, skin and splanchnic (gut) vascular beds.

Proper treatment of autonomic dysreflexia involves administration of anti-hypertensives along with immediate determination and removal of the triggering stimuli. Often, sitting the patient up and dangling legs can reduce blood pressures below dangerous levels and provide partial symptom relief. Tight clothing, sock and shoes should be removed. Catheterization of the bladder every 4 to 6 hours, or relief of a blocked urinary catheter tube may resolve the problem. The rectum should be cleared of stool impaction. If the noxious precipitating trigger cannot be identified, drug treatment is needed to decrease elevating intracranial pressure until further studies can identify the cause.

Prior to attempting any of these treatment options, if you suspect an athlete is experiencing AD, you should first call 911 and then proceed to eliminate the precipitating stimuli.
COURT CHAIR BASICS

Rigid, Custom Fit:

- Designed to fit your body and your specifications
- Dimensions and accessories per your specifications
- Advanced materials
- Purchased after at least one year of trial and error with an adjustable chair

Adjustable:

- Perfect for program chairs
- Allows for the changes in dump, backrest height, and center of gravity
- One chair can fit many different athletes/sports
- NOT infinitely adjustable, still need to have a “typical” athlete in mind if ordering for a program

Standard Sports Chair:

Seat dimensions:
- Width, depth, dump

Back dimensions:
- Height, angle

Camber of Wheels:
- Sport
- Stability of chair
- Controlling movement

Sizing and Fitting a Sports Chair

· **Seat Depth**: Measure from the most posterior point of the body to the inside of the knee, minus at least two inches.

· **Seat Width**: Determined by the widest point of the body from knee to hip. Should be measured with clothing similar to what will be worn during activity.

· **Back Height**: Measured from the seat base to the top of the chair back. Depends on how much upper back support is needed, and also affects freedom for the upper body to rotate. This is often very different for a sports chair compared to an everyday chair. Athletes with less trunk function may also want the backrest angled and/or the upholstery sagged.

· **Rear Seat to Floor**: Measurement from the ground to the rear seat edge. Relative to the front seat-to-floor dimension., this determines the rearward slope (“dump” or “squeeze”) of the seat.
Front Seat to Floor: Measure the leg from the back of the knee to the sole of the foot. Then subtract the thickness of the cushion when it is compressed. Next, add a minimum of two inches for footrest clearance. This will set the maximum chair height, not to exceed 21” or 53 cm.

Wheel Camber: Angle of the wheel relative to the vertical. More camber improves stability and agility, but also limits ability to pass through narrow spaces. A typical daily chair uses three degrees of camber. Chairs with large degrees of camber will be difficult to maneuver through passages that meet accessibility standards.

Program chairs should have an adjustable height and angle backrest

- Height should be set to allow for support while maximizing functional ability
- More function equals lower backrest
- Angle should be set for player comfort
- Less function equals Angle > 90 Degrees

Upholstery should be adjustable to allow for tension adjustments.

Cushions:

- The Sport Cushion gives wheelchair users pressure relief, reduces shearing and increases ventilation that allows for true heat and moisture control.
- Program chairs need to have cushions cleaned and maintained on a regular basis
- There are cushion height limitations in wheelchair basketball

*The height of the seat rail must be no more than 21 inches. Measurement must be made from ground or court to the top of the seat rail bar (highest point) with player in the chair.

Skill Development Videos

Skills and Drills to Start the Season: http://youtu.be/tNOu78q0MU8
Planning for a Successful Season: http://youtu.be/3bXGFiCm-OA
Basic Wheelchair Propulsion: http://youtu.be/P9thLZsu5Ow
Basic Wheelchair Propulsion– Pivots: http://youtu.be/IHrzpWq_rcM
Seven Myths of Physical Activity for People with Disabilities: http://youtu.be/h_vyZy3wVgY
AAASP Wheelchair Basketball Training Program:
http://www.adaptedsports.org/adaptedsports/training/coaches_education.html
AAASP General/video:
http://www.adaptedsports.org/adaptedsports.org/adaptedsports/athletics/athletics_wc_basketbal.htm

AAASP Resources/Downloads:  http://www.adaptedsports.org/adaptedsports/members/resources.html

AAASP Trainer Bios:  http://www.adaptedsports.org/adaptedsports/about/about_trainers.html

AAASP Wheelchair Basketball Rule Adaptations:

COMPETITION & RULES

Overview

· The wheelchair is considered part of the player’s body in relation to establishing responsibility for contact on court in the case of charging, blocking, going out of bounds, and other violations.

· A player can push their wheelchair and bounce the ball simultaneously; however, if the ball is picked up and/or placed on the players lap, the player is only allowed to push twice before they must shoot, pass, or dribble the ball again.

· “Travelling” in wheelchair basketball occurs when the athlete pushes his wheels more than twice after receiving or dribbling the ball. The player must pass, bounce, or shoot the ball before pushing the wheels again.

· There is no “double dribble” in wheelchair basketball.

· To deliberately push the ball with the wheelchair, kick or block it with any part of the leg or strike it with the fist is a violation.

· Dribbling consists of a player maintaining control of the ball while bouncing the ball. Players may dribble the ball while in motion or stationary. As long as two pushes are combined with one dribble, the player is considered to be dribbling legally.

· It is a violation if a player, in order to retrieve, shoot, or maintain the ball, leans forward or to the side so that any part of the wheelchair’s footrest or the player’s feet touch the floor.

· The distance a player coasts between pushes is not restricted.

COMPETITION MODELS

Single School Model

This model opens participation up to any student within the school. With this model both the student with the disability and his or her peers can participate on the same team and enjoy the benefits of
wheelchair basketball. Care must be taken in this model to ensure proper participation of students with disabilities such that their peers without disabilities do not take the opportunities away from those students with a disability. This model is employed at the community level in numerous countries such as Canada, Germany, and Australia.

Sample Integrated Competition

Wheelchair basketball in the middle, junior and high school settings can be organized as an inclusive sport that offers the ability for students with and without disabilities to participate in the world’s most popular Paralympic sport. As a proposed model for the school setting, this approach allows a school with a limited number of students with a physical disability to offer a team sport that any student can enjoy. However, schools and states who offer wheelchair basketball at the interscholastic level will want to adhere to standardized rules so teams can compete on a state-wide level in regular and post season competition. For example, the Georgia high School Association utilizes this approach and it is cost effective, reasonable, and compliant with the OCR guidelines.

In this model, in order to achieve an appropriate number of participants, wheelchair basketball teams are comprised of students from across the school district that have a qualifying physical disability. Students without disabilities compete alongside their peers with qualifying disabilities in order to have enough players for competition. Wheelchair basketball can be offered in a variety of models so that a school district may be able to complement a model that works best with their resources and student population.

DISTRICT WIDE MODEL I

Within this model, team members are comprised of students from elementary, middle, and high schools in a particular district. The school district selects a centralized, accessible venue for the teams to hold their practices and home contests. Depending on the number of eligible students, districts may elect to field more than one team. Teams are co-ed and grouped by ability level. Wheelchair basketball is offered during the winter season. All students participate in a wheelchair, whether they used one on a daily basis or not. This helps to level the playing field and engages more students with physical disabilities in athletics. School district teams participate in either a junior varsity or varsity division and compete against other school district teams from around the state in regular season competitions and state championship events. Due to the fact that disability sport exists at the international and national level, it is reasonable to add adapted sport programs to the existing school districts’ extracurricular athletic offerings without creating an undue administrative burden or requiring changes to existing rules for non-disabled student athletes. Participating students are required to maintain passing grades or adhere to their IEP goals and have an annual physical on file.

DISTRICT WIDE MODEL II

Teams are placed in either varsity or junior varsity divisions with input from the coordinator and coaches. This placement is based on many factors, a few being the teams overall experience, years of play, and the functional ability of the individual players. Provisions to this structure may be utilized in
agreement with the schools’ Area Coordinators if it is in the best interest of the teams to do so. For example, participating school districts may elect to adopt a regional format for competitions prior to any given season and either keep the varsity and junior varsity divisions intact or eliminate them altogether for that particular season while utilizing one set of rules. Team placement and formats will be determined in cooperation with the Area Coordinators prior to each season. All teams in each of the adapted sports are co-ed and will be referred to as co-opt teams. It is suggested that schools be limited to the number of teams in a sport it can field and the number of players on each team. Certain policies and procedures exist to ensure equitable and fair play.

**INTRAMURALS**

Similar to the single school model, an intramural program can be enjoyed by all students without the added cost of coaches and travel. This model has been implemented at Georgia Southern University and has enjoyed tremendous success.

**ELIGIBILITY**

A “cross-disability” model, allows for the maximum participation by those with physical disabilities attending the local school. Students who have an orthopedic impairment as a primary disability (either acquired or congenital) as defined by Federal law (IDEA) whether fully mainstreamed, partially mainstreamed or attending special education classes and whose primary disability is physical are eligible to participate. These students are not eligible for Special Olympics because they do not have intellectual disabilities. Students who are mainstreamed must adhere to the no-pass/no-play policy, adopted from the State High School Association policy. Special Education students must adhere to their IEP goals. Students who participate must, at a minimum, have the maturity and ability to understand strategy and to apply standards employed for their safety. From time to time, a student’s involvement in the program may be found to be inappropriate if he/she lacks the ability to benefit from the program or if there are safety concerns. When the coach or coordinator raises concerns of this type, they are reviewed on a case-by-case basis with the parents’ input and involvement.

As a point of clarification, students served through adaptive sports organizations are not eligible for Special Olympics because their functional limitations are based solely on a non-physical disability. Special Education students who are over the age of 18 yet still enrolled in 12th grade are eligible to participate. Upon graduation from 12th grade, the student is no longer eligible to participate.

**SUGGESTED POLICY FOR NON-DISABLED**

Include students without disabilities only when necessary to round out a roster and have enough players to field a team. A team which is short by one or two eligible players may add one or two able-bodied (AB) players to their roster. A team may not add more than two AB players to their roster and may do so only in the circumstance of the team not having enough players with physical disabilities to complete the required minimum number needed to field a team. For example, the minimum number required to play wheelchair basketball is five players and a team only has three eligible players then they may elect to roster two AB players to complete the requirement for participation. If the team has four players then
they would be allowed to roster one AB player. The AB player(s) can only be added to the team roster at the beginning of the season during the registration period and must follow the required registration procedure as the rest of the team. These AB players may be a sibling or friend of one of the team members. The AB player’s are required to compete in a wheelchair and must wear a scrimmage vest over their team jersey so that the officials can identify them as an AB player. The AB player(s) may not score. When the AB player is defending an offensive player who has control of the ball, the AB player may only defend the offensive player or take/slap the ball off the lap of the offensive player. If the offensive player loses possession of the ball (example: pass, dropped ball, shot) then the AB player can make an attempt to obtain the ball. An AB player who violates their restrictions by attempting to score or does not guard a player on a “vertical plane” will be assessed and administered a Physical Advantage Foul (PAF). PAF’s are ruled a technical foul. They count toward that player’s and the team’s foul count. When playing basketball, the opposing team will be awarded two foul shots and receive possession at half court to inbound. If an AB player scores, the score will be annulled. If an AB player is awarded a foul shot, the head coach will designate a teammate who was on the floor at the time the foul was committed to take the shot. An AB player is also never allowed to line the lane on a free throw attempt. They must check back behind the three-point line. Any player receiving two technical fouls will be eliminated from the game.

RULES

Main Differences between Wheelchair and Stand Up Basketball

Traveling: You must dribble once per two pushes on your wheelchair.

Double Dribble: There is no double dribble violation in wheelchair basketball

Personal Advantage Foul: Due to the varying degrees of disability, you cannot use a functioning lower extremity as a physical advantage. For example, you cannot lift buttocks off of the chair seat

Falling: Play is suspended during a fall only if there is a chance of danger or injury to the fallen player

TIME LIMITS: An offensive player cannot remain more than 3 seconds in the free throw lane while the player’s team is in possession of the ball. If the offensive player is trapped in the lane and attempting to leave the lane, the 3 second count will cease and a violation will not be called as long as the player exits the lane as soon as it is possible. If the trapped player is in the lane for more than three seconds and chooses to become an offensive threat by calling for a pass then the 3 second violation will be called. If a shot attempt is made by another player, the player trapped in the lane may rebound the ball without a 3 second violation be called.

Dribble: A player in possession of the ball may not push more than twice in succession with one or both hands in either direction without dribbling the ball to the floor again. Taking more than two consecutive pushes constitutes a traveling violation. A player, may, however, wheel the chair and bounce the ball simultaneously just as a non-disabled player runs and bounces the ball simultaneously in stand up basketball. There is NO double dribble violation in wheelchair basketball.
LOSS OF THE BALL: If a player in possession of the ball makes any physical (bodily) contact with the floor or tilts the chair so far forward that the footplate or wing touch the floor, it is a violation and the ball is awarded to the other team.

OUT-OF-BOUNDS: A player is considered out-of-bounds when any part of the player's body or wheelchair touches the floor on or beyond the boundary.

PHYSICAL ADVANTAGE FOUL (PAF): Because of the varying causes and manifestations (degrees) of disability among participants, a basic rule of keeping firmly seated in the wheelchair at all times and not using a functional leg or leg stump to gain a physical advantage over an opponent is strictly enforced. An infraction of this rule constitutes a physical advantage foul (PAF). Examples of a PAF include lifting the buttocks off of the chair seat to rebound, shoot, block a shot, pass, or to tap a jump ball using a functional leg in contact with the floor to stop/move the chair, or to use a lower limb to manipulate the rear wheels. The foul is so recorded in the official scorebook. Three such fouls disqualify a player from the game. Two free throws are awarded and the ball is given to the opposing team, out of bounds.

FALLING: If a player falls out of the chair during play, the officials will immediately suspend play IF there is any chance of danger to the fallen player. If not, the officials will withhold their whistles until the particular play in progress has been completed. If a player falls out of the chair to gain possession of the ball or by falling keeps opponents from gaining possession of the ball, the ball is awarded to the opposing team.

LINES: For free throw and 3-point shooting attempts, the shooter need only have their REAR wheels behind the shooting line. It is allowable for the shooters front caster to cross the line. For free throws, players lined up in the blocks must have the whole chair behind the lane lines.

CLASSIFICATION: A functional classification system and point system to maintain fair play is utilized nationally and internationally. It is not recommended that a classification system be used in the school setting at this time. Rather, each state should incorporate their own rules to ensure that students with physical disabilities are provided adequate opportunity to play in competition settings.

COACHING CUES

Cues are used in order to promote consistent and concise communication and action throughout the sport. The following cues should be learned and taught with no deviation so as to allow a student-athlete to participate in a community program or transition to a collegiate program with little to no need to learn new cue words and actions.

Defensive Cues
Anticipate the Hook: An illegal move to “hook” the chair of the defender when setting a pick rendering the defender unable to successfully move their chair.

Axle to Caster: Defensive position where the defender positions the axle of the rear wheel in line with the front cast of the offensive person being guarded.

Ball: The defense has secured the ball, cue to begin transition.

Close Space: Using controlled, quick movement, reduce the amount of space between the defender and person being guarded.

Communicate an Action: When communicating with a teammate, use clear, consistent terms that communicate what you want them to do; pass, shoot, pick, stop, help, switch, etc.

Head on a Swivel: Always check your shoulders and know where the ball, your teammates and the opposing threats are on the court at all times.

Identifying Threats: At all times know who the threats are and where they are on the court.

Shot: Vocally challenge the shot, notify teammates a shot has gone up, cue to block out, find the ball, secure the rebound.

**Offensive Cues**

Create Space: Utilize movement to maintain balance and spacing

Engage the Defense: At all times keep the person defending you engaged and focused on your movements or potential movements. This reduces the ability of the defense to help another defender stop a threat.

Hand Fake: Utilize the hands to make the defense commit to an action. Often accomplished by faking a pushing movement and simply letting the hands glide across the top of the wheel without moving the wheel.

Pass to a Skill: The receiver must catch the ball in a position that allows them to shoot, pass, or dribble.

Shoulder Fake: Utilize the shoulders/upper body to make the defense commit to an action.

Turn Backs/Attack Backs: Utilize space, movement, picks, and one on one moves to turn the backs of the defense. When an offensive player sees the back of a defender, it is a cue to attack that position.

**Transition Cues**

Be a Threat: Always be moving and in position to shoot, pass, dribble, attack the basket.

Cross, stop, and roll: Using the crossing action in transition to set up a pick. The pick is performed with a brief stop that makes the defense cease movement and then the picker immediately rolls back into the transition attaining top speed as quickly as possible.
Outlet: Vocally communicate a passing lane to begin transition.

Push Hard: Always 100% effort.

Sideline to Sideline: Utilize the crossing movements to create space, picking angles, back picks, and mismatches.

Space and Movement: The offense should be evenly spaced and balanced in transition utilizing the necessary lanes for the number of attackers and crossing as appropriate to create picks and mismatches.

Read and Release: Attempt to block out and read these cues for offensive transition:

Read and Release: Defending an attempted 3 point shot: challenge the shot and go to an outlet lane for offensive transition.

Read and Release: Entire offense under free-throw line extended: prone to allow transition basket, person nearest half court will immediately release to defensive end.

Read and Release: No position for rebound: become a threat by moving to an outlet position.

Read and Release: Release to outer thirds, never middle, especially lower classes: Allows receiver to move in towards passes rather than making over the shoulder catches.

GROUPINGS

The groupings presented here are suggested ways to create competition classes for athletes with disabilities. In order to not be confused with the national and international classification systems, we use the term groupings for school-based sport.

Role of Athletes Without Disabilities

Programs may wish to consider a policy whereby athletes without disabilities may enter the adapted program temporarily while rehabilitating from an injury, so long as the injury present in such a way that the athlete might otherwise other wise qualify someone with a permanent disability experiences the same physical limitations. For example, any injury or surgery where the physician has recommended the athlete stay off the limb for a period of time and where that time spans a full season of an adapted sport, the athlete might qualify to participate in adapted sports regularly.

How will a state determine who is eligible? There are several different models to determine eligibility and minimal disability criteria. When possible and appropriate, it is best to stay within the three categories: sit down, stand up, and visually impaired.

Athletes with a disability have impairment(s) that may lead to competitive disadvantage in sport. Classification is the process by which athletes are assessed relative to the impact of impairment on their ability to compete in a specific sport.
Within the classification system, criteria are put in place to ensure that winning is determined by skill, fitness, power, endurance, tactical ability and mental focus, the same factors that account for success in sport for athletes without a disability.

Classification is sport specific. Each sport has established groups, call sport classes, to group athletes for competition based on activity limitation for that sport.

The international classification system for individual sports can be viewed online at: Paralympic.org/classification. Most IPC classification systems are not appropriate (too detailed) for a high school setting. It is suggested to modify to simplified / grouped classes such as sitting (wheelchair athletes), visually impaired, and ambulatory.

Disabilities

At the interscholastic level, these disabilities can be served in wheelchair basketball:

- Achondroplasia
- Amputee
- Arthrogryposis
- Avascular Necrosis
- Birth Defect
- Brachial Plexus Palsy
- Cerebellar Disgenesis
- Cerebral Palsy
- Congenital Hypotonia
- Congenital Limb Loss
- Diplegia
- Dystonia
- Erb’s Palsy
- Femoral Focal Deficiency
- Femoral Hypoplasia
- FMD
- Full Joint Anklosis or Replacement
- Hearing Impaired
- Larsen’s Syndrome
- Leigh’s Disease
- Lower Limb Paralysis
- McCunne Albright Syndrome
- Mitochondrial Disease
- Multiple Sclerosis
- Muscular Dystrophy
- Osteogenesis Imperfecta
- PFFD (Proximal)
- Progressive Neurological Disorder
- Severe Amblyopia
- Severe Scoliosis
- Spastic Diplegia
- Spastic Paralysis
- Spina Bifida
- Spinal Cord Injury
- Spinal Muscular Atrophy
- Stroke
- Transverse Myelitis
- Traumatic Brain Injury
- Vertigo/Balance Issues
- Visual Motor Integration Impairment
- Visually Impaired
- Type 1 Diabetes
· Any other medical doctor diagnosed permanent lower body disability that prevents a player from competing in mainstream sports

SAFETY

Student athletes with disabilities do not represent a higher level of liability risk or risk management concern than student athletes without disabilities. With proper planning and contingencies, student athletes with disabilities can seamlessly integrate into the dynamics of an interscholastic team. Individualized assessments can help assess or identify any potential safety concerns.

Ensuring athlete safety is a priority. Through education, resources, and training, members of the sport community can recognize, reduce, and respond to misconduct in sport. Please refer to the following resources for more information.

What is SafeSport?:  http://safesport.org/what-is-safesport/

Coaches Toolkit:  http://safesport.org/toolkit/coaches/

SafeSport Trainings:  http://safesport.org/take-the-training/

GLOSSARY

Axle: The part that attaches the wheel to the chair and allows the wheel to spin.

Backdoor: Baiting an opponent into overplaying a defensive position and then making an offensive move in the opposite directions towards the basket for a scoring opportunity.

Backpick: A pick set on a defender who is caught in transition from offense to defense (this usually takes place in their front court) keeping them out of the play giving the offense a numerical advantage.

Banana Cut: Utilizing a curved path when moving into a picking position.

Bounce Stop: The use of a high bounce to create enough time to stop the chair with both hands and still maintain ball control.

Caster: Small wheels located on the front and rear of the wheelchair, typically made of hard polyurethane.

Classification: System used to determine eligibility to play wheelchair basketball at the national level. May be used in the schools to create equitable play.

Crossing: In transition, moving from sideline to sideline in order to create space and picking angles.

Cross Pick: Pick that is executed horizontally (parallel to the baseline) on the floor.

Dive: Setting an offensive position in the low post.
**Dump:** The height difference between the front and rear of the seat on a wheelchair. Creates a stable pocket for athletes with higher level injuries and less function.

**Flat:** In transitional defense, maintaining position at ball level or lower. i.e. the ball should not be further up court than the last defender. In one-on-one defense, maintain proper defensive angle.

**Hand Position:** Describes the starting position of the hands on the wheel. Proper hand position should start at 11 or 12 o-clock and end at 3 o-clock. The thumb pads should be placed on the tire, not the push rim, with the thumb extended forward and slightly outward to prevent the thumb hitting the chair side guards. The action makes a D shape and should resemble the wheels of an old time train locomotive.

**Help Position:** On defense, the middle of the free throw lane.

**Hi-Lo/Lo-Hi Pick:** Pick that is executed vertically (parallel to the sideline) on the floor.

**Hook:** Impeding movement of an opponent by illegally utilizing the wheelchair to hold the opponent in a static position.

**Integrated (mainstream/inclusive):** Individuals with disabilities participate in sport alongside students without disabilities

**Lifting:** Raising the buttocks off of the seat cushion during play.

**Over:** In defending a pick, moving over the top of the person attempting to set the pick.

**Physical Advantage Foul:** Penalty for utilizing a functional movement of the lower extremities to gain an advantage during a competition.

**Screen Shooter:** Utilizes a “dive” person as a screen in the low post.

**Seal:** Technique used in the low post to create a positional advantage for the offense.

**Strapping:** Various types of straps utilized to create snug fit between the chair and the athlete.

**Threat(s):** Person(s) on opposing team most likely to score.

**Tilting:** Balancing the chair on one front caser and one rear wheel in order to gain a height advantage for shooting, rebounding or defending.

**Traveling:** A traveling violation occurs when a person with possession of the ball makes more than two pushes or pulls on the rear wheel(s) that create forward or rearward movement without dribbling the ball. A pivot or turn is allowed after the two pushes or pulls as long as the player does not impart an impulse on the wheels.

**Triple Switch:** Defensive technique to maintain position in the low post and point positions.
**Turning**: 90 Degree Turn = a square corner. 45 Degree Turn = ½ of a square corner. 180 Degree Turn = turn to face the total opposite direction. 360 Degree Turn = turn in a full circle

**Volume of Movement**: The area in which an athlete can repeatedly and successfully catch, pass and shoot a ball. The volume of movement will be different for each athlete based on the disability and functional ability.

**Yo-Yo**: On defense, working in tandem in the low post to prevent the offense from gaining a positional advantage.

**FREQUENTLY ASKED QUESTIONS**

**Is the sport of wheelchair basketball currently offered as a sanctioned interscholastic sport and if so, where?**

Yes, wheelchair basketball is a sanctioned interscholastic sport in Georgia.

Participating school district teams compete in regular and post season competition utilizing standardized rules of play in both varsity and junior varsity divisions

**I don’t use a wheelchair for daily mobility, can I still play?**

YES. You do not have to use a wheelchair for everyday mobility to play wheelchair basketball. Any permanent lower extremity disability qualifies a person to play wheelchair basketball.

**How high is the basket?**

The standard height of the basket for wheelchair basketball is ten feet. As with all sports, the field of play and equipment can be altered to provide appropriate opportunities based on the age and physical maturity/ability of the student. The standard modified height for the basket in these cases is 8.5 feet.

**What balls does the team use?**

The standard basketball used is a men’s regulation ball. As with all sports, the equipment can be altered to provide appropriate opportunities based on the age and physical maturity/ability of the student. Two options exists for students who are not yet ready for a regulation size men’s ball. First is a regulation women’s ball and second is a Spalding NBA Rookie Gear Composite Basketball that is smaller and lighter than a women’s ball. Both options offer an excellent opportunity for a student who is not yet ready for a men’s ball to learn proper fundamentals with an appropriately sized ball.

**How does a player dribble and push the chair at the same time?**

The traveling rule is modified such that a player is allowed two pushes for every dribble. The ball may be placed in the player’s lap between dribbles. A player may stop and start their dribble at any time as there is no double dribble violation in wheelchair basketball.
It can get crowded in the lane, can you trap offensive players in the lane in order to get a 3 second call?

NO. While you may trap offensive players in the lane, as long as they are attempting to leave the lane the 3 second call will stop. However, if once the call is stopped and the player attempting to leave the lane becomes an offensive threat by calling for a pass, it will be an immediate violation.

SUPPLIERS

Top End: http://www.topendwheelchair.com

Quickie: http://www.quickie-wheelchairs.com/category/Court-Wheelchairs/674

Per4Max: http://per4max.com/

Colours: http://www.colourswheelchair.com/index.htm


Xcalibur: http://www.xcalibursportschairs.com/

*The average cost for a court chair is $2,000

ORGANIZATIONS

National Wheelchair Basketball Association (NWBA): www.NWBA.org

American Association of Adapted Sports Programs (AAASP): http://www.adaptedsports.org/


MISSION

The mission of the Athletics for All Task Force is to inform and provide the tools and guidelines by which coaches, athletic directors and school administrators can include students with physical disabilities in interscholastic sports.

VISION

It is the vision of the Athletics for All Task Force that students with disabilities will have access to athletic opportunities throughout the United States in an equal manner as students without disabilities. The Task Force envisions an educational system that provides equal opportunities for student-athletes to derive the physical, mental, and emotional benefits of interscholastic sports, enabling each to develop into healthy, well-adjusted, contributing members of their respective communities.

ATHLETICS FOR ALL TASK FORCE
Active Policy Solutions
http://www.activepolicysolutions.com/

American Association of Adapted Sports Programs (AASP)
http://www.adaptedsports.org/

Bay Area Outreach and Recreation Program (BORP)
http://www.borp.org/

BlazeSports America
http://www.blazesports.org/

Bridge II Sports
http://www.bridge2sports.org/

Competitive Edge Management

Disabled Sports USA (DSUSA)
http://www.disabledsportsusa.org

Great Lakes Adapted Sports Association (GLASA)
http://glasa.org/

Lakeshore Foundation
http://www.lakeshore.org/

Louisiana Games Uniting Mind and Body (GUMBO)
https://sites.google.com/site/louisianagumboinc/home

National Center on Health, Physical Activity and Disability (NCHPAD)
http://www.nchpad.org/

Special Olympics
http://www.specialolympics.org/

United States Association of Blind Athletes (USABA)
http://www.usaba.org/
Wheelchair & Ambulatory Sports USA (WASUSA)

http://wasusa.org/