



Special Olympics
Nova Scotia

Active Start

Training Guide



Presented to: CCRSB EAs



Why Active Start?

- Recent Canadian study revealed that 26% of children aged 2-17 were overweight (18%) or obese (8%).
- Brain Connections- Rapid brain development in first years of life.
- Evidence also exists that shows that children who participate in sport develop a higher self-esteem and are less likely to develop problems relating to stress, anxiety, and depression.
- Currently there are few community programs aimed at children with intellectual disabilities.
- Sport for Life- Stay involved for a lifetime





Active Start is part of the Long Term Athlete Development Program (**LTAD**), which falls under Sport Canada's Canadian Sport for Life Initiative (**CS4L**). With the ultimate aim of promoting fitness, physical literacy, and well-being, the Active Start component is driven by tenets of human growth and development of the 2 to 6 age group.



The Special Olympics' Active Start and FUNdamentals Programs take into account the challenges faced when working with children with an intellectual disability and presents research-based resources to schools, teachers, volunteers and communities, opening pathways to success for all.



SONS Goal

To reach every child in Nova Scotia with an Intellectual Disability and develop their Fundamental Movement Skills on a social, cognitive and physical level by exposing them to the Active Start Program.

HOW?

Strategy

1. ✓ Education – Dept. of Education, Public Schools, FN Schools, Independent Schools
2. ✓ Health – Health Dept., IWK, Drs. NS, HPP., OTs
3. ✓ Communities - Early Intervention Program, Daycares, YMCA
4. ✓ Recreation – Rec. NS, Municipalities
5. ✓ Universities – Courses, Programs - S.T.A.R., S.M.I.L.E., MAX etc.
6. ✓ Societies – Autism, Down Syndrome



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What is CS4L?

- The LTAD model acts as a framework for those who choose to stay "active for life" in community or recreational programs, or those who look to reach the podium in competitive training programs.



Developing Physical Literacy

Special Olympics Canada defines physical literacy as a sound foundation of fundamental movement and sports skills. For 2 to 6 year-olds, this means building the following basic skills using the Active Start & FUNdamentals Programs:

Manipulation Skills

Rolling

Underhand Throwing

Kicking

Bouncing

Overhand Throwing

Catching

Striking

Transport Skills

Running

Galloping

Skipping

Hopping

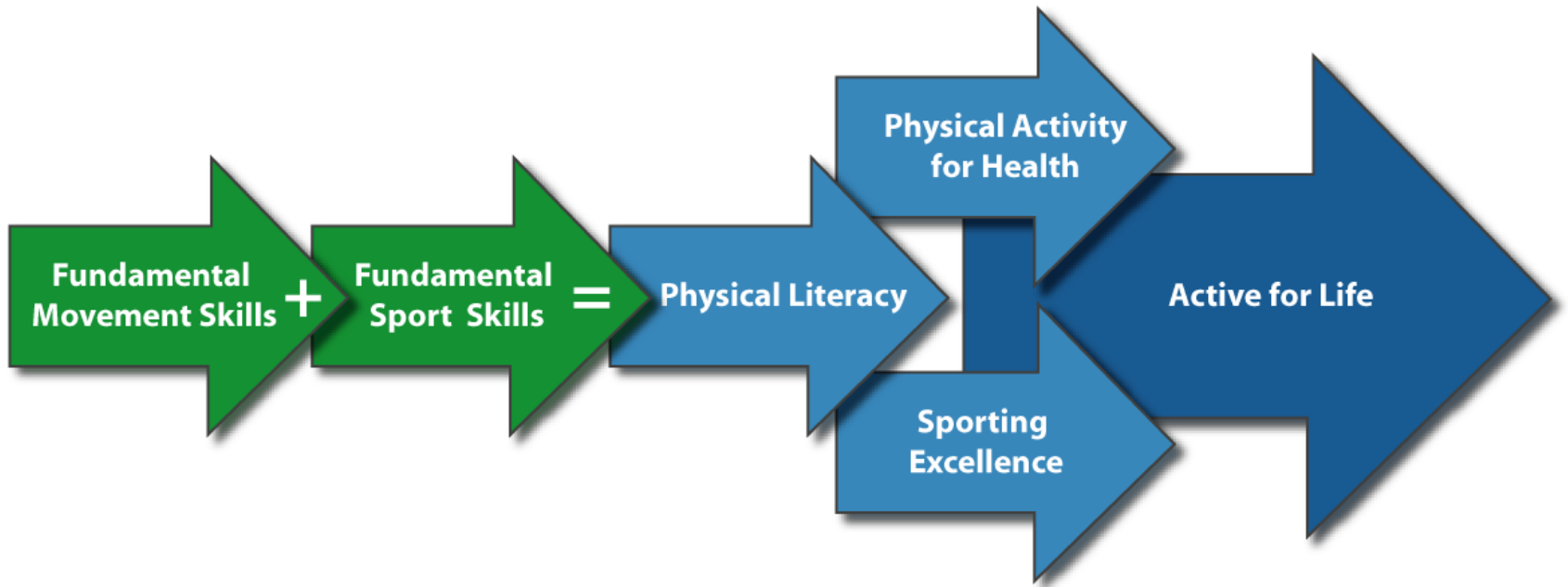
Jumping

Balancing Skills

Stationary

Dynamic

The Progression





If you can't



Catch
Jump
Run
Swim
Throw

You won't
take part in



Soccer
Basketball
Volleyball
Track and Field
Squash
Badminton
Rugby
Tennis



If you can't



Catch
Jump
Throw
Swim
Run

You won't
take part in



Baseball
Softball
Bowling
Soccer
Goalball
Football
Rugby



If you can't



Throw
Jump
Swim
Catch
Run

You won't
take part in



Swimming
Diving
Water Polo
Scuba
Kayaking
Sailing
Surfing

Who is Responsible for Physical Literacy?



	Where?	Physical Literacy	Who?
LTAD Stage	Schools Sport clubs Community recreation Sport programs Home	Learn to Train Girls 8-11, Boys 9-12	Parents/Guardians Coaches Teachers Recreation leaders Youth leaders
	Schools Sport clubs Community recreation Sport programs Home	FUNDamental Girls 6-8, Boys 6-9	Parents/Guardians Coaches Teachers Recreation leaders Youth leaders
	Home Pre-schools Day care Sport programs Community recreation	Active Start Girls and Boys 0-6	Parents/Guardians Day care providers Pre-school teachers Kindergarten teachers



Early Intervention

Early Intervention Programs (EIP) in Nova Scotia deliver family centred services to children with special needs, from birth to when they enter school. The goal of these programs is to create positive outcomes for children with special needs through consultation, information, support and services designed to meet the individual needs of the child and family.



Stakeholders



- Dept. of Canadian Heritage – GoC
- SOC
- SONS
- Dept. of Education
- Dept. of Health & Wellness
- Chignecto-Central Regional School Board
- Annapolis Valley Regional School Board
- Strait Regional School Board
- Cape Breton – Victoria Regional School Board
- Tri-County Regional School Board
- Conseil scolaire acadien provincial
- Halifax Regional School Board
- Dept. of Community Services
- **EI Program – Yarmouth, Shelburne, Digby, Truro, Sackville/Bedford, Lunenburg, Queens...**
- Institute for Human Services Education
- NS Recreation
- First Nation Schools

Associated Disabilities

- Within your programs you will have participants with a number of intellectual disabilities.
- We will take a look at the following 3 intellectual disabilities:
 - Down Syndrome
 - Autism
 - Fetal Alcohol Syndrome

Down Syndrome

- Most common cause of developmental disability.
- Caused by a genetic disorder resulting from an extra chromosome 21.
- Characteristics:
 - Reduced physical growth
 - Low respiratory capacity
 - High degree of muscle hypotonia
 - Poor perceptual abilities
 - Communication often difficult
 - Laxity in ligaments

Down Syndrome Adaptations

- Reduced Physical Growth
 - Ensure participants are in size appropriate programs
 - Team participants up of equal sizing
 - Avoid activities where size matters until later in life
- Low Respiratory Capacity
 - Start slowly with endurance activities- Build weekly
 - Rotate between endurance and strength activities
- Muscle Hypotonia or Weakness
 - Focus on activities that build basic strength: walking, crawling, and going from sitting to standing.
 - Work on balance activities that require strength: jumping, walking in straight line, and stepping onto and off objects.

DS Adaptations Continued...

- **Poor Perceptual Abilities**

- Include activities that promote body awareness which will help improve balance and understanding of space: *Head and Shoulders* or *Simon Says*.
- Basic Tumbling will help with perceptual motor abilities.*

- * **Be aware of Atlanto-Axial Instability First!**

- describes an increased flexibility between the first and second vertebrae and the base of the skull. These vertebrae protect the spinal cord and increased flexibility can put the spinal cord at risk.

- **Difficulty with Communication**

- Keep your instructions simple and lower yourself to your participant's level when explaining activities.
- Ask the group to imitate what you are doing to ensure they understand the movements.
- Ensure athletes experience success and congratulate success immediately.

Autism

- Is a Neural Development Disorder
- Usually becomes apparent within the first 3 years.
- Characteristics:
 - Severe problems with communication
 - Difficulties reciprocating social interactions
 - 1 in 3 do not speak
 - Repetitive actions
 - Difficulty focusing attention

Autism Adaptations

- Severe Communication Problems
 - May have to explain activities multiple times
 - Often times explaining an activity one on one rather than a group setting is more effective.
 - Remove any distractions- i.e. Equipment
- Difficulties reciprocating social interactions
 - Work on team and group interaction
 - Once again one on one situations often help
 - Ask athlete to mirror your actions of the activity
 - If an athlete is interested in a skill, capitalize on the opportunity to develop that skill further.

Adaptations Continued...

- **Difficulty Speaking**
 - Use body language or demonstrate activities
 - Use other modes of communication- signs, symbol board
- **Repetitive Actions**
 - Try to provide athlete with new stimulus to distract from repetitive activity.
 - Ask athlete to join group activity
- **Difficulty Focusing Attention**
 - Use one on one when athlete is showing issues
 - Change activities
 - Reduce or make minimal changes to the environment

Fetal Alcohol Syndrome

- Is caused by a positive history of drinking during pregnancy.
- Growth retardation pre or post natal
- Abnormalities- especially in the face

Characteristics:

- May have Hypotonia as discussed with Down Syndrome
- Hyperactive and Short Attention Span
- Exhibit lack of fear of strangers and dangerous situations
- Often have a poor memory and remembering rules
- Difficulty structuring time and transitioning between activities.

FAS Adaptations

- Hypotonia
 - Focus on activities that build basic strength: walking, crawling, and going from sitting to standing.
 - Work on balance activities that require strength: jumping, walking in straight line, and stepping onto and off objects.
- Hyperactive and Short Attention Span
 - Provide structure in your environment and activities short.
 - Provide verbal praise for success.
 - Set clear and concrete limits for behaviours which include consequences. Try to stay away from consequences that include sitting out as we want children to love movement.

Adaptations Continued...

- Lack of Fear of strangers and dangerous situations
 - Ensure appropriate supervision at all times
 - Provide structure but include the opportunity for freedom
 - Always check your space each session for anything dangerous.
- Poor Memory and Remembering Rules
 - Provide short and concise instructions
 - Only focus on one or two points at a time
 - Modify rules and equipment to allow success

Adaptations Continued...

- Difficulty structuring time and transitioning between activities
 - Ensure consistency in the structure of the program
 - Provide the athletes with time to prepare for the change-
i.e.- countdown
 - Provide the parent/caregiver with a schedule of the activities so they can prepare the athletes for each session

Other Intellectual Disabilities: (not all...)

- Asperger's Syndrome
- Depression & Emotional Disturbances
- Epilepsy
- Hearing / Visual Impairments
- Juvenile Diabetes
- Muscular Dystrophy
- Spina Bifida
- Spinal Cord Injuries
- Cerebral Palsy
- ADHD
- Developmental Coordination Disorder (DCD)
- William's Disorder

Planning a Session/Class



Key Points to Consider

- Create a child centred environment to promote learning
- Young athletes learn through their environment and through the guidance of coaches
- Challenge each athlete during activities and adapt to ensure success.
- Provide athletes opportunity to have a sense of control
- Activities and time frames are guidelines
- Provide opportunity for “Free Play”
- Ensure activities in each session are fun
- Sessions should include a warm up, introduction, skill development, games and activities, cool down, and nutritional component
- Keep structure consistent
- Follow outcomes based on IPP



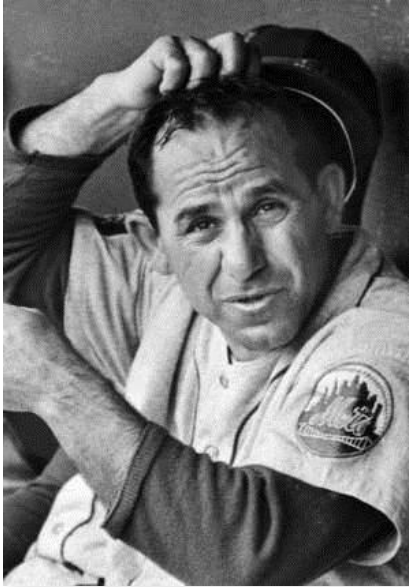
Behaviour Management Techniques

- Know what tends to set your student 'off' in terms of behaviour
- Teach positive behaviours
- Use consistent structure in each session
- Reinforce positive behaviours
- Communicate with parents/caregivers and participants
- Establish rules and be consistent
- Set up the environment to promote good behaviour (e.g., face walls to avoid distraction, cover equipment not being used)
- Examine the antecedents for possible causes of the behaviour
- Examine the possible functions of the behaviour
- Explore the consequences of the behaviour (What happened after the behaviour occurred? Who reacted? How did they react?)
- Consider simple alternatives that might prevent or reduce the behaviour

(FMS: For Children with Developmental and/or Behavioural Disabilities)

Off-task behaviours (e.g., acting out, tantrums) exhibited by some children may, in fact, be avoidance strategies to hide poor motor skill proficiency!

The Future



Yogi Berra
b. 1925

“The future ain’t
what it used to
be.”



The Future

- All schools with Active Start, FUNdamentals & after school programs
- All EI Programs using AS in the home with parents
- All Municipalities with AS & FUNdamentals Summer programs
- All learning institutions with SONS-developed curricula and programs
- All SONS regions with AS, FUNdamentals and youth sport
- All Societies using SONS resources
- Yearly symposium on Intellectual Disabilities
- Grads of Active Start and FUNdamentals entering regular SONS programs



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Thank You



Active Start

FUNDamentals