



Co-funded by
the European Union



INCLUSION AND DISABILITIES IN AND THROUGH SPORT

National Inclusive Sports Insights and Best Practices Report of France

**INSEI - Institut national supérieur de formation
et de recherche pour l'éducation inclusive**

No. 101089892 – IDI4Sport – ERASMUS-SPORT-2022-SCP



Work Package 2 – Resources and modelling

D2.1 Reports on national resources

Deliverable Title	Reports on national resources
Work package Title	Resources and modelling
Work package Number	2
Work package Lead	University of Macedonia
Author(s)	Agnès Piquard-Kipffer, Caroline Barbot-Bouzit, Sonia Duval, Jérémy Zytnicki, Charlotte Duthu
Contributor(s)	Marianna Karatsiori, Panagiotis Varsamis, Camille Mallez
Reviewer(s)	All partners
Dissemination level	Public
Project Number	101089892
Instrument	Erasmus+ Sport
Start date of Project	01/01/2023
Duration	36 months
Project coordinator	France Education international

Funded by the European Union. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union. Neither the European Union nor the granting authority can be held responsible for them.

Table of content

Methodology	4
General information about inclusion in sports in France.....	6
Best Practice in France #1:.....	29
Best Practice in France #2	33
Best Practice in France #3.....	36
“Three sports practices with three adaptation approaches for the inclusion of all”	39
Part 1: Origins of sporting practices and the adaptation approach	39
Part 2: A common approach to adapting a practice in an inclusive way.....	44
Part 3: The 3 steps to adapt 3 practices to all participants.....	45
Part 4: Protocols for the medical and special educational needs of all pupils	60
Best Practice in France #4	67

Methodology

The methodology used to identify and document several innovative inclusive practices in sports in France involved 4 stages which implied:

1. To access to various websites between April and May 2023. The web search used keywords such as "good practice" or "best practice, sport, physical activity, physical education, inclusion, children or youth or young people".
2. A state-of-the-art research in French (a) within the INSHEA research review - Nouvelle revue Éducation et société inclusives -. Two files with special issues devoted exclusively to adapted sport were identified. The first (2012) is entitled "*Sport et handicap: les activités physiques adaptées (APA)*". The Second (2018) is entitled "*Éducation physique et sportive et besoins éducatifs des élèves*"; (b) in the legal field (legislative framework, Code of sports - code du sport- , Education Code – code de l'éducation) ; (c) within national research institutions in the field of sport, disability and health (INSERM¹) ; (d) within sports federations and certain specialised university departments.
3. To identify several stakeholders in adapted sport in France, including researchers' experts in the field, whom we thus decided to contact.
4. To interview different people working in the field: researchers, sports coaches, associations and one departmental home for the disabled (Maison Départementale des Personnes Handicapées, MDPH 75)².

¹ INSERM, Institut National de la santé et de la recherche médicale : French National Institute for Health and Medical Research.

² MDPH 75: Maison Départementale des Personnes Handicapées de Paris, paris departmental home for the disabled

Twenty-two people were interviewed: five school teachers, three lecturers, five club sports coaches, three association leaders, three educational advisors, a STAPS student, a high school principal, and a school doctor also specialized in rehabilitation medicine.

We have been in effective contact with the Paris MDPH, in order to obtain figures, and with French sport federations.

In the end, among the participants in our survey, those involved in innovative practices managed to describe their good practices within the allotted time. Before citing them in IDI4Sport project, the explicit consent of the participants was given, who also agreed to provide further explanations and make the necessary modifications to their submissions.

General information about inclusion in sports in France

1. Youngsters (10 to 20 age old) with disabilities participating in sports.

Please state resources, data, figures (percentages of youngsters with disabilities participating in sports) with a brief overview of the data, and sources/references for that. Try to limit it to quantifiable data of participation of youngsters with disability in sport, if not possible refer to wider sources of information.

a. Academia (evidence-based in peer review journals)

There is little scientific data on the practice of sports among young people with disabilities (aged 10 to 20).

Within the French education system, at the end of secondary school, students have acquired a common base of knowledge, skills and culture. This base, updated in 2015, represents what students should know and be able to do at the end of their compulsory education, at the age of 16. The "Bulletin officiel de l'éducation nationale, de la jeunesse et des sports" publishes administrative acts and regulatory texts such as special BOs (*Bulletin officiel/ Official bulletin*).

This framework defines:

1. The programs and resources that accompany the PE program, as well as the national "Sport et Handicaps 2020-2024" strategy, provide a framework for these activities:

- Between the ages of 5 and 11, pupils are in elementary school (fundamental learning cycle and consolidation cycle) and benefit from 108 hours of Physical Education and Sport (3 hours a week).

Since 2022, pupils have had an additional 30 minutes of daily physical activity in all elementary school.

- Between the ages of 11 and 15, pupils are in Middle school (consolidation cycle then advanced cycle) and benefit from 4 hours of Physical Education and Sport in the 1st year of Middle school, then 3 hours for the last 3 years.

- Between the ages of 15 and 18, students attend high school and benefit from a minimum of 2 hours of Physical Education and Sports.

2. Inclusion for all students, in PE as in other subjects school, in compliance with the recommended medical precautions, unless they have a medical certificate stating that they are not fit to practice PE (physical education): "PE responds to the educational challenges of the common base by allowing **all students**, girls and boys together and **on an equal footing**, a fortiori those who are furthest away from physical exercise and sports, to build **five skills** worked on in continuity during the different cycles (BO n°11, 26 of November 2015, p.46)." Unfortunately, there is no data on the number, scope and type of exemptions granted for students with disabilities.

3. PE (physical education): PE develops access to a rich field of practices, with strong cultural and social implications important in the development of the individual's personal and collective life. Throughout schooling, PE aims to form a lucid, autonomous, physically and socially educated citizen, with a view to living together. It leads children and teenagers to seek well-being and to be concerned about their health. **It ensures the inclusion,**

in the classroom, of students with special educational needs or disabilities. PE introduces the pleasure of sports practice.

Sports activities are grouped into 5 skills of body experiences:

1. To develop motor skills and learn to express themselves using their body.
2. To be able to use methods and tools easily through physical and sports activities.
3. To share rules, assume roles and responsibilities.
4. To Learn to maintain one's health through regular physical activity.
5. To master a physical, sporting and artistic culture". (BO n°11, 26 of November 2015, p.46)

Within their schooling elementary school, junior high school, vocational high school and general high school, young people (10 to 20 years old) with or without disabilities can participate in UNSS (National Union of School Sports) activities as part of a "shared sport".

From school to college, PE offers all students a training pathway consisting of different complementary learning areas to develop these 5 general skills (as mentioned above). They include benchmarks of progress for teachers and students which are objectives to be achieved. (BO n°11, 26 of November 2015, p.46, p.154, p.292).

"Each field of learning allows students to build skills integrating different dimensions (motor, methodological, social), based on diversified physical, sports and artistic activities (PSA). Each cycle of

the programs (cycles 2, 3, 4) must allow students to meet the fields of learning. At school and at college, a pedagogical project defines a balanced and progressive training path, adapted to the characteristics of the students, to the capacities of the available materials and equipment, and to the human resources that can be mobilized.” (ibid.p.46).

Sources:

- <https://www.education.gouv.fr/au-bo-special-du-26-novembre-2015-programmes-d-enseignement-de-l-ecole-elementaire-et-du-college-3737>
- <https://www.education.gouv.fr/le-sport-l-ecole-maternelle-41648> / <https://www.education.gouv.fr/le-sport-l-ecole-elementaire-9509>
- <https://www.education.gouv.fr/30-minutes-d-activite-physique-quotidienne-dans-toutes-les-ecoles-344379>
- <https://www.education.gouv.fr/le-sport-au-college-9524>
- <https://www.education.gouv.fr/le-sport-au-lycee-8786>
- https://cache.media.education.gouv.fr/file/16/75/4/ensel045_annexe1_752754.pdf

In the INSEI (former INSHEA) Journal: “La nouvelle revue Éducation et société inclusive”, two dossiers were devoted to the issue of sport and disability: issue 58 published in 2012 (Sport and disability: adapted physical activities) and issue 81 published in 2018 (Physical and sports education and students’ special educational needs).

Folder 1: *Boursier C., Séguillon D. & Benoît H., dir. (2012). Sport et handicap : les Activités physiques adaptées (APA)/ Sport and disability : adapted physical activities, n°58.*

<https://www.inshea.fr/fr/content/sport-et-handicap-les-activit%C3%A9s-physiques-adapt%C3%A9es-apa>

Folder 2: Meziani M., Séguillon D., dir. (2018). *Éducation physique et sportive et besoins éducatifs particuliers des élèves/ Physical education and sport and the special educational needs of pupils*, n°81.

<https://www.inshea.fr/fr/content/%C3%A9ducation-physique-et-sportive-et-besoins-%C3%A9ducatifs-particuliers-des-%C3%A9l%C3%A8ves-0>

Other elements of bibliography

Article L 44 de la loi no 2016-41 du 26 janvier 2016 de modernisation de notre système de santé.

https://www.legifrance.gouv.fr/jorf/article_jo/JOR- FARTI000031913897

Caby, I. (2012). Handicap mental : vivre bien, vivre mieux grâce à l'activité physique. Dans : Roy Compte éd., *Sport adapté, handicap et santé* (pp. 367-375). Éditions AFRAPS.

<https://doi.org/10.3917/afraps.compt.2012.01.0367>

Code du sport : Livre Ier (Articles L100-1 à L142-1).

<https://www.legifrance.gouv.fr/download/file/pdf/LEGITEXT000006071318.pdf/LEGI>

De Luca, M. & Coutiez, A. (2017). Santé mentale de l'enfant et de l'adolescent : place des activités physiques et sportives. Dans : Isabelle Caby éd., *Sport et handicap psychique: Penser le sport autrement* (pp. 37-42). Nîmes: Champ social. <https://www.cairn.info/sport-et-handicap-2017-9791034600311-page-37.htm?ref=doi>

EPS REVIEW: <https://www.revue-eps.com/> (numerous references on Adapted physical activities and inclusion in sport).

Institut national de la santé et de la recherche médicale (Inserm).
 Activité physique : contextes et effets sur la santé. [Rapport] Paris : Les

éditions Inserm, coll. Expertise collective, 2008, XII : 811 p.

<https://www.ipubli.inserm.fr/handle/10608/80>

Institut national de la santé et de la recherche médicale (Inserm).

Activité physique : Prévention et traitement des maladies chroniques.

Montrouge : EDP Sciences, coll. Expertise collective, 2019, XVI : 805 p.

[https://www.inserm.fr/expertise-collective/activite-physique-prevention-et-traitement- maladies-chroniques/](https://www.inserm.fr/expertise-collective/activite-physique-prevention-et-traitement-maladies-chroniques/)

Loi n° 2022-296 du 2 mars 2022 visant à démocratiser le sport en France.

<https://www.legifrance.gouv.fr/jorf/id/JORFTEXT000045287568>

Perrin, C ; Vuillemin, A ; Communal, D ; Ancelin, R ; Duché, P. (2022).

L'activité physique adaptée pour promouvoir la santé des populations. *La santé en action*, 462, 3-4.

Vaysse, J. (2017). La « danse adaptée » : mouvements & photographies.

Dans : Isabelle Caby éd., *Sport et handicap psychique : Penser le sport autrement* (pp. 77-80). Nîmes : Champ social.

<https://www.cairn.info/sport-et-handicap-2017--9791034600311-page-77.htm?ref=doi>

b. Grey literature (Theses, blogs, national reports)

There are about 483,300 children with disabilities in school out of a total of 12,781,000 in 2022. Their number is constantly increasing; they were 476,000 in 2021. They represent about 3.8% of all students. The majority of them, about 84%: 409,400 in 2022, are enrolled in elementary and high schools in the regular system. A smaller proportion, about 16%: 73,900 in 2021 attend special schools with special classes. In the mainstream system, two types of reception are offered: (1) the resource class (ULIS) with 12 pupils per class and total inclusion with support (24 pupils per class, on average, according to the figures obtained from elementary school, junior high school, vocational high school and general high school).

It is difficult to assess the regular practice of a sport activity for all young people aged 10 to 20 with disabilities. Indeed, the official figures do not necessarily detail these age groups. Nevertheless, in the regular system, with the implementation of laws on inclusive school, adapted practices should be developed. In theory, from the previous theoretical data, 84% students in the mainstream system should be involved in adapted sports activities, since they are involved in inclusive sports activities with their non-disabled peers. However, given the part-time enrolment for some of them and the medical exemption for others, it is much more difficult to make a systematic assessment.

According to an interview we conducted, the Departmental house for the disabled persons (MDPH) in Paris, gave the following figures: of the 200,000 people with disabilities, 3,000 declare that they practice a sport (2022 figures).

Even today, while 90% of people with disabilities surveyed believe that physical activity is essential or important, 48% do not practise physical activity and sport, compared with 34% of able-bodied people, according to the *Observatoire National de l'Activité Physique et de la Sédentarité* (ONAPS) and the *Fédération Nationale des Observatoires Régionaux de la Santé* (FNORS). Source: *Rapport complet des activités physiques et sportives chez les personnes en situation de handicap vivant à domicile* (2023).

A study by the *Institut National de la Jeunesse et de l'Education Populaire* (INJEP) also shows that despite this very strong desire and interest, many elements of the sporting ecosystem still make taking part in sport too restrictive in a disability context. 63% of non-sporting people who declare a disability put forward health problems to justify this situation (Source: *Baromètre national des pratiques sportives*, 2018). The INJEP's 2022

Baromètre national des pratiques sportives states that 47% of people with disabilities play sport regularly.

Sources:

- DEPP, MEN (2022): <https://www.education.gouv.fr/l-education-nationale-en-chiffres-edition-2022-342412>
- DEPP, MEN (2021): <https://www.education.gouv.fr/synthese-de-la-depp-105296>
- INJEP (2018): https://injep.fr/wp-content/uploads/2019/01/Rapport_2019-01Barometre_sport_2018.pdf
- INJEP (2022): <https://injep.fr/publication/barometre-national-des-pratiques-sportives-2022/>
- ONAPS, FNORS (2023): <https://france-paralympique.fr/wp-content/uploads/2023/06/2023-06-19-resultats-psh-vf.pdf>

Acronyms :

DEPP : *Direction de l'évaluation, de la prospective et de la performance.*

MDPH : *Maison départementale des personnes handicapées/*
Departmental house for the disabled persons.

MEN : *Ministère de l'Éducation nationale et de la jeunesse/* Ministry of Education and Youth.

2. Legal Frameworks on inclusion of people with disabilities (in sports activities).

Please present the legal framework of your country for inclusion of people with disabilities (primary laws, dates they were issued)

Three main laws in France form the general framework of the inclusive school:

The founding law is that of **11 February 2005** (n°2005-102 "*On equal rights and opportunities, participation and citizenship of disabled persons*"). Disability is defined in a double dimension including both the deficiencies and the more or less helpful environment. The consequences at school are very important for parents: Any disabled child is a pupil by right and can access the school in his neighborhood. This law had 2 principles: accessibility and compensation with the creation of a house of disability in each of the 101 French departments and the creation of a new profession: the referent teacher whose role is to guide the parents in the construction of a project for their child.

The 8 July 2013 law reinforced the goal of reducing disparities (n°2013-595 "*Orientation and programming for the refoundation of the School of the Republic*"). Given that 20% of students have significant difficulties in accessing learning and diplomas. A list of competencies for teachers has been drawn up to support initial training. A framework for priority education has been drawn up too.

The last important law is **that of 26 July 2019** (n°2019-791 "*for a school of trust*"). The goals are both to guarantee fundamental knowledge for all: Reading, Writing, Counting and Respecting others as well as to innovate and adapt to needs. Education is now compulsory at the age of 3 and not 6 as before. The law also brings changes for teachers who become both *ULIS (Unités localisées pour l'inclusion scolaire* means Local units for school inclusion = resource classroom) coordinators and resource persons for inclusive education.

This law is broken down into 12 principles. The first is focused on priority to elementary school. In some priority education zones, the number of students per class has been divided in two: i.e 12 children/ class versus 25 in Grade 1 & Grade 2. But this does not concern the population targeted by this IDI4sport project: youngsters (10 to 20 age old) with disabilities. The second principle is focused on flexibility of school rhythms, either 4 days or 4 days ½ per week. Some schools operate on Wednesdays, others on Saturday mornings, others not. Another principle focuses on personalized assistance in middle school. As homework is quite important in France, a homework help system has been set up within the schools themselves for students who want to stay after school to do their homework. This has resulted in an increased budget for staff persons, 8,000 (in French AESH) dedicated to accompanying youngsters with disabilities to meet their needs at school.

Other laws are specifically dedicated to sports:

The sport code replaces several French laws in the field of civil law. It completes the Education Code (in the field of school and university sports) and the Public Health Code (in the field of doping). This code, which is updated every year, includes four books: (1) The organization of physical and sports activities, (2) Sports actors (athletes, referees, trainers, club managers and teachers outside of the national education system), thus governing the sports and disability professions (see below topic 4), (3) The different ways of practicing sports, the safety and hygiene of the places where they are practiced, as well as the organization and operation of sports events, (4) The financing of sports and the application of the code to the overseas territorial authorities.

In 2016, **there has been a real paradigm shift** in the field of sport, bringing it closer to health. Indeed, the 2016 law (No. 2016-41 of January 26, 2016) "of modernization of the health system" formalized the integration of physical activity (PA) in the care pathway. The prescription of a physical activity "adapted to the pathology, physical capacities and medical risk of the patient in long-term affection (ALD)" was introduced there, then extended to all chronically ill patients via the 2022 law of democratization of sport (Law n° 2022-296 of March 2, 2022 "aiming at democratizing sport in France" (Perrin, Vuillemin, Communal, Ancelin and Duché, 2022).

In June 2016, a national report: "Rapport Bigard" has been Submitted by a Working Group to the Director General of Health: "Physical activity and management of people with chronic diseases. Which skills for which patients? What training?"

This paradigm shift has been accompanied by an institutional change. Indeed, the D(RD)JSCS, Regional Directorate of Youth, Sports and Social Cohesion (DRJSCS, "Direction régionale de la jeunesse, des sports et de la cohésion sociale") or Regional and Departmental Directorates of Youth, Sports and Social Cohesion (DRDJSCS, "Directions régionales et départementales de la jeunesse, des sports et de la cohésion sociale") created in 2010 in metropolitan France will be transformed into the Regional Academic Delegations for Youth, Engagement and Sports (DRAJES, "les Délégations régionales académiques à la jeunesse, à l'engagement et aux sports") since January 1, 2021. Policies and actions in the field of youth, popular education, associative life, sports and civic engagement are carried out by the DRAJES. A regional academic delegation for youth, commitment and sport (DRAJES, délégation régionale académique à la jeunesse, à

l'engagement et au sport, <https://drdjscs.gouv.fr>) will be created within each rectorate of the academic region, while at the departmental level, a youth, commitment and sport service will be created within each DSDEN: departmental services of national education.

The sport/health houses (maisons sport santé MSS)

The Maisons Sport Santé (MSS) are a device established in 2019 by the Ministry of Sports and Olympic and Paralympic Games and the Ministry of Solidarity and Health. Their purpose is to accompany individuals to physical activity and sports and to implement sport-health programs. Any person wishing to be accompanied by professionals within the framework of the Maisons Sport-Santé can benefit from a follow-up. However, there is a priority audience: (1) any person who has never practiced sports or who has not practiced for a long time, (2) any person suffering from a long-term illness for therapeutic purposes, (3) any person suffering from a chronic illness for whom physical activity is recommended.

There are several health centers throughout the country.

Sport on medical prescription

Sport on medical prescription appeared in article 144 of law n°2016-41 in which it is stated that "as part of the care pathway for patients with a long-term condition, the treating doctor may prescribe a physical activity adapted to the pathology, physical abilities and medical risk of the patient". The white paper on prescription sports states that this idea has been well known for a long time and that its inclusion in the 2016 law is simply a crystallization of an idea that was already widespread. It aligns with Anglo-Saxon countries that have been inspired, since 1951, by the ideas of the

British Association of Sport and Exercise Medicine, in an effort to gain acceptance of the idea of sport-health.

Sources:

- The 11 February 2005 law: <https://handicap.gouv.fr/la-loi-du-11-fevrier-2005-pour-legalite-des-droits-et-des-chances>
- The 8 July 2013 law: <https://www.legifrance.gouv.fr/dossierlegislatif/JORFDOLE000026973437/>
- The 26 July 2019 law: <https://www.legifrance.gouv.fr/jorf/id/JORFTEXT000038829065/>
- The Sport Code: <https://codes.droit.org/PDF/Code%20du%20sport.pdf>
- The 26 January 2016 law: <https://www.legifrance.gouv.fr/dossierlegislatif/JORFDOLE000029589477/>
- The 2 March 2022 law: <https://www.legifrance.gouv.fr/jorf/id/JORFTEXT000045287568>
- The Bigard report (Rapport Bigard, June 2016): <https://www.legifrance.gouv.fr/jorf/id/JORFTEXT000038829065/>
- The sport/health houses: <https://www.sports.gouv.fr/les-maisons-sport-sante-un-outil-d-egalite-des-chances-et-d-acces-au-droit-de-la-sante-par-le-sport>
- Sport on medical prescription: <https://sport-ordonnance.fr/livre-blanc-sport-sur-ordonnance/>

3. National strategy/ies on inclusion of people with disabilities in sports activities.

Please present the national strategy/ies of your country for integrating people with disabilities in sports (if this is linked to a legislature, please mention it).

A National Adapted Physical Activity - Health Consortium (Consortium National Activité Physique Adaptée – Santé : CNAPAS) has been developed (APAS) in 2021, redefining physical activity.

This National Adapted Physical Activity - Health Consortium is **the national authority representing and guaranteeing the French APA field**. It is composed of the main bodies in APA in France: (1) C3D STAPS (Conference of 80 UFR University departments of STAPS Directors), (2) SFP APA (Société française des professionnels en APA, a learned society for training and research in APA), (3) 2 learned societies: the RECAPPS Institut (Institute for Collaborative Research on Physical Activity and Health Promotion, <https://institut-recapps.com>) and the AFAPA (French-speaking Society of APA Professionals), (4) ANESTAPS (National union of STAPS Students) <https://anestaps.org>, (5) The sport-health Chair of the Université de poitiers . **The CNAPAS participates at the highest level of the reflections and exchanges with the various national authorities.**

A National Plan for Sport, Health and Well-being: "Sport, Santé, Bien-Être" (2012) has been translated into regional plans based on local dynamics.

Following the paradigm shift of 2016 in the field of sport, bringing it closer to health, The National Sport-Health Strategy (Sport-Santé) 2019-2024 aims to "improve the health status of the population by promoting physical activity and sport for everyone on a daily basis, with or without pathology, at all times of life", Ministry of Solidarity and Health and Ministry of Sports. This public policy is part of the legacy of the 2024 Olympic and Paralympic Games.

The Ministry of National Education and Youth

A- Defines the "Sport and disabilities 2020-2024 (SNSH)" national strategy around 4 axes: (1) Promote and facilitate access to physical activity and sport, (2) Develop and structure a practice offer adapted to the needs, (3) Improve French performance at the Paralympic Games (4), Manage and evaluate.

B- Identifies 6 key measures for Paris 2024: (1) to develop parasports, promote the practice of sports for people with disabilities in the context of school, extracurricular and after-school activities by strengthening educational partnerships involving sports players offering local services, (2) to develop the media coverage of parasports, (3) to encourage the sharing and re-use of technical and sports equipment dedicated to "sporthandicaps" practices, (4), access to sports practice thanks to and for caregivers, (5) to create a development model for disabled athletes, (6) to promote and communicate on the Sports Handiguide.

The Ministry of Sport and the Olympic and Paralympic Games

C- It develops and manages: (1) Programs and resources to accompany the PE program with a section on pedagogical adaptations in PE for students with disabilities. See an example in biathlon/duathlon: RA20_C4_EPS_Duathlon_ou_biathlon.pdf, (2) adapted PE commissions in several academies in France with practical information and resources. See examples: adapted PE site of the academy of Versailles: "GT EPS adaptée - Education Physique et Sportive" (ac-versailles.fr). For a successful inclusion of students with special needs (genial.ly). Adapted PE (EPS) Physical and Sports Education (ac-dijon.fr), (3) Assesment testing adapted to the abilities of candidates with disabilities in EPS for the baccalaureate, with the

possibility of reducing the three planned tests to two or even one (<https://eduscol.education.fr/1283/adaptations-et-dispenses-au-baccalaureat-general-et-technologique>), (4) the development of "shared sports" allows all students to practice the same activities. These are pre-existing sports practices whose rules and scales are adapted according to abilities of each student. Meetings between sports associations are subject to an agreement (<https://opuss.unss.org/article/73855>). These activities (wheelchair basketball, biathlon, blowpipe race, blind labyrinth, football for blind persons (céci-foot), boccia, climbing, torball, flashmob, seated volleyball, wheelchair course, etc.) naturally find their place within the framework of PE lessons.

D- The National Advisory Council for the Disabled (Conseil National Consultatif des Personnes Handicapées: CNCPH), "Sport, Media, Culture" Commission, participates in the examination of laws to ensure the effective inclusion of people with disabilities in sports activities.

Sources: The National Sport-Health Strategy (Sport-Santé) 2019-2024.

<https://www.sports.gouv.fr/sport-et-handicap-33>

4. Skilled and Knowledgeable Staff.

Please mention if there is a provision by your country to train/educate coaches, teachers, physical educators about the unique challenges that students with disabilities face in sports. If there is one, please mention the provider, its duration, its main focus, the absolute numbers and percentages of people having undergone a training, etc.

Various categories of professionals can work with young people with disabilities in the field of sport. **The sports code** provides a framework for all the professions that govern sports. The **Repertoire National Certification Professionnelle form** (La fiche Répertoire National

Certification Professionnelle) establishes the skills validated from the training.

<https://www.data.gouv.fr/fr/datasets/repertoire-national-des-certifications-professionnelles-et-repertoire-specifique/>

The **National Adapted Physical Activity - Health Consortium** (Consortium National Activité Physique Adaptée – Santé: CNAPAS) has been developed (APAS) in 2021, redefining physical activity (see previous section 3). The goal was to regroup **to give more visibility to the APAS training and jobs**, sport educator vs teacher in APA vs coordinator in APA, **which, in recent years has had an exponential development. Job descriptions have been drawn up** with a common core curriculum.

A. In basic training

1. Professionals attached to the Ministry of Sports, Olympic and Paralympic Games:

- Brevet Professionnel de la Jeunesse, de l'Éducation Populaire et du Sport (BPJEPS) Physical Activities for All.
- Diplôme d'Etat de la Jeunesse, de l'Éducation Populaire et du Sport (DEJEPS) Adapted Physical and Sports Activities.

2. Professionals attached to the Ministry of Higher Education and Research (faculty or institute of sport sciences):

5 mentions of "licence" exist (L3: a 3-year degree with 500 hours year/1500 hours for 3 years to validate it + 200h of pre-professionalization internship. This corresponds to European credits of 180 ECTS. The growing success of these courses, more than 68,000 students are enrolled in L1 in

STAPS in 2022, has implied and still implies a specialization of the University's teachers (associated professors, professors, seconded from the higher education, contract workers).

<https://www.legifrance.gouv.fr/loda/id/JORFTEXT000037291166/?isSuggest=true#:~:text=L%27ensemble%20du%20parcours%20de,entre%204500%20et%205400%20heures.>

Those devoted to APS are:

- **STAPS degree L3 mention APA-S** (Adapted Physical Activity and Health) training "Teachers in Adapted Physical Activity" (EAPA) to intervene in particular in specialized institutes with children and teenagers in situation of handicap (IEM, ITEPS, IME).

- **STAPS degree L3 mention Education and Motricity** 1st and 2nd degree training future PE teachers and school teachers: the modules of sensitization to the handicap are generally of about ten hours.

- **STAPS degree L3 in sports training**, training future trainers: the disability awareness module is generally about twenty hours long.

A professional card after the L3 is granted. It is a diploma for being "teacher with specific adapted activities" ("enseignant APA") which entitles the supervision of people with special needs. The sector that will be recruiting is the social, tourism and health sectors, as well as teachers in hospitals (see APHP job descriptions). Not all "APA teacher" graduates go to teaching, they can also be co-ordinators.

- **The Master's level of STAPS** allows you to take several competitive exams: the Certificate of Aptitude for Teaching Physical Education and Sport (CAPEPS: in secondary education only) or the CRPE for primary education.

B. In further training

Professionals attached to the Ministry of National Education and Youth:

- 2-days for further training of PE teachers: "Partial aptitude and disability in PE" as part of the Ecole académique de la formation continue (EAFC).
- CAPPEI training of 12 weeks (followed at INSEI or INSPE), entirely devoted to the adaptation of teaching to the Special Educational Needs of students with disabilities, including a day of awareness to the teaching of adapted PE in the module chosen by the trainee teachers, corresponding to different types of Special Educational Needs.

Sources:

APAS job description: <https://c3d-staps.fr/wp-content/uploads/2021/04/VF-LE-Metier-Les-Missions-21-1-2021.pdf>

Reference of all the STAPS in France: <https://www.enseignementsup-recherche.gouv.fr/fr/la-licence-generale-staps-un-diplome-professionnalisant-47601>

5. Sport events (permanent/regular events: European and national scale) where people with disabilities are encouraged to participate (i.e., marathons).

Please refer the organizer, the frequency of the event, the number of people with disabilities that participate.

1. Ministry of Sports, Olympic and Paralympic Games:

- Competitions offered by the French Federation of Handisport (<https://www.handisport.org/>): "Jeux de l'Avenir" and "Grand Prix" are

organized alternately each year in addition to all the competitions by sport specialty at the departmental, regional and national levels.

- Competitions organized by the Fédération Française du Sport Adapté (FFSA) (<https://sportadapte.fr/la-ffsa/>): departmental, regional and national competitions.

2. Ministry of National Education and Youth:

Sport and disability events are organised throughout the year 2023:

[Sport et handicap : les grands rendez-vous de 2023](#)

All school sports associations are mobilized for the national day of sport and disability (23 march), the 7th edition of the Olympic and Paralympic Week organized on the theme of inclusion from April 3 to 8, 2023: [La semaine olympique et paralympique](#), the virtus global games (4-10 june) and the World Para Athletics Championships (8-17 july).

3. Ministry of Higher Education and Research:

National event "The Teacher in Adapted Physical Activity: a sure value!" (1st quarter 2023) organized by the university training in Adapted Physical Activity and Health (APA-S) of the UFR STAPS and the Teachers in APA (EAPA).

Different actions or local events are organized in each territory (including the national day of sport and disability, the Olympic and Paralympic week, the Telethon, etc.). They take the form of thematic days, conferences, debates and workshops putting in motion and in activity people with specific needs supervised by all the actors of the APA field: teachers and research teachers in APA, students of all levels (Bachelor, Master and Doctorate in APA-Health), as well as medical, paramedical and educational staff, coming from establishments and public structures.

[Dossier presse Evenement EAPA une valeur sure 2023 VF Strasbourg 1 .pdf \(unistra.fr\)](#)

ASSOCIATIONS (NATIONAL LEVEL)

The Union Nationale du Sport Scolaire (UNSS)

Shared sport competitions are organized by the UNSS on a departmental, regional and national scale in many physical and sports activities (handi cross, swimming, ultimate, etc.) as part of a "Shared Sport":

<https://www.unss.org/sport-partage>

The Youth sports offer

"the Handisport Youth programme has been greatly expanded and its sports offer is now based on 3 sectors that meet the needs of all young people with motor or sensory disabilities, whatever their expectations and objectives: PLEASURE + PROGRESS + PERFORMANCE":

<https://www.handisport.org/loffre-sportive-jeunes/>

What important data are missing from each country compared to others?

What would you recommend to your country?

In France, although there is little scientific data on the practice of sport among young people with disabilities, we can nevertheless draw on statistical data from the Institut National de la Jeunesse et de l'Education Populaire (INJEP). <https://injep.fr/publication/barometre-national-des-pratiques-sportives-2022/>

The INJEP, *Institut National de la Jeunesse et de l'Education Populaire* (National Institute for Youth and Popular Education) has put the

Observatoire territorial du sport et de la jeunesse (Territorial Observatory of Sport and Youth) on line, an observation tool that enables territorial indicators to be consulted: <https://carto-stats.injep.fr/>

Having identified the existing literature on the sporting practices of young people with special educational needs, we note a certain lack of standardised methodologies and research data that would facilitate the development of good adapted physical practices. We note a lack of visibility of both the results of the research and the arrangements put in place to make it easier to understand and identify good practice for young people with special educational needs.

According to our methodology, sociological surveys of specialists in the field and in institutions confirm that access to sport for all has increased in recent years, especially in specialized institutions. Nevertheless, even able-bodied people's sporting activities are still too selective because of a competitive spirit that is still in evidence.

In terms of professional qualifications, in addition to the initial training of teachers in the national education system, which is crucial, the first step is to build bridges between the worlds of sport and parasport, by recruiting specialized sports staff.

In terms of visibility, it is important to publicize the good practices of parathletes, but above all to facilitate communication between elected politicians and the mobilisation of sports club presidents to identify good practices for parasport, support institutions and create specific schemes at local level. By the end of the 2024 Olympic Games, people with disabilities should have the same opportunities as able-bodied people, in terms of facilities, time and sports instructors. The recommendations for France are therefore to raise awareness and mobilize all political, sporting and educational players to disseminate and put into practice the ethical, educational and social values of sport for all.

We wish to express our deep gratitude, firstly to Ms Charlotte DUTHU, specialist school teacher, for her involvement in this project, and also our sincere thanks to Mr Brahim BALK-ALEXANDRE, director of the Hauts-de-Seine Departmental Handisport Committee ; Mr Eric BERNAD, school teacher pedagogical advisor in Créteil education authority ; Thierry BOURGOIN, specialist school teacher, former trainer at INSEI ; Ms Isabelle CABY, associate professor in science and techniques of physical and sports activities at Artois University; Mr Xavier CHIGOT, school teacher educational advisor, Créteil Academy ; Mr Franck COQUART, CDSA92 project manager ; Ms Laurence KERN and Ms Nathalie LEROUX, associate professors in science and techniques of physical and sports activities at Nanterre University ; Denis MAUPAS, school adaptations and education for the pupils with disabilities pedagogical adviser, Versailles education authority; Jacques MIKULOVIC, rector of Mayotte education authority ; Jérôme ROUSSEAU, founder and chairman of the Novosports association.

Collection of best practices

The first 3 best practices constitute a set of universal accessibility practices: practice #1 "Adaptive table tennis", practice #2 "inclusive volleyball", practice #3 "inclusive tèque".

Each practice will first be briefly described in a 12-item table. Each item will link to a detailed 4-part presentation immediately following these 3 tables. This detailed presentation is called "Three sports practices with three adaptation approaches for the inclusion of all". It describes the universal accessibility of these 3 practices, presented together, based on a needs analysis. It is an argumentation that links 3 adaptation approaches, a protocol for securing practices by needs and a summary of adaptations by special educational needs.

The 4th best practice concerns circus arts. The practice focuses on people with neurodevelopmental disorders, but could be extended to a wider audience.

Best Practice in France #1:

Adapted table tennis

Key words that describe this best practice in France

1. Adapted table tennis ; 2. "Table tennis with support" variant ; 3. "Pushing table tennis" variant ; 4. "Table tennis on the floor" variant ; 5. Universal accessibility
--

1. Type of Disability

This sport is adapted to all publics through its 3 variants and complementary adaptations: this sport is universally accessible. It was originally designed for pupils with mild to severe motor disabilities and pupils with no disabilities or mild neurodevelopmental disorders (part 1-B).
--

2. Organization & Reference

The EREA Toulouse-Lautrec High School is located in Vaucresson, near Paris (<http://www.lyc-erea-toulouse-lautrec-vaucresson.ac-versailles.fr/>). The practice is presented by Charlotte Duthu and Sonia Duval, specialized teachers in this high school and university teachers (part 1-A).

3. Formal/Informal

This sport is part of the French education system (part 1-A).

4. Practice summary

Table tennis is adapted in 3 variants, with more and more adaptations to meet the growing needs of pupils standing or in wheelchairs:

1. A "Table tennis with support" variant and adapted equipment can meet many needs with few changes to the initial practice.
2. A "Pushing table tennis" variant simplifies the gesture by doing away with the net, using the hand and preventing the ball from going sideways with foam bars. It is accessible to a wide audience who need a slower, less precise game.
3. A "Table tennis on the floor" variant enlarges the space, the equipment and slows down the game even more, so that it can be played without hands in an electric wheelchair or with little standing precision. This variant is particularly suited to pupils with severe disabilities and is therefore accessible to all (part 3-A).

5. Variations implemented

Variations on the practice allow adaptations to be made to suit the specific needs of the pupils. However, each variant can also be proposed to a heterogeneous pairing for a more inclusive approach. The last item in the detailed table for each variant (part 3-A-2) suggests ways of ensuring universal accessibility, so that everyone can play together.

6. People involved

The detailed table of this practice also presents the people involved (part 3-A) and the adaptation approach (parts 1-B, and 1-C-2).

7. National guidelines adopted

They are presented above in the main methodology section. These practices are in line with the obligation for all pupils to take part in sports and to be assessed (part 1-C-1), unless they have a medical certificate exempting them from doing so.

8. Implications for teachers/practitioners etc.

The conceptualization of a preventive and reactive "securing practices" protocol addresses these issues (part 4-A). Some elements of co-teaching are part of the safeguarding system (part 2-C).

9. Innovative resources, materials, methods etc. used

The detailed presentation proposes an innovative conceptualization of the adaptation approach by group of needs, by reverse or inclusive inclusion (part 2, parts 3-A-1, 3-B-1 and 3-C-1). The detailed presentation proposes the conceptualization of universal accessibility of practices through needs analysis (part 1-C-2, part 3 end of tables and part 4-B). Materials are proposed and imagined for universal accessibility (part 4-C).

10. Communication and collaboration strategies

Strategies are linked to co-teaching, co-intervention or co-presence to animate, differentiate and provide assistance in sessions (part 2-C).

11. Evaluation and/or reflection methods

The assessment enables pupils to situate themselves on their scale of progression. Very detailed grids are systematically produced for each skill

profile. They are too long to include in this document. The detailed presentation proposes only the main academic skills (part 1-C-1).

12. Training pathway for teachers for integrating this good practice

The tips are grouped into 3 themes: objectives, participants' skills and adaptation methods (part 1-B).

Best Practice in France #2

Inclusive Volleyball

Key words that describe this best practice in France

1. Inclusive Volleyball ; 2. Strike with a wheelchair ; 3. Reverse inclusion ; 4. Swiss-ball ; 5. Universal accessibility.

1. Type of Disability

This sport is adapted to all, with a common skill shared by all participants: being able to move around in a wheelchair. Pupils who can't will play standing up. In this way, the sport is universally accessible. It was originally designed for pupils with mild to severe motor disabilities and pupils with no disabilities or mild neurodevelopmental disorders (part 1-B).

2. Organization & Reference

The EREA Toulouse-Lautrec High School is located in Vaucresson, near Paris (<http://www.lyc-erea-toulouse-lautrec-vaucresson.ac-versailles.fr/>). The practice is presented by Charlotte Duthu and Sonia Duval, specialized teachers in this high school and university teachers (part 1-A).

3. Formal/Informal

This sport is part of the French education system (part 1-A).

4. Practice summary

Inclusive volleyball involves playing in a manual or electric wheelchair with participants of varying abilities. The motor skills of the participants are homogenized in a process of reverse inclusion. The equivalence of participants' skills is harmonized at team level. This is a collective confrontation between two teams, each on their own field separated by a net or elastic band. Participants hit a large ball (Swiss-ball) with the wheels of the wheelchair, the footrests or the legs. The large ball rolls

along the floor and passes under the net, not over it as in classic volleyball. The aim is to get the ball out of the opponent's court (part 3-B).

5. Variations implemented

If wheelchair locomotion is not accessible to certain standing pupils (e.g. motor coordination disorder or severe visual impairment), they will require additional adaptations. This participant plays standing up. He hits the big ball (Swiss-ball) with his legs or hands. He may have the help of a student tutor to orient himself.

The last item in the detailed table of this practice (part 3-B-2) proposes the modalities of universal accessibility so that everyone can play together.

6. People involved

The detailed table of this practice also presents the people involved (part 3-B) and the adaptation process (parts 1-B, and 1-C-2).

7. National guidelines adopted

They are presented above in the main methodology section. These practices are in line with the obligation for all pupils to take part in sports and to be assessed (part 1-C-1), unless they have a medical certificate exempting them from doing so.

8. Implications for teachers/practitioners etc.

The conceptualization of a preventive and reactive "securing practices" protocol addresses these issues (part 4-A). Some elements of co-teaching are part of the safeguarding system (part 2-C).

9. Innovative resources, materials, methods etc. used

The detailed presentation proposes an innovative conceptualization of the adaptation approach by group of needs, by reverse or inclusive inclusion (part 2, parts 3-A-1, 3-B-1 and 3-C-1). The detailed presentation proposes the conceptualization of universal accessibility of practices through needs analysis (part 1-C-2, part 3 end of tables and part 4-B). Materials are proposed and imagined for universal accessibility (part 4-C).

10. Communication and collaboration strategies

Strategies are linked to co-teaching, co-intervention or co-presence to animate, differentiate and provide assistance in sessions (part 2-C).

11. Evaluation and/or reflection methods

The assessment enables pupils to situate themselves on their scale of progression. Very detailed grids are systematically produced for each skill profile. They are too long to include in this document. The detailed presentation proposes only the main academic skills (part 1-C-1).

12. Training pathway for teachers for integrating this good practice

The tips are grouped into 3 themes: objectives, participants' skills and adaptation methods (part 1-B).

Best Practice in France #3

"Inclusive Tèque"

Key words that describe this best practice in France

1. Inclusive baseball ; 2. All motor skills ; 3. Shorten the circuit ; 4. Passing the ball under the wheelchair ; 5. Universal accessibility.

1. Type of Disability

This sport is adapted to all abilities, respecting people's mode of locomotion, speed of movement and ball-throwing skills. It can be played by everyone and with everyone. From the outset, it meets the principle of universal accessibility.

It was originally designed for pupils with mild to severe motor disabilities and pupils with no disabilities or mild neurodevelopmental disorders (part 1-B).

2. Organization & Reference

The EREA Toulouse-Lautrec High School is located in Vaucresson, near Paris (<http://www.lyc-erea-toulouse-lautrec-vaucresson.ac-versailles.fr/>). The practice is presented by Charlotte Duthu and Sonia Duval, specialized teachers in this high school and university teachers (part 1-A).

3. Formal/Informal

This sport is part of the French education system (part 1-A).

4. Practice summary

Tèque inclusive is a type of baseball, originating from Normandy (France). The way the ball is thrown varies according to skill (bat, racket, hand, Pasaka-type glove or baseball-type glove). The ball could emit a sound with a bell. A second, shorter circuit reduces travel time for pupils in manual wheelchairs, slow walkers or pupils who have difficulty finding their way

around. The long circuit is designed for fast-walking pupils in a standing position or those in electric wheelchairs. The attacker can be eliminated by passing the ball under a defender’s chair. The defender in the wheelchair is thus mobilized for an essential action, while his or her ability to intercept or pick up the ball on the ground is more limited (part 3-C).

5. Variations implemented

The universal accessibility variants of this inclusive practice will focus solely on the significant specific needs of certain participants.

If a pupil is unable to find his way around on his own, a pupil tutor will travel with him. A sound ball with a bell enables a blind defender to locate the ball. When he becomes an attacker, he throws it with his hand.

The last item in the detailed table of this practice (part 3-C-2) proposes the modalities of universal accessibility so that everyone can play together.

6. People involved

The detailed table of this practice also presents the people involved (part 3-C) and the adaptation process (parts 1-B, and 1-C-2).

7. National guidelines adopted

They are presented above in the main methodology section. These practices are in line with the obligation for all pupils to take part in sports and to be assessed (part 1-C-1), unless they have a medical certificate exempting them from doing so.

8. Implications for teachers/practitioners etc.

The conceptualization of a preventive and reactive “securing practices” protocol addresses these issues (part 4-A). Some elements of co-teaching are part of the safeguarding system (part 2-C).

9. Innovative resources, materials, methods etc. used

The detailed presentation proposes an innovative conceptualization of the adaptation approach by group of needs, by reverse or inclusive inclusion (part 2, parts 3-A-1, 3-B-1 and 3-C-1). The detailed presentation proposes the conceptualization of universal accessibility of practices through needs analysis (part 1-C-2, part 3 end of tables and part 4-B). Materials are proposed and imagined for universal accessibility (part 4-C).

10. Communication and collaboration strategies

Strategies are linked to co-teaching, co-intervention or co-presence to animate, differentiate and provide assistance in sessions (part 2-C).

11. Evaluation and/or reflection methods

The assessment enables pupils to situate themselves on their scale of progression. Very detailed grids are systematically produced for each skill profile. They are too long to include in this document. The detailed presentation proposes only the main academic skills (part 1-C-1).

12. Training pathway for teachers for integrating this good practice

The tips are grouped into 3 themes: objectives, participants' skills and adaptation methods (part 1-B).

"Three sports practices with three adaptation approaches for the inclusion of all"

Detailed presentation of the 3 sports

Introduction and keywords

A set of three sports practices adapt duel or collective confrontations for all:

1. **"Adapted table tennis"** with 4 variants (part 3 A),
2. **"Inclusive volleyball"** (part 3 B)
3. **"Inclusive Tèque"**, a kind of inclusive baseball (part 3 C).

- **Participants with heterogeneous needs and skills:** motor skills can range from very limited to very high (part 1),
- **Three adaptation approaches:** they clarify the notion of inclusive practice (part 2),
- **Universal accessibility: adaptations** are devised for the most disadvantaged pupils in a heterogeneous group. This process facilitates access to practices for all (part 3),
- **Analysis of special educational needs:** needs and adaptations are often common to different types of disability (part 4).

Part 1: Origins of sporting practices and the adaptation approach

1-A. Origin of these practices: the EREA Toulouse-Lautrec High School

This practice originates from the Toulouse-Lautrec EREA High School. This specialized school (Ministry of Education) includes a care and rehabilitation center (Ministry of Health and Prevention). Pupils with disabilities are educated from elementary school through to High School. Teaching follows school curricula and prepares pupils for national examinations. Pupils are

guided towards all possible studies in higher education. The school can therefore be open to pupils with no disabilities or with motor disabilities. They attend the school by personal choice, and account for a third of the pupil body. This highly heterogeneous pupil body is an exception in France. This is a specialized school offering a model of "reverse inclusion".

Since the 1980s, this establishment has developed national expertise in the adaptation of sports and handisport practices. These practices have been filmed and commented on by the school's teachers since the 90s (Philippe Normand and Hervé Dizien): <https://video.toutatice.fr/video/18066-une-demarche-inclusive-en-eps-au-lycee-toulouse-lautrec-de-vaucresson/>.

There are numerous accessible facilities and areas (gymnasium with climbing wall, swimming pool, asphalted outdoor areas, nearby woods). A wide range of equipment is available, including numerous sports chairs, table tennis tables, all kinds of balls and rackets, foam mats and bars, bows, blowpipes and more. A workshop can even make field edges or ramps if the materials are simple.

Here are the contact details for the establishment, to be quoted for any future reference to these 3 practices:

Lycée EREA Toulouse-Lautrec
131 av de la Celle-Saint-Cloud
92420 Vaucresson
ce.0921935D@ac-versailles.fr
<http://www.lyc-erea-toulouse-lautrec-vaucresson.ac-versailles.fr/>

The EREA Toulouse-Lautrec High School PE team is represented by Charlotte Duthu, a specialist PE teacher at EREA Toulouse-Lautrec. She is also a trainer in Adapted Physical Activities at the university (Paris-Saclay). She brings her expertise to these 3 practices. Their presentation is written with Sonia Duval. She was formerly a specialized teacher at EREA Toulouse-Lautrec and a trainer at the university (CYU and Paris-Saclay). She is now working at INSEI to train in inclusive education (sonia.duval@inshea.fr).

1-B. Origins of the Toulouse-Lautrec EREA High School's adaptation approach

The school caters for almost 300 pupils aged from 6 to 20, with a wide range of skills and motor abilities:

- Pupils with all types of motor disorders,
- Pupils with neurodevelopmental disorders (DSM-5 / CMI-11) without severe intellectual development disorders,
- Pupils with mild sensory disorders,
- Pupils with mild psychological disorders (anxiety, depression).
- Pupils with no disabilities.

The proposed practices must meet the following constraints:

- Be adapted to each pupil, from the most disabled to the most mobile,
- Be quick and modular to install,
- Can be practiced simultaneously in the same indoor (gymnasium) or outdoor (tarmac) area,
- Be practiced in teams or pairs with heterogeneous abilities,
- Be supervised by several teachers (2 minimum),
- Can be assessed using skill grids adapted to each individual.

These constraints have enabled teachers to develop their creativity in adapting sports practice in an inclusive way. Each practice must :

- Always be adapted to the greatest motor limitation,
- Provide for variations in each of the pupils' motor skills, including the mode of locomotion (wheelchairs),
- Offer varying degrees of difficulty for each skill (speed, precision, complexity), from high performance to severe limitation.

The activities and their adaptations are thought out in a continuum, from the greatest possible compensation of the activity to the expression of great performance.

By taking all these constraints into account, each activity can be adapted simultaneously to all types of disability, by varying just a few parameters.

1-C. Origins of the possible extension of the 3 sports practices to all participant profiles for social inclusion

The practices are already adapted to a wide range of disabilities, even the most severe. The school has not tested its day-to-day practices for all disability profiles, and in particular for severe sensory deficits such as deafness without hearing aids and blindness. At the end of the tables for each activity (part 3), additional adaptations will be proposed to help these practices evolve towards universal accessibility.

1-C-1. Practices limited to specific pupil profiles and evaluated according to specific criteria...

The teachers at EREA Toulouse-Lautrec High School make a point of carefully assessing each pupil's skills according to a specific profile. They ensure the skills are equivalent in both individual and team matches. Evaluation criteria are set for each practice.

The aim of the assessment is to identify and report on each individual's performance. This enables them to situate themselves and progress on a personalized scale. It also prepares pupils for the "baccalauréat" assessment. Here are the 5 major disciplinary competencies that frame the evaluation criteria for Physical Education and Sport:

- Acquire a sporting culture;
- Acquire methods and tools through sport;
- Share rules, assume roles and responsibilities;
- Learn to maintain good health;
- Develop motor skills and learn to express themselves using their bodies

1-C-2. ...towards extending these practices to all.

Universal accessibility will be achieved by:

1. Identifying the special educational needs common to different disability situations,
2. Suggesting variations on the activity to broaden the participants' specificities.



3. Reducing the notion of sporting performance in favor of the pleasure of sharing a physical activity together. The practice of sport becomes a leisure activity that gives priority to physical activity, the playful dimension of the game and encounters with others. The equivalence of skills between participants becomes secondary, allowing for a wide variety of participant profiles, including those without disabilities.

The main aim of universal accessibility is social inclusion. This means enabling everyone to take part in sporting activities at school, among friends and, in particular, within the family.

Part 2: A common approach to adapting a practice in an inclusive way

To think about an inclusive practice, there could be three types of recommendations:

2-A. Objectives

- Consider sporting activity as a sensory-motor and psychosocial experience between participants with very different skills.
- Think of physical activity in terms of the acquisition of knowledge and skills, rather than pure performance.
- Emphasize the playful dimension of the activity, both in its conception and implementation.
- Design inclusive collective confrontations that highlight the heterogeneity of participants' abilities.
- Evaluate skills by enabling pupils to situate themselves on a motivational progression curve with adapted objectives.

2-B. Participants' skills

- Group adaptations by special educational needs rather than by disability.
- Think in terms of abilities rather than inabilities.
- Imagine the complementary skills of each team member.

2-C. Adaptation methods

- Analyze an activity by its internal logic rather than by its modalities, which will have to be arranged in a multitude of ways.
- Rethink the way physical and sports education sessions are supervised, so that several teachers are present for the same session. This enables teachers to respond more closely to pupils' needs, by working in co-teaching (for the same group) or co-intervention (in different groups). This involves aligning several classes of the same level in the same time

slot. At EREA Toulouse-Lautrec High School, 3 teachers line up their 3 classes for a total maximum of 40 pupils per session.

- Imagine optional variations in the case of a pupil's highly specific educational needs.
- Adapt with 3 distinct adaptation approach (from EREA Toulouse-Lautrec High School):

1. "Needs group" approach: Plan for several activities or variations of an activity to take place in the same place, to make it easier for teachers to supervise them and for pupils to move smoothly from one activity to another.

2. Reverse inclusion" approach: Determine the lowest common denominator between participants in a sporting activity, i.e. a type of locomotion, gesture or skill accessible to all. Then adapt part or all of the activity to this common denominator, by homogenizing the skills of each participant. For example, standing participants may have to take part in the activity in a wheelchair.

3. "Inclusive" approach: Design a group activity with different spaces, motor skills and roles for each member of a heterogeneous team.

Part 3: The 3 steps to adapt 3 practices to all participants

This methodology proposes 3 distinct adaptation typologies and approaches. It gives a logic to adaptations and facilitates exploration for the benefit of all pupil profiles.

3-A. "Adapted table tennis" with 3 variants

3-A-1. A "needs group" adaptation approach


This approach adapts a pre-existing activity, inaccessible in its original form. The logic of the original sporting activity is always preserved.

The activity is adapted for a homogeneous group of pupils with similar needs and disabilities. Several groups of pupils with different needs will practice the activity at the same time. It is adapted differently each time, in terms of the “course level”, equipment or playing methods. At least one teacher supervises each variant. The teachers can work together on the same variant from time to time, to meet the needs of certain pupils, leaving one group free to play on its own.

This approach makes it possible to precisely analyze the needs and logic of the activity, and to explore adaptations that are as close as possible to the participants’ potential. The adaptations are then original and varied. This is the logic behind the sports disciplines approved for Parasport.

3-A-2. Rules for the 3 variants of “Adapted table tennis”

Variant 1 and variant 2 “Pushing table tennis” Comparative presentation for a designated audience, then in universal accessibility	
Participant s’ profile	Variant 1 is suitable for mild disorders, variant 2 for slightly more severe disorders: <ul style="list-style-type: none"> - Mild sensory-motor disorders of all 4 limbs (difficulty stabilizing in standing position) - Severe motor disorders of the lower limbs (playing in a manual wheelchair or chair) - Coordination development disorders (difficulty following the ball, coordinating movements) - Neurodevelopmental disorders (compatible with speed of play and facing an opponent) - For other participant profiles: “universal accessibility” item at the end of the table.
Supervision	One teacher supervises each variant, making a total of 3 teachers for the session.

	Variant 1: Table tennis "with support"	Variant 2: "Pushing table tennis" (Innovation from EREA Toulouse-Lautrec High School)
The players	These table tennis variants are played 1 vs 1 or 2 vs 2.	
Play area	Players compete on a classic table tennis table with net.	Players compete on a table tennis table without a net
Equipment used	<ul style="list-style-type: none"> - Possibility of playing with a large ball to slow down the game - Possibility of playing with a coloured ball to make it easier to follow the trajectory.  <p>Illustration of "Pushing table tennis" at EREA Toulouse-Lautrec High School</p>	<ul style="list-style-type: none"> - Foam bars are fitted to the side edges to prevent the ball from coming out to the sides. The side foam bars allow players to play indirectly (changing the direction of the ball by playing on the foam bars) as well as directly (sending the ball directly to the back of the opponent's table). - The ball used can be of different colors and sizes to facilitate play. - The player can play by hand, with a racket or with another device to facilitate the delivery.
Scoring points	The player wins his match if he manages to win 2 sets of 11 points (with a two-point difference). The player scores a point, either by causing his opponent to foul (fault), or if his opponent does not touch the ball.	The player wins his match if he manages to win 11 points (with a two-point difference). The player scores a point either by sending the ball behind his opponent's baseline or by provoking a foul.
Start of the game	The game begins with a serve. The server behind his table sends the ball to the opponent's table by	The game begins with a serve. The server pushes the ball into the


	<p>throwing it over his table and then bouncing it off his table before it bounces off the opponent's table (see official rules).</p> <p>If the service rule is too difficult, the player may:</p> <ul style="list-style-type: none"> - send the ball directly to the opponent's table without passing through his table, - be above the table, not behind it, at the moment of engagement, - not throw the ball at the moment of delivery. 	<p>opponent's court, either through the side foam bar or directly.</p>
Rotation	Service changes every two points.	
Fouls (faults)	<p>Various fouls can result in a point being awarded to the opposing player. Among the most common faults are:</p> <ul style="list-style-type: none"> - Reaching into the opponent's court with the hand or racket when hitting the ball - Touching the net - Moving the table - Letting the ball bounce more than once on the table - Volley the ball back over the table (no bounce) - Touch the ball several times in succession - Touch the ball with your free hand 	<p>Various fouls can result in a point being awarded to the opposing player. Among the most common fouls are:</p> <ul style="list-style-type: none"> - Touching the ball twice in succession - Returning the ball to the opponent's court after first touching a side foam bar in the player's own playing area. - Bouncing the ball. - Penetrate the opponent's court with hand or racket. - Send the ball into the opponent's half before it has fully entered the player's court. - Stop the ball.
Additional rules	<p>Leaning on the table is allowed:</p> <ul style="list-style-type: none"> - The player may place one hand on the table during the game. - The player may stick to the table. 	
Universal accessibility with a	<ul style="list-style-type: none"> - The able-bodied player applies the table tennis rules (without adaptations) in variant 1 (with net). In variant 2 (without net), he pushes the ball with a racket. 	

<p>heterogeneous duo</p>	<ul style="list-style-type: none"> - Participants with a different disability profile can choose to play standing up or in a wheelchair. In variant 1, he can play quickly (net and racket). In variant 2, they can choose to play more slowly by pushing the ball (hand and side foam bars). - Adaptations related to the items "Understand rules, instructions and playing areas" and "Benefit from breaks to rest" will be offered to all, even those without neurodevelopmental disorders (see part 4B). - Participants with autism spectrum disorders can benefit from a table set apart from the rest of the group in an area with fewer sensory stimuli. A foam ball reduces noise when moving. - Blind participants should choose variant 2, in which case 2 additional small foam bars are placed at the back of the table. The space where the ball exits the table is reduced to just in front of the player.
---------------------------------	--

Variant 3: "Table tennis on the floor" (Innovation from Lycée EREA Toulouse-Lautrec)

Presentation for a designated audience, then universal accessibility

<p>Participants' profile</p>	<p>This variant is adapted to severe disorders, thus facilitating universal accessibility:</p> <ul style="list-style-type: none"> - Severe motor disorders of all 4 limbs (play in an electric wheelchair) - All other motor disorders with their various locomotor functions - All other disorders, including severe ones: "universal accessibility" item at the end of the table.
<p>Supervision</p>	<p>One teacher supervises each variant, making a total of 3 teachers for the session.</p>
<p>The players</p>	<p>Table tennis on the floor is played 1 vs. 1 or 2 vs. 2.</p>
<p>Play area</p>	<p>Players compete on a badminton court (double lines) with a median line delimiting the two camps.</p>
<p>Equipment used</p>	<ul style="list-style-type: none"> - Wooden ledges are fitted to the side edges to prevent the ball going out to the sides. They allow players to use indirect play (changing the direction of the ball by playing on the edges) as well as direct play (sending the ball directly to the back of the court).

	<ul style="list-style-type: none"> - The ball used is a swiss-ball with a diameter of between 75 cm and 90 cm. - Players can be fitted with bumper pads (foam pool frit) to prevent the ball coming into contact with the leg, in case of fragility or pain. 
<p>Scoring points</p>	<p>The player wins the game if he manages to score 11 points (with a two-point difference).</p> <p>The player scores a point either by sending the ball behind the opponent's baseline, or by provoking a foul.</p>
<p>Start of the game</p>	<p>The game begins with a serve. The server hits the ball by rolling it into the opponent's court, either over the rim or directly.</p>
<p>Rotation</p>	<p>Service changes every two points.</p>
<p>Fouls (faults)</p>	<p>Various fouls can result in a point being awarded to the opposing player. Among the most common fouls are:</p> <ul style="list-style-type: none"> - Touching the ball twice in succession - Throwing the ball back into the opponent's court after first touching a rim in the opponent's court. - Bouncing the ball - Enter the opposing team's half with the wheelchair - Put one foot on the ground or get up from your chair - Send the ball into the opponent's half before it has fully entered the player's half. - Stop the ball
<p>Universal accessibility with a heterogeneous duo</p>	<p>This variant is particularly suitable for all severe disorders, as the game is slow and simple. The ball is much larger to spot or handle. It can be hit directly with the leg or the hand.</p> <ul style="list-style-type: none"> - Participants without disabilities can play in a manual wheelchair.

	<ul style="list-style-type: none"> - Participants with other disabilities may choose to play standing up or in a manual chair, depending on their motor skills and wishes. - Participants with neurodevelopmental disorders will be able to benefit from adaptations linked to the need to “understand rules”. - Adaptations linked to the items “Understanding rules, instructions and playing areas” and “Taking breaks to rest” will be offered to all, even those without neurodevelopmental disorders (see part 4B). - Blind participants will play standing up. The pitch can have sensory markers on the ground. Alternatively, a pupil tutor can use his or her voice to indicate the boundaries of the pitch or obstacles to ensure safe movement (see adaptations linked to the need to “Find one’s bearings in space”, part 4B). The swiss-ball can be fitted with a sound system, or replaced by a smaller sound ball with a bell (see adaptations linked to the need “To follow the movements of the ball”, part 4B). The participant will have to team up with another standing player if the game is 2 vs. 2, to avoid collisions with an electric wheelchair in his field.
--	--

3-B. “Inclusive volleyball”

3-B-1. A “reverse inclusion” adaptation approach

It enables an activity adapted to pupils with limited sporting possibilities to be shared with more mobile or more active pupils, including those with no disability at all.


This reverse inclusion approach homogenizes the skills of the participants to harmonize the skills of the team. Some of the abilities of more mobile pupils are reduced, to bring them closer to those of more limited pupils. In this practice, the ability to walk is eliminated for wheelchair locomotion, generalized to all participants. The common denominator between these participants is their ability to catch a ball with their hands. **This approach homogenizes a heterogeneous group around the lowest common denominator among participants.**

Note: There will always be skill differences between participants. There will always be differences in the agility and power of the upper limbs, or in the ability to bend over. The equivalence of skills is less strict in a collective confrontation than in an individual one. It's only a question of seeking an equivalence of skills at the level of each team and not of each participant.

In this process of homogenization, a little heterogeneity in the skills of a team is necessary to energize the game. The modalities of the activity and the strategies within the team will even exploit the different potentialities of the participants. The inclusive approach (approach n°3 with the "Inclusive Library") develops this heterogeneity lever even further.

3-B-2. The rules of inclusive volleyball

"Inclusive volleyball" (Innovation from EREA Toulouse-Lautrec High School)	
Presentation for a designated audience, then universal accessibility	
Participants' profile	All participant profiles can play in the team, with all motor skills. Wheelchair motor skills are preferred, even if not necessary. Additional adaptations may be proposed to pupils (see the "universal accessibility" item at the end of the table) with: <ul style="list-style-type: none"> - a severe impairment in the development of coordination, - severe visual impairment (blindness), - autism spectrum disorders - intellectual development disorders
Supervision	At least 2 or 3 teachers supervise the activity to ensure the safety of the teams. Several matches take place simultaneously.
The teams	Inclusive volleyball is played between two teams, each consisting of 4 players, 3 on the court and one substitute.
Type of locomotion	All players are in manual or electric wheelchairs, depending on their motor profile. The standing pupil will play in a manual chair.
Court	The game is played on a rectangular pitch divided by a net/elastic under which the ball passes. The pitch is 18 meters long and 9 meters wide. A central line divides the field into two equal halves. A 3-meter zone is marked in each half, as in volleyball.

<p>Equipment used</p>	<ul style="list-style-type: none"> - The net or elastic band is placed 90cm to 1.05m high, depending on the ball (15cm between the diameter of the ball and the bottom of the net). The net or elastic band is attached to posts located 9 m apart. - The ball used is a swiss-ball with a diameter of between 75 cm and 90 cm. 
<p>Scoring points</p>	<p>A team scores a point if it manages to get the ball out of play or if an opponent commits a foul.</p> <p>The first team to reach 15 points with a minimum lead of two points wins the match.</p>
<p>Start of game</p>	<p>The game begins with a serve. The server hits the ball into his court behind the three-meter line. He tries to send the ball directly into the opponent's court. The serve must cross the net and roll into the opponent's court under the elastic/net to be valid.</p>
<p>Rally</p>	<p>After the serve, the teams have three touches to send the ball back under the net. Strikes are generally made by a combination of players. Each player may not hit the ball twice in succession.</p>
<p>Rotation</p>	<p>Players change positions clockwise when their team wins the serve. This gives each player a chance to serve and avoid any positional advantage.</p>
<p>Net play</p>	<p>Players can counter the opponent's ball directly by standing still at the moment of the counter. The counter must be sideways (wheel in contact with the ball). The counter can be made even if the ball has not completely crossed the net. Be careful not to interfere with an</p>

	<p>opponent's attempt to play the ball. It is forbidden to touch the net during play or to enter the opponent's playing area.</p> <p>Apart from on the counter, the player is not allowed to send the ball directly (on the 1st touch) into the opponent's half if he is initially located within the 3-meter zone.</p>
Fouls (faults)	<p>Various fouls can result in a point being awarded to the opposing team. Among the most common fouls are:</p> <ul style="list-style-type: none"> - Touching the ball twice in succession, - More than 3 touches per team to send the ball back to the opposing team, - Throwing the ball directly back into the opponent's half from the 3m zone (with the exception of counter-attacks), - Carrying, lifting or bouncing the ball, - Place one foot on the ground or lift the buttocks off the chair when the ball is struck, - Reach into the opponent's half (front wheels or footrest) during or after the shot, - Touching the post, elastic band or any external element, - Send the ball into the opponent's half before it has completely crossed the net.
Replacements	<p>Substitutions can be made freely, with players entering and leaving the game as they please, respecting the procedures.</p>
Additional rules	<p>If the ball is released by a partner, it can be recovered and put back into play.</p>
Universal accessibility for a heterogeneous team	<ul style="list-style-type: none"> - For pupils in wheelchairs, a foam fry can be positioned to act as a bumper, protecting legs and knees. - Participants with other disabilities play in a manual or electric wheelchair, depending on the motor skills of their upper limbs. - Adaptations linked to the items "Understanding rules, instructions and playing areas" and "Taking breaks to rest" will be offered to all, even those without neurodevelopmental disorders (see part 4B).

	<p>The strategic interest of the game lies in the heterogeneity of the participants, so we can propose even more complementarity in the team:</p> <ul style="list-style-type: none"> - If a participant can walk but is unable to manipulate the chair (due to sensory-motor or coordination development problems), he or she can play standing up, kicking the ball with his or her feet. - Blind participants can play standing up, with additional adaptations. Sensory cues on the floor, a sound ball with a bell and the help of a pupil tutor can be suggested. The tutor guides the blind participant to catch the ball without going out of bounds and avoiding collisions with others (see adaptations related to the need "Locating oneself in space" and "Following the ball's movements", part 4B). - Participants with autism spectrum disorders can play standing up, with the help of a pupil tutor for guidance and reassurance. - A pupil tutor will also help the participant with an intellectual development disorder to choose the right strategy and follow the rules.
--	--

3-C. "Inclusive Tèque", a kind of inclusive baseball

3-C-1. An inclusive approach that enables a heterogeneous group to practice together.

The aim is to enable heterogeneous abilities to coexist within the same activity. This implies adapting the activity in terms of modalities, spaces and equipment so that they are common to all.

In an inclusive individual game, **adaptations are made to reduce the skills gap** (e.g. gripping assistance for archery, or locomotion), while sharing the same action, the same space and the same equipment. In the context of a team game, **this approach exploits the heterogeneity of participants to the benefit of their complementarity, with an equivalence of skills between teams.**

Note: There may be a categorization of participant profiles within each team. These profiles then become part of the rules of the game, and even define their scope of


action. This complexity of rules brings strategic and collaborative challenges to the collective game.

Team members with more limited abilities can be given a dedicated space or a simpler route within the collective game space to balance their skills with those of the other players, or to avoid collisions.

3-C-2. The rules of the “Inclusive Tèque”

<p align="center">The “Inclusive Tèque” (an innovation from the EREA Toulouse-Lautrec High School)</p> <p align="center">Presentation for a designated audience, then universal accessibility</p>	
Participants’ profile	<p>All participant profiles can play in the team. All motor skills are possible, whether standing, using a walker or cane, or in a manual or electric wheelchair.</p> <p>Additional accommodations may be offered to pupils who cannot throw a ball or catch it with their hands, or to pupils with blindness, autism spectrum disorders or intellectual development disorders (see the “universal accessibility” item at the end of the table).</p>
Supervision	A minimum of 2 to 3 teachers supervise the activity, to ensure safe movement and help with throwing the ball.
The teams	<p>Tèque is played between two teams of a maximum of 11 players each.</p> <p>Motor skills can be very different.</p>
Type of locomotion	Players move around according to their motor skills (manual wheelchair, electric wheelchair, walker, standing...).
Court	The game takes place in an undefined playing area, with the exception of the rear area behind the batsman, which is considered offside.
Equipment used	<ul style="list-style-type: none"> - The ball to be sent by the attackers into the playing area is a foam ball with the diameter of a tennis ball, so that it can fit under a manual or electric wheelchair (between 6.3 and 6.6 cm in diameter). - To hit the ball, the attacker can use a bat, racket, hand or gutter.

	<ul style="list-style-type: none"> - The bases used are 1 m squares delimited by studs/cups. 2 circuits (short circuit for slow learners and long circuit for fast learners) are formed using 4 bases, one of which is common to both circuits (the one representing both the beginning and the end).
Scoring points	<p>The attacking team scores points when an attacker manages to circle all 4 bases without being eliminated by the defense. He scores 3 points for his team if he circles all 4 bases once, and 1 point if he does so several times.</p>
Start of the game	<p>The game begins with an attacker striking the ball into the playing area (the attacker strikes the ball sent by a throwing partner located next to him).</p>
Rallye	<ul style="list-style-type: none"> - After sending the ball, the attacker must move from one base to another until he returns to the starting point without being eliminated (he can do this on the first try: after his throw or in several stages thanks to his partners' sends). - He may return to the previous base provided it is not occupied by a partner. - In defense, players must organize themselves (receiving the ball, passing, etc.) to recover the ball and then pass it under a partner's chair in order to eliminate an attacker.
Rotation	<p>Players switch roles (attack/defend) once all attackers have passed through.</p>
Fouls (faults)	<p>The defense commits a foul if it hinders the attacker by blocking a base (defenders must not park in front of a base) or the path taken by the attacker to get to the base. If a player is blocked twice, the offending defender receives a temporary exclusion.</p>
Elimination	<p>An attacker is eliminated if:</p> <ul style="list-style-type: none"> - He fails to send the ball into the playing area after 3 attempts - A defender swallows (ball caught directly) the ball sent into the playing area by the attacker - He is touched by a defender (ball in hand) before reaching a base. - The ball comes out the back of a defender's chair before it reaches a base. Depending on the level of play, defenders will have to pass the ball under one or more pupils in wheelchairs.

	
<p>Replacements</p>	<p>Substitutions may be made freely, with players entering and leaving the game as they please, provided that the appropriate substitution procedures are followed.</p>
<p>Universal accessibility for a very diverse team</p>	<p>The strategic interest of the game lies in the heterogeneity of the participants, so we can offer even more variations of the activity and the help of a tutor:</p> <ul style="list-style-type: none"> - The able-bodied, standing participant will complete the long circuit. He or she can tutor a pupil. - To help catch the ball, the pupil can intercept it with his knees (with or without a scratch surface). If standing, he can use a scratch racket. - To help throw the ball, it can be made lighter or larger. It can also be thrown directly by hand or with a concave baseball glove or Pasaka glove (for a Basque pelota game). A tutor can also throw the ball, following the force and direction indications of a friend with upper-limb problems. - Adaptations related to the items "Understanding rules, instructions and playing areas" and "Taking breaks to rest" will be offered to all participants, even those without neurodevelopmental disorders (see part 4B). - Participants with impaired visual function will play standing with colored visual cues, sensory cues on the floor and a foam sound ball. When playing as a defender, he or she can place the caught ball on the floor, and a wheelchair user will come over to eliminate the attacker. - The blind pupil will need the help of a pupil tutor who will guide him/her by voice to catch the ball and throw it. The tutor will guide his fellow pupil by the arm to run the shortest circuit safely (see adaptations related to the need "To find one's bearings in space" and "To follow the movements of the ball", part 4B).

	<ul style="list-style-type: none">- A pupil tutor will also help the participant with an intellectual development disorder to choose the right strategy and follow the rules.
--	---

Part 4: Protocols for the medical and special educational needs of all pupils

4-A. From medical needs to a “preventive sports safety protocol”

A “preventive sports safety protocol” is based on medical recommendations (medical certificate) linked to pupils’ disorders. To help teachers, **we have grouped the medical recommendations into 8 needs related to sports practice.**

A proposal for a “Preventive sports safety protocol”:

1. Move around with locomotion adapted to the nature of the activity (type of movement preferred or occasional movement);

2. Limit the risks associated with:

- physical mobilization and friction (pain of all kinds, including headaches, skin fragility),
- shocks (bone fragility, risk of haemorrhage, fragility or loss of medical equipment, loss of wheelchair control),
- sudden or violent movements (joint fragility, balance problems),
- sustained exertion (respiratory problems, blood sugar problems, allergies),
- outdoor activity (sensitivity to cold);
- swimming pool activities (risk of drowning due to lack of strength or coordination, allergies).

3. Facilitating prehension with customizable devices (motor disorders of the upper limbs) ;

4. Enhance sensory perception (visual, auditory, sensitivity and balance disorders);

5. Helping to understand instructions (cognitive difficulties, including attention and memory);

6. Provide additional spatial references (visual-spatial difficulties);

7. Help with task maintenance by allowing breaks, a change of activity or tutoring by a peer (fatigue, attentional difficulties, autism spectrum disorders);

8. Take individual charge of the consequences of a specific contraindication.

Note: All these needs are present in the 3 proposed practices, except those related to the risks associated with outdoor and pool activities.

The reactive sports safety protocol

Rapid, even urgent, medical attention is needed in the event of an accident or illness: injury, anaphylaxis, blood sugar or endocrine problems, heart problems or pain.

Ideally, there should be medical and paramedical staff nearby with the necessary emergency equipment. Failing that, a complete emergency kit and an automatic external defibrillator are needed nearby. With specific training and the necessary authorisations, you can also have a manual mucus aspirator, or even a BAVU (self-filling balloon with one-way valve) insufflator.

A wired telephone in the gymnasium is safer. In all cases, at least two supervisors must be present throughout the activity. They will take it in turns to ensure safety during practice. They will also be able to take turns in the event of an accident, to deal with the emergency and ensure the safety of all the participants.

4-B. From special educational needs to an adaptation protocol for all pupils

4-B-1. To establish the universal accessibility of practices, we need to define the disorders concerned and give them an acronym:

Disability Disorders	/ Description of disorders	Acronym
----------------------	----------------------------	---------

Motor disorders	From lack of balance and precision to paralysis of all 4 limbs, swallowing and breathing.	MD
Visual impairment	From sensitivity to light, limitation of visual precision or visual field, to blindness	VI
Hearing impairment	from limited perception (some frequencies) to deafness, with or without hearing aids	HI
Neurodevelopmental disorders	Coordination acquisition disorders Specific language and learning disorders (written language disorders, logical-mathematical disorders) Oral language disorders Attention deficit disorder without (ADD) or with hyperactivity (ADHD) Autism spectrum disorders Intellectual development disorders (mild to severe)	CAD SLLD OLD ADD- ADHD ASD IDD
Other mental disorders	Anxiety, depressive, bipolar, addictive, bipolar, schizophrenic, post-traumatic disorders, etc.	OMD

4-B-2. Protocol for adapting sports activities to all pupils

We now propose a grid that takes these medical needs and develops them into special educational needs.

The table shows that a particular educational need can correspond to several disabilities. The same adaptation can help a variety of pupil profiles.

Note: Each special educational need is matched by an adaptation for sporting activities:

1 "table tennis", 2 "inclusive volleyball" or 3 "inclusive Tèque".

Pupils with ASD have a wide range of needs and can benefit from all the adaptations mentioned.

Special Educational Needs & Disabilities	Adaptations (methods, spaces, equipment)	Sports (1, 2, 3)
Handling objects MD / CAD VI / ASD	Support for holding equipment Straps for holding an object with the hand or chest	1,3
	Concave leather glove , Pasaka or Rebot (Basque pelota game) type, or baseball-type glove to catch the ball more easily.	3
	Larger or lighter equipment depending on difficulty	1, 2, 3
	Using the body rather than an object (hand, torso)	1
	Using the wheelchair rather than the arms to catch	3
	Using the chair rather than the legs to strike	2
	Side bars to prevent the ball escaping from all sides	1
Stabilising in a standing position MD / CAD / VI / ASD / IDD	Hand or hip can be supported on a stand	1
	Standing stabilisation equipment (walkers, canes)	1, 3
	Larger equipment for easier interception	1, 2, 3
	Limiting movement to prevent falls and speed up play	3
Follow the movements of the ball MD / CAD ADD-ADHD ASD IDD	Coloured or larger ball for better visibility	1, 2, 3
	Limited playing area to restrict the range of movement of the ball	1
	Slower play with soft equipment (soft racket, foam ball) to give you time to follow your movements.	1, 2
	Large swiss-ball for easier viewing, slower play and less impact on the legs	1, 2
	Sound ball with a bell to hear the ball coming towards you or go to meet it	1, 2, 3
	Guidance from a pupil tutor to locate the ball	2, 3
Flashing lights to define a space	2	
Finding your bearings in space	Areas marked out with bright, varied colours: - on the ground (coloured Gaffer tape to make lines on the ground)	1, 2, 3 2

CAD ADD-ADHD VI ASD IDD	- vertically (coloured sheets taped with Gaffer tape to the wall or hung on supports to colour one side of the pitch, the goals).	
	Spaces delimited by side bars	1
	Pedometer strips (stuck to the ground with Gaffer tape during the activity) to feel the boundaries of the pitch with your feet	2
	Identify an individual playing area with the help of a pupil tutor to identify the boundaries of the pitch and move around safely on their own	2
	Reducing the playing area or course to get a better idea of it	3
	Guidance by voice or arm from a pupil tutor to help locate the ball and the participants, to help with complex movements and reduce the risk of collisions between participants	1, 2, 3
	Slower play (soft equipment or adapted game rules)	1, 2
Move around with limited motor skills, with a stake or without leg movement MD / IDD	Limiting the play area or route to reduce travel time and motor fatigue	2, 3
	Using a walker, cane or balance bike Playing sitting on a chair Using a manual wheelchair: - standard model with anti-tilt device (to avoid falling backwards) - sports model (to turn faster)	1, 2, 3
Moving around without leg movement and little arm movement MD / CAD	Moving around in an electric wheelchair: - with a metal bumper in front of the feet as part of the Foot Fauteuil (Strike force chair)	1,2
	- with a protective foam bar for the knees in the event of hitting a large ball or physical contact	1, 2
	- a remote control for the chair adapted to the motor skills of the arms (joysticks and buttons, touch pad)	1, 2, 3
Understanding rules,	Simple, few or fragmented instructions	1, 2, 3
	Mimed instructions, illustrated with pictograms	1, 2, 3
	Instructions with illustrated words in sign language	1, 2, 3

instructions and playing areas CAD / VI / HI SLLD / OLD / ADD-ADHD ASD / IDD / OMD	Instructions explained orally and mimed with the pupil making all the movements and gestures	2, 3
	Areas marked out and identified with bright and varied colours on the ground (Gaffer tape or coloured studs)	2, 3
Benefit from breaks to rest CAD / VI / ADD-ADHD ASD / IDD / OMD	Change of role in the game (refereeing, tutoring) to take a physical, cognitive, sensory or emotional break	1, 2, 3
	Change of activity to a simpler activity for physical or cognitive rest	1, 2, 3
	A rest area on carpets in a corner away from the noise and bustle, for sensory or emotional relaxation.	1, 2, 3






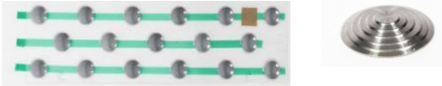
Analysing by special educational needs, not by disability, helps to design a sport that is universally accessible.


4-C. Complementary equipment to facilitate universal accessibility

The aim is to be able to use effective, mobile sensory markers to adapt quickly to activities:

- Visually identify the boundaries of the pitch with a bright colour,
- Visually identify different areas of play with colours to help understand the rules,
- Perceive the boundaries of the pitch with your feet using pedometer strips.

A ideal tool is Gaffer tape, which is easy to apply and remove, and safe (designed for the stage). Gaffer tape can be coloured and used to cover the pedometer strips, securing them in place temporarily.

<p>Coloured Gaffer tape (5 cm wide)</p>					 <p>Orientation aids in strips</p>
<p>Gaffer tape extra large (10 cm wide)</p>				 <p>Orientation aid strips in studs</p>	

	<p>Bell sound balls come in all sizes. For the Tèque, you can cut a slit in a foam ball and slide in little bells enclosed in a plastic mini-box. Alternatively, small foam balls with bells (e.g. Bell foamball) or velvet toy balls are available.</p>
	<p>The PASAKA or REBOT leather glove comes from ancestral Basque sporting practices, played with a pelota. It can be made by gluing a cardboard or plastic cup to a leather glove. Alternatively, a baseball glove can be used. It can be lengthened to make it more effective.</p>
	<p>The swiss-ball doesn't make any sound, but you can manage to slip miniature balls inside. Alternatively, you can create an outer cover and slip a crumpled piece of paper inside and around it, which makes a lot of noise.</p>
	<p>Memory foam sticks/noodles can be used to create bumpers on armchairs to protect the legs.</p>

Best Practice in France #4

Circus Arts

Key words. Please insert 3 to 5 key words that best describe the best practice

1. Adapted circus ; 2. Social participation ; 3. Creativity ; 4. Structured education ; 5. Universal concept of learning.

1. Type of Disability

Please describe the type of disability that this practice is focused on. If there is an official definition of the disability in European or National documents please provide it.

Special needs pupils profile:

Pupils with neurodevelopmental disorders (NDD), including autism spectrum disorders (ASD).

- Neurodevelopmental disorders are "a group of conditions with onset in the developmental period. The disorders typically manifest early in development, often before the child enters grade school, and are characterized by developmental deficits that produce impairments of personal, social, academic, or occupational functioning" (DSM-5, 2013).
- Autism spectrum disorder is characterised by persistent deficits in the ability to initiate and to sustain reciprocal social interaction and social communication, and by a range of restricted, repetitive, and inflexible patterns of behaviour, interests or activities that are clearly atypical or excessive for the individual's age and sociocultural context (DSM-5, 2013).

Sources:

- American Psychiatric Association, American Psychiatric Association, & DSM-5 Task Force. (2013). *Diagnostic and statistical manual of mental*

disorders: DSM-5. American Psychiatric Publishing.

2. Organization & Reference

If applicable: Official data of organization, school, club etc. (name, address, email). Please give references such as internet source, homepage etc.

- Circus disciplines experienced a major upheaval in the 70s. The "new" circus, focused on artistic creation, leaving behind the classic model, also known as traditional, which was more focused on performance (Fagot, 2006). The process of "artification" (Shapiro, 2007; Sizorn, 2014) to which the circus was subjected since the 1970s highlights the transition of these disciplines from a practice centred on performance to **a practice more focused on creation and emotion**. In 1978, when the circus was transferred from the Ministry of Agriculture to the Ministry of Cultural Affairs, it became a cultural issue.
- On the other hand, circus activities that had been built around the equestrian art gradually lost interest in animal training (Fagot, 2006) for animal protection.
- Professional and amateur circus schools began to spring up for the general public, whereas in the past circus techniques were transmitted from generation to generation.
- Finally, in the 90s, the circus arts were introduced into schools and taught by sports teachers.
- Today, **the circus arts remain at the crossroads between artistic and sporting activities**. They can be taught at school or in circus schools for amateurs.

References:

- Fagot, S. (2006). *Le cirque : entre culture du corps et culture du risque*. Paris, l'Harmattan.

- Shapiro, R. (2007). Art et changement social : l'artification. In P. Le Quéau (Ed.), *20 ans de sociologie de l'art : bilan et perspectives*, tome 1 (pp. 129-137). Paris, L'Harmattan.
- Sizorn, M. (2014). *Le cirque à l'épreuve de sa scolarisation. Artification, légitimation... normalisation ?*. Staps, 103, 23-38. <https://doi.org/10.3917/sta.103.0023>
- Zytnicki, J. (2022). Élaboration de deux ateliers cirque favorisant l'inclusion scolaire des enfants avec un TSA. *La nouvelle revue - Éducation et société inclusives*, 93, 215-227. <https://doi.org/10.3917/nresi.093.0215>

Jérémy Zytnicki : Teacher-researcher in INSEI, « Institut National Supérieur de formation et de recherche pour l'Éducation Inclusive ».
<https://www.inshea.fr>
 Co-founder and former chairman of the *Cirquonvolution* association.
Jérémie.zytnicki@inshea.fr

3. Formal/Informal

Please state if the setting refers to formal or informal education (sport clubs etc.).

Circus arts can be part of formal or non-formal education. The practice of circus arts can lead to specific diplomas: <https://www.ffec.asso.fr/se-former/devenir-initiateur-aux-arts-du-cirque/>

For circus activities in the broad sense:

- The Circus Arts Initiator's Certificate (TIAC).
- Certificat d'aptitude aux fonctions d'animateur (BAFA), options "Arts du Cirque", "arts du spectacle", etc.
- The Brevet Professionnel de la Jeunesse, de l'Éducation Populaire et du Sport (BPJEPS), "Circus Activities" option.
- Diplôme d'État de professeur de cirque (DE).

For adapted circus activities:

- Brevet d'Initiateur Spécialisé en Arts du Cirque (BISAC).

- Certificate in social circus:
<https://www.lepluspetitcirquedumonde.fr/ecole-et- formations/formations/certificat-en-cirque-social>

4. Practice summary

Describe what and how was done (regulations of the sport/game/competition/physical activity), please state the specific context of the practice and the sport(s)/game/competition involved.

There are several families of disciplines in the circus arts: **acrobatics** (often considered to be the main discipline), **aerials**, **juggling**, **balancing**, **clowning** and **prestidigitation**.

The sessions are always structured the same way in 5 stages:

1. An explicit presentation of the stages of the workshop and the objectives to be achieved. This is a particularly important time to facilitate the transitions in the workshop and avoid any anxiety that might be linked to unpredictable events. Ideally, this stage is accompanied by images representing the moments of the workshop.

2. Object discovery. This is a stage where different objects from different disciplines are shown. The aim is to enable the pupils to name these objects, find them in the space and show how they are used. Of course, the practice can also be creative. The aim of this stage is to enable pupils to make their own circus objects.

3. Warm-up and relationship games. During this stage, the warm-up is done in a ritualised way (from head to toe). Pupils can use their memory to recall the exercises that will follow. Relational games are games based on juggling disciplines. E.g. 1: Throw a ball to each other and say the first name of the person to whom you are throwing the ball. E.g. 2: We use juggling scarves to imitate others or divert them from their original purpose (e.g.: a scarf can become a napkin used by a waiter in a restaurant, etc.). E.g. 3: In a circle, pass a spinning plate from hand to hand without dropping it.

4. Choosing and practising the discipline. Pupils are encouraged to practise a circus discipline involving juggling, balancing, acrobatics, aerial acrobatics

(if the hall is equipped with this facility), etc. Depending on the number of activity leaders, choices may be greater or lesser. It is also possible to offer pupils a route or to rotate every 5 minutes; for example, that they can try out all the workshops.

5. Assessment. Pupils are invited to express what they felt during the activity, and what they achieved. This stage encourages reflexivity and metacognition.

While these 5 stages are the basic model for these workshops, they must remain flexible and open; leaders must be open to new arrangements depending on the group of pupils.

5. Variations implemented

Please state any kind of useful variations (e.g., concerning settings, age of participants, types of disabilities and adaptations to other sports) of the practice.

Adaptations:

- These workshops are based on the principle of educational methods developed for people with autism spectrum disorders, in particular structured education, more commonly known as the TEACCH method (Treatment and Education of Autistic and related Communication Handicapped Children). Structured education involves structuring time and space to make it easier for pupils to get information. It involves freeing up the space from instruments that are unnecessary for the exercise, allowing pupils to see the whole gym, and adding visual cues such as pictures, arrows or colours.
- A timetable with images of the activity is also provided and can be seen throughout the activity, to anticipate any anxiety linked to transitions.
- What is essential in each workshop is that pupils are able to discover and practise different circus disciplines; to practise disciplines that allow them to explore multiple motor sensations (vestibular,

proprioceptive, etc.); and finally that they are able to take part in collective workshops based around the circus arts, so that they can experience a moment of participation in social life.

6. People involved

Please state organizations and people involved, provide types of disabilities participated in this specific good/best practice. If applicable, be concrete about the different roles of the people involved.

This workshop was designed and produced by the *Cirquonvolution* association from 2011 onwards, particularly in the context of institutions, but the "adapted" or "specialised" circus (Lantz, 2017) exists since the 1990s (*Ibid.*). Since then, it has spread to many French circus schools, but rarely in a truly inclusive way. Institutions travel often during the day to practice circus arts.

References:

- Lantz, E. (2017). Monde du cirque et monde médico-social: connivences et ambivalences. *Sciences sociales et sport*, 10, 113-140.
<https://doi.org/10.3917/rsss.010.0113>
<https://www.ffec.asso.fr/pratiquer-les-arts-du-cirque/cirque-adapte/>

7. National guidelines adopted

Please refer to the national guidelines that are met through the practice. Give basic legislation frameworks that can help teachers understand their legal-driven responsibilities towards their students.

- The 2005 law on equal rights and opportunities, participation and citizenship for people with disabilities strengthened accessibility and inclusion for people with disabilities. In particular, it introduced new measures such as the Disability Compensation Scheme (Prestation de Compensation du Handicap), which covers the costs associated with disability, as well as the obligation to provide access and education.

<https://www.legifrance.gouv.fr/loda/id/JORFTEXT000000809647>

- Recommendation from the French National Authority for Health for working with people with autism spectrum disorders and ensuring greater safety. https://www.has-sante.fr/upload/docs/application/pdf/2018-02/trouble_du_spectre_de_lautisme_de_lenfant_et_ladolescent_recommandations.pdf
- Vademecum: Certification complémentaire arts du cirque. <https://eduscol.education.fr/document/45343/download>
- Circular n° 2017-003 du 10-5-2017: Developing an ambitious policy for artistic and cultural education, at all stages of children's and teenagers' lives. <https://www.education.gouv.fr/bo/17/Hebdo24/MCCB1712769C.htm>
- Circular of 16-3-2022: Creation of a circus arts option in the arts sector. <https://www.education.gouv.fr/bo/22/Hebdo15/MENH2208254C.htm>
- Fédération Française des Écoles de Cirque (FFEC): <https://www.ffec.asso.fr/>
- All texts relating to the collective reception of minors: <https://www.jeunes.gouv.fr/organisateurs-ce-qu-il-faut-savoir-sur-les-accueils-collectifs-de-mineurs-217>

8. Implications for teachers/practitioners etc.

Please write any useful implications (what teachers/coaches/physical educators should take into account: safety considerations, equipment needed, support needed) that the practice might have. This may include focal points of the types of disabilities included and how these points were addressed, in terms of the participation in sports.

Circus activities can be practised in circus schools, but also in schools and specialised institutions. There are different levels of supervision, both human and material.

Human supervision:

- In specialised institutions, educators are trained to support students with difficulties and can help the circus teachers during the workshop.
- In circus schools, it depends on whether the workshop is inclusive or not. If it is inclusive, it does not really require any additional adaptation, apart from the circus teacher's knowledge of the specific characteristics of the pupil with an ASD. In this case, it is absolutely essential to listen carefully to what parents have to say. If the workshop is not inclusive, pupils are generally accompanied by specialised educators with other pupils from the institution. These classes generally take place in the afternoon at the circus school. Adaptations are then made according to the special needs of the pupils.
- In schools, sports teachers may be alone or accompanied by an "Accompagnant des Élèves en Situation de Handicap" (AESH), a professional who supports pupils with disabilities in schools.

Equipment:

- The courses offered in specialised institutions generally do not allow the full range of circus activities to be explored. The classrooms are not always suitable or equipped, which involves a real preparation in advance if the instructor wants to structure the place and the space where the activity takes place. The instructor must also prepare the equipment he or she intends to bring with him or her and the equipment he or she wishes to leave between sessions.
- The courses offered at a circus school make it easier to prepare the instructors who are already on site, such as all the protections, nets, mats (hard or soft, etc.), etc.
- In schools, the differences are particularly significant, it depends on whether or not the school has chosen to invest in specific equipment.

9. Innovative resources, materials, methods etc. used

Please refer to the resources, materials, methods etc. have been employed. Strategies for creating an inclusive environment, prioritizing

accommodations for students with disabilities, forming/refining accessible facilities, equipment, and assistive technology. Please include techniques for adapting sports activities to meet the needs of students with disabilities, such as modified rules, specialized equipment and assistive devices.

- Use of time and space structuring.
- Use of images to facilitate communication and the expression of choices (choice boards with several images) with non-verbal pupils, to clarify instructions, but also to help pupils take ownership the different circus disciplines.
- The images help them to visualise the exercises and associate the images with the words.
- Other images which shows people in action in different disciplines are also used, as well as demonstrations by the instructors.

These different arrangements, which contribute to the inclusion of pupils with autism spectrum disorders at school, benefit to all young people, according to the Universal Design for Learning. What can be useful for pupils with autism spectrum disorders can also be useful for other pupils.

10. Communication and collaboration strategies

If applicable, describe strategies for collaborating with other educators, parents, and students to ensure that everyone is working together to create an inclusive environment.

Circus instructors have little contact with parents. However, they work very closely with specialised educators, psychomotor therapists and teachers. Educators ensure the safety of the pupils during the exchanges, but also during the circus activities. They can also practice in order to better understand the different sensations provided by the circus disciplines.

11. Evaluation and/or reflection methods

If applicable, state how teachers planned to know, to what extent basic goals were met. That is, give any kind of evaluation practices, self-reflection methods, forms of data collection, post-event documentations and follow-ups. Also, report any positive feedback and reinforcement given to students with and without disabilities to encourage and motivate them to continue participating in sports.

ASSESSMENT:

- Integration into the group and social participation.
- Recognition of objects and their use from one session to another.
- Creativity based on the objects used.
- Agree to try new disciplines where sensory experiences are not necessarily usual.
- Progress in the disciplines: learning the techniques of juggling, balancing, acrobatics, etc.

12. Training pathway for teachers for integrating this good practice

Please provide 5 to 15 practical tips to teachers of sports for implementing the proposed good practice. Ensure that tips: 1. refer both to formal and informal settings 2. contribute to the awareness of educators for the needs of students with disabilities 3. take into account the environmental/architectural and attitudinal barriers (such as inaccessible sport spaces, equipment needed, support provided), 4. provide individualized adaptations 5. Provide social and emotional support by encouraging social interaction and peer support 6. Provide positive reinforcement to motivate them to continue participating in sports and to develop their skills and abilities.

- Adapt to each pupil.
- Suggest exercises without imposing them.
- Use multimodality to help pupils understand the instructions: visual (pictures, showing the exercise to pupils, pointing, etc.),

auditory, facilitate tactile exploration of the different objects used during the circus workshops (juggling equipment, balancing equipment, bouncing equipment such as the trampoline, etc.).

- Explain transitions verbally or by showing images to avoid transitions that are too abrupt.
- Adapt language: more concise, sometimes slower.
- Structure space and time.
- During inclusive activities, explain to all the pupils the use of pictures, timetables and all the objects used.