

SOCIAL INTEGRATION OF CHILDREN WITH SPECIAL EDUCATIONAL NEEDS THROUGH MULTIDISCIPLINARY MEANS

STOIAN OANA¹, MINCULESCU COZETA ANCA¹, DREVE ADINA²

Abstract

Children with special educational needs (SEN) should not be discriminated against. They need movement as much as they need to have direct access to education. A change in people's perception of children with SEN is required. The idea that disability is not an attribute of the person but of the relationship between the person with a certain disability and the environment is promoted worldwide; a maladjusted environment is the one that disables the person. Therefore, if everyone manages to change their mentality and accept people with SEN, then their integration will be easier; these children will be more motivated and self-confident. This paper aims to prove that the proposed multidisciplinary (kinetic and athletic) means can improve the quality of life for children with SEN and facilitate their integration into mainstream education. The intended physical activity will aim to increase self-confidence in children with SEN by creating a socio-affective climate where they can perform all the required work tasks either independently or with the help of a third person (teacher/therapist/ caregiver). We will thus increase their motor level and contribute to preventing/combating discriminatory attitudes towards children with SEN, trying to remove barriers in the field of Education and Training, which is one of the eight areas in the European Strategy for People with Disabilities 2010-2020. The integration of children with SEN into society should be regarded with hope because they too can perform various activities by exploiting their individual motor abilities and can achieve great things, which only need to be identified.

Keywords: movement, physical therapy, special educational needs, children, athletics.

Introduction

Humans are social beings who interact with other people from the surrounding environment through communication. Since childhood, the family mediates interpersonal relationships between the child and strangers but also protects the child from dangers in the surrounding world, without exaggerating. There are several styles of parental behaviour, from hyper-protective to careless ones.

Hyper-protective parents hinder the development and their children and turn them into family-dependent individuals. The overprotection offered especially by the mother will lead to raising a lonely child, deprived of the possibility to have initiative, to be independent, to manifest their own personality.

The opposite of hyper-protective parents is represented by the careless ones, who detach themselves emotionally from the child, without giving them the affection necessary for growth and development. Hypo-protectiveness is expressed by the rejection of any quality of the child.

People with special educational needs (SEN) benefit from a different social perception that varies from one society to another, depending on culture and values. Most individuals have a misconception about them, which ranges from comprehension to ignorance, as is the case with parental behaviour styles.

People with SEN need to be accepted by society so that they can lead a normal life and thus improve all aspects of their quality of life. It is imperative for all of us to accept the idea that each individual has the right to be "different".

When talking about children with SEN, we mean both people with disabilities and people without disabilities but who cannot adapt to the rigorous school requirements.

The category of people with SEN includes: children with sensory impairments (hearing, sight, etc.), children with physical disabilities, children with behavioural disorders, children with mental disabilities (Down syndrome), children with emotional disorders, children with cognition and learning difficulties, children with communication and interaction difficulties, children with associated disabilities.

The constant development of educational policies and practices has led to economic and sociocultural reforms, with an impact on human rights through the elimination of terms such as marginalisation, isolation or exclusion. This is how inclusive education has emerged and developed. It involves ensuring access to education for all children, integrating and supporting them in adapting to the school environment as beneficiaries of flexible educational practices that can highlight their learning skills and abilities. In many countries, the inclusion of children with SEN in mainstream education has become a key objective of government policies (Smith & Thomas, 2006), given that it is necessary to combat discriminatory attitudes and create a school able to meet the needs of all children.

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We believe that the education of children with SEN is essential for their group integration when performing daily or recreational activities. Significant efforts are currently being made globally and nationally to train teachers for inclusive education, as emphasised by Broomhead (2013) too, because the teacher must be able to achieve differentiated education and thus ensure quality education for all and everyone.

Istenic Starcic and Bagon (2013) claim that the use of computer-assisted learning would facilitate the inclusion and integration of children with SEN into mainstream education. Studies have shown that this method is effective and accepted by young people.

To highlight inclusive practices, Lindqvist et al. (2011) suggest that special support is needed for school inclusion, which requires a change in attitudes and the existence of cooperation between different professions to eliminate conflicts of opinion on how to work with SEN students.

Hutzler et al. (2005) cite other authors who believe that inclusion refers to reducing social barriers for children with SEN and instil the idea that it is not people with various disabilities who are preparing to integrate into a regular classroom but rather the regular classroom is preparing to integrate people with SEN.

Another important issue that needs to be addressed relates to explaining the difficulties encountered by these students in the school environment. The educational institution could get involved in supporting people with SEN by accepting all children, without making any differences between their physical condition, social condition, emotional condition, language condition or other conditions. Barriers must be removed, and people with disabilities, children from disadvantaged backgrounds, children of other ethnicities and so on must be accepted. Thus, the principle according to which all children have an equal right to education is respected.

According to the document "Education Policies for Students at Risk and Those with Disabilities in South-Eastern Europe" (OECD, 2007), in Romania, children with disabilities may enrol, depending on the level of disability, either in the special education system or the mainstream education system. Thus, children with mild disabilities, behavioural disorders, socio-emotional disorders and language or learning difficulties are integrated into mainstream schools where they can benefit from educational support services. Instead, children with sensory impairments or intellectual, motor and associated disabilities are enrolled in special schools. The Commission for Child Protection has the responsibility to identify the type and severity of a disability. Early identification of children with SEN, of the severity and type of disability leads to the rapid establishment of specialised intervention (psychological, physiotherapeutic treatment and more), which will increase their chances of success and will facilitate their access to mainstream education. If the disability is incompatible with this form of education, then the child will be included in a special education institution.

The classroom integration of children with SEN through physical activities performed in an inclusive setting causes students without special needs to become more aware of the needs of their peers (Giangreco et al., 1993).

Physical activity gives children the opportunity to know how physical education contributes to physical "literacy" by understanding the skills required to perform a task or how the environment can be manipulated for the completion of that task (Coates, 2011).

The physical education teacher is thought to teach students various skills, being the one who establishes the physical exercises without putting emphasis on the practice of particular sports but insisting on the acquisition of some skills during physical activities known to children.

Physical education aims to develop different abilities of children, to make them understand how to move depending on the environmental conditions, to make them become aware of how physical activity can influence their health status.

The involvement of teachers in physical education lessons is essential. They have to choose the most effective teaching methods meant to contribute, through specific activities, to the physical development of children, the increase of their self-confidence and the knowledge of their bodies.

In the case of children with SEN, physical education helps them increase their fitness and lose weight. They are not aware that, through the teaching-learning process, the acquired knowledge can offer them a major advantage in daily life by facilitating certain activities and thus increasing their quality of life. (Coates, 2011)

In addition to physical education, kinetic treatment has the role of intervening in psychomotor education, which is essential in the process of recovery and integration of children with SEN. Therapeutic intervention will focus on proposing specific means that can prevent, reduce and, why not, eliminate the specific manifestations of disability (be it physical, mental or other) with a view to promoting school integration.

The physical therapist will have to know the characteristics of children with SEN in order to individualise and properly dose the means, depending on each one's physical condition. The activity will be structured so that the proposed exercises/movement games develop the psychomotor skills of people with SEN: intersegmental coordination, static and dynamic balance, spatiotemporal orientation ability, etc.

In practice, the physical therapist has the responsibility to make the best decisions (related to the choice of means) in collaboration with the interdisciplinary team made up of a physician, a psychologist, etc., so that the set objectives can be fulfilled.

According to Edwards et al. (2004), the therapist-patient relationship is based on their collaboration to obtain the expected results. Successful treatment relies on communication (Klaber Moffett & Richardson, 1997). Medical history

helps the physical therapist to know the condition and the patient, and then to establish specific objectives and means in accordance with each one's characteristics.

We believe that the use of kinetic means can contribute to developing the motor background of children with SEN, which would facilitate their social integration and increase their quality of life. Kinetic treatment reduces or prevents the negative impact of the child's condition (National Institute for Health Research, 2018).

Research purpose

The paper aims to demonstrate that the proposed multidisciplinary (kinetic and athletic) means can improve the quality of life for children with SEN and can contribute to facilitating their integration into mainstream education.

We believe that the intervention through both kinetic treatment and some sport-specific means (in our case, athletic means) has implications on the growth and development of children with SEN because it can lead to an increase in their psychomotor level.

Topic Addressed

Between March and June 2021, the research was carried out at the Number 1 Singureni Secondary School, Giurgiu County, the 38 selected subjects being educated in the 6th and 7th class. During the 4 months, 2 lessons / week were carried out, in which the multidisciplinary means (kinetic and athletic) were carried out by the research participants.

The evaluation methods used are represented by:

- *the method of the bibliographic study* which consisted in consulting some bibliographic materials to guide us in the research process;

- *the observation method* aimed at the subjective evaluation of the motor behavior of the researched students, at the moment of applying the multidisciplinary means (kinetic and athletic);

- *the survey method* by which we collect the information from the participants with the help of the opinion questionnaire. It was applied at the end of the activity and included 10 questions to highlight certain areas of quality of life (self-esteem, health, learning and creativity), in order to highlight the physical effects on subjects;

- *the graphic method* consists in making diagrams that highlight the answers obtained to the questions of the opinion questionnaire;

- *the method of processing, analysis and interpretation of the data* collected following the application of interdisciplinary means and the opinion questionnaire, aims to draw conclusions.

For the integration of children with SEN, we propose the application of kinetic means consisting of the following exercises/games:

1. Balance development exercise

Social valence: develops dynamic balance.

Description: from standing, students will travel (walk) along a 3-m line drawn on the ground.

Work formations: individual or in tandem (child-physical therapist)

Methodological indications: the movement can be performed with the eyes open or closed.

Material resources: physiotherapy room/gym, coloured chalk

2. Muscle toning exercise

Social valence: improves muscle tone of the lower limbs.

Description: from standing, students will perform squats.

Work formations: in pairs

Methodological indications: standing back-to-back and holding each other's bent elbows

Material resources: physiotherapy room/gym

3. Balance development exercise

Social valence: develops static balance.

Description: from sitting on the Bobath ball, students will maintain the position.

Work formations: in pairs

Methodological indications: standing face-to-face

Material resources: physiotherapy room/gym, Bobath ball

4. Game: find the object/toy

Social valence: develops attention and spatiotemporal orientation ability.

Description: within a predetermined time (1-2 minutes), each child tries to find the object/ toy.

Work formations: in pairs

Methodological indications: the student looking for the object/toy will keep their eyes closed and will be guided by another child.

Material resources: physiotherapy room/gym, ball, toy, etc.

5. Balance development exercise

Social valence: develops dynamic balance.

Description: from standing, students will travel (walk) on the bench.

Work formations: individual or in tandem (child-physical therapist) (for the child's safety)

Methodological indications: the movement can be performed on the wide or narrow side of the bench, depending on each student's specific characteristics.

Material resources: physiotherapy room/gym, bench

6. Game: frog race

Social valence: improves muscle tone and general motor skills.

Description: the movement will be performed by a straight jump from squat to squat.

Work formations: in pairs

Methodological indications: the proposed means can be applied as a 5-m race.

Material resources: physiotherapy room/gym

7. Game: look for the paired box

Social valence: ensures sensory stimulation and develops attention.

Description: from sitting, students must discover the paired box listening to the sound made when shaking it.

Work formations: individual

Methodological indications: boxes may contain peppercorns, beans, coins, pebbles, etc.

Material resources: physiotherapy room/gym, cardboard or plastic boxes with different items inside them

8. Paravertebral muscle toning exercise

Social valence: increases paravertebral muscle tone.

Description: maintaining (for 5-10 seconds) the prone position with elbow support and trunk extension

Work formations: individual

Methodological indications: the position that has to be maintained for 5-10 seconds can be identified with that of the "sphinx".

Material resources: physiotherapy room/gym, mattress

9. Abdominal muscle toning exercise

Social valence: increases abdominal muscle tone.

Description: from the supine position, students will perform the trunk-on-pelvis flexion.

Work formations: individual or in pairs

Methodological indications: the trunk-on-pelvis flexion can be amplified by anterior flexion movements of the upper limbs (at shoulder level). If the exercise is done in pairs, students will stand facing each other and holding their hands.

Material resources: physiotherapy room/gym, mattress

10. Muscle toning exercise

Social valence: increases overall muscle tone.

Description: from the prone position, students will crawl on the bench.

Work formations: individual

Methodological indications: to tone the lower limb muscles, they will be maintained in extension at the hip joint so as not to touch the support surface.

Material resources: physiotherapy room/gym, bench

11. Abdominal muscle toning exercise

Social valence: increases abdominal muscle tone.

Description: from sitting, students will perform the trunk-on-pelvis flexion.

Work formations: in pairs

Methodological indications: students will perform the trunk-on-pelvis flexion while standing with their backs to each other, keeping their upper limbs flexed at 180 degrees and holding each other's hands.

Material resources: physiotherapy room/gym, mattress

12. Game: keep me in the air!

Social valence: increases respiratory capacity.

Description: from standing, students will travel across the physiotherapy room/gym keeping a balloon in the air (without touching the ground) by blowing/exhaling.

Work formations: individual or in pairs

Methodological indications: the balloon will be kept in the air by exhaling, without touching it with the hand. If the game is played in pairs, the balloon will be directed from one student to another.

Material resources: physiotherapy room/gym, balloon

13. Exercise for correct postural awareness

Social valence: raises awareness of the correct body posture and self-confidence.

Description: from standing, students will travel (walk) with a book on their heads.

Work formations: individual

Methodological indications: performing the exercise in front of a mirror

Material resources: physiotherapy room/gym, book, mirror

14. Balance exercise

Social valence: develops static and/or dynamic balance.

Description: from standing, students will try to maintain their position on the tennis balls placed under their feet or while travelling (walking) by stepping on a tennis ball.

Work formations: in tandem (child-physical therapist) or in pairs

Methodological indications: a student or the physical therapist will provide the necessary support.

Material resources: physiotherapy room/gym, 2 tennis balls

15. Muscle toning exercise

Social valence: increases overall muscle tone.

Description: from standing, students will travel (walk) while performing the thigh-on-pelvis flexion and knee flexion at each step.

Work formations: in tandem (child-physical therapist) or in pairs

Methodological indications: maintaining the correct physiological posture

Material resources: physiotherapy room/gym

To facilitate the integration of children with SEN, we propose the following athletic means:

1. Game: touch me!

Social valence: ensures knowledge of the workspace and physical support to perform sports tasks.

Description: within a predetermined time (1-2 minutes), each child runs to touch an object/ each object in the gym (trashcan, the lower/upper step of wall bars, volleyball/basketball poles, etc.).

Work formations: individual or in pairs (possibly 3-4 each) if working with a large group

Methodological indications: the apparent chaos is organised; students start from the sitting position, and the timer is stopped when the last child has returned to their initial place.

Material resources: gym equipped with wall bars, benches, etc.

2. Game: touch and go!

Social valence: provides physical support for sports tasks and a cheerful atmosphere.

Description: students run at an easy pace while keeping the initial distance and, on the teacher's signal, the back child tries to catch/touch the front child.

Work formations: in pairs

Methodological indications: the front student can change (frequently) the direction; on teacher's signal, the roles are reversed.

3. Game: stone-paper-scissors

Social valence: develops attention and provides physical support to perform sports tasks.

Description: two students simultaneously imitate with their hands either a fist, an open palm or scissors (by extending their index and middle fingers); if both players make the same gesture, they will repeat until their gestures differ. Given that the stone can break the scissors, it will win if these two gestures have been made; if the two players have imitated scissors and paper, the scissors will win because they can cut the paper; if the two children have imitated stone and paper, the paper will win because it can wrap the stone. When the gestures differ, the winner tries not to get caught over a distance of 10 m.

Work formations: in pairs

Methodological indications: the starting positions can alternate: standing face-to-face, standing back-to-back and making the gestures sideways, lying prone, squatting face-to-face, sitting with knees extended, feet against feet.

Material resources: sports field/gym

4. Game: hello M!

Social valence: develops the spirit of fellowship.

Description: from facial support with knees extended, students "say hello" to each other by touching in turn their palms rhythmically.

Work formations: in pairs

Methodological indications: the difficulty increases if the face and back of the palm are also touched or if one foot is held high off the ground.

Material resources: sports field

5. Game: hello P!

Social valence: develops the spirit of collaboration.

Description: from sitting, students move to backward support on their palms and a heel with the knees extended, then they touch in turn the inner/outer malleolus of their free leg.

Work formations: in pairs

Methodological indications: the difficulty increases if additional touches (tip-heel) are used.

Material resources: sports field

6. Game: jump with me!

Social valence: develops the spirit of collaboration.

Description: from squatting face-to-face, vertical jump and touching the partner's palms in the air

Work formations: in pairs

Methodological indications: palms can be touched high above the head or at chest level.

Material resources: sports field

7. Game: both at once!

Social valence: develops the spirit of collaboration.

Description: from lying sideways with support on one forearm and the outer foot, legs are set apart in the frontal plane while students keep balance by pushing into their joined hands.

Work formations: in pairs

Methodological indications: at the end of the game, each one can push into the other's hand, trying to unbalance their partner.

Material resources: sports field

8. Game: both at once!

Social valence: develops the spirit of collaboration.

Description: from lying face-to-face with knees bent and feet intertwined with those of the partner, students lift their trunks while slapping the four palms at chest level.

Work formations: in pairs

Methodological indications: for the oblique muscle development, the trunk will be lifted by slightly twisting the shoulders and slapping the palms sideways.

Material resources: sports field

9. Game: "conveyor belt"

Social valence: develops the spirit of teamwork.

Description: players are divided into teams of 6-10 students arranged in a row and adopt the sitting position with two-hand support on the ground. The first player in each team receives a ball, grabs it with their ankles and then performs a back roll to send it to the child behind them, who will also grab it with their ankles. The ball is thus transmitted to the last player, who runs with it in front of the team. The fastest team wins the game.

Work formations: 6-10 in a row

Methodological indications: passing the ball to teammates from correct positions

Material resources: gym/sports field, balls

10. Exercise for thigh muscle development

Social valence: prepares the body for subsequent tasks.

Description: squats with the lower limbs apart, pivoting 180 degrees after each execution

Work formations: in pairs

Methodological indications: correct execution of the levers at the lower limb level

Material resources: gym/sports field, cones

11. Game: "fighting scales"

Social valence: develops balance and attention.

Description: students are divided into pairs and stand face-to-face in the scale support position; by pushing each other with their hands, they aim to unbalance the opposing student. The child who has more victories in 3 or 5 attempts will be the winner.

Work formations: in pairs

Methodological indications: maintaining the correct scale support position

Material resources: gym/sports field, cones

Variants: the difficulty increases if an additional task is used, for example, holding an arm in a fixed position or touching one's partner at a set point.

12. Exercise for back muscle development

Social valence: develops physical support for subsequent sports tasks.

Description: from lying prone with hands under the chin, trunk extension with arms outstretched sideways

Work formations: in pairs

Methodological indications: compliance with the starting position of the exercise, namely trunk extension concomitantly with lateral arm extension

Material resources: sports field/gym, mattresses

13. Game: "wheelbarrow" race

Social valence: develops team spirit.

Description: students are divided into two rows, in pairs, and one of them adopts the forward palm support position. The child who drives the "wheelbarrow" must hold the other's knees (not ankles). They first learn the movement in place and only then travel over a distance of 6-8 m, after which players change roles. The first team to reach the starting position wins.

Work formations: 6-8 in a row

Methodological indications: maintaining the partner in the specified position while moving

Material resources: sports field/gym

14. Exercise for thigh muscle development
Social valence: ensures physical preparation for subsequent sports and social activities and develops the spirit of teamwork.

Description: standing face-to-face with arms down, holding each other's hands and lunging to the right/left with the arms raised sideways

Work formations: in pairs

Methodological indications: correct execution of the levers at the lower limb level

Material resources: sports field/gym

15. Exercise for back muscle development

Social valence: develops partnership working.

Description: standing back-to-back with legs apart and arms up, holding each other's hands and bending the trunk forward simultaneously with the partner's trunk extension backwards

Work formations: in pairs

Methodological indications: performing the simultaneous trunk bending and extension

Material resources: sports field/gym, cones

The proposed multidisciplinary means can be integrated in any physical therapy session or physical education lesson to increase interaction between children with SEN. In the case of physical exercises or movement games performed in pairs, the pair should be made up of a student with SEN and a student without SEN. We are hopeful that this way of working will eliminate discriminatory attitudes towards people with SEN.

Opinion questionnaire

The preparation of the opinion questionnaire and its application was carried out under the supervision of a certified specialist from the U.N.E.F.S. Bucharest. The 10 questions were answered by selecting a scale from 1 to 10 (1 - not at all, 5 - so and so, 10 - very much).

Table 1 shows the percentages of answers received from the subjects surveyed for each question.

Table 1. Percentages answers of the researched subjects

ANSWER / QUESTION	I1	I2	I3	I4	I5	I6	I7	I8	I9	I10
1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3	2.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.63	0.00
4	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5	0.00	2.63	13.16	5.26	13.16	0.00	0.00	0.00	0.00	5.26
6	0.00	0.00	7.89	2.63	2.63	0.00	2.63	0.00	0.00	0.00
7	7.89	0.00	10.53	13.16	13.16	0.00	0.00	2.63	10.53	5.26
8	18.42	13.16	13.16	28.95	34.21	2.63	7.89	0.00	21.05	13.16
9	36.84	26.32	15.79	18.42	26.32	7.89	7.89	18.42	15.79	13.16
10	34.21	57.89	18.42	31.58	10.53	89.47	81.58	78.95	50.00	63.16

The following are the answers that highlight the effects of multidisciplinary physical exercise (kinetic and athletic) on students under investigation.

To the question 1 "Do you consider that your health is in the optimal parameters?", the answers received were varied from 3 to 10 points, and points 1, 2, 4, 5 and 6 were not selected (figure 1): one subject scored the question with 3 points (2.63%), and the maximum value (10 points) was chosen by 13 subjects (34.21%).

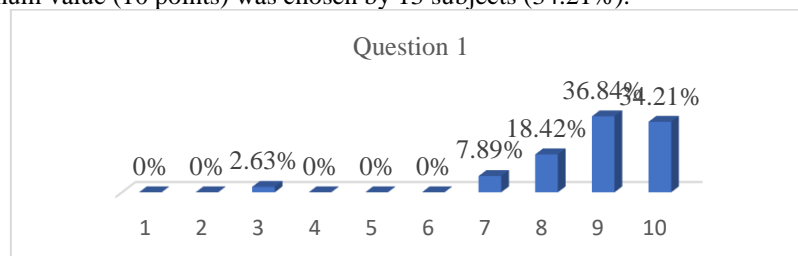


Figure 1. Answers to question 1

To the question 2 "Do you think that you are physically fit to be in a very good state of health?" 5 to 10: 9 points were awarded for 10 students and 10 points for 22 subjects (figure 2).

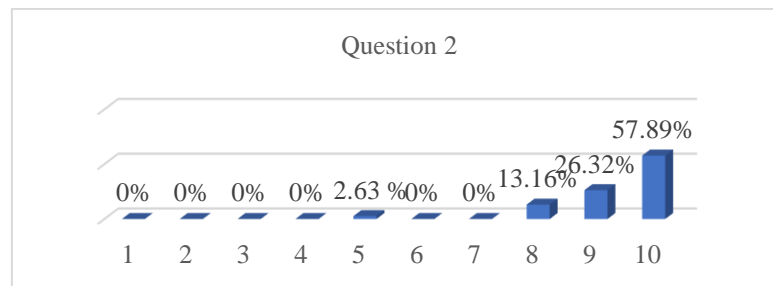


Figure 2. Answers to question 2

To the question 3 “Do you currently have a good opinion about your physical condition?”, the scores given by the respondents were from 5 to 10 (figure 3): 5 subjects gave 5 points and 7 subjects gave 10 points.

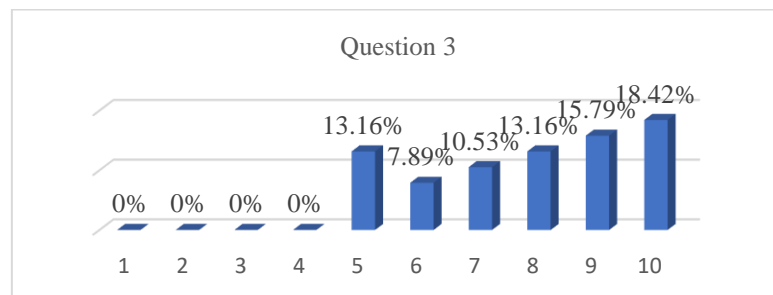


Figure 3. Answers to question 3

To the question 4 “Do you appreciate the level of self-image as the one you really want?”, The answers were varied from 5 to 10 points (figure 4), where 12 students gave 10 points.

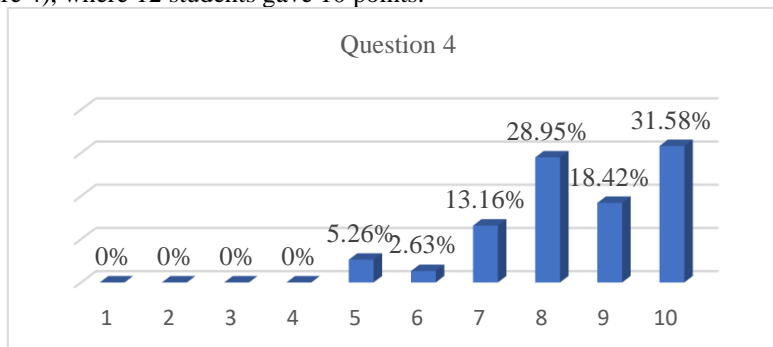


Figure 4. Answers to question 4

To the question 5 “Do you perceive yourself positively as a result of the way you look at the present (physically)?”, the selected scores are from 5 to 10: 5 students gave 5 points and 4 students gave 10 points (figure 5).

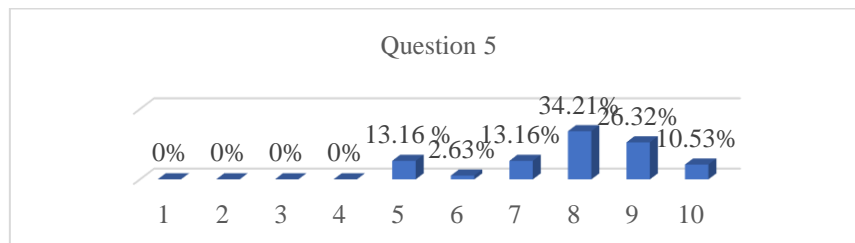


Figure 5. Answers to question 5

To the question 6 “Do you consider that regular exercise generally increases your ability to generate more ideas in life?”, the scores are 8 to 10 (figure 6): 9 points were awarded by 3 students, and 10 points were awarded by 34 students.

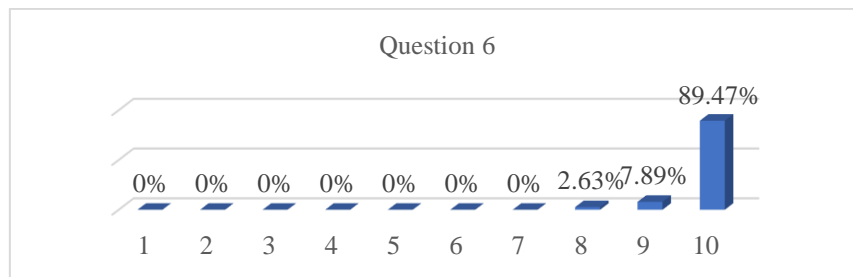


Figure 6. Answers to question 6

To the question 7 “Do you think that you can become more motivated to accumulate new information, diversified as a result of exercising systematically?”, the scores given by the respondents were from 6 to 10: 10 points were selected by 31 students (figure 7).

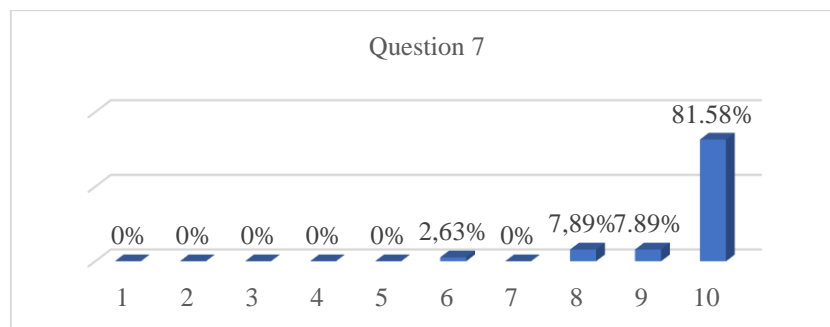


Figure 7. Answers to question 7

To the question 8 “Do you think that you can become more creative in your daily life by practicing a set of exercises in a systematic way?”, the answers received highlighted the score between 7 and 10 (figure 8): 30 students selected score 10.

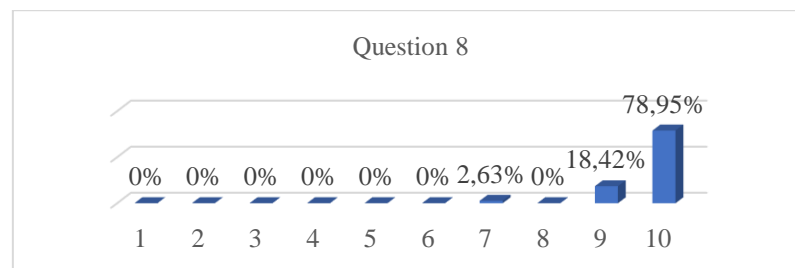


Figure 8. Answers to question 8

To the question 9 “Do you think that constant exercise is a source to stimulate the learning process - learn (in general) simpler and easier?”, the scores given by students were from 3 to 10 (figure 9): 19 students considered that physical exercise stimulates the learning process by selecting the maximum score.

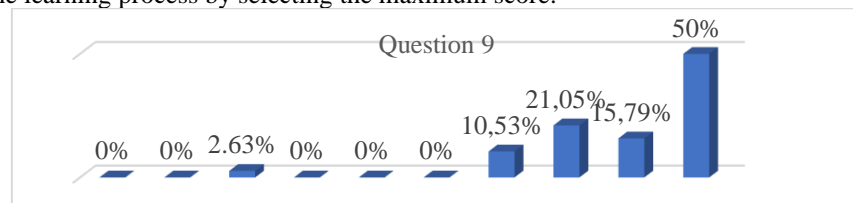


Figure 9. Answers to question 9

To the question 10 “To what extent are you satisfied with the flexibility you show in developing ideas by managing different situations in life?”, the answers of the students are varied, and the scores are highlighted: 2 students gave 5 points and 24 students gave 10 points (figure 10).

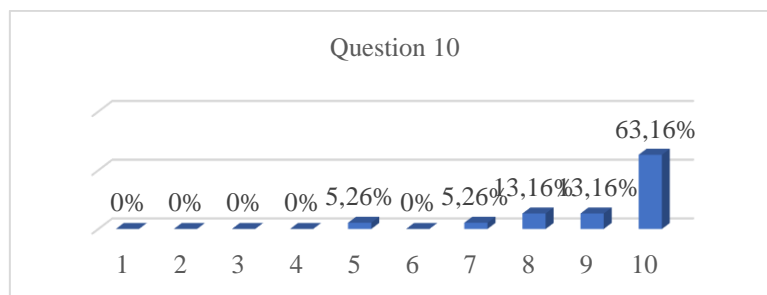


Figure 10. Answers to question 10

The answers obtained to the opinion questionnaire lead us to the fact that multidisciplinary means (kinetic and athletic) are beneficial for promoting the ability to practice certain exercises in a systematic way and implicitly increase the motor level. They positively influence the learning ability, the creative ability of students and the ability to adapt to new, unforeseen situations.

Conclusion

Following the application of the opinion questionnaire, we found that students consider that the proposed multidisciplinary means contribute to maintaining good health, as evidenced by the answers received to question 1, where 34.21% of participants gave the highest score. Also, the kinetic and athletic means guide the subjects in the management of daily situations, which highlights the increase of the motor level and the increase of the quality of life.

From the observations made during the research, we found that students are happy to participate in the required activities and want new activities in the future.

The physical activity proposed by us is a psycho-pedagogical resource for recovery and medical and social rehabilitation, which is available in both mainstream and special schools.

The systematic practice of physical activity will increase the self-confidence of children with SEN by creating a socio-affective climate where they will be able to perform all the required tasks either independently or with the help of a third person (teacher/therapist/ caregiver). At the same time, it will increase their motor abilities, prevent/combate discriminatory attitudes and remove social barriers to children with SEN.

The integration of children with SEN into society should be regarded with hope by each of us, as they too can perform various activities by exploiting their individual motor abilities and can achieve great things, which only need to be identified.

Authors' Contributions

All authors have equally contributed to this study.

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