

EMPOWERING BODY AND MIND: THE IMPACT OF SITTING VOLLEYBALL ON ATHLETES WITH DISABILITIES

Prof. Chidinma Okechukwu Nwafor

Department of Sport Sciences and Wellness, Parthenope University, Naples
Italy

DOI: 10.5281/zenodo.15582943

Abstract

Sport is a key element in disability, it is a context of great support that often welcomes and receives important changes in how every subject can read and understand his special condition. Sitting Volleyball is one of the most representative sports in the world of disability, able to stimulate athletes playing it both physically and psychologically by enhancing their potential and abilities. Therefore, given its characteristics, sport can contribute to enhancing and supporting psychological aspects that are fundamental to the life of the disabled, improving his development and enhancing what he feels he is able to achieve. The ability to provide the disabled with the utmost commitment to achieving any objective beyond their own difficulties arises from the ability to feel and recognize them as valid and effective people, placing an important amount of confidence in their resources at the basis of this process. Taking care of one's own physical and psychological well-being through sport allows reversing a life pattern from within, by creating new opportunities for growth through greater awareness, more intense quality of the relationships, and an important acquisition of new resources. Convincing and redefining positively, by experiencing and evaluating one's own limits as resources and qualities, supports the disabled and who revolves around his world, accepting difficulties and facing the issues under a different light.

Keywords: Self-efficacy, Resilience, Sport, Disability, Sitting Volleyball.

Introduction

The term disability describes a complex and multidimensional phenomenon that reflects the interaction between the disabled person and the reality he has lived in. This approach amplifies the natural, canonical and strictly physical limits of disability and projects it in a broader perspective, offering an extensive interpretative key that links the various types of deficits to the impact that the deficit itself has on disabled person's life. The analysis of the concept of disability is more complete and structured if we consider both the strictly physical aspects of the deficit and its social implication and the psychic experiences connected. We can affirm that disability, in general, involves three different spheres of competence: one physical, one psychological and one social, which are likely to represent its whole universe. Disability can be defined as a reduction in permanent or long-term physical,

Journal of Human Resource and Organizational Behavior

Research Article

mental, sensorial skills, or simply put the "functional" skills, which make a person different from those "nondisabled"; otherwise, it can be defined as a physical, mental, cognitive or developmental condition that damages, interferes with or limits the possibility of an individual to engage every day, and fully, in tasks, actions, in their participation and interaction with the surrounding reality.

It is estimated that about the 15% of the world's population is considered to be disabled in some way, and this testifies to the importance of this issue that requires appropriate resources to limit its impact and, at the same time, the identification of effective methods and tools able to act on all the aspects related to disability at physical, social and psychic level.

In this context sport fits properly, since its physical benefits, health and psychological effects on the disabled practicing various sports have been widely demonstrated, and further evidence of this positive partnership is the growing number of disabled athletes participating in official sports events such as the Paralympics, the Special Olympics and the Deaflympics. The Paralympic Games include athletes with spinal cord injuries, limb amputation, cerebral palsy, visual impairment, while the "Special" are reserved for athletes with intellectual disabilities; the Deaflympics involve subjects suffering from deafness.

As you can see, the world of sport encloses a vast panorama that does not exclude practically any type of disability, and at the same time, sport has proved to be effective also when acting on the "psycho-social" condition of limitation, isolation, exclusion with which disabled people live every day, and due to which they do not enjoy fully the rights and benefits that the disabled have. Therefore, sport can act positively on all the aspects affecting the world of disability.

The historical roots of the connection between sport and disability is in the concept worked out by Guttmann, like Stoke Madeville's experience but, over time, the original model was extensively developed and perfected; just think that, only in the United States, it is estimated that about three million disabled individuals are involved in organized sports activities, and it is likely that many others practice sports at amateur or just recreational level. Sport has proved to be an extremely effective and suitable tool and approach to address and deal with the world of disability in all its aspects and features.

For several years, sport for individuals with disabilities has proved to have great visibility in the sports panorama; athletes have increasingly improved their physical performance, leading the sport for the disabled at the same level of the so-called traditional sport. The key to success for athletes with disabilities refers to their ability to get involved, to experiment themselves, to persevere in their work with commitment and dedication, thus finding a new social position and a new identity. Sitting Volleyball is one of the most important sport in the world of disability, able to functionally stimulate athletes who practice it both physically and psychologically, respecting

their difficult moments and their limitations, emphasizing their potentialities and allowing for the discovery of feeling autonomous and efficient. This type of activity, along with many others, has the ultimate goal to emphasize and support the abilities of these athletes, especially by supporting the possibility of feeling part of an important reality as that of sports, where the values of collaboration, sharing and inclusion represent the conceptual basis.

Self-efficacy and resiliency in Sport

Different aspects and psychological modes in the world of disability may represent fundamental elements to achieve such a redefinition of a situation, which is inevitably seen as limiting and complex.

Sport is a key element in disability, it is a context of great support that often welcomes and receives important changes in how every subject can read and understand his special condition. In this sense, sport can be a real-life metaphor for these individuals, because most of the time it requires an important ability of commitment, perseverance and constancy. This feature of sport promotes and supports the disabled person when tackling a situation, he lives as problematic, by strengthening fundamental psychological aspects to deal with different aspects of his life. Motor activity represents a magnifying glass able to show to the world of disability the chance to face its limits by using the most of its abilities, thus proposing an alternative interpretation of its condition. Through physical activity it is possible to undertake a path of major changes that brings the disabled person to change his own life experience. Therefore, given its characteristics, sport can contribute to enhancing and supporting psychological aspects that are fundamental to the life of the disabled, improving his development and enhancing what he feels he is able to achieve. Sport allows acquiring greater awareness of one's own body, possibilities and value, by accepting one's own uniqueness. Knowing oneself and one's own peculiarities occurs through the body, giving the right value to one's own abilities and means. In the context of disability, accepting one's own limits means accepting existing within a reality where it is essential to find the resources to turn one's own difficulties into resources.

Discovering one's own limit can be a starting point for a self-knowledge through the body, learning different possibilities that were yet unknown or perhaps concealed; therefore, the disabled must inevitably deal with his diversity by recognizing it as his normal condition and reality. This identification is strengthened and revitalized in sports contexts that increase, support and enhance different psychological dimensions that, to a greater extent, can influence the subjective ways of living one's own condition. The ability to provide the maximum effort, beyond one's own difficulties, in reaching any goal, stems from the ability to feel and recognize oneself as an individual valid and efficient, placing a major dose of confidence in one's own resources and abilities at the basis.

The confidence a person has in his possibility to address a specific task is defined by Bandura as self-efficacy. The concept of self-efficacy emphasizes particularly the subjective perception of what a person believes himself capable of, the ability to keep his mental effort into a task and to believe deeply in being able to achieve the desired result with all his strength. This approach is particularly important in the world of disability: the expectations of personal mastery influence both the origin and the development of the behavior that deals with the problem. Those who are firmly convinced of their efficacy are likely to get positive effects if they try to address a given situation. Efficacy expectations determine to what extent and for how long the efforts will be maintained, regardless of the obstacles and the bad experiences. The greater the perceived self-efficacy is, the more the energetic efforts will be implemented.

We can say that efficacy expectations originate from three main sources: execution of performances, vicarious experiences and emotional activation.

The perception of self-efficacy, which is based on positive personal experiences, is particularly important as it strengthens the future expectations. The ability to feel competent in a certain task allows for the improvement of self-efficacy in other types of performance where, previously, the subject was assessed in a negative way because of concerns about his limits. In sport, it can be translated with the ability to project supporting contexts in which athletes can show their level of resources and abilities, preserving and enhancing their potentialities in territories aimed at the development of their resources.

The vicarious experiences, instead, are based on the concept of sharing and collaboration, experimenting with others the opportunity to achieve one's own goals with confidence by participating in each other's difficulties. Finally, the third factor refers to the relationship that is established between emotional activation and confidence. An optimal level of emotional activation acts positively on the perception of being efficient, this feeling of safety stimulates the maintenance and preservation of adequate levels of activation.

The concept of self-efficacy is surely strengthened and consolidated in sport, where there can be the opportunity to self-experiment according to an alternative perspective. The disabled person, by recognizing his own resources through movement and motor activity, has the chance to develop a new confidence in his potentialities by observing and identifying himself in a brand-new way.

Sport allows strengthening and increasing one's own point of view, expanding one's own observation perspective of the experienced circumstances, experimenting different positions, and testing a considerable wealth of possibilities. Taking care of one's own physical and psychological well-being through sport allows reversing a life pattern from within, by creating new opportunities for growth through greater awareness, more intense quality of the relationships, and an important acquisition of new resources. Convincing and redefining positively, by

Journal of Human Resource and Organizational Behavior

Research Article

experiencing and evaluating one's own limits as resources and qualities, supports the disabled and who revolves around his world, accepting difficulties and facing the issues under a different light. This kind of attitude and behavior allows the subject to deal with any stressful or change event, reorganizing his life in a positive way in the face of difficulties: this ability is defined as resilience.

The concept of resilience comes from the world of physics and indicates the property of certain materials to preserve their structure or to regain their original shape after being subjected to crushing or deformation. In psychology and sociology, resilience is the ability to react to traumatic or stressful events, and to reorganize one's own life in a positive way. It is the ability of every person to resist trauma and sufferings that life brings, but above all is the ability to plan one's own future positively, regain and self-regain, become stronger and acquire more resources toward hostility. It is a strength that everybody has and that implies behaviors, thoughts and actions that everybody can learn. Resilience is an active process of strength, self-healing and growth in response to crises and difficulties of life.

This concept primarily questions the idea that early traumas or serious problems, such as disability, cannot be tackled adequately and with effective measures, and secondly, that negative experiences sooner or later determine always the occurrence of important consequences in the people involved. Resilience is the determined will to remove the difficulties and overcome obstacles, to go on in life with confidence and optimism. Resilient is the one who can withstand the pain without complaining, who knows how to deal with the difficulties without despairing, who has the courage to undertake a path that he knows it is winding, and knows how to accomplish what is undertaken. Resilient is one who loves life and cultivates a virtue that moderates and limits fears of death, failure, and destruction. Resilience means also counting on one's own impotence and overcome the fear of tomorrow. The most important aspect is to have the ability to bear and withstand the burden of situations and events that are about to occur or that have already occurred. Resilience is useful for those who, like the disabled, have known the immediate impossibility of changing the course of events and have believed in their ability to generate new possibilities with determination, perseverance and patience; it represents a remedy for any attempt of rejection and surrender to their condition. It is the ability to accept the wounds caused by the battle for self-realization that requires judgment, perspicacity, and tolerance in understanding that there is not a single way to undertake in life.

The desire to redefine one's own life, to self-realize according to one's own abilities, also arises from contexts that support and stimulate the disabled, offering them the opportunity to observe their situation from a different point of view. In this respect, sport can be an important opportunity for people with disabilities to get involved and experience their possibilities and skills, a chance to go beyond their own limits. Sports activities can be

considered as a territory where resilience is cultivated and fueled, generating an active process of resistance, self-healing and growth in response to crises and life's difficulties. A context where a person experiences and lives at the same time the pain and courage, faces competently and consciously his own difficulties both at personal and interpersonal level. In this regard, we can consider resilience as a non-individualist element, but a global element that examines all the functional relational contexts of the person which support and facilitate him in his self-discovery and self-rediscovery.

Origins, Theories and Methodologies of Sitting Volleyball

The inclusion of people with disabilities in sports environments is relatively recent. During World War II, in 1944, Dr. Ludwig Guttmann studied and conducted a series of sports training programs dedicated to disabled British youths and adapted to the handicap they were caused during the war. This event marked the world of disability and the sports world in a particularly significant way, succeeding, on the one hand, in supporting the full potential of the disabled and, on the other hand, in creating an alternative vision to the traditional world of sport. Dr. Guttmann's main object was to achieve, by means of sport, the development of the residual abilities of every disabled person, and to recover all the possible psychological abilities and qualities. The ultimate goal was to allow every person with a disability to keep going on in their lives autonomously by rediscovering new qualities and possibilities. This intuition began to gain ground all over the world, bringing each subject closer and closer to a path towards autonomy, integration and inclusion. The path started by Dr. Guttmann led to the development of a wide range of adapted activities and sports, which led to the discovery of new horizons and a new way of seeing and defining sport.

In 1956, Sitting Volleyball was introduced in Holland, a new sport that brought together Sitzball and traditional volleyball. The Sitzball was a German sport that included the volleyball game played while sitting on the floor, with the variation of a ball rebound possibility in the field. In the same period, in England, Standing Volleyball was developing, a game practiced by amputated athletes while standing on. These two disciplines were initially included as demonstration sports activities, for male tournaments, in the Paralympic programs of 1976, and were introduced as official discipline in the 1980s in Holland. Both sports have evolved in parallel until 2004, the year in which Standing Volleyball was eliminated and Women's Sitting Volleyball was introduced. Today, this kind of activity is played and followed in Europe and in many countries around the world.

Sitting Volleyball can be described as a volleyball played by sitting down, which follows generically the same rules as this activity; It is a particularly popular, fast and spectacular sport. The playing field has a size of ten meters per six, and the height of the net is around one meter and fifteen for male teams, and one meter for those for female. The team is generally composed of a coach and twelve players, although the athletes in the field are

actually six, as expected for traditional volleyball. Unlike standard volleyball, in Sitting Volleyball the player's position is determined by the contact of the buttocks on the floor of the playing field, which is also a parameter for assessing any fouls. When a player performs the serve, while striking the ball, he should be placed with the buttocks out of the bottom line in the service area, while his legs may be inside the field. It is allowed to touch the opponent's field with one foot or leg at any time during the game, provided that the player does not interfere with the opponent. But, apart from these and other peculiarities, the regulation of this sport is similar to that of official volleyball.

Regarding the technical aspects, the main features to consider are the sitting posture, the balancing, the waiting position, and the displacements defined as translocations. All of these aspects require special training and targeted training, and are a key factor for achieving optimal performance by all team members. In particular, the displacements are one of the features of Sitting Volleyball, both for the particularity of the sitting position that the players assume and for the way they move on the field. Translocations are crucial to both anticipating opponents' moves and ball direction, and to structuring more harmony, cohesion, and synchronization during training, by adopting particular gameplay patterns.

Sitting Volley is a sport activity for those who have physical-motor limitations such as:

- Amputations

- Spinal cord lesions

- Brain injuries

Amputations are all those situations that are generally the result of physical trauma or pathological processes, such as cancer or gangrene. This type of physical limitation is perhaps the most present within the panorama of this sport. The loss of one or more parts of the body is often quite traumatic both at motor and psychological level, and the subsequent mental restructuring will allow for a new awareness of the movements. Spinal cord lesions can be defined as interruption of nerve transmission between the central nervous system, the peripheral nervous system and the muscular and visceral innervations. Usually, the practice of Sitting Volleyball is performed by players who, in this category, suffer from low spinal cord injury so as to maintain the right balance and balance in the practice of this sport. Finally, brain paralysis is the consequence of accidental injuries of the brain in the early period of life, is a non-hereditary or evolutionary lesion that causes a variable damage to coordination, tone and muscle strength that can lead to a modification of the individual's posture and movements.

Knowing the players' pathologies and their related problems facilitates the trainer's task in preparing athletes, improving work quality, strengthening perception of efficacy and improving performance. The physical preparation of athletes who practice this kind of discipline is very important and requires a specific individualized work, which has as its main objective that to consider heterogeneity and, on the other hand, the peculiarities of

every athlete by proceeding and aiming at a personalized work . This work is especially important to motivate the disabled: working on residual abilities and resources will stimulate the subject to overcome his difficulties by perceiving that he is able to accomplish the goals set, by encouraging him from a psychological point of view and allowing for his adequate social reintegration . Good physical work can improve the stability and control of one's own body, a deeper self-knowledge and an acknowledgment of one's own potentialities and abilities.

Conclusions

Difficulties should be considered part of life and problematic situations can lead to the recognition and research of personal, parental and social resources to address one's own problematic vicissitudes. Difficulties can lead to the growth and stimulation of people's deep self-confidence, a belief in one's own ideas, a great curiosity for a world full of unexplored opportunities. The task of sport, in these cases, is to help people with disabilities overcome the state of impotence and desperation they can experience in many cases, and brings them to gain greater confidence in their abilities and possibilities to be able to improve their condition. Sport is a place where it is possible to elaborate alternative meanings of one's own condition, to rework a new, more functional and positive story, which can then replace the previously ones experienced in a problematic way.

An approach to life and one's own situation based on resilience and the ability to perceive it effectively is a fundamental starting point that every subject should strengthen; the resources they possess can represent the basis on which to build a chance of change. Physical activity and its related contexts can encourage people with disabilities to modify their rigid and binding concepts, and overcome the adverse conditions they are in. In this sense, it is necessary to commit oneself to changing the unfavorable circumstances by creating a network with greater and more appropriate systems, such as sports, in order to support people with disabilities in their evolutionary path by making the contexts more inclusive. The strength and energy that sport possesses can really support all of their efforts, by backing and identifying their potential, and the abilities of resilience and efficacy that every disabled subject has.

References

- Bandura, A. (2000). Autoefficacia. Teoria e applicazioni. Centro Studi Erickson, Trento. Bertini, L. (2013). Sitting Volleyball. Calzetti Mariucci Editori, Perugia.
- Canevaro, A., & Ianes, D. (2003). Diversabilità, storie e dialoghi nell'anno europeo delle persone disabili. Centro Studi Erickson, Trento.
- Cei, A. (1998). Psicologia dello sport. Il Mulino, Milano Isidori, E. (2009). Pedagogia dello sport. Carocci, Milano.

- Isidori, E., & Fraile, A. (2008). Educazione, sport e valori. Un approccio pedagogico critico- riflessivo. Aracne, Roma.
- Lo Sapio, G. (2012). Manuale sulla disabilità. Dai bisogni educativi speciali ai programmi di integrazione scolastica. Armando Editore, Roma.
- Malaguti, E. (2005). Educarsi alla resilienza. Centro Studi Erickson, Trento.
- Marin, L., & Ottobrini, S. (2015). Abili si diventa. Manuale di attività fisica adattata alla mielolesione. Calzetti Mariucci Editori, Perugia.
- Mura, A., & Zurru, L. (2013). Identità, soggettività e disabilità. Processi di emancipazione individuale e sociale. Franco Angeli, Milano.
- Savickas, L.M. (2001). The Next Decade in Vocational Psychology: Mission and Objectives. Elsevier Journal, Vol. 59 (2), 284-290.
- Short, D., & Casula, C. (2004). Speranza e resilienza. Cinque strategie psicoterapeutiche di Milton H. Erickson. Franco Angeli, Milano.
- Spinelli, D. (1997). Psicologia dello sport e del movimento umano. Zanichelli, Bologna.
- Tavella, S. (2012). Psicologia dell'handicap e della riabilitazione nello sport. Armando Editore, Roma.
- Tortorella, D. (2016). Prepararsi al via. Psicologia dello sport sistemico relazionale. Franco Angeli, Milano.
- Valtolina, G. (2004). Famiglia e disabilità. Franco Angeli, Milano.
- Walsh, F. (2008). La resilienza familiare. Raffaello Cortina Editore, Milano.
- Zimmerman, J., B. (2000). Self-Efficacy: An Essential Motive to Learn. Elsevier Journal, Vol. 25 (1), 89-91.