AN EXPLORATION OF THE IMPACT OF THE IMAGES THE SPECIAL OLYMPICS PORTRAY OF PEOPLE WITH INTELLECTUAL DISABILITIES ON PUBLIC ATTITUDES TOWARDS THIS MINORITY GROUP

Raymond Lynch Dip, BSc (Hons), HDip, MA

Faculty of Life and Health Sciences

A thesis submitted for the award of

Doctor of Philosophy

March 2018

I confirm that the word count of this thesis is less than 100,000 words

TABLE OF CONTENTS

**CHAPTER 2: History of Political, Social and Medical Responses to
People with Disabilities**

CHAPTER 3: SPORT AND DISABILTY

CHAPTER 4: INCLUSION

CHAPTER 5: RESEARCH METHODOLOGY

CHAPTER 6: PRESENTATION OF FINDINGS

CHAPTER 7: CONCLUSION AND RECOMMENDATIONS

APPENDICES

ACKNOWLEDGEMENTS

ABSTRACT

The relationship between people with intellectual disabilities (PWID) and how they experience social inclusion is a somewhat complex phenomenon. Historically, PWID have been systematically excluded from society. Despite an unprecedented level of enactment of equality and rights based legislation over the last 25 years, a shift from the medical model of disability to the social model and the implementation of multiple disability sports inclusion initiatives, research has found that many PWID routinely experience social exclusion in Ireland. However, in stark contrast to this one disability specific sporting organisation, the Special Olympics (SO), make claim that they are transforming communities that are respectful and inclusive of PWID. It is therefore imperative that such assertions are further investigated, as some researchers have claimed that the images the SO use to portray PWID has only served to perpetuate their isolation and segregation from society (Storey 2009). The overall aim of this study was threefold. In the first instance it was to explore the impact of the images used by the SO to portray PWID has had on public attitudes towards this minority group. The second aim was to analyse public attitudes towards the Special Olympics and the position of its participants within local communities. The final aim of the study was to assess how a decade of legislative and social change in society's responses to disability has impacted on participants in this study. Focus groups were facilitated across the four provinces of Ireland with two specific age groups in order to explore public attitudes across two distinct generations. The findings from the focus groups were discussed with five carefully chosen topic experts so as to provide a deeper and richer insight into the themes arising from this research study. The findings revealed that while the SO are of significant importance to the everyday lives of PWID and PWID are more '*visible*' in society, they fall considerably short in ensuring that this minority group are included in any '*meaningful*' way in their communities. At the time of this study it was also observed that a decade of legislative and social change in society's responses to disability has had some positive but limited impact on focus group participants. Finally, of the 107 people who took part in the focus groups, only one claimed to have a friend with an intellectual disability. Thus, the overall results of this study indicate that while PWID are experiencing regular '*integration*' into their communities' '*meaningful*' inclusion continues to elude them.

LIST OF ABBREVIATIONS

ANPDCC: Australian National People with Disabilities & Carers Council

BILD: British Institute of Learning Disability

CARDI: Centre for Ageing Research and Development in Ireland

CE: Chief Executive

CISS: Compte International des Sports des Sourds

DoH: Department of Health

DoJE: Department of Justice and Equality

DLCG: Disability Legislation Consultation Group

DFI: Disability Federation of Ireland

EC: European Community

EU: European Union

HSE: Health Services Executive

HIQA: Health Information & Quality Authority

IHREC: Irish Human Rights Commission

NAS: National Advocacy Services

NDA: National Disability Authority

NI: Northern Ireland

NIDD: National Intellectual Disability Database

NPAP: National Physical Activity Plan for Ireland

PWD: People with disabilities

PWID: People with intellectual disability

ROI: Republic of Ireland

RTE:	Radio Telifis Eireann
SI:	Statutory Instrument
SO:	Special Olympics
SOI:	Special Olympics Ireland
UDHR:	Universal Declaration of Human Rights
UK:	United Kingdom
UN:	United Nations
UNCRPD:	United Nations Convention on the Rights of Persons with Disabilities
UNESCO:	United Nations Educational, Scientific and Cultural Organisation
USA:	United States of America
WWII	World War II
WHO:	World Health Organisation

CHAPTER 1

1.0 INTRODUCTION TO RESEARCH STUDY: OVERVIEW OF SOCIETAL APPROACHES TO DISABILITY, SOCIAL INCLUSION AND THE SPECIAL OLYMPICS

1.1 INTRODUCTION

In 2013 the Special Olympics (SO) World Summer Games came to Ireland for the first time to significant national and international acclaim. This was the first time the Games were held outside of the United Stated of America (USA) and it was generally accepted they were a hugely important and successful event. The SO, established by Eunice Shriver in Chicago USA 1968, is a sporting event specifically for people with intellectual disabilities (PWID). One of the underlying principles of the SO is to create more inclusive communities for PWID and in doing so create environments of equality, respect and acceptance of this typically marginalised group of people. Indeed according to Davis (2012), the SO has provided an opportunity to experience social inclusion for PWID and has supported SO athletes to experience equality. As a consequence, the SO are celebrated and admired in Irish society

However, some disability studies, theorists and researchers have claimed that most people with intellectual disabilities (PWID) in Ireland today, live their lives on the periphery of society. Historically, they have been systematically segregated from society and have not experienced inclusion in their communities like most other people without a disability. The majority of PWID are not in paid employment, do not have opportunities to attend mainstream services, such as education and for many, have no valued social role. Indeed according to Somerville (1992), despite living in community-based settings nowadays, many PWID are inherently lonely. Swain, French & Cameron (2003, p.165) have claimed that 'disabled people are largely ignored and not seen as people with rights'. More recently Minton (2016) stated that the stories and historical accounts of the exclusion and marginalisation of people with intellectual disabilities are so vast that 'they would fill a small library' (Minton 2016, p.22).

In order to understand why PWID have typically experienced such systematic exclusion from wider society it is important to examine the historical context with regard to how society has responded to this vulnerable group of people over time.

Society has typically responded to PWID throughout the ages based on the social values of that particular time and place. Collins, McCormack & Costello (2002) have categorised how society has responded to PWID using four general headings, survival of the fittest/eugenics, dependency model/medical model, rights-based model/social model and interdependency. Each era has had very different ideologies, beliefs and views on how PWID should be included, or indeed excluded from mainstream society. Each response has directly impacted on PWID's sense of '*belonging*' and '*inclusion*' in their communities and wider society at large. With regard to the concept of '*a sense of belonging*', Hyder (2016, p.52) claimed that 'in many ways *''exclusion''* and *''inclusion''* can be seen as a continuum'. In this instance, survival of the fittest would represent extreme exclusion and isolation for PWID, whereas interdependency represents learning to live with one another, acceptance and inclusion for all people in mainstream society.

This introductory chapter will discuss the four societal responses to PWID as outlined above. Throughout each societal response the author will reflect on societal values towards PWID at that time and how such values have influenced and impacted on PWID's experience of inclusion. An overview of how organisations provided support to PWID will also be presented throughout the discourse and the disability specific legislative framework (from a European and Irish perspective) that evolved around PWID will be examined. The role of sport will also be briefly outlined in this chapter, in particular the specific claims made by the Special Olympics (SO) that it has created more inclusive communities for PWID at a national and international level. The images the SO has typically portrayed of PWID have been criticised by some disability researchers and theorists. They claim the imagery the SO promote of PWID impacts negatively on this marginalised group, further promoting their exclusion from mainstream society.

According to Zidjaly (2016), exclusion is one of the main everyday issues faced by people with disabilities across all cultures, yet it remains one of the least academically studied concepts. Zidjaly (2016) also claimed that images can be very powerful, and in particular the imagery we see of people with disabilities. Images can be viewed as a subtle source of power and if misused or misunderstood in social causes, their intent can result in unintended consequences. Storey (2009) highlighted this issue with regard to the imagery the SO portray of PWID. Storey (2009) believed that images can shape the public's opinion of PWID in a negative way and has claimed that popular press and mass media images of the Special Olympics have done little, if anything, to promote more inclusive communities for this minority group. In fact, according to Storey (2009) the images the SO portray of PWID have achieved the exact opposite to what their mission statement claims about creating more inclusive communities and have only served to reinforce a negative, self-fulfilling prophecy that evokes sympathy, pity and stigma in turn promoting a negative stereotype of PWID.

The overall aim of this piece of research is to assess the impact of the images the Special Olympics portray of PWID on public attitudes towards this minority group. In doing so, the author is striving to establish if the images of PWID used and promoted by the SO are actually supporting the SO's claim of creating more inclusive communities for this typically marginalised group of people. Or if paradoxically, and as claimed by Storey (2009), they actually serve to reinforce negative attitudes among the Irish public about PWID in turn further perpetuating their isolation and segregation from their communities.

1.2 INTRODUCTION TO SOCIETAL ATTITUDES TOWARDS PEOPLE WITH INTELLECTUAL DISABILITIES

Despite a shift in societal attitudes towards PWID, the positive developments in the way in which disability specific organisations support this marginalised group and the passing and enactment of disability rights and inclusive based legislation, some disability theorists claim that PWID continue to live separate lives on the periphery of society.

While the approach and treatment of PWID is more humane and dignified nowadays, there still remains a significant level of '*tokenism*' with regard to their inclusion in mainstream society. As such while PWID are more '*visible'* and '*integrated'* in their local communities, they are not afforded the opportunities to experience real or meaningful inclusion. Indeed according to Pierson (2016, p.121), 'disabled people have felt the full force of multi-layered exclusion: low income through inadequate benefits, exclusion from the labour market, exclusion from cultural and intellectual activity and disrupted social networks'. In a general sense, human societies have typically employed ideologies and practices through which certain kinds of people remain marginalised or excluded.

1.2.1 Marginalisation and Exclusion of People with Intellectual Disabilities

Historically, what is most distinctive about the concept of exclusion in the early modern period is the fact it acquired elaborate organisational and administrative characteristics (McDonnell 2013). Exclusion became part of the apparatus of certain governments in the management and regulation of specific '*marginalised*' groups of people such as the poor, homeless and disabled, in conjunction with the processes of labelling, segregation, confinement and rehabilitation. In the past, people with disabilities (PWD) were routinely institutionalised and often labelled by medical experts as being '*retarded'* '*imbeciles'* and '*handicapped'*.

They were also viewed as having little ability to make any valued contribution to their communities and so were routinely excluded from mainstream society as a result. McDonnell (2013) claimed that such processes are inextricably linked to modern forms of exclusion and continue to occupy a prominent position in today's institutional and conceptual landscape as it relates to the world of disability. Priestly (2003, p.14) argued that 'there is a substantial body of evidence to show that people with impairments are still routinely excluded and disadvantaged in important areas of social life'. Indeed, people with disabilities occasionally echo this view, pointing out that their segregation and exclusion has historically been so systematic and rigorous that there is a need for

fundamental societal reform in order to support their full inclusion (Hurst 1996). More recently, according to Storey (2008), despite decades of research, advocacy, and program development, most adults with significant disabilities live lives of continued segregation. This segregation is manifest in work, community, and recreational settings. Pierson (2010, p.125) argued that 'this legacy of exclusion underpinned a depth of discriminatory attitudes in society at large based on a toxic mix of distaste, distance, pity and condescension'. However, disability issues, in particular social exclusion, have been the focus of many European governments, communities, service providers and support organisations agendas over the last two decades (Owens 2010).

1.2.2 Introduction to Political and Societal Developments Promoting Inclusion

A plethora of policies and legislation promoting equality and inclusion for people with disabilities has been promoted, passed and enacted by governments worldwide. In the United States of America (USA), then President George Bush signed the Americans with Disabilities Act 1990 into law, which established the rights of 43 million American people to participate in a more equal and inclusive society. This was seen by some as a '*dramatic*' shift in American public policy towards those with disabilities (Gold 2011). Likewise, in 2006, The Convention on the Rights of Persons with Disabilities was launched. This is an international human rights instrument of the United Nations (UN) intended to protect the rights and dignity of all people with disabilities. Countries that sign up to the Convention are required to promote, protect, and ensure the full enjoyment of human rights by persons with disabilities and ensure that they experience full equality and social inclusion protected the law.

The Convention states that disability is a condition arising from the interaction with various barriers that hinder full and effective participation in society on an equal basis with others, rather than an inherent limitation (Quinn & Arnardottir 2009). On the specific and fundamental issue of accessibility and inclusion, (Article 9) of the Convention requires countries to identify and eliminate obstacles and barriers and ensure

that persons with disabilities can access their environment. Of significant importance, Article 30 Section 5 of the Convention on the Rights of Persons with Disabilities *'Participation in Cultural Life, Recreation, Leisure and Sport'* explicitly states that with a view to enabling persons with disabilities to participate on an equal basis with others in recreational, leisure and sporting activities, States Parties are required to take all appropriate measures to include:

- To encourage and promote the participation, to the fullest extent possible, of persons with disabilities in mainstream sporting activities at all levels;

- To ensure that persons with disabilities have an opportunity to organize, develop and participate in disability-specific sporting and recreational activities and, to this end, encourage the provision, on an equal basis with others, of appropriate instruction, training and resources;

- To ensure that persons with disabilities have access to sporting, recreational and tourism venues;

- To ensure that children with disabilities have equal access with other children to participation in play, recreation and leisure and sporting activities, including those activities in the school system;

- To ensure that persons with disabilities have access to services from those involved in the organization of recreational, tourism, leisure and sporting activities.

In 2010, the European Commission launched a ten-year strategy (2010 – 2020) with one of the main aims being to raise public awareness about disability, and encourage member states to work together in removing obstacles to inclusion for all people with disabilities. (Europa 2010). Prior to this, Ireland launched a National Disability Strategy in 2004. The main elements of the strategy were the promotion of inclusive and rights-based legislation and sectoral plans on how the main government departments could support policy making that promotes the integration and inclusion of people with disabilities (Flynn 2011, p.331). In more recent times, the Disability Act 2005 has become a key element of the National Disability Strategy. The Act is designed to advance and underpin the inclusion and participation of people with disabilities in Irish society by supporting the provision of disability specific services and improving access to mainstream public service provision (Fahey 2005).

Over the years, many attempts have been made by administrations, organisations and policy makers to address issues of exclusion and marginalisation and to develop an inclusive and integrated approach for people with disabilities. 'A key element of this approach has been recognition that segregation and exclusion is not a consequence of disability but the results of policy based on false assumptions about the abilities of people with disabilities' (Waddington 2009, p.33). However, while the issue of social exclusion has been on the political agenda for many years, a substantial body of research confirms that the marginalisation of people with disabilities is now well recognised and still very much evident is society today. Indeed some would say that social policy, legislation and disability support services efforts have been all but tokenistic and have systematically failed to ensure meaningful social inclusion for PWID in mainstream society.

1.2.3   Overview of the Special Olympics

Contrary to this, one specific sports group claims that it is achieving a level of success in ensuring respect and inclusion for all PWID in their local communities. The Special Olympics organisation, an international program of sports training and athletic competition for PWID, was established in 1968. One of the most exceptional, but less well recognised contributions to society by the sporting world has been the integration of groups that have historically been marginalised, in particular ethnic minorities. While the acceptance and inclusion of individuals from marginalised groups was an arduous process, the fact remains that the sport world has been a leading force for inclusion. In keeping with the tradition of sport as a vehicle for inclusion, there has been a recent surge in sporting opportunities for other groups of people that live their lives on the margins of society, including people with disabilities. (Harada, Siperstein, Parker & Lenox 2011). Special Olympics Ireland (SOI), founded in 1978 stated that a key principle of the Special Olympics movement is that communities at large, both through participation and observation, are united in engaging with PWID in an environment of equality, respect, inclusion and acceptance.

So, while sports are the focus of the Special Olympics, other opportunities to change societal attitudes have emerged as a consequence of its work. The UN (2006) Convention stated that the universal popularity of sport and its physical, social and economic development benefits make it an ideal tool for fostering the inclusion and well-being of persons with disabilities.

The then Managing Director of Special Olympics Europe Eurasia, Mary Davis, claimed the SO organisation, along with access to and participation in sport, provide an opportunity to experience social inclusion for people otherwise marginalised by social, cultural or religious barriers caused by disability. Davis (2012) claimed that SO athletes experience equality and are celebrated and admired in Irish society. With each athlete's experience, there emerges a lasting legacy of attitudes changes and an ability to welcome and accept that which is different. When we consider that policy, legislation and many disability support services have systematically failed to ensure inclusion for PWID, the above claims about the power of sport and in particular the SO warrant further investigation. There is no doubt that the SO and SOI make concerted efforts to promote better, more inclusive communities for PWID so this focus on their activities should not be interpreted as criticism of the work they undertake. Indeed, DiLeo (2013) argued that muting criticism of facility-based disability services is precisely the wrong thing to do, painful as it is to hear for some organisations. On the other, hand it is important not to belittle agencies or the people who work for them either. Undoubtedly, they work extremely hard and are dedicated to their professions.

1.2.4   The Role of Sport in Promoting Inclusion for People with Disabilities

According to Nicholson, Hoye and Houlihan (2011, p.172), 'sports organisations, departments and agencies have a vested interest in ascribing as many benefits to sport as possible and sports role in development and maintenance of social inclusion is no different'.

Indeed, within the administration and management of most sporting organisations a common goal or value is to provide opportunities for all people to participate in their sporting activities. Watt (2003, p.65) claimed that 'sports management and development is about providing and improving opportunities for people to participate in sports at whatever level to the best of their ability and in fulfilment of their interests'. The role of sports and in particular sport for PWID in promoting community inclusion has been recognised as a recent phenomenon. Le Clair (2013, p.63) has stated that 'the sports world has been a leading force for inclusion for many minority groups including women and people of colour to compete as equals alongside all other athletes...in keeping with that tradition of sport as a vehicle for inclusion, in recent years there has been a surge in sports for another group on the margins of society, people with disabilities'.

However, if societal attitudes are to change, it is incumbent to continue to speak out against the ongoing needless segregation of those with disabilities. Too many commentators and organisations, it seems, verbalise how they are "*pro-inclusion*," but then they do little to act on segregated programs and practices within their own agencies. DiLeo (2013) claimed that we cannot change systems by simply highlighting solutions and ignoring the underlying problems. This means that inclusion of people with disabilities can only be promoted once we tackle the real issues relevant to segregation.

But what happens when an effort is made to provide inclusive experiences that fall far short of this ideal? Unfortunately, what often happens is that such effort merely disguises the original problem. What passes for inclusion is held up as an example, when in fact it is not inclusive at all, just a bit less segregated. This is a dangerous *'illusion'* for people with disabilities. It blurs the issue of "*true belonging*" into an incomplete "*solution*" that makes people believe segregation has become a thing of the past (DiLeo 2012). Notwithstanding, sports for PWID and its capacity as means to foster greater inclusion and well-being in society are only beginning to be realised. In fact, Thomas and Smith (2009) claimed that interest in disability sport is a relatively recent phenomenon. Yet it is also one that, particularly in the context of social inclusion, is attracting increasing political and academic interest.

In order to understand something about the key issues which surround the complex relationships between modern sport, disability and society, it is helpful to have some appreciation of the various theoretical explanations of disability and to explore the key developments that are contained within disability policy.

1.3 SOCIETY'S FOUR RESPONSES TO PEOPLE WITH DISABILITIES

According to Soen, Shechory and David (2012), society consists of numerous interconnected, interacting and interdependent groups, which invariably differ in both power and status. Inequality and conflict between social groups entails economic as well as sociological and political factors. The tensions that can arise between these groups are at the root of society's most profound problems. This is demonstrated when we examine the relationship between PWID and people without intellectual disabilities. Irving and Irving (2012) stated that power imbalances are more extreme in '*disabled*' relationships. Societal devaluation of PWID increases their vulnerability and there is a significant deficiency in inclusive community support structures and resources for individuals with disabilities. Irving and Irvin (2012) suggest that it is society's fear and ignorance of disability that is more telling for PWID rather than the actual disability any individual has been diagnosed and labelled as having.

As confirmed by Thomas and Smith (2009), an exploration into how society has historically responded to PWID offers an insight as to why this specific group continues to live their lives on the fringes of society, with little opportunity to experience meaningful inclusion in their local communities. Society's responses to disability throughout the ages have varied with the social values of that time and place. According to Collins, McCormack and Costello (2002), society's responses to disability can be categorised under four general headings:

1. *Survival of the fittest/eugenics*
2. *Dependency model/Medical model of Disability*
3. *Rights based model/Social Model of Disability*
4. *Inter-dependency model of Disability*

1.3.1 Response Number One: Survival of the Fittest

One of the first and earliest societal responses to disability was considered under the broad term of *'survival of the fittest'*. This term was first coined by biologist Herbert Spencer in his publication *Principles of Biology* in 1864. He was referring to work undertaken by Charles Darwin (1859) in his publication *'On the Origin of the Species'*. This '*survival of the fittest'*, approach, which Spencer sought to express in mechanical terms, is that which Darwin referred to as *'natural selection'* or the preservation of favoured races in the struggle for life. In the mid nineteenth century British scientist Galton popularised a movement known as '*eugenics*'. Similar to the concept of *'survival of the fittest'*, eugenics was based on a principle that only certain individuals had a right to perpetuate their genetic materials through reproduction and therefore, reproduction should be regulated based on an individual's characteristics (Jaeger and Bowman 2005, p.34).

In turn, Smith (2011) defines eugenics as a set of theories and practices that seek to promote species or racial health by identifying the genetically *'superior'* and encouraging their reproduction, while diagnosing the genetically '*inferior*' and preventing or inhibiting their reproduction. Historically, eugenics has been used as a justification for coercive state-sponsored discrimination and human rights violations, such as enforced sterilisation of persons who appear to have - or are claimed to have - '*genetic defects'*, the killing of the institutionalised and, in some cases, outright genocide of '*races*' perceived as inferior. Thus, the ideology of eugenics promotes the rejection of PWID on the basis of group needs or values and, at its extreme, has resulted in the sterilisation and death of individuals with intellectual disabilities.

In 1907, Indiana in the United States of America (USA) became the first State to pass an involuntary sterilisation law, empowering state institutions to sterilise without consent '*imbeciles*' whose condition was '*pronounced improvable*' by a panel of physicians (Bayer 1986). In the 1940's, under the pure race policy '*Aktion*', the Nazi regime was directly responsible for the murder of over seventy thousand PWID. It was viewed at this time that PWID made no valued contribution to society and so they were eliminated (Collins *et al*. 2002, p.88). Foreman (1999) stated that eugenics is not simply a matter of history but is practiced today and indeed Marinelli & Dell Orto (1999, p.13) claimed that 'the great interest in discovering which genes cause inherent impairments only accentuates the problem of eugenics'.

Dor Yeshorim, a program which seeks to reduce the incidence of Tay-Sachs disease among certain Jewish communities, 'is another screening program which has drawn unfavourable comparisons with the process of eugenics. In Israel, the general public is advised to carry out genetic tests to diagnose the disease before a child is born. If the unborn baby is diagnosed with the disease the pregnancy is usually terminated*'* (Faal 2005, p.94). Shakespeare (2006, p.88) claimed 'the term *'eugenics'* is an attempt to influence the distribution of undesired genes in the population. It is based on the concepts of segregation, exclusion, survival of the fittest and elimination'. Carey (2009) suggested that in every era ideas about intellectual disability and the experience of people with intellectual disabilities have challenged, connected with, or operated in tension with formulations of citizenship and rights. Indeed, PWID have typically been viewed as deficient for full citizenship, often as the opposite of the ideal citizen, and as not only unworthy of citizenship but dangerous to the well-being of the community and nation. As it was believed at this time that PWID could make no valued contribution to society and would make excessive demands on scarce resources, society responded by the elimination, exclusion and marginalisation of this vulnerable minority group. In turn many PWID were rejected and society justified its actions by linking negative associations to these individuals.

1.3.2 Response Number Two: Dependency Model/Medical Model of Disability

A societal shift in thinking and approach towards PWID was evidenced in the 1800's. Rather than abandoning or killing PWID they were instead institutionalised. Interestingly, in Ireland at this time (late 1800's to early 1900's), before they were officially acknowledged as having a disability and therefore needing care, PWID usually lived and worked amongst their communities. However, the roles they filled were not regarded with any significant importance, so while they may have experienced acceptance to some degree, they were also viewed as objects to be pitied or at worst objects of fun (Conroy 2009). With the onset of the Industrial Age and the growth in cities however, PWID found themselves becoming significantly excluded from mainstream society.

This was due to the fact the PWID could not readily adapt to the changes required for inclusion in a rapid-growth, industrial environment. Barnes and Mercer (2010) claimed that as far as disabled people were concerned, the growing speed of factory work, dexterity and complexity of undertaking work related tasks, along with strict systems of discipline were an unfavourable change from slower more self-determined methods of work into which many *'handicapped'* people might have been integrated. In turn, what may have been tolerated or ignored in a slower more flexible pattern of agriculture or domestic production became a source of friction, if not a threat to survival within the new industrial age. Thus, the dependency model of care and institutions emerged in the late 1860's. In most developed, let alone under-developed nations at this time, PWID were typically institutionalised, as in keeping with the ideology of eugenics they were perceived as making no valued contribution to society.

This response maintains PWID in a role of institutional dependency, reliant on charity and goodwill and resulted in the development of institutions, so-called '*mad houses'*, *asylums'* and '*work houses'* where PWID were locked away and medical experts sought cures for them.

This type of isolation and segregation only served to heighted society's fear and ignorance of PWID, not to mention significantly diminishing their public visibility. However, institutionalisation of PWID facilitated the development of a specialised medical profession and a whole range of new professions, most of which were dominated by medicine. 'The domination of the medical profession in professional-disabled people relationships contributed to the ongoing segregation of and discrimination against PWID and produced arguments, usually biological in nature, to justify the exclusion of PWID from mainstream social and economical life' (Albrecht, Seelman & Bury 2001, p.737). Collins *et al*. (2002) stated that the common belief in this response is that the individual with a learning disability is less capable than the general population and unable to develop in any meaningful or purposeful manner. In turn, '*maintenance*' and '*containment*' of the person was regarded as an adequate response to an otherwise pitiful set of circumstances. The role of institutions therefore, was to control and isolate PWID at a minimal cost to society. Tragically for most PWID, the dependency model became a self-fulfilling prophecy as the institution became their only known way of life and their everyday reality.

Even more tragically, society came to believe that incapability and dependency were the '*norm*' for PWID rather than as a result of the appalling, non-stimulating existing conditions they endured twenty-four hours a day, every day. Dependency is not a result of physical or intellectual attributes, but of the social structures PWID have been forced to endure. In Ireland today, according to the report '*Time to move on from Congregated Settings*' over 4000 PWID continue to live in congregated or institutionalised settings. This report was commissioned by the Health Services Executive (HSE) late 2007 and published to an air of national regret. The report goes on to state many of these people live isolated lives separated from communities and families; many experience institutional living conditions where they lack basic privacy and dignity.

The language used to define and describe PWID by institutions and the medical experts who worked in them was extremely negative and often pejorative, which promoted a societal response in which PWID were perceived to be *'sick', 'stupid'* and *'imbecilic'*.

Indeed, the very name of such institutions was explicitly revealing as to how society perceived PWID. For example, the Stewart Institution for '*Idiotic and Imbecilic Children*' opened in Dublin in 1869 in what was then an isolated rural location. Such negative labelling and segregation only served to heighten society's fear and ignorance of PWID and significantly compromised their public visibility and inclusion within local communities. Foucault (1973) stated the names and definitions we give things shapes our experience of them and our experience of things in the world influences the name we give them. In 1998, Masutha (Director of Socioeconomic Rights in South Africa) said 'we must take language very seriously. The feeling I have is that language is always a reflection of attitude'. With an advancement of the disability movement you see a change in language. However, in the mid 1970's Wolfensberger identified common perceptions of society towards PWID, which relate to a role of dependency. He claimed society still view PWID as being *'sick'*, '*a burden on charity'*, '*a menace'* and '*subhuman*'.

Samuel, Horner & Snell (2009, p.67) stated 'disability labels serve to stigmatise people as being inferior, which leads to lower expectations of them and poorer life outcomes'. Traditionally, medical experts, who are viewed as knowledgeable and powerful, have labelled people with disabilities. This can have significant negative connotations for PWID. In the past we had labels such as 'mentally ill', 'retarded', 'handicapped' and' special' but to mention a few used to define PWID, albeit that the language and descriptors used in this regard has become more sensitive over recent years.

Becker (1963), cited in Thomas & Woods (2003, p.27), also claimed that 'people in a position to label others must always consider the impact of those labels'. This includes the power held by the people who place the label, the impact the label has on the person and how this labelling process might affect his or her acceptance by society at large. In today's world, it seems there is something of a requirement for medical, health and social care professionals to place labels on PWID in order to *'categorise'* them. However, attitudes, values, beliefs and labelling are a legacy of the '*survival of the fittest'* and '*medical model'* responses to PWID that were discussed earlier in this analysis.

Farrell (2012) claimed that it is almost inevitable that labelling PWID will always result in negativity. Originally, terms regarded as being '*neutral*', such as '*idiot*' and '*imbecile*', which were commonly used during the latter part of the twentieth century, assumed a negative and disparaging meaning. Farrell (2012) goes on to explain that in the United Kingdom (UK) the expression '*educationally sub-normal*' indicated educational functioning below the statistical norm. The term gradually became to be perceived as negative and was replaced with terminology such as '*severe*', '*moderate*' and '*profound*' learning disabilities. These terms continue to be used frequently in relation to PWID today, along with other labels such as '*special*', '*special needs*', '*mild*' and '*challenging bahaviour*' all of which do little, if anything to portray such individuals in a positive light. However, most terms used to define PWID such as '*handicapped*' and '*special*' are used by people who have never experienced a disability, so such definitions will inevitably compare disability to the '*able bodied*' norm (Collins *et al*. 2002). It is significant to reinforce the point that every definition placed upon PWID has rarely spoken of inclusion or been positively intended. For example, the World Health Organisation (WHO) in the 1980's and 1990's defined disability as 'any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being' (WHO 1993, p.28).WHO also define the term '*impairment*' as 'any loss or abnormality of psychological or anatomical structure or function' (WHO 1993, p.27).

Such definitions are very important as they continue to promote a culture of dependency and moreover many organisations that support PWID are influenced by the position adopted by WHO. In conjunction with the institutionalisation of PWID, the medical model of disability also emerged at almost the same point. The medical model views PWID as a '*problematic*' group of people. It promotes the belief that PWID need to adapt to '*fit*' into the world as it is; a world that is viewed through the eyes of an 'able bodied' person for the most part.

If this is not possible, then the medical model contends that they should be '*shut away*' in specialised institutions or isolated at home, where their basic needs can be met (British Film Institute 2012). This views a disabled person as being dependent and needing to be cured and cared for and justifies the way in which PWID have been systematically excluded from society (ETTAD 2007). With regard to the medical model of disability, Goodley and Lawthorne (2005, p.177) claimed that 'disempowerment is still a feature of the relationship between people labelled with learning disabilities and the organisations that plan and deliver services to them. People labelled as learning disabled are generally excluded from gainful economic employment and many have their adulthood denied'.

According to French (1994), cited in Wilson, Ruch, Lymberly & Cooper (2008, p.542), '*the ways in which models of disability are defined is critical. Attitudes and behaviour towards PWID, professional practice and the management of institutions are based, at least in part, on our use of such definitions*'. Thus, the medical model regards disability as an individual problem and has resulted in the systematic labelling and exclusion of PWID from society.

1.3.3   Response Number Three: Rights Based Model/Social Model of Disability

The last 30 years have witnessed a redefinition of disability and the emergence of a model based on '*social inclusion*' '*independence*' and '*rights*'. Disabled people developed the social model of disability because the traditional medical model did not explain their personal experiences of disability or help to develop more inclusive ways of living for them. The social model promotes the '*ridding of societal barriers*' rather than relying upon medical model cures in order to promote inclusion for PWID in society and their communities. According to Lang (2001), the social model is the belief that, at root, "*disability*" and "*disablement*" are socio-political constructions. It is therefore the inhospitable physical environment, in concert with the negative social attitudes that disabled people encounter, which result in the systematic oppression, exclusion and discrimination of disabled people.

This view of disability is caused by the physical and attitudinal barriers encountered by PWID in wider society and impacts on their right to be involved and included in everyday activities in their communities.

Carson (2010) claimed that the social model of disability was primarily a result of society's previous response to PWID and of their experience of health and welfare, which left them socially isolated and oppressed. Advocates of the social model also lobbied for more effective policy making and legislation enactment in order to protect the rights of all people with a disability. In the USA the disability rights movement began in the 1960's (this being encouraged by the examples of the African-American civil rights and women's rights movements taking place at the same time). While in Ireland, the 1970's witnessed the enactment of the Health Act 1970, which made specific reference to catering for the medical needs of PWID. Although there was no focus on inclusion or independence in this piece of legislation it did acknowledge that PWID as a group has certain specific needs relating to their disability.

Throughout the 1980's and 1990's more positive developments in disability policy and legislation were evidenced in Ireland and a number of other western nations. The Employment Equality Act 1988 contained a specific focus on '*positive action* 'around equal employment opportunities for people with disabilities. The Commission on the Status of People with Disabilities followed in the 1990's as legislative responses to the plight of PWID and other disability forums emerged. The Report of the Commission presented an equality strategy in which it 's*et about removing barriers*' which stand in the way of people with disabilities who want to live full and fulfilled lives. The strategy involved legislative solutions, proposals for new policy initiatives and new structures for delivery of equality services within a framework of rights for PWID and not charity.

The National Disability Authority (NDA) established in 2000, is a respected and independent national lobby group providing expert advice on disability policy and practice to the Government in Ireland.

The NDA realised that people with disabilities are typically disadvantaged in many aspects of social inclusion and that many of the barriers to their inclusion and acceptance in wider society stems from both environmental and attitudinal barriers. According to Harvey (2008, p.24), 'the NDA was established to protect the rights of people with disabilities, to develop policies for people with disabilities, to monitor services and standards and to support and encourage equality for all people with disabilities'.

Although long established as NAMHI, an organisational name change in 2006 saw the launch of Inclusion Ireland. Inclusion Ireland advocates for changes to law and Government policy on issues affecting people with an intellectual disability. The '*Vision of Inclusion Ireland'* is that of people with an intellectual disability living and participating in the community with equal rights as citizens. Inclusion Ireland aims to ensure that people with intellectual disabilities have their voices heard, are not isolated or segregated from their communities and can lead more independent and healthier lives. (Inclusion Ireland 2016).

The Equal Status Acts of 2000 – 2008 make claim to protecting and promoting the inclusion and rights of PWID in mainstream society. The Acts 2000–2008 (updated in 2012) aim to promote equality, prohibit certain kinds of discrimination across nine grounds (one ground specifically aimed at people with disabilities) and requires reasonable accommodation for people with disabilities in order to better support their inclusion in mainstream society (National Federation of Voluntary Bodies 2012).

The Disability Act 2005, a '*rights-based*' piece of legislation, which aims to protect PWID from discrimination and safeguard their rights, was enacted in 2005. The Disability Act 2005 is part of a framework of Government legislative measures which support the 'social inclusion of PWID. The Act establishes a basis for an independent assessment of individual needs, access to public buildings, services and information; to ensure that access for people with disabilities will become an integral part of service planning and provision and an obligation on public bodies to be proactive in employing people with disabilities' (Government of Ireland 2005, p.3).

The Health Information and Quality Authority (HIQA) established under the Health Act 2007 provides for regulated disability service provision, with a specific focus on the promotion of inclusion and rights of PWID. HIQA is an independent authority that exists to improve health and social care services for the people of Ireland (HIQA 2017). From the Health Act 2007 a set of regulations were enacted in 2013. Statutory Instrument 367 (SI 367) (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013) regulate disability services so as they must provide supports for PWID 'to develop and maintain personal relationships and links with the wider community in accordance with their wishes and arrangements must be made for contact between PWID, their friends and the local community' (Government of Ireland 2013, p.11).

The National Advocacy Service (NAS) was set up in 2011 to provide independent, representative advocacy services for all people with disabilities (inclusive of people with intellectual disabilities). The NAS works from the principles that people with disabilities should be empowered to make key decisions that affect their lives, should be listened to and consulted with, have adequate access to the supports they need so as they can enjoy the benefits of participating and contributing to their local communities (NAS 2017).

In 2015, the Assisted Decision-Making (Capacity) Act 2015 was passed into Irish law. The Act sets out guiding principles that are intended to safeguard the autonomy and dignity of the PWID. There is a presumption that the person has decision-making capacity unless it is proven otherwise. No intervention should take place unless it is necessary and unless all practical steps have been taken, without success, to help the person make the relevant decision themselves (Relate 2015, p.2). This Act is about empowering PWID and to ensure that they are consulted with and involved in all key decisions affecting their lives. It is not fully known yet how this piece of legislation will pan out in practice however, according to Hynes (2017), the Act will ensure that the autonomy of PWID will be respected and it will repeal the archaic Lunacy regulations and legislation of 1871.

Thus, the underlying values and beliefs of the societal response to PWID of independence, in conjunction with the social model of disability can be summarised in the belief that every PWID has non- negotiable rights, they are capable of development, have a desire for self-determination in making their own choices which should not be dependent on institutions or disability organisations. However, while the move towards independence along with the social model of disability and the advancement of disability right legislation has seen a significant advancement on the previous two societal responses to disability (survival of the fittest/eugenics and dependency/medical model), they have not guaranteed that PWID will be more autonomous, respected or indeed included in their local communities.

However, despite an unprecedented level of enactment of rights-based legislation promoting equality and inclusion for PWID, many continue to live their lives on the periphery of society. A recent survey by Aiden and McCarthy (2014) in the United Kingdom found that while there had been significant and concerted efforts made by policy makers, legislators and service providers to provide better opportunities for PWID to be treated as equals and included in society, negative attitudes towards people with disabilities continue to be widespread.

Evidence from this survey found that a substantial proportion of the population believe that people with disabilities are dependent on non-disabled people. More recently Dolan (2016) stated that from an Irish perspective, Ireland needs to construct a person centred infrastructure to disability that can provide for early intervention to keep people with disabilities involved in the social life of their local communities. Dolan (2016) the Chief Executive of the Disability Federation of Ireland (2012) (DFI) claimed that at some stage disability comes to every door and along with it comes very specific defining features, namely exclusion and marginalisation. For many years disability studies and disability activists have claimed that the acceptance and inclusion of all people with disabilities in their wider communities is reliant on the development of understanding of '*interdependent*' relationships.

According to Ray and Sibara (2017), disability studies in their own right promote and accept individual difference uniqueness and interdependency. In turn this means that every person with or without a disability have different abilities with each playing an important role in wider society.

1.3.4   Response Number Four: Inter-Dependency

Interdependence focuses on relationships that lead to mutual acceptance and respect between people with and without disabilities. It is a reciprocal relationship in which each member is mutually dependent on the other. This concept differs significantly from dependency relationships, where some members are dependent and some are not. Condeluci (1991), cited in Steadwood, Dealer and Watkinson (2003), noted that a state of inter-dependence between people with and without disabilities is most conducive to promoting social inclusion. In his publication *'Seven Habits of Highly Effective People'*, Covey (1989) claimed that dependency is a paradigm in which we are all born, and we rely on people to care for us whereas independence is a paradigm under which we make our own decisions and take care of ourselves. Interdependence is a paradigm under which we connect with and co-operate with others in order to achieve something we would not be able to achieve independently.

Simple definitions of interdependence have included a reciprocal relationship between interdependent entities or a relationship where each party is interdependent on each other. Turnbull (2008, p.127) provides an alternative view and claimed that 'no person is truly independent; each of us relies on someone in order to live the life we want, to the level of success we choose'. Disability activists and commentators John O'Brien and Judith Snow were active supporters of the movement towards interdependence. Snow (1998), writing on inclusion for people with disabilities, remarks that in order for inclusion to be real, every citizen must be an '*ordinary*' citizen. So, the focus of interdependence is mutual relationships and learning to live with one another.

According to Collins *et al*. (2002), inclusive communities support co-operation, participation by all, relationship building, friendships and interdependence. Whereas Tacket (2009, p.78), stated that *'*participation is synonymous with social connectedness and inclusion, but achieving inclusion has been problematic for many people with disabilities because societal barriers still exist today. Such barriers not only include lack of physical access to the environment but are also '*attitudinal'*. Thus, if one recaps on societal responses to disability it can be seen that they can be located on a continuum over time. At one end of the continuum exists the concept of 'survival of the fittest', eugenics and extreme exclusion; at the other resides issues of independence, interdependence, rights and the concept of inclusion.

1.4 CURRENT IRISH POLITICAL LANDSCAPE – DISABILITY POLICY AND LEGISLATION

As a nation, Ireland has come a long way since the 1800's in its approach, treatment and responses to PWID. The majority of PWID now live in community-based support settings. These services all work from an ethos of independence, rights, inclusion, dignity and respect for PWID. Significant advances have been witnessed in the development of legislation and policy making. Researchers such as Antonak, Seelman & Bury (2000) and Brostrand (2006), cited in Tacket (2009), have argued that there is evidence to suggest that societal attitudes to people with disabilities is improving. It is also fair to say from a global perspective, there have been genuine concerted attempts to address the social inequalities and unjustness that the majority of PWID have typically encountered. Over the past three decades in the USA, there has been a major push to include PWID in all aspects of society (Siperstein, Pociask & Byrnes 2009). In Europe and Ireland numerous legislative and policy mandates have been enacted to ensure the welfare and rights of these individuals. However, research undertaken by the NDA (2011) in Ireland highlights that negative attitudes to disability still persist today. There are numerous possible reasons for this situation.

The legacy of exclusion and survival of the fittest continues to influence how people with disabilities are supported in 2017. Although Ireland has enacted multiple pieces of rights-based legislation supporting community inclusion for PWID, the country has only recently enacted the Assisted Decision Making (Capacity) Act in 2015. Up until this time, the situation in relation to capacity and PWID had its genesis in the Lunacy (Ireland) Act of 1871. According to the Act the word *'lunatic'* shall be constructed to mean any person found by inquisition to be an '*idiot*', '*lunatic*' or of '*unsound mind*' and incapable of managing his affairs (The Lunacy (Ireland) Act 1871). Such language is overwhelmingly negative with absolutely no focus on a person's capacity and capabilities. It is also aligned to the Medical Model of disability and institutionalisation. The Lunacy (Ireland) Act of 1871 allowed for the '*Ward of Court'* system, which meant that for PWID who had been made a '*Ward of Court',* the Court makes all relevant decisions about their lives, from medical and financial matters, to leaving the country and whom and when they should marry (Inclusion Ireland 2012).

This meant that many PWID were excluded from critical key decisions that affect their everyday lives and their future interests. There was no focus on a PWID or their capacity and ability to think for themselves, which by now has become a recurring concern of this author. Again, this reminds us of the dependency model of disability. Lennon (2011) claimed that such recent archaic legislation was an embarrassment at this point in Ireland's development and continued to have negative effects on the everyday lives of PWID, such as attempting to open bank accounts, make wills and travel. Indeed, so archaic was the system it could be argued that the concept of rights- based pieces of legislation, which make claim to promoting inclusive communities for PWID, could only be but regarded as tokenistic, certainly up until 2015.

It is vital to stress that the Lunacy (Ireland) Act of 1871 has just very recently been surpassed by Capacity Legislation and it had profound effects on the everyday lives of many PWID, as it stripped the person of their right to be included in critical decisions about their life.

While the intention of recent rights-based pieces of legislation was to promote inclusive communities for PWID, they were significantly undermined by the archaic Lunacy (Ireland) Act of1871. It is also important to stress that parts of the Assisted Decision Making (Capacity) Act of 2015 have yet to commence and it remains to be seen how this legislation will impact on the everyday lives of PWID. Other issues with rights-based pieces of legislation such as The Health Act 2007 are the fact that they have only recently been fully implemented. This Act imposed a series of regulations on disability service providers to ensure PWID are protected and have a good quality of life. It makes explicit reference to the importance of social inclusion for all PWID. However, some disability service providers struggle significantly with promoting opportunities for PWID to experience real and meaningful inclusion and are assessed as being in breach of the Outcomes and Regulations stipulated under the Health Act of 2007.

Martin and Cobigo (2011) highlight the fact that in a global climate, where funds are limited and resources are scarce, the ability to demonstrate the achievement of outcomes becomes all the more important. As government departments continue to experience significant cut backs in resources (both financial and human) it is a concern that achieving outcomes such as community and social inclusion for PWID may not be viewed as a priority, even though the Health Act 2007 has been fully implemented and commenced. In 2006, Nolan and Gannon found that people with disability fared worse than others in their own age group in relation to inclusive education and work. In the report *'A National Survey of Public Attitudes to Disability in Ireland'* published in 2012, the NDA found that public attitudes to PWID can be a key facilitator or serious barrier to their inclusion and participation in society. Recognising this, the NDA has had a long-standing commitment to measuring attitudes and researching effective strategies to address negative attitudes to disability where they exist. Findings also inform that there is a *'hardening'* of public attitudes towards PWID and over the last four years the public are less accepting of the fact that it is society that disables a person (NDA National Survey of Public Attitudes to Disability in Ireland 2012, p.12).

In stark contrast to the research above, the Special Olympics Ireland continue to claim that they are transforming the world into one where all PWID are respected and included in society and their communities. The SO organisation has become a particularly high-profile advocate for those young PWID who wish to engage in organised sports pursuits. In 2003, the Special Olympics World Summer Games were held outside of the United States for the first time, taking place in Dublin, Ireland to considerable public and international acclaim. Lemke (2009) claimed the Special Olympics can alter the images of PWID to the obvious benefit of those that previously had encountered only negative stereotyping and exclusion. They can transform communities from closed ones to open ones, from intolerant to accepting ones and by using sport to accomplish this, they have come to represent the good, the power and the true spirit of the Games. In his paper '*Changing Expectations',* Siperstein (2008) claimed that sports don't just increase self-respect among people with intellectual disabilities, they increase others' respect for them too. The benefits of inclusion in recreational settings are far-reaching and extend to participants without disabilities as well. By participating in an inclusive environment, children with and without disabilities learn more about tolerance, acceptance, and what it means to have a disability.

Notwithstanding what appears to be a widespread sympathetic view of the organisation, according to Storey (2009), the Special Olympics can shape the public's image of PWID in a negative way. Storey (2009) believes the SO reinforce negative stereotypes about people with disabilities and further perpetuate segregation and oppression. Storey further underlines this point when he stated that popular press and mass media accounts of the Special Olympics often reinforce a negative, self-fulfilling prophecy that evokes sympathy, pity, or stigma and promotes a negative stereotype of people with disabilities. Gardiner (1998) noted a headline in the Oakland Tribune which remarked *"Special Olympics' Athletes Win Smiles: Races belong to not-so-swift, not-so-strong"* and another headline from the Union Recorder was *"but the real stars of the show were the event participants who, despite their mental handicaps, were able to inspire all who attended, as well as conjure up smiles from all the warm huggers and event contributors"* (In the Union-Recorder [Milledgeville, GA, April 9, 2009]).

Gardiner (1998) also highlights a comment made by the then President of the USA, Barack Obama on national television (March 19, 2009) in which he remarked in regard to his bowling skills, "*It was like the Special Olympics or something*." Gardiner (1998) has stressed that the way in which such media headlines and comments made about PWID and the SO are 'interpreted' by the general public can reinforce negative stereotypes and further perpetuate the exclusion of PWID from their communities. Storey (2009) argued that such headlines and remarks receive prominent coverage in the mainstream media and further enhance the general public's negative perception of PWID through the lens of the Special Olympics. Despite this, the Special Olympics (2011) claim that their Games are an international program of sports training and athletic competition for PWID and their 'full potential as a powerful means to foster greater inclusion and well-being for PWID is only beginning to be realised'.

1.5 DEFINING SOCIAL INCLUSION AS IT RELATES TO PEOPLE WITH INTELLECTUAL DISABILITIES

To reiterate, social integration, inclusion and participation are explicit aims of recent disability legislation and policies in most western countries (Ward & Stewart 2008). These concepts also mirror the mission and goals of the Special Olympics. However, it is important to acknowledge that the concept of inclusion is not easy to define and has many different meanings and definitions. How it is measured in terms of meaningful inclusion will depend on how it is understood and indeed how it is experienced. The term '*social inclusion*' emerged as a European political concern in the late 1980's as a consequence of changes within the European context and was originally defined in terms of poverty (Waring & Mason 2010, p.518).

Social inclusion is arguably more about enabling and empowering individuals to participate in society, to improve their life chances through enhancing their social experience. Judith Snow, renowned disability writer (a person with a disability who was institutionalised at an early age) simply describes inclusion as '*being missed if you are not there'* (Snow 1991).

She asked the question would society miss PWID if they were no longer part of our communities. The answer to such a simple yet complex question can only come from understanding how connected, involved and included PWID are in their local communities. It goes without saying then that PWID need to be connected to their communities in a meaningful way in order to experience social inclusion.

Hall (2009) presents the reader with a more complex explanation of inclusion. From a qualitative study undertaken in 2009, he identified six themes as being 'crucial' to social inclusion from the perspective of PWID. Two of such themes were '*being accepted as an individual beyond the disability*' and '*having significant and reciprocal relationships*'. In a study by Hassan, McConkey & Dowling (2011) related to the Special Olympics, it was found that the social and personal development of PWID (athletes) was very important to the development of friendships and social bonds between athletes. This could equate to '*reciprocal relationships*'. However, according to Brueggemann, White, Dunn, Heifferon & Cheu (2001), there are 56 million people with disabilities in the USA yet they remain largely invisible. In their lectures on disability studies, Brueggemann *et al*. (2001) have been regularly asked why we do not see more people with disabilities, considering there are 56 million people living with disabilities in the USA.

The answer they claim is simple, people with disabilities are not visible because they are not integrated and included in our communities in any '*meaningful*' way. Rancharan (2009) argued that to date the approaches taken to promote inclusion for PWID have produced lifestyle changes for this group but are yet to accomplish community living, social justice and community acceptance and well-being together.

1.6   DISABILITY SERVICE SYSTEMS AND SOCIAL INCLUSION FOR PWID

As far back as 1987, John O'Brien claimed that the ultimate success of disability service systems depends upon their ability to help people to maintain and develop positive, "*enduring, freely chosen*" relationships (O' Brien 1987).

Services have systematically failed to achieve such outcomes as their focus remained upon inability, dependency and the maintenance of PWID. In the 1990's, O' Brien and Lyle (1997) claimed many people with developmental disabilities were more vulnerable to isolation because they lack real opportunities and assistance to make and keep good relationships.

It is important to note that O'Brien and Lyle place no blame on PWID but on services and community groups that make claim to support PWID for not addressing the real issues they encounter on a day to day basis. Pitonyak (2002) found that what is most debilitating for many PWID is not their disability, but the extreme loneliness they experience. It is loneliness that is their only real disability. Indeed, many people who use services for PWID are profoundly lonely. Much of their suffering results from isolation not disability.

Such findings are a strong indicator that organisations making claim that they have fostered greater respect and community inclusion for PWID have systematically failed to do so in any meaningful way. Bigby & Fyffe (2010) found that social inclusion for people with disabilities was perceived as a multi-layered concept that requires action at all levels of society: the individual (micro), organisational and community (meso) and structures and governmental (macro). This suggests that the concept of inclusion as it relates to PWID, and how it is interpreted and understood is a complex phenomenon at individual, organisational, community and governmental level.

In his paper *10 Keys to Successful Inclusion*, Canadian researcher Bunch (2005) noted that attitude is also a key factor in determining real inclusion for people with disabilities. His focus was on education and how negative attitudes towards children with disabilities permeate their exclusion from mainstream education. He claims that Canada has by no means embraced the concept of inclusive education for children with disabilities, stating there is much resistance toward change to inclusive education in the country. There are many naysayers who do not believe that learners with disabilities can learn effectively in the same classrooms as typical learners.

They believe that being in the same classrooms will diminish the learning of all students and drive teachers toward frustration and burnout. Their preference is to revert to the '*old system*' of separation and segregation. Thus, attitudes towards PWID by the general population is key in understanding how included they are in mainstream society.

1.7 INTRODUCTION TO DISABILITY SPORT, THE SPECIAL OLYMPICS AND SOCIAL INCLUSION

Sport for people with disabilities is found throughout the world. Gavron and DePauw (2005, p,114) claimed that 'the structure and history of disability sport have varied in relation to the societal context of a given country and its national sports structure...and disability sport has varied in relation to the societal context of disability'. Nowadays, due to the increased visibility of athletes with both physical and intellectual disabilities through major international event such as the Paralympic Games, Special Olympics and Deaf Olympics disability sport has evolved and is interlinked at international level. According to Browne and Hudson (2007 p.525), 'the history of sport and disability lies in the field of medical rehabilitation'. Dr. Ludwig Guttmann is generally recognised as one of the main pioneers and is known as the '*father of disabled sport*''. Notwithstanding the many physical and psychological benefits from participating in sport to be had, sport is increasingly being seen as a method to help address the social exclusion agenda. According to Nicholson *et al.* (2011 p.306) 'sport can deliver many benefits and in many nations worldwide sport is becoming an important instrument within a range of public policies particularly in the areas of public health...and social inclusion'. Indeed the phenomenon of sport has a long history in not only promoting both physical and psychological wellbeing, but in supporting the process of social inclusion for people with disabilities.

The oldest international organisation providing sporting activities for people with disabilities is the Compte International des Sports des Sourds (CISS).

This organisation was founded in 1922 in conjunction with the first international competition for athletes with disabilities to include the World Games for the Deaf in Paris (Levinson and Christenson 1999). 1924 saw the establishment on the British Society of One-Armed Golfers and according to Vanlandewijck and Thompson (2016 p.3), 'these were one of the earliest organisations to emphasis sports of physical prowess for people with physical disabilities'. However, according to Goosey-Tolfrey (2010), this type of emphasis on physical prowess and with regard to performance disability sport was typically framed by the medical model of disability. There was no focus on social inclusion or community but rather on competitiveness and performance.

Due to the outbreak of World War II (WWII) in 1939, a large number of young men from many nationalities and backgrounds sustained permanent physical disabilities. It was at this time that German physician Ludwig Guttmann looked to sport as a means of physical and psychological rehabilitation of those with physical disabilities. According to Smith (2014), the main aim of participation in sport at this time for people with physical disabilities was not only to provide a sense of self value and worth but to change societal attitudes towards people with disabilities and to show that they could continue to be valued members of society. In turn, Guttmann believed that one of the many benefits of participation in sport was that it could be utilised as a tool to socially re-integrate people with disabilities back into their communities. Thus, according to Arthur and Finch (1999), in a similar vein to the social model, people with disabilities could not only experience the physical benefits of participating in physical activity but also the social benefits. This was particularly true with regard to the participating in sporting activities.

The year 1948 witnessed the first 'Stoke Mandeville Games' which was an archery competition for people with physical disabilities. These Games were attributed to Guttmann (by this time Guttmann was an advocate for sport as a means of physical recreation and psychological wellbeing) and according to Vanlandewijck and Thompson (2016), these Games evolved into what is known today as the Paralympics. The first Paralympic Games were held in Rome in 1960 and whilst they started out as a relatively small affair, the 15th international Paralympic Games held in 2016 in Rio De Janeiro,

Brazil were a huge and spectacular event. Etchells (2016) claimed that 4,342 athletes representing 159 National Paralympic Committees competed in Rio. Thus, involvement in the Paralympic Games can provide for not only physical and psychological benefits, but athletes may also experience increased social inclusion.

According to Jones (2013 p. 172), 'such benefits may include skills and capacity development... as well as social inclusion' for people with intellectual disabilities. By 1962 the first international sporting games specific to PWID were held in Chicago, USA which were the Special Olympics (SO). Established by Eunice Shriver the SO are the most significant and recognisable worldwide sporting organisation for children and adults with intellectual disabilities. From their humble beginnings in 1962, the SO have grown enormously and today they are the world's largest programmes of sport for PWID. According to Le Clair (2013, p.69), the SO 'aim to provide more opportunities for athletes with intellectual disabilities in to demonstrate their abilities to society by promoting their inclusion in their own neighbourhoods and schools'. From an Irish perspective, Special Olympics Ireland (SOI) came into being in 1978 and has grown considerably since then. Today it is reported that there are over 9000 athletes participating in Special Olympic Clubs throughout the island of Ireland. According to the SO official website, 'Special Olympics Ireland is a sports organisation for people with an intellectual disability, but it provides athletes with far more than the physical benefits of sport. Special Olympics changes lives. Through sport, athletes develop both physically and emotionally, they make new friends, realise their dreams, and know they can fit in. (SO 2017)

There is no doubt that PWID competing as athletes in SOI experience a sense of '*connectedness*' and social contact when participating in their various SOI clubs and sporting events. Hassan *et al*. (2013, p.9) stated that 'SO coaches have reported that a focus on the wider social and personal development of athletes is a routine aspect of their job'. In the same study, findings also reveal that there is a complex and multi-dimensional relationship between coaches and athletes. Coaches and athletes both acknowledge that close personal bonds develop between them.

Athletes see coaches as their role models, people in whom they can confide and a friend as well as their sports coach. In another study by Hassan, Menke, Dowling & McConkey (2013, p.20) on the Special Olympics Youth Unified Sports Programmes, findings also revealed that athletes experienced a sense of '*connectedness*' and social contact by participating in the games. One athlete quotes 'the team includes everyone, we play as one, we work together, that is the best way for unified teams'.

With reference to Bigby and Fyffes' (2010) explanation on social inclusion for people with disabilities as a multi-layered concept that requires action at all levels of society: the individual (micro), organisational and community (meso) and structures and governmental (macro) it would appear at an individual level many athletes genuinely feel a sense of inclusion in and connectedness with the organisation of the SO. At this micro level, athletes' individual experiences of the games have been generally positive and they have built up friendships with staff of the SO and other athletes. At the meso level the organisation of SO makes claim to achieving respect and inclusion for all the athletes and to a degree there is some credibility to this claim. However, it would appear that this '*inclusion*' and '*connectedness*' is within the confines of SOI sporting events, where friendships occur between athletes, coaches and volunteers. At the macro level, administrations and governments are only too happy to hear that organisations are creating opportunities for '*social inclusion*' for PWID. Thus, SO international events such as the recent Special Olympic Games in South Korea where Irish athletes won several gold medals may shift the focus of poor disability policy implementation and barriers to participation, for a time. According to Shields, Synnot and Barr (2012), such barriers to participation in disability sport include negative attitudes towards disability, inadequate facilities, lack of transport, lack of programmes and staff capacity, and cost. That said, in 2016 Spórt Éireann launched the '*Sport Ireland Policy on Participation in Sport by People with Disabilities'*. This policy is recognised as Ireland's first-ever National Physical Activity Plan for Ireland (NPAP, 2016) which aims "to increase physical activity levels across the entire population (inclusive of PWID) thereby improving the health and wellbeing of people living in Ireland (Spórt Éireann 2016, p.4).

How successful this strategy will be in promoting the participation of PWID in sporting activities remains to be seen.

It is also difficult to critically evaluate the success of the games from a '*social inclusion*' perspective when athletes have won medals and all concerned are incredibly proud of their achievements. However, according to Bigby and Fyffes (2010), there is one more aspect of measuring meaningful and successful social inclusion for PWID at meso level: the community. In order to assess how socially included PWID are in their local communities, certain questions must be answered. For example, how are PWID perceived by their peers without intellectual disabilities, have they friends their own age in the community without disabilities and outside of SOI do they do the same things, go to the same places and share similar experiences as their peers without disabilities.

As already mentioned, the SO Summer Games were held outside of the United States of America for the first time in 2003. They were held in Ireland, to significant national and international acclaim. Indeed, they were hailed by most as being a spectacular success and received significant media attention. The Opening Ceremony which was held in Croke Park was watched by over 80,000 spectators not to mention a global television audience of multiple of millions. According to Radio Telifis Eireann (RTE) 2014, over half a million people turned up to watch SO events around the country and as a result thousands of people with an intellectual disability are making friends. Following the Games, Ireland saw significant legislative changes from 2004 onwards with the enactment of equality-based legislation and Disability specific legislation promoting and protecting the rights of all PWID. In the aftermath of the Games, there was increased Government funding for services for people with disabilities ensuring that people with a disability were no longer dependent on goodwill or charity for their basic needs. (RTE Sport 2014).

However, according to Finlay (2016), Irish disability legislation has fallen considerable short in achieving inclusive communities for PWID. Indeed, Finlay would suggest that in part, some disability legislative developments have all been but tokenistic.

In a similar vein, Storey (2009) has criticised the SO for portraying negative images of PWID which do nothing to support their inclusion into society. Taking into account the spectacular success the SO have had (and continue to have) in Ireland since they held the SO Summer Games in 2003 and acknowledging the unprecedented level of rights based legislation promoting the social inclusion of PWID post those Games, their claims of achieving communities that are inclusive of PWID warrant further investigation.

The purpose of this qualitative research project is to explore whether or not the Special Olympics and the images they portray of PWID are achieving their aim of ensuring that people with intellectual disabilities are respected, socially included and viewed positively by the general public or if, paradoxically, the Games and the images they promote of PWID actually serve to reinforce negative stereotypes about members of this group in turn perpetuating their segregation and oppression from society.

1.8   CONCLUSION

In conclusion, the way in which society has responded to PWID throughout the ages was dependent on the values, beliefs and attitudes towards this minority group at that time. In earlier times, PWID experienced extreme isolation as it was perceived that they made little, if any, valued contribution to society. PWID were routinely locked away where they were totally dependent on institutions for basic survival and were in receipt of extremely poor standards of care and support. However, from the 1970's onward the social model of disability evolved in the USA, which dramatically changed the way in which services were provided to PWID. Under this model, it was accepted that society and attitudes were more disabling for PWID than their disability and this model advocated for meaningful inclusion for all PWID in society.

During the 1990's there was a push from disability activists and lobbyists for Ireland to adapt the social model of disability. Heading into the new millennium, a range of equality and disability specific legislation was enacted from 2000 onwards.

At this time, Ireland was witnessing a significant societal shift in the way PWID were treated. Legislation such as the Equality Act 2004, Disability Act 2005 and the Health Act 2007 provided for better community access and social inclusion for all PWID. Disability service providers, for the first time in 2013, were also compelled under legislation to provide for the social care needs of their residents and over the last 20 years many disability specific service providers, including the Special Olympics have claimed that they have achieved the acceptance and inclusion of PWID in society. However, research shows that PWID are routinely excluded and disadvantaged in important areas of social life in Ireland today. Some disability activists claim that the segregation and exclusion of PWID has been so systematic and rigorous that there is a need for fundamental and significant societal reform in order to support their full and meaningful inclusion. Thus, the claims made by the SO warrant further investigation as research informs that the legacy of institutionalisation and medical model of disability continues to negatively impact on how PWID experience inclusion in 2017.

The next chapter '*Political, Medical and Social Responses to People with Disabilities*' will provide a detailed and systematic account of the evolution of the legislative framework that have directly impacted people with intellectual disabilities in more detail from an Irish perspective.

This chapter will focus on the political responses to people with disabilities in Ireland during the 1800's, from the Lunacy Ireland (Regulation) Act 1871 (which has just recently been replaced by the Assisted Decision (Capacity) Act 2015) to the present day. It will examine how people with disabilities were defined in key pieces of legislation and how such definitions and language used to describe PWID impacted on their inclusion and acceptance in Irish society from the 1800's onwards. A critical discussion of the medical model and social model of disability will also be presented.

CHAPTER 2

2.0   HISTORY OF POLITICAL, SOCIAL AND MEDICAL RESPONSES TO PEOPLE WITH DISABILITIES

2.1   INTRODUCTION

How we define the word disability is of crucial importance. Definitions enable societies and communities to have a generally accepted understanding of a word, a subject or an idea and facilitate collective agreement on thinking and understanding when discussing or reading about a specific concept. Throughout the ages definitions of disability have significantly impacted on how society has responded (and continues to respond) to people with disabilities and the way in which disability organisations provide support. According to McDonnell (2007, p.12), 'responses to disability were organised in characteristically different ways at different times'. Beginning with exclusion during the early modern period, through the institutionalisation of the nineteenth century, and down to contemporary social model theory, organising ideologies represent a sequence of concepts, structures and practices that became established in Ireland'.

Hence the definitions of disability used in disability specific policy and legislation over the years have influenced society's responses to this minority group and the types of support disability organisations have provided. McDonnell (2013) also claimed that, at both an Irish and international level, the relationship between disabled people and society is undergoing radical change. Such change has manifested itself in fields as diverse as legislation, education, research, service provision. Even the very meaning and definitions of disability are undergoing radical change. 'The promise of these initiatives is that they will end or, at the very least, minimise decades of discrimination and exclusion. Any attempt to understand this process requires an exploration of what we might call the deep structures of the relationship between disability and society…the prevailing and often taken-for-granted beliefs, ideas and values which shape that relationship' (McDonnell 2007, p.277).

In further progressing the themes identified in the Introduction, this chapter will critically examine in detail the history of political and societal responses to people with disabilities in Ireland during the 1800's, from the Lunacy Ireland (Regulation) Act 1871 to the present day. A discussion will be presented on how people with disabilities were defined in key pieces of legislation and how such definitions impacted on the everyday lives of this minority group. Two main models of disability will also be discussed in detail, the medical model and social model of disability and how each model directly impacted on the acceptance of PWID in society. Many people with disabilities experienced marginalisation and exclusion in western society, up until the 1980's and early 1990's. However, these decades witnessed the onset of the social model of disability (a model underpinned by an ethos of '*inclusion*'), and the enactment of disability specific legislation, protecting and promoting the rights of all people with disabilities. It is also important to note that successive political response to disability did not eradicate its predecessor, but was rather an '*improvement*' in the overall provisions and support for people with disabilities (McDonnell 2007). (For a concise overview of landmark developments in disability service provision, policy and legislation please see Appendix 1)

2.2 DEVELOPMENTS IN DISABILITY RELATED SOCIAL POLICY AND SERVICES FOR PWD 1800'S TO 1900'S

In 1801, Ireland became part of the United Kingdom and all laws enacted that related to and impacted Ireland and its people were passed in London. In 1800, the Acts of Union, the Union with Ireland Act and The Act of Union (Ireland) were passed by the Parliament of Great Britain and the Parliament of Ireland. They came into effect in January 1801 and 'the chief consequence of this legislation being that the people living on both islands were now considered to be members of the same country and kingdom' (Keenan 2008, p.13). Thus, so, the Acts of Union abolished the Irish Parliament and from 1801 to 1921 all major decisions relation to Irish social policy and legislation were made by the British cabinet and Parliament in London, neither of which allowed the Irish much, if any, influence (Heyck 2008).

The first support services established for people with disabilities in Ireland in the 1800's were the Richmond National Institute for the Industrious Blind in 1810 which provided support to men only and the Molyneaux Asylum for Female Blind shortly afterwards. The focus for both institutions was to equip *'inmates'* with a trade or skill, which would prepare each person for integration into society.

However, according to Chapin (1846), such institutions were described at the time as 'merely dragging along a feeble existence from year to year' and 'not having the progressive character of other institutions whose leading objective was to prepare the blind for society'(Chapin 1846, p.26). In 1810, the Government urged upon the House of Commons the necessity of affording some relief to the neglected conditions of the *'insane poor'* in Ireland, the result being that grants were made for the building of an asylum in Dublin called *'The Richmond Lunatic Asylum'* which commenced receiving patients in 1814 and was officially opened in 1815. 'The main aim of this asylum was to provide institutional facilities for the reception of the mentally ill from greater Dublin, Meath, Wicklow and Louth regions*'* (Reynolds 1992, p.23).

According to Rich (2004, p.2), the original '*political'* intentions of asylums in the 1800's were to provide 'a humane and restorative retreat which the 'mad' would attend for rehabilitation'. The asylum was intended to be a home where the patient was to be treated as an individual and where his/her mind was to be constantly stimulated and encouraged to return to its natural state...to strengthen the mind and restore reason. Goffman (1961, p.11) described an institution as 'a place of residence and work where a large number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life'.

Similarly, Ramirez, Alberti, Kottwitz and Floura (2007) suggested that many of the attempts to treat people in need of care in the 1800's were based on moral treatments where the patients could learn the skills to self-regulate their condition. Staff would focus on providing a structured routine for inmates and the approach taken was that of a '*gentle' one*.

However, Ramirez, *et al.* (2007) claimed that many institutions became overcrowded, were run by poorly trained staff and allegations of inhumane treatment and abuse began to emerge. Mechanical restrains were in regular use at this time as well. Institutions quickly became systems of custodial care in order to house people with disabilities, the *'insane'* and *'incurable'* in Ireland. Custodial care at that time was described as a model of treatment that could only meet the basic needs of patients for survival (Geller 1991). In a similar vein Grob (1972) suggested that a number of distinguished neurologists in the United States of America claimed that institutions could not work and were simply a way of keeping people imprisoned for years or even life. It was suggested at this time that mental institutions and asylums were nothing more than a prison for the '*insane'*.

2.2.1 Historical, Legislative and Societal Developments impacting on People with Intellectual Disabilities

In 1838 in Ireland the *'Dangerous Lunatics Act'* was passed, which was modelled on the 1800 English Act. This Irish Act specified that medical evidence needed to be given in order to certify an *'insane'* patient. Any person indicted as a '*dangerous lunatic'* by such medical evidence could be sent to a prison awaiting suitable accommodation in a lunatic asylum (European Social Science History Conference, Lisbon 2008). It is important to point out that the identification and definition of lunacy included intellectual disability (Walsh 2011). Another significant development in terms of welfare and support for PWD in nineteenth century Ireland was the introduction of the Poor Laws in 1838, which emphasised control and the maintenance of order, and also hardened the distinction between the *'deserving' and 'undeserving poor'* (Considine & Dukelow 2017, p.6). '*Deserving'* and '*undeserving poor'* were terms used to distinguish between the poor who deserved support through charity or state provision and those who did not. The deserving poor included orphaned children, the sick and the disabled. The Poor Laws proposed to extend the workhouse system in operation in England to Ireland. The workhouse was an institution which operated in Ireland from the early 1840's to the early 1920's. From 1842, workhouses were established for the poor, needy or any persons unable to provide for themselves.

The main aim of the workhouse was to provide accommodation and opportunities for employment. According to Conroy (2014, p.137), 'the emphasis was on developing self-sufficiency among the poor and disabled so that they did not become a '*burden*' on their parish, society or their families'. However, by 1846 the Irish Potato Famine had gripped the country and the number of people entering workhouses soared. There was significant overcrowding, conditions were poor and disease was rife. For most people, workhouses became one of the most feared and hated institutions ever established in Ireland (O'Connor 2014). Thus, the consequences of workhouses, asylums and institutionalisation significantly impacted on the everyday lives of PWD in the 1800's. In fact, according to Walsh (2005) the '*mentally handicapped*' were a group over whom the asylum management struggled with, as admissions to such institutions was always intended for the care of '*curable lunatics*' This resulted in most PWD being 'destined to spend their entire lives in asylums and institutions as their conditions were not '*curable*'…and the high level of admissions was further compounded by the comparatively low levels of discharge which served to swell the numbers of long term residents in institutions for the 'mentally ill' in Ireland' (Brennan 2013, p.82).

This development significantly impacted on PWID and societal attitudes towards them resulting in their systematic and organised exclusion from society at large. Institutions began to grow and rather than provide relief and support in peoples communities, help, of sorts, could only be found in the workhouses. This type of welfare support for people was based on segregation and isolation and by the end of the 18th century there were many district lunatic asylums in operation in Ireland, many of which had separate facilities for '*lunatics*' and '*idiots*' (Costello *et al.* 2002). As Ireland began to recover from the famine in the 1850's, the numbers entering workhouses and institutions declined and many became hospitals and residential centres caring for the sick, elderly, disabled and, in some cases, settings for unmarried mothers.

However, unlike many European counterparts, 'Ireland was slow in making separate and specialised provision for those suffering from intellectual disability, or mental defectives as they were called in the earlier days' (Walsh & Brady 2004, p.33).

In 1871, a key piece of legislation was enacted that directly impacted the lives of PWID, the Lunacy Regulation (Ireland) Act. It is important to note that despite much campaigning to replace this '*archaic*' piece of legislation, it continued to impact on the everyday lives of PWID in Ireland until 2016, when it was replaced with the Assisted Decision (Capacity) Act 2015.

2.2.2   The Lunacy Regulation (Ireland) Act 1871

The Lunacy Regulation (Ireland) Act 1871 is 'an Act to amend the Law in Ireland relating to Commissions of Lunacy, and the proceeding under the same, and the management of the Estates of Lunatics; and to provide for the visiting and the protection of the Property of Lunatics in Ireland; and for other purposes'. According to the Act, the word "*lunatic*" shall be construed to mean any person found by inquisition idiot, lunatic, or of unsound mind, and incapable of managing himself or his affairs. The Act was a 140 year old piece of legislation imposed under British rule and was only surpassed in 2015 with the passing of capacity legislation. According to Fennelly (2012), the Act was signed into law by Queen Victoria and under the Government of William Gladstone, the Lunacy Regulation (Ireland) Act of 1871 defines people with mental health illness as an '*idiot, lunatic or of unsound mind'*.

The now archaic Act referred to people at an intellectual disadvantage as an '*idiot'* or '*lunatic'* and meant the rights of those with disabilities to govern themselves were denied, their choices were not their own. (Fennelly 2012). Cahill (2012) claimed that the Lunacy Ireland (Regulation) Act 1871 was not an outdated law that had no effect on people in modern Ireland. It continued to have a powerful impact on the everyday lives of many PWD. Many were adversely affected by the impacts of this law as it took away the person's right to be included in important decisions that directly impacted their lives. As numbers in asylums began to grow in Ireland the development of auxiliary asylums began to slowly emerge. These asylums were specifically set up to care for '*incurables*'.

The first institutions to emerge from this development were in Youghal, County Cork and Portrane in County Dublin. It became common to label people with intellectual disabilities as '*retarded*' or '*handicapped*' and many were institutionalised from birth. The public image projected by such institutions was that of a large hospital based and charitable setting caring for people who are sick, unwell and vulnerable. In the 1800's, Stewart Institution for '*Idiotic and Imbecile Children*' was opened for children with learning disabilities. The original idea supporting the opening of this institution was to treat and *'cure'* children with learning disabilities so as that they could return to their families and communities. However, the children in question were never to return to their homes and the number committed to such institutions grew with few vacancies arising, thus further promoting the institutionalisation, isolation and exclusion of this marginalised group (Costello *et al.* 2012).

During the 18th Century, a more '*scientific*' understanding of intellectual disability emerged. Medical experts looked to science to cure PWID, or where a cure was not possible some form of rehabilitation was investigated. PWID were assessed based on their deficits, the focus drawing attention to what the person cannot do as opposed to what they can do. This has been called the medical model of disability, or medical model thinking by the Disabled Peoples Movement in the USA for the last 30 years (Attitude to Disability 2014).

2.2.3   The Medical Model of Disability

The medical model defines as a 'characteristic or attribute of the person, which is directly caused by disease, trauma, or other health condition and requires some sort of intervention provided by professionals to 'correct' or 'compensate' for the problem' (Zaretsky, Flanagan and Moroz 2011, p.8). Many disability theorists and activists view the medical model of disability as having its origins in viewing PWID as imperfect. This model reflects society's faith in the medical profession due to historical fears of disability combined with scientific advances to cure it (Beith, Tassoni, Bullman & Robinson 2005).

Thus, the medical model of disability views PWID as a problematic group of people. Under this model, PWID need to be '*fixed*' in order to fit into the norms of society. If this cannot be achieved, then the model contends that PWID need to be shut away in specialised medical institutions where only their basic needs would be met by expert professionals. With this model of disability there is a significant focus on dependency, and keeping PWID dependent on the institution. According to Attitude to Disability (2014), such an emphasis on dependency was backed up by stereotypes of disability that emulate feelings of pity, fear and patronising societal attitudes.

The basis for creating a culture of dependency in relation to PWID can be used in a twofold manner. Welfare states have traditionally organised '*disabled people*' to become '*dependent*' on the state for education, health care and financial support with the focus on the functional limitations of this group and what they cannot do for themselves. Lang (2001, p.15) claimed that 'there is also a professional basis for dependency. Many of the services provided for PWID, often in institutionalised settings engender such a state. Traditionally such services have been managed with little or no regard of the needs or aspirations of disabled people. Furthermore the professional-client relationship is itself dependency-creating, as undue power and influence is vested with the professional'.

Interestingly, Oliver (1990) suggested that both the economic and legal structures in which professionals that support PWID work perpetuate this culture of social exclusion and dependency. Professionals must manage '*scarce*' resources and must work within the '*legal*' boundaries of their profession. These structures determine their '*controlling*' functions as '*administrators*' and '*professionals*' who are employed to support PWID. Oliver (1990) points out that this observation is not simply another criticism of such professionals. He suggested that they are as much '*trapped*' in dependency creating relationships as are the people they support. According to Wolfensberger and Thomas (1995, p,3), 'if people are enabled to hold valued social roles, then it is more likely that the valued conditions of life will be extended to them by others and by society, and that they will be enabled and supported to live a valued life'.

Hence, the dangers of being trapped as a dependent are significant, and many PWID have not been afforded the opportunities to become independent, included and valued members of their society. Wolfensberger and Thomas (1995) further reiterated that devalued people have stereotypically been cast into a number of negative social roles. Such roles have included PWID being viewed as *'non-human'*, a *'menace'*, *an 'object of ridicule'*, a *'burden on charity'*, *'wholly innocent'*, an *'object of pity'* and *'childlike'*.

Thus, under this model it became easy for PWID to be viewed as weak and defective, needy and dependent (since they are assumed to require the aid of medical professionals), and generally incapable of getting good jobs, living on their own or participating fully in society (Sullivan 2011). It should be pointed out however, that the medical model of disability has (and continues to have) many benefits. According to Dreer and Elliot (2007, p.80), 'the medical model serves to preserve life and allay acute problems with the onset of a disability (and for the acute care needs of those living with a disability), the value of the model is readily apparent'.

However, the medical model has difficulty facilitating the permanency of an incurable condition in which the symptoms are managed over the span of a lifetime'. Thus, when PWID are viewed to be dependent and sick under the medical model, they are also at risk of being excused from normal obligations in society. Along with this, they may go on to experience isolation as there is limited to no expectation of them holding a valued social role in their communities. Sullivan (2011, p.3) stated that *'when the medical model is the dominant view of disability, it is therefore easy to see how negative perceptions of disability are constructed and reinforced, and how people with disabilities are marginalised in society'*. Because of this there has been a major shift in the assumptions held about the nature of disability. There has been a move away from what has been termed a *'medical model'* of disability towards what is termed a *'social model'* (WHO, 2001).

2.2.4 The Social Model of Disability

With the medical model of disability, the main focus is on a PWID's impairment and the limitations of their disability. The disability is mainly viewed as a medical condition and to be a problem at the very heart of the person. Those that advocate for the social model of disability have been critical of the philosophy of the medical model and how it has impacted on the everyday lives of PWID. The social model focuses on PWID's ability and their individuality. This model shifts the *'blame'* of the disability to the person's environment and environmental barriers the person faces on a daily basis in their community. It is the environmental barriers that limit a PWID's access to and inclusion in their local communities (WHO 2011). The social model of disability was pioneered by a number of disability advocates and influential lobbyists. However, according to Roulstone and Harris (2011, p.37), 'it is largely recognised by the seminal work of Michael Oliver. In his book '*The Politics of Disablement'* Oliver changed the generalised meaning of the term '*disability*' to incorporate social oppression'.

Thus, according to Oliver disabled people are oppressed and excluded by the non-disabled majority'. The social model of disability was developed to counter the 'formidable tragedy discourse that surrounds disabled people and that depicts disability as a '*deficit*' a '*tragedy'* and *'abnormal'* and something to be avoided at all costs' (Oliver & Barnes 1966, p.66). The social model is underpinned by a human rights perspective and is concerned with equality of access to resources and opportunities.

According to Beith *et al.* (2005, p.315), 'the 'social model of disability reflects a new attitude towards PWID. It has been developed by disabled people themselves and aims to challenge the historical view of disabled people being less worthy. It considers first and foremost that PWID have rights and feelings. The social model of disability aims to empower people, promote independence and emphasise their rights to make choices. It also challenges society to become more inclusive so that PWID are not seen as 'problems that need sorting out' or 'victims that need pity'.

Similar to the medical mode of disability, the social model is not without it criticisms. It has been criticised for paying insufficient attention to the individual, to the diversity of impairments and how they are experienced, and to the benefits of treatment to the individual.

According to Baility and Hodgkins (2009, p.220), 'the social model of disability has been criticised for its flaws as a theoretical model to account for issues such of pain and impairment and how to sustain the '*othering*' and naturalisation of disabled people as extra to the ordinary construct of the body'. Two key points are being raised here: firstly, PWID can experience very real difficulties directly related to their impairment, for example difficulties related to understanding social concepts. By stating that it is society that is disabling as opposed to the impairment, the social model ignores or downplays such difficulties. Secondly, PWID are different from what is typically defined as a '*normal*' person. The social model does not allow for PWID to have an identity of being different to '*normal'* people (the othering) while at the same time being normal and natural too (naturalisation). Shakespeare (2006, p.5) went as far as to say that 'the social model of disability had run its course and that it 'should be abandoned'. However, the social model of disability highlights and recognises the current and common oppression many PWID face on a day to day basis across the world and, according to Roulstone and Harris (2011, p.37), the social model has been a 'mandate for political and social change and has inspired many new laws and policies…and remains an influential and guiding force'.

This is of significant importance as it is estimated that there are more than one billion people in the world with some form of disability, of whom nearly 200 million experience some type of difficulty with functioning. (WHO 2011). While the social model of disability has witnessed improvements with regard to the inclusion of PWID in mainstream society, the Global Status Report on Disability and Development issued by the United Nations (2015 p.29) have claimed that 'persons with disabilities still face many great challenges in their quest for equal and full participation in society'.

From an Irish perspective significant political and social change emerged in the way in which service providers supported PWID to include an unprecedented level of enactment of *'disability rights-based legislation'* from the late 1990's onward.

2.2.5   The United Nations (UN) Convention on the Rights of Persons with Disabilities

A school of thought has developed over the last twenty to thirty years with regard to the exclusion of PWID from mainstream society and community-based activities. Disability studies, advocates and activists have claimed that the exclusion of PWID has been so systematic that it will take intervention from multiple stakeholders, including governments, policy makers and service providers to tackle the issue. Indeed, Forde and Leonard (2013) claimed that unless significant and positive legislative steps are taken to assist the disabled, they will remain at considerable disadvantage with regard to their non-disabled peers. Although the Universal Declaration of Human Rights (UDHR) of 1948 makes no specific reference to PWID, a number of Articles sum up the Convention as it relates to all people, regardless of ability or disability.

Article 1 of the Convention states that 'all human beings are born equal and free in both dignity and rights', Article 2 states that 'everyone is entitled to all the rights and freedoms set forth in the Declaration', Article 21 (2) states that 'everyone has the right to equal access to public service in his country' and Article 27 makes reference to the fact that 'everyone has the right freely to participate in the cultural life of their community' (United Nations 1948). Quinn and Arnardóttir (2009, p.4) claimed that 'for all too long people with disabilities have been denied the promise of the UDHR. Laws, both international and domestic, coupled with societal attitudes have too often treated people with disabilities as objects, recipients of care and charity, rather than as the autonomous rights holders that they are'. Quinn and Arnardóttir (2009) have also claimed that 'disabled people and their allies worldwide have organised over the past few decades to challenge the discrimination and exclusion of disabled people from mainstream society'.

The European Union (EU) Charter of Fundamental Rights (2000) identified the social, political, economic and civil rights recognised by all EU member states. These rights were listed under specific areas of dignity, freedom, solidarity, rights and justice. Article 21 (1) of the Charter prohibits discrimination against PWID and Article 26 promotes their social and occupational integration and inclusion in society (European Parliament 2000). The Treaty of Lisbon (ratified in Ireland in 2009) gave the Charter the same legal weighting as any other treaty. More recently, disability studies have been instrumental in developing a new understanding of disability which has provided a foundation for legal development worldwide, including the adoption of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

Palmisanno, Cera & Fina (2017) claimed that calls for a Convention grew louder in the early 2000's from disabled persons organisations at a global level. Palmisanno *et al.* (2017, p.17) stated that 'during a world summit on disability in 2000 in Beijing, the Declaration on the Rights of Persons with Disabilities in the New Century was adopted, which called for a legally binding Convention and urged disability organisations to strive for it stating – we share the conviction that the full participation of people with disabilities in society requires our solidarity in working towards an international convention that legally binds nations signing up to it'.

Eight years later the UN Convention on the Rights of Persons with Disabilities came into force on May 3rd 2008. Quinn and Arnardóttir (2009) have claimed that the Convention changes the status of people with disabilities in international human rights law. It is seen as a robust '*Convention*' recognising that equality, autonomy, independence and inclusion are critical in ensuring that all people with disabilities are able to fully realise meaningful and equal citizenship in the world. From an international perspective the Convention on the Rights of Persons with Disabilities was adopted on the 13th of December 2006. The Convention was opened for signature by all Countries in 2007. This was a very important step forward for PWID as according to the UN (2007), PWID encounter a myriad of social obstacles that prevent them from getting jobs, getting an education and from *'fitting in'* or being accepted in society.

Rimmerman (2013, p.127) has claimed that *'the UN CRPD is the most comprehensive global effort to protect the rights of people with disabilities and to ensure within their States social inclusion and full participation'*. The CRPD states that one of its main purposes is 'to promote, protect and to ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity. Persons with disabilities (including PWID) in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others'. (United Nations: CRPD).

2.2.6   Current Status of the UNCRPD in Ireland

However, Inclusion Ireland (2010) point out that while Ireland has signed up to the agreement they have not yet ratified it. This means it has little (if any) effect on the everyday lives of PWID in Ireland at the moment. Dolan (2017, p.16) has claimed *that 'it is incomprehensible to understand why the ratification of a groundbreaking UN convention, which had the absolute support of the government at its inception, has not been ratified some ten years later'*. Dolan suggested that Ireland is witnessing a classic example of the '*well-established political culture of heaping promise upon promise*' without any follow through or action and noted that by 2017, Ireland is the only EU state not to have ratified the Convention.

In an interview with Trinity News, Herbert (2017), a person with a disability and disability advocate who is determined to lobby the government into ratifying the UN CRPD stated that even beyond ratification there is still a long way to go before achieving equality for Irish people with disabilities. Notwithstanding, the UN have reiterated that it is critical for all States to ratify the Convention so there can be a universal legal binding standard to ensure that the rights of all people with disabilities are guaranteed. The Irish Government has claimed that the most significant barrier to ratifying the Convention is to do with our current laws governing decision-making and the Lunacy Ireland (Regulation) Act 1871(Inclusion Ireland 2010).

However, even though this Act has recently been surpassed by the Assisted Decision (Capacity) Act 2016, Ireland has yet to ratify the Convention on the Rights of Persons with Disabilities.

2.3   DISABILITY LEGISLATIVE REFORM IRELAND: 1990'S ONWARDS

Legislative reform specific to PWID is wide encompassing and focuses on the promotion and protection of the rights of this minority group. However, a key '*common*' theme across a lot of disability specific legislation in Ireland is the concept of '*participation*' and '*inclusion*'. This can range from promoting participation and inclusion in training, education and employment in mainstream settings to legislating against discriminatory practices that prevent PWID from being included in their communities and wider society in general.

2.3.1   The Employment Equality Acts 1998 – 2011

According to Paraskevopoulou and McKay (2016), the idea of equality from a European perspective has been understood as being fundamental for democracy and the democratic values of '*liberty*, '*equality*' and '*fairness*'. In order to achieve equality, people must be fair and respect differences in their values and status. Richardson & Fulton (2013, p.6) have claimed that 'in order to promote equality you must have an understanding of what inclusion is and why it is important in the everyday lives of people with disabilities. In an equal society inclusion means being included and playing a meaningful part in the life of your community and being a valued and respected member of society'. Indeed, this way of thinking has been the very essence and intent of legislation promoting and supporting equality and equality issues for PWID on an international level. From a recent Irish perspective, 'disability is proscribed for by the 1998 and 2000 Equality Legislation in areas of employment and of services and the National Disability Authority (NDA) was

established in 1999, its main purpose being to promote the interests of disabled people'
(Forde and Leonard 2013, p.424).

The Employment Equality Acts passed in 1998 were enacted in Ireland to make 'further
the provision for the promotion of equality between employed persons: to make further
provision with respect to discrimination in and in connection with employment and
vocational training' (*The Employment Equality Act* 1998). According to Sargeant (2008,
p.82), 'the most striking feature about these Acts was the inclusion of discrimination,
namely age, disability, sexual orientation, race, religion, family status, gender and
membership of the travelling community'. The Acts were to legislate so that all people
with disabilities could be included in their communities and make valued contribution to
society through the process of equal access of opportunities in securing meaningful
employment. It is interesting to note however, how the term disability is defined under
the terms of the Employment Equality Acts 1998 – 2011.

Disability is defined in Section 2 of the Act as '(a) ''the total or partial absence of a
person's bodily or mental functions, including the absence of a part of a person's body,
(b) the presence in the body of organisms causing, or likely to cause, chronic disease or
illness, (c) the malfunction, malformation or disfigurement of a part of a person's body,
(d) a condition or malfunction which results in a person learning differently from a
person without the condition or malfunction, or (e) a condition'', illness or disease which
affects a person's thought processes, perception of reality, emotions or judgement or
which results in disturbed behaviour'.

Definitions of disability have rarely, if ever, been positive and they tend to be influenced
by the medical model of disability. Many disability advocates and scholars assert that
definitions of disability containing negative wording such as '*illness', 'disease',
'disturbed behaviour', 'malfunction', 'malformation'* and *'disfigurement'* have impacted
negatively on how society come to understand and respond to people with disabilities.
Indeed, legislation containing negative definitions of people with disabilities may
actually serve to further misinform the general public about this minority group in turn

having the opposite effect of what it originally intended to promote and achieve. Thus, the use of negative language and labels may serve to further marginalise PWID from mainstream society as they are perceived to be '*problem*' or a '*special*' group of people. Indeed, Hynes (2013, p.40) claimed that 'negative labels focus on the problem' and people who acquire negative labels may be perceived by society as 'burdens, dependent, threats and vulnerable'.

According to the Chief Executive (CE) of Barnardos, Fergus Finlay, people with disabilities are significantly underrepresented and excluded in the Irish workforce in comparison to their non-disabled counterparts while the Disability Federation (2012) of Ireland recently claimed that just 35% of people with disabilities were at work compared to 73% of the general population. However, many people with disabilities would like to work if the circumstances were right. In turn most people with disabilities, including PWID, experience poverty and exclusion from mainstream society.

Research undertaken by the World Bank and published by a Joint Committee on Human Rights in the UK in 2008 found that 'people with disabilities were disproportionately represented among the poor in all countries. People with disabilities face a '*vicious cycle*' of disability and poverty and having a disability makes it more likely you will be poor. The research affirms the relationship between poverty and disability but suggests that the real '*vicious cycle*' is of disability, poverty and exclusion. People with disabilities are more likely to find themselves in this vicious circle that most other groups in society' (Joint Committee on Human Rights 2008, p.186).

It should come as no surprise then that people with disabilities, their advocates, advocacy organisations and families are actively involved in lobbying for and pushing the disability agenda themselves. Employment legislation has not only defined people with disabilities using negative descriptors and affiliations, it has also failed in its attempt to secure meaningful employment for many and a significant number of people with disabilities continue to experience loneliness, poverty, marginalisation and exclusion from society and their communities.

However, according to Parekh, Pinto and Rioux (2015) a new and significant development is the intervention of people with disabilities themselves in the social construct of disability. This has contributed to a process away from the negative definitions of disability as indicating impairment and abnormal to a positive definition that first and foremost asserts essential humanness, understanding around notions of human rights and community life, of the disabled that they share with all others'.

2.3.2 The Education Act 2000 & Education for Persons with Special Educational Needs Act, 2004

Education and its provision for people with disabilities, including PWID has progressed significantly over the last 20 years in Ireland. Indeed, according to Rose, Shevlin, Winter and O'Raw (2010, p.359), 'governmental policies and reports have focused on examining the educational provision for students with special needs with a view towards moving from segregated education to more inclusive models of education. Such policies and reports have been influenced by international demands for a more equitable and inclusive education system that celebrates and accommodates diversity'. Many disability researchers and out those supporting children with intellectual disabilities to attend mainstream education point out that this not only benefits the child with a disability, but society as a whole. According to Swartz and MacLachlan (2009, p.183), 'the international development of inclusive education for children with disabilities is essentially based on the social model of disability and the rights of the child to be included in mainstream schooling'.

The Salamanca Statement, published by United Nations Ministry of Educational, Scientific and Education and Science Cultural Organisation (UNESCO) in 1994, claimed that regular schools with this inclusive orientation are one of the most effective means of combating discriminatory attitudes, creating welcoming and tolerant communities and building inclusive societies and communities for people with disabilities.

The Education Act, was signed into Irish law in 1998. The Act provided a statutory framework for the Irish education system at primary and post primary level and at the time it represented a landmark in Irish education. The Act set out a broad range of objectives and principles underpinning the education system and provided for the rights of children and others to education (Association of Secondary Teachers in Ireland 2016). The Education Act 1998 provides for the statutory rights for parents in relation to their children's education and legally obliges schools to provide for a diversity of needs, values and traditions. The preamble to the Education Act 1998 makes specific reference to provision for the education of persons with disabilities or special educational needs. A stated objective of the Act is 'to give practical effect to the constitutional rights of children, including children who have a disability or other special educational needs' (European Agency for Special Needs and Inclusive Education 2017). According to Mullally and de Londras (2017, p.148), the Act provides so that 'the school plan shall state the objectives of the school relating to equality of access to and participation in the school and the measures which the school proposes to take to achieve those including equality of access to and participation in the school of students with disabilities or who have other educational needs'.

According to Albrecht (2005, p.670), 'education for people with disabilities in Ireland continues to be provided in a mixture of mainstream and special schools and over the past decade the number of disabled children in mainstream schools has increased while the numbers attending special schools has remained constant. However, the level of actual provision leaves a gap between aspirations and reality and the paternalistic approach to the education provision for many people with disabilities has been attributed to the continuing dominance of the medical model of disability'.

The Education for Persons with Special Educational Needs Act, 2004 (EPSEN) made further provisions for the education of children with intellectual disabilities and 'it aimed to ensure that people with special educational needs are as far as possible educated in an inclusive environment with those that do not have such needs' (Hörner, Döbert, von Kopp & Mitter 2007, p.382).

Section 2 of the EPSEN Act 2004 specifically states that 'the Act provides children suffering from a disability with the right to an education appropriate to their needs, which should be conducted, where possible in an inclusive environment' (Ward 2010, p.52).

According to Walsh (2017, p,6), the Act defines special educational needs as meaning 'a restriction in the capacity of the person to participate in and benefit from education on an account of an enduring physical, sensory, mental health or learning disability, or any other condition which results in a person learning differently from a person without that condition'. Similar to Employment Equality Legislation, the Educations Acts also provide negative definitions of disability with a focus on '*restriction of capacity'*.

Sternberg and Taylor (2013, p.24) point out that such labelling can have' negative side effects as there can be lowered expectations by the student and the teacher, the possibility of stigmatisation and peer rejection and the poor self-concepts of the labelled student'. However, according to Browne (2016) while the Education of Persons with Special Education Needs (EPSEN) Act 2004 is a welcome advancement for the inclusion of children with disabilities in mainstream education, to date, only certain sections of the Act have been commenced. Key provisions, such as individual education plans and the appeals process, remain outstanding. Browne (2016) also points out that despite this legislative advancement, 43% of people with disabilities have not progressed beyond primary education, in comparison with 19% of all other adults without a disability. Thus, while the Educational Acts supporting mainstream educational opportunities for PWID were a welcome advancement on the Irish political landscape, they have provided negative definitions of disability and have fallen significantly short in achieving their aim of ensuring equality of access to and participation in mainstream and inclusive education for students with disabilities.

2.3.3 The Equal Status Act 2000 – 2015

The Equal Status Act was passed in 2000 (and updated 2015 - the revised Act is an administrative consolidation of the *Equal Status Act 2000*). This Act was devised to compliment Employment Equality legislation with the main focus being to 'promote equality and prohibit types of discrimination, harassment and related behaviours in connection with the provisions of services, property and other opportunities to which the public generally (or a section of the public) has access and to provide for investigation and remedying certain discrimination and other unlawful activities' (Ireland. *The Equal Status Acts* 2000 - 2015). Ward (2010) claimed that *'the Act* prohibits discrimination on the grounds of disability. In turn a person with a disability cannot be excluded from participating in society on the grounds that they are '*disabled'.* This includes any provisions of services, accommodation or any related service, access to educational institutes or community-based clubs. Under this Act community-based organisations, clubs and establishments are required to '*reasonable accommodations'* so as to ensure people with disabilities can be included in their everyday activities. 'Reasonable accommodation means providing specific treatment or facilities to make sure that people with a disability can avail of particular goods, services, housing, and so forth' (Irish Human Rights and Equality Commission (IHREC) 2015, p.9).

However, there have been a number of criticisms of this piece of legislation. Firstly, IHREC (2015) have claimed that organisations do not have to provide special facilities or treatment if it would cost them more than a '*nominal cost'.* A '*nominal*' cost will be different for each person or organisation, as it depends on the size of the business and its budget. In turn this can provide an organisation with a '*get out clause'* not to provide a '*reasonable accommodation'.* Secondly, Ward (2010) points out that the definition of disability in the Equal Status Act 2000 - 2015 is practically identical to how it is defined in the Employment Equality Acts 1998, negatively focusing on the '*malfunction',* '*limitations'* and '*restrictions*' of the person with the disability. Thomas and Woods (2003, p.25) claimed that 'this type of labelling has the potential to create negative influence, to stigmatise and affect the person who is labelled'.

Indeed Thomas and Woods (2003) claimed that labelling has been one of the root causes of people with disabilities being oppressed and discriminated against.

2.3.4   Other Important Equality Based Legislation

Other relevant equality-based legislation relevant to people with disabilities includes the Equality Act 2004 and the Equality (Miscellaneous Provisions) Act 2015. The main theme underpinning all equality legislation is to outlaw discrimination in a wide and varied range of services and to promote the right to equal participation in society for people who have been typically marginalised. This includes PWID. The over-arching objective of the governmental strategy at this time was to put in place the most effective combination of legislation, policies, service provision in order to support and promote equal participation for people with disabilities in mainstream society (Department of Justice 1999). The Equality Act 2004 further enhanced the rights of people with disabilities with regard to securing mainstream employment. The *Act* states that all employers must 'take appropriate measures to ensure a person with a disability has access to employment, have the opportunity to advance in employment and where appropriate undergo training' (Ireland. *The Equality Act* 2004). Again the '*Act'* was making provisions so that all people with disabilities would be facilitated and supported to make a valued contribution to society.

Bartelings and Bokum (2000) claimed the Equality Act 2004 was introduced so that Ireland would meet its obligations under the Treaty of Rome and provide for the implementation of three equality based European Union (EU) Directives, one being the Directive to establish a general framework for equal treatment for all people in employment and occupation. The Equality (Miscellaneous Provisions) Act 2015 sought to make amendments to both equality and disability legislation, pushed for greater protection and equal access of opportunity of vulnerable groups of people (inclusive of PWID) in the place of work.

2.3.5 The Disability Act 2005

Around the same time of the enactment of Equality Legislation in Ireland, a newly established Disability Legislative Consultancy Group (DLCG) had been in consultation with the Government on a new Disability Bill. In 2003, the DLCG produced the Report Equal Citizens: Proposals for Core Elements of Disability Legislation. According to Power, DeFranco and Lord (2013, p.380), 'the trust of this report signalled a broader paradigm change based on changing values, rights and principles, with equality, participation, quality and inclusion being increasingly regarded as key values and principles underpinning Irish social policy'. In response to this the Government embarked on significant reform of disability specific legislation with the National Disability Strategy of 2004.

This Strategy was to build on existing equality and disability specific legislation identified above, and to further promote the mainstreaming of service provision to PWID. By 2005, the Disability Bill passed though the Dáil and a landmark piece of legislation, The Disability Act 2005, which had a specific focus on the rights of PWID, was enacted in Ireland. According to the NDA (2015), the Act was a positive and deliberate action designed to advance and underpin the participation and inclusion of PWID in everyday life. Fahey (2005) claimed that this Act was to be a significant part of the Irish Government's legislative framework and plans to support social inclusion of people with disabilities in Irish society. However, according to Considine and Dukelow (2017, p.323), 'the implementation of the Disability Act 2005 remains incomplete. An assessment of the Disability Act 2005 generally includes more concerns and disappointment about the lack of an overly rights-based approach'.

De Wispelaere and Walsh (2007, p.535) in Considine and Dukelow (2017) argued that the Act failed to meet the conditions for robust rights-based legislation in relation to disability services and 'the failure to provide for access to public services is exacerbated by the fact there is no genuine right to challenge assessment of need or service delivery'.

Thus, while the Act acknowledges the rights of PWID to participation and inclusion in their communities, it appears it has not fully achieved what it set out to do.

Finlay (2016) in an interview with the Irish Times claimed that 'the Act is the single most dishonest and fraudulent piece of legislation ever passed by the Oireachtas and that it 'allegedly' confers rights onto people with disabilities. The Act doesn't compel anyone to do anything. In fact, the only thing ministers are compelled to do in the Act is to have regard to the resources available'. Some disability advocates and theorists have claimed the Act in part is tokenistic as the mainstreaming and inclusion of PWID into society in based on '*the availability of resources'*. The definition of disability in the Act has also come under criticism. Under the Act, the term '*Disability'*, in relation to a person, means 'a substantial restriction in the capacity of the person to carry out a profession, business or occupation in the State or to participate in social or cultural life in the State by reason of an enduring physical, sensory, mental health or intellectual impairment. Substantial restriction means a restriction that is permanent (or likely to be permanent) which results in significant difficulty in communication, learning or mobility and means that the person has a need for services to be provided on a continuous basis'. (Government of Ireland 2015).

Atkinson, Lay, McAnnelly and Richardson (2014) put forward the argument that how we describe and define people with disabilities is very important as the language used can lead to different, separate and often negative treatment for this group. They claimed definitions rarely, if ever, remember the positive aspect of the person and most people do not like to be defined or stereotyped at all. So, while the Disability Act 2005 has been a welcome advancement in the fact that it is a rights-based piece of legislation it has been criticised by some as being partly *'tokenistic'*, for its use of negative language in describing people with disabilities and for its failure to ensure PWID are included in mainstream society.

2.3.6   The Citizens Information Act 2007

The Citizens Information Act passed in 2007 set out for the development of an advocacy service specifically for people with disabilities. This Act saw the establishment of the National Advocacy Service (NAS) in 2011. Andrews and Edwards (2004, p,481) define advocacy organisations as making 'public interest claims either promoting or resisting social change that if implemented, would conflict with the social, cultural, political or economical interests or values of other constituents or groups'.

Although the role of the NAS is multi-faceted some of its main functions are to ensure that all people with disabilities can enjoy meaningful participation in and contribution to their local communities (National Advocacy Service 2012). According to DeFranco, Lord and Power (2013, p.407), 'the establishment of the National Advocacy Service is a welcome development as it demonstrates the State's willingness to provide concrete support for PWID in exercising their legal rights'. Considine and Dukelow (2017) also claimed that the NAS provide representative advocacy which is a means of empowering people by supporting them to assert their views and claim their entitlements. However, according to Inclusion Ireland (2013), the absence of statutory powers is a significant barrier and limitation faced by the NAS when providing support to PWID. Such an absence of a broad spectrum of advocacy can affect PWID's right to effective participation and inclusion in society. Inclusion Ireland (2013) has claimed that there is evidence showing resistance and a lack of co-operation from some disability service providers towards independent advocacy supporting people with disabilities.

2.3.7   The Health Act 2007

The year 2007 also witnessed the passing of the '*Health Act*'.   This was another landmark piece of legislation specific to the rights of all people with disabilities in Ireland.

The Health Act 2007 was to establish a body known as the Health Information and Quality Authority and to provide for a system of registration and inspection of all residential services for people with disabilities. Although the Act was passed in 2007 it was not until 2013 that all residential services for PWD were subject to inspection by HIQA. As part of their remit HIQA are to ensure that all services support PWD to develop and maintain personal relationships and links with the wider community in accordance with their wishes (Statutory Instrument 367, p.11).

However, according to research undertaken by Inclusion Ireland in 2016, some disability service providers were failing to provide adequate supports so as to ensure PWID could be involved and included in their local communities. In the 2014 Report '*The Distant Voice'*, based on evidence found by HIQA, Conroy and Meagher (2014) point out that staff shortages in disability services had a significant impact on PWID experiencing inclusion in their local communities and that staff shortages in some settings were the direct cause of impeding residents' community integration. Conroy and Meagher (2014, p.49) also claimed that HIQA routinely found the following issues on inspection of disability services, 'there was a lack of development of a network of personal supports or the resident's wishes or aspirations around friendships, belonging and inclusion in their communities' and 'detailed information on areas such as friendships, belonging and inclusion in the community was not evident in residents' files'. More alarmingly, the same Report also found that HIQA inspection processes were not inclusive and did not always involve people with disabilities. Rather, they were inspired by a medical model of disability and the voice of PWID was *'extremely faint'* or at times *'silent'*. According to Conroy and Meagher (2014, p.7), the HIQA inspection reports in the study found that 'the voices or words of the resident with a disability were faint or absent entirely from reporting; they appear as objects of an inspection regime rather than citizens with entitlements and rights'.

2.3.8 Assisted Decision-Making (Capacity) Act 2015

The Assistant Decision-Making (Capacity) Act 2015 reforms Ireland's existing capacity legislation - the Marriage of Lunatics Act 1811 and the Lunacy Regulations (Ireland) Act 1871. The Citizens Information Board (2016, p.1) stated that 'for the purpose of the Act, capacity for decision-making is defined as the ability to understand, at the time the decision is being made, the nature and consequences of the decision in the context of the available choices'. According to the Health Services Executive (2017 p,9), 'the Act establishes a modern legal framework to support decision making by adults who have difficulty now, or may have difficulty in the future, in making decisions without help, and in some limited circumstances, allows for a court appointed decision-maker, with legal oversight. The Act is a critical piece of legislation to enable Ireland to ratify the United Nations Convention on the Rights of Persons with Disabilities'.

Flynn (2017) stated that the underlying principles of capacity legislation are the presumption of capacity, accessible information, being allowed to make 'unwise' decisions, intervention must be necessary and least restrictive of freedom, the rights and dignity of the person and the person '*must*' participate in any intervention relevant to them. Such decisions also relate to the healthcare of a person with an intellectual disability. According to the Irish Medical Council (2009), 'patients with disabilities are entitled to the same treatment options and respect for their autonomy as any other patient. Disability does not necessarily mean lack of capacity. Any decision made on intervention or non-intervention in the case of a person with a disability requires their consent. Every adult patient is presumed to have the capacity to make decisions about their own healthcare'.

This also includes the right to refuse a medical treatment. Butler (2016, p.44) claimed that 'rather than a fixed idea that a person can or cannot make any decisions, capacity is therefore to be understood as a fluid, changeable concept, depending on the circumstances of the person at the time and the nature of the decision to be made'.

The Assistant Decision-Making (Capacity) Act 2015 is an empowering piece of legislation that provides for the inclusion of PWID in all decisions that directly impact on their everyday lives. The language used with regard to disability is empowering with underlying positives tones. For example, the Act infers that PWID have the ability and right to make decisions about their own lives, unless otherwise stated. It remains to be seen exactly how the enactment of this piece of legislation will impact on the everyday lives of PWID. However, it is recognised as a powerful piece of legislation that aims to empower this marginalised group to have greater autonomy over their own lives. In fact Scott (2017, p.91) claimed that 'the previously established approach of substituted decision-making, based on the perceived best interests of the person, is now replaced by an appeal to personal will and preference. In essence, the paternalistic approach to 'deciding for' is no longer supported by international law'.

2.4 IRISH DISABILITY LANDSCAPE TODAY

With the onset of the Social Model of disability and an unprecedented level of legislation promoting and protecting the rights of PWID in the 1990's, societal attitudes towards this minority group have started to change. Services provided to PWID also began to dramatically change the way in which they were delivered and managed. Although some PWID continue to live in segregated institutionalised and hospital-based settings, community-based living began to emerge. Many large organisations such as Stewarts Hospital, St. John of Gods and St. Michaels House began to provide services in more '*normalised*' settings in local communities. Such settings were influenced by the Social Model of disability, disability representative groups such as the NDA and Inclusion Ireland, and the development of policy and enactment of legislation promoting equality, inclusion and the rights of PWID.

In June 2011, the HSE published their Report on the Working Group on Congregated Settings titled '*Time to Move on from Congregated Settings*'.

The key findings in this Report as stated by (Dolan 2016) are to propose a new model of community-based support for people with disabilities. The Report proposed that institutionalised care and congregated settings should cease to be. There is a specific focus on the concept of inclusion for people with disabilities and the Report stated that 'people living in congregated settings will move to dispersed forms of housing in ordinary communities…they will have entitlement to mainstream community health and social services like any other citizen' (Dolan, 2016, p.4). Thus, the proposed new model of service delivery advocates for support that specifically promotes inclusion which is aimed at linking PWID to their own locality and community where they can build natural relationships and friendships in that setting. In 2012, the HSE published another crucial report titled '*New Directions*'.

This set out very explicit and specific guidelines for the delivery of day services to PWID. Again, a key theme in this Report was the importance of '*inclusion*' for PWID as the document is based on the core values of person centredness, community inclusion, active citizenship, and high-quality service provision' (HSE 2012, p.21). The Report goes on to stipulate that PWID should be supported to be included in their communities and supported to have meaningful social roles. The changes proposed in New Directions are explicitly linked to policies of mainstreaming and inclusion that were an integral component of the National Disability Strategy of 2014. However, despite the advancements of policy, legislation and service delivery specific to promoting community inclusion for PWID, recent research has informed that many PWID continue to experience isolation and loneliness.

The then chairman of the NDA, Peter McKevitt (2011) in the National Survey of Public Attitudes to Disability in Ireland (2011) reported that 'public attitudes towards people with disability can be a key facilitator or a serious barrier to their inclusion and participation in society and that their findings in their Survey unfortunately showed a hardening of public attitudes across all types of disabilities, and of particular concern are the less positive attitudes towards children with disabilities in mainstream education'.

According to McKevitt (2011, p.5), 'the findings in the survey while disappointing, indicate the importance of ensuring that Irish society and all its stakeholders must recognise the need to address the negative attitudes that exist if we are able to achieve real and meaningful inclusion of people with disabilities in Irish society'. Based on this, Cahill (2012) of Inclusion Ireland has stated that the findings in the NDA survey are worrying and must be a wakeup call to government.

Massie (2006) in Hannon (2006, p.24) claimed that 'accepted ways of thinking, reacting and doing business become firmly embedded in society and can be remarkably resistant to change. Negative attitudes can become institutionalised...we often see the impact of negative attitudes in how one person treats another. But negative attitudes are also the foundation stone on which disabling policies and services are built. Harmful attitudes that limit and restrict are institutionalised in policies and services and so maintain the historic disadvantage that disabled people have faced'. So, while accepting that disability specific legislation and the evolution of models of disability has had some success in fostering greater community inclusion for PWID, the fact remains many PWID remain socially excluded from their communities.

From an Irish perspective, this is of particular importance as statistics released in 2016 from the National Intellectual Disability Database (NIDD) inform that nearly 30,000 people are registered as having an intellectual disability in Ireland. (For the Number of People Registered on the National Intellectual Disability Database 2016 see Appendix 2). However, it should be noted that not every person with an intellectual disability is registered on the NIDD and, according to Inclusion Ireland (2016), the national census published in 2016 inform that the numbers of people reporting to have an intellectual disability in Ireland are significantly higher, totalling over 60,000 individuals. It is also worth noting that the Centre for Ageing Research and Development in Ireland (2015) (CARDI) noted there is no equivalent to the National Intellectual Disability Database in Northern Ireland (NI). However, over 16,000 people are known to access services for the intellectually disabled in that region.

Thus, it is estimated that there are over 67,000 PWID living on the island of Ireland, yet research informs that many continue to experience exclusion, marginalisation and social isolation. Cahill (2012) has claimed that people with disabilities feel more socially isolated, public attitudes are more negative and further action is needed to stop PWID slipping further away from Irish society. The majority of PWID also experience segregation from the mainstream employment. According to the Equality Authority and Economic and Social Research Institute (2014), one in three people who are not in employment because of having a disability will experience enforced deprivation. Inclusion Ireland reported that only 5% of PWID had meaningful employment in Ireland in 2015, even though they have the right to work. More recently, the Department of Justice and Equality released the National Disability Inclusion Strategy 2017 – 2021 in an attempt to achieve best possible outcomes and to improve the lives of all people with disabilities living in Ireland. The main reasons for launching this strategy was because people with disabilities continue to experience serious disadvantages in accessing employment, many are lonely, they are at a higher risk of experiencing consistent poverty and experience significantly poorer educational outcomes to that of their peers. Thus, the accounts and stories of the isolation, marginalisation and segregation of PWID at international and national level are significant and widespread. While social policy, legislation and many service providers have made genuine concerted efforts to ensure PWID experience inclusion in their communities, for many this is not their lived reality.

Today in Ireland, over 4000 PWID continue to live in institutions, Many PWID continue to be supported under a medical model of care, the majority of PWID are not included in our workforce, the vast majorities of service provision to PWID remains '*specialised*' and '*segregated*' and public attitudes are '*hardening*' towards this minority group of people. Routine findings from HIQA inspections also inform that many PWID do not get to experience and use their community like any other person and opportunities to avail of local amenities may be dependent on available staffing resources.

Despite these findings, one disability and sporting organisation, the Special Olympics Ireland have continued to claim that they are ensuring PWID are socially included in their local communities. The Special Olympics state that they are changing the lives of PWID and in doing so are solving global issues of injustice and isolation that many PWID experience on a day to day basis. That said, the SO also make claim that PWID are respected, socially included and viewed positively by the general public. There is no doubt that sport for people with disabilities can play a critical role in promoting social inclusion and diversity. Participation in sport can teach a person with a disability life skills and social skills which can support PWID to adapt into society and their local communities.

According to Gilbert and Schantz (2008) participating in sporting activities is one way in which people with disabilities can be treated as equals. It is a way for people with disabilities to acquire greater self-esteem and to be more confident. The acquisition of skills like these can enhance participation opportunities in everyday life for many people with disabilities. Notwithstanding that sport and participation in sport can be beneficial in supporting the process of inclusion, the claims made by the Special Olympics warrant further investigation as disability policy, legislation and service providers have systematically failed to ensure that PWID experience meaningful inclusion in their communities over the years

2.5   CONCLUSION

This chapter discussed in detail the historical, political and societal responses to people with disabilities specific to Ireland from the 1800's, and the Lunacy Ireland (Regulation) Act 1871 to the present day. Critical discussion was presented on how people with disabilities were defined in key pieces of legislation and how such definitions impacted and continue to impact on the everyday lives of this minority group.

The medical model and social model of disability were critically analysed taking into account how each model impacted on the acceptance of PWID in society. As identified previously, PWID experienced routine marginalisation and exclusion from many western societies, up until the 1980's and early 1990's. These decades also witness the emergence of the social model of disability and the enactment of legislation, protecting and promoting the rights of all PWID. However, many PWID continue to live lives on the peripheral of society and it is reasonable to conclude that, as political and societal responses to disability evolved, they did not eradicate their predecessor. While there may have been improvements in the way PWID were treated and provided for, they largely remained segregated from society and many failed to experience meaningful inclusion.

The next chapter will discuss the history of sport, with a specific focus on how it can and has fostered more inclusive communities in general. The focus will narrow to the Olympics Games, the history of their development and their evolution over time from simple participation in the Games to survival of the fittest and elite athleticism. In 1960 for the first time ever Olympic-style games for athletes with a disability were held in Rome, Italy. These were the Paralympics and the following chapter will also provide an account of their history and how they also support the process of inclusion for people with physical disabilities. Finally, a detailed discussion will be provided on the Special Olympics to include their establishment and growth to date and in particular a critique on their claims that they are creating more inclusive communities for PWID in Ireland today. A specific focus on how the imagery the SO use to portray PWID and how such imagery impacts on Irish attitudes towards this minority group will be examined.

CHAPTER 3:

3.0   SPORT AND DISABILITY

3.1   INTRODUCTION

It is true to say that sport, in any context, has many benefits in everyone's life and this is particularly true for people with intellectual disabilities. Writers on the topic of sport and disability have not only acknowledged that sport can play a significant role for the physical rehabilitation of people, but can also play an important role in integrating people into their communities and society at large. The numbers of people with disabilities actively involved in sport and physical activities is routinely growing in the majority of countries worldwide. According to Maguire, Jarvie, Mansfield and Bradley (2002, p.111), 'sport can be seen as potentially contributing to efforts to address a wide array of social issues that have been linked to social inclusion. In a sense sport can be said to both promote social inclusion and social capital'.

Sport has gone beyond its traditional boundaries and now presents real opportunities for all people, regardless of label or ability, to connect with each other and the world around them. Indeed, a significant benefit of sport is that it can promote social inclusion amongst people who are typically marginalised or disadvantaged, such as people with disabilities (Curatolo 2014). One of the most commonly recognised and important international sporting events are the phenomenon of the Olympic Games. According to Espy (1981), 'the Olympic Games demonstrate this phenomenon through the numbers of people who watch and participate, the increase in media attention over the years and the passion aroused worldwide on behalf of the competitors' (Espy 1981, p.5).

The founder of the modern Olympic Games, Barron Pierre de Coubertin, claimed the games were based on a philosophy of '*participation*' where personal triumph and teamwork were most important.

70

To this day, these ideals continue to be applied with reference to the SO, where participation by PWID is seen as an important contributing factor in creating opportunities to make friends, experience sportsmanship and camaraderie and foster greater inclusion in society. However, the mainstream Olympics Games have long since developed and evolved where ideals and values such as *'competitiveness'* and *'win at all costs'* are accepted as being a central and vital component to participation in the games.

This chapter will commence with an overview of the history of the modern Olympic Games and will explore how from that international sporting event, specific games evolved for people with physical and intellectual disabilities, which are the Paralympic Games and the Special Olympics. The Paralympic Games are a multi-sporting event for athletes with physical and sensory disabilities, whereas the Special Olympics are specific to people with intellectual disabilities. Both these international sporting phenomena are arguably the most commonly recognisable and important global disability sporting events. The Paralympic Games were first held in Rome in 1960. Eight years later in 1968, the Special Olympic World Games were first held in the United States of America. A detailed overview of how these Games have impacted (and continue to impact) on the everyday lives of PWID will be provided. A critical discussion will be developed regarding the imagery the games portray of PWID, including the use of the term '*special*' and how such images and language used to describe PWID impact on public perceptions towards this minority group and their inclusion in mainstream society. Finally, the role, importance and benefits of participation in sport as for PWID from an Irish perspective will be presented.

3.2   THE MODERN OLYMPIC GAMES – ORIGINS AND DEVELOPMENTS

Having been banned by the Roman Empire for over a thousand years, the Olympic Games, a long lost ancient sporting tradition, were reinvented in Athens the capital of Greece in April 1896 .

The idea of reinventing the games is accredited to a French man, Barron Pierre de Coubertin. At the age of 29 this aristocrat, who had made educational and sporting reform his life's work, unveiled his great idea in 1892. His dream came to fruition four years later and the first modern Olympic Games were staged in Greece (Randall 2011). It was Coubertin's belief that the games would foster a sense of community and a sense of belonging among athletes. Not only would the games be a display of both physical prowess and moral excellence, but they would also serve as a sense of stimulation, in particular to young and upcoming athletes (Findling & Pelle 1996). The first modern Olympic Games held in Greece in 1896 were largely hailed as a success however, this was not to be the case for the games in Paris, France in 1900 and St. Louis, USA in 1904.

Coubertin himself was generally critical of the Paris games and called into question if the games were of Olympic standard due to the fact that they were poorly organised and held in venues that were inadequate (Guar 2014). Similarly, critics of the 1904 Games in the USA claimed that they were too *'American'* and were *'bathed in nationalism, ethnocentrism, controversial, confusion and bad taste'* (Findling & Pelle 2004, p.33). Regardless of how successful or not the games were, however, Coubertin claimed that the guiding ideals, principles and beliefs about the games remained one of '*participation'* as Coubertin believed that participation in the games was more important than winning. In Sao Paulo in 1908, Coubertin explained what he meant by this at a state banquet by claiming 'the important thing in our life is not the triumph, but the struggle, its essence is not to win but to make human beings become more courageous, more robust, more cautious and more graceful. This is the guiding ideology of the modern Olympic Games' (Yanan 2011, p.585). However, even though the guiding principles and ideals of the modern Olympic Games were on the basis of '*participation'*, the Olympic motto of the day encapsulating the beliefs and ideals of the Olympic Games was '*faster, higher, and stronger'* (Yanan 2011). In reality the games were geared towards elite athletes and competition between athlete and nation was fierce. In 1913, this motto became an official part of the Olympic logo. Athlete participation in the games continuously grew over the decades and from having 311 participants in 1896, over ten thousand were participating by 2010.

The number of events also grew significantly during this time from 43 to over 300. While no women athletes participated in the first modern Olympics, well over 4500 were participating in the games by the year 2000 (Sports United: USA Department of State 2008). From an international perspective, the Olympic Games are held in high esteem, with significant global media and public interest. However, there are some landmark events worth noting in the history of the modern Olympic Games. Since 1896 there have been twenty-five Olympic Games held in major cities across the world, with the exception of 1916, 1940 and 1944. This was due to the devastation and chaos caused by both World War I and World War II. In Munich, 1972, the games were marred by a disaster known as '*the Munich massacre'* when terrorists abducted eleven Israeli athletes from the Olympic Games Village and subsequently killed them (Olympic Sporting 2015).

3.2.1   Development of the Winter Olympic Games

A significant milestone in the history of the Olympic Games was the establishment of the Winter Olympic Games in Chamonix, France in 1926. According to Judd (1996, p.23), '*over 10, 000 people attended the International Sports week in 1924 in Chamonix in the French Alps to compete in ice hockey, bobsled, ski jumping, and skating. Two years later Olympic officials branded these games the first Winter Olympic Games*'. Since the inauguration of the Winter Olympic Games, the modern Olympics are regularly referred to as the Summer Games. Similar to the Summer Games, the Winter Olympics are a huge international event which has earned significant public and media interest. The Winter Olympics have also grown substantially since 1924 from a limited number of events to a major international multi-sport event with approximately 2,600 athletes from 82 nations participating in 86 events in fifteen disciplines in 2010 (Harris 2010).

3.2.2 Conflicting Philosophies of the Olympic Games – Participation versus Win at all Costs

According to Howell (2009), the Olympic Games have a long history and there is undoubtedly a human need for sport and competition. While such competitiveness may favour athletes who are physically fit and mentally sharp, they offer competitors and spectators alike a beneficial catharsis. 'The games now and as in the past are a celebration, a renewal, an affirmation; a turning point and a demonstration of knowhow, prowess and teamwork' (Howell 2009, p.8). Richman (2006, p.34) further stated that the Olympic Games 'provide a superior opportunity to teach...sportsmanship, teamwork, perseverance, love of sport, spirit, caring for friends, physical training and so much more'. Today, the official International Olympic Committee website claims that the mission of the games is 'a philosophy of life, exalting and combining in a balanced whole the qualities of body, will and mind. Blending sport with culture and education, Olympism seeks to create a way of life based on the joy found in effort, the educational value of good example and respect for universal fundamental ethical principles' (International Olympic Committee 2015). While the philosophy of the Olympic Games may encompass notions of spirit, caring for friends and participation, the reality is they are one of, if not the most, political and competitive sporting phenomena at global level.

Coakley (1999) claimed the Olympics generate significant patriotism in athletes and winning at the games reflect on the apparent success of both the social and political arrangements of each nation that participates. Rogan and Rogan (2011, p.105) claimed that 'by 1948 winning became important not just because the games themselves were becoming more competitive but because countries began to realise what sporting supremacy could do to levels of morale in their own country and in their standing in the world'. Hargreaves (2003, p.154) has also stated that 'the Olympic Games have become an increasingly political phenomenon and one which incorporates excess and corruption'.

In a similar vein, Beamish (2011, p.70) claimed that the Olympic Games no longer reflect or reinforce Coubertin's essential principles of *'joy in effort'* and *'participation'*.

The Olympic Games no longer centre on character development through chivalrous athletic competition where the joy of effort took precedence over victory. This religious experience was replaced by the secular pursuit of money and victory at almost any cost'. The International Olympic Council (IOC) has adapted its Olympic Charter so the Olympic Games would feature athletes for whom the sport was a full-time, year-round vocation and winning was their solitary guiding principle. The culture to '*win at all costs'* in the Olympic Games, according to Arnold (1998), is the ultimate degradation of competitive sport and promotes barriers to integration, inclusiveness and participation. 'To win at all costs exemplifies an attitude of mind and conduct which is the very antithesis of the ethos of sport as a culturally valued practice. It signifies a call for victory, without a corresponding concern for demand for moral virtue' (Arnold 1998, p.23). Thus, Oliver and Barnes (1998, p.102) have claimed that the overarching ideal would be *'*a world in which all human beings regardless of age, gender, social class, minority or ethnic status, can co-exist as equal members of the community and that their views will be recognised, respected and valued'. In turn, the ideals underpinning the principles of integration and inclusiveness in sport are to support and facilitate minority groups, who have been typically marginalised to participate in a meaningful way.

3.2.3 Elitism and Sport

However, DePauw (1997) claimed that within the context of high performance sport, such ideals are difficult to achieve. By its very nature, elite sport is selective and is based on how well individual bodies perform against one another. Elite and competitive sporting competitions therefore lead to a process of exclusion for many people, whether disabled or not (Bowen 2002). Thibault & Harvey (2013) suggested that according to Bowen's theory on competitive sport, with the exception of the elite athlete, sport can actually isolate individuals. Those who are isolated will find themselves looking to minor, different or segregated local sporting events, such as the Special Olympics.

Today the vast majority of athletes that participate in the Olympic Games are at the top of their game. They are mentally focused and continually strive to run at faster speeds, to jump higher and be physically fitter and stronger. This in turn results in barriers for the inclusion of people with both physical and intellectual disabilities in the Olympic Games. Consequently, if the Olympic Games are based upon a culture of *'survival of the fittest'* and *'win at all costs'* as suggested by Rogan and Rogan (2011) then PWID may never be afforded the opportunity of participating in the mainstream Olympic Games. Apart from a handful of people with physical disabilities who have taken part in the mainstream Olympics, people with physical or intellectual disabilities are generally excluded, despite Coubertin's essential principles and ideals of '*participation*' and '*joy in effort'* being more important than actually winning. However, both groups have Olympic style games specific to their disabilities. People with physical disabilities can seek to participate in the Paralympic Games while people with intellectual disabilities can seek to participate in the SO.

3.3   THE PARALYMPICS

The term '*Paralympic'* comes from the Greek preposition napá, pará, which means 'beside' (or 'alongside') and refers to a competition held parallel with the Olympic Games and is specific to athletes with physical disabilities (Burns 2015). Its meaning is that Paralympics are the parallel games to the Olympic Games and illustrates how the two sporting phenomena exist side-by-side. According to Bailey (2008), the Paralympic Movement is renowned as a significant worldwide sporting phenomenon attracting thousands of athletes from an ever-increasing number of countries. However, their origins were much more modest. Gilbert and Schantz (2008, p.8) claimed that 'in 1948 when the Olympic Games of the XIVth Olympiad were held in London, neurosurgeon Ludwig Guttmann organised at Stoke Mandeville Hospital in England a small sports competition for 16 World War II (WWII) veterans with spinal cord injuries. His vision was that one day the Stoke Mandeville Games would achieve world fame as the disabled men and women's equivalent of the Olympic Games'.

It was not until 1960 that for the first time Olympic-style games for athletes with a disability were held. These games took place in Rome, Italy. According to the International Paralympic Committee (IPC), these first '*Paralympic Games'* featured over 400 athletes from 23 countries. Since that time, they have taken place every four years and in 1976 the first Winter Games in Paralympic history were held in Sweden. As with the Summer Games, the Winter Games take place every four years (International Paralympic Committee 2016). For any observer who has seen the determination and focus of athletes adamant to propel themselves to and beyond their personal limit, it is understandable to see how competitive sport can be a significant part of live for a person with a disability. Generally, there are opportunities to achieve personal goals and triumphs through the medium of sport and participating in sport can change the way in which society views people with disabilities (Bailey 2008).

Thus, the Paralympics have been recognised and credited as a vehicle to foster the wellbeing of people with physical disabilities and facilitate social inclusion for this marginalised group (Great Britain & Commonwealth Office 2012). According to Ungar (2000), the value of providing role models for people with disabilities cannot be overstated. This is especially true for children with disabilities. 'Children growing up with a disability need to see adults with disabilities who are strong, healthy, active and successful. Athletes are a natural role model for children. Paralympic athletes, who have trained with the same commitment to world class performance as any Olympian, provide ideal role models. The Paralympic Games help raise expectations of what people with disabilities can do and reinforce positive images of people with disabilities as strong and capable individuals*'* (Ungar 2000, p.95).

In the same vein, Spracklen (2014, p.91) claimed that the 'common sense view of the Paralympic Games it that it promotes wellbeing, it encourages the inclusion of people with disabilities in sport, it provides sporting success, it provides role models for young people with disabilities, and it reduces exclusion and marginalisation'.

However, Gilbert & Schantz (2008, p.164) have claimed that *'while the Paralympics and Olympics operate as parallel events the question arises about the extent to which this format actually contributes to the marginalisation of disabled sportsmen and women'*. Gilbert & Schantz (2008) argued that the Paralympics are of a *'subordinate'* existence to the Olympic Games and have done little to change public attitudes towards people with disabilities. Research undertaken by Scope (2013), a leading disability charity Scope on the impact of the 2012 Olympic and Paralympic Games supports this theory.

This research study found that 81% of 1,014 respondents claimed that there was no evidence of positive change in the public's attitude towards disabled people following the 2012 Paralympic games in the United Kingdom (Braye, Dixon & Gibbons 2015 p21). On the contrary, however, Le Clair (2013, p.59) claimed that 'while the term disability may have negative connotations for all people with disabilities; assumptions about people with physical disabilities are changing. Paralympic athletes are rejecting the label of disability as restrictive and limiting and the Paralympic Games have shifted their focus from disability-based to sports-based competition'.

3.4   THE SPECIAL OLYMPICS

The Special Olympics (SO) established in 1962 by Eunice Shriver is the most significant and recognisable worldwide sporting organisation for children and adults with intellectual disabilities. It provides year-round training and competitions to over three million athletes with intellectual disabilities across eighty countries (Arscott 2011). The first SO summer games were held in Chicago in 1968 and today they are the world's largest programmes of sport, training and athletic competition for both children and adults with intellectual disabilities. During the 1960's Dr. William Freeberg, the then chairman of the Recreation and Outdoor Education Department at Southern Illinois University was contacted by the Kennedy family and informed that President John F. Kennedy's sister, Rosemary was born with an intellectual disability.

As a result of this telephone conversation the Kennedy family, and in particular Eunice Kennedy Shriver, went on to become politically active on the disability rights agenda and openly spoke out about improving the quality of life of all people with intellectual disabilities (Kenidrigan & Hodgkinson 1998). Eunice Shriver Kennedy devoted her life to the Special Olympics movement and in 1973 went on to inspire and support the establishment of the Winter Special Olympics which were held in the state of Maine, USA. According to Christie (2009), during one memorable week in February 1973 in Maine, dozens of competitors not only enjoyed and distinguished themselves on the slopes of Saddleback, but were an inspiration to everyone with their sheer delight in participating in the games.

From its humble beginnings in the 1960's and 1970's, it is estimated that nowadays over three million people with disabilities in more than 180 countries worldwide are involved at some level with the SO movement. Many of these countries have their own SO organisations and operate SO clubs at local and national level. Special Olympics Ireland was founded in 1978 and according to their official website, the organisation has grown significantly since then having over 9000 athletes participating in 15 sports in 385 clubs throughout the island of Ireland. They are supported by a network of more than 25,000 volunteers, making the SO one of the largest voluntary organisations in Ireland (Special Olympics 2016). The Special Olympic Summer Games were held in Ireland in 2003. This was the first time they were held outside of the USA and the games were deemed to be a spectacular success receiving significant national and international acclaim.

3.4.1   The Special Olympics and Social Inclusion

Similar to the Paralympic Games, the SO also support and promote a culture of '*inclusion*' for PWID. Indeed, as well as the claims made by the SO that participation in the games leads to greater inclusion in mainstream society for PWID, there are a number of other notable benefits through participation and involvement in the SO.

Writers and researchers have made claims that participation in the SO can foster more inclusive societies for PWID, can teach SO athletes about the strategies involved in competing as part of a team, there are opportunities to make friends, experience sportsmanship and camaraderie and experience a more positive perception of self-perception.

According to Hassan, Dowling, Menke & McConkey (2013, p.114), 'the SO movement supports an ethos of positive integration of PWID into their wider communities'. The organisation expressly challenges discrimination and promotes empowerment, competence and acceptance through sport. Thus, the SO movement has 'not only demonstrated in Ireland but in the United Kingdom and further afield that there is willingness in the wider community to befriend PWID' (McConkey 2011, p.442). Harris (2006, p.353) have also made the claim that 'the SO enhance function, physical activity and health and also help individuals with intellectual disabilities improve and adapt into society'. Harris (2006) suggested that research conducted after the Winter Special Olympics of 1993 found that athletes who participated in those games experienced better social competence, adaptive skills and a more positive sense of self perception. Similarly, O'Keefe & Watson (2015) stated that the SO provides many opportunities for PWID not only to develop physical fitness and demonstrate courage but also to experience joy and friendships with their families, other SO athletes and the wider community at large. Studies have found that one of the most significant factors contributing to athletes participating in the SO is to meet people and make friends (Alexandra Fraser 2008).

Parents of children with intellectual disabilities have also acknowledged the fact that their children can make friends through involvement and participation on the SO. Libal (2015), a parent of a child with an intellectual disability commented that while her special needs daughter had friends in school sometimes she was made fun of. However, in the SO she had real friends and everyone was just like her.

3.4.2 Other Benefits of Participating in the Special Olympics

There are other notable benefits for PWID through participation in the SO. For example, athletes can develop a better understanding of the concepts of supporting each other and teamwork through this sporting social phenomenon. Winnick (2011, p.526) noted that many SO athletes have demonstrated the ability to participate in team sports. 'This ability not only includes the attainment of specific skills but also to the concept of *"teamwork"* and *"team strategy''.* According to O'Brien & Vroman (2014, p.296), 'children with intellectual disabilities may not only enjoy participating in sporting events such as the SO, but these events may help such children develop feelings of success and experience teamwork and a sense of achievement'. Martin (2015) made a similar observation where he claimed that participants in the SO had the ability to learn about the concepts of teamwork, friendship and spirit which is something that most people involved in sports get to experience.

The American Alliance for Health (1982, p.59) also stated 'to special athletes, sport like soccer is not just a game but an introduction to a whole new world of skills development, friendship and teamwork. The SO can also be an introduction to a dimension of sportsmanship and sharing that is simply not found in today's sports world where winning is not the main thing but the only thing'. Munson (1997) has also suggested that long term participation in the SO improves social competence and also helps individuals with intellectual disabilities deal with their lives in terms of teamwork and co-operation. In a similar vein, Smith (2003) also quoted a story with a similar theme of sportsmanship, co-operation and teamwork within the SO.

He recalled an account of a team of nine SO athletes in a race where one fell over, was visibly upset and started to cry. When the other eight participants noticed this, they went back to the fallen athlete, helped him up and all nine crossed the finish line together, arm in arm. Thus, the SO is 'not simply about competing for and winning a medal, it's also about participation, inclusion, skills development and teamwork.

In today's world of sport where in which winning and the reward associated with winning seem to be everything, the SO strive for a higher value' (Berkin, Miller, Cherny, Gormly & Egerton 2013, p.627).

3.4.3   Criticisms of the Special Olympics

However, the SO are not without their critics. Matheson-Reen in his 2014 publication '*The Special Olympics: progressive or regressive'* suggested that while the SO may strive to create a more inclusive and accepting world for people with an intellectual disability, a criticism which has been consistently levied against the SO is that it enshrines segregation (Matheson-Reen 2014).

In 2004, Storey also claimed that since 1968, the basic mission of the SO is separate, segregated programs for people with disabilities. Storey (2004) also argued that the SO are a powerful influential body. This is because he believes that the public's understanding of people with disabilities can be shaped by the SO and the language and imagery they use in reference to PWID in order to promote the games. In turn Storey claimed that the SO reinforce negative stereotypes about people with disabilities which perpetuate segregation and oppression. In his published works Storey (2004) has specifically criticised media images of PWID participating in the SO. He has made the claim that the press regularly reinforce a negative, self-fulfilling prophecy that evokes sympathy, pity, or stigma and promotes a negative stereotype of this already marginalised group of people. In one such article he makes explicit reference to a picture that was published in the Pittsburgh press of a person being hugged with the caption, '*Special Hug'*. Reflecting on the picture Storey said that it was difficult deciding where the '*special*' ends and the '*Olympics*' begins.

Other media headlines and pictures Storey makes reference to, such as '*Special Olympics athletes win smiles; Races belong to the not-so-swift, not-so-strong',* also serve to reinforce negative stereotypical images of PWID (Storey 2004).

Calhoun and Calhoun (1993) have also been critical of the SO's practice of mixing young and old athletes together in the same sporting events and on the same teams. They suggest this practice can have a damaging and negative effect. In mainstream sporting events this practice is rarely, if ever, witnessed and while it may suggest that the concept of *'participation'* in the games is sacrosanct, little (if any) thought is given to how such images impact on the general public's perception of PWID.

Some disability writers, researchers and activists also question the use of the word *'special'* insisting that it is not *'person first'* language. Nowadays, many educators and some legislators make a concerted effort to use person-first language as part of their everyday vocabulary. According to Snow (2007), language can be very powerful and can simultaneously reflect and reinforce public attitudes and perceptions. Some of the language used to describe PWID can evoke feelings and imagery that perpetuate archaic and negative stereotypical perceptions about this already marginalised group. Such perceptions are powerful as they can create attitudinal barriers which are one of the greatest obstacles to the success and inclusion of individuals with disabilities. Snow (2007) went on to state that because the term *'special'* is so commonly used, people seldom consider what message it sends or what images it may evoke. She claimed the term *'special'* is a negative term used to describe PWID and has achieved nothing to improve public perceptions of this minority group.

It has, however, reinforced negative images and stereotypes of PWID and the label has been a barrier to their inclusion in the community. Snow (2007, p.2) claimed the term special 'has done nothing to improve perceptions of PWID and everything to reinforce negative images'. When applied to children and adults with disabilities, special needs can automatically lead to segregation! If we say a child has special needs then by extension, he or she must need *'special'* (segregated) education, *'special'* activities, and *'special'* environments. If he or she has special needs then he or she is not 'regular' and is not entitled to participate in *'regular'* (ordinary) activities. Thus, the term *'special needs'* has become metaphor for segregation'.

In stark contrast to the above, SO organisers have viewed the games as a programme or vehicle for participants to enter into the mainstream of society and free from the stigma of their disability. Brittain (2010, p.147) also claimed that 'the Special Olympics will transform communities by inspiring people throughout the world to open their minds and include people with intellectual disabilities and thereby celebrate the similarities common to all people'. According to Hassan and Lynch (2015, p.256), there is a social aspect of the SO which includes 'enhancing the social skills of participants, developing co-operation, teamwork and communication skills'. Henroid (1979) also argued that one of the most important goals of the SO is to train its participants to compete in individual and team sports. The SO are intended to demonstrate the result of the training process, such as skills development and teamwork.

However, some academics and researchers have questioned such claims and suggested the SO have achieved the very opposite of social inclusion and acceptance for PWID. Dunning and Coakley (2000, p.425) have argued that 'the games have actually promoted segregation and have been detrimental to the process of mainstreaming people with disabilities into society'. Storey (2004), in his paper '*the case against the Special Olympics*' has also argued that the SO are segregated programmes that do more harm than good as they serve to reinforce negative images of people with disabilities.

Grossman (2015) in an analysis of Storey's paper also made specific reference to how the popular press portrays the athletes stating that such images and press accounts reinforce negative self-fulfilling prophecies that evoke feeling of pity, sympathy and stigma for PWID. Storey claimed that such media coverage of the SO promotes a negative stereotype of PWID and impacts negatively on how the general public view this already marginalised group. In this paper Storey also claimed that the SO are segregated events, one can only participate if they have a disability and that the SO stands in contrast with any efforts made to integrate and include PWID into ordinary everyday recreational settings (Grossman 2015).

The National Institute for Health Research (2012, p.2) stated that 'inclusion is about positively striving to meet the needs of different people and taking deliberate action to create environments where everyone feels respected and able to achieve their full potential'. However, researchers such as Storey, disability activists and policy makers have claimed that despite the genuine efforts of disability organisations and the SO, PWID routinely find that they are disempowered and excluded from mainstream society and not afforded opportunities to experience real inclusion or supported to have a meaningful role in society. It must be pointed out that the concept of inclusion will mean different things to different people and indeed disability service providers and organisations', meaning it is not a simple concept to define or explain.

According to John, Morgan, Carling & Jones (2009), inclusion is not something that happens by flicking a switch and the lights come on, rather it is a process that takes time and it is about changing public perceptions of disability. Newton (2017) claimed that at its simplest, inclusion is explained as a state being included. However, it goes without saying that inclusion is significantly more complex than that. Norwich (1999, p.179) stated that 'inclusion is something which cannot be done to people, it is something in which people must be actively involved'. Historically, this has been a typical feature of many disability service providers, where management and '*disability experts*' decide what is best for the individual based available recourses and a philosophy underpinned by a model of social exclusion and dependency. However, one of the most common philosophies significant to disability activists and disability advocates is the notion of '*nothing about us without us*'.

In his publication '*Nothing About Us Without Us: Disability Oppression and Empowerment*,' Charlton (2000, p.2) claimed that 'the needs of people with disabilities and the potential to meet those needs are conditioned by a dependency born of powerlessness, poverty, degradation and institutionalisation. This dependency, saturated with paternalism begins with the onset of disability and continues to death. The condition of dependency is presently typical for hundreds of millions of people with disabilities'.

It is reasonable to suggest, therefore, that because PWID have been systematically excluded from positions of power, influence and key decision making processes about their lives, they typically experience and understand social inclusion as constructed by disability service providers and disability organisations such as the SO.

3.5   Distinct Differences between the Special Olympics and Paralympics

The Paralympic Games are not the only international sporting organisation for people with disabilities. The SO are also an internationally acclaimed sporting organisation for people with intellectual disabilities that are recognised by the IOC. While both sets of games hold summer and winter events, the Paralympic Games are held in the same year as and in conjunction with the Olympic Games utilising the same facilities and stadia. However, Brittain (2010, p.202) stated that 'the principal difference between the Paralympics and Special Olympic movement lie in the level of sporting ability of the participating athletes as well as the actual disability of the athlete'. The SO involves athletes from all levels of disability and athletes are placed in divisions with other athletes of similar ability. Each division has a final which allows all athletes a fair chance of winning a medal. Those that do not win still receive a '*participation ribbon*' for their efforts. The Paralympic Games on the other hand are viewed as more competitive and elitist.

According to Brittain (2010) the usual philosophy of sport is applied to the Paralympic Games, in which competitiveness and competition is used to determine the best individual or team. Likewise Herzog (2011) claimed the Paralympics should never be confused with the SO as Paralympic athletes are world class athletes, whereas anyone with any level of ability who has an intellectual disability can compete in the SO. Indeed, the Paralympics has distanced itself somewhat from the SO and promotes itself as the '*Olympic Games for athletes with disabilities'*. According to Nixon (2016) the Paralympics strongly emphasises the principles of athleticism, athletic ability and competitiveness whereas SO are based on main principles of '*participation'*.

3.6   Disability Sport from an Irish Perspective

Many people employed in business endeavours associated with sport are engaged in a career field known as sports management (Parks, Quarterman and Thibault 2011). According to Pitts and Stotlar (2007, p.4), sports management is 'the study and practice of all people, businesses, activities or organisations involved in producing, facilitating, promoting or organising any sports-related business or product'. Sports management is a significant and lucrative business and in 2004 it was estimated that 79% of Irish people had participated in some type of sport at some stage over the course of their lifetime (Irish Sports Council 2004). Indeed, more recent research undertaken by Spórt Éireann found that '45% of the population regularly participates in sport. This equates to approximately 1.6 million people directly benefiting from the physical, psychological and social gains obtained from sport' (Spórt Éireann 2015, p.1).

However, Shapiro and Pitts (2014) claimed that insufficient research has been conducted at an international level (and less so in Ireland) with regards to *'disability'* sport, leisure, recreation and physical activity. Thus, the numbers of people with disabilities participating in regular sporting activities in Ireland is less clear as those without disabilities. Notwithstanding, research conducted by Spórt Éireann in 2015 found that in Ireland 'individuals with disabilities are significantly less likely to participate in sport and exercise than those without disabilities (Spórt Éireann 2015, p.5).

However, the same research also found that persons with disabilities have similar motivations to those without disabilities for taking part in sport and physical activity such as improving health and fitness, spending time with friends and family and better management of weight. It was also found that people with disabilities had a higher propensity to live sedentary lifestyles as opposed to the rest of the population without disabilities. Thus, participation in sport for people with disabilities living in Ireland may not only increase physical health and wellbeing, but promote opportunities for meaningful inclusion in their communities.

3.7   CONCLUSION

This chapter provided a brief overview of the history and evolution of the modern Olympic Games and how from those games, the Paralympic and Special Olympic Games evolved. A detailed discussion on the SO was presented to include the benefits of participation in the games for PWID, and indeed some of the criticisms the entity has been subject to by a number of disability activists and researchers. A brief overview of the role of sports for PWID was also provided. There is no doubt that there are many benefits to be had for PWID through participation in the games. However, some researchers have criticised the SO for the way in which it portrays PWID. They claimed the games, and the images the SO use to portray PWID do nothing to further their inclusion in society but in fact, further perpetuated the exclusion and marginalisation of PWID from their communities. Notwithstanding, the SO are a hugely popular and influential body with 385 clubs throughout the island if Ireland supporting hundreds of athletes with ID.

The next chapter will further explore and discuss the concept of inclusion paying particular attention to how PWID have *'typically'* experienced social inclusion throughout the ages. In attempting to gain an insight into how social inclusion has been constructed for PWID, a deeper analysis of the models of service delivery provided to PWID will be presented. Models of disability can be viewed as a conceptual framework for understanding disability and in attempting to provide an explanation as to why specific attitudes exist about PWID. They also help explain how PWID have typically experienced social inclusion based on the philosophies of service providers at any given time and societies exposure to and understanding of people with disabilities. Attempting to understand and define what inclusion actually means is of critical importance to this piece of research as the SO make the claim that they have created societies for PWID that are accepting and inclusive of this minority group.

CHAPTER 4

4.0   INCLUSION

4.1   INTRODUCTION

The concept of '*inclusion*' is difficult to define as it will mean different things to different people, communities and populations. According to Evans (2007) if you ask what inclusion means to people, you will get many different responses because they will interpret the concept in many different and individual ways. That said, each society has its own way of '*supporting*' inclusion and exclusion, and creating opportunities for integration or denying such opportunities. Common in many definitions of inclusion are the philosophies of '*being valued*' and '*making a valued contribution to one's community*'. DePauw & Doll-Tepper (2000), in their definition capture the very essence of this when the claimed that 'inclusion can be conceptualised as a broad societal idea or a philosophy in which all people are valued as unique contributing members of society and included' (DePauw & Doll-Tepper 2000, p.139)

However, in order to gain an insight into how community-based inclusion has been constructed for PWID, we must recall how models of service delivery provided to this group were based on an exclusion/inclusion continuum throughout the ages. The type of service a PWID was in receipt of directly impacted on how they experienced inclusion in their wider community. Traditional service models have been typically characterised by ideologies of exclusion, where the belief was that PWID made no valued contribution to society. More modern service models have been characterised by the belief that PWID can make a valued contribution to society, thus supporting the movement towards community inclusion for this typically marginalised group.

This chapter will focus on the history of service provision and models of disability that have directly impacted on how society has responded to and supported PWID.

Models of disability can be viewed as a conceptual framework for understanding disability and in attempting to provide an explanation as to why specific attitudes exist about PWID. More importantly, models of disability help explain how societal attitudes towards PWID have been shaped and reinforced.

Building on the introductory chapter to this piece of research, a detailed discussion will be provided on how society and service models have imposed rigorous systems of exclusion on PWID. The significance of '*language*' and *'labels'* used to describe and define PWID will be discussed to include the impact that those labels and language have had on how PWID experienced social inclusion. Modern service models that make the claim to support independence and the inclusion of PWID in mainstream society will also be discussed. Finally, the role of sport will be revisited with a specific focus on the claims that sport and, in particular, the SO can support PWID to be more included in their local communities and society in general. Throughout this chapter there will be a focus on what social inclusion means to PWID and how this minority group have typically experienced inclusion.

4.2   MODELS OF SERVICE DELIVERY – TRADITIONAL MODEL

Because of the way in which service models have developed over the years, PWID have been systematically excluded from their families, friends and community at large. In the past, many service systems had typically responded to the individual needs of PWID by *'grouping'* them together in large isolated and institutionalised settings regardless of individual need, and providing programmes of care based solely on what the service could offer. According to Sullivan (2011) the rise of the medical profession in the 19th and early 20th century had a significant impact on the way in which professionals understood and approached PWID.

As these people were highly skilled and highly revered experts, their opinions and rhetoric concerning the needs PWID were respected and never questioned. They were educated, powerful people who held powerful positions in the medical profession and it was generally accepted that '*they knew best*'. Thus, professionals, influenced by the medical model of disability, focused on '*inability*' and '*disability*'. Their viewpoint was that because a person had an intellectual disability, it was for that reason, and that reason alone, why they could not participate in society. There have been (and continue to be) significant and serious ramifications for PWID because of this philosophy and '*expert*' way of thinking. Moyne (2012) claimed that when professionals and service providers view disability in this way, the focus is on compensating people with disabilities for what is wrong with their bodies and minds and to provide services that are based on segregation and specialisation. Within this philosophy, medical experts and professionals had very limited (if any) expectations of PWID.

They viewed PWID as being '*sick*', and in turn, it was acceptable and expected that such people would be excused from holding valued social roles in society because they were '*unable*' to do so. As experts and professionals perpetuated this belief that PWID could not make any valued contribution to society, the general public accepted this way of thinking which meant (and continues to mean) that PWID are seen as a '*special*' group of people, who require '*specialised*' supports and continue to remain on the periphery of their communities. The overriding focus on the medical model of disability is on the condition a person is labelled with, as opposed to the person. Thus, the label almost becomes the person as the person is defined by that label (Beith *et al.* 2005).

Although Ireland has seen a significant and positive shift in the way in which services are provided to PWID, the fact remains that many disability organisations continue to provide services that are '*special*' and '*segregated*' from the mainstream of society. Service systems continue to house PWID by grouping those with similar needs together under such loose terms as '*level of disability*', '*behaviours that challenge*' or their '*medical condition*' (Lynch 2014).

When this happens, programmes of support are then based on group needs and in the context of what the service can offer to the group as opposed to the individual. Lynch (2104) goes on to say that such programmes are responsible for the creation of artificial environments for PWID and their various and individual *'rights'* become part of only what the service offers.

For example, the right to a home translates into the need for a residential placement or the right to have friends and be involved in the local community becomes part of a volunteer programme or the responsibility of a voluntary agency such as the SO. In turn, service providers continue to categorise and label PWID and, by doing so, create a culture of total and complete disempowerment. This results in PWID themselves and the community at large believing and accepting that people with disabilities are dependent and must rely on the organisation to provide them with the care and support that is required for everyday living. PWID become totally dependent on the service and over time come to accept this as the *'norm'* and the way things should be. However, this type of labelling, conditioning and dependency can be powerful in determining the future for PWID.

According to Rao (2004, p.78), 'labels play consciously and unconsciously a predominant part in discrimination'. Labels can lead to an expectation that people will behave differently to the rest of society and when a person is labelled, there is an expectation that they will behave in a particular way. This type of labelling can have devastating impacts on the everyday lives of PWID. Skrtic & Sailor (1996, p.507) claimed that 'prescriptive labelling of people with disabilities can determine what services they will be offered but most importantly labels decrease access to 'non-disabled' services'. In turn, this leads to exclusion from mainstream society for PWID as they are stigmatised. There is a belief that they are not able to work, not able to learn and not able to participate in any meaningful way in the community. Such labelling has had a significant impact on how people with intellectual disabilities experience the concept of social inclusion. For example, labelling people as *'special'* can shape society's expectations of this already marginalised group of individuals.

Society has limited expectations of people labelled as *'special'* and assumes that the problem lies at the very heart of the child or the adult with the disability. Labels can perpetuate the idea that people with intellectual disabilities are different from the rest of society; they are the '*other*' and, because of this, society can justify excluding PWID from everyday mainstream activities. The next section will examine the concept of labels and how the routine labelling of PWID has significantly impacted on their right to be included in their local communities

4.2.1   Labelling of People with Intellectual Disabilities

Labelling a person as *'intellectually disabled'* or *'special'* will impact on them throughout the entirety of their lives. The implications of such labels are far reaching and must not be underestimated. The labels that have been placed on PWID over the years have played a significant role in the stigmatisation, segregation and isolation of this marginalised group. Labelling has also perpetuated society's assumptions that PWID can make little, if any, valued contribution to society as a whole and hence most PWID are not afforded the experience of being integrated or included in their local communities. Labels can also be viewed as positive or negative and all people will carry a multitude of labels over their lifetime. For example, a person can be a PhD candidate, a social care worker, a lecturer or a teacher. These 'labels' inform other people, in part, as to who we are and indeed other people will immediately have a set of expectations about us because of these labels. Such labels are perceived to be positive and they provide information to others about not only who we are, but what we are.

Some disability activists have claimed that the most objectionable aspect of language used regarding PWID is negative labelling and in particular the stereotyping and stigma attached to such labels. Baglieri & Shapiro (2012, p.42) stated that 'labels frequently work against people with disabilities and society at large have diminished expectations and stereotypical images of what particular people are like'. Goffman (1963), a sociologist, suggests the terms stigma and labelling are inherently interlinked.

According to Goffman (1963), stigmatisation creates a significant feeling of disapproval that many people in society have about anything or any group of people. Stigmatisation traits include any type of labelling such as the term *'special'* and '*intellectually disabled'*.

Barton (1996, p.420) claimed that this type of disability labelling is a 'process of categorisation in which the inabilities, the unacceptable and inferior of a person are named. In turn, their exclusion from society is legitimised'. Thus, such attitudes can not only make disabled people less likely to challenge their exclusion from mainstream society, but to actually accept it as a self-fulfilled prophesy. Wilson (1998, p.43) claimed that one of the most significant dangers of the labelling process is that *'the label becomes over generalised and places the emphasis on the disability rather than the person'*. Labels used in relation to disability empower the professional, the expert and the service provider to use convoluted jargon and make impressions on wider society that they know best. Indeed, Wilson (1998) suggested that labels are simply a way to deflect the failings of the professionals and service providers and apportion blame to the people '*stuck*' with the label, in this instance, PWID.

Today in Ireland, many disability service providers continue to label PWID. For example, people continue to be labelled with terms such *'severely disabled'*, '*challenging'*, '*profound'* and *'special'*. The fact that services still continue to label people in this way could be their way of legitimising why they have failed to support and create more inclusive communities for PWID. More importantly, according to Macionis & Plummer (2008, p.437), such images and labels 'construct ideas of some people being "*the other'*'. Whatever they are, they are not you. Over time we may debate and change the words we use to refer to 'others' but beneath this terminology there is still a sense that there are 'others', people who are 'out there' who are something else, radically different from 'us'. They are not 'normal' (Macionis & Plummer 2008 p437). Shakespeare (2013) claimed that labelling has played a significant role in devaluing PWID and societies and communities as a whole fail to see their abilities and strengths, fail to respect them and ultimately, fail to include them.

Indeed, Newell & Goggin (2005) have said that the act of labelling people has long been a way to strip them of their rights and power. It is also a way to '*place people in services*' or to exile them from their community.

Despite the efforts by policy makers and disability service providers to escape the limitations of labelling, according to Keith & Keith (2013), labels have made life more than difficult for many people with intellectual disabilities. Negative labelling has attributed defective traits to this marginalised group, often creating limiting self-fulfilling prophecies. Wolfensberger (1975) further explored the issues regarding the labelling and stereotyping of PWID and claimed that there are a number of stereotypes specific to this group of people. Wolfensberger (1975) claimed that many in society viewed PWID as '*objects of pity'*, '*burden on charity'*, '*objects of ridicule'* or as *'sick'.* This type of labelling, thinking and value base projected onto PWID has further promoted their isolation and exclusion from society. According to Emerson, McGill and Mansell (2013, p.213), 'the nature of societal values specific to people with disabilities has received much attention because most disabilities are defined by their exclusion from socially valued roles and groupings such as the beautiful, the intelligent, the fit or the entrepreneurial'.

4.3   MODELS OF SERVICE DELIVERY – MODERN MODEL

The National Disability Strategy (NDS), which was launched by the Department of Justice and Equality in 2004, represented a fundamental shift towards social inclusion and full citizenship for people with disabilities. One of the main objectives of this Strategy was to ensure that people with disabilities would be supported to be active and contributing members of their communities (DoJE, 2004). More recently, the National Mental Health Policy, *A Vision for Change,* which was adopted in 2006, set out service delivery principles and values that include citizenship, partnership, quality and inclusion for people with disabilities.

Two years later in 2008, Article 26 of the Convention on the Rights of Persons with Disabilities stated that 'State parties shall take effective and appropriate measures...to enable persons with disabilities to attain and maintain maximum independence...and full inclusion and participation in all aspects of life'.

According to the HSE (2012, p.110), one of the most significant changes specific to service delivery to PWID has been '*the move from a medical model to a social model of provision, and the recognition of the right of people with disabilities to community inclusion and active citizenship.*' Indeed, the Department of Employment Affairs and Social Protection in their National Action Plan for Social Inclusion (2007, p.54) stated that their objective and vision, as set out in 'Towards 2016', is of 'an Ireland where people with disabilities have, to the greatest extent possible, the opportunity to live a full life with their families and as part of their local community'. Thus, there was a strategic shift from institutionalised models of care, to models based on living in the community where PWID are supported to have a meaningful role and make valued contributions to society. While policies and legislation have attempted to ensure and promote the inclusion of PWID into society, disability activists and advocates would say this goal has not been achieved.

While many people with disabilities are *'integrated'* and now live in their local communities, they are not truly included. This is because *'integration'* focuses on the actual person with a disability whereas *'inclusion'* focuses on learning to live with and respect one another. Disability activists have claimed that real inclusion is about a sense of belonging, being connected and engaged with. Miller and Katz (2010) suggested that inclusion for PWID is about making connections, making friends, feeling valued as a person and being accepted for who you are. Indeed, Sapon-Shevin (2010, p.9) stated that '*inclusion means we all belong, it means not having to fight for a chance to be part of the community; it means all are accepted, inclusion means all children with disabilities are accepted*'.

It is true to say that throughout history and especially in the 20th century, individuals with disabilities have typically experienced increasingly greater inclusion and acceptance in society (DePauw & Doll-Tepper 2000). Most large institutions and hospitals that supported PWID in isolated and rural based settings are now closed (although a small number remain in use on the island of Ireland today). However, while most agencies that support PWID in Ireland have made a concerted effort to promote more inclusive communities for this marginalised group, the fact remains that the majority of PWID continue to live their lives on the periphery of society. The DFI (2011) stated that people with disabilities are twice as likely to live below the poverty line as the rest of the population and continue to experience higher levels of poverty. PWID also experience poorer educational outcomes, with a significant number having to leave an educational setting earlier than they intended because of their disability. PWID also face significant barriers in gaining meaningful employment. With regard to the inclusion of PWID the HSE (2012, p.110) stated that 'there is evidence of innovation and good practice, but progress has been uneven across disability groups and agencies'.

More recently in 2015, over 93% of inspections carried out by the HIQA found that many organisations were failing to comply with national standards for PWID. Indeed, one of the most important standards in order to achieve a good quality of life is to promote inclusion within the community and the development of social networks for PWID. Standard 1.4.2 explicitly states that 'The service is proactive in identifying and facilitating initiatives for participation in the wider community, developing friendships and involvement in local social, educational and professional networks' (HIQA 2013, p.68). However, while a number of disability service providers are making efforts to meet this standard, reports from HIQA have informed that many disability residential centres are failing to provide adequate supports so as to meet the social care needs of their residents (HIQA 2016). So, while PWID are now living and integrated into society, evidence suggests such integration has not necessarily lead to meaningful inclusion.

The National People with Disabilities and Carer Council (NPDCC) put forward one interesting explanation for this development. According to the NPDCC (2009 p.1), 'once shut in, many people with disabilities now find themselves shut out. On launching their paper on the Experience of People with Disabilities and their Families in Australia, the NPDCC (2009, p.1) claimed that 'people with disabilities may be present in our community, but few are actually part of it and many live lonely lives of exclusion and isolation. The institutions that once housed them may be closed, but the inequity remains. Where once they were physically segregated, many people with disabilities now find themselves socially, culturally and politically isolated. They are ignored, invisible and silent. They struggle to be noticed, they struggle to be seen, they struggle to have their voices heard'.

In a similar, vein DePauw & Doll-Tepper (2000, p.51) have claimed that with the development of the social model of disability 'many agencies got onto the "inclusion bandwagon" as it can be seen as doing the right thing socially and indeed whether people are on this bandwagon for the right reasons in terms of following this through to implementation and a commitment to effect positive change remains the subject of much conjecture'. However, Reid (2003, p.143) claimed that to 'just simply jump on a bandwagon suggests quick acceptance of an idea without considering the issue fully. A bandwagon often has the appearance of being contemporary and enjoying such wide supports that opposing it would almost seem like heresy. Bandwagons tend to say this approach is for everyone and other alternatives are wrong'.

There has been much criticism of disability organisations and service providers with regard to their systematic failure to ensure people with disabilities are included in mainstream society. Indeed, some theorists have said disability organisations have simply jumped on the inclusion bandwagon and their attempts to create inclusive communities for the people they support have all been but tokenistic. Arnstein (1969) put forward an interesting model of citizen participation and inclusion which examined the level of '*power*' organisations have over the people they support.

4.4   ARNSTEIN'S LADDER OF PARTICIPATION

This model has been applied to organisations that provide services for people with intellectual disabilities in attempts to examine and analyse the degree to which '*real'* power has been devolved to people with disabilities, if at all. In Arnstein's model, '*the ladder of participation'* has seven rungs. The lower rungs focus on manipulations and control. At this level, the organisation is '*informing and telling'* PWID what is happening and there is little, if any, room for '*real*' consultation. This is what disability theorists have called a culture of dependency where PWID are completely disempowered, do not get to participate in decisions that directly impact upon them and find themselves excluded from the mainstream of society. According to Barton (2015, p.32), *'in modernity, impaired people have become quite literally the embodiment of dependency'*. Creating a culture of dependency has significant consequences for PWID because the organisational focus is based on a medical model of support and on the impairment the person presents with. In this model, the PWID usually acquires a negative label and the organisation legitimises why the person is excluded from society at large.

The middle rungs on Arnstein's ladder focus on information giving and consultation. However, some theorists have claimed that this level just presents with various forms of tokenism and according to Jackson (2016), while services may consult with PWID they only do so to get their perspective as it looks good but nothing really changes for the person. Management continue to make the final decisions and Jackson (2016) claimed that many services in Ireland today continue to work in a tokenistic way with their most important stakeholders, PWID. Robson, Begum, and Locke (2003, p.11) claimed that 'there is a clear and explicit relationship between, presence, inclusion and influence'. However, just being physically present somewhere does not mean a person has any level of influence or is even included.

From a disability perspective, many PWID may find themselves integrated into their local communities but real and meaningful inclusion has eluded them.

Indeed, many view the process of '*integration*' as being a precursor to true inclusion and that integration is only about the environment. Inclusion is more about the process of participation, not just simply about being 'present' in society. Rieser (2012) claimed that integration concerns itself with trying to adjust the person with a disability so as they can '*fit in*'.

Experts diagnose and label PWID, prescribe and recommend placements and focus on what the person needs to change so as they can '*fit in*'. Similar to the medical model of disability, the blame is apportioned to the PWID if they cannot make such adjustments and, in this instance, they continue to experience isolation and exclusion. On the other hand, inclusion concerns itself with respecting difference and building on commonalities. There is a focus on overcoming barriers (physical and attitudinal), working in partnership and mutual respect. This is similar to the top three rungs on Arnstein's Ladder of Participation where the focus in on 'true' inclusion. Here PWID are empowered and supported to have control, input and influence into all decisions affecting their everyday lives. According to Huston-Wilson and Lieberman (2009, p.65), 'empowerment theory emphasises the belief that individuals are their own change agents and that such an agency can only emerge when responsibility for planning and decision making is shared'. Similarly, Thomas and Woods (2003, p.74) claimed that 'real empowerment involves the full involvement of people with learning disabilities throughout the process of deciding what is wanted and what is needed and real inclusion needs to address the poverty and inequality faced within society's structures and not just focus on services to support inclusion'.

Thomas and Woods (2003) also claimed that a lot of the '*normalisation*' and inclusionary activities undertaken by disability organisations is all but tokenistic and, while many PWID may experience some level of integration into their local communities, few experience true inclusion. Thus, the concept of '*inclusion*' for people with disabilities is complex, difficult to define and no doubt will mean different things to different people. Judith Snow, a person with a disability, a disability activist, a disability writer and advocate, claimed that inclusion can be defined as simply being missed if one

is not present (Snow 1998). That said, many disability theorists have claimed that including people with disabilities in everyday activities and encouraging them to have roles similar to their peers who do not have a disability is *disability inclusion.* This involves more than simply encouraging people; it requires making sure that adequate policies and practices are in effect in a community or organisation (United Nations World Health Organisation 2011). It also means that organisations providing services to PWID making claim that they are supporting opportunities for meaningful inclusion such as the SO must be challenged. They must reflect on the concept of inclusion and what it actually means to their athletes. In doing so, they must evaluate the level of success they have had in promoting more inclusive communities for PWID.

4.5   SPORT AND SOCIAL INCLUSION

A research study for the Equality Authority Ireland and the National Disability Authority Ireland (2006) examined various aspects of social inclusion and social exclusion for people with disabilities under a number of specific headings including social life and social participation. The study showed that on almost all the measures studied people with disability fared worse than others in their own age group and were less likely to be involved in any type of club or association (Nolan and Gannon 2006). However, according to Hums, Wolf & Legg (2014, p.317), 'the issue of inclusion has been a hot topic in the world of disability sport – where there are various definitions, interpretations, and perspectives about inclusion of people with disabilities'. With reference to the phenomenon of sport, Nixon (2007, p.417) defines inclusion as 'the final stage of integration of people with disabilities in sports competitions or organisations in which they are involved, accepted and respected at all levels of the competition or organisation'. Mainstreaming from a sporting context refers to the participation of all people within sporting programs designed for and mostly made up of people without disabilities.

Nixon (2007) argued that the concept of mainstreaming has had some success in ensuring the inclusion of people with disabilities in the world of sport. For example, people with disabilities may find that the use of assistive and/or adaptive technologies such as hearing aids, visual aids or prosthetics has been of significant support in promoting their inclusion in mainstream sport. For people with an intellectual disability, the SO in its mission statement makes the claim that it captures the importance of sports and recreation for people with disabilities. 'Through the power of sports the Special Olympics strives to create a better world by fostering the acceptance and inclusion of people with intellectual disabilities by giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy and participate in a sharing of gifts, skills, and friendship with their families, other Special Olympic athletes, and the community' (Wendt 2011, p.473). However, there is a growing interest in the SO and their claims of fostering the acceptance and inclusion of people with intellectual disabilities in society. There are some who claim the SO actually promote and perpetuate the segregation of PWID from society.

According to Shapiro (2011, p.177), many parents of children with disabilities are shunning the SO because they are segregated from the mainstream of society and provide for '*special*' recreational events that place their children with similarly other disabled children. Shapiro (2011) claimed that many parents today see the SO as '*a separate and unequal place in the shadows*'. Similarly, Storey (2009) also criticises the SO claiming that they have maintained programmes of segregation and exclusion and continue to increase the '*divide*' between people with disabilities and those without disabilities. So strong is Storey in his convictions he has claimed that 'the SO should be disbanded in favour of more integrated recreational activities that combat stigmatisation and promote greater inclusion in society' (Storey 2009 in Caldeira 2015, p.253). However, according to Gavron & DePauw (2005, p.242), 'people with disabilities have been able to experience "selective" inclusion and acceptance in the world of sport'.

While the SO have been criticised by some and accused of perpetuating the segregation of PWID, their programme of sport '*Unified Sports*' aims to promote the social inclusion of PWID within their local communities. They do this by matching PWID (called athletes) with non-disabled players (called partners) who have a similar skill level. The programme's expressed intention is to 'enable athletes to develop their sporting skills and to offer a platform for young athletes to socialise with their peers and have the opportunity to develop new friendships, to experience inclusion and to take part in the life of their community' (Hassan, Menke, Dowling and McConkey 2011, p.4).

In the seminal paper '*Unified Gives Us a Chance*' Hassan *et al.* (2011) claimed there are three core components in realising the feeling of social inclusion as well as achieving it:

1. Community connectedness – people are acquainted with one another and share common spaces and facilities. They also have opportunities for personal interaction.

2. Personal interdependency – interchanges are mutually beneficial and supportive. This is where a sense of equality is engendered.

3. Belonging – people are bonded into groups with a shared identity and common purpose.

Hassan *et al.* (2011, p.9) stated that 'all of these concepts derived from a psycho-social perspective are closely aligned with the concept of 'social capital'. Rocco & Folland (2013, p.154) define social capital simply as 'connections between people'. Delaney (2005) in Hassan *et al.* (2011) summarised three types of social capital that can derive from the world of sport:

1. Individual – this is where sport may provide a basis for an individual to form a friendship base.

2. Local/Community – this is where sport may provide a basis for the building of local networks and for bringing different sections of communities together.

3. National - this is where sport may provide a basis for common shared norms and conversational points.

According to Hassan *et al.* (2011 p.12), 'the priorities for integration as identified by people with intellectual disabilities themselves – relationships and friendships are reflected among these types of social capital which are derived from participation in sport. Moreover, sporting activities are likely to meet the criteria of the need for structured, organised interactions to produce social inclusion'.

However, as highlighted earlier in this chapter, Lewis (2002) claimed there has been an increasing unease and dissatisfaction with the term 'integration' because there can be a narrow focus on only the '*placement'* of PWID in mainstream society without measuring the quality of interaction between other community members. Lewis (2002) gives the example that sometimes children with '*special needs'* can be '*placed'* and '*integrated'* into mainstream classrooms, however, where one child may experience integration and some level of inclusion, another may experience isolation and segregation. Lewis (2002, p.4) stated that 'the term inclusion emphasises that what is being described is something that is neither special nor mainstream but a new amalgam. As a result of such concerns about the term 'integration' the word inclusion has come to be used to convey both 'integration' and certain qualities of that placement'.

Vail (2007) has asserted that for sustainable sports-based community social capital initiatives to be successful, they require a number of components, one of those being community selection and readiness. In a similar vein to Lewis, Vail (2007) claimed that the communities must be '*ready'* and have the '*capacity to change'* so as to support and accept PWID into society as equal participating valued members.

4.6 DEFINING INCLUSION

As already stated at the beginning of this chapter, defining the concept of inclusion is a very difficult and complex task because it will mean different things to different people. Not only that, there are multiple definitions of the concept to be found. However, it should be noted that the concept or ideology has been '*put upon*' PWID over the years by service providers, experts and professionals with little, if any, input from PWID themselves. Many services in the past created '*artificial*' insular worlds for PWID, where it was accepted and believed that they could make no valued contribution to society, they could not adapt to a '*normal*' way of doing things, they were sick, childlike, wholly innocent or deviant.

This type of service provision and way of thinking has created barriers between PWID and the wider community. The physical and social barriers created by institutions and disability experts in the past have also perpetuated the isolation and exclusion of PWID from the mainstream of society. Thus, in attempting to define inclusion for this research the author has recognised that no single definition is adequate so there is merit in drawing upon a range of perspectives to provide adequate coverage of the issue. In this instance, the author has arrived at an amalgam of the various forms of definitions offered by the most relevant theorists and researchers in the area, including PWID.

Disability theorists have put forward a number of definitions of inclusion such as having a meaningful role in the community, having friends your own age without disabilities, being accepted as you are, being included in everyday activities and having roles similar to that of their peers who do not have a disability. The priorities for inclusion as identified by people with disabilities are to have friends and relationships in their communities. Other people with disabilities have claimed that being a full-time member of ordinary learning and working places with others and it mattering if you are not there is also key to being included in society (Snow 1998). Hall (1999) claimed that being accepted as an individual beyond the disability and having significant and reciprocal relationships is what inclusion is all about.

Notwithstanding, of significant importance is that a distinction must be made between the concepts of *'integration'* and '*inclusion'*. Nixon (2007) claimed that through the medium of sport PWID can feel connected with and integrated into the organisation. Hassan *et al.* (2011) also claimed that the SO and sport in general can support opportunities for PWID to be integrated into their communities. However, Snow (1991), a person with a significant disability, claimed that inclusion is so much more than integration. Snow claimed that integration is only concerned about '*existing'* with other people, whereas meaningful inclusion is about making friends and building relationships with other people. Thus, inclusion as it relates to PWID can be summed up as a continuum where at one end we have extreme exclusion, underpinned by societal values based the dependency and medical model of disability and at the opposite end we have inclusion and inter-dependency, which is influenced by a value system based on the social and rights based model of disability. As PWID progress on this continuum, they experience integration in the community, which can be described as a precursor to inclusion. Integration is all about being present in one's community whereas inclusion as described by Snow (1998) is so much more than that. Inclusion for PWID is about interdependence, being accepted as you are, having a meaningful role in society, having friends with and without disabilities and being part of ordinary learning and working environments.

To recap, there is no doubting that sport can play a critical role in promoting more inclusive communities for people with disabilities and indeed organisations such as the SO is making concerted and genuine efforts to further support PWID to experience greater inclusion in society. However, the claims made by the SO that they have achieved their goal of creating communities that are more inclusive of PWID warrant further analysis and investigation. This is because many disability service providers, regulators, policy makers and legislators have systematically failed to ensure PWID are included in their communities and many PWID do not hold meaningful social roles. This situation remains the case today despite the shift from the medical model of disability to the social model and the shift from archaic systems of legislation to disability policy that is empowering and based on *'rights'*.

The overall purpose of this qualitative research project is to explore whether or not Special Olympics Ireland is achieving its aim of ensuring that people with intellectual disabilities are socially included and viewed positively by the general public or if, paradoxically, the Special Olympics World Games and the images they promote of PWID, actually serve to reinforce negative stereotypes about members of this minority group and in turn perpetuate their segregation and isolation from society.

4.7   CONCLUSION

This chapter provided an exploration on how society and service models have imposed rigorous systems of exclusion on PWID. Language and labels used to describe and define PWID was also discussed and how such labels have impacted and continue to impact on the inclusion PWID in their communities were explored. The literature has already informed us that although many disability service providers claim to be achieving inclusion for PWID, many continue to experience marginalisation and exclusion. Indeed, the National Disability Inclusion Strategy 2017-2021, launched in July 2017, acknowledges PWD experience significant challenges and practical difficulties in everyday life and many will struggle to find meaningful roles in society such as having a job or accessing education.

Thus, the claims made by the SO that they are fostering the inclusion and acceptance of PWID in Irish society warrants further investigation and analysis. Defining inclusion is complex as it means different things to different people. However, disability theorists have put forward a number of definitions to include having a meaningful role in the community, being missed if you are not there, having friends your own age without disabilities and being accepted as you are. Inclusion therefore is much more than integration or just being present, it involves being an active member of the community and having a valued social role.

The next chapter will detail the research methods used in order to explore and analyse the research topic under investigation. The method used is qualitative research conducting focus groups across the four provinces of Ireland as the researcher is attempting to explore the general public's interpretations, attitudes, feelings and perceptions about the imagery the SO portray of PWID.

According to Laws, Harper and Marcus (2003, p.299), 'focus groups are undoubtedly valuable when in-depth information is required about how people think about an issue – their reasoning about why things are as they are and why they hold the views they do'. The findings and main themes arising from the focus groups will be discussed with a carefully selected number of individuals with specific experience, knowledge and expertise on the topic under investigation. It is envisaged that such individuals may be able to shed further analysis and a deeper insight on the findings and themes arising from the focus groups.

CHAPTER 5

5.0 RESEARCH METHODOLOGY

5.1 INTRODUCTION

Research is an organised strategy to gain new knowledge in any given field. It is defined as a premeditated investigation employing scientific methodology to solve a problem thus creating a second (new) knowledge (Ayuba 2015). It is an inquiry of reality about any phenomenon, exploring the nature of an issue, and then answering questions and finding answers and solutions in turn, creating new knowledge. The new knowledge should be useable, reusable and challengeable by other researchers (Faryardi 2012). According to Rajasekar, Philominathan and Chinnathambi (2006, p.2), research is 'a logical and systematic search for new and useful information on a particular topic and has been described as an investigation of finding solutions to scientific and social problems through objective and systematic analyses'.

Research methods refer to all the ways the researcher uses in performing the research operation and in implementing the research proposal. In other words, 'it is the methods employed by the researcher during the course of studying the research issue'. (Kumar 2012, p.4). Methodology, on the other hand, refers to 'the way in which the researcher conducts the research process. It is the way in which he chooses to deal with the particular question or hypothesis. The researcher must also establish their overall approach and research methods, by not only choosing how they wish to conduct the research process, but by justifying the approach taken' (Jonker & Pennick 2010). The rationale for exploring the methodology used during the research process is to explain how one will answer your research question and in doing it is important the researcher defines their variables and clearly explains how they will be measured (Faryardi 2012). In selecting a research design the author needed to reflect on the appropriate methodology to employ for conducting the research process.

Although it is a broad-brush distinction, most research is best understood as being either quantitative or qualitative. In general, quantitative research focuses on the measurement and statistical analysis of the topic studied; whereas qualitative research produces narrative or textual descriptions of the phenomena under study (Johnson and Vanderstoep 2009). This research project adopted a qualitative research design or strategy (both focus groups and semi-structured interviews) in order to analyse the topic under investigation. Patton (2002, p.68), define qualitative research as 'attempting to understand unique interactions in a particular situation. The purpose of understanding is not necessarily to predict what might occur, but rather to understand in-depth the characteristics of the situation and the meaning that participants attach to their subjective realities'.

This chapter will explicitly outline the research topic under investigation, discuss the aims of the research project and in doing so establish their importance. It will provide an overview of the research methods employed in this study which are qualitative methods using focus groups and semi-structured interviews. A rationale and justification for the research design will be presented and details on how the information was analysed, coded and categorised in order to identify the themes emerging from the focus group discussions will be explored. Relevant limitations of the study are presented and ethical considerations relating to the research project are identified and discussed.
.

5.2   AIMS OF THE RESEARCH STUDY

This research study explores the impact of the imagery used by the SO's to portray PWID has on public attitudes towards this minority group. Also, the SO's have claimed that they are an organisation that has created communities that are more accepting and inclusive of PWID warrants further investigation for two specific reasons. Firstly, academics and researchers such as Storey (2009) claimed that the images the SO use to portray PWID only serve to reinforce stereotypical public attitudes towards this minority group and further perpetuate their exclusion from society.

Indeed, Dupré (2012), in Fenge (2017, p.53), claimed that 'negative images about disability reinforce the marginalisation and oppression of many disabled people'. Thus, in assessing how the general public view the images the SO use to promote the games, the author will also explore public attitudes towards the SO and the position of SO athletes within the local communities.

Secondly, notwithstanding the SO's claims of creating communities for PWID that are accepting and inclusive, the enactment of disability-specific legislation and services set up to support PWID have largely failed in their attempts to ensure meaningful inclusion for many PWID in their wider communities. According to Finlay (2016), a lot of disability-specific legislation such as the Disability Act 2005 is not adequate in ensuring that the rights of PWID are upheld and many major disability service providers are charitable organisations set up to do charitable work. Between 2003 and 2013 an unprecedented level of disability rights based legislation was enacted in Ireland to promote the rights of PWID, some with a focus on promoting the right to '*community inclusion*'. This era also saw the advancement of the social model of disability which advocated for meaningful inclusion. Also, in 2003, the SO Summer Games were held for the first time outside of the USA in Dublin, Ireland, to significant national and international acclaim.

The author also attempted to assess in what way, if any, this decade of legislative and social change had impacted upon the sample population who took part in this study.

To conclude, the overall aims of this study are as follows:

1. To explore the impact of the imagery used by the SO's to portray PWID has on public attitudes towards this minority group.

2. To analyse public attitudes towards the SO and the position of its participants within local communities.

3. To assess in what way, a decade (2003 to 2013) of unprecedented legislative and social change of how PWID in Ireland are treated had impacted upon participants.

5.3 THE RESEARCH QUESTION/TOPIC

The purpose of this qualitative piece of research is to establish if the SO is achieving its aim of ensuring that people with disabilities are respected and included in Irish communities today or if, paradoxically, they serve to reinforce negative stereotypes about members of this group through their use of imagery of PWD and thus, only serve to perpetuate segregation. A key principle of the SO is that communities at large, both through participation and observation, are united in understanding people with intellectual disability in an environment of equality, respect and acceptance. They aim to promote and generate a positive attitude within communities towards people with intellectual disabilities. However, the images the SO use portray PWID have been criticised by some researchers for promoting negative stereotypes about this marginalised group. According Whitehead, Halcomb, Brown and Guzys (2017, p. 46), 'negative images impact on the experience of people living with disabilities resulting in unwelcoming community attitudes and intolerance'. Whitehead *et al.* (2017, p.46) stated that 'negative public attitudes...typically result in people living with disability having fewer opportunities for social participation'.

Thus, the research topic under investigation is an exploration and analysis of how the images of PWID as portrayed by the SO impact on public attitudes and perceptions towards this minority group. As this research study is exploratory in nature, it is important for the author to gain an insight and understanding into how the SO have impacted on Irish public attitudes towards PWID.

In order to research complicated social issues it is vital to delve into the area under investigation, listen to and hear people's stories, which may best be achieved through the medium of qualitative research methods.

5.4 RESEARCH METHODS

5.4.1 Qualitative Research Methods

Qualitative research is primarily concerned with practice and process rather than outcomes. To be more specific, the focus is on participants' perceptions and their lived experiences and the way they make sense of the world around them (Crossman 2016). According to Page (2006, p.18), 'qualitative research helps explain public opinions and indeed anticipate how opinions may change over time'. Such characteristics make the selection of this research design appropriate for this research study. This study concerns itself with how the imagery of PWID generated by the SO impact on public attitudes and opinions and how these opinions may have been affected by a decade of legislative and social change. Valecillos and Davy (2011, p.349), have identified various types of the most commonly used methods in qualitative research, 'including in-depth interviews, focus groups and observation'.

This research project conducted focus groups in order to examine the topic under investigation as they are most useful in obtaining rich personal and group data, to include participants' attitudes, perceptions and feelings on the topic under investigation. The findings from the focus groups were transcribed and coded in order to identify common themes arising across the data collected.

Those themes, once identified were discussed with a number of *'topic experts'* (policy makers, educators, disability advocates, sports coaches, disability researchers and health care professionals) to shed further light and a deeper understanding of the overall findings arising from the focus groups.

5.4.2   Focus Groups

The purpose of a focus group is to collect information related to the area under investigation. Thus, a focus group is a special type of group in terms of size, composition and procedures. According to Krueger and Casey (2000, p.5), conducting a focus group is a way in which 'to listen and gather information and a way to better understand how people feel or think about an issue'. The main purpose of focus group research is to draw upon respondents' attitudes, feelings, beliefs, experiences and reactions in a way in which would not be feasible using other methods. Utilising focus groups in qualitative research has many advantages. One of the most important is that they allow for attitudes and opinions to be examined in great depth and with more flexibility compared with quantitative methods and surveys (Page 2006).

In order to ensure that all regions of the island of Ireland were represented in this research project, focus groups were conducted across its four provinces. This was an important factor to consider as the SO (Ireland) website states that it a nationwide organisation, supporting clubs throughout the island of Ireland. Overall 14 focus groups were facilitated for this project. Bryman (2008, p4.77) claimed that 'there are strong arguments for saying that too many groups could be a waste of time'. This point is further supported by Calder (1997) where he suggested that once the researcher arrives at a point where he can predict what the next group is going to say he has arrived at the point of saturation and little if any new knowledge on the topic will be forthcoming.

The 14 focus groups were representative the four provinces of Ireland and the author was satisfied that adequate information was obtained to address the research topic. A proportionate representation of the overall population was used in this study as participants were randomly drawn from a number of sources and venues around the country. Focus groups consisted of post leaving-certificate students, college students (studying social care or sports science), members of sports/social clubs, adult learners and groups arranged through associates and work colleagues.

According to Ellis (2000), groups can be brought together where they all share common characteristics or experiences which means they can usefully debate and discuss the research topic. As the research topic under investigation was of significant relevance to the disciplines of the social sciences and sport many of these participants were well placed to provide rich data on the topic under investigation.

The number of participants for each group also required careful consideration. According to Warner (2013, p.156), 'effective focus groups tend to range between six and eight participants'. Criteria for participant selection were also carefully considered. It was important to ensure there was a balance between *'diversity and similarity'*. Finch and Lewis (2007, p.190) stated that 'as a general rule, some diversity in the composition of the groups aids discussion, but too much can inhibit it'. With that in mind, each focus group consisted of between six and ten participants and were facilitated in both rural and urban locations so as to ensure that there was a balance of opinion and discussion at national level. For example, in Leinster focus groups were facilitated in major urban areas such as Dublin and more rural locations in Co. Wicklow and Co. Wexford. In Ulster, groups came from Derry City and Monaghan. In Connaught groups were selected from Galway City and Athenry. Finally in Munster, groups were selected from Cork City, Limerick and Co. Tipperary.

The age demographics of participants also required careful consideration in order to ensure that the findings could be compared across two generations. One of the key aims of the research was to assess in what way the unprecedented level of legislative and social changes experienced in Irish society have impacted on public attitudes towards PWID. In order to achieve this aim, the researcher identified two specific generations to compare and participants were selected from two very particular age demographics 18 to 23 and 38 to 43 years of age. There was a specific rationale for selecting these specific age brackets.

With the emergence of a social model of disability, along with the enactment of disability rights based legislation commencing in the 2000s, another major event took place in Ireland related to the world of disability. In 2003 the SO was held outside the USA for the first time in Dublin to significant international acclaim. Within two years of this happening the Irish Government passed and enacted the Disability Act 2005, a piece of legislation focused on the rights and individual needs of PWID. Participants between the ages of 18 and 23 were between the ages of four to nine when the SO was first hosted in Ireland. Thus, it was valid to ascertain that these participants have mainly lived through an era that many educators, legislators and organisations such as the SO would deem to be a '*positive*' era for PWID regarding the promotion of community inclusion and the social model of disability. As they were young children when the SO was hosted in Ireland it was of interest to explore their understanding and lived experiences of inclusion as it relates to PWID; how they view the SO and the position of their athletes in Irish society; and to assess how a decade of legislative and social change in how PWID in Ireland are treated has impacted their attitudes and opinions.

On the other hand, participants between the ages of 38 and 43 years of age would have experienced living in a society where PWID were treated under the medical model of disability. Notwithstanding Irish society had started to undergo a shift from the medical model to the social model of disability from the mid 1990s and by the time the SO was hosted in Ireland in 2003, these participants were between the ages of 25 to 30 years.

Thus, these groups have experienced living in a society that was transitioning from the medical model of disability, where segregation and exclusion of PWID was commonplace to the social model of disability based on promoting rights and supporting inclusion. As with the younger age demographic, this study also aims to evaluate and explore these particular participants' understanding and lived experiences of inclusion as it relates to PWID; how they view the SO and the position of their athletes in Irish society; and to assess how a decade of legislative and social change in how PWID in Ireland are treated has impacted them.

People aged 43 and above were excluded from the research study. Bryan (2010, p.107) claimed that a 'lack of contact with persons who appear to be different is often a major reason for the development and perpetuation of stereotypes and prejudices as well as other misrepresentations'. Similarly, Weber (2007, p.6) stated that a lack of regular contact with people with disabilities 'promotes and constantly reinforces stereotypes'. It is reasonable therefore to assume that many people over 43 years of age would only have lived through the medical model of disability, would have had limited if any contact with people with intellectual disabilities and thus, may have stereotypical attitudes towards this group.

The discussion in a focus group may be '*triggered*' by a stimulus which can be of benefit in ensuring there is a clear, explicit and specific focus to the discussion. In this instance, a number of images of athletes at SO events were used in each focus group so as to act as a stimulus. According to Newby (2014, p.343), '*the benefits of using images from a research strategy perspective is that they provide a common stimulus*'. The next section provides a detailed account of how these images were selected.

5.4.3   Selecting Images for Focus Group Stimuli

On commencement of each focus group, participants were asked to observe a number of images of SO athletes at various SO games and events. However, the author was aware it was important to ensure that the images (stimuli) did not influence the discussion in any particular direction and to ensure there was no researcher bias in their selection. In order to achieve this, the researcher detached himself from the selection process (Neuman 2011). This was achieved as follows:

Firstly, the researcher generated an internet search through '*Google Images*' using the term '*Special Olympics*'. From this search the first thirty images of SO athletes that were generated were selected. However, in order to use these images effectively in the focus groups they were reduced in number from thirty to ten.

117

This short listing process was conducted in the following way: the images were presented to a group of first year students studying for a degree in Applied Social Studies in Disability. These students had just attended their first set of lectures on the topic of disability studies, inclusion and models of disability. In addition to this, many were social care professionals who had some experience of working with PWID. Given this context, the students were ideally placed to identify what they thought to be the five most positive and the five most negative images of PWID from the thirty photographs randomly selected from '*Google Images'*. The researcher remained detached from this process as it was facilitated by a fellow lecturer who was independent of this research project.

The lecturer introduced the purpose of the exercise and clearly informed the students that participation was optional. Students that agreed to participate were guaranteed anonymity as part of the process. Of the twenty-three students present in the lecture hall, twenty agreed to take part in the selection of the visual prompts. Denscombe (2010) claimed that this type of researcher-introduced stimulus is now common practice and often regarded as an important part of focus group activity. It helps focus the discussion by providing a topic of interest that all participants can relate to and the researcher can channel the discussion onto a specific and concrete topic. The students viewed the 30 images on several occasions and were asked to identify which ones they thought were the most positive images of PWID and which ones the most negative. They were also asked to provide a brief rationale for their selections. On conclusion of this exercise the lecturer was able to reduce the number of images to ten, based on the selections of the 20 students who took part in the selection process.

5.4.4 Preparations for Facilitation of Focus Groups

It was important to keep in mind that the location and setting for each focus group must be appropriate so as to ensure maximum group participation and encourage reflective, deep thinking about the issue under investigation.

The group environment encourages participants to reflect on other people's responses in relation to their own, and encourages them to formulate and express their own opinions. The author made preparations so that all focus groups were facilitated in an appropriate setting and where the ten images selected as a *'stimuli'* could be displayed using an overhead projector. Prior to conducting each focus group facilities were checked for adequate equipment, ventilation and lighting (Austin 1999). The author arranged (where possible) for groups to sit in a circle so as to encourage open dialogue. Participants were familiarised with the purpose of the focus group and aims of the study prior to agreeing to participate. However, on commencement of each group participants were given time to read a '*Participant Information Sheet*' (See Appendix 3) which recapped the aims of the research study and how any information collected would be kept confidential and securely stored. Participants at this stage were once again reminded that participation was voluntary and were asked to sign the '*Participant Consent Form*' once they were satisfied with the above arrangements and satisfied to consent to participate (see Appendix 4).

On commencement of each focus group the author introduced himself, provided an overview of the research topic under investigation, informed the participants as to why they were invited to take part in the study, outlined some ground rules, informed the participants that the discussions would be recorded and explained the role of the author as moderator. Participants where then asked to briefly introduce themselves to the group. Once these formalities were completed the author proceeded to ask a number of '*open ended*' questions to generate discussion among the group. On completion of each focus group the author recapped the purpose of the study, asked participants if they would like to add anything else and thanked them for their time and effort. Throughout the process of facilitating each focus group the author also observed and made notes on participants' body language and facial expressions. It is important to take note of both verbal and non-verbal communication such as head nods, physical excitement, eye contact between participants and any other clues that may indicate agreement, disagreement and support among participants' (Krueger & Casey 2000, p.122).

Each focus group was also recorded to develop accurate transcripts of their content. As soon as possible after each focus group the author began the process of data analysis. According to Sinagub, Schumm and Vaughan (2006, p.101), data analysis is much more effective 'if the data is transcribed immediately after the focus groups are conducted'. The data for this research study was analysed using thematic analysis.

5.5   THEMATIC ANALYSIS

The data generated by the focus groups was analysed using thematic analysis. This is a very common, well-accepted method of analysis within qualitative research (Bryman, 2008). According to Braun and Clarke (2006, p.79), thematic analysis is 'a qualitative analytic method for identifying, analysing and reporting patterns (themes) within data. It minimally organises and describes your data set in (rich) detail. However, frequently it goes further than this, and interprets various aspects of the research topic'.

Caulfield and Hill (2014) claimed thematic analysis focuses on what is actually being said in a focus group with the overall aim being to develop an understanding of the life experiences, attitudes, beliefs and thoughts expressed by the focus group participants. In this instance, the author was aiming to analyse and assess how the images the SO use to portray PWID impact on participants' perception of this marginalised group. In doing so the author was also aiming to how participants perceived the SO and the position of its participants within local communities. To become familiar with the data collected the information was transcribed word for word and the researcher took note of any immediate themes or trends that became apparent during this process.

On completion of the transcribing process each transcript was printed out, read and re-read by the author. On completion of this process a systematic analysis of the data was conducted. According to Rubin and Rubin (2012), undertaking such a process allows for the identification of themes, categories and codes emerging in the transcripts.

120

Once a list of the general themes and categories that emerged from the data had been developed, the researcher can then establish which themes and categories are most relevant in addressing the research topic under investigation. In the first instance a number of main codes were identified once the researcher had read and re-read the transcriptions.

According to Krueger and Casey (2000), coding consists of placing similar labels on similar concepts or topics with the ultimate aim being to sort comments and chunks of information arising into similar categories. Connaway and Powell (2010, p.225) claimed that one of the most significant advantages of coding is the 'pivotal operation for moving towards the discovery of a category or categories. Once the core categories had been recognised the researcher was positioned to identify core themes arising out of the focus groups'. According to Braun and Clarke (2013), this is the point where the overall story is revealed and this process supports the researcher in identifying clear definitions and names for each theme that has emerged. The final part of the process was the selection of the most relevant categories and themes arising from the analysis in order to address the research question, write a final report and achieve the aims of the research topic.

The main themes arising from the analysis of the focus group data were as follows:

1. Health and Wellbeing
2. Teamwork, Fun and Togetherness
3. Skills Development
4. Language/Use of Term 'Special'
5. Pity and Charity
6. Tokenism
7. Inclusion – within the confines of the world of disability and SO

Once the final report on the findings was completed, the researcher organised five semi-structured one-to-one interviews with a number of '*topic experts'* in order to discuss the themes arising from the focus group discussions.

The aim of conducting these interviews was to gain a deeper, richer insight and understanding of the findings and themes arising from the focus groups.

5.6 SEMI-STRUCTURED ONE-TO-ONE INTERVIEWS

In order to shed further insight and gain a deeper understanding of the findings and themes arising from the focus groups the author conducted five semi-structured interviews with a range of experts who have a deep insight and knowledge of the world of intellectual disability and the research topic. Skinner (2006, p.7) claimed that in order to gain a deeper insight in any phenomena 'participants can be sampled purposively based on their knowledge, expertise and experience of the topic under investigation'. Thus, the decision on who to invite for interview was determined by the literature review, the topic under investigation and each interviewees' insight, knowledge and expertise on the research topic under investigation.

One interviewee had a background in disability policy and legislation, one was an academic who has written extensively on the topic of sport, disability and the SO, one was an experienced manager in disability services with an in-depth knowledge of disability regulation, one was an advocate for inclusion and the social model of disability and the final interviewee was a healthcare professional and an advocate of the SO. As with the focus groups, the interviewees that agreed to participate in this research study voluntarily consented and their anonymity was guaranteed. An '*Interviewee Information Sheet'* was also provided to them prior to the interview taking place (see Appendix 5). This document provided a detailed overview and purpose of the research study, why each interviewee was invited to participate, how all information collected would be handled and a written guarantee that their anonymity would be protected.

All interviews for this project were either conducted on a face-to-face basis or over the telephone. According to Saunders, Lewis and Thornhill (2009, p.321), 'single participant interviews are usually conducted by meeting the participant on a face-to-face basis but

there are situations where you can conduct an interview over the telephone'. As some of the interviewees for this research project lived overseas or were not attainable for a face-to-face meeting due to work related issues, family commitments or distance, they were interviewed by telephone. Burke and Miller (2001) claimed that phone interviews are becoming more popular and are being increasingly used particularly in multi-stage research studies. According to Lindlof and Taylor (2002, p.187), 'interview discourse should be recorded and the choices are twofold: note taking or tape recording. The chief virtues of note taking are that it can be done anywhere, at anytime and there is no need for the use of mechanical devices'.

All interviews conducted were carefully recorded through the process of note taking. While it was considered that note taking may result in the loss of some of the information, Breakwell (2012, p.378) claimed that note taking 'can be selective and facilitate quick analysis if pre-structuring of response categories has been done'.

To ensure no significant information from the semi-structured interviews was overlooked the researcher took notes throughout each interview and added to them immediately after the interview was completed. The researcher also followed up on some of the points made by some of the participants via email. This allowed for the clarification of some comments made by interviewees and to explore some of the discussion in further detail to ensure what was said was accurately understood. According to Ison (2010, p.69), using a system such as follow-up emails 'allows the researcher a second chance to ask follow-up questions, clarify information and gather more detail'. (See Appendix 7 for Interviewee Notes and Follow up Emails). All participants (both focus groups and interviewees) that participated in this research study were assured that the project had been submitted for peer review and was approved by the University of Ulster in 2014. Details of how ethical considerations were dealt with, including how all data collected was kept secure are dealt in the next section.

5.7 ETHICAL CONSIDERATIONS

In conducting the research study, particular care was taken to ensure that the ethical considerations as detailed and submitted for peer review to the university were adhered to. Having provided each participant with a '*Participant Information Sheet*' containing an overview of the aims and objectives of the research project and having achieved their written consent to participate in the focus group, a digital recording of each session was made. The digital recordings were made using a recorder which was password protected and only the researcher had these details. A transcript of each recording was made and each participant was allocated an identification code to ensure their anonymity. A sample of transcripts representing both age brackets from all four provinces of Ireland can be found in Appendix 6.

Similarly, with one-to-one interviews, consent was sought and given by each interviewee. They were also provided with an Interviewee Participant Sheet which detailed the aims of the research study, why they were invited to participate and how their anonymity would be protected. While each interviewee agreed that their general background could be referred to in this study, they were not individually named and their anonymity was assured and guaranteed. The author took extensive notes during the interview process and had permission to follow up with some of the interviewees via email if required. All materials collected for this research project were kept safe (on an encrypted laptop and password protected devices) and will be destroyed in accordance with the University of Ulster's policy on research data collection and retention. In conducting all focus groups and semi-structured one-to-one interviews the wellbeing and avoidance of harm to every participant was a priority for the researcher. Written consent from each participant was sought and their anonymity was guaranteed and respected at all times throughout this research study.

The final section of this chapter details the limitations of the study. According to Volpe and Dale Bloomberg (2008, p.79), 'regardless of how well you plan your study there are always some limitations which should be explicitly acknowledged'.

This demonstrates to the reader that the author is aware that no research is without its limitations and has given some consideration to the shortcomings in the process.

5.8   LIMITATIONS OF THE STUDY

It is important to identify and reflect upon any possible limitations of the research study. This allows for the researcher to detail specific situations or circumstances that could possibly impact upon, affect or restrict the methods and analysis of the research data and findings. As such, limitations are influences or factors that the researcher may have little or no control over.

According to Price and Murnan (2004, p.66), 'the limitations of the study are those characteristics of design or methodology that impacted or influenced the interpretation of the findings from your research. They are the constraints on generalisability, applications to practice, and/or utility of findings that are the result of the ways in which you initially chose to design the study and/or the method used to establish internal and external validity'. A number of limitations were identified in this study including the sensitivity of the topic under investigation and the difficulty in critiquing the SO and the fact that there are two different political jurisdictions on the island of Ireland.

5.8.1   Sensitivity of Topic under Investigation

It can prove difficult for some focus group participants to share their true feelings towards sensitive topics in a public format. According to McCosker, Barnard and Gerber (2001), recognising possible unease generated in some participants involved in a study of '*sensitive*' research is important. This should be identified as a disadvantage or weakness in the research process as it may provide insight into findings that were not previously anticipated or expected.

The researcher observed with some groups, some participants were reluctant to join in or contribute to specific topics under discussion. For example, in one focus group where the conversation centred on whether non-disabled people would aspire to be like SO athletes the researcher observed (mainly through body language and facial expression) that some participants either felt uncomfortable with this or shied away from discussing this point. Thus, when the conversation was '*difficult*' or '*emotive*' some participants chose to limit their contribution to the discussion. By its very nature, research undertaken using focus groups can be unpredictable and the author cannot always predetermine if relevant or important points of discussion raised will be adequately discussed or elaborated upon.

Notwithstanding this, the researcher was confident that sufficient data was gathered from across all focus groups to make valid observations, recommendations and conclusions on the topic under discussion. While there were some pertinent points raised that warranted further debate, the researcher also had the opportunity to follow up on some of these '*emotive*' areas of discussion during interviews with topic experts on the themes that emerged from the focus groups.

5.8.2   Difficulty in Critiquing the Special Olympics

There is no doubt that most charities make genuine and concerted efforts to support vulnerable groups and this applies to voluntary organisations that support people with intellectual disabilities. Indeed, according to Shakespeare (2006) public perceptions of charities are usually very positive and this can be true for charities that provide support to vulnerable groups such as people with intellectual disabilities. Members of the public can be motivated to give time or money to support the work of charitable organisations. In turn, some members of the public find it difficult to '*critique*' charitable organisations that are seen to be making genuine efforts to provide support to PWID. This issue emerged on completion of three focus groups, where a participant (or participants) spoke with the author after the focus group had ended.

Some participants reported that they felt uncomfortable critically analysing an organisation that was supporting vulnerable people. Indeed, some reported that it was particularly difficult to provide critical discussion of the SO and on some of the specific images they observed. This was specifically in relation to images of children with disabilities participating in the SO. According to Kamalipour, Y., R. & Carilli (1998, p.96), 'children are deemed by society as cute and non-threatening and children with disabilities evoke even greater pity and represent more tragedy in the eyes of society'. Whilst the researcher could not determine how prevalent this way of thinking was among each focus group it was an important limitation to identify.

If some people found it difficult to critically analyse a charity simply because of the work it does and/or the people it supports then it must be considered that in some instances the very images the SO use to portray PWID (especially children with ID) may actually serve to protect the entity from critical debate and public scrutiny. In this instance, the research methodology may not have been as effective as it could have been in order to address some of the more sensitive concepts under discussion. Some participants may have been more at ease with a one-to-one interview as opposed to participation in a group setting.

5.8.3   Ireland and Northern Ireland – Different Political Jurisdictions

This research focused on the island of Ireland because the SO are an all island body represented in all 32 counties in Ireland. While the literature review provided a detailed overview of how society in general has responded to people with disabilities using disability service provision and legislation as a framework, the researcher acknowledges that Ireland and Northern Ireland are two different constitutional entities each responsible for the development and enactment of their own public policies and legislation.

The literature examined the historical evolution of disability and equality legislation on the island of Ireland when Ireland was part of the United Kingdom of Great Britain and

Ireland. The researcher acknowledges that in the latter stages of the literature review more detail on legislative developments in Ireland are presented. However, it is a valid observation to make that there has been and continues to be significant similarities with regard to disability, education and equality legislation enacted in both jurisdictions. The provisions made for people with disabilities in legislation in Northern Ireland are very similar to that of the provisions made in Irish equality legislation and the Disability Act 2005.

Societal attitudes towards PWID are also comparable. For example, the recent report '*Monitoring Poverty and Social Exclusion in Northern Ireland 2016*' informs that people with disabilities are more likely to be excluded from mainstream society compared to their peers. Such findings are replicated in Ireland. Thus, it is a valid observation that disability policy and legislation in both Ireland and Northern Ireland provide for similar provisions in the promotion of inclusion and protection of rights for PWID. Indeed, PWID experience similar levels of inequality and social exclusion on both parts of the island.

5.9   CONCLUSION

Research can be summed up as a systematic investigation into a specific topic or field of knowledge which is undertaken to establish facts or principles on this topic and aims to make an original contribution to the existing stock of knowledge (Kumar 2012). This chapter identified the research topic under investigation providing the specific aims of the study. A detailed discussion on the research methodology was provided which was qualitative in nature using both focus groups and semi-structured one-to-one interviews. The focus groups were transcribed and the data was carefully analysed, coded and categorised so as to allow for core themes to emerge and develop.

Once those themes were identified they were discussed with five topic experts by means of one-to-one semi-structured interview to gain a deeper and richer insight into the findings and themes arising from the focus groups. Relevant detail was provided outlining the rationale and justification for the research design, methodology, selection of participants and the exclusion of certain populations from this study. Ethical considerations were discussed in detail and the limitations of the study were identified, discussed and considered. The next chapter will provide a critical and detailed discussion on the findings and core themes arising from the analysis of the focus groups.

CHAPTER 6

6.0   PRESENTATION OF FINDINGS

6.1   INTRODUCTION

This study primarily concerned itself on assessing the claims the SO make in how they are transforming communities to be more inclusive and accepting of PWID. The research design consisted of conducting 14 groups across the island of Ireland. The second phase of the study involved discussing the findings and core themes arising from those focus groups with five '*topic experts*'. These individuals were identified as having the '*expertise*' and *'knowledge'* required to provide a deeper and richer insight into the themes that arose from the analysis of the focus group discussions.

Notwithstanding that a significant amount of data was generated during the research process, this chapter will present and discuss the most significant themes that arose from the focus group discussions. According to Hennick (2007, p.237), 'focus group research can produce a multitude of findings and a lot of information that is peripheral to the core research topic and it is easy for a researcher to become lost in the detail and volume of information'. To ensure the report on the findings remained focused and relevant to the topic under investigation the researcher used a thematic approach to analyse the data and content arising from each focus groups.

This process allowed for the following:

1. The identification and discussion of major categories and themes arising from the analysis of the focus groups.
2. The identification and discussion of individual and/or minor categories and themes that were of importance to the research topic under investigation.

3. The identification and discussion of different sets of attitudes and/or beliefs that arose between the two different age groups.

Generally, the majority of focus group participants across both age groups identified positively with the images the SO use to portray PWID commenting on the potential health, physical and emotional benefits associated with participating in sport. Participants also spoke positively on how the SO can provide opportunities for athletes to develop social and motor skills, to have fun and be a part of a team, to grow in self-confidence and self-esteem. However, some of the images generated negative discussion where participants were critical of the language used to describe PWID (specifically in relation to the term 'S*pecial*'). Participants were also critical of images portraying PWID fundraising in the public domain and images where politicians were present with the athletes.

Overall, while the majority of participants believed the SO could promote inclusion for PWID, however, when further teased out they were referring to inclusion within the confines of the SO and world of disability. However, the priorities for inclusion as identified by people with disabilities are to have friends in their communities, to be full-time members of ordinary learning and working places and to have significant and reciprocal relationships. Inclusion is not about '*existing*' with other people, it is about making friends and building relationships with other people. Thus, as identified earlier in this study, inclusion as it relates to PWID can be summed up as a continuum where at one end we have extreme exclusion, underpinned by societal values based the dependency and the medical model of disability. At the opposite end of the continuum we have inclusion and inter-dependency, which is underpinned by a value system based on rights and the social model of disability. As PWID progress on this continuum they may experience '*integration*' or '*presence*' in their communities, which some describe as a precursor to inclusion. So whereas integration is all about being present in one's community, inclusion as described by Snow (1998) is so much more than that.

Inclusion for PWID is about interdependence, being accepted as you are, having a meaningful role in society, having friends with and without disabilities and being part of ordinary learning and working environments

While PWD are more '*visible*' and '*present*' nowadays in the community, this study found that most do not experience meaningful community inclusion. 99.1% of focus group participants did not have a friend with an intellectual disability, did not have a work colleague with an intellectual disability and could not name one SO athlete. While it must be acknowledged that the SO are of significant importance and benefit to the everyday lives of PWID, this study found that they do not form social bonds and relationships in their communities similar to that of their non-disabled peers. It is reasonable to conclude on completion of this study PWID are more '*integrated*' and more '*present*' in our communities, but they do not experience inclusion in a way where they form natural bonds and social relationships with their non-disabled peers.

The main themes that arising from this research study were as follows:

1. Health and Wellbeing
2. Teamwork, Fun and Togetherness
3. Skills Development
4. Language/Use of Term 'Special'
5. Pity and Charity
6. Tokenism
7. Inclusion – within the confines of the world of disability and SO

The findings and themes that emerged from the analysis the focus groups and the discussions generated on those findings with the five interviewees are presented and discussed in the next section.

6.2 THEME 1: HEALTH AND WELLBEING

6.2.1 Focus Groups: Health and Wellbeing

There is no doubt that one of the most significant benefits of engaging in sport and physical activity is that it can have a positive impact on people's physical health and emotional wellbeing, inclusive of people with intellectual disabilities. When participants in most focus groups viewed the images of PWID participating in SO events a significant theme to emerge was that sport was a good way in which to keep fit, stay healthy and promote positive mental health. One focus group participant said:

> '*People feel healthier and people are healthier after engaging in sport and it helps wellbeing, both mental and physical*' (M2-A-38-M).

While in other groups similar comments were made such as:

> '*It keeps you fit*' (M1-A-18-U), '*Playing in any sports is good for you because you are meeting people and you are active as well*' (F3-A-38-U), '*It's a healthy lifestyle*' (F1-B-18-L), '*They are fit, healthy and strong*' (F5-A-38-M), '*They are running or skating in that picture there and that's good for them*' (F1-A-18-C), '*Exercise is good for you no matter who you are*' (F4-A-38-L) and '*it's good for health benefits*' (M2-A-18-C).

Overall many focus group participants in both age groups on viewing the images of PWID at SO events immediately interpreted the pictures in a positive light as they reflected on the benefits of participation in sport with regard to promoting good health. In a similar vein the United Nations (2011) claimed that the universal popularity of sport and its physical, social and economic development benefits make it an ideal tool for fostering the wellbeing of persons with disabilities. Harris (2006, p.353) also stated that 'the SO enhance function, physical activity and health' whereas the SO (2011) claim that their games are an international program of sports training and athletic competition for PWID that foster greater wellbeing.

However, it was not only the physical benefits of participation in the SO that focus group participants discussed. Many spoke of how participation in physical activity can be of benefit to a person's overall mental health and emotional wellbeing including developing in confidence and growing in self-esteem:

> *'They achieve something and it gives them confidence and maybe with that confidence they may not be afraid what people might think...they are more confident'* (M2-B-18-L), *'It's good for your psychological wellbeing so good for self-esteem and your confidence* (M3-A-38-M), *'It can give you a healthy mind and an escape from issues'* (F3-A-18-U), *'You feel so much better after training....you get a buzz out of it'* (M4-A-18-L) and *'They are celebrating their win, it's a great achievement in fairness and you can see they are delighted'* (F3-A-38-C).

Harris (2006), reported similar anecdotes when he claimed research conducted after the Winter Special Olympics of 1993 found that athletes who participated in those games experienced a more positive sense of self perception, while Abernethy, Hanrahan, Kippers, MacKinnon and Pandy (2005) claimed that participating in sporting activities was a way any person to acquire greater self-esteem and to become more confident. Indeed, a regular occurring theme throughout most focus groups on viewing the images of the athletes was that they appeared to be confident and proud to be involved in the SO:

> *'It can give a person confidence that they can join in and that they are capable of doing things like anyone else'* (F3-A-38-L), *'In the pictures you can see that the athletes are saying look what I can achieve'* (F4-B-18-L), *'Just like anyone else they are proud of winning their medals...isn't that normal for anyone'* (M3-A-38-L), *'It's great being part of a team and I know from my experience when you win a game you are delighted and proud of that'* (F2-B-38-U), *'They are enjoying themselves and are proud of what they are doing and its looks so natural'* (F5-A-18-M), *'Well it's positive because the people look happy I think and also playing in sports is good for you as well – you can see that they are enjoying themselves*

and it's a good way to exercise' (F1-A-38-C) and *'There is such a lot of pride there, they are very proud of their achievements and rightly so'* (M1-A-18-U).

6.2.2 One-to-one Semi-Structured Interviews: Health and Wellbeing

When discussing this theme with the five one-to-one interviewees most were in agreement with the findings and were not in any surprised that focus group participants interpreted the images of SO athletes in this way:

> *'Yes that does not really surprise me at all, they (SO athletes) are so committed they really are and focused and they get so much from the games........they are very proud to be part of them and it shows in their faces...and of course they not only benefit emotionally from the games but they provide an opportunity for the athletes to be active and to play in sport which of course is good for them as well'* (INT 1), *'I know from my own experience that they absolutely love the SO I can't tell you how much, it's their club and they take so much pride in being part of it. It's their club and they take so much pride in being part of it...apart from the benefits of sport and being active they get so much out of it...they are proud to be part of it...and they grow in self-confidence and self-esteem'* (INT 2*), 'They are so committed to the games and so proud of their achievements you have to see it to believe it. That's very true, while it's a great chance to socialise the athletes are also training and involved in activities like running...of course it's good for them as they get to exercise but they are also enjoying themselves as well'*(INT 5), *'They work very hard and there is a lot of training involved, it can be quite competitive at times you know...there are health benefits to be gained because they are playing in sport and are active...that is also good for your mental health too...the participants obviously picked up on that from the images they observed'* (INT 3) and *'I think that is an obvious fact and your groups picked that from the images, participation in sport can be good for you whether you are have a disability or not...I think your participants were able to see this, they are probably involved in sport and know of the benefits'* (INT 4).

135

Overall with regard to the first theme that emerged '*Health and Wellbeing*' the findings from the focus groups in both age brackets were generally positive and indeed this was further echoed in the one-to-one interviews that followed. Farelli (2011) claimed there is always something to benefit from playing and participating in sports no matter who we are with regard to both health benefits and psychological well-being.

6.3 THEME 2: TEAMWORK, FUN AND TOGETHERNESS

6.3.1 Focus Groups: Teamwork, Fun and Togetherness

Undoubtedly participating in team sports of any kind can promote learning about the concepts of team strategy, building friendships and team spirit. Another positive and common theme to arise across most focus groups was the concept of *'teamwork'*, underpinned by a sense of '*togetherness*' and '*fun*'. Most focus group participants were immediately drawn to the concept of '*teamwork',* how much fun the athletes appeared to be having and the overall sense of '*camaraderie*' emulating from the images:

> '*But you can see the enjoyment coming through there, you really can and it's all about the enjoyment and fun*' (F3-A-38-C), *What I saw of the picture - I think the picture is quite positive, it shows forms of inclusion as in it shows teamwork*' (M1-A-18-L), *'I see friendship there and teamwork, they are happy in each other's company*' (F1-A-38-M) '*A lot of it is just about enjoying themselves......they are having fun and there to enjoy themselves....you can really see that*' (M2-A-38-U), '*It's a common thing.....I mean everyone is there for the same thing and everyone is smiling, you can see they are enjoying themselves*' (F2-B-18-M),'*It looks like they are having fun, they are having fun together*' (F4-A-38-M), *'I see enjoyment in the challenge before them*' (F2-A-38-C) and '*It's enjoyable as well – it can be fun and a great way to get out and about*' (F3-B-18-U).

There is no question that a significant benefit of the participation in the SO for PWID is a sense of '*belonging*' which is fostered through the concept of togetherness, teamwork and fun. Burley (2017) claimed that in teams people work together to accomplish common goals and it's not always about winning, but working and co-operating together to achieve greater things. Haig and West (2011, p.15) pointed out that a key theme is to be found in the SO motto 'Let me win, but if I cannot win let me be brave in my attempt'.

This is an important point for consideration, as participation in the SO is not solely focused on winning, it's also about teamwork, making friends and has many other benefits such as simply having fun. Silberman (2007, p.135) claimed that 'one of the advantages of having fun is you need other people to have fun with. Fun then promotes teamwork, co-operation and enhances creativity'. Similarly Richman (2006, p.34) suggested that sport can 'provide a superior opportunity to teach sportsmanship, teamwork, perseverance, love of sport, spirit, caring for friends, physical training and so much more'.

On further exploring this theme the researcher enquired of focus group participants if they thought that teamwork could promote social inclusion for people with disabilities. Many participants commented that having viewed the images they believed PWID could get to experience inclusion on their teams and through social networking within the confines of the SO:

> '*Well it's the social aspect as well...there are more social aspects to it as in they might meet up regularly to go training*' (F1-A-18-L), '*Socialising I suppose is the main factor like in team sport say...I suppose you interact with people on a team....you have to work together....to win matches or whatever*' (M1-A-18-M), '*When you are part of a group for a long time it's only natural you will make friends there*' (F2-B-38-L) '*Yes because you are part of a team and part of a group or a club and you do things with that club*' (M2-A-38-U) '*When you're in a team you make sure no one is left out – because you always work as a team to make sure everybody's together*'(F2-A-18-M),

'When you are on a team and make friends...you feel you are part of something or you belong' (F3-B-38-U),and *'but if they are really included in all the things like we do I'm not sure...but as far as the SO, they are definitely included there and valued as well and it means so much to them'* (F3-A-38-C).

Much of the literature on the SO has suggested that participation in the games can teach the athletes about the strategies involved in competing as part of a team, there are opportunities to make friends and to experience sportsmanship and camaraderie. However, in this instance, focus group participants spoke of inclusion for PWID within the confines of the SO itself and the world of disability. This is further discussed and analysed in the in the final core theme, *'Inclusion within the confines of the world of the disability and Special Olympics'*.

6.3.2   One-to-One Semi-Structured Interviews: Teamwork, Fun and Togetherness

On discussing the theme of teamwork with the individual interviewees, four were in agreement with the findings from the focus groups, reporting that the SO does indeed promote the concept of teamwork, togetherness and a sense of camaraderie and fun among the athletes:

> *'That would be the norm as they are a team member, and there is a great sense of 'sportsmanship' there as well, not only sportsmanship but co-operation and communication'.* (INT 5), *'I absolutely agree with that…there is definitely a sense of belonging, just like in any club, they are part of something and identify themselves as a member, it is easy to see that in some of the photographs of the athletes. And they do enjoy it as well…they enjoy the companionship of their friends. I understand why the participants picked up on this…the athletes definitely enjoy being part of the SO',* (INT 1),

'Yes, I agree they can learn key skills, for example, they learn how to make friends, be part of a team and I suppose when you think about it they learn how to have the 'craic' just like anyone else or any other sports team', (INT 2), *'They can join in, regardless of their disability and just like any other sporting event you would see, they connect with the SO'* (INT 3) and *'There is a great sense of camaraderie, a great sense of fun among the athletes as well, they really enjoy it and get so much from it...it has to be experienced to understand this maybe'* (INT 2).

Martin (2015) claimed that participants in the SO are provided the opportunity to learn about the concepts of teamwork and friendship and which most people involved in sports get to experience. Such concepts and skills development can also support PWID to adapt into society in a more effective way as they start to understand some of the rules and norms expected. Hassan and Lynch (2015, p.256) further consolidate this point when they claimed 'that the Special Olympics can enhance the social skills of participants, developing co-operation, teamwork and communication skills'.

On asking the interviewees why the focus groups interpreted the concept of inclusion within the confines of teamwork specific to the SO and the world of disability, the comments included:

'*That is interesting, I guess it is because they see them with their friends and they all have disabilities maybe but if PWID are to make friends with their non-disabled peers a lot needs to change in society, particularly attitudes to PWID.'* (INT 1) and '*It's probably because they know little about the SO or indeed anything about disability or maybe on viewing the images they just see a group of PWID together'* (INT 5).

However, one interviewee found this theme of particular interest and put forward their own interpretation and rationale as to why the focus groups interpreted the images in the way in which they did.

'Yes, while the SO can promote a sense of teamwork, they don't necessarily promote inclusion in the wider world for PWID. I fully understand why the focus groups spoke of inclusion within the confines of the SO. Society and often professional expectations need to be taken into account. Society would never expect a person without a disability to be engaging in the SO or anything similar to it. People without disabilities would not see themselves participating in such games. The SO segregates people with intellectual disabilities as you have to have an intellectual disability to participate. With other sports like the Paralympics, the competitions appear to be real, not fake like the SO. Having clowns on the sidelines and playing games such as pass the parcel where adults with disabilities win toys does not help either as they are reinforcing images where PWID are innocent and childlike and it appears the games are really only about participating and having fun and only for PWID' (INT 4).

Interestingly, some research has found that the Paralympics are more akin to the Olympic Games as the focus is on competitiveness and '*win at all costs'*. Nixon (2016) stated that the principles of athleticism, athletic ability and competitiveness all apply to the Paralympics whereas the SO are based on the main principle of '*participation'*. Grossman (2015) also suggested that by using images to portray PWID in an innocent, childlike manner will evoke stereotypical attitudes towards this minority group; whereas Storey (2009) stated that such images of athletes at the SO do more harm than good as they serve to reinforce negative images of people with disabilities. So while it was interesting to note that some focus group participants discussed that, through the process of teamwork and team sports, the SO were promoting a culture of inclusion, and when further teased out, they meant inclusion within the confines of the SO. However, evidence from this study suggests that some images of PWID participating in SO events are generally viewed positively with regard to the concepts of *'teamwork', 'togetherness'*, and '*fun'*. Focus group participants and interviewees also believed that teamwork and team sports can support a sense of '*belonging'*.

The same interviewee (INT 4) also questioned whether athletes were truly '*happy*' as focus group participants described:

> '*PWID do look happy in the photographs at the SO and I fully understand why your groups could see that. However, if we look at the larger picture and think of group homes and state institutions...PWID were always smiling. You must ask yourself were they truly happy? Does evidence not suggest that they were disempowered and dependent on services? How are SO defining and measuring happiness or quality of life as well? How are they measuring inclusion? How do they empower people? Just because someone is smiling does not mean that they are happy and have a good quality of life, especially in comparison to people without disabilities'* (INT 4).

Barton (2015) claimed that even in modern times many people with disabilities continue to be supported in a culture of dependency with limited opportunities for self actualisation. As such, they are disempowered and passive consumers of the services they avail of. Thomas and Woods (2003) suggested that while there is a lot of '*normalisation*' and '*inclusionary*' activities undertaken by disability organisations, much of it is delivered within the confines of what the service has to offer. Thus, while many PWID appear happy and experience some level of integration into their local communities, few experience true inclusion similar to that of their non-disabled peers.

6.4   THEME 3: SKILLS DEVELOPMENT

6.4.1   Focus Group Findings: Skills Development

Another common theme to arise across the majority of focus groups was the concept of '*skills development*'. On viewing the images of SO athletes, many focus group participants spoke about the development and building of physical and interpersonal

skills such as understanding the concepts of teamwork, taking turns, dedication, commitment and motor skills:

> '*They are engaged in the sport....they are concentrating and it looks like there is a certain level skill involved*' (F1-A-38-M). '*You can learn and build new skills*' (M1-B-18-L), '*They are learning a new skill like how to play football*' (F3-B-18-M), '*There is a skill involved in that if you ask me, like I couldn't do that*' (F1-B-18-U), '*In fairness I couldn't do that either I have never been ice skating in my life*' (F2-B-18-U), '*They are learning how to interact with each other and learning social skills as well*' (M3-A-38-U), '*They are learning about life...they by socialising and being with people*' (M4-B-18-L) and '*There is both social and physical skills to be learnt, they are learning how to ice-skate or play football*' (M1-A-38-C).

Thus, the evidence suggests that participation in sport is one way for PWID to acquire greater skills and self-confidence; focus group participants vocalised this when viewing the images of the SO athletes. Wendt (2011, p.473) claimed that the SO cannot only provide opportunities to develop physical fitness but can also demonstrate the '*sharing of gifts and skills*' among athletes. It goes without question that participation in sport can support a person to learn new physical skills and indeed life and social skills. In the literature Gilbert and Schantz (2008) claimed that participating in sporting activities is a way for people with disabilities to acquire greater self esteem and to be more confident and that the acquisition of skills like these can enhance participation opportunities in everyday life for many people with disabilities

In a similar vein, Hassan and Lynch (2015) also noted that there was a social aspect of the SO which included enhancing the social skills of participants. Other comments were more focused on skills development related to community presence and inclusion:

> '*Well there is competitiveness there......which you know is part of society anyhow. So they are learning a life skill*' (M1-A-18-L), '*I think the SO can show skill and*

ability as opposed to disability'– Look at them getting their medals and doing well' (F3-B-38-L), *'You could have someone with special needs or autism and they could pick up the skills quite easily and once you include them they will pick that up straight away and take those social skills and use them day-to-day'* (F1-A-18-U), *'In the pictures where they are ice skating, that's a skill and a talent'* (M3-A-18-L), *'Of course there are skills involved....you have to learn how to mix with people and the rules of the club'* (M2-38-A-M), *'They are proud and rightly so, why not'* (M1-A-38-U) and *'There's definitely learning there.....they are learning about life by meeting people...by being with people'* (F2-A-18-C).

Harris (2006, p.353) also made specific reference to this where they claimed that 'the SO not only enhances function, physical activity and health but also helps individuals with intellectual disabilities improve and adapt into society'. This is because athletes are enhancing and learning the life skills required for participating in society in a meaningful way.

Winnick (2011) also noted a similar theme where he stated that many SO athletes can not only demonstrate the ability to participate in team sports but '*this ability also includes the attainment of specific skills and team strategy* whereas Harris (2006) found that athletes who participated in those games experienced better social competence and adaptive skills. However, while most participants in both age groups acknowledged that there was a level of skill and skills development evident from viewing the images of athletes at the SO, some focus group participants in the older age group questioned if some athletes did in fact learn new skills:

'*The athlete is not even looking at the bowling ball – he is just there– and the carers supporting him push a ball down a ramp and he is not even really involved in it, I wonder does he really even want to be there?'* (F4-A-38-M), *'In fairness the bar would not be set too high in the SO',* (F2-A-38-L), *'I think I would see it all as a bit clumsy'* (F4-B-38-L), *'This wouldn't be at elitist level you know, it's at a lower level but at a lower level there is more opportunity to win'* (M2-A-38-

M), and '*I'm not too sure if it is about skill really, it's more to do with being part of something like a club or a group'* (M3-A-38-U).

Thus, some participants from the older age group after viewing the images were unsure if the development of skills from participation in the SO were evident. Some also believed that *'just taking part'* in the games was most important as opposed to the development of skills. Storey (2009) pointed out that specific images of SO athletes along with typical images of PWID at SO events combined with media headlines such as '*Special Olympic Athletes Win Smiles'* and '*Races belong to the not-so-swift, not-so-strong'* only serve to reinforce negative stereotypical images of PWID. They tell nothing about the skills and talents of each individual that participates in the games and further enhance in a negative way the general public's perception of PWID through the lens of the SO. Similarly, Gardiner (1998) highlighted that these types of *'interpretations'* of the SO can reinforce negative stereotypes and further perpetuate the exclusion of PWID from their communities.

6.4.2   One-to-One Semi-Structured Interviews: Skills Development

Most interviewees were in agreement with focus group participants that the athletes could and did learn new skills from participating in the SO and at various SO events:

> '*The findings are very true, in fact you could also add that the athletes actually also learn about commitment and dedication. It's about focus, the athletes learn to focus and are dedicated...they (athletes) also learn about having to concentrate and to focus on whatever sport they are involved in',* (INT 1), '*Playing in the games builds up their confidence, the coaches are terrific and play a great role is supporting the athletes in building up these social skills...they build on the skills of how to interact with other people, how to make friends, and the skills involved in playing any sport no matter what it is'* (INT 2),

'You would want to see it firsthand, the athletes are so committed to it, they love it, they are learning new skills and talents and are rightfully so proud of that' (INT 1), and *'It helps the children in particular with coping skills, they learn to sit, they learn to wait and they learn to participate in public'* (INT 5).

Thus, most interviewees were in agreement with the findings from the focus groups and were not surprised that on viewing some of the images of PWID, the participants spoke about skills development through participation in sport. The literature also found that through involvement in sport PWID can learn new skills, both social and physical. Indeed, the American Alliance for Health (1982, p.59) have claimed 'to special athletes, participation in sport like soccer is not just a game but an introduction to a whole new world of skills development'.

However, in discussing with the interviewees that some of the older age group questioned if PWID did learn skills that were meaningful, their responses were somewhat varied:

'Well the fact you are meeting other athletes is a chance to socialise and I wouldn't agree with point of view necessarily, I know that some of the PWID in the SO really enjoy their weekly clubs and they do learn about competition and commitment...I know at first hand they also learn about reliability.......they have to turn up and not let their team mates down' (INT 1)*, 'I can see why someone who knows nothing about the SO would say that, but they are looking in at the games and really know nothing about them. The fact a lad may use a ramp to bowl should be seen as an aid to support him to be included and he has put in a significant effort to participate......if you don't know about the games then you wouldn't necessarily know that the athletes do learn social skills. I can tell you first hand that they also learn about things like reliability – they turn up because they have to and they wouldn't let their team mates down',* (INT 5) and *'I absolutely disagree with that, these are people who know nothing about the games and make opinions on viewing a picture, but know nothing about the*

games. I do understand though, that some of the pictures are not representative of the skills the athletes learn and develop...I will say however, that PWID do learn skills and become more confident from membership of the SO (INT 2).

Two of the interviewees reported that they could understand why some of the focus group participants would question the concept of skills development from viewing the imagery of PWID at SO events:

'I can see where your groups were coming from here, as I said earlier, having clowns present and playing games like pass the parcel for adults with ID is inappropriate – it suggests absolutely nothing of skills development to the general public' (INT 4) and *'They are playing a sport and it might be with some help but that doesn't mean you are not learning something, even if it's taking turns and socialising, however, some of those images just show kids with disabilities getting hugs from volunteers and coaches....some of the pictures don't replicate the real world of sport in any way for example, the athletes are still happy when they lose and the carers kind of 'mother' them...that is not what competitive sport is about'* (INT 3).

6.5   THEME 4: LANGUAGE AND THE TERM '*SPECIAL*'

6.5.1   Focus Group Findings: Language and the term *'Special'*

Some of the images viewed by focus group participants portrayed the SO logo and the term *'special'*. When participants were asked what they thought of the term '*Special*' it raised some debate and discussion among both age groups, but in a different context. Participants between the ages of 18 – 24 years were more critical about this type of language used in relation to describe PWID, whereas participants between the ages of 38-43 years tended to be more reflective about the use of the term '*special*', recalling their school years and the process of segregated education:

'In school the special students were taught in different classes or even different schools from us' (F1-B-38-L), *'There were special schools for children with disabilities when I was a kid I suppose they weren't able to cope with the mainstream'* (M3-38-A-U), *'Like years ago in school if you had an intellectually disabled student in school they were treated as special and everything was special for them – like special classes, special teacher and the word special I suppose thinking now has negative connotations'* (F2-B-38-L) *'You know I never really thought about that to be honest'* (F3-A-38-G) and *'since I was younger the terms keep changing...like even now special needs is under question* (M2-A-38-C)

In this instance, the term '*special*' was remembered by some older focus group participants as something that leads to segregation and difference. This type of labelling and attitude was identified by Beith *et al*. (2005) where they claimed that when PWID are systematically categorised as a *'special'* group of people, they will receive *'specialised'* segregated services. Samuel *et al.* (2009) also claimed that disability labels such as '*special*' only serve to stigmatise people as being inferior which can lead to lower expectations of them. Indeed Foucault (1973) has claimed that the names and definitions we give things shapes our experience of them. Some researchers have claimed that labelling PWID will almost always result in negative outcomes and language can be viewed as a reflection of a person's attitude. Interestingly, focus group participants between the ages of 18 – 23 years were somewhat more critical of the use of language to describe PWID, in particular the use of the term '*special*':

'I really think it shouldn't be called the SO –it's demeaning' (F6-A-18-M), *'When you see some of the pictures and think of the word special it looks like as if they have to be cared for all the time.....maybe it's all a bit patronising'* (M1-B-18-U), *'Well I suppose in that picture the 'special needs' bit is emphasised more.......there are a lot of carers around and making a fuss around him...they are emphasising he is special'* (F3-B-18-U), *'It really is a label, that's what it is*

stating we are different to everyone else, but why do they have to be special? (M2-A-18-C), '*When you hear the word special...or think of the SO you do think of disability?'* (F4-B-18-U), '*It looks very much like they are looking down on them – it's very much 'ah look at you aren't you great'. They are special because they were chosen to hold the torch – and because they are disabled'* (M1-A-18-L), '*I think a lot of people when they hear the word special think a lot of those people don't have the full function of their bodies and yet a lot of them are totally capable'* (F1-A-18-M) and '*Maybe people think they can't compete at the level of an abled-bodied person I think that's when they hear special'* (M1-A-18-M).

Thus, it would appear that younger age participants had a more heightened sense of concern about the labelling of people. Snow (2007, p.7) highlighted this when she claimed the term special 'has done nothing to improve perceptions of PWID and everything to reinforce negative images'. Snow (2007) claimed that labelling people with disabilities is dangerous as it directly impacts on how a person is perceived and treated by society. Farrell (2012) also claimed that terms like '*special*' continue to be used frequently in relation to PWID which do little to portray such individuals in a positive light and the general public will have a predetermined set of ideas and beliefs about people with such labels. Interestingly, while many of the younger age groups were somewhat critical of the use of labels, this was not as evident in the older age group.

6.5.2   Semi-Structured One-to-One Interviews: Language and the term '*Special*'

The interviewees had a mixed and varied response to this finding. Two agreed with the sentiments as expressed by focus group participants that the use of language and labels such as the term '*special*' has negative connotations for PWID and does not support their inclusion into society:

'*I too absolutely hate that term and feel very strongly about it. It is exclusionary and emphasises differences...why do they have to be "special"? It promotes that*

pity and charity thing, like playing on disability to get sympathy from the general public' (INT 3) and '*The language the SO use with regard to the term "special" can impact on inclusion for PWID as it puts forward two types of people , that is "us" and "them". With the use of such language and practices that promote segregation. Would people who are not involved in the SO or people without disabilities aspire to participate in such games?'* (INT 4).

Storey (2009) has claimed that SO are segregated event and one can only participate if they have a disability which stands in stark contrast with any efforts made to integrate PWID into ordinary everyday recreational settings. In turn this sets them apart from the general public. Similarly, Macionis & Plummner (2008, p.437) have also claimed that labels when used in the public domain 'construct ideas of some people being ''the other''. Whatever they are, they are not you.....they are radically different from ''*us*'' and not *"normal'', thus,* reinforcing the points made by INT 3 and INT 4.

This very point about '*the other'* was raised by a number of focus group participants after viewing the images of the athletes in action:

'*Being honest, young people would not aspire to be in the SO.... they would want to be like elite athletes'* (M3-B-18-U), '*You wouldn't see a professional athlete like that.....if they were professional athletes you wouldn't see that type of vulnerability*' (M1-A-18-L), '*Maybe there is no interest.......you may watch the Olympics to see the prowess, but you wouldn't see that in the SO'* (F3-B-38-L) and '*But we don't equate to it and don't look to the SO for sport idols.....we look to the mainstream'* (M1-B-18-M).

Thus, while many participants were quite positive about the SO, they also spoke about them in terms of being '*different*' and '*special*', and they wouldn't necessarily aspire to be in them and would not view the athletes as their sporting '*idols*'. In this instance, '*abled bodied'* people did not appear to value the SO in the way in which they would the '*normal'* Olympic Games.

Shakespeare (2013) claimed that labels such as *'special'* has played a significant role in *'devaluing'* PWID and societies and communities as a whole fail to see their abilities and strengths and ultimately, fail to include them. With labels, the overriding focus is on the medical model of disability and on the condition a person is labelled with, as opposed to the person. In turn, the label almost becomes the person as the person is described and defined by it.

One interviewee reported that they understood why some of the focus groups were critical of labelling people as *'special'*. However, when further probed on this the interviewee pointed out that the SO were such a well-known brand it would be very difficult to change it:

> *'I think the SO have done some great work and have definitely improved the quality of life for PWID. I get the issue about the term "special" but that is a brand, a logo and a very well-known one too. I don't know how they might change it but if Inclusion Ireland successfully achieved a change of name then why not the SO?'* (INT 2).

Inclusion Ireland, an advocacy agency for people with disabilities was known as the *'National Association for the Mentally Handicapped in Ireland'* (NAMHI) up until 2006. The reason for changing their name was simple and twofold. Firstly, the people they represent (PWID) asked them to do so and secondly the name NAMHI is an acronym for an out-of-date and negative concept. Labels such as *'mental handicap'* are no longer used, they are underpinned by the medical model of disability and are offensive to very many people, particularly PWID (Frontline 2006). Thus, as the focus on the term *'special'* intensifies and its influence on how PWID experience meaningful inclusion, the SO might consider the impacts such labelling has on public perceptions towards PWID.

Two interviews were somewhat indifferent to this particular finding on the use of language and the term *'special'*:

'It's only a name, I wouldn't get hung up on it. If they knew how much joy the SO brings to the everyday lives of PWID and how much they get out of it. As long as people are enjoying themselves that's what counts' (INT 1) and *'Nobody seems to gets caught up with the Paralympics like they do the SO, that's also a label isn't it, why not comment on that? Why can't people just focus on the games and how much the athletes enjoy them – it's like as if the glass is always half empty'* (INT 5).

It is interesting to note that participants were asked in all focus groups could they name a SO athlete medal winner. Only one participant across all groups could identify a SO athlete, yet many could easily identify Paralympic athletes. Indeed, the Paralympics have somewhat '*distanced*' themselves from the SO and focus group participants did not comment on labels in any way when the discussion turned to the Paralympic Games. It seems possible therefore, that in the public domain the SO are viewed and understood differently to that of the Paralympics. Brittain (2010) claimed that the usual philosophy of sport is applied to the Paralympic Games, which is competitiveness and competition and the gamers are considered more athletic and competitiveness to that of the SO.

Two of interviewees were interested in the fact that the younger age groups were more critical than the older groups regarding the use of language and labels used to describe PWID:

'That age group are probably more accepting of diversity, they grew up with it...they don't label people as much as the older generation might. Younger people are much more open to difference, sure you only have to look at the recent same-sex marriage referendum. Younger people have no issues at all with that kind of thing' (INT 1), and *'They are probably more educated and probably more exposed to PWID. They learn about these things at school nowadays and are ok with differences. They may know about disability and see it as a rights kind-of-thing'* (INT 2).

It is a fair assumption that younger focus group participants would have been more exposed to the social model of disability and may have a more positive attitude towards equality based issues and less accepting of social inequalities such as the stereotyping and marginalisation of minority groups. Indeed some of the younger age participants made explicit reference to equality issues and appeared not only accepting of diversity but respectful of it:

> '*I think at the moment, especially after your man coming out in Cork, xxx...he is probably the first hurler that stood up and said he was gay and there is actually equality there towards him and people respected him for that. So he is promoting or making it easier for other people to say that they are different, which is a great thing*'(F5-A-18-M).

However, definitions of disability have rarely been positive and are usually underpinned by the medical model of disability. Language and labels can be powerful as they can shape the way in which we think about people and how we see them. Labels can be either positive or negative. Labelling a person with a disability as '*special*' can impact on that person throughout their lifetime. Society's expectation of that person may be lower to that of their peers and they may experience exclusion and marginalisation because of the label. In this instance, it appeared that while the older age group were aware of labels and could recall memories of special and segregated services as children, the younger age group saw labelling as more of a '*rights*' and '*equality'* based issue and were more critical of their application to people.

6.6   THEME 5: PITY AND CHARITY

6.6.1   Focus Group Findings: Pity and Charity

Another theme that arose across most focus groups was the concept of pity and charity. Many participants believed that some of the pictures conjured up images of pity, feeling

sorry for the athletes and a feeling that the SO were a charitable cause supporting people in need. One specific picture which featured PWID collecting money for the SO was of particular interest.

Many participants felt that to see the athletes shaking buckets looking for financial support from the public was not appropriate and the SO were playing on the '*heartstrings*' of the public to raise money. In turn they believed this was promoting a negative image of PWID based on the concept of pity and charity:

> '*The charity buckets at the front is what this picture is all about'* (M1-A-38-M), '*Collecting money like that to me really portrays the segregation you know......it looks like an actual photo and everyone is happy to be there but it is clearly segregatory'* (M3-A-38-M), '*They don't get sponsorship or get money as other athletes would do, so they would have to fundraise I suppose'* (F3-A-18-U), *'In this day and age really you shouldn't be seeing people with disabilities collecting on the street for money, it's just not right'* (F3-A-18-C) and '*It doesn't look right being honest'* (F1-18-A-L).

In turn there is a view that such images promote a negative attitude among the public about PWID. They are seen as being '*victims*' that require '*charitable handouts'* and those practices such as fundraising should be abandoned. Quinn and Arnardottir (2009), made a similar claim where they suggest that society often treat PWID like objects, recipients of care and charity. Wolfensberger (1975) also claimed that images of PWID can evoke feeling of pity among the general population.

Interestingly, comments arising from some of the older group were more personalised about feelings of '*pity*' and *'charity'*. Some openly admitted that on viewing these images they felt pity for some of the athletes, particularly images of children at SO events:

'I think some people just wouldn't care - they are indifferent – maybe we do see them as being 'weaker' and my heart does go out to them – you could get upset looking at some of these pictures' (F2-A-38-U), *'I am not sure if I would want that for my child, you do have to feel sorry for him and wonder what his future will be like'* (F3-A-38-L), *'Being honest if I were there I know I would get upset if they didn't win a medal'* (F2-B-38-L) and *'You would feel like you would have to give something....you would feel bad if you walked by and didn't'* (M3-A-38-M).

In this instance, focus group participants had personalised the images with some expressing pity for the athletes, especially those images that had children in them. Sullivan (2011) claimed that it is all too easy for PWID to be viewed as weak, needy and dependent whereas Wolfensberger (1975) stated that a significant stereotype specific to PWID is where the general public view them as '*objects of pity'*. Thus, when images of PWID place an emphasis on dependency, they can emulate feelings of pity, patronising societal attitudes and exclusion. Storey (2009) further underlines this point when he claimed that popular press and media accounts of the SO often reinforce a negative, self-fulfilling prophecy that evokes sympathy, pity, or stigma and promotes a negative stereotype of people with disabilities.

Interestingly, one older age focus group participant recalled that at one time they would have felt sorry for PWID until they actually got to spend some time with PWID:

'I have to say I used to say "God love them" before I was exposed to sport and disability. I went to a match with disabled and non-disabled kids and we loved it...if you have no knowledge then these images could be seen as negative It wasn't until I got involved in the event that I thought it was brilliant' (F1-B-38-L).

Anderson (2013) claimed this was not an unusual phenomenon as the presence of a person with a disability may cause discomfort to some able-bodied people, however, this is because of their lack of exposure to people with disabilities.

Thus, it would appear that exposure to PWID by non-disabled people is a key factor in promoting their inclusion into society.

6.6.2   Semi-Structured One-to-One Interviews: Pity and Charity

Most interviewees agreed with this finding saying it made sense for the general public to interpret such images in this way, especially those images that portray children with disabilities collecting money in public places for the SO:

> '*I feel very strongly that PWID should not be collecting money on the street or in shopping centres for the SO, it further emphasises that they are "special", I can fully understand that people would see the pictures and feel sorry for them, especially the children...We are very good at that type of thing in Ireland, like even our services have charity in their names like Daughters of Charity. By doing this type of thing in public its makes sense that PWID will be pitied*' (INT 3),'*That is one practice that I think is wrong on so many levels, I mean it is using PWID to essentially make money for the organisation, however, I also respect that it may come down to individual choice where an athlete may want to fundraise but it sits uneasy with me*' (INT 2), and '*You wouldn't see other athletes or Olympians out shaking buckets on the street looking for money, would you? Such practices promote a stereotypical attitude towards PWID where they are to be pitied and are seen as charity cases... I am not one bit surprised that this was something you found in your study*' (INT 4).

These findings suggest that images do impact and influence on how the general public understand and see PWID. When we see children with disabilities collecting money we feel sorry for them and maybe even compelled to donate to the cause. Indeed, Grossman (2015) has claimed that the way in which the popular press portray images of SO athletes has reinforced feelings of pity, sympathy and stigma for PWID among the general public.

One interviewee, while understanding of why this theme had arose was generally not supportive of this finding:

'*I can see where they are coming from but all sports clubs engage in this practice, don't they? I mean our local GAA club was collecting a few weeks back and nobody "felt sorry" for them...so what if they are involved in the SO, it's their club and sure why not* (INT 5).

The findings where the older age group expressed sorrow and pity for some of the athletes after viewing some of the images also received a mixed and varied response from the interviewees:

'*It's all to do with ignorance about disability, lack of knowledge about what they can achieve...an assumption that PWID will always need to be cared for...and down to a lack of exposure to PWIDI suppose some of the images they viewed encourage feelings of pity or sorry for the athletes. The chances are many of this age group (older participants) will have children and they were probably imagining what if their child had a disability, how different would their life be. I also find it odd that with this particular age bracket they had little issue with the label "special" yet they feel sorry for the athletes on seeing some of the images'* (INT 1), '*It's really to do with their own understanding or misunderstanding of PWID. They are making assumptions about PWID based on those images'* (INT 2), '*We live in a culture to push children hard and the real world can be very competitive, something which is not evident in many of the images the SO portray of PWID'* (INT 3) and '*That's hardly surprising, the SO portray PWID as eternal children, even the adults are portrayed like so. The general public pities them on seeing the images you speak of'* (INT 4).

Even though this age bracket were somewhat indifferent to the label '*special'*, some expressed feelings of sorrow and pity towards PWID on viewing images of them at SO events. One interviewee thought this to be a contradiction.

It should be considered, therefore, that there is a possibility that disability labelling may have some type of unconscious influence over how they perceive PWID. Rao (2004, p.78) has claimed that labels are very powerful and can 'play consciously and unconsciously a predominant part in discrimination'. Thus, people labelled as '*special*' may be at danger of being treated differently by society, even when that society '*appears*' indifferent to the label. Indeed labelling people as '*special*' may shape society's expectations of and attitudes towards this already marginalised group of people.

6.7   THEME 6: TOKENISM

6.7.1   Focus Group Findings: Tokenism

Another major theme that arose across the majority of focus groups was the concept of '*tokenism*'. This arose specifically in relation to images where politicians were present with the athletes. Many participants from both age groups expressed a level of '*cynicism*' on viewing such images and believed that in many instances politicians were simply being '*opportunistic*' and self-serving:

> '*I feel the way in which they are looking down is like condescending or patronising, they are pitying them and it's good for politicians to be seen doing this type of thing*' (F1-A-18-L), '*That is really only a photo opportunity for the politician there*'(M1-A-18-C),'*The one at the bottom there is not positive, the picture of the politician with the athletes...I always feel those pictures like that are kind of opportunistic...He is really there to further his own cause*' (M3-A-38-U), '*Politicians are politicians (half laughing) and that's just an opportunity to get good publicity. Like would he turn up somewhere when there would be no cameras...I doubt it*' (M1-A-38-C),'*I feel some of those pictures are pure tokenism – he even looks nervous around PWID. It's like just turning up because the media will be there*' (M2-A-18-U) and '*By being seen there he is more like*

promoting himself. It's more to do with looking good as opposed to supporting disability' (M1-A-38-M).

6.7.2 One-to-One Semi-Structured Interviewees: Tokenism

Most of the interviewees were in agreement with the above findings that images of SO athletes with politicians may appear tokenistic at times and indeed for politicians in particular, a possible opportunity to attract favourable media attention:

'While those pictures can look very positive and all inclusive, politicians will do anything to appeal to the wider public. While I think the volunteers are excellent, some of those images you speak of may simply be opportunistic for famous people and not just politicians (INT 1), *'Politicians will grasp at any opportunity that will make them look good and appeal to the public, yet they have failed people with disabilities over the years as they (PWID) have remained on the outside of society. I fully understand why your participants were cynical about these images'* (INT 3), *'There is a lot of tokenism here alright. We see PWID maybe once a year at these games but there is very limited scope for meaningful interaction within the community. Politicians jump on the bandwagon and get their pictures taken with these PWID and it all looks good. This distracts from the fact that PWID have been systematically failed by politicians and the state'* (INT 4), *'Yes I get that, I can see why participants got that from the photographs, there is a lot of issues that need to be addressed from a political perspective yet we are still waiting for better services...additional funding and the politicians could use such situations as opportunities for positive publicity'* (INT 2) and *'I wouldn't get hung up on that as politicians go to everything such as local funerals or fundraisers...in a way they are expected to go to these things...it might be they are showing up for the publicity but if they didn't they would probably get bad press so maybe they can't win with this one'* (INT 5).

Thus, many participants across most focus groups believed that a lot of tokenism was evident with some of the images they viewed (particularly those that featured politicians). Jackson (2016) claimed that while organisations may consult with PWID they only do so to get their perspective and nothing really changes for the person and as such, this type of consultation is tokenistic. It is interesting to note that Ireland is the only European nation yet to ratify the UNCRPD. However, the SO appear content to celebrate their athletes' success by facilitating photo opportunities with politicians for the media, despite the fact that the political establishment has systematically failed PWID over the years. Indeed, in this study most participants found such images to be both tokenistic and opportunistic. Jackson (2016) went on to claim that many organisations in Ireland today continue to work in a tokenistic way with their most important stakeholders and it is management that make the key decisions with little if any consultation with PWID.

6.8 THEME 7: INCLUSION WITHIN THE CONFINES OF THE WORLD OF THE DISABILITY AND SPECIAL OLYMPICS

6.8.1 Focus Group Findings: Inclusion within the confines of the world of disability and Special Olympics

When focus group participants in all groups were asked if the SO was creating more inclusive communities for PWID, the overwhelming answer was 'Yes'. However, when this topic was further teased out it became apparent that participants were talking about '*selective*' inclusion and not inclusion in wider society as a whole. It was interesting to note that out of 14 focus groups facilitated across the island of Ireland (107 participants overall) only one participant claimed they had a friend who had an intellectual disability. Some had acquaintances, or knew a person with an ID, but only one had a friend with an ID. It was also interesting to note that of the 107 participants that participated in the focus groups, only one could identify an athlete that won a medal in the SO.

When the researcher further probed the reasoning as to why most participants believed that the SO were creating more inclusive communities for PWID yet the vast majority of them did not have a PWID in their close circle of friends comments included:

'They are and they aren't in a way like...people with disabilities are included in the games and on their teams and you can see that they are getting a lot out of it, like enjoying themselves but I am not sure if they are included in society if we are to be honest' (F3-B-38-L), *'They are included among themselves and their level of ability'* (F5-A-18-U), *'But when you are with your own mates you are included like outside of that it may be different'* (M1-B-18-U), *'Well there is little opportunities to meet disabled people like as xxx said earlier we don't work with them and I have never socialised with them'* (F2-A-38-C), *'As part of many sporting clubs in my community – I have never come across a PWID...I do not come across people with disabilities in my wider circle that is just my experience......I have never mingled with a person with a disability'* (M4-A-38-M), *'I don't have a disability so I am not involved in the world of disability, but disabled people will have friends with other disabilities because they have something in common'* (F3-B-18-U), *'I would not have any friends with a disability but things are better now because we see them (PWID) out and about in the local shops and that'* (M1-A-38-A), *'I know one SO athlete–She lived in my village – however, when she came back with her medals some people from the village did come out to see her – but she didn't get the welcome home she should have got if she were non-disabled Olympic gold medallist'* (FM-A-18-M) and *'I suppose we have little in common with them, I'm not too sure being honest why none of us have friends with disabilities'* (F1-A-38-C).

Brueggemann *et al.* (2001) have claimed that the reason people with disabilities are not included in our communities is because efforts made to support meaningful inclusion have all been but tokenistic and have fallen short. Community integration and friendship within the confines of an organisational structure fall significantly short of meaningful inclusion. Thus, it is a fair conclusion to arrive at from this study that PWID appear more *'integrated'* in our communities. However, they remain largely invisible when it comes to meaningful community inclusion.

Although Ireland has enacted a glut of rights-based disability specific legislation it would appear the legacy of exclusion has been so systematic, it continues to impact on how PWID experience inclusion in wider society. Coughlan (2010) pointed this out when he claimed that even though we tend to see people with disabilities more often, nine out of 10 people without a disability have never had a disabled person in their house for a social occasion. In the same survey Coughlan (2010) also found that although there is usually widespread support for equality of opportunity, in practice few people have ever had any dealings with people with intellectual disabilities. The findings in this research study are similar to what Coughlan found in 2010 that PWID are also more visible in their communities however, meaningful community inclusion continues to elude them.

6.8.2 Semi-Structured One-to-One Interviews: Inclusion within the confines of the world of disability and Special Olympics

When these findings were put to the five individual interviewees they were generally in agreement that PWID continue to experience a level of exclusion from their communities. However, the reasons put forward as to why they believed this was the case varied:

> '*The SO has "boxed" people off into a specialised category and the fact that you have to have a disability to participate means that only disabled people could be part of the club, however, we still don't see people with ID in the mainstream per se, they don't get jobs like anyone else. Don't get me wrong, I'm sure the SO are doing some very good work, but I think their understanding of what inclusion actually means is very different to mine'*(INT 3), *'I get that, it is all to do with exposure and culture, PWID are underrepresented in our communities and are not really included in any meaningful way. Where we see PWID maybe once a year at these games there is very limited scope for meaningful inclusion within the community. These games are not age appropriate as you see adults are often doing childlike activities.*

This kind of thing does not happen at other sporting events and it does nothing to further the cause of inclusion for PWID' (INT 4) and '*PWID are not making friends without disabilities. That's because PWID do not have opportunities to include anyone else…they are special…I believe that label goes before them'* (INT 2).

Two interviewees were in agreement with the findings from the focus groups stating that they understood why the public might think in this way. However, both also spoke about inclusion as possibly being an '*ideal'* as understood by non-disabled people:

'I understand why the people you spoke with would say that and in a way the images of the SO they viewed probably do suggest it's a club only for PWID and in a way it is. But if we push the inclusion thing too far it may go against the individual choices of the athletes....it maybe something they do not want. Groups tend to naturally stick together, such as PWID being included within their own peer groups. From my experience, people with ID want to stay part of their disability group and not always necessarily want to meet new people in the community. The SO in my opinion are a stepping stone to inclusion' (INT 2) and '*We view inclusion on our own terms but do we truly know what PWID want? They are included among their own friends in the SO and we can't force inclusion onto people. Maybe the SO need to broaden their horizon on what they understand inclusion to be. It's interesting that none of the people you interviewed have a friend with a disability. Maybe the SO are not achieving their claims of creating more inclusive communities for PWID, but I still say you have to experience them to know the great work they do. They do provide opportunities for PWID to meet and socialise with non-disabled people and that type of exposure is important* (INT 5).

One interviewee reflected on the role of society and its impact on how PWID experience inclusion:

'Sure the research tells us most PWID do not have meaningful roles in society, most do not work, education can still be segregated and many PWID don't get to experience anything mainstream. Their disability goes before them. However, some of the blame lies within society and their lack of acceptance of PWID. The mindset in society hasn't changed all that much over the years, and while there may be an acceptance that PWID have rights, society has failed to reach out to PWID. There is a long way to go, but I think disability rights campaigners have started this. Unfortunately, there is still a lot of fear, stereotyping and ignorance of PWID in Ireland today' (INT 1).

Bigby and Fyffes (2010) claimed that social inclusion for people with disabilities is a multi-layered concept that requires action at multiple levels of society to include individual, organisational and community level. In order to assess how socially included PWID are in their communities certain key factors such as having friends without disabilities must be taken into account.

Thus, it would appear that as individuals, PWID who participate in the SO experience inclusion with other club members and feel a strong connection with the SO as an organisation. However, this research found that 99.1% of the sample population did not have a friend with an ID, which in turn means that according to Bigby and Fyffes' (2010), the vast majority of PWID do not experience meaningful social inclusion their local communities.

6.9   CONCLUSION

The findings of this study suggest that some of the images the SO use to portray PWID are viewed positively by the general public in the island of Ireland. On viewing the images the sample population discussed the benefit of participating in physical activity and spoke of how sport can be positive for both physical and emotional wellbeing.

Discussion was also generated on how the SO provided opportunities to learn new skills, make friends with their peers and grow in confidence and self-esteem. Focus group participants also spoke about the sense of pride and achievement they could see in the athletes' faces when participating in the games and especially when they won medals. However, some images were also viewed negatively by the sample population. Images where PWID were seen collecting money raised discussion on the concepts of pity and charity. Many participants also believed some of the pictures were tokenistic in nature, especially where politicians were included and where the athletes won multiple medals.

While acknowledging that across all focus groups in both age groups the findings were very similar, some attitudinal differences were noted. The younger age group appeared more vocal about labels like '*special*', speaking of the negative impact and injustice of them, whereas the older age group did not particularly comment on their impact to any significant level. Some, in the older age groups openly expressed pity towards the athletes after viewing the images. However, the younger age groups did not express feelings of pity or sympathy towards the athletes but did speak about why such images could evoke feelings of pity or sympathy among the general public. Finally, a small cohort of participants in the older age group questioned if participation in the games could support the development of skills, whereas this way of thinking was not evident with the younger age groups.

However, what was most common and evident among all focus groups was the fact that of a sample population of 107 people across the island of Ireland, only one (99.1%) claimed to have a friend with an intellectual disability. When this was further discussed among the groups, participants believed that as they had nothing in common with PWID and would not aspire to participate in events such as the SO, it was only natural that they would not have friends with an ID. While participants were confident that the SO can promote inclusion for PWID, they were referring to inclusion within the confines of the SO and in the world of disability.

It was also interesting to note, that of the 107 participants who took part in this project, only one could name a SO athlete. These findings are further analysed and discussed in the concluding chapter of this research study.

CHAPTER 7

7.0   CONCLUSION AND RECOMMENDATIONS

7.1   INTRODUCTION

Overall this study found that the SO are of significant importance to the everyday lives of PWID. However, they have fallen considerably short in ensuring the transformation of communities that are accepting and inclusive of this minority group. This final chapter will provide a detailed summary of the overall research study to include an analysis of the core themes that arose from the focus groups with the provision of conclusions and recommendations on each theme. The aims of the study will be revisited and discussed in detail and the chapter will conclude with the provision of recommendations based on the evidence arising from the analysis of the findings and core themes that emerged in this research study.

7.2   SUMMARY

The SO are the world's largest sporting organisation for people with intellectual disabilities, with nearly five million athletes in membership in total representing 172 countries worldwide. The SO make the claim they are advocates for creating more inclusive and accepting communities for PWID. Indeed in building community inclusion, they claim their work is to spread compassion and acceptance and to awaken everyone and every community to each person's common humanity. For the SO, this vision of inclusion for PWID starts at local level and is now expanding on a global scale. The SO also make the claim that they are changing the lives of people with intellectual disabilities, solving global injustice, isolation, intolerance and inactivity they face (Special Olympics 2017).

In a similar vein the United Nations Convention on the Rights of Persons with Disabilities (2006) stated that all members of society, inclusive of people with intellectual disabilities have the same human rights which include civil, cultural, economic, political and social rights. One significant remit of the Convention is to ensure that PWID experience meaningful inclusion in their communities just like anyone else. Of equal importance is Article 30 Section 5 '*Participation in Cultural Life, Recreation, Leisure and Sport'* which calls for the enabling of persons with disabilities to participate on an equal basis with others in recreational, leisure and sporting activities.

However, while Ireland has signed up to the Convention, it has yet to ratify it. The Convention then, while of significant importance has had little impact on the everyday lives of PWID in Ireland and many continue to live their lives on the margins of society. It is also interesting to note that according to Sport Ireland (2016, p.4), 'enhancing the proportion of the population engaging in regular physical activity is beneficial for the individual, the community and wider society. Even with our efforts to date and those of other organisations to increase participation in sport and physical activity among people with disabilities, participation levels are still considerably lower than those among the general population; also people with disabilities are significantly more likely to be sedentary than people without disabilities'. Sport Ireland have acknowledged that it is '*policy imperative'* to further focus their efforts and the efforts made by other sport and physical activity organisations to address these issues. It is also worth reiterating that in 2017 HIQA published reports of inspections of disability services which regularly found that PWID were not afforded adequate opportunities for meaningful social inclusion and social participation in their local communities.

Thus, the claims made by the SO of creating more inclusive communities for PWID and tackling isolation warranted further investigation as research and statistics published as recent as 2017 has informed that disability specific legislation and disability service providers have significantly and systematically fallen short in creating opportunities for PWID to experience meaningful inclusion in their communises and society at large.

The overriding purpose of this study was to explore the impact of the images the SO use in portraying PWID on general public attitudes towards this minority group. The author also analysed public attitudes towards the SO and the position of its participants within local communities and assessed how a decade of legislative and social change in how PWID in Ireland are treated has impacted upon the general public. In order to accomplish these aims a detailed account of the how society has typically responded to PWID over the last 150 years was presented. A critical analysis of key disability legislative developments was also provided from the 1800s onward along with various models of disability.

A detailed discussion of how sport and disability can create opportunities for meaningful inclusion for PWID was also presented; and finally an analysis of the concept of inclusion and the difficulties in attempting to define it was explored. Once this literary framework was completed the research was able to progress forward and the author positioned to establish how the SO and the images it portrays of PWID impacted on public opinion towards this minority group. 14 focus groups were facilitated across the island of Ireland totalling 107 participants. The findings from those focus groups were discussed with five topic experts to shed a deeper insight into the themes arising from the focus groups. Thus, through the facilitation of focus groups followed by semi-structured one-to-one interviews with topic experts data was collected, analysed and categorised in order to identify key themes emerging and address the research topic under investigation.

7.3 CONCLUSIONS

7.3.1 Health and Wellbeing

It goes without saying that organisations such as the SO provide important and worthwhile services to people with intellectual disabilities and this research study supports that finding.

On viewing the images of athletes at various SO events many focus group participants expressed positive attitudes and comments about the games and PWID. The SO provide opportunities for PWID to participate in sporting activities and to be active, to socialise and have fun, to make new friends and to learn new skills such as the skills required to participate in team sports. Indeed there is much evidence to suggest that PWID can benefit significantly from being a member of the SO and research has found that many athletes are happier, healthier and more confident. Thus, the SO should be commended for providing opportunities for PWID to be physically active and to participate in sporting events.

Regular participation in physical activity can promote good overall health and wellbeing and participation in physical activity is an essential part of promoting better health among PWID. For many years, particularly under the dependency/medical model of care, PWID were labelled as *'incapable'* or *'sick'* and many lived sedentary lifestyles where the focus was on treatment in the confines of the institution or residential setting. Indeed, according to Collins *et al.* (2000) there was a common belief under the medical model of care that PWID were less capable than the general population and were a '*dependent*' population in turn maintenance and containment of such people was regarded as adequate. Contrary to this belief the SO are providing opportunities for PWID to engage in sporting and recreational activities which important factors in supporting best possible health.

Robertson, Emerson and Gregory (2000) claimed that at this time, because a significant amount of PWID lived sedentary lifestyles they were at greater risk of developing illnesses such as obesity, cardiovascular disease, hypertension, and type 2 diabetes. However, by participating in regular physical activity PWID are reducing the risk of developing such conditions (Dube 2010). According to DeLuigi and Puk (2017, p.88), 'there is a correlation between sport and mental health in disabled athletes...with so many benefits of exercise and competition it is encouraging that these individuals participate in sports'.

Similarly, O'Shea (2017, p.1) has claimed that 'health and wellbeing matter and the United Nations recognises the relevance of health, happiness and well-being as universal goals and aspirations in the lives of human beings around the world, (including PWID) and the importance of their recognition in public policy objectives. Thus, in line with Article 30 Section 5 of the Convention on the Rights of Persons with Disabilities '*Participation in Cultural Life, Recreation, Leisure and Sport'*, the SO providing crucial opportunities for PWID to participate in recreational, leisure and sporting activities just like any other person and to have an opportunity to participate in disability-specific sporting and recreational activities. On observing some of the images of athletes in action at the SO, the majority of focus group participants in both age groups could relate to the positives of sport as they believed that participation in physical activity was not only good for physical wellbeing, but also emotional wellbeing and for building self-esteem.

7.3.2 Teamwork, Togetherness and Fun/Skills Development

The themes of teamwork and skills developments also featured prominently across all focus groups. Most focus group participants on viewing the images felt they promoted a positive image of PWID commenting that they were contributing to a team and could learn new skills. This type of attitude is supportive of the social model of disability, where the focus is that PWID can make valued contributions and learn new skills. According to Butterfield (2016, p.50), teamwork can provide an individual with a sense of belonging and 'people need to feel they are welcome and a valued part of their environment'. Butterfield (2016) also pointed out some of the more obvious benefits of teamwork such as social networking, enhanced feelings of identity and self-esteem. This type of discussion and attitude was very evident across most focus groups and participants on viewing the images could readily identify that being part of a team, social networking and meeting friends was a significant positive of participating in sport and the SO.

Skill development can also be multi-faceted like learning to take turns, learning the rules of the game or learning to pass a ball. However, according to Bainbridge Bernhardt (2010, p.71), 'other skills such as coordination and balance may be gained as the athletes continues to practice'. Again the SO have been proactive in supporting the motor skills development of some of their athletes and according to Auxter, Pyfer, Zittel and Roth (2016, p.291), 'a Young Athletes programme is yet another Special Olympics development to offer motor skills development for children from 2.5 to 8 years of age...the programme focuses on fundamental skills for future sports involvement'. On viewing the pictures of athletes at SO events, focus group participants were generally in agreement that the development of skills (both social and motor) was evident and that this was a positive outcome for PWID. This is in stark contrast to the philosophies underpinning the medical model of disability where the belief was that PWID were a dependent group of people, incapable of learning or developing. Indeed Wolfensberger (1975) claimed under the medical model of disability PWID have been cast into a number of stereotypical negative roles such as '*sick*' '*the eternal child*' and '*wholly innocent*'. Notwithstanding, this research has evidenced that many of the images used to portray PWID at SO events are viewed positively by the general public. Focus group participants appreciated the benefits to be had through participation in sport, believed that athletes were capable of developing and learning new skills, saw that the athletes were part of a team, having fun and enjoying themselves and that they were proud of their achievements.

However, research have claimed that some of the imagery used by the SO promotes negative stereotypes of PWID in turn further perpetuating their segregation and isolation from society and indeed, a number of findings and themes arising across the focus groups supported such claims.

7.3.3 Use of Language and Labels – *'Special'*

Focus group participants (particularly in the younger age demographic 18-23 years) were critical of some of the language used to describe PWID, especially the use of the term *'special'*. They felt the term *'special'* was immediately setting PWID apart from the wider population, it was highlighting differences and also raised questions about the capabilities of PWID. Interestingly, some younger focus group participants viewed this label as demeaning. Indeed, for many PWID being labelled as special has meant that segregation from wider society was the norm. Negative labelling of PWID is a train common to the medical model of disability and as already highlighted in this paper, Wilson (1998, p.43) has claimed that labels such as *'special'* have become over generalised and places the emphasis on the disability rather than the person. In a similar vein, Shakespeare (2013) has stated that labelling has played a significant role in devaluing PWID, focuses on the dependency model of disability and as a result society fails to see their abilities and strengths.

Younger focus group participants appeared to have a heightened awareness of the dangers of labelling. However, older participants tended more to describe their memories of segregated services and education, recalling that there were separate schools for the disabled and they were rarely seen in mainstream settings. Ashcok and Foreman-Peck (2013) claimed that labelling people with disabilities such as *'special'* suggests that the most important part of the person's identity is the label. Ashcok and Foreman-Peck (2013) make an interesting and significant point where they suggested that when using images of PWID in the public domain, organisations might consider using them *only* as illustrations where the disability is simply *'incidental'* to the activity being undertaken. Taking into account that many younger focus group participants did not view the term *'special'* or pictures promoting this term in a positive light, the SO might consider in what way the images they portray of PWID impact on public perceptions of this already marginalised group.

Over the last 20 years much legislation has been passed regarding inclusive service provision for PWID. Indeed many younger age focus group participants were able to discuss seeing children with disabilities in their schools and classrooms whereas the older age bracket spoke more of remembering special, separate and segregated schools for such children. One of the interviewees raised an interesting point that young people in Ireland are more enlightened about concepts of rights, equality and labels. This interviewee made direct reference to the recent referendum on same-sex marriage stating one of the main reasons for the referendum's success was the fact that young people saw it simply as an '*equality*' issue. They also claimed that young people were more enlightened about equality and disability issues in general as they have been more exposed to PWID in mainstream settings as opposed to the older age group. Thus, as younger people become more knowledgeable and aware of the dangers of labelling, the SO might consider what impact such labels have and will continue to have on community inclusion for their most important stakeholder, PWID.

7.3.4   Charity/Pity

Other images of PWID portrayed by the SO were also viewed in a negative way by the focus group participants. Participants from the younger age demographic were critical of pictures of PWID collecting money in public places on behalf of the SO. Many felt it promoted an image of '*charity*' and '*pity*' where PWID were reliant on handouts. Whereas in the older age groups, many participants personalised these pictures reporting they felt sorry for PWID when they saw these images, with some saying it was hard to pass children with disabilities without donating something to the collection. Wolfensberger (1975) claimed this way of thinking was underpinned by the medical model of disability where society held a number of stereotypical beliefs about PWID including viewing them as '*objects of pity'* and a '*burden on charity'*. While it is accepted that funding is an essential part of service provision, the SO might consider the impact that such images have when shown in the public domain and how they impact on the everyday lives of PWID.

Indeed, in the 1970s in the USA some disability activists vigorously campaigned against fundraising initiatives that used images of children and people with disabilities. They claimed that it was exploitation of people with disabilities and certain types of fundraising were paternalistic and encouraged '*pity*' among the general public (Vaughan-Switzer 2003). The findings in this piece of research would concur. The younger age groups vocalised that PWID should not be expected to engage in this activity whereas some in the older age group openly admitted that they felt sorry for PWID when they saw them fundraising. Thus, when the general public view such images of PWID fundraising in public places it raises two schools of thought.

Among the younger age bracket the focus was on '*rights*' where they believed PWID should not have to engage in this type of '*charity*' based activity whereas with the older age bracket the focus was more on '*pitying*' PWID and feeling compelled to donate to the collections. According to Hodkinson (2016), many charities have generally portrayed a distorted image of disability in order to raise money. They purposefully use heart-rending images so as to ensure continued public support for their work. This in turn promotes a model of disability based on charity, pity and dependency. However, Reynolds (2008, p.115) make a very important point about feelings of pity and charity claiming 'pity fuels gestures of giving of what we have in abundance to the less fortunate, those unlike us who are deficient in such graces. Under the influence of pity the allegedly benign intention to understand, accept, help and heal disabilities ironically stymies the genuine welcome of disabled people into our communities. Such irony only deepens social exclusion'. Reynolds (2008) suggested that by donating to charitable causes through feelings of pity we may feel better about ourselves.

Macionis & Plummer (2008) have claimed that such images of people with disabilities based on charity and pity can construct ideas of some people being "*the other*''. In other words whatever they are, they are not you. Thus, by using these images of children with disabilities fundraising in the public domain, it is possible the SO are undermining and compromising their efforts in promoting more inclusive communities for PWID.

This research found that the general public view such images negatively and feel they are equating the concept of disability as either a charitable cause or one to be pitied, neither of which does anything to promote meaningful inclusion. In fact, some researchers would say it achieves the complete opposite, promoting negative stereotypical attitudes among the general public about PWID.

7.3.5 Tokenism

Another theme to arise across most focus groups was one of tokenism. Many focus group participants believed that on viewing some of the images of PWID at SO events there were elements of tokenism involved, specifically in relation to images of politicians with the athletes. Indeed, some participants believed that when politicians turn up to such events they are only furthering their own cause as it looks good in the public domain to be seen supporting such a good cause. However, disability activists would claim that successive political establishments and legislation has only achieved so much in advancing the rights of PWID. Ireland has yet to sign up to the UNCRPD and The Assisted Decision (Capacity) Legislation has not yet fully commenced. Research also informs that many PWID continue to live their lives on the periphery of society. Tabellini and Persson (2002, p.47) claimed that a key assumption about most politicians is that they 'are opportunistic...more precisely, their only motivation is to hold office and they do not particularly care which policies have been implemented'.

Jackson (2016) has claimed that many services today in Ireland continue to work and consult with PWID in a '*tokenistic*' which may look good for the service, but little changes with regard to the person with a disability. Thus, if the SO are to continue to make claims that they are an organisation advocating for and achieving greater community inclusion for PWID they might consider the impact such images have on the wider public and how they interpret them. Of equal importance, they must challenge the political system because of its systematic failure to ensure PWID experience meaningful inclusion in their communities.

7.3.6 Inclusion within the confines of the world of disability and Special Olympics

The final theme to emerge from this research study was that of inclusion or '*partial inclusion'*. Most participants across all focus groups on viewing the images of PWID believed that the SO did indeed promote some type of inclusion. When this was further teased out what participants actually meant was that the SO promote inclusion among PWID within their own network of friends and as part of the SO Games. Interestingly, many participants believed there was nothing unusual in not having a friend with an intellectual disability with some claiming they wouldn't necessarily mix with PWID as they would have nothing in common with them.

Other participants also spoke about being members of various competitive soccer and GAA teams where there were no PWID represented. Again when further discussed participants felt that this would not be unusual as in general, people make connections with other people with similar interests, skills and abilities. As already highlighted in the literature, Robson *et al*. (2003, p.11) claimed that 'there is a clear and explicit relationship between, presence, inclusion and influence'. However, just being physically present somewhere does not mean a person is included in their community. The reality is that many PWID find themselves integrated into their local communities but real and meaningful inclusion has eluded them. Indeed, the process of '*integration*' can be seen as a precursor to true inclusion and that integration is only about the environment. Inclusion is more about the process of participation, not just simply about being 'present' in society. The most striking aspect of this study was the out of 107 people who participated in the research across the four provinces of Ireland, only one claimed to have a friend with an intellectual disability. In mathematical terms 99.1% of the population sampled do not have any friends with intellectual disabilities.

Notwithstanding, it must be remembered that there was a significant level of positive discussion and commentary from all focus groups on viewing some the images of PWID at SO events. Most participants could immediately identify with the general health-related benefits that sport can foster and promote.

Most saw the benefits of teamwork to include growing in confidence, self-esteem, learning new skills and having fun. However, some of the images brought about discussion on concepts such as tokenism, charity, pity and indeed labelling and while most participants believed that the SO can promote inclusion for PWID, they believed that it was inclusion within the confines of the world of disability. What is most disconcerting about this particular finding is that many focus group participants accepted this as the norm.

Many PWID experience little if any friendship with their non-disabled peers and while present in their communities they have yet to be afforded opportunities for meaningful inclusion. Indeed, according to McCarthy and Tzakanikos (2014, p.210), *'many people with intellectual disability speak of their lack of companionship, lack of friends and loneliness'*. PWID may also experience loneliness due to stereotyping, stigma and lack of non-disabled friends and according to Ozane, Bigby and Fyffe (2007, p.209), 'loneliness, experienced as emotional and social isolation, is identified as one of the major problems faced by people with intellectual disabilities*'*. Thus, two observations arise from this finding. Firstly, to what extent do some of the images the SO portray of PWID contribute to their ongoing marginalisation from society? Secondly, if 99.1% of the sample population have no friends with an intellectual disability, what do the SO actually mean when they claim that they are 'transforming communities by inspiring people throughout the world to open their minds and include people with intellectual disabilities and thereby celebrate the similarities common to all people' (Brittain 2010, p.147).

7.4   AIMS OF RESEARCH STUDY

The next section will revisit and discuss in detail the aims of the study, which were as follows:

1. *To explore the impact of the images the SO use to portray PWID on public attitudes towards this minority group.*

2. *To analyse public attitudes towards the SO and the position of its participants within local communities.*

3. *To assess how a decade of unprecedented legislative and social change (2003 – 2013) in how PWID in Ireland are treated has impacted upon the sample population.*

7.4.1 Exploration of the impact the images used by the SO to portray PWID have on public attitudes towards this minority group

This research study has found that the SO are important to people with intellectual disabilities, their families, volunteers and sports coaches. Put simply, the SO matter to PWID. The SO provide vital opportunities for PWID to engage in sporting activities, learn new skills, grow in confidence, maintain a healthy lifestyle and to socialise with team mates and other SO athletes. Indeed, many individuals with intellectual disabilities are very proud to be members of the SO and proud of their achievements at the games. On viewing the images of PWID, most focus group participants across both age demographics could identify with the above positives and benefits of participating in the SO. Thus, some of the images portrayed by the SO of PWID are impacting positively on the general public. Attitudes based on the principles that people can learn new skills and can make a valued contribution support the social model of disability. According to Traustadottir (2009, p.9), 'the benefit of the social model is that it directs attention away from the individual's perceived deficit' and the focus is on ability, what the person can achieve and learning of new skills. There is also recognition under this model that disabled people are more disabled by society than anything else.

However, some of the images were not viewed as positively. In particular, images that showed children with disabilities fundraising, images that included politicians with athletes and images where athletes won multiple medals were seen to be condescending and tokenistic, conjuring up emotions based on pity, charity and feeling sorry for the athletes. According to Carson (2010), such emotions and responses are based on the medical model of disability. While notwithstanding this model has some benefits regarding rehabilitative practices, it is generally viewed as having negative implications where disability is viewed as a problem or personal tragedy.

Carson (2010, p.5) claimed 'the medical model and accompanying personal tragedy model of disability views disability as something worthy of pity, charity and sorrow'. In these instances therefore, the sample population used in this study viewed some of the images portrayed by the SO of PWID in a negative light. Coleridge (1993) has indicated that when pictures of people with disabilities conjure up emotions of pity and sorry then these are both powerful and negative images which impact on public perceptions of this minority group.

In a similar vein Dupre (2012) in (Fenge 2017, p.58) claimed that 'the use of negative images of disability reinforces the marginalisation and oppression of many disabled people'. This in turn can leave people with disabilities at a greater risk of experiencing social isolation, exclusion and loneliness.

Thus, the impact of the images used by the SO to portray PWID have on general public attitudes towards this minority group are both positive and negative. Positives include being part of a team, learning new skills, health related benefits and enhanced self-esteem. However, some of the images conjured up emotions and discussions of pity, tokenism, labelling and charity. Eyben and Moncrieffe (2013, p.68) claimed that 'labelling inherently creates exclusive divisions given that once labelled, there are clear ideological constructions of "*us and them*". That is – labels are ''*a priori*'' exclusionist'. In turn, this finding is of significant importance as it may help explain the second aim of this research study, which was to analyse public attitudes towards the SO and the position of its participants within local communities.

7.4.2   Public Attitudes towards the Special Olympics and the position of its participants within local communities

This research found that public attitudes towards the SO as an entity were generally positive. Despite the fact that this study found some of the images the SO used to portray PWID were viewed negatively, focus group participants could readily identify with the benefits of participation for PWID.

Participants reported that they believed the SO were a worthwhile organisation that did some very good work for people with disabilities. Interestingly, from the few participants that knew about the SO, they were extremely positive about it, claiming it has to be experienced to be truly appreciated. This sentiment was also echoed in two of the semi-structured one-to-one interviews. Most participants also believed that the SO could create opportunities for inclusion for PWID.

However, notwithstanding that there appears to be a positive attitude to the SO as an organisation, this research found that 99.1% of the population sampled did not have a friend with an intellectual disability. When this was teased out with the focus group participants, they believed that because they had nothing in common with PWID, it was only natural they wouldn't seek to befriend them. Other participants said that they would not necessarily aspire to be in the SO and their sporting heroes or role models would not be SO athletes. Interestingly, although many participants believed that the SO could create inclusive communities for PWID, they were referring to inclusion within the world of disability and the confines of the SO.

Although PWID are more integrated, visible and present in our communities this research study found they are not making friends with their non-disabled peers. Ainscow and Farrell (2013) claimed a similar phenomenon has occurred in the world of '*special education'*. They claim that '*integration*' is only a precursor to '*inclusion*' and while many children with disabilities are integrated into mainstream classrooms, this by no means ensures that they experience meaningful inclusion or the culture of the school. In a similar vein, while we are seeing more PWID present in our communities, this research has found that '*presence*' and *'integration'* has not led to meaningful inclusion and PWID continue to exist on the periphery of society where opportunities to make friends with their non-disabled peers are limited to non-existent.

7.4.3 Assessment of how a decade of legislative and social change in how PWID in Ireland are treated has impacted upon participants

The findings from this research study suggest that there are some attitudinal differences between the younger age group to that of the older age group. Younger age participants were born into a world where disability rights based legislation was already enacted, the social model of disability was prominent and PWID were more visible in the community. Thus, they were more aware and more vocal about '*rights*' and '*equality*' issues. Indeed some reported that as part of their schooling programmes they studied social issues to include issues of '*equality*', '*social justice*' and '*rights*'. It was also observed that while the younger age groups could identify why people might feel sorry and pity for PWID, they did not express those emotions at any time during the focus group sessions. According to Lodge and Lynch (2001), in the NDA (2006, p.21), 'an investigation on attitudes towards minorities among young people in mainstream education in Ireland found that young people who had come to know their disabled peers were less likely to define a person by their disability or to regard the person as someone to be pitied'. In turn it would appear that younger people who have been more exposed to PWID, are more aware of the social model of disability, more aware and accepting of diversity and do not see PWID as a group that should be pitied. This research found that the many of the younger age group participants who participated in this study were knowledgeable of the social inequalities PWID routinely encounter and were more accepting of diversity, difference and change. Thus, a decade of legislative and social change has had some positive impacts with regard to younger peoples understanding and attitudes towards PWID. However, while it appears that public attitudes towards PWID are more positive nowadays, this study found that PWID do not befriend or form social bonds with their non disabled peers.

While there were significant similarities found across the older age group some differences were noted. Some of the older age focus group participants openly reported that they felt sorry for some of the athletes on viewing the images of the SO and that their '*heart went out to them*'.

This type of attitude is closer to the medical model of disability, where feelings of pity and sorrow for PWID are the norm. Many participants in the older age groups also had limited exposure to PWID when growing up with some recalling that the disabled went to special segregated schools and they didn't see them too much. Some also had limited expectations of PWID, with comments including 'sure they are just happy to compete' and 'what harm are they doing'. In reviewing the evidence it would appear that a decade of legislative and social change has had minimal impact of the older group participants with the exception that they acknowledged PWID are more visible nowadays. This group were also aware that there was a push for mainstreaming of services for PWID.

An interesting point that arose with participants in two of the older groups was that some felt they wouldn't want their own children to be like some of the SO athletes. When this was further teased out these participants spoke about the type of future the children they observed would have with regard to an education or career. Kafer (2013, p.3) argued that 'the future with regard to disability and disabled people are political decisions and must be treated as such. Rather than assume that a "*good*" future naturally and obviously depends upon the eradication of disability we must recognise that this perspective as coloured by histories of "*ableism*" and disability oppression'. Thus, it is reasonable to assume that a lack of exposure to PWID, poor implementation of disability policy and legislation along with the systematic exclusion of the disabled from society may influence why some of the older age focus group participants expressed such views. One could also argue that such views are legitimate as research as recent as July 2017 informs that people with disabilities are significantly disadvantaged with regard to accessing employment in Ireland. The same research also found that people with disabilities have poorer education participation and outcomes (National Disability Strategy 2017).

The final section of this chapter will present recommendations based on the findings and core themes arising from this research study.

7.5   RECOMMENDATIONS

The Special Olympics Sport and Empowerment Act 2004 Section (2) Paragraph (6) states that 'the SO has demonstrated its ability to provide a major positive effect on the quality of life of PWID, improving their health and physical wellbeing and building their confidence and self-esteem'. The act also identifies the development of skills as a key component and benefit to participation in the SO. The global mission statement of the Special Olympics is to 'strive to create a better world by fostering the acceptance and inclusion of all people' (Wendt 2011, p.473). From an Irish perspective, the official Irish Special Olympics website states that through sport, SO athletes develop both physically and emotionally, they make new friends, realise their dreams, and know they can fit in.

There is no doubt that this research study has found that among the general public in Ireland, there is a belief that the SO does indeed achieve the positive effects as detailed in the above Special Olympics Sport and Empowerment Act 2004. However, the SO claims that they are fostering the acceptance and inclusion of all people, PWID can make new friends and fit in and they inspire people in their communities and elsewhere to open their hearts must be challenged. This research study found that the SO fall significantly short in achieving inclusion for PWID. Rather, the study has found that while PWID are '*present*' and more '*integrated*' into their communities, they remain *'invisible'* with many still viewed with '*compassion*' or as '*objects of pity'*.

The Chief Executive Officer (CEO) of Inclusion Ireland, Paddy Connolly, claimed that even today many PWID continue to live on the periphery of society. In a report issued in the Irish Examiner in January 2017, Connolly stated that the greatest threat to the wellbeing of people who have disabilities is their invisibility and within Europe, Ireland is one of the worst countries for the impoverishment and social exclusion of people who have a disability. Thus, organisations such as the SO, disability service providers and disability policy makers must be challenged when they make claims of fostering acceptance and achieving social inclusion for PWID.

This research study recommends that the SO undertake an assessment of its position within the world of disability service provision and in doing so consider the following two options:

7.5.1 Option 1: Strategic Repositioning – The SO as advocates for Meaningful Inclusion

The SO could consider repositioning itself within the industry of disability service provision. It could seek to lobby and advocate for real and meaningful inclusion and take into consideration how the images, language and labels they use to describe and portray PWID impact on how they experience social inclusion. This would involve the SO undertaking a rigorous assessment and evaluation of their organisation and most importantly a consultation with SO athletes to gain an understanding of how they experience inclusion in their communities and the barriers they face. Such a strategic initiative could not be timelier as in July 2017, the Department of Justice and Equality issued their National Disability Inclusion Strategy for 2017-2021. The Strategy acknowledges that reform is needed across many service sectors to ensure people with disabilities can take part in their local communities. Some of the actions arising from the Strategy will change the way in which some services support people with disabilities. Indeed, rather than making claims to achieving inclusion for PWID, the SO could instead consider becoming advocates for meaningful inclusion. In doing so they must acknowledge the issues and barriers faced by PWID and advocate for political, social, economic and environmental change with the aim to empower people and support meaningful inclusion.

Arnstein's ladder of participation was referred to in the literature review in this study. According to Jackson (2016), there are eight steps to the ladder and disability services can align their mission and actions to various steps. The first five are seen as systems of placating PWID, supporting them in a culture of dependency, disempowerment and tokenism.

Here PWID have no power in the way in which the service operates or they may be consulted with, but little if anything changes. Jackson (2016) claimed that many services in Ireland continue to work with PWID in a tokenistic way. The SO could look to align itself to the top three steps of Arnstein's ladder. According to Arnstein (1969), this is where real and meaningful change happens as the service works with the customer in a process of partnership, delegating power and control. Arnstein refers to this process as degrees of citizen control.

Jackson (2016) claimed that only at this stage PWID can participate in an equal way in the decision-making process as to how their services will operate into the future. According to Wilson, Goldingay, Hanna and Taket (2013), social inclusion can only happen when participation and involvement can be demonstrated to be real, and must never be tokenistic, manipulative, or placatory. Thus, the SO could seek to advocate for 'citizen control 'and 'meaningful community inclusion 'through working in partnership with the athletes and other relevant stakeholders. Marmot (2004, p.2) in Wilson *et al.* (2013) claimed that achieving 'such levels of citizen control and partnership can significantly impact on the everyday lives of PWID and that *'real autonomy'*, as in how much control you have over your life and the opportunities you have for full meaningful social engagement and participation are crucial for health, wellbeing and longevity'. Wilson *et al.* (2013, p.5) went on to claim that 'an individual's experience of inclusion as being associated with connectedness and belonging, as well as right and entitlement is of vital importance. Thus, social inclusion can also be seen as the fulfilment of civic, political, economic, social and cultural rights'.

7.5.2   Option 2: Adaptation of SO mission in line with their achievements and *'uniqueness'* in the world of disability service provision

The SO could consider adapting their mission statement to specifically focus on what it is they actually do, and achieve for PWID. This research found that the SO are of significant benefit to PWID.

Athletes have an opportunity to engage in programmes of physical exercise and can gain the health benefits associated with participation in sport (physical and emotional wellbeing), they can learn new skills (both social and motor), grow in confidence and build self-esteem. It goes without question that the SO make a valid and valuable contribution to the lives of PWID, however, they have significantly fallen short of achieving '*acceptance and inclusion*' for PWID. This should not be interpreted as a direct criticism of the SO, successive governments, legislators and service providers have also failed to ensure that people with disabilities are included in a meaningful way in their communities. However, claims made by organisations such as the SO that they are '*transforming communities*' and '*PWID are accepted and included in society*' require careful consideration, as they give an '*illusion*' of inclusion, when in fact many PWID experience the opposite, which is social isolation.

As already identified in this study, DePauw & Doll-Tepper (2000) claimed that with the development of the social and rights based model of disability many agencies providing support to PWID felt compelled to jump on the '*inclusion bandwagon*'. However, Reid (2003) pointed out that to jump on a bandwagon means accepting a concept or an idea without considering the real issue in full. This literature in this study informs that many PWID do not experience real or meaningful inclusion in their communities and the findings would support the literature. 99.1% of the sample population used reported that they did not have a friend with a disability. Thus, according to the literature and the findings the SO are not achieving their aim of creating more inclusive communities for PWID. That said they do provide a crucial and unique service to PWID. Rather than making sweeping claims about achieving inclusion the SO could consider aligning their mission to what it is they actually do achieve for PWID. In doing so they could also promote their '*uniqueness*' and success within the world of disability service provision.

Some researchers and academics have claimed that the SO should be disbanded altogether as they have done nothing to advance the inclusion of PWID. In fact, some have claimed the SO have achieved the complete opposite and perpetuate oppression and social exclusion.

However, on completion of this research study evidence would suggest that the SO matter to the lives of PWID, their families, volunteers and sports coaches. They also play a crucial role in supporting positive health, skills development, teamwork, self-esteem and provide a platform for PWID to simply have fun. Few, *if any* other disability specific organisations could make such claims.

7.6   CONCLUSION

To conclude, the aim of this research study was to explore the impact of the images the Special Olympics portray of people with intellectual disabilities on public attitudes towards this minority group. In doing so an analysis of public attitudes towards the SO and the position of its participants within local communities were also explored along with an assessment of how a decade of legislative and social change (2003-2013) in how PWID in Ireland are treated impacted upon the sample population.

The findings informed that the on the island of Ireland, the public have mixed viewpoints with regard to the images of PWID as portrayed by the SO. Participants were generally in agreement of interpretation that some of the images of SO athletes they viewed demonstrated a sense of teamwork, togetherness, fun, skills development and overall health and wellbeing. However, some images were viewed more negatively with participants believing they were tokenistic, evoking feelings of pity towards PWID. Interestingly however, while most participants believed that the SO were creating more inclusive communities for PWID, only one claimed to have a friend with a disability. When this was further teased out with participants they spoke about PWID being included within the confines of the world of disability including the SO and believed that as they had nothing in common with PWID, it was only natural that they wouldn't form social bonds with or befriend a PWID.

Finally, at the time of conducting this research study it appears that a decade of legislative and social change has had some positive but limited impacts with regard to the general public's understanding and attitudes towards PWID. This was particularly true for focus group participants aged between 18 and 23 years as they tended to be more knowledgeable of the social inequalities PWID encounter and were more accepting of diversity, difference and change. Some also expressed concerns with the use of labels such as' *special*'. However, how more recently enacted legislation, such as the Assisted Decision Making (Capacity) Act 2015 will continue to impact on the general public's understanding of and attitude towards PWID remains to be seen.

While it appears that public attitudes towards PWID are more positive nowadays, this study found that of a sample population of 107 participants in 14 focus groups facilitated across the four provinces of Ireland, only one claimed to have a friend with an intellectual disability. Notwithstanding these findings, the SO are providing a unique, important and invaluable service to PWID and some of the images they portray of PWID create positive attitudes towards this minority group among the general public. That said, some of the images evoke stereotypical feelings of tokenism and pity and the fact that 99.1% of the sample population in this study do not have a friend with an intellectual disability suggests that not only the SO have fallen short in achieving the aim of creating more inclusive communities for PWID, but so to have other disability service providers.

A number of limitations were also identified in this study including the sensitivity of the topic under investigation and the difficulty some participants had in critiquing the SO. Some participants reported that because the SO were a charitable organisation supporting PWID, they found it difficult to express any negativity towards them. It was also observed that some participants found some of the conversation generated in the focus groups sensitive, particularly when it involved children with disabilities and did not contribute to the discussion because of this. The author acknowledges that the research methodology may not have been as effective as it could have been in order to address some of the more sensitive concepts under discussion.

Indeed, some participants may have been more forthcoming with their opinions participating in a one-to-one interview as opposed to a group setting.

This research study also found that defining inclusion was a difficult task as ultimately it means different things to different people. Notwithstanding, disability theorists and people with disabilities have put forward a number of definitions of inclusion. Common characteristics found in those definitions include having a meaningful role in society, having friends your own age with and without disabilities, being accepted as you are, being included in everyday activities and having roles similar to that of your peers who do not have a disability. The research found that the SO and other disability service providers have made claim to achieving social inclusion for PWID, when the fact remains this is not always the case. While PWID tend to be more visible and integrated into their communities nowadays, meaningful inclusion continues to elude many of them. In order to shed a deeper insight into the reasons as to why disability specific organisations make such sweeping claims about achieving inclusive societies for PWID, (when the fact remains many continue to live out their lives on the periphery of society) requires an in-depth study in its own right and future research

This study also found that 99.1% of the sample population did not have a friend with an intellectual disability. While many focus group participants were knowledgeable on equality issues and were aware of the dangers related to labelling, the vast majority of participants had no '*relational connectedness*' with PWID, but rather saw them as a group of '*other*' people with their own set of friends and own sports and social clubs to attend. The majority of focus group participants also believed that they had nothing in common with PWID and reported that did not mix in the same circles as PWID. Because of this they believed there no reason to strike up a friendship with such a person. Thus, in order to better understand this way of thinking and mindset, further research is required into societal beliefs and attitudes towards PWID so as to gain a broader, deeper and richer insight into the reasons why people without disabilities do not form social bonds or friendships with PWID.

As already identified in this research study, it is imperative that organisations such as the SO, Sports Ireland and other disability service providers continue to provide opportunities and adequate supports for PWID to PWID to participate in sport. Participation in sport can only help address health related issue associated with sedentary lifestyles, but can also provide opportunities to socialise in ones community, be part of a team or club, make new friends, learn new skills and build on self esteem. However, according to Sport Ireland (2016, p.4), 'even with their efforts to date and those of other organisations to increase participation in sport and physical activity among people with disabilities, participation levels are still considerably lower than those among the general population... there is therefore a policy imperative to further focus the efforts of Sport Ireland and relevant sport and physical activity organisations to address these disability gradients'.

To conclude, this research found that the SO provide a worthwhile (some would even say essential) service to PWID. Indeed, they hold a unique position in the world of disability service provision as being one of the biggest and most influential sporting organisations specifically for PWID. They have challenged the archaic '*dependency*' model of care by showcasing that PWID can learn and develop new skills, can be part of a team, can participate in the world of sport and can have fun while doing so. However, they should give consideration to the claims they make with regard to creating inclusive and accepting communities for all PWID. This is not the lived reality for many PWID. As an influential sporting body, if they wish to continue with the '*inclusion agenda*' they should seek to lobby politicians, community groups and other disability service providers to create real and meaningful opportunities for the social inclusion of all PWID. Most importantly, the SO must take into consideration how some of the images, language and labels they use to describe and portray their athletes, impact on public opinions and attitudes towards PWID.

Alternatively, the SO could move away from the '*inclusion agenda*' and seek to realign their Mission to focus on what it is they are achieving for PWID.

That is, they are providing a unique platform for PWID to engage in sporting activities, to be part of a club, to learn and develop new skills and to simply have fun. Thus, it goes without saying that the SO are important to the everyday lives of many PWID. It is also important to reiterate that this focus on their activities should not be interpreted as a criticism of the important work they undertake, the services they provide or the people who work with and volunteer their services to the SO. However, it is imperative that claims made by organisations such as the SO, about achieving social inclusion and acceptance for PWID are evaluated and researched. Such research activity may provide the SO with opportunities to identify areas for policy improvement and better implementation, realise their goals more effectively and adapt their activities in order to enhance social outcomes and quality of life for their athletes.

8.1. APPENDIX 1: LANDMARK DEVELOPMENTS DISABILITY SERVICE PROVISION AND LEGISLATION

1833
- **Dangerous Lunatics Act** enacted (for people deemed to be *'dangerous'* and/or *'lunatic'*).

1838
- **Poor Laws** passed (for the deserving and undeserving poor – disabled classed as undeserving poor).

1842
- **Development of Workhouses** (for poor, needy or those that couldn't *'fend'* for themselves).

1846
- **The Irish Potato Famine** (witnessed overcrowding of the workhouses - management struggled with providing services to the *'mentally handicapped'*).

1871
- **The Lunacy Regulation (Ireland) Act** passed (for people defined as *'idiot, lunatic or of unsound mind'*. This Act witnessed the development of asylums and institutions from the late 1800's and 1900's onwards).

1900's
- **Emergence of the Medical Model of Disability** and growth of institutions (such as Youghal in Cork, Portrane in Dublin and Stewarts Institution for *'Idiotic and Imbecile Children'* in Dublin - all underpinned by a philosophy of exclusion),

1950's
- **Community based services begin to emerge for people with disabilities** (for example St. Michael's House).

1961
- **NAMHI is launched**. (They change their name **to Inclusion Ireland** in 2006).

1990's
- **Emergence of the Social Model of Disability** (witnessed a surge in community based services for people with disabilities)

1998
- **The Employment Equality Acts** passed (outlaws discrimination on the grounds of disability in employment)

1999
- **Establishment of the National Disabiltiy Authority** (independent state body providing expert advice on disability policy and practice to the government).

2000
2004
- **Education Act & Equal Status Act** passed in 2000
- **The Special Olympics** held in Dublin to signifncant international acclaim in 2003
- **The Education for Persons with Special Educational Needs Act & Equality Act** passed 2004

2005
- **The Disability Act** passed (places statutory obligation on public service providers to support access to services and facilities for people with disabilities).

2007
- **The Citizens Information Act** passed (witnessed the establishment of the National Advocacy Service in 2011).
- **The Health Act** is passed (witnessed the establishment of HIQA and Registration of Disability Services in 2013).
- **The United Nations (UN) Convention on the Rights of Persons with Disabilities** (Ireland yet to ratify Convention).

2015
- **The Assisted Decision (Capacity) Act** passed to replace the *'archaic'* Lunacy Ireland (Regulation) Act 1871

2017
- **The Disability Inclusion Strategy** launched in July 2017 (The Strategy , launched by Minister of State for Disabilities Finian McGrath aims to take a whole Government al approach to improving the lives of people with disabilities).

8.2 APPENDIX 2: NATIONAL INTELLECTUAL DISABILITY DATABASE 2016

Number of people registered on the NIDD in 2016
28,275

Male 16,629 (58.8%)	Female 11,646 (41.2%)

Level of intellectual disability

	N	%		N	%
Mild	5,316	(32.0)	Mild	3,864	(33.2)
Moderate	6,743	(40.5)	Moderate	4,881	(41.9)
Severe	2,309	(13.9)	Severe	1,689	(14.5)
Profound	467	(2.8)	Profound	394	(3.4)
Not verified	1,794	(10.8)	Not verified	818	(7)

CHO Area of registration*			Age group		
	N	%		N	%
Area 1	2,652	(9.4)	0-4 years	911	(3.2)
Area 2	3,255	(11.5)	5-9 years	2,919	(10.3)
Area 3	2,384	(8.4)	10-14 years	3,090	(10.9)
Area 4	4,198	(14.8)	15-19 years	3,222	(11.4)
Area 5	3,572	(12.6)	20-34 years	6,352	(22.5)
Area 6	1,385	(4.9)	35-54 years	7,701	(27.2)
Area 7	3,686	(13.0)	55 years+	4,080	(14.4)
Area 8	3,792	(13.4)			
Area 9	3,351	(11.9)			

* The 9 Community Health Organisations (CHOs) are:

Area 1 - Donegal, Sligo/Leitrim/West Cavan, Cavan/Monaghan
Area 2 - Galway, Roscommon, Mayo
Area 3 - Clare, Limerick, North Tipperary/East Limerick
Area 4 - Kerry, North Cork, North Lee, South Lee, West Cork
Area 5 - South Tipperary, Carlow/Kilkenny, Waterford, Wexford
Area 6 - Wicklow, Dun Laoghaire, Dublin South East
Area 7 - Kildare/West Wicklow, Dublin West, Dublin South City, Dublin South West
Area 8 - Laois/Offaly, Longford/West Meath, Louth/Meath
Area 9 - Dublin North, Dublin North Central, Dublin North West

8.3 APPENDIX 3: PARTICIPANT INFORMATION SHEET

SUBJECT INFORMATION SHEET

Title:

An exploration of the impact of the images the Special Olympics portray of people with intellectual disabilities on public attitudes towards this minority group.

Sub title:

An investigation into whether the Special Olympics is achieving its aim of ensuring that people with intellectual disabilities (PWID) are respected and included in society or if, paradoxically, they actually serve to reinforce negative stereotypes about members of this group and thus, perpetuate segregation and oppression.

Invitation:

You are being invited to participate in a research study. Before you decide whether to participate or not, it is important you understand what the research is for and what you will be asked to do. Please read the following information and do not hesitate to ask any questions about anything that might not be cleat to you. Ensure that you are happy and understand what is being asked of you before you decide what to do. Thank you for taking the time to consider this invitation.

This research study is for the award of Doctor of Philosophy (PhD) in Health and Life Sciences from the University of Ulster, Faculty of Health and Life Sciences, Ulster Sports Academy, Jordanstown, Shore Road, Belfast

Purpose of Study:

The proposed aim of this research project is to investigate the impact that the Special Olympics and its representation of people with disabilities have on perceptions of, and attitudes towards, members of this minority group. This research aims to explore whether the Special Olympics are promoting a positive attitude towards people with disabilities within mainstream communities in Ireland or if they are actually perpetuating inequality and segregation through unintentionally reinforcing negative

stereotypes. It will analysis if, in their efforts to promote an image of success and ability, the Special Olympics are actually highlighting disability.

The main objectives of this research project are:

1. *To explore the impact the images used by the SO to portray PWID have on general public attitudes towards this minority group.*

2. *To analyse public attitudes towards the Special Olympics and the position of its participants within local communities.*

3. *To assess how has a decade of legislative and social change in how PWID in Ireland are treated has impacted upon participants.*

Why you have been chosen:

Group 1: The research seeks participants in 2 specific age brackets (18 years – 23 years of age and 38 years to 43 years of age.). People who are 18 years – 23 years typically have only '*lived*' experiences of a more inclusive/mainstream society for PWID. This means that participants in this age bracket (from a policy and legal perspective) have only been exposed to a rights based model and social model of intellectual disability. In *theory* your understanding of intellectual disability should be ideally based on concepts of positivity and inclusion

Group 2: People who are 38 years – 43 years of age were 28 at the time when the Special Olympics (SO) came to Ireland in 2003 and have witnessed significant legislative changes promoting inclusion and rights for PWID. (For example the Disability Act 2005 and the Health Act 2007). If you are in this age bracket, you have typically life experience of both medical and social models disability. In *theory* you have witnessed a model of disability based on 'dependency' and 'charity' and a model of disability based on positivity and inclusion.

The research will compare and contrast how both age groups interpret how the SO portrays PWID, the position of SO athletes in the community and how has a decade of change in how PWID in Ireland are treated impacted upon informants?

You have been invited to partake in this project as you are within the required age bracket. However, an equal number of males and females are required for each group as is an even urban/rural participation.

There will be approximately 8 people in each focus group. Each group will either be 18 – 23 years of age or 38 – 44 years of age. There will be four male and four females in each group from both rural and urban communities. In the event of too many participants agreeing to take part the researcher will have to eliminate participants once his inclusion criteria has been reached for each focus group.

Do you have to take part?

It is up to you whether you agree to take part or not. If you do decide to take part you will be given this information sheet to keep. You will also be asked to sign a 'Consent Form'. If you choose to take part, you can change your mind at any time and withdraw from the study without providing a reason.

What will happen if you agree to take part?

You will be required to take part in a focus group (with 7 + other participants), which will be facilitated by the PhD candidate Ray Lynch. A focus group is a group discussion based on the research topic, in this instance, disability and sport.

The researcher will record all information and discussion that takes place by means of a Dictaphone/digital recorder. He will also take notes. The discussion will last approximately one hour and all participants will have an opportunity to contribute.

The researcher Ray Lynch will welcome each participant individually and clearly set the scene. At this stage you will also be asked to read and sign a Consent Form, which will be given to you before the session starts. The aims and objectives of the research will be explained briefly to the group.

You will be asked to introduce yourself to the group and you will be asked a short introductory question on your experience, if any, of intellectual disability.

Once the introductions are complete you will be asked to look at a number of images of people with intellectual disabilities participating in the Special Olympics.

These images will act as a stimulus for conversation. As the facilitator I may steer the group back to the topic of discussion should it stray to a different topic. I will also try to ensure to keep everyone engaged and encourage everyone to participate. You will be shown some pictures of people with intellectual disabilities participating in the Special Olympics and your opinions and discussion will be sought on these images. Questions that might be asked of you and the group are as follows: What impact do you believe these images have on the general public's perception of PWID? Do you think sport; through the Special Olympics has the same benefits for PWID as for members of the wider community? The session will end with a closing round, asking each participant to offer some final reflections on the topic under discussion. You are not required to undertake any preparations for the focus group.

Benefits of participation:

By participating in the focus group you are in a position to give your opinions and your understanding of how the Special Olympics impacts on representations of people with intellectual disabilities. The researcher will be in a position to discover how each group feels about the research topic and why they hold certain opinions. Participation will help deepen the understanding between the complex relationship between sport and disability. Through discussion the group are in a position to identify possible strategies to any issues that may be identified, such as barriers to inclusion and positive imagery. The main aim of the discussion is the advancement of social justice for PWID within their wider communities

Confidentiality:

All data generated for this study will be securely held on an encrypted laptop and USB pen. The researcher is the sole person who holds the password for both. The password is a complex combination of letters, words and symbols. All written notes will be locked in a filing cabinet in the researcher's place of work and only he has a key to this storage unit.

At no time will any participant be identifiable in the research; all information will be treated as confidential and will only be made available to the researcher, Chief

Investigator, relevant staff of the University of Ulster and External Examiners. (As required by the Data Protection Act and Freedom of Information).

All information will be destroyed in the time line as required by UU

What will happen to the results of this study?

This study will lead to the achievement of a PhD in Health and Life Sciences for the researcher. It is envisaged that some part of the research will be published (2015) in a relevant journal such as the Journal of Sport and Social Science or Sport in Society. The study may also give further insight into how the world sport and the Special Olympics can promote more inclusive communities for people with intellectual disabilities.

Organising and funding of research:

The researcher is undertaking this study with the University of Ulster, Faculty of Health and Life Sciences, Ulster Sports Academy with the supervision of Professor David Hassan, Professor of Policy and Sport Management. The researcher, Ray Lynch is self funding this study.

Review of study:

This study has been reviewed by Professor David Hassan, Professor Eric Wallace and Dr. Paul Darby. It is also reviewed by the Ethics Committee of the University of Ulster in accordance with the Universities policies and procedures. Should you require any additional information please contact the University Research Ethics and Governance Department for further details. Their contact details are as follows: Nick Curry at 028-90366629

Contact Details:

Should you require any additional information on this research study please contact either

Ray Lynch: raylynch38@gmail.com Gate Keeper (will add named and email of relevant gate keeper in each College)/ Thank you for taking the time to consider participation on this research project

Signed:_____

8.4 APPENDIX 4: PARTICIPANT CONSENT FORM

Title of Project

An exploration of the impact of the images the Special Olympics portray of people with intellectual disabilities on public attitudes towards this minority group.

Sub Title

An investigation into whether the Special Olympics is achieving its aim of ensuring that people with intellectual disabilities (PWID)are respected and included in society or if, paradoxically, they actually serve to reinforce negative stereotypes about members of this group and thus, perpetuate segregation and oppression.

Name of Chief Investigator: **Professor David Hassan**

Please Initial

I confirm that I have been given and have read and understood the information sheet for the above study and have asked and received answers to any questions raised

I understand that my participation is voluntary and that I am free to withdraw at anytime without giving a reason and without my rights being affected in any way

I understand that the researchers will hold all information and data collected Securely and in confidence and that all efforts will be made to ensure that I cannot be identified As a participant in the study (except as might be required by law) and I give permission for the researchers to hold relevant personal data

I agree to take part in the study

_____
Name of Subject   Signature   Date

_____
Name of Person taking Consent Signature   Date

_____
Name of Researcher   Signature   Date

One copy for the subject: One copy for the Researcher

8.5   APPENDIX 5: INTERVIEWEE INFORMATION SHEET

Title:

An exploration of the impact of the images the Special Olympics portray of people with intellectual disabilities on public attitudes towards this minority group.

Sub title:

An investigation into whether the Special Olympics is achieving its aim of ensuring that people with intellectual disabilities (PWID)are respected and included in society or if, paradoxically, they actually serve to reinforce negative stereotypes about members of this group and thus, perpetuate segregation and oppression.

Invitation:

You are being invited to participate in a research study. Before you decide whether to participate or not, it is important you understand what the research is for and what you will be asked to do. Please read the following information and do not hesitate to ask any questions about anything that might not be cleat to you. Ensure that you are happy and understand what is being asked of you before you decide what to do. Thank you for taking the time to consider this invitation.

This research study is for the award of Doctor of Philosophy (PhD) in Health and Life Sciences from the University of Ulster, Faculty of Life and Health Sciences, Ulster Sports Academy, Jordanstown, Shore Road, Belfast

Purpose of Study:

The proposed aim of this research project is to investigate the impact that the Special Olympics and its representation of people with disabilities have on perceptions of, and attitudes towards, members of this minority group. This research aims to explore whether the Special Olympics are promoting a positive attitude towards people with disabilities within mainstream communities in Ireland or if they are actually perpetuating inequality and segregation through unintentionally reinforcing negative stereotypes.

The main objectives of this research project are:

1. *To explore the impact the images used by the SO to portray PWID have on general public attitudes towards this minority group.*

2. *To analyse public attitudes towards the Special Olympics and the position of its participants within local communities.*

3. *To assess how has a decade of legislative and social change in how PWID in Ireland are treated has impacted upon participants.*

Why you have been chosen:

I am approaching you to participate in this study because of your background knowledge and expertise on the topic under investigation. I wish to discuss with you the findings and themes arising from the focus groups so as to get a deeper and richer insight into the research topic. This would provide for an opportunity to gain a deeper insight and understanding of the findings and themes arising from the analysis of the focus groups. The following section explains why and how the focus groups participants were chosen for this study

FOCUS GROUPS EXPLAINED TO INTERVIEWEES:

Group 1: The research sought participants in 2 specific age brackets (18 years – 23 years of age and 38 years to 43 years of age.). People who are 18 years – 23 years typically have only '*lived*' experiences of a more inclusive/mainstream society for PWID. This means that participants in this age bracket (from a policy and legal perspective) have only been exposed to a rights based model and social model of intellectual disability. In theory their understanding of intellectual disability should be ideally based on concepts of positivity and inclusion

Group 2: People who are 38 years – 43 years of age were 28 at the time when the Special Olympics (SO) came to Ireland in 2003 and have witnessed significant legislative changes promoting inclusion and rights for PWID. (For example the Disability Act 2005 and the Health Act 2007). Participants in this age bracket, have typically life experience of both medical and social models disability. In theory they have witnessed a model of disability based on 'dependency' and 'charity' and a model of disability based on positivity and inclusion.

The research will compare and contrast how both age groups interpret how the SO portrays PWID, the standing of the SO and its participants in society and how a decade of change in how PWID in Ireland are treated impacted upon informants?

Benefits of participation:

By participating in this interview you are in a position to give your expert opinion, understanding and shed additional light on the findings and themes arising from the analysis of the focus groups.

Confidentiality:

All written notes will be locked in a filing cabinet in the researcher's place of work and only he has a key to this storage unit.

At no time will any participant/interviewee be identifiable in the research; all information will be treated as confidential and will only be made available to the researcher, Chief Investigator, relevant staff of the University of Ulster and External Examiners. (As required by the Data Protection Act and Freedom of Information).

All information will be destroyed in the time line as required by UU

What will happen to the results of this study?

This study will lead to the achievement of a PhD in Health and Life Sciences for the researcher. It is envisaged that some part of the research will be published (2015) in a relevant journal such as the Journal of Sport and Social Science or Sport in Society. The study may also give further insight into how the world sport and the Special Olympics can promote more inclusive communities for people with intellectual disabilities.

Organising and funding of research:

The researcher is undertaking this study with the University of Ulster, Faculty of Health and Life Sciences, Ulster Sports Academy with the supervision of Professor David Hassan, Professor of Policy and Sport Management. The researcher, Ray Lynch is self funding this study.

Review of study:

This study has been reviewed by Professor David Hassan, Professor Eric Wallace and Dr. Paul Darby. It is also reviewed by the Ethics Committee of the University of Ulster in accordance with the Universities policies and procedures. Should you require any additional information please contact the University Research Ethics and Governance Department for further details. Their contact details are as follows: Nick Curry at 028-90366629

Contact Details:

Should you require any additional information on this research study please contact either

Ray Lynch: raylynch38@gmail.com or

Professor David Hassan: d.hassan@ulster.ac.uk

Signed: Ray Lynch

8.6 APPENDICES – TRANSCRIPTS FOCUS GROUPS

8.6.1 APPENDIX 6a: Transcripts of Focus Groups

Munster: Focus Group A 18 – 23 (County Clare)

Prior to starting the focus group the moderator introduced himself to the group and explained briefly what the research project entailed. Participants were invited to take a few minutes to review the '*Participant Information Sheet'* (See Appendix Three) which detailed the research topic, their invitation to participate, the purpose of the study, rationale for their invitation to participate, details with regard to consent, benefits of participation, anonymity and confidentiality matters, funding of the project, ethical approval and the researchers assigned supervisor.

Once participants had reviewed the '*Participant Information Sheet'* they were then asked to read a *'Consent Form'* (See Appendix Four)which detailed the title of the research project, the University and relevant department where the research was being undertaken (University of Ulster – Department of Health and Life Science), contact information of the chief investigator, confirmation that they had read the Subject Information Sheet, the understanding that participation was voluntary, how the data would be safely secured and anonymity assurances. Once participants had read the *'Consent Form'* and were satisfied with same, they were asked to sign it, acknowledging that they had voluntarily agrees to participate in the focus group. No participant, their place of work or place of education was identified at any time in these transcripts. Where a participant mentioned another's participants name, or where a college or place of work was mentioned, these details were omitted from the transcripts and replaced with xxxx.

On completion of each focus group all participants were thanked for their time and effort put into each focus group.

Coding System used for Participants so as to ensure anonymity

Females	=	F1-A-18-M	=	Female 1 Focus Group A 18 – 23 Munster
Male	=	M1-A-18-M	=	Male 1 Focus Group A 18 – 23 Munster
Researcher	=	M	=	PhD Candidate UU Health & Life Sciences

Overview of Group:

No. of Participants in total	8 participants
No of Female participants	6 female participants
No of Male participants	2 male participants

FOCUS GROUP BEGINS:

Moderator: Hello I'm Ray I'm doing a PhD in H &LS with the UU and has been approved ethically as well and I have consent forms for you to sign as well. I am looking specifically at images of disability as well as sport. However, before we start – just tell me who you are your first name and if you have any experience of disability whether it be professionally, or volunteering or personal. You don't need to go into detail – you can say I have or have not. So we will start here with yourself

F1-A-18-M: Hello my name is xxxxx.

Moderator: Thank you.

F2-A-18-M: Hello my name is xxxxx and I have done just a little bit of volunteering with disabilities.

(Last word inaudible)

Moderator: Thank you, next please.

F3-A-18-M: Hi my name is xxxx.

Moderator: Thank you.

M1-A-18-M: My name is xxxx and last year as part of my course I worked in a centre with disabilities.

Moderator: Thank you.

M2-A-18-M: Hi Hello my name is xxxx.

Moderator: Excellent thank you.

F4-A-18-M My name is xxxx and I did in the past some work experience with people with disabilities last year.

Moderator: Thanks a million.

F5-A-18-M: Hi my name is xxxx.

Moderator: Than k you.

F5-A-18-M: Hi my name is xxxxx.

Moderator: Thanks a million.

F6-A-18-M: Hello my name is xxxx.

Moderator: Ok thanks a million So what I want to do before we get into this – I want to ask you as a group of young people in relation to sport, when you see images of sport what do you see the positives of sport being in general.

M1-A-18-M: Socialising I suppose is the main factor like a team sport say and the like.

Moderator: OK so socialising and team sports, what do we mean by team sport?

M1-A-18-M: Emm like a hobby emm, say like is examples of team sport like.

Moderator: Say for example how does socialising and team sport go together? What is the connection?

M1-A-18-M: I suppose you interact with people on a team say like you have to work together say to win matches or whatever.

Moderator: OK work together to win matches – any other positives of sport?

F2-A-18-M: You can build up relationships in the community, in the community like.

Moderator: Can I ask you how that might happen?

F2-A-18-M: Emm I suppose even like if there were spectators, sap people with disabilities– well then they would be integrating in the community and community life and be a part of it.

Moderator: So being integrated, any other positives of sport.

F5-A-18-M: It's good for your mental health.

Moderator: It's good for your mental health – yea – any others positives? SO we have mentioned mental health, inclusion, teamwork etc.

F1-A-18-M: They are learning a new skill yea like how to play football.

Moderator: OK learning a new skill.

F1-A-18-M: And the positives to that like.

Moderator: OK so there are a lot of positives. Ok can I ask you what's your understanding of the word the world athlete? What do you think of when you hear the word 'athlete'?

F4-A-18-M: Running.

F1-A-18-M: Yea running.

M2-A-18-M: Running like.

Moderator: OK running, anything g else?

F6-A-18-M: Solid physique – not fat

(Group laughs)

Moderator: Ok so – solid physique – what else (I have to actually record that – in references to the not fat comment). What else?

F1-A-18-M: Eh like a runner or the Olympics like.

F4-A-18-M: Professional like– yea a professional.

Moderator: Sorry xxxx - were you trying to say something.

F6-A-18-M: Ambition like – people who are extremely determined to reach that goal and dedicated

(Group laugh again here)

Moderator: Determination and dedication athletes and Olympics – any others ideas?

F5-A-18-M: Someone who is focused.

208

Moderator: Focused?

F5-A-18-M: Yea – they are focused on what they want to get out of it like.

Moderator: Ok so they are focused on the end result and what they want to get out of it – Ok so you have touched on it – very quickly - do you think the concept of sport can promote inclusion in general?

Multiple Participants: Yes yea

Moderator: So I know you are saying yes, but why are you saying yea? It quite easy to say yes – so why are you saying that? In your opinion why say yes?

M1-A-18-M: Well you spend time with a group of people – you may spend time through a whole season and you get to know people and you get to know what strength and weaknesses they have and you learn to help them through it whether you are on or off the pitch and you might know if this fella had an issue and you might ask him about it cos you would know what he's been through cos you are with him for a whole season or a few years if you are on the same team.

Moderator: Alright, ok so you spend time with people and you connect with people.

F1-A-18-M: And when you're on a team like and the longer you spend with each other the more you get to know each other.

F2-A-18-M: And when you're in a team like you make sure no one is left out – because you always work as a team to make sure everybody's together.

Moderator: So you said teamwork as well – Anyone else want to add how sport can support inclusion for people?

F6-A-18-M: Sport shouldn't discriminate – it's all about coming together for a common goal to be either playing a certain sport or whatever so its all about playing a sport and enjoying it.

Moderator: You said one word there if I can come back to it – you said shouldn't – are you saying shouldn't or doesn't.

F6-A-18-M: Well it shouldn't but it probably does.

Moderator: Right so it shouldn't.

F6-A-18-M: Yea.

Moderator: Ok that's fair enough.

F6-A-18-M: Yea but there is discrimination everywhere – but so it shouldn't discriminate.

Moderator: Any other ways sport can promote more inclusive communities for people in general?

F1-A-18-M: Well it's the social aspect as well you know like after matches you know like the gatherings – like a team might meet up over Christmas – like there are more social aspects to it just like they meet up to go training you know like the social aspect to it.

Moderator: Ok so you can connect outside of it – its not just sport – different things can come of it – Do you think the concept of sport itself can promote the concept of dignity and equality?

F5-A-18-M: I think at the moment especially after yer man coming out in Cork Donal OG you know like you know he is probably only the first hurler that stood up and say he was gay like – and there i actually equality there towards him and people respected him for that like. So he is promoting you know like making it easier for other people to kinda to say that they are different or they are like gay.

Moderator: Any other ways sport can promote more inclusive societies focussing on equality and dignity?

F2-A-18-M: It's a common thing like I mean everyone is coming together for the one thing – so you should leave everything else at the door and in a race it shouldn't matter what sex you are.

Moderator: Ok so it's a common goal as in a whole team people can focus on.

F2-A-18-M: It doesn't matter where you are coming from you background or

F5-A-18-M: Even the fact that all people can play the same sport like when you say soccer like there is such a thing as women's soccer and the fact that it is equal – Easy knowing I play soccer.

Moderator: Do you play soccer?

F5-A-18-M: I do yea (some conversation re: Stephanie Roche – at times not audible/people speaking over each other).I think that is equality that both men and women can play it and that it's not just men playing it like women are starting to get more recognised but still it's there for both whereas hockey you might say is for girls and not as much about boys. It goes two ways.

210

Moderator: Ok what I am going to do is show you some picture (make sure you can see them) can you all see them and I will let you look at them a couple of times (Move around closer if you wish) Do you think those pictures promote a positive image of PWID.

(Observe a lot of nodding (body language and had to double check that all participants could see the pictures – then let group observed them a couple of times to make notes)

F1-A-18-M: Well they are all smiling they are happy.

M1-A-18-M: Everyone is happy.

F2-A-18-M: Yea they are all happy out like.

Moderator: What else do you see in these pictures/images?

F6-A-18-M: It doesn't really matter what you have like (Participant interrupted here by other participant) they are excited with their medals.

F6-A-18-M: They are doing what they can – there a picture there of a boy with a walker like he is still doing the best he can.

F2-A-18-M: It doesn't really matter – nothing is holding him back.

Moderator: Ok any other positives there – does everyone feel that they can see positivity there for people with disabilities?

F5-A-18-M: Yea they look like they are enjoying themselves and are proud of what they are doing and its looks so natural like – it's not posed like oh look at mw what have you. You know liken they are so proud of themselves.

F2-A-18-M: And they are winning medals like – they are wining.

Moderator: Ok.

F2-A-18-M: They are not just taking part they are winning.

Moderator: So they have won medals, they are not just taking part, people look happy, people are smiling.

F5-A-18-M: And they are in pictures with teams like all their team mates are smiling with them as well like, they are going through it with them.

Moderator: So you are saying participation and team work is important as well.

F6-A-18-M: nothing is really holding them back like.

Moderator: Any other positives there do you feel? Generally you are seeing positives across the board.

Group as a whole: Yes – absolutely.

Moderator: Ok can I just change this slide show to a different one and again you are going to see a different set of pic here – there are only 4 of them and again the same questions – just watch them or a few minutes – again the same questions – watch them for a few minutes as they move around the screen – again the same questions - do you think those pictures promote a positive image of people with disabilities. Remember you spoke about teamwork, dignity, respect, socialisation earlier – do you think these images promote a positive image of people with disabilities?

(Silences for a few moments – Moderator reminded participants there was no right or wrong answers to reassure them)

F2-A-18-M: The pictures are all posed like they all looked posed.

F6-A-18-M: Yea.

M2-A-18-M: They are not as natural.

Moderator: So you feel this group of pictures may not be as natural as the last set.

M2-A-18-M: It's like bringing in a public figure I suppose to kinda emphasise it more – I don't know maybe to make those famous people look better.

F2-A-18-M: Yea –that's all to do with public relations like.

M2-A-18-M: To make them look better.

F2-A-18-M: Yea exactly, to make those people look better.

Moderator: That's a bit cynical

(Group laughs)

F2-A-18-M: Were from Ireland like.

Moderator: Ok do you feel that the other people in the photographs are in it for themselves? Is that what you are wondering?

F6-A-18-M: I am not saying they have no interest at all – but it looks good.

Moderator: So it looks good for the famous people to be seen in these photographs.

F6-A-18-M: Yea (many in group agree, head nodding).

M1-A-18-M: but it will help publicise things as well if there are famous people in the pictures.

Moderator: OK any other positives you can see here?

F2-A-18-M: I think the picture of the boy ion the wheelchair with the special apparatus for bowling – like that's a positive picture like it shows that even though you can't actually physically bowl if you don't have the use of your legs well they can find a way to do it for ye so that does promote inclusion and finding a way to do it against the odds but I think the rest of the pictures are all posed for the camera.

Moderator: Why do you think they are posed? What are the reasons?

F2-A-18-M: for the attention.

F6-A-18-M: Or maybe to promote PWD in sport - it might not necessarily be a bad thing – but just that particular one there – is that Gordon Brown –that's very – well he is kinda looking down on her.

M2-A-18-M: It could be just that these famous people are here and saying look these people do normal things and can do very well – whereas if you didn't have a famous person it might not get publicised or no one would see it – it can bring it to a bigger range of people.

Moderator: You were all children when the SO came to Ireland in 2004 and indeed to significant international acclaim– does anyone remember it – It arrived to significant international acclaim.

Multiple participants: Yea yes.

Moderator: I want to ask you – can you name any Olympian who won a medal in the Olympics?

F6-A-18-M: Sonia O'Sullivan.

M1-A-18-M: Katie Taylor.

F1-A-18-M: that other girl with the blondy hair who won medals – she was a runner as well.

F2-A-18-M: Paula Radcliffe – was she Irish?

F1-A-18-M: No – she is English.

F2-A-18-M: She has blondish hair.

F4-A-18-M: the boxers as well – John Joe O'Neil.

Moderator: Ok why can you name those people? Particularly Sonia O'Sullivan – that was a long time ago as well – why do you know those people won medals?

F2-A-18-M: The TV.

Moderator: OK can you name some of our own gold SO gold medallist?

(Silence for moment – no one can identify a SO gold medallist.

Moderator: Why can't we name a SO gold medallist?

F6-A-18-M: Well it's not publicised enough and its not promoted and in the real Olympics like Ireland would be lucky to win 2 or 3 medals but in the SO nearly everyone wins medals like. The news focuses on the group because there are so many winners.

F2-A-18-M: I think there is a guy from xxxxxxx – but I can't think of his name I think he might have one medal – does anyone know him?

M2-A-18-M: Wasn't there was a guy from Ireland who was winning medals in sprints in the Paralympics.

Moderator: Yes right – but i am not covering the Paralympics Its only the SO – so nobody can name a SO athlete who has won a gold medal– is that correct?

Group: Yea (Heads nodding).

F3-A-18-M: No I know one – She is my sister's friend. She lived in my village – however, when she came back with her medals people from the village did come out to see her – but she didn't get the welcome home she should have got if they were non disabled Olympic gold medallists. Like they compete the whole time and won a medal.

Moderator: OK what do you make of the word 'special'?

F2-A-18-M: Like special needs and disabilities like?

214

F6-A-18-M: It shouldn't be called the SO –its demeaning – like they are special but that is not what makes them like.

F2-A-18-M: Like everyone is special in their own way – like a normal Olympics could be called special as well.

Moderator: Do you think the word has any impact on how the public perceive PWID?

M2-A-18-M: Yes special it implies 'different' as in different kind of games.

F3-A-18-M: Yea different.

Moderator: Different kind of games?

M2-A-18-M: Yea like people are different in different type of games as oppose to the normal Olympics like.

Moderator: Alright – people like Barack Obama and he most certainly wouldn't have meant or intended to be insulting – he was asked a few years back about his bowling skills and he replied he would be like something from of the SO – he immediately retracted it people like BO are probably one of the greatest advocates of equality dignity and respect – but that was something he did say He appears quite sincere with his retraction/apology and that he didn't intend to insult – but why do you think he would have said something like that?

F2-A-18-M: He didn't even think I would say.

F3-A-18-M: I suppose what he meant was that like he couldn't function like, or wasn't good at it like or someone that didn't have their full function would be the same – like they would beat him ten times over.

Moderator: Do you think that type of thinking might be common?

F2-A-18-M: Yea – definitely.

M2-A-18-M: Yea – absolutely.

F2-A-18-M: Many people make references like that all the time – you would hear it all the time like.

Moderator: Do you think the SO play a part in that or do you think people just decide to interpret in their own way I should say that the SO make a concerted effort to do brilliant work by PWD – do some fantastic work they were all competing in the same batch of tournaments and stuff like that but do you think the SO promote a way of thinking – oh the SO that would be me (as

in cant do something) and if it does why do think it might so that? Why do people do this?

F2-A-18-M: Well there are people with lower capabilities like so ya kind of or people will judge them as being lower.

M1-A-18-M: Maybe people think they can't compete at the level of say an abled bodied person I think that's what like especially when you hear special like I think most people pops into their heads they can't compete at the same level as an able bodied person.

Moderator: Ok so you feel people might think they can't compete at the same level as somebody who doesn't have a disability.

F1-A-18-M: I think a lot of people when they hear the word special they think like a lot of those people don't have the full function of their bodies and yet a lot of them people in the SO are totally capable of walking, running but it might just be the mentality is not fully there.

F6-A-18-M: Yea and when you hear the word special like and look at some of the pictures in general you can understand why people might feel sorry for them.

F2-A-18-M: You are giving them a label and already putting them into a different box.

F1-A-18-M: A wheelchair or something (unclear point).

F2-A-18-M: By calling it the Special Olympics you are already labelling people.

F6-A-18-M: It shouldn't be called special like if that's the case then the normal Olympics should be called special too – they should change the name.

F4-A-18-M: I think they should try to change the name.

F2-A-18-M: They should because special is being used in the wrong way – it should just be the Olympics.

Moderator: Ok they do make a genuine concerted effort in supporting people in a genuine way – maybe they have their difficulties – what would you suggest.

F1-A-18-M: Change the name – the word away – Just call it the Olympics.

M2-A-18-M: Just take the word special off, just call it the Olympics.

216

F6-A-18-M: Give them more credit like – if they win a gold medal make a deal of it like they did for Katie Taylor.

F1-A-18-M: They should be all brought out at Dublin airport and make a big hoo haa out of it.

Moderator: some of the athletes there have four or five medals what you make of that.

F6-A-18-M: It means that they can achieve and can win, like a great achievement.

F2-A-18-M: It's a massive achievement like, like they are still competing against other people and if they are still able to come home and compete in different areas of the sport and come back with the medals well it's amazing like.

M2-A-18-M: I get the small feeling and it's only from my own personal competitiveness thing like that if you are winning four or five gold medals then that the standard couldn't be too. Like with the normal Olympics one medal you are over the moon cos you wouldn't get up to all those levels in sport and win so many medals.

M1-A-18-M: I would kinda of agree with that, like don't get me wrong, its great to win the medals, but if you are winning loads of them and all the time well that's not realistic is it and it doesn't happen to anyone else either.

Moderator: If you were to 'normalise' it and some PWID came home with no medals – would that be OK.

F2-A-18-M: Well you have that Usain Bolt – didn't he come back with 3 or 4? And he is a worldwide phenomenon – everyone knows him.

F3-A-18-M: But as xxxx said it's like some of them are just getting medals for turning up were it's not like that or that that simple in the normal Olympics.

Moderator: Do you think there a difference between competitive sport and the SO.

F2-A-18-M: Yea.

F3-A-18-M: But when you think about it the SO athletes work all year round as well just like any other athlete and if you put them side by side they are all working as hard as each other.

M1-A-18-M: Like I suppose some SO athletes mightn't know what competitiveness actually is. They could be doing it wrong like and wouldn't know about the concept of competiveness like in the normal Olympics

Moderator: Ok so do you still think the SO can promote things like teamwork, dignity, inclusion, more inclusive societies for PWID?

M1-A-18-M: Definitely I do believe that it can but its more like a club for the disabled so you have disabled athletes making friends with other disabled athletes like.

F3-A-18-M: well it does promote good things definitely like its brilliant – like you are bringing things to the fore front that wouldn't have been widely viewed in Ireland before – so if you are viewing images like this where you mightn't have seem them so much before well then these images could be leaving people open to ridicule – like leaving yourself open to comments like BO. People who have no experience of or ever seen what the SO were about before.

Moderator: So what are you saying?

F3-A-18-M: So exposure like this can leave these people to ridicule more if they are in the public eye. How would anyone know what the SO are all about if they weren't exposed to it?

Moderator: You have grown up in a social model of disability – when I grew up there was no one with a disability in my class – they were in special classes – it was very segregated – You grew up in a more inclusive social model –Do you think the SO promoting an inclusive model.

F3-A-18-M: it's definitely more inclusive these days– Last year in my school there were PWD in my class and they were so integrated very well it's no big deal that they were in the class – they were part of the class – and from knowing those PWID – a lot of people came out to support them.

F1-A-18-M: There is no-one in my college class with a disability Maybe one in a wheelchair. But even with that – the lecture halls aren't fully inclusive as they can't sit at the top of the lecture class. The building is not accessible enough.

F3-A-18-M: Even where the students union is – if you were in a wheelchair you would struggle going up that hill. It's hard enough to walk it.

M1-A-18-M: Yea that's true enough

(Group laughs)

Moderator: Any other questions/comments? None. Thanks a million. The information provided was great, it really was. Thank you very much.

8.6.2 APPENDIX 6b: Transcripts of Focus Groups

Leinster: Focus Group B 38 – 43 Wexford

Prior to starting the focus group the moderator introduced himself to the group and explained briefly what the research project entailed. Participants were invited to take a few minutes to review the '*Participant Information Sheet'* (See Appendix Three) which detailed the research topic, their invitation to participate, the purpose of the study, rationale for their invitation to participate, details with regard to consent, benefits of participation, anonymity and confidentiality matters, funding of the project, ethical approval and the researchers assigned supervisor.

Once participants had reviewed the '*Participant Information Sheet'* they were then asked to read a *'Consent Form'* (See Appendix Four) which detailed the title of the research project, the University and relevant department where the research was being undertaken (University of Ulster – Department of Health and Life Science), contact information of the chief investigator, confirmation that they had read the Subject Information Sheet, the understanding that participation was voluntary, how the data would be safely secured and anonymity assurances. Once participants had read the *'Consent Form'* and were satisfied with same, they were asked to sign it, acknowledging that they had voluntarily agrees to participate in the focus group. No participant, their place of work or place of education was identified at any time in these transcripts. Where a participant mentioned another's participants name, or where a college or place of work was mentioned, these details were omitted from the transcripts and replaced with xxxx.

On completion of each focus group all participants were thanked for their time and effort put into each focus group.

Coding System used for Participants so as to ensure anonymity

Females	=	F1-B-38-L	=	Female 1 Focus Group B 38 – 43 Leinster
Male	=	M1-B-38-L	=	Male 1 Focus Group B 38 – 43 Leinster
Researcher	=	M	=	PhD Candidate UU Health & Life Sciences

Overview of Group:

No. of Participants in total	8 participants
No of Female participants	5 female participants
No of Male participants	3 male participants

FOCUS GROUP BEGINS:

Moderator: Hello I'm Ray I'm doing a PhD in H &LS with the UU and has been approved ethically as well and I have consent forms for you to sign as well. I am looking specifically at images of disability as well as sport. However, before we start – just tell me who you are your first name and if you have any experience of disability whether it be professionally, or volunteering or personal. You don't need to go into detail – you can say I have or have not. So we will start here with yourself

F1-B-38-L: My name is xxxx I have no experience with intellectual disabilities.

F2-B-38-L: Hi I am xxxx and I have no experience at all of people with disabilities.

F3-B-38-L: I'm xxxx and I have a friend with a child with an intellectual disability.

F4-B-38-L - Hello I am xxxx and I have no experience of intellectual disabilities.

F 5-B-38-L: Hi I am xxxx and I have little experience with people with disabilities.

M1-B-38-L: Hello my name is xxxx and I have no experience of people with disabilities.

M2-B-38-L: Hi my name is and I have worked as a SNA in school before.

M3-B-38-L: Hi Hello I'm xxxx .

Moderator: What are the benefits of sport do you think with regard to the images of sport we see?

F1-B-38-L: It can promote like teamwork and spirit.

F2-B-38-L: There can be a sense of achievement, achieving something.

M1-B-38-L: It's to do with the taking part, being part of something.

F3-B-38-L: Sport can help build your self-worth like and self esteem.

F4-B-38-L: I think it's all to do with taking part.

M4-B-38-L It's a sense of work, sport is about teams.

M3-B-38-E: Sport, like playing sport can keep ye fit as well.

Moderator: What do you think of the when you hear the word athlete?

M3-B38-l: Elitism.

F3-B-38-L: Being fit.

F1-B-38-L: it's like being determined.

F2-B-38-L: It's to do with being healthy.

F4-B3-8E-L Winning medals.

Moderator: What does inclusion mean to you?

M2-B-38-L: Include everyone regardless of background race or religion.

F1-B-38-L: To be involved.

F3-B-38-L: To be accepted.

F 4-B-38-L: Encouraged.

Moderator: What does equality and dignity mean to you?

F1-B-38-L: It's to do with equal rights like be treated like everyone else.

F2-B-38-L: To have the same opportunities as everyone else.

F4-B-38-L: That man with the screw on leg in the Paralympics – he was very good to compete and had dignity even though he has problems.

Moderator: Do you think sport can produce the concepts of inclusion dignity and respect?

M1-B-38-L: Yes without a doubt – cos its a team environment and it's the best way to bring a community together and to bring the community together – like there is a sense of togetherness – does bring about a sense of working together.

F2-B-38-L: As long as people can get on together and compete yes of course.

F3-A-38 -L: Yes – (Pause) Cos I think that regardless of disability whether it's the Olympics or SO it's all about the team and it's all about the goals and reaching then.

F1-B-3-8-L: A lot of people who do sport aren't good at it – they just want to give it a go.

F2-B-38-L: It's to do with a sense of pride like a sense of responsibility.

Moderator: I'm just putting up some pictures of PWID in the SO – I want you to look at them and tell what do you think – do they promote positive images of people with intellectual disabilities?

M1-B-38-L: Good on them I say.

F2-B-38-L: They are happy aren't they?

M2-B-38-L: They are enjoying themselves.

F3-B-38E-L: Apart from the little lad there it's just like any other sporting event (Said in reference to the child using a walker in a track race)

M3-B-38 -L: – by using sport it is increasing people's knowledge about PWID so no matter where you are or who you are you can achieve

F1-B-38-L: Its very evident the little lad had a disability – he has an aid – I have to say I used to Say God love them before until I was exposed to sport and disability I went to a match with disabled and non disabled kids and we loved it Its all to do with contact and exposure – If you have no exposure these images could be seen as negative It wasn't until I got involved in the events that I thought it was brilliant.

Moderator: Barack Obama said his bowling was like something out of the SO – what do you think of that?

F1-B-38-L: That is very negative – he is comparing his lack of skill to weakness.

F3-B-38-L: I think the SO can show skill and ability as opposed to disability? – Look at them getting their medals and doing well – normally you might think oh

poor xxxx. These are showing it's not just about their disability – it's about their ability as well.

Moderator: Here are more images – what do you think?

F1-B-38-L: I see pride in their faces – they are very proud of themselves.

F2-B-38-L: Yea I agree as well and again there is also a sense of achievement there as well like they are achieving something.

F3-B-38-L: I see ability – what they can do and achieve.

F4-B-38-L: They are like ambassadors if you ask me.

F5-B-38-L: There is a sense of bravery there too.

Moderator: Why bravery.

F5-B3-8-L: Cos they are putting themselves out there – they are not letting opinion put them down.

F4-B3-8-L: that was what I meant by saying they are ambassadors – as in they are out there saying they can do it, in their community and seen like anyone else – they shouldn't be seen as someone special.

Moderator: But we are watching the SO.

F2-B3-8-L: Maybe it shouldn't be called special.

F3-B-38-L: It's like a SNA – Kids pick up on that cos saying someone has special needs had a level of negativity attached to it.

F5-B3-8-L: I wonder why they can't have a part in the normal Olympics.

Moderator: Can I ask the question – we talk about bravery and ambassadors – can anyone name a gold medal winner of the '*normal*' Olympic Games.

F1-B-38-L: Katy Taylor.

F3-B-38-L: Sonia O Sullivan.

F5-B-38-L The boxers, Wayne McCullough.

M1-B-38-L: Cian O'Connor.

Moderator: Now can you name a SO gold medal athlete.

M1-B-38-E: Oscar Pistorius or Jason Smith.

Moderator: No they are Paralympians. Why don't we know the names of our SO medal winners?

F1-B-38-L: Because you wouldn't sit down and watch them.

F3-B3-8-L: Maybe there is no interest – you may watch the Olympics to see the prowess – but you wouldn't see that in the SO.

M3-B3-8-L: but I think people would watch if the communities got behind it.

Moderator: You said an interesting word – what did you mean by prowess?

F4-B-38-L: Like you are looking at athletes and gymnasts and how fast you can go but I wouldn't look at the SO in the same way – in fact I see it all as a bit clumsy.

Moderator: That is interesting – do we see athletes when we see the SO?

F4-B-38-L: I think I would see it all as a bit clumsy – like why is it on TV.

F3-B-38-L: But if you had worked with PWID you would think differently.

(Note: awkwardness among group at some of these comments made)

Moderator: Any other comments – do you think the SO are more inclusive in achieving their aim?

F3-B-38-L: They are and they aren't in a way like – people with disabilities are included in the Games and on their teams and you can see that they are getting a lot out of it, like enjoying themselves but I am not sure if they are included in society like we are to be honest.

F2-B-38-L: Sometimes their families get a lot out of it.

F1-B-38-L: I suppose to see their children be involved in sport whereas many years ago those opportunities weren't there for the disabled, but they are now.

F 5-B-38-L: I don't know (cut off here)

M3-B-38-L: No it doesn't promote inclusion because as a society we don't promote it enough so people don't get behind it.

F3-B-38-L: Like social media and face book – like one of those could be a link to the SO but no media really supports it.

M3-B-38-L: I am talking about the media – like when the SO was held in Ireland it was on TV at that time but now ye don't hear anything about it like.

F1-B-38-L: (Inaudible)

M3-B-38-L: If it is not part of the main and out there and people can't make a choice about it.

Moderator: Ok what about these 2 images.

F3-B-38-L: You can tell straight away that they are disabled.

Moderator: Is that important.

F3-B-38-L: Well they are just people aren't they – there is pride there as well

(Appears participant did not wish to continue with original point)

Moderator: The SO was held here in 2003 – to huge media acclaim it was a significant event and successful.

F1-B-38-L: Yea but when it is not in Ireland the level of interest wanes.

F3-B-38-L: Isn't Robbie Keane involved in it. Maybe they need more sports celebrities in it.

Moderator: What do you make of the term special?

M2-B-38-L: That's segregation straight away – you are putting people in boxes.

Moderator: So are you saying there are lots of positives – but it can create segregation as well?

F3-B-38-L: Maybe some people with ID couldn't go up against other athletes like swimming g or stuff – but maybe the special needs people could compete against each other in the Olympics.

M1-B-38-L: There have been a few cross over's from SO to normal.

Moderator: Can I just ask – what forms your thinking on this?

F1-B-38-L: It's all to do with lack of exposure – you are fearful of what you don't know.

F2-B-38-L: like years ago in school if you had an intellectually disabled student in school they were treated as special and everything was special for them – like

special classes, special teacher and the word special I suppose thinking now has negative connotations.

F1-B-38-L: In school the special students were segregated and taught in different classes from us.

F2-B-38-L: Yea it's like but it's the same as some blind schools – that is compete segregation.

M1-B-38-L: But a lot has changed hasn't it cos kids are educated together now – there are kids with disabilities in mainstream classrooms now. Overall you feel the SO can do a very good job - but lack of exposure, lack of education doesn't help – If you are not exposed to PWID you know nothing about them.

Moderator: Any other comments or observations? Thank you very much for your participation – it has been greatly appreciated.

8.6.3 APPENDIX 6c: Transcripts of Focus Groups

Ulster: Focus Group B 18 – 23 – Derry City

Prior to starting the focus group the moderator introduced himself to the group and explained briefly what the research project entailed. Participants were invited to take a few minutes to review the '*Participant Information Sheet'* (See Appendix Three) which detailed the research topic, their invitation to participate, the purpose of the study, rationale for their invitation to participate, details with regard to consent, benefits of participation, anonymity and confidentiality matters, funding of the project, ethical approval and the researchers assigned supervisor.

Once participants had reviewed the '*Participant Information Sheet'* they were then asked to read a *'Consent Form'* (See Appendix Four) which detailed the title of the research project, the University and relevant department where the research was being undertaken (University of Ulster – Department of Health and Life Science), contact information of the chief investigator, confirmation that they had read the Subject Information Sheet, the understanding that participation was voluntary, how the data would be safely secured and anonymity assurances. Once participants had read the *'Consent Form'* and were satisfied with same, they were asked to sign it, acknowledging that they had voluntarily agrees to participate in the focus group. No participant, their place of work or place of education was identified at any time in these transcripts. Where a participant mentioned another's participants name, or where a college or place of work was mentioned, these details were omitted from the transcripts and replaced with xxxx.

On completion of each focus group all participants were thanked for their time and effort put into each focus group.

Coding System used for Participants so as to ensure anonymity

Females	=	F1-B-18-U	=	Female 1 Focus Group B 18 – 23 Ulster
Male	=	M1-B-18-U	=	Male 1 Focus Group B 18 – 23 Ulster
Researcher	=	M	=	PhD Candidate UU Health & Life Sciences

Overview of Group:

No. of Participants in total	8 participants
No of Female participants	3 female participants
No of Male participants	5 male participants

FOCUS GROUP BEGINS:

Moderator: Hello I'm Ray I'm doing a PhD in H &LS with the UU and has been approved ethically as well and I have consent forms for you to sign as well. I am looking specifically at images of disability as well as sport. However, before we start – just tell me who you are your first name and if you have any experience of disability whether it be professionally, or volunteering or personal. You don't need to go into detail – you can say I have or have not. So we will start here with yourself.

F1-B-18-U: Hello my name is xxxx I am studying sports science and I don't have any experience of disability.

M1-B-18-U: Hi I'm xxxx I am too studying sport and Ive no experience of people with disabilities.

M2-B-18-U: I'm xxxx I don't have any experience of people with disabilities.

M3-B-18-U: Hello my name is xxxx I have done a wee bit of work experience with the disabled as part of my studies like a placement.

F2-B-18-U: Hi I'm xxxx and I have no experience of disability.

F3-B-18-U: I'm xxxx I did some volunteering with a disability centre for a while but I have not worked with people with disabilities.

M5-B-18-U: Hello my name is xxxx and I have not worked with disability.

M6-B-18-U: I'm xxxx I'm in year 2 of a degree in sports science I have no experience in the area of disability.

Moderator: Can I ask some of you, why are you studying sports science?

F1-B-18-U: Well I like sport and to be active.

M6-B-18-U: I like science.

F1-B-18-U: it's good for my career, and it's something I want to study for.

M3-B-18-U: I heard it was a good course like and I'm interested in the area.

(Silence for few minutes)

Moderator: Am I right in assuming has everyone an interest in sport?

Group: Aye.

Moderator: Ok so can I ask you, what are the benefits of sport?

M1-B-18-U: It keeps you healthy like and it's good for you.

F1-B-18-U: It's a way to make friends and meet people.

M2-B-18-U: Maybe for the rewards – like winning trophies and medals and being in competitions.

M5-B-18-U: For socialising and meeting people like and doing something you like.

F3-B-18-U: Aye meeting new people and getting out and about.

M3-B-18-U: I don't know really, i suppose its gives you a general good feeling.

M4-B-18-U: you can travel (unsure as to end of sentence).

F3-B-18-U: Its enjoyable as well – it can be fun and a great way to get out and about like.

Moderator: How can sport promote the concept of inclusion do you think or how do you?

M1-B-18-U: everyone has an equal opportunity to participate and have a role like and be involved in a sport that they like.

Moderator: Anything else or what would be exclusion in sport look like?

F2-B-18-U: if someone was not good at it they might be left out.

M5-B-18-U: Maybe if they were not up to a good enough or proper standard like or expected standard.

Moderator: What do you want to do with your degree?

M1-B-18-U: I think I would like to teach PE.

Moderator: What do the concepts of inclusion and or exclusion mean in sport?

M3-B-18-U: fairness – like equal opportunity like.

Moderator: Does anyone have any experience of disability.

F1-B-18-U: I taught 2 people with disabilities in equine sport.

M3-B-18-U: I have worked in the past with PWID and seen the SO on TV.

Moderator: OK what I want you to do – is make notes on what comes into your head when you see these pictures of PWID and the world of sport? Do you feel these are negative or positive images of PWID?

F2-B-18-U: Yes.

F1-B-18-U: Yea they are enjoying themselves its looks that way.

M1-B-18-U: He is trying.

F3-B-18-U: And he is participating like.

Moderator: OK move along – these pictures were selected randomly from the net – straight away what so you think – is this positive? What does this image tell you?

F1-B-18-U: It doesn't really tell you anything about sport or to do with sport.

M1-B-18-U: Sentence inaudible.

Moderator: Can you name a gold medal winner from the Olympics from the UK or Ireland?

F1-B-18-U: Jason Smyth (No Paralympics).

M1-B-18-U: Katie Taylor.

M2-B-18-U: Yea the boxer.

Moderator: Why do you know her?

F1-B-18-U she is a gold medallist and very well known.

F2-B-18-U the media cover her as well like media coverage.

Moderator: Can anyone name an athlete from the UK or Ireland from the SO (Not a Paralympian).

(No response – no one can)

Moderator: Why can't you do that?

F1-B-18-U I have never heard of any of them.

M1-B-18-U I never watch them or see them on TV or anything.

M3-B-18-U does it be on TV even?

M1-B-18-U its not promoted as much as the normal Olympics like.

Moderator: OK moving on – SO Athlete holding the torch.

F3-B-18-U Positive because they are being included in the game.

F1-B-18-U They have medals and everything like as well.

M1-B-18-U And they look like they are enjoying themselves there.

Moderator: Is sport all about enjoying yourself?

M1-B-18-U: A good part of it is aye.

M2-B-18-U they look like they are socialising too.

M1-B-18-U: aye it is a good image they are carrying the flame and having fun there as well.

F1-B-18-U They are included in carrying the flame.

Moderator: Sam e question – is this a good and positive image of PWID through the world of sport?

(Note - Group very quiet here)

M2-B-18-U they have the ability to do it like.

Moderator: That's the first time that word has come up.

M2-B-18-U: Well a lot of people assume they are not capable of competing like and stuff– well it's a belief but here they are competing.

F1-B-18-U It depends of the disability and it depends on the sport – like if you were in a wheelchair you couldn't compete in some sports.

Moderator: Can I come back to the comment that it depends on the disability.

F1-B-18-U well if you had severe autism like you may not be able to participate.

Moderator: So do you feel this is more positive image of disability.

F1-B-18-U Yes as they have won with the medals and this also says that people can do it.

Moderator: OK moving on – children running what do you make of this.

(Groups laugh/smile)

M1-B-18-U: The fella in the grey has won.

(Group laugh/smile)

Moderator: Look at these athletes here – what do you make of this?

M2-B-18-U they are still very happy like.

F1-B-18-U but you couldn't see them upset if they were to lose – this isn't competitive really it's more participatory like.

Moderator: But you said sport is all about inclusion.

M1-B-18-U but when you are with your own mates or your own peers you are included like outside that it may be different like.

Moderator: Would you advocate for this.

M1-B-18-U well you could hope for people to do their best and you would encourage them to do their best

Moderator: Is it inclusion in the SO or in the wider world in general

F1-B-18-U well there are no children without disabilities as there is only a focus on one group only that is the disabled.

Moderator: OK here is a picture – does this promote inclusion or a positive or negative (medal winner at SO).

M1-B-18-U Aye he is a champion like he has won medals.

M3-B-18-U Ye can see he is right proud of himself as well.

F1-B-18-U Yea it is a positive picture.

Moderator: Can you name him?

(No response)

Moderator: Do you think if this person was from Belfast say and he won 2 gold medals in the Olympics would you know his name.

M3-B-18-U: Aye cos the media would cover it.

F3-B-18-U; The media would cover it.

Moderator: Here is another picture for you to view – very similar – do you feel it is a positive or negative image.

M1-B-18-U I think that positive I do.

Moderator: OK let's move on – what image does this picture conjure up in your head.

M1-B-18-U Its freezing, he's cold.

(Group laughs)

Moderator: Ok Can I ask you - The SO are claiming they are creating more inclusive for communities for PWID on the island of Ireland – from these pictures do you think this is happening for people with disabilities – is that happening.

F3-B-18-U: No Not in terms or abled and disabled people like. I don't have a disability so I am not involved in the world of disability, but disabled people will have friends with other disabilities cos they have something in common like. Maybe included in the world of disability itself but not in the worlds of disability.

M1-B-18-U (Not decipherable).

Moderator: OK so you have grown up in a world of positive discrimination for PWID where PWID were cared for on the margins of society – so you have seen PWID (or should have) in a more inclusive society than I would have had – policy and sport has shifted significantly – do you see PWID involved in all aspects of society – are you seeing PWID in everyday life.

F3-B-18-U: No not always.

M4-B-18-U: Aye – they are in my secondary school like but they are in my school.

F1-B-18-U: But would you have played with them like.

M4-B-18-U: Aye.

M4-B-18-U: I do have friends with disabilities and my brother has a disability aye.

F1-B-18-U: But do you hang out with them, as in like any other friend.

M4-B-18-U: Aye I do.

M1-B-18-U: I would say no – not really, not in my community or circle of friends.

M1-B-18-U: Like xxxx is a very small town indeed yet I do not know anyone of them – I am not part of their clubs or anything I am not involved with them.

Moderator: Anyone else involved in the lives of PWID?

M4-B-18-U: Well I would be friends with his brother – but it is only through my friendship with Daryl that how I became friends.

Moderator: OK what do you see in this picture?

M2-B-18-U: I see a team and I see friendships – it's a positive pictures.

Moderator: Again another picture – what's your interpretation here.

M2-B-18-U: This is Positive – he is happy out.

Moderator: I think this may be a girl!

(Group laugh)

Moderator: A lot of you are coming up with happy – why is that.

F3-B-18-U: it depends on how competitive you are.

M1-B-18-U: I do not see competiveness here like, people are happy and having fun but I am not seeing competitiveness though.

M2-B-18-U: it not to do with being competiveness all the time.

M1-B-18-U: Maybe it's a bit patronising like.

(Interruption here – brief)

Moderator: Do people feel these pictures are patronising?

M1-B-18-U: It looks likes as if they have to be cared for like all the time.

F3-B-18-U: Well suppose in that picture the 'special needs' bit is emphasised more Like there are a lot of carers around and making a fuss around him, like they are emphasising he is special.

M3-B-18-U: But competiveness is not the main aim here – it's to do with a sense of well being and enjoyment and taking part in it and enjoying yourself.

Moderator: OK the ethos of the SO is to ensure PWID are included in mainstream society – are they achieving their aim - For the first time you have said patronising.

F2-B-18-U: But we don't see anyone being upset because they have lost – we see that a lot in other sports like.

M4-B-18-U: Maybe it may provide a chance for people to feel equal.

F1-B-18-U: I think there are people with disabilities upset if they lost and they just chose not to show them pictures.

Moderator: Why aren't we seeing them here?

F1-B-18-U: The SO is all about being happy like everyone is happy here.

M1-B-18-U: But they are not trying to promote competition or competitiveness – it's about taking part and having fun like.

Moderator: Well then is the word athlete appropriate here?

F1-B-18-U: Well there are no elite sports people there like. They are not like professional athletes but they are having fun.

Moderator: Here are the SO in the UK – what do you think of that picture.

M3-B-18-U: Gordon Brown looks drunk

(Group laughs)

F1-B-18-U: It looks a bit patronising – the way he is looking down on her I see she is small but it looks a bit patronising.

F1-B-18-U: It's good for him (sarcastic tone here)

Moderator: OK here we go another picture- is this positive negative? Think of Inclusive Dignity? Is it a representation of positivity of PWID?

236

F1-B-18-U: It shows anything is possible and you can do what you want.

Moderator: Again another picture – and I am thinking of your physical performance comments again – what is your first gut instinct when you see that picture (Ice skater).

M1-B-18-U: I see a lot of concentration here.

F1-B-18-U: Ability.

F3-B-18-U: I see skill in that I couldn't do it.

Moderator: Is this a good image of PWID?

F1-B-18-U: There is a skill involved in that if you ask me, like I couldn't do that either.

Moderator: OK here is SO Ireland fund raising– straight away do you feel these images are positive or negative.

F3-B-18-U: They are all holding onto the buckets like – the collection buckets.

F2-B-18-U: It's positive it's promoting the world of disability like.

M1-B-18-U: But they need the help of the public – there is no government funding here that's not a good think.

M1-B-18-U: There is no sponsorships here they need to fundraise.

M3-B-18-U: There is not enough funding going into it.

M3-B-18-U: It's not that popular like.

M1-B-18-U: Not enough media coverage.

Moderator: You are probably too young to remember but the SO came to Dublin in 2003 – and that year athletes from both Ireland and the UK won multiple medals – and the media coverage was huge – The Games were met with significant international acclaim – so why don't we know our disabled athletes.

M3-B-18-U: But the media follow people who win medals – not like disabled athletes.

M1-B-18-U: It's to do with performance - I think.

M3-B-18-U: But being honest young people would not aspire to that type of imagery like they would want to be like elite athletes.

Moderator: Why wouldn't young people aspire to be like this type of athlete?

M1-B-18-U: Cos they want to be more like professionals.

M3-B-18-U: Young people cant relate to it or understand it maybe – they would want to be like Usain Bolt like do ye know what I mean.

Moderator: Ok so you are saying that these pictures may be good at promoting inclusion but yet you are saying that young people may not get these pictures or understand them – what are you saying about the SO, so if we don't see PWID as our idols yet they are gold medal winners - what does that mean?

M1-B-18-U: I suppose like because they have been downgraded.

M2-B-18-U: Young people would want to be in the 'proper' Olympics and look to athletes like Usain Bolt.

Moderator: Are PWID then not athletes.

M1-B-18-U: Well they are but in their own communities like they are athletes among themselves.

Moderator: What do you think of this picture– this person is bowling – what do you make of this picture straight away – when we talk about inclusion.

F2-B-18-U: But this person needs help – maybe I said that wrong.

M1-B-18-U: There is no skill involved in that in fairness but the person is involved however, as well.

Moderator: Here we go two athletes – positive/negative

M1-B-18-U: I see Friendship.

F1-B-18-U: There a bond between 2 people there – you can see it straight off.

M2-B-18-U: There is a sense of comfort as well.

FM-B-18-U: Where is that picture?

Moderator: Another picture we have 2 special Olympic athletes – what does this tell us about Inclusion dignity and respect.

M3-B-18-U: They look exhausted, they are obviously trying hard.

F1-B-18-U: Yea they are trying hard.

F2-B-18-U: They are thirsty I think.

Moderator: Nearly there – what do you make of that picture.

F1-B-18-U: Is he blind?

Moderator: I do not know.

F1-B-18-U: It's hard he cannot do it himself.

M1-B-18-U: The person is helping him to be included.

M2-B-18-U: Or just guiding him like.

Moderator: But you raised difficult questions – would people aspire to be like this.

M4-B-18-U: Well they may aspire to his enthusiasm like he is a tryer and does not give up. Like what he is doing might be limited but it might be taking a whole lot out of him.

Moderator: Do you think a group of children would see that as being positive?

M4-B-18-U: I just think its well he is limited but he is determined.

Moderator: So overall do you think the SO are achieving their mission.

M4-B-18-U: Well there is a lot of happiness in them.

M1-B-18-U: Aye like they are socialising and having fun.

F4-B-18-U: I'd agree with that.

M4-B-18-U: But some of the pictures are positive even where athletes need help.

F1-B-18-U: Aye but when you see pictures like this even though they are happy ye would want to be able to do it yourself like?

M1-B-18-U: It's only happening now – it will take a lot longer – Its gonna take a while like we need to see more about disability I don't really think they are because I know nothing about disability.

M4-B-18-U: People need to understand more about disability maybe volunteer more or learn more**.**

M1-B-18-U: I see them in more workplaces like**.**

F1-B-18-U: Well we didn't see much of people with ID before but now it's different.

M4-B-18-U: Well we hadn't seen them before – now we are beginning to see them.

239

F1-B-18-U: You see them but you do not know them, you don't get to know them. I think it's just that you don't have the time like and people don't understand them.

F1-B-18-U: No its more like they are not part of my friends – I have rugby friends and GAA friends but not PWID –they weren't in my school or class – there is a lack of opportunity to befriend PWID They are not in my circle of friends like. We are not mixing in the same social circles like the options are there and we wouldn't be in the same clubs.

Moderator: Would most people say that the case is that we do see PWID in society – but not as part of our circle of friends?

Moderator: Do you think the SO they make a difference.

M4-B-18-U: Yes they are helpful.

M1-B-18-U: positive and they are positive as well like there are lots of positives too.

Moderator: Thank you very much.

(One person spoke with interviewer after focus group in-depth to say that it would be very difficult to say anything negative about an organisation that is genuinely trying to do good by PWID)

8.6.4 APPENDIX 6d: Transcripts of Focus Groups

Connaught: Focus Group A 38 – 43 (County Galway)

Prior to starting the focus group the moderator introduced himself to the group and explained briefly what the research project entailed. Participants were invited to take a few minutes to review the '*Participant Information Sheet'* (See Appendix Three) which detailed the research topic, their invitation to participate, the purpose of the study, rationale for their invitation to participate, details with regard to consent, benefits of participation, anonymity and confidentiality matters, funding of the project, ethical approval and the researchers assigned supervisor.

Once participants had reviewed the '*Participant Information Sheet'* they were then asked to read a *'Consent Form'* (See Appendix Four) which detailed the title of the research project, the University and relevant department where the research was being undertaken (University of Ulster – Department of Health and Life Science), contact information of the chief investigator, confirmation that they had read the Subject Information Sheet, the understanding that participation was voluntary, how the data would be safely secured and anonymity assurances. Once participants had read the *'Consent Form'* and were satisfied with same, they were asked to sign it, acknowledging that they had voluntarily agrees to participate in the focus group. No participant, their place of work or place of education was identified at any time in these transcripts. Where a participant mentioned another's participants name, or where a college or place of work was mentioned, these details were omitted from the transcripts and replaced with xxxx.

On completion of each focus group all participants were thanked for their time and effort put into each focus group.

Coding System used for Participants so as to ensure anonymity

Females	=	F1-A-18-C	=	Female 1 Focus Group A 38 – 43 Connaught
Male	=	M1-A-18-C	=	Male 1 Focus Group A 38 – 43 Connaught
Researcher	=	M	=	PhD Candidate UU Health & Life Sciences

Overview of Group:

No. of Participants in total	9 participants
No of Female participants	5 female participants
No of Male participants	3 male participants

FOCUS GROUP BEGINS:

Moderator: Hello I'm Ray I'm doing a PhD in H &LS with the UU and has been approved ethically as well and I have consent forms for you to sign as well. I am looking specifically at images of disability as well as sport. However, before we start – just tell me who you are your first name and if you have any experience of disability whether it be professionally, or volunteering or personal. You don't need to go into detail – you can say I have or have not. So we will start here with yourself.

F1-A-38-C: Hi hello I am xxxx and I have some work experience of working with PWID for some time.

F2-A-38-C: I am xxxx and I have no experience of disabilities really.

M1-A-38-C: Hello I am xxxxx and I have no experience of working at all with people with disabilities.

M2-A-38-C: Hello I am xxx xxx and I do have some experience with disabilities (what that was the participant chose not to divulge).

F3-A-38-C: I am xxxxx and I am a mother of a child with a disability.

M3-A-38-C: I am (not audible) and I have no experience of disability.

F4-A-38-C: Hello I am xxxx and I have no experience of disability.

M3-A-38-C: Hi I am xxxx and I have no experience of disability at all.

Moderator: Ok thank you very much I am going to move this on you are probably the last focus group I will work with I want you to look at a number of images of athletes and tell me what do they conjure up in your minds – as in what are the first

things that spring to mind when you see these pictures – do you see positivity in that picture?

F2-A-38-C: Oh yea I see enjoyment in the challenge before them.

Moderator: OK so you see enjoyment, anyone else?

M1-A-38-C: I see discipline and working together.

M2-A-38-C: Yea I agree.

Moderator: Anyone else?

M2-A38-C: Well you don't really see sport do you, like I don't k now what it is they are doing I don't know maybe that wasn't a good point I am making Maybe what I am saying is that they don't look like athletes.

Moderator: No all points are valid It was a good point. Moving on here was have a picture of an athlete. When you see this picture what do you think of what is the first thing you think of?

F3-A-38-C: Well with that last picture you really wouldn't know what it is they do.

M1-A-38-C I suppose when you hear the word athlete you think of maybe someone six foot and strong like but here it applies ot a broad range of people with a broad range of abilities say.

Moderator: So what exactly are you saying?

M1-A-38-C: Like different ages, different sizes different abilities, whereas in professional sports you wouldn't see that.

Moderator: OK do you think they should use something different?

M1-A-38-C: Yea sport is different this sport is different as it has to be adopted (assume he meant adapted) to suit the needs of the disabled person like.

Moderator: OK so you are saying this has been adapted so as the person can partake.

M3-A-38-C: Inaudible (very strong accent) spoke about the word athlete and how I apples to PWID but uncertain as to what was actually said .

Moderator: OK here is another picture I think it is of an athlete holding a torch what do you think of when you see that picture 0 is it positive or negative?

F1-A-38-C: I think it is positive.

Moderator: Why would you say that?

F1-A-38-C: Well it's positive because the people look happy I think and also playing in sports is good for you as well – you can see that they are enjoying themselves and it's a good way to exercise.

Moderator: OK anything else.

M3-A-38-C: It's also something like you would see in the regular Olympics say the torch and the athletes being part of it.

M1-A-38-C: They are carrying the torch and its something like you would see in the ordinary Olympics and the Special Olympics like its an important part of it all.

Moderator: So this also happens in the regular Olympics as well.

M1-A-38-C: Yes it does and it's the same.

M3-A-38-C: And it is showing participation and inclusion.

M1-A-38-C: And as well here there is both like social and physical skills to be learnt as in they are learning, they are learning how to ice-skate or play football like.

F2-A-18-C: I would agree with that point there's definitely learning there and you can see in clearly in the pictures as xxx said they are learning sport related skills but they are also learning about life like- in we all have to by meeting people or by being with people.

Moderator: OK it is showing participation and inclusion.

F4-A-38-C: It's hard to know who the athletes there are and who are the helpers.

(Relevance of this point unclear)

Moderator: I think the two at the back are coaches and the two in the front are athletes. So overall people see participation and inclusion.

M2-A-38-C: Well they have a role everyone has a role in it and they get to carry the torch like anyone else, like that's inclusion and participatory.

Moderator: Here is another picture of a young girl who has won a medal – what is the first thing you see here or think of?

F2-A-38-C: I see a winner.

M1-A-38-C: People are very happy here they have won something like.

Moderator: OK sop people are very happy, they have won something – do you think this is a dignified picture?

M1-A-38-C: Yea like any athlete they are proud and you can see that they have pushed themselves to get where they are, that's a good thing.

M2-A-38-C: And when you think about it there are different grades of sports as well Like you work your way up to them Like here we have the SO but then there is the Paralympics too and the ordinary Olympics – so depending on your ability I suppose.

Moderator: OK so you are saying there are different grades as such.

M2-A-38-C: Yes.

M3-A-38-C: I agree with that

(Inaudible in part)

Moderator: OK can I just pick up on that.

M3-A-38-C: It wouldn't work with these people in the normal Olympics is what I mean.

Moderator: OK so what are the key differences?

F3-A-38-C: Well it's more about predication and inclusion rather than achievement if you know what I am trying to say.

M1-A-38-C: And to be fair you wouldn't want to show up people like put them out of their range of ability like most of these athletes wouldn't make it in the ordinary Olympics so you have to have it in segments. Like there are different grades of ability.

Moderator: Like different levels of capacity .

M1-A-38-C: Yea yea like

(Pause)

Moderator: OK thank you – here is another picture, what do you make of that picture?

M3-A-38-C: Well that could be anybody really when you look at it.

F1-A-38-C: Yea it's just a normal photograph like.

Moderator: OK so it is just a regular photograph with regular people.

M2-A-38-C: I think that one looks professional like if you ask me and it is all about the athlete, not the carers (assume they mean coaches).

Moderator: Ok here we have a race this is a young kid in the SO running a race. You can see he is elated he is in the lead etc. What do you make of that photograph?

F3-A-38-C: Being honest I would look at that and see it more as a schools sports day as opposed to the Olympics say.

Moderator: This photo - in other groups say it was infectious as it makes you smile – do you think the same?

F3-A-38-C: But you can see the enjoyment coming through there you really can and it's all about the enjoyment and fun it really is.

M2-A-38-C: I suppose as well people in general think about the Olympics and the build up to the Olympics and the excitement and all of that and you are representing your country And I know that's done for the SO too but it's just the image like – we hear so much more about the ordinary Olympics.

Moderator: Here is a young lad with a medal, what do you make of that picture?

F2-A-38-C: He is proud and showing off his medal – it's a good picture really.

M3-A-38-C: He is also smiling and he is happy he has achieved something like and he is a winner

Moderator: Can I come back though – can you name any Olympian medallist.

M1-A-38-C: John Tracey.

M3-A-38-C: Yer man from Cork. (Group Laughs).

(Other medallists are named Sonia O'Sullivan /Ronnie Delaney).

Moderator: Ok you have gone right back to the 50's there – this lad here on the picture has two gold medals – what is his name? Does anyone know him?

M2-A-38-C: Is he a runner?

Moderator: I do not know I don't know him.

M3-A-38-C: Well you have to look at the profile there too Like he wouldn't get the same media attention as on Olympic gold medallist – the media wouldn't show interest in him say like other Olympians.

F1-A-38-C: But I don't think the general public understands how the SO work and all of that – like they don't know that there are categories and the like – really I think the public just see it in one way and don't fully understand how it works. Like in the Olympics either you are capable of entering the 400 meters or you are not whereas here they are all at levels or the like and the public don't get that –the public thinks its more about just participation.

M2-A-38-C: And we don't hear about the SO or never even know when it is on the telly but you hear so much about the normal Olympics like I remember 2003 because of the fuss about it, but apart from that I haven't really heard much about them since. So the general public wont know – maybe you might see a collection ot=r something – but you won't know anything about really.

Moderator: Yes they did play in Croke Park to huge international acclaim. Do you think those Games have had an impact on how PWID experience inclusion in their communities? Are people more around out and about are they more visible and positive in our communities.

M2-A-38-C: I have a view on that to be honest. The (the SO) put forward the happy smiling faces of PWID and all of that. But in a way they did them a disservice as they put forward an image that all PWID fall into this bracket - there was little focus on the skills and dedication some of the athletes put in I said at the time that there is an impression out there that this is what LD was all about but it wasn't because what about the people with huge huge needs that we never see as part of the SO.

Moderator: So are the SO representative of PWID across the board?

M1-A-38-C: Maybe because of their level of ability and what they can do – so the general population saw this and they assume the all PWID are always happy and that there would be no challenges like or maybe medical needs and the like or challenging behaviour.

Moderator: Ok what many people have said so far is that it all looks very happy and there is a great sense of fun – but do some PWID not get to experience this? Or is at all to do with fun and enjoyment?

M3-A-38-C: It would be interesting to hear from a PWID point of view like so they have their good and their bad days. Like so they always enjoy the training and that. But it would be interesting to hear their stories as in who they are how they got there their families and all that It might help ye make a connection like.

M3-A-38-C: What I man is the public mightn't see the level of work that goes into getting there and participating like you might see the en result but not the story behind it like the commitment and dedication.

M2-A-38-C: Like I am sure that the athletes are competitive but you don't always get that from the images you see here – it's all just fun and smiles It can be all to easy to be negative but we need to look beyond the pictures

Moderator: Barrack Obama did something similar when he was asked about his bowling skills –saying he couldn't bowl as he was like someone from the SO – he did apologies and appears to be a genuine advocate for PWID – but why do you think he might have said something like that?

M2-A-38-C: He may know nothing about the level of work and dedication PWID put in so maybe he has underestimated it.

M3-A-38-C: (inaudible – a doorbell also rang over when speaking).

M2-A-38-C: But there is also a culture that has changed over the years Like since I was younger the terms keep changing – like even now Special needs id under

question but it was Ok when I was young Like if you ask me the Olympics is the Olympics so when the main Olympics are on why can't they all be meshed in together Why make such a difference? Like we have the Olympics and then the Paralympics on in the same venue back to back but then we have the SO – they are really segregated if you ask me and why Special?

F3-A-38-C: You know I never really thought about that to be honest really but its only now that it is being that I am thinking about it.

Moderator: That is interesting – can I ask you have you any thoughts on it now?

F3-A-38-C: No not really maybe it does bring up difference and maybe a divide in the Games but being honest I never really thought about it...

(Parts of sentence inaudible)

(Pause)

F3-A-38-C: No the Olympics are different but the SO is about everyone being involved and participating and friendship – it is different to the Olympics.

F1-A-38-C: I suppose there is a difference like I know there is a SO club in xxxx I don't know anything about it – but you don't hear of the Olympics opening clubs around the country do you – I don't think so anyway?

Moderator: Most people who knew about the SO claim it does wonderful things whereas if you didn't know about them it can raise all sorts of questions – can I ask you (F3-A-38-G) from your experience do you agree with this.

F3-A-38-C: Absolutely yes I know at firsthand that that they get so much out of the Games They love them, they go for the enjoyment and the fun and wouldn't miss them for the world And they can be competitive too But I see why from them photographs someone who didn't know the SO would see it differently.

Moderator: What do you make of that photograph there?

M3-A-38-A: it's like a man holding an umbrella.

(Group laughs - this is in relation to the photo where the politician is holding onto the Olympic torch).

Moderator: Ok thank you! What do people make of that?

M3-A-38-C: Group continues to laugh – but comments include he is only there to server his career It looks good for him.

Moderator: Does anyone else agree with that?

F4-A-38-C: Maybe he is trying to make a connection, maybe he is genuine.

248

M3-A-38-C: Maybe he is not only doing it to look good, he might be interested.

(However, group continues to laugh at this photograph)

M1-A-38-C: Politicians are politician (half laughing) and that's just an opportunity to get good publicity. Like would he turn up somewhere when there would be no cameras or the like – I doubt it?

(Group still laughing)

Moderator: You all appear quite cynical about these photos with politicians in the photographs

F5-A-38-C: He does look genuine in fairness and like he is trying to engage.

M3-A-38-C: But maybe the fact that if he wasn't there maybe there would be no coverage of the Games – maybe he is bringing publicity to them..

Moderator: OK can I ask you – do you think that PWID are more included in their local communities do we see them more and do they hold valued social roles.

M1-A-38-C: No not really is you ask me – I think we are more aware of the disabled and more aware of rights and that – but we don't really see PWID in jobs or anything like that.

F1-A-38-C: I think compared to years ago we do tend to see disability more now like in the local shops and hairdressers too. I am not sure though if they are included as xxxx said I don't work with anyone with a disability.

F3-A-38-C: There is definitely some good things happening alright and I agree we do see PWD out and about more – but if they are really included in all the things like we do I'm not sure. But I know as far as the SO, they are definitely included there and valued as well and it means so much to them.

M2-A-38-C: I don't think so to be honest.

(Interruption)

Sorry what I mean is that like while PWD might have rights and that, you don't see them in work really and sometimes at the weekend you might see them out in a group but I don' know any of them.

Moderator: Does anyone here have a friend who has an intellectual disability.

(Silence – no one answers)

Moderator: Why is that so do you think?

F2-A-38-C: well there is little opportunities to meet disabled people like as xxx said earlier we don't work with them and I have never socialised with them.

M1-A-38-C: I would not have any friends with a disability but things are better now because we see disabled people out and about like in the local shops and that And they live now in normal houses as well.

M2-A-38-C: Yea years ago they were at home or in special schools and that but now they live in and about the town, but I wouldn't be friends with any of them.

F1-A-38-C: I suppose maybe we have little in common with them. I'm not too sure being honest why none of us have friends with disabilities.

M2-A-38-C: I think a lot of it is to do with the way in which they (PWID) are cared for as well – like everything is still special and you always see them with a carer or in groups. We don't really mix with PWID.

8.7 APPENDICES – INTERVIEWEE NOTES

8.7.1 APPENDIX 7: a

INTERVIEWEE ONE (INT 1)

Researcher: Introductions and thanked Interviewee (INT 1) for agreeing to take part in the study. Ethical issues discussed to include anonymity and consent. It was explained to interviewee that they were being invited to participate in a research study because of their knowledge, expertise and experience of the research topic under investigation. It was also explained that the research study was for the award of Doctor of Philosophy (PhD) in Health and Life Sciences with the University of Ulster, Faculty of Health and Life Sciences, Ulster Sports Academy, Jordanstown, Shore Road, Belfast

The overall themes that arose from the analysis of the focus groups were introduced to the interviews which were as follows:

1. Health and Wellbeing
2. A sense of teamwork, fun and togetherness
3. Skills development/Up skilling
4. Language – specifically the use of the term '*Special*'
5. Pity/Charity
6. Tokenism
7. Inclusion within the confines of the SO and the world of disability

The interviewer (author) took succinct focused notes during each interview and made additional comments/notes immediately after each interview was completed. In some instances the interviewer followed up with some of the interviewees with an email seeking clarification on some discussion raised during the interview.

THEMES DISUCSSED WITH INTERVIEWEES:

THEME 1: HEALTH & WELLBEING

Interviewer: On viewing the pictures of the SO athletes at various SO events focus groups participants spoke of the overall health benefits of participation in sport as well as well as the emotional well being to be experienced. This came up in all groups. What are your thoughts on that?

INT 1: Yes that does not really surprise me at all

They (as in the SO athletes) are so committed and as well as that they are so focused too, as in focused on the Games

They get so much out of the Games like it's hard to explain being honest

What I am saying is they are very proud to be in them be part of them and you see it on their faces

It shows on their faces

And of course yes – they not only get so much emotionally from the Games but they also provide an opportunity for them (athletes) to be active and to play in sport which of course is good for them as well.

I suppose playing or being involved in any sporting activity or games is good for anybody

TEAMWORK, FUN AND TOGETHERNESS

Interviewer: The second theme to arise from the analysis of the focus groups was that of teamwork, which was underpinned by a lot of talk about a sense of togetherness and fun. Again can I ask you, what do you make of those findings?

INT 1: Absolutely I 100% agree with that

There is a real sense a definite sense of belonging as well

It's just like being in any club and you can see that

They are part of something and as well they identify themselves as being a member

You see that easy it's easy to see it in the pictures of the athletes

And they do enjoy it as well, they enjoy the company and the companionship of their friends and they enjoy being with each other

I understand why the participants picked up on this from the images you showed them – they (athletes) definitely enjoy being part of the SO

Interviewer: It comes up later in the interview, but a lot of the participants spoke of inclusion in terms of within the SO and the world of disability? Are you surprised by that?

INT 1: Need to think about that for a minute that's kind of interesting

(Pause)

Maybe I guess it's because the see them with all their friends I suppose

The see them with their non disabled peers/if they are to make friends with their non disabled peers well a lot needs to change in society

I think maybe in particular to attitudes about or towards people with intellectual disabilities and the way in which they are seen by society in general.

SKILLS DEVELOPMENT/UP SKILLING

Interviewer: The third common to arise in most focus groups was that of Skills development and up skilling of the athletes after viewing the images of the SO. Why do you think they interpreted the images in this way?

INT 1: Well firstly those findings are very true

I think in fact you could also well add in there the athletes learn things like commitment and also say dedication

They are also learning about having to concentrate and focus as well say on whatever sport that they are involved in

I would say they are focused as in the athletes learn to focus and with that there is dedication

I think you would have to see this first hand bring honest – they are focused and committed to it, like they actually love it

They are learning lots of things, like learning new skills and all sorts of talents and rightfully they are proud of that

Interviewer: Some of the older age participants questioned (on viewing the images) if some of the skills were meaningful – why do you think they would say that?

INT 1: I don't know about to be honest I suppose that like the fact they are meeting other PWD and other athletes isn't that a chance to socialise

I know that the lads really get so much out of it – they enjoy the weekly clubs and the do learn as well

Being honest you really would want to see it for yourself firsthand, they (athletes) are so committed to it and they also love it, they really are learning new skills and talents and are rightfully so proud of that.

I do believe they can learn about things like commitment and how to focus and I know firsthand

I also know that at first hand they also learn about things like commitment and reliability.......they have to turn up and not let their team mates down'

Interviewer: What types of things do they learn?

INT 1: Well as I said already I know firsthand they learn about things like competition and they learn about commitment as well. They are there every week

LANGUAGE – SPECIFICALLY THE USE OF THE TERM '*SPECIAL*'

Interviewer: Some participants were very vocal about the use of the term 'special' seeing it as a label that was more particular the younger age groups

INT 1: Yea I hear what you are saying, but it's only a name really and I wouldn't get too hung up on that

If they (participants) knew how much joy the SO brings to the lives, everyday lives of the disabled and how much they get out of it – I can't tell you enough

The way I see it is as long as people are having fun and enjoying themselves sure isn't that what counts?

Interviewer: Why do you feel the younger generation were more vocal about labelling?

INT 1: The younger age groups are interesting aren't they. They are probably more open to or maybe more accepting of diversity. They grew up with it like difference

They are not so hung up....they don't label people so much as much as older generations might do

I think younger people have no real issues with that kind of thing, more open

When you think about it as well the younger people are much more relaxed around or open to difference...sure you only have to look at the recent same sex marriage referendum. Younger people today are not concerned with that kind of stuff and have no real issues at all with that kind of thing'

PITY/CHARITY

Interviewer: This was another theme that arose - feeling sorry for the athletes on viewing some of the images especially images where children and PWID are fundraising – why do think that was the case?

INT 1: Maybe it's all to do with not knowing/ignorance about disability/lack of knowledge and like what they (PWID) can do and what they can achieve as well

Not knowing what people can achieve and assuming or making assumptions that they (PWID) have to be care for

Maybe it is down to a lack of exposure I suppose, maybe some of the images did encourage people to feel pity or sorry for them (athletes)

The chances are that just maybe this age group have children of their own and they might be thinking or imagining what of they had a child with a disability well what would their future be like or how different their world might be, it's hard to know

Interviewer: What do you make of the fact that some of the older age participants expressed sorrow for some of the athletes – why do you think they felt like that?

INT 1: Being honest with you I think find it odd that this particular age bracket didn't have much issue with the label special and yet they are saying that they feel sorry for the PWID when they looked at the images

(Pause)

It's a bit like is that a contradiction in a way

TOKENISM

Interviewer: When the participants saw pictures of athletes with politicians many spoke about tokenism. They felt there were elements of tokenism with politicians being present in the photos? How do you feel about that?

INT 4: Interviewee laughs – **(pause)**

Yea those pictures do look or can look very good or positive or inclusive alright

But sure politicians would do anything to make sure they appeal to all as in the wider public

But to be fair the volunteers do some really good stuff excellent work

Some of the photo though might just be (pause – and smile) those images might be simply just opportunistic for famous people not just politicians.

INCLUSION WITHIN THE CONFINES OF THE SO AND THE WORLD OF DISABILITY

Interviewer: The final theme that arose across all focus groups was the theme of inclusion – but participants spoke about inclusion from within the world of disability or as in the confines of the SO. What focus group participants meant was - PWID were included, but within the confines of the SO and the world of disability and not as part of their circle of support. What is your thinking on that?

INT 1: But sure doesn't the research tell us that they don't have meaningful inclusion or roles in society and things like services like education can still be segregated

But being honest Ray if you have to look at society and some of the blame would lie there and their disability goes before them

There is a lack of acceptance of the disabled

There is a mindset in society and that mindset hasn't really changed all that much over the years

It's funny in a way yes there may be an acceptance of the fact that that they (PWID) have rights but society as a whole has failed to reach out to them (PWID).

We have a long way to go

There is a long way to go, but I do think to be fair that disability rights campaigners have started this have started the ball rolling'

Unfortunately all the same there is still a lot of fear out there and a lot of stereotyping and ignorance of PWID in Ireland today'

Interviewee: Many participants thought it was fine not to have a friend with an ID as they felt they had nothing in common with them. The did feel that PWID were included per se – but again within the confines of the SO and their own friends. However, 99.1% of the sampled population did not have friends with an ID

INT 1: As said already Ray the mindsets of our society has not really changed that much or even at all over the years

I still say that society well I think society has failed to reach out to PWID

8.7.2   APPENDIX 7: b

INTERVIEWEE TWO (INT 2): NOTES

Researcher: Introductions and thanked Interviewee (INT 2) for agreeing to take part in the study. Ethical issues discussed to include anonymity and consent. It was explained to interviewee that they were being invited to participate in a research study because of their knowledge, expertise and experience of the research topic under investigation. It was also explained that the research study was for the award of Doctor of Philosophy (PhD) in Health and Life Sciences with the University of Ulster, Faculty of Health and Life Sciences, Ulster Sports Academy, Jordanstown, Shore Road, Belfast

The overall themes that arose from the analysis of the focus groups were introduced to the interviews which were as follows:

1. Health and Wellbeing
2. A sense of teamwork, fun and togetherness
3. Skills development/Up skilling
4. Language – specifically the use of the term '*Special*'
5. Pity/Charity
6. Tokenism
7. Inclusion within the confines of the SO and the world of disability

The interviewer (author) took succinct focused notes during each interview and made additional comments/notes immediately after each interview was completed. In some instances the interviewer followed up with some of the interviewees with an email seeking clarification on some discussion raised during the interview.

THEMES DISUCSSED WITH INTERVIEWEES:

HEALTH & WELLBEING

Interviewer: On viewing the pictures of the SO athletes at various SO events focus groups participants spoke of the overall health benefits of participation in sport as well as the emotional well being to be experienced. This came up in all groups. What are your thoughts on that are?

INT 2: In a way sure I suppose that is true and you can see it in the pictures you used

I know that say from my own experience that they (PWID) all absolutely used to love the SO and I can't tell you really how much

Like it's their club and they take so much pride in being part of it'

Apart from the benefits of sport and being active they get so much out of it, like they are so proud to be part of and it definitely builds up on their confidence like

The grow and become more confident and self esteem as well

TEAMWORK, FUN AND TOGETHERNESS

Interviewer: The second theme that arose was to do with a sense of teamwork, and a sense of togetherness and fun. Participants felt after viewing the images that they could sense these things such as teamwork and fun.

INT 2: Yes that would be correct in my opinion

I do believe or agree that they do learn skills, like key skills say for example some of them can learn how to make friends and they are learning to be part of a team

I suppose when you think of it they are just having a bit of 'craic' as well like anyone else would do

And do you know there is also a great sense of like camaraderie and friendship among the athletes

There is also a great sense or feeling of fun among the athletes as well

They really do enjoy the S and get so much from it...it is hard to describe or explain…maybe it has to be experienced to understand this maybe

SKILLS DEVELOPMENT/UP SKILLING

Interviewer: This was the third theme to arise skills development. Many participants spoke about the concept of skills development and building. Why do you think on viewing the images they came up with this?

INT 2: I would be in agreement with that totally

Being part of or just playing in the Games can promote or build up their confidence

The coaches are terrific here they play a great role in the supporting of the athletes and in building up their social skills as well

They (athletes) can also build up on the skills on how to interact say with other people, or how to make friends, and things like the skills to be involved in playing any sport no matter what that sport is or might be

Interviewer: Having viewed the images a small cohort of participants in the older age bracket raised questions if PWID did learn skills that were meaningful from participating in the Games. What is your interpretation of that?

INT 2: I wouldn't think so that is true

(Pause)

Being honest I think I would totally and absolutely disagree with that

This could be a case where they don't know anything about the Games or the SO and then just make an opinion formed on a picture but still they may not know anything about the Games

To be fair – I do take the point. I understand that some of the photos are not at times representative of the learning and the development of the skills they learn

But I will say they (PWID) do learn skills and do become more confident from being a member of the SO

LANGUAGE – SPECIFICALLY THE USE OF THE TERM '*SPECIAL*'

Interviewer: In some focus groups some participants were quite vocal about the use of the term '*special*' and referred to it as a label. This was more evident with the younger age groups. What is your interpretation of that?

INT 2: Well first and foremost I honestly think that the SO have done some tremendous work

They really have done some great work and in my opinion that have also improved on the QOL of PWD

I understand where you or they are coming from about that issue or term special but in a way it like a brand or it's like a logo and very well known as well

I don't know if you could do anything about it or might change it. It's too well k known

But then again when you think of it if II changed their name successfully or achieved it successfully why can't the SO?

Interviewer: In your opinion why would the younger generation be more vocal about this?

INT 2: I think that the younger ones are more or less or probably more educated

The chances are they are probably more or have been more exposed to PWID

They are (PWID) in schools nowadays and young people learn more are more ok with difference

They probably know a bit about these issues like disability or see it more as a rights kind of thing

PITY/CHARITY

Interviewer: Participants expressed feeling of sorry and or pity for PWID on viewing the images. With the younger age bracket the discussion was more focused around charity, especially with regard to pictures where PWID were fundraising. Can you understand why they would interpret these images in that way?

INT 2: I fully agree with that – it is a practice that for me I have to say is wrong on a whole lot of levels

If you think about it what I mean is that it's using PWD basically for making money for the SO

However, you have to stop for a minute and think like you have to respect that it could come down to individual choice where one of the athletes wants to do (fundraise)

It is possible that they PWID may want to do this and that might needs to be taken into account but it is still something that sits well sits uneasy with me

Interviewer: And what is your thinking on the fact that some of the older age participants expressed sorrow for some of the athletes

INT 2: I suppose in many ways that is really down to understanding

It's more or less really to do with how they or their own understanding or indeed maybe misunderstanding of PWID.

They (participants) are all the same kind making assumptions about PWID based on those images that you showed to them.

TOKENISM

Interviewer: Some of the images raised discussion on the concept of tokenism. When participants saw some of the photographs with the athletes with politicians they felt there were elements of tokenism involved. What is your opinion on that?

INT 2: Being honest I kind of well get that

I can see why the participants would get or got that from the photographs and images

There is still many or a lot of issues that need to be addressed from a political perspective and we need politicians to do more

Yet we are still waiting for better services say for example or more funding and the politicians could be using these situations as opportunities for positive publicity'

INCLUSION WITHIN THE CONFINES OF THE SO AND THE WORLD OF DISABILITY

Interviewer: A final and significant theme that arose across all focus groups was the theme of inclusion – however, participants spoke about inclusion from within the world of disability or as in the confines of the SO. That PWID were included, within the confines of the SO and were not included in their circle of support

INT 2: Yes, I understand that and I can see why the people would say that kind of thing

In a way they (SO) they (participants) probably viewed the SO as a club for only PWID and when you think about it in way it is

But we need to be careful as if we push the whole inclusion thing too far it may not be in the interest or maybe go against the individual choices of the SO athletes

You have to think it might be something that they don't want

Another way of thinking about it is that groups would tend to naturally stay close or stick together like PWID and that is being included in their own group

Interviewee: Many participants thought it was fine not to have a friend with an ID as they felt they had nothing in common with them. They did feel that PWID were included per se – but again within the confines of the SO and their own friends. However, 99.1% of the sampled population did not have friends with an ID

INT 2: But from my experience many PWID will want to stay part of their own disability group and may not really want to meet new people in the community

They may not necessarily want to meet new people

(Gap)

Maybe when we think of it they (the SO) are like a stepping stone to inclusion -well that's my opinion on it

INTERVIEW ENDS

8.7.3 APPENDIX 7: c

INTERVIEWEE THREE (INT 3): NOTES

Researcher: Introductions and thanked Interviewee (INT 3) for agreeing to take part in the study. Ethical issues discussed to include anonymity and consent. It was explained to interviewee that they were being invited to participate in a research study because of their knowledge, expertise and experience of the research topic under investigation. It was also explained that the research study was for the award of Doctor of Philosophy (PhD) in Health and Life Sciences with the University of Ulster, Faculty of Health and Life Sciences, Ulster Sports Academy, Jordanstown, Shore Road, Belfast

The overall themes that arose from the analysis of the focus groups were introduced to the interviews which were as follows:

1. Health and Wellbeing
2. A sense of teamwork, fun and togetherness
3. Skills development/Up skilling
4. Language – specifically the use of the term '*Special*'
5. Pity/Charity
6. Tokenism
7. Inclusion within the confines of the SO and the world of disability

The interviewer (author) took succinct focused notes during each interview and made additional comments/notes immediately after each interview was completed. In some instances the interviewer followed up with some of the interviewees with an email seeking clarification on some discussion raised during the interview.

THEMES DISCUSSED WITH INTERVIEWEES:

HEALTH & WELLBEING

Interviewer: On viewing the pictures of the SO athletes at various SO events focus groups participants spoke of the overall health benefits of participation in sport as well as the emotional well being. This came up in all groups. Can I ask you what your thoughts on that are?

INT 3: Well they (PWID) work really hard and they always put a lot into it you know and there is a lot of training in this and no doubt that could be seen in the pictures

There's a lot of commitment there as well

Its has to be good sure there a lot of training involved as well

They work hard and get a lot out of it and it is quite competitive you know

Of course there are health benefits to be gained as well because they are playing in sport and that will keep them active. And they say that is also good for your mental health too.

They (participants) obviously picked up on that from pictures you used

TEAMWORK, FUN AND TOGETHERNESS

Interviewer: With the second theme the focus groups spoke about a sense of teamwork, and a sense of togetherness and fun. They felt after viewing the images that they could sense these things such as teamwork togetherness and fun. What are your thoughts on that?

INT 3: Yea just like anyone else that can take part or join in

And that is regardless of their disability it is for everyone

Just like any other sporting event if you know what I mean

They (PWID) feel belonging to or are connected to the SO

SKILLS DEVELOPMENT/UP SKILLING

Interviewer: This was the third theme to arise skills development. Many participants spoke about the concept of skills development and building. Why do you think on viewing the images they came up with this?

INT 3: Well they are playing a game or a sport and if they need some help it doesn't meant that they are not learning something new of course they could be learning

Sure any chance to meet people or new people id a chance to learn something new

It might be – well even if it is learning to take your turn or learning to be with people as in socialising

But I would say that some of those images I saw they are just showing pics of disabled kids getting hugs from the staff the volunteers and coaches isn't it all a bit maternalistic

Interviewer: Can you explain what you mean by that?

INT 3: I suppose what I mean is that some of the pictures don't really show or replicate sport the real world of sport in any real way for example they (the athletes) are still happy when they lose and the carers kind of mother them in a way

To be honest in my opinion that is not really what the real world of sport is about

LANGUAGE – SPECIFICALLY THE USE OF THE TERM '*SPECIAL*'

Interviewer: Some participants were very vocal about the use of the term 'special' seeing it as a label that was more particular the younger age groups.

INT 3: This is something that gets to me too

I absolutely hate that term and I do really feel very strongly about its use

It is not good in any way, it's exclusionary and really emphasises the difference

Why do they (PWID) have to be special?

It promotes that whole pity thing and charity thing as well. It's playing on the disability to make the public feel sorry or to get sympathy from the public

Interviewer: Why do you feel the younger generation were more vocal about labelling?

INT 3 I'm not that sure being honest, need to think about that...maybe because younger people are just more vocal about social issues or its maybe a more open society now...I don't really know I need to think a bit about that

PITY/CHARITY

Interviewer: Participants felt sorry for the athletes on viewing some of the images especially images where children and PWID are fundraising – why do think that was the case?

INT 3: Well I too fell strongly about that kind of thing to be honest

PWID should not be colleting or fundraising in public places or shopping centres

It really goes further in saying or emphasising that they are special

Interviewer: Why do you say that?

INT 3: Well I think anyone would understand that – like feeling sorry for them and especially children when collecting – we are very good at this type of thing in Ireland aren't we

Sure even when you think of the names of the services they have charity in their names like Daughters of Charity

When we do this type of thing in public collecting and the charity thing it only makes sense that they (PWID) will be pitied or people will feel sorry for them

Interviewer: What do you make of the fact that some of the older age participants expressed sorrow for some of the athletes – why do you think they felt like that?

INT 3: I suppose when you think of it the world we live in

Well we live in a world or culture where we push children really hard and in many ways the real world can be very competitive too

That's probably something that isn't too evident in some of the photos your groups looked at

TOKENISM

Interviewer: When they saw pictures of athletes with politicians may participants spoke about tokenism. That there were elements of tokenism with politicians being present in the photos? How do you feel about that?

INT 3: With politicians it nearly goes without even thinking that they will grasp at any chance or opportunity to make them look better or look good in the public eye

Like appeal to the public in a favourable way

And when you think about it for a minute they (politicians) have really done a lot for PWD over the years

I suppose you could say that they (politicians) failed PWID over the years

PWID are still not very much included are they? They have remained in the outside of society if you know what I mean

I really do get or fully understand why the your groups were a bit cynical about these images

INCLUSION WITHIN THE CONFINES OF THE SO AND THE WORLD OF DISABILITY

Interviewer: The final theme that arose across all focus groups was the theme of inclusion – but participants spoke about inclusion from within the world of disability or as in the confines of the SO. That PWID were included, within the confines of the SO and were not included in their circle of support

INT 3: Well the SO have kind of cornered or boxed people off into a specialised category of people

You have to be disabled or have a disability to play or participate and that means then that only the disabled people can play or be part of the clubs

But when you think about it we still don't get to see PWID in the mainstream like say jobs, they don't get jobs like the rest of us

Interviewee: Many participants thought it was fine not to have a friend with an ID as they felt they had nothing in common with them. They did feel that PWID were included per se – but again within the confines of the SO and their own friends. However, 99.1% of the sampled population did not have friends with an ID

INT 3: I may sound or this may very negative like, and don't get me wrong

I'm sure that the SO do some very good stuff but I would honestly think what they actually mean by inclusion or understand it to be is very different to me and how I would see it

PWID are not making friends in their community like friends with no disabilities. That's because they (PWID) are not getting chances to be included in the community like anyone else – they are special like and as I said earlier... well I believe that label goes before them

INTERVIEW ENDS

8.7.4 APPENDIX 7: d

INTERVIEWEE FOUR (INT 4) NOTES

Moderator: Introductions and thanked Interviewee (INT 4) for agreeing to take part in the study. Ethical issues discussed to include anonymity and consent. It was explained to interviewee that they were being invited to participate in a research study because of their knowledge, expertise and experience of the research topic under investigation. It was also explained that the research study was for the award of Doctor of Philosophy (PhD) in Health and Life Sciences with the University of Ulster, Faculty of Health and Life Sciences, Ulster Sports Academy, Jordanstown, Shore Road, Belfast

The overall themes that arose from the analysis of the focus groups were introduced to the interviews which were as follows:

1. Health and Wellbeing
2. A sense of teamwork, fun and togetherness
3. Skills development/Up skilling
4. Language – specifically the use of the term '*Special*'
5. Pity/Charity
6. Tokenism
7. Inclusion within the confines of the SO and the world of disability

The interviewer (author) took succinct focused notes during each interview and made additional comments/notes immediately after each interview was completed. In some instances the interviewer followed up with some of the interviewees with an email seeking clarification on some discussion raised during the interview.

THEMES DISCUSSED WITH INTERVIEWEES:

HEALTH & WELLBEING

Interviewer: On viewing the pictures of the SO athletes at various SO events focus groups participants spoke of the overall health benefits of participation in sport as well as the emotional well being. This came up in all groups

INT 4: That is hardly surprising you know and it is an obvious finding

I think that is an obvious fact and your groups picked it that type of thing from looking at the images of the athletes

Participation in sport can be good for you whether you are have a disability or not so that doesn't count really (having a disability)

The research will tell you that being active is also good for mental health as well and there is a lot to be gained from playing sport such as learning social skill and meeting new people as well

I think your people were probably able to see this, they are probably involved in sport and know what its like firsthand of the benefits

TEAMWORK, FUN AND TOGETHERNESS

Interviewer: The second theme to arise from the analysis of the focus groups was that of teamwork, which was underpinned by a lot of talk about a sense of togetherness and fun. Are you surprised by those findings?

INT 4: No not at all that doesn't surprise me in the slightest

On viewing such images again its hardly surprising that participants came up with that – obvious really

But yes while the SO I'm sure can promote a sense of teamwork, they don't always necessarily promote inclusion in the wider world for PWID in their communities.

I completely or fully understand why the people spoke of inclusion within the confines of the SO. Because society and often professional expectations need to be taken into account.

What I mean is if you look at it another way for example or what I mean is we have to assume society would never expect a person without a disability to be engaging in SO or anything similar to it

Other people without disabilities would not see themselves participating in such Games

The SO segregate people with intellectual disability as you have to have an intellectual disability to participate and be able to play

With other sports, the competitions appear to be real, not fake at all like the SO

What I means is having clowns on the sidelines and playing games like such as pass the parcel where grown ups with disabilities win toys does not help either as they are reinforcing images where PWID are innocent and childlike

It appears the Games are really only about participating and having fun and only for the PWID – so you have to have a disability to play in the Games

Interviewer: Most focus group participants spoke about PWID having fun and looking happy when they viewed the image – do you see where they were coming from

INT 4: Absolutely and yes they can look happy of course they can

However, if we were to look at the larger picture and then to start to think of group home situations and the big state run institutions

Well PWID were always smiling weren't they?. You must ask yourself you really must were they truly happy?

Does evidence not suggest that they were disempowered and dependent on those state run services

Another question – hare how are the SO defining and measuring happiness or quality of life as well?

How are they measuring inclusion? How do they empower people?

Just because someone or a person is smiling does not mean that they are happy and have a good quality of life, especially in comparison to people that so not have disabilities

SKILLS DEVELOPMENT/UP SKILLING

Interviewer: The third common theme to arise across the focus groups was that of Skills development and up skilling of the athletes. You already mentioned this earlier however, in the older age groups some questioned id skills development was really that evident after viewing the photographs

INT 4: As I said already Ray I can really see where your groups were coming from here

As I said earlier, having clowns present at those Games and playing childlike games like pass the parcel for adults with ID is inappropriate

It suggests really (pause) well absolutely nothing of skills development to the general public'

LANGUAGE – SPECIFICALLY THE USE OF THE TERM '*SPECIAL*'

Interviewer: Some participants were very vocal about the use of the term 'special' seeing it as a label, particularly the younger age groups

INT 4: Well the language the SO use regarding ''special'' can impact on inclusion for PWID

It puts forward to you two types of people, that is an us and a them

With the use of this type such type of language and practices that promote segregation

Think about it for a minute would people who are not involved in the SO or without having disabilities aspire to be in or to participate in the like of such Games?'

PITY/CHARITY

Interviewer: Another theme to arise that of feeling sorry for the athletes on viewing some of the images especially images where children and PWID are fundraising – what is your thoughts on that?

INT 4: Well that probably is another one of your obvious findings

You know you wouldn't really see other athletes or Olympians out shaking buckets on the street and then looking for money from the public now would you?

These things or such practices promote a stereotypical attitude towards PWID where they are to be pitied and or where they are seen to be more as charity case

I am not one bit surprised at all by this that this was something that was found you found in your study

Interviewer: Some participants in the older groups admitted they felt sorry for some of the athletes on viewing these pictures – again what do you make of that?

INT 4: Again Ray that's hardly surprising at all

The SO portray PWID as children or eternal children.

The SO even show or the adults are portrayed like this too.

The general public pity them on seeing the images you speak of

TOKENISM

Interviewer: Groups also spoke of the concept of tokenism, as in after viewing some of the images they felt they were tokenistic, especially the ones with politicians present

INT 4: Absolutely there is a lot of tokenism here alright

We see PWID if or even maybe once a year at these Games and its all in that moment

But really there is very limited scope at all for any meaningful interaction within our community

Some would say that politicians just jump on the bandwagon and get their pictures taken with these PWID and it all looks all good

But then this type of thing distracts from the fact that PWID have been systematically failed by politicians and the state

INCLUSION WITHIN THE CONFINES OF THE SO AND THE WORLD OF DISABILITY

Interviewer: The final theme arising was that participants viewed inclusion as something within the confines of the SO and the world of disability –so participants felt that had nothing in common with PWID so wouldn't necessarily befriend a PWOD and that that was OK

INT 4: Being honest I get that, it is all to do with exposure and culture isn't it

PWID are really when you think of it underrepresented in our communities

And as well they are not really included in any meaningful way.

I already said that when or where we see PWID maybe say once a year at these Games well there's is very limited scope for any type of meaningful inclusion within our communities

I said already that these Games are not age appropriate as you see adults are often doing things like childlike activities and games and the like

This kind of thing it does not happen at other sporting events and it does really nothing to further the cause of inclusion for PWID

INTERVIEW ENDS

Follow up email re Findings from Interviewer to INT 4

TEAMWORK:

You said that yes while the SO can promote a sense of teamwork, the don't necessarily promote inclusion for PWID. Two key points you made here - I wonder would you mind further explaining if possible:

1. **Interviewer:** You specifically spoke about the expectations being different for PWID (was this from a societal point of view or an SO point of view or both - and would you have a example of exactly what you mean?)

   INT 4: Society (and often professional) expectation. Society would not expect person without a disability to be engaging in SO or similar activities.

2. **Interviewe**r: You also spoke of segregation here and said that in a way the SO segregate people with ID as you have to have an ID to participate. While I get this point - would it be the same of the Paralympics (Or does the fact they are seen as more competitive make a difference?)

   INT 4: I see Paralympics as different from SO. With Paralympics, people are making informed choice and also competitions appears to be real, not fake like SO

INCLUSION & LANGUAGE:

1. **Interviewer:** You questioned what does this mean for PWID and I think reading my notes you were also questioning if the SO knew what it meant? Did I interpret this correctly xxx? Again you raised two very interesting points here which I wonder could you further expand on?

   The language the SO use with regard to the term 'Special' - you said this can impact on inclusion for PWID as it puts forward 2 types of people - i.e. Us and Them. I think you were speaking of (which came up in my findings) 'with such language and segregation would people not involved in the SO aspire to be in such Games? Am I right here?

INT 4: Yes, correct

2. Interviewee: You also spoke about the term 'athlete'. You said if peope were just participating for fun - then they are not athletes (as in professional athletes) and by calling people athletes is somewhat tokenistic. Again did I get this right and do you need to further expand?

   INT 4: Yes, almost all people engage in sports as a recreation, not as a paid job

INCLUSION AND CULTURE

1. **Interviewee:** When I said to you that out of over one hundred participants interviewed for this piece only one could name a Special Athlete gold medallist (Yet participants could name Irish, British and USA medallists in the 'Normal' Olympics no problem) you said this did not surprise you and it is all to do with exposure and culture. Did you mean that PWID are underrepresented in our communities and are not really included in any meaningful way? Am I interpreting that correctly?

   INT 4: Yes you are

2. **Interviewee:** You also spoke a little here about 'Tokenism' where we see PWID maybe once a year at these Games and there is very limited scope for meaningful interaction with the community - did I get this right?

   INT 4: Yes, that is correct

3. **Interviewee:** In this section you also spoke about the Games and questioned if they were 'age appropriate'. On reviewing my notes I am not too sure exactly what you wanted to get at here?

   INT 4: Adults are often doing child activities (especially during non-athletic competition times) such as clowns being present, bean bag tosses, toys as prizes, etc.

PROUD/HAPPY

1. **Interviewee:** You made some very interesting points here Keith. When I said that many participants spoke about PWID being proud and happy in the photographs of the SO you asked the question why and if they really were happy? You said if we look at the larger picture and think of group homes and state institutions PWID were always smiling - but were they truly happy? I

think this is a very relevant and pertinent point - I wonder would you mind expanding on it a little

INT 4: Yes, you have this right how are they defining and measuring happiness (or quality of life as well)? Just because someone is smiling does not mean that they are happy and have a good quality of life. Especially in comparison to people without disabilities

8.7.5 APPENDIX 7: e

INTERVIEWEE FIVE (INT 5): NOTES

Researcher: Introductions and thanked Interviewee (INT 5) for agreeing to take part in the study. Ethical issues discussed to include anonymity and consent. It was explained to interviewee that they were being invited to participate in a research study because of their knowledge, expertise and experience of the research topic under investigation. It was also explained that the research study was for the award of Doctor of Philosophy (PhD) in Health and Life Sciences with the University of Ulster, Faculty of Health and Life Sciences, Ulster Sports Academy, Jordanstown, Shore Road, Belfast

The overall themes that arose from the analysis of the focus groups were introduced to the interviews which were as follows:

1. Health and Wellbeing
2. A sense of teamwork, fun and togetherness
3. Skills development/Up skilling
4. Language – specifically the use of the term '*Special*'
5. Pity/Charity
6. Tokenism
7. Inclusion within the confines of the SO and the world of disability

The interviewer (author) took succinct focused notes during each interview and made additional comments/notes immediately after each interview was completed. In some instances the interviewer followed up with some of the interviewees with an email seeking clarification on some discussion raised during the interview.

THEMES DISCUSSED WITH INTERVIEWEES:

HEALTH & WELLBEING

Interviewer: On viewing the pictures of the SO athletes at various SO events focus groups participants spoke of the overall health benefits of participation in sport as well as the emotional well being. This came up in all groups.

INT 5: They are so committed to the Games and so proud of their achievements you have to see it to believe...that's ALL very true, while it's a great chance to socialise for them and the athletes they are also training and they are involved in activities like running and other active things like that

Of course yes it it's good for them as they get the chance to do things like exercise but they are also enjoying themselves as well very much so

There are lots of good things about it really and not just the physical stuff but all of the enjoyment as well

They are member of the clubs and there are expectations of them as well like to be on time and to participate and abide by the rules of the clubs as well

TEAMWORK, FUN AND TOGETHERNESS

Interviewer: The second theme to arise from the analysis of the focus groups was that of teamwork, which was underpinned by a lot of talk about a sense of togetherness and fun. Are you surprised by those findings?

INT 5: Yes as already said like that would be or is the norm

There is not only great pride but there also a sense a great sense of sportsmanship there as well

But there is also great co-operation between them and great communication as well

That really is the way that it is and its good for the lads (athletes) as well

Interviewer: Most focus group participants spoke about PWID having fun and looking happy when they viewed the images but went on to speak of inclusion only in terms of PWID experiencing it in the world of the SO and what world of disability We will come back to this later, but what do you make of that?

INT 5: It maybe is because

(Pause)

Because probably they don't know much if anything about disability.Maybe they are looking at the images that you sowed them and maybe they are just seeing all PWID together

Interviewer: We will come back to this theme later on in the interview

SKILLS DEVELOPMENT/UP SKILLING

Interviewer: The third common theme to arise across the focus groups was that of Skills development and up skilling of the athletes. You already mentioned this earlier however, in the older age groups some questioned id skills development was really that evident after viewing the photographs

INT 5: Absolutely and it's great that this type of thing was acknowledged

I have seen firsthand that the Games really can be very helpful to children

It can help in particular with coping skills for children like learning coping skills such as learning to sit when you should and learning to wait

In many ways they learn a lot about participating in public

Interviewer: Some of the participants in the older age groups questioned if the skills PWID learn were always meaningful – why do you think they would have discussed this?

INT 5: Really? Well the fact is that you are always meeting other SO athletes and that's a chance to socialise

I wouldn't necessarily agree with those comments

I know that some of the lads PWID in the SO really do enjoy it and the weekly clubs

And they do learn a lot to be fair – like they learn about competition and the commitment involved

The fact a lad may use something like ramp to help him bowl should be seen as an aid to support him say to be included and he has put in a significant effort to participate......if

280

you don't know about the Games then you wouldn't necessarily know that the athletes do learn social skills

I can tell you also I know 1st hand that they learn about things like reliability – they turn up because they have to and they wouldn't let their team mates down
That's learning in itself.

LANGUAGE – SPECIFICALLY THE USE OF THE TERM '*SPECIAL*'

Interviewer: Some participants were very vocal about the use of the term 'special' seeing it as a label, particularly the younger age groups

INT 5: I don't really get that to be honest

As far as I am concerned like nobody ever seems to gets caught up with the

Paralympics

It's always the SO this and the SO that, but the Paralympics that's also a label

isn't it?

Why not make comment on that?

The way I see it sometimes why can't people just focus on the Games and especially on how much they (athletes) enjoy them?

It's always as if or like as if the glass is always half empty?'

Interviewer: You seem very passionate about that? Why is this so?

INT 5: Well it's as I said, why focus on the negative when there are so many

positives to be had if you know what I am trying to say

PITY/CHARITY

Interviewer: Another theme to arise was that of feeling sorry for the athletes when participants viewed some of the images especially images where children and PWID are fundraising – what is your thoughts on that?

INT 5: Well if I am honest I can see where they are coming from

But think about it all sports clubs do this. They all engage in these practices don't they?

What I mean is that say our local GAA club were collecting or fundraising few weeks back now and nobody talked about feeling sorry for them

Again it's like as if the glass is half empty if you ask me People should focus more on the positives

So what if they are involved (in fundraising) it's their clubs and sure as far as I am concerned why not

The SO even show or the adults are portrayed like this too

TOKENISM

Interviewer: Groups also spoke of the concept of tokenism, as in after viewing some of the images they felt they were tokenistic, especially the ones with politicians present

INT 5: I wouldn't get hung up on that – sure politicians go to everything. Local funerals, fundraisers and the like

In a way they are expected to go to these things aren't they?

It might be just that they are showing up just for the publicity but if they didn't they would probably get bad press so maybe they can't win with this one, like it a no win situation

As they say you're damned of you do and damned if you don't

INCLUSION WITHIN THE CONFINES OF THE SO AND THE WORLD OF DISABILITY

Interviewer: Many participants when they spoke about inclusion they spoke about it within the confines of the SO and the world of disability. So while they felt PWOD were included – they were referring to inclusion in the SO and disability world, not community inclusion

INT 5: I kind of get that – like think about it – we see or view inclusion on our terms but yet do we really know or truly know what PWID would want

They are included among their own friends in the SO for sure we can't be seen to be forcing inclusion onto people in wider society either

Interviewer: Only one participant out of 107 claimed to have a friend with an IN – what do you make of that?

INT 5: It's possible that maybe the SO could look at broadening their horizon on what they mean or understand what inclusion is or to be

That is interesting that no one had a friend with an ID and maybe the SO are not achieving their aims of making or creating communities that are inclusive of PWID

One thing I will say for sure though is. You have to see them and get to experience them to know what they do like the great work they do

I have seen it at firsthand that they provide a chance or opportunity for PWID to meet and socialise with the non disabled and in a way that type of exposure is also important

INTERVIEW ENDS

REFERENCES

Aiden, H. & McCarthy, A. (2014) Current attitudes towards people with disabilities Scope: United Kingdom.

Ainscow, M. & Farrell, P. (2013) *Making Special Education Inclusive*: *From Research to Practice* Routledge: London.

Albrecht, G., L. (2005) *Encyclopaedia of Disability* Sage Publications: London.

Albrecht, L., G., Seelman, D., K & Bury, M. (2001) *Handbook of Disability Studies* Sage Publications: London.

Alexandra Fraser, M., G. (2008) *Social Skills and Sports Programme: Developing the Social Skills of Young Special Olympic Athletes* ProQuest LLC: United States of America.

American Alliance for Health and Recreation (1982) *Soccer: Tips for Techniques for Teachers and Coaches* Pennsylvania State University: United States of America.

Anderson, W., D. (2013) *Reaching Out and Bringing In: Ministry to and with Persons with Disabilities* West Bow Press: United States of America.

Andrews, K,. T. & Edwards, B. (2004) Advocacy Organizations in the U.S. Political Process: Annual Review of Sociology Vol 30 479 – 506.

Arnold, P. (1998) *Sports, Ethics & Education* Cassel: London.

Arnstein, S,. R. (1969) 'A Ladder Of Citizen Participation', Journal of the American Planning Association, 35: 4, 216 — 224.

Arscott, D. (2011) *The Olympics – A Very Peculiar History* The Salariya Book Company Ltd: United Kingdom.

Arthur, S. & Finch, H. (1999) Physical Activity in our Lives Health Education Authority: London.

Ashcok, L. & Foreman-Peck, K. (2013) *Managing Teaching and Learning in Further and Higher Education* Routledge: United Kingdom.

Association of Secondary Teachers in Ireland (2016) Education Act 1998 [accessed May 27th 2017 at http://www.asti.ie/operation-of-schools/legislation/education-act/]. Atkinson, S., Lay, J., McAnelly, S. & Richardson, M. (2014) *Intellectual Disability in Health and Social Care* Routledge: London.

Atkinson, S., Lay, J., McAnnelly, S. and Richadson, M. (2014) *Intellectual Disability in Health and Social* Care Routledge: London

Attitudes2Disability (2014) *The History of Attitudes to Disabled People: Disability Fossilised in Myths, Literature, Theatre, Folklore, Biography and History* Attitudes to Disability: USA [accessed 6th December 2014 at http://attitudes2disability.wordpress.com/category/medical-model-vs-social-model/].

Austin, M. (1999) *Needs Assessment by Focus Group*: *Info Line – Tips, Tools, and Intelligence for Trainers* ASTD Press: USA.

Auxter, D., Pyfer, J., Zittel, L. & Roth, K. (2016) *Principles and Methods of Adapted Physical Education & Recreation* Jones & Bartlett Learning: MA.

Ayuba, H. (2015) *Business Research Methodology for Professionals: Introduction to Research Methodology* [Accessed November 24th 2016 at http://www.slideshare.net/habibayuba/business-research-methodologybcrm1].

Baglieri, S. & Shapiro, A. (2012) *Disability Studies and the Inclusive Classroom*: *Critical Practices for Creating Least Restrictive Attitudes* Routledge: London.

Bailey, S. (2008) *Athlete First: A History of the Paralympic Movement* Wiley: United Kingdom.

Baility, S. & Lee Hodgkins, S. (2009) *The discursive construction and invalidation of disability* in Marshall, C., A., Kendall, M., E., Banks, M., E. & Gover, R., M., S. (2009) *Disabilities; Insights from across fields and around the world* Volume 1, 2 & 3 Greenwood Publishing Group: United States of America.

Bainbridge Bernhardt, D. (2010) *Recreation for the Disabled Child* Routledge: New York.

Baldock, J., Manning, N. & Vickerstaff, S. (2007) *Social Policy 3rd Edition* Oxford University Press: Oxford.

Barnes, C. & Mercer, G. (2010) *Exploring Disability 2nd Edition* Polity Press: Cambridge.

Bartelings, P. & Bokum, T,.N. (2000) *Age Discrimination Law in Europe* Kluwer Law International: New York.

Barton, L. (1996) in Baglieri, S. & Shapiro, A. (2012) *Disability Studies and the Inclusive Classroom*: *Critical Practices for Creating Least Restrictive Attitudes* Routledge: London.

Barton, L. (2015) *Disability Politics and the Struggle for Change* Routledge: London.

Bayer, L. A. (1986) *Representations of Eugenic Ideology and Sterilization Abuse* in Ana

Beamish, (2011) *Steroids: A New Look at Performance-Enhancing Drugs: A New Look at Performance-Enhancing Drug*s Praeger: California.

Becker, H., S. (1963) *Outsiders: Studies into Sociology and Deviance* in Thomas, D. & Woods, H. (2003) *Working with People with Learning Disabilities: Theory and Practice* Jessica Kingsley Publishers: London.

Beith, K., Tassoni, M. Bulman, P. & Robinson, K. (2005) *Children's Care, Learning & Development Heinemann* Educational Publishers: United Kingdom.

Bently, J., P. (2005) *The PhD Application Handbook Open* University Press: England.

Berkin, C., Miller, C., Cherny, R., Gormly, J. & Egerton*, D.* (2013) *Making America: A History of the United States of America* Nelson Education: Canada.

Bigby, C. & Fyffe, C. (2010) *More than Community Presence: Social Inclusion for People with Intellectual Disability*. School of Social Work and Social Policy: Australia.

Bowen, J. (2002) *The Americans with Disabilities Act and Its Application to Sport* in Howe, D., P. (2008) *The Cultural Politics of the Paralympic Movement: Through an Anthropological Lens* Routledge: Oxon.

Braun, V. and Clarke, V. (2006) in Eshetu, G. (2014) *Stories of Changes from Open Diaries: The Joint Effects of Radio Messaging and Group Discussions to Fight Child Marriage* Anchor Academic Publishing: Hamburg.

Braun, V. and Clarke, V. (2013) *Successful Qualitative Research: A Practical Guide for Beginners* Sage Publications: London.

Braye, S., Dixon, K. & Gibbons, T. (2015) *The 2012 Paralympics and Perceptions of Disability in the UK* in Dixon, K. & Gibbons, T. (2015) *The Impact of the 2012 Olympic and Paralympic Games: Diminishing Contrasts, Increasing Varieties* Palgrave MacMillan: United Kingdom.

Breakwell, G., M. (2012) *Diary and Narrative Methods* in Breakwell, G., M. Smith, J., A. & Wright, D., B. (2012) *Research Methods in Psychology* Sage Publications: London.

Brennan, D. (2013) *Irish Insanity 1800 – 2000* Routledge: London.

British Film Institute (2012) 'Medical model' vs. 'social model' [Accessed December 2017 at http://www.bfi.org.uk/].

Brittain, I. (2010) The Paralympic Games Explained Routledge: New York.

Browne, A. (2016) *Education and Disability Facts Sheet Disability Inequality: Dublin* [Accessed May 27th 2017 at http://disableinequality.ie/education-and-disability-factsheet/].

Browne, Z. & Hudson, A. (2007) *Athletes with Disabilities* in Kolt, S., G. & Snyder-Mackler, L. (2007) *Physical Therapies in Sport and Exercise* Elsevier: China

Brueggemann, J.B., White, F.L., Dunn, A.P., Heifferon, A.B., & Cheu, J. (2001) *College Composition and Communication* Vol. 52, No. 3 (Feb., 2001), pp 368-398.

Bryan, W., B. (2010) *Socio-political Aspects of Disabilities*: *The Social Perspectives and Political History of Disabilities and Rehabilitation in the United States* Charles C Thomas Publishers: United States of America.

Bryman, B. (2008) *Social Research Methods: Third Edition* Oxford University Press: Oxford.

Bunch, G (2005) *10 Keys to Successful Inclusion* Marsha Forest Centre: Toronto.

Burke, L., A. & Miller, M., K. (2001) *Phone Interviewing as a Means of Data Collection: Lessons Learned and Practical Recommendations*. Forum Qualitative Sozialforschung / Forum: Qualitative Social Research [Accessed August 6th 2017 at http://www.qualitative-research.net/index.php/fqs/article/%20view/959/2094].

Burley, K. (2017) *How to Describe the Importance of Teamwork* Chron: Houston News [Accessed 25th August 2017 at http://smallbusiness.chron.com/describe-importance-teamwork-17901.html].

Burns, J. (2015) *People with Learning Disabilities and the Paralympics* The British Psychological Society Vol pp 1-5.

Butler, K. (2016) *In What Capacit*y Irish Law Society: Dublin.

Butterfield, J. (2016) *Illustrated Course Guides: Teamwork & Team Building - Soft Skills for a Digital Workplace* Cengage Learning: MA.

Cahill, C. (2012) '*Disability attitudes survey should be a wakeup call to government* Inclusion Ireland. Inclusion Ireland: Dublin [accessed May 1st 2015 at http://www.inclusionireland.ie/content/media/64/disability-attitudes-survey-should--be-wakeup-call-government-inclusion-ireland].

Cahill, C. (2012) *We've waited long enough: Government must replace 1871 Lunacy Act now* Inclusion Ireland: Dublin [accessed on December 6th 2014 at http://www.inclusionireland.ie/media/840we-ve-waited-long-enough-government-must-repalce-lunacy-act-now.

Caldeira, O. (2015) *Exploring Esoteric and Exoteric Definitions of Disability: Inclusion, Segregation and Kinship in a Special Olympic Group* in Blank, T., J. & Kitta, A. (2015).

Calder, B. J. (1997) in Bryman, B. (2007) *Social Research Methods: Third Edition* Oxford University Press: Oxford.

Calhoun, L. & Calhoun G. (1993) *Age appropriate activities: Effects on the social perceptions of adults with mental retardation* in McDonnell, J. & Hardman, M., L. (2010) *Successful Transition Programs*: *Pathways for Students with Intellectual and Developmental Disabilities* Sage Publications: Los Angeles.

Carey, A. (2009). *On the Margins of Citizenship: Intellectual Disability and Civil Rights in Twentieth-Century America.* Temple University Press: Philadelphia.

Carson, G. (2010). *The Social Model of Disability*. Scottish Assessable Information Forum: Scotland.

Casey, R., A. & Krueger, M., A. (2000) *Focus Groups: A Practical Guide for Applied Research* Sage Publications: United States of America.

Caulfield, L. & Hill, J. (2014) *Criminological Research for Beginners*: *A Student's Guide* Routledge: Oxon.

Centre for Ageing Research and Development in Ireland (2015) *Focus on Social inclusion and ageing with an intellectual disability* CARDI: Belfast.

Chapin, W. (1846) *Report on the Benevolent Institutions of Great Britain and Paris including the Schools and Asylums for the Blind, Deaf, Dumb and the Insane 9nt Annual Report of the Ohio Institution for the Education of the Blind* C. Scott & Co. Printers: United States of America.

Charlton, J., I. (2000) *Nothing about Us Without Us: Disability Oppression and Empowerment* University of California Press: Los Angeles.

Christie, J. (2009) *Eunice Shriver: Championing the Special Winter Olympics Skiing Heritage* vol. 21 no. 4 p43.

Citizens Information Board (2016) *The Disability Act 2005*. [accessed January 23rd 2012]http://www.assistireland.ie/eng/Information/Education/Relevant_Legislation/Disability_Act,_2005.html.

Coakley, J., J. (1990) *Sport in Society* Mosby College Publishers: United States of America.

Coleridge, P. (1993) in Johnson, D. (2012) *An Introduction to Disability Studies* Routledge: London.

Condeluci (1991) in Steadward, D., R., Watkinson, E. & Wheeler, D., G. (2003). *Adapted Physical Activity*. The University of Alberta Press: Canada.

Congress of the United States of America*: The Special Olympics and Empowerment Act* (2004) The Senate.

Connaway, L., S. & Powel, R,. R. (2010) *Basic Research Methods for Librarians, Fifth Edition* Greenwood Publishing Group: United States of America.

Connolly, P. (2017) A culture that labels those with disabilities as 'severe' or 'profound' is inhuman '*Irish Examiner'* Tuesday, January 31, 2017.

Conroy, P. & Meagher, M. (2014) *The Distant Voice A working paper on the first 50 Health Information and Quality Authority (HIQA) Inspections of Residential Services for People with Disabilities* Inclusion Ireland: Dublin.

Conroy, P. Dr. (2014). *Understanding Political Ideology, Government, Social Policy and Legislation.* The Open Training College: Dublin.

Considine, M. & Dukelow, F. (2017) *Irish Social Policy: A Critical Introduction* Gill & McMillan: Dublin.

Contribution to Conference *'Changing the Landscape'* organised by the Forum of People with Disabilities and DESSA, Dublin, 12 November 2007.

Cooper, A., R. (1998) *Wheelchair Selection and Configuration*. Demos Medical Publishing: New York.

Collins. B., Costello, J. & McCormack, B. Dr. (2002) *Introduction to Disability: A Sociological and Historical Perspective.* The Open Training College: Dublin.

Coughlan, J. (2010) '*Disabled are Socially Excluded* - Scope Survey' BBC Education and Family [accessed 23rd September 2017 at http://www.bbc.com/news/education-11139534].

Crossman, A. (2016) *An Overview Of Qualitative Research Methods: Direct Observation, Interviews, Participation, Immersion, and Focus Groups* About Education: USA [Accessed November 29th 2016 at http://sociology.about.com/od/Research/a/Overview-Of-Qualitative-Research-Methods.htm].

Curatolo, J. (2014) *The Benefits of Team Sport to Promote Social Inclusion amongst the Disadvantaged* Human Rights in Australia: Australia [accessed May 12th 2015 at http://rightnow.org.au/topics/asylum-seekers/the-benefits-of-team-sport-to-promote-social-inclusion-amongst-the-disadvantaged/].

Davis, M. (2012) in Frontline: *The Irish Voice for Intellectual Disability* Vol 89 18-19.

Daymon, C. and Holloway, I. (2002) *Qualitative Research Methods in Public Relations and Marketing Communications* Routledge: New York.

DeLuigi, J., A. & Puk, L., A. (2017) *Rehabilitation of the Adaptive Athlete in Adaptive Sports Medicines: A Clinical Guide* Springer International Publishing: Switzerland.

Denscombe, M. (2010) *The Good Research Guide* Open University Press: England.

Department of Justice and Equality (2004) *National Disability Strategy* Stationery Office: Dublin.

Department of Justice and Equality (2007) *National Action Plan for Social Inclusion Towards 2016*Stationery Office: Dublin.

Department of Justice, Equality and Law Reform (1999) *Towards Equal Citizenship: Progress Report on the Implementation of the Recommendations of the Commission on the Status of People with Disabilities*. Dublin: The Stationery Office.

DePauw K., P & Doll-Tepper, G. (2000) *Towards progressive inclusion and acceptance: myth or reality? The inclusion debate and bandwagon discourse*. Adapted Physical Activity Quarterly (17) 2: 135-143.

DePauw, K., P. (1997) *Constructing Diverse Sports Opportunities for People with Disabilities* in Howe, D., P. (2008) *The Cultural Politics of the Paralympic Movement: Through an Anthropological Lens* Routledge: Oxon.

DiLeo, D. (2012) *The Support Gap: Research to Practice & Back* [Accessed February 25th 2013] http://raymondsroom.blogspot.co.uk/].

DiLeo, D. (2013) *The Problem with Pro-Inclusion, but not Segregation* [Accessed February 25th 2013] http://raymondsroom.blogspot.co.uk/2013/01/the-problem-with-pro-inclusion-but-not.html].

Disability Action (2016) *Hard at Work Employment and Disability in Northern Ireland Employment* Advocacy Services Department for Social Protection: Northern Ireland.

Disability Federation of Ireland (2012) *Disability Happens More than you Imagine* DFI: Dublin [accessed May 27th 2017 at http://www.disability federation.ie/index.php?uniqueID=10598].

Dolan, J. (2016) Budget 2017 needs to tackle disability issues The Irish Times 07 October 2016.

Dolan, J. (2017) *A decade on and UN convention on disability rights still not ratified* The Irish Times Wed, March 29, 2017, 16:16 [accessed May 27th 2017 at http://www.irishtimes.com/opinion/a-decade-on-and-un-convention-on-disability-rights-still-not-ratified-1.3029278].

Dreer, L. & Elliot, T. (2007) *Disability* in Ayers, S., Baum, A., McManus, C., Newman, S., Wallston, K., Weinman, J. & West, R. (2007) *Cambridge Handbook of Psychology, Health and Medicine* Cambridge University Press: England.

Dube, L. (2010) O*besity Prevention: The Role of Brain and Society on Individual Behaviour* Academic Press: United Kingdom.

Dunning, E. & Coakley J. *Handbook of Sports Studies* London, Sage.

Dupre, J. (2012) *Loneliness, Wellbeing and Scam Involvement* in Fenge, S., A. (2017) *Safeguarding Adults: Scamming and Mental Capacity* Sage Publications: London.

Ellis, P. (2000) *Understanding Research for Nursing Students* Sage Publications: United Kingdom.

Emerson, E. and Baines, S. (2011) Health inequalities and people with learning disabilities in the UK *Tizard Learning Disability Review* Volume 16 Issue 1 January 2011

Emerson, E., McGill P. & Mansell, J. (2013) *Severe Learning Disabilities and Challenging Behaviours*: *Designing high quality services* Chapman & Hall: United Kingdom.

Encyclopaedia Britannica "*Overview of Olympic Games*". Encyclopædia Britannica. [Accessed November 5th 2011] www.britannica.com/EBchecked/topic/428005/Olympic-Games].

Equality Authority (2012) *The Role and Functions of the Equality Authority* The Equality Authority: Dublin. [Accessed June 24th 2013 at http://www.equality.ie].

Equality Authority and Economic and Social Research Institute (2014) *Winners and Losers? The Equality Impact of the Great Recession in Ireland* Equality Authority: Ireland.

Equality Commission Northern Ireland (2017) *Disability rights in Northern Ireland: Supplementary submission to inform the CRPD List of issues on the UK* CRPD: Northern Ireland.

Espy, R. (1981) *The Politics of the Olympic Games: With an Epilogue, 1976 – 1980* University of California Press: Los Angeles.

Etchells, D. (2016) *Comoros and Liberia miss final cut at Rio 2016 Paralympics to leave 159 countries set to compete* [Accessed Decemner 28th 2017 at https://www.insidethegames.biz/articles/1041389/].

ETTAD (2007) *Understanding Disability: Models of Disability*. [Accessed January 21st 2012 http://uk.ettad.eu/].

Europa. (2010) *Breaking down barriers for disabled people* [Accessed February 20th 2013].

European Agency for Special Needs and Inclusive Education 2017 Ireland – Overview [accessed May 27th 2017 at https://www.european-agency.org/country-information/ireland/national-overview/complete-national-overview].

European Parliament (2000) *Charter of Fundamental Rights of the European Union* [Accessed 12th April 2015 at http://www.europarl.europa.eu].

European Social Science History Conference (2008) *Dangerous Lunatics in mid-Nineteenth Century Ireland 7th Conference: Lisbon Portugal* [Accessed on November 9th at http://www2.iisg.nl/esshc/programme.asp?selyear=9&pap=6954].

Evans, L. (2007) *Inclusion* Routledge Press: London.

Eyben, R. & Moncrieffe, J. (2013) *The Power of Labelling*: *How People Are Categorized and Why It Matters* Earthscan: United Kingdom.

Faal, S. (2005) *The Children of Winter: Apocalyptic Message of Hope Long Trail* Acres Publishing: Co. Antrim Northern Ireland.

Fahey, F. (2005) *Guide to the Disability Act 2005* Department of Justice, Equality and Law Reform: Dublin.

Farrell, M. (2012) *Looking Into Special Education: A Synthesis of Key Themes and Concepts* Routledge: London.

Farelli, D., A. (2011) *Sport Participation: Health Benefits, Injuries and Psychological Effects* Nova Science Publishers: United States of America.

Faryardi, Q. (2012) *How to Write Your PhD Proposal: A Step-By-Step Guide* American International Journal of Contemporary Research Vol. 2 No. 4; April 2012 p. 111 – 115.

Fennelly, J. (2012) *Ireland's Insistence Still Lunacy* [Accessed November 9th 2014 at http://www.publicisdhealthcare.ie/index.php/irelands-insistence-still-lunacy/].

Finch, N. & Lewis, J. (2007) '*Focus Groups'* in J. Ritchie & J. Lewis. (eds) *Qualitative Research Practice: A Guide for Social Science Students and Researchers.* Sage Publications: London.

Findling, J., E. & Pelle, K., D. (1996) *Historical Dictionary of the Modern Olympic Movement* Greenwood Press: United States of America.

Findling, J., E. & Pelle, K., D. (2004) *Encyclopaedia of the Modern Olympic Movement* Greenwood Press: United States of America.

Finlay, F. (2016) *Disability Act should be a shining example, but it's a shaming* one Tuesday November 22, 2015 [accessed June 1st 2017 at http://www.irishexaminer.com/viewpoints/columnists/fergus-finlay/disability-act-should-be-a-shining-example-but-its-a-shaming-one-431666.html].

Flynn, E. (2017) *The Assisted Decision-Making (Capacity) Bill 2013*: *What Does It Mean?* Centre for Disability Law and Policy - University College Galway: Ireland.

Flynn, E. (2011) *From Rhetoric to Action* Cambridge University Press: New York

Forde, M. & Leonard, D. (2013) *Constitutional Law in Ireland 3rd Editio*n Bloomsbury Professional: Dublin.

Foreman, M., W. (1999) *Christianity & Bioethics: Confronting Clinical Issues.* College Press Printing Company: United States of America.

Foucault, M. (1973) *The Order of Things: An Archaeology of the Human Sciences.* New York: Random House.

French, S. (1994) *Working with Disabled Children* in Wilson, K., Ruch, G., Lymberly, M. & Cooper, A. (2008) Social Work: An Introduction to Contemporary Practice Pearson Education Ltd: United Kingdom.

Frontline (2006) *NAMHI Becomes Inclusion Ireland* Frontline Issue 66 August 30th 2006 [Accessed 17th September 2017 at http://frontline-ireland.com/namhi-becomes-inclusion-ireland/].

Gardiner, L. (2009). *Special Olympics' athletes win smiles: Races belong to not-so-swift, not-so-strong*. The Oakland Tribune, p. Bl.

Gavron, J., S. & DePauw, P., K. (2005) *Disability Sport* Human Kinetics: United States of America.

Geller, J., L. (1991) '*Any place but the state hospital'. Examining assumptions about the benefits of admission diversion*. Hospital and Community Psychiatry. Issue 42, 145 – 152.

Gilbert, K. & Schantz, J., O. (2008*) The Paralympic Games: Empowerment Or Side Show* Meyer and Meyer: United Kingdom.

Goffman, E. (1961) *Asylums: Essays on the social situation of mental patients and other inmates* Penguin Books: London.

Goffman, E. (1963) *Stigma: notes on the management of spoiled identity* Prentice Hall: New Jersey.

Gold, D., S. (2011) *Landmark Legislation: Americans with Disabilities Act* Marshall Cavendish Corporation: New York.

Goodley, D. & Lawthorn, R. (2005) Epistemological Journeys in Participatory Action research: Alliances between community psychology and disability studies, *Disability & Society*, 20 (2), 135-51.

Goosey-Tolfrey, V. (2010) *Wheelchair Sport: A Complete Guide for Athletes, Coaches and Teachers* Human Kinetics: United Kingdom.

Government of Ireland (1998) *The Employment Equality Act* Dublin: Stationery Office.

Government of Ireland (2000) *The Equal Status Act* Dublin: Stationery Office.

Government of Ireland (2005) *The Disability Act* Dublin: Stationery Office.

Government of Ireland (2005) *The Disability Act* Dublin: The Stationery Office.

Government of Ireland (2007) *The Health Act Dublin*: Statutory Instrument 367 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013) Dublin: The Stationery Office.

Government of Ireland (2007) *National Action Plan for Social Inclusion* The Stationery Office: Dublin.

Government of Ireland (2007) *The Health Act* The Stationery Office: Dublin.

Government of Ireland (2015) *Assisted Decision-Making (Capacity) Act* The Stationery Office: Dublin.

Government of Ireland (2017) *National Disability Inclusion Strategy 2017 – 2021* Dublin: The Stationery Office.

Great Britain & Commonwealth Office (2012) *Human Rights and Democracy: The 2012 Foreign & Commonwealth Office Report* Crown Publications: United Kingdom.

Grob, N., G. (1972) *Mental Institutions in America: Social Policy to 1875* Transaction Publishers: New Jersey.

Grossman, L. (2015) *World: A Dads perspective* Community Solutions Inc: United States of America.

Guar. A. (2014) *Paris 1900 Olympic Games* Encyclopædia Britannica: London United Kingdom [Accessed July 7th 2017 at https://www.britannica.com/event/Paris-1900-Olympic-Games].

Haig, G. and West, J., A., C. (2011) *Primary Sports Assemblies: 40 Sports themed assemblies to inspire and engage* Optimus Education eBooks: London.

Hall, J. (1999) *Inclusion in the classroom in Learning Together* Volume 1 Issue 2. Open Eye Publications: Swansea.

Hall, S. (2009) *Social Inclusion for People with Disabilities: A Qualitative Meta analysis*. Journal of Ethnographic and Qualitative Research. Vol, 3 162-173.

Harada, M., Siperstein, G., Parker, C.R., & Lenox, D. (2011) *Promoting social inclusion for people with intellectual disabilities:* Special Olympics International, global sport initiatives and strategies. Journal of Sport in Society. Vol, 14 1131-1148.

Hargreaves, J. (2003) '*Taking Men on at their Games'* in Dunning, E & Malcolm, D. (2003) Sport: Sport and Power Relations Routledge: London.

Harris, C., J. (2006) *Intellectual Disability: understanding its development, causes, classifications, evaluation and treatment* Oxford University Press: Madison.

Harris, C. (2010) *XXI Olympic Winter Games Held in Vancouver British Columbia* [accessed May 7th 2015 at http://worldhistoryproject.org/2010/2/12/xxi-olympic-winter-games-held-in-vancouver-british-columbia].

Hartley, D. (2006) *Social Policy Polity* Press: Cambridge.

Harvey, B. (2008) *Working for Change: A Guide to Influencing Policy in Ireland* Combat Poverty Agency: Ireland.
Hassan, D, Dowling, S., Menke, S, & McConkey, R. (2013) *Sport & Disability: the Special Olympics Youth Unified Sports Programme* in Hassan, D. & Lusted, J. (2013) *Managing Sport: Social and Cultural Perspectives* Routledge: Oxon.

Hassan, D. & Lynch, R. (2015) *Reflections on coaching athletes with disabilities* in Hassan, D., Dowling, S. & McConkey, R. S*ports, coaching and intellectual disabilities* Routledge Taylor & Francis Group: London.

Hassan, D., McConkey, R. & Dowling S. (2011) *Special Olympics Athletes and the World Games Experience: The Influence of Coaching, Training and Competing on the World Stage.* Report on Pilot Study: Special Olympics (Ulster Region) & University of Ulster.

Hassan, D., Menke, S., Dowling, S. & McConkey, R. (2011) *Unified gives us a chance: An evaluation of Special Olympics Youth Unified Sports Programmes in Europe/Eurasia:* Special Olympics & University of Ulster.

Health Information and Quality Authority (2013) *National Standards for Residential Services for Children and Adults with Disabilities* Health Information and Quality Authority: Dublin.

Health Information and Quality Authority (2016) *Disability publication statement Health Information and Quality Authority* [accessed January 14th 2017 at https://www.hiqa.ie/press-release/2016-12-16-disability-publication-statement-16-december-2016].

Health Information and Quality Authority (2017) *Better Safer Care* HIQA: Cork [accessed 20th May 2017 at https://www.hiqa.ie/].

Health Services Executive (2007) *Time to move on from congregated settings report.* HSE: Ireland.

Health Services Executive (2011) '*Time to move on from congregated settings'* HSE: Ireland. Available at http://www.hes.ie/timetomoveon/ [accessed 1st May 2015].

Health Services Executive (2012) *'New Directions' - Review of HSE day services and implementation plan 2012-2016* HSE Publications: Ireland.

Health Services Executive (2017) Assisted Decision-Making (Capacity) Act 2015 – A Guide for Health and Social Care Professionals Feidhmeannacht na Seirbhise Slainte: Ireland.

Hennick, M., M. (2007) *International Focus Group Research: A Handbook for the Health and Social Sciences* Cambridge University Press: United Kingdom.

Henroid, L. (1979) in Fletcher-Janzen, E. & Reynolds, C., R. (2007) *Encyclopaedia of Special Education*: *A Reference for the Education of Children, Adolescents, and Adults with Disabilities and Other Exceptional Individuals, 3 Volume* Set Wiley & Sons: Hoboken.

Herbert, N. (2017) *The fight for disability rights in Ireland* Trinity News January 17, 2017 [accessed May 27th 2017 at http://trinitynews.ie/the-fight-for-disability-rights-in-ireland/].

Herzog, J. (2011) *G is for Gold Medal: An Olympics Alphabet* Sleeper Bear Press: China

Heyck, W., T. (2008) T*he Peoples of the British Isles: A New History. Volume II from 1688 – 1870* North Western University: United States of America.

Hodkinson, A. (2016) Key Issues in Special Educational Needs and Inclusion Sage Publications: UK.

Hörner, W., Döbert, H., von Kopp, B. & Mitter, W. (2007) *The Education Systems of Europe* Springer Science & Business Media: London.

Horrocks, C. and King, N. (2010) Interviews in Qualitative Research Sage: London.

Houlihan, B. (2003) *Sport and Society*. Sage Publications Limited: London.

Howell P., C. (2009) *Montreal Olympics: An Insider's View of Organizing Self-financing Games* McGill-Queens University Press: Montreal.

Howes, J. (2015) in Tracey, E. (2015) Why are a quarter of disabled people lonely? BBC Online News [Accessed January 29th 2017 at http://www.bbc.com/news/blogs-ouch-31923346].

Hums, A., M., Wolf, E. & Legg, D. (2014) History of the Paralympic Games in Borland, J., F., Burton, L, J. &Kane, G., M. (2014) Sports Leadership in the 21st Century Jones and Bartlett Publishers: Massachusetts.

Hurst, K. (1996) Disability &Policy - Survival of the Fittest Paper presented at the 'Dialogues in Disability Theory & Policy' Seminars, City University, London: July 1, 1996).

Huston-Wilson, C. & Lieberman, L., J. (2009) *Strategies for Inclusion*: *A Handbook for Physical Educators* Human Kinetics: United Kingdom.

Hyder, E. (2016) *Reading Groups, Libraries and Social Inclusion*: *Experiences of Blind and Partially Sighted People* Routledge: London.

Hynes, A. (2017) *Legal Capacity*: *A Guide to Assisted Decision-Making* Bloomsbury Publishing Plc: London.

Hynes, P. (2013) *The Dispersal and Social Exclusion of Asylum Seekers*: *Between Liminality and Belonging* Polity Press: Cambridge.

Inclusion Ireland – *National Association for People with an Intellectual Disability* (2012) *We've waited long enough: Government must replace 1871 Lunacy Act now* Inclusion Ireland: Dublin.

Inclusion Ireland: *Time for an end to exclusion Ireland* Irish Times Tuesday, April 19, 2011.

Inclusion Ireland (2010) U*N Convention on the Rights of Persons with Disabilities* [accessed 10th April 2015 at http://www.inclusionireland.ie/content/page/uncrpd].

Inclusion Ireland (2012*) Disability attitudes survey should be a wakeup call to government Inclusion Ireland: Dublin* [Accessed 2nd December 2016 at http://www.inclusionireland.ie/content/media/64/disability-attitudes-survey-should-be-wakeup-call-government-inclusion-ireland].

Inclusion Ireland (2013) *Protecting rights of people with disabilities must include statutory powers for advocates* [accessed June 1st 2017 at http://www.inclusionireland.ie/content/media/949/protecting-rights-people-disabilities-must-include-statutory-powers-advocates].

Inclusion Ireland (2016) *Increase in persons with an intellectual disability between 2011 and 2016* [Accessed December 28th 2017 at http://www.inclusionireland.ie/census-2016-disability].

International Olympic Committee (2015) Promote Olympism in Society [Accessed 23rd January 2017 at https://www.olympic.org/the-ioc/promote-olympism].

International Paralympic Committee (2016) *Paralympics - History of the Movement* [accessed November 25th 2016 at https://www.paralympic.org/the-ipc/history-of-the-movement].

Irish Human Rights and Equality Commission (2015) *Your Equal Status Rights Explained Guide to the Equal Status Acts 2000-2012* IHREC: Ireland.

Irish Medical Council (2009) *Guide to Professional Conduct and Ethics for Registered Medical Practitioners* Medical Council: Dublin.

Irish Sports Council (2004) *Ballpark Figures Key Research for Irish Sports Policy* The Economic and Social Research Institute: Ireland.

Irish Statute Book (1970). The Health Act 1979. Office of the Attorney General: Dublin [Accessed January 27th 2012 at http://www.irishstatutebook.ie/1970/en/act/pub/0001/print.html].

Irving, C., M. & Irving, C., L. (2012) The Abuse of Individuals with Disabilities [Accessed April 3rd 2012].

Ison, N., L. (2010) *Having their say: Email interviews for research data collection with people who have verbal communication impairment* in Possamai-Inesedy, A. & Gwyther, G. (2010) *New Methods in Social Justice Research for the Twenty-First Century* Routledge: London.

Jackson, R. (2016) *Families and Improvement in Intellectual Disability* Frontline: The Irish Voice of Intellectual Disability [accessed April 9th 2017 at http://frontline-ireland.com/families-improvement-id/].

Jaeger, P., T. & Bowman, C., A. (2005) *Understanding Disability: Inclusion, Access, Diversity, And Civil Rights* Preagar Publishers: United States of America.

John, G., Morgan, J., Carling, P. & Jones, H. (2009) *Potential Benefits of the 2012 Olympics and Paralympics for Wales: Eight Report of Session 2008-09* House of Commons Welsh Affairs Committee: United Kingdom.

Johnson, W. S. & Vanderstoep, D.D. (2009) *Research Methods for Everyday Life: Blending Qualitative and Quantitative Approaches* John Wiley & Sons Inc. San Francisco.

Joint Committee on Human Rights (2008) A life like any other?: human rights of adults with learning disabilities, seventh report of session 2007-08, Vol. 2: *Oral and written evidence*, Stationery Office: London.

Jones, I. (2013) *Regional Involvement in the Olympics and Paralympic Games* in Girginov, V. (2013) *Handbook of the London 2012 Olympic and Paralympic Games: Volume 1 Making the Games* Routledge: London.

Jonker, J. Dr. & Pennick, W. B. Dr. (2010) *The Essence of Research Methodology* Springer Heidelberg Dordrecht: London.

Judd, R., C. (1996) *The Winter Olympics* Mountaineers Books: Seattle.

Kafer, A. (2013) *Feminist, Queer, Crip* Indiana University Press: USA.

Kamalipour, Y., R. & Carilli, T. (1998) *Cultural Diversity and the U.S*. Media State University of New York Press: Albany.

Keenan, D. (2008) Ireland within the Union 1800 – 1921 Xlibiris Corporation: United States of America.

Keith, H. & Keith, D., K. (2013) Intellectual Disability: Ethics, Dehumanization, and a New Moral Community John Wiley & Sons: New York.

Kenidrigan, K. & Hodgkinson, J. (1998) Special Olympics Celebrates 30 Years Illinois Issues Parks and Recreation Vol 29 no 3 p19.

Kildare.ie (2011). *Summary of the Education Act* (1998) [Accessed 25th January 2012] http://kildare.ie/education/primary/Summary-Education-Act-1998.asp.

Kluger, R.(1975). *Simple Justice: The History of Brown v. Board of Education and Black America's Struggle for Equality*. Knopf Double Day Publishing Group: New York.

Krueger, R., A. & Casey, M., A. (2000) *Focus Groups: A Practical Guide for Applied Research 3rd Edition* Sage Publications Inc: London.

Kumar, R. C. (2012) *Research Methods APH Publishing Corporation: New Delhi.*

Lang, R., Dr. (2001) *The Development and Critique of the Social Model of Disability* University of East Anglia: United Kingdom.

Laws, S., Harper, C. & Marcus, R. (2003) *Research for Development* Sage Publications: London.

Le Clair, M., J. (2013) *Disability in the Global Sport Arena: A Sporting Chance* Routledge: London.

Lemke, W. (2009) in '*Special Olympics can alter image of people with intellectual disabilities*'. UN News Centre – published 27th June 2011

Lennon, S. (2011) The law must recognise intellectual disabled in the *Irish Times:* March 5th 2011.

Levinson, D. & Christenson, K (1999) *The Encyclopaedia of World Sport* Oxford University Press: New York.

Lewis, A. (2002) *Children's Understanding of Disability* Routledge: London.

Libal, A. (2015) *Intellectual Disabilities: Living with special needs* Mason Crest: Pennsylvania.

Lindlof, T., R. & Taylor, B., C. (2002) *Qualitative Communication Research Methods* Sage Publications: London.

Litosselti, L (2007) *Using Focus Groups in Research* MPG Books Ltd: Cornwall.

Lodge, A., Lynch, K. (2001) 'The diversity deficit: Difficulties in the recognition of difference in Irish Schools' 'Paper presented in the American Educational Research Association Annual Conference, Seattle, Was, 10-14 April 2001 in the National. Disability Authority (2006) *Literary Review on Attitudes towards Disability* Disability Research Series Vol 9: NDA.

Lynch, R. (2014) *Person Centred Planning: the Context in Focus on the Individual Module 5: BA in Applied Social Studies* Open Training College: Dublin.

Macionis, J. & Plummer, K (2008) *Sociology - A Global Introduction* London: Prentice Hall.

Maguire, A., J., Jarvie, G., Mansfield, L. & Bradley, J. (2002) *Sports World: A Sociological Perspective* Human Kinetics: London.

Marinelli, P., R. & Dell Orto, E., A. (1999) *The Psychological and Social Impact of Disability* Springer Publishing Company: New York.

Marmot, M. (2004) *Self Determinants of Health: The Facts* in Taket, A., Hanna, L., Goldingay, S. & Wilson, L. (2103) *Practising Social Inclusion* Routledge: London.

Martin, L. & Cobigo, V. (2011) Definitions Matter in Understanding Social Inclusion. Journal of Policy and Practice in Intellectual Disability 8, 227-282.

Martin, M. A. (2015*) The Babysitters Club* Scholastic: Dublin.

Massie, B. (2006) '*Participation – have we got an Attitude Problem?*' in Hannon, F. (2006) Literature Review on Attitudes towards Disabilities National Disability Authority: Dublin.

Masutha, M. (1998) Cited in Charlton, J. (2000) *Nothing about Us Without us* University of California Press: United States of America.

Matheson-Reen, A. (2014) *The Special Olympics: progressive or regressive*? Trinity News: Dublin [accessed November 3rd 2016 at http://trinitynews.ie/the-special-olympics-progressive-or-regressive/].

McCarthy, J. & Tzakanikos, E. (2014) *Handbook of Psychopathology in Intellectual Disability*: *Research, Practice, and Policy* Springer Science and Business Media: New York.

McConkey, R. (2011) *Leisure and Friendships* in Atherton, H., L. & Crickmore, D., J. (2011) *Learning Disabilities: Towards Inclusion* Elsevier: China.

McCosker, H., Barnard, A. & Gerber, R. Undertaking Sensitive Research: Issues and Strategies for Meeting the Safety Needs of All Participants. *Forum Qualitative Sozialforschung /* Forum: Qualitative Social Research, [S.l.], v. 2, n. 1, February 2001. ISSN 1438-5627. Available at: <http://www.qualitative-research.net.

McCurry, K. (2017) *Northern Ireland schools sued for refusing disabled pupils* Belfast Telegraph May 31st 2017.

McDonnell, P (2007) *Disability and Society: Ideological and Historical Dimensions* Blackhall Publishing: Dublin.

McDonnell, P. (2013) Disability, *Deafness and Ideology in the late Twentieth and early Twenty-first Centuries*. Educ. Real. 2016, vol.41, n.3 [Cited 2017-05-28], pp.777-788.

McKevitt, P. (2011) in the National Disability Authority '*A National Survey of Public Attitudes to Disability in Ireland*' NDA: Ireland.

Miller, F., A. & J., H. Katz (2010) *The Inclusion Breakthrough: Unleashing the Real Power of Diversity* Berrett - Kopehler Publishers Inc: San Francisco.

Minton, J., S. (2016) *Marginalisation and Aggression from Bullying to Genocide*: *Critical Educational and Psychological Perspectives* Sense Publishers: Netherlands.

Moyne, A. (2012) *Social and Medical Models of Disability* [accessed January 14th 2017 at http://www.disability.ie/disability-ie-information-portal/site-sections/rights-legislation/185-society/538-social-and-medical-models-of-disability].

Mullally, S. & de Londras, F. (2017) The Irish Yearbook of International Law, Volume 9; Volume 2014 Bloomsbury Publishing: London.

Munson (1997) *The Current Research Efforts of Special Olympics International* in Reynolds & Fletcher Janzen (2007) *Advances in Telephone Survey Methodology Encyclopaedia of Special Education* John Wiley & Sons: New Jersey.

National Advocacy Service (2012) *NAS Services for people with disabilities* Citizens Information Board: Ireland [accessed 20.05.17 at http://www.citizensinformationboard.ie/en/services/advocacy/].

National Disability Authority (2011). Disability Research Article 9 *Literature Review on attitudes to disability*. University College Dublin: Dublin.

National Disability Authority (2012) *National Guidance for Developing Research Projects involving Children* NDA: Ireland.

National Disability Authority (2015) Policy and Legislation NDA: Dublin [accessed April 2nd 2015 at www.universaldesign/ie].

National Federation of Voluntary Bodies (2012) *Your Equal status Rights Explained Guide to the Equal status acts 2000–2008* The Equality Authority Dublin.

National Institute for Health Research (2012) *Diversity and inclusion: What's it about and why is it important for public involvement in research?* Involve Wessex House: United Kingdom.

National People with Disabilities and Carer Council (2009) Shut *Out: The Experience of People with Disabilities and their Families in Australia* Commonwealth of Australia: Canberra.

Neuman, W., L. (2011) *Social Research Methods: Qualitative and Quantitative Approaches* Pearson Education Limited: United Kingdom.

Newby, P. (2014) *Research Methods for Education, Second Edition* Routledge: United Kingdom.

Newell, G., C. & Goggin, G. (2005) *Disability in Australia*: *Exposing a Social Apartheid* UNSW Press: Australia News, 32(1), 21-22.

Newton, C. (2017) *What is Inclusion* Keys to Inclusion: United Kingdom [accessed July 8th 2017 at http://www.keystoinclusion.co.uk/contact-us/?doing_wp_cron=1499621831.5393910408020019531250].

Nicholson, M., Hoye, R. & Houlihan, B. (2011) *Participation in Sport: International Policy Perspectives* Routledge: London.

Nixon, H., L. (2007) *Constructing Diverse Sports Opportunities for People with Disabilities* Sage Journals 31: 4, 417 – 433.

Nixon, H., L. (2016) *Sport in a Changing World* Routledge: New York.

Nolan, B. & Gannon, B. (2006) *The Dynamics of Disability and Social Inclusion* The Equality Authority and National Disability Authority: Ireland.

Norwich, B. (1999) *The Connotation of Special Education Labels for Professionals in the Field*. British Journal of Special Education Volume 26, Issue 4, pp: 179–183.

Nosotro, R. (2005) *Change over time*: [Accessed November 24th 2011 at www.HyperHistory.net].

O'Brien, J. & Lyle-O'Brien, C. (1997). *Assistance with integrity : The search for accountability in the lives of people with disabilities.* Lithonia, GA Responsive Associates: USA.

O'Brien, J. (1987) *Frameworks for Accomplishment*. Lihtonia, GA Responsive Associates: USA.

O'Brien, J., C. & Vroman, G., K. (2014) *Childhood and Adolescent Obesity* in Solomon, J. W. O'Brien, J., C. (2014) *Paediatric Skills for Occupational Therapy Assistants* Elsevier Health Services: United Kingdom,

O'Connor, J. (2014) The Workhouses of Ireland Presented a the Irish Workhouse Past & Present Conference Galway May 18th& 19th 2014.

O'Keefe, C., N. & Watson, J. (2015) *Celebration as the Spiritual Expression of Leisure and Sport Reflections on the L'Arche Tradition and the Special Olympics* in Watson, N., J. & Parker, A. (2015) *Sports Religion & Disability* Routledge: Oxon.

O'Reilly, A. (2007). The *Legacy of the Commission on the Status of People with Disabilities.* Paper presented at Changing the Landscape Conference organised by the Forum of People with Disabilities and DESSA, Dublin, 12 November 2007*, p. 2.

O'Shea, K. (2017) *Opening Statement to the Joint Committee on Health on the UN Convention on the Rights of Persons with Disabilities and its relevance for health and well-being* Inclusion Ireland: Ireland.

Official Olympic Organisation (2015) *The Organisation* [accessed May 3rd 2015 at http://www.olympic.org/about-ioc-institution?tab=organisation].

Oliver, M. & Barnes, C. (1966) in Allan, J. (2013) *The Sociology of Disability and Inclusive Education: A Tribute to Len Barton* Routledge: London.

Oliver, M. & Barnes, C. (1998) *Disabled People and Social Policy: From Exclusion to Inclusion Longman:* Harlow.

Oliver, M. (1990) *The Politics of Disablement* MacMillan: London.

Olympic Sporting (2015) *Olympic History* [accessed May 2nd 2015 at http://olympics.sporting99.com/olympics-history.html.

Owens, J. (2010) *The Influences of 'access' on Social Exclusion and Social Connectedness for People with Disabilities in Theorising Social Exclusion* Routledge: London.

Ozane, E. Bigby, M., C. & Fyffe, C. (2007) *Planning and Support for People with Intellectual Disabilities*: *Issues for Case Managers and Other Professionals* Jessica Kingsley Publishers: New South Wales.

Page, C. (2006) *The Roles of Public Opinion Research in Canadian Government* University of Toronto Press Incorporated: Canada.

Palmisanno, G. Cera, R. & Fina, V., D. (2017) *The United Nations Convention on the Rights of Persons with Disabilities*: *A Commentary* Springer Publishing Company: New York.

Paraskevopoulou, A. &McKay, S. (2016) *Workplace Equality in Europe*: *The Role of Trade Unions* Routledge: London.

Parekh, G., Pinto, C., P. & Rioux, M., H. (2015) *Disability, Rights Monitoring, and Social Change* Canadian Scholars Press: Canada.

Parks, J.B., Quarterman, J. & Thibault, L. (2011) *Managing Sport in the 21ˢᵗ Century* in Penderson, P.M., Parks, J.B., Quarterman, J. & Thibault, L. (2011) *Contemporary Sport Management* Human Kinetics: United Kingdom.

Patton, M., Q. (2002) *Qualitative Evaluation Methods 3ʳᵈ Edition* Sage Publications: United States of America.

Pierson, J. (2010) *Tackling Social Exclusion: 2ⁿᵈ Edition* Routledge: United Kingdom.

Pierson, J. (2016) *Tackling Poverty and Social Exclusion*: *Promoting Social Justice in Social Work* Routledge: United Kingdom.

Pitonyak, D. (2002). *Opening the Door* in J. O'Brien and C. Lyle-O'Brien (Eds.). *Implementing Person-Centered Planning: Voices of Experience*. (99-120) Toronto: Inclusion Press.

Pitts, & Stotlar, (2007) *Fundamentals of Sports Marketing 3ʳᵈ Edition* Fitness Information Technology: United States of America.

Power, A., DeFranco, A. & Lord, E., J. (2013) *Active Citizenship and Disability: Implementing the Personalisation of Support* Cambridge University Press: New York.

Price, J., H. & Murnan. J. "Research Limitations and the Necessity of Reporting Them." *American Journal of Health Education* 35 (2004): 66-67.

Priestly, M (2003) Disability: A Life Course Approach Polity Press: Cambridge.

Quinn, G & Arnardottir, O., M. (2009) *The UN Convention on the Rights of Persons with Disability: European and Scandinavian Perspectives* Martinus Nijhoff Publishers: Netherlands.

Radio Telifis Eireann (2014) *The Special Olympics – Ten Years On* RTE: Dublin.

Rajasekar, S. Philominathan, P. &Chinnathambi, V. (2006) *Research Methodology School of Physics Bharathidasan University, Department of Physics*, Sri AVVM Pushpam College, Department of Physics, AKGS Arts College: India.

Ramirez, L., J., Alberti, E., Kottwitz, C. & Floura, K. (2007) *Recovery and Resistance: Transitioning from the Hospital to the Community* in Yeager, K., Coulter, D., Svendsen, D. & Sills, M., G. (2013) *Modern Community Mental Health: An Interdisciplinary Approach* Oxford University Press: London.

Rancharan, P. (2009*) Capability and Inclusion* School of Social Work and Social Policy: Australia.

Randall, D. (2011) *1896: The First Modern Olympic Games* Black Toad Publications: Surrey.

Rao, A. (2004) *Soteriologies of India and Their Role in the Perception of Disability Transaction* Publishers: United States of America.

Ravaud, S., J. & Stiker, J., H. (2001) *Inclusion/Exclusion: An analysis of historical and cultural meanings* in Albrecht, L., G., Seelman, D., K. & Bury, M. (2001) Handbook of Disability Studies Sage Publications: London.

Ray, S., J. & Sibara, S. (2017) *Disability Studies and the Environmental Humanities* University of Nebraska: United States of America.

Reid, G. (2003) *Moving towards inclusion* in Steadman, R.D., Watkinson, E., J. & Wheeler, G., D. (2003) *Adapted physical activity* University of Alberta Steadman Centre: Edmonton.

Reynolds, E., T. (2008) *Vulnerable Communion*: *A Theology of Disability and Hospitality* Brazos Press: Michigan.

Reynolds, J. (1992) *Grangegorman: Psychiatric Care in Dublin since 1815* Institute of Public Administration: Dublin.

Reynolds, R. & Janzen Fletcher, E. (2007) *Advances in Telephone Survey Methodology Encyclopaedia of Special Education* John Wiley & Sons: New Jersey.

Rich, F. (2004) The *Effect of Institutionalisation: Resource Pack* Birmingham University Faculty of Health Department of Community Health and Social Work: United Kingdom.

Richardson, K. & Fulton, R. (2013) *Equality and inclusion for learning disability workers* Sage Publications: London.

Richman, M. (2006) *The Ultimate Camp Counsellor Manual: (How to Survive and Succeed Magnificently at Summer Camp* iUniverse Books: Lincoln.

Rieser, R. (2012) I*mplementing Inclusive Education*: *A Commonwealth Guide to Implementing Article 24 of the UN Convention on the Rights of Persons with Disabilities* Commonwealth Secretariat: United Kingdom.

Rimm, S., B. (2008) *Why Bright Kids Get Poor Grades and what You Can Do about it*: *A Six-step Program for Parents and Teachers* Great Potential Press: Arizona.

Rimmerman, A. (2013) *Social Inclusion of People with Disabilities*: *National and International Perspectives* Cambridge University Press: United Kingdom.

Robertson J., Emerson E., Gregory N. *Lifestyle related risk factors for poor health in residential settings for people with intellectual disabilities*. Res. Dev. Disabil. 2000; 21(6):469–486.

Robson, P., Begum, N. & Locke, M. (2003) *Developing User Involvement*: *Working Towards User-centred Practice in Voluntary Organisations* Policy Press: United Kingdom.

Rocco, S. & Folland, L. (2013) *The Economics of Social Capital and Health: A Conceptual and Empirical Roadmap* World Scientific: Singapore.

Rogan, M. & Rogan, M. (2011) *Britain and the Olympic Games: Past, Present, Legacy* Troubador Publishing Limited: United Kingdom.

Rogan, M. & Rogan, M. (2011) *Britain and the Olympic Games: Past, Present, Legacy* Matador: Leicester.

Rose, R., Shevlin, M., Winter, E, & O'Raw, P. (2010) *Special and inclusive education in the Republic of Ireland: reviewing the literature from 2000 to 2009* in European Journal of Special Needs Education, 25 (4) pp357-371.

Roulstone, J. & Harris, A. (2011) *Disability, Policy and Professional Practice* Sage Publications: London.

Rubin, H., J. & Rubin, I., S. (2012) Qualitative Interviewing: The Art of Hearing Data Sage Publications: Los Angeles.

Samuel, L., O., Horner R., H. & Snell, M., E. (2009) *Handbook of Developmental Disabilities* Guilford Press: New York.

Sapon-Shevin, M. (2010) *Because We Can Change the World*: *A Practical Guide to Building Cooperative, Inclusive Classroom Communities* Corwin Sage Company: California.

Sargeant, M. (2008) *The Law on Age Discrimination in the EU*Kluwer Law International: New York.

Saunders, M., Lewis, P. & Thornhill, A. (2009) *Research Methods for Business Students Fifth Edition* Pearson Education Limited: Harlow.

Scott, P., A. (2017) *Key Concepts and Issues in Nursing* Ethics Springer: New York.

Shakespeare, T. (2006) *Disability Rights and Wrongs* Routledge: London.

Shakespeare, T. (2013) *Disability Rights and Wrongs Revisited* Routledge: London.

Shapiro, J, P. (2011) *No Pity*: *People with Disabilities Forging a New Civil Rights Movement* The Crown Publishing Group: New York.

Shapiro, D., R. & Pitts, B., G. (2014) 'What Little Do We Know: Content Analysis of Disability Sport in Sport Management Literature' *Journal of Sports Management* Vol 28 Issue 6.

Shields N, Synnot A, Barr M. (2012) Perceived barriers and facilitators to physical activity for children with disability: a systematic review. *Br J Sports Med*. Vol: 46: pp 989–97

Silberman, L. (2007) *Fun promotes teamwork and co-operation* in Yerkes, L. (2007) *Fun Works: Creating Places Where People Love to Work* Berrett-Koehler Publishers: San Francisco.

Sinagub, J., M., Schumm J., S. & Vaughan, S. (2006) *Focus Group Interviews in Education and Psychology* Sage Publications: United Kingdom.

Siperstein, N. G., Pociask, S. & Byrnes, K. (2009): *Let's ALL Play: Helping to Make Inclusion in Summer Camps a Success* American Camp Association: United States of America.

Skinner, D. (2006) *Multiple Vulnerabilities*: *Qualitative Data for the Study of Orphans and Vulnerable Children in South Africa* HSRC Press: Cape Town.

Skrtic, P. & Sailor, T., M. (1996) *Difference Dependency and Stigmatization* in Gabel, S., L. & Danforth, S. (2008) *Disability & the Politics of Education*: *An International Reader* Peter Lang: New York.

Smith, A. (2011) *Hideous Progeny: Disability, Eugenics, and Classic Horror Cinema* Columbia University Press: New York.

Smith, L. (2003) *100 ways to participate in having a world that works for everyone: so what are you going to do about it?* iUniverse: United States of America.

Smith, B. (2014) *Paralympics and Disability Sport* Routledge: London.

Snow, J. (1991) *Dreaming, Speaking, and Creating What I know about Community* North Western University of Research in Social Policy and Urban Affairs: United States of America.

Snow, J. (1998) *The Power of Vulnerability in A Little Book of Person Centred Planning.* Inclusion Press: Canada.

Snow, K. (2007) *The case against special needs: Revolutionary common sense* Copyscape: Canada [accessed 28th November 2016 at http://www.umdisabilityministries.org/download/23_needs.pdf].

Soen, D., Shechory, M., & David, S., B. (2012) *Minority Groups: Coercion, discrimination, exclusion, deviance and the quest for equality*. New York: Nova Science Pub Inc 2011 [Accessed April 1st 2012 at http://www.girlwiththecane.com/category/attitudes/power-control-choice/].

Somerville, P. (1992) '*Homelessness and the Meaning of Home: Rooflessness or Rootlessness?*' Wiley: USA.

Special Olympics (2011). *Special Olympics: Be a fan, Philosophy*. [Accessed January 22nd 2012 at http://www.specialolympics.org/uploadedFiles/SO%20-%20Philosophy.pdf.].

Special Olympics (2017) '*What We Do*' [accessed 24th September 2017 at http://www.specialolympics.org/Sections/What_We_Do/What_We_Do.aspx].

Special Olympics Sport and Empowerment Act (2004) United States of America [Accessed December 1st 2017 at https://www.congress.gov/108/plaws/publ406/PLAW-108publ406.pdf].

Special Olympics World Games (2013) [accessed August 1st 2017 at http://www.specialolympics.org/Games/2017_World_Winter_Games.aspx].

Spencer, H. (1864). *The Principles of Biology: (V. 1) (1864-67).*Cornell University Library: Cornwall.

Spicker, P. (1995). *Social policy: Themes and approaches*. Prentice Hall: Dublin.

Spórt Éireann (2015) *Irish Sports Monitor 2015 Annual Report* Ipsos MRBI: Ireland.

Sports United - U.S. Department of State (2008) *Modern Olympic Games Chronology* [accessed May 11th 2015 at https://www.google.ie/#q=Modern+Olympic+Games+Chronology].

Spracklen, K. (2014) Exploring *Sports and Society: A Critical Introduction for Students* Palgrave MacMillan: United Kingdom.

Steadwood, R., D., Dealer, G., D., & Watkinson, E.J. (2003) *Adapted Physical Activity Transcontinental* Printing: Quebec.

Sternberg, L. & Taylor, R., L. (2013) *Exceptional Children*: *Integrating Research and Teaching* Springer Science and Business Media: New York.

Storey K. (2009) The more things change, the more they are the same: Continuing concerns with the Special Olympics. *Research and Practice for Persons with Severe Disabilities*, 33, 134–142.

Storey, K. (2004) The case against the Special Olympics *Journal of Disability Policy Studies* 2004 Vol 15 no pp35-42.

Storey. K. (2008) The More Things Change, the More They Are the Same: Continuing Concerns *Research and Practice for Persons with Severe Disabilities* 2008 Vol, 33 No, 3 134-142.

Sullivan, K. (2011) *The prevalence of the medical model of disability in society* Olin College: Massachusetts.

Sutton, J. (1998). Sponsors Shy Away from Paralympic Games. *Marketing News* Vol 32 (1), 21-22.

Swaddling, J. (2000). *The Ancient Olympic Games.* British Museum Press (in association with Second University of Texas Press): United Kingdom.

Swain, J., French, S. & Cameron, C. (2003) *Controversial Issues in a disabling society* McGraw-Hill: United Kingdom.

Swartz, L. & MacLachlan, M. (2009) *Disability & International Development*: *Towards Inclusive Global Health* Springer Science and Business Media: New York.

Statutory Instrument No. 367/2013 - Health Act 2007 (*Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities*) Regulations 2013: Department of Health: Ireland.

Tabellini, E., G. & Persson, T. (2002) *Political Economics: Explaining Economic* Policy MIT Press: MA.

Tacket, R., A. (2009) *Theorising Social Exclusion* Routledge: Canada.

Taket, A., Hanna, L., Goldingay, S. & Wilson, L. (2103) *Practising Social Inclusion* Routledge: London.

Thibault, L. & Harvey, J. (2013) *Sport Policy in Canada* The University of Ottawa Press: Canada.

Thomas, D. & Woods, H. (2003) *Working with People with Learning Disabilities: Theory and Practice* Jessica Kingsley Publishers: London.

Thomas, N. & Smith, A. (2009). *Disability, Sport and Society*. Rutledge Press: Abington.

Thorold, O., Lewis, O. & Bartlett, P. (2006) *Mental Disability and the European Convention on Human Rights* Martinus Hijhoff Publishers: Boston.

Tinson, A.& MacInnes, T. (2016) *'Monitoring Poverty and Social Exclusion in Northern Ireland 2016* Joseph Rowntree Foundation: York.

Traustadottir, R. (2009) D*isability Studies, the Social Model and Legal Developments* in Mjöll, Arnardóttir, O. & Quinn, G. (2009) *The UN Convention on the Rights of Persons With Disabilities*: *European and Scandinavian Perspectives* Brill: Boston.

Ungar, B., L. (2000) *Olympic Games: Federal Government provides Significant Funding & Support* United States General Accounting Office: Washington D.C.

United Nations Department of Economic and Social Affairs (2015) *Global Status Report on Disability and Development* UN: New York.

United Nations General Assembly, *Convention on the Rights of Persons with Disabilities: resolution / adopted by the General Assembly*, 24 January 2007, A/RES/61/106, available at: http://www.refworld.org/docid/45f973632.html [accessed 6 January 2018].

United Nations (1948) *Universal Declaration of Human Rights* [accessed May 26th 2017 at http://www.ohchr.org/EN/UDHR/Documents/UDHR_Translations/eng.pdf].

United Nations (2006) *Convention on the Rights of Persons with Disabilities* (CRPD) [accessed May 27th 2017 at https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html].

United Nations (2007) *Convention on the Rights of Persons with Disabilities* [accessed April 10th 2017 at http: //www.un.org./convention/questions. shtml].

United Nations (2011) *Disability & Sports United Nations* Enable Website: New York [Accessed February 23rd 2013 at http://www.un.org/disabilities/default.asp?id=1563].

United Nations Ministry of Educational, Scientific and Education and Science Cultural Organisation (1994) *The Salamanca Statement and Framework for Action on Special Needs Education* Presented at World Conference on Special Needs Education: Access and Quality Salamanca, Spain, 7-10 June 1994.

United Nations World Health Organisation (2011) *World Report on Disability: Summary*, [accessed January 28th 2017 at: http://www.refworld.org/docid/50854a322.html].

Vail, S. (2007) Community Development and Sport Participation. *Journal of Sport Management*, 21, 571-596.

Valecillos, C. and Davy, D. (2011) *Qualitative Research in Technical Communication: A review of articles published from 2003 – 2007* in *Qualitative Research in Technical Communication* edited by Conklin, J. & Hayhoe, F. G. (2011) Routledge: New York.

Vanlandewijck, Y., C. & Thompson, W., R. (2016) *Training and Coaching the Paralympic Athlete* John Wiley & Sons: United Kingdom.

Vaughan-Switzer, J. (2003) *Disabled Rights*: *American Disability Policy and the Fight for Equality* Georgetown University Press: Washington DC.

Volpe, M. & Dale Bloomberg, L. (2008) *Completing Your Qualitative Dissertation: A Roadmap From Beginning to End* Sage Publications: Los Angeles.

Waddington, L. (2009) in Cooper, J. (2000) *Law, Rights & Disability* Jessica Kingsley Publishers: London.

Walsh, B. (2017) *Education Studies in Ireland*: *the Key Disciplines* Gill & McMillan: Dublin.

Walsh, D. & Brady, A. (2004) *Mental Illness in Ireland 1750–2002: Reflections on the rise and fall of institutionalised care* Health Research Board: Ireland.

Walsh, D. (2011) 'Did the Great Irish Famine increase Schizophrenia? *Irish Journal of Psychiatric Medicine* Issue 1: 0790- 9667.

Walsh, O. (2005) 'Tales from the big House' the Connacht District Lunatic Asylum in the late nineteenth century: 18th-19th Century *Social Perspectives*, Vol 13 6th Edition.

Ward, T. & Stewart, C. (2008) Putting human rights into practice with people with an intellectual disability. *Journal of Development and Physical Disabilities*, 20, 297-311.

Ward, W. (2010) *Family Law in Ireland* Kluwer Law International: New York.

Waring, A. & Mason, C. (2010) *Opening doors: promoting social inclusion through increased sports opportunities, Sport in Society: Cultures, Commerce,* Media, Politics, 13:3, 517-529.

Warner, T., Dr. (2013) *Research Methods: The Qualitative Approach to Research* OTC: Dublin.

Watson, D. & Nolan, B. (2011) A *Social Portrait of People with Disabilities in Ireland* The Economic and Social Research Institute: Dublin.

Watt, D., C. (2003) *Sports Management and Administration 2ⁿᵈ Edition* Routledge: New York.

Weber, M., C. (2007) *Disability Harassment* NYU Press: USA.

Wendt, O. (2011) *Assistive Technology: Principles and Applications for Communication Disorders and Special Education* Emerald Group Publishing Ltd: United Kingdom.

Whitehead, D., Halcomb, E., Brown, R. and Guzys, D. (2017) An Introduction to Community and Primary Health Care Cambridge University Press: United Kingdom.

Wilson, D. (1998) *Pathways to Learning in Rett Syndrome* Routledge: London.

Wilson, L., Goldingay, S., Hanna, L., & Taket, A. (2103) *Practising Social Inclusion* Routledge: London

Wilson, K., Ruch, G., Lymberly, M. & Cooper, A. (2008) *Social Work: An Introduction to Contemporary Practice* Pearson Education Limited: United Kingdom.

Winnick, P., J. (2011) *Adapted Physical Education and Sport* Human Kinetics: Canada.

Wispelaere, J. & Walsh J,. D. (2007) in Considine, M. & Dukelow, F. (2017) *Irish Social Policy: A Critical Introduction* Gill & McMillan: Dublin.

Wolfensberger, W. & Thomas, S. (1995) An Analysis of the Client Role From a Social Role Valorisation Perspective SRV-VRS: *The International Social Role Valorisation Journal*, Vol. 1(1) – 1994.

Wolfensberger, W. (1970). The principle of normalization and its implications to psychiatric services. *American Journal of Psychiatry*, 127:3, 291-297.

Wolfensberger, W. (1975). *The Origin and Nature of Our Institutional Models* Human Policy Press: New York.

Wolfensberger. W (1975). *The Principle of Normalization in Human Services.* National Institute on Mental Retardation.

World Health Organisation (1994) *Health Topics: Disability* [Accessed 28ᵗʰ January 2013 at http://www.who.int/topics/disabilities/en/].

World Health Organisation (WHO) (2001), *International Classification of Functioning, Disability and Health* World Health Organisation: Geneva.

World Health Organisation (2011) *World Report on Disability* WHO: Malta.

Yanan, L. (2011) *Discussions on the Connotation of Olympic Culture* in Zhou, Q. (2011) *Advances in Applied Economics, Business & Development: International Symposium ISAEBD Part 2: Proceedings 2011* Springer Heidelberg Dordrecht: New York.

Zaretsky, H., H., Dr., Flanagan, S., Dr. & Moroz, A., Dr. (2011) *Medical Aspects of Disability 4th Edition: A Handbook for the Rehabilitation Professional* Springer Publishing Company: New York.

Zidjaly, N., A. (2016) *Disability, Discourse and Technology*: *Agency and Inclusion in (Inter)action* Springer Publications: United States of America.