



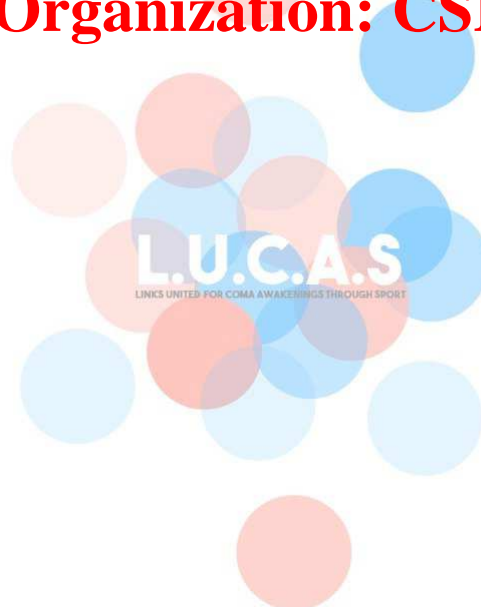
LUCAS

Links United for Coma Awakenings through Sport

PILOT ACTIONS

Country: ITALY

Organization: CSI



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1. PARTICIPANTS RECRUITED

	N. <i>(Everyone involved even if they have not attended all lessons)</i>	Age <i>(age group)</i>	Characteristics	N. of which had done motor / physical / sporting activity before acquiring disability
People with disability (TBI or SCI)	8	from 28 to 75 years old	4 head injuries and 4 vascular lesions, 7 of which are outcomes of severe brain injury acquired and 1 with SCI acquired	3
Caregivers	10	from 49 to 81 years old	Average health, some physical problems that outcome because of age and taking care of their families	3

2. OPERATORS INVOLVED (who has worked to implement the methodology: TECHNICAL = who conducted the lessons)

For:	Educational qualification	Specific training	Professional experience
People with disability (TBI or SCI)	<p>Person graduates in physical education with specific skills in</p> <ul style="list-style-type: none"> - sport of fencing - technical wheelchair - technical sport of adapted sports dance 	<ul style="list-style-type: none"> - specialized technicians in fencing - specialized technicians in dance adapted 	<ul style="list-style-type: none"> - National Technician in dance with wheelchair - National technician in sport dance
Caregivers	<p>Person graduates in physical education with specific skills to carry out activities for senior and people with disabilities</p>	<p>Postural training</p>	<p>Person who has a degree in postural training specialized for seniors and disabled</p>

3. OTHER PROFESSIONALS INVOLVED IN THE PROJECT AND HOW *(add rows, if necessary)*

For:	Educational qualification	Job	Role in the project
People with disability (TBI or SCI)	Degree in Psychology	Psychologist	To Select the patients and caregivers to be involved; to distribute questionnaires and to evaluate the results.
	Doctor Specialist in Traumatic Brain Injury and Spinal Cord Injury		To individuate the patients to be involved in the project.
	Professional educator		To individuate the patients to be involved in the project
	Researcher	Researcher	Data Analysis
Caregivers			

4. VOLUNTEERS INVOLVED IN THE PROJECT AND HOW

N. volunteers	Role in the project
2	Assistance during the activities

5. PERIOD OF IMPLEMENTATION (from - to)

For:	N. of months (overall duration)	N. sessions per week	Average % of participants rate
People with disability (TBI or SCI)	24 weeks	2	
Caregivers	24 weeks	2	
All together	24 weeks	2	

6. ORGANIZATION OF THE ACTIVITY SESSIONS (includes LESSON)

For:	Welcome time (yes/no)	Duration of the lesson Options envisaged:	Closing time - greetings (yes/no)
People with disability (TBI or SCI)	Y	<p>a) 60 minutes disables /60 min caregivers + 30 min all together</p> <p>b) 15 min all together + 60 minutes disables /60 min caregivers +15 min all together</p>	Y
Caregivers	Y	<p>b) 15 min all together + 60 minutes disables /60 min caregivers +15 min all together</p>	Y
All together	Y		Y

7. PLACE OF EXECUTION OF THE LESSONS (gyms / environments / outside ...)

For:	Please describe the place (gym, park, pitch, etc) in which the activity was carried out
People with disability (TBI or SCI)	gym of Wheelchair Fencing
Caregivers	postural gymnastics in the room adjacent to the gym
All together	gym of Wheelchair Fencing

8. PERFORMED PROGRAM (type of activity)

For:	Physical activity / motor activity <i>(indicate whether with aids)</i>	SPORT
People with disability (TBI or SCI) <i>[Please provide information about the organized activities: individual or group activity, adapted sport]</i>		<p>Fencing activities on wheelchair for people with acquired disabilities. They learnt the preliminary technique of this discipline: exercises for the development of oculo-manual coordination, double stroke, forward-back step, lunge, attack, “connection” and “disengagement” simple parry, advanced target, Arbitrage with international gestures, common times (synchrony attack), acquisition of autonomy in fencing hall with the management of the equipment. In the last lessons, was proposed to each participant, an individual lesson with the master for 15 minutes. In addition someone has succeeded to play few standing exercises.</p> <p>Dance activities. They improved Rhythm and coordination: keep the time with different parts of own body, partner coordination exercises. Based-Step of “boogie woogie”, cha cha cha, bachata, “disco inferno” dances in pairs and group.</p>
Caregivers <i>[Please provide information about the organized activities: individual or group activity, adapted sport]</i>	It was proposed postural gymnastics: relaxation exercises, breathing, toning, have been given instructions on how to use the body to assist and automate proper posture, stabilize and protect the spine during efforts, mobilize and stretch the muscles. It was given more	

For:	Physical activity / motor activity (<i>indicate whether with aids</i>)	SPORT
	<p>attention to maintain a proper posture in the performance of the exercises during all lessons in order to make more effective the work session</p> <p>In the first 3 months was proposed a gym for all group in order to increase the body tonification and to improve the coordinative skills. Subsequently the group was involved in functional circuits.</p>	
<p>All together <i>[Please provide information about the organized activities: individual or group activity, adapted sport]</i></p>	<p>Common activities of patients and caregivers:</p> <p>Warm up: mobilization exercises of the various muscle groups, coordination manual - oculus floor exercises and using small equipment.</p> <p>Conclusion phase: relatives and patients worked together with the aim to improve the quality of interaction; relational and emotional communication through relaxing activities and team building games carried out in groups and in pairs.</p>	

9. ARISEN CRITICAL POINTS AND SOLUTIONS

For:	CRITICAL POINTS ARISEN	SOLUTIONS FOUND
People with disability (TBI or SCI)	Recruiting patients couples / caregiver : stiffness to support the project , particularly on the part of the doctor / health care professional.	Direct comparison with medical staff
Caregivers	One caregiver per patient	To allow the option of more assistants : not all caregivers would be able to participate to all lessons. It was enlarged the participation of more caregiver per patient by ensuring the attendance of the participants .
All together	At the beginning of the lesson the division between patients and caregivers: Caregivers have shown themselves wary of the technicians that were entrusted to their loved ones.	<p>After a few lessons we have decided to propose the heating work together, allowing to the doubtful caregivers to:</p> <ul style="list-style-type: none"> - to know directly the technicians who would take care of their

For:	CRITICAL POINTS ARISEN	SOLUTIONS FOUND
		<p>families</p> <ul style="list-style-type: none"> - To know some technical aspect of the discipline that was proposed to their loved ones ; - To regain confidence with respect to the project broke down any initial doubts

10.ADDED VALUE OF THE WHOLE EXPERIENCE THAT YOU HAVE RECORDED (please describe)

For:	Description
People with disability (TBI or SCI)	People with disability have acquired greater autonomy and independence from their caregiver
Caregivers	The caregivers learned the importance of taking care of themselves and improving the quality of life. Some caregiver have participated in the activities even in the absence of their loved one.
All together	the caregivers had the opportunity to interact and comparison with other people with various disabilities. They had seen the strenghts and weaknesses points made in their relationship with their loved one.
Operators	

11.NOT PREDICTABLE ACHIEVED RESULTS – (please describe)

For:	Description
People with disability (TBI or SCI)	<p>Fencing: the people have improved and reached greater objectives than those expected: from the simple acquisition of the basic techniques of the discipline they arrived to carry out small fights. Some athletes were be able to fence standing.</p> <p>Dance: they have reached the autonomy to move alone in the space and to move in the space with others.</p>
Caregivers	For some caregivers the physical activity was a reason to think about themselves and to meet new people with similar background, improving their social integration. The dedicated lessons have allowed them to reduce the emotional burden and to improve the perception of Life-Quality.
All together	Friendships were developed
Operators	

12. PLEASE DESCRIBE THE ACHIEVED RESULTS (please describe)

For:	<i>Description</i>
People with disability (TBI or SCI)	<ul style="list-style-type: none"> • Improvement of the general physical state and acquisition of specific skills of the practiced physical activity (wheelchair fencing and dance) • Improvement the perception of quality of life and psychophysical well-being • Improvement the quality of the relationship between the person with acquired disability and his/her family / caregiver • To give the opportunity to the person with acquired disability to practice adapted sports • achieve greater autonomy in the movement either during physical activity or in other activities
Caregivers	<ul style="list-style-type: none"> • improvement of the general physical state • Improvement the perception of quality of life and psychophysical well-being • Improving the quality of relationships between caregivers and people with acquired disabilities
All together	<ul style="list-style-type: none"> • Sharing among people with disabilities about the technical skills acquired in the practiced sport
Operators	Improvement of a new method of approach and new skills for trainers who work with people with disability and/or caregivers