

University of Wisconsin-La Crosse

Graduate Studies

Developing and Implementing a University-Based Physical Activity
Mentoring Program for Individuals with Disabilities

A Critical Analysis Project Submitted in Partial Fulfillment of the Requirements for the
Master of Science in Exercise and Sport Science-Physical Education Teaching
Adapted Physical Education Teaching Concentration

Maggie Griggs

College of Science and Health
Department of Exercise and Sport Science
Adapted Physical Education Teaching Concentration

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Candidate: Maggie Griggs

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The candidate has successfully completed the Critical Analysis Project final presentation.

Garth Tymeson, Ph.D.
Signature of Critical Analysis Project Advisor

Date

Abigail Lee, M.S., CAPE
Signature of Committee Member

Date

ABSTRACT

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Individuals with disabilities (IWD) are at a greater risk for developing health complications as a result of physical inactivity and sedentary lifestyles. These individuals tend to be less physically active due lack of fundamental motor skill proficiency, assistance and supports, knowledge, physical architectural barriers, and/or negative community and societal perceptions. Physical inactivity among IWD also stems from a lack of friends or peers to exercise with. One effective way to help IWD gain the experience, knowledge, and confidence they need to become regularly physical active is through a physical activity mentoring program. Through a mentoring program, IWD have the opportunity to improve their self-concept, health, and social skills in a variety of settings such as local health clubs, recreation centers, parks, or other facilities. Mentors and mentees can benefit in every learning domain (psychomotor, cognitive, and affective) while parents can benefit from a change in perception as to the true abilities of their child. The purpose of this project was to create an instructional guide and video to assist in developing and implementing a physical activity mentoring program for IWD at the university level. Guidelines are provided based on a longstanding program at the University of Wisconsin-La Crosse. Included is a section of resources comprised of manuals, websites, and journals providing guidelines and suggestions of how to develop, implement, and sustain a program.

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CHAPTER I

Introduction

Many individuals with disabilities (IWD) are at significant risk for developing health related diseases from physical inactivity such as heart disease, obesity, and diabetes (Phillips & Holland, 2011). In fact, IWD are three times more likely to have a serious chronic disease than individuals without a disability (Make the Commitment Commit to Inclusion, 2017). According to the Centers for Disease Control and Prevention, 36.5% of adults in the U.S. are obese (U.S. Department of Health and Human Services, 2016). Even more alarming is that population-level prevalence data have indicated that IWD, specifically an intellectual disability, have either similar or higher obesity rates in comparison to the general population (Rimmer, Barth, Wang, Rauworth, & Jurkowski, 2004). Nearly 58% of adults with a disability are obese (Make the Commitment Commit to Inclusion, 2017).

These obesity and chronic disease rates can be attributed to physical inactivity which is extremely prevalent among IWD. Approximately 50% of all adults with disability get no aerobic physical activity and youth with a disability are four times less physically active than their peers (Make the Commitment Commit to Inclusion, 2017). Given this information, it can be stated that many IWD are at risk of developing diseases that correlate with physical inactivity due to lack of knowledge and experience in physical activity (Temple & Stanish, 2011).

Along with physical inactivity, IWD also lack support for opportunities to learn motor skills and participate in experiences that allow for achievement of independent lifestyles, which include the ability to participate in regular physical activity (Powers,

Sowers, & Stevens, 1995). Self-determination and self-efficacy are essential for successful independent living (Summers, 1986; Varela, 1986). Powers, Sowers, and Stevens (1995) suggested that mentoring may be an effective method in promoting self-efficacy, community-based knowledge, and advocating for oneself in relation to recreational physical activity for IWD. By providing specific guidelines and with support from a mentor, IWD were able to learn self-care and self-efficacy skills which allowed them to become more exposed to community events and participate in more activities that may not have been available to them before due to the lack of independence (Powers, et al., 1995).

The negative perceptions or stereotypes that society or a community may associate with an IWD could also play a considerable role in the potential for those individuals to have an active and effective role in society (Morin, Rivard, Crocker, Boursier, & Caron, 2013). This negative perception can also effect an IWD likelihood or ability to be physically active in a community. The attitudes and perceptions society has towards IWD can impact their daily living and socialization (Dole, 2014). It is important to consider the attitudes and perceptions of the public, college students, and parents when developing a physical activity mentoring program for IWD at the university level so that factors that contribute to negative perceptions or attitudes can be diminished.

Due to the recent movement for inclusion, IWD have been more frequently included in the workplace, community events, and other social environments guiding the attitudes and perceptions of the general public to be more positive towards IWD (Morin, et al., 2013). However, a study done by Morin, et al (2013) revealed that many nondisabled participates showed some sadness, tenderness, and pity towards IWD, which

does not demonstrate emotions that portray that IWD can be self-determined, have self-efficacy, and contribute to society. This can affect the way society perceives and reacts to IWD being physically active in a community environment such as a local YMCA, recreation center, or fitness club.

When implementing a physical activity mentoring program at the university level, it is essential to consider the attitudes of college students towards IWD due to the fact that they will be the mentors. A study by Huskin, Reiser-Robbins, and Kwon (2017) explored the attitudes of undergraduate students towards IWD, including the effects of contact experience with different disabilities and how that in turn effects the social interaction of undergraduate college students and IWD. It was discovered that across all the disability types, students who regularly had contact with an IWD had lower social distance scores than students who had minimal to no contact with an IWD (Huskin et al., 2017). Findings exemplifies why a mentoring program at the university level could be essential for a community that perceives inclusion of all disabilities in society as important. By implementing a mentoring program, more and more persons would have a positive experience in working with an IWD, therefore changing their perceptions about the stereotypes associated with many disabilities.

Parents' perceptions of their child's ability to participate in physical activity as well as their perceptions of mentoring programs can also play a role in an IWD exposure to physical activity and other social contexts. A study by Columna, Dillon, Norris, Dolphin, and McCabe (2017) examined parent perceptions of physical activity experiences for their children with visual impairments. The study found that parents not only wanted their child to participate in physical activity to remain in good physical and

mental health, but the parents also recognized the development of self-confidence and self-determination that could be achieved through participation in physical activity (Columna et al., 2017).

Parents have also demonstrated satisfaction in physical activity mentoring programs for improvement in their child's physical fitness and social skills (Temple & Stanish, 2011). Parents felt their child gained many benefits from a physical activity mentoring program such as improved physical fitness, enjoyment, making new friends, learning new exercises/physical activities, learning how to use a YMCA facility, increased motivation to exercise, and increased self-esteem and confidence (Temple & Stanish, 2011). Overall, parents viewed physical activity in a mentoring environment to be important for the physical, mental, and social wellbeing of IWD.

Although there is a lack of studies and programs in relation to mentoring and physical activity for IWD, some mentoring programs do exist and have shown to be solutions for enhancing physical activity among IWD. I Can Do It, You Can Do It (ICDI) is an organization dedicated to providing health-enhancing opportunities for IWD. The ICDI program supports the implementation of guidelines and programming to empower IWD to lead healthy lifestyles through physical activity, nutrition knowledge, and obesity reduction (Make the Commitment Commit to Inclusion, 2017).

Physical activity mentoring programs for IWD, developed through ICDI, were examined by Kemeny and Arnhold (2012). The study examined the effects of an 8-week physical activity and nutrition mentoring program for IWD. Over 3 years, 9 universities were examined for their community-based physical activity mentoring programs using the guidelines provided by ICDI (Kemeny & Arnhold, 2012). Findings suggested that

not only did mentors and mentees benefit from the program, but community facilities also became more aware and effective in implementing improvements in accommodations for IWD (Kemeny & Arnhold, 2012). Mentors showed significant improvement in the knowledge and application of mentoring behaviors, as well as improved perceptions and attitudes towards IWD. However, mentees gained the most benefits. Mentees reported feeling healthier (86%) and stronger (86%). A total of 90% of mentees reported learning new skills that they could transfer into their everyday life to help live a more health-enhancing lifestyle (Kemeny & Arnhold, 2012). Mentees also demonstrated other significant behaviors in achieving a healthy lifestyle such as the enjoyment of physical activity, participation in team sports, eating a balanced diet, and a decrease in sedentary behavior (Kemeny & Arnhold, 2012). Most prominently, a significant decrease in body mass index (BMI) was reported by mentees.

The potential benefits of mentoring on IWD and their physical activity levels is evident. Mentoring provides personalized and one-on-one instruction that is often needed for IWD to increase their health-enhancing physical activity levels, as well as provide an optimal and supported learning environment. The ICDI model is responsive to developing a program that takes into consideration an individual's needs to increase physical activity, develop healthy nutrition habits, and reduce barriers to community participation to create a healthy lifestyle for IWD (Kemeny & Arnhold, 2012).

However, despite current programs in very limited geographic areas, significant health issues caused by physical inactivity still exist among IWD. A plausible solution to the health inequality experienced by IWD is creating more physical activity mentoring programs like the university and community-based programs implemented through ICDI

concepts. Universities represent an excellent potential source of staff, resources, and community involvement. At the University of Wisconsin-La Crosse (UWL), a physical activity mentoring program for IWD exists and has served many mentors and mentees for over a decade. The program at the UWL was developed using ICDI concepts, and has produced similar benefits among the mentors and mentees as seen in the study by Kemeny and Arnhold (2012). Therefore, this model can be used to show others how to develop, implement, and sustain a physical activity mentoring program for IWD at a university site.

Need for the Project

Physical activity mentoring programs for IWD provide many benefits for physical, emotional, and social wellbeing. Research has shown a significant deficiency in physical activity levels among IWD. This can be attributed to a multitude of factors such as lack of experience and/or knowledge in physical activity, inaccessibility to local health and wellness centers, and inability to perform an exercise routine independently. According to a study that assessed the physical activity levels of IWD, specifically Down syndrome and autism, this particular population is at a high risk for developing diseases associated with physical inactivity (Phillips & Holland, 2011).

This increase in obesity and other health risks among IWD may correlate with physical inactivity due to lack of knowledge and experience in physical activity (Temple & Stanish, 2011). Barriers such as accessibility as well as communication complications and negative societal perceptions create dependence and vulnerability among IWD (Cruikshank, 1976; Scherer, 1988). Although advances are being made for individuals with disabilities, there is still more that needs to be done in terms of health equality.

By developing an instructional video to assist in creating physical activity mentoring programs for IWD, these programs could become more prevalent. This could improve the health as well as the emotional and social wellbeing of IWD. As a result of more programs, IWD could develop skills and independence that may not be accomplished without a mentoring program. These skills, such as self-efficacy, community-based knowledge, and advocating for oneself, are essential for an individual to achieve independence (Powers et al., 1995). Gaining as much independence as possible is a goal of any IWD and a physical activity mentoring program is the type of program that can assist in the achievement of that goal.

Purpose of the Project

The purpose of this project was to develop an instructional video to show how to design and implement a physical activity mentoring program for IWD at the university level. Information regarding physical activity mentoring programs is extremely limited, and the resources to start a physical activity mentoring program for IWD are even more limited.

Although this project was designed to specifically assist in starting a program at the university level, the guidelines and recommendations presented here could be used for programming at other levels or agencies. Although a physical activity mentoring program for IWD will look different depending on the age of mentors and mentees, the setting of the program, and program specific goals, the general procedures and recommendations can be used when developing any program.

Another main purpose of this project was to highlight the positive effects that a physical activity mentoring program can have on mentors, mentees, parents, and society.

Mentors and mentees have the opportunity to advance their understanding and skills. Through physical activity mentoring, the mentee and mentor can improve in the psychomotor domain by improving movement patterns, physical activity skills, and overall health and physical ability. Mentors and mentees can improve within the cognitive domain through gaining knowledge and understanding of different exercise opportunities, exercise forms, as well as gain experience and knowledge of a variety of disabilities. Affectively, mentors and mentees have opportunities to improve their social skills and learn how to be active for a life time. Parents can benefit from involving their child in a physical activity mentoring program for health improvements and appropriate social skills.

By developing a physical activity mentoring program for IWD that utilize the community, the negative perceptions that society may have can diminish. Inclusive environments are present everywhere, whether it be the work place, school, or community events. A physical activity mentoring program goes far beyond simply benefiting the mentee. By developing a program, mentors will become more understanding of others and society will begin to accept inclusion and diminish negative stereotypes.

Definition of Terms

For the purpose of this project, the following terms were used. Each term is defined by how it is referenced to for the specific purpose of this project.

Individuals with Disabilities: Any individual who experiences any physical, cognitive, or emotional impairment or disturbance that may require additional support (U.S. Department of Education, 2006).

Mentee: An IWD of any age who requires assistance in increasing their physical activity levels or in gaining the knowledge or skills required to be physically active in the community.

Physical Activity Mentor: An individual with more competency or experience who assists an individual with a disability in developing skills, knowledge, confidence, and motivation to achieve a higher level of health-enhancing physical activity. (Axelrod, Campbell, & Holt, 2005).

Physical Activity: Any health-enhancing, bodily movement that requires more energy of the muscles and an increase of heartrate more than when resting. Physical activity can include the following: walking, running, gardening, bowling, and kayaking (U.S. Department of Health and Human Services, 2016).

Physical Activity Mentoring Program: A program where an individual with more competency or experience assists an IWD in developing skills, knowledge, confidence, and motivation to achieve a higher level of health-enhancing physical activity (Axelrod, Campbell, & Holt, 2005).

Summary

Individuals with disabilities are at a risk for developing health complications due to physical inactivity. This physical inactivity can be a result of social barriers, lack of support, and an absence of experience or knowledge in relation to physical activity (Powers et al., 1995). Although many advances have been made for IWD in other areas such as education, there is still a lack of physical activity opportunities for IWD that provide adequate health-enhancing experiences. More physical activity programs for IWD need to be provided to assist these individuals with the prevention of health risks, as

well as with the ability to be physically active with the proper support (Kemeny & Arnhold, 2012).

Mentoring has shown to be a positive learning experience for mentors and mentees and has been positively received by parents. By providing support through mentoring, IWD are able to build the confidence and self-efficacy to be physically active. Along with increased physical activity, mentoring provides an opportunity for the development of other skills such as self-advocating, social skills, and physical activity related knowledge (Kemeny & Arnhold, 2012).

This critical analysis project and instructional video provides information for the development and implementation of a university-based physical activity mentoring program for IWD. Mentoring is an effective and efficient approach to helping IWD develop the skills, knowledge, and motivation needed to be physically active for a lifetime.

CHAPTER II

REVIEW OF RELATED LITERATURE

Introduction

Numerous research studies have revealed low physical activity levels among individuals with disabilities (IWD) (Phillips & Holland, 2011; Temple & Stanish, 2011). This can be attributed to a multitude of factors such as lack of experience and/or knowledge of physical activity, lack of accessibility to local health and wellness centers, underdeveloped motor skills, and the inability to perform exercise independently. According to the U.S. Department of Health and Human Services (2011), "...76.8% of adults with disabilities, ages 18 years and over, experience physical or program barriers that limit or prevent them from using available local health and wellness programs." This prevents many IWD to achieve the recommended amount of physical activity of 60 minutes per day (U.S. Department of Health and Human Services, 2011).

According to a study that assessed the physical activity levels of IWD, including Down syndrome and autism, this population is at significant risk for developing diseases associated with physical inactivity (Phillips & Holland, 2011). Results concluded that, of 152 participants ages 12 to 70 years old with intellectual disabilities, none of them met the recommended amount of physical activity within the two year span that data were collected (Phillips & Holland, 2011). This reveals a clear lack of physical activity among IWD, specifically those with intellectual disabilities (ID).

Due to the lack of physical activity levels among IWD, increased obesity rates have been observed. Within the U.S. population, the obesity rates have more than doubled from 13.4% (1999) to 30.9% (2008) (Flegal, Carroll, Ogden, & Curtin, 2010). Today, according to the Centers for Disease Control and Prevention, obesity in the U.S.

effects 36.5% of adults. This is an alarming statistic about the general population. Even more concerning is that population-level prevalence data have indicated that individuals with ID have either similar or higher obesity rates compared to those without ID (Rimmer et al, 2004).

Given this information, it can be stated that many IWD are at risk of developing diseases that correlate with physical inactivity due to lack of knowledge and experience in physical activity (Temple & Stanish, 2011). Barriers such as architectural structures and communication create dependence and vulnerability among IWD, specifically those with a physical disability (Cruikshank, 1976; Scherer, 1988). Although advances are being made for IWD, there is still more that needs to be done in terms of health equality. This need is summed up in the quote from Phillips and Holland, which states, “In recent decades, IWD have experienced many advances in education, work, living arrangements, and human rights. Despite these developments, they experience significant health inequalities with increased rates of morbidity and mortality” (Phillips & Holland, 2011). This confirms the need for more programs and opportunities for IWD for their health and physical activity.

One method of diminishing this health inequality is physical activity mentoring. Most research confirms that mentoring programs and peer tutoring support the increase of physical activity, self-esteem, and the ability to participate in physical activity for a lifetime. This review of literature will discuss the enhancement of physical activity for IWD through mentoring and peer tutors, the benefits of mentoring and peer tutoring for IWD, as well as a review of resources for implementing a physical activity mentoring program for IWD.

Enhancing Physical Activity of Individuals with Disabilities through Mentoring and Peer Tutoring

Achieving adequate levels of health-enhancing physical activity is difficult for the general population, but is even more difficult for IWD (Make the Commitment Commit to Inclusion, 2017). Approximately 50% of adults with a disability get no aerobic physical activity (Make the Commitment Commit to Inclusion, 2017). This high level of physical inactivity can lead to a multitude of chronic diseases and increased obesity rates. A total of 58% of adults with a disability and 38% of children with a disability are obese. Children with a disability also have physical activity levels that are four times lower than their typically developing peers (Make the Commitment Commit to Inclusion, 2017). Given these statistics, the need is urgent to find effective and efficient solutions to improve the health-enhancing physical activity levels among IWD.

A study by Lieberman, Dunn, McCubbin, and Van der Mars (2000) examined the effectiveness of trained peer tutors on physical activity levels of deaf students in an inclusive elementary physical education environment. The study included 8 participants who were deaf and 8 gender matched, trained, hearing peer-tutors. Participants and peer-tutors were in grades fourth through sixth. Moderate to vigorous physical activity levels (MVPA) were measured and analyzed using the System for Observing Fitness Instruction Time (SOFIT) which is a direct observation tool that measures the amount of time and intensity level of physical activity in physical education settings for elementary-aged children (Lieberman et al., 2000). These data were collected during a general physical education class that took place twice a week for 45 minutes for 5 months (32 class periods total). Prior to the start of the study, the peer-tutors were trained in sign language

relevant to physical education instruction and fitness so that they could effectively communicate with the participants.

Results revealed that after the introduction of peer tutoring deaf students increased their MVPA from 22 to 41.5% and peer tutors increased their MVPA from 19 to 37.9% (Lieberman et al., 2000). This substantial increase in MVPA supports the hypothesis that using a mentoring system can increase physical activity levels among students who are deaf as well as among the peer-tutors in an inclusive physical education setting.

Although peer tutoring in physical education can be linked to mentoring, Kemeny and Arnhold (2012) looked more specifically at the benefits of a physical activity mentoring program for IWD. The study examined the benefits experienced by mentors and mentees over an 8-week physical activity mentoring program through the I Can Do It, You Can Do It (ICDI) program (Kemeny & Arnhold, 2012). The ICDI program is an initiative dedicated to providing health-enhancing opportunities for IWD. The program supports the implementation of guidelines and programming to empower IWD to lead healthy lifestyles through physical activity, nutrition knowledge, and obesity reduction (Make the Commitment Commit to Inclusion, 2017). I Can Do It, You Can Do It also advocates for IWD in improving individual skills for physical activity and reducing barriers to community participation through the use of a mentor (Kemeny & Arnhold, 2012). This study investigated the effectiveness of the ICDI physical activity and nutrition mentoring program.

The program was implemented at nine universities across the U.S within a 3-year period. Each university included community-based partnerships with school districts and

recreational settings. A convenience sample of mentors and mentees was used. Mentors were recruited through websites, posters, brochures, and announcements in courses related to the fields of disability or physical activity (Kemeny & Arnhold, 2012). Mentees were recruited through parent support groups, school districts, or word of mouth. A total of 1,006 mentors and 660 mentees were recruited and completed the pre- and postsurveys. The mentee population represented a variety of disabilities classified under IDEA 2004 (Kemeny & Arnhold, 2012). The most prevalent disabilities represented were autism spectrum disorder (38.4%) and intellectual disabilities (23%). A majority of mentors ranged between the ages of 18 to 25 years and mentees ages ranged from 4 to 29 years.

Each of the 9 sites were required to provide an indoor physical activity space and recruit and train mentors and mentees. Mentors underwent an orientation that consisted of communication and motivation strategies, adapting physical activities, and nutrition training. Throughout the 8-weeks, mentors also had the opportunity to participate in a collaboration session at the beginning, mid-point, and end of the program (Kemeny & Arnhold, 2012). Mentors and mentees were required to meet at least 1 hour per week for the 8 week-period. Each pair would participate in physical activity based on the mentees preference. The mentor also encouraged healthy eating habits outside of the program and had the mentees fill out a weekly at-home diet log with the help of a parent/guardian. Each week mentors completed a progress report and goal-setting sheet with the assistance of a parent/guardian.

Data were collected prior to and after the 8-week physical activity mentoring program. Mentors completed a self-report mentoring knowledge (assessment, goal-

setting, feedback, problem solving) quiz and a Likert-scale quiz analyzing the mentor's perceptions of IWD (Kemeny & Arnhold, 2012). At the end of the 8-weeks, mentors also completed a survey reporting observations of improvement seen within their mentee. Mentees were pre- and postassessed on physical activity levels, physical fitness based on body mass index (BMI), nutrition, sedentary behavior, and feelings towards physical activity and mentoring. Physical activity levels, nutrition, and sedentary behaviors were assessed using a 27-item survey questionnaire that asked mentees to answer questions based on a 7-day recall. Questions included number of servings per day of vegetables, daily hours spent watching television, and how many days where 30-60 minutes of physical activity were achieved (Kemeny & Arnhold, 2012). Using height and weight, BMI was calculated. Feelings towards physical activity and mentoring were analyzed using a survey created by a panel of experts from the Youth Behavior Risk Survey and National Health and Nutrition Examination Survey.

The results indicated that the 8-week physical activity mentoring program was beneficial for both the mentors and mentees. Mentors from a variety of academic disciplines demonstrated significant improvement in knowledge of mentoring and mentoring behavior. Mentors reported improving in communication, promoting self-efficacy for IWD, goal-setting, and comfort-level with IWD. Mentor surveys also showed an improvement of behavior towards IWD (Kemeny & Arnhold, 2012). At posttest, 81% of mentors reported that their mentee's interest in physical activity improved. The results for the mentees also proved to be significant. After the 8-week program, 90% of mentees reported learning new skills in relation to physical activity, 86% felt healthier, 86% felt stronger, and 88% felt as though they were in an overall

better physical condition (Kemeny & Arnhold, 2012). Pre- and posttest differences also demonstrated a significant improvement in the mentees' enjoyment of physical activity and actual days of physical activity participation (Kemeny & Arnhold, 2012). Results also revealed a decrease in sedentary behaviors and an increase in healthy nutrition habits. Findings also support that mentees were able to substantially decrease their BMI if their BMI was over 25 prior to the 8-week study (Kemeny & Arnhold, 2012).

This study confirms the benefits that a physical activity mentoring program for IWD can have for mentees and mentors. The ICDI program was an effective model for a physical activity mentoring program. The ICDI model meets individual needs within the environment of increased physical activity and improved nutrition habits (Kemeny & Arnhold, 2012). This study was critical in demonstrating the improvements that a physical activity mentoring program can have in a variety of aspects of the mentors and mentees lives. The IDCI program is very similar to that described in the video that accompanies this project. The physical activity mentoring program analyzed and exemplified within this project was part of this research.

Similar to the ICDI mentoring program, Temple and Stanish (2011) examined the feasibility of using a peer-guided model to enhance participation in community-based physical activity for youth with ID. The study was designed to address personal barriers to exercise commonly faced by individuals with ID. The study included "workout buddies" participating in 60 minutes of exercise for 2 days per week, for 15 weeks (Temple & Stanish, 2011). Twenty high school students with mild to moderate ID were put into one-on-one groups or groups of two with one typically developing peer. The "workout buddies" participated in structured and planned exercise after school at a local

YMCA for 60 minutes. The prescribed exercise included aerobic exercise, strength training, flexibility, and core strength exercises that were printed on activity cards (Temple & Stanish, 2011). The mentors were trained in 2, 90 minute sessions and were also involved in a familiarization phase where baseline testing occurred. The researchers used a modified version of the Physical Activity and Health Questionnaire to evaluate the enjoyment, barriers, and preference of the individuals with ID in relation to their experience with physical activity and exercise (Temple & Stanish, 2011). An open and closed-question survey pertaining to program satisfaction was completed by the participants, mentors, and parents of participants.

Results indicated that the participants (mentees) felt they had learned new exercises (94%), had made friends (94%), and were fitter and healthier (83%) as a result of the program (Temple & Stanish, 2011). The mentors stated that as a result of the program they had learned new exercises (93%), and had made friends (100%). A smaller portion felt they were fitter and healthier (64%). All of the parents of the participants said that they were “very satisfied” with the program and felt that their child’s fitness level improved (Temple & Stanish, 2011).

This study concluded that, “... the peer-guided model was feasible and effectively addressed some ‘invisible’ barriers such as having no one to exercise with and not knowing how to exercise” (Temple & Stanish, 2011). Although this study may not have directly measured the health improvements of the participants, it was clear the physical activity levels increased. Previous studies have suggested the existence of parent perceptions indicating that their child with an ID are not welcomed into community settings (Temple & Stanish, 2011). However, this study showed that by using peer-

mentoring, parents and participants both felt they were successfully participating in an inclusive context.

Benefits of Mentoring and Peer Tutoring for Individuals with Disabilities

Physical activity mentoring programs have become a topic of interest that may support enhancement of physical activity among IWD (Stanish & Temple, 2011). Along with increased levels of health-enhancing physical activity, IWD also experience additional benefits from mentoring programs and peer tutors. In other studies, mentoring programs have been shown to be effective in improving self-esteem, school connectedness, educational performance, as well as health and physical activity (Powers, et al., 1995). Although there are not many studies that examine the effects that mentoring programs may have on the improvement of physical activity habits or health benefits among IWD, there are some studies that examine the effects mentoring programs, peer-tutoring, and inclusive physical education experiences may have on an individual's self-efficacy, socialization skills, and knowledge of physical activity and exercise.

Powers, et al. (1995) investigated the impact of mentoring on self-efficacy and community-based knowledge in adolescents with physical disabilities. Self-determination and self-efficacy are essential for successful independent living (Summers, 1986; Varela, 1986). However, there is a deficit in the opportunities provided for IWD to learn skills and participate in empowering experiences for achievement of independent lifestyles (Powers, et al., 1995). This study involved 10 students, ages 12 to 19 years, with severe physical disabilities that impacted their mobility and independence. The students' self-efficacy was measured with The Disability-Related Self-Efficacy Scale that was adapted from The Self-Efficacy Scale to be more applicable to the students being

studied (Powers, et al., 1995). Two other questionnaires assessed the students' knowledge and confidence in regards to community-based issues and strategies. Mentors were recruited from a local independent living program and all had training prior to meeting their student. Qualitative interviews were completed with the students, parents, and mentors. During the study, students and mentors met twice a month for 6 months. Each session varied in amount of time and mentors were given specific activities and information to convey to the students.

Results revealed that students articulated an increase in their confidence to perform specific community-based activities and succeed in disability-related barriers following integration with their mentors (Powers et al., 1995). The students were exposed to different ways they could participate in recreational physical activity, transportation, and advocate for themselves. Parents of the students also expressed a new found confidence in their child's capabilities and ability to participate in community activities (Powers et al., 1995).

This study suggests that mentoring may be an effective method in promoting self-efficacy, community-based knowledge, and advocating for students who have severe physical disabilities (Powers et al., 1995). Providing mentors with specific guidelines/activities to help students learn self-care and self-efficacy skills allows them to become more exposed to community events and participate in more activities that may not have been available before due to the lack of independence (Powers et al., 1995). This study concluded that mentoring appears to be a promising approach to assisting youth with challenges to identify and realize their goals, become more independent, and advocate for themselves (Powers et al., 1995).

Similar to the Powers, et al., (1995) investigation concerning the benefits of mentoring beyond physical activity, a study by Whipp, Jackson, Dimmock, and Soh (2015) examined the benefits of peer teaching on the enhancement of behavioral, pedagogical, and motor performance of secondary students in a physical education class. The purpose of this study was to examine the outcomes experienced by peer-teachers and their peer recipients in the context of a secondary physical education class (Whipp, et al., 2015). Peer teaching can be related to peer mentoring since one individual who in this case has received training, is teaching skills and providing knowledge to a less advanced or skilled peer. This study examined the effects of trained peer teachers on the behavioral and motor performance of their same aged peers in a soccer unit taught using the tactical games approach model.

This study was conducted at a co-education, metropolitan secondary school in Australia. There were 8 physical education classes including of 200 students ranging from the ages of 11 years to 13 years old (Whipp, et al., 2015). From the 8 classes, 4 were selected as the control group and the other four were selected as the experimental group. Depending on class size, 3 or 4 students were asked to be peer teachers. The peer teachers were selected based on four criteria: 1) in the same class as their classmates, 2) proficient in relevant sports skills, 3) good behavior in PE classes, and 4) a strong desire to be a peer-teacher (Whipp, et al., 2015). The peer teachers were also required to have regular attendance in PE as well as take a pre- and post-unit soccer performance test. There were 16 peer teachers chosen for the experimental group and 16 peer teachers chosen for the control group.

All peer teachers were required to teach a 30-minute lesson to a small group of their peers during the 5-week soccer unit (10 lessons total). Prior to their lesson, peer teachers were given the content (maintaining possession of the ball, attacking the goal, defending space, restarting of play, defending the goal) and resources of how to teach each skill in relation to the tactical games approach (Whipp, et al., 2015). The peer teachers in the experimental group received additional training which entailed 3, 20-minute teaching-focused training sessions. These training lessons addressed pedagogical related skills dealing with feedback, motivation, demonstrations, and providing adequate practice time (Whipp, et al., 2015). The final training session allowed the trained peer teachers to practice these skills and their lessons.

The most prevalent themes examined within the study were enjoyment of physical activity, support and autonomy, and motivation. Enjoyment of physical activity was assessed pre- and post-study using the Intrinsic Motivation Inventory (Whipp, et al., 2015). Autonomy support was assessed pre- and post-study using the Learning Climate Questionnaire. Motivation was assessed using a previously adapted assessment called the Sport Motivation Scale to more adequately assess sport in the physical education setting (Whipp, et al., 2015). Small focus group interviews were also conducted after the study was concluded. All lessons taught by peer teachers were recorded in order to analyze and code the use of pedagogical skills within each lesson.

The results indicated significant difference in enjoyment of physical activity, autonomy support, and motivation between the trained peer teacher experimental group and the untrained peer teacher control group (Whipp, et al., 2015). Although the physical activity levels among each of the classes remained relatively consistent, significant

benefits were seen in the areas of enjoyment, support of independence, and motivation to learn motor skills. The peer recipients reported feeling more supported in their ability to independently and correctly perform the skills or strategies being taught. Peer teachers and peer recipients showed an increase of enjoyment of physical activity and motivation in learning new motor skills.

This study reveals the additional benefits beyond physical activity that peer mentoring has to offer. Peer teachers assumed the same roles and responsibilities that mentors would in a physical activity mentoring program. The responsibilities of teaching motor skills, independence, enjoyment of physical activity, and motivation to learn new skills, are all roles a mentor would need to demonstrate within a physical activity mentoring program. It can be concluded that the same benefits experienced by peer teachers and peer recipient would be these experienced by mentors and mentees due to the close relation of responsibilities and program goals.

Although there is a lack of research about mentoring and physical activity for IWD, these studies make it clear that mentoring has the potential for positive effects on IWD activity levels, as well as their social skills, behavior, and self-confidence. Mentoring provides personalized, one-on-one instruction that is often needed for IWD to increase their physical activity levels. Mentoring programs have also been shown to be a positive learning experience for mentors and parents, therefore providing evidence to be beneficial to all individuals involved (Powers et al., 1995; Temple & Stanish, 2011).

A study that further exemplifies the benefits of mentoring on the development of social skills among IWD was completed by Laushey and Heflin (2000). This study examined the enhancement of social skills of kindergarten children with autism through

the training of multiple peers as tutors. Peer tutors could also be considered mentors due to the fact that they are individuals with more competency or experience that then assist another individual in developing skills, knowledge, and confidence in a given area (Axelrod, Campbell, & Holt, 2005). During this study, two kindergarten classes, each containing one child with autism, participated. There were observation and treatment phases. During the observing phase, the researchers simply observed the two children with autism on their social skills of appropriately asking for an object and responding according to the answer given, getting the attention of another, waiting turns, and looking at or in the direction of another person who is speaking (Laushey & Heflin, 2000).

During the treatment phase, all kindergarten students went through training where the researcher talked to the students about how people can be alike and different physically, emotionally, and cognitively. The researchers then discussed with the students the implementation of the “buddy system” that they will be incorporating into their classroom. During this time, students were taught how to stay with, play with, and talk to their buddies (Laushey & Heflin, 2000). The buddy system entailed students being assigned a new buddy every day and during free play time, the students were instructed to play with their buddies. The data were collected through a 10-minute observation period during free play center time every 10 days for a length of 22 sessions (Laushey & Heflin, 2000).

The results of this study revealed that the two students with autism showed a significant improvement in their social skills (Laushey & Heflin, 2000). Not only did the two children with autism benefit from improving their social skills, but the other students in the class were also provided the opportunity to practice their social skills, and

according to the two classroom teachers, they truly enjoyed the buddy system (Laushey & Heflin, 2000). Even at a young age, mentoring has shown to be a promising way to teach individuals with autism appropriate social skills (Laushey & Heflin, 2000). Through mentoring, individuals with and without disabilities can learn how to respectfully and successfully interact with one another.

Summary

These studies demonstrate the impact that physical activity mentoring can have on IWD besides an increase in physical activity (Powers et al., 1995; Temple & Stanish, 2011). By incorporating mentoring into a formal physical activity mentoring program, IWD can learn how to overcome barriers and gain knowledge to lead a more physically active lifestyle. These studies also confirm the additional benefits that can be gained from mentoring such as social skills, self-efficacy, and physical activity knowledge. A physical activity mentoring program is the ideal method in increasing physical activity among IWD while teaching other skills desired to attain a meaningful and healthy life.

Literature for Implementing a Physical Activity Mentoring Program for Individuals with Disabilities

When implementing a physical activity mentoring program, it is essential to take multiple resources and guidelines into consideration to design the appropriate program for the mentors, mentees, and community. Along with the video accompanying this critical analysis project, the literature below should be reviewed prior to designing and implementing a physical activity mentoring program.

The Partners for Youth with Disabilities along with the National Disability Mentoring Council developed and published *The Best Practices Guide in Mentoring Youth with Disabilities* (Axelrod, Campbell, & Holt, 2005). The manual contains

information regarding the best practices of mentoring IWD. This manual gives an introduction containing the history of mentoring as well as research on effective mentoring. Explanations of different mentoring models are provided such as one-on-one, group mentoring, and E-mentoring. Along with the mentoring models, the manual describes different settings in which mentoring can take place such as school-based, community-based, or employee-based. The manual also provides how to develop, sustain, and evaluate a mentoring program through budgeting/funding, legal regulations, and creating evaluations tools. This manual is a very detailed and effective teaching resource about mentoring. When starting a physical activity mentoring program, this manual could be used to help decide the appropriate type of mentoring for an institution, as well as how to gather funds and create sustainability of the program. This resource could be used, along with this critical analysis project, to assist in the development of a physical activity mentoring program for IWD.

Another essential resource for developing and implementing a physical activity mentoring program for IWD is the ICDI organization. This organization is dedicated to providing health-enhancing opportunities for IWD. Some of the first physical activity mentoring programs for IWD were first developed through ICDI. The ICDI program provides guidelines and materials to empower people with disability to lead healthy lifestyles through physical activity, nutrition knowledge and obesity reduction (Make the Commitment Commit to Inclusion, 2017). Since the start of the organization, the ICDI model has shown to be responsive in developing a program that takes into consideration an individual's needs to increase physical activity, develop healthy nutrition habits, and reduce barriers to community participation to create a healthy lifestyle for IWD. By

using the guidelines and resources provided by ICDI, more physical activity mentoring programs for IWD, like the university and community-based programs that already exists through ICDI, can be developed and implemented.

Summary

It is clear that mentoring programs have the potential to increase physical activity for IWD to improve their physical, social, and emotional health. Although there are limited studies that support the benefits of physical activity mentoring programs, the benefits of physical activity and mentoring are well documented. By incorporating mentoring and physical activity together into a physical activity mentoring program, the benefits for IWD are endless. Individuals with disabilities are at an increased risk of developing health-related diseases, emotional health disorders, as well as social isolation (Emerson, 2005; Temple and Stanish, 2011). As concluded within the studies reviewed, physical activity mentoring has proven to be an effective way to help IWD to decrease or avoid disease as well as overcome community and social barriers.

Along with increased health-enhancing physical activity, mentees have the opportunity to benefit in other areas. Mentees can learn social skills, self-advocating skills, and community-based knowledge to be active in different settings. Mentors have also shown to benefit from participating in physical activity mentoring programs. Mentors learn skills and knowledge such as goal-setting, making adaptations, and a better understanding and comfort level towards IWD (Dole, 2014). Individuals with disabilities are included into our society more and more, therefore, society as a whole needs to acquire the skills to facilitate a healthy and successful inclusive environment (Morin et

al., 2013). Through mentoring IWD, mentors can learn the most effective ways to communicate, work with, and interact with IWD which in return can assist society.

With this support, it can be stated that a physical activity mentoring program for IWD will not only benefit an individual's physical, social, and emotional wellbeing, but also assist in overcoming community barriers to achieve an inclusive, understanding, and accepting society.

CHAPTER III
CRITICAL ANALYSIS

Introduction

Physical activity mentoring programs for individuals with disabilities (IWD) provide many benefits for physical, emotional, and social wellbeing. These programs provide IWD the opportunity to increase their health-enhancing physical activity levels in authentic settings with the assistance of a mentor. This equips IWD with the skills needed to be physically active in a variety of community environments such as fitness centers, recreational facilities, parks, and hiking/biking trails. By developing and implementing more physical activity mentoring programs, the health complications that IWD face due to inactivity may decrease.

This chapter outlines guidelines for developing and implementing a physical activity mentoring program on a college or university campus. The guidelines and recommendations were developed from the long-standing Physical Activity Mentoring Program for IWD at the University of Wisconsin-La Crosse (UWL) that has existed for over 10 years as model program for replication. A description of the instructional video that accompanies this critical analysis project is also included in this chapter. Additionally, resources including guideline manuals for physical activity mentoring programs, teaching strategies for mentors, and other physical activity mentoring programs for IWD organizations are provided as references for developing and implementing programs. Lastly, this chapter includes future research questions and potential critical analysis project topics that could be conducted related to physical activity mentoring programs for IWD.

Developing a Physical Activity Mentoring Program for IWD

The development of a campus based physical activity mentoring program for IWD requires extensive and systematic planning. The following guidelines for developing a university-based physical activity mentoring program for IWD mirror the program at UWL.

Gaining Administrative Approval

The first step in developing a program is to gain approval to implement the initiative at the university. This could include meeting with administration and presenting a plan as to how the development and implementation of the program will take place. Incorporating the benefits and positive impacts a program can have on IWD, college students, and the community would be recommended for gaining administration approval. Demonstrating how the university and community would benefit from the program could also be advantageous in gaining the support of administrators. This plan should also include staffing, budgeting, and facilities implications.

Recruiting Mentors and Mentees

After receiving administration approval, the next step is to attract involvement for the program. This includes getting college student mentors and mentees (persons with disabilities) to apply to be participants in the program. It is recommended that mentors be involved on a voluntary basis. However, there are many benefits that mentors will attain, including valuable experience for future career skills, learning to work and interact with IWD, clinical or practicum hours required for course work, as well as having a positive impact on another's life. When advertising the program, it is important to market these benefits to attract involvement. At the university level, the recruitment of

mentors is most effective through emails, social media, word of mouth from professors or other college students, or having a representative of the program inform classes or student clubs and organizations about the program and how to get involved. Within the physical activity mentoring program for IWD at UWL, most of the mentors involved are pursuing careers in fields that work with IWD such as adapted physical education teaching, occupational therapy, physical therapy, exercise science, and special education. However, students from a wide variety of academic majors have had great success as mentors in the program. Depending on the university, it may be beneficial to advertise to specific majors to attract mentors.

The recruitment of mentees is a crucial part of starting and sustaining a physical activity mentoring program for IWD. At UWL, mentees qualify for the program if they have a documented disability. Mentees are often recruited from local school districts by referrals from adapted physical education or special education teachers. Aside from this, word of mouth among parents, social media, human and social service agencies, medical communities, and adult vocational centers have proven successful for recruitment of mentees.

Mentor and Mentee Application Process

Mentors and mentees should be required to fill out an application prior to being accepted into the program. The college student mentor application should gather contact information, skills, experience working with IWD, time availability throughout the week, and interests of the mentor. The mentor application should also request permission to complete a criminal background check and well as an attachment of a current CPR/first

aid certification. A sample of the mentor application that is used at UWL can be seen in Appendix A.

The mentee application should gather information regarding the individual's disability, medical information, age, gender, his/her ability level in various physical activities, as well as the mentees interests. A sample of the mentor application that is used at UWL can be seen in Appendix B. Both the mentor and mentee applications should include a liability and photo release form. The regulations of the university should be used when creating these forms. The application should be made as accessible as possible to give anyone the opportunity to apply. This should include posting the application online, or providing the application in paper. Throughout the application process and entire program, appropriate confidentiality procedures should be implemented.

Community and Campus Resources

Another key step to developing a physical activity mentoring program for IWD is securing community and campus resources for physical activity purposes. Providing mentors and mentees with a variety of opportunities and facilities will increase the enjoyment, motivation, and effectiveness of physical activity. Establishing partnerships with as many community and campus entities as possible is key to the success and sustainability of a program. The program at UWL partners with the local YMCA, the university recreation center, the university exercise and sport science department, a local golf course, as well as other facilities where group outings take place such as the local parks and recreation department, pool, bowling alley, and the university ropes course. Mentors and mentees are also encouraged to partake in activities in the community such

as using local parks and hiking and biking trails. By having a plethora of resources available, more opportunities are provided for mentors and mentees to be active and try new physical activities together. These authentic engagements will hopefully lead to more independent physical activity sessions for IWD.

Developing a Budget

It is feasible to develop and implement a program at very little cost. Some physical activity mentoring programs run without a budget by having volunteers as mentors, having free access to university and community facilities, and planning activities in the community that have no cost such as hiking or bike riding. However, to expand the physical activity opportunities, a budget may need to be developed. This could include a nominal cost for mentees. At UWL, mentees pay \$20 per 8-week session. This \$20 covers any charge of group activities such as bowling, fun runs, or rock climbing, as well as access to any fitness facility on campus and the local YMCA's. In most cases, it does not cost much to implement this type of a program. One of the benefits of running a program on a college campus are the resources that are readily available for little to no cost such as equipment, facilities, and mentors. Although a participation fee is not required, it allows for the availability of more physical activity opportunities.

Planning Program Dates, Group Outings, and Orientation Dates

The final steps in developing a physical activity mentoring program are to plan session dates, group outings, and orientation dates as well as set guidelines and regulations. At UWL, three program sessions take place during the year: spring, summer, and fall. These sessions are purposely aligned with the university academic calendar in

order to have mentors involved. The spring and fall sessions are 8 weeks and align with the university academic calendar. The 8-weeks takes place in the middle of the semester, allowing for 2 to 3 weeks in the beginning of the semester to plan and organize the session and ending the program 1 to 2 weeks before final exam week. During the summer session, the program is 7 weeks. Again, this aligns with the summer school term.

Each week, the mentor and mentee are required to meet for 2 hours. It is strongly recommended that the 2 hours be broken up into at least 2, 1-hour sessions to get the mentee in the habit of being regularly active multiple times per week. The program strongly encourages parents to implement at least two other physical activity sessions each week. The number of mentors and mentees involved in the program will highly depend on the program session and program needs. For example, the summer session could have a lower number of pairs due to mentors going home for the summer and mentee families going on vacation or being involved in summer programs.

Tracking and logging the time that mentor and mentee pairs meet is an essential part to following through with the program requirements. Making sure that mentors and mentees are meeting an appropriate amount of time per week can be tracked and logged using Google Forms. At UWL, mentors are required to submit the dates they met, how long they met, and the activities performed by the end of each week via an online Google form. This Google form is created by the program coordinator and uploaded to the university website, allowing all mentors to have access. This holds mentors accountable for achieving 2 hours of activity per week, as well as allows the program coordinator to

ensure all mentees are getting their 2 hours of physical activity per week. An example of this time and activity log can be seen in Appendix C.

Another recommended feature to include within a program are group physical activity outings. At UWL, four group outings are planned to take place during each session. These group outings typically take place in the community and the activity or focus depends upon the season and available facilities. Some examples of group outings are: hiking, indoor or outdoor ropes course, bowling, sledding, swimming, and walking/jogging events. These group outings allow all mentors and mentees to come together every other week to socialize and get active together in the community. During the final group outing of each session, awards or certificates may be given to all the mentees for successfully participating in physical activity. Mentors may also be given an item to show appreciation for their time and efforts.

The establishment of requirements is also an important part of the program guidelines. Parents, mentors, and mentees should be notified of the requirements before each session. The development of these requirements will assist with liability aspects of the program. Some of the main regulations of the UWL program include transportation, parent involvement, the administration of medication, and supervision. Mentors should never be allowed to provide transportation for mentees. The mentee and/or their family are responsible for their transportation to all program events. Another regulation is that mentee parents may be required to stay for physical activity sessions if their child has challenging behaviors, is very young, does not adjust to new people or situations well, or requires extra supervision. Another regulation is that mentors should never administer medication to the mentees for any reason. In addition, mentors should not give the

mentee any food or beverages that were not provided by a parent. Some individuals with disabilities have strict dietary needs or food allergies. Mentors should be made aware of these situations. The final requirement is that mentors should never leave their mentee unsupervised or let them wander. This is to ensure the safety of the mentee at all times.

Implementing a Physical Activity Mentoring Program for IWD

The following guidelines to implementing a university-based physical activity mentoring program for IWD were adapted from the program at UWL. As with all programs, other agencies may need to implement different policies and procedures.

Matching Mentor and Mentee Pairs

Once the mentors and mentees have been selected for the program, matching mentee and mentor pairs needs to take place. Many factors should be considered when matching pairs such as preference, availability of times, experience, and interests. Within the applications, mentors and mentees could determine their preference of who to work with, such as gender and age, as well as their interests, such as swimming, fitness, or biking. It does not always work out perfectly, but it is important to try to match mentors and mentees as closely as possible based on the preferences. This creates the most potential for a successful environment for the mentee as they will be paired with a mentor of the same interests and availability to ensure consistency.

Mentors and mentees are paired for the entire 8-week session. This allows time for the mentor and mentee to become comfortable with one another and find physical activities they both enjoy. When pairing mentors and mentees, it is also important to consider the parents' physical activity goals for their child. Often, parents have goals for their child or other physical activities they would like to see their child exposed to. For

example, if a mentee was going to be participating in a baseball program, the parent might request a mentor who can work on baseball skills to prepare the mentee. Due to this mindful pairing of mentors and mentees, the pairs often return for multiple semesters, which not only improves physical activity consistency, but also allows for friendship and social skills to develop and flourish.

Mentor Orientation

All mentors should be required to attend the first orientation of the program. After this, only new mentors should be required to attend and a brief meeting with returning mentors should be set up to discuss and reflect on the previous program session. Orientation should consist of information regarding the details of the program including length of the program, hours required per week, facilities and equipment that are available, as well as information regarding disabilities, basic physical activity teaching methods, behavior management strategies, and liability aspects. After this information, mentors will have the opportunity to look through their mentee's file to learn as much about this individual as they can before meeting them. At this time, it is important to remind the mentors about the confidentiality of this information. This also is a good time for the mentors to ask questions pertaining to their mentee and their disability.

It is recommended that two orientation sessions be offered at the beginning of each program session. This ensures all mentors are able to attend. Along with the new mentor orientation, a CPR/First Aid certification class should be made available since all mentors are required to be CPR/First Aid certified. This assists with the safety of the program and makes the parents and guardians of the mentees feel more at ease. At UWL, the university and a local hospital have partnered to offer a one-day CPR/First Aid

certification class at a discounted price. This has been successful to get many of the mentors certified. Reaching out to local community facilities or CPR courses offered on campus is a proactive method to getting mentors certified.

Physical Activity Opportunities Available

The program at UWL depends on the consistent involvement of mentors and mentees as well as the availability of community and campus resources. In order to sustain a physical activity mentoring program for IWD, the program must be affordable, provide many flexible time opportunities, and be enjoyable for both mentors and mentees. At UWL, each mentee pays \$20 to be involved in each program session. This is the only payment that is required for the entire session. This payment assists with group outing expenses, possible fees for community facilities, and a tee-shirt or other appreciation items provided to the mentors.

By establishing partnerships with the YMCA, the local golf course, and the campus recreation center, mentors and mentees can be physically active in a community environment. These partnerships also provide opportunities for many different activities such as swimming, renting bikes, or working out at a fitness facility. At UWL, on Sundays when the program is in session, a 2 hour monitored open gym/swim time is offered. This includes the use of the university pool, gym, and fitness center. At this time, these areas are exclusively reserved for the mentoring program and are supervised by college students in the adapted physical education program. This allows for mentors and mentees to be active in an environment that is safe and comfortable for everyone. Overall, the collaboration with community and university facilities creates opportunities

and sustainability of the program due to the numerous opportunities to discover what physical activities are most enjoyable.

Coordinator Responsibilities

After the program is started each session, the coordinators' job is to monitor participation and be a resource for mentors and mentee families. This includes sending out email reminders about group outings, open gym/swim times, and attracting interest for upcoming program sessions. Program coordinators should be a resource for mentors to get ideas of what to do with their mentees as well as answer any questions parents may have. Depending on the resources available, coordinators may also be responsible for equipment checkout procedures. For example, at UWL mentors and mentees have access to the physical education department equipment. The coordinators are in charge of checking this equipment in and out for the mentors upon request. Overall, once a program is developed and implemented the coordinators' job is to follow up on any questions or concerns, facilitate group outings, and to monitor physical activity hours.

Description of Instructional Video Content

The video produced for this project is entitled *Developing and Implementing a University-Based Physical Activity Mentoring Program for Individuals with Disabilities*. This video provides in-depth guidelines for developing and implementing a program at a university. The first section of the video describes the need for physical activity mentoring programs for IWD. This section includes research that demonstrates the benefits of physical activity and mentoring on the physical and social wellbeing of IWD. The second section of the video describes the recommended steps to developing a program. The guidelines in this section include gaining permission to begin the program,

recruiting mentor and mentee participants, application processing, securing community and campus facility resources, developing a budget, and planning program dates, group outings, and orientations. The third section of the video includes information regarding the implementation of a program. The guidelines in this section include matching mentor and mentee pairs, mentor orientation, facilities, and coordinator responsibilities.

This resource will provide guidelines for developing and implementing a physical activity mentoring program for IWD at any university or other organization. See Appendix D for the video script. The video and this document are posted on the University of Wisconsin-La Crosse Center on Disability Health and Adapted Physical Activity website.

Resources for Developing and Implementing a Physical Activity Mentoring Program

Several resources were used to develop this critical analysis project and instructional video that can assist in the development and implementation of physical activity mentoring programs for IWD.

Websites

1. Commit to Inclusion – I Can Do It, You Can Do It! Mentoring Program:
<http://committoinclusion.org/i-can-do-it-you-can-do-it/>

I Can Do It, You Can Do It (ICDI) is a nationwide mentoring program that advocates for regular physical activity and proper nutrition for children and adults with disabilities. This website can be used as a resource in developing guidelines for a program. The website provides the opportunity to become an ICDI advocate, which has multiple benefits that can assist in developing, implementing, and sustaining a program. These benefits include an ICDI comprehensive implementation program manual, training modules for coordinators, mentors and mentees, ICDI technical assistance and support teams, Presidential Active Lifestyle Awards (PALA+), and access to the ICDI logo and materials.

2. President’s Council on Sports, Fitness, and Nutrition:
<https://www.hhs.gov/fitness/index.html>

The U.S. Department of Health and Human Services founded the President's Council on Sports, Fitness, and Nutrition to aid in the education and empowerment of all Americans to adopt a healthy lifestyle that includes regular physical activity and proper nutrition. The President's Council has created and promoted programs and initiatives such as the I Can Do It, You Can Do It Mentoring Program, that motivate people of all ages, backgrounds, and abilities to be active and eat healthy. This website provides resources about a variety of program options and resources for individuals with disabilities that are supported and promoted by the President's Council.

3. University of Wisconsin-La Crosse – Physical Activity Mentoring Program for Individuals with Disabilities: <https://www.uwlax.edu/physical-activity-mentoring/>

The Center on Disability Health and Adapted Physical Activity at the University of Wisconsin-La Crosse has operated a Physical Activity Mentoring Program for Persons with Disabilities for over 10 years. Although the program website is specific to the program at UWL, it can be used as an example for other beginning programs. The website contains resources including teaching videos for mentors and parents, as well as detailed information on the program including application forms and guidelines for mentors and parents.

Manuals

1. Snowden, R., & Gallagher, M. (2005). The Best Practices Guide in Mentoring Youth with Disabilities: <http://www.pyd.org/editor/images/resources-best-practices-for-mentoring-youth-with-disabilities.pdf.pdf>

The Partners for Youth with Disabilities, Inc. and the National Disability Mentoring Council developed a best practices manual to assist others in starting a physical activity mentoring program for youth with disabilities. This manual provides information regarding mentoring model types, best practices for recruiting, screening, and training of mentors as well as best practices for matching, follow-up, and retention of mentees, starting and sustaining a program, budgeting and funding resources, and the evaluation process of a program. This manual also provides various resources for each of the subcategories listed above.

2. Kraus., L & Jans, L. (2014). Implementation Manual for Guidelines for Disability Inclusion in Physical Activity, Nutrition, and Obesity Programs and Policies. Center on Disability at the Public Health Institute, Oakland, CA.: http://committoinclusion.org/wp-content/uploads/2014/10/Guidelines-Implementations-Manual_final_8MB.pdf

As part of the National Center on Health, Physical Activity, and Disability, the Center on Disability at the Public Health Institute developed guidelines for Disability Inclusion in Physical Activity, Nutrition, and Obesity Program

Initiatives to assist community health programs to be inclusive of individuals with disabilities. The manual outlines guidelines that should be considered when developing and implementing disability inclusion in physical activity, nutrition, and obesity programs and policies. These guidelines include objectives of including people with disabilities, involvement of people with disabilities in development, implementation and evaluation, program accessibility, accommodations for participants with disabilities, outreach and communication to people with disabilities, cost considerations, and feasibility and the evaluation of outcomes. Using this manual when developing a program would provide many resources in assuring the inclusion of all participants.

Book

1. Mushkin, J., Williston, B., Baranowski, M., Lukshaitis, G., & Hengstman, J. (2017). *SPARK Inclusive Physical Education*. San Diego, CA: SPARK Programs.

Assisting mentors in understanding their mentee's disability and the most effective physical activity teaching strategies for those individuals is an essential aspect for success of the mentor and mentee. This book includes a section that breaks down teaching strategies in relation to physical activity and motor skills based on disability category.

Journal Articles

1. Kemeny, E., & Arnhold, R. (2012). "I Can Do It, You Can Do It": Collaborative practice for enhancing physical activity. *Therapeutic Recreation Journal*, 46(4), 268-283.

Kemeny and Arnhold (2012) examined the benefits of a physical activity mentoring program for IWD. The study examined the benefits experienced by mentors and mentees over an 8-week physical activity mentoring program through the I Can Do It, You Can Do It (ICDI). This study investigated the effectiveness of the ICDI physical activity and nutrition mentoring program.

2. Temple, V., & Stanish, H. (2011). The feasibility of using a peer-guided model to enhance participation in community-based physical activity for youth with ID. *Journal of Intellectual Disabilities*, 15(3), 209-217.
doi:10.1177/1744629511422137

Temple and Stanish (2011) examined the feasibility of using a peer-guided model to enhance participation in community-based physical activity for youth with intellectual disabilities. The study was designed to address personal barriers to exercise commonly faced by individuals with ID. The study included "workout buddies" participating in 60 minutes of exercise for 2 days per week, for 15 weeks, similar to the mentoring program guidelines outlined within this project.

Recommendations for Future Research

The development of this project has sparked several research questions for future study due to the minimal research in the area of physical activity mentoring programs for individuals with disabilities. Research has indicated however, that this type of program has shown to benefit both mentors and mentees. In order to further promote and support the development of more programs, more research needs to be conducted. The following research questions could be investigated.

1. What are the long-term physical and social effects of participating in a physical activity mentoring program for both the mentors and mentees?
2. Does a physical activity mentoring program for IWD increase time spent participating in additional health-enhancing physical activities outside the program?
3. How do parent perceptions of physical activity, mentoring, and their child's abilities change after the participation in a physical activity mentoring program for IWD?
4. How do mentor perceptions of IWD change after the participation in a physical activity mentoring program for IWD?
5. Are there significant or additional health improvements seen within mentees after increasing the contact time to 4 hours per week, in comparison to meeting 2 hours per week?
6. Do mentees prefer certain types of physical activities when working with a mentor?

Recommendations for Future Critical Analysis Projects

Along with future research, there is a need for practical and descriptive critical analysis projects on physical activity mentoring programs for IWD. Projects on this topic would serve as valuable resources for others who are developing and implementing programs at various facilities. The following critical analysis projects could be completed to contribute the expansion of more programs.

1. An instructional video for mentors on general and specific teaching strategies when instructing IWD.
2. A manual and instructional video of a collection of social stories about physical activities in the community for mentors to use while preparing mentees for a community outing or activity.
3. A collection of instructional videos of specific health-enhancing physical activities, locomotor skills, and sports skills for mentors to reference when teaching their mentee a new skill.
4. A manual and informational video about the benefits of a physical activity mentoring program for IWD directed towards parents and guardians of IWD.
5. A manual and instructional video demonstrating multiple methods of tracking and logging physical activity of IWD during a physical activity mentoring program.
6. An instructional video describing mentor roles, responsibilities, and expectations, as well as strategies to be an effective mentor in teaching motor and social skills.
7. A manual outlining different types of mentoring and the most effective methods for a physical activity mentoring program for IWD.

References

- Axelrod, E., Campbell, G., & Holt, T. (2005). The best practices guide in mentoring youth with disabilities. *Partners for Youth with Disabilities, Inc.* Retrieved from <http://www.pyd.org/editor/images/resources-best-practices-for-mentoring-youth-with-disabilities.pdf.pdf>
- Columna, L., Dillon, S., Norris, M., Dolphin, M., & McCabe, L. (2017). Parents' perceptions of physical activity experiences for their families and children with visual impairments. *British Journal of Visual Impairment, 35*(2), 88-102. doi:10.1177/0264619617691081
- Cruikshank, W. (Ed.). (1976). *Cerebral palsy: A developmental disability*. Syracuse, NY: Syracuse University Press.
- Dole, B. (2014). *Effects of participation in a physical activity mentoring program on the attitudes of college students towards individuals with disabilities* (Unpublished master's thesis). University of Wisconsin-La Crosse.
- Emerson, E. (2005). Underweight, obesity, and exercise among adults with intellectual disabilities in supported accommodation in Northern England. *Journal of Intellectual Disability Research, 49*(2), 134-143. doi:10.1111/j.1365-2788.2004.00617.x
- Flegal, K., Carroll, M., Ogden, C., & Curtin, L. (2010). Prevalence and trends in obesity among U.S. adults, 1999-2008. *Journal of American Medical Association, 303*(3), 235-241. doi:10.1001/jama.2009.2014
- Huskin, P., Reiser-Robbins, C., & Kwon, S. (2017). Attitudes of undergraduate students toward persons with disabilities: Exploring effects of contact experience on social distance across ten disability types. *Rehabilitation Counseling Bulletin, 1*(11), 1-11. 003435521772760. doi:10.1177/0034355217727600
- Kemeny, E., & Arnhold, R. (2012). "I Can Do It, You Can Do It": Collaborative practice for enhancing physical activity. *Therapeutic Recreation Journal, 46*(4), 268-283.
- Kraus, L., & Jans, L. (2014). Implementation manual for guidelines for disability inclusion in physical activity, nutrition, and obesity programs and policies. Center on Disability at the Public Health Institute, Oakland, CA. Retrieved from http://committoinclusion.org/wp-content/uploads/2014/10/Guidelines-Implementations-Manual_final_8MB.pdf
- Laushey, K., & Heflin, J. (2000). Enhancing social skills of kindergarten children with autism through the training of multiple peers as tutors. *Journal of Autism and Developmental Disorders, 30*(3), 183-193. doi:<https://doi.org/10.1023/A:1005558101038>

- Lieberman, L., Dunn, J., McCubbin, J., & van der Mars, H. (2000). Peer tutors' effects on activity levels of deaf students in inclusive elementary physical education. *Adapted Physical Education Quarterly*, 17(1), 20-38.
- Make the Commitment Commit to Inclusion. (2017). Retrieved from <http://committoinclusion.org/>
- Morin, D., Rivard, M., Crocker, A., Boursier, C., & Caron, J. (2013). Public attitudes towards ID: A multidimensional perspective. *Journal of ID Research*, 57(3), 279-292. doi:10.1111/jir.12008
- Mushkin, J., Williston, B., Baranowski, M., Lukshaitis, G., & Hengstman, J. (2017). SPARK: Inclusive Physical Education. San Diego, CA. SPARK Programs.
- Phillips, A., & Holland, A. (2011). Assessment of objectively measured physical activity levels in individuals with intellectual disabilities with and without Down syndrome. *PLoS ONE*, 6(12), 1-7. doi:10.1371/journal.pone.0028618
- Powers, L., Sowers, J., & Stevens, T. (1995). An exploratory, randomized study of the impact of mentoring on the self-efficacy and community-based knowledge of adolescents with severe physical challenges. *Journal of Rehabilitation*, 61(1), 33. Retrieved from <https://libweb.uwlax.edu/login?url=https://search.proquest.com/docview/1310698944?accountid=9435>
- Rimmer, J., Barth, R., Wang, E., Rauworth, A., & Jurkowski, J. (2004). Physical activity participation among persons with disabilities - barriers and facilitators. *American Journal of Preventive Medicine*, 26(8), 419-425. doi:10.1107/s0108768104030617/bs5012sup1.cif.Rimmer
- Scherer, M. (1988). Assistive device utilization and quality-of-life in adults with spinal cord injuries or cerebral palsy. *Journal of Applied Rehabilitation Counseling*, 19(2), 21-30.
- Snowden, R., & Gallagher, M. (2005). The best practices guide in mentoring youth with disabilities. Retrieved from <http://www.pyd.org/editor/images/resources-best-practices-for-mentoring-youth-with-disabilities.pdf>
- Summers, J. (1986). *The right to grow up: An introduction to adults with developmental disabilities*. Baltimore, MD: Brookes.
- Temple, V., & Stanish, H. (2011). The feasibility of using a peer-guided model to enhance participation in community-based physical activity for youth with ID. *Journal of Intellectual Disabilities*, 15(3), 209-217. doi:10.1177/1744629511422137

- U.S. Department of Health and Human Services, (2011). "Disability and Health." *Healthy People 2020*. Retrieved from www.healthypeople.gov/2020/topics-objectives/topic/disability-and-health/national-snapshot.
- U.S. Department of Education – Office of Special Education and Rehabilitative Services (2006). 34 CFR 300 and 301 - Assistance to States for the Education of Children with Disabilities and Preschool Grants for Children with Disabilities; Final Rule. Part II. Federal Register (Monday, August 14, 2006).
- U.S. Department of Health and Human Services (2016). *What is physical activity?* Retrieved from <https://www.nhlbi.nih.gov/health/health-topics/topics/phys>
- U.S. Department of Health and Human Services (2017). President's Council on Sports, Fitness, and Nutrition. Retrieved from <https://www.hhs.gov/fitness/index.html>
- Varela, R. (1986). Risks, rules, and resources: Self-advocacy and the parameters of decision making. In J. A. Stummers (Ed.), *The right to grow up: An introduction to adults with developmental disabilities*, (245-254). Baltimore, MD: Brookes.
- Whipp, P., Jackson, B., Dimmock, J., & Soh, J. (2015). The effects of formalized and trained non-reciprocal peer teaching on psychosocial, behavioral, pedagogical, and motor learning outcomes in physical education. *Frontiers in Psychology*, 6 (149), 1-13. doi:10.3389/fpsyg.2015.00149

APPENDIX A

UNIVERSITY OF WISCONSIN-LA CROSSE SAMPLE MENTOR APPLICATION

Office Use Only

Name _____

Date Received _____

Session: Fall _____

Spring _____

Summer _____



Department of Exercise and Sport Science

**Physical Activity Mentoring Program
for Individuals with Disabilities**

College Student Mentor Application Packet

Return Completed Application to:

**Center on Disability Health and Adapted Physical Activity
Mentoring Program Coordinator
108 Mitchell Hall
608-785-8695
mentorprogram@uwlax.edu**

Visit at: www.uwlax.edu/sah/ess/mentor

Checklist for Mentors:

Before you submit your application to the Mentoring Program Coordinator, please be sure to check off all items on the list below.

I have read the “Frequently Asked Questions” Q&A content on the Mentor Program

Website: <http://www.uwlax.edu/sah/ess/mentor/html/mentor.htm> and understand what is required as a mentor.

I have filled out and signed the Mentor Application/Release of Liability Form

I have read and signed the Informed Consent Form

I have made a copy of my driver’s license to submit with this application

I have made copies of my CPR and First Aid Certification Cards to submit with this application. If you do not have current certification, the program provides this training for current mentors.

Mentor Application Form
Physical Activity Mentoring Program for Individuals with Disabilities

Information Form and Release of Liability

The University of Wisconsin-La Crosse Physical Activity Mentoring Program for Individuals with Disabilities involves a variety of activities that include warm-ups, games, group and individual involvement, and other physically active experiences. Participation in the program and its activities is at all times an individual choice. There is always the possibility of injury, which must be assumed by each mentor, that he or she could endure at anytime.

The Physical Activity Mentoring Program for Individuals with Disabilities policy requires that every mentor have health/accident insurance coverage, a criminal background check, sex offender check, as well as proof of driver's license (mentors are NOT required to have a car, nor allowed to transport mentees). Furthermore, certain health/medical information must be made known to the director(s) so that they are prepared to help mentors make informed choices about their level of participation during a University of Wisconsin-La Crosse or Community Youth-Service Agency activity program.

The following information will be held in confidence. Please complete the form and return it to, Physical Activity Mentoring Program Coordinator, University of Wisconsin-La Crosse, Department of Exercise and Sport Science, 108 Mitchell Hall, La Crosse, WI 54601. If you have any questions, please contact the Physical Activity Mentoring Program Coordinator at 608-785-8695 or 8690 or via e-mail mentorprogram@uwlax.edu

Applicant Information: By completing and submitting this application you acknowledge and grant permission for us to conduct individual background checks.

1. Name (Please Print): _____

Student ID No. _____

Gender: Male Female (no response) Date of Birth: _____

Phone Number _____ Email _____

Session(s) applying for (check all that apply): Fall _____ Spring _____ Summer _____

2. Do you have health/accident insurance? ___No ___Yes If yes, name, and address of company:

3. Do you have a valid driver's license? ___No ___ Yes If yes, driver's license #, expiration date, and State:

4. Are you First Aid Certified? ___Yes ___No Are you CPR Certified? ___Yes ___No

If yes, please supply a photo *copy* of your certification cards as well as your driver's license for our records

Emergency Information:

Emergency Contact Name: _____

Relationship: _____ Phone: _____
Cell: _____

School Information:

School/College attending: _____ Grade/Year: _____
Major: _____
Minor: _____

Medical Information:

Note: In the interest of trying to provide a successful experience for all mentors you are required to answer the following questions. This information will be kept in confidence by the University of Wisconsin-La Crosse and only shared with your permission.

5. Do you have any limiting physical or health conditions (temporary or permanent)?
___No ___Yes
If yes, identify and explain:

6. Are you currently taking medication (prescribed or otherwise, e.g. cold medicine)?
___No ___Yes
If yes, what are you taking, and what condition is it for

7. Do you have any allergies, reactions to medications, or any other medical limitations?
___No ___Yes
If yes, identify and explain:

8. Do you have any of the following symptoms/conditions? Circle yes or no and describe below.

- | | |
|--|--------|
| A. Any history of heart disease or heart attack? | Yes/No |
| B. High blood pressure or any history of high blood pressure | Yes/No |
| C. Any chest pains/pressure heart palpitations or heart murmurs? | Yes/No |
| D. Ever had a stroke? | Yes/No |
| E. Diabetes? | Yes/No |
| F. A seizure disorder/or ever experienced a seizure? | Yes/No |
| G. Asthma/or experience shortness of breath? | Yes/No |
| H. Do you ever get headaches/light headed/or experience dizziness? | Yes/No |

9. If you circled "yes" to any of the above questions (letter A-H), identify the condition and describe below:

Condition:

Detailed Description:

Condition:

Detailed Description:

Condition:

Detailed Description:

Other concerns/issues we should be aware of if you are accepted into this mentor program?

Release of Liability:

I understand that parts of the Physical Activity Mentoring Program for Individuals with Disabilities can be physically and emotionally demanding. I affirm that my health is good, and that I am under a physician's care for any undisclosed condition that bears upon my fitness or health to participate in any activities presented by the University of Wisconsin-La Crosse Physical Activity Mentoring Program for Individuals with Disabilities. I recognize the inherent risk of injury or disability while participating in the University of Wisconsin-La Crosse's Physical Activity Mentoring Program for Individuals with Disabilities activities. I understand that each mentor must assume the risk of physical injury that could result from any of these activities. I release the University of Wisconsin-La Crosse, the Physical Activity Mentoring Program for Individuals with Disabilities staff, Grant staff, Youth-Service Agency staff, and School District of La Crosse from all liability for any injury or disability that may occur while participating in the University of Wisconsin-La Crosse's Physical Activity Mentoring Program for Individuals with Disabilities activities. I also understand that with this Physical Activity Mentoring Program for Individuals with Disabilities, certain information from programs may be released for educational purposes and demonstrations to improve program development and future replication.

Photo/Media Release:

Please sign if you grant the University of Wisconsin La Crosse the right to use, reproduce, assign and/or distribute photographs, films, videotapes, and sound recordings of yourself for use in materials they may create.

Signature: _____ Date: _____

Informed Consent Form for Physical Activity Mentors

Title of Study: The Effects of Physical Activity Mentoring on Individuals with Disabilities

Researcher: Garth Tymeson, Ph.D., Department of Exercise and Sport Science
University of Wisconsin-La Crosse

PLEASE READ THE FOLLOWING INFORMATION TO BE SURE YOU ARE INFORMED ABOUT THIS RESEARCH STUDY. SIGN THE FORM IF YOU AGREE TO PARTICIPATE. YOUR SIGNATURE ON THE FORM CONFIRMS THAT WE HAVE INFORMED YOU OF THE NATURE AND RISKS OF PARTICIPATION AND THAT YOU HAVE MADE YOUR DECISION FREELY.

Why is this research study being done?

This study is being conducted to:

- Improve the physical well-being of individuals with disabilities
- Increase community-based physical activity opportunities for individuals with disabilities
- Study the impact of physical activity mentors on individuals with disabilities

How many people will take part in the study?

The plan is to have about 25 physical activity mentors take part in the study. These mentors will be college students and others who meet selection and eligibility criteria. Each mentor will work one-on-one with a person who has a disability.

Why are you being asked to take part in this research study?

You are being asked to take part in this study because you responded to a request for volunteers to serve as physical activity mentors for persons with disabilities.

What will happen in this study?

You will be assigned to work with a student with a disability in a physical activity program. Programs could include activities such as a one-on-one fitness program at the YMCA to a youth sports program like soccer or basketball. Prior to working with this person, a staff member for Physical Activity Mentoring Program For Individuals with Disabilities will meet with you to review policies and procedures. Program staff will match you with a mentee and you will be orientated for approximately 2-3 hours about your mentee's needs and disability. Based on your mentee's needs, this training could include information on the use modified equipment, how to address possible behavioral concerns, emergency procedures, and how to adapt physical activities.

During your time in the study, you will be required to document all physical activity in which your mentee (your assigned student with a disability) participates. This will include recording specific physical activities and data such as steps with a pedometer.

How long will I be in the research study?

You will be in the study for at least 8 weeks. This time may be extended if you are interested in serving in more than one mentor experience or session.

Are there reasons I might leave the study early?

Taking part in this research study is your decision. You may decide to stop at any time without penalty. You should tell the researcher if you decide to stop and you will be informed if any additional information is needed from you. In addition, the researchers may stop you from taking part in this study at any time if it is in your best interest, if you do not follow the study procedures, or if the study is stopped.

What are the risks of the study?

There are no significant anticipated risks for you in this study. There could be minor muscle soreness, muscle sprains, or muscle strains. As a physical activity mentor, your participation will involve light to

moderate exercise and other physical activities. However, no risk is anticipated beyond that experienced in normal physical activity.

Are there benefits to taking part in this research study?

The possible benefits of being in this study include increased physical activity while you serve as a physical activity mentor, enhanced understanding of the benefits of physical activity for persons with and without disabilities, and a more in-depth understanding of persons with disabilities. However, the study may not improve your health.

Will I receive payment for participation?

No subjects (mentors or mentees) will be paid for participation in the study or for any type of unauthorized expenses incurred during the study.

What happens if I am injured while in this research study?

In the unlikely event that any injury or illness occurs as a result of this research, the Board of Regents of the University of Wisconsin System, and the University of Wisconsin-La Crosse, their officers, agents, and employees, do not automatically provide reimbursement for medical care or other compensation. I have been informed that payment for treatment of any injury or illness must be provided by me or my third-party payor, such as my health insurer or Medicare. If any injury or illness occurs in the course of research, or for more information, I will notify the investigator in charge. I have been informed that I am not waiving any rights that I may have for injury resulting from negligence of any person or the institution.

For information about policies, the conduct of the study, or the rights of research subjects, please contact Bart Van Voorhis, Ph.D., Chair of the University of Wisconsin-La Crosse Institutional Review Board (IRB) for the Protection of Human Subjects (608-785-6892; vanvoorh.bart@uwlax.edu). The IRB is a group of people who review the research to protect your rights.

What are my rights if I take part in this research study?

Taking part in this research study does not take away any other rights or benefits you might have if you did not take part in the study. Taking part in this study does not give you any special privileges. You will not be penalized in any way if you decide not to take part or if you stop after you start the study. You will be told of important new findings or any changes in the study or procedures that may affect you or your willingness to continue in the study.

What about confidentiality?

Information from this study may be published or presented at professional meetings. However, your name and other identifying information will not be used without your written permission unless the law allows it.

Who can answer my questions?

You may talk with Dr. Garth Tymeson (608-785-5415) or The Program Coordinator (608-785-8695) at any time about questions you have regarding this study.

I HAVE READ ALL THE ABOVE, ASKED QUESTIONS, RECEIVED ANSWERS CONCERNING MY QUESTIONS, AND I WILLINGLY GIVE MY CONSENT TO PARTICIPATE IN THIS STUDY. UPON SIGNING THIS FORM, I WILL RECEIVE A COPY.

(Date)

(Signature of Participant)

(Date)

(Signature of Individual Obtaining Consent)

Physical Activity Mentoring Program for Individuals with Disabilities
Pre-Program Survey of Physical Activity Mentoring Experience

This survey is designed to measure the level of experience you have prior to working with children with disabilities in the mentoring program. Please circle the number that best fits your desired response.

1. Prior to the Physical Activity Mentoring Program, I have worked with kids with disabilities.

1 – Many experiences 2 – Some experience 3 – No experience at all

Please explain:

2. I have spent much time either observing or working with individuals with disabilities.

1 – Much time 2 – Some time 3 – No time at all

Please explain:

3. My comfort level working with children and youth with disabilities is.

1 – Very comfortable 2 – Somewhat comfortable 3 – Not comfortable at all

Please explain:

4. My knowledge of working with children and youth with disabilities is.

1 – Very knowledgeable 2 – Somewhat knowledgeable 3 – Not knowledgeable at all

Please explain your level of knowledge (*i.e., I have taken a class, I have done research on my own, I have a sibling with a disability, I have taken a seminar, I have attended a conference, etc.*):

5. I have completed a course, workshop, and/or seminar in working with individuals with disabilities. Please list what course(s), clinic(s), and/or seminar(s) you have taken?

6. Do you plan on continuing this program for longer than 8 weeks (one session = 8 weeks)
Yes or No Please explain:

7. You will never be asked and/or allowed to drive a mentee, but you may be asked to meet them in a location less than 10 miles from campus. The following question assists us in pairing you with the appropriate mentee.

Do you have a car on campus?
___ Yes ___ No

a. If Yes, would you be willing to drive to a location away from campus to meet?
(ex. Onalaska YMCA, Pettibone Park, etc.)
___ Yes ___ No

8. What physical activity interests do you have? Please indicate your top five physical activity interests below.

___ Aquatics	___ Golf
___ Baseball/Softball	___ Gymnastics
___ Basketball	___ Hockey
___ Bowling	___ Soccer
___ Fitness	___ Volleyball
___ Football	___ Weight Lifting
___ Frisbee Sports (Frisbee Golf, Ultimate, etc.)	___ Other (Please Explain.)

9. What times and days do you have available to participate in this mentorship? Please indicate the times that you are *available*. If you are completely available on a particular day, indicate "open." (Ex: Monday 3:30-10pm)

Monday _____	Friday _____
Tuesday _____	Saturday _____
Wednesday _____	Sunday _____
Thursday _____	

10. Do you have a preference as to working with a child vs. an adult?

APPENDIX B

UNIVERSITY OF WISCONSIN-LA CROSSE SAMPLE MENTEE
APPLICATION

Office Use Only
Name _____
Date Received _____



“Living well with disability through an active and healthy lifestyle”

Physical Activity Mentoring Program for Persons with Disabilities

Parent/Guardian (Mentee) Application Packet

Return completed application to:

**Mentoring Program Coordinator
University of Wisconsin-La Crosse
Department of Exercise and Sport Science
Center on Disability Health and Adapted Physical Activity
108 Mitchell Hall
La Crosse, WI 54601**

**608-785-8695
mentorprogram@uwlax.edu**

Visit at: www.uwlax.edu/sah/ess/mentor

Program Overview for Parents and Participants

The Mentoring Program...

- Is a physical activity program for persons with disabilities, ages 5 and above.
- Provides participants with college student mentors who are physically active, fun, encouraging, motivating, and supportive of persons with disabilities.
- Requires participants to meet with mentors for 2-3 hours per week for a minimum of 8 weeks.
- Requires each mentor to pass a criminal background check and sex offender check, and provide proof of a valid driver's license.
(Mentors are NOT allowed to transport participants).
- Requires mentors to have access to a phone and emergency contact information for the participant.
- Will prepare mentors through a training program on disabilities, behavior management, adaptations, modifications, and CPR/First Aid training.
- Will implement group activity sessions about every two to three weeks.

Please review the questions and answers link of the parent section on our website:

<http://www.uwlax.edu/sah/ess/mentor/html/parent.htm>

Physical Activity Sessions and Locations...

- Are set up accordingly to the schedule you (parent/guardian) and the mentor arrange.
- Could include UW-La Crosse facilities, area parks, youth-service agency programs, after school programs at school sites, at home visits, and/or other physical activity meeting places.
- Must be arranged so that the mentor can meet their participant and/or the participant gets dropped off by a parent/guardian.

Transportation ***VERY IMPORTANT***

You Can't:

- Have your child drive/ride anywhere with their college student mentor under any circumstances.
- Have your mentor travel more than 10 miles from their home to meet the participant.

You Can:

- Have the participant meet their mentor to take public transportation, walk somewhere together, bike somewhere together, rollerblade somewhere

together, and/or have the parent/guardian of the participant drive both the participant and mentor to the physical activity meeting place.

Requirements for all Participants in the Program

Attendance:

- All mentors and participants must meet at least 2 hours per week for a minimum of 8 weeks.
- If you can not make a scheduled time, you must contact your mentor/participant in advance and find a way to make up the time missed to fulfill your minimum physical activity hours each week.

Evaluations/data collection:

- Mentors will collect information every week via weekly forms to evaluate progress, including activity participated in, length of time spent with mentee, location of physical activity, and behavior issues.

Center on Disability Health and Adapted Physical Activity
Physical Activity Mentoring Program for Persons with Disabilities

MENTEE APPLICATION FORM

GENERAL INFORMATION

Participant's Name: _____ Birth Date: _____

Age: _____

Parent/Guardian's Name: _____

Home Address: _____

City/State/Zip: _____

Primary Phone #: _____ Other Phone #: _____

E-mail Address: _____

Is the participant covered by health/accident insurance? (Please circle) Yes No

If yes, provide name, address, and phone # of company:

Participant's Primary Physician: _____ Hospital: _____

Phone: _____

Can we contact the physician above? (Please circle) Yes No

EMERGENCY CONTACT (OTHER THAN PARENT OR GUARDIAN)

Name: _____ Relationship to participant: _____

Address: _____

City/State/Zip: _____

Primary Phone: _____ Other Phone: _____

NOTE: *In the case of an emergency, the Mentoring Program or another agency may notify 911 or another emergency medical service which could result in transportation of the participant for appropriate care.*

SCHOOL INFORMATION (IF COMPLETED, PUT HIGH SCHOOL INFORMATION)

School Building: _____

Placement (Regular or Special Education): _____

School District: _____ City/State: _____

Does student have an IEP? _____ Are physical education goals on IEP? _____

Classroom Teacher: _____ Phone: _____

Physical Education Teacher: _____ Phone: _____

Social Worker: _____ Phone: _____

Can we contact the school personnel listed above? (Please circle) Yes No

DISABILITY (Check all that are applicable)

- ADHD
- Autism ___ Mild ___ Moderate ___ Severe
- Asperger Syndrome
- Cerebral Palsy ___ Mild ___ Moderate ___ Severe
- Cognitive Disability ___ Mild ___ Moderate ___ Severe
- Down Syndrome
- Emotional/Behavior Disorder
- Hearing Impaired: Please indicate level of residual hearing: _____
- Muscular Dystrophy
- Specific Learning Disability – Specify. _____
- Spina Bifida
- Traumatic Brain Injury/Head Injury
- Other Motor Disorder – Specify. _____
- Visual Impairment: Please indicate level of residual vision: _____
- Other condition(s) requiring special care – Specify. _____

Does the participant require any assistive devices, braces, or a wheelchair? No ___ Yes ___

If yes, what: _____

OTHER HEALTH-RELATED/MEDICAL INFORMATION:

Ht: _____ ' _____ " Wt: _____ lbs.

- Asthma/Severe Allergies
- Food allergies – Specify food(s). _____
- Non-food allergy – Specify. _____
- Latex allergy
- Cystic Fibrosis
- Diabetes
- Epilepsy/Seizure Disorder – What type of seizures? How frequent are the seizures? _____
- Gastrointestinal or feeding concerns including special diet and supplements
- Other condition(s) requiring special care – Specify. _____

MEDICATIONS

Is the participant on any medications? No___ Yes___ If yes, for what_____

Additional information that may be helpful about medications for mentors working with the participant:_____

NOTE: No medication will be administered by Mentoring Program personnel.

ADDITIONAL INFORMATION ABOUT PARTICIPANT:

Are there any physical activities that are not recommended by the participant's physician? If yes, please specify. _____

Is there anything that may cause or trigger behavior problems in the participant? Please specify:_____

Are there any signs or symptoms to watch for and what might they indicate? Please specify:_____

GENERAL CHARACTERISTICS OR BEHAVIORS

PLEASE COMPLETE ALL OF THE FOLLOWING QUESTIONS:

- Is there a Behavior Intervention Plan in place at home or at school (on the IEP)?
No___ Yes___ If yes, please attach copy.
- Can we discuss this plan with school personnel? Yes___ No___
- Name: _____ Phone Number: _____
- Any self-injurious behaviors? Yes___ No___ If yes, what:_____
- _____
- Communicates orally? Yes___ No___
- Uses picture icons or other visual supports? Yes ___ No___
- Does the participant wander? Yes___ No___
- Any aggressive behavior? Yes___ No___
- Self-manages frustration and anger? Yes___ No___
- Toilet trained? Yes ___ No___ If no, uses diapers? Yes___ No___

- Does participant indicate a need to use the bathroom? Yes___ No___
- Uses the toilet independently? Yes___ No___
- Changes clothes for swimming independently? Yes___ No___
- How much prompting and assistance needed to participate in activities?
Much___ Some___ None___
- Understands basic directions (left, right, over, under)? Yes ___ No___
- Understands basic number concepts? Yes___ No___
- Tells time and understands the concept of time? Yes___ No___
- Can identify colors? Yes___ No___
- Will indicate a physical activity preference? Yes___ No___
- Will play/interact cooperatively with others? Yes___ No___
- Will play/interact cooperatively in a small group? Yes___ No___
- Will easily adjust to changes in routine or schedule? Yes___ No___

Please provide a brief (5-6 sentences) statement about the participant that describes their interests, strengths, personality, and physical activities they (or you) would like to work on in the program:

RELEASE OF LIABILITY:

I understand that parts of the University of Wisconsin-La Crosse Physical Activity Mentoring Program for Persons with Disabilities (Mentoring Program) can be physically demanding. I affirm that the participant's health is good, and that the participant is under a physician's care for any undisclosed condition that bears upon the fitness or health to participate in any activities presented by the Mentoring Program. I recognize the inherent risk of injury while participating in the Mentoring Program. I understand that each participant must assume the risk of physical injury that could result from any of these activities. I release the Mentoring Program staff and other agencies from all liability for any injury or disability that may occur while participating in the Mentoring Program activities.

Parent or guardian signature (if under 18):

PHOTO/MEDIA RELEASE:

Please sign if you grant the University of Wisconsin-La Crosse the right to use, reproduce, assign and/or distribute photographs, films, videotapes, and sound recordings of yourself or your child for use in educational materials they may create.

Signature of Parent or guardian (if under 18):

APPROVAL TO DISPERSE PERSONAL INFORMATION:

Please sign if you grant the University of Wisconsin-La Crosse the right to release your personal contact information to you or your child's mentor so they can contact you at their discretion to arrange a program schedule that works for the participant and the mentor.

Signature:

Parent/Guardian (if under 18): _____

Date: _____

Informed Consent: Physical Activity Mentoring Program

Title of Study: The Effects of a Physical Activity Mentoring Program for Persons with Disabilities

Researcher: Garth Tymeson, Ph.D., Department of Exercise and Sport Science
University of Wisconsin-La Crosse

PLEASE READ THE FOLLOWING INFORMATION TO BE SURE YOU ARE INFORMED ABOUT THIS RESEARCH STUDY. SIGN THE FORM IF YOU AGREE TO PARTICIPATION FOR YOUR CHILD. YOUR SIGNATURE ON THE FORM CONFIRMS THAT WE HAVE INFORMED YOU OF THE NATURE AND RISKS OF PARTICIPATION, POTENTIAL BENEFITS, AND THAT YOU HAVE MADE YOUR DECISION FREELY.

Why is this research study being done?

This study is being conducted to:

- Improve the health and physical well-being of persons with disabilities
- Increase community-based physical activity participation for persons with disabilities
- Study the impact of physical activity mentors on persons with disabilities

How many people will take part in the study?

The plan is to have about 60 physical activity mentees (persons with disabilities) take part in the program. These participants will be from the La Crosse area. Each mentee (your child) will work one-on-one with a physical activity mentor. These mentors will complete a training program and will have passed a criminal background check.

Why is your child being asked to take part in this research study?

Your child is being asked to take part in this study because we want to determine the impact of a physical activity mentoring program on children and youth with disabilities. You have expressed an interest in having your child/guardian in the program to increase his/her physical activity levels.

What will happen in this study?

Your child will be assigned to a physical activity program facilitated by a trained physical activity mentor. Mentors are adults who have cleared all background checks for participation. Program staff will match your child with a mentor who has been orientated for approximately 2-3 hours about your child's needs and disability. Based on your child's needs, this training could include information on the use modified equipment, how to address possible behavioral concerns, emergency procedures, and how to adapt physical activities for your child. Most of these mentors will be college students, and they will be supervised by project staff. Programs for your child will meet your approval and could include many activities such as a one-on-one fitness program at the YMCA to a youth sports program like soccer or basketball to an instructional swimming program. Prior to working with your child, a staff member for Physical Activity Mentoring Program for Persons with disabilities will meet with you to review policies and procedures of the program.

While in the study, your child's mentor will be required to document all physical activity in which your child participates. This will include recording specific physical activities, amount of physical activity time, and data such as steps with a pedometer. You will also be asked to report the amount and types of physical activity in which your child partakes in prior to and after the mentoring program.

How long will my child be in the research study?

Your child will be in the study for at least 8 weeks.

Are there reasons that my child might leave the study early?

Having your child take part in this research study is your decision. You may decide to stop his/her participation at any time without penalty. You should tell the researcher if you decide to stop your child's participation and you will be informed if any additional information is needed from you. In addition, the researchers may stop your child's participation in this study at any time if it is in his/her best interest, if he/she does not follow the study procedures, or if the study is stopped.

What are the risks of the study?

There are no anticipated risks in this study. Your child's participation will involve light to moderate exercise and other physical activities. However, no risk is anticipated beyond that experienced in normal physical activity such as muscle soreness and fatigue.

Are there benefits to taking part in this research study?

The possible benefits of participating in this study include increased physical activity and improved motor skills, increased participation in community-based physical activity programming, and improved health and physical well-being. However, the study may not improve the health of your child.

Will there be any payment for participation?

No participant will be paid for involvement in the study.

What happens if my child is injured while in this research study?

In the unlikely event that any injury or illness occurs as a result of this research, the Board of Regents of the University of Wisconsin System, and the University of Wisconsin-La Crosse, their officers, agents, and employees, do not automatically provide reimbursement for medical care or other compensation. I have been informed that payment for treatment of any injury or illness must be provided by me or my third-party payor, such as my health insurer or Medicare. If any injury or illness occurs in the course of research, or for more information, I will notify the investigator in charge. I have been informed that I am not waiving any rights that I may have for injury resulting from negligence of any person or the institution.

For information about policies, the conduct of the study, or the rights of research subjects, please contact Bart Van Voorhis, Ph.D., Chair of the University of Wisconsin-La Crosse Institutional Review Board (IRB) for the Protection of Human Subjects (608-785-6892; vanvoorh.bart@uwlax.edu). The IRB is a group of people who review the research to protect the rights of research participants.

What are my rights of my child if he/she takes part in this research study?

Taking part in this research study does not take away any other rights or benefits your child might have if he/she did not take part in the study. Taking part in this study does

not give your child any special privileges. Your child will not be penalized in any way if you decide not to him/her take part or if he/she stops after the start the study. You will be told of important new findings or any changes in the study or procedures that may affect your willingness to have your child continue in the study.

What about confidentiality?

Information from this study may be published or presented at professional meetings. However, your child's name and other identifying information will not be used without your written permission.

Who can answer my questions?

You may talk with Dr. Garth Tymeson (608-785-5415) or The Program Coordinator (608-785-8695 or 8690) at any time about questions you have regarding this study.

I HAVE READ ALL THE ABOVE, ASKED QUESTIONS, RECEIVED ANSWERS CONCERNING MY QUESTIONS, AND I WILLINGLY GIVE MY CONSENT TO PARTICIPATE IN THIS STUDY. UPON SIGNING THIS FORM, I WILL RECEIVE A COPY.

(Date)

(Signature of Parent/Guardian)

(Date)

(Signature of Individual Obtaining Consent)

University of Wisconsin-La Crosse

Physical Activity Mentoring Program for Persons with Disabilities

Medical Clearance Form-Health Approval to Participate Statement

On this date, I examined _____
Print Name of Participant

On the basis of the examination and medical history furnished to me, this individual may participate in the Physical Activity Mentoring Program for Persons with Disabilities fully or may participate with the limitations noted below.

_____ **Cleared; with no physical activity limitations.**

_____ **Cleared; with the following physical activity limitations:**

_____ **Not Cleared;** for the following reason(s):

Signature of Licensed Health Care Provider

Date of Examination

Printed Name of Licensed Health Care Provider

Circle: MD/DO/PA/CNP/FNP

Place of Employment

Telephone Number

Participant or Parent/Guardian sign here:

Participant (or Parent/Guardian if under 18) Signature

Date

Return to: Physical Activity Mentoring Program Coordinator
UW-La Crosse – 108 Mitchell Hall
La Crosse, WI 54601
608-785-8695 (mentorprogram@uwlax.edu)

APPENDIX C
PHYSICAL ACTIVITY TIME LOG

Weekly Physical Activity Mentoring Program Log

This form is due each week by Saturday at 5pm.

* Required

What is your name? *

What is your mentee's name? *

What was the date of your first session? *

How long was your first session? *

 : :

What type(s) of activities were performed during the first session? *

What was the date of your second session?

How long was your second session?

 : :

How many steps were taken during the second session?

What type(s) of activities were performed during the second session?

Submit

Never submit passwords through Google Forms.

APPENDIX D
INSTRUCTIONAL VIDEO SCRIPT

Time	Dialogue	Video
0:00 – 0:05 (5 sec)	Developing and Implementing a University-Based Physical Activity Mentoring Program for Individuals with Disabilities	Text on screen of title of project
0:05 – 0:10 (5 sec)		Video clip group outing
0:10 – 0:20 (10 sec)		Video clip of one-on-one mentor/mentee session
0:20 – 0:25 (5 sec)		Video clip group outing
0:25 – 0:35 (10 sec)		Video clip of one-on-one mentor/mentee session
0:35 – 1:10 (35 sec)	Hi, my name is Maggie Griggs and I am a graduate student in adapted physical education at the University of Wisconsin-La Crosse. What you just saw was an assortment of health-enhancing physical activities with mentors and mentees during a physical activity mentoring program for individuals with disabilities. A physical activity mentoring program like the one highlighted in this video provides opportunities to participate in health-enhancing physical activity, as well as to develop motor, cognitive, and social skills to help persons be physically active for a life time.	Scene of myself in professional setting
1:10 – 2:10 (1:00 min)	The purpose of this video is to help others design and implement a physical activity mentoring program for individuals with disabilities in a college or university setting. The intended audience for this video includes any professionals looking to start a physical activity mentoring program for individuals with disabilities in their community. Although this video was designed to assist with starting a program at the university level, the guidelines and recommendations could be used for programing at other levels or for other agencies. For example, with some guideline adjustments, this program	Video and pictures of mentors and mentees - clips emphasizing age range of mentees

	<p>could easily be implemented at the high school level. A physical activity mentoring program will look different depending on the age of mentors and mentees, the setting of the program, the activities presented, support levels needed by mentees, and program specific goals. However, the general procedures and recommendations in this video can be used when developing most programs. This video will highlight a longstanding mentoring program at the University of Wisconsin-La Crosse.</p>	
<p>2:10 – 3:10 (1:00 min)</p>	<p>This video is divided into three chapters. Chapter I presents information regarding the need and importance of a physical activity mentoring program for individuals with disabilities. Chapter II introduces the steps in the development of a program for individuals with disabilities including aspects such as attracting mentor and mentee involvement, application processes, as well as program guidelines. Chapter III discusses the implementations of the program such as orientations, planning sessions, and matching mentor and mentee pairs. During this video, it is important to keep in mind the definition of a mentor and a mentee in relation to the topic of this video. A mentor is defined as an individual with more competency or experience who assists an individual with a disability in developing skills, knowledge, confidence, and motivation to achieve a higher level health-enhancing physical activity. The term mentee is used as an individual with a disability of any age, who requires assistance in increasing their physical activity levels or in gaining the knowledge and skills required to be physically active in the community.</p>	<p>Text on screen outlining all three chapters</p> <p>Definitions on screen</p>
<p>3:10 - 3:15 (5 sec)</p>	<p style="text-align: center;">Chapter 1 The Need for Physical Activity Mentoring Programs for Individuals with Disabilities</p>	<p>Chapter title on screen</p>
<p>3:15 – 3:45 (30 sec)</p>	<p>Physical activity mentoring programs for individuals with disabilities provide many benefits to enhance physical, emotional, and social wellbeing. Research has shown significant deficiencies in physical activity levels among</p>	<p>Scene of myself in fitness environment</p>

	<p>individuals with disabilities at all ages. Low physical activity levels among this population can be attributed to a multitude of factors such as lack of experience and knowledge in physical activity, accessibility to local health and wellness centers, and inability to perform exercise independently.</p>	
<p>3:45 – 4:20 (35 sec)</p>	<p>Phillips and Holland examined the physical activity levels of individuals with a disability and discovered that this population is at a high risk for developing diseases that are associated with physical inactivity. About 58% of adults with disabilities are obese. Approximately 50% of all adults with disability get no aerobic physical activity, and youth with disabilities are four times less physically active than their nondisabled peers. Therefore, many individuals with disabilities are at risk of developing diseases associated with physical inactivity.</p>	<p>Picture of journal article</p> <p>Text on screen of statistics in relation to health complications, activity levels, and obesity rates among individuals with disabilities</p>
<p>4:20 – 5:30 (1:10 min)</p>	<p>Temple and Stanish believe this increase in obesity and other health risks among individuals with disabilities may correlate with physical inactivity due to lack of knowledge and experience in physical activity. Barriers such as accessibility as well as communication complications and negative societal perceptions create a need for dependence and vulnerability among individuals with disabilities. Skills such as self-efficacy, community-based knowledge, and advocating for oneself, are essential for an individual to achieve independence. Gaining as much independence as possible is a goal for all individuals with disabilities and a physical activity mentoring program can assist in the achievement of that goal. With the support of a physical activity mentor, individuals with disabilities can focus on physical activity goals, explore health enhancing physical activity options, and discover ways to overcome barriers that may cause physical inactivity. With planned assistance, individuals with disabilities can achieve health-enhancing physical activity as well as overcome barriers to be physically active for a lifetime.</p>	<p>Picture of article</p> <p>Clip of mentors and mentees in community based setting</p>
<p>5:30 – 6:15 (45 sec)</p>	<p>Kemeny and Arnhold examined the effects of an 8-week physical activity and nutrition mentoring</p>	<p>Picture of article</p>

	<p>program for individuals with disabilities. Over 3 years, 9 universities were examined for their community-based physical activity mentoring programs. The University of Wisconsin-La Crosse was one of the program in this study. Findings suggested that not only did mentors and mentees benefit from the program, but community facilities also become more aware and effective in implementing improvements in accommodations for individuals with disabilities. Mentors showed significant improvement in the knowledge and application of mentoring behaviors, as well as improved perceptions and manners towards individuals with disabilities. However, mentees gained the most benefits. Over 80% of mentees reported feeling healthier and stronger. 90% of mentees reported learning new physical activity skills that they could transfer into their everyday life to help live a more health-enhancing lifestyle.</p>	<p>Mentors and mentees being physically active at a university</p> <p>Statistics on screen</p>
<p>6:15 – 7:15 (1:00 min)</p>	<p>Although advances are being made for individuals with disabilities, there is still more that needs to be done in terms of health equality and specifically physical activity opportunities. Mentoring has been shown to be a positive learning experience for mentors and mentees and has been positively received by parents. By providing support and specific instruction through a physical activity mentoring program, individuals with disabilities can build the skills, confidence, and self-efficacy to be physically active. Along with increased physical activity, mentoring provides an opportunity for the development of other skills needed to achieve a lifetime of physical activity such as self-advocating, social skills, and physical activity related knowledge. As shown in research and current programs, physical activity mentoring programs can provide benefits for everyone involved. However, aside from the research and statistics, mentors and mentees can testify for the benefits they have personally gained from being involved in the physical activity mentoring program at the University of Wisconsin-La Crosse.</p>	<p>Mentors and mentees being physically active in a variety of settings</p>
<p>7:15 – 8:30 (1:15 min)</p>	<p>Interview with Marlis O’Brien (parent)</p>	<p>Clips of interviews with mentors and mentees</p>

8:30 – 9:00 (30 sec)	Interview with Jenny Levendoski (parent)	
9:00 – 9:30 (30 sec)	Interview with Ally Kellerman (mentor)	
9:30 – 10:00 (30 sec)	Interview with Emma Dodson (mentor)	
10:00 – 10:15 (15 sec)	Not only does the research support the benefits of a mentoring program, but the mentors, mentees, and parents can confirm the positive impact it has had on their lives. In the next chapter the steps to developing a physical activity mentoring program for individuals with disabilities will be presented.	Scene of myself in professional setting
	Chapter 2 Developing of a Physical Activity Mentoring Program for Individuals with Disabilities	Chapter title on screen
10:15 – 10:30 (15 sec)	There are multiple steps and considerations when beginning a physical activity mentoring program for individuals with disabilities at a university. Plus, there are many advantages of developing a program at a college such as the access to facilities, availability of equipment, and many students who are looking for volunteer opportunities.	Scene of myself sitting in professional environment
10:30 – 12:10 (1:40 min)	The first step is gaining approval to implement a program at the university. This could include meeting with administration and presenting a plan as to how the development and implementation of the program will take place. After receiving administration approval, the next step is to attract involvement for the program. This includes getting mentors and mentees to apply to be participants in the program. It is recommended that mentors be involved on a voluntary basis. However, there are many benefits that mentors will attain, including valuable experience for future career skills, learning to work and interact with individuals with disabilities, clinical or practicum hours required for course work, as well as having a positive impact on another's life. When advertising the program, it is important to market these benefits to attract	Picture of diagram of each step – upon each step diagram will be shown with each step added as discussed throughout video

	<p>involvement. At the university level, the recruitment of mentors is most effective through emails, social media, word of mouth from professors or other college students, or having a representative of the program inform classes or clubs about the program and how to get involved. Within the physical activity mentoring program for individuals with disabilities at the University of Wisconsin-La Crosse, most of the mentors involved are pursuing careers in fields that work with individuals with disabilities such as physical education teaching, occupational therapy, physical therapy, exercise science, and special education. However, students from a wide variety of majors have had great success in the program and return year after year. Depending on the university, it may be beneficial to advertise to specific majors to attract mentors.</p>	<p>Video clip of mentors and mentees being physically active</p>
<p>12:10 – 12:45 (35 sec)</p>	<p>The recruitment of mentees is a crucial part of starting and sustaining a physical activity mentoring program for individuals with disabilities. At the University of Wisconsin-La Crosse, mentees qualify to be in the program if they have a documented disability. Mentees are often recruited from local school districts by the referral of an adapted physical education or special education teacher. Aside from this, word of mouth among parents, social media, human and social service agencies, medical communities and adult vocational centers have proven successful in promoting the program.</p>	<p>Picture of mentees being active</p>
		<p>Picture of recruiting methods</p>
<p>12:45 – 13:50 (1:05 min)</p>	<p>After recruiting mentors and mentees, the application process begins. Potential mentors and mentees should be required to fill out an application to be involved in the program. The mentor application should gather contact information, skills, experience working with individuals with disabilities, availability throughout the week, and interests of the mentor. The mentor application should also request permission to complete a criminal background check and well as an attachment of a current CPR/first aid certification. The mentee application should gather information regarding the individual’s disability, medical information, his/her ability level, as well as the</p>	<p>Video clip of individuals filling out application in pencil and online</p>
		<p>Pictures of mentor and mentee forms</p>

	<p>mentees interests. Appropriate confidentiality procedures should be used throughout the application process. Both the mentor and mentee applications should include a liability and photo release form. The regulations of the university should be used when creating these forms. The application should be made as accessible as possible to give anyone the opportunity to apply. This should include posting the application online, or providing the application in paper.</p>	<p>Screenshots of UWL mentoring program website</p>
<p>13:50 – 14:50 (1:00 min)</p>	<p>Another key step to start a physical activity mentoring program for individuals with disabilities is securing community and campus resources for physical activity purposes. Providing mentors and mentees with a variety of opportunities and facilities, will increase the enjoyment and effectiveness of physical activity. Gaining partnerships with as many community and campus entities as possible is key to the success and sustainability of a program. The program at the University of Wisconsin-La Crosse is partnered with the local YMCA, the campus recreation center, a local golf course, as well as other facilities where group outings take place such as the local pool, bowling alley, and the campus ropes course. Mentors and mentees are also encouraged to partake in activities in the community such as using local parks and hiking and biking trails. By having a plethora of resources available, more opportunities are provided for mentors and mentees to be active and try new physical activities together.</p>	<p>Video clips of mentors and mentees being active in a variety of facilities</p>
<p>14:50 – 15:50 (1:00 min)</p>	<p>The next step is to develop a budget. Some physical activity mentoring programs run without a budget by having volunteers as mentors, having free access to university and community facilities, and planning activities in the community that have no cost such as hiking or bike riding. However, to plan group activities or for possible facility charges, a budget may need to be developed. At the University of Wisconsin-La Crosse, mentees pay \$20 per 8-week session they participate in. This \$20 covers any charge of group activities such as bowling, fun runs, or rock climbing, as well as access to any fitness facility on campus and the local YMCA's. All of</p>	<p>Pictures/videos of various group outings – bowling/Rockwall/Rope course</p>

	<p>these budget aspects will depend on your specific situation. In most cases, it does not cost much to implement this type of a program. One of the benefits of running a program on a college campus is the resources that are readily available for little to no cost such as equipment, facilities, and mentors. Although a participation fee is not required, it allows for the availability of more physical activity opportunities.</p>	
<p>15:50 – 17:00 (1:10 min)</p>	<p>The final step in developing a physical activity mentoring program is to plan session dates, group outings, and orientation dates as well as set guidelines and regulations. At the University of Wisconsin-La Crosse, 3 program sessions take place during the year: 1 in the spring, 1 in the summer, and 1 in the fall. The spring and fall sessions are 8 weeks long and align with the university academic calendar. The 8-weeks takes place in the middle of the semester, allowing for 2 to 3 weeks in the beginning of the semester to plan and organize the session and ending the program 1 to 2 weeks before final exam week. During the summer session, the program is 7 weeks long. Again, this aligns with the summer school term. Each week, the mentor and mentee are required to meet for 2 hours. This 2-hour period can be broken up in any way that the mentor and mentee agree upon. It is strongly recommended that the 2 hours be broken up into at least 2, 1-hour sessions to get the mentee in the habit of being regularly active multiple times per week. The number of mentors and mentees involved in the program will highly depend on the program session and program needs. During the summer, numbers may decrease, but could spike back up in the fall and spring.</p>	<p>Text on screen outlining sessions and hours</p> <p>Video Clip of a group outing</p>
<p>17:00 – 17:40 (40 sec)</p>	<p>Making sure that mentors and mentees are meeting an appropriate amount of time per week can be tracked and logged using Google Forms. At the University of Wisconsin-La Crosse, mentors are required to submit the dates they met, how long they met for, and the activities performed at the end of each week via a Google form. This Google form is created by the program coordinator and uploaded to the university website, allowing all mentors to</p>	<p>Video clip of mentor filling out and submitting Google Form log</p> <p>Screenshot of Goggle Form log</p>

	<p>have access. This holds mentors accountable for achieving 2 hours of activity per week as well as allows the program coordinator to ensure all mentees are getting their two hours of physical activity per week.</p>	
<p>17:40 – 18:30 (50 sec)</p>	<p>A popular feature of the University of Wisconsin-La Crosse program are the group physical activity outings. During each session, 4 group outings are planned. These group outings typically take place in the community and the activity or focus depends upon the season and available facilities. Some examples of group outings that take place at UWL are: hiking, ropes course, bowling, swimming, and walking/jogging events. These group outings allow for all mentors and mentees to come together every other week to socialize and get active together in the community. During the final group outing, awards or certificates may be given to all the mentees for successfully participating in physical activity. Mentors may also be given an item to show appreciation for their donated time.</p>	<p>Images and video of different group outings</p> <p>Pictures of award ceremonies</p>
<p>18:30 – 19:40 (1:10 min)</p>	<p>The establishment of requirements is also an important part of the program guidelines. Parents, mentors, and mentees should be notified of the requirements before each session. The development of these requirements will assist covering the liability of the program. Some of the main regulations of the University of Wisconsin-La Crosse include transportation, parent involvement, the administrations of medication, and supervision. Mentors should never be allowed to provide transportation for the mentee. The mentee and/or their family are responsible for their transportation to all program events. Another regulation is that mentee parents may be required to stay for sessions throughout the week if their child has challenging behaviors, is very young, does not adjust to new people or situations well, or requires extra supervision. Another regulation is that mentors should never administer medication or give the mentee food that was not provided by a parent. Some individuals with disabilities have strict dietary needs or food allergies, that the mentor should be made aware of. The final requirement is that</p>	<p>Recommended regulations on screen</p>

<p>19:40 – 20:00 (20 sec)</p>	<p>mentors should never leave their mentee unsupervised or let them wander. This is to ensure the safety of the mentee at all times.</p> <p>Starting a physical activity mentoring program for individuals with disabilities has shown to benefit everyone who is involved. Developing a program at the university level is optimal due to the resources readily available. By developing a program, physical activity and community involvement can be increased by all involved in the program.</p>	<p>Video of myself in profession setting</p>
<p>20:00 – 20:20 (20 sec)</p>	<p style="text-align: center;">Chapter 3 Implementing a Physical Activity Mentoring Program for Individuals with Disabilities</p>	<p>Chapter title on screen</p>
<p>20:20 – 21:20 (1 min)</p>	<p>The following information consists of suggestions or recommendations based on the physical activity mentoring program for individuals with disabilities at the University of Wisconsin-La Crosse. This program has been in place for over 10 years and has proven to be a successful model that could be replicated by other to implement a physical activity mentoring programs for individuals with disabilities.</p>	<p>Scene of myself sitting in professional setting</p>
<p>20:20 – 21:20 (1 min)</p>	<p>At the end of each session, mentors and mentees should be contacted about their participation in the next upcoming session. Due to schedules changing or other commitments, some mentors and mentees will decide not to participate in the upcoming session. When this happens, new mentors and mentees can be selected from a waiting list or new applications can be accepted. All mentor and mentee applications should be reviewed. The revision of applications and updating of participation lists is an on-going process. When reviewing the mentor applications, it is important to consider their experience, and availability to ensure their commitment to the program and their mentee. The more experienced and available the mentor, the more successful the mentee tends to be with physical activity consistency. When reviewing a mentee application, it is important to consider the</p>	<p>Mentors and mentees being physically active together</p> <p>Diagram of process</p> <p>Screenshots of mentor and mentee applications</p>

<p>21:20 – 22:30 (1:10 min)</p>	<p>individual’s disability as well as their ability level to determine the mentor they may need. The mentees with more severe disabilities may need a mentor with more experience or possibly two mentors to fulfil their needs.</p> <p>This leads to the topic of matching the mentor and mentee pairs. Once you have selected your mentors and mentees for the program, you then need to match the pairs based on preference, availability times, interests, and other factors. Within the applications, mentors and mentees could determine their preference of who to work with, such as gender and age, as well as their interests, such as swimming, jogging or biking. Although it doesn’t always work out perfectly, it is important to try to match mentors and mentees as closely as possible based on these preferences. This creates the most potential for a successful environment for the mentee as they will be paired with a mentor of the same interests and availability to ensure consistency. Mentors and mentees are paired together for the entire 8-week session. This allows time for the mentor and mentee to become comfortable with one another and find physical activities they like to do. Due to this mindful pairing of mentors and mentees, we often see the pairs return for multiple semesters, which not only improves physical activity levels, but also allows for friendship and social skills to develop and flourish.</p>	<p>Pictures and videos of mentor/mentee pairs</p>
<p>22:30 – 24:15 (1:45 min)</p>	<p>After getting the mentors and mentees paired, an orientation for mentors needs to take place. All mentors should be required to attend the first orientation of your program. After this, only new mentors should be required to attend and a brief meeting with returning mentors should be set up to discuss and reflect on the previous program session. Orientation should consist of information regarding the details of the program including the length of the program, hours required per week, facilities that are available, as well as information regarding disabilities, basic physical activity teaching and behavior management strategies, and liability rules.</p>	<p>Video clip of program coordinators running an orientation</p> <p>coordinator discussing mentee file</p>

<p>24:15 – 26:00 (1:45 min)</p>	<p>After this information, mentors will have the opportunity to look through their mentee’s file learn as much about this individual as they can before meeting them. At this time, it is important to remind the mentors about the confidentiality of this information. This also is a good time for the mentors to ask questions pertaining to their mentee and their disability. It is recommended that two orientation sessions be offered at the beginning of each program session. This ensure all mentors are able to attend. Along with the new mentor orientation, a CPR certification class should be made available as all mentors are required to be CPR certified. This assists with the liability of the program and makes the parents and guardians of the mentees feel more at ease. At the University of Wisconsin-La Crosse, the university and a local hospital have partnered to offer a one-day CPR certification class at a discounted price. This has been successful to get many of the mentors certified. Reaching out to local facilities or CPR courses offered on campus could be a proactive method to getting mentors certified.</p> <p>The program at the University of Wisconsin-La Crosse depends on the consistent involvement of mentors and mentees as well as the consistency of community and campus resources. In order to sustain a physical activity mentoring program for individuals with disabilities, the program must be affordable, provide many flexible time opportunities, and be enjoyable for both the mentor and mentee. At the University of Wisconsin-La Crosse, each mentee pays \$20 to be involved in each program session. This is the only payment that is required for the entire session. This payment assists with group outing expenses, possible fees for the access of community facilities, and a tee-shirt as well as other appreciation items provided to the mentors. By establishing partnerships with the YMCA, the local golf course, and the campus recreation center, mentors and mentees can be physically active in a community environment. These partnerships also provide the opportunity for many different activities such as swimming, renting bikes, or working out at a fitness facility. At the</p>	<p>Video clip of CPR class</p> <p>Picture of mentors and mentee pairs</p> <p>Pictures and video of group outings</p>
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	<p>University of Wisconsin-La Crosse, during Sunday when the program is in session, a 2 hour monitored open gym/swim time is offered. This includes the use of the university pool, gym, and fitness center. At this time, these areas are completely reserved for the mentoring program and are supervised by two college students in the adapted physical education program. This allows for mentors and mentees to be active in an environment that is safe and comfortable for everyone. Overall, the consistency of communication with community and university facilities will create enjoyment and sustainability of the program due to the numerous opportunities to discover what physical activities one enjoys the most.</p>	<p>Video clips of mentors and mentees in several community facilities</p>
<p>26:00 – 26:30 (30 sec)</p>	<p>Once the program is up and running, the coordinators job is to simply monitor and be a resource for mentors and mentees. This includes sending out email reminders about group outings, open gym/swim times, as well as interest in upcoming program sessions. Program coordinators should be a resource for mentors to get ideas of what to do with their mentees as well as to answer any questions parents may have. Overall, once a program is developed and implemented the coordinators’ job is to follow up with any questions or concerns, facilitate group outings, and to monitor physical activity hours.</p>	<p>Program coordinator assisting mentor in teaching mentee</p>
<p>26:30 – 27:20 (50 sec)</p>	<p style="text-align: center;">Summary</p> <p>It is clear that, more health enhancing physical activity opportunities need to be provided for individuals with disabilities of all ages. Physical activity mentoring programs can be effective and efficient approach to help individuals with disabilities develop the skills, knowledge, and motivation needed to be physically active. This video provides the information and recommended guidelines to develop and implement a physical activity mentoring program at a college or university. Other agencies may use and modify this information to meet their specific program needs.</p>	<p>Scene of myself in a professional setting</p>

	<p>If you have any questions about developing or implementing a physical activity mentoring program please contact the program staff at the University of Wisconsin-La Crosse, or myself. Thank you for watching this video.</p>	<p>Dr. T and my contact information on screen.</p>
<p>27:20 – 27:23 (3 sec)</p>	<p>Thank you slide for project chairs</p>	<p>Text on screen</p>
<p>27:23 – 27:26 (3 sec)</p>	<p>Thank you slide for interview participants</p>	<p>Text on screen</p>
<p>27:26 – 27:30 (4 sec)</p>	<p>Thank you slide for mentors, mentees, and mentee families for involvement in UWL Physical Activity Mentoring Program for Individuals with Disabilities.</p>	<p>Text on screen</p>