Wheelchair tennis – Croatian experiences

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ABSTRACT
The research study included 15 participants from 22 to 50 years of age. Data collection involved the use of a semi-structured interview, with qualitative analysis used in the data processing, while for the organization of the data collected the method of open coding was used. According to the results, Difficulties encountered by tennis players with physical disabilities are found to be: spatial barriers, financial difficulties and categorization of sportsmen, namely tennis players. It is important for society as a whole to invest more in the development of this sport and to continue conducting research on wheelchair tennis.

INTRODUCTION
Inclusion in sport is one of the possibilities for people with disabilities to be active and to express their talents and abilities; Sport develops fun, fellowship - it thrills, encourages and helps gain confidence; A small number of activities for people with disabilities require adaptation (Petrinovi Zekan at al., 2011). It is estimated that in the general population, the range of people with disabilities varies between 8-10%, which is around 580 million disabled people in the world and in Croatia too. (Leutar et al., 2015). In Croatia the social policy for people with disabilities is based on contemporary international standards, including the fundamental principles of human rights such as the principle of non-discrimination, the principle of interdependence and the indivisibility of all human rights; it is therefore imperative to make full civil and political as well as social, cultural and economic rights achievable for people with disabilities. (Convention on the Rights of Persons with Disabilities (2007) and National Strategy of Uniform Policy for People with Disabilities; Council of Europe’s Action Plan; the Standard Rules on the Equalization of Opportunities for People with Disabilities...).
Wheelchair tennis in Croatia began to develop in 1990 at the instigation of a few amateurs - enthusiasts. A more serious approach and development began only in 1996 after the involvement of professional staff, which was to increase the quality of training (Lugonji, 2011) Every day more and more people with disabilities play tennis. Wheelchair tennis today is among the most popular of sports played in wheelchairs. The reason is that a person in a wheelchair can play tennis with people without disabilities (Gilbert & Jamison, 1994; Diaper and Goosey-Tolfrey, 2009).
In tennis, people with disabilities play by the same rules as people without disabilities - the rules specified by the international tennis federation - with just one difference: the ball can bounce twice before a person in a wheelchair returns it, and the ball can bounce on the ground just once before a person without disabilities returns it (Vrdoljak, 2013; Filipic & Filipic, 2009).
There is a complete lack of research on the practice of tennis by people with disabilities in Croatia, which were the difficulties for exploring the experiences of people with disabilities engaged in tennis.

OBJECTIVES
The aim of this research is to gain insight into the opinions and experiences of people in wheelchairs about their practice of tennis as a sport activity for people with disabilities.

Accordingly, the following research questions were set: What difficulties do people with disabilities face when practicing tennis?

METHODOLOGY
Design
Data were collected by semi-structured interview. The interview consisted of questions related to various general characteristics, such as age, sex or marital status, and questions based on the pursuit of tennis advantage, problems and prospects for the future. The interview consisted of a total of five questions. Interviews were conducted by the authors of this paper. We found the participants with help of the Croatian Association of Wheelchair Tennis, which provided information about the club where people with physical disabilities train. Before the research, the researchers explained to research participants the aim of the research, requested voluntary consent to participate in the research and informed participants about anonymity and confidentiality of the shared information. It was emphasized to each participant that his responses would be combined with the responses of other participants in order to analyze the phenomenon itself, because there could be no accurate nor incorrect answers, only their subjective assessment of the subject. The average duration of the interview was 30 minutes.

Participants
The data for the survey were collected and the research was carried out, as already mentioned, with the Croatian Association of Wheelchair Tennis Players. The study included 15 participants in Zagreb, Croatia, in the summer of 2014. It was not a random sample because the population selected for

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interviewing was exclusively made up of people with disabilities engaged in tennis. All 15 participants were male. The age of participants ranged from 22-50 years of age. Most often they had finished high school and one person had finished college. Some participants were disabled in the Homeland War of the 1990s, while most persons with paraplegia had been so affected since their childhood.

Data processing
To process the data, the process of qualitative analysis was used and for the organization of the collected data the method of open coding was used. In accordance with this method, the first step in the processing of data was the editing of empirical material by marking sentences and parts of sentences that were significant with regard to the above research questions, which was done in order to define the so-called codes of the first order. After that, the procedure of combining related terms into categories was conducted, whereby each code of the first order was associated with the relevant term at the second order and in that way the essence of each unit of text was emphasized. The last step was the assignment of related terms to categories, which was followed by their analysis (Milas, 2005).

Figure 1. Space Barriers.

RESULTS AND DISCUSSION
Participants in this study most often cited the spatial barriers they face when practicing tennis, namely physical obstacles in the environment (…access to the courts is even worse, with regard to the access we as people with disabilities find around the city (1) …in other places it is completely inaccessible for wheelchairs and nothing is adapted for people with disabilities. (2)); physical obstacles at the courts (…at [some] places there is not always a good access to the courts… (2)). The participants nevertheless pointed out that in recent years some improvements had been made regarding access to the courts and talked about improving spatial accessibility. (But the adaptation of the courts is making progress, more and more often on the courts we have a toilet (3)). It is also important to get to the tennis courts. Participants therefore stressed the difficulties with transport (…And public transport should be ordered three days in advance and you depend on it. And you have other obligations (4)).

Financial difficulties
Thus, all persons insured with the Croatian Institute for Health Insurance (NN.//2012) have the right to orthopedic aids, but for wheelchair tennis there are specific regulations which are such that appropriate aids are usually not covered and have to be funded privately and orthopedic devices are expensive: (Wheelchairs are very expensive and we have to get them on our own and they cost about 25,000 Kunas (5) … I play in some that I got at the club and I am satisfied (5)). Survey participants cited the disparity of access to funds from the Ministry of Science and Technology (The Ministry provides incentives only to those who generate results, but as in tennis there are no categories of players, it is much harder to be successful. For example, there are 10 categories in athletics and it is a lot easier to achieve some success (3)). Ciliga et al. (2006) state that an inappropriate, non-transparent and incomplete model of funding for exercise programs, almost always subordinated to and perceived as less important than the sporting needs of the general population, had a negative influence on the current development of sport from the perspective of people with disabilities.

Psychological barriers
During the interview, participants in this study very much stressed the psychological barriers faced by people with disabilities engaged in tennis. They emphasized their lack of interest in sports in general, including tennis (…I tried to demonstrate wheelchair tennis to them. But there was no interest (3)); they also emphasized the private incentives of players themselves (For playing sports all is ‘in the head’, someone likes it or not. It is very difficult, the young do not want to play sports (3)). The participants pointed out that it is about “barriers in the head” (The problem is that there are no categories of players in tennis, while in athletics there are a lot of categories and it is a lot easier to win medals (4)). Therefore, Ciliga et al. (2006; Probert & Crespo, 2015) emphasize and draw attention to the need and duty of the community to care for people with disabilities and to promote their integration and reintegration into the community through kinesiological activities as well as other means.

Unequal legislation
They underline the difference between people with disabilities from the Homeland War and civilian persons with disabilities. Thus, people with disabilities from the Homeland War themselves point out that they have more favorable opportunities to practice tennis than their colleagues who have acquired a disability, for example, in a traffic accident, etc. (We disabled from the Homeland War have our cars and everything is good … but for civilians with disabilities it is much harder, because they do not have their own cars and orthopedic aids and wheelchairs (3)). The aforementioned financial difficulties in purchasing orthopedic devices mostly concern people with disabilities who do not fall into the category of disabled persons from the Homeland War.

Specifics of practicing tennis - problems of the categorization of sportsmen with disabilities
Earlier literature was cited (Ciliga et al. 2006) that refers to the great differences in the approach between financing programs
for sportmen with disabilities and those without disabilities. And our participants – tennis players with disabilities - pointed out differences and discrimination against them as sportmen compared to other types of sports such as athletics and swimming. (The problem is the lack of investment in this sport because they value the results only, and invest based on that...just throw money on athletics and swimming. (4)), so, it is a question of results as the basic criterion for funding. They also state the following (... because to achieve results in wheelchair tennis a million things should coincide. We are all in the same category. Someone does not have legs, and plays tennis sitting in a wheelchair, but has very strong musculature, and I, for example, fall if I do not hold on to something. (3)). Ciliga et al (2000) report that “The current situation is devastating, because most leaders of sports and recreational programs do not have any point of contact with the umbrella institution for sport. They also state that there is a very small number of highly qualified staff trained and motivated to work with people with disabilities, which is another limiting factor.

**CONCLUSIONS**

The difficulties encountered by tennis players with disabilities are spatial barriers related to obstacles in the environment, obstacles on the courts, and difficulties with transportation. There is a little progress when it comes to infrastructure so that the mobility of wheelchair tennis players is still hampered. Financial difficulties are also expressed by players, manifested in the inability to purchase orthopedic devices, such as wheelchairs for tennis players, and the practices of financing programs when it comes to the allocation of funds to different sports. Inconsistent legislation leads to a privileged situation for people with disabilities who are disabled as a result of the Homeland War, who have a lot more benefits than other tennis players with disabilities. Finally, as the most emphasized problem of categorizing tennis players is singled out. It is difficult to achieve sporting results, because all tennis players with disabilities are put at the same level regardless of the degree of disability. On the other hand, financial support is correlated with such results. It is therefore essential that steps be taken to work on the categorization of people with disabilities, which would contribute to the development of tennis for people with disabilities in general. The very results of this study put stress on it.

This study is the first one conducted in Croatia and could be a starting point for further research on a larger sample which could combine both qualitative and quantitative methodologies to investigate this area.

**REFERENCES**


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