



Tennis and disabilities guidelines for coaches

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ABSTRACT

Tennis is a sport with a high technical, tactical, physical and psychological content. These contents can be developed by players with some kind of impairment. In fact, although at the institutional level, the International Tennis Federation (ITF) 's regulations only consider wheelchair tennis for persons with physical disabilities, we find more and more experiences from people with other forms of disability who play tennis too. So much so, that even the ITF is considering their development at recreational and inclusive level. This article discusses the different modalities of tennis for persons with different abilities and provides some tips for coaches.

Key words: Adapted tennis, impairment, disability, methodologic orientation

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INTRODUCTION

Tennis is one of the most widely played sports at world level, and the first one among racket sports (García Ferrando & Llopis Goig, 2011). Tennis has been adapted for persons with some kind of disability with the main target of facilitating its practice to all persons regardless of their capacities.

This paper will approach each adapted modality in relation to the type of disability of the tennis player, as well as the methodology for the teaching-learning process.

TENNIS AND SENSORY DISABILITY

The concept of sensory disability includes persons with visual and hearing impairment. The senses of sight and hearing are the most important for the human being, since it is through them that we perceive most of the information we receive from the world around.

Tennis for persons with hearing impairment

Those people who practice tennis and suffer from some kind of hearing impairment are the ones who will need less adaptation as compared to other impairments. In fact, inclusive tennis practice, that is, playing with abled persons, is a reality that has taken players with this impairment to top performance levels as is the case of Charlotte Cooper (who won Wimbledon 5 times) over a century ago, or Duck Hee Lee, deaf from birth, who is in the world top junior ranking. Even though this problem does not prevent the players from competing at top level, we must consider a number of associated constraints that may condition performance, such as the acoustic perception of the opponent's sound at impact (which provides information about the ball spin and power) the acoustic of our own impact, as well as the information provided by the umpire or the opponent during the match (calling let, out, etc.)

Aspects to bear in mind when teaching tennis to persons with hearing impairment:

Most of the feedback and instruction in a tennis lesson comes through hearing channels, so the teacher must change this aspect of the methodology and bear in mind the following (Sanz & Reina, 2012):

- Convey a great deal of visual, kinetic and tactile information and stimuli enlarging the information given.
- Using visual means before and during the sessions (targets, concepts, tasks, etc.) and graphic support by means of boards, tablets or smart phone apps.

- Use body language: Technique acquisition can be done by "shadowing" and increasing verbal information with "graphical" gestures that represent the information we provide.
- Avoid background noise (for those with partial hearing impairment).
- Approach the player for feedback, and make sure he/she does not lose the utterance focus (the mouth) and can always read lips.
- Indicate the change of tasks by means of gestures the player can easily understand.



Tennis for persons with visual impairment

Tennis for blind persons, internationally known as "Blind Tennis" was invented in 1984 by D. Miyoshi Takei. This sport modality has regulations and a national and international competition plan, but it is not included in the International Tennis Federation at competition level. The first tournament was played at the Disabled Rehab National Centre in 1990 (Sato, and cols., 2010). The main differences with tennis for abled-bodied persons can be summarized as follows: the space is reduced (the size of a badminton court), the ball is made of rubber foam with a jingle bell inside, which rings when the ball is hit or bounces, mini tennis rackets are used, and the number of bounces before hitting the ball varies depending on the categories, but the maximum number is three, and the server must say "ready" before serving and the receiver must answer "yes".

Given the impossibility of watching the ball, (partially or totally), one could imagine the possibilities for a rally are dim. Research

concerning tennis for the blind shows a relationship between practice time- resting time in tennis for the blind or visually impaired as compared to conventional tennis, shows a similar average number of strokes in both cases (Sato, and cols., 2010). Thus, the characteristic of continuity in the game is a fact.

There is a ranking for players with a certain degree of visual condition which varies from colour, light and shadow perception impairments and with a certain peripheral vision, to total blindness. Athletes are ranked in different categories (Bullock, 2007):

- B1: totally blind athletes. They play with their eyes blind folded and they are allowed three bounces.
- B2, B3, and B4: athletes in these categories have partial sight and are allowed two bounces.
- B5: in this group players have vision problems and are allowed one bounce.

Aspects to bear in mind when teaching tennis to persons with visual impairment:

Tennis is characterized for its highly tactical component, the player being aware of the opponent's position on court, and addressing the ball far from him/her. This makes the sense of sight necessary to comply with this tactical aspect. Thus, one could think that tennis for the visually impaired, mainly those who are totally blind, would be a different sport due to that tactical lack as compared to conventional tennis. Independently, the teaching process should follow some specific methodology recommendations, among others (Sanz & Reina, 2012):

- Conveying a great deal of (hearing, kinetic and tactile) information and stimuli. The verbal message must include all possible details, and the kinetic support will provide exact references that will be easily interpreted by the person with sensory disability.
- Providing feedback during and after the action to facilitate the knowledge of execution.
- Calling students by their names to capture their attention.
- Being familiar with the space, tools and targets by means of previous recognition of the materials and spaces they will be working with.
- Avoiding changes when transmitting the message, keeping a fixed position.
- Using tactile lines for the player to know at all times, where he is, in the court.

TENNIS AND DEVELOPMENT DISABILITY

Neurological development disability is, no doubt, the most diverse, since it encompasses: penetrating development disorder, (autism, asperger syndrome, Rett syndrome...), cerebral palsy, intellectual disability, among others. The variety of development disabilities is just as broad as their characteristics. From a general point of view, the term "development disability" is used for all those that start during growth, that is, until the age of 18. This condition is characterized for limitations in relevant areas of life, such as language, movement, learning, self care, independent life, etc. Just as the USTA (2006) points out, persons with a development disability are supposed to have a lower learning rate, reasoning difficulties, little memory, short attention spans, hyperactivity, social immaturity, perceptive deficiencies and agility and movement problems.

So far, there are no regulated competitions for players with these disabilities at the international level, organized by the world tennis regulator, the ITF. So, its practice must mainly be driven to physical, social, recreational and affection development of the player, although it is true that there are some organizations and associations like Special Olympics that

do organize competitive activities at the national and international level.

Out of all the types of development disabilities, tennis has mainly succeeded among autistic persons, (Young, 2013) persons with Down syndrome (López & López, 2013). In this sense, and according to Young (2013), the most specific aspects to bear in mind when teaching persons with autism are:

- Knowing the player: Each person is different, the autism spectrum is very broad.
- Paying attention to behaviour: most children with autism do not express their feelings/ emotions through speech, so the coach must very well observe their behaviour and their body language.
- Building on familiar routines: familiar tasks will give them more confidence. This way, if we have to change the routine, the student must be prepared in advance.
- Finding their own areas and spaces: it is important to have a quiet place for tennis practice, far from noise, and other players, since children with autism would rather avoid large groups.
- Incorporating repeated and restricted behaviour patterns: most children with autism have repeated behaviour patterns, (throwing objects, turning, shaking hands etc.). These patterns can be used to develop games/ perform tasks in a complementary way, and can be organized as routines.

Aspects to bear in mind when teaching tennis to persons with development disorders:

As we said before, there is a great variety and there are many types of development disorders. So, it is necessary to know the specific characteristics of each disability to be able to adapt the methodology to the teaching- learning process. In a more general way, we present below some of the methodological aspects to bear in mind when teaching persons with some kind of development disability (Sanz & Reina, 2012; USTA, 2006):

- Simplify the tasks to focus attention on the target.
- Give short and clear instructions. Avoid complex words and technical jargon.
- Provide visual information to complement hearing information.
- Propose motivating tasks driven to social and affectionate work.
- Use success pedagogy where the player can easily achieve his goals.
- Keep the model/ ritual in the sessions, it will be familiar and will give them confidence.
- Present easy and short tasks to avoid concentration problems.

TENNIS AND PHYSICAL DISABILITY

Physical disability encompasses a great deal of disorders at bone, joint, muscular or nervous level. It alters the motor system producing an impact mainly in motor action (Sanz, 2003). Wheelchair tennis, is the adapted modality with the greatest number of players and one of the most widely practised adapted sports (Croft and cols., 2010). It started in the US, in the late 70's, and the number of players has never stopped growing ever since. So has the number of international tournaments grown, reaching over 160 in 2014, in some 40 countries. Matches are always played to the best of 3 sets (even in Grand Slams), the main difference with conventional tennis being that the ball may be hit after the second bounce (ITF, 2016a). This adaptation of the rule is based on making the points longer for the wheelchair player to be able to reach balls he would not reach in one bounce. This sport modality regulated by the ITF, considers tennis practice regardless of the type of physical disability (simple or double amputation, complete or incomplete spine injury...) for all players in a sitting position on the wheelchair.

Aspects to bear in mind when teaching tennis to persons with physical impairments:

Any person with a functional constraint that prevents them from playing conventional tennis can play wheelchair tennis, as long as this constraint is considered “minimum disability”, expressed in the ITF international regulations as “minimum eligibility” (ITF, 2016b). This shows that the spectrum can be very broad (spine injury, amputation, bifid spine, poliomyelitis, etc...) Depending on the condition, the player will have more or less functional constraints to perform different actions, when playing tennis.

Thus, the coach needs to know specifically the type of injury and its degree of impact. In a more general way, we present below some specific aspects to bear in mind when teaching tennis to persons with some kind of physical impairment (Sanz, 2003; Sanz & Reina, 2012; USTA, 2006):

- Knowing the location and the level of affection the disorder involves. This will condition, among other things, the hitting techniques.
- Adapting to the sport wheelchair (mobility).
- Working on hitting planes next to the body and with diagonal movements.
- Using the anchorage to the chair and the supports with the free hand. This will give confidence to the player and stability to the body when hitting.
- Reducing the court at the beginner level of practice for a better management of space.
- Using lighter and smaller rackets for players with more functional limitations.

Before we end, we would like to mention the new possibility that started some time ago in tennis practice for differently abled persons: it is adaptive tennis in standing position, that is tennis for persons who suffer from a physical impairment, but can play on both feet with a prosthesis. This modality is being developed, and although its practice is not generalized in all countries, it is gaining players little by little: There already exist some national and international competitions, outside the ITF



umbrella.

CONCLUSIONS

Apart from the health benefits that sport practice involves, the degree of functional independence and social integration are extremely favoured in the case of persons with some kind of disability (Gil, 2011). Likewise, athletes with disabilities are motivated to practice adapted sport because it is a means to social integration and affection (Gutiérrez & Caus, 2006), and it is also necessary for their health, and their good physical condition (Torralba, Braz, & Rubio, 2014). This motivation of the players facilitates the task of the coach for tennis practice.

Coaches who teach tennis to people with some kind of disability must remember the ideas presented here, as well as

have a sound knowledge of the different types of disabilities to be able to prepare an efficient working plan.

Apart from the considerations presented, we propose tennis practice for disabled persons in inclusive environments, that is to say, combining abled and disabled people. It will not just involve learning values for all, it will also favour the latter to have sport schools where to practice tennis, in a normal situation, and foster full integration. Apart from the existent methodologies proposed, adapted material (size of the court, the racket and type of ball), and employing them in an appropriate way will be a great help for the evolution and learning of players with some kind of impairment, whether physical, intellectual or sensory.-

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