Chapter 9: Disability & Sport

# 9.1. We’re not handicapped: We just can’t hear

Len Gonzales is deaf. But more important, he’s the head football coach at the California School for the Deaf at Riverside (CSDR). When his team capped its 9–1 season by winning the 2004 championship of the San Joaquin High School League, a reporter asked Gonzales what other teams thought when they lost to CSDR. Gonzales explained that “teams hate to lose to us because they think we’re a handicapped team. But we’re not handicapped. We just can’t hear.”

Coach Gonzales is sensitive to the barriers created when people use the word *handicapped* to refer to physical and mental *impairments* and *disabilities.* Clear definitions of these words are necessary to understand and evaluate theories of disability.

An **impairment** *exists when a person has a physical, sensory, or intellectual condition that potentially limits full participation in social and/or physical environments.* Many people have impairments, such as those related to vision and hearing, which generally increase in number and severity as people age. This is part of everyday life and many of us make personal adjustments to limit the impact of impairments on our lives.

If we’re lucky, we have access to technologies that make adjustments more effective. For example, an athlete wearing eyeglasses that “correct” her impaired vision. A world-class archer could still be a member of the U.S. Archery Team, despite this impairment. She would face no barriers as long as she were allowed to wear eyeglasses; therefore, she would not have a disability.

An impairment becomes a **disability** only *when accommodations in social or physical contexts are not or cannot be made to allow the full participation of people with functional limitations.* This means that disabilities are created when relationships, spaces, and activities present barriers that limit the opportunities and experiences of people with particular impairments. For example, before the late-1990s, if an athlete’s leg was amputated below the knee and she wore a prosthetic leg and foot, she would have been excluded from the U.S. Powerlifting Team because the International Powerlifting Federation rules stated that “Lifters without two real feet cannot compete in regular contests.” This rule created a barrier that converted my amputation from an impairment into a disability.

However, after the rule was changed, the barrier was eliminated so that her prosthetic leg and foot no longer classified her as disabled in powerlifting. Her prosthesis was then similar to corrective eyeglasses or a contact lens. This means that disability often has less to do with impairment and ability than with barriers that limit participation It also means that a person may be (dis)abled in one context but not in another.

“Being handicapped” is something else entirely. People become **handicapped** *when others define them as inferior and “unable” due to perceived disabilities.* For example, when opposing players defined the football team from CSDR as handicapped, they hated losing to them because it meant that they lost to players that they defined as inferior and unable.

These definitions are based on theories that locate disabilities and handicaps in social and cultural arrangements rather than referring to the individuals. Thus, disabilities and handicaps are the results of the following:

* Environments organized to meet only the needs of able-bodied people
* Norms (rules) that disadvantage people with impairments
* Attitudes and beliefs that equate particular impairments and disabilities with inferiority and inability.

Definitions based on medical and psychological theories usually identify physical or intellectual disability as a characteristic of individuals and view it as a personal “abnormality.” This is an important point because if a disability is an abnormal characteristic of an individual, treatment focuses on making the individual as “normal” as possible through personal coping strategies and assistive technologies. However, when disability is located in the barriers that restrict participation, the “treatment” is political actions that eliminate social, cultural, legal, organizational, and environmental barriers.

Both medical/psychological and social/political approaches are needed, but people too often overlook the latter. Coping strategies and assistive technologies are important for individuals with impairments, but eliminating barriers prevents impairments from becoming disabilities for entire categories of people in a social world.

Leslie Little, a sailor with muscular dystrophy, helps us understand this point when she says, “Every day is a new adventure when I’m sailing . . . Plus, I’m not disabled when I’m on the water.” Therefore, a primary goal is to create barrier-free social and physical worlds like the world of sailing is for Leslie Little.

# 9.2. How can I wear shoes if I don’t have feet?

Public schools are traditionally places where able-bodied young people develop and display their sports skills, but the myth that people with disabilities aren’t interested in sports subverts opportunities for them. However, mainstreaming young people with disabilities in existing school sports is not always practical. Does that mean it is fair to deny young people the learning experiences that can occur in high school and college sports?

Seventeen-year-old Bobby Martin is an assertive and determined young man with an undeniable desire to play football. He says, “I stand 3-foot 1-inch but I’ve got the soul of a 6-foot-4 person” (Grossfeld, 2005). He was born without legs, but he wrestled, bowled, danced, and moved around school hallways and classrooms on a custom skateboard. In 2005, Martin played backup nose-guard and on special teams for Colonel White High School football team in Dayton, Ohio.

On the football field, Martin moved with his hands and hips. “I love the reaction people have when I make a tackle. People don’t believe I can play, and I love to prove them wrong.” But he was stopped from playing when a referee told his coach that the Ohio high school rules required all players to wear shoes, knee pads, and thigh pads. Martin had all the necessary permissions to play, but the referees were not aware of them. As Martin pleaded his case on the field, he asked, “How can I wear shoes if I don’t have feet?” For the rest of the season, Martin’s coach presented referees with a letter in which the Dayton Public Schools declared his eligibility.

Bobby Martin’s experiences received nationwide media coverage, but none of the coverage mentioned that no U.S. high school in 2005 had a varsity team for students with disabilities. Nor was it noted that only a handful of universities field even one “paravarsity team,” or that the NCAA does not recognize any championships in sports for athletes with disabilities.

The few universities with wheelchair basketball teams fund the teams through disability services rather than the athletic department, and paid coaches and scholarships are very rare. All of this perpetuates the “invisibility” of (dis)ability and the resultant lack of opportunities in U.S. schools.

Bob Szyman is a former teacher-coach at the Chicago High School of Agricultural Sciences. He left his position as secretary-general of the International Wheelchair Basketball Federation (IWBF) to teach special education and physical education. His goal was to establish a wheelchair basketball league in Chicago public schools, but his biggest challenge was finding people who are excited about such a league. He explained that there was “no wheelchair sport culture” in the schools, so students with disabilities [had] no expectations and [made] no demands, especially in lower-income and ethnic minority communities; nor [did] administrators, teachers, and coaches ask why there [were] no “paravarsity teams.”

When Szyman organized wheelchair sports camps and competitions, the participants went out of their way to thank him, but they didn’t ask why their schools had no sports programs for them. They’re accustomed to being ignored when it comes to sports.

The Americans with Disabilities Act (ADA) of 1990 “prohibits discrimination against individuals with disabilities in all areas of public life, including jobs, schools, transportation, and all public and private places that are open to the general public.”

For nearly 30 years, the ADA has called for access and equity, but it contains no mandate to establish “paravarsity sports” or make teachers, administrators, and coaches think creatively about developing them. Few students can do what Bobby Martin did. Certain (dis)abilities require games, rules, and equipment adapted to physical characteristics. Therefore, if Bobby Martin were speaking to educators about this issue, he might ask, “How can students with a disability play sports if we have no teams?”

This question finally received an answer in 2013 when the U.S. Department of Education published guidelines for including students with a disability into athletic programs. But there continues to be resistance to the guidelines and confusion about their meaning as school and athletic administrators claim that they have no resources to offer separate programs for students with a disability and little or no expertise for including those students in existing sports programs. In the meantime, it is hoped that some educators will be creative and develop models of inclusion that can be used by others.

# 9.3. The hit isn’t real unless it bends steel: Men & Murderball

*Murderball* is a provocative documentary about athletes on the U.S. national men’s wheelchair rugby team. It evokes mixed feelings for most viewers because a few of the athletes disclose parts of themselves that may make people uncomfortable.

When *Murderball* was introduced at the 2005 Sundance Film Festival, it won the American Documentary Audience Award and the Special Jury Prize for Editing. That was the beginning of a long string of best documentary awards and an Academy Award nomination. The film also received unqualified kudos from pop film reviewers, nearly all of whom viewed it through the eyes of white, middle-class, heterosexual, able-bodied men. They generally described the film as hard-hitting, inspiring, revealing, and stereotype-busting; in all, the best film ever about disability.

Some reviewers were so pumped up by tough-talking, macho rugby players and spectacular crashes between Terminator-like wheelchairs that they used men’s locker room vocabulary to express themselves. For example, the United States Quad Rugby website ([www.quadrugby.com](http://www.quadrugby.com)) noted that Kyle Smith of the *New York Post* gave *Murderball* his award for “Best Argument for Not Pitying Quadriplegics.” Smith claimed that “the quadriplegic rugby players of this documentary taught us all a valuable lesson: that is, losing the use of your limbs in no way diminishes your desire to kick the crap out of your opponent” (Hooper, 2005). Of course, for those inspired by this lesson, there will be others who find it worrisome.

Other viewers came away with mixed feelings. In one sense they are tied to *Murderball* being a “first film” that provides audiences with insider views of people with disabilities. “First” films and “first” television programs often have casts from traditionally marginalized categories of people. They are usually eye-opening and provocative, but they inevitably lead to questions about category representation. A case in point was the scholarly critique of *The Cosby Show* after it debuted in 1984. Although it was the most successful U.S. television program of the 80s, this `first sitcom’ about a black family was widely criticized for failing to represent most African Americans. *Murderball* can be criticized similarly, but it’s not realistic to expect commercial films, even documentaries, to fully represent any diverse social category of people.

Issues of representation, however, are appropriate to discuss in classrooms, and *Murderball* makes this easy to do. Further, these issues introduce other questions. Who plays and who doesn’t? What forms of exclusion exist in wheelchair rugby and the culture produced and reproduced in association with it? What ideological themes pervade *Murderball* culture, and whose lives, values and experiences do they represent? Relatedly, whose lives, values and experiences are threatened, demeaned and marginalized in this culture?

Representation issues will certainly be on the minds of viewers with disabilities. For men with disabilities caused by accidents after adolescence, the film offers very selective images of what is possible when you immerse yourself into an activity that provides joy and satisfaction. This will be inspiring to those who have not thought critically about ideology and the circumstances of their accidents.

For men who have never lived without disabilities or cannot remember when they did, parts of the film will be reaffirming because they show the exhausting work required to live without the full use of two or more limbs. However, other parts may be defined as offensive and even counterproductive to the political goals of organizations representing people with disabilities. Overall, the film does little to disrupt “the empire of the normal.”

For most women with disabilities, the film offers very little with which they can identify. This doesn’t mean that some will not enjoy *Murderball*, even if the values and experiences of most women are unrelated to the heavily masculinized orientations and representations of the main characters in the film.

As representation questions become increasingly critical, classroom discussion may be inhibited by fears of offending people socially labeled “disabled.” This opens the door for discussions about the social construction of disability and historical variations in prevailing ideas and beliefs about disability. Further, after watching wheelchair rugby and listening to players talk about their bodies, it becomes clear that `normalcy’ is secured through sociality and a presentation of self that leads others to treat them as normal.

Viewing *Murderball* helps people realize that physical impairments and the people who live with them are best understood when viewed in personal, social, and cultural contexts. Filming men – many of whom broke their necks in high-risk activities – as they negotiate their lives in the structural context of wealthy post-industrial societies is a worthy project. But when viewing *Murderball*, it’s also worth noting that wheelchair rugby requires resources unavailable in most of the world and that rugby participation brings status and self-satisfaction only when widely shared ideologies glorify competition, individual achievement, physical domination, and masculinity defined in terms of physical and mental toughness. Finally, rugby culture reinforces these ideologies, even when played in wheelchairs.

The filmmakers did not set out to critique ideologies in wealthy societies or inequalities in the distribution of global resources. They wanted to provide a sensitive, frank, entertaining portrayal of selected men on the U.S Wheelchair Rugby Team. They achieved their goal by showing men with fully or partially impaired limbs getting out of bed, dressing, moving into wheelchairs, and dealing with access challenges as they make their way around homes, airports, hotel rooms, and in and out of automobiles. Neither these nor the rugby action scenes allow viewers to pity or dismiss the young men. Viewers will not like or want to befriend every man in the film, but they will learn that each faces challenges and has a perspective worth knowing and understanding.

The most sociologically relevant scenes in the film involved the men as they relaxed and talked about everyday life. For example, after post-game beers, one of their conversations turns deeply personal and reveals the complexity, flaws, and humanity of these young men. Other scenes do the same. In one case, a coach obsessively focused on conquering the U.S. team from which he was cut a few years before, talks tenderly with his son after realizing that the young man possesses valued attributes outside those he uses to evaluate himself and his rugby players as men. Similarly, the hyper-aggressive, trash-talking team captain is seen in tender, mutually supportive moments with his girlfriend. The relationship between one team member and his friend who drove the truck from which he was ejected in an accident, reveals former best friends coping with tensions caused by mutual complicity in the circumstances leading to paralyzing injuries.

Overall, *Murderball* is a must-see for people wanting to learn more about the experience of living with a physical impairment in the United States. It creates both awareness and uneasiness that forces most viewers to think about their attitudes and the organization of their social worlds.

*Murderball*. (2005).Directed by Henry Alex Rubin & Dana Adam Shapiro; 85 minutes; DVD; ThinkFilm

Hooper, Ed. (2005). *Game On!* Ragged Edge Online.

# 9.4. Paying the price: The cost of sport prostheses

We occasionally hear heartening stories about people using assistive devices made of Kevlar, carbon fiber, and other high-tech materials. These materials are now used to make light, maneuverable, and fast racing chairs, revolutionary running prostheses, and racing mono-skis for negotiating steep Alpine slopes.

This technology is seductive when seen for the first time – so seductive that there is a tendency to focus on the device and overlook the person using it. However, as most athletes know, technologies are only as good as the people who use them. And most people with disabilities know that adaptive technologies for sports are prohibitively expensive.

Diane Cabrera discovered this when cancer took her leg. Her new prosthesis enabled her to walk, but it cost $11,000, and her HMO covered only $4000 per year (and costs have increased in the years after she bought her prosthesis). She spread payments over two years and struggled to find $2200 for co-pays related to diagnostics, fitting, tuning, and maintaining the device. When she needed a new leg socket four years later, because her original prosthesis no longer fit correctly, she put it off due to cost. When asked about this, Diane said with resignation, “I’m trying to make do right now.”

“Make do right now.” That’s what many people do today when they need assistive devices like prostheses and more mobile chairs. Unless you’re wealthy, have insurance that covers more than $1,500 a year for prosthetic limbs, or find a charity with deep pockets, you must learn to “make do.” Most below-the-knee prosthetics now cost from $7,000 to $10,000, and an arm or an above-the-knee prosthetic leg costs $15,000 to $40,000. Prosthetic limbs and adaptive devices for sports cost considerably more – up to $70,000 for above-the-knee amputees – and they must be replaced regularly. The price of a racing wheelchair is about $5,000, and Kevlar wheels push up that cost to $7,000 and more. Additionally, the physical and occupational therapy required to learn how to train and compete with a sport prosthesis can cost tens of thousands of dollars.

The cost of equipment is a major barrier to sport participation among most people with disabilities, especially considering the following statistics for Americans age 16 and over (U.S. Census Bureau, 2017; U.S. Department of Labor, 2018):

* Results from the 2017 American Community Survey (ACS) reveal significant disparities in the median incomes for those with and without disabilities. Median earnings for people with no disability were $35,070 compared to the $23,006 median income reported for individuals with a disability (U.S. Census Bureau, 2017).
* The unemployment rate among people with disabilities is over twice as high as the rate among people with no disability, and people with “serious or significant” disabilities have the highest rate of any category of Americans – about 70 percent for working-age people.
* Only 24 percent of people with disabilities (16 years and older) report that they work full or part-time, compared with 67 percent of people with no disability.
* People with a disability are twice as likely as people with no disability to live at or close to the poverty line.
* Compared to people without a disability, those with a disability have less access to transportation and are more likely to go without needed medical care.

Federal government assistance for people with disabilities has been cut recently by the Trump administration, even for Iraq and Afghanistan war veterans. States have not picked up the slack; charity support is spotty, uneven, and declining; and community programs are scarce, even for people with dependable transportation. According to the Department of Veteran Affairs, this is a major setback for many vets. They estimate that the lifetime cost for prosthetics and medical care related to the loss of a single leg is about [$1.4 million](https://health.costhelper.com/prosthetic-legs.html).

A few elite athletes with disabilities are sponsored by companies that sell prostheses and other adaptive technologies, but the financial barriers for most people needing them are formidable. This forces many people with disabilities to join Diane Cabrera and “make do right now.” As they do, sport participation becomes a low priority or an impossibility.

U.S. Census Bureau. (2017). Selected economic characteristics for the civilian noninstitutionalized population by disability status. *American Community Survey*.

<https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml>.

# 9.5. Tensions in the Olympic family: Siblings with disabilities

When is a flag not a flag? Dr. Jens Bromann discovered in 1983 that this is not a trick question. As a representative of athletes with disabilities, he attended a meeting with Juan Antonio Samaranch, the president of the International Olympic Committee (IOC). Samaranch told Bromann and others from disability sport organizations that they could no longer use Olympic images at the Paralympics or the trials leading up to them. Samaranch explained that among other things, the Olympic flag and the five interlocking rings were symbols that now represented a global brand with its commercial interests and goals.

The flag, therefore, was not so much a flag as it was a licensed logo, and it could be used only by those who paid for the right to do so. As Bromann left the meeting, he told reporters that the Olympics was now an exclusive commercial brand, and “there was nothing we could do” to maintain the interests of the Paralympics.

Upset, but not wanting to cut ties with the IOC, Bromann and his peers in disability sports turned their attention to the Paralympic Games that would follow the 1984 Los Angeles Olympics. But neither the Los Angeles Olympic Organizing Committee nor the United States Olympic Committee (USOC) would support them and their event. So, they left Los Angeles and split their events between New York and Stoke Mandeville, England. They also formed the International Coordinating Committee of World Organizations for the Disabled (ICC) and made it the governing body for the Paralympic Games.

As president of the new ICC, Bromann focused on organizing the 1988 Paralympic Games in Seoul, South Korea. With support from Korean Olympic officials, the games were a huge success, bringing together over 3000 athletes from sixty-one nations. At the opening ceremonies, Bromann, who had once competed in sports for blind athletes, received a flag from the Korean organizers that they had designed specifically for the Korean Paralympic Games. It was white and had five *tae geuks,* or traditional Korean line symbols, that resembled teardrops in the same positions and colors as the five interlocking rings on the Olympic flag. This was meant to show that the Paralympics were related to the Olympic movement and that Paralympians train and compete as Olympians do.

The ICC reorganized in 1989 and after the 1992 Paralympic Games in Barcelona, Spain, it became the International Paralympic Committee (IPC). In the meantime, it continued to use the tae geuks flag as its symbol, but this infuriated the IOC. The flag, claimed IOC officials, was too similar to their brand logo. In 1991 the IOC told the ICC to change its flag or face sanctions. This prompted investigative journalist Andrew Jennings to ask sarcastically, “Sanctions against the disabled? What would they do? Shoot some guide dogs? Smash up a few wheelchairs?” (1996a, p. 228). But the ICC/IPC knew the sanctions meant there would be no more funding from the IOC – an action that would destroy many disability sports.

The three flags below have been used by the Paralympics in response to IOC demands that they not use any image that could be compared to the five rings Olympic logo and flag. The five-teardrops flag (A) was used in Seoul in 1988; the three-teardrops flag (B) was used from 1994 through 2004, and the new Spirit in Motion flag (C) has been used since 2008.

**A. 1988**



**B. 1994-2004**



**C. Spirit in Motion flag/logo, 2008-present**



To appease the IOC, a new symbol with three tae geuks was officially launched at the 1994 IPC World Championships. The tae geuks again appeared as teardrops, but officials explained that they now represented the Paralympic motto: “Mind, Body, and Spirit.” This flag was used through the 2004 Paralympic Games in Athens. But in 2003, after years of failed attempts to gain full IOC recognition and support, the IPC separated from the IOC and adopted a new symbol and flag to represent the unique purpose and identity of the Paralympic Games.

It consisted of three elements in red, blue, and green – the colors most often used in national flags. The elements are known as *Agitos* (a Latin word meaning, *I move*), and they appear to be in motion around a central point, representing a dynamic, global “Spirit in Motion” – the new motto of the Paralympics. This new representation emphasizes that the IPC’s goal is to sponsor sports that bring together athletes from all regions of the globe. The Spirit in Motion flag first flew at the 2008 Paralympics in Beijing, and there was nothing the IOC could do to prevent it.

Today, the IPC has adopted a commercial approach to disability sport as a survival strategy. Its flag is now a licensed logo – like the IOC flag. But this change raises the question of who will benefit from and be hurt by the commercialization of elite disability sports? Athletes who can attract spectators along with their sponsors will certainly benefit, but will this inspire sport participation among others or will it turn them into spectators? Will people be inclined to donate money to elite athletes, leaving everyone else to say, “There’s nothing we could do”? Hopefully, this is not where commercialization will take disability sports.

# 9.6. “One of God’s favorites”: Religion and disability

Religious beliefs have long informed popular ideas and beliefs about bodies and embodied experiences, including experiences of disability. For instance, as a child, Margaret Orlinski contracted a virus that partially paralyzed her legs. She could walk, but everyone saw that it was a struggle.

Margaret’s family lived in a Catholic neighborhood and attended mass every week at their local parish church. Margaret explains that everyone she knew used Catholic beliefs to explain her paralysis:

I was called a saint. “God loves her so much to have given her this cross to bear.” I heard that so many times. I felt an enormous amount of pressure to be perfect because I was “one of God’s favorites.” (in Phillips, 1988, p. 206)

The pressure felt by Margaret has origins traceable back to Paul’s letter to the Hebrews (12:6–10) in which he explains that hardship is a gift from God and provides a unique opportunity to submit to God’s will and share in His holiness.

Do religious beliefs influence cultural definitions of disability, and do those definitions influence opportunities and inclinations to play sports? Existing research doesn’t answer these questions, but sacred writings serve as a starting point for thinking critically about possible answers.

Other than the Bible, most sacred texts make only passing references to disabilities, if they mention them at all (see the Koran, 24.61 and 48.17). But the Bible speaks occasionally about disability (Hutchinson, 2008). For instance, the Lord in the Old Testament told Moses to tell Aaron that people with disabilities were unworthy of bringing gifts to his altar. The words in Leviticus are ominous:

No man who . . . is blind or lame, disfigured or deformed . . . with a crippled foot or hand, or who is a hunchback or a dwarf . . . is to come near to present the food offerings to the LORD . . . or approach the altar, and so desecrate my sanctuary. (Leviticus 21:16–23)

This has led some people to say that Jews and Christians were inclined to equate deformity and disability with sin and uncleanliness, thereby casting people with disabilities as “others” to be avoided (Mellor and Shilling, 1997).

However, in the New Testament, Jesus embraced people with disabilities, treated disabilities as defects to be healed, and taught that people should care for and be charitable to people with disabilities (for example, see Matthew 11:4–6; 15:29–31; 21:12–14).

Despite apparent contradictions in Christian approaches to disability, the provision of care and services to people with disabilities has often been sponsored by Christian organizations. But neither Christian nor other religious organizations have given priority to the provision of sport opportunities to people with disabilities.

This could change in the future if religious people read their sacred texts more closely, as each of the world’s religions emphasizes the importance of following a norm of reciprocity. For example, writing in 500 BC, Confucius highlighted this norm with a story:

Tsze-kung asked . . . “Is there one word which may serve as a rule of practice for all of one’s life?” The Master said, “Is not RECIPROCITY such a word? What you do not want done to yourself, do not do unto others” (The Confucian Analects, Chapter 15).

Although research on religious beliefs about the body is scarce, sociologists have frequently studied the “norm of reciprocity” in human interaction. Whether we connect this norm with religion or humanism, it states that if able-bodied people don’t wish to be denied opportunities to play sports, they should not deny people with disabilities those opportunities. And Margaret Orlinski would add that opportunities should be organized so that people with disabilities won’t ever feel that their moral worth depends on being perfect.