



Social participation of people with disabilities in organized community sport

A systematic review

Introduction

With the United Nation's Convention on the Rights of People with Disabilities (UN CRPD) in 2006, the participation of people with disabilities¹ in sport became an increasingly important issue in sport organizations and sport science (Kiuppis, 2018). The UN CRPD aims to enable people with disabilities to fully participate on an equal basis in sport activities at all levels because physical activity not only positively affects biopsychological development but can also provide social benefits to people with disabilities, (e.g., Di Palma, Raiola, & Tafuri, 2016; Johnson, 2009). In particular, organized sport activities are considered to have a high potential for stimulating social participation, especially if they are integrative or inclusive, i.e., when people with and without disabilities are practicing sport together (Elling, de Knop, & Knoppers, 2001; Waring & Mason, 2010). Social participation aims at a meaningful participation (Willis et al., 2017) that refers to the qualitative nature of social aspects of participation, and therefore refers to something much more than the pure attendance of a sport activity or the pure membership. In this regard,

organized sport can better affect social network building and seems to lead to greater participation of people with disabilities in other non-sportive social contexts; therefore, they are a key to building inclusive communities (Rimmer, 2008; Spaaj, Magee, & Jeanes, 2014).

On the other hand, however, research indicates that people with disabilities experience social exclusion, as they are underrepresented in all forms of cultural life (Verdonschot, de Witte, Reichrath, Buntinx, & Curfs, 2009), including sport participation (Collins & Kay, 2014; Kingsley & Spencer-Cavaliere, 2015; Misener & Darcy, 2014). People with disabilities show lower participation rates in organized sport compared to the non-disabled population (e.g., Finch, 2001; Sotiriadou & Wicker, 2014; Ullenhag et al., 2012). Moreover, integrative and inclusive sport groups are quite limited or even unrealized (Kitchin & Howe, 2014); thus organized disability sport often remains separated and therefore faces discrimination and exclusion from non-disabled mainstream sport (Jeanes et al., 2018; Patel, 2015). There are various barriers affecting mainstream participation (e.g., Jaarsma, Dijkstra, Geertzen, & Dekker, 2014; McBeth, 2009; Shields, Synnot, & Barr, 2012), including factors at an individual level (e.g., motivation, skills), structural level (e.g., personnel, infrastructural, and financial resources), and environmental level (e.g., policy programs, societal attitudes). Moreover, the specifics of sport have to be taken into account; thus the predominance of physical

performance and respective standards, and the largely speechless communication can make restrictions and exclusions for people with disabilities more visible than other non-sportive contexts do (Reuker et al., 2016; Spaaj et al., 2014).

Consequently, it becomes apparent that organized sport can both support and foster but also restrict or even impede social participation processes. Kissow (2015) even concluded in her review that there is no evidence if sport participation of people with disabilities implies an extended participation in society in general. Hence, the contribution of organized sport to social participation is also critically questioned (Coalter, 2007).

Therefore, comprehensive knowledge is needed to obtain a more balanced picture of social participation beyond normative sociopolitical demands arisen with the UN CRPD. To bridge this gap, this article provides a systematic review of existing studies providing empirical evidence on social participation of people with disabilities in organized community sport. For this purpose, a review of the most important international sport scientific databases and a thematic systematization of available studies will be carried out according to the theoretical framework of Koster, Pijl, Nakken, and Houten (2009).

¹ This article uses USA and UK terminology (Kiuppis, 2018), i.e., *people with disabilities* or *disabled people* and *people without disabilities* or *non-disabled people*, respectively, as it refers to established terms in research and it reflects the social model that is important to social participation issues (Peers, Spencer-Cavaliere, & Eales, 2014).

Opportunities of participation for people with disabilities in organized community sport

For people with disabilities, organized community sport plays a crucial role as in group activities the social aspect of sport participation is much more apparent than in informal sport activities (Kanamori et al., 2012). At a local community level, different public and private sport organizations (e.g., schools, sports clubs, sport camps, commercial sport providers) are responsible for the delivery and organization of sport opportunities for people with disabilities and help to foster and facilitate their sport participation. To date, research on social participation of people with disabilities in organized sport mainly concentrated on school-based physical education (Reuker et al., 2016; Qi & Ha, 2012). In contrast, this issue was hardly a subject of research in the context of voluntary community sport organizations (Cunningham, 2011; Shapiro & Pitts, 2014).

Organized community sport provides a range of activities for people with disabilities. In this regard, Misener, and Darcy (2014) proposed that participation in organized disability sport “is about choice across a continuum” (p. 3) that includes different settings of participation (see basically Black & Williamson, 2011; Black & Stevenson, 2011; see also Barrett, 2014; Elling et al., 2001):

- *Separation (separate, alternate or discrete activities)*. People with disabilities participate in sport activities with their disabled peers, thus, remain among each other (disability sport groups).
- *Integration*. People with disabilities participate in the same activity in a mixed context of ability, however, with specific rules and modifications (*modified activities*), in groups of people with similar abilities (*parallel activities*) or where non-disabled participate in activities designed specifically for the disabled with common adaptations (*adapted activities; reverse integration*).
- *Inclusion (open or fully integrated activities)*. People with and without disabilities practice sport together

where everyone does the same activity with minimal or no adaptations to the environment or equipment.

Traditionally, the delivery and organization of community sport activities for people with disabilities was part of separated disability sport clubs and training groups (Fay & Wolff, 2009), and separated settings were most common (Goodwin & Peers, 2012). With the UN CRPD there is a great promotion of developing integration and inclusion of people with disabilities in mainstream sport (Kitchin & Howe, 2014). However, it appears that each setting seems to contribute in a different way to social participation. Separated settings help to foster social participation within the disability community (Atherthon, 2007) and support to develop a sense of belonging and relationships with other disabled peers (Shapiro & Martin, 2010; Wynnnyk & Spencer-Cavaliere, 2013). In contrast, integrative and inclusive settings can support the participation of people with disabilities in mainstream sport and community (Di Palma et al., 2016; Kissow, 2015).

Theoretical framing of social participation of people with disabilities in organized sport

When it comes to social aspects of people with disabilities’ engagement in sport, different theoretical approaches are taken into account such as social participation and related concepts of social integration, social inclusion and social exclusion. All concepts contribute to explain the engagement of people with disabilities in sport, but each from a distinctive perspective. Although there are attempts to demarcating these concepts from each other (e.g., Booth, 2004), in previous research these concepts are not sufficiently defined and delineated or even used synonymously (Haudenhuyse, 2017; Reuker et al., 2016; Simplican, Leader, Kosciulek, & Leahy, 2015) resulting in confusion and conflicts about the terminology. In this regard, Koster et al. (2009) point out that “the concept of social integration and its related concepts, social inclusion and social participation, hardly seem to differ in practice with respect to con-

tent, if at all” (p. 131). Therefore, this review follows the approach of Koster et al. (2009), who propose a synthesis of these concepts by using the term “social participation” (see also Bossaert, Colpin, Pijl & Petry, 2013). According to Koster et al. the framework consists of four key aspects, including both positive and negative attributes that are critical to social participation:

- *social relationships and friendships* (e.g., friendship network, mutual friendship),
- *social contacts and interactions* (e.g., playing and working together; social isolation),
- *social self-perception* (e.g., physical and social self-concept, loneliness),
- *social acceptance* by significant others (e.g., social preference, support, rejection).

Based on this, Koster et al. derive the following definition of social participation:

Social participation [...] is the presence of positive social contact/interaction between these children [with disabilities] and their classmates; acceptance of them by their classmates; social relationships/friendships between them and their classmates and the pupils’ perception they are accepted by their classmates. (2009, p. 135)

Koster et al. developed this framework for a physical education context; however, it is also applicable to sport in general, including organized community sport, as respective reviews identified similar aspects of social participation (e.g., Di Palma et al., 2016; Kissow, 2015; Willis et al., 2017). With this framework a comprehensive understanding of social participation is given, in contrast to other concepts that are limited to vague definitions and barely offer a differentiation of relevant dimensions. Thus, with this framework systematic empirical studies can be carried out and the respective findings can then be classified, and finally a comparison to social participation in school-based physical education is possible.

Existing studies on these four aspects confirm the ambivalent nature of

C. Klenk · J. Albrecht · S. Nagel

Social participation of people with disabilities in organized community sport. A systematic review**Abstract**

Sport is considered to have a high potential with respect to social participation of people with disabilities, in particular in inclusive settings. However, people with disabilities continue to face social exclusion in sport, as they are underrepresented in organized mainstream sport activities and disability sport often remains separate. Thus, organized community sport can both support and foster but also restrict or even impede social participation of people with disabilities resulting in that the organized sport's contribution to social participation is also critically questioned. This article provides a systematic review of current research on social participation of people with

disabilities in organized community sport in separated and inclusive settings. The review of 25 relevant studies revealed four topics based on Koster and colleagues' applied theoretical framework that are associated with social participation in organized community sport: (1) social contacts, interactions and friendships, (2) identity, self-perception and acceptance, (3) social support and (4) community integration. The results draw a rather ambivalent picture of social participation of people with disabilities in organized community sport. However, most of the studies showed positive social benefits to people with disabilities for both separated and inclusive setting with respect to the four topics

that underscore the potential of organized sport. However, there are also studies reporting negative aspects people with disabilities experienced, in particular when participating in inclusive settings. This article concludes by pointing to capacity building of disability and mainstream community sport organizations in order to strengthen the positive effects while minimizing and mitigating the negative effects to ensure effective social participation of people with disabilities.

Keywords

Disability sport · Sport club · Social integration · Social inclusion

Soziale Partizipation von Menschen mit Behinderung im organisierten Sport. Eine systematische Übersicht**Zusammenfassung**

Sport wird ein hohes Potenzial bezüglich der sozialen Partizipation von Menschen mit Behinderungen zugesprochen, insbesondere unter inklusiven Rahmenbedingungen. Jedoch erfahren Menschen mit Behinderung beim Sport soziale Ausgrenzung: Sie sind bei Aktivitäten des organisierten Nicht-Behindertensports unterrepräsentiert, der Behindertensport findet zudem oftmals separativ statt. Folglich kann der organisierte Sport die soziale Partizipation von Menschen mit Behinderungen unterstützen und fördern, aber auch beschränken. Daher wird der Beitrag des organisierten Sports zur sozialen Partizipation auch kritisch hinterfragt. Der vorliegende Beitrag bietet eine systematische Übersicht aktueller Studien zur sozialen Par-

tizipation von Menschen mit Behinderungen im organisierten separativen und inklusiven Sport. Basierend auf dem theoretischen Konzept von Koster et al. zeigt die Übersicht von 25 relevanten Studien vier Themen auf, die mit sozialer Partizipation im organisierten Sport assoziiert sind: 1. soziale Kontakte, Interaktionen und Freundschaften, 2. Identität, Selbstwahrnehmung und Akzeptanz, 3. soziale Unterstützung sowie 4. Integration in die Gemeinschaft. Die Ergebnisse zeichnen ein ambivalentes Bild: Einerseits zeigt die Mehrzahl der Studien den positiven Beitrag sowohl des separativen als auch des inklusiven Sports in Bezug auf die vier Themen auf, was damit das Potenzial des organisierten Sports bezüglich sozialer Partizipation

unterstreicht. Andererseits fanden sich aber auch Studien, die negative Erfahrungen für Menschen mit Behinderung dokumentieren, insbesondere unter inklusiven Bedingungen. Der Beitrag schließt mit einem Verweis auf den Kapazitätenaufbau für Sportorganisationen mit dem Zweck, die positiven Effekte zu stärken und zugleich die negativen Effekte zu minimieren, um so eine wirksame soziale Partizipation von Menschen mit Behinderung zu gewährleisten.

Schlüsselwörter

Behinderung · Sportverein · Teilhabe · Inklusion

sport contributing to social participation of people with disabilities. Regarding the positive side, Tasiemski and Brewer (2011) showed that regular sport participation of people with spinal cord injury was positively related to athletic identity, the sport-specific part of their self-concept, which means that these people define themselves through sport participation and their self-image is related to an athlete role. The level of athletic identity is even higher for team than for individual sport. In accor-

dance, Taub and Greer (2000) showed that physical activity improves the social identity and perception of children with disabilities (e.g., competence, self-enhancement), strengthens their social ties (e.g., opportunity for social interaction and bonding), and is perceived as a normalizing experience (e.g., increases quality of life). Also, Fenton et al. (2017) reported in their review that community-based recreation activity has a positive social impact on people with mental disabilities with expanded social net-

works, a higher sense of belonging and improved social skills. Similarly, Kissow (2015) concluded in her review that physical activity of people with physical disabilities seems to have a positive impact on learning social rules, social identity as being part of a community as well as empowerment and independence. However, this might not automatically lead to extended participation in other non-sportive contexts of everyday social life (e.g., family, education, public space, non-sport leisure activities). Thus, the

Table 1 Characteristics of the search strategy

Category	Keywords
Population	Disab*(led/ility); handicap*(s/ed); impair*(ed/ment); challeng*(ed); special
Disability concepts	Participat*; integrat*(ed/ion); inclu*(ded/sion); exclus*(ed/ion); challeng*(e/ing), barrier*(s), fail*(s/ure)
Concept of social participation	(Social) contact*; interact*(ed/ion), isolat*(ed/ion), relation*(ship); friend*(ship); network*(s); percept*ion; identity; lonel*(y/iness); acceptance; support; reject*(ed/ion)
Sport context	Sport(s); physical activity; para(sport); special
Organizational context	Club; organiz*(s)*ed; team; group; camp
Database	BISpSurf; EBSCO (SocINDEX, SportDiscus, CINAHL, ERIC); PubMed (MEDLINE); Embase; Web of Science; IBSS

positive social participation's outcome for people with disabilities appears to be relative compared to the non-disabled, i.e., people with disabilities do not experience social participation to the same extent as non-disabled do and then the negative side of participation comes to the fore. Koster and colleagues showed that children with disabilities have fewer friendships and contacts, a lower self-conception and are less accepted than non-disabled children (Koster et al., 2009, 2010). Moreover, there are further differences regarding the form of disability. Lippold and Burns (2009) showed that adolescents with intellectual disabilities have weaker social networks, less social support, and experience greater social isolation than adolescents with physical disabilities. Schwab, Huber, and Gebhardt (2016) demonstrated that the social acceptance and attitudes of non-disabled children to children with intellectual disabilities are more negative than to children with physical disabilities. Consequently, only in comparison with significant others (i.e., disabled or non-disabled peers) can it be assessed whether the social participation can be considered positive or negative.

Although current research addressed social participation and related concepts, there still remain some considerable research deficits. To date, research on social participation in organized community sport is limited. Moreover, only single aspects were analyzed, i.e., studies focused on aspects as social contacts or social identity. However, studies analyzing social participation in the greater context, i.e., comprising different aspects

of social participation and their interaction as Koster et al. (2009) proposed, are missing. Therefore, a systematic review that aims to provide a synopsis of existing studies on the dimensions or partial aspects of social participation is indicated. For this review, the approach of Koster et al. (2009) is considered as a fruitful analytical framework for selecting and structuring the literature with a focus on four subtopics of social participation: social relationships, interactions, perception, and acceptance. The reviews objective is to show in more detail in which settings (separate, integrative or inclusive) sport of people with disabilities was analyzed, what form of disability (e.g., physical or intellectual) study participants had and whether the positive or negative aspects of social participation in organized community sport were predominant. This knowledge is important to identify the chances, challenges and limitations of organized community sport for people with disabilities.

Method

Search strategy

To identify studies addressing the topic of social participation of people with disabilities in organized sport, an electronic literature search was conducted in relevant databases. For the characteristics of the search strategy, the keywords of the categories included similar or related terms that previous research applied, to enable a broad search (Table 1).

Because the terminology of "disability" is very inconsistent and widely dif-

fers in terms used in disability research (Kiuppis, 2018), the most common terms have been taken into account (e.g., handicapped, challenged, impaired). The same applies to the concept of disability; here, too, various terms appear in research (Reuker et al., 2016) of which the most relevant have been considered (e.g., participation, integration, inclusion and associated barriers and challenges). Specific attention was paid to the four aspects of social participation according to the outlined framework to which various terms Koster et al. (2009) refer to (e.g., social contact, friendship, isolation, acceptance, rejection).

Inclusion and exclusion criteria

Searches were limited to scientific peer-reviewed journal articles in English language or for which an English abstract was available, published in the last two decades, dating from January 1997 to December 2017. Then, the titles, abstracts and full texts were screened with the same catalogue of criteria. The inclusion criteria were that the articles had to focus on at least one of the four aspects of social participation (e.g., relation-/friendship, contact/interaction, self-perception, acceptance) of people with any kind of disability (e.g., physical, intellectual, multiple or sensory disabilities) in voluntary organized sport at local level (e.g., sport clubs, community sport activity or sport camp). That comprises rehabilitative, recreational sport and even competitive sport (e.g., local or regional baseball league) in any kind of setting (separated, integrative or inclusive). School-based physical education as well as (Paralympic) elite sport at (inter)national level was excluded due to their different objectives and structures compared to voluntary organized community sport. Moreover, only studies providing empirical evidence of social participation were included with both quantitative and qualitative designs, which also includes literature reviews analyzing empirical studies. In contrast, all other contributions (e.g., book chapters and handbooks, and congress abstracts) were excluded.

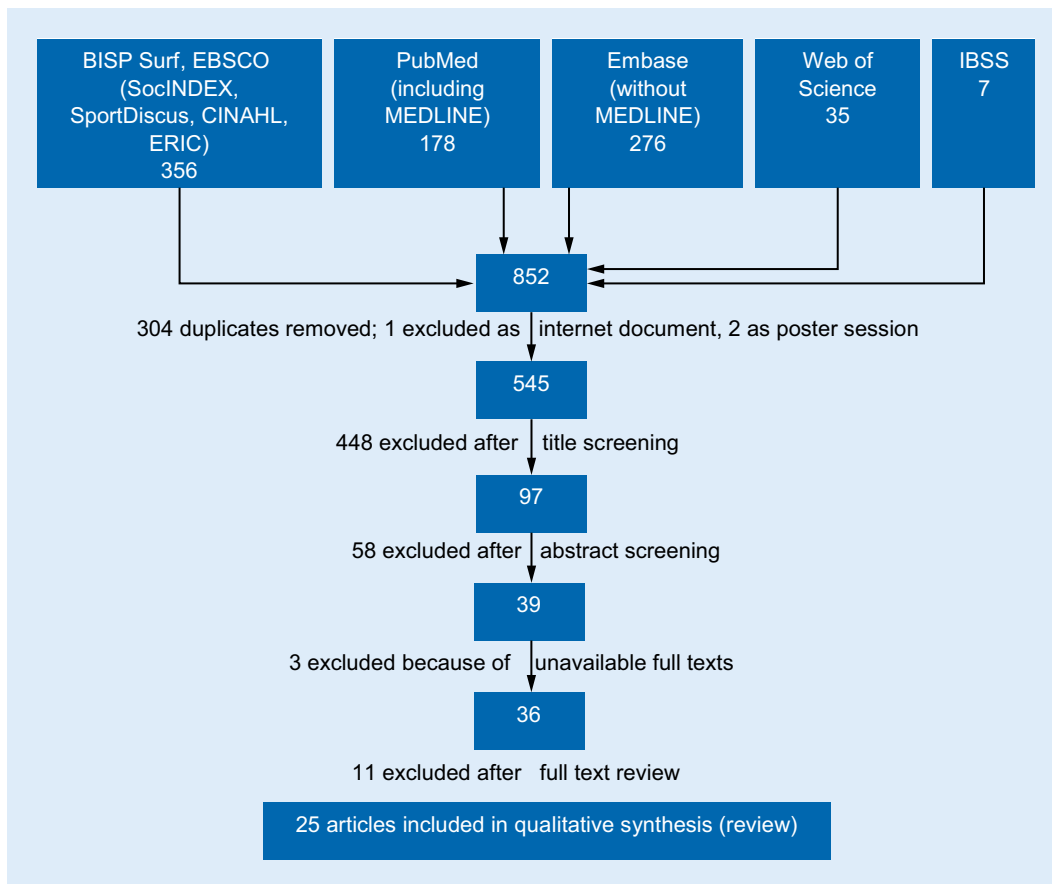


Fig. 1 ▲ Flowchart of the different phases of the article selection for the systematic review. *BISp SURF* The database of the German Federal Institute for Sports Science (“Bundesinstitut für Sportwissenschaft”) with literature (SPOLIT), projects (SPOFOR), audiovisual media (SPOMEDIA) and internet sources; *EBSCO* a platform that hosts various research databases; *SocINDEX* database for sociology research; *SportDiscus* database for sports (medicine) research; *CINAHL* database for nursing and related health sciences; *ERIC* Education Resources Information Center; *PubMed* a reference database for (bio)medical literature; *MEDLINE* the database of the US National Library of Medicine; *Embase* biomedical research database; *Web of Science* access to bibliographic information from ca. 12.000 scientific journals and (conference) books; *IBSS* International Bibliography of the Social Sciences

Data extraction and analysis

From the 852 records initially identified, 25 articles were finally selected and included in the review, after excluding duplicates, screening titles and abstracts, and reviewing the full texts for eligibility (Fig. 1). A thematic analysis was conducted to identify and analyze respective patterns with respect to social participation in the selected articles (Braun, Clarke, & Weate, 2015). The thematic analysis was mainly a deductive approach by two of the authors working independently using a catalogue of criteria according to the above-mentioned criteria paying specific attention to the four aspects of social participation. However, room was left for inductive analysis by

including further topics related to social participation emerging from the selected articles.

The interrater reliability according to Holsti (1969) was 92.8% for the title screening, 72.5% for the abstract screening and 96.7% for the full text review, which all can be classified as very good. Differences concerning the decisions of selection were discussed between both reviewers at all steps to achieve congruency. From the included articles, the names of the authors, the publication year, a brief description of the article, including the methods and the sample characteristics, the basic theoretical framework used in the study (if applicable), and the main findings were then extracted.

Characteristics of included studies

The 25 articles included in the review were published between 2001 and 2017 (Table 2), with $n=4$ studies from 2001–2006, $n=12$ from 2007–2012, and $n=9$ since 2013. The increasing numbers implicates that the issue gained importance over the past 20 years. All articles refer to empirical studies that were mainly conducted in Anglo-American countries (including the UK; $n=17$) and to a lesser extent in European countries (excluding the UK; $n=7$); just one study is from Asia ($n=1$). This suggests that the topic appears to be more relevant in the Anglo-American research area than in the European or Asian context. Interestingly, there was no German-

Table 2 Characteristics of included articles

Author(s)	Country	Participants	Disability ^a	Setting ^b	Organization	Sport activity	Theoretical-methodological approach	Results on social participation	Topic ^c
Anderson, Wozenroff, and Bedini (2008)	USA	22 girls (10–18 years)	PD	SEP	Local wheelchair sports	Basketball, track & field, swimming	Qualitative study applying Model of Social Support; Interviews (with participants)	Organized sport participants experienced higher and more varied levels of social support (role models, similarity to others) than informal groups	2,3
Anderson (2009)	USA	13 girls (10–18 years)	PD	SEP	Local wheelchair sports	Basketball, track & field, swimming	Qualitative study applying Model of Identity Development; semistructured interviews (with participants)	Organized wheelchair sport contributes to children's identity formation through social interaction	2,3
Atherton (2007)	UK	27 deaf clubs	HI	SEP	Local deaf sport clubs	Multiple sports	Qualitative study using document analysis of disability magazines	Disability club activity provides social contact and cohesion of the deaf community, with older club members serving as role models	1
Blauwet et al. (2013)	USA	149 adults (24–65 years)	SCI	n. s. (survey)	22% participate in organized sport	Multiple sports	Quantitative cross-sectional study using (not specified) questionnaire (for participants)	Chances of being employed for people with a spinal cord injury participating in organized sport were two times higher ($p < 0.01$; OR = 2.40)	4
Carter et al. (2014)	UK	29 non-disabled children (21 girls, 8 boys); 10 parents	PD	INC	Local wheelchair club	Not specified	Qualitative study using participant observation, focus groups and interviews (of children and parents)	Children with disabilities gained confidence to be part of a group and making new friendships through inclusive wheelchair sport	1
Corraza and Dyer (2017)	Italy, UK	38 adults (15 disabled, 23 abled; 17–65 years)	n. s.	INC	Local rugby club	Rugby	Qualitative case study applying Model of Social Inclusion (Simplician et al., 2015); semistructured questionnaire (for participants)	A Mainstream Rugby Club has positive social impact with enhanced social networks; an increase in social capital and personal development	1
Crawford et al. (2015)	UK	101 adults (> 18 years)	ID	INC	Special Olympics, Mencap sport	Multiple sports	Quantitative cross-sectional study, using Social Support Questionnaire Self Report (SSSR; for participants)	Participants of Special Olympics and Mencap sport programs show higher levels of self-esteem ($p < 0.05$; OR = 0.77) and lower stress levels ($p < 0.05$; OR = 1.01) than non-athletes; however, there is no relationship with quality of life ($p > 0.05$; OR = 0.769) and an engagement in social networks ($p > 0.05$; OR = 0.95)	1

Table 2 (Continued)

Author(s)	Country	Participants	Disability ^a	Setting ^b	Organization	Sport activity	Theoretical-methodological approach	Results on social participation	Topic ^c
Darcy and Dowse (2013)	Australia	556 people (age: n.s.)	ID	SEP	Members of various disability organizations	Not specified	Qualitative study using online, interviewer-completed questionnaire (for participants)	Independent people with disabilities (requiring low to moderate support) show higher levels of participation and receive stronger social benefits (e.g., belonging, companionship and achievement) than those with strong support needs	2, 3
Devine and O'Brien (2007)	USA	8 children (12–16 years), each 4 dis-/abled	ID	INC	Local inclusive summer camp	Swimming, canoe, rope course	Qualitative study applying Contact Theory; interviews (with participants)	Sport camp participants experienced both positive and negative aspects of social contact (e.g., nature, quality, conditions of contact)	1
Goodwin and Staples (2005)	Canada	9 youths (14–18 years)	SBD, BEH	SEP	Local summer sport camp	Multiple sport	Qualitative study using interviews (with participants)	Youths with disabilities participating in a separated sport summer camp developed a strong sense of community and social belonging	2
Goodwin, Lieberman, Johnston, and Leo (2011)	USA	13 youths (9–15 years)	VS	SEP	Local summer sport camp	Multiple sport	Qualitative study using focus groups and interviews (with participants), and field notes	Camp participants gained feelings of belonging to a community through positive interactions and reciprocal relationships with their disabled peers	1, 3
Hanson, Nabavi, and Yuen (2001)	USA	48 adults (18–53 years)	SCI	SEP	University sport camp	Multiple wheelchair sport	Quantitative cross-sectional study using (not specified) questionnaire (for participants)	Sport camp participants showed higher levels of mobility ($p < 0.001$, $d = 0.28$) occupation ($p < 0.001$; $d = 1.47$) and social integration ($p < 0.001$; $d = 0.89$) than non-athletes ^d	4
Hassan, Dowling, McConkey, and Menke (2012)	Serbia, Poland, Ukraine, Germany	25 youths (12–25 years)	ID	INC	Special Olympics sport program	Football, basketball	Qualitative study using interviews (with participants, coaches, parents, community representatives)	The Special Olympics program had a positive impact for disabled athletes on their social relationships and received social support	1, 3
Kristen, Patriksson, and Fridlund (2002) Kristen, Patriksson, and Fridlund (2003)	Sweden	20 children (9–15 years)	PD	INC, SEP	Disability and regular community sport clubs	Orienteering golf, archery	Qualitative study applying Holistic Taxonomy; interviews (with participants' parents)	Sport club participation provides social relationships (e.g., new friends) and being part of a social group (e.g., making new friends, feeling of togetherness and acceptance)	1,3
Lyons, Cornelle, Coker, and Ellis (2009)	USA	120 children (4–17 years)	MD	SEP	Community baseball league	Baseball	Qualitative study using (own designed) questionnaire (e.g., perceived participation benefits; for the parents)	Parents report that their children's participation in a communal baseball league increases the children's social skills (93%) and their friendship-making (93%)	1

Table 2 (Continued)

Author(s)	Country	Participants	Disability ^a	Setting ^b	Organization	Sport activity	Theoretical-methodological approach	Results on social participation	Topic ^c
McConkey, Dowling, Hassan, and Menke (2013)	Germany, Hungary, Poland, Serbia, Ukraine	40 youths (per country; 12–15 years)	ID	INC	Special Olympics sport program	Football, basketball	Qualitative study using interviews (with participants, coaches, parents, community leaders)	Participation in a Special Olympics program promotes creating inclusive relationships, building community alliances and a positive perception of athletes with disabilities	1, 3
McVeigh, Hitzig, and Craven (2009)	Canada	90 people (> 15 years)	SCI	n.s. (survey)	33% engaged in organized competitions	Multiple sports	Quantitative cross-sectional study applying Community Integration Questionnaire (CIQ; for participants)	Participants in organized sport showed higher levels of community home integration (e.g., leisure activities, work and home situation) than non-sport participants ($p < 0.01$; OR = 4.75)	4
Medland and Ellis-Hill (2008)	UK, USA, Canada, the Netherlands	20 people (21–55 years), 11 disabled, 9 abledbodied	DIFF	R-INT	Wheelchair sport league	Basketball, cycling, tennis, racing	Qualitative study using questionnaire (e.g., experienced discrimination; for participants)	Participation of non-disabled athletes in wheelchair sport promotes building inclusive friendships and changing society's perceptions of disabled people	1, 3
Nicholson, Brown, and Hoye (2014)	Australia	1833 adults (Ø 55 years)	DIFF	n.s. (survey)	67% involved in sport organizations	Multiple sports	Quantitative cross-sectional study using Multidimensional Scale for Social Support (MSPSS; for participants)	Community-based sport activities have a positive effect on social support (perceived support from family, friends and significant others; $p < 0.01$; $R^2 = 0.05$) ^d	3
Ninot, Bilard, Delignières, and Sokolowski (2000)	France	49 female youths (13–17 years)	MD	INT, SEP	Local sport competitions	Basketball, swimming	Quantitative longitudinal study using Self-Perception Questionnaire; for participants)	Participants in separated and integrated training groups perceived similar general self-worth ($p < 0.001$) and social acceptance ($p < 0.05$)	2
Platt et al. (2018)	USA	47 adolescents (13–18 years)	PD	SEP	Community paralympic sport clubs	Multiple sport	Quantitative cross-sectional study applying Athletic Identity Measurement Scale (AIMS; for participants)	The amount of time in sports participation contributes to athletic identity ($p < 0.05$)	2
Spencer-Cavaliere and Peers (2011)	Canada	9 female athletes (22–55 years)	PD	R-INT	Local basketball league	Wheelchair basketball	Qualitative study using semistructured interviews applying Athletic Identity Measurement Scale (AIMS; for participants)	Sport participation with non-disabled players contributed to a positive self-perception with enhanced athletic identities	2
Tsai and Fung (2009)	Hong Kong	49 parents of children with intellectual disabilities	ID	INC	Local organizations providing sport programs	Multiple sport	Qualitative study using interviews (with parents)	Most parents experienced rejection by staff and other participants when searching inclusive sport programs for their children. A lack of quality contact and understanding between people with and without disabilities is reported	1

Table 2 (Continued)

Author(s)	Country	Participants	Disability ^a	Setting ^b	Organization	Sport activity	Theoretical–methodological approach	Results on social participation	Topic ^c
Urbanski, Bauerfeind, and Pokaczajlo (2013)	Poland	30 adults (24–44 years)	SCI	SEP	Local organized team and individual sport	Multiple sport	Quantitative cross-sectional study applying Community Integration Questionnaire (CIQ; for participants)	Organized sport positively affect the level of community integration (home, social, productive scales; $p < 0.05$; $d = 0.12$) ^d	4
Weiss, Diamond, Demark, and Lovald (2003)	Canada	97 people (9–43 years)	DD	SEP	Local organized team and individual sport	Multiple sport	Quantitative cross-sectional study using Perceived Competence Scales (for participants and parents)	Involvement in Special Olympics sport programs is positively related to the participants' self-concept, i.e., perceived physical competence ($p < 0.05$; $R^2 = 0.14$), general self-worth ($p < 0.05$; $R^2 = 0.11$), and social acceptance ($p < 0.01$; $R^2 = 0.14$)	2

OR odds ratio

^aPD physical disabilities, ID intellectual disabilities, MD mental disabilities/retardation, HI hearing impairments, SCI spinal cord injury, VI visual impairments, SBD sensory and behavioral disabilities, DIFF different disabilities, DD developmental disabilities, n.s. not specified

^bSEP separated, INC inclusive, R-INT reverse integration, n.s. not specified

^c1 = social contacts, interactions and relationships; 2 = self-perception and identity formation; 3 = social acceptance and support; 4 = community integration

^dPost calculation of the effect size

(-language) study, even though there are plenty of German articles encompassing the topic of participation and inclusion of people with disabilities, also for organized sport (e.g., Baumann, 2004; Becker & Anneken, 2013; Heubach, 2013; Seitz, Meier, & Adolph-Börs, 2016; Wicker & Breuer, 2014); however, they do not focus on social participation and its associated aspects as this review intends. The included studies examine participants with different forms of disabilities: $n = 10$ of the studies focused on people with physical disabilities (including visual and hearing impairments), $n = 12$ on people with intellectual disabilities (including mental, behavioral, developmental disabilities) and $n = 3$ included both. Regarding the sport context, the studies deal with different organizational settings with $n = 11$ of the studies analyzing separated settings, $n = 9$ inclusive or integrative settings,² and $n = 2$ both settings; in $n = 3$ of the studies the setting was not specified. Consequently, the studies provide broader information about social participation of people with different forms of disabilities engaged in different sport settings.

Two third of the studies ($n = 16$) followed a qualitative approach mainly applying semistructured interviews as instruments with structured or open coding as content analysis strategy. The smaller part includes quantitative studies ($n = 9$), based on standardized questionnaires and mainly a cross-sectional design. Here, out of the nine quantitative studies seven applied established questionnaires (e.g., social support, self-concept, community integration, and social support questionnaires) using analysis of variance (ANOVAs) or regression models as the analysis strategy. In both the quantitative and qualitative studies, aspects of social participation were measured by self-assessment of the involved participants with disabilities and/or assessment by others. However, the significance and generalization of the results

² A specific assignment to the integrative and inclusive setting as outlined in Sect. "Opportunities of participation for 50 people with disabilities in organized 51 community sport" is not possible due to a lack of information given in the studies.

differ. As the qualitative studies either deal with specific cases or the sample sizes are relatively small, ranging from 8 to 49 participants, generalization is admittedly limited; even more critical, generalization and validity was not discussed in the qualitative studies. In contrast, the quantitative studies involved greater samples, but were, however, still not large with four studies observing 20 to 49 participants, five studies 90 to 149 participants and just one of them being a large-scale study with 1833 participants. All quantitative studies reveal significant results. In **Table 2** the respective significance levels are displayed in detail as reported in the studies, whereas in the following result chapter it is just indicated whether the “Results” section are significant ($p < 0.5$) or not ($p > 0.05$). In $n = 4$ studies the effect sizes were also reported. For those studies giving no information, the authors executed a post-calculation of the respective effect sizes according to the applied analysis (for $n = 3$ studies); however, that failed for $n = 2$ studies due to missing data.

Results

Koster et al. (2009) provided a valuable framework that lays out a systematic strategy for searching literature and for structuring the results. The identified topics refer either to one specific dimension or the respective subitems of this framework ($n = 17$ of the included studies) or to crossover topics ($n = 8$ of the studies). Therefore, original dimensions reported by Koster et al. were slightly modified. In the included studies the dimensions “contacts/interactions” and “relationships/friendships” were not demarcated from one another, but mostly treated as one topic and therefore merged. With regard to the dimension “self-perception”, the respective studies mainly dealt with issues of identity formation; therefore this topic was added to the dimension. As “social acceptance” was mainly analyzed in association with self-perception, this topic was assigned there. A further part of the studies focused on the subitem social support; thus, the dimension was labeled accordingly. Moreover, the analyzed studies

covered community integration (i.e., home, work and social integration) as a further topic that was labeled as a separate dimension. Consequently, the analysis of the included articles (crossover topics included, so that the total here is $n = 33$) reveals four subtopics with respect to social participation of people with disabilities in organized sport on which previous research focused on: (1) contacts, interactions and friendships ($n = 12$ of the studies dealt with this topic), (2) identity, self-perception and acceptance ($n = 8$), (3) social support ($n = 9$) and (4) community integration ($n = 4$).

Contacts, interactions and friendships

Twelve of the selected studies encompassed this subtopic of which eleven are qualitative studies and one is of quantitative nature (Crawford et al. (2015)). While four of these studies analyzed the separated setting, the remaining greater part focused on the inclusive setting.

With regard to the separated setting, the studies examined children and youths (4 to 18 years) with different forms of disabilities, engaged in different sports. Lyons et al. (2009) observed that participation of children with mental disabilities (4 to 17 years) in separated communal baseball leagues (USA) enhances their social interactions as participation increases their social skills and their friendship-making. That also applies for physical disabilities; as Kristen et al. (2002) pointed out that participating in a separated disability sport club promotes the gaining of new friends.

Besides these positive results, other studies also revealed some critical aspects. In this respect, Goodwin et al. (2011) reported in their qualitative study that youth (9 to 15 years) with visual impairments, participating in a separated sport camp, experienced positive interactions and reciprocal relationships with their disabled peers. However, the youths contrasted that to the social isolation and physical activity void they experienced at home. Similarly, Atherton (2007) argued that joining separated deaf sports clubs provides social contact with other deaf

people and promotes the social cohesion of the deaf community. However, greater social benefits were gained from playing in the company of their non-disabled peers than with other deaf people.

Regarding the inclusive setting, the studies mainly focused on people with intellectual disabilities in younger ages (12 to 25 years). In these studies, the positive contribution was observed, too; however, here the more negative aspects were reported. Carter et al. (2014) found that children, engaged in inclusive wheelchair clubs, gained confidence to be part of a group and making new friendships. Moreover, the benefits seem mutual, as “the children enjoyed playing together in wheelchairs and both children with and without disabilities gained insights into each other’s world” (p. 938). In accordance with that, Corraza and Dyer (2017) analyzed local inclusive rugby clubs and demonstrated a positive impact on social networks as both disabled and non-disabled participants (17 to 65 years) reported to develop new relationships and friendships within and outside the club activity. In the same direction, but focusing on younger people, Hassan et al. (2012) concluded that inclusive Special Olympics Unified Sport Programs for people with intellectual disabilities (12 to 25 years) promote the building of social relationships between the disabled and non-disabled athletes based on mutual trust and shared values, which leads to the development of strong social ties between the team members. Moreover, participants also reported a greater degree of interaction between athletes outside the playing field through non-sport activities, i.e., fostering networks within the disability community. The positive impact, such participation has on the creation of inclusive and equal bonds, was also confirmed in the follow-up study by Mc Conkey et al. (2013). However, this study revealed in more detail that “when these bonds were absent, there was less evidence of mutual participation in community settings” (p. 8). More specifically, Devine and O’Brien (2007) showed that adolescent participants with intellectual disabilities (12 to 16 years) of an inclusive sport camp experienced both positive and negative aspects of social contact with

respect to its nature, quality, and conditions. Making new friends was perceived as positive because the contact was experienced as personal and mutually rewarding if the contact was based on equal status and common interests. In contrast, the social contacts were regarded as weird and frustrating when they were superficial, lacking reciprocity or based on unequal status or contrived friendships. For older ages (12 to 55 years) and the reverse integrative setting, Medland and Ellis-Hill (2008) highlighted that reverse integration was completely favored by the abled-bodied. In contrast, some of the disabled participants expressed their disapproval and concern that they would no longer be considered as athlete but as disabled, when “someone who is an intruder or faking it” (i.e., able-bodied) participate (p. 113).

Tsai and Fung (2009) even reported consistent negative aspects as they revealed that children with intellectual disabilities experienced a lack of quality contact and understanding between them and their abled-bodied peers. Similarly, Crawford et al. (2015) observed in their quantitative study no significant relationship as an involvement of people with intellectual disabilities (over the age of 18) in an inclusive Unified Sport Program did not contribute to their engagement in social networks.

To summarize, the reviewed studies show that participation in organized community sport can contribute to enhance the social contacts, interactions and friendships of people with different forms of disabilities (e.g., physical, visual, and intellectual) and different ages. On the other hand, however, the results also indicate that the contacts, interactions and friendships are received more frequently and deeper with disabled peers in the separated setting than with non-disabled peers in the inclusive setting; thus, there is evidence that the setting seems to play a decisive role.

Identity, self-perception and acceptance

Twelve of the selected studies focused on this subtopic. Three of them are quanti-

tative studies that coincide in their results of a positive contribution.

Crawford et al. (2015) revealed in their quantitative study of people with intellectual disabilities significant but small effects as participants of Special Olympics sport programs showed higher levels of self-esteem and lower stress levels. Additionally, Weiss et al. (2003) reported in their quantitative study that involvement of people (9 to 43 years) with developmental disabilities in separated Special Olympic sport programs in Canada has a significant but small effect on self-concept with respect to their perceived general self-worth, physical competence, and social acceptance. Moreover, this study reveals that, not age and gender, but the number of sports and years spent on sport participation emerged as significant predictors. Similarly, but for different age and settings, Ninot et al. (2000) observed in their quantitative study in France that female adolescents (13 to 17 years) with mental retardation participating in separated training groups of Special Olympics, integrated scholastic teams and adapted physical activity groups (all basketball and swimming) significantly perceived similar social acceptance and general self-worth in all groups.

In all the qualitative studies, a positive contribution was consistently observed, too. Here, the context differs more with both physical and different forms of intellectual disabilities, separated and inclusive settings, and different ages and kinds of sport. In detail, Goodwin and Staples (2005) reported that youths (14 to 18 years) with behavioral disabilities participating in a separated sport summer camp in Canada positively influenced their identity developments (e.g., expressed their independence, learned to be self-reliant). The positive contribution to identity and acceptance was also reported by Darcy and Dowse (2013) reported; people with intellectual disabilities, engaged in separated disability sport, experienced a “sense of belonging associated with building confidence with others, enjoyment with friends and being part of the community like everyone else” and moreover reported “increasing levels of independence and building and enhancing family relationships” (p. 403).

The same applies for physical disabilities. According to Anderson et al. (2008) and Anderson (2009) an engagement in separated wheelchair sport of girls (10 to 18 years), contributes to their identity formation with respect to their feeling of being similar to others. For similar age, Kristen et al. (2002, 2003) revealed in their qualitative study in Sweden that the setting did not matter, as the participation of children (9 to 15 years) with physical disabilities in both disability clubs (separated) and regular clubs (inclusive) was regarded by the children’s parents as important to being part of a social group (i.e., experiencing a feeling of togetherness, having a good time, making new friends) and contributes to becoming someone (i.e., increased self-confidence; acceptance in group). The results remain similar, also for older ages and in an inclusive setting. Spencer-Cavaliere and Peers (2011) reported in their qualitative study in Canada that engagement of female adults (22 to 55 years) with physical disabilities in an inclusive setting (more precisely in a reverse integrative setting with non-disabled joining a disability group) contributes to their self-perception with an enhancement of their athletic identities and abilities. Accordingly, Medland and Ellis-Hill (2008) reported in their qualitative cross-national Anglo-American study that the participation of non-disabled athletes (21 to 55 years) in reverse integrative wheelchair sports contributes to the acceptance of the disabled participants and supports to change society’s perception of them.

On the other hand, and in contrast to the quantitative studies, two of the qualitative studies also revealed some critical aspects that diminish the positive picture. Anderson et al. (2008) discovered “that participants did not think of themselves as necessarily like other girls without disabilities, but defined themselves more by their disabilities” resulting in that “their interactions reflected camaraderie amongst those who have a disability rather than with able-bodied girls” (p. 196). Also, Spencer-Cavaliere and Peers (2011) stated “although [disabled] participants identified with the role of athlete, they felt that others, outside the wheelchair basketball commu-

nity, viewed them as disabled” resulting in that there are “apparent differences between perceived self-identity and social identity outside of the sporting community” (p. 304).

In summary, both the quantitative and the qualitative studies show uniformly that organized community sport contributes to social acceptance and promotes the development of a positive self-concept and (athletic) identity of people with disabilities; regardless the age, form of disability and whether the setting is separated or inclusive. However, it lacks on comparative findings whether the levels of acceptance, self-concept, and identity differ between disabled and non-disabled people. The two qualitative studies mentioned indicate that the perceived levels are lower for the disabled people, in particular when participating in an inclusive setting where a disability becomes more obvious. As it was stated before with respect to contacts, interactions and friendships, the setting also appears to be decisive for identity and acceptance; even though the evidence is not that strong.

Social support

Six of the selected studies provide information about social support; two of them are quantitative. The certainly most relevant is the quantitative study of Nicholson et al. (2014) based on a large population sample in Australia with 1833 adults (mean age 55 years) comprising different forms of disabilities. This study revealed that community sport activities have a significant but small effect on social support (i.e., perceived support from family, friends and significant others). Effects of perceived support are even significantly higher when having a partner, being born in Australia and being female. However, the involvement in organized sport produces significantly lower levels of social support compared to other types of voluntary associations. In contrast, the effect of organized sport is significantly higher than being employed full time, being highly educated or attending religious services.

Organized sport’s contribution to social support was also observed by Has-

san et al. (2012) in their qualitative cross-national European study. Interviews showed that coaches engaged in inclusive Special Olympic sport programs (football, basketball) provide strong social support in and beyond sport for participants with intellectual disabilities (12 to 25 years) and serve as role models for them. Moreover, the coaches contribute to establishing networks of social support by selecting partners (e.g., schools or local community organizations); therefore McConkey et al. (2013) concluded in their follow-up qualitative study that Special Olympics sports promote the building of alliances within local communities.

Anderson et al. (2008) showed in her qualitative study in more detail that female youths (10 to 28 years) with physical disabilities engaged in a separated wheelchair sport group (basketball, track and field, swimming; USA) experienced higher and more varied levels of social support compared to an informal activity group. The participants of the organized group could specifically name people serving as role models for them and those people’s reactions were more related to sport and goal achievement than to their disability. In a follow-up qualitative study, Anderson (2009) concluded that with respect to social support socializing agents are mainly family members, peers, and significant adults, such as caregivers and coaches who serve as role models for the participants with disabilities. However, Goodwin et al. (2011) reported in their qualitative study that youth with visual impairments (9 to 15 years) participating in a separated camp with multiple sports (USA) received strong support under safe environment conditions by their coaches that, on the other hand, limited the youths’ opportunities to be independent.

More negative, Darcy and Dowse (2013) identified in their qualitative study in Australia a wide range of constraints for people with intellectual disabilities to participate in a separated disability sport setting, which includes the “lack of paid carers or volunteers to assist in accessing and participating in activities; once at the sport, respondents reported a lack of assistants/supporters or coaches in

chosen activities to provide appropriate support tailored to the needs” (p. 400).

In summary, existing research shows that mostly people with disabilities participating in organized sport also receive the respective social support. In contrast, there are two studies stressing the negative side where participants received poor support or that if the support is strong that may limit the autonomy development at the same time. The mainly positive outcome seems to apply for a broader context as it was observed in different contexts: in separated and inclusive settings, for different forms of disabilities, gender, age and sport. Consequently, there is (still) no evidence that the context matters for social support. On the other hand, the empirical evidence is restricted as the studies were mainly qualitative ones with small samples resulting in a limited generalizability; only the study of Nicholson et al. (2014) provides significant results based on a large sample.

Community integration

For community integration, four selected studies, all of quantitative nature, were taken into account. Hanson et al. (2001) demonstrated with their quantitative study that adult participants with spinal cord injuries (18 to 53 years) participating in a separated University sport camp (USA) showed significantly higher levels of community integration than non-athletes, revealing large effects with respect to occupation (e.g., maintaining a job) and home integration (e.g., supporting a family), and medium effects on mobility and physical independence. Similarly, McVeigh et al. (2009) showed in their quantitative study of people with a spinal cord injury (24 to 64 years) that the overall community integration (comprising subscales of home, social and work integration) is significantly higher for organized sport-participants than for non-sport equals. The effect also remains when taking context variables into account (e.g., sex, age, transportation, region of residence, and employment), but with the effect size decreasing from medium to small. In contrast, the study of Hanson et al. (2001) did not take such context variables into account in

their analysis. More in detail, Urbanski et al. (2013) revealed in their quantitative study of adults with spinal cord injuries (24 to 44 years) in Poland no significance relationships as the type of organized club sport in a separate setting (team vs individual sport) did neither affect the level of community integration (comprising subscales of home, social and work integration), nor did the level or duration of injury or age. Whereas the aforementioned studies analyzed the three community integration scales, Blauwet et al. (2013) focused in their quantitative study on the productive scale showing that organized sports have a significant but small effect: people with spinal cord injuries (24 to 65 years) participating in organized sport activities in the USA are significantly two times more likely to be employed than participants in informal sport activities. Whereas higher levels of education and younger age are also significant for employment, while sex, duration of injury, wheelchair use, and participation in individually planned sport activities are not.

Summing up, the studies draw a clear and consistent picture that organized sport in a separated setting contributes to community integration of adults with spinal cord injuries. As all of the studies are from quantitative nature providing significant results, strong evidence can be assumed. Furthermore, all of them examined comparable samples, namely adults with spinal cord injuries in a similar age range (18 to 65 years) participating in a separate setting with different sports. Regarding the context, the results indicate that sex, duration and severity of the disability did not affect integration; in contrast, the level of education did and for age the results differ. However, general statements are limited as studies analyzing further context variables, like other forms of disabilities, younger age group, and in particular whether the separated or inclusive setting is more conducive to community integration, are still lacking.

Discussion

The results draw a rather ambivalent picture of social participation of people

with disabilities in organized community sport with both positive and negative outcomes. Overall, the positive outcomes predominate with the results illustrating that organized sport contributes to foster social contacts, interactions and friendships of people with disabilities, helps to develop their identity formation and social acceptance, and enhances the social support and their community integration. Therefore, the results undoubtedly underscore the potential of organized sports to contribute to social participation of people with disabilities. However, the reported negative outcomes draw a complex picture of social participation and sometimes appear to be contradictory, which Lee, Causgrove-Dunn, and Holt (2014) also indicated. The negative aspects demonstrate that organized sport not per se exerts a positive influence on social participation, but only under certain conditions; thus, the context affects the participation process. Interestingly, the negative aspects were mostly reported in (reverse) integrative or inclusive settings when the social participation of people with disabilities was compared to non-disabled people. A part of the studies showed that although positive effects were measured for the disabled people in organized sport, these were lower than for the non-disabled participants. Accordingly, people with disabilities often had fewer social contacts, interactions and friendships as well as they perceived lower levels of self-concept-related athletic identity and competence and social acceptance than people without disabilities. Sørensen and Kahrs (2006) gained more detail pointing out that only a few people with disabilities survive in integrative and inclusive mainstream sport, whereas “those with greater needs for support and resources will not be able to adopt the practices and values of able-bodied sport and therefore have fewer opportunities to participate” (p. 199). In this respect, Spencer-Cavaliere, Thai, and Kingsley (2017) showed the benefits of separated settings for people with stronger support needs, emphasizing the importance of that setting.

Consequently, it is questionable if the integrative and inclusive setting, as the

UN CRPD and associated approaches propose, is the most beneficial way for effective social participation. It appears that rather a mixed bag of participation settings and levels seems indicated considering peoples' different conditions. Therefore, we advocate that all settings of participation—separated, (reverse) integrative and inclusive—have their justification as they all contribute to social participation, albeit to a different extent; furthermore, it has to be underlined that all of them have their respective advantages and disadvantages. Therefore, as Misener and Darcy (2014) emphasize, “the goal is to provide people with disability choice to participate in sport in the way that they want to, with whom they want to participate, and in the way they wish to participate” (p. 4). Given this, more open-minded research about carving out the respective chances and risks of each participation setting, i.e., the pros and cons of separate, integrative and inclusive organized sport activities, is indicated. Hereby, it is important to analyze in detail for whom and under which conditions which setting is appropriate, aiming to add a scientific point of view to the sociopolitical intentions claiming for an inclusive-only approach in order to produce a more balanced picture of social participation.

Regarding the conditions, there are various factors, besides the depicted context factors as form of disability, age, setting and sport, to consider that influence the process of social participation (Jaarsma et al., 2014; Shields et al., 2012), including individual level (e.g., participants' motivation and motoric skills), social level (e.g., participants' attitudes and social competences), organizational level (e.g., organizations' resources), and environmental level (e.g., communities' policy programs).

Consequently, further research is required considering the context factors. Nevertheless, qualitative studies are valuable for discovering in-detail information; most of all, there is a need for large sample quantitative studies as they ensure strong evidence; this concern German-speaking research in particular. Such studies should apply multi-level analysis for examining the

relationship between relevant context factors and social participation according to the Koster et al. (2009) modified and extended framework, either in its entirety or in parts, in order to get a comprehensive understanding of the process of social participation. In doing so, factors on the organizational level should be considered in particular as Jeanes et al. (2018) stated that “at an organizational level, sport is currently not yet achieving this ambition [of effective participation]” (p. 3). Waring and Mason (2010) demonstrated that there is a link between increased organized sport opportunities and greater levels of social participation; however, there is a lack of such opportunities. Thus, Misener and Darcy (2014) blame organizational structures for barriers and failures to social participation stating that “people with disabilities participate less in all forms of social participation and sport is no different. Much of the lower levels of participation are attributed to discriminatory management practices rather than a lack of desire to participate” (p. 3). Tsai and Fung (2009) support this statement, too, concluding that people with disabilities continue to face systematic discrimination within the community and negative social attitudes due to “the ineffectiveness of organizations in providing well-managed social contact opportunities and sport participation information” (p. 165). That suggests that an enhancement of community sport structures and resources is highly indicated to strengthen the positive effects while minimizing and mitigating the negative effects. Against this, Suzuki (2017) argued towards a stronger need for meso-level action that means community sport organizations needs to engage in capacity building at an organizational level. Relying on capacity building makes sense because capacities are much easier to control compared to other barriers to social participation as, for instance, negative interpersonal and societal attitudes. Organizational capacities that are considered critical include finances, human resources, infrastructure and processes, relationship and network as well as planning and development (Wicker & Breuer, 2014;

Misener & Darcy, 2014). Corraza and Dyer (2017) demonstrated that a supportive mainstream club structure was crucial to maximizing positive impacts for participants. Similarly, Lee et al. (2014) reported that high human resource capacity of mainstream clubs (e.g., supportive and educated coaches, understanding teammates) were key factors that people with disabilities realize social benefits and, to some degree, mitigate negative consequences. Importantly, capacity building includes both disability and mainstream community sport organizations. With the UN CRPD social participation is no longer considered as only a process of adoption at the individual level with self-empowerment as a promising strategy for effective participation (Block, Taliaferro, & Moran, 2013). Rather, also processes of change at the systemic level are required, which means that organized community sport has to provide appropriate structures and resources that allow for effective social participation (Gieß-Stüber, Burmann, Radtke, Rulofs, & Thiemann, 2014). That means that managing and governing organized community sport for people with disabilities is no longer the sole responsibility of disability sports organizations, but there is a shift that also mainstream sports organizations are responsible (Bouttet, 2016). Thus, this implicates that community governing bodies have to provide respective sport policy programs for their resident sport organizations that are supportive to the organizations’ capacity building (Jeanes et al., 2018; Spaaj et al., 2014).

Corresponding address



Christoffer Klenk
Institute of Sport and Sport Science, University of Freiburg
Freiburg, Germany
christoffer.klenk@sport.uni-freiburg.de



Julia Albrecht
Institute of Sport Science,
University of Bern
Bremgartenstrasse 145,
3012 Bern, Switzerland
julia.albrecht@ispsw.unibe.ch

Christoffer Klenk is a postdoctoral researcher at the department of Sport Pedagogy at the Institute of Sport and Sport Science, University of Freiburg, Germany. He received his PhD at the Institute of Sport Science at the University of Bern/Switzerland. His research mainly focuses on organizational development in voluntary sport organizations.

Julia Albrecht is a PhD student and research assistant at the Institute of Sport Science at the University of Bern, Switzerland. Her main areas of research are social integration of people with disabilities and migration background.

Siegfried Nagel is a full Professor and Director of the Institute of Sport Science at the University of Bern, Switzerland. His main fields of interest are sport development and sport organization research, particularly sports club development, as well as sports participation and social integration in sports clubs. From 2016 to 2018 he was President of the European Association for Sociology of Sport. He is speaker of the Sport Organisation Research Network.

Compliance with ethical guidelines

Conflict of interest C. Klenk, J. Albrecht and S. Nagel declare that they have no competing interests.

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