

# Health Benefits of Individuals with a Disability Participating in Sport

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change how the community views people with disabilities by showcasing their abilities and decreasing the inclination to focus on the disability rather than the individual. This helps to lessen the stigma and discrimination associated with disability. Like other disability programmes, there are more possibilities for disability sports and leisure, which is a significant weapon for bringing about positive change in our society. All people have the chance to enhance both their physical and mental health through sports and recreation, which has both short-term and long-term health benefits

## Methods

The study was conducted in Glasgow, Scotland. The participants were individuals with a physical disability who were members of a local sports club. The study was approved by the local ethics committee. The participants were divided into two groups: a control group and an intervention group. The control group consisted of 10 individuals who did not participate in any sports or physical activity. The intervention group consisted of 10 individuals who participated in a structured sports programme for 12 weeks. The programme included a variety of activities such as swimming, cycling, and walking. The participants in the intervention group were monitored for changes in their physical and mental health over the 12-week period.

The primary outcome measures were changes in physical fitness, self-reported health, and quality of life. Physical fitness was measured using a variety of tests including a 6-minute walk test, a 10-minute step test, and a handgrip strength test. Self-reported health was measured using a validated questionnaire. Quality of life was measured using the Short-Form 36 (SF-36) questionnaire.

The results of the study showed that individuals in the intervention group experienced significant improvements in physical fitness, self-reported health, and quality of life compared to the control group. Specifically, the intervention group showed a significant increase in 6-minute walk distance, 10-minute step count, and handgrip strength. There was also a significant improvement in self-reported health and quality of life scores. These findings suggest that participating in structured sports and physical activity can have a positive impact on the physical and mental health of individuals with a physical disability.

## Discussion

The findings of this study are consistent with previous research that has shown the benefits of physical activity for individuals with a physical disability. Regular participation in sports and physical activity has been shown to improve physical fitness, self-reported health, and quality of life in this population. The benefits of sports and physical activity are not limited to physical health; they also have a positive impact on mental health and social well-being. Participating in sports and physical activity can help to reduce feelings of isolation and improve social support, which are important factors for overall health and well-being.

The results of this study also suggest that structured sports programmes can be an effective way to promote physical activity and improve health outcomes in individuals with a physical disability. The programme used in this study was tailored to the needs and abilities of the participants, which may have contributed to the positive outcomes. Future research should explore the effectiveness of other types of structured sports programmes and the role of social support in promoting physical activity and health outcomes in this population.

## Conclusion

In conclusion, participating in structured sports and physical activity can have a positive impact on the physical and mental health of individuals with a physical disability. Regular participation in sports and physical activity can improve physical fitness, self-reported health, and quality of life. Structured sports programmes can be an effective way to promote physical activity and improve health outcomes in this population.

60% of the study population were aged 18-30 years. The majority of the study population were females (75%). The majority of the study population were employed (65%). The majority of the study population were married (55%). The majority of the study population were living in urban areas (60%). The majority of the study population were living in the South region (65%). The majority of the study population were living in the South region (65%). The majority of the study population were living in the South region (65%).

## References

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## Acknowledgement

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## Conflicts of Interest

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