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The Level Of Comfort Coaches Have For Dealing With Children With Behavioral Disabilities

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The Level Of Comfort Coaches Have For Dealing With Children With Behavioral Disabilities

Abstract

Studies have shown that children with behavioral disorders should be included in sports. This research looks at the comfort level coaches have with the idea of having children with behavioral disorders on their team. The research goes further into this question by looking at training as a possible option to increase the level of comfort. The study looks into the survey that was conducted and goes into further explanation as to how this affects youth sports. The discussion of the findings shows who is most affected by this research and what else can be examined.

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The Level Of Comfort Coaches Have For Dealing With Children With Behavioral Disabilities

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St. John Fisher College

Abstract

Studies have shown that children with behavioral disorders should be included in sports. This research looks at the comfort level coaches have with the idea of having children with behavioral disorders on their team. The research goes further into this question by looking at training as a possible option to increase the level of comfort. The study looks into the survey that was conducted and goes into further explanation as to how this affects youth sports. The discussion of the findings shows who is most affected by this research and what else can be examined.

Introduction

Across the United States we see a large number of children who have a number of different disabilities. While every child is given the chance to play sports, some lack that opportunity because they have behavioral disorders, or “invisible disabilities”, these would be disabilities like Attention Deficit Hyperactivity Disorder, that make it difficult for them to be coached by someone who doesn’t know how to teach them properly. It is not necessarily the child’s disability that prevents them from playing a sport; it is sometimes the coaching that prevents them. This is because many coaches of children’s sports teams are volunteers that aren’t trained to coach a child with a behavioral disorder. When a coach understands where every child is coming from and knows how to teach every child on their team works, then every child will truly have the chance to play sports. The only thing that will get this to happen is the coach’s attitude about the matter. This research will be conducted to find that with the proper training and education; coaches will be more comfortable in teaching kids who have these behavioral disabilities. The focus of this research is to see how coaches feel about having kids with behavioral disorders on their team. If they are for it, the research will see what kind of training they would like, if they want any at all. However, for the coaches that don’t want to have children with behavioral disorders on their team this research will find out why as well. This research will not only benefit the children with the behavioral disorders but it will also benefit the coaches of these teams. It

will help show that children with or without a disability can successfully play on the same teams.

Literature Review

Several areas of this topic have been researched and mostly all of this research comes up with similar results. Researchers Robbi Beyer, Margaret M. Flores, and Tiffanye M. Vargas-Tonsing have done a lot of research on the topic of kids with behavioral disorders participating in sport. This proves that this topic is something that a lot of people have questions about because of the fact that participating in sports can be beneficial to children with behavioral disorders. In two of the cases being used for this research they have questioned the attitudes of the coaches. One study found that of 36 coaches being questioned about 75% of them believed that children with invisible disabilities should be included in interscholastic sport (Flores, Beyer, & Vargas-Tonsing, 2012). This specific study also found that coaches believed they needed more training to they would know how to correctly coach the children with the behavioral disorders (Flores, et. al., 2012). These researchers also did another study that focused specifically on kids with Attention deficit hyperactivity disorder. It was found in this research that coaches who had dealt with kids who had ADHD were more willing to coach kids with ADHD again (Beyer, Flores, & Vargas-Tonsing, 2008). The study itself had some flaws to it that the researchers discussed at the end of their study but regardless of the flaws the findings can still be considered very helpful. It can still be considered

helpful because of the fact even with the limitations it sets up a general feeling from coaches about the topic. This helps set the stage for further research to be done. The major flaw that was discussed was the fact that the coaches had forced answers so there was no way for the coaches to elaborate on their thoughts. This limited the amount of information that the researchers could find. They even mention in their research that this is a limitation that should be corrected to find further research (Beyer, Flores, & Vargas-Tonsing, 2008). The majority of the literature available proves that allowing kids with behavioral disorder into sports is extremely beneficial to them but it is also beneficial to the coaches as well. One benefit of sports in general is that participants learn about sportsmanship. A coach can teach this in a variety of ways, but may have to change things up a little bit when there is a child with behavioral disorders on the team. One way they can go about this is using a benefits-based program, it has been proven that when this program is used there is a higher level of sportsmanship displayed (Wells, Arthur-Banning, Paisley, Ellis, Roark, & Fisher, 2008). There are a variety of techniques available to the coaches who believe, that with training, they can have kids with behavioral disorders on their team. In 2009, Beyer, Flores, & Vargas-Tonsing conducted research to see different strategies that can be used for coaching athletes in a youth sport setting. These different methods include ways to improve motor skills, promote social acceptance, and ways to provide instruction (Beyer, Flores, & Vargas-Tonsing, 2009). Using methods like that will help improve behavior, communication skills,

and social skills, especially in children with Autism and Asperger's (Yanardag, Yilmaz, & Aras, 2010). Some coaches may believe that coaching kids will be a difficult task, but with the correct education, this task can be made easier. In study done at the University of New Hampshire it was found that a coach is only as effective as they believe they are (Richards & Lee, 2012).

In a study done by Thomas Moran and Mairn Block, they found four main barriers that prevent children with behavioral disorders from participating in sport. These barriers include the leader of the program fears liability or don't know how to accommodate, coaches have a lack of knowledge or training, parent and child fears, and lack of appropriate programs (Moran & Block, 2010). Half of these barriers would not exist if coaches were trained to have kids with behavioral disorders on their team. The majority of the time the person in charge of the recreational programs is or was a coach, so they would then know how to accommodate the children with behavioral disorders. This helps justify the research that is going to be conducted.

What are Behavioral Disorders?

There are so many different types of behavioral disorders present in today's society. For my research I will be focusing on three very common disorders. These three are Autism Spectrum Disorder (ASD), Asperger's Syndrome, and Attention Deficit Hyperactivity Disorder (ADHD). While all three of these disorders are

becoming more and more common among children, not everyone is aware of exactly what these disorders are.

Autism Spectrum Disorder

Autism is a disorder that is diagnosed in “1 in 88 children and 1 in 54 boys” (para.1); in fact it is five times more likely that a boy will have autism than a girl (Autism Speaks, 2013). This disorder has no medical detection or cure (Autism Speaks, 2013, para.1). However, it is very beneficial if autism is recognized early in a child so that intervention services can begin as soon as possible (Autism Speaks, 2013, para.1). The sooner services can begin on a child the more helpful they will become. The major signs of autism can be detected in a child within the first two years of their lives. Some of these signs include, “no babbling by 12 months, no words by 16 months, and no meaningful, two-word phrases by 24 months” (Autism Speaks, 2013, para.3). Along with the signs of ASD there are several symptoms. The three main categories of symptoms include repetitive behaviors, communication difficulties, and social challenges (Autism Speaks, 2013, para.4). Children with autism sometimes prefer to be alone because they lack certain social skills, like listening, sharing and emotional cues (National Institute of Mental Health, 2011, para.5). They also have a hard time with communication whether it is talking or body language; along with these things autistic children often have repetitive behaviors they will do often (Autism Speaks, 2013, para.16). Autism is treated in a variety of ways. One of which is through medications that can help in controlling

some of the symptoms (NIMH, 2011, para.14). However, most children with autism are treated through therapists and classrooms with courses designed for kids with autism (NIMH, 2011, para.2).

Asperger's Syndrome

Asperger's Syndrome can be found on the high functioning end of the spectrum (Autism Speaks, 2013, para.1). People with Asperger's usually get focused on an interest and become somewhat of an expert on that interest. Some signs associated with Asperger's include limited "social interactions, repetitive speech, challenges with nonverbal communication, lack of eye contact, and awkward movements" (Autism Speaks, 2013, para.2). People with Asperger's often don't know until they are older because they may get diagnosed after they find they are having "serious difficulties" in school mostly because the diagnosis primarily focuses on the fact that they have a difficult time with social interactions (Autism Speaks, 2013, para.3). People with Asperger's have many similarities to people who have high-functioning autism (Autism Speaks, 2013, para.20).

Attention Deficit Hyperactivity Disorder

In the United States, attention deficit hyperactivity disorder is extremely common among children. Kids who have ADHD have "difficulty staying focused and paying attention, difficulty controlling behavior, and hyperactivity (over-activity)" (NIMH, 2011, para.1). The most common type of ADHD is combined hyperactive-impulse and inattentive (NIMH, 2011, para.4). This means that they have "at least

six or more symptoms of hyperactivity-impulsivity but are less likely to act out or have difficulties getting along with other children” (NIMH, 2011, para. 3&4). One of the major ways that ADHD is treated is by medications that control the symptoms (NIMH, 2011, para.1). These medicines are prescribed based upon age and symptoms. Another ways to help kids with ADHD is by “keeping a schedule, organize everyday items, be clear and consistent, and give praise or reward when rules are followed” all these things help kids stay a little bit more focused and well behaved (NIMH, 2011, para.19).

Methodology

Research Tradition

A post-positivism approach was used to conduct this research. This means I used both quantitative and qualitative data to find results (Gratton & Jones, 2010, p.27). In my research I saw that what I’m finding is relative knowledge, so I did not find any scientific data, rather data was dependent upon circumstances of a coaches personal opinion (Gratton & Jones, 2010). In order to do this, recreation coaches and volunteers were surveyed. In order to best test my question the survey was given out to a number of coaches in a number of different sports that way I could get the best results(Gratton & Jones, 2010). This survey was mainly made up of questions that can be answered on a numerical scale. However, some questions had a follow-up question that was a short answer so that more detail could be given to clarify their reasoning or thought about the question. It is also important that a post-positivist approach is used in this study because of triangulation, which gives

me a more detailed view of my findings (Gratton & Jones, 2010). Triangulation was used in this study is because it means that two or more methods were used in the study.

Theoretical and Conceptual Framework

When it comes to allowing kids with behavioral disorders to play on the same team as kids who don't have any disabilities there is the theory of inclusion. The theory of inclusion has made been more of an important topic within sports and can be carried out successfully. There are different aspects that the inclusion theory can be broken down by (Bailey, 2005, p.76). The first is spatial which has to do with "the proximity and the closing of social and economic distances" (Bailey, 2005, p.76). The second is relational which is "a sense of belonging and acceptance" (Bailey, 2005, p.76). The functional aspect relates inclusion to "the enhancement of knowledge, skills and understanding" (Bailey, 2005, p.76). The last is power, which says, "inclusion assumes a change in the locus of power" (Bailey, 2005, p.76). This theory will be applied in this study using the relational and functional aspects of the inclusion theory. My data will show how coaches feel about having kids with behavioral disorders on their team; this should show the relational aspect, while actually coaching the child will prove the functional aspect. Within this research the main question at hand is regarding whether or not coaches are comfortable with having athletes with behavioral disorders on their team. Though there isn't an exact definition, a behavioral disorder can best be defined as "any various forms of behavior that are considered inappropriate by members of the social group to which an individual belongs" (Behavioral Disorders, 2013). It's important that coaches

understand this accepted definition so they can recognize if a child on their team has a behavioral disorder and they can better understand what the basis of a behavioral disorder is. There are a lot of concepts with this topic including:

- Disability
- Benefits
- Barriers

The concept of disability can be broken down by type of disability, age level, and level of the disability. The benefits of topic include social interactions, increased skill level, more opportunities, and it is very therapeutic for the kids. Lastly, there are some barriers in this topic, like extremity of the disability, location, and access into these teams. These things could affect the coach's willingness or ability to have the athletes on their team. Looking at the concepts I will be able to find some common themes in my research. One of which should be acceptance of inclusion. Another should be the willingness to get training to help ensure that inclusion is something that can happen within a given sports league. The concepts will help me better understand the theory that I am using and will help me better answer my research question by looking further into the response of the coaches.

Design

Since there will be both quantitative and qualitative data, I will analyze my data, such as the demographics and the knowledge the coaches have about the specific disorders by using SPSS Statistics and a variety of tests. One test I will be running is a chi-squared test, which will compare the frequencies of the variables (Gratton & Jones, 2010, p.233). Another test I will run will be a t-test to compare

differences in variables among the group (Gratton & Jones, 2010, p.235). I will also be using open and axial coding for any short-ended questions in my survey such as, why they would or wouldn't coach a child with a behavioral disorder. The questions that I have come up with for survey are based off of previous research and the types of questions they asked or questions I was thinking of while reading the cases. Some of the questions asked in this survey will include:

- How do you feel about coaching children with behavioral disabilities?
- Have you ever coached a child with behavioral disabilities?
- Would you do it again? (Agree/Disagree)
- Would you coach a child with behavioral disabilities?
(Agree/Disagree)
- You would be willing to get training to learn how to coach children with behavioral disabilities. (Agree/Disagree)
- What kind of training do you believe would be most beneficial?
- Would you prefer to not coach children with behavioral disabilities at all?

By asking question like these we will be able to really understand a coach or volunteer is thinking about this specific situation.

Procedure

As previously mentioned, the participants of this survey will be recreational coaches and volunteers. The participants will be found from recreational sport groups around the Rochester area. I will start my looking up well-known recreation

facilities or groups in the area, that way I have perspective from many different sports. On their websites I will use the "Contact Us" section to find a specific person to email or send a generic email about getting a list of coaches and their email addresses. When obtaining the emails I will put them into an Excel spreadsheet so that I can keep all my contacts organized. If for some reason I can't get the emails in this way I will look to find the president's email or an email of a person high up in the organization. From there I will ask the coaches who take my survey if they know of any other coaches who would be willing to take my survey, otherwise known as convenience sampling (Gratton & Jones, 2010, p.284). The main starting point will be with any recreational center that Professor Bryson, a Sport Management professor at St. John Fisher, has contacts with because it is likely that they will be more willing to help in the research. One of the problems I may face with this survey is that coaches may answer one way but not necessarily mean it due to the sensitive topic at hand. Another problem I may face because of the sensitive topic is that a coach may have already coached a child with behavioral disorders and not even known because the parents withhold that information.

In order to ensure that the survey makes sense, I will run a pilot test of the survey and it will be given to 5-10 people. This way if I have to I can make any necessary changes to the survey before handing it out. From the pilot test I will start to hand out the survey and analyzing my data. While doing that I will have to make sure that all the participants answered all the questions, if for some reason they didn't, as long as they have answered 75% of the questions I will still count the answers that they gave me, if they have less than 75% of the questions answered

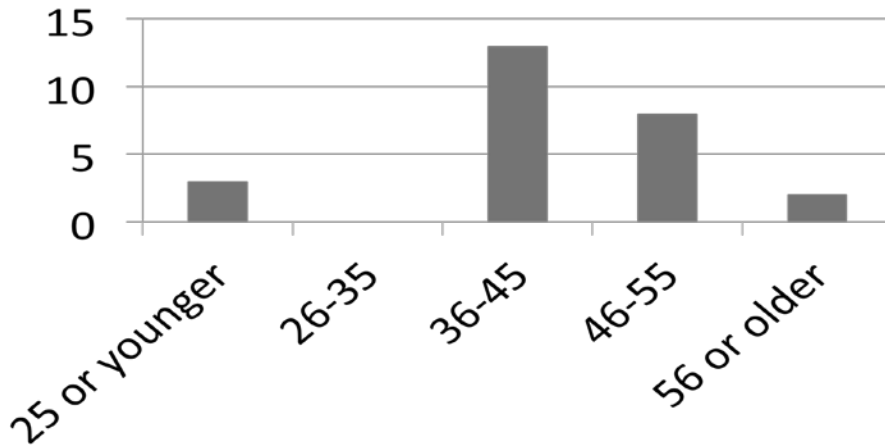
then their survey data will get thrown away. Because I am not asking students on campus, but rather adults that I do not personally know, I will make sure to send out permission emails (Appendix B) and thank you emails (Appendix D), so they know that I appreciate the time they took to answer my survey.

Results

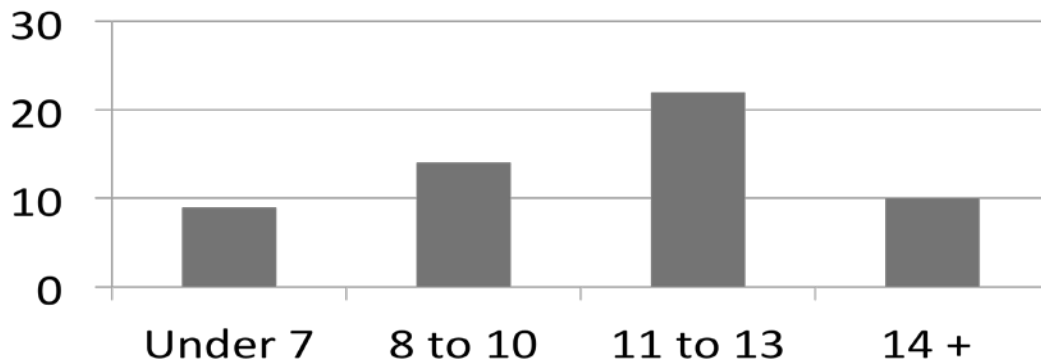
The main point of this study was to see how recreational coaches felt about having children with behavioral disorders on their team. This study also showed whether the coaches felt that training would be beneficial to them. This training could include topics such as the best ways to coach children with behavioral disorders, more information about the disorders as a whole, possible problems that may arise, and why it is important that these children are included. The results of the testing done show that of the test sample, just over 90 percent of the participants either have coached children with behavior disorders and would do it again, or haven't done it but are still willing to coach children with these disorders. Two participants of the survey said that they wouldn't coach children with the behavioral disorders because they were worried about the level of competitiveness within the sport. With the possibility of training these worries could become non-existent because the coaches will now know what exactly to do in a given situation or the children will be comfortable with starting sports at a younger age so they would be used to the competition

The samples of this study in general terms were recreational coaches in the Rochester area. Of the 23 participants that completed the survey, all were Caucasian. 19 were male and only 4 were female. The age of those sampled ranged

from younger than 25 all the way to over 56, the majority of which were between the ages of 36-45.

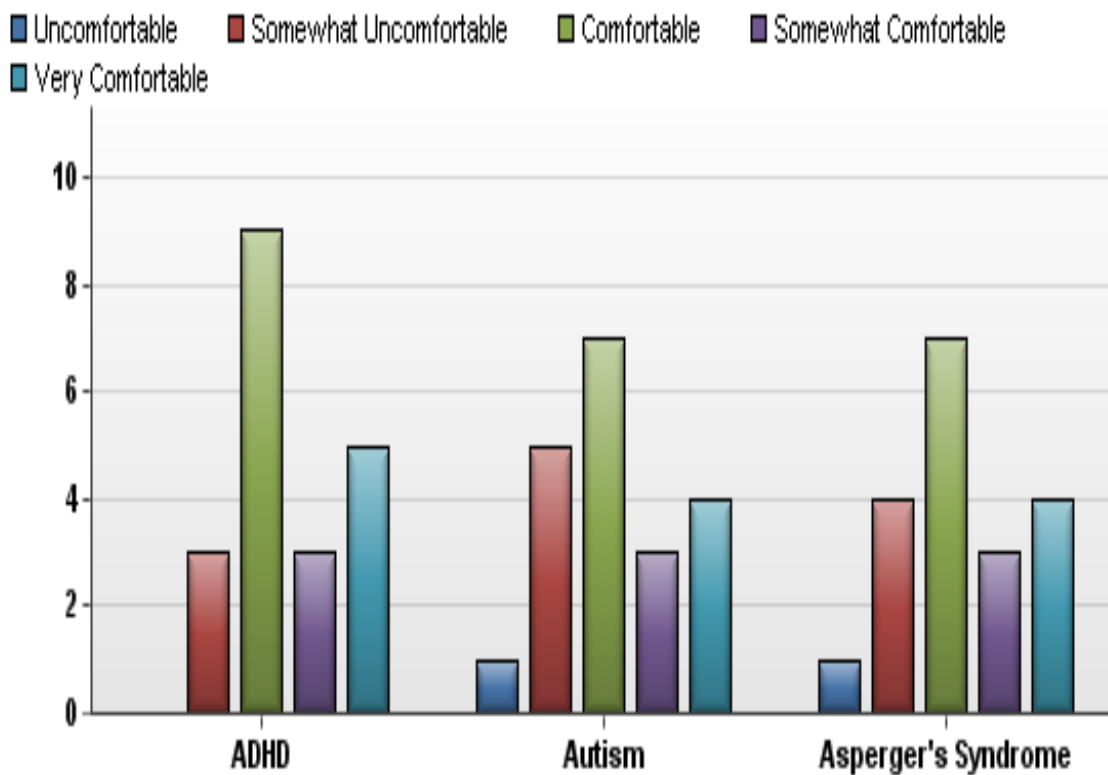


The coaches of this sample were from sports like football, basketball, soccer, swimming, softball, cheerleading, and the majority were from baseball. The age group of the kids being coached ranged from under 7 to over 14, most of the coaches were in charge of the age groups of 8-10 and 11-13



There were 25 surveys that were started; only two were thrown away. One participant disagreed with the consent form and another didn't answer enough questions to have their survey count in the results. Aside from those two surveys, no other data was tossed.

When all the tests were concluded the results showed that the coaches in the Rochester are comfortable with having children on their teams. It is also evident that there are many areas of training that would be beneficial to these coaches. This is especially important because some of the coaches weren't all fully knowledgeable of the disorders being looked at in this study. One of the other important statistics was that just over 80% of the participants have coached children with behavioral disorders. Even though there were a high number of coaches that have already coached children with behavioral disorder they were not experts on the specific disorder. That shows that this topic and the idea of possible training are influential in today's society. Below is a graph that shows the level of comfort coaches have with each of the disorders that was focused on in this study.



Discussion

This study showed that many coaches in recreational sport today are comfortable with having children with behavioral disorders on their teams. This conclusion is especially important for a great number of people. One of which are those involved in recreational sport, whether they be the coaches themselves or the president of the leagues. The other group of people that these results affect is the parents of the children with behavioral disorders. This is mostly due to the fact that there are parents who are nervous to put their kids in sports because they don't know if their children will be accepted by the coaches and the other athletes. Lastly, the results of this study will also benefit those who provide services to the children with the behavioral disorders because they will be the ones who would provide the best training for the coaches. The presidents of the youth sport leagues will see that the training will increase the sense of comfortableness the coaches have and they will allow the children who have behavioral disorders to be accepted on the sports teams. The previous research shows that kids with behavioral disorders should be included in sport. My research helped solidify that by showing that the coaches are not only comfortable with having these children on their team, but the coaches also want to be trained on these topics so that they can give the athletes the best experience possible.

There were some limitations in this study, which included the amount of the Rochester area that was surveyed. Only three suburban areas were surveyed and only certain sports from each area were included in this survey. Another limitation could be the age of the coaches, because of the fact the survey was given out via email all the coaches ended up being relatively the same age. This could sway the

results of the survey because of the fact that there wasn't an even disbursement of ages in the participants.

To focus more on this study future researchers could focus on a specific sport or even a specific age group. The age group that would be studied specifically would be teens and young adults because that will be where sports become extremely competitive. Another focus of this study in the future could focus more specifically on one time of behavioral disorder, or completely different ones. If there were to be more studies on the training aspect or how knowledgeable the coaches are it could be asked what the occupation of the recreational coach is, this is because teachers for example, may be more comfortable with children who have behavioral disorders. It could also be asked if the coach has children of their own because they might have some prior knowledge on the disorder because of that. My research has begun to scratch the surface with training youth coaches on behavioral disorders so with some change to the sample this is something the future researchers could look into more.

Appendix A

Research Survey

Q1 CONSENT FORM

Project Title: The Level Of Comfort Coaches Have For Dealing With Children With Behavioral Disabilities

Researcher: Rebecca Campbell

Advisor: Katharine A. Burakowski

E-mail: kburakowski@sjfc.edu

Phone: 518-248-7049

E-mail: rjc06877@sjfc.edu

Purpose and Description: The purpose of this study is to gain an understanding how comfortable coaches are with the idea of having a child with behavioral disorders on their team and if they feel that having some sort of training would be helpful. As a participant in this research, you are being asked to complete a survey that addresses how comfortable you are with coaching a child with a behavioral disorder. For example, you will be asked how you feel about coaching a child with a behavioral disorder. This survey will take approximately 10-15 minutes to complete. The information you provide may assist recreational departments in getting the training that some coaches may deem necessary to properly coach a child with behavioral disorders. Risks associated with participating in this survey are that your coworkers or supervisors could be aware of your participation through observation of you taking the survey or conversation within your organization. Responses to this survey will be kept confidential and results will be presented in an aggregate form. Names or contact information will not be included in the presentation of the results. Participation is voluntary. You may decide not to participate in this study and if you begin participating you may still decide to stop and withdraw at any time. Your decision will be respected and will not result in loss of benefits to which you are otherwise entitled. Having read the above and having had an opportunity to ask any questions please complete the survey if you would like to participate in this research. By completing the questionnaire, you will give me permission for your participation. You may print this form for future reference. If you have any concerns about your selection or treatment as a research participant, please contact my research advisor or me. Please indicate your agreement to voluntarily participate in this survey

Disagree (1)

Agree (2)

If Disagree Is Selected, Then Skip To End of Survey

Q2 What is your gender?

- Male (1)
- Female (2)

Q3 What is your age?

- 25 or younger (1)
- 26-35 (2)
- 36-45 (3)
- 46-55 (4)
- 56 or older (5)

Q4 What is your race/ethnicity? (Please check all that apply)

- White (1)
- Black (2)
- Latino/a or Hispanic (3)
- Asian or Pacific Islander (4)
- Native American or Alaskan Native (5)
- Other (6)

Q5 What sport do you coach? (Please check all that apply)

- Football (1)
- Baseball (2)
- Basketball (3)
- Soccer (4)
- Swimming (5)
- Softball (6)
- Other (7)

Q6 What age group do you coach? (Please check all that apply)

- Under 7 (1)
- 8-10 (2)
- 11-13 (3)
- 14+ (4)

Q7 What is your knowledge about the following behavioral disorders?

| | | | | | |
|-------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| ADHD (1) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Austism (2) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Asperger's Syndrome (3) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Q8 How do you feel about coaching children with following behavioral disorders?

| | Uncomfortable (1) | Somewhat Uncomfortable (2) | Comfortable (3) | Somewhat Comfortable (4) | Very Comfortable (5) |
|-------------------------|-----------------------|----------------------------|-----------------------|--------------------------|-----------------------|
| ADHD (1) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Autism (2) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Asperger's Syndrome (3) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Q9 Have you ever coached a child with behavioral disorders?

- Yes (1)
- No (2)

Answer If Have you ever coached a child with behavioral disorders?<... Yes Is Selected

Q10 Would you coach a child with behavioral disorders again?

- Disagree (1)
- Agree (2)

Answer If Have you ever coached a child with behavioral disorders?<... No Is Selected

Q11 Would you coach a child with behavioral disorders?

- Disagree (1)
- Agree (2)

Q16 Why?

Q12 Would receiving training help you coach kids with behavioral disorders better?

- Disagree (1)
- Agree (2)

Q13 What would you want to learn more about in training that would be most beneficial to you?

- The best ways to coach children with behavioral disorders (1)
- More information about the behavioral disorders (2)
- Possible problems that may arise from having a child with a behavioral disorder on your team (3)
- Why it is important to make sure the children with behavioral disorders are included (4)

Appendix B

Prenotice of Survey

Dear _____:

I am currently working on a bachelor degree in Sport Management at St. John Fisher College. Sport Management is a growing and exciting field. At the moment, I am particularly interested in understanding how comfortable coaches are with the idea of having a child with behavioral disorders on their team and if they feel that having some sort of training would be helpful.

In about three days you will receive another email requesting your participation in a survey. The goal of this study is to understand how recreational coaches feel about coaching a child with a behavioral disorder. Several other recreational coaches in the Rochester area will also be sent this survey. A link to the survey will be provided in the next email. Your responses will be treated confidentially.

I hope you will consider participating in this study. This short survey will take approximately 10-15 minutes to complete. If you have any initial questions, please feel free to contact me at (518) 248-7049 or rjc06877@sjfc.edu.

Thank you for your participation,

Rebecca Campbell

Appendix C

Request of Participation

Dear _____:

Three days ago you were sent an email informing you of a study that I am conducting at St. John Fisher College. The purpose of this study is to gain a better understanding of how comfortable coaches are with the idea of having a child with behavioral disorders on their team. As a participant in this study you will be asked to complete a survey, accessible by clicking on the following link that will direct you to the survey hosting website: _____. The survey will take approximately 10-15 minutes to complete.

The information you provide may assist recreational departments in getting the training that some coaches may deem necessary to properly coach a child with behavioral disorders. Responses to this survey will be kept confidential and results will be presented in an aggregate form. Names or contact information will not be included in the presentation of the results.

Participation in this study is voluntary. You may decide not to participate in this study and if you begin participating you may still decide to stop and withdraw at any time. Your decision will be respected and will not result in loss of benefits to which you are otherwise entitled.

If you have any questions or concerns, please feel free to contact me at (518) 248-7049 or rjc06877@sjfc.edu.

Thank you for your participation,

Rebecca Campbell

Appendix D

Follow Up

Dear _____:

Two weeks ago you were sent an email informing you of a study that I am conducting at St. John Fisher College. Thank you for participating if you have already done so. If not, you still have time to take the survey! Your thoughts and feelings are a critical component to understanding whether or not recreational coaches are willing to have children with behavioral disorders on their teams.

The survey is accessible by clicking on the following link that will direct you to the survey hosting website: _____. The survey will take approximately 10-15 minutes to complete. Your responses will be kept confidential and your name and contact information will not be included in the presentation of the results at the end of the study.

If you have any questions or concerns, please feel free to contact me at (518) 248-7049 or rjc06877@sjfc.edu.

Thank you for your participation,

Rebecca Campbell

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