Global Journal of Intellectual & Developmental Disabilities
ISSN: 2575-8586

Research Article
Volume 14 Issue 3 - September 2025
DOI: 10.19080/GJIDD.2025.14.55588

Glob J Intellect Dev Disabil

"Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study

Lowery M,* Bynum C, Block ME

School of Education and Human Development, University of Virginia, USA

Submission: July 31, 2025; **Published:** September 02, 2025

***Corresponding author:** Lowery M, School of Education and Human Development, University of Virginia, Charlottesville, VA, USA, Email: mkl3z@virginia.edu

Abstract

For children with disabilities, participation in youth sports can promote inclusion and a sense of belonging, enhanced physical functioning, and improved mental health [1]. While participation in youth sports is important for children with disabilities, why do some youth sports clubs actively welcome children with disabilities into their clubs? What were some of the challenges clubs faced when creating these adaptive programs? The purpose of this qualitative study was to understand the experiences and challenges of select youth soccer clubs in the Eastern part of the U.S. that offer adaptive programs for children with disabilities. Seven head coaches participated in individual zoom interviews that lasted between 45-60 minutes. Analysis was conducted deductively with priori categories identified. Results revealed the background of program coaches (soccer experience but limited disability experience), why they started their adaptive programs (often parent requests), challenges faced when creating and sustaining their program (communication and recruitment), what the program looked like and accommodations provided for participants (often individualized), the process for advertising the program and recruiting participants (mostly word of mouth), and the process for recruiting and training the program support staff and volunteers (often from within the club).

Keywords: Adaptive sport; Adaptive soccer; Disability soccer

Introduction

Participation in youth sports may provide benefits to children including improving physical and mental health, promoting social interactions, learning to deal with challenges, and building self-esteem [2]. For children with disabilities, youth sports have further potential benefits of promoting inclusion, increased sense of belonging, enhanced physical functioning, and improved overall quality of life [1]. Soccer specifically has appeared to influence positive change in psychological benefits for children with disabilities, such as executive function and motivation for exercise participation [3]. While the previous study focused on an inclusive (athletes with and without disabilities) program, Unfortunately, it is not clear how many youth sports clubs within the U.S. offer specialized sports, or adaptive, programs for children with disabilities or allow these children to participate in their regular programs. Within the U.S., there are nationally recognized programs for children with disabilities that operate through larger sport governing bodies such as Challenger Baseball (Little League of America) and TOP Soccer (American Youth Soccer Organization). Challenger Baseball and TOP Soccer work together with the larger governing bodies to act as a liaison, or resource, as they lead programs for children with disabilities to participate in their respective sport programs. Both programs are often affiliated with regular sport clubs programs but provide unique opportunities for children with disabilities. However, only a handful of youth baseball and soccer programs in the U.S. offer these adaptive programs. Often these specialized programs may include different rules in the game being played, different equipment being used, more individual support for players, and peer support to create a more inclusive experience for children with disabilities.

US Youth Soccer acts as the governing body for youth soccer in the U.S. as well as the oversight of the TOPSoccer (The Outreach Program for Soccer) program. According to the TOPSoccer website, only US Youth Soccer-affiliated clubs may host a TOPSoccer program. However, other soccer clubs may start their own specialized soccer program for players with disabilities without TOPSoccer's support. TopSoccer appears to serve as a

resource option for soccer clubs interested in hosting a program for children with disabilities; however, less is known about the process of starting a club, with or without TOPSoccer support. Why do some youth sports soccer clubs offer adaptive programs and others do not? What were some of the challenges clubs faced when creating specialized programs, and how do practices and games in these programs differ from the club's regular programs?

This study aims to address the following research questions: (1) how and why do soccer clubs start adaptive soccer programs and (2) what experiences and challenges do these clubs face? Since qualitative studies capture the essence of lived experiences, smaller sample sizes are often used allowing for more in-depth understanding of an experience with thick, detailed descriptions [4], Through interviews with head coaches of adaptive soccer programs within the Eastern part of the U.S., our goal was to develop an understanding of their experience within these programs and identify areas for future study in the adaptive sport and recreation space.

Methods

Ethical approval was granted through the authors' institutional review board. Using a qualitative form of inquiry, we used individual, semi-structured interviews as part of an exploratory case-study [5], to further explore the "why and how" and work to identify key factors in explaining the phenomenon (e.g., starting and running a sport program for children with disabilities). The qualitative design utilizes an interpretivist paradigm involving the researchers making meaning of participant experiences through interactions (i.e., participant interviews). In addition, this study aligns within a relativist ontology [6], a philosophical perspective that suggests the subjective nature of reality emphasizes how individuals (in this case, adaptive program head coaches) perceive their adaptive sport programs through their own individual lens based on their own experiences and perspectives. Since qualitative studies capture the essence of lived experiences, smaller sample sizes are used to allow for more in-depth understanding of an experience using thick, detailed descriptions [7]. The approach is underpinned by symbolic interactionism which supports inductive inquiry into how individuals create meaning through social interactions, language, and shared experiences [8]. Peer debriefing was used throughout to ensure trustworthiness of study tools and data. [9]. While basing this study on the lived experiences of those who coach athletes with disabilities, it is worth mentioning that the authors listed do not identify as having a disability therefore lack the lived experience of the end user of this work.

Sampling and Participants

Participants included the head coaches of seven soccer clubs (n=7) who directed their clubs' adaptive soccer programs for children with disabilities. All seven participants and their respective club resided within the Eastern United States. Pseudonyms were used for all clubs, all participants representing their club, and the children who were mentioned during interviews. Participants were recruited through a purposive sampling method to ensure the program fit the inclusion criteria (i.e., a soccer club that hosts a program specifically for children with disabilities). Soccer clubs in twenty states that appeared to fit the inclusion criteria were identified by the researchers through an internet search using phrases such as "adaptive soccer," "soccer for disabilities," "autism spectrum disorder soccer program," etc. When a potential program was identified through the internet search, researchers would search the club's website to confirm they had an active program for children with disabilities. Once the program was confirmed, researchers sent a recruitment email directly to the program's point of contact listed on the website, or to the "info" email listed for the program. Approximately 50 programs were identified and contacted. Out of the clubs contacted, seven responded with interest in the study, while the remainder gave no response to the recruitment email or replied that they no longer offered a soccer program for children with disabilities at their club.

Data collection

Semi-structured interviews were conducted virtually with all seven participants, each interview was between 45-60 minutes. Virtual interviewing was preferred due to convenience for participants as well as feasibility purposes of researchers. The semi-structured interview guides were created using predetermined themes identified by the research team (i.e., background of participants, why they started the program, program structure, communication, accommodations, training, and challenges). Priori codes were used by the research team to help align the interview with the overall research question. Priori codes were identified as practical considerations for the soccer programs based on the researchers' experiences in similar environments. Each researcher independently generated questions for each theme, next the research team discussed the questions and narrowed down the list to create a final draft. Next the guide was sent to an external trusted peer for review before lastly being piloted to revise for a final version. The following are examples of questions included in the interview guide: What is your background? Why did you decide to start the program? Tell me what your program looks like? Are there any differences in your program for participants with disabilities compared to your other programs? Describe any accommodations made for athletes? To begin each interview, the purpose of the study was reiterated to participants, and the researcher asked participants to give their verbal consent to participate in the study. In addition to verbal consent, participants were asked if they consented to have the interview recorded which all participants consented. All virtual interviews were recorded and transcribed verbatim for further analysis.

Data Analysis

Interview transcripts were analyzed through a thematic deductive-inductive analysis method following Bingham's Five-

How to cite this article: Lowery M, Bynum C, Block ME. "Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study Glob J Intellect Dev Disabil. 2025; 14(3): 555888. DOI: 10.19080/GJIDD.2025.14.555888

Phase process of qualitative data analysis [8]. The research team met weekly throughout all phases of the analysis to discuss findings and further progress coding. Phase 1 consisted of organizing the data to allow access for all researchers and begin familiarizing ourselves with the data. In phase 2, the data was sorted into topics better aligned with a priori codes related to the research questions. Throughout phase 2 researchers began identifying potential codes for analysis as well as ensuring the data sorted was relevant to the research question. Phase 3 began open coding of data by identifying quotes or ideas of each participant in their relation to the research question. In phase 4, data was interpreted by pattern coding and by identifying common themes between participants. These common themes were aligned participants' similar statements, quotes, and patterns to best answer the research question in a meaningful way. Lastly, phase 5 included explaining the data by using illustrative quotes to explain common themes across the study. Results were organized under each a priori code, such as "Accommodations: whole group accommodations." This organizational method was selected to provide a concise and engaging account of the data to best answer the research questions. Participant quotes were chosen to demonstrate the commonality shared across multiple participants or unique aspects found in particular programs.

Results & Discussion

Participants revealed a largely positive outcome for themselves as practitioners in addition to a positive experience for their athletes throughout their specialized soccer program. One important point to mention is the low number of youth soccer clubs that served as participants. Despite around 10,000 youth soccer clubs in the United States (US Youth Soccer) and approximately 50 club representatives emailed regarding study participation, only seven clubs agreed to participate in the study. Most emails received no response, although several clubs responded that their adaptive programs did not exist anymore. This aligns with literature revealing low availability of adaptive physical activity or sport opportunities for people with disabilities [9], and this is especially unfortunate when considering the potential benefits of soccer specifically. While there are several studies on the benefits of children with disabilities participating in soccer programs [10,11], there is little known why adaptive soccer programs, programmatic challenges that deter clubs or why programs that were previously created cease to exist.

Beginning the Program

Background of Coaches: All adaptive program coaches had a background in soccer, which

consisted of (a) playing for an amount of time before coaching, and/or (b) coaching children without disabilities, often their own children's teams. Gilded Ridge's coach said, "[We] both have played soccer our whole lives" and credited that to themselves being 'super passionate' about the game of soccer." Arcadia's coach said, "I was basically the rec coach, and Neesa [assistant coach] was my manager. She herded all the cats. They just didn't have other coaches". Wildstone's coach mentioned the influence of their own children's involvement in soccer that brought them to coaching; "My kids all played soccer from the age of 3 up, and of course, you know, organizations are always looking for volunteers."

Despite all participants having some level of soccer experience, only a select few of the participants had direct experience interacting with children with disabilities prior to the adaptive soccer program. Their experiences varied from career experience, a family member, past volunteering or their own lived experience as a person with a disability. Riptide's coach described their own career experience of "working with adults with disabilities" as they worked in human services. Bravestone's coach mentioned their own experience volunteering with TopSoccer in high school being "one of the volunteers who would just help if I was able to make it and didn't have an interfering soccer game." Granitewood's coach said that his "daughter has special needs" which led him to career switching as he realized opportunities like soccer "just wasn't the same" for his daughter. The coach of the Riptide program is the only participant who identified as having a disability. He said, "I have autism myself, and the disability support always helped me like grow up through my background." He also mentioned his own experience playing for the Scottish National Learning Disabilities soccer team previously. Surprisingly, no participant in the study stated any formal experience in teaching or coaching sport for children with disabilities previous to the current program.

The clearest background connection from all participants was (a) their experience in soccer through playing and coaching at various levels, and (b) their lack of experience coaching children with disabilities. One participant identified as living with a disability and several participants discussed their experiences through personal, professional and volunteer work as integral to coaching the program. For most participants, they entered coaching the program with the technical expertise in soccer yet understandably did not have experience coaching people with disabilities. Townsend and colleagues discuss this phenomenon, specifically within the social-relational model of disability, as a significant feature of disability coaching due to the often reciprocal learning from both the coach and athlete. Specifically the value of the sport expertise met with the athlete's embodied knowledge of disability. They continue their point by addressing the need for coaches within disability sport to move away from a 'coach-centric' view on knowledge and take on the learner perspective in these roles [12].

Why they Started a Program: Participants started their adaptive programs for a variety of reasons. Several of the participants mentioned that they took over an existing program when the previous coach left. Others started their programs after a family request, personal interest, community service project, or community affiliation. Bravestone's coach said that the program

How to cite this article: Lowery M, Bynum C, Block ME. "Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study Glob J Intellect Dev Disabil. 2025; 14(3): 555888. DOI: 10.19080/GJIDD.2025.14.555888

was active prior to her taking the role; "Maya [previous club president] had previously done TopSoccer in her hometown… so she initially contacted the TopSoccer organization, and they agreed to help." Similarly, Riptide's adaptive program was already active "through like a university affiliation, and when the [soccer club] director was in touch with me, because he needed someone up there." Boulderford's coach mentioned the area already having a TopSoccer program organized prior to Covid however, "no one kind of picked it up after Covid. So I became that person." Multiple programs started after a request by a family or friends of someone with a disability in search for a more appropriate program. Wildstone's coach said:

[Our] Daughters have a friend who has Down's syndrome, and she played soccer with them on the in-house teams until she was about nine. Then it was a little bit too competitive for her, but she still wanted to play soccer. So, I'm like, all right, let's figure out what we need to do here. Similarly, Granitewood program's coach mentioned that the "head of the soccer club approached me about it because I have a daughter with special needs, and he has a son with special needs." Arcadia discussed the experience for children with disabilities in other soccer programs as "difficult for them" whether it was "physically or due to focus." Due to this they felt "their parents were looking for something more adaptive."

Uniquely, two programs began as a youth or school-based project. Arcadia's coach mentioned their TopSoccer program was created by a young girl as "part of her Girl Scout Gold Award Project." As a teenager, the girl "started and coordinated with the county with their mental health services division" since she knew "very little about all of the different types of autism and things like that." Gilded Ridge's coaches actually started their program based on an idea they formed as part of their seventh-grade project called "Genius Hour". The goal of the class project was to find an alternative or solution to a "non-google-able" question. As the two students pondered on their question "how can I make Gilded Ridge more welcoming and inclusive" they connected over: trying to figure out how to integrate something we were really passionate about [soccer] and kind of like share something that we cared about. Especially with a group who doesn't have the opportunity to access the same type of programs we, as like fully able-bodied people, have the ability to access.

After the students shared their ideas and passion, a teacher at their school talked more about bringing the program to Gilded Ridge through collaboration with "different occupational therapists, physical therapists and different school districts in the neighboring towns." Most of the participants interviewed mentioned that programs started after being asked by the affiliate soccer club or they were asked or motivated by a friend or family member related to someone with a disability. Previous research suggests lack of appropriate physical activity programs as a significant barrier to participation in sport for children with a disability [9]. One consideration for soccer clubs and community centers is how to be proactive in establishing these programs. Clubs may not believe there is a need for an adaptive program until someone within their circle makes the suggestion, until that happens those with disabilities may be deterred from even seeking out soccer or similar programs with the expectation that it does not exist. As several of these programs revealed, once they began the program after the initial request there is certainly a need within the community that is filled.

Program Structure

Most programs shared a similarity in holding their programs in afternoon or evening time slots, between Friday, Saturday and Sundays, often stating volunteers as a reason. Arcadia held their program from 3:30-4:30 on Saturdays because "rec games are already done with, so that our buddy [volunteers] teams can make it." Granitewood held the program from 4:00-5:00 or 5:00-6:00 because "that's when we get the most volunteers." Riptide's coach mentioned starting the program on Tuesdays but ended up hosting the program on Friday nights because it "seemed popular" with athletes. One participant mentioned avoiding Sunday morning as it is a "big church day."

Programs varied on the number of athletes with Arcadia having the fewest athletes (7-10 per session) and Granitewoods having the most with a peak of 60 athletes. The remaining clubs all mentioned having between 12-28 athletes in their programs. Most programs highlighted that each athlete does a check-in as they arrive. Participants from Gilded Ridge and Bravestone both used the time to introduce parents and athletes to volunteers or their "buddy" for that session. After the session check-in, all programs started each day with a whole group warm-up including different "dynamic" activities, "skill building games" or a chance to "find a partner and just kick about." Participants mentioned the value of warm-ups as a time to interact with athletes. Gilded Ridge's coach said they hold a "welcome circle" each session to share the theme of that session which may be "colors, animals, or pirates for Halloween." Granitewood also uses "warm-up circle" as a way to "review the session and interact with the players a little bit more."

After the warm-up, each program would transition to specific soccer drills or games, which were often divided by age, desire to play soccer, or competitiveness. Bravestone splits the field "into a younger kids side of the field, and then older" because they felt that was the biggest difference due to older kids being a "bit more into the soccer drills." Wildstone utilizes a separate field at times: We'll take the kids who actually want to play a soccer game and move them to a different field and let them play soccer. The ones that don't will continue with the skill building… if they really have issues with that, that's when we play clean your room or sharks and minnows."

Similarly, Granitewood had an athlete number system that gave athletes a one through five rank that described their engagement

How to cite this article: Lowery M, Bynum C, Block ME. "Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study Glob J Intellect Dev Disabil. 2025; 14(3): 555888. DOI: 10.19080/GJIDD.2025.14.555888

level with "five being the kids that were almost ready to play a regular full field game." They would then divide the pitch into separate sections or "quadrants" for scrimmages or individualized activity. Arcadia also "set up several fields" since they "have the field to ourselves" which allows them to have flexibility field usage. Riptide was the only club that used "physical size" as a potential factor on how they group athletes. Similar to warm-ups, all programs had a group closure that brought all athletes back together before dismissal. One participant described their closure that always includes the group using a rainbow parachute as "everyone drops what they're doing, like everyone's running to the same circle for the parachute." Wildstone concludes each session with a handshake before getting in a circle to do a group cheer "sometimes it's 'Go Wildstone soccer,' sometimes it's 'Go Penguins!'" When discussing their overall structure Granitewoods coach mentioned the need to simply "treat it like soccer practice."

Programs shared similar views on the structure of their adaptive programs. Most scheduled their practices/games for weekends, as this seemed to be best for parents. All programs met once per week for a combined practice/game. Another similarity across all programs was the structure of the sessions. Similar to the protocol described by Hayward (2016) [13], each participant outlined their session to begin with a group game or fun form of dynamic warm-up and check-in (often tag, dynamic stretching, sharks and minnows etc.), followed by breaking off into groups or "quadrants" based on individual abilities and interests (competitive level, desire to play soccer, skill level or physical size) and lastly coming back together for a whole-group cool-down or closure activity (parachute activities, games, group chants) (2016). Most participants mentioned the social value of checking in with athletes in warm-ups as well the group closure activities. Throughout the groupings it appeared that coaches were most centered around the athlete's experience, engagement, and development. Ryan et al. (2014) [14], described similar protocols as a way to ensure athlete's success in a friendly, non-threatening environment while developing their soccer abilities.

Accommodations

Several programs used different groupings of athletes within their program structure to best manage their session. One program described how they accommodate players by making specific modifications to how the game is played. Gilded Ridge altered game play by using small-sided games "like 1 on 1, 3 on 3" instead of doing a full soccer game. Gilded Ridge's coach also described a hula hoop system that organizes the players into "different color hoops… we'll call, like players in the green hoops, come out and play, and we'll have 2 goals… they'll each be assigned to go to the goal." Gilded Ridge's program does not have "full playing, scrimmaging structure" but feel they have success when players "have the ability to get the ball, go to goal and kind of fulfill that." One participant mentioned how small rule changes make the program better but "it would depend on the individuals." For example, "if they're not capable of doing a throw in, then we'll do a kick-in instead." To encourage engagement throughout, Riptide will "get them going high activity to start, then kind of a slower drill, then into another high" to help keep athlete attention. Other teams used different equipment during sessions. Bravestone's coach mentioned how they "use a lot of colored equipment, to kind of organize things very clearly." A common accommodation used across programs was the use of different sized balls. Arcadia's program would use "different sizes of balls 3, 4, and 5" and then let the athlete decide what ball they want to work with. Boulderford and Bravestone also use "little training balls" and oversized balls or the "big blow-up ones.". Gilded Ridge, Arcadia and Riptides' coaches all mentioned having balls with bells inside for athletes with visual impairments or a ball that "enables them to hear where it's going," even though these two clubs did not currently have a blind player. Aside from the size or type of ball, most clubs did not mention specialized equipment or would specify they "don't have any adaptive equipment." All clubs mentioned athletes using or bringing their own devices from home or school to practice. Arcadia's coach described "one athlete who communicates almost exclusively through her Ipad… I'm not sure about the technology, but she can type in it and it verbalizes whatever she types in." Similarly, two participants said the tablets allow athletes "to communicate better" which is why Riptide's coach "loves the tablets." Boulderford's coach also described how athletes frequently bring social stories, as it is a "part of their routine." Several clubs listed "sensory toys" as something they frequently allow players to use as long as "it doesn't pose a safety hazard to the other players." For example, Boulderford's players are "more than welcome to walk around with those [tablets or communication devices]." One aspect of the programs clubs viewed differently was the field's level of accommodations. Wildstone's coach described the "smooth ramps" they had for athletes who are in wheelchairs to get on and off the pitch and likes that "it's not away from anybody, it's right there." Gilded Ridge's coach had similar thoughts noting "(we) don't really have to provide it [accessible fields], because it's just naturally there." However, Riptide hasless access for children that are "a bit more restricted physically in wheelchairs or stuff like that."

Within the individualized groupings, each program used a variety of accommodations to further individualize the experience for athletes. One method was using small-sided games (1 on 1 or 3 on 3) and smaller spaced games instead of playing regulation games on a regulation field. Adjusting the size of groups and the size of the field has been shown to be an effective variation for skill development in soccer [15], as well as an appropriate modification for athletes with and without disabilities [14]. Despite the support in literature for equipment modifications in physical activity [16], participants in this study only mentioned modifying the ball (larger ball, smaller ball, or a sound ball) when referring to adaptive equipment. The perceived low need for adaptive equipment and the field

How to cite this article: Lowery M, Bynum C, Block ME. "Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study Glob J Intellect Dev Disabil. 2025; 14(3): 555888. DOI: 10.19080/GJIDD.2025.14.555888

accessibility being "naturally there" seemed to be a strength of the program for most participants. While the idea of readily available accessibility and minimal need of modifications may encourage more clubs to consider creating adaptive programs, it does create a risk of programs unintentionally excluding individuals with more specific equipment needs. An interesting finding was the participants' support for the athletes use of IPads or other tablets, yet clarified that parents brought these devices for their child. Literature does suggest potential benefits in visual supports like task cards or visual schedules [17], so it was interesting that none of the participants mentioned facilitating these visual supports on their own and instead only "allowed" them. This could be an area for further training for coaches of programs to effectively utilize visuals, particularly for participants with autism.

Zero Exclusion

All participants maintained that they would never turn anyone away or "tell a child they're not welcome." Two programs mention the support of parents as helpful for accepting all athletes. Gilded Ridge has each "buddy [volunteers] talk to the parents" to "get a picture of the individualized players needs" like communication or certain schedules. Wildstone's coach doesn't see unique athlete needs as "much of a concern" since their parents stay on the sidelines throughout the session. The Riptide coach recalled their own experience, as a child with a disability, being turned away from sports making it "probably, purely personal" to never turn away athletes. Boulderford's coach discussed the management of aggressive behaviors within their program:

Hasn't changed the way we treat the child, if we let them come to practice or not. We just work it out with the parents and talk to volunteers that it happened with and sort of plan for next time. But we're not a club that turns away, and I can't anticipate us doing that unless it was really extreme.

Lastly, Wildstone's coach described one situation where the parent was considering if their child should participate due the different medical considerations (i.e., oxygen tubes, feeding tubes) and worried that "it might just be too much" despite the program's support of the child's participation. Ultimately, that club left it up to the parent to decide, but they were happy to work with the parents to make it work for the child.

Staff and Volunteers

Staff Training: Most coaches of the program received direct training through the TopSoccer

organization or from someone trained by TopSoccer. Granitewood's coach described it as "an official course" from USA Soccer that trains TopSoccer coaches. The TopSoccer training program he described was a "whole day program plus another half day off on the field work." Riptide said as "the head" of their club's program he received the "really intense detailed training" from TopSoccer as well. Gilded Ridge coaches said they were initially trained by the previous coach but then took the "2-hour buddy course" and the "4-hour coaches course." Regarding the coaching course, Gilded Ridge's coach said: They go over more specifics. Just in general, more in depth …. It kind of covers the generality of dealing with all different types of things but it focuses a lot on buddy-player communication … I think the major focus is how to effectively communicate with all players**.**

Boulderford Soccer Club had a previous soccer coach who was trained by TopSoccer to train them. Arcadia was the only program who had no direct affiliation with the TopSoccer training program. They knew of the training opportunities available but credit their training to having "two very good role models" to learn from and "molded the program" from observing. After completion of the TopSoccer training, multiple participants mentioned how they would make their own training "for lack of a better word, better" than the TopSoccer training simply because they knew the athletes and knew "their individual needs."

The most common form of training for participants was through TOPSoccer or from someone who was previously trained by the TOPSoccer organization. Participants described the "official course" as intense, describing the content across two separate days, one day of educational content and a half day of "field work." One participant mentioned that the TOPSoccer training program focuses on the "generality" of the program as well as "buddy-player" communication, which is considered a key factor in influencing relationships in adaptive sport [18]. After taking the training, participants seemed to feel confident in their ability to run the program. Through this study it appeared that TOPSoccer training was an effective form of training for the participants involved. Future questions could be who within US Youth Soccer should take disability-specific training or a version of the TOPSoccer training program. Unfortunately, this study did not ask participants if other forms of US Youth Soccer training (general coaching education, recertifications for all coaches) provided any disability-specific or how-to-include information.

Volunteer training: All participants discussed the use of volunteers in their program, but their

recruitment relied on different methods. Wildstone's coach said "most times we are scrambling for volunteers," however, they were the only club that mentioned recruiting challenges. Granitewood and Riptide's volunteers "tend to be high school students" due to the common community service requirements for their schools or religious affiliations. Granitewood also typically has middle and high school students as they "know the person who is in charge of the National Honor Society at the high school, and they love to send their kids out." Gilded Ridge and Granitewood both send out a yearly email to the local high schools soccer club, so they "typically will get enough." Coaches of Granitewood, Arcadia, Bravestone and Gilded Ridge all mentioned "word of mouth" as a big reason for the "steady stream of inquiries."

Once volunteers are engaged with the program, the amount of training they received before the program varied. Gilded

How to cite this article: Lowery M, Bynum C, Block ME. "Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study Glob J Intellect Dev Disabil. 2025; 14(3): 555888. DOI: 10.19080/GJIDD.2025.14.555888

Ridge's coach described their volunteer, or "buddy" training: One hour of that training is in a classroom and you're going through a PowerPoint slide of how to work with different abilities and kind of the logistics of how to handle certain situations and then the second hour is going out on the field and mimicking some scenarios. Bravestone's coach "made up" their own training to best fit their needs. They will "go over how we expect them to act at practice, even stuff like going over how to interact with parents and stuff." They also mentioned how it is "not, for some reason, like intuitive for people to be super emphatic, so ensuring volunteers know how to encourage and congratulate them" is important. Speaking more on soccer skills, Arcadia's coach said it is "very intuitive on most of our volunteers" since most of them have all played soccer, they know "what to teach the athletes." Wildstone trains volunteers on how to "read the kids" because they "want them [athletes] to be challenged but not to the point where they're frustrated and in tears." Similarly, the Gilded Ridge program's major focus is "how to effectively communicate with all players" including their "emotional and social needs as well." Arcadia's training focused their volunteer training on athlete specific information by "giving them a tiny bit of background about the participants" and "warning them" on unique considerations like if an athlete is nonverbal. Granitewoods training goes into more detail about some "of the major categories" of disabilities like "autism, Down syndrome, cerebral palsy, and ADD or ADHD" and includes the "typical things that you might see from somebody from that category." Boulderford's training was based on "which disabilities we were working with that semester." They will talk about the child's strengths as well as "what they like, what they need and what their parents think they would need to adapt to practice."

Coaches all provided some type of training for volunteers or "buddies." Participants noted that they felt competent in training their volunteers since they knew the athletes within the program on an individual level as well as the format and goals of the adaptive program. It appeared best for most programs to utilize the local high schools (Honor society, sports clubs or personal connections) and the program's affiliate soccer club for volunteers. This not only provided the quantity of volunteers needed to make the program work, but in the case of getting volunteer players from other teams within the club this also provided volunteers who already knew the game of soccer. Participants in this study also noted that, while an overall presentation of the goal of the program and the format for practices and games was needed, the more important aspect of training was helping volunteers understand the athlete they would be working with that session. One program did train their volunteers on "major categories" of disabilities, but generally the programs felt that training should focus on the individual characteristics and behaviors of athletes, communication with athletes or how to "read the kids," and communication with parents. One consideration for training of volunteers is what message volunteers, often young people, are told about the specialized program. Storr [19], wrote of the risk of disability-based teams never being truly integrated into the overarching club as a core aspect of their. In our study, this becomes a risk when volunteers within the club are trained in a way that does not recognize equitable value in the program for athletes with disabilities. Athletes within the regular club may only see the adaptive program as of lesser value than their own regular club programs or volunteering because it is the right thing to do. Coaches should find ways to train volunteers on the value in the program and model equitable approaches to resource use, coaching, and opportunities within their overall club.

Athlete Communication

Collaboration: Clubs used a variety of communication methods to recruit athletes for their

programs. Granitewood sets up a table at a local school district community conference. Bravestone and Gilded Ridge utilize social media like Facebook to gain interest in the program. Participants from Wildstone, Granitewood and Bravestone all discussed their relationships with local schools as being helpful in recruiting athletes through emails, flyers or in-person discussions. Another common communication method from participants was collaborating with the local soccer club. Boulderford's coach said it is "a huge help connecting with a local club" as they send out regular newsletters. Granitewood also partners with their local soccer club which "allows us to do all that [recruiting and onboarding] through their database." Riptide's coach specified that their local soccer club has a TopSoccer tab on their website which is specific to their program. Another participant similarly shared that their local club has a banner for TopSoccer on their website that tells people about the program.

Programs described their collaboration with schools, soccer clubs, and community outreach organizations as their most common suggestion for those hoping to start an adaptive program. Alliances within communities is considered a critical component of creating further opportunities for sport for people with disabilities [20]. Participants in this study specifically mentioned how these collaborations allow for greater athlete recruitment, direct resource of volunteers, and overall community support and engagement. Literature showed these partnerships help create a stronger social dynamic when individuals within the community and other sport organizations are involved [21]. Some affiliate soccer clubs held a specific link for TOPSoccer on their website which informed families about the program, while others utilized their school and clubs newsletter or email list to share information.

On-boarding: Once athletes have been recruited, all programs have their own onboarding process

to receive information about the athletes in preparation for the program. The programs who collaborated with their local soccer clubs would typically have athletes use the soccer club's website to register and collect information. Most participants

How to cite this article: Lowery M, Bynum C, Block ME. "Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study Glob J Intellect Dev Disabil. 2025; 14(3): 555888. DOI: 10.19080/GJIDD.2025.14.555888

said the soccer clubs' onboarding forms lacked depth about the athletes' individual needs and "their likes and dislikes" so provided their own form which was "more expansive." One participant suggested that their registration is "probably quite a bit vaguer" and that they could make it "more specific" since "the most important part of planning is knowing." Bravestone uses a Google Form as an optional opportunity for families to "share their disability, what age they are, and any information they want to give us." One participant also emphasized that the disability disclosure aspect is all voluntary. Gilded Ridge had a unique question in their intake form asking families to "let us know why your child is participating in TopSoccer," which they will usually put "autism, or you know, Down syndrome" or some reason as to why TopSoccer is better for their athlete than recreational soccer. Arcadia's coach mentioned that they most frequently "tell new participants [athlete's families] 'bring your child, see if they like it, and then we can go from there.'"

All clubs had some form of intake or on-boarding for athletes within their specialized program. While it wasn't unusual for families to sign waivers and pay fees through the affiliate club's registration, participants discussed how these forms often did not serve the needs of their program. To get more clarity on each athlete's needs, they created unique forms that often included a question on why the child was in TOPSoccer instead of other programs or other "more specific" information. One aspect worth mentioning is that most clubs emphasized that disability disclosure was voluntary for families. Participants shared that the onboarding or intake process for athletes was something that has been challenging and could be improved upon.

Sustainability & Challenges

Programs varied in their funding of the program. Wildstone and Granitewood both utilize their partnership with the local soccer club for full program funding for "everything, uniforms, equipment and the field." They both preferred this as it kept the program free for families. Granitewood's coach also mentioned community members being "willing to donate" which provides further support. Riptide requires a $10 fee to cover insurance and registration fees. Three of the participants mentioned fees for families between $30-50, although one club said they "offer scholarships if they can't come up with that type of money."

Participants described several challenges within the program itself. Wildstone's coach described why they thought respect was a challenge in their program: Parents (from other teams) would just walk through the field like there wasn't a game going on, then you would get (these same) parents sitting on the side going 'oh, aren't they cute?' Go away now, you know. That was the challenge is getting these people to realize that they're athletes. Riptide's coach said that the intake or onboarding process is where "development has to happen" to get a smoother process in place. Similarly Gilded Ridge's coach said "outreach or recruiting" as "not necessarily a challenge" but something "we have to be patient with." They also mentioned the influx of volunteer numbers as a challenge to the program as having too many per child makes it difficult to "build that personal bond." Another club mentioned that "figuring out the facility and finding those right people is probably the biggest barrier."

When asked about the sustainability of the program participants commonly shared the challenge of "handing the program over" either now or in the future. Riptide's coach said that this handover from "parents and people that have the personal affiliation just isn't good for longevity." Boulderford's coach shared their concern was "sustainability, because I did start this" but hopes to "build it up so that people enjoy it so much they don't want to see it end." Gilded Ridge's coach mentioned players transitioning to Special Olympics or recreational leagues as a challenge leaving them with "spurts where one season all of a sudden we'll have 20 new people and another season will have 3." The Gilded Ridge coach also mentioned that at "some point will have to pass on a lot of what I do" and part of his goal is to have "a group like that of former players" return to lead the program.

Another area of inquiry was the challenges and sustainability of the programs. No program mentioned that funding was an issue, as they either charged a fee or received funding from their affiliate soccer club. Participants who did offer fees mentioned the possible scholarships as needed for participation. While the low to free participation is likely beneficial for many families involved with the program, it is unclear on the impact this has on the relationship between the specialized program and the affiliate club. Fees and independent revenue within the specialized program could prevent the barrier of cost of a uniform and equipment from stopping parents from enrolling their child with a disability [9]. Alternatively, not charging any fees may contribute to negative stereotypes towards charity programming within the club, creating less perceived value in the specialized program [22].

The biggest concern around sustainability of the program was "handing the program over" once the coach moves on. Participants mentioned their hope is that enough people enjoy the program and want it to continue the program after they leave. One avenue could involve US Youth Soccer's support towards coaching mentorship and development for TOPSoccer coaches. Throughout this study it seemed that coaching the adaptive program was not something any participant had planned for or sought after. Rather, they were asked or handed the program and had to learn the program from there.

Participant Suggestions

Participants generally spoke positively about their experience running a program for children with disabilities. When asked if they had anything else to share or the impact of the program, they provided a variety of suggestions and their own idea of what made their program successful. The Granitewood coach's biggest suggestion was to "recruit volunteers" and "set up a

How to cite this article: Lowery M, Bynum C, Block ME. "Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study Glob J Intellect Dev Disabil. 2025; 14(3): 555888. DOI: 10.19080/GJIDD.2025.14.555888

program similar to mine." A common suggestion was to seek out collaboration with other groups. Arcadia's coach said "the key thing would be getting buy-in from the local soccer association," as they helped with initial equipment support as well as "buddy teams [volunteers]" to come, and that "regular buddies" are key to a successful program. Bravestone's coach recommended applying for a "provisional charter" with a school's student association if enough students are interested. They also suggested reaching out to the state TopSoccer organization who "agreed to help funds to start us off before the student association could take over." One participant said clubs should "do their research on the different outreaches [disability outreach organizations] in the area to "go about finding players." Once they "were able to take off with players" they were "unstoppable." They also mentioned the TopSoccer organization and "tons of resources" they provide.

Clubs all mentioned the positive experience of their clubs, but they had varying views on what makes their program successful. Riptide's coach clarified that "the real value in it is that kind of human connection." One participant mentioned it being "rare that we have somebody come for just one practice," and how they feel "touched when somebody brings a friend here". Granitewoods coach discussed their idea of "using the medium of soccer, or basketball in basketball season, to teach them how to interact with each other socially in a safe environment at their own pace," but they "also get some physical fitness in the process." They try their best to "treat it like a soccer practice" with "cleats, shin guards, shorts and jersey." When discussing their goal for the program, Riptide's coach said:

I've always said it's just like creating, or you know, building a safe space for kids like, you know once a week, just to come and get their energy out… to have fun and play with other kids, you know and play with other kids that are similar to them. Wildstone similarly mentioned enjoyment for athletes as a marker of success. When discussing parents' feedback on the program they said "'they [athletes] talk about this for a week, they can't wait for soccer,' so that to me is a success." One coach said that "success is if an athlete comes back for more than one season," because it "indicates to me they enjoyed it sufficiently that they want to continue."

Conclusion

Most major cities and counties within the United States have some form of soccer club, league or recreational program available for children and adolescents. Despite the high availability of soccer programs, less information is available regarding availability and processes of soccer programs for children with disabilities. Seven coaches of adaptive soccer programs were interviewed to better understand why and how some soccer clubs in the U.S. offer specialized soccer programs for children with disabilities. An interesting finding was the value of participants' collaboration with other organizations like high schools, disability outreach organizations or local soccer clubs. This was often a pivotal relationship regarding volunteers and athletes for programs and contributed to sustainable programs, which several participants expressed as a fear or challenge for their program. Future research could focus on the relationship of soccer programs, and similar sport organizations and their relationships with community partners. TOPSoccer, within the U.S. Youth Soccer organization, played a vital role in several programs through training and guidance however this study did not address TOPSoccer's method of advertising, ongoing support for programs or analysis of their training. Further exposure and analysis of TOPSoccer or similar programs within youth sport could provide a valuable opportunity for growth of adaptive programs and a better understanding on how this relationship influences program success and sustainability. Lastly, all participants mentioned using minimal equipment for their programs. While this may encourage clubs to start programs due to less overhead needs, this may unintentionally exclude participants with greater equipment needs therefore clubs should likely continue expanding equipment and modification repertoire as they expand their program. This aspect, as well as the modifications described by participants, should be analyzed further on their application effectiveness in programs. Overall, this study provides insight on how adaptive soccer programs were typically started for participants, strategies that ongoing clubs have successfully implemented and challenges clubs often face hosting these programs. One limitation of this study is that all participants were a part of an overarching soccer club within their community. While this is a positive for those programs, it may not generalize to other adaptive soccer programs that do not have an overarching club's support. This study also did not seek out athlete specific data regarding age or disability from programs which would lead to a better contextual understanding of strategies used.

References

1. Carbone PS, Smith PJ, Lewis C, et al. (2021) AAP Council on Children with Disabilities, Council on Sports Medicine and Fitness promoting the participation of children and adolescents with disabilities in sports, recreation, and physical activity. Pediatrics 148(6)
2. President's Council on Sport, Fitness and Nutrition (2020) Benefits of youth Sports.
3. Chen CC, Ryuh, Y, Hardwick H, Shirley R, Brinkley B, et al. (2019) Psychological Benefits of Inclusive Soccer Program in Young Adults with and without Intellectual Disabilities. J Dev Phys Disabil 31: 847-861.
4. Richards KA, Hemphill MA, Wright PM (2023) Qualitative research and evaluation in physical education and sport pedagogy. SHAPE America.
5. Priya A (2021) Case study methodology of qualitative research: Key attributes and navigating the conundrums in its application. Sociological Bulletin 70(1): 94-110.
6. Smith B, Sparkes AC (Eds.) (2016) Routledge handbook of qualitative research in sport and exercise (1st ed.) Routledge.
7. Blumer H (1969) Symbolic interactionism: Perspective and method. Englewood Cliffs, NJ: Prentice-Hall.

How to cite this article: Lowery M, Bynum C, Block ME. "Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study Glob J Intellect Dev Disabil. 2025; 14(3): 555888. DOI: 10.19080/GJIDD.2025.14.555888

8. Bingham AJ (2023) From data management to actionable findings: A five-phase process of qualitative data analysis. International Journal of Qualitative Methods 22: 16094069231183620.
9. Shields N, Synnot AJ, Barr M (2012) Perceived barriers and facilitators to physical activity for children with disability: A systematic review. Br J Sports Med 46(14): 989–997.
10. Barak S, Malca O, Dagan N, Hutzler Y (2019) The Game of Life soccer program: Effect on skills, physical fitness and mobility in persons with intellectual disability and autism spectrum disorder. J Appl Res Intellect Disabil 32(6): 1401-1411.
11. Ryuh Y, Choi P, Oh J, Chen CC, Lee Y (2019) Impact of inclusive soccer programs on psychosocial development of children with and without intellectual disabilities. Journal of Developmental and Physical Disabilities 31(5): 691–705.
12. Townsend RC, Smith B, Cushion CJ (2016): Disability sports coaching: towards a critical understanding. Sports Coaching Review 4:2.
13. Hayward LM, Fragala-Pinkham M, Johnson K, Torres A (2016) A community-based, adaptive soccer program for children with autism: Design, implementation, and evaluation. Palaestra 30(4): 44–50.
14. Ryan JB, Katsiyannis A, Cadorette D, Hodge J, Markham M (2014) Establishing adaptive sports programs for youth with moderate to severe disabilities. Preventing School Failure: Alternative Education for Children and Youth 58(1): 32-41.
15. Clemente F, Couceiro MS, Martins FML, Mendes R (2014) Original article: The usefulness of small-sided games on soccer training.
16. Lieberman LJ, Houston-Wilson C (2018) Strategies for inclusion: Physical education for everyone (3rd ed.) Human Kinetics.
17. Forbes AS, Yun J (2023) Visual supports for children with autism in physical activity. Adapt Phys Activ Q 40(4): 781–806.
18. Liu J, Yu H, Bleakney A, Jan YK (2024) Factors influencing the relationship between coaches and athletes with disabilities: A systematic review. Front Sports Act Living 16(6): 1461512.
19. Storr R, Jeanes R, Spaaij R, Farquharson K (2020) "That's where the dollars are": Understanding why community sports volunteers engage with intellectual disability as a form of diversity. Managing Sport and Leisure 26(3): 175-188.
20. Ristevski E, McCook F, Thompson S, Duncan Z, Lawler B, Broxham C (2024) Initiatives to facilitate the social inclusion of people with intellectual disability in physical activities with others in community-based sporting, recreation and leisure activities: A scoping review. J Appl Res Intellect Disabil 37(3): e13238.
21. Kemeny ME, Arnold R, Marge M (2011) I can do it, you can do it: A community development approach to health promotion for individuals with disabilities. Community Development 42(2): 137–151.
22. Roush SE, Sharby N (2011) Disability reconsidered: The paradox of physical therapy. Physical Therapy 91(12): 1715-1727.

DOI: 10.19080/GJIDD.2025.14.555888

How to cite this article: Lowery M, Bynum C, Block ME. "Make it work": Exploring why and how soccer clubs start programs for children with disabilities: A qualitative study Glob J Intellect Dev Disabil. 2025; 14(3): 555888. DOI: 10.19080/GJIDD.2025.14.555888