

Master's thesis: Helpful keys to physical activity for children with intellectual disabilities – a qualitative study from physiotherapists perspective

Background: The UN Convention on the Rights of the Child, states that all children have the right to the best possible health, meaningful leisure time, and support to actively participate in society (1). Regular physical activity can lead to improved health in terms of cardiovascular health, muscle strength, bone health and mental health (2). Approximately one percent of the world's population has an intellectual disability (3). Children with intellectual disability engage in less physical activity than their peers and reach to a lower extent the general recommendations for physical activity (4-6). Individuals with intellectual disability are at greater risk of lifestyle-related health problems such as obesity and type 2 diabetes (3, 7). Agenda 2030 includes 17 global goals for social, economic, and environmentally sustainable development (8). Member states should provide inclusive and accessible green spaces and transport systems for all, with particular attention to vulnerable groups including children and people with disabilities (8).

Objective: There are few qualitative studies examining barriers and opportunities of physical activity for children with intellectual disabilities, especially studies focusing on physiotherapists in habilitation services regarding their experiences. Therefore the aim of the study was "To explore physiotherapists in habilitation services' experiences of barriers and opportunities for physical activity for children with intellectual disability in their school and leisure.

Methods: A qualitative interview study with an inductive approach was conducted. Eleven physiotherapists were interviewed through semi-structured interviews with an interview guide. The interviews were analyzed with qualitative content analysis according to Graneheim and Lundman's model.

Results: The analysis resulted in one theme "Helpful keys to physical activity promote health for children with intellectual disability " and six categories. The categories represent six "keys" that symbolize the physiotherapists' experiences of support that are important for physical activity. The six keys include knowledge and competence, adaptations and support, time and resources, norms and attitudes, enriching environments and access to activities, and collaboration and dialogue.

Conclusion: Children with intellectual disability is dependent on different factors to enable physical activity and physiotherapists in habilitation services identify several conditions that can facilitate physical activity while lack of them impede. For example, limited knowledge, time and collaboration. The physiotherapists emphasize that a "little extra effort" to adapt activities and provide support can make a significant difference in promoting physical activity.

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