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## "Gymnastics for Children with Special Needs— When Dreams Come to Life

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**This is part two of a series titled "Gymnastics for Children with Special Needs." USA Gymnastics encourages acceptance of children with disabilities into gymnastics programs. There are certainly valuable benefits, such as those Mr. Hurwin describes in the following article. However, in order to provide appropriate care, personnel who work with such children often require special needs training, and many special needs children can require one-on-one instruction.**

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By Gene M. Hurwin, M.A., Occupational Therapy; Director of Pediatric Development and Rehab, Los Angeles School of Gymnastics and Gymnastics Olympica; Creator of BIG FUN, programs designed for children with special needs.

It had been another hard workout. Sammy was reacting poorly to the prolonged heat wave and her body was responding slowly to movement demands. Each motion was a battle with the co-contractions of her muscles.

"One more set, Sammy," I said.

"I'm trying!" she snapped back. Slowly, laboriously, she pressed herself upright into a front support on the bar. I had to assist her by stabilizing her wrists. "I can do it myself!" she informed me, but then fell back to the ground, crumpled, and cried.

The tears would not stop. But Sammy had a reason for pushing herself-she'd made the decision to work on upper extremity strength, and to improve endurance and trunk support. Her 13th birthday was coming up, and she wanted to venture beyond the gym's comfort zone of friends and fans, and test herself outside the gym. Still, she needed my support.

"Sammy, it's supposed to be hard. Otherwise, everyone here would be world-class! Look at the team girls," I told her. "They try hard but fail all the time. Sometimes, you have to fail before you know how to succeed." She nodded a little. "They're just like you-they have to be completely focused at every workout. They can't waste a single moment in the gym."

In spite of herself, she smiled a little as she looked around. Shyly, she met my eyes. "I'll never do what they can do."

"Let's hope they'll never have to do what you've already done."

### FIVE MONTHS AGO

My initial meeting with Samantha was to do an assessment of her current functional mobility status and make a recommendation how to structure a gymnastics program. She concentrated very well and worked hard for the entire session. She did things she never imagined doing, and had a great time. "You were super," I told her, then turned to her mom. "After I write my assessment, I'll send a copy to your service coordinator at the Regional Center and one to your home. Then, as I'm sure you know, it's a waiting game." I had no doubt this one would go through quickly. At age six, Samantha had been diagnosed with Cerebral Palsy by a neurologist in LA and had been with the Regional Center ever since.

Regional Centers are resource and funding centers for families with children who have disabilities. In California, there are 21 centers, with Los Angeles and San Diego accounting for more than half

the total in the state. A legitimate diagnosis is the first step in getting Regional Center eligibility for available service programs. Generally, each center has more than 100 service coordinators (caseworkers), each with a client load between 25 and 35 children. Samantha's parents had started meeting with their Regional Center service coordinators after Samantha was diagnosed at 6 years old. Once a year, an Individual Progress Plan (IPP) meeting is held for Samantha. Here, all the people and agencies which provide services to families with children who have special needs-school district administrators, teachers, physical therapists, speech therapist, occupational therapist, etc.- sit down with the family and service coordinator to collectively decide what services Samantha needs and could benefit from in the upcoming year. Once the requested service agenda is agreed upon, it is assigned a total dollar sum and submitted to the appropriate funding sources. The money is then allocated to Samantha's fund for the cost of those services for the entire year, with the understanding that no additional monies will be added to this fixed budget. At the last six IPP meetings, Samantha's mom had requested a list of possible movement activities for Samantha to try, and money was allocated. All that remained now was for the caseworker to approve my specific request.

"So," I continued, "I would love to work with you. We'll get the paperwork taken care of, and..." I had to stop. Mother and daughter broke into astonished looks and Samantha started to cry.

"Honey, why are you crying?" Mom asked. "He said he's going to work with you."

Samantha smiled at me through her tears and nodded. Her body tremored, as if trying to contain an immense amount of pent-up emotion. I didn't understand what was happening. I looked over at her mom.

"In the car ride over," mom explained, "Samantha said she didn't want to do this, not again. Even when she steers herself for bad news, it always tears her up when it comes."

"Bad news?" I asked. "But..."

"No one has ever said they'd be willing to work with her. I guess she was expecting the same thing from you."

I glanced at Samantha, small and fragile, her spirit trapped inside that cruel body which was trapped inside the metal wheelchair. She was still beaming at me. I thought of my own daughter running down the soccer field and I couldn't help but feel the anguish this family must experience daily. And yet, Samantha was here. I marveled at the courage it must have taken for this youngster to present herself with such dignity and grace, all the while fearing still another rejection. I tried to ignore the "daddy-pain" I was feeling inside and managed to blink back my tears. "Okay, then, young lady," I said, squatting to look her straight in the eye. "In a week or so-you are mine." She giggled a little. "We are gonna do gymnastics and we are going to have Big Fun!"

## **NUTS AND BOLTS**

### **Vendorship**

California, like many other states in the U.S., uses a Regional Center Vendor System. Vendor approval is the process which certifies that an individual, program or facility meets the minimum standards to provide service to clients with developmental disabilities of any Regional Center in California. The standards are set by the State Department of Developmental Services. To become a vendor and have a reimbursement rate established, a facility or individual submits an application and support documentation to their local Regional Center. These applications are accepted only if an identified need for the service has been determined.

When I began my program at the L.A. School of Gymnastics and at Gymnastics Olympica, I submitted applications to the centers nearest each facility. To identify the need, I referred to the Americans with Disabilities Act (ADA) which states that all children are entitled to an educational experience. I stipulated that gymnastics was a proven means to enhance a child's motor planning and hand-eye coordination. I explained how it promoted healthy physical function and could be instrumental in promoting organizational behavior. I concluded that this was a vital part of the educational experience that all children, according to the ADA, were entitled to receive.

Once vendored, both facilities where I offer BIG FUN were included on the statewide vendor panel listing, and approved for any Regional Center wishing to purchase service. (Please note: vendor approval does not guarantee referrals, rather it makes the approved facilities eligible to provide service and be reimbursed by a Regional Center. I had to promote my program at each Regional Center that referred to me, and with each service coordinator, one-by-one.)

Needless to say, one of the first questions Samantha's mom had asked was "are you vendored?" Because my answer was yes, we could proceed with assessment. Once Samantha's service coordinator received my assessment, the request for service followed a predictable course through the Regional Center administration to "green-light" funding.

How are clients referred? If a public source such as a school district or the Department of Rehabilitation offers a needed service, the Regional Center staff refers the client to that service. If there is no public service and the client has no other means to obtain the service, the Regional Center may purchase it from an approved vendor. In Samantha's case, no other public source could offer professional gymnastics in a safe environment with a qualified instructor. Hence, her service coordinator referred her to me.

However, the decision of which vendor to use is based on a number of factors including the geographic location of the service, the nature of the service provided and how it meets the individual family and client's need. It is important to have the guidelines for your program firmly established and your instructors well versed in serving the needs of special kids before soliciting referrals. Attention should be paid to the creation of an assessment form which effectively describes the child's current level of performance and clearly states attainable goals available within your specific program.

How is a provider reimbursed for service? Each gymnastics facility determines its own service rates. An individual or gymnastics facility has the right to charge what it feels is a fair rate for service, but referrals occur only after the Department reviews cost statements and a program description from the gym. For example, BIG FUN's rates at both operating facilities have been approved; thus based upon my assessment, Samantha's need for a movement experience was agreed to by the Regional Center. I received a written authorization to fund, (the "green-light") which must be generated by the Regional Center prior to the delivery of service. The copy was sent by mail, and included specific instructions on how to claim a reimbursement. At the end of the month, I received my "Provider of Care Claim" statement from the center and checked off the dates and number of sessions I'd had with Samantha for the month, sent it back, and received my check. (Please note: procedures may vary by state.)

Vendors must agree to payment made by the Regional Center as full payment for services rendered. Providers are generally paid one month in arrears, in the month following delivery of service. Clients and families may not be charged additional fees for the same service.

## **BACK TO SAMANTHA: AS TIME WENT BY**

With an approved recommendation for 30-minute sessions twice a week, Samantha and I started BIG FUN. At the end of the first



month, Samantha was into the rotary swing, pencil rolls, the bungee belt, forward rolls on bars, as well as other equipment to train and experience. During this time, I discovered Samantha's considerable intelligence; not only is she an all-around wonderful kid - she's an honor student, as well. She has other services through the Regional Center, but told me that "coming to gymnastics is by far the best thing the Regional Center has to offer."

Since then, Samantha and I have learned a lot about each other. We've laughed, played, cried, hugged, and so much more than can be put into words. For me, it's been incredible. She is a joyous spirit. She thinks that I'm the one in charge, but really, it is she. She motivates me to do everything that can possibly be done and then inspires me to search for more. The effort she puts out in a session is equivalent to the effort put out by our competitive team gymnasts. Like them, Samantha must be focused for the entire workout. She must take responsibility for the workout in order to maximize productivity each session to get maximal results. And, of course, she must love doing it.

Which she does, because it's BIG FUN.