



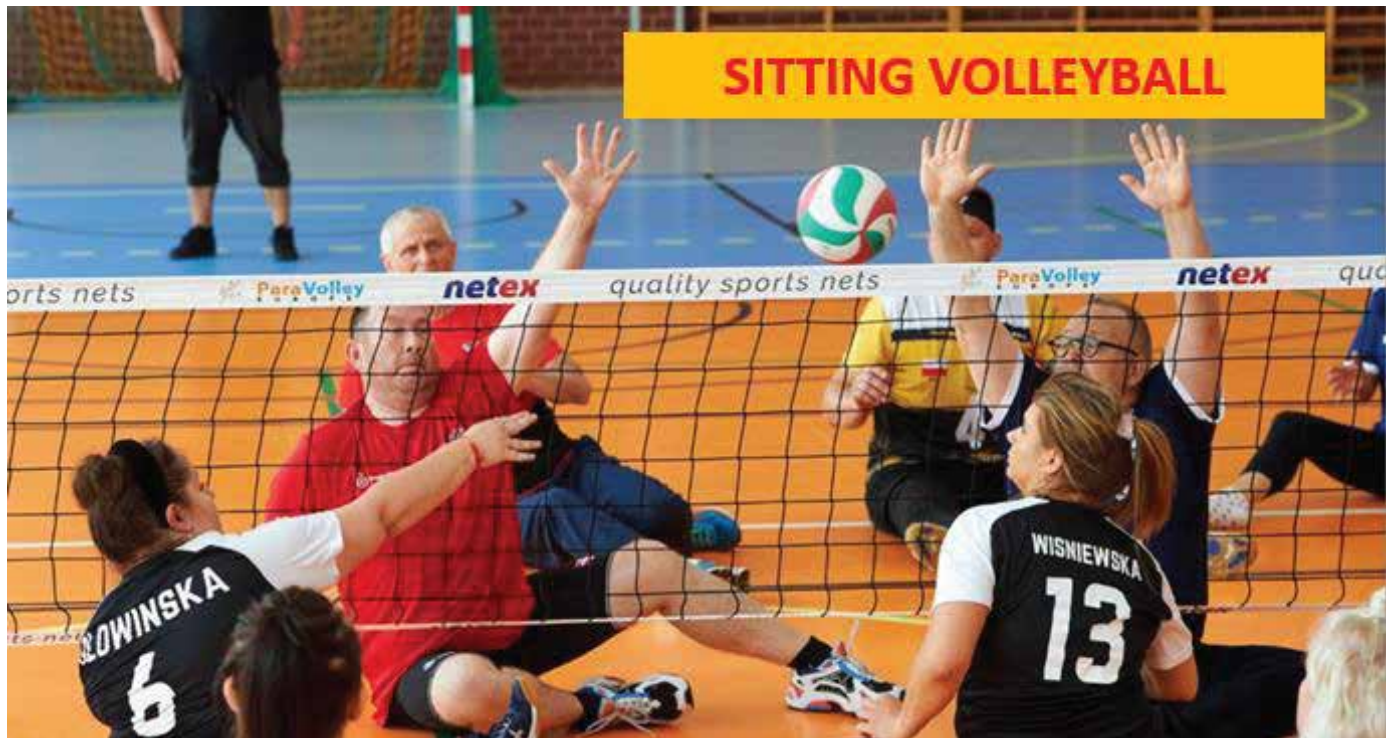
Dis+Abled

S P O R T P R O J E C T



GAME 10 - SITTING VOLLEY
TRADITIONAL AND ADAPTED **GAMES**
FOR SOCIAL INCLUSION AND INTEGRATION OF
PEOPLE WITH DISABILITIES AND ABLE-BODIED

<https://disabled-erasmus.org/>



INTRODUCTION

Sitting volleyball is a Paralympic sport, played all over the world, due to its exceptional possibilities of integrating different participants by sport.

Sitting volleyball was invented in the Netherlands by the Dutch Sport Committee in 1956 as a rehabilitation sport for injured soldiers. In 1958, the first international sitting volleyball match was held between Germany and Dutch club teams.

THE RULES OF THE GAME:

Unlike in traditional volleyball, the court is smaller and the net is suspended at a much lower height. It is important to move efficiently and quickly around the court, thanks to which the ball is not allowed to fall on the defended part of the court.

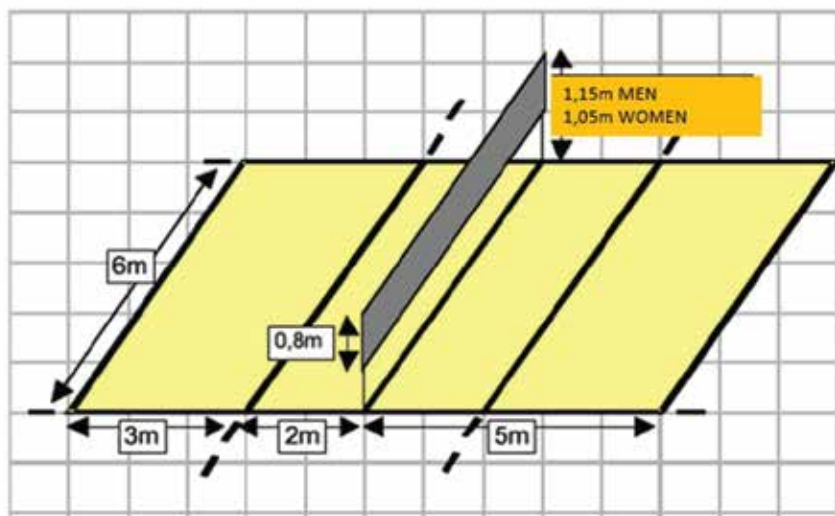
FIELD AND EQUIPMENT:

Volleyball played in a sitting position is a team sports game based on the rules of volleyball, modified to allow both people with disabilities and able-bodied people to play on one field, giving them an equal chance to win.



The playing field is a rectangle, measuring 6 meters wide and 10 meters long. The center line divides the field into two halves, measuring 5 meters long. The attack line is 2 meters away from the center line, thus defining an attacking field, measuring 6 x 2 m.

The dimensions of the net for the game are also proportionally reduced. The length of the net is 7 meters, of which 6 meters is between the antennae. The width of the net is 80 centimeters, and because the dimensions of the mesh in the net are the same as in traditional volleyball, there are two fewer of them, namely 8.



In men's games, the net is suspended at a height of 115 centimeters from the ground, while in women's games, it is 10 centimeters lower.

It is worth noting that the reduced dimensions of the court increase the importance of the technical training of players in maintaining the continuity and effectiveness of the game.



DIFFERENCES IN GAME RULES BETWEEN TRADITIONAL VOLLEYBALL AND SITTING VOLLEYBALL:

The rules of the game applicable in sitting volleyball do not differ much from those used in its most popular version, so only the different rules are listed below:

1. From the moment the ball is put into play until the end of the action, the player must be in contact with the ground with some part of their torso (most often the buttocks).
2. The position of the player in relation to the attack line and the end line of the court is determined by their seat.

Example: the legs of the player executing the service may be on the court provided that their buttocks remain at the end line.

3. Blocking the service is permitted, and any contact of the ball with the blockers' hands, in the case of continuing play, is not counted as the first hit.

The characteristic feature of sitting volleyball is that the upper limbs are used not only to hit the ball, but also to move around the court.

The integrative nature of this game, added to all the other advantages of traditional volleyball, makes this sport exceptional.



INTEGRATION AND POSSIBLE ADAPTATIONS:

Tournaments are organized in which able-bodied people are allowed to participate, because sitting volleyball is a discipline with a very integrative dimension. Although it is particularly popular with people after amputations, it can be played by everyone. During the match, they must follow only one main rule, namely, they are not allowed to lift their buttocks off the court when serving the ball. So everyone plays at the same level, sitting down.

This type of volleyball is often used as an exhibition game. An interesting fact is that in this discipline, able-bodied people do not have a privileged position when confronted with people with disabilities.

A huge role here is played by functional technique and teamwork. These elements receive the most attention during training.

This sport is very spectacular and fast, which is why it is so popular among people with disabilities all over the world. The popularization of sitting volleyball is facilitated by the fact that it can be played in relatively small sport halls. The cost of equipment needed is also not too high. The key to success is willingness, determination and conscientiousness in training.





MEDICAL CLASSIFICATION: ▲

Sitting volleyball is one of the few sports in which the statement that it is a sport for everyone is not an exaggeration. In this discipline – even at the highest level of competition – there is a room on the court for:

- people with and without disabilities,
- a 14-year-old and a 60-year-old,
- a woman and a man.



During matches played at the Paralympic Games, World and European Championships, only players with a permanent disability of the musculoskeletal system to a significant or minimal degree can play. However, only one player with minimal damage to the musculoskeletal system can be on the court at a time.

In club competitions around the world, the six players, who are on the pitch, are allowed to have two able-bodied players and one with minimal damage to the musculoskeletal system. The decision on the qualification of players to a given group is made by classifiers, based on medical documentation and tests examining the degree of musculoskeletal dysfunction.

The most frequently observed dysfunctions of the musculoskeletal system:

- amputations of the lower and upper limbs,
- paresis of the lower and upper limbs,
- shortening of the lower and upper limbs,
- dysplasia or luxation of the hip joints,
- condition after Perthes' disease,
- identified instability in the knee joint (e.g. torn cruciate ligaments),
- chondromalacia of the patella,
- limited range of joint movements (e.g. lack of flexion in the knee joint),
- weakened muscle strength of the lower and upper limbs,
- hip or knee endoprosthesis,
- severe circulatory disorders in the lower limbs,
- pseudoarthrosis of the lower limb,
- luxation of the glenohumeral joint,
- cerebral palsy (diplegia with spasticity of 1–2 degrees, hemiplegia with spasticity of 1–2 degrees, monoplegia and minimal athetosis).



Very often, players classified in the group with minimal damage to the musculoskeletal system are former volleyball players with injuries, in whom – due to the destruction of the joint surfaces – it is impossible to perform, for example, reconstruction of the cruciate ligaments, and therefore their damage to the musculoskeletal system is defined as permanent.

It is obvious that due to their technical training and physical parameters, they easily adapt to sitting volleyball.





Dis+Abled

S P O R T P R O J E C T



Co-funded by
the European Union

Funded by the European Union. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or the European Education and Culture Executive Agency (EACEA). Neither the European Union nor the granting authority can be held responsible for them.

<https://disabled-erasmus.org/>