



**Sport, Disability & Metaverse.  
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# MORE THAN 50 YEARS WITH ADAPTED PHYSICAL ACTIVITY AS A REHABILITATION TOOL IN NORWAY





# Beitostølen Healthsport Center



- Part of the National specialist Health Care System in Physical medicine and Rehabilitation
- Funded by National Health Service
- Admittance requires application from a medical doctor
- Cooperation between institutions, municipalities and local environments.
- 130 professionals, APA specialists, physiotherapists, physicians, occupational therapists - interdisciplinary team
- No cost for users/patients



# Who use the Healthsport Center?



- 900 users per year
- All kind of disabilities
- 2 years of age and older
- Lifetime approach



# Vision; Activity and Participation through life for everyone



**“Focus on the potential”**

# BHC has 3 main functions

- 1) Rehabilitation practice
- 2) Education and knowledge translation
- 3) Research and innovation



# Healthsports = Adapted Physical Activity (APA)



- **Adaptation** is the core expertise of the field
- **Adaptation** of activities, rather than of the participants
- **Assistive devices**, individualized adaptation and learning
- **Assessment** of preferences, goals and movement analysis is a prerequisite for adaptation



# Participation – the ultimate goal



## Model coherence

– goal process;

- What do others with the same gender and age do?
- What is the goal?
- What are the personal resources?
- How can the social and physical environment and the activity be adapted?



# A rehabilitation period is important because;



- 1. Participation in preferred activities – increase motivation**
  - to improve skills and activities that the children have tried before
  - improve skills and become more satisfied with their own skills
  - gain courage to try new activities
- 2. Experience enjoyment in activities**
- 3. Concentrate on a few activities**
- 4. Increasing the feeling of safety for the parents is the most important benefit**
- 5. Intensity; 3-5 activity sessions a day in three weeks**



# Children`s perspective



# Family course



- **Ordinary rehabilitation period and clinical intervention**
- **2nd week includes parents and siblings**
- **Emphasis: family should be active together**
  - The parent role
  - The sibling role
- **8 family courses a year**



# «Core components»



1. Active together and mutual engagement
2. Local competence
3. Individual follow up goals
4. Common follow-up program
5. Facilitators for activities



*“For children with disabilities like me, we need to know that no matter what our condition is, there is still a way that we can do what we want to do in our life. To feel like we are doing the stuff that all the other kids do” – stakeholder, 17y*



# A "free/safe place" for learning together



**With enough time!**

# The way of thinking for our APA practice?



**Friends, fun and family - combined with a "free place" for learning may appear as the most important potential for being active, and also give APA a powerful contribution to autonomy and the meaning of life for everyone.**





# BHC is an independent research institution in a network model



- **Academic institutions**
  - Cooperation with the Norwegian School of Sport Sciences
- **Health institutions**
- **National Competence Centers**
- **User organizations**





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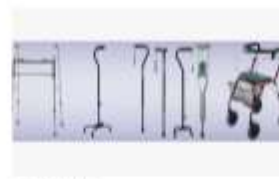
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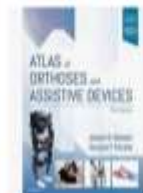
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# ASSISTIVE DEVICES FOR ACTIVITY (ADA)





# Laws and guidelines in Norway (ADA)

- 26 years old (AKT-26)
  - Under (free):
    - Participate in physical activity
    - Exercise, stimulation and activation to maintain or improve their ability to function and also special equipment related to play and sport activities.
    - Social participation
  - Over (10% max Nkr 5000,- (Euro 450,-))
    - Maintain or improve their ability to function
    - Participate in physical activity



## Laws and guidelines

- Permanent disability (2 years)
- Can get as many as you needs – if you need them...
  - The patients needs decides
    - What's necessary?
    - Wishes and demands...
    - Two homes?
    - +++
  - Not for competitions in para sports...

# The system



- NAV (The Norwegian Labour and Welfare Administration)
  - 17 offices for assistive devices
  - NAV purchases and owns the devices
  - Agreement between NAV and the dealers (ADA)
    - [Hjelpemiddeldatabasen](#)
  - Fully financed by the Norwegian state (ex. AKT26)
  - The main responsibility lies with the therapists in the municipalities (guiding, learning etc)
    - Lack of competence or experience, and time...



## ADA at Beitostølen HSC

- Thorough investigation of the patient's total situation, where the assistive device is seen in the context of other goals.
- It is often necessary to try out several assistive devices to find a good solution. Special adjustments may also be (or is always) required.
- Just as important as the device itself, is proper teaching and training in using the device.





## ADA at Beitostølen HSC

- We have the patients in three or four weeks
- Week 1: Investigate needs and demands
- Week 2 (3): Try out different ADA (if needed) and learn how to use them. Get in touch with local therapists.
- Week 3 (4): Apply for the right ADA
- We apply for approximately 100 devices per year



## Why ADA?

- The ADA is never the main goal!
- ADA is one of several measures/actions to reach the activity the client wants.

# Development and innovation



DETAILS ARE THE  
DIFFERENCE BETWEEN  
GOOD STUFF  
AND GREAT STUFF

STEPHEN BREWSTER  
IN SUNDAY MAG



# From elite athletes to beginners



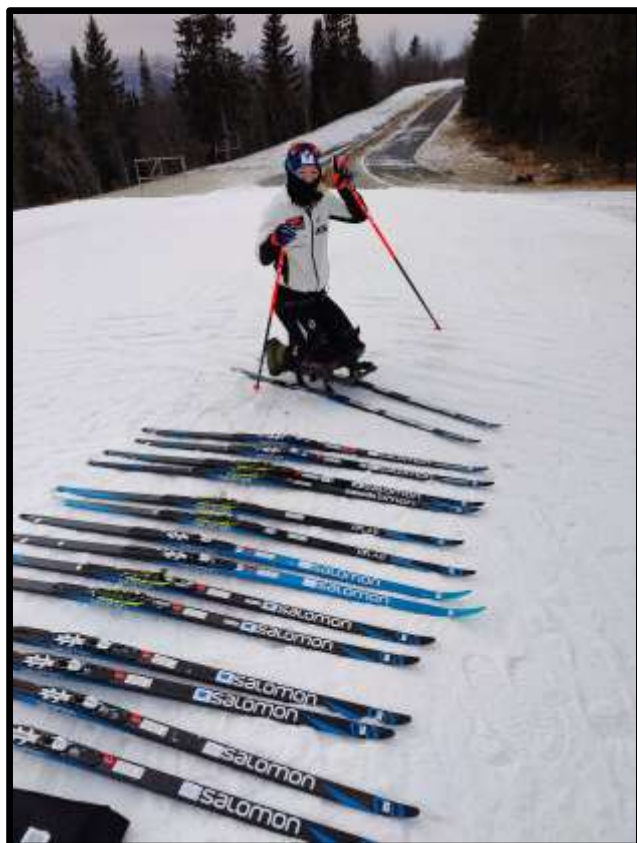
«OPTIMIZATION»

Optimize for performance – Optimize to master

# From elite athletes to beginners



# From elite athletes to beginners



# From elite athletes to beginners



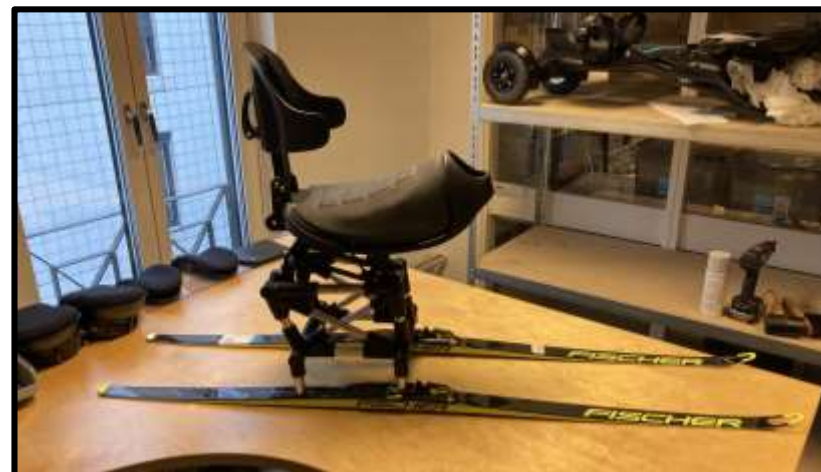
**Knowledge shared = Knowledge<sup>2</sup>**

# Start using when you're able to





# Developing



**Participation  
is the main  
goal 😊**





# Thank's for having us 😊

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