Coaching Players with a Disability

Author: Paul Stimpson
Posted On: October 05, 2011

Classification System

The object of the classification system is to group together players who have a similar movement potential.

The competition system is divided into 11 individual classes:

Classes 1 to 5 for wheelchair players

Classes 6 to 10 for standing players

Class 11 for learning disability

With wheelchair and electric wheelchairs (used only by class 1) it is important to remember the following:

- 1. Wheels should be placed parallel. If they are oblique they could generate circular movements that eventually change the position of the players in relation to the table.
- 2. Front wheels work on the balance, cushioning and stability of the chair
- 3. A small rear wheel can be used. This will provide further stability in forward and backward movements and avoids loss of balance backwards.
- 4. Modification to the seat cushion or rolling of the wheels. This may improve the player's height in relation to the table.



Players with a severe disability on the playing arm can also use a strap around their hand to stop the racquet from sliding out of the hand.

For some players the standing position cannot always be maintained independently therefore in many cases orthopaedic devices are required to strengthen the diminished functions or replace them when they do not exist. The selection of crutches or walking sticks will depend on each particular case and on the player's specific physical restrictions and individual needs.



Other adaption's to consider are:

With the table the cross bar should be a minimum of 40cms from the end of the table. For those with visual impairment use orange coloured balls.



Coaching Table Tennis Skills and Techniques

General points to consider:

- 1. Take time to find out what difficulties they have due to their specific disability.
- 2. Check the grip provides maximum control.
- 3. A shorter swing may aid balance.
- 4. The rule amendments.

The Grip

- 1. Shake hand grip.
- 2. The racket is held in the palm of the hand.
- 3. The thumb and forefinger lie roughly parallel to the straight edge of the rubber.
- 4. The remaining three fingers are wrapped loosely around the handle to provide stability.

Dependent upon the nature of their disability there are different ways that a player may grip the bat but ensure

that they are able to perform the widest range of techniques and shot making. In the case of quadriplegic players who do not have gripping strength in their hands so gripping the bat is made easier by using elastic bandages to join the bat and the hand, or grips of other kinds on the bat handle.



The ready position

For standing players

- 1. Feet should be shoulder width apart.
- 2. Knees slightly bent and the body should be leaning slightly forward from the hips.
- 3. Weight should be on the toes because this will help provide balance and movement.
- 4. Players should be positioned about arms length from the table.
- 5. The racket should be slightly above the table and in front of the body. This makes it easy to transfer from forehand to backhand.

This will not always be possible; in some cases, a proper distance between the legs will not exist, or it may not be possible to bend the knees, or the body weight will be distributed only or mainly on one foot. Each case should be considered individually and it will be necessary to find the most effective adaptation for each player. In the case of disabled people having restrictions of any kind in their legs, or difficulties in the mobility or reach of the arm they are using, the player's position in relation to the table may need to be adjusted. The most appropriate table position will depend on the degree of mobility and on the characteristics of the techniques and strategies the player adopts. The following factors also play a role in the position of the body in the ready position: height of player, movement speed, reaction speed, technical abilities and style of play.



Wheel chair players

The position of the wheelchair in relation to the table will depend on how far the player can reach to both sides. Chairs may be placed square to the table or slightly oblique towards either side according to the player's needs dependent upon specific physical characteristics. The player's height should be considered so that the legs do not hit the lower inner edge of the table thus causing injury. The free hand will be placed on the ring of the wheel to provide stability.



The four basic strokes

Standing Players

The basic coaching points for the forehand & backhand drive and both push strokes at UKCC Level 1 can be applied for standing players. Some adaption may be required to meet the player needs.

Wheel chair players

Forehand drive

Preparation: For right handed players: the hips rotate to the right as the arm is drawn back and racket angle is closed. Where the hips cannot rotate, Class 1 to 3, the person should try to rotate using the shoulders. When this is possible, the free hand should grip the ring of the chair to maintain balance and stability.

Swing–Contact: The racket moves forward in line with the top of the bounce where contact is made slightly in front of the body. If the player has sensation in the legs, the weight is transferred from right leg to left leg. The forearm accelerates on contact to produce speed and power. This type of movement cannot be made in class 1 and some class 2, mainly due to the lack of functionality in triceps and wrists; in these cases, the arm moves forward driven by the shoulder and hits the ball in its forward trajectory. The wrist falls towards the front as the movement finishes.

Follow Through: The upper body continues to rotate to the left with the weight transfer and the arm finishing in the 90°/90° position (90° between upper arm and body and 90° at the elbow). In class 1 or 2, on many

occasions, the drive towards the front cannot be stopped and therefore the arm moves slightly further to the left resulting in a loss of general body balance.

Note: The free arm: In class 1, is generally hooked in the handle at the back or in any other position that helps general body balance without affecting the stroke. In classes 2 to 5, the hand will generally be placed on the ring of the wheel to provide stability, which allows the body to lean forwards and partial movement of the wheelchair.



Backhand Drive

Preparation: For right handed players: the racket is brought back to the left, and is usually slightly higher in relation to standing players, closer to the chest and in the middle area of the body. This will all depend on each individual player and their height in relation to the table. Players who have sensation in their legs will try to transfer the body weight slightly to the left using both their left leg and foot. The free hand, if the player is able, will grip the ring of the wheel.

Swing-Contact: The racket moves forward to contact the ball in front of the body with the wrist straightening and forearm accelerating on contact to produce speed and power. Where there is sensation in the legs, the weight is transferred from left leg to right leg; at the moment of impact, the body weight is balanced between both legs. The movement performed by the arm, forearm and wrist is similar to that performed in the case of standing players. In the case of Class 1, this type of movement cannot be made mainly on account of the lack of functionality in the triceps and wrist. Under such circumstances, the arm moves forward driven by the shoulder and impacts the ball in its forward trajectory in front of the body. Where there is wrist fixation, the movement can be made by rotating the forearm.

Follow Through: The racket moves forward and upward to a closed position in front of the upper body or head area. In Classes 1 and 2, the drive towards the front sometimes cannot be stopped, as a result, the wrist falls forward and finishes the movement and there may also be a loss of general body balance forward.

Backhand push

Preparation: For right handed players: hips and shoulders are rotated slightly so the right side of the body is closest to the table. The racket is brought back with elbow away from the body and the racket in a slightly open position just above elbow height. In many cases there will be no rotation of the hips and shoulders and the movement will be performed with the body square on to the table. A proper angle between the arm and the forearm, or a correct alignment between the forearm and the wrist, will not always be possible to maintain if the wrist or triceps have loss of function. The opposite hand, if able, will grip the ring of the wheel.

Swing-Contact: The racket moves forward to "brush" the bottom part of the ball, with contact made in front of the body and using the wrist to brush under the ball to produce increased backspin. When there is poor mobility of the forearm or wrist, this will be restricted and the ball will not have strong rotation. However, players should attempt to perform this technique because a push without spin may still be effective. In the case of quadriplegic players, Class 1, the shot results from a drive performed by the shoulder moving forward the forearm and the wrist. With cases of wrist fixation, the attempt to create spin will be made through a more forceful movement of the forearm. Players who have a loose wrist but no control will have to learn to coordinate the movement so that impact on the ball corresponds with the wrist moving forward. It is important that the contact point does not exceed the body height; therefore, the player will have to learn to perform this technique at different ball heights.

Follow Through: The forearm moves forward above the playing surface with the racket open at the conclusion of the stroke. On some occasions, the movement will be shorter so that the player does not lose his balance forward. If the wrist is used well without the aid of the forearm, this will be enough.

Note: When the ball is close to the body, in the middle of the table, the player must move the elbow to the right and push the ball across the body and forward.

Forehand push

Preparation: For right handed players: hips and shoulders are rotated slightly so the left side of the body is

closest to the table. The racket is brought back to right hip area in a slightly open position. This position cannot be adopted in many cases, especially where there are neck or dorsal injuries. When possible, there should be an attempt to perform a slight shoulder rotation so that the body can adopt the best position. A proper angle between the arm and the forearm, or a correct alignment between the forearm and the wrist, will not always be possible to maintain, as with the backhand push. The opposite hand, if applicable, will grip the ring of the wheel.

Swing-Contact: The rackets moves forward to "brush" the bottom part of the ball, contact is made in front of the body and using the wrist to provide increased backspin. When there is poor mobility of the forearm or wrist, the ball will not have strong rotation, however, the player should still attempt to perform the technique as it can still be effective. In the case of quadriplegic players, Class 1, the stroke is driven by the shoulder dragging, the forearm and the wrist forward. When it comes to wrist fixation cases, the attempt to create spin will be made by greater use of the forearm. Players who have a loose wrist but no control will have to learn to coordinate the movement so that impact on the ball corresponds with the wrist moving forward. It is important that the contact point does not exceed the body height; therefore, the player will have to learn to perform this technique at different ball heights.

Follow Through: The forearm moves forward above the playing surface with the racket open at the conclusion of the stroke. Sometimes, the movement will be shortened so that the player does not lose balance forward. Sometimes, if the wrist is used well without the aid of the forearm, this will be enough.

Serving for standing and wheelchair players

- 1. Normal serving rules apply.
- 2. When it is not possible to show the ball in a flat palm, as with amputees or hemiplegic players, the player can put the ball on the side of the racket or toss the ball with the racket hand.
- 3. Some players, Class 1 and 2 with hand restrictions will not be able to show the ball correctly in a flat palm, so they could hold the ball with the fingers or place the ball on a side of the racket.



Note: Players in Class 1 and 2 must notify the umpire before the match if they are not able to do a good service due a physical disability. On the classifications cards there is a section indicating what limitations if any a player has in making a legal serve.

Downloaded From:

https://newsarchive.tabletennisengland.co.uk/news/archived/coaching-players-with-a-disability/