

***A World of Possibilities: An Exploration of Experiences of Children with Disabilities' Participation in a Surf Therapy Programme in South Africa***



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## Declaration

I, **Roxanne Jade Davis**, do hereby declare that this thesis, titled **A World of Possibilities: An Exploration of Experiences of Children with Disabilities' participation in a Surf Therapy Programme in South Africa**, is my own work and it has not been submitted to any other University for a degree or examination. I declare that sources of information used or quoted have been acknowledged and indicated in the reference list. I have used the 7th edition of the American Psychology Association referencing style.

Signature \_\_\_\_\_

Date \_\_\_\_21 May 2024\_\_\_\_\_

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## **Dedication**

To my husband William Davis

To my children Daniel, James and Grace Davis

To my grandmother Charlotte Kilpatrick and late grandfather Len Kilpatrick

## **Abstract**

Literature shows evidence of the benefits of surf therapy. However, as it is still a relatively new form of therapy, there is limited research available on it. This absence of literature is particularly evident for children with disabilities in South Africa (Benninger et al., 2020).

Therefore, the intention of this study is to contribute to the knowledge gap surrounding research on the effectiveness of surf therapy as a therapeutic tool for children with disabilities in South Africa. While studies conducted in other countries have shown promising results, there is a need for research in the South African context where large health inequalities exist.

The research aim was to explore the experiences of children with disabilities who participated in a surf therapy programme in the Western Cape. The research objectives were to:

- Explore the effects on children with disabilities during and after participating in a surf therapy programme.
- Determine the changes experienced by children with disabilities who participated in a surf therapy programme and by their parents, guardians, and professionals.
- Identify the experiences of individuals delivering a surf therapy programme for children with disabilities.
- Describe the adaptations of a surf therapy programme for children with disabilities

A qualitative participatory research approach was used for this study. The research design was a longitudinal exploratory case study underpinned by interpretive phenomenological analysis. Thirty-five participants took part in the study, namely five children with disabilities, five parents, five professionals, and twenty individuals that delivered the surf therapy programme. The data gathering methods used with participants were Narrative Interviews, the Most Significant Change technique, and Ripple Effects Mapping, respectively.

The findings supported the promotion of mental, physical, social, and emotional health through a surf therapy programme. Additionally, participation in the programme had an impact on reshaping participants' worldview, and the development and mastery of new skills.

Three main themes emerged from chapter 4, the analysis of the five children's narratives:

**Theme 1:** *Surfing has taught me to be more myself:* promoting mental, emotional, and physical health.

**Theme 2:** *People realised they must not underestimate me:* Reshaping a worldview

**Theme 3:** *Now I like to (am) stress free:* Developing new skills.

Four main themes emerged from chapter 5, the analysis of the perspectives of the parents, guardians, and professionals:

**Theme 1:** A Sanctuary of Self Discovery: Personal growth and development.

**Theme 2:** Broadening the horizon: Noteworthy and meaningful changes that happened outside of the participants' surfing environment as well as social changes experienced.

**Theme 3:** Beyond the barriers: The viewpoint of changed perspectives and new realisations.

**Theme 4:** *An open door:* The areas of change and their significance, as well as areas the programme participants attribute to this change.

Six main themes emerged from chapter 6, the experiences of the individuals delivering the surf therapy programme for children with disabilities:

**Theme 1:** *It is both a learning and a teaching experience:* Skills development and mastery for the individuals delivering the surf therapy programme.

**Theme 2:** *Being unapologetically who you are:* Experiences of positive affective behaviour.

**Theme 3:** *View differently abled differently:* Multi-directional interaction which led to transformational changes in how disability is viewed.

**Theme 4:** *This is my community, my family:* The implications and impact of the surf therapy programme for and on the community.

**Theme 5:** *We are a diverse group of like-minded, goal-orientated, collaborative people:* Unique qualities of the individuals delivering the surf therapy programme.

**Theme 6:** *Our ripple is longer than we think:* The positive influence of an individual's actions continues to have an impact after the initial act of service.

The synthesis of findings across these three chapters is discussed in chapter 8.

Four key findings emerged:

**Key finding 1:** The ambassador's journey of change: An example of the effects experienced during and after participating in a surf therapy programme.

**Key finding 2:** Not all scary circumstances lead to a negative outcome: An example of the effects experienced during and after participating in a surf therapy programme.

**Key finding 3:** The reciprocity of healing: Providing an opportunity for healing as an example of the effects experienced during and after participating in a surf therapy programme.

**Key finding 4:** The ripple is longer than you think: Highlighting the broader impact that surf therapy can have on society.

The research also produced a Theory of Change reflecting significant outcomes and impact, and adapted a programme and developed a guide for delivering surf therapy for children with disabilities in South Africa.

There are three key implications of the study:

**Key implication 1:** It has already influenced and can continue to influence policy based on the United Nations Convention on the Rights of Persons with Disabilities in South Africa, both locally and nationally.

**Key implication 2:** The guide for delivering surf therapy can be used for the implementation of surf therapy programmes across other beaches in South Africa.

**Key Implication 3:** Participating as volunteers in surf therapy can provide students with practical disability-inclusive experience in relation to their field of study.

## Definitions of Terms

**Children with disabilities:** “Children who have long-term physical, visual, hearing, communication, learning (cognitive and intellectual), and psychosocial/behavioural impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others” (Hendriks, 2007).

**Impairment:** “Impairment is any loss or abnormality of psychological, physiological, or anatomical structure or function. Impairments are disturbances at the level of the organ which include defects in or loss of a limb, organ, or other body structure, as well as defects in or loss of a mental function” (Hendriks, 2007).

**Surfing:** Surfing is a “sport of riding breaking waves toward the shore, especially by means of a surfboard” (Britannica, n.d.).

**Surf Therapy:** “A method of intervention that combines surf instruction/surfing and structured individual and/or group activities to promote psychological, physical, and psychosocial well-being. While it is not yet an evidence-based practice, evidence is growing and surf therapy has been found to be beneficial to a variety of populations including veterans, active duty service members, youth and adults with disabilities, and youth in need of social and emotional support. It is anticipated that the definition of surf therapy will evolve as evidence grows” (Benninger et al., 2020).

## List of Acronyms

ASD:	Autism Spectrum Disorder
CBR:	Community-Based Rehabilitation
DSD:	South African Department of Social Development
DWCPD:	South African Department of Women, Children and People with Disabilities
ICF:	International Classification of Functioning, Disability and Health
ISA:	International Surfing Association
ISTO:	International Surf Therapy Organization
NHS:	National Health Service
NGO:	Non-Governmental Organisation
NPO:	Non-Profit Organisation
PPCT:	Person Process Context Time
SDGs:	Sustainable Development Goals
SSA:	Surfing South Africa
UN:	United Nations
UNCRPD:	United Nations Convention on the Rights of Persons with Disabilities
UNDP:	United Nations Development Programme
WHO:	World Health Organization

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# Chapter 1: Introduction – Setting the Scene

## 1.1. Background

This study explores the experiences of participation in a surf therapy programme for children with disabilities in the Western Cape. The study contributes to understanding the physical, psychological, social, and emotional effects of surf therapy for children with disabilities. The study also describes the most significant change experienced by the children through the lenses of their parents/guardians and professionals, as well as the experiences of the individuals delivering the programme.

Disability is the umbrella term for impairments, activity limitations, and participation restrictions. Persons with disabilities include those who have long-term physical, mental, intellectual, or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others (Hendriks, 2007). A disability is regarded as a condition of the body and/or mind that makes it more challenging for the person with the condition to do certain activities and restricts interaction with the world around them (Simeonsson et al., 2003). It is estimated that 16% of the world's population (1.3 billion) lives with a significant disability (World Health Organization [WHO] & the World Bank, 2011) while UNICEF (Berman-Bieler et al., 2023) estimate there to be nearly 240 million children with disabilities in the world, with 207.4 million (12.5%) children aged 5–17 years and 236.4 million (10.1%) children aged 0–17 years that have moderate-to-severe disabilities. Patterns of disability in a particular country are influenced by trends in health conditions, environmental conditions, and other factors such as traffic accidents, diet, conflict, and substance abuse (WHO & the World Bank, 2011). Disability disproportionately affects vulnerable populations, and children from poorer households are at significantly higher risk of disability than other children (WHO & the World Bank, 2011).

Disability is a complex and multifaceted phenomenon that affects millions of people worldwide, including those in South Africa. South Africa has a high prevalence of disability, with an estimated 2.9 million people living with a disability in the country (Statistics South Africa, 2012). In South Africa, disability prevalence is estimated to be around 7.5% of the population, with the prevalence being higher among women

than men, and significantly higher in rural areas compared to urban areas. According to the Census 2002 statistics, approximately 436 123 children, which makes up 2.5 percent of the total child population, were reported to have some form of serious disability (Statistics South Africa, 2002). It was estimated that by 2011, 474 000 children had been living with severe disabilities in South Africa, with many more children having mild to moderate disabilities (Department of Social Development [DSD], Department of Women, Children and People with Disabilities [DWCPD], & UNICEF, 2012). The children participating in this study are within this latter cohort, between the ages of 12 and 16 years old.

The health benefits of physical activity for children and youth have been well documented (Janssen & LeBlanc, 2010). Physical activity can be achieved through participation in sporting activities, which provide exercise in a recreational environment, contributing to physical fitness, social interaction, and mental well-being (Eime et al., 2013). The World Health Organization (WHO) recommends that children between the ages of 5 and 17 years participate in 60 minutes or more of moderate to vigorous intensity aerobic activity throughout the day . The activity requirements for children with disabilities are the same as those without a disability (WHO & the World Bank, 2011).

One such sporting activity is surfing, and in recent years surf therapy programmes have shown increasing evidence of physical, psychological, and psychosocial benefits (Sarkisian et al., 2020) for persons with disabilities participating in these programmes. Surf therapy offers benefits not only to individuals with disabilities but also to their parents, professionals, and volunteers involved in delivering the programmes.

## **1.2. My positionality**

My introduction to surf therapy began in 2016 when a friend with a brachial plexus injury of the right arm returned from competing at the World Adaptive Championships in California. A brachial plexus injury is the paralysis of the arm due to an injury to the brachial plexus, a network of spinal nerves (Benjamin, 2005). He shared about the global movement of surf therapy and its benefits, and asked if I would get involved as I was already teaching people to surf at the time.

I have an extensive background in surfing, as one of three International Surfing Association (ISA) Course Accredited facilitators in South Africa. I am also a registered Psychological Counsellor with the Health Professions Council of South Africa (PRC 0021628). My combined passions for surfing and interest in people and their well-being was a natural fit, and I therefore started a surf therapy programme in Muizenberg in 2016. To date, I have had over eight years of experience in working with children with disabilities through the existing surf therapy programmes.

In order to ensure that surf therapy in Cape Town, South Africa, was run independently and according to the international standards, a non-profit organisation (NPO), Roxy Davis Foundation, was formed in 2019. This NPO was registered to formalise surf therapy programmes in South Africa and to create a platform for research opportunities in this field. This foundation conducts surf therapy programmes and, to my knowledge, is the only accredited surf therapy programme in South Africa affiliated to the governing bodies Surfing South Africa and the International Surf Therapy Organization (ISTO).

As a professional in psychological counselling and surfing, I am very aware that it is essential that the voices of the participants are heard and their experiences and stories shared in their own words. As a researcher, the privilege I have to be able to access the ocean and enjoy the therapeutic benefits of the natural outdoor environment whenever I like can easily be taken for granted, and the stories of locals that live less than a kilometre from the ocean but have never touched the seashore due to multiple barriers cannot be ignored.

As the researcher, I was an observer during the surf therapy research sessions over the course of the six weeks of surfing, and the sessions were all conducted by a professional surf therapy team. I have an interest in adding to the body of knowledge of surf therapy.

As I begun this research, I was aware that I had no similarities associated with the participants. I am a white, married, able-bodied, middle-aged female with the ability to access to the beach and surfing daily. My background may be considered an advantage of privilege within the context of South Africa

However, as a mother and educator I interact with children daily and as a professional, I have the understanding and skill set to engage with fellow professionals and practitioners as done in the workplace regularly.

My motivation to include young persons who came from disadvantaged backgrounds was driven by my 20 years of teaching surfing and the observed absent presence of children with disabilities (regardless of race, age, socioeconomic status, or gender), in the ocean. In South Africa, the opportunity for children with disabilities from under resourced communities to participate has been nearly non-existent, which I am now more aware of it being due to a multitude of barriers they may experience.

Insufficient participation in the sport of surfing for black children living in South Africa, has been equally as visible including those from marginalized communities. Albeit the past ten years has seen significant steps towards this change with more non-profit organisations providing opportunities for participation for children that may not have previously had the opportunity to take part.

A friend and fellow surfer Dr. Glen Thompson (2011) highlights gender, race, politics, and culture in the history of South African surfing (1960 to 2011), surfing and sport development, and the making of the post-apartheid beach in his research thesis 'Reimagining surf city: Surfing and the making of the post-apartheid beach in South Africa' (G. Thompson, 2011). Thompson shares how through his research the dominance of white males in surfing had been a significant factor, as the sport was initially perceived as a primarily white activity. This notion of exclusivity was further reinforced by the beach culture, which was supported by social and local legislation. Cape Town had been recognized as an apartheid city, with unequal access to leisure and sporting facilities, including beaches that were exclusively reserved for white people.

Through my research journey I have become far more aware of the complex historical and social dynamics of South Africa's apartheid past. Growing up surfing in Cape Town, I was not part of this generation and did not personally observe what Thompson describes but through his writing and our conversations I have a far

deeper understanding of this past. For me, I have always seen surfing as the great leveler, where the ocean is shared by everyone regardless of gender, race, socioeconomic status, religion, or age. It is a space where we come together and share waves in nature.

The initial interviews were the beginning of the research journey for both the participants and me. As participants observed my engagement in the research process the narratives of the interviews began to change. Upon the initial interviews, I had asked of their understanding of the experience of surfing and provided a description of what they could expect their surfing experience to entail as described by my own experience of riding waves in the ocean. The sharing of information and openness was evident in interviews two and three. I had moved from the position of an outsider to the position of an insider during the study.

During this journey, I maintained continual internal dialogue and journaling to critically evaluate my positionality as well as continuously being aware that my position may affect the research process and outcome. As someone's child, as a parent, a professional and practitioner, I was aware of my personal experiences in relation to the research and conscious of the emotional responses to participants. I was continuously aware that my worldview and background affects the way in which I construct the world and the language I use, as well as the lens in which I analysed information gathered from the interviews, focus group and surf therapy sessions and the making meaning of it. This awareness made me more mindful that it may shape the findings and conclusions of the study.

When listening to and transcribing interviews it elicited many personal emotional responses, I could not relate to the experiences shared but became exceedingly aware of the vulnerability of participants and often the dire circumstances, discrimination, and barriers in which children with disabilities and their families living within South Africa endure daily.

### **1.3. Problem statement**

Literature shows evidence of the benefits of surf therapy. However, as it is still a relatively new form of therapy, there is limited research available on it. In a developing world context, countries such as South Africa have limited research on the practice of surf therapy (Benninger et al., 2020). Surf therapy programmes provide benefits in the physical, psychological, and psychosocial areas of the lives of those participating worldwide regardless of the individual's specific disability or impairment (Benninger et al., 2020).

Surf therapy for children with disabilities has remained limited in its singular focus on one type of disability such as autism spectrum disorder (ASD) (Clapham et al., 2019; Poissant & Cristea, 2022; van der Merwe & Yarrow, 2020) or on vulnerable youth (Devine-Wright & Godfrey, 2020). Alternatively, the focus has been on a singular domain such as physical fitness (Clapham et al., 2019). Casting the net wider to explore the experiences of participation of children with disabilities may provide a holistic picture of surf therapy and its impact, not only for the children participating but also the professionals, parents, and individuals delivering the programmes.

Despite the growing interest in surf therapy as a therapeutic tool, there is limited research on its effectiveness for children with disabilities in South Africa. While studies conducted in other countries have shown promising results, there is a need for research in the South African context to determine its effectiveness as a therapeutic tool.

### **1.4. Research question**

How do children with disabilities experience their participation in a surf therapy programme?

### **1.5. Research sub-questions**

- What are the effects of a surf therapy programme in the Western Cape on children with disabilities?

- What are, if any, the changes in the lives of children with disabilities who participated in the surf therapy programme from the perspective of their parents, guardians, and professionals?
- What are the experiences of the individuals delivering the surf therapy programme?
- How is a surfing programme adapted to deliver surf therapy for children with disabilities?

## **1.6. Research aim**

To explore the experiences of children with disabilities who participated in a surf therapy programme in the Western Cape.

## **1.7. Research objectives**

1. Explore the effects on children with disabilities during and after participating in a surf therapy programme.
2. Determine the changes experienced by children with disabilities who participated in a surf therapy programme, and their parents, guardians, and professionals.
3. Identify the experiences of individuals delivering a surf therapy programme for children with disabilities.
4. Describe the adaptations of the surf therapy programme for children with disabilities.

## **1.8. Purpose and significance of this study**

The purpose of this study was to gain a better understanding of how children with disabilities in the Western Cape experience a surf therapy programme. It provides a unique view from the perspectives of children with disabilities, parents, guardians, professionals, and individuals delivering the surf therapy programme.

It is important to not only provide opportunities to change the perspectives of the participants but also to change society's perspective on injustices that take place all around us on a daily basis. This research addresses equity and accessibility as well as the immediate need of vulnerable populations. It also responds to national

priorities that endeavour to benefit society and ensure a better life for children with disabilities.

The study was conducted during the period of the COVID-19 pandemic during which many group and sporting activities were prohibited for children. Data gathering and surf therapy programme delivery planning were done in a way that was easy to implement with minimal disruption to the research. It was factored in that lockdown regulations may change due to an increase in the community spread of COVID-19 and there was a remote possibility the research may have to be temporarily suspended.

COVID-19 had a significant impact on not only South Africa but the entire world (Gittings et al., 2021; Naidu, 2020; Onyeaka et al., 2021; Pawar, 2020; Poudel et al., 2020). This research began in January 2020 and two months later, on 27 March 2020, the country went into a national lockdown aimed at preventing the transmission of the virus. This initially saw the closure of schools, and allowed only limited economic activity related to the provision of essential services and that which could be performed remotely. Over the course of the five months following the initial lockdown, the country slowly and carefully moved from lockdown level 5 to lockdown level 2. In August 2020, under level 2 lockdown regulations, beach access, including surfing and surf lessons, was finally permitted (Head, 2020). COVID-19 and its effects had to be taken into consideration during this research (Department of Co-Operative Governance, 2020).

### **1.9. COVID-19 and what actually happened**

Fortunately, the research did not need to be suspended. However during the period from March 2020 to July 2021, South Africa experienced five waves of COVID-19. The first participant interviews were conducted between 3 and 13 May 2021, and the surf therapy programme was delivered every Friday between 14 May and 18 June for six consecutive weeks during the third wave of COVID-19 in South Africa.

At the beginning of May 2021, the government ruled that contact sport in schools had been suspended, and it is therefore clear in hindsight that the surfing came at a

time in the pandemic when access to group activities and sporting participation was not available to the participants. Midway through the surf therapy programme, on 30 May 2021, President Cyril Ramaphosa announced the tightening of restrictions from adjusted level lockdown 1 to 2, due to a surge in COVID-19 infections (South African Government, 2021a). At this stage, the beaches were still accessible and the surf therapy programme was able to continue. However, on 15 June 2021, the country was moved to alert level 3 due to the third COVID-19 wave (South African Government, 2021b), and on 28 June 2021, the country was further moved to adjusted level 4, with the COVID-19 Delta variant fast becoming the dominant strain in the country (Mbhele, 2021). From 28 June 2021, the beaches were once again closed for public use. Fortunately, the six-week surf therapy programme delivery had finished ten days prior to this, on 18 June 2021.

The second participant interviews were conducted between 21 June and 8 July 2021. While some interviews were conducted in person, others were conducted telephonically as per the adjusted protocols that had been prepared in case face-to-face interviews were limited due to the COVID-19 restrictions at the time. The final interviews took place during the fifth COVID-19 wave between 17 May and 18 June 2022, and the focus group with the individuals that delivered the surf therapy programme took place on 31 May 2022. Soon after this, from 23 June, COVID-19 regulations such as the use of face masks and curbs on gathering sizes were no longer in place.

*Table 1.1: South African COVID-19 timeline in relation to the research*

SA COVID-19 wave	COVID-19 Timeline	Research Timeline	Research Activity
<b>First Wave</b>	March 2020 – November 2020	January 2020	Research begins
<b>Second Wave</b>	December 2020 – April 2021		
<b>Third Wave</b>	May 2021 – October 2021	3 May – 13 May 2021	First interviews with children, parents, guardians and professionals
		14 May – 18 June 2021	Surf therapy programme delivery
		21 June – 8 July 2021	Second interviews with children, parents, guardians and professionals
<b>Fourth Wave</b>	December 2021 – April 2022		
<b>Fifth Wave</b>	May 2022 – July 2022	17 May – 18 June 2022	Third interviews with children, parents, guardians and professionals
		31 May 2022	Focus group with the individuals that delivered surf therapy

## 1.10. Location of the study

The study was located in the Western Cape province of South Africa. The surf therapy sessions were delivered at Surfers Corner, Muizenberg, in Cape Town.

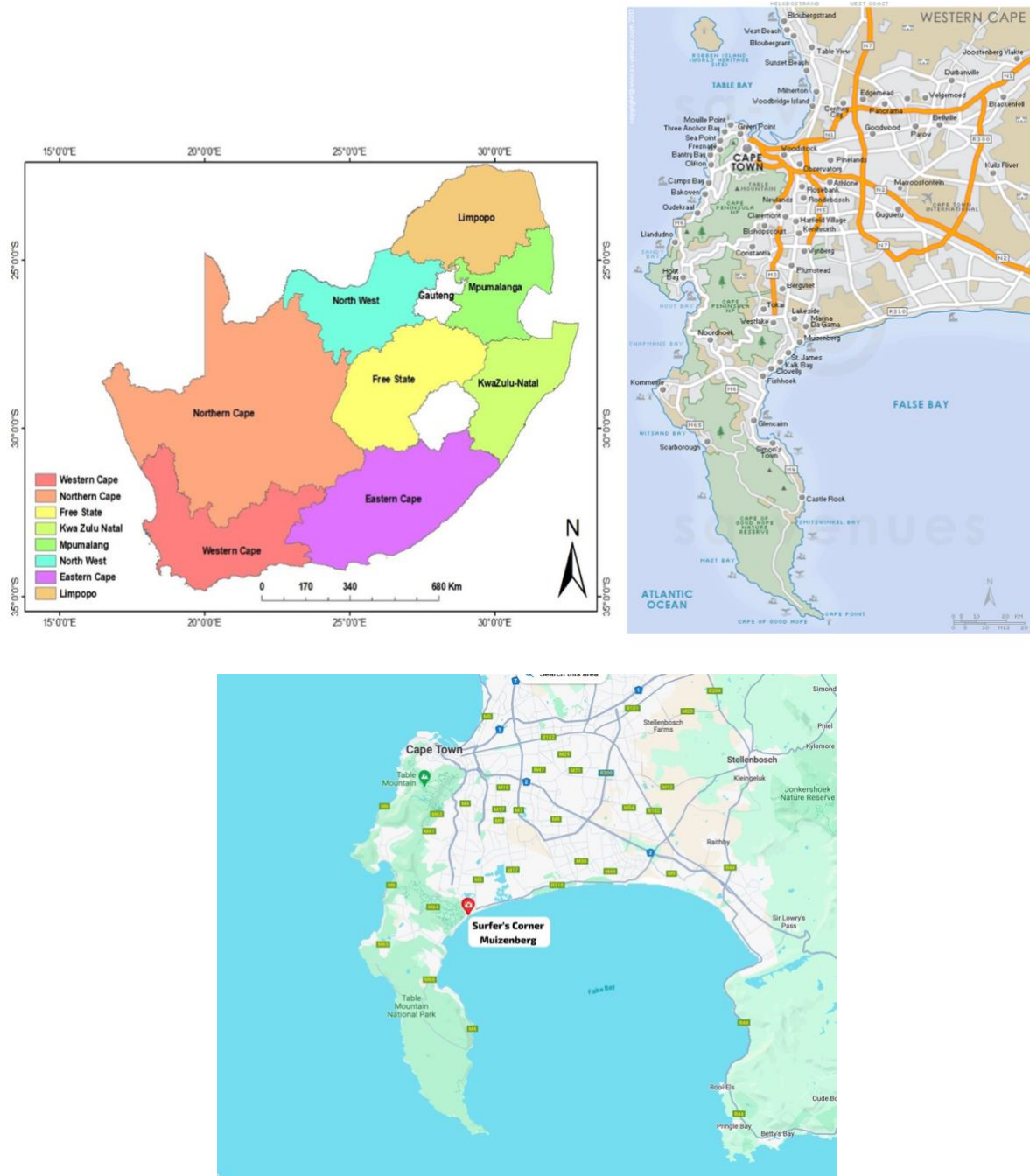


Figure 1.1: Location of study: Surfer's Corner, Muizenberg, Cape Town, Western Cape, South Africa

## 1.11. Selected methodological approach and justification for its use

A qualitative participatory research approach was used for this study to construct new knowledge through participants' lived experiences. Qualitative research concentrates

on understanding how people make sense of the world and how they experience events (Willig, 2013). An interpretive research paradigm underpins this study, and it is based on the assumption that reality is not singular but shaped by human experiences and social contexts. An interpretive paradigm allowed me, as the researcher, to view the world through the perceptions and experiences of the participants (Willis et al., 2007).

The research design was a longitudinal exploratory case study underpinned by interpretive phenomenological analysis (Flick, 2014). This form of case study was identified as most appropriate as there was no predetermined outcome and the research explored presumed causal links too complex for a survey or experiment. The design needed to explore an extensive and in-depth description of a social phenomenon (Yin, 2003). The experiences of thirty-five participants were sufficient to gain data to understand the benefits of surf therapy for children with disabilities. Each participant group and the relevant data gathering methods and data analysis are described in detail in separate chapters.

## **1.12. Ethical considerations**

Ethical approval for this research was obtained from the Faculty of Health Sciences' Human Research Ethics Committee of University of Cape Town (HREC REF 627/2020). In 2022, an upgrade application was approved for the change from MPhil to PhD (HREC 226/2022). The upgrade included the request for further follow-up interviews with participants as well as a focus group for the individuals delivering the surf therapy programme and the inclusion of a chapter describing the adaptations of the surf therapy programme for children with disabilities. The study complied with the principles laid out in the Declaration of Helsinki (World Medical Association, 2013).

### **1.12.1. Informed assent/consent**

Signed informed consent was obtained from the parents (Appendix D) of the children participating prior to engaging with the children. Signed informed assent was obtained from the children participating (Appendix C) (Bartholome, 1989). Data was gathered in a private setting. De-identified data was securely stored on a password-protected computer. All participant names and any people they named have been

replaced with pseudonyms to protect everyone's privacy (Flick, 2014; Kaiser, 2009). All details of the research were provided to the potential participants in clear, layperson language, appropriate for different ages and cognitive development. To confirm that potential participants had understood what was explained, they were asked questions to make sure they understood what they were consenting to. Sufficient and relevant information was provided to participants through the information sheet explaining the purpose of the study and details of what the surf therapy programme entailed (Parent/Guardian Information Sheets – see Appendix I, Children's Information Sheets – see Appendix J, Professionals Information Sheets – see Appendix F).

The participants took the time to read the documentation themselves. In the case of the children participating, the parent or legal guardian was required to sign and witness the assent form. The form included the date assent and consent were given. The children that were participating were minors and regarded as a vulnerable population. All participants had the opportunity to consent/assent or refuse participation. Consent for the professionals to participate in the interviews was also required. Parental consent was required to allow the professionals to participate in interviews regarding the children. Consent was only given once the child, parent/guardian, and professionals were satisfied that all their questions had been answered. All potential participants had the opportunity to ask questions throughout the research period, providing adequate opportunities for ongoing and interactive communication to achieve clarity, understand, and make reasoned decisions. The information sheets (Appendix F, I, and J) provided a comprehensive overview of the study. The children were provided with an age-appropriate information sheet describing the study which was accompanied by images. Once it had been established that the potential participants understood the information provided on the information sheet, they were asked to sign a form stating their agreement and willingness to participate, ensuring participation was voluntary. They did not have to sign immediately; enough time was provided for them to think carefully about their participation and to take the consent documents home to discuss with their family members or advisors. Once consent/assent was obtained, the signed consent forms were filed in a locked cupboard. To participate in the third interview, participants were contacted via telephone to request re-consent and re-assent to use and store

all data collected as per HREC (REF 627/2020) (Parent/Guardian Informed Re-consent Form – see Appendix D, Children’s Re-assent Form – see Appendix C, Professional Informed Reconsent Form – see Appendix E). I also obtained permission from all the participants (including from the parents or guardians for the minors) to use the photographs in each chapter.

### **1.12.2. Safety for children with disabilities**

The study was conducted in an environment where the participants’ care, safety, rights, freedoms, well-being, and dignity have been protected and remained the priority throughout (Mishna et al., 2004). The needs of children with disabilities, regarded as a vulnerable population, were taken into consideration as part of the research (S. Thompson et al., 2020). Provisions were made for any issues that may have arisen during the research process, interviews, and surf therapy sessions. Fortunately, no issues arose during this time. If they had, they would have been brought to the attention of the supervision team immediately and dealt with timeously. In the event issues had arisen whereby the participants needed additional support, a psychologist would have been made available at my own expense.

### **1.12.3. Full disclosure**

I informed all participants that the study formed part of a thesis towards obtaining my Master of Philosophy degree. When my application for upgrade to Doctoral Degree in Disability Studies was approved, the participants were informed and additional consent/assent forms signed. This information was provided in the participant information sheet for potential participants to read through in detail (Appendices F, I, and J).

### **1.12.4. Autonomy**

The aim was to ensure autonomy for the individuals taking part in the research and surf therapy programmes. Throughout the research, I endeavoured to ensure that the participants made their own decisions and were recognised and respected, while also protecting the autonomy of the vulnerable participants. The respect for individual autonomy included the freedom for participants to make their own choices and respect for the evolving capacities of the children participating (S. Thompson et al., 2020). To ensure that the individuals participating practiced their right to decide whether

participate in the study without coercion, the purpose of the study was clearly explained to them. The participants were given the opportunity to withdraw from the study without prejudice at any stage through the programme and surf therapy sessions.

#### ***1.12.5. Privacy and confidentiality***

Confidentiality is an important consideration in qualitative research, and participants had the right to privacy and respect (Kaiser, 2009). Confidentiality and privacy were considered alongside potential safety concerns and respect for individual autonomy and choice (Jenkin et al., 2020). Personal and sensitive information was disclosed to the researchers but not shared beyond the research team, and all information has been kept secure and remains confidential. This protects participants from potential harm, stigmatisation, or embarrassment. The identity of all participants has remained anonymous throughout the research and after the research was concluded. All interviews were conducted in a private setting to ensure the privacy and confidentiality of the participants would be protected. To protect participant privacy, the information has been labelled in a way that will not identify any participants. The supervisors have access to this list and are able to compare and check the study information collected, and they may do this to check that the study has been done properly. As the researcher, I acknowledge I am responsible for the storage and final disposal of all records. I have completed and signed a confidentiality agreement (Appendix K) which ensures that I will maintain participants' confidentiality and, wherever possible, data will be recorded anonymously.

#### ***1.12.6. Risks and benefits***

The benefits and risks have been considered, and the short- and long-term well-being and protection of the participants has informed decision making (Jenkin et al., 2020). I made the participants aware in advance that participation in the research and interviews could be time consuming that there was no remuneration for them. Participants were able to attend the surf therapy programme, which, according to research, has many psychological, physical, and psychosocial benefits. In addition, the children participating were invited to attend regular surf therapy sessions at no charge once the research had been concluded should they wish to continue. These regular sessions afforded the children the opportunity to follow a structured learning

journey following a surf therapy curriculum designed and adjusted to meet the needs of each participant's individual physical and intellectual disability.

Transportation costs to attend the surf therapy sessions at Muizenberg beach were covered by me where transport was not accessible. Participants were reimbursed for all transportation costs to and from the interviews and the focus group discussion at the standard Automobile Association (AA) rates, if the participants needed to travel. Otherwise, I travelled to the participants to conduct the interviews. No other remuneration was provided.

#### ***1.12.7. Principle of justice***

When considering distributive justice and language, the decision to include English and Afrikaans as the spoken languages was made. This decision was based on the feasibility of the study as well as the surf therapy participant data for children with disabilities participating in surf therapy in the Western Cape over the 12 months prior to commencing the research. These findings showed that 80% of participants in 2019 and early 2020 were English or Afrikaans speaking.

#### ***1.12.8. Beneficence and non-maleficence***

The ethical principles of beneficence and non-maleficence were taken into consideration. While beneficence entails promoting the well-being of others, non-maleficence is an intention to avoid harming or injuring others (Beauchamp & Childress, 2001). Children with a specific disability face certain risks because of their condition, and it was understood that they may benefit from participating in the research. Fairness was considered in decisions that would burden or benefit the participants. The participants had the right to be treated equally, with the same degree of respect. The potential direct benefit to the children participating was considered relatively high, with a low level of risk or cost involved. The research was conducted with the intention to do the most good for the participants and the research intended to do no harm. The potential risks were further reduced by the implementation of the comprehensive safety protocols in the surf therapy programme, contributing to avoiding the causation of harm. It was understood that the surf therapy programme has great potential to reduce the barriers such as insufficient rehabilitation support, community inclusion, and access to physical activity.

The requirement of conducting a surf therapy programme and individual interviews as part of the research created additional logistical considerations which required protocols for participant safety. I had to carefully consider the steps required to reduce and minimise risks related to COVID-19, drawing on the ethical principle of non-maleficence. I had to take into consideration the status of the lockdown level in South Africa over the course of each month as the research continued, and review protocols to conduct the research and surf therapy under lockdown level 2. I also had to plan for any unforeseen changes that may have arisen during a time when change and uncertainty were frequent. The COVID-19 protocol (Appendix N) aimed to minimise the contact between people using the resources available, in line with the national guidelines during each time period.

#### **1.12.9. Fidelity**

Fidelity adherence and exposure through programme delivery was also considered (Feely et al., 2018). The quality of surf therapy delivery was taken into account, ensuring consistency in the delivery of all sessions. The surf therapy programme was implemented in the same format for each participant, and all the participants received the same intervention and same number of sessions throughout the course of the programme. These sessions were delivered by a skilled, qualified, and competent team in accordance with the structure and standards set out in the surf therapy programme guidelines. In the case of the fidelity of interviews conducted, it is not always possible to guarantee truthfulness, and I can only report on what the participants perceived to be true for them in their own lives (Hatch & Wisniewski, 1995).

### **1.13. Outline of thesis chapters**

#### **Chapter 1: Introduction – Setting the Scene**

Chapter 1 sets the scene with a short background, my positionality as the researcher, the research question, sub-question, aims, and objectives. It also highlights the purpose and significance of the study, the methodological approach, and the experience of research during the COVID-19 pandemic.

## **Chapter 2: Literature Review, and Theoretical and Conceptual Frameworks**

This chapter reviews published research on participation in sport of children with disabilities and introduces the activity of surfing and its benefits. The review also discusses combining surfing and therapy, including surf therapy for various populations, especially for children with disabilities. It discusses the influential years of childhood development and identifies parts of surf therapy programmes that have impact, while also highlighting the existing challenges and limitations of current surf therapy research.

## **Chapter 3: *Surfing Makes Me Want to Scream I'm Happy*: Children's Narratives**

In this chapter, the voices of five children that participated in a surf therapy programme are heard through the narrations of their lived experiences in the programme. Their narratives describe their experiences during the programme, immediately after the programme, and one year later.

## **Chapter 4: *Surfing makes me feel different*: Analysis, findings, and discussion of Children's Narratives**

Chapter 4 provides a detailed analysis and discussion of the findings as described in the narratives in chapter 3. The research objective was to explore the effects on children with disabilities during and after participating in a surf therapy programme. Narrative inquiry was used to understand the lived experiences of children with disabilities by using their own stories (Riessman, 2008).

## **Chapter 5: *It was a place they visited in themselves and that was significant for all of us*: Parents, Guardians, and Professionals**

Chapter 5 focuses on the exploration of the experiences of participation in a surf therapy programme for children with disabilities in Cape Town, from the perspective of five parents/guardians and five professionals. The research objective was to determine the changes experienced by children with disabilities who participated in a surf therapy programme as perceived by their parents, guardians, and professionals. The Most Significant Change (MSC) technique was used to capture the voices and perspectives of those directly affected through participation in the programme.

## **Chapter 6: Ripple Effects Mapping of the experiences of volunteers delivering a surf therapy programme for children with disabilities**

The objective of chapter 6 was to identify the experiences of individuals delivering a surf therapy programme for children with disabilities. A participatory evaluation method was used for data gathering, engaging programme and community stakeholders to map the chain of effects resulting retrospectively and visually from a surf therapy programme, which is a complex collaboration. Ripple Effects Mapping (REM) was used in a focus group environment where the focus was on the themes of change and their ripple effects throughout the community, rather than the sequence and context of individual stories.

### **Chapter 7: Adapting a surfing programme**

Surfing programmes have been run globally for nearly two decades; however, the adaptation of a surfing programme and a therapy programme for children with disabilities in South Africa has not yet been clearly designed. The objective of this chapter was to describe the adaptations of a surf therapy programme for children with disabilities in South Africa. The adaptations informed the development of a Theory of Change and provide a guiding document for future surf therapy programmes in South Africa.

### **Chapter 8: A World of Possibilities: Experiences of children with disabilities who participated in a surf therapy programme**

Chapter 8 provides a synthesis of new knowledge in four key findings that support overall health promotion through mental, physical, social, and emotional health. It highlights the impact in reshaping a worldview and the development and mastery of new skills.

Key finding 1: The ambassador's journey of change: An example of the effects during and after participating in a surf therapy programme.

Key finding 2: Not all scary circumstances lead to a negative outcome: An example of the effects during and after participating in a surf therapy programme.

Key finding 3: The reciprocity of healing: Providing an opportunity for healing as an example of the effects during and after participating in a surf therapy programme.

Key finding 4: The ripple is longer than you think: Highlighting the broader impact surf therapy can have on society.

## **1.14. Implications**

There are three implications of this study. One is that it has already influenced and can continue to influence policy based on the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in South Africa. The second one is that the guide developed for delivering surf therapy can be used for the implementation of surf therapy programmes across other beaches in South Africa, and the third one is that participating as volunteers in surf therapy can provide students with practical disability-inclusive experience in relation to their field of study.

Table 1.2: Research overview

Qualitative participatory research approach			
Research design: Longitudinal exploratory case study underpinned by interpretive phenomenological analysis			
Theoretical Framework: Bronfenbrenner's Bioecological Model of Human Development			
Conceptual Frameworks: Social-Ecological Model of Disability and the Community-based rehabilitation (CBR) guidelines of the World Health Organization			
Description	Chapter 3 & 4: Children	Chapter 5: Parents, Guardians & Professionals	Chapter 6: Individuals Delivering the Surf Therapy Programme
Research Design	Narrative Inquiry: Gain insights into individuals' experiences, perceptions, and meanings. Understanding and interpreting the lived experiences of participants through storytelling.	Most Significant Change (MSC) stories: Focuses on capturing stories of significant change resulting from social interventions or programmes.	Ripple Effects Mapping (REM): Identify and visualise the intended and unintended impacts of interventions within complex systems.
Data Collection Method	Narrative Interview	Semi-Structured Interview using MSC Technique	Focus Group using REM
Data Analysis Method	Narrative Analysis & Analysis of Narratives with cross-case analysis across 5 narratives	Thematic Analysis	Rippe Effects Mapping and Thematic Analysis
Direction of Inquiry	Inductive	Inductive	Inductive
Questions	Initial questions partially planned but developed during the interview	Interviewer knows the questions that need to be asked. All respondents are asked the same question	Questions planned in advance with facilitator prompts
Answers	Long with minimal interruption	Free responses to open-ended questions	Free responses. Other participants may contribute to the responses
Sample	Children with disabilities participating in a surf therapy programme in the Western Cape	Parents, Guardians and Professionals of the children participating	Individuals delivering the surf therapy programme
Sample Size	5 Participants	10 participants (5 parents/guardians & 5 professionals)	20 participants
Number of Interviews	Three individual interviews per participant (15 interviews)	Three individual interviews per participant (30 interviews)	One focus group
Time Period	One Year	One Year	Single Focus Group

Table 1.3: Overview of objectives and research sub-questions

<p style="text-align: center;">Aim: To explore the experiences of children with disabilities who participated in a Surf Therapy programme in the Western Cape.                      Research Question: How do children with disabilities experience their participation in a surf therapy programme</p>			
Objective 1 (Chapter 3 & 4)	Explore the effects on children with a disability during and after participating in a Surf Therapy Program	Research Sub Question 1	What are the effects of children with disabilities who participated in a Surf Therapy programme in the Western Cape?
Objective 2 (Chapter 5)	Determine the changes experienced by children with a disability who participated in a Surf Therapy Programme and their parents, guardians and professionals.	Research Sub Question 2	What are, if any, the changes in the lives of children with disabilities who participated in a Surf Therapy programme from the perspective of parents, guardians and professionals?
Objective 3 (Chapter 6)	Identify experiences of individuals delivering Surf Therapy Programme for children with a disability.	Research Sub Question 3	What are the experiences of individuals delivering a Surf Therapy programme?
Objective 4 (Chapter 7)	Describe the adaptations of the Surf Therapy programme for children with disabilities	Research Sub Question 4	How is a surfing programme adapted to deliver surf therapy for children with disabilities.

## **Chapter 2: Literature Review, Theoretical Framework, and Conceptual Framework**

This chapter sought to review previous studies in this field of research that have been published. The literature review discusses studies regarding children living with disabilities in South Africa, sport participation for children with disabilities, and the activity of surfing and its benefits. It also discusses studies that combine surfing and therapy, including surf therapy for various populations and then more specifically surf therapy for children with disabilities. It highlights studies on the influential years of childhood development and the documented parts of surf therapy programmes that have had impact, as well as the existing challenges and limitations of current research. It also discusses the theoretical and conceptual frameworks used for this study.

I used the search engines Google Scholar, Scopus, PubMed, and the Global Journal of Psychology. I also used the International Surfing Association Bibliography. The key terms I searched for were 'Surf Therapy', 'Children with Disabilities', and 'Disability'.

### **2.1. Participation in sport for children with disabilities**

Participation in sport and physical activity is integral to the development, health, and well-being of children (P. Wilson & Clayton, 2010). For children with disabilities, participation in sport provides an opportunity to enhance their physical, cognitive, and social abilities. Physical activity and sport participation have been shown to provide numerous physical benefits for children with disabilities including improvements in cardiovascular fitness, muscle strength, endurance, flexibility, and balance (Murphy et al., 2008).

The increase of an individual's physical activity has been found to be intrinsically linked to a decrease in the risk of chronic diseases, which is a prevalent issue worldwide for both adults and children across all demographics. These chronic conditions include, but are not limited to, diabetes and heart disease (E. Anderson & Durstine, 2019). It is important to recognise the impact of physical activity on overall

health and well-being, and to emphasise the importance of integrating regular exercise into children's daily routines.

Participation in sport and physical activity can also provide cognitive benefits for children with disabilities. An emerging body of multidisciplinary literature has documented the beneficial influence of physical activity through aerobic exercise on selective aspects of brain function, including that regular physical activity can improve attention, memory, and learning (Hillman et al., 2008). Additionally, sport participation may improve self-esteem and self-efficacy, which are key factors in the development of a positive self-concept (Fox & Lindwall, 2014). There are also numerous social benefits for children with disabilities through participation in sport, such as increased social interaction, improved social skills, and the development of friendships (Bailey, 2005; Martin & Smith, 2002). An evaluation of the relationship between physical education, sport, and social inclusion in the United Kingdom (UK) highlighted the importance of participation in activities which contribute towards social inclusion and the development of social capital (Bailey, 2005). Sport participation can help children with disabilities to develop a sense of belonging and identity, which is important for their emotional well-being (Murphy et al., 2008; Rodriguez et al., 2022). According to Murphy et al. (2008), properly designed and implemented programmes of sports and physical activities for children with disabilities should target cardiovascular endurance, flexibility, balance, agility, and muscular strength, along with accessibility, safety, and enjoyment.

## **2.2. The activity of surfing**

Research has long supported the links between traditional sports and well-being (Corvino et al., 2023; O. Wilson et al., 2022); adventurous nature-based adventure sports in particular have shown growth in positive psychology (Houge Mackenzie & Brymer, 2020). The concept of nature sports is primarily defined in it being in nature, which can be water-, land- or wind-based activities. Adventure-based nature sports are defined as physical activities that take place in natural settings. These activities are usually self-initiated and allow participants to test their physical and mental capabilities in challenging environments. The inherent risk and unpredictability of nature sports provide an opportunity for individuals to push their limits and develop

important personal skills (Ewert & Hollenhorst, 1989). Research by Brymer and Schweitzer (2017) suggests that adventurous nature activities enhance physical health and psychological well-being in a number of ways, and these experiences of well-being encourage further participation (Brymer & Schweitzer, 2017). One such example of an adventure sport is surfing. A popular water sport that has been practiced for centuries around the world, surfing is believed to have originated in Polynesia, where it was known as 'he'e nalu' (wave sliding) and was an integral part of the culture (Finney & Houston, 1966). The sport was introduced to the Western world in the late 18<sup>th</sup> century by the famous explorer Captain James Cook, who observed it during his travels in the Pacific. Since then, surfing has spread to all corners of the globe and has become a multi-billion dollar industry (Ponting, 2009). Despite its popularity, a clear and concise definition of the term 'surfing' is still debated among scholars and enthusiasts.

The definition of surfing varies and there is no consensus on a single definition. Most definitions agree that surfing involves riding a wave on a board (Fine, 2021). Fine (2021) described riding waves as being a product of various cultural, political, and environmental forces that play out in symbolic and corporeal forms. Just as it has been informative to ride waves and carve boards, it has also been critical to examine what it means to ride waves through discursive attention. It is evident that some meanings go beyond the act of riding waves and include the cultural and social aspects of the sport. Surfing is a complex and multifaceted sport that has been practiced for centuries, and is a unique and dynamic sport that continues to evolve and capture the imagination of people around the world.

### **2.3. Benefits of surfing**

Surfing has become an increasingly popular sport and recreational activity in recent years. The sport is also known for its physical and mental health benefits. Surfing is a physically demanding sport that requires a lot of strength, balance, and endurance. Surfing can improve cardiovascular fitness and cardiorespiratory endurance (Armitano, 2013), increase muscle strength, and enhance overall body composition. Cardiovascular fitness is an important component of overall health. This measure reflects an individual's capacity for their heart and lungs to effectively supply oxygen

to their muscles during physical activity. Surfing is a great cardiovascular workout as it requires you to paddle your board through the water. Paddling is a vigorous activity that gets your heart rate up and your blood pumping (Better Health Channel, 2014). It also supports the development of muscle strength, which is the amount of force that your muscles can produce. Surfing helps to improve muscle strength in your arms, shoulders, core, and legs. Paddling strengthens your upper body muscles, while standing up and balancing on the board strengthens your core and leg muscles (Better Health Channel, 2014). The repetitive paddling motion helps to build upper body strength and improve core stability, which can also lead to better posture and balance (Clapham et al., 2014; Farley et al., 2012; Mendez-Villanueva & Bishop, 2005; Van Tilburg, 1996).

There is also increasing interest in the potential use of outdoor water environments, or blue space, such as in surfing, in the promotion of human health and well-being. A systematic review conducted by Britton, Kindermann, Domegan, and Carlin (2020) of blue space interventions for health and well-being (known as blue care) highlighted thirty-three studies of blue space interventions specifically designed and structured with a therapeutic purpose. The review suggested that blue care can have direct benefit for mental health and psycho-social well-being (Britton, Kindermann, Domegan, & Carlin, 2020).

Surfing has been shown to have positive effects on mental health. A thematic analysis of surfing conducted in South Africa by Fuchs and Schomer (2007) used in-depth, semi-structured individual interviews with eleven surfers of various backgrounds. They found that surfing can be used to return an individual's sense of balance in the face of stressful internal responses to external demands, providing the ability to achieve personal balance. Silva et al. (2022) found that when including surfing in school physical education classes for 190 adolescents once per week for six weeks in Portugal, it improved individual expectations, self-confidence, and socialisation (Silva et al., 2022). It is clear that surfing needs to be conceptualised as a lifestyle, and that it reaches beyond the realm of being a sport or a recreational activity. Further research is needed to explore the specific mechanisms by which surfing provides these benefits, and, particularly in the context of children with disabilities, to develop effective interventions that use surfing as a therapeutic tool.

## **2.4. Combining surfing and therapy**

Surf therapy has gained popularity and attention in recent years as a unique, non-traditional approach to mental health treatment. While it is not yet an evidence-based practice, evidence is growing that shows it has been beneficial to a variety of populations, including veterans, active duty service members, youth and adults with disabilities, and youth in need of social and emotional support. Marginalised populations often face significant barriers to accessing mental health services, leading to increased mental health disorders and reduced quality of life. In an attempt to address this issue, surf therapy as an intervention has been developed to improve health outcomes among these populations. Surf therapy is a relatively new form of therapy and came from small beginnings. It was first documented in 2005 as an intervention that served a variety of marginalised populations, while the first surf therapy peer reviewed publication appeared in 2010 (Morgan, 2010). This small group intervention has been steadily growing, and in 2020 the first scoping review of both quantitative and qualitative evidence emerged (Benninger et al., 2020). The review of surf therapy over a ten-year period included research papers, theses, dissertations, and outreach to experts. The search included 29 studies that met the inclusion criteria. In the same year, the first special issue on 'Surf Therapy Around the Globe' was released in the *Global Journal of Community Psychology Practice*, and included articles on emerging theory, research, and programme evaluation of eight surf therapy programmes across six countries (Sarkisian et al., 2020). Of these eight programmes, three included children with disabilities (Britton, Kindermann, & Carlin, 2020; van der Merwe & Yarrow, 2020; van Ewijk et al., 2020) and one was located in South Africa, which focused on the evaluation of the process of adapting an existing surf therapy programme for neurotypical vulnerable youth to serve neurodiverse youth in the country (van der Merwe & Yarrow, 2020). Sarkisian et al. (2020) stated that surf therapy programmes use four primary community psychology practice competencies, namely community inclusion and partnership, empowerment, mentorship, and health promotion. Marshall et al. (2019) found that these programmes have the potential to provide a mechanism to fill the gap of unmet needs and help overburdened medical systems in the UK (Marshall et al., 2019).

Surf therapy and adaptive surfing are related concepts, but they have slightly different focuses and goals. Surf therapy is a type of therapy that uses surfing as a tool to promote physical and emotional well-being (Benninger et al., 2020; Clapham et al., 2014). Surf therapy programmes typically involve taking participants into the ocean (Clapham et al., 2014), where they can experience the therapeutic benefits of surfing and the natural environment. Surf therapy may be used to treat a variety of physical and mental health conditions, such as post-traumatic stress disorder (PTSD), anxiety, and depression (Benninger et al., 2020). Adaptive surfing, on the other hand, is a form of surfing that is adapted to meet the needs of surfers with disabilities or physical limitations. Adaptive surfing may involve the use of specialised equipment or techniques to help surfers overcome their physical challenges and experience the joy and excitement of surfing. While both surf therapy and adaptive surfing may involve taking participants into the ocean and using surfing as a tool to promote well-being, they have slightly different primary goals.

See chapter 7 for further details

## **2.5. Surf therapy for various populations**

Surf therapy has gained popularity over the years as a complementary therapy for various populations. Surf therapy is currently delivered to a variety of populations world-wide, mostly marginalised groups. The available research includes that done with children and youth with disabilities (Armitano et al., 2015; Cavanaugh & Rademacher, 2014; Clapham et al., 2018; Moore et al., 2018; Mueller, 2017), including children with ASD (Moore et al., 2018), children in need of social and emotional support (Devine-Wright & Godfrey, 2018; Marshall et al., 2019; Matos et al., 2017), military service veterans (Caddick, 2015; Caddick, Phoenix, & Smith, 2015; Caddick, Smith, & Phoenix, 2015a, 2015b), active duty service members (Fleischmann et al., 2011), adults in recovery from addictions (Harris, 2015), and young adult cancer survivors (Rosenberg et al., 2014). Surf therapy has also been used as a form of rehabilitation for individuals with disabilities as surfing can provide a low-impact form of exercise that can improve mobility and strength (Britton & Foley, 2021; Britton, Kindermann, & Carlin, 2020). It has also been shown to improve self-esteem and confidence in individuals with disabilities (Caddick, 2015). While the research on surf therapy is still in its early stages, preliminary findings suggest that

surf therapy may be a promising intervention for promoting physical and mental well-being in a variety of populations.

## **2.6. Surf therapy for children with disabilities**

In recent years, surf therapy has gained popularity as a form of recreational therapy for children with disabilities. In South Africa, surf therapy programmes have been implemented to help children with disabilities improve their physical, emotional, and social well-being. The ISTO defines surf therapy as “a physical activity intervention, combining surfing with structured activities promoting psychological, physical, and psychosocial well-being” (ISTO, 2019). This form of physical activity intervention is proving its feasibility and effectiveness for the physical fitness of children with disabilities.

An eight-week surfing intervention study in the United States of America (USA) conducted by Armitano et al. (2015) with 16 children with disabilities focusing on fitness testing showed improvements in participants' upper-body strength, grip strength in the upper extremities, range of motion, core strength, and cardiorespiratory endurance. A study conducted in the USA by Clapham et al. (2019) investigated the effects of an eight-week surfing programme on the physical fitness of 71 children with a range of disabilities such as ASD, Down syndrome, global developmental delays, and cerebral palsy. The study focus was to compare the differences in overall fitness levels between the surf therapy group and an unstructured pool playgroup. The results demonstrated significant improvements in the surfing group in core strength, upper body strength, and cardiorespiratory endurance, while there were no significant differences in overall fitness levels between the surfing and unstructured pool playgroups. Body composition measurements on the surfing group demonstrated a significant reduction in total body fat percentage and fat free mass, and significant improvement in bone mineral density from pre- to post-surf therapy.

A qualitative study by Moore et al., (2018) designed to understand parents' perceptions of their children's participation in a surf therapy programme in the USA, included ten parents and one caregiver. The results highlighted that parents perceive

surf therapy to have positively impacted their child behaviourally, physically, and socially.

Mueller's (2017) study intended to promote awareness of the benefits that surf-focused recreational therapy programmes may have for children with ASD, and it took place during a non-profit surf camp in California designed for children and young adults with ASD. The study found that students were more socially interactive and engaged and more likely to be involved in other activities after participating in the surf therapy programme.

Britton, Kindermann, and Carlin (2020) used a creative, participatory approach to evaluating a surf therapy intervention for youth with ASD in the north-west of Ireland in an eight-week surf programme with twelve surfers. A novel method of body mapping was used to evaluate the feelings and emotional well-being of young participants in the programme, highlighting surfing as a psychosomatic experience. Findings showed how this can be used to create a richer picture of the potential health and well-being outcomes from engaging with the sea. Children expressed feelings of happiness and freedom, while their parents reported that the children were more relaxed and confident (Britton, Kindermann, & Carlin, 2020).

Research by Devine-Wright and Godfrey (2020) with vulnerable youth in the UK demonstrates a sustained, positive impact of surfing on vulnerable young people's well-being over time. The research was conducted through The Wave Project, a UK-wide surf therapy charity organisation that provides vulnerable young people aged 8-21 years with an opportunity to surf once a week for six weeks. Findings showed that participants' well-being improved across seven locations in the south-west of England for up to three months after intervention. Participants showed transformation in their lives, including shifting from isolation to engagement with others through a combination of the surfing, volunteering, and mentoring offered in the programme.

Another study by van Ewijk et al. (2020) focused on the positive effects of surfing on psychological well-being from the parents' perspective for children with developmental difficulties between the ages of 8 and 18 years old in the Netherlands. A positive effect of surfing was found on the quality of life of children

participating. The study also highlighted a statistically significant increase in psychological well-being, social support, autonomy, and parental relations after three consecutive sessions (van Ewijk et al., 2020).

A study by van der Merwe and Yarrow (2020), conducted in South Africa with children with ASD, explored the feasibility and unique benefits of an existing surf therapy programme for neurotypical children to see if it could be adapted to be more inclusive and meet the needs of neurodiverse children. The programme followed a structured 16-week programme that was delivered over a period of four months. Forty-five children between the ages of 13 and 17 participated, and a mixed-methods data collection approach was used, including focus groups, surf mentor observations, and feedback on the beach. The study found that children with ASD's experiences were predominantly positive and surf therapy can have a positive effect on their overall well-being. It highlighted that the existing surf therapy programme can be offered as a meaningful, community-based mental health service to children with ASD, although not in the same format offered to neurotypical children as the original programme structure was not optimally inclusive and appropriate for neurodiverse children. Surf therapy has shown to be a promising form of therapy for children with a variety of disabilities, with the research suggesting that it can improve physical, mental, and social well-being in children with disabilities. However, more research is needed to fully understand the benefits of surf therapy and how it can be used to improve the lives of children with disabilities, including those living in South Africa.

## **2.7. The influential years of childhood development**

Childhood development is a complex and dynamic process that occurs across multiple domains, including physical, cognitive, social, and emotional domains. Adolescence is regarded as the phase of life between childhood and adulthood, from ages 10 to 19, which is a unique stage of human development and an important time for laying the foundations of good health (WHO, 2023). The children participating in this study are between the ages of 12 and 16 years, a critical phase in their developmental trajectory marked by significant changes in all domains of development. Physical development during the adolescent years is characterised by rapid growth and changes in body composition. Girls tend to experience growth

spurts earlier than boys and typically reach their adult height by the age of 16 years, while boys continue to grow until their early 20s (Eccles & Roeser, 2011). Along with growth spurts, adolescents experience changes in body composition, which are often accompanied by a decline in physical activity levels, putting them at risk of developing obesity and related health problems (Corder et al., 2019; Hills et al., 2007; Miles, 2007; Piercy et al., 2018).

Cognitive development during adolescence is marked by significant changes in thinking abilities, including improvements in self-awareness, abstract reasoning, metacognition, and executive function (Anil & Bhat, 2020). Adolescents become better at thinking about their own thinking and planning for the future, making decisions based on long-term goals rather than immediate rewards. However, these improvements in cognitive abilities are often accompanied by increased risk-taking behaviours, as adolescents tend to overestimate their abilities and underestimate the risks associated with certain behaviours (Reyna & Farley, 2006).

Social development during adolescence is characterised by a shift in focus from family to peers, as adolescents seek to establish their own identity and gain independence from their parents (Soenens et al., 2007; Zimmer-Gembeck & Collins, 2006). Peer relationships become increasingly important during this period, with adolescents seeking out like-minded individuals who share their interests and values (Brown & Larson, 2009). However, this increased focus on peer relationships can also lead to social pressures and the development of negative behaviours, such as substance use and delinquency (Allen et al., 2005).

Emotional development during adolescence is marked by increased emotional intensity and instability, as adolescents experience a wide range of emotions more intensely than children or adults (Bailen et al., 2019; Rosenblum & Lewis, 2006). Adolescents may also begin to develop a greater understanding of their own and others' emotions, leading to improved emotional regulation and empathy. However, these emotional changes can also lead to greater susceptibility to stress and the development of mood disorders, such as anxiety (Gambin & Sharp, 2018).

This age period is a critical phase in the developmental trajectory of children, marked by significant changes in all domains of development. Physical changes include growth spurts and changes in body composition, while cognitive changes include improvements in abstract reasoning and executive function. Social changes include a shift in focus from family to peers, while emotional changes include increased emotional intensity and instability. These changes can lead to both positive and negative outcomes, highlighting the importance of understanding and supporting childhood development during this critical period.

## **2.8. Identifying parts of the programme that have impact**

Available research covers four main categories, namely physical strength and fitness, health and well-being, psychological and mental health, and psychosocial well-being, over a variety of diverse populations all with the basic common thread of surf instruction and a group activity (Benninger et al., 2020). Marshall et al. (2019) indicate that tackling a challenge at one's own pace and in a familiar, non-judgemental, safe space were highlights for the military veterans participating in surf therapy. Others shared that the community inclusion, social interaction, positive role models, and programme process that promote inclusivity outside of surfing are important factors of a programme's impact (Sarkisian et al., 2020).

A one-day surf therapy programme for youth without disabilities in California includes not only surf instruction but also talking circles, with instructors sharing stories of resilience and coping in a socially supportive environment (Benninger et al., 2020). The Wave Project in the UK for vulnerable youth provides a non-competitive environment, a supportive community, and an accepting social environment (Devine-Wright & Godfrey, 2020). The surf project in Netherlands for children with developmental difficulties, which aimed to develop a safe space and positive experience for participants, used a structured curriculum, protocol adherent preparation, and a personalised one-to-one mentoring approach (van Ewijk et al., 2020).

## **2.9. Barriers for children with disabilities in South Africa**

Children with disabilities in South Africa face numerous barriers that hinder their access to education, transportation, healthcare, social services, sport participation, and employment. These barriers can be environmental, social, economic, or institutional, and can have a significant impact on their physical, emotional, and social well-being and limit their opportunities for future success. Children with disabilities are also at a higher risk of physical and emotional abuse, neglect, and exploitation due to their vulnerability and dependence on others for care (South African Human Rights Commission, 2019).

Education is a fundamental right for every child; however, many youth with disabilities in South Africa struggle to access appropriate schooling and educational resources (Watermeyer et al., 2006). According to the South African Human Rights Commission (Mbeki & van der Berg, 2020), children with disabilities are often excluded from mainstream schools due to inadequate facilities, insufficient availability of assistive devices, and a shortage of trained teachers. According to the South African Human Rights Commission (2019), only 4% of public schools in South Africa are fully accessible to students with disabilities. Many adolescents with disabilities are excluded from education altogether (Human Rights Watch, 2015), with up to 70% of all children of school-going age with disabilities being out of school (Donohue & Bornman, 2014). The insufficient availability of accessible transportation and long distances to schools are also a barrier to education (South African Human Rights Commission, 2019). The inadequate provision of inclusive education for children with disabilities results in a low rate of school attendance and a high dropout rate (Mbeki & van der Berg, 2020).

Children with disabilities in South Africa also face significant challenges in accessing healthcare services. Many healthcare facilities do not have the necessary equipment and personnel to cater to the needs of children with disabilities (Moodley & Ross, 2015). Moodley and Ross (2015) highlight long waiting times and delayed diagnoses, which can lead to complications and worsen the children's health conditions, while the high cost of healthcare services and limited financial support for families with children with disabilities can limit their access to healthcare services

altogether. Children with disabilities in South Africa also face numerous challenges in accessing social services. Insufficient accessible transportation, inadequate facilities, and a shortage of trained personnel are major barriers to accessing social services such as rehabilitation, social welfare, and community-based services (Holness & Rule, 2014). Additionally, the stigma associated with disabilities in some communities and the insufficient knowledge among service providers can also limit access to social services (van der Merwe & Yarrow, 2020).

Employment opportunities for youth with disabilities are also limited in South Africa. Many employers are reluctant to hire individuals with disabilities due to misconceptions about their abilities and concerns about accommodating their needs. Negative attitudes towards disability are still prevalent in many parts of South African society, which can lead to social isolation and exclusion for adolescents with disabilities. It is important for policymakers and organisations to work towards improving the lives of adolescents with disabilities in South Africa by addressing these challenges and promoting inclusion and equality (Morwane & Dada, 2018; Office of the Deputy President, 1997).

Despite the benefits of sport participation for children with disabilities, there are several barriers specific to sporting activities that can prevent their participation. These barriers include very few accessible facilities and equipment, and limited funding and resources (Smith & Sparkes, 2019). Addressing these barriers requires a concerted effort from all stakeholders, including the government, civil society, and the private sector, to create an enabling environment that promotes the rights and inclusion of children with disabilities.

## **2.10. Barriers and limitations of surf therapy**

There is still limited scientific evidence to support the effectiveness of surf therapy for a range of benefits for both physical and psychological health, even though many programmes operate on this premise (Benninger et al., 2020). While there are potential benefits to surfing therapy, there are also challenges and limitations to consider, such as there being no standardised protocols for delivering surfing therapy. Each surf therapy programme has different methods, goals, and outcomes, making it challenging to compare results between different programmes and across

studies, in turn making it difficult to replicate studies and ensure consistency across different settings (Benninger et al., 2020). Additional barriers include access to transportation (van der Merwe & Yarrow, 2020), lack of family support and engagement (Drake et al., 2021; van der Merwe & Yarrow, 2020), differing surf instruction techniques (Drake et al., 2021), and the availability of suitable surf therapy programmes for children with disabilities. Taking location into consideration within the design of surf therapy programmes is especially important given the social and historical context of surfing (Benninger et al., 2020). In many regions, surfing has been considered a 'white' and 'male' dominated sport and a marker of exclusivity and privilege (G. Thompson, 2011).

This study will, within the context of surf therapy, examine the diversity or absence thereof in this sector and its influence on the participants' outcomes. This research exploring the influence of surf therapy among vulnerable and marginalised groups, specifically black children with disabilities living in poor socio-economic communities, will contribute towards our understanding of the effectiveness of surf therapy for this population.

## **2.11. Theoretical and conceptual frameworks**

### ***2.11.1. Bronfenbrenner's Bioecological Model of Human Development***

The theoretical framework of this study is the Bioecological Model of Human Development, and the Social-Ecological Model of Disability and the Community-Based Rehabilitation (CBR) Guidelines of the WHO provide conceptual frameworks related to disability inclusion. Bronfenbrenner's **Bioecological Model of Human Development** is a theoretical framework that emphasises the importance of understanding human development in the context of the complex and interconnected systems in which individuals live. The theory was developed by psychologist Urie Bronfenbrenner in the 1970s and has since been widely applied in various fields, including education, psychology, and social work. Bronfenbrenner's Bioecological Systems Theory explores a child's development within the context of a system of relationships that form their environment (Eriksson et al., 2018) and the active role of the developing individual. Bronfenbrenner and Evans (2000) suggested that to understand the effect of these proximal processes on development, one must focus

on the person, context, and developmental outcome as these processes vary and affect people differently (Bronfenbrenner & Evans, 2000). This theory focuses on the use of the Process Person Context Time (PPCT) model to show how interactions between process, person, context, and time could explain the development of individuals (Hayes et al., 2017; Rosa & Tudge, 2013).

As the research aim is complex in nature, Bronfenbrenner's Bioecological Model of Human Development provides the theoretical framework which explores not only the children's development but also the development which includes parents, professionals, and other individuals involved in the research within the context of a system of inclusive relationships (Hayes et al., 2017). The process of child development is not linear, and is in fact a complex system of relationships affected by multiple levels. Using Bronfenbrenner's Bioecological Model, this research explores surf therapy as a health promoting intervention, combining person-focused and environmentally based components of a surf therapy programme. The inclusion of children, parents/guardians, professionals, and individuals who deliver the programme as research participants gives a more detailed picture of each of the systems and their interconnected nature.

The ecological system is made up of five socially organised subsystems that together support and guide human development. Each system can have bi-directional influences, which means that relationships have impact in both directions, both away from and towards the individual (see figure 2.1 below). Bronfenbrenner and Evans (2000) also emphasise the importance of a positive relationship in overcoming the potential damage that is caused by a negative or ineffective environment. They state that even a constructive environment may not be sufficient to foster emotionally positive development without a warm and caring relationship. These five complex layers of environment are the microsystem, mesosystem, exosystem, macrosystem, and chronosystem, each of which influence a child's development. Conflict or change in one layer will create a ripple effect through to other layers. This theory focuses on a holistic approach to the interaction of a larger environment, and not only the child and their immediate surroundings.

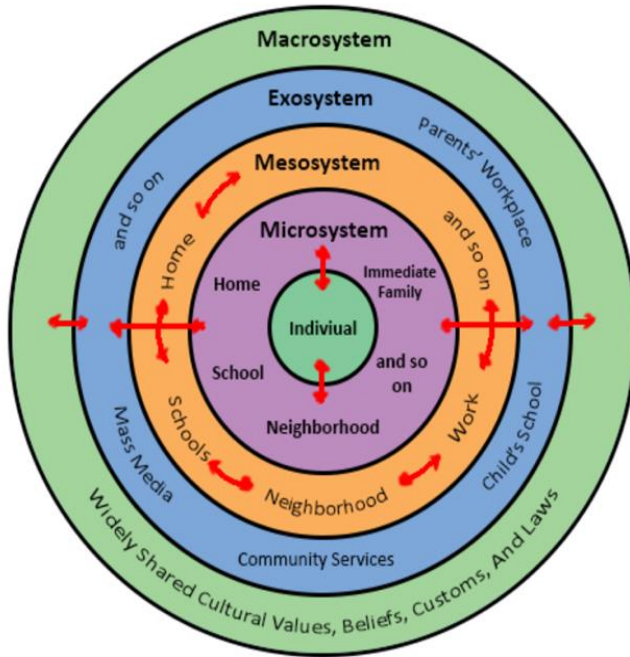


Figure 2.1: Bronfenbrenner's Bioecological Model of Human Development (Bronfenbrenner, 1977)

**The microsystem:** is the immediate environment in which an individual lives, including family, peers, school, and community. These systems have the most direct and immediate impact on a person's development and can either facilitate or hinder development depending on the quality of relationships and experiences within them. Activities, roles, and interpersonal relations are important factors that are the foundation of the microsystem.

**The mesosystem:** relates to the interactions and connections between microsystems. For example, the relationship between a child's family and school can have a significant impact on their development.

**The exosystem:** includes systems that indirectly affect an individual's development, such as the parent's workplace or the local government. Changes in these systems can indirectly impact the individual's development.

**The macrosystem:** includes cultural norms, values, and beliefs that shape the larger societal context in which an individual lives. This system can influence the development of attitudes, beliefs, and values that individuals hold.

**The chronosystem:** refers to the impact of time and change on the individual and the systems in which they live. It includes historical events, life transitions, and the timing of events in an individual's life.

In the context of children with disabilities participating in a surf therapy programme, the PPCT framework provides a comprehensive understanding of the factors that influence their experiences and outcomes. The proximal process is the central focus of the Biological Model of Human Development. In order for development to occur during a surf therapy programme, individuals need to engage in the activity on a fairly regular basis over an extended period of time. The process must continue for long enough to become more complex and needs to be bi-directional, involving interactions with people, objects, and symbols.

The PPCT framework in relation to surf therapy can be described as follows:

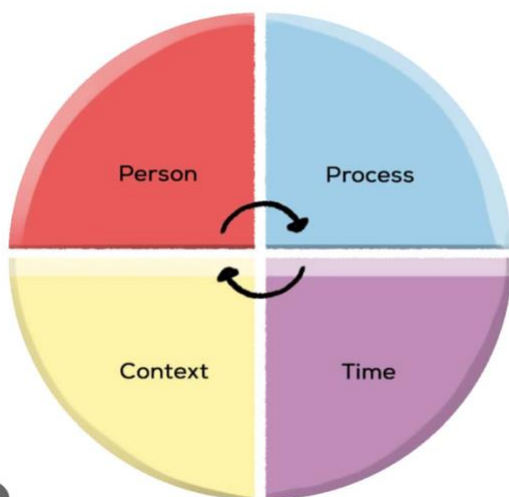


Figure 2.2: A diagram of person, process, context, time (Bronfenbrenner, 1977)

The **'Person'** component of the PPCT framework refers to the individual characteristics, attributes, and personal factors of the children with disabilities. This

component includes their specific disabilities, cognitive abilities, physical capabilities, emotional well-being, and resilience. Understanding these individual factors is essential for tailoring the surf therapy programme to meet their unique needs, strengths, and challenges. For example, children with physical disabilities may require adaptive equipment or specialised support to access and engage in surf therapy activities effectively. Children with cognitive disabilities may benefit from simplified instructions, visual aids, or additional support to understand and participate in the programme. By considering the individual characteristics of each child, the surf therapy programme can be personalised to optimise their participation and outcomes.

The **'Process'** component of the PPCT framework focuses on the interactions, relationships, and activities within the surf therapy programme. It encompasses the therapeutic approaches, techniques, and strategies used by the professionals and participants delivering the programme to facilitate the children's engagement and progress. In the context of surf therapy for children with disabilities, the process may involve providing appropriate supports, encouragement, and guidance during the surfing activities. Surf instructors, professionals, and participants delivering the programme may use various therapeutic interventions, such as goal-setting, skill-building exercises, and individualised coaching, to help children overcome challenges, develop confidence, and enhance their physical and emotional well-being. The process also includes creating a positive and inclusive environment where children feel safe, supported, and empowered to explore new experiences and build social connections.

The **'Context'** component of the PPCT framework refers to the environmental and contextual factors that influence the surf therapy programme. This includes the physical setting of the surf therapy sessions, the availability and accessibility of necessary equipment, the support from parents and families, and the broader social and cultural context. In the case of surf therapy for children with disabilities, the context involves providing accessible beach facilities, adaptive equipment, and trained staff to ensure the safety and comfort of the participants. It also involves collaborating with parents and families to understand their goals, concerns, and expectations, and involving them in the therapeutic process. Additionally, considering

the broader social and cultural context can help create a supportive and inclusive community that embraces and values the participation of children with disabilities.

The **'Time'** component of the PPCT framework recognises that development and change occur over time. It considers both the short-term and long-term effects of participation in the surf therapy programme for children with disabilities. Over time, children may experience physical improvements, increased self-confidence, enhanced social skills, and improved overall well-being through regular participation in surf therapy. The programme may also foster long-lasting effects, such as promoting a lifelong engagement in physical activities, developing a sense of belonging and self-advocacy, and influencing their future aspirations and opportunities.

By considering the PPCT framework, surf therapy programmes for children with disabilities can be designed and implemented in a holistic manner. This framework helps ensure that individual strengths and challenges are considered, therapeutic processes are tailored, inclusive environments are created, and both short-term and long-term outcomes are maximised for the participants.

This research explores surf therapy as a health promoting intervention, combining person-focused and environmentally based components of a surf therapy programme. The inclusion of children, and in the following chapters parents/guardians, professionals, and the individuals that deliver a programme, as research participants will provide a more detailed picture of each of the eco-systems and their interrelatedness. There are different uses of Bronfenbrenner's theory in public mental health research (El Zaatari & Maalouf, 2022; Eriksson et al., 2018) and the research outcomes of this study may support future disability policy and practice.

### ***2.11.2. Social-Ecological Model of Disability***

Throughout modern history, disability has been viewed as a form of difference, or a deviation from normality (Wehmeyer, 2013). Disability was seen as being apart from normal, not a part of normality (Shogren et al., 2018). Historical models and definitions of disability tended to focus on deficits and differences in functioning, while the social-ecological model acknowledges that each person has a unique

profile of capabilities and limitations. The model asserts that 'disability' occurs at the interaction of a person's unique profile of strengths and limitations and the demands of the environments in which he or she lives, learns, works, and plays. This means that all people have differing profiles of strengths and limitations, and disability is not inherent to the person (Shogren et al., 2018). One of the earliest applications of concepts associated with a social-ecological model was the International Classification of Impairments, Disabilities, and Handicaps (ICIDH) (WHO, 1980).

There are three key components of social-ecological models:

1. **Personal competencies:** This model assumes that an array of factors influence human functioning, including personal characteristics and competencies. To effectively assess the supports that a person will need, the strengths and areas of need that each person has must be identified to effectively determine how these strengths and needs interact with environmental demands.
2. **Environmental demands:** These are the demands a person faces, and it is only in understanding such demands that the appropriate supports needed can be identified. The environments should be age appropriate and integrated. A social-ecological model assumes that persons with disabilities are a part of community environments and, as such, supports should be provided to enable full participation, self-determination, and quality of life in those environments.
3. **Support needs with a focus on decision-making:** This model acknowledges the importance of support needs. It is understood that persons with disabilities often face a disparity between their own capabilities and the demands placed on them by their environment. This disconnect underscores the necessity for tailored support to bridge the gap enabling individuals to participate in activities aligned with typical human functioning. The notion of support needs encompasses a psychological dimension, encompassing unique patterns and intensity of supports required for an individual to engage in these activities. J. Thompson et al. (2009) define support needs in this manner, capturing the essence of the interplay between individual capacities and environmental demands. Support needs are not only about providing physical assistance but addressing the strategies and resources available to

enhance the individual's overall functioning (Luckasson & Schalock, 2013). The social-ecological model highlights the importance of providing a framework to facilitate participation in the supported decision-making of persons with disabilities (Shogren et al., 2018).

### **2.11.3. Community-Based Rehabilitation (CBR)**

Community-Based Rehabilitation (CBR) is a strategy for community-based inclusive development which takes into account the principles of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). The CBR Guidelines were developed by the WHO as a strategy for general community development to equalise opportunities for persons with disabilities and their families, through rehabilitation, poverty reduction, and social inclusion for all persons with disabilities, and with a strong emphasis on inclusive development (WHO, 2010). CBR is mainly based within a community development framework and places equal emphasis on access, inclusion, equality, and socio-economic development, in addition to rehabilitation (WHO, 2010). Buchanan et al. (2015) describe CBR as an intersectoral collaborative approach involving health, social development, labour, housing, and education as primary sectors (Buchanan et al., 2015). CBR supports stakeholders to meet the basic needs and enhance the quality of life of persons with disabilities and their families, through their empowerment. The CBR guidelines provide a holistic view of influences on participation and inclusion.

CBR is implemented across the world, including in South Africa. Persons with disabilities are among the poorest and least-empowered community members, especially in low- and middle-income countries such as South Africa (WHO & the World Bank, 2011). The National Rehabilitation Policy of the South African Department of Health provided a strategy outline for policy implementation, including the re-orientation of service providers towards CBR principles as well as outlining processes for developing rehabilitation services (Bloese et al., 2021; Chappell & Johannsmeier, 2009). However, persons with disabilities are still faced with numerous challenges, including a widening gap of unequal access to services in the health sector and rehabilitation.

A variety of CBR projects have been implemented in South Africa, each having different emphases and methods of implementation. Historically, government funding for CBR has only been provided through various provincial Departments of Health, resulting in many CBR projects being situated within the health sector (Rule et al., 2019). However, in the White Paper on the Rights of Persons with Disabilities (DSD, 2015), the potential for this to change was highlighted. The white paper addressed all sectors of government, as well as civil society, and highlighted that CBR promotes the availability of disability-specific services, including specialised and community-based rehabilitation, habilitation, and psychosocial support services (DSD, 2015).

In 2016, the South African Department of Health released its Framework and Strategy for Disability and Rehabilitation Services in South Africa 2015-2020 (Department of Health, 2016). In the document, CBR is seen as key to the Department's vision of providing accessible, affordable, appropriate disability and rehabilitation services to persons with disabilities, and it specifically includes the CBR matrix (WHO, 2010). The Department of Health acknowledged that coordinated action between intersectoral stakeholders needs to be a salient feature of CBR if persons with disabilities are to attain independent functioning. The document has not yet been implemented across South Africa (Rule et al., 2019). Rule et al. (2019) highlighted the concern that the implementation of CBR, and its goal of ensuring the rights of persons with disabilities, may be hindered by the lack of visibility of CBR and misunderstandings of what CBR is, which in turn may hinder its growing implementation in the country in line with new government policies (Rule et al., 2019).

This research focused on specific components of the CBR matrix (WHO, 2010), which are highlighted in table 2.1 below. In health, it included promotion, prevention, rehabilitation, and assistive devices. In education, it included non-formal and lifelong learning. As part of empowerment, it included skills development. The social component focused on personal assistance, relationships, and family, as well as recreation, leisure, and sports. Livelihoods focused on advocacy and communication, community mobilisation, political participation, and disabled people's organisations. These areas of focus will be highlighted in the chapters that follow.

Table 2.1: CBR Matrix (WHO, 2010)

CBR MATRIX				
HEALTH	EDUCATION	EMPOWERMENT	SOCIAL	LIVELIHOOD
<b>Promotion</b>	Early Childhood	<b>Skills Development</b>	<b>Personal Assistance</b>	<b>Advocacy and Communication</b>
<b>Prevention</b>	Primary	Self-Employment	<b>Relationships, Marriage and Family</b>	<b>Community Mobilisation</b>
Medical	Secondary & Higher	Wage Employment	Culture and Arts	<b>Political Participation</b>
<b>Rehabilitation</b>	<b>Non-Formal</b>	Financial Services	<b>Recreation, Leisure and Sports</b>	Self-Help Groups
<b>Assistive Devices</b>	<b>Lifelong Learning</b>	Social Protection	Justice	<b>Disabled People's Organisations</b>

#### 2.11.4. Recommendations and planning for further action

Recommendations for future studies:

In terms of young people's development, the potential of critical consciousness that is part of the cognitive changes in the teenage journey could be included into the theoretical and conceptual framework.

The addition of 'Model minority' could be included into the theoretical and conceptual framework.

## **Chapter 3: *Surfing Makes Me Want To Scream I'm Happy*: Findings from children with disabilities' narratives of participation in a surf therapy programme**



*Image 3.1: Chairs on the shoreline while participants are in the water during surf therapy*

### **3.1. Context of the study**

This study seeks to explore how children with disabilities experience their participation in a surf therapy programme. In this chapter, the children's voices are heard through the narrations of their lived experiences before, during, and after participating in a surf therapy programme. This study is important as, to my knowledge, there are no current narrations on participation in a surf therapy programme for children with disabilities in South Africa. The narratives are an account of the personal experiences of five children living in the Western Cape, South Africa. Each child was interviewed three times over the course of one year. The first interview took place prior to them starting a six-week surf therapy programme, the second interview one month after they had completed the programme, and the final interview one year later. Each interview took approximately 30 to 60 minutes. Each child's three interviews were combined into one story. Chapter 5 will discuss the methodology, Narrative Analysis, and Analysis of Narratives in further detail.

The children participated in six structured surf therapy sessions, once a week for six consecutive weeks between May and June 2021. The total duration of each session was three hours, which included changing, beach work using the surfers' circle, time in the water, and time on the beach for the surfers after their session. The surf therapy sessions were run at Muizenberg Beach, in Cape Town. Each surf therapy session was run by a qualified surf coach, a head volunteer, a physiotherapist, and a team of assistant volunteers.

Children with disabilities tend to have lower fitness levels than their peers that are able-bodied, as well as fewer opportunities to participate in social and sporting activities in a group environment, leading to a compounding effect on both their social interaction and self-confidence (Moore et al., 2018; Mueller, 2017). Surf therapy for children with disabilities has been studied in a number of countries with results such as improved physical fitness (including upper body, core strength, and endurance), self-confidence, social development, social skills, behaviour, and sleep, as well as reduced levels of anxiety (Armitano et al., 2015; Moore et al., 2018; Mueller, 2017). However, in a developing world context, countries such as South Africa have limited research on the practice of surf therapy.

### **3.2. Methodology**

The children's stories were captured over the span of 12 months, with three interviews each and observations of their experiences during surf therapy. The individual interviews conducted with children were informed by narrative inquiry. Narrative inquiry records the experiences of an individual, revealing the lived experience of the individual primarily through interviews. It can reveal unique perspectives and a deeper understanding of a situation, often giving a voice to marginalised populations (Clandinin & Connelly, 2004; Connelly & Clandinin, 1990). The children were asked to use their own words from their own experiences and their stories were guided by using open-ended questions. Interviews took place at locations which were convenient and comfortable for the children and which could accommodate their impairment and minimise distractions.

A strength of narrative research is that it is a way of characterising the phenomena of human experience, as people by nature lead storied lives. This data gathering method describes these lives by collecting and telling stories about them, and reveals in-depth detail of a situation or life experience, possibly including significant issues not recorded anywhere else (Connelly & Clandinin, 1990).

A possible limitation to this method may be the Hawthorne Effect, a tendency, particularly in social experiments, for people to modify their behaviour because they know they are being studied, and therefore distorting the research findings (Wickström & Bendix, 2000). Throughout the process, I was aware of the need to be heavily embedded in the topic with a broad understanding of the subjects' life experiences in order to effectively and realistically represent their experiences. I have had to manage a large amount of data, making it a time-consuming method beyond even the interview process itself. The research method relied heavily on the memory of each participant. Triangulation, a method used to increase the credibility and ensure trustworthiness of research findings, was important as it included the use of multiple methods of data collection (Carter et al., 2014).

### **3.2.1. Sample**

The sample consisted of five children with disabilities, who were purposively sampled. The selection was non-random and participants were "information rich" to provide an in-depth study whereby the most could be learnt (Patton, 2002).

### **3.2.2. Inclusion and exclusion criteria**

The children selected were between 10 and 17 years old, their spoken language was either English or Afrikaans, and they needed to have a physical, sensory, intellectual, or cognitive impairment. It was acknowledged that children with severe cognitive impairments may not be able to self-report or express accurately during interviews and during the initial assessment meeting.

Other inclusion criteria were:

- Never experienced ocean-based sports before or participated in a surf therapy programme
- Comfortable going into the ocean

- Able to float appropriately wearing a flotation device
- Willing to share about their experiences with another person

Exclusion criteria:

- No children assessed at a level 3 or level 5 Surfer Ability Level were able to participate. This assessment was based on the Surfer Safety Level (SSL) and Surfer Ability Level (SAL) assessment provided by a Paediatric Neurodevelopmental Physiotherapist (See appendix H).
- Children were asked to explain in their own words what I had shared in the information sheet. If the child was not able to accurately express that they understood what the research would entail, they were not eligible to participate.
- As methods of gathering data involved spoken interviews, non-verbal children were not included in the research.

### 3.2.3. Participant demographics

Participant Demographics: Children with Disabilities								
Name	Age	Gender	Race	Disability	School environment	Home environment	Number of research surf therapy sessions	Number of sessions throughout the following year
Tala	15	Female	Black	Spastic diplegia cerebral palsy	Attends a school for children with disabilities	Lives in a school hostel during the week and stays with her aunt, uncle and four cousins in Phillippe at weekends.	6	7
Thabo	14	Male	Black	Deformity in the bones and a lower part of his legs. Legs were amputated as a baby.	Attends a school for children with disabilities	Lives in Khayelitsha with his parents, grandmother and one of his two younger sisters.	6	14
Charlie	12	Male	White	Spastic quadriplegic high tone cerebral palsy	Attends a school for children with disabilities	Lives in the Northern Suburbs with his mother, father and two brothers.	6	11
Princess	15	Female	Black	Spina Bifida. No spinal sensation from lumbar fusion.	Attends a school for children with disabilities	Lives at a school hostel and goes home to her aunt in Khayelitsha on weekends. Her parents and six siblings live in the Eastern Cape.	6	5
Rowan	14	Male	Black	Bilateral hand and upper leg amputations due to meningococcal disease.	Attends a school for children with disabilities	Lives in Khayelitsha with his mother and two siblings.	6	16

Names provided below are pseudonyms to protect the identity of the participants

Table 3.1: Demographics of the children participating in the surf therapy programme

### 3.3. Data gathering methods

As previously mentioned, the children's stories were captured over 12 months, interviewing them each three times and observing their experiences during surf

therapy. I had made a provision that all meetings and interviews would include a translator if the potential participants did not speak English; however, they all did and a translator was therefore not needed. During the process of transcribing the recorded interviews, I regularly referred to my notes to check whether my interpretations were accurate. I completed the transcriptions shortly after conducting the interviews, while the information was still fresh. I returned to the participants to have them check my interpretations of their beliefs and meanings, to avoid bias where necessary.

In addition, I used reflexive journaling to help me think about my own positioning and perspectives in the process of both the collection and analysis, and to take into account my own assumptions of the phenomenon. Data gathering continued until data saturation had been reached. Lincoln and Guba (1984) recommend member checking as a way to enhance rigour in qualitative research, and therefore, after reading each transcript, I completed member checking by going back to participants to ensure I had captured all the details of their stories accurately. Field notes were taken during the beach surf therapy sessions. I used an audio voice recording device to capture my thoughts and notes in real-time as using pen and paper on the beach and in the ocean was not a practical option.

### **3.4. Surf therapy programme delivery**

The safety of the participants remained a priority of the research. The professional surf coaches had all received training in surf therapy and already worked extensively in a surf therapy programme. The overall surf therapy training includes a minimum of a level one first aid certification, level one Surfing South Africa accreditation, and training in how to deliver surf therapy. As this intervention was an adapted surfing programme, there were various adaptations that needed to be made and the support team members needed to be trained in these.



*Image 3.2: Volunteers and child participant at the beach*

It was acknowledged that adapted surfing has a moderate risk of harm for children with disabilities. However, no children participating sustained any injuries or discomfort from participating. All the necessary precautions to mitigate the risk of harm while surfing were put in place to reduce the likelihood of participants' exposure to risks. Ethical considerations with regards to participation were considered, including safety in the water. Each team had up to 12 team members supporting each participant. Depending on the participants' profile, each lesson was run by a head coach, a head surf therapy volunteer, and a physiotherapist, with up to ten trained surf therapy volunteers in the water safety team. As the participants improved throughout the process, it became evident that they needed less support and fewer team members in the water. However, to ensure team cohesion, the same teams remained each week where possible. Life jackets and specialised adapted surfboards with additional floatation, grip, and handles were used.

The sessions took place in shallow water where the surfers were no more than about 1.25m deep in the water. The surf coaches supported the participants where needed, and, where necessary, a second coach sat on the board providing seated support to the surfer. At the time of programme delivery, there was no formal training available in South Africa that provided a structured method for surf therapy. The best practice principles were developed and used based on an existing programme running for children with disabilities in Muizenberg.

### **3.5. Recruitment**

An information flyer (Appendix B) was placed at surf therapy clinics in Muizenberg asking parents/guardians to contact me if they were interested in taking part in the study. The physiotherapists and occupational therapists that volunteered at the existing surf therapy clinics put forward candidates from their practices and schools. After being contacted, I met with the parent/guardian and child to provide more information about the study through an information sheet (Appendix I). Getting consent from the parent/guardian and assent from the children was required before the study could proceed. Once assent (appendix C) and consent (Appendix D) had been granted, the recruitment assessment form was completed (Appendix G). Details regarding the nature of each child's disability were provided in this form, and it was used to establish the eligibility of the participants to take part in the study. Guided by the inclusion and exclusion criteria. As part of the assessment, a paediatric neurodevelopmental physiotherapist provided an assessment of the safety and ability level of the child (Appendix H).

Below are the five children's narratives based on their experiences before, during, and after participating in the surf therapy programme.

## 3.6. Narratives of Children

### 3.6.1. Tala: “Once I started surfing, I just felt free and confident”



Image 3.3: Tala participating in the surf therapy programme

**May 2021**

#### **About me**

I'm a funny person, I like to talk too much, I love the ocean very much, and I enjoy school. My friends are Cebisa and Tammy and a new girl named Emilee. They are funny children. My other friend is at home now because she's injured. She has brittle bones, so she gets broken quickly.

#### **Things that make me happy and sad**

I enjoy doing sports very much. I play volleyball with my friends from school. Being with my friends, my family, and the teachers makes me happy. Sometimes I get sad because someone gets hurt and I feel sorry for them or when someone is rude and I don't like the way they talk. I would like to be better at helping myself without asking

for help all the time and feeling free. I find it difficult to go from home to the shop, I also find it difficult to walk with my walker. I find it difficult to sit in my wheelchair. I wish I could walk.

### **When we go surfing**

What I know about surfing is that you sleep (lay down) on what is almost like a boat (surfboard) and you lay on that and then that goes under the water and splashes. I know that we will be surfing in the ocean. I decided to try surfing because I love the ocean and the dolphins, and I love the animals in the ocean, and I love water.

## **July 2021**

### **When I surf I feel lekker**

I felt so happy and excited. I had fun. I learnt that surfing is fun. In the beginning, my eyes hurt from the salt water and I couldn't see. With goggles, everything was perfect. I felt comfortable with my team and was shouting 'wave, wave' in the water when a wave came near us. I managed to paddle in the first lesson and my goal for the next week was to kneel better on the board. My third surf was nice, I learnt to paddle on the surfboard and I even tried to stand. It felt different in a good way. In my fourth session, I tried to stand but I couldn't stand. I was on my knees and I moved my arms like this (swaying around). It felt really good.

We did some practice rounds of learning to fall in the water. I was nervous in the beginning learning to fall off. At first, it was scary but after I tried it a few times I knew everything was going to be okay and I felt more comfortable in the water. I really enjoyed learning from my coach. He focused on how I could move on the board and gave me one challenge each day. In the beginning I didn't like the water on my face but after a while I really enjoyed it when the water splashed on us.

I fell off the board and landed in the water. At first I felt scared, but Cara came to pick me up. When I was with my team, I didn't feel scared; I felt safe and I learnt to feel more comfortable in the water. In the last session, I decided to stand and paddle more. I enjoyed it. Surfing makes me feel happy and the ocean makes me feel powerful. When I first started, I didn't move much but now I can move more and I enjoy moving

more. When I surf I feel lekker. I had so much fun, it was 100 out of ten. I can't think of a day this fun that I have ever had.

### **What surfing taught me about myself**

After the first session, I felt strong and I felt confident. It was very nice. After the last session, I felt very sad because I was not going to surf again, but I learnt to paddle and learnt to surf which made me happy. I experienced a lot through surfing, like being independent and knowing what I want to do. Being independent for me means doing things on your own. It also means trying new stuff, experimenting, and experiencing new things. I learnt to be brave, not to be scared anymore. I learnt to be confident. Just believe in myself and never give up. I never realised that I would surf one day. I never thought that I would surf but I surfed, and it was very nice. I feel I'm better at surfing. I'm better when I am at the beach, and in the ocean. Once I started surfing, I just felt free. I felt free and confident. Even in other spaces, even when I'm not surfing even at school, I felt free and confident. Like, "Yeah, I can surf, I can do something like surfing. That I didn't know that I could do before". I would encourage my friends to go surfing because it's very fun and it's very experiencing\* (\*to experience surfing first-hand). It's really good. I would say I learnt how it felt to have my body free. When I was doing my arms like this (waving them out side by side) to feel free. When I'm in the ocean, I don't think about so many things. I just focused on the waves and the water. I liked when I was trying to stand up and have my arms like this and then catch the wave on my knees. I learnt that if you try to surf on your own but if you can't, then there are people that can help you. Surfing taught me to never give up, be independent, and be confident.

### **July 2022**

#### **My favourite part is to be with my coaches**

Since we last spoke last year, I have been surfing. When I surf, I feel happy and relaxed. My favourite part about surfing is being in the ocean and trying my best to surf. I'm standing on the board and making the moves. My favourite part is to be with my coaches and make jokes with them. My least favourite is when I fall off the board because it makes me scared. I breathe fast then I get nervous. My coach taught me how to hold my breath then come up above the water. I surf with Princess, she is a

good friend. She is surfing with me and talking with me. I've known her since I was in Grade 4. Last year we shared a room together.

The changes from surfing I'm still feeling now. I feel free when I'm surfing and the water makes me relaxed. I surf every second week and I surfed in a competition. The competition was so amazing. It was a nice experience. I learnt to compete against myself and never give up. I was first place in female junior. I feel happy. I am capable of doing anything, no matter what. My surfing experience had influence on my life outside of surfing in a good way because I learnt to be independent in many ways. I went to a new school this year and my surfing helped because I learnt I can face anything and not be scared of anything else. A highlight for me has been the competition because I've never experienced competing in surfing competition. It makes me feel confident. If there were three words to describe how I feel now when I surf, I would say it was being happy, being brave and being independent.

**3.6.2. Charlie: *"I Have Learnt That My Body Can Do Many Things, I Just Have To Tell Myself That I Can Do It"***

**May 2021**

**About me**

I have 2 brothers, one's name is John and the other one is Brad. My oldest brother is 14. We are actually only 10 months apart. He is very sporty and good at school. John is switching schools, so he can focus more on the academic stuff, and me, I am just in school and doing stuff. I enjoy school, which is basically for kids like me, with mental and physical disabilities. I really like that school cause it's just nice to be the same as everybody else when you're in that school. You don't feel scared or anything like that.

**I can do a lot of things, the same as what my brothers do**

I am a very talkative person. I like talking. We used to stress what I am going to do when I am older but my family honestly think that I'm going to do talking stuff. Because I love to talk, I'm not scared, I'm not shy to show what I can do. I can talk really well. I can swim alright. I don't need any help with swimming and I can communicate. I can play games really well. I don't find much difficult to do, I don't really think of the

negative really. One thing that I find difficult is probably reading. I struggle with reading and that, and it's a struggle as my dad loves reading. I struggle with reading then he gets frustrated. I can do a lot of things, the same as what my brothers do. I can swim, I can do a lot of things, I wouldn't let my legs stop me from doing certain things. I can do quite a lot.

I don't like bullying. I don't get sad that easily or I try not to. One thing that makes me sad is when bullies can make fun of people with disabilities. I'm sad about it. If I had one wish, it would be for me to be able to walk like a normal person. Or maybe not really because I think that might affect the way I am now if I got that. But I am pretty sure it's me walking. I enjoy going out with friends and playing games on PlayStation. I really like when I play a sport game on the PlayStation because feels like I'm actually playing the sport game. If my friends go outside to play rugby, I play a rugby game on the PlayStation. I like doing sports, mostly swimming. It is my favourite.

### **No gravity**

I love the sea. I love it, but my two brothers don't really like the sea but I like it a lot. Sometimes my dad just takes me and him, we go in the sea and we go really deep and then I would dive through a wave and my dad would have to find me. One thing I like to do when I'm swimming, I like to walk in my pool. I can walk in my pool, there is no gravity and it's fun and I can play water polo.

### **I've been looking forward to surfing for long**

I don't know much about surfing, that's why I was so excited; it will be a new experience. I know when I go surfing they are going to be teaching me how to surf. I can stand really well but I need someone's assistance. I had an operation three years back. It was a big operation but it helped a lot. It was a seven-hour surgery. I was not able to straighten my legs properly, now I can straighten and bend and take three steps without anyone taking my weight. Just someone must be behind me so knowing that someone is there. I get spastic. I've always loved going to the beach and always like to see people surf. When my dad saw the advert, he said, "Cool Charlie, you love going to the beach, you love going into waves so do you want to try this." I was like, "Yes, I do." It's just a new experience and I love water and I love the beaches. It's like one of my favourite places to go.

## **Everybody thinks my legs are paralysed but they are not**

So will it be ok if I don't end up standing and actually surfing? I'm going to try my best, guys don't get frustrated easily, do they? Everybody thinks like my legs are paralysed, my legs are not paralysed. I can move them, I can stand, my legs are not paralysed. For some reason, everyone thinks that when they see a person in a wheelchair, they assume they broke their legs or you've been in a car crash. I'm really excited. Also my hands, I don't usually draw, I normally use a computer, it's not like my hands don't work; they work, they just get really tired.

## **July 2021**

### **Surfing makes me feel free**

When we first arrived, I was feeling excited, happy, and really wanting to get into the water. I love cold water. Surfing makes me feel free. I learnt that if you want to do something you can, just do it. My dad came into the water to surf too, we caught the same waves together. I really enjoyed surfing with my dad. I learnt to push myself up on the board onto my hands and knees and not lean backwards. The one week the tide was quite high and the waves were rough but I wasn't scared, I was excited. I enjoyed chatting to my team and getting to know everyone. I even got to ride waves by myself. Sometimes my coach would be surfing the wave with me, carving, and I would jump in the water on purpose.

I was very shocked about how organised it is. I thought it was just gonna be one person, and one coach and I didn't think it's gonna be as fun as it was. That was such an awesome thing I did and I was sad when it finished. I was expecting something pretty basic. I don't know what I expected but I did not expect what would happen, if that makes sense. We actually planned on going surfing, when the holiday starts but it depends on what [COVID-19 lockdown] level we are at then. After surfing for the first time, I felt lots of adrenaline, I felt very excited. I was excited that there were still 5 more weeks left. After the last lesson, I was a bit sad. We wasted some time with the photos, that got me a bit down. It was sad but it was fun.

### **Never say you can't do it**

I have learnt during this time to never say you can't do it. I learnt that, I thought I was not going to be able to do it as well as I did it. I learnt that I can do lots of things. I tell myself that I can do them and then I'm able to do them. I never thought that I would be able to go on my knees on the board, I did actually do that at the end and that was pretty cool. Since surfing, I'm definitely better at my movements. It hurt a lot when I went on my knees before but now it's so much easier. My arm strength has a lot of credit from surfing. My arms because I hold on all that stuff (handles). My arms are stronger now. I used to be very stiff and tight. I had this operation with all my scars, even with this operation I would still be stiff and hunchbacked. Since surfing, now this is making me move a lot so my body is getting used to movements and it's a lot easier. It's nice to move, it's not nice just to sit in one space the whole day. That's why I like surfing because I get to get out of my chair for a little bit all the time when surfing. I got to move around instead of just sitting in one position the whole day.

One thing that has changed now, was before I could only play the sport I play on the PlayStation. Before it was mostly me watching my friends go play outside and now I can go play the actual sport with them. If my brothers want to go surfing I don't have to stay behind and just watch them, I can go surf with them. It was so cool to surf with my dad and with my brother, it was fun.

### **I have learnt that my body can do things, I must just have to tell myself that I can do it**

I used to think, "Oa, I can't do that." I must stop telling myself that. I learnt my mind tells me I can't do it, but I need to tell my mind that I can do it. I liked surfing because I felt free when I was in water or close to water because I can move around in the water a lot easier, I'm not that stiff. I can walk around in the water, I swim, I just like the freedom of surfing. There wasn't anything I didn't like about surfing. Outside of surfing, there has been a big change. People realised that I can do it and that they mustn't underestimate me or people like me in general. If a friend had to ask me about surfing, I would say you should totally do it, you should try. It was a lot of fun for me. I would encourage anyone to surf. The idea I had was to get the team back together just for a day and we all go surfing that day when it is sunny. I would describe surfing

as fun, a little bit challenging and even more fun. And upbringing, if that makes sense, like upbringing (uplifting).

## July 2022

### **I won the Victor Ludorum at school, I was the champion for the year**

I did very well on my tests last term. I got 7's for my tests and I got 96 for math. I have been doing a lot of things since we last spoke. I got better in school. I actually won my school swimming gala for the para kids. The kid that came second had beaten me two years in a row before this. I beat him. I was so happy and it was so close and he is two years older than me as well. I also got a higher percentage than him. He was not happy. I won the Victor Ludorum at school. I won the school championship for my school gala. I was the champion for the year. The changes I experienced when I first started, I still feel them now and like I'm just happier and it makes me do all these things I never could do before. I move around a lot when I am surfing. Before when I'm in a chair at school, they forced me to be in an electric chair and I hated it because I was sitting in one position and it really irritated me.

I have carried on surfing, only the last two weeks we haven't gone surfing but I have basically been going surfing every two weeks. Sometimes I go to the beach and things. Sometimes it's just me and my dad. My uncle loves it a lot, he does skydiving and things. I love going surfing and I am excited when I surf. I really enjoy riding the waves by myself. I don't like it when they are with me anymore riding the back of the board. I like doing it by myself but they say sometimes they have to and I do not like the life jacket.

My surfing experience has continued to influence my life outside of surfing big time. I do a lot more with my friends. I used to only watch or be the ref. They actually let me play with them now, especially when we are in the water. I would play with them like Touchy or Piggie in the middle. I will play with them in the water. I can do anything now in the water. I even learnt how to touch the bottom of the pool which I wanted to do for so long. My surfing has also really improved. Before I would need help paddling to find the wave, but now I basically paddle and do everything. I tell them, 'ooh that looks like a good wave' and they would tell me yes or no. Sometimes I would turn the board to go on the wave and push myself. I can do a lot more things than I could do.

I'm doing a lot more things on my own. When they let me go on the wave, sometimes I stand up and sometimes I paddle a little bit more if I feel like I'm slowing down. If I fall, I think about what they told me to do and tuck in my head and hold my breath and hold the top of my head.

### **One surfing experience that stands out for me was my first big fall**

It was like a couple of weeks back. A wave came and a double wave came, and I remember I felt my board was going to fall. As I hit the water, I tumbled twice. I stood up and I was all dizzy and someone came to me and said, "are you okay are you okay" and I said, "yes can you please help me get back on the board". It was a highlight because I have always wanted to experience what it felt like to have a big fall. I was a little bit scared with a lot of adrenaline rushing because it was a big fall. Then I laughed and got back up. When I surf, I feel excited, happy and excited, and I really enjoy having fun.

### **3.6.3. Thabo: "I want to be different"**



*Image 3.4: Thabo in a surf therapy session with the individuals delivering the programme*

**May 2021**

**About me**

My family is not perfect but is the family who tries. I have a mother who does not have a job but who owns a fishery. My dad is a working man who works the whole day. My grandmother is a lovely but strict person. My sister is turning 14 this year. She is a person who focuses on her beauty and it's all about the make-up and that. The last born is 11.

I enjoy school, but sometimes I have those days where I don't want to go to school. Joshua, Niele, Reno, Evan are my friends, others are just acquaintances. Joshua is in a wheelchair, Niele, he has crutches, Reno has no hands. I would like to be better at my academics and my school work. I mainly like history and geography, but I haven't expanded my knowing of other subjects because I'm going to another grade so I haven't known other subjects yet.

**People like me**

I'm totally different from others. I mean, I have not been in a car accident, I have a medical problem, which I had when I was new-born. I had to get a surgery for both of my legs. My bone structure wasn't straight. They couldn't put the bones into the straight position so they had to amputate my legs. I'm also a cardiac patient, but I don't want to be that person that everybody be like, "Oh, he is a heart patient, I feel sorry for him because when he is there, maybe he is going to have a heart attack". Well, I'm not that kind of person but what I want to know is, am I accommodated for? Especially me, because I'm a bit overweight for my age and I don't want to be that difficult person who needs 50 people to lift me.

**I am looking for something, I want to be different**

There are problems here and there, but I just try to be normal. I'm someone who is looking to be distracted by something, like something more active. Something I like doing, not because someone says so, or because someone is telling me to do it. I've been talking to my mother a lot about it. I've been looking into going into something more permanent. I know that there are not a lot of projects around that take a lot of disabled people, to help them and accommodate for them. I've been looking for something that I can do on a regular basis. The surfing programme I know is six

lessons, but I want to know if there is a more permanent project for people like me. If there is surfing for disabled children like me, maybe I should try it. Or basketball, because the place I live, there's no one who can accommodate a disabled person, especially in townships, where a disabled person is just seen as a person who is not going to have a job and is dependent on social grant. I don't want to be like that, I want to be different. I want to be independent, I want to have freedom, I want to be free to move around, live places where I've never lived. Just be myself, actually. Be normal.

### **I want to just be me**

The main thing that makes me happy is being me. To just be able to talk, having an opinion and expression. To know about history and know how to dabble around with things that happened in the past. To be able to change everything and have that mindset of knowing what you want, who you want, and what you need. Being educated is one of them. Just trying to be something. Actually, something to be known. I don't want to be someone that's been told of things. I want to be someone who is free, has his own opinion. But there are things that pull me back. Like the fact that I'm not a person who talks a lot. I have those days when I'm like, "Ok, he's talking," but there are some days when people hate you and would not try to talk to you. I have been having issues with those people. I know that not everyone is gonna love you and would not want to be your friend. But yeah, I'm a deep thinker.

There are a lot of things in life that make me sad, like knowing that people just make fun of you. Knowing that there are a lot of things that I can't do. Knowing that one day I will live without my parents. Just those depressing things, like things you don't want to think about. That won't even happen if you are not sure they won't happen.

### **I want to feel like I belong somewhere**

It's a bit difficult to help people at home. I can cook, I can clean, but there are a lot of things that are difficult to do, and at home they will be like, "You know, you're always lazy." But they don't know. Whenever I make an excuse, like my prosthetic legs, they just think, "Ooh, just another excuse". There are a lot of things I wish I could do, but there aren't any sports. Maybe sports is the only thing closer to what I can do. I can't be running with my asthma. I can't do things that make people happy. I want to gym but I'm told you are going to grow a very weird shape body. I can't do things my friends

do, like Reno. He gyms. Evan, he gyms. You can see they are healthy. Me, I'm just a person who sits at home. Just plays on the phone all day.

### **I want to do law and entrepreneurship, but my parents just want me to do information technology**

The only thing that worries me is about what I'm going to do after school. When I'm done with school, I want to do law and entrepreneurship. But my parents just want me to do information technology. I'm the person who does not pass maths at all. It's something difficult that I can't do. I'm not sure if I can move out of my career choice to be a lawyer. And maybe a judge also, a court judge. I want to own a business, influencing, doing social influence, like on Instagram. Things that are mainly known, internet and YouTubing. I'm not good on computers, I'm just good at knowing what's happening, the latest trends and things like that. If I had one wish, it would be world peace, actually. Out of all the things that I could think of, is world peace. I like peaceful things.

### **Things I enjoy**

I enjoy being on my phone for fun, if that's a normal answer. I just go on social media. Things just that those people tell you, they don't teach you anything. They say I must focus more on my school books. To be honest, I'm not saying it's not good for me, but it's just a place where I can escape. I can be like, I forget all the troubles of the world or things that happened up to now. I really like doing sports too. There were sports but not anymore. Because of COVID, the lockdown happened. I want to do sports and was gonna ask if I can join one of the Cape Town junior basketball teams or any kind of sports, actually. I like playing wheelchair basketball.

### **The ocean and surfing and adapting**

I like the ocean itself but sometimes the people that are at the beach, those people like look at you. They can walk around in their swimsuits or swim pants. For me it's a bit difficult because I have prosthetic legs and when people look, it make me feel scared. I can't show I've had a huge operation on my chest. Also, my prosthetic legs can't go into the sand but I can take them off.

When I play wheelchair basketball at school I don't take my legs off because we have limited time to play. But when we are playing tournaments I take my legs off. I'm better, faster. It's comfortable, no problem. I don't know a lot about surfing but I know it is a worldly loved sport. People who live at beach houses would be like, "I'm going surfing almost every day, just for the love of it". But I know that people are saying that it's like a place they can escape at. A place they feel like they belong. Some of them wish they could just live in the ocean forever. With the surf therapy, I know that there will be people like 20 helpers or volunteers. I've heard that the surfboards are actually accommodated for people like me. I haven't seen them in person, to see how they work. I don't know a lot, actually. I haven't even researched about the programme. I am just keen to explore.

## **July 2022**

### **I feel like I belong in the ocean**

Before session one started, I was feeling nervous and excited but as soon as I got in the sea, the nerves disappeared. It is hard to explain, but when you are out there in the ocean you just know you are getting everything but when you are back at the shore you realise there is something that's blocking you from doing that. But then you look and realise you can actually do that [surfing]. I feel like I belong in the ocean. During my first session, I went from laying on the board to standing up. I learnt to paddle out and paddle into the waves. We were practicing learning to fall off. At first, it was scary in the practice rounds but I tried it a few times and I was more confident. I knew everything was going to be okay. I enjoyed just floating and it felt freeing. The next session was amazing, really amazing. I could smell and taste the salty sea and the hamburger I had for lunch. Feel the sand, hear the ocean and the chatters of people on the beach. I was watching all the people and the waves. I fell two times off the board and felt a bit overwhelmed because I felt I was going to die or something, but my coach told me to relax and let the life-jacket keep me floating. I also haven't had back pain and my back hasn't been bothering me, maybe it's the surfing.

I prefer surfing over wheelchair basketball and wish I could do it forever. The surf was amazing and the experience still overwhelming. I began to like it when I fell off the board, I could feel my confidence growing as this was what I was scared of in the beginning. I still can't believe I went on the board by myself and the last waves I caught

were amazing. I learnt to be brave. When I am staring out at the ocean, I feel joy. It's a feeling I can't explain. It's a happy feeling throughout my body. I feel independent. I began to gain more and more confidence because I realised how strong my upper body is and I could paddle out through waves and into waves. I wasn't nervous anymore. I am feeling confident in the water to surf and I learnt to be more myself. When I surf I feel different. My fourth session was nerve wracking at first, the conditions were a bit rough and it was windy, I was scared I was going to die or something or maybe drown (laughs). The following week was much better. I love surfing, I loved everything, especially falling into the water. I felt more confident and calm. I caught great waves, but I felt like I could have caught more and done more. I was testing myself and my body. I was scared maybe the board would go over me and I would drown, but nothing like that happened.

### **Surfing makes me feel different.**

Surfing makes me feel different. I am feeling confident in the water. Surfing has taught me to be more myself. When I caught the wave on my own, it was freeing. I enjoy playing in the water with my friends after the surf too. I work well with my coach, we work on new challenges every week and changes to where I place my body on the board to be able to ride for longer on the wave. I'm keen to improve my swimming. I am strong and I'm learning to use my torso and upper body to do turns. I like it when I fall off the board because I know I can float, I am not scared anymore. The final week's session was excellent. I enjoyed it all but sad that it was my last session. Everything was great; a lot of falling, but to say the least it was amazing. I like falling off my board now! I know I can stay calm in the water. My mouth feels weird, like I ate a bunch of salt and vinegar chips. Everything was awesome and everyone was great! I have felt a huge change; I can ride longer and on my own. It has boosted my confidence and I feel like everything was perfect. Everything is perfect. Time went so fast. I wanted it to be more permanent, you know, be a pro. Every week I couldn't wait for Fridays. This is where I want to be every Friday.

### **I feel cleansed ever since I started surfing**

Before I started surfing, I was feeling so closed. I was not talking much. I was distant to everyone and busy on my phone a lot. I was feeling a bit locked away, I was saying

to myself I was feeling locked, I was not feeling free, I was just not myself. But everything went well. The last few weeks were just awesome. I feel cleansed ever since the surfing and I've been enjoying myself. A lot of confidence; a real confidence boost, actually. It has been awesome.

After my first surf lesson, I felt a bit disappointed because I thought maybe we were going to do like the biggest thing ever. In my mind, I was doing this whole thing where it was just going to be me doing everything by myself. I overexaggerated what I was thinking, imagining the biggest things ever. After the first session, I started feeling happy, like feeling relaxed and everything. Getting used to everything, getting happy, getting used to everyone. And I was very social with everyone. When I started, I could not talk clearly sometimes. I just mutter or stutter, but when I got used to everyone, I could talk and do things. The last session I give credit to myself because I did something. I did great. If I had another chance, I would do this again. Because everyone was like, "Why are you so different today? Last time we saw you, you were like not that confident but today you are confident in everything."

### **I learnt that I'm really strong**

I learnt I can hold my breath long under water. I'm strong, I'm really strong, I have realised that. I have potential in what I can do, and I'm a very patient person. I've realised that with everything that you get, you have to be patient. I'm very social with the people and I liked talking to everyone during that time. I have learnt I can make new friends.

### **There are a lot of things that I'm better at since surfing**

One is that my posture has been awesome! Lately I'm trying things and I'm just enjoying things I could never do. I'm like, "What ... can I really do this now?" I've been open lately. Also, I have been outside a lot instead of being in my room the whole time. Outside of surfing, I've now started being more social. I never realised I could make so many friends. I've been trying to socialise with other people besides my school friends, which has been helping a lot, lately. I have also learnt more about my body, that it doesn't matter about my physical appearance; all depends on what my mental stability is and how long I persevere on doing things. I didn't realise how strong I am.

### **I have learnt that mind can be calm**

I can relax, I can be in control of my urges, my temper and everything. I'm now not always thinking about what people think about me, and me stopping myself from doing that and think about what I want to do. I can be myself, not in a bad way, but be selfish. Just say things on my behalf and how I am and be open minded also. I can be myself in many ways also. What I liked the most about the surfing was the people. The people there. They kept their smiles open, they were confident, they tried in every way to make you happy and they support you in everything you do, not only surfing. Mainly I love the people who helped me, the volunteers, the coaches – especially my coach, he was funny.

### **My coach was my favourite out of all of them, but everyone was amazing**

Especially Tamara and her best friends, the blonde Erica. Yes. All of them. They are all trusting John and especially Tom. I'm so sad that he missed the last session but he was awesome. I didn't like the certain time period we had, it was so irritating. Because I used to count every minute and I was like, "Ah, why now?" I was enjoying it and about to catch my last wave when I find out it was time to stop. I wish I had more time.

### **I have learnt to take the moment you have, you only live once**

If a friend asked me about surfing, I would say just join it. Take the moment you have, you only live once, so try everything you see and take everything in. Accept what you're getting. Choose this decision that you want to do surfing and if you don't enjoy it, it's not your fault. It's just how your mind works. So if you enjoy it, you can't be late. I would just tell them that. I would describe my surfing experience in these three words. Awesome, great, and how can I put it, spiritual. Spiritual. I wouldn't have changed anything, to be honest. Everything was perfect. I loved everything that was happening. Everything, all the processes, the equipment, I would change nothing.

**July 2022**

**When I surf I just feel anything is possible**

This past year I have been trying to focus on my studies and just trying to also adapt to surfing because recently I moved to a new school. I'm just trying to adapt to everything. I have quite a nice social life and that has to do with me because I have been focusing on myself. My friend group I'm exposed to now, I have more open friendships and more drama. You know, catching up with everyone is a bit difficult. Having relationships with some people, you know, friends, it's been very tiring. I moved to a new school, my last school I was at for my whole childhood, 10 years. I also moved from home to a school dorm. It's a bit difficult.

I have continued surfing and I'm probably not going to quit. When I surf, I just feel anything is possible. I feel like I'm free and I have more power over myself. I feel like nothing in the world could stop me from doing what I am doing. It just makes me feel more calm and it helps me adapt to the ocean. A nice feeling that you can't explain to some people, but in fact very nice. Amazing feeling. My favourite part is communicating with everyone, the volunteers, the friends I made like Kurt. It's like a lot of people.

**When I go surfing, at first it's nerve racking**

When I go surfing, at first it's nerve racking, when the day starts off. First thing on your mind is "am I going to be able to do this" because you can never expect a normal day surfing. It's always different, always different ways or different weather but again, for me it would be just nice and calm, you know, everything goes through as planned. It's just very soothing. It's like my therapy the way I was and expresses my emotions from the whole week. That really helps you to calm and understand things and take a moment at a time in life where you are looking and reminiscing in the water.

**Being in the ocean is really calming and soothing**

It's always different yet I still know that I will be calm. In the beginning, I was quite anxious about change or something that I didn't know was coming but now I am more settled being comfortable with change. It's something that I know that I usually bring myself back to reality with. I tell myself, there are changes done almost every hour,

every minute, every second. So adapt to it as fast as you can. So it brought things back into reality for me.

### **Before I did surfing, I didn't know what my purpose was**

The changes I felt last year, I do feel they are still changes. Sometimes there are a lot of changes that happen. It's not something I can escape from, something that I understand and I try to connect with it in a way. Mostly before I did surfing or any sports, I didn't know what my purpose was. I didn't know but when I went surfing I saw that it is something very wonderful. I'm now known for more than just my academics at school, I'm known for my performance in surfing. Most people know me for surfing now, not just my academics because who wants to be an academic robot every day. I've been telling people about surfing and that has also influenced a lot of people. I've been telling everyone about it and trying to help some people when you are going through the same thing. For many people who are disabled, they feel like there are no sports out there. It has impacted some people like Mich who didn't do a lot of sports but he is now surfing and he has been enjoying it, loving himself and loving it (surfing).

### **My highlight has been competing**

That would be the best experience ever because I got to see and talk to a lot of people that do the sport and to see that gave me more determination. So it's a highlight for me personally and a huge impact, a really huge one in my life. To me surfing makes me feel free, it is iconic and mesmerising.

### 3.6.4. Princess: “Surfing Makes Me Want To Scream I’m Happy”



Image 3.5: Princess being carried up the beach by the volunteer team

## May 2021

### About Me

I am a loving, caring, bubbly, friendly person. I always like to talk but not every day. I love people, talking to people, and I love making jokes. Sometimes people find me annoying but I find myself very funny. All of that I get from my family. I’m the oldest from my family so my brothers and sisters do listen to me, but not always. They get on my nerves sometimes, they make me upset because they don’t do what I tell them to do. I have one crazy and loud family. On Christmas, we usually have a family gathering and then on new year’s eve we go outside, we play cricket, we eat, and we crack jokes. My family also likes jokes. I enjoy school very much and my friends, we’re very close to each other. We get angry at each other and make up again. That’s how we are.

### I love to be me

I love singing, I like to sing anything. I used to sing in a choir at school but not anymore because of COVID. I enjoy being my own self, that is what makes me the happiest.

Listening to myself and my own privacy. Not being around people if I don't want to be around people, I will have my own corner. Everything that makes me happy in life is what I do, so I enjoy doing stuff that makes me happy. I don't like it when people make fun of me. It works on my nerves and makes me upset. I get that at school a lot but that is what teacher Roux is for.

### **One wish**

If I had one wish, it would be for me to walk. I don't like sitting in the chair because if I look at people, I think of myself walking. I imagine myself walking down this road next to my school and that's the saddest thing that I've ever experienced in life. I would like to be better at singing. I like gospel and hip hop. I enjoy gospel the most because I grew up with my mother singing gospel and I used to sing with her. That's why I have a beautiful voice because I used to sing with my mother. I have her voice. Singing calms me down even if I am upset. Drawing also calms me, it takes me away from everything that I'm thinking and takes me away from my problems.

### **This will be my first time**

I like the ocean, I always wanted to get into the water but have never been so this will be my first time. I have been with my whole family to the beach but never into the water. Surfing, I saw it in a video, it is when, as I am, you lay on the board and there's someone behind you. I decided to go surfing because it would be a good thing for me because I want to learn how to swim and surf.

## **July 2021**

### **Surfing makes me want to scream I'm happy**

Yoh! I have never surfed like that before in my entire life. The fun that I had, I will never forget it. I really enjoyed it. When we first arrived at the beach, I was really nervous. My team carried me down the stairs onto the sand and explained what was going to happen next. I felt more comfortable when I learnt what we were going to do. I felt nervous again when they picked up the board to carry me into the water but once we caught our first wave, I couldn't stop smiling and I raised my arms in the air. The salt water burned in my eyes so I was struggling to see, the girls helped me wipe my eyes and got me goggles which were much better. I tried to lay down on the board but it

was uncomfortable with the helmet and the lifejacket so I sat up and Carissa sat behind me to hold me on the board. It feels different laying down, way too different and the helmet made it difficult to lift my head. We changed positions a few times. I was so happy to achieve my dream of surfing and I couldn't wait to show my mom the video of me paddling.

After the first session, I decided to work on not being afraid to go on and over the waves the next week. The second week was difficult because I was freezing but I wanted to keep catching waves. I had my coach, the joker, with me and I told him, "let's catch one more wave". The third week, the ocean was rough but the minute I went into the water I realised it would calm me down. The things that I was worried about before were not there anymore. I found a way to lay down and sit up that felt better. Even though it was rough that day, I felt calmer after the last wave. I also learnt to move from laying on my tummy to pushing up on my hands and knees. The fourth session was much better. I didn't know that it could get much better but it did. The water was calmer and warmer too. I learnt to zigzag and move my body. That was my new move.

### **This is a very wonderful escape for me from all my problems at school**

I really enjoyed the fifth lesson because it got me distracted from what I was thinking. I didn't realise it would distract me like that. I was happy to have my joker to teach me, I had a great session. We focused on finding the strength in my arms and waist. I also learnt to close my mouth in the ocean and to use my shoulders and upper body to turn the board. In my final session, I stood on my knees like I did in my session before and I started playing on the board then I fell into the water. I didn't know I would fall into the water and it made me feel really good because I never thought I was able to do that. This is a very wonderful escape for me from all my problems at school.

## **July 2021**

### **I have learnt it's good to face your fears**

Yoh! I would never have thought I would be surfing! I've also learnt so much about the ocean and the waves. I have learnt to overcome my fear because I was scared in my first session, but in the last session sitting there on the sand, I was so relaxed and happy. In the last session, I felt happy because I was at the beach and surfing, but sad because I was going to miss my whole team, especially the joker (coach) the

most! I have learnt it's good to face your fears. I am feeling happy that I've met 'my team' and I have another family. Surfing makes me feel happy. It makes me want to scream that I'm happy.

### **It wasn't the way I imagined**

Before I started surfing, I felt suspicious. I don't know why, and I had some questions, asking myself and answering it myself, but then when I arrived my suspicions were wrong. Things like "what if it is a deep ocean?", "what if I fall into a deep ocean?", "what if I don't come back with the water?" But when I arrived it was just different, it wasn't the way I imagined it. In a good way. After the first session, it was like I achieved my dream that I have always wanted to do. I learnt not to have fear, not to doubt myself, not to judge myself, learn to trust, to be happy, not to think anything might just upset me along the way.

### **I really appreciated everybody's love**

I have learnt a lot from the volunteers, especially my coach. I learnt everything from them, from my experience and their experience. I might not know what they experience, but I know my experience and what I have learnt. I have learnt more things from them. I really appreciated everybody's love on a Friday. I enjoyed my time in the water and chatting to the team on the beach. I feel happy and forget about things when I am surfing, and when I'm angry it changes my mood.

### **I met the biggest family – To me it felt like I found my family**

Since I came to surfing, I have met a lot of volunteers. It was first teacher Chanel and then as I went through the surfing programme, I met a lot of people. I met 'the joker', my coach, then I met Carissa, Katie, and Anne. It's like I am with another big family again; I met the biggest family – to me it felt like I found my family, my biggest family that I never found before. I might have a family, but that family is much bigger, to me. They are like my brothers and sisters. What I have learnt about them is to be more happy than being worried about anything. As I grow, I learn something new. If a friend wanted to try surfing, I would say, "just go on, just try it, just don't doubt yourself, like me, I know I have doubted myself a lot of times before. Just don't doubt yourself, just be happy, just be yourself".

### **I have learnt not to doubt myself**

I have learnt that I mustn't just pay attention to whatever triggers my attention. I must just let it go. I learnt a lot more happiness and less stress. I have learnt not to doubt myself. I've learnt that I am good at surfing, I saw myself, I am very good at surfing. I have learnt a lot of things about my body, about posture and about being in good shape. I have noticed that if I sit in a certain way, then my body is not in a good posture, especially my chair. In surfing, I kept on changing my ways of sitting on the board or laying on the board. From there, I learnt new moves being on the board, not just laying or just sitting.

### **Surfing makes me love myself**

I have learnt I must focus on what I am doing and not just focus on what is going to happen to me. If I am going to keep on doubting myself, it is going to trigger my mind to that or trigger my mind into saying something I wasn't supposed to say. I would rather focus on what I am doing than doubting myself. I have learnt to just focus on what you are doing and just to take your mind off it and don't pay attention to other things. Surfing makes me feel happy, makes me love myself and not doubt myself about anything, no matter how hard it is. To me, surfing was just like something I always wanted to do. If I could choose one thing, that's surfing because I am being myself when I surf. Being myself means not doubting yourself and just love who you are, just love yourself, don't let other people tell you what to do and how you look.

## **July 2022**

### **I am happy to get to see Tala when we go for our surfing lessons**

Over the last year, I've been just being myself and being with my friends and focusing on what was in front of me, not thinking about what is going to happen to me in the future. I have the same friends from last year but I don't have Tala by my side anymore, she moved schools. It makes my whole world upside down, because when I am around Tala, she makes a person feel very good about themselves. I am happy to get to see Tala when we go for our surfing lessons.

I have carried on surfing this year. For me, surfing makes me feel really good. It makes me feel wonderful about myself, it makes me feel amazing. It makes me feel like I would never ever doubt myself again. It makes me feel like I'm the person that I've

never been before. Before when I was a little girl, I always said to my auntie that I wanted to go swimming lessons. My dream came true, but I never thought that I would surf because I always thought I would get into the water and swim. So seeing the beach, the biggest I've ever seen in the world, makes me happier and more joyful than ever. So that's how I feel about the beach. It makes me feel very happy. I've never been this happy before.

### **I learnt new things and just being myself**

My highlight is when I learnt to move on the board and how I move on the board while I'm in the water. To stand on my knees and my hands was the most awesome move. And it was all me that did the work without any help. My favourite part of surfing is when I get to learn how to do things and to learn more moves while sitting on the board. And just being myself. While I'm surfing in the water at the time, I don't actually feel any of the changes. It's just that I feel them after surfing, that's when I experienced some changes. It's for me been changes in my body and in my mind. When I look at myself in the mirror, I tell myself that I need to change how I think and what I say about myself. I focus on what I think and take time to focus on my thoughts.

### **Surfing that has given me so many changes in my body**

Often my thoughts wouldn't be that convincing to me because my thoughts and my saying are two different things. From my perspective, I have never had an experience except surfing that has given me so many changes in my body. I can surf and continue surfing as I grow older. I've never experienced these kinds of changes before. When I looked at the beach, I thought a lot of good thoughts. I have good people that help me and save me if something wrong happens and have my back when something goes wrong or something is wrong. And even if I have bad days, the volunteers always make me feel very good. When I go to the beach, although I had a rough day or I have a bad week, when I'm on the beach, I don't have any problems. So yeah, I've really enjoyed being on the beach.

### **I'm really proud of myself**

When I started this surfing journey, I never thought I would be able to take the journey to another level. When I look at the future, I always thought that my future would be wonderful if I could achieve something and I did. As I'm looking at my journey, I get

really proud of my journey. I'm really proud of myself for achieving what I've dreamed about.

My surfing journey has carried outside of the lessons too, because my mother has had my back ever since she heard about surfing. My mother said she posted me on Facebook, she said there were a lot of comments that I got. When my mother said to me that she posted a picture of me, a video of me surfing, it made me really happy. It made me want to continue to surf more and more and to continue my journey as a young lady. I feel amazing. I feel great. I feel very happy. Ever since I've gone surfing, it made me feel very good and it made me more open. I've never been open before, open to express how I feel. To be open is to be open to myself and to be open to people that I love. I always know there's people that have my back.

***3.6.5. Rowan: "The moment I step my foot in the sand, I forget everything that happened in the past and I start new on the beach"***



*Image 3.6: Rowan riding a wave*

## May 2021

### **About me**

My mum, she works, she is a supermum, as everyone has been supermum for their children. My mum works at the hospital, she is a house mother there. And my sister, she also works in a private hospital. I have 2 siblings, ages 9 and 12 years. The one is smaller than me, the one is bigger than me, but I'm a bit older than her. They are at the same school.

I'm a table tennis player, 3<sup>rd</sup> time Western Province bronze medallist. My first shot for the silver medal was in 2019 and I got a golden token in 2019 also for my class. My goal is to qualify for the Tokyo Opens this year at the Paralympics and play with the professional players, and get to play better and play for South Africa. I haven't chased my South African colours yet but I'm hoping I could this year. I also placed at Sas (South African National Championships). I got bronze and I'm happy with it.

I only have 2 friends that have been true to me, Evan and Thabo. I met Evan at the Red Cross Hospital and have been friends for almost 13 years now. He is Mitchel's basketball player. Evan was 2 years old when he lost his leg in an accident. When he was small, he liked to play in the streets, he did not look around him when a bus ran over him. The doctors told him his leg will not be able to work so they decided to amputate his leg. Thabo had almost the same disease I had growing up. I enjoy school a lot. I enjoy being with my friends, learning in class and I like my teachers. I enjoy talking and I get to chat to my friends, laugh and ask for help in class. We like to play table tennis too. At home, I go to the sports field and I just play there. If I see there is a game going on, then I ask them to play, if it's rugby I play. If it's soccer, I stand at the polls and be the goalkeeper. There isn't anything I find difficult to do.

### **Sport is my thing**

I would love to join more sports. Rugby, I love everything about it. I like rugby because I have two favourite players and I want to play just like them. The one is a left wing Makazole Mapimpi and a right wing Cheslin Kolbe. I basically like the whole South African team, I like everyone there, they do their job, what they are asked to do, and what they are trained to do. It is what they were born to do, in the field. I play table tennis, I used to play with my friend but my friend passed away last year, it really made

me sad when he passed on. I'm the most happy when my family and friends are around me and when they are positive. My wish is to become a SA table tennis player and I would also like to be better at school. I have been to the sea. I like going to any beach as long as I swim. I don't know much about surfing but I know that people are competing at the sea. I decided to try surfing because I like to be in the water, I can't swim well, but I try. I like to try fun stuff, I want to try surfing.

## **July 2021**

### **I am born ready**

My coach asked me if I am ready and I told him, "I'm born ready". When I arrived the first day, I had so much energy. I went into the changeroom, my coach and my surf buddy helped me get changed. They duct taped the wetsuit legs and I walked out of the changeroom like a boxer going into a fight. Really amped. When we first walked to the water, I was a little nervous but I knew my team was in control. I was very excited to catch my first wave. I popped up standing and riding side on. I was the first to stand up. It was cool to be out in the water. Everyone being there by my side, they are 'my team', I was so blessed. I felt like I was getting used to it with my coach close by. We spent a lot of time practicing falling off the board too. I enjoyed it. On my last wave, I fell into the water and learnt what it is like to wipe out. The next surfing session was good, I learnt some new stuff that was amazing. My goal for the second session was to learn to paddle on my own. I learnt how to pop up and basically, I can pop up. One thing I learnt is that when I lean my shoulders to the back, the board is going to the front, and when I lean my shoulders to the front, my board is going to the back. I learnt how to pop off, jumping off the board. On my third session, I did well, I was so focused and determined to learn. I learnt to sway the board around, concentrating on my bodyweight and turning the board. Falling and turning around while I was floating and surfing on my own. I am happy about doing all those things successfully. When the session was over, I told my coach, "I just want to go on the board again".

### **When my sessions are done, I won't forget this day**

The fourth session was very nice and I enjoyed it. It's one day I will remember. When my sessions are done, I won't forget this day. I was tired from a gym session I did that morning but when I went into the water, I had more energy. I wanted to see if I can get onto the board myself and I practiced that. What my coach taught me since last week

is to move with my feet on the board. I never knew I could do that to sway my body around to catch some waves [adjust position on the board when riding a wave]. I have learnt that I am strong in my core [torso] and arms, I can use that strength to sway and move my hips to turn. I started learning to turn and I enjoyed the smaller [narrower] board.

### **I have learnt to trust in the team**

The next session was very nice, I loved it. They taught me how to use my waist and core, open my body and close it again. I learnt a new thing, how to stop a board. I went back on the board and it literally stopped. I have learnt to trust in the team and I know when I fall my team will catch me. Surfing makes me feel relaxed. I forget about things when I do it with my friends. In the final session, the surfing was very good. I loved it. Especially the wave I caught on my own, I never knew I could do that. I was using everything I was taught over the last six weeks, but the stopping of the board, I just knew how to do it because I just felt crazy when I'm in the water. I figured that out on my own. I have learnt a lot about myself over this time. I learnt I can do it (surfing) because when I started I couldn't believe I could do it. I can't believe in six weeks I can turn the board. I learnt a lot about teamwork and appreciating relationships from this time with my team. I felt sad surfing is ending and I will miss my team all so much. I have learnt how to surf, I have learnt I can dream. It has totally been an honour to be here. I have been blessed and I am feeling grateful.

### **If I can do it, I can do it for the rest of my life**

Before I started surfing, I was thinking in my mind I can't do it [surfing] until I tried it and just being there was like beyond being able to speak in my wildest dreams. I couldn't believe I could surf in the ocean riding some waves. On my first session, I was like "If I can do it, I can do it for the rest of my life." After my last session, I wanted extra weeks. I felt very down in my last session because I didn't know when I was going to see everyone again. I hope to see them all again. I learnt how to surf and I liked learning to surf on my own. I liked people guiding me. Paddling was a bit difficult as the board was wide in the beginning. I learnt how to steer the board, I never knew how to steer the board like that. My 'pop ups' are much better since I started surfing. I learnt how to use the movements of my upper body. I learnt in my mind to stay focused. If a friend wanted to try surfing, I would basically tell them, "Ya, you can go, you can try

surfing, surfing is real fun". But I can't teach them because I am not at that level yet. They must try it if they want to.

### **I would describe surfing as lovable, fun, exciting**

I like everything about surfing like how people help me out in the ocean, catching some waves, but the most fun thing is, in the last session I finally caught my own wave and I never knew I could do that. I didn't like when the waves hit us and cracked over me, I just fell and people must help me up again. I would describe surfing as lovable, fun, exciting. My surfing experience has been fun, having everyone next to me and guiding me to do better, just learning how to surf.

## **July 2022**

### **This year has been good and I made a lot more friends**

I play rugby with friends in school and I've dubbed a single (song) last month I want to dedicate to my mom. That single is to thank my mom, to show how much I appreciate her. Because there's a lot of children that get murdered or their moms and dads have died and some people have lost their mothers during birth, and just a grateful feeling and that I still have a mom next to me. This year has been good and I made a lot more friends, but I am a bit sad because I was separated from Evan. I managed to cope and I made a new friend but no one can replace Evan and the place in my heart. I still get to see him in the surf sessions. I have still carried on surfing.

### **The journey of learning it's getting a lot easier since I am gaining knowledge**

I'm still struggling a bit with paddling because my right arm is shorter than my left arm. So it is a bit of a disadvantage for me to paddle and some people are full bodied and they can paddle. The pop up is pretty easy because I know how to pop up and really taught myself to pop up. I like to learn new things. That's the thing. What I do is lay down flat and paddle and paddle. Once I had a wave take me, I can try to turn my board fully to the new place where the waves form up. I see the wave can take me with him and I turn my body, I look over my shoulder and turn to the right and that is how it goes. My favourite part about surfing is to learn new skills and to be in the water and surf.

A year ago, I was just like a little boy running around the sand being stubborn and I had a lot of support next to me. When I fell, I couldn't pop up immediately and I was a

learner. Just moving the board around wasn't that easy but now I have seen a lot of progress in myself turning the board, timing of the pop up, reading the wave and like there are no people behind me riding the wave, I now ride the wave on my own and I feel those changes are still with me.

### **The moment I step my foot in the sand, I forget everything and start new on the beach**

Academically, what I feel is when I come from school, I get more pressured and I also get anxieties and I stress more. I stress to the extent that when I write, I shake because I want to get my homework done on time. The moment I step my foot in the sand, my feet in the sand or the sea, I forget everything that happened in the past and I start new on the beach. When I am on the board, I suddenly focus on what is going to happen and the feeling I get is, it is just a great feeling of surfing. I think it's great and I think it's a pretty nice feeling.

The changes I felt last year are still with me. A year ago, I was a bit panicky because it was my first time surfing and falling compared to now. Now I like to stress free – if I fall, it's like a sign of I'm trying and I know when I fall I just climb on the board again. So it is not like a train smash to fall because by making mistakes while learning and since I have the experience of falling off the board, it has taught me a lot.

### **Balancing in surfing has helped out of the water too with my prosthetics**

The experience of falling off the board has taught me balancing skills and to time myself when to go back and when to go forward and adjust my weight from one side to another. It has helped me out of the water too with my prosthetics, and with my balancing skills I managed to walk without my crutches, that is a big progress for me. And about my balance, it taught me a lot about balance because I left my crutches behind once and it felt like a panic, Evan told me to just relax. I remember my mom told me to relax. I was feeling the pressure of walking without my crutches and the day in school I was panicking and falling many times but then I learnt to walk without it. It's also when I walk, I think about the way I balance in surfing because I am on a board, I'm balancing so why can't I balance on prosthetics you see.

### **My goal is to become a national surfing champion**

The balance helped me surf in a competition, it was the provincial championships and I won. That was a taste of what competition is going to be like for me and I still managed to get first place. It taught me many things like to get more preparation and to get more practice. My highlight of surfing so far was when I managed to ride on a big wave but in the end I fell and that taught me a lot about it because when you make mistakes, no one is perfect and everyone makes mistakes. It is the only way I can learn and progress.

Basically, I was learning a lot about learning and practicing a lot more because I wasn't used to the double up and I wasn't used to surfing on double ups. It was exciting because everyone just went mad when I rode that wave and in the end when I lost it, they still clapped hands and they told me I must practice more on balance, because they say in the Paralympics the waves are double the size of the waves at Muizenberg. My goal is to become a national champion and to become a Paralympic champion and to compete against guys that already have experience at nationals and SA's. That will just teach me a lot about the strategy of the game. I can describe my surfing experience so far as amazing, loving and learning.

## Chapter 4: *Surfing makes me feel different*: Analysis, findings, and discussion of children’s narratives



*Image 4.1: Princess preparing to enter the water with the team of individuals delivering the surf therapy programme*

This chapter includes the analysis, findings, and discussion of the children’s narratives from chapter three.

### **4.1. Data analysis and management**

#### **4.1.1. Narrative**

Narrative as a story provides a way to understand the fullness of human experience. There are two ways narrative can be analysed and both were used in the data analysis for this chapter.

Narrative analysis attempts to analyse the narrative on its own terms for a single story, focusing on an in-depth view of one narrative. Analysis of narrative, on the other hand, seeks to identify overarching themes across multiple narratives, such as has been done across the five narratives of the children participating in this study (Polkinghorne, 1995).

#### **4.1.2. Narrative analysis**

The aim of qualitative data analysis is to discover patterns, themes, concepts, and meanings. Because the research focus has been about analysing the stories created to gain a better understanding of the participants' experiences, narrative analysis was identified as the most appropriate method to use. Once the interviews had been transcribed, narrative analysis was used to analyse the individual participants' stories and concepts related to these derived from three interviews (Connelly & Clandinin, 1990). Narrative smoothing was used to eliminate details that were irrelevant to the outcome of the story and present the stories in a chronological fashion. The three interviews with each participant were combined into each participant's story (Polkinghorne, 1995). I read through the stories multiple times to familiarise myself with the data, and then manually coded the stories using a pen and paper. The stories were then uploaded to NVivo where each paragraph was then digitally coded and the participants' own language used where possible. I continued the coding process, exploring subthemes and categories. I continuously went back to the transcribed interview data, the recordings, and my personal notes to decide which information was necessary and which information I could omit from the stories. I listened to the tapes multiple times to ensure the transcriptions were accurately recorded. An inductive method of narrative analysis was used whereby I was coding multiple paragraphs at once. Paragraphs were coded using one code as an individual piece of data, thereby ensuring I kept the narrative intact.

#### **4.1.3. Analysis of narratives**

On completion of the narrative analysis, I conducted the cross-case analysis of the narratives using the key concepts developed initially. I compared and contrasted the narratives across all five stories. When writing up the themes, subthemes, and categories, I took a social constructionist approach to the analysis (Flick, 2014) whereby I looked for similarities between narratives, and then wrote the findings into

categories, describing the group narratives and subthemes that run between them. This analysis helped me to interpret the data collected, and better understand why and how things happened as well as why participants acted the way they did. This was a rigorous and complex process that involved looking both across and within the five children's stories.

## **4.2. Ensuring Rigour and Trustworthiness**

Transparency in research is the cornerstone for ensuring rigour (Bloomberg & Volpe, 2018). Throughout the process, I clearly documented the research procedures and followed the study protocol. All interviews were systematically recorded, and the data and interpretations were made transparent for my supervisors to see. Meticulous record keeping was conducted, ensuring the interpretations of the data were consistent and transparent at all times. Rich verbatim descriptions of participants' accounts have been used to support all the findings (Shenton, 2004).

Individual interviews were recorded on an audio recording device. Immediately after each interview, the information was downloaded and categorised. The audio recordings were then transcribed verbatim. The data was safely stored electronically, with an encryption code for additional safety. The raw data was placed in a locked cupboard along with all audio and electronic recordings, to which only I and my supervision team have access. These records will be kept for a period of five years, after which they will be destroyed to ensure they are not copied or used by anyone else.

Rigour and research validity are important when ensuring that a study has been extremely thorough, exhaustive, and accurate (Thomas & Magilvy, 2011). The trustworthiness of qualitative research can be displayed through credibility, transferability, dependability, and confirmability (Thomas & Magilvy, 2011).

### **4.2.1. Credibility**

Credibility plays a fundamental role in establishing trustworthiness (Shenton, 2004). I have been fully aware of the importance of the research accurately presenting the participants' perceptions, feelings, and actions. Lincoln and Guba (1985) recommend

member checking as a way to enhance rigour in qualitative research. They propose that credibility is inherent in the accurate descriptions or interpretations of phenomena. A thorough review of the transcripts was conducted, and member checking took place after each interview to ensure that all story details had been captured correctly. The transcripts were given to the participants to clarify the correctness of what was said and avoid any misinterpretations of their experiences. To ensure honesty, participants were also given the opportunity to refuse to participate in the research in advance of the commencement of the research (Shenton, 2004). This ensured that data gathering was only done with participants who were willing to take part. My own credibility as the researcher was also taken into consideration, and I acknowledge I have a grounded understanding of all the concepts involved and have extensive experience in this field of research (Shenton, 2004).

#### ***4.2.2. Transferability***

As surf therapy is conducted with participants with various forms of disability, the research needed to have the ability to transfer research findings from one group to another. A dense description of the population being studied was well documented. In addition, a variation in participant selection was applied, although the recruitment inclusion criteria was the same for all participants selected.

#### ***4.2.3. Dependability***

Dependability is similar to reliability in being able to replicate case study procedures without trying to replicate results (Yin, 2003). In this study, it was important that I replicate data gathering in the same manner with each participant and use an audit trail. Throughout the process, it was important to ensure that another researcher would be able to follow the audit trail of this research. This audit trail was created through clearly descriptions of the purpose of the study, as well as of how and why the participants were selected, as indicated above. In addition, I provided a clear description both of the data collection process and of how the data was reduced through analysis. To further establish dependability, I had the support of my supervisors to provide oversight during the analysis process.

#### **4.2.4. Confirmability**

In qualitative research, confirmability involves reflexivity. As the researcher, I am reflective, and maintained a constant sense of openness and awareness to the study and unfolding results. I maintained a self-critical attitude about my own perceptions that may have affected the research and took into consideration the factors influencing the research relationship, understanding that I am both the researcher and a participant in the research (Hatch & Wisniewski, 1995). I spent a considerable amount of time critically examining my own prior assumptions and actions through being aware at all times and conscious about these assumptions. I have been mindful that there are multiple realities and perspectives, not just my own. There are many individuals that are marginalised and, in this case relating to the research study, particularly due to their disability and economic status.

Reflexivity is an important aspect of qualitative research as it enhances the rigour, transparency, and trustworthiness of the research (Guillemin & Gillam, 2004; Steier, 1991). Through the process of reflexivity, I was able to be aware and acknowledge the active role I had in shaping the interpretation of data, which encouraged critical reflection on my own subjectivity, assumptions, and potential biases (Braun & Clarke, 2019, 2021). By considering both the participants' perspectives and the researcher's reflexivity, this approach allows for a deeper understanding of the interview data. I engaged in a process of reflexivity by examining and documenting my own preconceptions, biases, assumptions, values, and experiences that may have influenced the interpretation of the research process, data, and findings. I reflected on how my own background, experiences, and beliefs may have shaped my understanding of the interview data (Braun & Clarke, 2021). This process of self-awareness and critical reflection has been ongoing throughout the research process. This level of rigour has helped manage any potential biases. I have also kept a reflective journal, making my experiences, opinions, thoughts, and feelings visible and an acknowledged part of the research process, in turn creating transparency and contributing to further reducing bias. Immediately after each interview, I recorded field notes on my personal feelings and insights. Frequent debriefing sessions took place between me and my supervisors which addressed any possible biases that may have arisen. During the participant interviews, I always made a conscious effort to follow,

and not lead, the direction of the interviews, asking participants clarifying questions when needed and ensuring I did not use slang or metaphors.

## 4.3. Findings

### 4.3.1. Interpretations of the narratives

In this chapter, I present my interpretations of the narratives, acknowledging that this is only one interpretation and that there may be others. I intend to describe each of the themes, subthemes, and categories, and explain how they are linked together. Even though these stories have been discussed separately, one should remember that the participants told their stories over the course of one year with different components of their lives as part of a whole. I was careful when separating out themes for the purpose of this chapter so as not to de-contextualise what was presented as part of the phenomenon.



Figure 4.1: Children with disabilities: Main themes

Three main themes emerged from the analysis of the five children's narratives:

**Theme 1:** Surfing has taught me to be more myself: Promoting mental, emotional, and physical health.

**Theme 2:** People realised they must not underestimate me: Reshaping a worldview

**Theme 3:** Now I like to (am) stress free: Developing new skills

Table 4.1: Themes, subthemes, and categories: Children with disabilities

SURFING MAKES ME FEEL DIFFERENT: CHILDREN WITH DISABILITIES		
THEME	SUB THEME	CATEGORY
<i>Surfing has taught me to be more myself: Promoting mental, emotional and physical health)</i>	How I think	Identity Development
		Improved Self-Confidence
		Independence of thought
		I feel free and have achieved my dream
	How I feel	Surfing makes me feel so many emotions
		Improved Self-Acceptance
		As I grow, I learn something new
		Reducing anxiety through a flow state
	How I do	Changes in Physical mobility
Physical Independence		
Learning new movements		
<i>People realised that they must not underestimate me: Reshaping a world view</i>	How I see the world	Future Outlook Change
		Not all scary circumstances lead to a negative outcome
	How I interact with the world	Changes in School
		Trying New things
		Active Friendships
		Family Changes
<i>Now I like to (am) stress free: Developing new skills</i>	<i>If I fall, it's a sign I am trying: Skill Mastery</i>	Learning to Surf
		Learning to compete
	Factors that support skills development	Mentorship and goal setting in the right environment
		The ocean makes me feel powerful
		I found my surfing family
		Being challenged

### 4.3.2. Theme 1: Surfing has taught me to be more myself

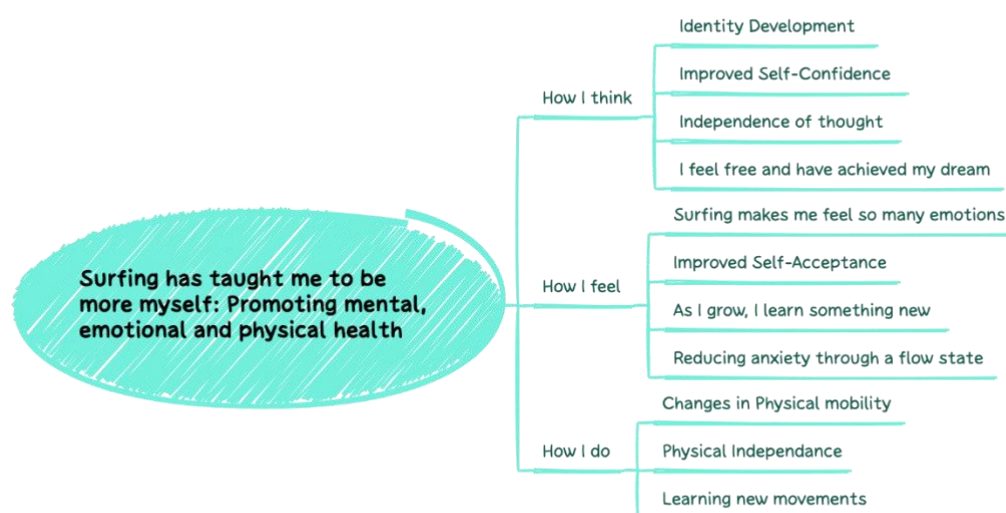


Figure 4.2: Children with disabilities: Theme 1 with subthemes and categories

The promotion of mental, emotional, and physical health was identified as one of the outcomes of participation for participants in the surf therapy programme.

#### **Subtheme 1: How I think**

The mental health promotion included identity development, improved self-confidence, independence of thought, and a feeling of freedom from having achieved their dreams.

##### **Identity development**

The development of one's identity is an important and challenging task for young individuals. Identity formation is a crucial part of human growth and development as it involves the process of an individual learning their unique way to express themselves and their personality. Within the narratives, participants highlighted a different concept of "myself" and how surfing made them feel closer to understanding what it meant to be more "myself", which became an integral part of their journey in identity development. Through the development of a strong and stable sense of self, participants began to think about how their identity may affect their lives. Self-identity

and how they began to define themselves changed. Participants' self-esteem improved, which reduced self-conscious behaviour, and they began to gather a stronger sense of who they are as individuals and as members of a new social group. The experience of participation in a surf therapy programme also supported changes in participants' self-perception which contributed to identity development. During the research period, participants began to take on a new identity within the lifestyle and culture of surfing, which they felt changed how they saw themselves and how others saw them. Thabo initially shared not knowing what his 'purpose' in life was; however, through surfing, he later shared about the development of his identity and at school he became recognised for his sporting accolades. He became known for more than "just my academics". Princess shared that the experience made her want to continue her journey as a "young lady".

### **Improved self-confidence**

As the participants progressed, their self-confidence grew in their surfing, which was carried into other areas of their lives. On multiple occasions, participants spoke about their improved confidence. Prior to surfing, Thabo spoke about himself as being "totally different" to everyone else. After surfing, he spoke about how he learnt to be brave, which in turn reduced his nervousness and allowed him to gain more self-confidence. He later spoke about how surfing continued to improve his confidence. Princess shared about how she saw herself surfing on a video and realised how good she was. Her ability to see herself from a different viewpoint improved her self-confidence. Tala shared how surfing made her feel brave and confident, not scared anymore, and she was able to transfer this feeling of confidence to spaces outside of surfing.

### **Independence of thought**

Not all participants spoke in the initial interviews about their wish to be independent, but as time passed their discussions around independence became more apparent – independence in doing their own activities and to be recognised as being capable. Participants began to experience opportunities to practice independence within the context of the surfing environment, and this independence began to transfer to other areas of their lives. Tala spoke about her decision to stand and paddle more, a choice she felt she made independently. She spoke about how she experienced a lot

through surfing, and that being independent was the highlight of the programme for her.

### **I feel free and have achieved my dream**

The participants regularly spoke about the feeling of freedom. Initially, Tala spoke about her wish to feel free, and surfing provided her with the feeling she was seeking. Similarly, Thabo spoke about his wish to feel free, sharing later that it had become a reality for him because surfing made him feel free. There was an overall sense of achievement for the participants through participation in the programme. A realisation of what is possible opened up a new world for them, including the possibility of achievement. This achievement supported a meaning making process in the lives of the participants.

### **Subtheme 2: How I feel**

The experiences of participation revealed several positive emotions that supported emotional health, improving self-acceptance and maturity, reducing anxiety, and providing an opportunity to experience a state of flow.

### **Surfing makes me feel so many emotions**



Figure 4.3: A word cloud depicting the words used by children to describe their experience of participation in a surf therapy programme

Participants used a number of descriptive words to describe their feelings when participating in a surf therapy programme, including love, fun, happy, excited, free, challenging, learning, and independent, as seen in the word cloud above. In their personal narratives, each participant highlighted a number of emotions linked to the desire to become more “myself” and spoke about how surfing made them feel in relation to that feeling. Being able to express these feelings in words supported participants on their journey of identity development. Thabo expressed his desire to find a place where he would not be judged, and he could push his own boundaries without the usual limitations prescribed to him. In the first interview, Thabo and Charlie spoke about the desire to be “normal”. Thabo’s “normal” was the ability to have independence, freedom, and to “be myself”. When asked how surfing makes the participants feel, Princess shared that it created a space for her to feel “more myself”, while Thabo similarly shared that it gives him the ability to have more power over himself and he can be himself in many ways. Thabo described his experience as “spiritual” and one of feeling “cleansed” as he shared how surfing gives him purpose.

### **Improved self-acceptance**

Participants began to accept themselves, mature, and embark on a personal journey of growth. Prior to starting the programme, Thabo spoke about his enjoyment in going to the beach but his constant fear of how people might judge him as a person without legs while others walk around with legs in a swimsuit. He also spoke about his scar on his chest and the fear of what people might think of his physical appearance. In later interviews, it was clear that his perspective had changed as he shared that, through surfing, he had learnt to be more “himself” and accept his body the way it is. Similarly, Princess grew through the experience, learning how to challenge herself to change her negative self-talk and look at her achievements.

### **‘As I grow, I learn something new’: maturity**

Participants developed in maturity as they reflected on their surfing and began applying it to other areas of their lives. Princess described it as a learning opportunity to become more “open” to herself and to others. It also helped her to reflect on her past self-doubt, and brought an awareness of her ability to grow and learn, which

came through maturing. For Rowan, maturity developed as he reflected that making mistakes provided him with learning opportunities, and that everyone makes mistakes.

### **Reducing anxiety through a flow state**

Participants spoke about their experience as soothing and calming, which supported a reduction in overall anxiety. Thabo shared that he also used the feeling to teach himself control over what he described as his “temper and urges”, which supported his emotional regulation. Similarly, Princess found her time in the ocean to be calming and a place where she could leave her worries behind. Rowan, Thabo, Tala, and Princess all expressed that their experience provided an opportunity to feel relaxed.

Surfing also provided the participants an opportunity to be “in the moment” and to be able to forget about what was happening elsewhere. The participants were able to bring this practice into other areas of their lives. Thabo described it as a place of reflection and somewhere he could “forget all the troubles of the world”. Princess shared how she was able to take that experience with her when looking in the mirror, which took her back to the state she was in while surfing. Rowan expressed that when he is in the water, he only focuses on what is going to happen in the moment.

### **3 Subtheme: How I do**

The participants discussed the changes in their physical mobility and the increase in their physical independence, which was supported by their ability to move freely while in the ocean. They highlighted the opportunities for them to learn new movements that could be applied in their daily lives.

#### **Changes in physical mobility**

Participants experienced various physical changes through surfing and described their ability to transfer what they learnt in the surfing environment to their daily lives. Prior to starting the programme, Tala spoke about how she found it difficult to walk with her walker and sit in her wheelchair., She shared how the coach focused on movement during the lessons. Later, she shared how she did not move very much when she first started but now could move more and was enjoying the ability to do

so. Charlie spoke about his increased arm strength from surfing and how moving in surfing had reduced his stiffness and tightness. Rowan realised his ability to use his core strength to manoeuvre his torso, which helped him ride and balance on a narrower surfboard. Through the experience, Thabo realised how strong his upper body was for him to be able to paddle through the waves. Princess noticed a change in her posture while sitting in her chair, and Thabo also spoke about his improved posture from his time surfing. Thabo shared that since surfing, his back pain had no longer been bothering him, something he had suffered with for many years. After the first session, Rowan left his crutches at the beach and felt panicked, as he was always used to using crutches and did not walk without them. He recognised that if he could balance on a surfboard riding a wave, he could balance on his prosthetics. The following week he went to school without crutches and never used them again.

### **Physical independence**

Participants spoke about wanting independence to do activities on their own and wanting to be recognised as being capable. They began to experience opportunities to practice independence and autonomy within the context of the surfing environment. Charlie learnt about his ability to become more independent by learning to carve on waves, while Princess reflected on how she initially needed help but learnt how to ride waves without assistance as she became more independent in later sessions. Thabo spoke about the independence he felt riding the surfboard by himself, which was a freeing feeling to him. This independence began to transfer to other areas of the participants' lives outside of surfing, and Charlie realised he could now do many things on his own. Charlie initially spoke about his wish to be able to walk like a "normal person", but then later realised his body was more capable than what he knew and if he told himself he could do something, he was able to do it. Thabo, Princess, and Charlie spoke about the ability to move freely while in the water and the limitation of movement when not in water. Tala shared how her body was able to feel free, and Thabo spoke about his wish to feel free and the freedom of catching a wave on his own.

### **Learning new movements**

Participants often shared about the movements they learnt during their surfing lessons. Riding a wave has many variable factors, including the speed at which you

are gliding forward on the board, which involves balancing on a body of water, an unstable surface. Charlie spoke about his increased range of movements outside of surfing as he had learnt to move in new ways. He shared how nice it is to “move and not sit in one space all day”. He also spoke about how surfing provided him with the opportunity to get out of his chair and move around with freedom in the water. Princess learnt to move from lying on her tummy to pushing up on her hands and knees while “zigzagging” her body on the wave. Through the experience of learning these movements, participants spoke of recognising their areas of strength and ability and began actively pushing their perceived personal limitations.

#### **4.3.3. Theme 2: People realised that they must not underestimate me: Reshaping a worldview**

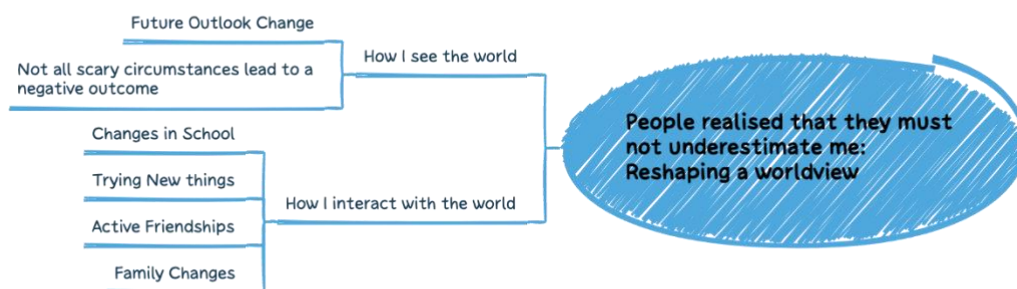


Figure 4.4: Children with disabilities: Theme 2 with subthemes and categories



*Image 4.2: Princess on the beach at a surf therapy programme with a member of the programme delivery team*

### **Subtheme 1: How I see the world**

The children observed the world through their surf therapy experience, which changed their future outlook on life. With this shift in mindset, they began to understand that not all scary circumstances lead to a negative outcome.

#### **Future outlook change**

In the second and third interviews, participants spoke about the future outlook of their lives. Charlie learnt to never say “you can’t do it” when he did not think he would be able to surf and was then surprised by his own ability and capability. When he did start to surf, he did not realise how good he would be at it. Charlie began planning surfing excursions with his family, an experience that they could all participate in. In the first interview, he spoke about how he struggled with reading and his father would get frustrated, and then surfing became an activity he and his father were able to do and enjoy together. Similarly, Princess reflected on her journey being more than what she had anticipated and on being able to take her surfing “to the next level”. Rowan spoke about how he fell off a wave and the volunteers told him to keep practising because “in the Paralympics, the waves are double the size of the waves at Muizenberg”.

#### **Not all scary circumstances lead to a negative outcome**

Princess spoke about her decision to not be afraid after the first lesson and to face her fears. She compared her first and last lessons and spoke about how she started

out being extremely nervous but ended the six weeks feeling relaxed and happy. Additionally, Princess shared her feeling of comfort when her team explained the process in advance of what was going to happen during the session, and she was therefore able to understand what was “going to happen next”. Tala also spoke about her fear but felt she was able to overcome it with the support of her volunteer team. She shared how practising in the “scary” situation reduced the fear and increased her ability to feel “brave”. Similarly, Thabo shared how he used the fearful experience to test himself and realised “nothing bad happened”. The participants developed the ability to read a situation and coping mechanisms to positively persevere through challenging experiences. At first, Thabo was fearful “he might die” if he fell in the water but later shared how he ended up loving falling in the water.

### ***Subtheme 2: How I interact with the world***

Through experiential learning, participants were able to apply what they had learnt in a surf therapy programme to other areas of their lives, which changed how they interacted with the world. There were notable changes in participation at school, a willingness to try new things, a change in active friendships, and changes within the family.

#### **Changes in school**

Participants spoke about changes they experienced in their schooling and overall school environment. Prior to starting, Charlie spoke about how he would like to be better at school academically. In later interviews, he shared that he “got better in school” and his grades improved, getting “7’s for tests and 96 for maths”. There were also other school changes he experienced. When interviewed a year later, he shared his experience of winning his school’s Victor Ludorum after he motivated for the inclusion of a disabled category in his swimming gala, at which he won. Tala also spoke about the changes in her school experience. She initially experienced change in the first school she was at, and was later able to transfer her feeling of freedom and confidence when moving to a new school, which supported her transition.

#### **Trying new things**

Participants shared their enjoyment of socialising with other people both within and outside of the surf programme environment. Participants began to speak about the challenges they faced in the first person, showing that they felt the challenges were within their control and the course of direction was determined by their input and decision making. Thabo discussed how he began to try new things outside of surfing and enjoy things he felt he could never do before. He spoke about how he had become more social in other environments through learning about and participating in social engagement through the surf therapy programme. This change was positive as it encouraged him to become more social beyond the context of school and make new friends outside of the school and surfing environments. Charlie also enjoyed the social engagement and spoke about wanting to get his “team” back together again once the surf therapy programme had finished.

### **Active friendships**

Friendships and community engagement were influenced by the participants' experiences in the surf therapy programme. Charlie discussed how his engagement with friends changed after his participation in the surfing programme. Initially, Charlie spoke about his wish to be more engaged with his friends in sporting activities and how he used to only watch them play or play the sport on a PlayStation. One year later, Charlie spoke about how sporting engagement had changed for him through the opportunity to become an active participant in the surfing. He was now able to participate in water sport activities such as surfing and swimming with his brothers and friends, and spoke about how his surfing experience continued to influence his life outside of surfing. He was also able to participate in other water sports, which he could now do with his friends. Princess described the people she met through her experience surfing as her “family” and spoke about how she enjoyed the time with her new friends. Thabo, Princess, and Tala all shared their enjoyment of seeing their friends during surfing lessons and being able to spend the time together at the beach “hanging out” as friends. When the participants moved schools, surfing became a unique opportunity for them to stay in contact with their friends.

## Family changes

Charlie shared how the opportunity to participate with his father was a memorable experience for him. Surfing became a sport they could participate in together. Princess spoke about how her mother acknowledged her surfing and posted a picture of her on Facebook, which was significant to her. Charlie enjoyed the excitement of the adrenaline rush when coming off his board. He spoke about how his first “big fall” was his highlight of his experience participating in the programme. Spending most of his time in his chair, it was rare for him to be provided the opportunity to feel the experience of adrenaline. He shared with the individuals delivering the surf therapy lessons about how his dad and uncle are “adrenaline junkies” and that he was now able to experience what they feel through his time surfing.

### 4.3.4. Theme 3: Now I like to (am) stress free: Skills development and mastery



Figure 4.5: Children with disabilities: Theme 3 with subtheme and categories

#### **Subtheme 1: If I fall, it's a sign I'm trying: Skill mastery**

##### **Learning to surf**

Learning to surf was part of the overall surf therapy programme that was delivered, and it presented many opportunities for skills development and mastery. While the physical nature of the sporting activity was beneficial for the children's participation, they also developed skills in the social, psychological, and emotional domains through the activity of surfing. Both Rowan and Princess enjoyed the physical challenges of surfing, such as finding their core strength and moving on the board. Princess enjoyed her ability to move on the board while the wave propelled her

forward. Tala enjoyed the movements of kneeling on the surfboard and learning to balance. Additionally, both Thabo and Rowan discussed their understanding of balance and body weight distribution through the programme. Rowan shared how the balance he learnt in his surfing helped him win a provincial para surfing championship title.

Coming from a previous sporting and competitive background, Rowan took on every task as a challenge and progressed quickly through the programme, while other participants took more time to master the skills. Participants were able to test their perceived limits within the surfing environment and began to test these outside of surfing, being pleasantly surprised by the outcomes. Rowan spoke about how, through surfing, he was able to focus and learn, even in challenging situations, such as trying to paddle a board too wide for him, which he could use as a learning opportunity. Tala spoke about how the activity of learning to surf made her feel better. Thabo shared that surfing helped calm him down and provided an opportunity for him to better understand his experiences in everyday life through the ability to understand his surfing experience. He was able to be present in the activity he was engaging in at a time in his life when he was struggling. He used the time spent in the water learning to surf to reminisce and reflect on his life. The time in the water allowed him to see that changes happen all around him and that they are not something he needed to escape from, but that he could instead connect with the feelings.

### **Learning to compete**

Four participants took part in further para surfing competitions after the initial six-week surf therapy programme, which they shared was a highlight of the experience. Thabo spoke about how competing provided him with the opportunity to talk to many people about the sport and how it gave him more determination. He shared how competing had a “huge impact” on his life. Tala shared how the experience made her feel more confident.

Rowan had always enjoyed sport and was competitive by nature. He was a former Western Province table tennis player and competitive sport was a reoccurring subject during his interviews. After learning to surf, he shared how he “learnt he can

dream”, and one year after the surf therapy research had been completed, he entered a provincial para surfing competition which he won. He was then selected to participate in the South African Para Surfing Championships, where he placed second, and later that year (2022) was selected to represent South Africa at the World Para Surfing Championships in California. Nineteen months after starting surfing, his dream became a reality and in December 2022, on his 16<sup>th</sup> birthday, he competed in the World Championships and placed 17<sup>th</sup> in the world.



*Image 4.3: Rowan representing South Africa at the 2022 World Para Surfing Championships*

### ***Subtheme 2: Factors that support skills development***

Participants were able to develop new skills through their participation in the surf therapy programme. They highlighted the factors that supported their skills development, namely mentorship and goal setting in the right environment, the power of participation in nature, the development of a surfing family, and the challenging nature of the overall experience.

#### **Mentorship and goal setting in the right environment**

The experience of being mentored and guided by the team of coaches and individuals delivering the surf therapy programme was highlighted on multiple occasions. Rowan highlighted the team’s ability to guide him to do better while having fun as being significant to him. Princess shared how she learnt everything from the volunteers and their experiences with her in the water. Princess spoke about the feeling of their love, while Tala highlighted how the team made her feel

safe, especially at times where she might be feeling scared. The surf coach played a key role in the participants' experiences. Rowan felt comforted by having his coach close by, and Tala spoke about how her coach challenged her at each session. A highlight for Princess was the time spent with her coach.

The task of goal setting for the current and following sessions became an important part of the programme for participants. Tala shared about being given one challenge each day. Similarly, Thabo spoke about how he and his coach worked on new challenges every week. As each participant was learning at their own pace, the goals or challenges were unique to them even though the curriculum remained the same for everyone throughout the programme. Initially, Thabo was very anxious and spent more time with his team off the surfboard in the water learning to use his body's buoyancy to stay afloat. One of his fears was falling into the water, and therefore his coach set him the goal of learning to do exactly that.

### **The ocean makes me feel powerful**

Participants formed a deep connection with the natural environment that the programme was delivered in. When looking at the beach, it became a place that reminded Princess of what she described as “good thoughts”. When she arrived at the beach after a bad week, she was able to leave her problems behind. Similarly, Rowan shared how the moment he stepped foot in the sand or sea, he was able to forget the past and start new on the beach. Tala also spoke about feeling better when at the beach and in the ocean, and particularly how the ocean makes her feel powerful, while Thabo felt he belonged in the ocean.

### **I found my surfing family**

The development of a surfing family created a conducive environment with opportunity for learning. The team of coaches and individuals delivering the programme had significant impact on the experience of the participants. Princess spoke about how the programme allowed her to find her surfing family, and Tala realised that there are people that can help her outside of her school environment. Princess described her time as an opportunity to learn from both her own experience and the experiences of her team, while Thabo spoke about his enjoyment of engaging with the team and the friendships that were formed. Rowan also spoke

about his experience of having his team by his side and how blessed he felt.

The community influence on the programme delivery highlighted the importance of the individuals delivering the surfing programme and how they played a critical role for the participants and their ability to interact with the world. They created an environment of safety and fun, and a place for the participants to feel comfortable. Trust became a multi-directional process in which participants learnt and grew over time. The trust relationships provided an opportunity for connectedness and security, which were significant for the children participating. These engagements became the stepping stone for participants to find the courage to start engaging in other social circles beyond their surfing environment.

### **Being challenged**

Being challenged and the skills learnt through the challenges were important for participants. Rowan reflected on how his perspective changed over the course of the year, and how he had initially seen falling off the board as a failure but later recognised it as a sign of his ability to learn. He realised the only way to learn and progress is by making mistakes. The structured programme provided a place for consistency in an ever changing natural environment in which participants learnt to adapt. There were environmental challenges which they learnt to overcome, such as water temperature. Princess and Charlie were both unable to regulate their own body temperature and through this process learnt how to trust and communicate with their team, asking for what they needed and listening to their team reading the changing circumstances. Surf conditions also challenged participants at times when the strong southerly winds blew and waves were choppy. Rowan spoke about how the waves kept crashing over him, and both Tala and Princess shared how the salt in the water stung their eyes and they therefore used goggles when conditions were challenging.

## **4.4. Discussion**

To my knowledge, this is the first research of its kind exploring the experiences of participation in an adapted surf therapy programme for children with various disabilities in South Africa. The objective of this chapter was to explore the effects of children with disabilities during and after participating in a surf therapy programme.

Three main themes emerged, namely: the promotion of mental, emotional, and physical health; reshaping a worldview, that is, how participants see and interact with the world; and the development and mastery of new skills.

#### ***4.4.1. Health Promotion through mental, emotional, and physical health***

The mental health promotion included identity development, improved self-confidence, independence of thought, and a feeling of freedom from having achieved their dreams. Emotional health promotion was observed through participants expressing a number of emotions, including love, joy, and having fun. Additionally, they experienced improved self-acceptance, maturity, and reduction in anxiety while increasing a state of calm and flow. Physical health promotion included changes in physical mobility, including balance, exercise tolerance, strength, and posture. Participants also experienced an increase in physical independence and proactive behaviour, which accompanied increased mobility. Participants expressed their feeling of freedom through movement and the ability to learn about their own bodies and new movements.

#### ***Theme 1: Surfing has taught me to be more myself***

The promotion of mental, emotional, and physical health and positive identity development were identified as experiences of participation of participants in the surf therapy programme. In their personal narratives, participants emphasised the unique interpretation of the concept of “myself” and discussed how their participation in the surf therapy programme enriched their understanding of their own identity. The intimate connection between the children’s sense of self and the experience of surfing is a recurring theme throughout the narratives.

The concept of identity development has its roots in Erik Erikson's theory of psychosocial development. According to Erikson, an individual's identity is predominantly shaped during the adolescent years (Erikson, 1968). This theory suggests that, as adolescents navigate the various challenges and conflicts of this developmental stage, they are simultaneously working to form a coherent sense of self. Through the process of exploring their own beliefs, values, and goals, adolescents establish a clearer understanding of who they are and where they fit in the world around them. Erikson's theory emphasises the role of social interactions

and the influence of the surrounding environment in the identity formation process. Erikson suggested that successful identity synthesis is evidenced by one's ability to establish a meaningful self-concept comprising past, present, and future. According to Erikson's theory, an individual's self-concept is influenced by various factors such as gender, culture, ethnicity, family, peers, socio-economic status, sexual orientation, illness, educational success, and disabilities. These influences ultimately contribute to the formation of a unique identity and personal value system.

In identity development, children's development proceeds in stages, and youth begin to learn about themselves as individuals. Each person develops at their own pace, and providing time for them to explore and express themselves will allow them the ability to do so during this stage of development (Query et al., 2018). For the individuals participating in the surf therapy programme, this experience had an influence during this time of identity development. Identifying and treating mental disorders in childhood and adolescence can lead to better outcomes, both in terms of reducing the severity of primary disorders and preventing the onset of secondary disorders later in life (Kessler et al., 2007). Early intervention is crucial for improving long-term mental health and well-being. By implementing appropriate interventions at a young age, individuals can develop better coping mechanisms and have higher chances of recovery.

On a broader scale, health promotion plays a pivotal role in enabling individuals to take control of their own health and make positive lifestyle choices. This process involves educating and empowering people to make informed decisions about their well-being and actively participate in improving their overall health (Nutbeam, 1998). By promoting health awareness and providing access to resources and support, individuals are more likely to adopt healthier behaviours and take proactive measures to prevent the onset of various health issues. The development of a child's self-identity is crucial for their emotional and mental well-being. According to Erikson (1968), a strong sense of identity is linked to better mental health in adolescents. The formation of self-identity is multifaceted and is influenced by a variety of factors. This includes the child's social environment as well as the broader historical, institutional, cultural, and social context in which they are raised (Kenny & McEachern, 2009; Staub, 2003).

The availability of resources essential for the development of a healthy self-concept may be limited by socio-economic constraints such as poverty. In South Africa, a significant proportion of children (more than six out of ten) are experiencing multi-dimensional poverty. This form of child poverty is widespread across various sectors, with a majority of children suffering from multiple simultaneous deprivations. On average, children living in multi-dimensional poverty experience four out of seven deprivations, including lack of access to water, sanitation, hygiene, housing, nutrition, protection, health, child development, and information. These deprivations are especially prevalent in violent areas, compromising a child's sense of safety (Maluleke, 2020). This highlights the pervasive impact of poverty on the overall well-being and development of children in South Africa, making it imperative for concerted efforts to address these challenges.

In South Africa, violence and injuries rank as the second leading cause of death and lost disability-adjusted life years, after HIV/AIDS (Norman et al., 2007). This is particularly relevant in the context of this research as the children that took part in the surf therapy programme face multiple deprivations simultaneously and on a daily basis. Four of the five would be regarded as having significant socio-economic constraints and as being multi-dimensionally poor.

### **Mental health**

The WHO defines "mental health" as a state of well-being that allows individuals to effectively manage life's challenges, recognise their strengths, perform well in their studies and careers, and contribute positively to their communities. This aspect of health is essential to our overall well-being, as it influences our capacity to make choices, establish connections with others, and impact the society in which we live (WHO, 2008). The WHO has determined that the lifetime prevalence, projected lifetime risk, and age-of-onset distributions of mental disorders in South Africa are notably higher compared to other countries. This heightened prevalence is largely attributed to the widespread exposure to violence experienced by the population. Findings indicate that approximately half the population (47-55%) will eventually have a mental disorder in South Africa (Kessler et al., 2007).

**Mental health promotion** was evident through the participation in the surf therapy programme for children with disabilities. Children experienced improved identity development, increased self-confidence, independence of thought, and a feeling of freedom and overall sense of achievement. The findings of this study add to the evidence which supports mental health promotion through the delivery of surf therapy programmes. Positive mental health outcomes of surf therapy programmes have been observed among military veterans suffering from physical or psychological combat trauma (Caddick, Smith, & Phoenix, 2015a; Fleischmann et al., 2011). In South Africa, a programme for neurotypical children was adapted for and used in the delivery of a surf therapy programme for neurodiverse children with ASD, which showed a predominantly positive effect on their overall well-being (van der Merwe & Yarrow, 2020).

### **Emotional health**

Emotional health is one aspect of mental health that the National Centre for Emotional Wellness describes as an awareness, understanding, and acceptance of feelings, and an ability to effectively manage change or challenges (Lerner, 2023). The experiences of the children who participated in the surf therapy programme revealed several positive emotions that supported emotional health. It also found improved self-acceptance and maturity, reduced anxiety, and the opportunity to experience participation in a state of flow.

The findings support Godfrey et al. (2015), who found statistically significant improvements in positive affect in vulnerable young people in the UK after participating in a surf therapy programme. A study by Marshall et al. (2019) focusing on the Wave Project, a UK-based charity for young people facing mental health challenges and social isolation, reported similar feelings of respite and escape while at the beach.

Overall, each child participated in the same surfing programme structure, delivered on the same days in the same conditions. Each expressed unique feelings about their surfing experience in relation to their personal journey, emotional health, and what they gained from their experience.

## **Physical health**

The Australian National University describes physical health and well-being as the capacity to uphold a healthy quality of life that enables us to engage in daily activities without experiencing excessive tiredness or physical strain. This encompasses the practice of looking after one's body and acknowledging that everyday actions and choices play a substantial role in determining one's overall health, well-being, and standard of life (The Australian National University, n.d.). Participants expressed changes in physical mobility, increased physical independence, and the ability to move freely while in the ocean. They also highlighted the experience as an opportunity to learn new movements that could be applied in their daily lives.

Children with disabilities participating in a pilot study during an eight-week intervention in the USA (Armitano et al., 2015) found a substantial increase in core body muscle strength, which was recorded in the fitness testing. The study found that surfing could potentially have a positive physiological impact in the lives of children with disabilities. Similarly, a study on the effectiveness of surf therapy for children with disabilities in the USA employed multiple dependent variables of physical fitness showing results with significant differences between pre- and post-measures in core body strength, muscle endurance, flexibility, and aerobic functioning (Clapham et al., 2019).

## **Summary**

While areas of mental, emotional, and physical health promotion have been documented in surf therapy studies across a variety of populations across the world, this study highlights the findings of combined mental, emotional, and physical health promotion for children with disabilities participating in a surf therapy programme in South Africa.

## ***Theme 2: People realised that they must not underestimate me: Reshaping a worldview***

Social phenomena are considered as including all behaviour that is either influenced by or influences living things which can respond to one another. This includes individual, external, social constructions that influence our lives and development, and are constantly changing as we age (Markey, 1926). Worldview can be defined

as our individual perspective on life, encompassing our attitudes, values, narratives, and expectations about the world. This unique outlook shapes our thoughts and behaviours, influencing everything from our ethical beliefs and religious views to our philosophical and scientific understandings (Gray, 2011). It is through our worldview that we interpret and navigate the complexities of the world around us, often serving as a guiding force in our decision-making and interactions with others.

As we grow and evolve, our worldview is constantly shaped and reshaped by our experiences, interactions, and exposure to new ideas. It is a dynamic and evolving aspect of our identity, informed by the cultural, social, and personal influences we encounter throughout our lives. Everyone needs a certain worldview, in order to interact with the world. A worldview is a reflection of our core beliefs and values, serving as a lens through which we view and engage with the world. A worldview encompasses everything that is important to an individual (Vidal, 2008).

The formation of a worldview is influenced by both individual and communal factors, with the social context and particular subculture playing a crucial role in shaping it. Whether a worldview is developed through personal experiences and beliefs or through the values and norms of a community depends on whether the social context and subculture are predominantly individualistic or collectivistic (Abi-Hashem, 2017). This suggests that individuals may construct their worldviews based on their own subjective perspectives, while others may develop their worldviews through a collective, shared understanding within their community. The interplay between personal and communal influences underscores the dynamic nature of worldviews and highlights the significance of social context in shaping them.

Experiential learning is a way of learning that involves actively engaging in hands-on experiences to gain knowledge and insight. This type of learning happens through real life situations and activities rather than classroom instruction (Kolb, 2014).

Through the surf therapy programme, participants were able to experience, reflect, think, and act, which supported them in reshaping their worldview in how they both saw and interacted with the world. This is discussed in the subthemes below.

### **How I see the world**

How the children observed the world through their experiences changed, including their view on their future outlook in life. They developed the ability to read their current situation along with coping mechanisms to persevere through their experiences, learning that not all scary circumstances lead to a negative outcome.

For many participants, “scary circumstances” and those which induce adrenaline are often linked to negative outcomes, particularly for the participants living in township areas. Repeated exposure in a safe environment fostered the development of resilience among participants. Resilience, defined as the ability to positively adapt to significant threats or adversity, is considered a dynamic process (Ewert & Yoshino, 2011). This process involved individuals being subjected to challenging experiences within a supportive and secure setting, allowing them to gradually develop strength and fortitude in navigating and overcoming obstacles. As a result, participants were able to not only withstand and endure adversity, but also to thrive and flourish in the face of it.

The narrative for participants began to change between their second and third interviews as they realised not all scary circumstances lead to a negative outcome. This links to Godfrey et al.’s (2015) study, which, although not focused on children with disabilities, reported significant improvements in “positive outlook” for youth at risk in the UK through participation in a surf therapy programme.

Additionally, the opportunity to experience adrenaline in a positive setting for a participant with limited opportunities for adrenaline was highlighted. Some researchers and educators maintain that confronting risk, fear or danger produces optimal stress and discomfort, which in turn promotes outcomes such as improved self-esteem, character building, and psychological resilience (Ewert & Garvey, 2017; Ewert & Yoshino, 2011; Lupton & Tulloch, 2002; Priest & Gass, 2018).

### **How I interact with the world**

Through experiential learning in the surf therapy programme, participants were able to apply what they learnt in other areas of their lives, which changed how they interacted with the world. There were notable changes in their participation at school,

their active friendships, their family, and a willingness to try new things in different community settings. Significant changes in families and how the participants interacted at home were similarly found by (Matos et al., 2017) in a study with institutionalised young people participating in a surf therapy programme. A study by Clapham et al. (2014) found that children with disabilities participating in a surf therapy programme in the USA acquired self-confidence and social skills through programme participation.

### **Summary**

Participation in a surf therapy programme provided a significant opportunity for children with disabilities to change both how they see and interact with the world around them. The significance of this impact for children with disabilities living in South Africa, a marginalised population, is profound as it provides them with opportunity to experience, learn, interact, and grow in a very unique way. It is important here to recognise that this research has been conducted in South Africa, taking into consideration the country's social, cultural, economic, and historical context.

### ***Theme 3: Now I like to (am) stress free: Skills development and skill mastery***

#### **Skill mastery**

Participants were able to develop new skills through their experience in the surf therapy programme and highlighted factors that supported their skills development. The experience of learning to surf in itself provided the opportunity to develop and master a variety of skills. Some participants also went on to participate in surfing competitions, which provided further development. Mentorship and goal setting in the right environment supported the development of new skills as they created a conducive opportunity for learning. The team of coaches and individuals delivering the surf therapy programme had an impact on the participants through the mentorship, which influenced the participants' ability to interact with the world outside of the surf therapy programme. Goal setting supported the development of new skills as the participants learnt at their own pace, based on a structured programme, and goals were set individually based on their requirements. Similar findings were documented by Marshall et al. (2020a) where the focus on surfing skills development at one's own pace was critical to participation by military veterans facing major

physical challenges in the USA.

Participation in a natural environment taught participants many lessons, including how to adapt to changing environments. Through their deep connection with the natural environment – particularly “blue space”, a term given to natural aquatic environments – they were able to learn in a unique way. The reduction of negative emotions is evident in the blue space literature, implying that blue space has restorative features which are considered important in the surf therapy programme environment (Pasanen et al., 2019). The findings of this research align with previous studies suggesting that blue care can have direct benefits for health, especially mental health and psycho-social well-being (Britton, Kindermann, Domegan, & Carlin, 2020). In a study by Drake et al. (2021), it was observed that adolescents with mental illnesses could potentially benefit from engaging with the natural environment as a form of therapy.

The community influence in the overall experience of the surf therapy programme delivery highlighted the importance of the individuals that delivered the surfing programme and the role they played for the participants and their ability to interact with the world. The children participating connected with their surf therapy community in a meaningful way, which created a sense of a surfing family. Through the multi-directional engagement process, participants began to form trust relationships and feel a sense of connectedness to their “surfing family”.

Being challenged was a regular discussion with regard to both the planned programme and any unplanned circumstances. Marshall et al. (2019) used qualitative interviews for a population of at-risk youth in the UK and similarly found that participants felt a sense of mastery at learning a new skill.

### **Summary**

In a country such as South Africa where children with disabilities face multiple barriers that hinder their access to education, healthcare, social services, and sport participation, children with disabilities participating in a surf therapy programme were provided a unique opportunity to develop and master many personal skills. Through the activity of learning to surf and taking part in para surfing competitions, they were able to participate in a physical sporting activity in a natural blue space environment,

supported by their “surfing family”.

#### **4.4.2. Limitations and recommendations**

All participants continued to surf after the six-week surf therapy programme. The number of sessions for each participant varied between five and sixteen sessions over the course of the following year. There was no opportunity to gauge whether the changes would have been observed if they had not continued with surfing. As there is no standard adapted programme, it is difficult to compare results across programmes unless replicating the same programme with other participants. The participants were between the ages of 12 and 15 years, which is considered a unique stage of human development and an important time for laying foundations of good health. Children and adults of other ages were not included, and therefore it is difficult to determine if outcomes would differ with participants of different age groups. Transportation for participants with disabilities is challenging and may have an impact on the sustainability of participation for participants on an ongoing basis.



*Image 4.4: Example of transportation for children with disabilities*

#### **4.4.3. Recommendations and planning for further action**

Recommendations for future studies:

- A mixed method study could be designed with those that do attend and those that don't attend.
- Increase the age range of participants to see if the same experiences of participation are evident with participants at different life stages.
- Replicate the same research protocol with another organisation delivering surf therapy for children with disabilities in South Africa to compare results across programmes.

#### **4.4.4. Reflective summary and planning for further action**

Through this experience, I became more aware of the immense nature of societal exclusion for children with disabilities. The children spoke about their everyday experiences of bullying, which are amplified because of people's insufficient awareness and understanding of disability. It became evident that there are very few ongoing group participation and sporting programmes available for children with disabilities.

I am also aware that, as the surfers continued with the programme, they became ambassadors for surf therapy participation by sharing their personal journey with friends, family, and within in their community. This led to a growing number of individuals wanting to participate in surf therapy programmes. In South Africa, there is not yet enough capacity to be able to deliver regular surf therapy programmes to accommodate the growing interest. The programmes require human capacity to deliver, training courses that ensure programmes are delivered in the same manner each session, ongoing resources, and access to safe and reliable transportation.

My time focusing on this research has provided insight into the experiences of participation in a surf therapy programme for children in the Western Cape. However, by doing this research, I have needed to step away from supporting the delivery of surf therapy programmes, which has had a negative impact on the delivery itself of these programmes in the Western Cape during this time. One key area which has suffered has been the training of volunteers. Due to time constraints,

I have not been able to deliver training courses for volunteers (as one of only two available International Surfing Association trainers in South Africa with surf therapy experience), which reduced the number of volunteer training sessions and increased the reliance on a small group of experienced volunteers. This, in turn, led to increased volunteer burn out.

## Chapter 5: It Was A Place They Visited In Themselves: Parents, Guardians, and Professionals



*Image 5.1: Tala on the shore after her first time going into the ocean*

In this chapter, the experiences of the children with disabilities who participated in the surf therapy programme are discussed from the perspective of the parents, guardians, and professionals, which was the second objective of the study.

### **5.1. Context of the study**

Few studies include engagement with the parents, guardians or professionals involved with the lives of children with disabilities participating in surf therapy programmes. A study in Portugal working with vulnerable youth used a social-ecological approach to engage with parents, providing psychoeducational workshops and support for crises, surf instruction, and practice for participants. The study found that prosocial behaviour increased significantly, and problematic behaviour decreased (Gomes et al., 2020). Research conducted through a surf project in the Netherlands serving youth with disabilities used an observational pretest-posttest design with 149 parents of 84 participating youth. They also collected data using a customised evaluation questionnaire and found that the general experience of the programme, surfing lessons, and mentorship were all positively experienced by parents, and that there were improvements in the children's mood, self-confidence,

self-esteem, and social-emotional functioning. However, no significant pretest-posttest differences were found for physical well-being (van Ewijk et al., 2020). In a study by Moore et al. (2018) in the USA, some parents described the participation as a normalising opportunity for their children with disabilities and noted that their children are usually excluded from these activities and social events, while other parents noted the opportunity the surf programme created for family bonding.

In South Africa, an evaluation of the process of adapting a surf therapy programme initially developed for neurotypical vulnerable youth to serve neurodiverse vulnerable youth (children with autism) was explored. Part of the exploratory case study included focus groups conducted with 10 parents and caregivers, as well as 6 teachers or occupational therapists (van der Merwe & Yarrow, 2020). The study focused on promoting the meaningful participation of children with ASD in surf therapy programmes, and found that a tailored approach and specialist training for facilitators can make mental health services more inclusive for all young people. This research suggests that with the right support, children with ASD can become more independent and reach their full potential through participation in activities such as surf therapy. However, the study also highlighted the need for further, longer-term research to explore the lasting impact of surf therapy for children with ASD. Additionally, there is a need to understand how more inclusive programme delivery tools may affect children's experiences in these programmes. This highlights the importance of ongoing research to continuously improve and tailor mental health services to be more inclusive and effective for all individuals, regardless of their unique needs.

## **5.2. Methodology**

### **5.2.1. Sample**

Purposeful sampling was used to select the participants. One parent/guardian and one professional for each of the five children participating were selected, providing a total of ten participants.

### **5.2.2. Inclusion criteria for parents, guardians, and professionals**

The inclusion criteria for parents/guardians were as follows:

- Parents were required to provide consent for their child’s participation in the study.
- Where the primary caregiver was not a parent, the parent/guardian needed to give permission for the designated caregiver to participate in the study and disclose information about the child.
- In the case of guardianship, the guardian was required to be a legally recognised guardian authorised to give consent in the absence of a parent.

The professional was selected by the parent participating based on the following criteria:

- Be the child’s physiotherapist, teacher, psychologist, counsellor, or occupational therapist
- Be English or Afrikaans speaking
- Be involved in the children’s lives on a regular basis
- Willing to share about the children’s experiences
- Needed to commit to attending three interviews

### **5.2.3. Participants’ demographics**

*Table 5.1: Participant parents, guardians, and professionals & their role in relation to the child participating*

<b>Child</b>	<b>Parent/Guardian</b>	<b>Professional</b>
Tala	House Mother (Guardian) (Female)	Psychologist (Female)
Thabo	Mother (Parent) (Female)	Physiotherapist (Female)
Charlie	Father (Parent) (Male)	Teacher (Female)
Princess	House Mother (Guardian) (Female)	Teacher (Female)
Rowan	Guardian (Female)	Physiotherapist (Male)

### **5.3. Data gathering methods**

The parents'/guardians' and professionals' stories were captured through three individual interviews with each parent/guardian and professional. Each interview was between 30 and 60 minutes in length, and took place at locations convenient for the participants. All interviews were conducted in English as all parents/guardian and professionals were English speaking.

The Most Significant Change (MSC) technique was used, which captured the voices and perspectives of those directly affected through the children's participation in the surf therapy programme. It helped to provide a more nuanced understanding of the changes brought about by the surf therapy programme for the children with disabilities that participated. This participatory approach can enhance stakeholder engagement, promote learning, and inform decision-making for future programming (Dart & Davies, 2003). MSC is a participatory evaluation method used to identify and understand the most significant changes that have occurred as a result of a programme or intervention. It is commonly used in the field of development and social change to gather qualitative data and capture the outcomes and impact of a project (Dart & Davies, 2003). This form of monitoring requires no special skills. It is often used to develop a rich picture of what was happening, and for monitoring and evaluating initiatives such as the surf therapy research programme without a pre-defined outcome. MSC involves collecting and analysing the stories of significant changes experienced and the reasons behind them. It provides a way to capture the subjective experiences of programmes (Dart & Davies, 2003).

Davies and Dart (2005) suggest that MSC be implemented using a number of chronological steps. Below, I discuss in further detail the steps used for this research (Davies & Dart, 2005):

1. Establishing participants and getting familiar with the approach – I familiarised myself with the approach by researching the MSC technique in detail.
2. Establishing 'domains of change' – Domains of change were established based on existing literature in surf therapy and identified gaps in this literature.

3. Defining the reporting period – The reporting period lasted one year, and participants were interviewed three times during this period. The interview schedule can be found in Appendix M.
  - The first interview was conducted before the beginning of the six-week surf therapy programme.
  - The second interview was conducted one week after the final session.
  - The third interview took place one year later.
4. Collecting stories of change – The collection of stories was completed over a one-year period and all stories collected were used.
  - Three semi-structured interviews using open-ended questions were conducted with each parent/guardian and professional. These interviews provided an opportunity for the participant to narrate his or her experience while exploring the areas of most significant change in the lives of the children.
5. Putting in place a process to verify the stories if necessary – The stories collected were verified with the participants through member checking.
6. Conducting secondary analysis – All the stories were analysed for different kinds of change.

Data analysis will be discussed in more detail below.

MSC stories worked well to capture the subjective experiences of the parents, guardians, and professionals, and to highlight both the intended and unintended consequences of the surf therapy intervention. The strengths of this method are linked to learning rather than accountability (Davies & Dart, 2005). The MSC technique provides the opportunity for in-depth development thinking by participants and also has the ability to inform and support other monitoring and evaluation (M&E) processes by capturing unplanned changes (Willettts & Crawford, 2007). The time-intensive nature of this method is a limitation (Polet et al., 2015) as it requires rigorous advanced planning at each stage of the M&E process (Willettts & Crawford, 2007). While it promotes a broader community engagement, it may be challenging to generalise the findings beyond the specific context. Some interviewers may find it difficult to elicit good stories, which is often associated with how the questions are understood and translated (Davies & Dart, 2005). Some participants may not be

comfortable exercising their own judgment about the significant change as it makes their subjectivity accountable, and they would prefer to make choices according to pre-defined answers (Davies & Dart, 2005).

#### **5.4. Recruitment**

An information flyer (Appendix B) was placed at clinics asking parents/guardians to contact me if they were interested in taking part in the study. Once they had contacted me, I met with the parent or guardian and child to provide them with an information sheet (Appendix I) and gain assent from the children and consent from the parent/guardian. Once parental consent was granted and permission given to contact a professional, I contacted the professional and scheduled a meeting with them. In the meeting, the professionals were provided with an information sheet (Appendix F), followed by a consent form (Appendix E). Once all assent and consent had been granted, the recruitment assessment form was completed (Appendix G). This form established the eligibility of the participants to take part in the study and was guided by the children's safety and ability assessment (Appendix H).

#### **Data analysis and management**

Data analysis was a two-step process. The first step was to transcribe the interviews verbatim and prepare each participant's three interviews into one combined story highlighting the areas of most significant change. This involved a six-phase data analysis process (discussed below), followed by thematic coding, which involved identifying and categorising categories, subthemes, and themes in the qualitative data. Secondary analysis then involved the examination, classification, and analysis of the themes across the stories of all participants using reflexive thematic analysis (RTA) (Braun & Clarke, 2019).

**I used a six-phase data analysis process of data engagement** outlined by Braun and Clarke (2006), which will be discussed below. In addition, I engaged in an iterative process of analysis, interpretation, and reflection where I was continuously comparing and contrasting the themes, seeking to deepen my understanding of their nuances and relationships. I also used reflective writing to capture my thoughts and insights throughout this process.

1. Familiarisation: I became familiar with the data by reading and re-reading the stories. After the interviews had been transcribed, I read over the stories to familiarise myself with the content again. I began by immersing myself in the interview data. I read and listened to the interview transcripts multiple times to become familiar with the content, paying attention to both explicit and implicit meanings. I continued to write familiarisation notes and maintained engagement with my supervisors during this process.

2. Generating initial codes through systematic data coding: I identified the initial codes that captured the essence of the stories. These codes were grounded in the data and reflect the experiences of the participants. I initially began manually coding the data from printed transcripts. Each interview was then uploaded to the software programme Nvivo. Each participant's three interviews were combined into one story, condensing thirty interviews into ten stories. The information documented from these interviews included a description of the story itself and any significance of events described by the participant. The stories were documented as they were told and have been analysed for both positive and negative changes. I proceeded to systematically code the data by highlighting each relevant section of text to create a code. I began generating initial categories, subthemes, and themes in the code. I looked at the semantic meaning of the data and then re-read to examine the latent level meanings for underlying assumptions. I used descriptive codes that captured the key concepts within the text. This process involved identifying meaningful units within the data and assigning codes to them.

3. Searching for themes: I grouped the initial codes into categories, which I then collapsed into broader subthemes. I looked for patterns and connections across the codes and any recurring concepts across the stories. I then generated initial subthemes from the categories that emerged from the coded data. I also considered the context, participants' perspectives, and my own insights as I generated the themes.

4. Reviewing themes: I checked that the themes were coherent and meaningful, and that they accurately reflected the data. The themes were then reviewed across the parents', guardians', and professionals' stories to make sure they were useful and accurate representations of all the data. When considering the most significant change principles, all the stories were looked at for different kinds of change which were guided by the interview questions.
  
5. Reviewing, defining and naming themes: I reviewed and refined the initial themes by revisiting the data and considering the themes' coherence, relevance, and fit with the entire dataset. This process involved revising or merging themes, as well as considering alternative interpretations. I also developed a thematic map manually that illustrated the relationships between the final themes. This map helped me visualise the connections and interdependencies among the identified themes and subthemes. This was discussed with my supervisors, who provided feedback during each of the stages in the reviewing of themes.
  
6. Writing up findings: The findings will be discussed below in more detail.

Thematic coding involved identifying and categorising categories, subthemes, and themes in the qualitative data (Braun & Clarke, 2006). It was done to analyse and describe the range of changes and identify themes within the combined MSC stories of each participant. The process involved analysing data through multiple iterations, each time refining and developing the themes until a final set of themes had been identified (Braun & Clarke, 2006).

Secondary analysis also involved the examination, classification, and analysis of the themes across the stories of all participants using reflexive thematic analysis (RTA) (Braun & Clarke, 2019). RTA is a theoretically flexible method for developing, analysing, and interpreting patterns across a qualitative dataset (Braun & Clarke, 2019). RTA provides a way to identify themes within the data and explore the complexity of programme outcomes, and therefore, in this study, a way to explore the complexity and nuances of the children's participation, their experiences, and the programme outcomes. RTA acknowledges the active role of the researcher in

shaping the interpretation of data, and encourages critical reflection on one's own subjectivity, assumptions, and potential biases (Braun & Clarke, 2019, 2021). By considering both the participants' perspectives and the researcher's reflexivity, this approach allows for a deeper understanding of the interview data. I engaged in a process of reflexivity by examining and documenting my own preconceptions, biases, assumptions, values, and experiences that may influence the interpretation of the research process, data, and findings. I also reflected on how my own background, experiences, and beliefs may shape my understanding of the interview data (Braun & Clarke, 2021). This self-awareness and critical reflection has been ongoing throughout the research process.

The MSC technique provided a way to collect stories, gather data, and capture the participants' subjective experiences. Thematic coding was used to define themes, subthemes, and categories within each story, while RTA provided a way to identify themes within the data across multiple stories to explore the complexity of the research objective.



*Image 5.2: Process of reviewing, defining, and naming themes*

## 5.5. Ensuring rigour and trustworthiness

I discussed how rigour and trustworthiness were ensured for this chapter in chapter 3.

## 5.6. Ethical considerations

I discussed the ethical considerations for this chapter in chapter 1.

## 5.7. Findings

The overall theme of “*It was a place they visit in themselves*” emerged from the stories of the parents, guardians, and professionals. Table 5.2 presents the three themes, with the subthemes and categories of each theme. I have included relevant quotes and excerpts from the interviews to support and illustrate key points.

Table 5.2: Themes, subthemes, and categories: Parents, guardians, and professionals

It Was A Place They Visited In Themselves: Parents, Guardians and Professionals		
THEME	SUBTHEME	CATEGORY
A Sanctuary of Self Discovery	How they think	A mindset open to growth
		Developing independence
		<i>She is more confident in herself than ever before</i>
	How they Feel	<i>He is more grown up, more mature</i>
		<i>It was a still joy</i>
		A change in self-perception
		<i>Leaving his stress behind like he was a lighter boy</i>
	Nurturing Physical Wellbeing	<i>He is free in the water</i>
		<i>Now there is a door that has opened for him and his health</i>
<i>His balance has gotten better</i>		
<i>She is now sitting straight and not slumpy</i>		
Broadening the Horizon	How they see the world	Increased mobility
		<i>They came through their fear</i>
	How they interact with the world	<i>He grew to trust</i>
		Increased engagement
		Changes at school
		Family changes
An Open Door	<i>It was like they were healing me : The significance of change</i>	Becoming an ambassador of change
		<i>I realised It was me that was having the problem</i>
		<i>At home with the family he is more open</i>
	<i>Freedom from limitations : The Reasons for Change</i>	<i>Her work doesn't stop when the surfing stops</i>
		<i>I used to see him as a disabled child</i>
		<i>Challenge yourself to what is possible</i>
		<i>It's the whole new world thats opened up</i>
	<i>It's like he took part in counselling or an extraordinary love</i>	
	<i>We all have a metaphorical crutch</i>	
	<i>But suddenly he has his thing</i>	



Figure 5.1: Parents, guardians, and professionals: Main theme

Three main themes were developed:

**Theme 1:** A Sanctuary of Self Discovery: Personal growth and development.

**Theme 2:** Broadening the horizon: Noteworthy and meaningful changes that happened outside of the participants' surfing environment, as well as social changes experienced.

**Theme 3:** An Open Door: The areas of change and their significance of change, as well as areas the programme participants attribute to this change.

### 5.7.1. Theme 1: A Sanctuary of Self Discovery

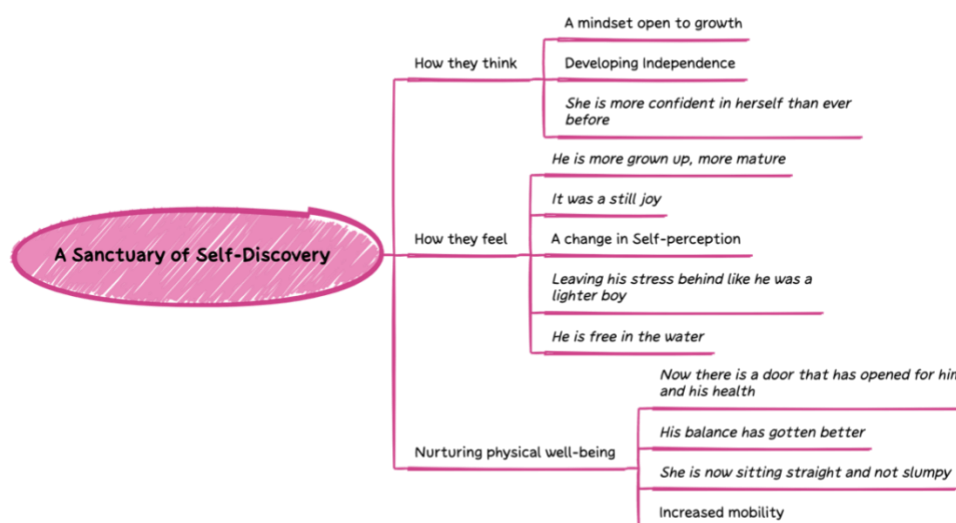


Figure 5.2: Parents, guardians, and professionals: Theme 1 with subthemes and categories

## **Subtheme 1: How they think**

### **A mindset open to growth**

Participants discussed the shift towards a growth mindset for the children, including being receptive to new ideas, perspectives, and experiences. They shared that the children were more curious, adaptable, and willing to challenge their own beliefs and assumptions. This growth mindset promoted personal growth, learning, and a broader understanding of the world.

*To me, his change in mindset that he can do something. Knowing he is not worthless is the biggest impact that this is going to have on him. – Rowan's mother*

The children were able to apply this changing mindset to other areas of life by adopting the beliefs, skills, abilities, and qualities they had developed and then improved with effort, learning, and perseverance.

*To be able to use that feeling that she had before the session and apply it to a different situation, is huge for her, It was significant to make that connection. - Tala's psychologist*

Participants spoke about the observed changes and the change in mindset in the children. They noticed changes in how the children perceived themselves, the other children participating, and their circumstances in relation to the world around them.

### **Developing independence**

Gaining and reaping independence relate to the ability and freedom to think, act, and make decisions without excessive reliance on others. It involves self-reliance and the development of agency. The children's ability to be more independent became evident. Their independence was observed in behaviours in other areas and it developed over time.

*This independence will continue to play a big role in her life. – Princess's guardian*

*I can see Thabo can stand for himself now. I decided that he can go alone to stay there with my cousins' sister. I will now let him be alone and do some things. – Thabo's mother*

### **‘She is more confident in herself than ever before’**

One of the most regularly discussed topics was the improved self-confidence of the children. Self-confidence is a belief in one's abilities, qualities, and worth. A positive and realistic perception of oneself has an influence on how individuals think, feel, and behave.

*In terms of confidence and believing in yourself and how others see you, she realises that someone else saw something that she didn't. That's profound –*  
Tala's psychologist

In one instance, a female participant was determined to “wean” herself off using nappies. Her guardian shared what it was like winning a gold medal for her achievement in relation to her disability:

*After her surfing and the period of her doing the course, she was more than ever confident in herself, she came back and she is off that nappy completely now. –* Princess's guardian

Developing self-confidence had a positive impact on the children's mental well-being. When individuals felt more confident in their abilities, they were more likely to take on new challenges and engage in healthy behaviours.

### ***Subtheme 2: How they feel***

Participants were able to develop self-regulation, which meant understanding and managing their behaviour and reactions to their own feelings, others' strong emotions, and the circumstances happening around them.

### **‘He is more grown up, more mature’**

As the children cultivated a growth mindset, they began to exhibit qualities associated with maturity. Personal maturity was discussed during the interviews with the parents/guardians and professionals.

*Princess seems much more matured –* Princess's guardian

*He is all of a sudden all grown up –* Rowan's Physiotherapist

During the interviews with the parents, guardians, and professionals, they highlighted the children's development of their own inner space emerged where they could

explore and connect with themselves. It became a place of introspection, self-reflection, and self-exploration, in which the children could delve into their thoughts, emotions, and experiences to gain insights, understanding, and personal growth.

A professional described the overall experience as follows:

*To reflect on the experience, you realise the depth of it for this to carry through her life, I think that this [surfing] was not just an outing, this was not just 'let's visit someplace, this was a place they visited in themselves'. And that was meaningful for every one of us. – Tala's psychologist*

### **'It Was a Still Joy'**

A word frequently used in the interviews with the parents/guardians and professionals was joy. Joy was described in both the context of the individuals and the community around them. Thabo's physiotherapist described it as follows:

*I think that kind of joy carried through beyond just being on the board, it was like a still joy almost inside him – Thabo's physiotherapist*

It was also described through the children's body language:

*She is really happy but like happy through her eyes – happy. – Tala's psychologist*

*She glows, she glows from this starting (surfing) that child is glowing, her face is glowing – Princess's teacher*

Rowan's mother experienced joy through seeing her son participating:

*His excitement when he shared – 'mummy, I don't have hands and feet but I can do this' – Rowan's mother*

### **A change in self-perception**

Self-perception, that is, how individuals perceive themselves, encompasses their beliefs, attitudes, and evaluations of their own qualities, abilities, and characteristics. Participants spoke about the changes in the children's self-perception.

*I asked her what does she think is different about herself now to way before she started the programme and she said: I can do anything. She told me anything is possible and that wasn't something that Tala has ever said or even thought about. – Tala's psychologist*

*He looks at himself as a great person since he started surfing. He looks at himself differently – Thabo's mother*

The outcome of a change in the children's self-perception was improved self-esteem and a greater sense of self-worth, which, in turn, had a positive impact on their mental well-being.

#### **'Leaving his stress behind, he was like a lighter boy'**

Participants spoke about reduced anxiety and an increased calm state for the children, which occurred during and after their surf therapy programme participation.

*He expressed to me when he was at the beach, leaving his stress behind he was like a lighter boy – Thabo's physiotherapist*

The ability of the children to learn to emotionally regulate through the process was observed as significant.

*He is able to voice himself better now. So he doesn't get into those very active anxiety stages anymore. Because he can talk about it before it gets too far. – Charlie's teacher*

Reducing anxiety was an important aspect of the promotion of the children's emotional and psychological well-being.

#### **He is free in the water**

Participants spoke about the opportunity for freedom of movement as the children are often limited in their mobility and access to opportunities for sporting participation.

*The most amazing part was, for them to surf, they feel so free!* – Charlie's teacher

Each individual has their own perception of “normality”, which is a culturally and historically embedded concept. Often normality is defined as able-bodied, however participants developed a different perspective to the word ‘normal’:

*I don't want to say normal but, what is normal. I think “free” is the right word and they can even feel that weightlessness.* – Charlie's teacher

*It's got to do with the freedom of being able to be yourself in the water* – Rowan's physiotherapist

### ***Subtheme 3: Nurturing physical well-being***



*Image 5.3: Rowan learning to balance while riding an unbroken wave during his first surf therapy session*

Physical changes were observed in the children and highlighted during the interviews with their parents/guardians and professionals. The physical nature of

surfing itself also contributed to the physical changes observed, which included exercise tolerance, balance, strength, and posture.

**‘Now there’s a door that is opened for him and for his health’**

Thabo’s physiotherapist reported a change in exercise tolerance as he began to strengthen his body.

*There has also been changes in his exercise tolerance from surfing – Thabo’s physiotherapist*

It was highlighted that the children’s overall health and strength had improved.

*Physically he can do swimming and all that stuff. Now there’s a door that is now opened for him and for his health. – Thabo’s mother*

*Strength wise, health wise and her appearance has just improved – Princess’s guardian*

*Physically I think she is more faster in the wheelchair. It has strengthened her muscles in her arms – Princess’s guardian*

**‘His balance has gotten better’**

There were reoccurring discussions about how the children’s balance had improved.

*His balance has gotten better. To him it makes the world of a difference because that has given him new confidence – Rowan’s physiotherapist*

*He is without prosthetics anymore. The surfing and balance has helped – Rowan’s mother*

**‘She is now sitting up straight and not slumpy’**

Body conditioning and posture changes were observed in the children.

*She will sit more like a lady after doing the surfing because it has something to do with posture laying on that board. I think that is why she is now sitting up straight and not slumpy – Princess's teacher*

For one child, prior to starting surfing, his physiotherapist spoke about significant back pain he had been experiencing. She mentioned it was in relation to a past bullying incident. At the second interview six weeks after the start of the surfing programme, she shared this change:

*Before the surf therapy, I mentioned Thabo's struggle with fair back pain, half way through the surf therapy I asked: Thabo, how's your back doing? He was like: no, I've had no pain. And he said: maybe it's the surfing. He really hasn't had any back pain – Thabo's physiotherapist.*

A year later, she mentioned it again:

*In terms of his back pain, he never had back pain again. – Thabo's physiotherapist*

### **Increased mobility**

It was noted that the children changed the way they engaged with their equipment. One participant no longer needed crutches to walk.

- *All of a sudden since then (first session), he's been coming to school without his crutches, whereas he used to rely on them quite a bit. I think that also made him realise that 'I can do this! I can walk without these things. If I can stand like that, I can walk like that'. – Rowan's physiotherapist*

Another child improved her time in transferring to and from her wheelchair.

- *In the morning, she always used to be last, showing strength wise she has also improved. Transferring her from the bed to the wheelchair is now very quick. It was so significant for Princess. She is alert of everything transferring in 3-4 minutes whereas before it was 5,6,7 minutes. – Princess's guardian*

- *Often I have to go in, put him on and off (the toilet). But now suddenly, it just happened. He is putting a lot more help into this whole equation. – Charlie’s father*

Charlie's father also noted Charlie’s willingness to be an active part of his transfer process and his attitude change towards being part of the process:

- *His willingness to help with his transfers. When transferring, he is now putting his hands out to help, just being able to stand and take that weight so you can help him up and help him down as opposed to pick him up and put him down. – Charlie’s father*

### 5.7.2. Theme 2: Broadening the Horizon

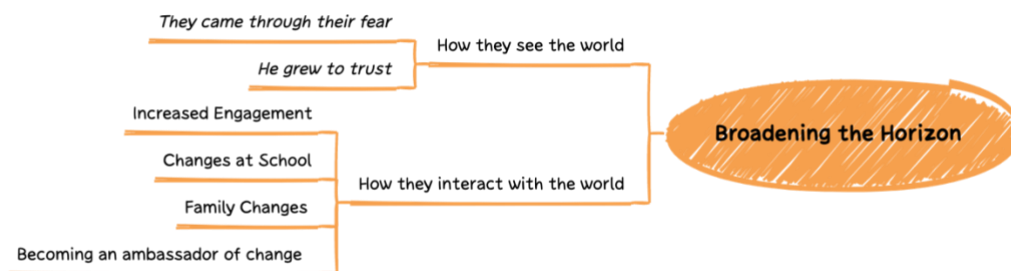


Figure 5.3: Parents, guardians, and professionals: Theme 2 with subthemes and categories

#### Subtheme 1: How they see the world

##### ‘They came through their fear’

By facing fears and overcoming challenges, the outlook and perception of the world began to change for the children. Their experiences of success and positive outcomes brought about a shift in perspective for them.

*Once they came through the fear and came to realise not all scary circumstances lead to a bad ending, the outlook or perception changed for all participants involved. For Thabo, it open up that*

*little door that he knows he can just walk through and doesn't have to be scared in trying new things – Thabo's physiotherapist*

Overcoming their fears opened up new doors and opportunities for exploration and adventure. The children gained confidence in trying new things and taking on new challenges, knowing that they have the skills and resilience to face whatever comes their way.

*I never saw that he would love something like that because he had this fear. Now I feel this fear has changed. – Rowan's mother*

Successfully overcoming these obstacles provided a sense of accomplishment for the children and boosted their self-esteem. This newfound confidence carried over into other areas of life, including the transition to a new school for one child.

*When she starts the new school, she's said she is going to remember how she felt the first day when she went surfing. – Tala's guardian*

Tala's psychologist described Tala's experience as follows:

*And to overcome so many fears and so many uncertainties and how she experiences life in so many ways, that's a change for her forever in such an amazing way. – Tala's psychologist*

Charlie's father described Charlie's experience as follows:

*Most of the time, adrenaline only gets created in life these days for a bad reason. You get threatened, challenged or pissed off and adrenaline comes out. It is only the people that follow passions and hobbies that get any sort of adrenaline for good things. I think that's what he craves in his life. Being in a wheelchair to get adrenaline is just amazing – Charlie's father*

*A match made in heaven because what he was scared of became the thrill that he was looking for – Charlie's father*

## **'He grew to trust'**



*Image 5.4: Thabo with his coach during a surf therapy session*

Stepping into a new environment required an element of trust, which the children began to develop in their team that was delivering the surf therapy programme. Personal growth through a change in mindset involved the children overcoming challenges and developing a more positive outlook or approach to life. The surf therapy programme involved working in groups and building connections with others who are also learning to surf. This process supported making new friends and building a supportive community and network for the children.

*He grew to trust and grew to value what they were saying about him in that space. – Thabo's physiotherapist*

Participants also began to develop trust in the children and their ability for independence.

*Even to go out without me. He knows what is going on 100%. I was giving him 100% if I'm there but if I'm not there I had doubt.*

*So I have no doubt now he can go alone. I now don't have any fear.* – Thabo's mother

## **Subtheme 2: How they interact with the world**

### **Increased engagement**

Participants shared the most significant changes for the children in communication, engagement, and conversation.

*She is much more talkative, she is using her body when she is talking, and she has been able to verbalise her emotions so much better* – Tala's psychologist

Changes were also observed in the children's openness to expressing themselves and their feelings, and to being part of conversations.

*He is more than open now. Every time he meets someone, he'll tell me and talk about the way he feels, he opens himself.* – Thabo's mother

Participants spoke about their relationships with the children and how it changed during the course of the year.

*'Like he knows that I'm a safe space and he will ask me about other things as well'* – Thabo's physiotherapist

### **Changes at school**

Changes took place within the children's current schooling, including, for some, the transition to a new school. They were able to transfer what they had learnt through the surfing programme to changes outside of the programme, particularly when changing schools. This provided unique benefits and supported their transition.

*The surfing has helped him through the change of schools* – Rowan's mother

Changes were also observed in both the children's behaviour and confidence at school, and their participation and academic ability. They were observed as being more proactively involved in various areas of their schooling.

*He is now participating in class much more than he usually would.*

– Rowan's physiotherapist

*Now he's the coach of a football team, from this surfing thing there is that door that is all the way open for him.* – Thabo's mother

The surfing experience improved the children's connections and friendships with surfing friends and school classmates during school time.

*I think that that is a very good thing that he can also connect with his classmates over.* – Charlie's teacher

Participants discussed the proactive behaviour changes observed in the children during class and after hours among peers.

*Mrs R mentioned he said something quite insightful in one of the classes to encourage somebody else, which he doesn't always.*

*This new-found confidence that he has now, that there are certain things he knows he can just do.* – Rowan's physiotherapist

It was also observed that there was change within the social engagements.

*After she started surfing, she socialised and interacted but even more so now since surfing. So I think socially, this was a huge game changer for her* – Tala's psychologist

### **Family changes**

After his involvement in the surf therapy research programme, Charlie's father went on to volunteer in other surf therapy sessions and shared his experience of working with another individual.

*The first thing I did, which was helping an old lady touch the sea for the first time in her life. This feeling that you can do something that you thought you'd never be able to do again. I love it.* –

Charlie's father

Charlie's father also began to volunteer to support other children:

*As a parent involved in this process, I must say I think of the volunteering less as a parent and more as a volunteer, it's like Charlie doesn't need my help anymore. And that's why I felt confident to become a volunteer. – Charlie's father*

Charlie's family began planning their trips around Charlie's passions:

*Being excited about something together is better, now we can't wait whether it's going to end up just being the two of us or whether the whole family. – Charlie's father*

Surfing became something they could bond over together, which Charlie's teacher recognised:

*His dad connected with him through surfing. I think that dad, and the kids also, they miss out on bonding time, especially when they're disabled. They don't really have something they both can do and bond that is always physical. – Charlie's teacher*

Other parents shared about how home life had changed:

*Rowan now is like he is a different child. At home with the family he is more open – Rowan's mother*

### **Becoming an ambassador of change**

The children were mentored by the individuals delivering the programme, and began to emulate the same actions in their own environments towards others.

*And she mentioned this other girl (a volunteer), who is the role model, and that she wants to be that for other people. – Tala's psychologist*

*Princess began motivating other girls with a similar disability to go off nappies and challenge themselves to what is possible. They tell me Thuno is also off the nappy now just one a day and Caty now too. – Princess's teacher*

Participants saw the children grow in confidence to become role models for others with similar disabilities.

*What she got out of this surfing is that now she can talk to someone in the same condition as she has and she can now motivate them to go do it because she did it and it did something great for her and has given her even more confidence. She can be a speaker to others now to motivate them and let them know they don't need to be scared. – Tala's guardian*

*That is something significant, because before she was always 'just here' (unseen). And now she wants other people to look at her and to be a role model – that is huge for her. – Tala's psychologist*

The changes the parents, guardians, and professionals observed showed that setting challenging but achievable goals can have a positive impact on children's overall health promotion. When they achieve their goals, such as weaning off using nappies, they experience a sense of accomplishment and pride, which can boost their self-esteem and overall well-being.

### 5.7.3. Theme 3: An Open Door

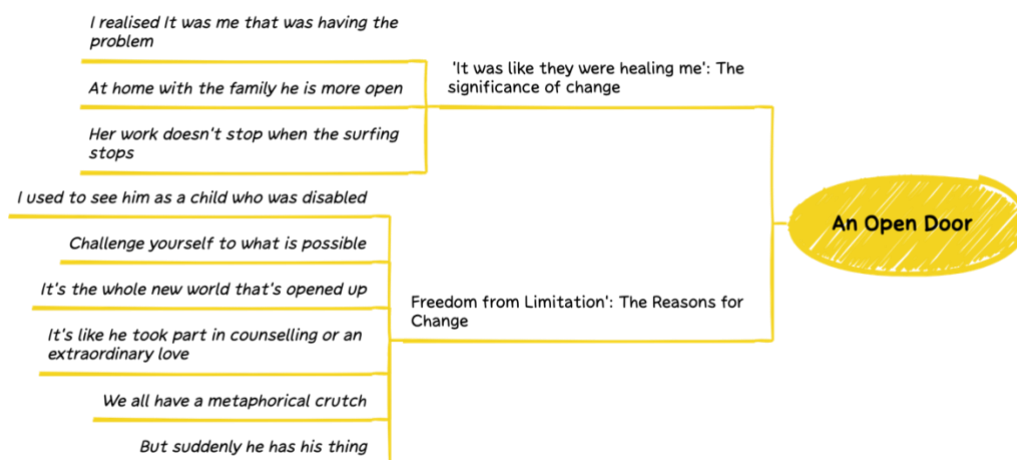


Figure 5.4: Parents, guardians, and professionals: Theme 3 with subthemes and categories

### **Subtheme 1: 'It was like they were healing me': The significance of change**

During the MSC interviews, there were many topics highlighted as being significant changes observed in the children. Discussed above were the changes observed in the psychological, emotional, physical, and social domains. Below are additional specific instances which were highlighted as significant for the participants.

#### **'I realised it was me that was having the problem'**

The reciprocity of healing was significant for parents, which was highlighted through their reflections.

*For me personally, It was me that was having a problem. I think the healing comes from all the surfing stuff. – Thabo's mother*

Thabo's mother described what the experience was like for her personally:

*It is like you are touching my heart... These changes are significant, even today, he wanted to go home alone. To me, it's important because maybe sometimes I don't see that I put Thabo in the dark, small room. Now I can see that there is a light in that room I used to put him in. – Thabo's mother*

*It was like they were healing me, they were healings for me. – Thabo's mother*

*We want to get social workers helping her and she said she wants to go surfing. When she came back from surfing, I was like wow, it was a healing process the surfing . I can't explain what that surfing did to her. – Princess's guardian*

In the weeks after the surfing research lessons were completed, Princess spoke to another girl about surfing, who then began participating in surfing lessons. When interviewing Princess's guardian a year later, she shared the experience of and the impact the surfing had on this other girl:

*Really, I just thank God, I know Princess is now the particular child we are interviewing about [her], but can you see what surfing did for Tembisi? For the kids in class, there are a lot of problems. Last*

*week, she tried to commit suicide. What is significant with her story is when they came (her family and a social worker) to fetch her, she told teacher Roshe (the psychologist), 'I'm not going home now, I first want to go surfing'. The surfing programme changed her. She said, 'if I don't go surfing, I'm not going to go home'. This surfing saves lives, she was so looking forward to it, surfing, and this surfing saves lives, it was part of her healing. – Princess's guardian*

### **'At home with the family, he is more open'**

It was highlighted that there was significant change in the children's engagement at home and within the family.

*To me, even here at home...it's like a door opened, that is really open, even outside to the world...And I see him now as if he is a grown man. – Thabo's mother*

*At home with the family, he is more open, I think too much I don't know if it is his age, he wants to know everything now. – Rowan's mother*

*I'm amazed at how far he's come in the last couple of months. When he started this journey with surfing up until now, where he's at now is like a brand new person. – Rowan's mother*

*We are not very outgoing people, we don't go out often. For me it is a struggle just to go to a taxi with him and stuff with him, we inside with school work and chatting at home. Rowan now is like he is a different child. – Rowan's mother*

Some children that competed in surfing competitions found pride in their accomplishment of participation. The competition became a highlight:

*Mama, please find the cup (medal) I won from the competition. At my front door, he decorated and put his surfing photos up for*

*everyone who comes into the house to see. (including the medal he won at the surfing competition) – Thabo's mother*

### **'Her work doesn't stop when the surfing stops'**

Princess's guardian shared about changes in Princess's school environment and the school's plans to repair the school swimming pool.

*It's not just doing that for Princess and Tala, you must see Chanel (a school professional), she is taking such pride in doing this. Her work doesn't stop when the surfing stops. Chanel is going on when she is working here. You must be careful the whole school will come. She is arranging the pool here to get them all to learn to swim. – Princess's guardian*

At home, one parent highlighted the continued benefit and significance of the surfing, stating that it allowed for longevity because the child participating had become more mobile and active in participating in transfers and movements to support his carers.

*It means that the longevity of us being able to do things, like surfing, because if he gets as big as me, then who's going to carry him out to the beach and that's a big, big change because when you're lifting a kid up and down all the time and he's a sack of potatoes. – Charlie's father*

### **Subtheme 2: Freedom from limitations: The reasons for change**

The MSC technique explores the reasons for change. Below are some of these reasons that were highlighted by the participants.

#### **'I used to see him as a child who was disabled'**

Parents and guardians began to view their children and their children's disability beyond the once perceived limitations, a process which included the development of the children's own autonomy, and their having independence and freedom to do their own actions.

*I trust him now. I don't see him as a disabled person. I was seeing him as a baby. I was talking to him as a baby. Now, I can see that he can stand for himself. – Thabo's mother*

*I see it (surfing) as a big thing in Rowan's life as a disabled child that this surfing he is doing is doing great. – Rowan's mother*

Preconceived limitations were changed, which began creating a shift in the perspectives of the participants.

*Surfing, it's not something most of the black children are doing. With this opportunity, he is starting to see himself far away with these things and he sees a brighter future for himself. – Thabo's mother*

*From the areas where I come from, we don't know a lot about surfing and when Mrs C approached me with regards to the surfing, I'm like surfing, really? These people don't have money for bread and now you want them to go surf, hey now! – Thabo's physiotherapist*

### **'Challenge yourself to what is possible'**

The participants observed that the children began challenging themselves to do what they may have previously perceived to be impossible:

*Princess began motivating other girls with a similar disability to go off nappies and challenge themselves to what is possible – Princess's guardian*

*A sense of who he is and who he is matters, he is important and it's good for him to challenge himself and to grow – Thabo's physiotherapist*

*If you have confidence in yourself, you can overcome challenges or overcome doubts that you might have about yourself. – Thabo's physiotherapist*

*I think the fact that it was a physical activity that challenged him in a physical way yet, in a safe space, gave him the confidence to want to keep coming back and push through that. Push through those challenges to what is possible. – Thabo's physiotherapist*

*He's learnt how to take the challenge head on and how to excel and how to exceed. – Rowan's physiotherapist*

*He wants to partake and he wants to get sevens. He wants to challenge his brothers with who's going to have the better report this term, which for me is great because if they are motivated themselves, it's pretty easy, it's hard to motivate someone who doesn't want to do it. – Charlie's father*

*When the coaches challenged the kids, they were motivated to do better and to try better. – Thabo's physiotherapist*

**'It's the whole new world that's opened up'**



*Image 5.5: Charlie and his father after participating in the first surf therapy session*

Past perceived limitations became new opportunities, and families were able to do things they had not previously considered as possible:

*It's the whole new world that's opened up. We're already planning birthday parties and family holidays, which are centred around going to be at the beach. – Charlie's father*

Thabo's mother shared how Thabo began contributing more and taking responsibility for himself at home:

*He is even washing underwear now. He even washes dishes. My mother used to do everything. – Thabo's mother*

Rowan's physiotherapist shared how he became more proactive during their sessions:

*He is initiating things out of his own now, someone doesn't have to tell him right we need to do this and we need to do that. – Rowan's physiotherapist*

Participants spoke about how the children's active participation in the surfing programme led to active participation and proactive behaviour changes in other areas of their lives such as at school and at home:

*His thinking has changed with regards to certain activities that he is doing and certain things that he wouldn't necessarily do. He's trying them now and it has got to do with the breaking boundaries type of thinking. – Rowan's physiotherapist*

**'It's like he took part in counselling or an extraordinary love'**



*Image 5.6: Charlie participating in the surfers' circle with his team before the first surf therapy session*

The adults spoke about the impact that the community of individuals that delivered the surf therapy programme had on the children and on them as the parents, guardians, and professionals as they learnt to put their trust in other people:

*I learnt to put my trust in other people. I learnt that it's not only me who can protect him, there are other people who also can protect him if I'm not there. It is like they (the volunteers) are touching my heart. – Thabo's mother*

Thabo's mother also described Thabo's change in a unique way:

*He opens himself like he took part in a counselling or love that is extra, an extraordinary love.*

It became evident that this community of individuals were passionately invested in delivering the programme for the children participating:

*Being surrounded by people like that just catalyses all the growth in every other area whether it's physically or emotionally or socially. The fact that everybody got your back and is showering you with love and encouragement and challenging you, like when the coaches challenged the kids, they were motivated to do better and to try better. That was a really special part of the programme that made a big difference. In terms of seeing the significant changes that we did and that we continue to see. The effects we will continue to see going forward. – Thabo's physiotherapist*

*Let's not generalise, but pretty much all the volunteers have got the same passion that I've got, as his father. They are there because they want to be there, they're not being paid to be there, and it comes across, it's very seldom that you meet a large group of very different people with kind of a similar goal. – Charlie's father*

*The impact of her being the focus and the priority for that surfing therapy session has been the turning point that has impacted her and of it all was exactly that she is important enough for someone. And through that, all these other things grew out of it. – Tala's psychologist*

*That was beautiful because for those kids really for those 6 weeks were surrounded by people who wanted to know them. Who really wanted the best for them. Who wanted them to grow. Were dedicated to encouraging them and loving them, and helping them and were stoked to be with them. – Thabo's physiotherapist*

*For someone else to make that time and to see what she couldn't see and what she felt the family didn't see. – Tala's psychologist*

*It's not just any other programme that the kids are getting a handout or just doing a task. It's so much more than that. The volunteers are loving on them and after every Friday, I felt like we were all overwhelmed by every good thing possible. And that was really special. – Thabo's physiotherapist*

#### **'We all have a metaphorical crutch'**

The parents, guardians, and professionals began to engage in the experience from a different perspective. These adults began to self-reflect on the experience and consider their own personal life contexts.

*Metaphorically speaking we all have a crutch that we rely on sometimes, and I think with him seeing that he doesn't need that as such, with regards to even on the surfboard, I saw him in videos doing that and I was thinking how is he going to stand on this surfboard and he actually managed to do that so well. I am like WOW – Rowan's physiotherapist*

*It is almost like we all have this crutch holding us back that we rely on so if I let go of this one thing, things might change for me. – Rowan's physiotherapist*

Individuals outside of the research programme began to change their perceptions of the children, which had a significant impact on the children's self-perception and overall well-being. Parents remarked on both the changes they observed and what others have observed in the perception of the children.

*I do see and I do believe that there are changes in Thabo in terms of how people are looking at him. – Thabo's mother*

### **'But suddenly he has his thing'**

It was observed that the surf therapy programme provided a sense of belonging:

*But suddenly Charlie had his thing, and it was fun for the whole family and it was really fun for him. We have made weekends of it, we have gone away, we've spent more time in the sea. And so I think having something to look forward to, especially for someone disadvantaged, is significant. – Charlie's father*

*His brothers will even have rugby practice to look forward to whereas for him, what does he really have to look forward to? It's only things like his therapy, so if we can have therapy, which involves surfing, he wants to do it and it really makes a moerse difference. He's definitely hooked on it. – Charlie's father*

The surf therapy programme provided a shared experience, which was highlighted as one of the reasons for change:

*Being excited about something together is better, so organising the next surfing outing, we can't wait whether it's going to end up just being the two of us or whether the whole family is going to come, we're going to be back there at Surfers Corner riding waves. – Charlie's father*

## **5.8. Discussion**

The objective of this chapter was to determine the changes experienced by the children with disabilities who participated in the surf therapy programme from the perspective of the parents, guardians, and professionals, who will be discussed as participants here. This provided valuable insights into the areas of most significant change, and impact of the surf therapy programme.

### **5.8.1. A Sanctuary of Self Discovery**

The theme **A Sanctuary of Self Discovery** highlighted the promotion of mental, emotional, and physical health. The subtheme 'How they think' described significant changes which the participants observed in the children's psychological state, including a mindset open to growth, independence, and confidence. The concept of a growth mindset revolves around the idea that individuals are not limited by their innate abilities, but rather have the potential to develop and improve their skills and intelligence through dedication and hard work. This belief has been extensively researched and has been found to have a significant impact on human behaviour, influencing how individuals approach challenges and setbacks (Dweck & Yeager, 2019). Dweck and Yeager's (2019) research has shown that individuals who possess a growth mindset are more likely to embrace challenges, persist in the face of obstacles, and ultimately achieve higher levels of success in various domains. This is in contrast to individuals with a fixed mindset, who believe that their abilities are predetermined and immutable, and who are therefore more likely to avoid challenges and give up in the face of adversity (Burnette et al., 2013), such as the children participating in the surf therapy programme. A shift in the children's mindset also led to their improved mental well-being, which in turn helped them to approach challenges with a positive attitude and to view failures as opportunities for growth and learning.

**Developing independence** had a positive impact on the children's well-being. Participants highlighted that, through this experience, the children began to develop a sense of agency, which included gaining control over their actions and the consequences thereof. Agency is necessary for children to live a relatively independent life, and a child's individual agency develops through interaction with their caretakers (van Nijnatten, 2010). Through participation in the surf therapy programme, this interaction was with the individuals delivering the surf therapy programme. Human agency is a concept that highlights the power of individuals to shape their own lives and the world around them. It emphasises the idea that people are not simply passive recipients of external forces, but rather active agents who can engage with and influence their surroundings through their thoughts, actions, and choices (Houston, 2010). Children were able to make their own decisions and take

responsibility for their lives, developing their autonomy. In a study in South Africa by van der Merwe and Yarrow (2020), who researched an adapted surf therapy programme that promotes meaningful participation for youth with ASD and includes specialist training for community-based programme facilitators, parents and professionals reported that mental health services can be inclusive and support all youth to become independent and reach their potential.

**Developing self-confidence** had a positive impact on the children's mental well-being. Self-confidence is an essential trait that plays a crucial role in an individual's development. It is the belief in one's ability to achieve success in the execution of a desired behaviour or task. This confidence is rooted in one's own self-assessment, believing in their skills, knowledge, and experiences to accomplish a given objective (Feltz, 2007). When individuals felt more confident in their abilities, they were more likely to take on the new challenges. In a study by van Ewijk et al. (2020) in the Netherlands, improved autonomy, self-confidence, and self-esteem were reported in interviews of parents of children with developmental difficulties participating in a surf therapy programme.

**Increased emotional health** was evident in the experiences of maturity, joy, change in self-perception, a reduction of stress, freedom, and normalising activity observed in the children. Affective states are intricate psychological and physiological constructs that encompass various underlying dimensions and have been identified as a significant source of self-efficacy (Pfitzner-Eden, 2016). These states are characterised by a combination of emotions, moods, and feelings, and can have a profound impact on an individual's behaviour and overall well-being, as was observed in the children participating.

Bandura et al. (1999) described self-efficacy as the belief individuals have in their capacity to manage their own actions and the circumstances that impact their lives. This was observed in the interviews with the parents, guardians, and professionals, which highlighted the children's maturity through the experience of participating in a surf therapy programme. A distinct attribute of a growth mindset is emotional maturity (Banono, 2015), which involves the ability to regulate one's emotions rather than being controlled by them (Joy & Mathew, 2018). Cultivating maturity can

significantly contribute to mental well-being (Joy & Mathew, 2018). This underscores the significance of developing the capacity to control one's emotions and reactions in order to cultivate a sense of emotional stability and resilience.

As the children learnt to take responsibility for their actions and make more informed decisions, they experienced greater feelings of **emotional regulation**, which is a central feature of health promotion (Gross & Muñoz, 1995). The process of developing the ability to regulate one's emotions is a significant milestone in human development (Gross & Muñoz, 1995), and is a crucial skill that allows individuals to effectively manage and control their emotions in various situations. Through emotional health promotion, participants learnt to develop self-regulation and understand how to manage their behaviours and reactions to feelings. Experiencing joy, which the children expressed through words and actions, was described as a positive emotion as children felt a sense of happiness and contentment. The change in **self-perception** led to improved self-esteem and a greater sense of self-worth, which, in turn, had a positive impact on well-being. Reducing anxiety was an important aspect of the promotion of emotional health, including an increased calm state, which occurred during and after their surf therapy programme participation. Participants frequently spoke about the freedom in the experience, physically and emotionally, for both themselves and the children, and about the activity of participating as being normalising. This further supported the children's autonomy, which can be understood as the capacity to act freely according to self-chosen plans (Marceta & Juth, 2022).

Physical health promotion through the activity of surfing was observed in the children, including overall improved health, exercise tolerance, balance, strength, posture, and increased mobility. These findings were similar to Moore et al.'s (2018) findings of parents' perspectives on surf therapy for children with disabilities, which indicate that parents perceive surf therapy to positively impact their child's physical well-being. Similar findings were also observed by Armitano et al. (2015) in the USA, who used the Brockport Physical Fitness Test to look at various physical measures such as upper body strength, core strength, and endurance pre- and post-intervention with children with disabilities, and found improvements in all areas.

The findings in chapter 4 of the children's experiences support these findings in the promotion of psychological, emotional, and physical health, which contribute to overall health promotion for children with disabilities participating in a surf therapy programme in South Africa. Findings of well-being have been highlighted in surf therapy studies around the world across various populations, and these specific findings contribute to this from the specific context of the participation of children with disabilities in a surf therapy programme in South Africa.

### ***5.8.2. Broadening the horizon***

Surfing may be perceived as a risky or extreme sport and is therefore typically not available for individuals, especially children, with special needs (van Ewijk et al., 2020). In terms of reshaping the children's worldview, the participants highlighted changes observed in how the children began to see and interact with the world. Social changes were observed in the children participating, recognising that they were able to **face and overcome** fears and challenges, which changed their outlook and perception of the world around them. By experiencing success and positive outcomes from the "scary circumstances", they were able to further continue to develop their agency. In an attempt to understand fear and anxiety in extreme sport, Brymer and Schweitzer (2013) describe participants' experience of extreme sports, revealing that they are able to experience and integrate their intense fear, which is potentially a meaningful and constructive event in their lives. Through the process, the children began to see their world differently, which highlighted their personal growth and supported their change in mindset. Facing their fears through the controlled programme delivery, and thereby evoking a natural rush of adrenaline, was linked to a positive experience, which the children found enjoyable and fulfilling. They were able to apply this to other life circumstances, finding that the same positive results occurred.

Adrenaline is a naturally occurring hormone produced by the body during times of stress, excitement, or threat. While it is often associated with negative emotions such as fear and anger, adrenaline can also elicit positive and exhilarating feelings when experienced in the context of something enjoyable or fulfilling. According to Brymer and Schweitzer (2013), participants in extreme sports may initially feel fear but are

able to overcome it and undergo a transformative experience similar to the experiences described by the children in this study.

The desire for an adrenaline rush is not the main motivator; rather, it is the ability to prevent the effects of adrenaline from ruining a moment of independence in which the individual can undergo a new sense of self, which in turn overcomes fear (Brymer & Schweitzer, 2013). The experience of fear is therefore much more intricate than simply experiencing an adrenaline rush, as participants demonstrate their ability to control fear, allowing them to establish a sense of identity and individuality (Brymer & Schweitzer, 2013). This highlights that the effects of adrenaline can be harnessed in a positive way, leading to growth and self-discovery. Finding ways to explore experiences of adrenaline for children with disabilities is limited; however, through participation in the activity of surfing, they were able to achieve this.

The process of overcoming challenges and developing a more positive outlook on life was made possible through the trust developed between the children and the individuals delivering the surf therapy programme. **Trust** was a multi-directional experience. The children developed trust in the individuals delivering the programme, while the participants simultaneously developed trust in the individuals delivering the programme and trust in their children's ability and capabilities in other areas of their lives.

There was a significant change in how the children interacted with the world, including their **increased engagement at school**, at home within the **family**, and within their community. They became ambassadors of change. Change within the family was discussed, more so than the changes experienced in interactions between the children and the professionals. It was highlighted as significant that the children became **ambassadors of change**, motivating and supporting other individuals with similar disabilities to them. Similar findings of significant increased pro-social behaviour were found by Gomes et al. (2020), while Moore et al. (2018) highlighted participation in a surf therapy programme for children with disabilities as an opportunity for family bonding. Anecdotal findings from Armitano et al. (2015) showed that positive outcomes were observed from the surfing intervention by the researchers, surf instructors, and parents, which highlighted increased self-

confidence, gains in social development by interacting with the volunteer surf instructors and other participants, and decreased anxiety for children with disabilities participating in a surf therapy programme in the USA.

As discussed in chapter 4, how children began to observe the world because of their experience changed, including their view on their future outlook in life. In this chapter, a similar finding was observed not only for the children but also for the participants. Parents shared how they had previously lived life in fear, but letting their child participate in the programme allowed them to face the circumstances and build trust relationships, both of which had positive outcomes. In time and through repeated exposure and the dynamic process of positive adaptation to significant threat or adversity, participants' worldviews began to change.

### **5.8.3. An Open Door**

Healing was significant for participants on a personal level, and it went beyond what they observed in the lives of the children. They also recognised the healing properties surf therapy provided for other children participating in surf therapy programmes outside of the research, particularly those with disabilities. Benninger et al. (2020) suggested that surf therapy programmes utilise the physical activity of surfing as an anchor to the healing process. Harris (2015) explored the notion that therapists can facilitate the healing of the mind-body split and help those struggling with trauma and addiction by using surf therapy. While this research was not specifically with children with disabilities, the concept of participant healing has been highlighted in other contexts (Harris, 2015).

#### **'At home with the family, he is more open'**

It was significant that the participants changed how they saw the children as the children progressed through the programme. Parents highlighted the children's **proactive behaviour** changes outside of the surfing environment, such as contributing to household chores, supporting engagement in activities, actively participating together as a family, and participating in support with lifting, moving, and transferring themselves.

### **‘Her work doesn’t stop when the surfing stops’**

These highlights show the impacts of the changes, which moved beyond the surf therapy programme. The adult participants continued to find ways to support change in other areas, such as becoming volunteers and fixing the school pool to accommodate a learn-to-swim programme.

### **Freedom from limitations – The reason for change**

The surf therapy programme provided a new perspective for participants, including freedom from limitations and a new realisation of what is possible. Individuals tend to engage in tasks or activities to the extent to which they perceive themselves to be capable (Bandura et al., 1999). Self-efficacy theory suggests that the fear of facing potentially unpleasant events largely stems from a perceived inability to effectively cope with them. When individuals believe they have the power to influence the outcome of potentially harmful situations, their fear diminishes. This sense of control not only lessens the apprehension associated with anticipating unpleasant events, but also improves performance when confronted with them.

As a result, the numerous perceived constraints on one's capabilities are diminished, opening up new possibilities for the future and emphasising the importance of embracing change. This theory highlights the impact of one's belief in their own abilities and the potential for personal growth that comes with it. In essence, self-efficacy theory underlines the significance of confidence in one's capacity to overcome challenges and the role it plays in shaping our perceptions and experiences. It underscores the power of self-belief in the children's abilities to shape responses to difficult situations and foster resilience in the face of adversity.

The **freedom from limitations** was highlighted not only for the children participating but also for the broader context of participants and other people that the children interacted with, such as friends, teachers, and members of the community.

Participants described what their lives looked like beyond the perceived barriers they had known such as **their child's disability** and participation in the sport of surfing for **black children** living in South Africa, including those from **marginalised** communities. G. Thompson (2011) brought attention to the complex historical and social dynamics present in South African coastal surfing cities, pointing out that these cities have been deeply affected by their apartheid past, particularly in the

context of the sport of surfing. The dominance of white males in surfing has been a significant factor, as the sport was initially perceived as a primarily white activity. This notion of exclusivity was further reinforced by the beach culture, which was supported by social and local legislation. Cape Town, in particular, has been recognised as an apartheid city, with unequal access to leisure and sporting facilities, including beaches that were exclusively reserved for white people.

G. Thompson (2011) highlighted that individuals in the middle and upper classes, who had greater financial means, were able to access these privileged locations through private transport, further perpetuating the segregation in beach access. The restricted access to coastal areas for non-white individuals also propagated stereotypes, such as the belief that "blacks don't swim". Thompson's research sheds light on the intricate ways in which the legacy of apartheid has influenced and continues to shape the coastal communities in South Africa.

New realisations of significance were highlighted by the participants, including how children began challenging themselves to do what may have once been perceived as impossible, such as weaning oneself off nappies. Most children with disabilities face numerous barriers to activities every day. This programme highlighted the significance of **challenging oneself to what is possible** and viewing one's personal outlook differently by creating a place where participants can look beyond the barriers. In Moore et al.'s (2018) study, parents described the participation as a normalising opportunity for the children, who are usually excluded from these activities and other social events. In this research, the **new world** that was opened was not only for the children but everyone involved. Past perceived limitations became new opportunities, and families were able to do things they had not considered or regarded as possible previously.

**The extraordinary opportunity for engagement** with the individuals delivering the surf therapy programme provided the children with focused attention and love and an experience akin to counselling. The experience of participation for the parents, guardians, and professionals provided a unique opportunity for self-reflection. Self-awareness is a crucial aspect of personal development and growth. Central to this process is the act of reflecting on one's sense of self, a concept which is built on a

foundation of beliefs and perceptions about one's own abilities, characteristics, and outlook on life. These beliefs, also known as schemata, play a crucial role in shaping our behaviours, decisions, and interactions with others, ultimately guiding our sense of identity (Johnson et al., 2002). As one navigates through life, one's sense of self continues to evolve and adapt based on our experiences and the feedback received from one's environment. The experience of participating in the surf therapy programme changed participants' attitudes, behaviours, and social interactions.

Being part of the **surfing lifestyle, culture, and tribe created a sense of belonging** for the children where everyone was welcome and included. The shared excitement of the experience together was highlighted as one of the reasons for change in families.

This chapter highlights how a surf therapy programme has the potential to bridge multiple barriers faced for children with disabilities and their families living in South Africa. It highlights how a surf therapy programme supports elements of the CBR matrix such as health promotion and rehabilitation, social inclusion through personal assistance, relationships and family, and participation in the activity of recreation and sport through surfing. In terms of livelihood, the surf programme supports advocacy, communication, and community mobilisation for children with disabilities (WHO, 2010). Capturing the voices and experiences of parents, guardians, and professionals has provided valuable insights to inform the programme development and implementation of surf therapy for children with disabilities in South Africa, which will be discussed in chapter 7.

## **5.9. Limitations**

The concept of significance was sometimes misunderstood, and, as such, one of the interview questions needed to be reframed. Some participants found it challenging to describe the difference between the domains of psychological, emotional, physical, and social significance when the questions were asked. Not many negative experiences were elicited from the stories, besides the experience of jealousy in the dormitory when one participant returned after a surf therapy session. The question regarding negative experiences was asked in the context of the participants'

observations. However, because they were not directly involved in the six surf therapy research sessions, they may not have linked any direct negative observations to the actual programme delivery.

Significance of change:

- While benefits were observed, there was no control group of children who did not continue surf therapy participation after the six-week programme was complete.
- Limited negative programme feedback was reported. The only negative feedback was from a guardian, who shared about an instance of jealousy at school for the child participating from another child that was not participating.
- It may be possible that the children only highlighted the positive changes as they wanted to continue surfing. This limitation could not be overcome because the option to continue was made available based on the right to continue and the principles of beneficence in the research. Highlighted as part of the risks and benefits in chapter 1, at the start of the programme, the children participating were invited to continue with regular surf therapy sessions at no charge once the research had been concluded, should they wish to.

Reasons for change:

Once it had been established that change had occurred, participants were asked about the reasons for the change.

- During the parent, guardian, and professional interviews, they were asked the following question: “were there any other reasons or activities during this period that can contribute to this change besides surf therapy participation?” None were highlighted. This question may need to be rephrased as participants may have misunderstood the question.
- It was not established if the children were receiving any other forms of treatment or care during this time, which was highlighted in previous literature suggesting that studies fail to assess or statistically account for other treatment use (Benninger et al., 2020).

## **5.10. Recommendations and planning for further action**

Participants highlighted the lack of awareness of programmes such as this for children with disabilities in marginalised and under-resourced communities. It was suggested that more awareness campaigns be made available to include more children with disabilities. Participants also suggested contacting schools for children with disabilities to make these programmes available for more participants.

In future research, more direct questions relating to the significance of change within the context of the lives of the parents, guardians, and professionals should be asked. This is because the focus of the questions was on the significance of change in the children, where the answers unexpectedly highlighted changes in the participants – parents, guardians, and professionals – and surrounding community members.

## **5.11. Reflective summary**

Through this experience, I realised that I had underestimated the impact the programme would have on the parents, guardians, and professionals. The process created a space for self-reflection and self-awareness for them, both within their own lives and their lives in relation to the children participating. I found it significant that many participants became emotional when reflecting on their interviews through member checking, and it provided them with the opportunity to pause and reflect on how change can happen. One professional compared it to the starfish story, the moral of which is that you may not be able to help all children, but to one child your input can mean the whole world and that makes it worthwhile. Another professional expressed how she had previously never allowed herself the time to stop and reflect on the changes that she witnesses in her capacity as the school psychologist and the significance thereof.

## Chapter 6: *The Ripple Is Longer Than You Think: The Experiences Of Individuals Delivering A Surf Therapy Programme For Children With Disabilities*



*Image 6.1: Volunteers in the surf therapy*

This chapter presents findings and discussion on objective 4 of the study, which was to identify the experiences of individuals delivering a surf therapy programme for children with disabilities.

### **6.1. Context of the study**

This chapter was not initially included in the research proposal, but it became evident that including the voices of the individuals delivering the programme would further contribute to the rich picture of the experiences of participation. It was also evident that in existing surf therapy research, the voices of the individuals delivering the programme and their experiences and perspectives have not been explored in detail. This chapter explores the experiences of the individuals delivering the surf therapy programme.

## **6.2. Methodology**

This chapter describes a participatory evaluation method that engaged programme and community stakeholders to map the chain of effects resulting retrospectively and visually from a surf therapy programme, which is a complex collaboration.

### **6.2.1. Sample**

Twenty people that delivered the surf therapy programme for the children participating in the research were invited to participate in a focus group session. Participants included volunteers, surf instructors, and specialist volunteers.

### **6.2.2. Inclusion and exclusion criteria**

#### ***Inclusion criteria***

- Must be part of the volunteer team delivering surf therapy during the period of 2021-2022
- Specialist volunteers were physiotherapists, occupational therapists, teachers, or medical practitioners in surf therapy
- Must have participated in a minimum of four surf therapy sessions
- Must be able to converse in English
- Must be willing to have the focus group recorded using an audio recording device

#### ***Exclusion criteria***

- Must be over the age of 18 years
- Must not be a family relative of any of the child participants

### **6.2.3. Recruitment**

The volunteers delivering the surf therapy programme were recruited via an information flyer shared at an existing surf therapy programme in Muizenberg. Volunteers who were interested contacted the researcher. Volunteers required skill sets and experience in a surf therapy programme to ensure the participants safety was prioritized.

The Individuals participating in the focus group discussion were contacted by my co-supervisor, Dr Yumna Albertus, via email. The email included an information sheet about the research (Appendix Q). Once they agreed to participate, they were asked to complete an informed consent form (Appendix R).

#### **6.2.4. Participant demographics**

<b>Designation</b>	<b>Number of attendees</b>
Qualified surf instructors	2
Programme co-ordinator and disability specialist	1
Head of surf therapy volunteers	2
Volunteer qualified occupational therapist	1
Volunteer qualified physiotherapist	1
Volunteer student occupational therapist	3
Volunteer student physiotherapist	0
Volunteer qualified teacher	1
Volunteer participant with a disability	2
Support volunteers	7

#### **6.3. Data gathering methods**

In a focus group setting using Ripple Effects Mapping (REM), this method employed elements of appreciative inquiry, a participatory approach, interactive group reflection, radiant thinking (mind mapping), and qualitative data analysis (Chazdon et al., 2017). REM is a very engaging and organic process that allows people to think beyond the obvious outcomes. It is a low-cost method of gathering information while capturing the impacts of complex work such as a surf therapy programme (Kollock et al., 2012) and thereby providing rich narrative detail (Chazdon et al., 2017). It provides a less structured, open-ended engagement process for the participants while using a highly visual mind map which allows the participants in the focus group to see the ripples of their work on various sectors of the community (Chazdon et al., 2017). However, when considering the limitations, a risk of bias in participant selection and data gathering

needs to be carefully considered (Kollock et al., 2012). During the peer-to-peer interviews, interviewers may not have had formal training into interview techniques, moving away from the main topics and using leading questions which they may have had a vested bias in (Chazdon et al., 2017; Patton, 2002; Yin, 2003). The messiness of the map that is drawn up through the process may make it difficult for participants or a data capturer to decipher or understand the complex relationships between multiple variables (Chazdon et al., 2017).

The participants attended a two-hour focus group discussion which used REM to facilitate participation. The REM sessions were facilitated by Dr Zuzana Matousova-Done, a highly experienced disability consultant and experienced surf therapy coordinator who has also delivered numerous surf therapy programmes. The focus group discussion was recorded using a digital audio recording device. I removed myself from the facilitation of the focus group, but was involved in the process of coding for themes.

REM is a participatory qualitative tool recognised for being appropriate to use in community settings (Washburn et al., 2020), and is appropriate when the programme or intervention is complex and involves a wide range of participants (Chazdon et al., 2017; Emery et al., 2015). Because ecological approaches incorporate interacting contexts and recognise the role of the perspectives of all participants, the focus group included those who were engaged in the delivery of the surf therapy programme in weekly sessions to construct meaning from the context. The focus group was conducted in a private setting in a function room in Westlake, Cape Town, to ensure the privacy and confidentiality of the participants could be protected (Washburn et al., 2020).

REM offers a visual representation of the broader impacts and interconnectedness of interventions and allows for a holistic understanding of the diffusion of change and the identification of unexpected outcomes. Consequently, it requires technical skills to create visual maps and is resource-intensive in terms of time and participant engagement. REM has been used widely in the fields of community development and to evaluate participatory programmes and document impact (Washburn et al., 2020). It is a form of mind mapping, also described as radiant thinking, which is a

diagramming process that represents connections hierarchically (Eppler, 2006). Sessions are typically conducted with between twelve and twenty participants.

REM consists of four main elements, namely appreciative inquiry, a participatory approach, group interviewing with reflection, and radiant thinking.

1. Appreciative inquiry: Ripple effects mapping sessions begin with participants engaging in a process of interviewing one another through a sequence of Appreciative Inquiry (AI) questions. AI is characterised as collaborative, allowing participants to search for the best qualities in the individuals participating, the organisation they are participating in, and the world around them through the process. This process fosters an atmosphere of inquiry, creativity, and advancement (Cooperrider & Whitney, 2005).



*Image 6.2: Focus group peer-to-peer interviews*

- (1) A participatory approach: The participatory evaluation approach in REM, as proposed by Chazdon et al. (2017), offers a novel and effective way to engage programme stakeholders in the evaluation process. Unlike traditional evaluation methods, this approach views stakeholders as active participants rather than passive recipients of evaluative information. By actively involving stakeholders, the participatory approach ensures that evaluation results are not only relevant but also useful for programme stakeholders, particularly community-based organisations (Patton, 2002).

- (2) Interactive group interviewing and reflection: This is conducted in two stages. Stage one is through peer-to-peer interviews and reporting, and stage two is during group reflection. REM is a valuable tool that relies on interactive group interviewing and reflection (Chazdon et al., 2017). This method offers several practical advantages to gain a deeper understanding of programme impact and participant experiences. One of the primary benefits of REM is that it allows participants to use their own words to describe their experiences, without a facilitator making prior assumptions. This can provide more authentic and nuanced insights that may be missed in traditional data collection methods. REM enables the collection of in-depth knowledge, which can be crucial for understanding the context in which an intervention or programme is being implemented. By using open-ended questions and interactive group discussions, REM facilitates the generation of new knowledge and insights that may not emerge through closed-ended surveys or other data collection methods.
- (3) Radiant thinking: The fundamental concept of REM is radiant thinking (Buzan & Buzan, 2006) and the mind mapping process. It uses mind mapping to visually depict the chain of effects resulting from a programme.

**The focus group was conducted using the following format:**

The introduction included a general welcome and brief description of what to expect. Ten minutes were spent providing a more detailed overview of the evening. The full agenda and facilitator guide and script are provided in appendix S.

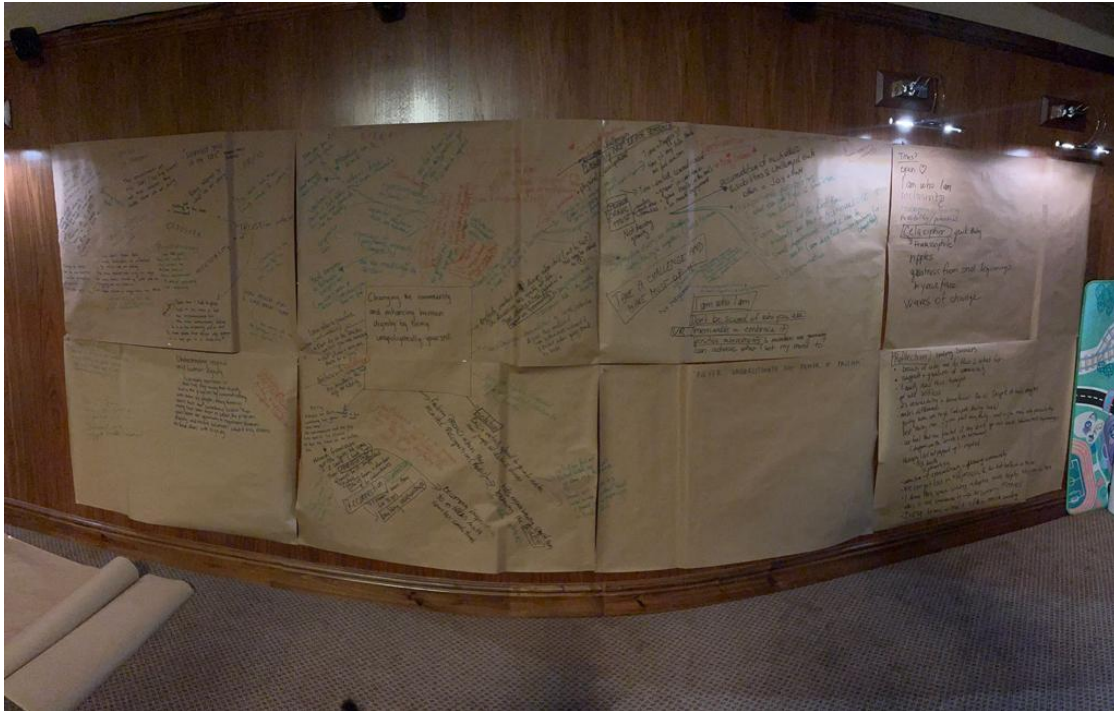
Appreciative inquiry and a participatory approach took part in two stages, which included the peer-to-peer interviews followed by group sharing of the interview responses, and then group reflection. Interviews followed a structured approach that is regarded as preferable for minimising interviewer effects and conducting a cross-sectional analysis to recognise themes across a set of questions (Yin, 2003).

Stage one lasted approximately 60 minutes. During this stage, the individuals were divided into pairs for peer-to-peer interviews. About 15 minutes were allotted for the interviews, allowing each participant roughly seven and a half minutes to interview their partner. During these interviews, participants asked one another a series of pre-

prepared open-ended questions, which had been printed on a piece of paper. The questions were:

1. Can you share how your work has made a difference in the community?
2. Please share a story about the programme.
3. Tell me a story about how you have used the information received in the programme.
4. Is there anything you are proud to share about what you have learnt?
5. List any achievements or success you gained/achieved based on your learning through the programme. What made them possible?
6. Are there negatives or downsides of the programme that you can speak to?

Everyone returned to the group and each pair was given the opportunity to share one selected story from each interviewee. They went around the room until all the stories had been shared and everyone had had an opportunity to participate. Participants were invited to add to each other's reports, eliciting stories that emerged from focusing on a particular outcome. Each set of follow-up stories created the ripple. The facilitator used a large sheet of paper to document the conversation. During the session, the stories were written up as rippling out onto the paper. The group's shared information helped the group themselves come up with the main topic for the centre of the map (see image 6.3 below).



*Image 6.3: Mind map during the focus group*

The facilitator and participants worked together to identify the effects or ripples that were visualised in a mind map. The second stage included reflection (see image 6.4 below) and closing, in which each person was asked to reflect on the mapping process. Once the session had been completed, the interview notes were handed to the facilitator.

Three distinct methods for facilitating and conducting REM sessions include web mapping, in-depth rippling, and theming and rippling (Emery et al., 2015). The in-depth rippling method was used for facilitating and conducting the REM sessions for this study, whereby the group focused on the deepest and most impactful chain of events (Chazdon et al., 2017; Emery et al., 2015).

During the REM process, participants used their own words to describe their experiences without the facilitator making any assumptions. During this process, an in-depth knowledge was gained about the participants' experiences during the programme that could have otherwise been missed if using closed-ended questions. The facilitator asked participants not to deviate from the interview protocols and encouraged them to use active listening and take notes about each other's responses.

During the introduction, the facilitator practiced an active listening exercise as an example. This assisted in increasing the rigour of the interviews as it was unlikely that any of the participants would have known how to effectively conduct interviews. As participants shared their replies to the interview questions, they were able to add and build on each another's thoughts to generate ideas collectively, which in turn led to new insights and the identification of common themes during the process (Chazdon et al., 2017). After the peer-to-peer interviews and group sharing, there was a group reflection process which was led by the facilitator. A mind map was used to capture causally linked chains of effects and map them in one place collectively. During this process, the mind map was drawn (see Figure 6.1 below).

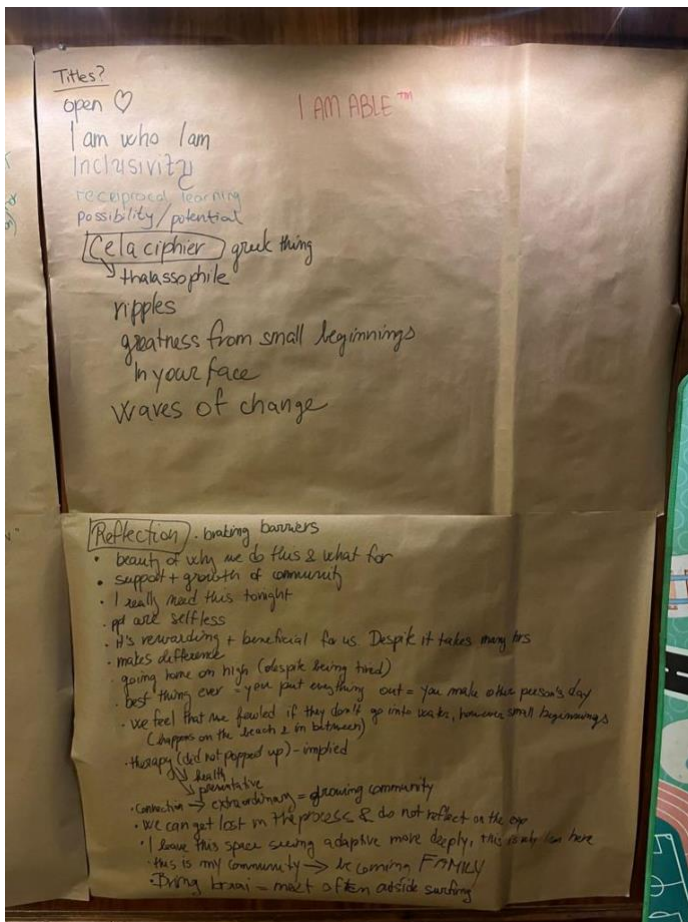


Image 6.4: Reflections from the focus group

## 6.4. Data analysis and management

The facilitator used a manual mapping process where a mind map was completed by hand (Chazdon et al., 2017; Washburn et al., 2020). This mind map was transferred

into mind mapping software called Xmind, which was then exported into a spreadsheet where the data was coded. An inductive coding process was done by the researcher using the mind map and open codes developed during the REM process. This inductive analysis process was used to code the data without seeking to fit it into any pre-existing coding frame or my preconceptions as the researcher (Braun & Clarke, 2006). Triangulation occurred by comparing information on the handwritten mind map with the answers from the interviews completed by the participants and the digital audio recordings. The electronic mind map was created to ensure that all the information shared had been captured. Using thematic analysis, coding was completed soon after the mapping session to ensure an accurate and comprehensive evaluation of the session. Themes, subthemes, and categories from the codes were identified (see table 6.1 below), and I then went over the themes to interpret the patterns (Braun & Clarke, 2006).



## 6.5. Ensuring rigour and trustworthiness

I discussed how rigour and trustworthiness were ensured for this chapter in chapter 3. During the coding process, the facilitator assisted me as the second coding evaluator to increase the reliability of the coding results.

## 6.6. Ethical considerations

I discussed the ethical considerations for this chapter in chapter one.

## 6.7. Findings

Four main themes emerged:

**Theme 1:** *It is both a learning and a teaching experience:* Highlighting skills development and mentorship for the individuals delivering the surf therapy programme, including the unique qualities of these individuals.

**Theme 2:** *Being unapologetically who you are:* Experiences of positive affective behaviour.

**Theme 3:** *View differently abled differently:* Multidirectional interaction that led to transformational changes in how disability is viewed.

**Theme 4:** *Our ripple is longer than we think:* The positive influence of an individual's actions that continues to have an impact after the initial act of service, and the implications and impact of a surf therapy programme on a community.

Table 6.1: Findings reflecting the categories and subthemes that make up the themes

The Ripple Is Longer Than You Think: The Experiences Of Individuals Delivering A Surf Therapy Programme For Children with Disabilities		
THEME	SUBTHEME	CATEGORY
It is both a learning and a teaching experience	First-hand experience of what it's like to have a disability	Training for volunteers
		I want to learn to help people and make connections like you do
	We are a diverse group of people, like-minded, goal-orientated, collaborative	Multidirectional interaction
		Never underestimate the power of passion
		Welcome Challenges
Being unapologetically who you are	I am who I am	With gratitude we serve
		Love
	Small beginnings happen on the beach and in between	Screw it, this is me
		We are breaking down personal barriers
		It's more than surfing, we are able to express ourselves in words
View differently abled differently	Being seen as more than 'something broken'	It felt like massive group therapy
		Transformative thinking
	Inclusivity feels like normality	Multidirectional Trust
		Adults with disabilities that participate in surf therapy become volunteers
		Become spokesperson within community
Our ripple effect is longer than we think	This is my community, my family	Understanding respect and human dignity
		Evolution of fear to confidence
		Silver lining (effects) of COVID-19
		We are just two people with different disabilities, kicking the football
	She speaks of adaptive surfing through her lived experiences	Building relationships
		Bystanders
		Families
	I didn't realise I needed this until I was here	Volunteers
		Broader Community
	It's both healing and preventative	Feeling Free
		Occupational possibilities
		The happiest time of her life
So many personal needs are fulfilled		
		I know I'm making a difference
		We are doing something right
		We underestimate the importance of participation being awarded
		Though this programme, disability is not a death sentence



Figure 6.2: Individuals delivering the surf therapy programme: Main themes

### 6.7.1. Theme 1: It is both a learning and a teaching experience

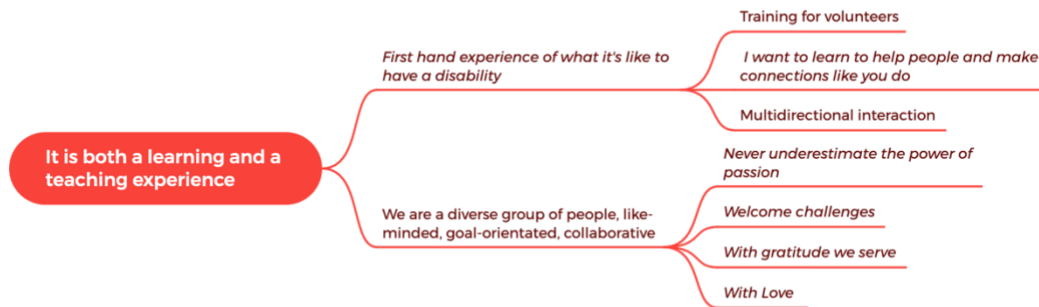


Figure 6.3: Individuals delivering the surf therapy programme: Theme 1 with subthemes and categories

#### Subtheme 1: First-hand experience of what it's like to have a disability

Skills development and personal skill mastery for the participants occurred through learning new skills, teaching the applied skill, being mentored, and becoming a mentor for the individuals delivering the programme.

#### Training for volunteers



Figure 6.4: Category: Training for volunteers

Before the programme started, the participants had surf-like training, which provided them the opportunity to experience what it feels like to surf with a disability. They were able to surf in a similar way to a visually impaired participant, and one volunteer shared that she would “never forget that moment”. It also supported participants’ personal physical development.

Training provided an opportunity for learning. There was a realisation that standing on the surfboard is not the measure of success; sometimes, a volunteer felt like they had failed the child because the child had not reached the water’s edge during a session, but they were encouraged that the child did the following session. Through training, volunteers learnt that their influence and body language have an impact on the team. The training therefore provides opportunity for structured and unstructured learning about how portraying oneself is important.

**“I want to learn to help people and make connections like you do”**



Figure 6.5: Category: Mentorship for volunteers

Mentorship of the less experienced volunteers (mentees) by those with more experience (mentors) played a crucial role in the programme, as it allowed the mentees to learn from their mentors, gain insights into effective approaches, and develop the necessary skills and qualities to make a positive impact on others. The mentorship supported the mentees’ own personal growth and development journey, and provided a safe space to ask questions, watch and admire the skill of others, learn from one another, share knowledge and skills, and foster an environment of continuous improvement and growth. The mentorship and whole programme

experience taught the mentees what it means to treat others with dignity through reciprocal learning. The statement *"I want to learn to help people and make connections like you do"* reflects a desire for mentorship and the recognition of the valuable skills and abilities demonstrated by the mentors. Deep admiration, appreciation, and the creation of meaningful connections highlighted a recognition that the mentors possessed qualities and skills that the mentees aspired to develop in themselves. Observational learning enhanced the mentees' personal ability to help others and establish meaningful connections. The interactions between the mentors and mentees provided positive support and guidance within the community of individuals delivering the surf therapy programme. All of these individuals were committed to personal and professional development, including **building relationships** and providing **mutual support** that contributed to collective growth and the effectiveness of the surf therapy programme, making a difference in the lives of the children.

The mentorship experience provided the opportunity for mentees to gain confidence and transfer this into other areas of their lives. The statement *"skills they learnt as a facilitator gave me self-confidence in my daily life"* speaks to the personal growth and empowerment that volunteering can provide. By taking on this role, skills and qualities such as leadership, communication, problem-solving, and adaptability were developed. These skills are not only valuable within the context of the surf therapy programme but have broader applications in the mentees' daily life. The skills learnt enhanced their ability to effectively navigate challenges and communicate with others in their personal and professional interactions. The above statement highlights the significant positive impact experienced by the participants and underscores the value of volunteering to develop skills, grow personally, and gain a stronger sense of self-assurance.

### **Multidirectional interaction**

The multidirectional interactions and the relationship between the *"surfers and volunteers regardless of ability or background"* were discussed at length by the participants.



Figure 6.6: Category: Multidirectional Interaction

**Subtheme 2: We are a diverse group of people, like-minded, goal-orientated, collaborative**

Participants highlighted the unique qualities they possessed as the individuals delivering the surf therapy programme, and described themselves as a diverse group of people who are like-minded and goal-orientated, and work together collaboratively. These qualities included being passionate, welcoming challenges, serving with gratitude, and the impact of love. These characteristics were encompassed in one volunteer’s sharing “*you need to have a calling to be here*”.

**Passion**



Figure 6.7: Category: Passion

## Challenges



Figure 6.8: Category: Challenges

## Gratitude



Figure 6.9: Category: Gratitude

## Love

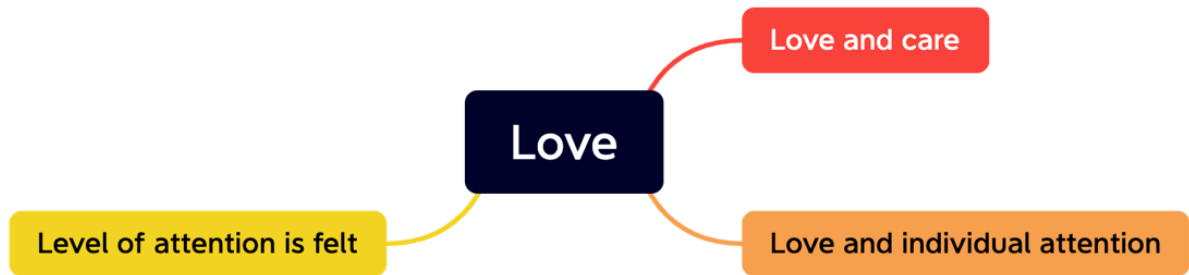


Figure 6.10: Category: Love

Participants frequently spoke about the love and care they gave to one another, and the individual attention they paid to the children. The reference to "unconditional love" suggests that the love and support the children received from the individuals delivering the surf therapy programme went beyond expectations or conditions. The depth of care and acceptance of the children was felt, which further amplified the children's sense of belonging within the surf therapy programme.

### 6.7.2. Theme 2: Being Unapologetically Who You Are



Figure 6.11: Individuals delivering the surf therapy programme: Theme 2 with subthemes and categories

#### Subtheme 1: I am who I am

Affective behaviour refers to the ways in which our emotions, moods, and feelings influence our behaviour and actions. It focuses on how our affective states such as our emotional experiences impact the way we interact with the world around us.

Through this experience, the individuals delivering the programme were able to reflect on how their emotions, moods, and feelings influenced the behaviour and actions of both themselves and the children participating. They were also able to practice their own personal self-acceptance and experience inclusion.

### 'Screw it, this is me'

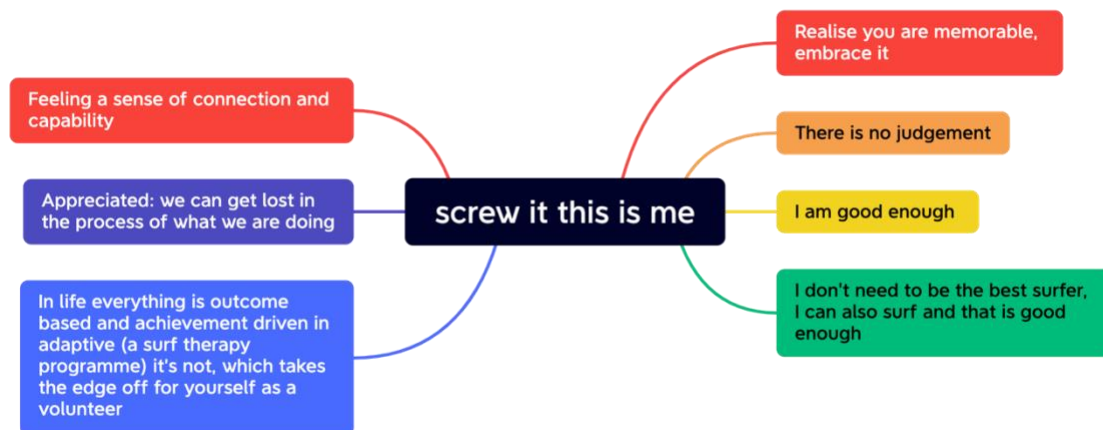


Figure 6.12: Category: Screw it, this is me

Participants expressed the ability to realise self-acceptance, sharing how the surf therapy programme was a space of non-judgement for everyone involved. Self-acceptance was embraced, along with the removal of fear in trying to be someone they are not. When a participant expressed, "Screw it, this is me. I am who I am", it became a powerful affirmation of self-acceptance and authenticity, taking a personal stand not to conform to societal expectations or be influenced by the judgments and opinions of others in order to not compromise their identity or values. By declaring "this is me", this participant acknowledged and embraced their individuality and uniqueness, celebrating their genuine self, including their strengths, weaknesses, quirks, and imperfections. The personal statements of self signified a powerful moment of self-realisation and self-empowerment for many participants, and using words such as "living authentically" and "unapologetically" became a central theme for the participants during the focus group.

The ability to deliver a surf therapy programme provided an opportunity for the participants to participate without measurement or outcome. A participant shared that

*“in life, everything is outcome based and achievement driven, in the surf therapy programme it’s not, which takes the edge off for yourself as a volunteer”*. This conversation led to another participant confidently stating how she realised that *“I’m good enough”*. The surf therapy programme focus is not solely on outcomes and achievements, which reflects a profound shift in perspective and a more fulfilling volunteer experience. In many aspects of life, individuals often feel the pressure to constantly strive for specific outcomes and achievements. This outcome-based and achievement-driven mentality can create a constant sense of comparison, self-doubt, and the need for external validation. However, the participants recognised that their participation in a surf therapy programme offers a different approach. Recognising this significance, participants were able to let go of the pressure to constantly prove themselves and instead find joy and fulfilment in the process itself and fully immerse themselves in the present moment, connecting with the children on a deeper level.

### **‘We are breaking down personal barriers’**

Volunteers spoke about the barriers to their own perceptions of themselves that they are breaking. Accepting that being different is a strength and an advantage.

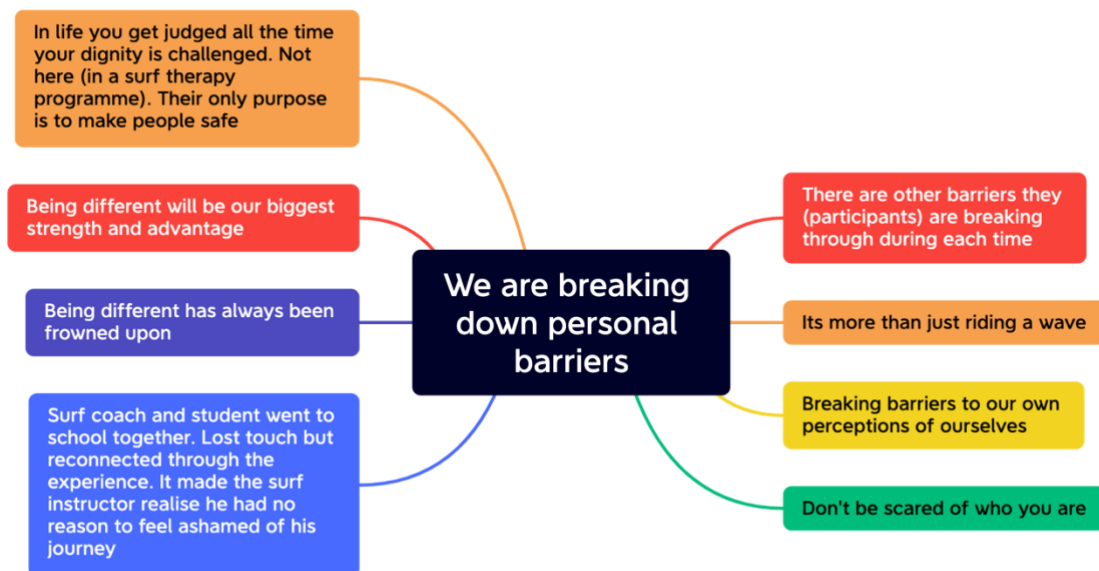


Figure 6.13: Category: We are breaking down personal barriers

*“In life, you get judged all the time, your dignity is challenged. Not here. Their only purpose is to make people safe”.* This statement was expressed by a participant who is visually impaired and who also became a volunteer. The participant was highlighting the transformative and inclusive nature of the environment created by the surf therapy programme. She acknowledged the harsh reality that individuals often face judgment and have their dignity challenged in various aspects of life. This could refer to societal prejudices, stereotypes, or discriminatory attitudes that can undermine one's sense of self-worth and dignity.

The programme provided a safe, non-judgmental space where participants can be free from societal expectations or biases. By creating a space where dignity is preserved and upheld, the surf therapy programme becomes a source of empowerment and validation for participants. It allows them to experience a sense of worth, acceptance, and belonging that may be lacking in other areas of their lives. The volunteer's statement underscores the importance of creating inclusive and supportive environments that prioritise human dignity, recognising the profound impact that such an environment can have on the well-being and self-esteem of all individuals. The participants' statements emphasised the programme's commitment to fostering inclusivity, respect, and acceptance, allowing everyone involved to experience a sense of dignity and empowerment that could positively impact their lives both within and beyond the programme.

**Subtheme 2: Small beginnings happen on the beach and in between**

**‘It's more than surfing, we are able to express ourselves in words’**



Figure 6.14: Category: *It's more than surfing*

Spaces such as the surfers' circle provided opportunity to talk and engage with each other as a community. The surfers' circle was significant for providing an opportunity to do "more than surfing", with participants using this opportunity to express themselves.

### 'It felt like massive group therapy'



Figure 6.15: Category: It felt like massive group therapy

Participants used many descriptive words and shared experiences comparing the overall experience positively to group therapy, not only for the children participating but also for the individuals delivering the surf therapy programme.

## Transformative thinking

Transformative thinking was discussed in both the culture of surfing and disability.

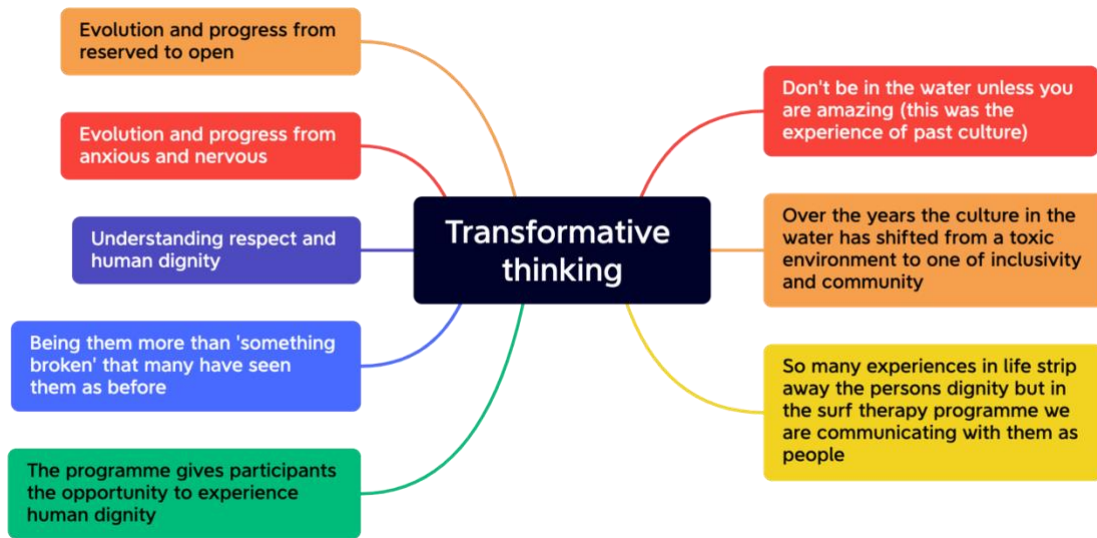


Figure 6.16: Category: Transformative thinking

Transformative thinking for the children and participants was highlighted in many areas, including that, in the past, surfing was perceived as an exclusive activity where learners were not welcome, and it was predominantly considered a male sport. A participant shared the children's realisation that they were "*more than 'something broken' that many have seen them as before*", emphasising the impact of the surf therapy programme on challenging negative perceptions and stereotypes associated with individuals with disabilities. The participants expressed how the programme changed their attitudes and prejudices towards persons with disabilities. The above quote highlighted the importance of treating everyone as a whole, multifaceted individual who deserves dignity, respect, and recognition.

## Multidirectional trust

The participants expressed a deep understanding of the trust relationships which they developed with each other and the children as part of the programme delivery. One participant said the following about their experience of participating in a surf-like training session: "*The first time I had to place trust in my team, I felt the unconditional love*".

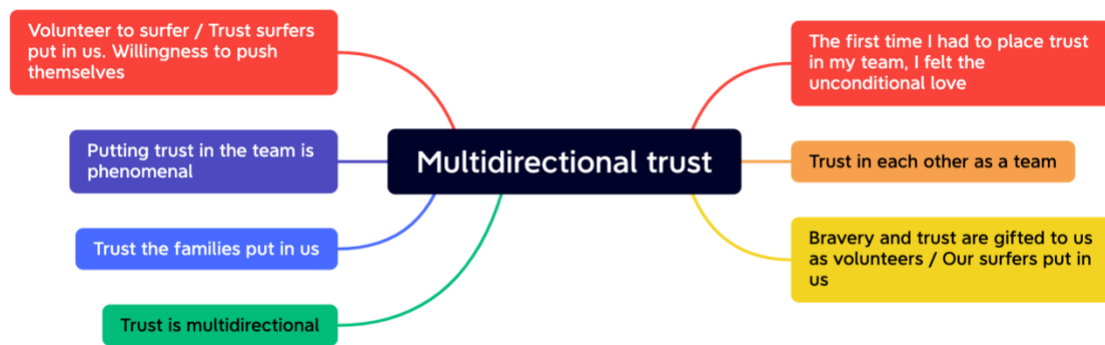


Figure 6.17: Category: Multidirectional Trust

The participants delivering the surf therapy programme were often placed together for the first time and may not have known one another prior. They were put in a situation where they had to trust one another, and the subsequent awareness that the children similarly required an immense level of trust was regarded a gift. Trust was multidirectional, between the team of individuals delivering the surf therapy programme, and between that team and the children participating, as well as the trust the families placed in the individuals delivering the surf therapy programme.

### Adults with disabilities that participate in surf therapy become volunteers



Figure 6.18: Category: Adults with disabilities that participate in surf therapy become volunteers

Two adults with disabilities became volunteers, one of whom has a visual impairment. For a visually impaired individual, placing trust in others can be a significant and sometimes challenging step. This volunteer shared the profound impact of trust and the deep connection that can be fostered within the programme, highlighting the

transformative moment when she had to rely on her team for support, guidance, and safety during her participation in the surf therapy programme. In that moment of vulnerability, she expressed her experience as a powerful sense of unconditional love from her team. This love can be understood as the genuine care, support, and commitment that the team members provided, without judgment or expectation. It reflects the deep level of compassion and empathy that the team demonstrated towards her. The surf therapy programme created an environment where trust could flourish, enabling her to feel safe and supported. This experience not only enhanced her participation as a visually impaired individual but also deepened her connection with the team and her overall sense of belonging within the programme. The volunteer's experience emphasises the significance of trust in fostering a strong bond and creating a safe space where individuals can fully engage and grow. It speaks to the transformative power of trust as it allows participants to overcome barriers, experience new opportunities, and build meaningful relationships.

### 6.7.3. Theme 3: View Differently Abled Differently

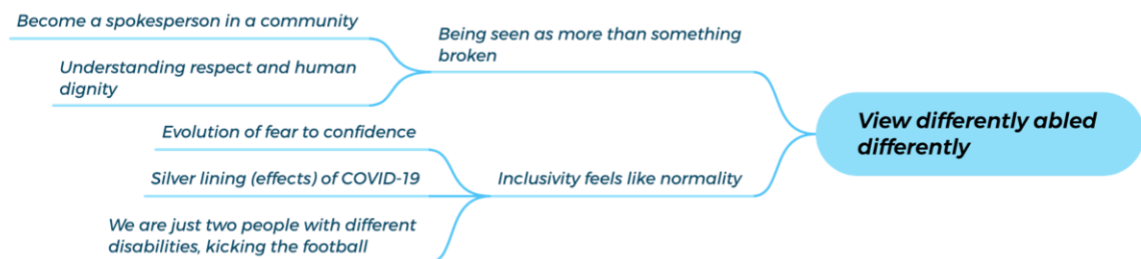


Figure 6.19: Individuals delivering the surf therapy programme: Theme 3 with subthemes and categories

## Subtheme 1: Being seen as more than ‘something broken’

### Become spokesperson within community



Figure 6.20: Category: Become a spokesperson within the community

Participants observed how the children’s demeanour, attitudes, and confidence changed in general, and how children with disabilities were able to inspire others as they became spokespeople within their community.

### Understanding respect and human dignity



Figure 6.21: Category: Understanding respect and human dignity

The surf therapy programme provided the participants with a deeper understanding of and respect for human dignity, and an opportunity for transformative thinking and the ability to view differently abled differently. One volunteer shared that “*I leave this space seeing the adaptive (surf therapy) experience more deeply*”, while another shared that the experience was an opportunity to “*make extra ordinary connections*”. Another participant highlighted the significance of self-reflection through the focus group, and stated “*Bru, what can I do to improve*”, as he wanted to improve the experience for everyone by improving his own skillset and ability.

## Subtheme 2: Inclusivity feels like normality

### Evolution of fear to confidence



Figure 6.22: Category: Evolution of fear to confidence

The evolution of change was observed, including determination, improvement, and a growth in confidence in the children participating, as well as the impact this had on their peers, family members, and ability to inspire others.

### Silver lining (effects) of COVID-19



Figure 6.23: Category: Silver lining (effects) of COVID-19

Because the delivery of the surf therapy programme took place during the COVID-19 pandemic, and the children participated in surf therapy beyond the initial six-week surf therapy sessions, programme adaptations needed to be made. One of these adaptations was inviting the parents to join the group of individuals delivering the surf therapy sessions, which one participant described as "inviting them into the bubble". Parents began riding the waves together with the children, officially joining the

volunteer team. Participants highlighted the observed increased family bonding between the parents and their children through this process.

### We are just two people with a disability kicking the ball

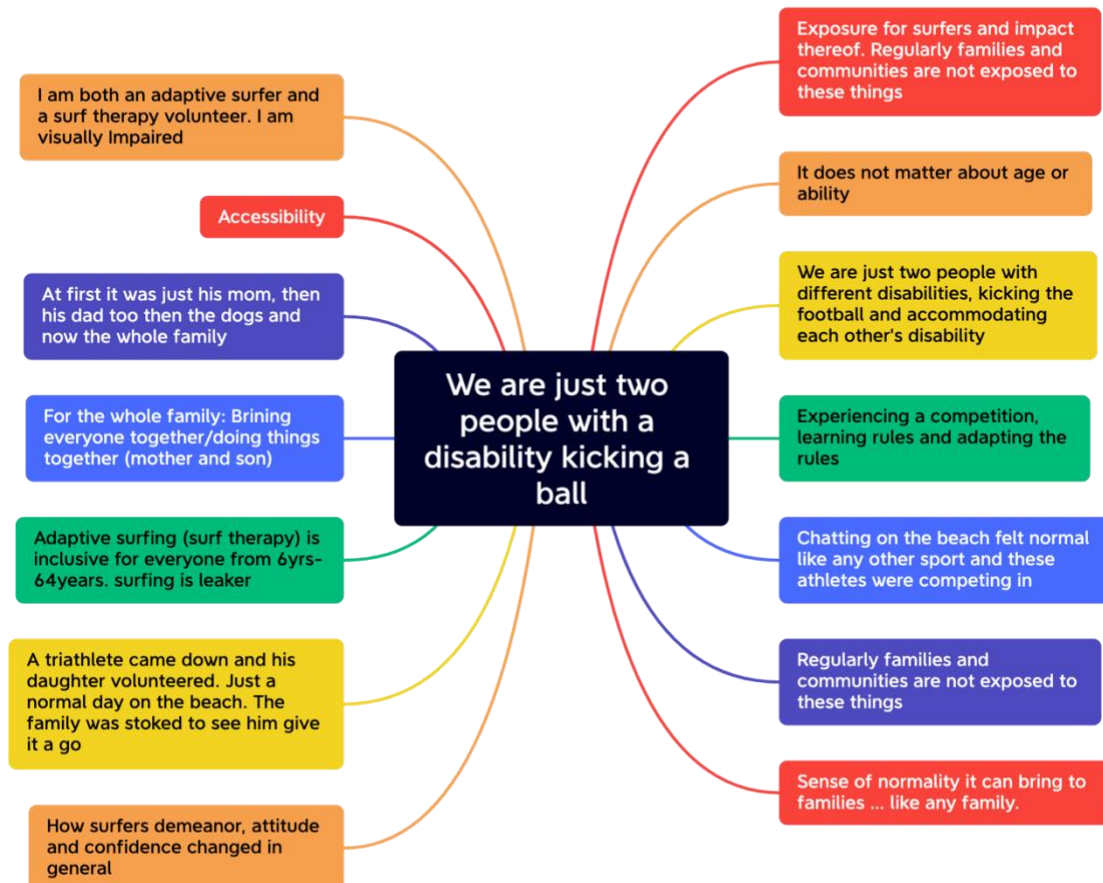


Figure 6.24: Category: We are just two people with a disability kicking a ball

Participation in the surf therapy programme and the impact thereof were highlighted as being unique, as families and communities are not regularly exposed to such experiences. The discussion highlighted barriers which many individuals with disabilities face on a daily basis, and which, through the surf therapy programme, were removed. One participant stated, *“We are just two people with different disabilities, kicking the football and accommodating each other’s disability”*, which was significant as the participant describing the experience was visually impaired and the individual participating in the beach activity was a quadruple amputee.

Inclusivity and accessibility were practiced by everyone taking part in the surf therapy programme, including the children with disabilities, their families, and the individuals delivering the surf therapy programme.

#### 6.7.4. Theme 4: *Our ripple effect is longer than we think*



Figure 6.25: Individuals delivering the surf therapy programme: Theme 4 with subthemes and categories

##### **Subtheme 1: *This is my community, my family***

The surf therapy programme had an impact on the broader community beyond the children and the individuals delivering the programme.

## Building relationships

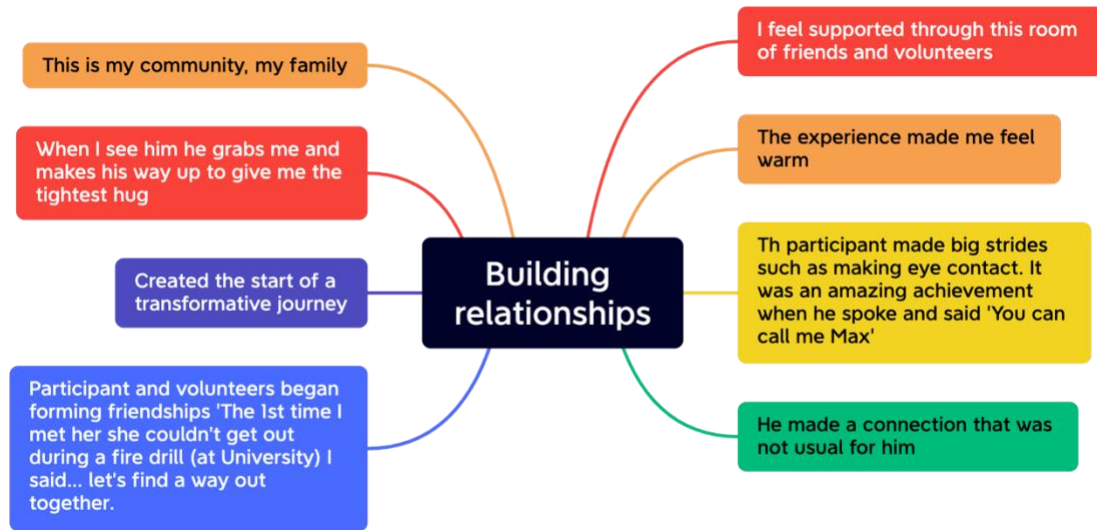


Figure 6.26: Category: Building Relationships

The participants experienced a sense of community building through the programme, which is evident in the statements *“This is my community, my family”* and *“I feel supported through this room of friends and volunteers”*. The connections made between individuals delivering the programme as well as with surf therapy participants were also discussed as significant. A participant highlighted that building friendship relationships was the start of a transformative journey for her.

## Bystanders

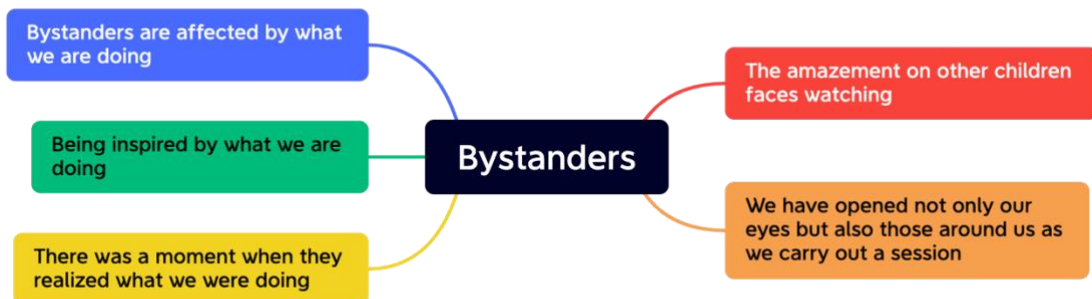


Figure 6.27: Category: Bystanders

Volunteers highlighted the impact the programme delivery had on bystanders, both on the beach and those swimming or surfing alongside the surf therapy sessions being delivered in the ocean. They discussed how people walked past and stopped when realising what was happening.

## Families

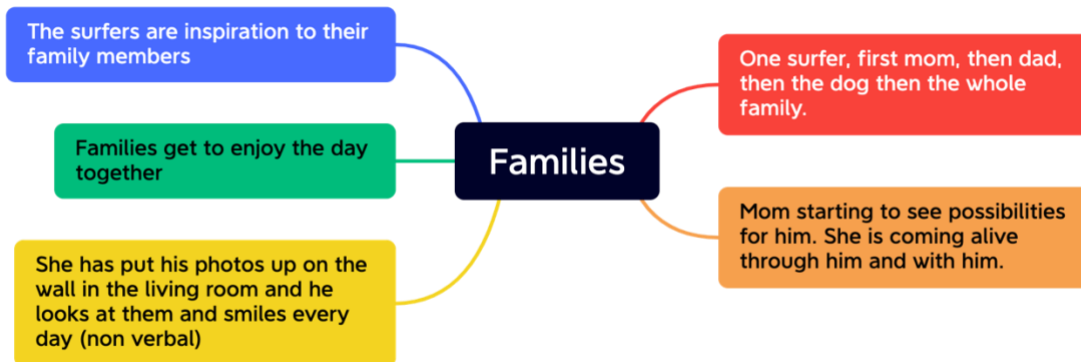


Figure 6.28: Category: Families

Participants highlighted the growth in family participation in the surf therapy sessions and the changes observed in the families of the children participating. They highlighted the opportunity the surf therapy programme provides for families, which goes beyond the children's experience participating in a surfing lesson.

## Volunteers

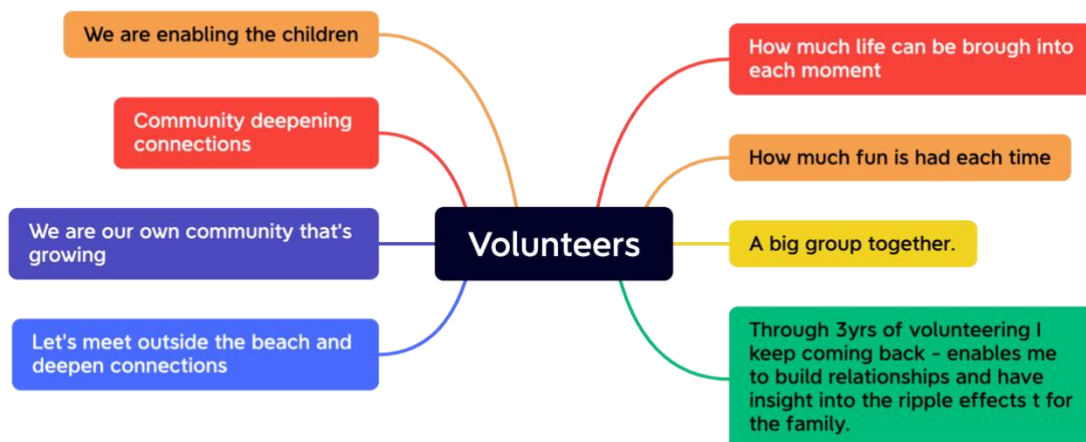


Figure 6.29: Category: Volunteers

This discussion provided self-reflection for the participants as the volunteers having delivered the surf therapy programme. Gaining deeper connections through engagement, belonging, and being part of a community were significant factors for the participants.

### Broader community

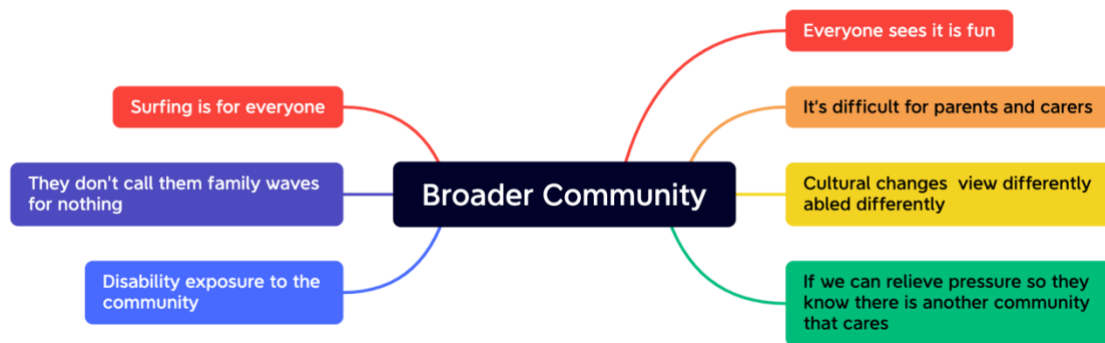


Figure 6.30: Category: Broader community

The participants recognised that the surf therapy programme provided the broader community with an opportunity to be exposed to disability in an inclusive and welcoming environment. The experience provided carers with a brief break in caring duties, while being able to spend time outdoors and “*enjoy a coffee on the beach*”. The participants highlighted how caring for children with disabilities on a daily basis may be challenging, which has an impact on many parents and carers, and the opportunity to “*relieve pressure so they know there is another community that cares*” was particularly significant. Participants also recognised that the broader community could observe the fun side of participation through the participants’ actions. A family wave is usually described by surfers as one that is shared and enjoyed by the whole community, and this term was used to describe the experience for the participants, with one stating, “*They don't call them family waves for nothing*”.

## Subtheme 2: She speaks of adaptive surfing through her lived experiences

### Feeling free



Figure 6.31: Category: Feeling free

Participants highlighted the observed physical freedom the children experienced.

### Occupational possibilities



Figure 6.32: Category: Occupational possibilities

Volunteers observed the children's ability to recognise that many limitations were lifted through the surf therapy, that which encouraged the children to think of possible future opportunities.

## The happiest time of her life

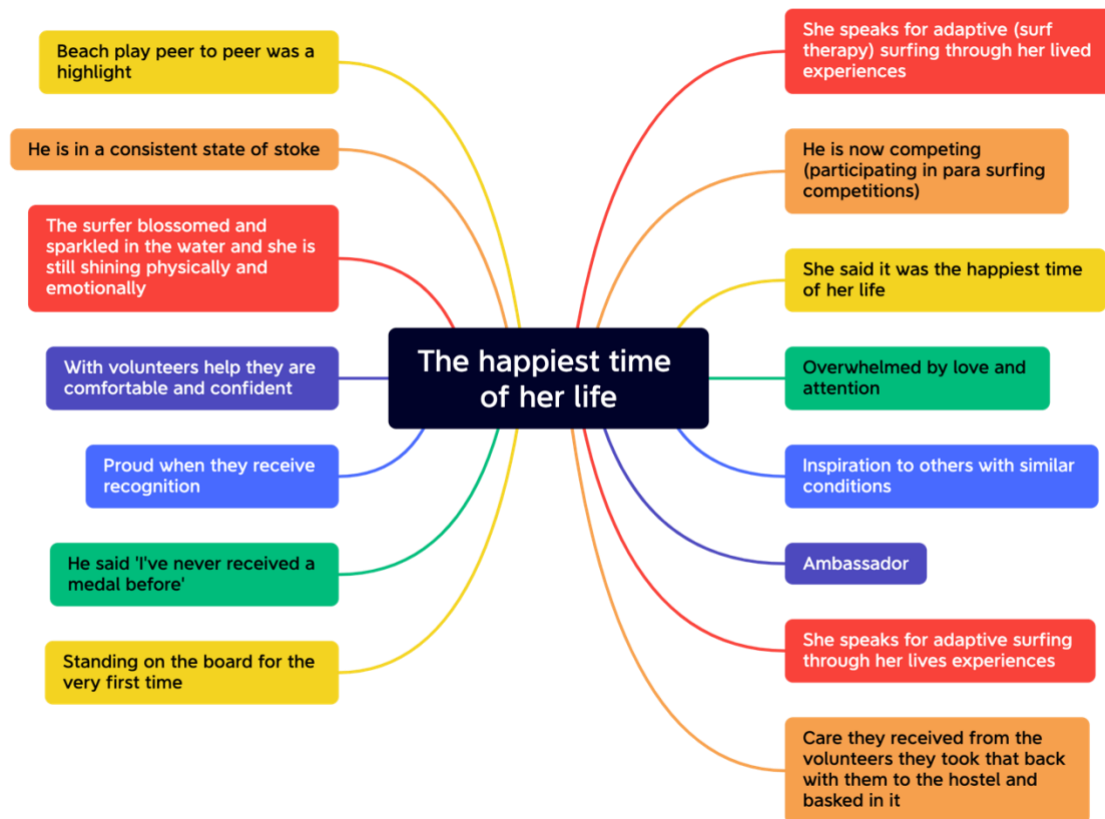


Figure 6.33: Category: Happiest time of her life

Participants described how the children were able to speak about the changes in their lives which were due to their lived experiences in the surf therapy programme. One child graded her experience as a 100 out of 10 and shared that it was the happiest time of her life. Becoming an inspiration to others with similar conditions led to the children becoming ambassadors of change, and they were proud of themselves when they received recognition. The participants highlighted how the children “*blossomed and sparkled in the water*” and shared that these observed changes continued, stating “*she is still shining physically and emotionally*”.

### **Subtheme 3: 'I didn't realise I needed this until I was here' – Participants delivering the programme**

#### **So many personal needs are fulfilled**



Figure 6.34: Category: So many personal needs are fulfilled

One participant expressed her initial reservation about attending the focus group due to personal time constraints, but she realised the benefit of attending for her own emotional well-being, saying “*for myself – I didn't realise I needed this until I was here*”. Upon participating and being present at the session, she discovered the intrinsic value it held for her. She also shared how volunteering had had a positive impact on her well-being and emotional state.

Another participant described their experience as “*reaffirming for humanity*”, expressing that their volunteer work reinforced their belief in the goodness, compassion, and potential of humanity as a whole. The experience provided them with a positive outlook on the world and the people in it. The participant expressed that it served as a reminder that, despite the difficulties and negativity that exist in the world, there are still many individuals who are committed to making a positive difference. It was highlighted that participation in the surf therapy programme is a “*constant reminder of what you can do*” and “*a shared experience*”.

## 'I know I'm making a difference'

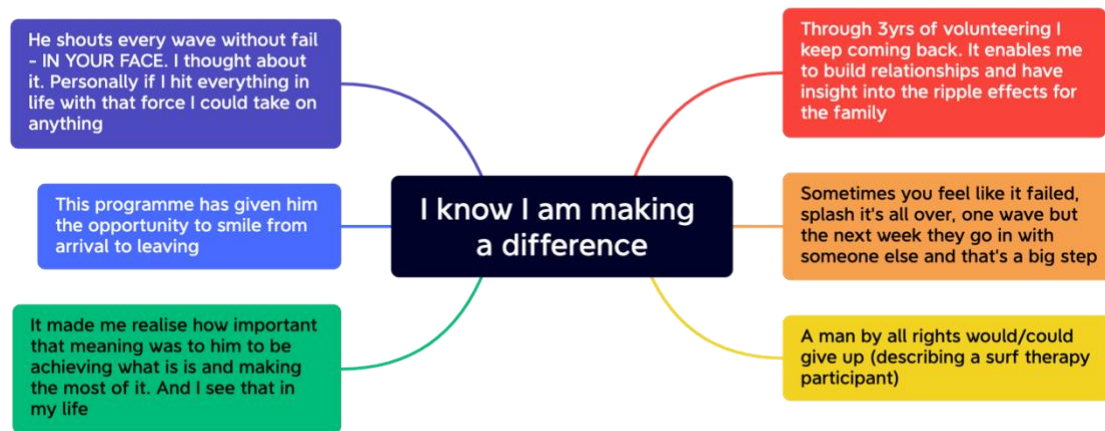


Figure 6.35: Category: I know I am making a difference

A participant highlighted an instance which they initially thought was an unsuccessful moment during the child's engagement in the programme. However, the child subsequently made positive progress, demonstrating the importance of perseverance and recognising incremental steps towards growth. The participant recognised that there may have been instances when they feel like their efforts or a particular session did not go as planned, however the children were able to move forward the following week when they engaged with someone else. *"Sometimes you feel like it failed – splash it's all over one wave but the next week they go in with someone else and that's a big step"*. Progress often occurs gradually, and even seemingly small steps can be significant milestones in a child's development and growth. It encourages perseverance, acknowledging that setbacks are a normal part of the process and that progress can be achieved by building upon those experiences.

In the context of children experiencing participation in a surf therapy programme, the positive influence and impact of a volunteer's actions can continue to resonate and inspire others long after the initial act of service, stating, *"Our ripple effect is longer than we think"*. By sharing this sentiment, the volunteer is emphasising the significance of the surf therapy programme and their contribution, recognising the lasting impact that the overall experience can have on individuals, communities, and society as a whole.

## Subtheme 4: It's both healing and preventative

### We are doing something right

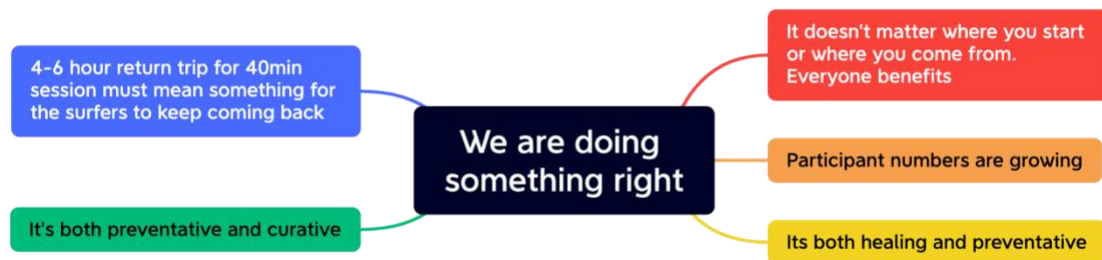


Figure 6.36: Category: We are doing something right

Multiple participants shared that participation in the programme holds immense value and is healing, preventative, and curative, highlighting the reciprocity of healing that takes place during a surf therapy programme. One participant highlighted how everyone benefits from participation, regardless of where they start or they come from, which underscores the programme's commitment to inclusivity and promoting equal opportunities for all. The participant emphasised how the programme specifically welcomes and accommodates children from diverse backgrounds, regardless of their abilities or disabilities.

### We underestimate the importance of participation being awarded



Figure 6.37: Category: We underestimate the importance of participation being awarded

Participants expressed the belief that the impact of acknowledging and recognising a child's active involvement in such programmes is often underestimated, or overlooked. Participation itself holds significance, as it indicates a child's willingness to engage, learn, and actively take part in the surf therapy programme. By participating, the child

is opening themselves up to new experiences, challenges, and opportunities for growth. By awarding or recognising the children's active involvement, participants believe they can reinforce the children's sense of accomplishment, validate their efforts, and motivate them to continue their journey of personal development. This underscores the need to recognise the effort, dedication, and courage the children demonstrate by actively taking part in the programme's activities. Doing this can empower children with disabilities, inspire their continued engagement, and cultivate a supportive and thriving environment within the surf therapy community.

During the focus group, one participant shared that "*the programme gives people with disabilities the opportunity to experience human dignity*". Participants highlighted that the surf therapy programme offers more than just physical and therapeutic benefits, and that it affords individuals with disabilities the chance to be seen, heard, and valued as equals, which is an essential aspect of human dignity. Experiencing human dignity is a fundamental right that should be accessible to everyone, regardless of their abilities.

In addition to this, it was highlighted that, through the surf therapy programme, children with disabilities also have the opportunity to be respected and celebrated for their unique contributions and capabilities. Participants expressed that through the inclusive and empowering environment, the programme fosters a sense of self-worth, empowerment, and belonging for all individuals involved in the programme.

## Through this programme, disability is not a death sentence



Figure 6.38: Category: Through this programme, disability is not a death sentence

A participant highlighted a specific instance of one of the children, who was put into an induced coma at three months old when his heart repeatedly stopped after developing a meningococcal disease. The doctors at the hospital discussed if it was worth saving the life of a very young child with a disability. On his 16<sup>th</sup> birthday, this particular child represented his country at the World Para Surf Championships, proudly wearing his South African national blazer. The volunteer drew attention to the contrast between the doctors' initial assessment of the child's worth and the child's current potential, suggesting that every person deserves a chance to thrive and fulfil their inherent value. This highlights the transformative power of giving someone a chance and underscores the idea that every life holds inherent value and potential, even when their situation may seem uncertain at first or even dire. This participant's sharing also serves as a reminder of the importance of re-evaluating initial judgments and considering the long-term potential and opportunities for growth in individuals, even in challenging circumstances. It emphasises the significance of potential for transformations and achievements when individuals are provided the necessary resources and support.

Through participation in the surf therapy programme with the right support, encouragement, and opportunities, children with disabilities were able to surpass their own expectations and accomplish things that may have seemed initially daunting or impossible. For a participant in the focus group, this highlighted how participation in the programme served as a continuous reminder of the children's own personal

capabilities and potential. Another participant shared a moment of significance for her during the surf therapy programme:

*A man such as him, and all he has been through by all rights could give up. Through this programme, disability is not a death sentence. This programme has given him the opportunity to smile from arrival to leaving... He shouts every wave without fail – IN YOUR FACE. I thought about it. Personally, if I hit everything in life with that force, I could take on anything. It made me realise how important that meaning was to him to be achieving what he is and making the most of it. And I see that in my life.*

## **6.8. Discussion**

### **6.8.1. First-hand experience of what it's like to have a disability**

**REM is a way of discovering what has taken place within a programme.** The experience of **volunteerism in surf therapy** included skills development and mentorship for the individuals delivering the surf therapy programme, drawing on the unique qualities of the individuals delivering the programme.

Individuals with disabilities are often marginalised in society. This is particularly evident in volunteerism, where they are often assumed to be recipients of services rather than active contributors. In the context of surf therapy, for example, individuals with disabilities are seldom volunteers or surf instructors. Miller et al. (2002) highlight this issue, pointing out that individuals with disabilities are often confined to the role of service recipients, reinforcing the notion of their dependence on others. This not only perpetuates stereotypes and stigma surrounding disabilities but may deprive individuals of the opportunity to contribute to their community in a meaningful way.

**For the individuals delivering the surf therapy programme, they were able to develop skills, both in learning and teaching, through training and mentorship.** The skills development provided volunteers with confidence, stronger self-assurance, empowerment, and self-efficacy. Relationship building and mutual support were important factors of the learning process. Participants highlighted the

personal growth and personal development through participation in a safe space where they could learn, improve their skills, and share with other volunteers and the children participating. Self-efficacy, also commonly referred to as confidence and has been adopted into positive psychology. It is the self-belief in one's competence to accomplish a task and producing a favourable outcome (Bandura et al., 1999).

The reciprocal learning experience took place through **multidirectional interaction and included** observational learning and practical interaction, teaching, and feedback. This led to both personal development and professional development in the volunteers' workplace outside of the surf therapy programme. Additional skills participants in the surf therapy programme learnt included leadership, communication, problem solving, adaptability, and the ability to navigate challenges and improve communication.

In a study conducted by Gordon and Gordon (2017), it was discovered that individuals who take on leadership roles as volunteers within an organisation experience personal growth and learning opportunities. This includes the ability to test out new methods of leadership and evaluate their effectiveness, leading to the enhancement of their leadership skills. Additionally, the findings of the study suggest that these skills and experiences gained through volunteer leadership roles can be effectively transferred to the corporate setting.

**The qualities of a volunteer** were highlighted, which would support surf therapy programmes in recruiting volunteers for future participation with children with disabilities. Although volunteers were from diverse backgrounds, they were like-minded and goal-orientated in working collaboratively. Volunteers were described as passionate, welcoming challenges, serving with gratitude, and sharing love and care. They also had the ability to provide the children with individual focused attention and at times often went beyond what was expected of them. As one participant highlighted, "*you need to have a calling*".

### **6.8.2. Being Unapologetically Who You Are**

The observed **experiences of positive affective behaviour were highlighted as the programme provided a place for everyone to be “unapologetically who you are”**. **Being who you are** related to the volunteers’ emotions, moods, and feelings, which in turn had an influence on their actions. Through the process, they came to realise they could accept themselves for who they were in the same way that they unconditionally accepted the children for who they were. The surf therapy programme provided a place for authenticity through inclusion without judgement, and allowed the volunteers to stop trying to be someone they were not. The volunteers’ self-realisation supported their self-empowerment, which enhanced their motivation to live authentically as their genuine selves. This was described as *“living unapologetically yourself through embracing individuality and uniqueness”*.

**The volunteers were able to break down their personal barriers regarding their own perception of themselves during the programme.** Participants highlighted how being different is in fact a strength and advantage. The programme became a safe space for all participants where societal prejudices, stereotypes, and discriminatory practices were removed, and the children and individuals delivering the programme were supported through empowerment and validation. Participants also described the programme as one that fosters inclusivity, respect, and acceptance for all, providing individuals with dignity and empowerment.

**The surf therapy programme was described** as a place which was more than surfing where *“small beginnings happen on the beach and in between”*. The opportunity for everyone to express themselves in the surfers’ circle was significant. Participants described the overall experience as like having taken part in group therapy. The surf therapy programme provided transformational thinking in both the culture of surfing and disability, challenging negative perceptions and stereotypes associated with disability. It was highlighted that the programme changed attitudes and prejudices, treating everyone as a whole, multifaceted individual. **The development of trust relationships** was an important factor throughout the programme. Multidirectional trust developed for the participants through training and

programme delivery, and between one another, the team, the children, and the family members.

Individuals with disabilities are often assumed to be in role of recipients of services, such as surf therapy, and are not usually given the opportunity to provide the services as volunteers (Miller et al., 2002). In the surf therapy programme, persons with disabilities were provided the opportunity to volunteer. An adult volunteer with a disability described the experience of making deep connections, which were fostered within the programme. This individual's reliance on the team for support, guidance, and safety was significant as through her vulnerability she experienced unconditional love, connection, and belonging. This provided a place to overcome barriers, find new opportunities, and engage in meaningful relationships underpinned by trust.

### **6.8.3. Viewing differently abled differently**

Participation in the programme for the volunteers led to changes in how they viewed disability. **Through this process**, the children's demeanour, attitudes, and confidence changed, and they began to inspire others as ambassadors. The programme provided the opportunity and experience for individuals to better understand how to support children with disabilities, and participate in making "extraordinary connections". The participants were able to participate without being measured on their performance, outcomes, or achievement, leading one volunteer to reflect "*I'm good enough*". Removing the pressure for the volunteers to prove themselves provided them with a fulfilling experience, finding joy in the present moment.

Participation in the surf therapy programme led to changes in the determination and confidence of the children participating. Participating during the COVID-19 pandemic created "silver linings" for the children as it led to further programme adaptations being made with unexpected benefits, and them sharing experiences and bonding with their family members. The surf therapy programme brought inclusivity and accessibility into practice, as shared experiences on the beach and in the water were not regarded as being only for surfers without disabilities but for everyone.

#### **6.8.4. Our ripple is longer than we think**

The positive influence of the surf therapy programme and the actions of participants delivering the surf therapy programmes continued to have an impact after the initial act of service. These implications and impact were observed across the children, bystanders, families, volunteers, and the broader community. Building friendships and meaningful connections were also highlighted as significant outcomes of the programme.

According to Rudman (2010), occupational possibilities refer to the range of potential opportunities and career paths available to individuals within a specific socio-historical context. These possibilities are shaped by the social systems and structures that exist within a given society. Occupational possibilities encompass not only the actions that individuals take for granted but also the perceived limitations or expectations about what they can or should do within a given occupational field. Occupational possibilities are the various options and avenues individuals can pursue to achieve their professional goals and aspirations. Societal norms, cultural expectations, and historical trends influence these possibilities. For example, in certain societies, certain occupations may be traditionally viewed as more suitable for individuals based on gender, race, or social class.

For the children with disabilities participating in the surf therapy programme, it was highlighted that there was a change in their perception and thinking through experiences of freedom which had not been experienced before: *“if I can do this, I can do anything”*.

**The opportunity for reflection about what had occurred within the programme led to the development of self-efficacy for the volunteers.** Self-efficacy was similarly observed by participants, as discussed in chapters 4 and 5. Self-efficacy emphasises the participant’s belief in their own capability to influence their motivation, actions, and interactions within their social surroundings, which was evident in their focus group discussion. Participants highlighted their personal need for fulfilment for themselves, understanding their purpose in the fulfilling nature of the volunteering experience and recognising that delivering the surf therapy programme

had a positive impact on their own well-being and emotional state. The reflective process of the REM session reinforced the participants' positive worldview and belief in goodness, and they could see how, despite difficulties, there are many individuals committed to making a positive difference through a shared experience. They know they are making a difference, and understand the bigger picture purpose of what they are doing. This shows that the impact of the volunteer work extends far beyond the surf therapy programme,

Healing was experienced by the participants through programme participation. The participants highlighted the surf therapy programme's commitment to inclusivity, promoting equal opportunities, and accommodating children from diverse backgrounds. Awarding participation and recognising the children's active involvement and willingness to engage and learn were significant to the programme. Participants further highlighted the programme's ability to empower, inspire continued engagement, and cultivate a supportive environment where children are seen, heard, and valued as equals, which is part of their fundamental right to human dignity. Children are seen, respected, and celebrated for their unique contributions and capabilities, which fosters a sense self-worth, empowerment, and belonging. The participants highlighted the importance of each individual's worth, inherent value, and long-term potential growth even in challenging circumstances, as every life deserves a chance and "*disability is not a death sentence*".

From the perspective of Bronfenbrenner's Bioecological Model of Human Development, these findings contribute to understanding human development in the context of the complex and interconnected systems in which individuals live. These findings show the bi-directional influences that relationships have, both away from and towards the individual. They also highlight the integration of key components of the CBR matrix (WHO, 2010) and provide insight into how surf therapy, a community-based programme, can support inclusive development.

## **6.9. Limitations**

This focus group consisted of individuals delivering a surf therapy programme for children with disabilities based on the practices of one programme delivered in South Africa. It did not include volunteers from other surf therapy programmes that serve children with disabilities or other populations. This means it would be difficult to compare findings across studies of the experiences of participation in a surf therapy programme for the participants delivering the programme. The focus group was conducted with twenty participants in one session, which is the upper limit recommended. This created a large volume of data in the short two-hour focus group session.

## **6.10. Recommendations and planning for further action**

- Due to the nature of participants' schedules, future REM focus groups could be conducted online or using a hybrid option.
- Follow-up REM focus groups would be beneficial with the same participant population, as well as other participant populations such as the children with disabilities and parents, guardians, and professionals.
- A REM focus group for the broader community would be beneficial to determine what occurred from the perspective of bystanders, the wider family, and the broader community.
- A REM focus group for future planning is recommended as this research focused on what had already occurred.
- Programmes consideration should provide persons with disabilities with the opportunity to volunteer in surf therapy programmes.
- This focus group included two individuals with disabilities that participated in the surf therapy programme as volunteers. Future research on the experiences of individuals with disabilities participating as volunteers in surf therapy programmes should be explored.

## **6.11. Reflective summary**

As an observer of the focus group, it became evident to me that this innovative approach holds immense potential for future research in community-based programmes, such as surf therapy programmes. Even though participants did not

expressly state the challenges inherent in the delivery of the surf therapy programme, their written answer sheets completed during the peer interview process provided valuable insight. These findings were important for the surf therapy programme development. Participants' written answers from question six of the focus group (*Are there negatives or downsides of the programme that you can speak to?*) have been included in the programme development in chapter 7. This research addressed the importance of individuals with disabilities being not only the recipients in a community-based programme but also in and part of the community as an end goal, including as volunteers and with their voices, guiding programme development and feedback.

## Chapter 7: Adapting A Surfing Programme

***“Disabled children are equally entitled to an exciting and brilliant future.”***

Nelson Mandela, 1994



*Image 7.1: An adapted surf programme taking place at Muizenberg beach*

### **7.1. Introduction**

Surf therapy programmes have been run globally for nearly two decades, However, the adaptation of a surfing therapy programme for children with disabilities in South Africa has not yet been clearly explored, designed, and integrated.

### **7.2. Aim**

The objective of this chapter is to describe the adaptations of a surf therapy programme for children with disabilities in South Africa. This adaptation has been used for the delivery of a six-week surf therapy programme for children with disabilities in the Western Cape (see Table 7.1 below). The research question is:

What is involved in adapting a surfing programme to deliver surf therapy for children with disabilities?

### 7.3. Steps in developing an adapted surf therapy programme

Table 7.1: Steps in developing an adapted surf therapy programme

Developing an adapted surf therapy programme	
Step 1: Understand an existing surf therapy programme in South Africa & define the programme structure	
Step 2: Understand the road map to surf therapy	
Step 3: Understand the global best practice for persons with disabilities	Sustainable Development Goals (SDGs)
	Convention on the Rights of Persons with Disabilities (CRPD)
Step 4: Delivery of a six-week surf therapy programme	
Step 5: Incorporating feedback from participants	
Step 6: Applying Bronfenbrenner's Bioecological Model of Human Development to disability inclusion and a surf therapy programme in South Africa	
Step 7: Explore and develop a Theory of Change (ToC)	
Step 8: Develop a programme guide for adapting a surf therapy programme for children with disabilities in South Africa	

This process involved the following eight steps:

1. It was important to understand the processes of an existing surf therapy programme in South Africa and define the programme structure.

2. It was also important to understand the road map to surf therapy globally, which influenced the development and evolution of surf therapy in South Africa.
3. The global best practice principles for persons with disabilities, including the SDGs and CRPD, needed to be applied in the context of surf therapy for children with disabilities, as inclusive development was incorporated in the design of the programme.
4. Through this research, a six-week surf therapy programme for children with disabilities in the Western Cape was delivered.
5. Insights and feedback regarding barriers, facilitators, and programme delivery challenges from participants were considered using the ICF framework of contextual factors, including environmental influence in participants' functioning.
6. Bronfenbrenner's Bioecological Model of Human Development was applied in the context of disability inclusion and the surf therapy programme in order to understand the children's development as a complex system of relationships affected by multiple levels.
7. Through this process, a ToC was developed. The SDGs, CRPD, CBR Matrix, and Social-Ecological Model of Disability were relevant in informing the ToC.
8. A programme guide to adapting a surf therapy programme for children with disabilities in South Africa was created.

### ***7.3.1. Step 1: Understand an existing surf therapy programme in South Africa & define the programme structure***

In order to understand the current process of programme delivery for children with disabilities in South Africa, the existing programme needed to be understood and systems defined. This process was documented in the guide for surf therapy adaptation in South Africa as part of this thesis.



Image 7.2: Mobile infrastructure for the delivery of an adapted surf therapy programme

### **7.3.2. Step 2: Understand the road map to surf therapy.**

***“Sport has the power to change the world. It has the power to inspire. It has the power to unite people in a way that little else does. It speaks to youth in a language they understand.” - Nelson Mandela, 2000***

The International Surfing Association (ISA) and the International Surf Therapy Organization (ISTO) are two separate organisations with different missions and focuses, although they both share a connection to the sport of surfing. The ISA is the international governing body for the sport of surfing and was founded in 1964 (ISA, n.d.). It oversees competitive surfing events and promotes the development of the sport globally, including overseeing the development of surfing at the grassroots level around the world. The ISA is committed to promoting and developing surfing as a sport, a lifestyle, and a culture. The ISA works with national surfing associations such as the South African governing federation, Surfing South Africa (SSA), and other federations around the world to promote the sport and hold surfing

competitions, including the World Surfing Championships. ISA also plays a key role in the Olympic movement, as surfing was added to the Olympic programme for the first time in 2020. The ISA worked closely with the International Olympic Committee (IOC) to ensure that the sport was represented in the best possible way, and to ensure that the athletes had the support and resources they needed to compete at the highest level.

In contrast, the ISTO was founded in 2016 and operates globally, working with partners in many different countries (ISTO, 2019). ISTO is a non-profit organisation that focuses on promoting and developing surf therapy programmes around the world. Surf therapy programmes use surfing as a tool to promote physical and emotional well-being. ISTO provides support and resources for these programmes (Mattila, 2020). The organisation also hosts an annual Surf Therapy Symposium, which brings together experts and practitioners from around the world to share knowledge and best practices. In addition to its work with surf therapy programmes, ISTO also works to promote the health and well-being of coastal communities and to protect the ocean and the environment. The organisation recognises the important role that the ocean and the coastal environment play in promoting human health and well-being, and it seeks to protect these resources for future generations. While the ISA and ISTO have different missions and focuses, they are both connected to the sport of surfing and share a commitment to promoting the health and well-being of individuals through surfing. The ISA promotes surfing as a sport and competitive activity, while ISTO promotes surfing as a therapeutic tool for improving physical, mental, and emotional well-being.

**The primary difference between a surf lesson and a surf therapy lesson is the focus of the session.** A surf lesson is typically focused on teaching participants how to surf, with an emphasis on developing the necessary skills and techniques to ride waves safely and effectively. In contrast, a surf therapy lesson is focused on using surfing as a therapeutic tool to promote well-being, and enhance overall quality of life. In a surf lesson, the primary goal is to teach participants how to surf, including how to paddle, catch waves, and stand up on the board. The instructor may provide feedback and guidance on technique and form, and participants are encouraged to practice their skills in order to improve their ability to ride waves. In a surf therapy lesson, the focus

is on achieving specific therapeutic outcomes, such as reducing stress or anxiety, building self-confidence, improving physical fitness, or enhancing social skills. The instructor may use surfing as a means of achieving these outcomes, incorporating mindfulness techniques, visualisation exercises, or other therapeutic approaches into the session (Harris, 2015; Marshall et al., 2019; McKenzie et al., 2021; Podavkova & Dolejs, 2022). In a surf lesson, participants may be grouped according to their skill level, with more experienced surfers working on more advanced techniques and beginners focusing on the basics. In a surf therapy lesson, participants may be grouped according to their therapeutic needs or goals, with the instructor tailoring the session to meet the needs of each participant. While both surf lessons and surf therapy lessons involve surfing, the focus and goals of the session are different.

Surf therapy and adaptive surfing are related concepts, but they have slightly different focuses and goals. Surf therapy is a type of therapy that uses surfing as a tool to promote physical and emotional well-being (Benninger et al., 2020; Clapham et al., 2014). Surf therapy programmes typically involve taking participants into the ocean (Clapham et al., 2014), where they can experience the therapeutic benefits of surfing and the natural environment. Surf therapy may be used to treat a variety of physical and mental health conditions, such as post-traumatic stress disorder (PTSD), anxiety, and depression (Benninger et al., 2020). Adaptive surfing, on the other hand, is a form of surfing that is adapted to meet the needs of surfers with disabilities or physical limitations. Adaptive surfing may involve the use of specialised equipment or techniques to help surfers overcome their physical challenges and experience the joy and excitement of surfing. While both surf therapy and adaptive surfing may involve taking participants into the ocean and using surfing as a tool to promote well-being, they have slightly different primary goals.

Adaptive surfing, also known as para surfing, involves the use of specialised equipment and techniques that allow individuals with physical impairments to surf and enjoy the ocean in a safe and supportive environment. It can include modifications to the surfboard, such as adding straps or handles to provide stability, or using specially designed boards that are wider and more buoyant. It can also involve adaptations to the surfer's body position, such as sitting or lying down on the board, or using assistive devices such as prosthetics or braces. The goal of para surfing is to provide an

inclusive surfing experience for individuals with disabilities. Adaptive surfing is growing in popularity around the world, with many surf schools and organisations offering adaptive surfing programmes and more recently competition surfing.

In summary, surf therapy is primarily focused on promoting physical and emotional well-being, while adaptive surfing is focused on adapting the sport of surfing to meet the needs of individuals with disabilities or physical limitations. That being said, there can be overlap between surf therapy and adaptive surfing, as some surf therapy programmes may incorporate adaptive surfing techniques or may be designed specifically for individuals with disabilities or physical limitations. Adaptive surfers who have participated in surf therapy programmes may choose to progress to para surfing competitions if they have developed the necessary skills and are interested in pursuing competitive surfing.

Para surfing competitions are designed for surfers with physical disabilities and they provide an opportunity to compete at a higher level and showcase their skills. There are a variety of para surfing competitions held around the world, including the World Para Surfing Championships (International Surfing Association, 2023), the World Para Surf League (Association of Adaptive Surfing Professionals, 2023), and the Adaptive Surfing Professionals World Championship Tour (Association of Adaptive Surfing Professionals, 2023). The competitions feature a range of divisions including standing, sitting, kneel, and prone categories, as well as visually impaired and assist categories providing opportunity for adaptive surfers of all levels to participate and compete. Athletes from around the world compete for individual and team titles, showcasing their wave riding skills. Participating in surf therapy programmes can provide adaptive surfers with a strong foundation of surfing skills, experience, confidence, and techniques, as well as the physical and emotional benefits of being in the ocean. These skills and experiences can be valuable for surfers, providing a stepping stone for those who are interested in pursuing para surfing competitions and providing what they need to succeed in competitive surfing. Competitive surfing can be an excellent opportunity for children with disabilities to participate in a challenging and exciting sport that can help them build confidence and physical strength.

As discussed, a surf lesson is defined as a lesson for a fixed period of time when people are taught how to stand up on a surfboard and ride a wave. Delivering a surf lesson requires a qualified instructor that has completed a minimum of a level 1 International Surfing Association (ISA) Surf Instructor course or their country's equivalent certification, while delivering surf therapy programmes requires professional instruction from qualified surf instructors with an adaptive surfing qualification. There are several benefits to qualifying as a surf instructor, one of which is teaching skills, as the ISA surf instructor course is designed to provide instructors with a comprehensive understanding of the techniques and skills required to teach surfing effectively. The course is a scientific approach to the coaching and instructing of surfing in a safe and supportive environment. It covers topics such as safety, equipment, wave analysis, and teaching methodology. By completing the course, instructors can improve their teaching skills and provide a better learning experience for their students. The second benefit is knowledge about safety standards, as the ISA surf instructor course places a strong emphasis on safety. Instructors learn about ocean safety, rescue techniques, and risk management. By completing the course, instructors can ensure that they are providing a safe learning environment for their students. ISA Level 1 Surf Instructors work with beginner surfers in waist- to chest-deep water with waves that are breaking close to the shoreline, teaching basic surfing skills. These skills include an introduction to equipment, beach safety, paddling, catching waves, popping up, riding white water, and traversing white water.

A typical surf lesson would follow the following protocol: Participants arrive, sign in, change into wetsuit, apply sunscreen and rash vest, select a suitable surfboard, and walk with their instructor down to the beach for a 60- to 90-minute surf lesson. The lesson would include a warm-up and basic beach instruction, which includes a vigorous run, stretch, and series of surfing pop ups on the beach. The participant would then walk into the water with their surfboard under their arm. Once waist deep in the water, the participant would jump on the surfboard and paddle, turn to face the shore, select a suitable wave with the help of their surf instructor, and begin paddling to ride the wave. Once they have caught the wave, they would jump to their feet, standing and riding to the shore. Once the ride is completed, the participant would safely dismount the surfboard in the shallows and return to the instructor. The

equipment required for the delivery of a surf lesson includes a surfboard, wetsuit for cold water, and an identifiable rash vest. If the participant is a regular or repeat customer, a programme would follow steps of progression to build on the surfer's existing knowledge with each session.

In December 2020, the ISA released an adaptive surf instructor course designed to teach instructors how to provide safe and effective surf instruction to individuals with physical challenges or disabilities. This programme covers a foundation of adapted surfing for individuals with physical disabilities in an attempt to begin standardising best practice principles for the safe delivery of an adapted surf lesson. While it provides a comprehensive curriculum that covers topics such as safety, equipment, and a guide to teaching methods for adaptive surfing, it also helps instructors develop the skills needed to teach adaptive surfing effectively (ISA, 2020). By completing the course, instructors can improve their teaching skills and provide a better learning experience for their students with physical challenges or disabilities. Teaching an individual with a physical, cognitive, intellectual, or sensory disability has a number of additional requirements. The surf lesson needs to be adapted to the individual's unique requirements, which means the surf instructor would require a surf instructor course qualification as well as the inclusion of additional training to enable the instructor to teach an programme for persons with disabilities.

Although surf therapy as a small group intervention has been growing in popularity over the past decade, there remains no structured guideline to deliver an adapted surfing programme (as opposed to a lesson). Many surf therapy programmes develop organically, are volunteer driven, and operate on small budgets (Sarkisian et al., 2020). As surf therapy serves many diverse populations, there is no "one size fits all" structure to deliver an adapted surfing programme, and contexts in which the programmes work vary in cultural, environmental, and social circumstances (Olive et al., 2020). Therapeutic benefits have been reported for a variety of populations, including adults in recovery from addiction, vulnerable youth, active duty military service members, military veterans, young adult cancer survivors, and youth with disabilities (Benninger et al., 2020).

Surf therapy programmes typically involve a trained professional, such as a therapist or surf coach, who works with participants to set goals and develop a personalised plan (Harris, 2015; Marshall et al., 2019; McKenzie et al., 2021; Podavkova & Dolejs, 2022). The benefits of surf therapy have been discussed in the literature review, including improved physical fitness, increased confidence and self-esteem, reduced anxiety and depression, and improved socialisation and communication skills. Surf therapy has been used to help individuals with a wide range of conditions, including PTSD, anxiety, depression, addiction, and physical disabilities.

It is evident that delivering a surf therapy programme requires inclusions that a standard or adapted surf lesson does not. Programme design is based on the programme outcomes and resources available or limitations that are established by the stakeholders in advance of the programme's commencing. As there is no current programme structure for children with disabilities in South Africa, the particular programme used in this study was developed for the research participants and then implemented in ongoing programmes at Muizenberg beach, Cape Town.

There are several key elements of a surf therapy programme that have been shown to have a positive impact on participants based on existing literature, as explained below. These elements may work together to create a supportive and therapeutic environment that can help promote mental, emotional, and physical well-being among participants. Although not specific for children with disabilities, these have been researched in a variety of other populations. The elements are:

**The Ocean Environment:** The ocean environment is a key component of surf therapy programmes, providing a unique and natural setting that can be calming, soothing, and therapeutic. The sound of the waves and the sensation of being in the water can help reduce stress and anxiety, while also promoting relaxation and mindfulness (Lopes et al., 2018; Marshall et al., 2020b).

**Physical Activity:** Engaging in physically demanding activities such as surfing requires individuals to utilise strength, balance, and coordination. Participating in physical activity has been shown to have a variety of mental and physical health benefits. For example, it can help reduce symptoms of depression and anxiety, as well as improve cardiovascular health. Additionally, it can also boost self-esteem and confidence (Marshall et al., 2019).

**Social Support:** Surf therapy programmes often provide opportunities for participants to connect with others and build supportive relationships. This social support can be particularly important for individuals who may be isolated or facing social barriers (Matos et al., 2017).

**Participants delivering the lesson:** Surf therapy programmes often have trained instructors and mentors who act as positive role models for participants. These role models can provide guidance, support, and encouragement, while also promoting positive values such as perseverance, resilience, and teamwork (Drake et al., 2021).

**Individualised Programming:** Surf therapy programmes often provide individualised programming and support that is tailored to the needs of each participant. This individualised approach can help participants achieve their goals, build confidence, and develop skills that are transferable to other areas of their lives (Clapham et al., 2014).

### ***7.3.3. Step 3: Understand the global best practice for persons with disabilities***

The Convention on the Rights of Persons with Disabilities (CRPD) was adopted by the United Nations (UN) General Assembly on 13 December 2006 and entered into force on 3 May 2008 (Hendriks, 2007). The goal of the CRPD is to make sure that persons with disabilities have the same rights as everybody else and that they are respected by others, with the principle being that no one will be left behind (Harpur, 2012; Hendriks, 2007; Szmukler, 2019). During the UN General Assembly on 25 September 2015, the resolution focused on the 2030 Agenda for Sustainable Development, which consisted of a global community Sustainable Development Goal action plan for the next 15 years, until the year 2030 (Brolan, 2016).

The Sustainable Development Goals (SDGs) can and should be interpreted consistently in line with the CRPD. The Office of the High Commissioner for Human Rights (OHCHR) is the leading UN entity on human rights (Mertus, 2010) and developed a SDG-CRPD resource, with a view to ensuring mutual reinforcement of the SDGs and the CRPD (OHCHR, 2020). This SDG-CRPD resource aims at providing support so that all actions undertaken for the SDGs are inclusive of persons with disabilities and guided by the CRPD.



# SUSTAINABLE DEVELOPMENT GOALS



Figure 7.1: United Nations Sustainable Development Goals (Image source: United Nations)

In 2015, the UN approved the 2030 Agenda for Sustainable Development, which comprises 17 Sustainable Development Goals (SDGs) and 169 targets. This global agenda is committed to ensuring that no one is left behind, including individuals with disabilities and other marginalised groups. It also acknowledges the importance of considering disability in the pursuit of all of the 2030 Agenda's goals (Janoušková et al., 2018; OHCHR, 2020). This signifies a significant step towards promoting inclusivity and accessibility in global development efforts. The 2030 Agenda's recognition of the rights and needs of persons with disabilities aligns with the UN's commitment to upholding the principles of equality and non-discrimination. By including disability in its goals, the UN aims to address the barriers and challenges faced by persons with disabilities in accessing education, employment, healthcare, and other essential services. It also emphasises the necessity of creating inclusive societies that provide equal opportunities for all individuals. The 2030 Agenda signifies a pivotal moment in global efforts to address the needs of persons with disabilities and other marginalised groups. By prioritising inclusivity and accessibility, the UN aims to create a more equitable and sustainable world for all.

The negotiations of the 2030 Agenda were carried out with the active involvement of organisations of persons with disabilities (OPDs) and, as a result, the 2030 Agenda reflects the rights of persons with disabilities across different goals (Mertus, 2010; OHCHR, 2020). The 2030 Agenda provides a framework which guides communities and countries toward the achievement of disability-inclusive development (UN Department of Economic and Social Affairs, 2019). The 2030 Agenda includes seven targets and eleven indicators explicitly referencing persons with disabilities, covering access to education and employment, availability of schools that are sensitive to students with disabilities, inclusion and empowerment of persons with disabilities, accessible transport, accessible public and green spaces, and building the capacity of countries to disaggregate data by disability (Madans et al., 2017; OHCHR, 2020). This informed the guidelines for the development of an adapted surf therapy programme.

### ***Disability inclusive development in designing a surf therapy programme***

Disability inclusive development refers to the process of designing and implementing development programmes and policies in a way that promotes the inclusion and empowerment of persons with disabilities. All stages of development processes should be inclusive of and accessible to persons with disabilities (UN Development Programme, 2017). It is a human rights-based approach that recognises the diversity and value of all individuals and aims to eliminate the barriers that prevent persons with disabilities from participating fully in society (Kabir, 2008; UN Development Programme, 2017). Disability inclusive development is crucial to creating a more equitable and just society. It involves incorporating measures that are sensitive to the needs and rights of individuals with disabilities into every stage of a development programme. This includes not only the initial design of the programme, but also its implementation, monitoring, and evaluation. By ensuring that development initiatives are inclusive of persons with disabilities, we can help to break down barriers and create opportunities for all members of society to fully participate and contribute. In the context of a surf therapy programme, disability may be physical, intellectual, cognitive or sensory, and each disability requires a unique programme adaptation. Developing an adapted surfing programme for children with disabilities required careful planning and consideration.

The delivery of the surf therapy programme for children with disabilities was developed using the best practice principles for the development of a customised programme for delivery in South Africa. The programme developed and delivered for this research was focused on children with disabilities in the Western Cape, taking into consideration cultural, environmental, and social circumstances, as well as the various barriers faced within this context and location.

#### ***7.3.4. Step 4: Delivery of a six-week surf therapy programme for children with disabilities in the Western Cape***

##### ***Defining the curriculum***

The programme delivered was a structured learning programme that included two learning stages:

1. Land-based programme, which includes the “surfers’ circle” and surf therapy curriculum for sessions 1 to 6.
2. Ocean-based programme, which includes the surf lesson topics for sessions 1 to 6.

The programme has a structured curriculum that includes warm-up exercises, surf training, and water safety instruction. The curriculum is adaptable to the specific needs of each child.

The land-based programme includes the “surfers’ circle” and surf therapy curriculum, providing a platform for surfers, coaches, and individuals delivering the programme to interact. Each session has a theme and therapeutic input is provided during beach work sessions. The Surf Therapy Beach Work Activity Themes for session 1 to 6 are presented in Table 7.2 below.

*Table 7.2: Surf Therapy Beach Work Activity Themes for Session 1 to 6*

<b>Surf Therapy Beach Work Activity Themes</b>	
<b>SURFERS' CIRCLE TOPIC</b>	<b>LEARNING GOAL</b>
Session 1: I am feeling...	Open communication / building trust
Session 2: One thing you don't know about me...	Social interaction
Session 3: My Senses... Learning about the beach and the ocean - Touch, Smell, See, Hear, Taste	Connecting with your senses
Session 4: I don't like it when / I like it when...	Asserting yourself
Session 5: Surfing makes me feel...	Physical activity / emotional connections
Session 6: I have learnt... & I am feeling...	Skills development recognition / follow-up monitoring

The significance of the land-based teaching was highlighted in the following feedback from a professional:

*The part of the surf therapy programme that contributed specifically to those areas was the surfers' circle at the beginning where they could speak about how they feel and how their day was. Because I think that for most of the children, and especially for Charlie also, it's difficult always to express how they feel. And what is the feeling and it's ok to feel like that and it's ok to feel uncertain, it's ok to not to know what is going to happen and just go for it and be in the moment. I think that was quite nice. – Charlie's Teacher*

Surf Therapy Ocean-Based Activity Themes for session 1 to 6 are reflected in Table 7.3 below.

Table 7.3: Surf Therapy Ocean-Based Activity Themes for session 1 to 6

Surf Therapy Ocean Based Programme	
Lesson Topic	Learning Goal
Lesson 1: ABC's of surfing & learning basic riding technique to suit ability	Introduction of a structured learning environment
Lesson 2: Managing yourself in the ocean	Skill development and goal assignment
Lesson 3: Riding technique adaptation based on skill advancement or regression	Multidirectional interaction and mutually agreed goal set
Lesson 4: Things I need to know (waxing board/basic surf etiquette/equipment)	Personal surfing development: skills and knowledge gathering
Lesson 5: Riding a wave with balance & control (with or without support)	Connection between environment (waves), equipment and person
Lesson 6: Balance, speed, transversing (turning)	Understanding: The interaction between task assigned, application of task and feedback. (I see, I learn, I understand, I do)

Ending the lesson with a surfers' circle check-in is important to recognise the goals set and achieved in the session, as well as discuss the following week's activities and provide any mid-week support activity that can be implemented in between lessons. Additionally, checking in on the participants' mental, physical, and emotional state before ending the lesson provides the opportunity for appropriate feedback and

follow-up if required. Table 7.4 below provides an example of the structured schedule for one research surf therapy programme day.

Table 7.4: Example of the structured schedule for one research surf therapy programme day

Research Surf Therapy Programme: 14 May 2021			
Specialists			
Volunteer Specialist	Programme Manager		
Volunteer Specialist	Physiotherapist / Safety Officer		
Volunteer Specialist	Physiotherapist		
Volunteer Specialist	Sports Physiotherapist		
Land Volunteers			
Land Volunteer 1	Beach Registration Volunteers, Volunteer Covid Officer and Land Logistics		
Land Volunteer 2	Beach Registration Surfers, Surfer Covid Officer 2 and Land Logistics		
Land Volunteer 3	Beach Mentor and support		
Land Volunteer 4	Beach Mobility Logistics		
<b>SESSION ONE</b>		<b>SESSION ONE</b>	
<b>13:00pm</b>		<b>13:00pm</b>	
Participant: Rowan	Disability: Loss of arms and legs	Participant: Thabo	Disability: Leg amputation above knee
SSL – Surfer Safety Level	SSL2	SSL – Surfer Safety Level	SSL2
SAL - Surfer Ability Level	SAL1 (IP = Independent surf, requires paddle assistance)	SAL - Surfer Ability Level	SAL1 (A = Assisted Surf)
Surf Instructor	SSA Coach and Adaptive Coach	Surf Instructor	SSA Coach and Adaptive Coach and NSRI Qualified
Volunteer Practitioner 1	Head Volunteer 1 (Teacher)	Volunteer Practitioner 1	Head Volunteer 1
Volunteer Practitioner 2	Head Volunteer 2 (Occupational Therapist)	Volunteer Practitioner 2	Head Volunteer 2 (Student Occupational Therapist)
Volunteer 1	Session Companion / Buddy (Male)	Volunteer 1	Session Companion / Buddy (Male)
Volunteer 2	Water Side L1	Volunteer 2	Water Side L1
Volunteer 3	Water Side R1	Volunteer 3	Water side R1
Volunteer 4	Catcher	Volunteer 4	Catcher
<b>SESSION TWO</b>		<b>SESSION TWO</b>	
<b>14:00pm</b>		<b>14:00pm</b>	
Participant: Tala	Disability: Cerebral Palsy affecting both legs.	Participant: Princess	Disability: Spinal bifida paralysis from waist down
SSL – Surfer Safety Level	SSL2	SSL – Surfer Safety Level	SSL2 (Has difficulty regulating body temperature)
SAL - Surfer Ability Level	SAL2 (Surfs in kneeling position)	SAL - Surfer Ability Level	SAL5 (seated with practitioner support)
Surf Instructor	SSA Coach and Adaptive Coach	Surf Instructor	SSA Coach and Adaptive Coach and NSRI Qualified
Volunteer Practitioner 1	Head Volunteer 1 (Teacher)	Volunteer Practitioner 1	Head Volunteer 1 (Chair Position to support on board)
Volunteer Practitioner 2	Head Volunteer 2 (Occupational Therapist)	Volunteer Practitioner 2	Head Volunteer 2 (Student Occupational Therapist)
Volunteer 1	Session Companion / Buddy (Female)	Volunteer 1	Session Companion / Buddy (Female)
Volunteer 2	Water Side L1	Volunteer 2	Water Side L1
Volunteer 3	Water Side R1	Volunteer 3	Water side R1
Volunteer 4	Catcher	Volunteer 4	Water Side L2
		Volunteer 5	Water side R2
		Volunteer 6	Catcher
<b>SESSION THREE</b>			
<b>15:00pm</b>			
Participant: Charlie	Disability: Spastic high tone cerebral palsy		
SSL – Surfer Safety Level	SSL2 (Has difficulty regulating body temperature)		
SAL - Surfer Ability Level	SAL4 (IP = Independent surf, requires paddle assistance)		
Volunteer Practitioner 1	Head Volunteer 1 (Teacher)		
Volunteer Practitioner 2	Head Volunteer 2 (Occupational Therapist)		
Volunteer 1	Session Companion / Buddy (Male)		
Volunteer 2	Water Side L1		
Volunteer 3	Water Side R1		
Volunteer 4	Catcher		

### 7.3.5. Step 5: Incorporating feedback from participants, including children with disabilities, parents, guardians, professionals, and the individuals delivering the surf therapy programme

The participants' feedback during this research process provided an integral dimension to ensure that the children with disabilities were able to benefit equally and that inequality was not perpetuated. The genuine consultation with and involvement of all research participants was a significant part of the overall process. Below, I discuss facilitators and barriers to participation as well as programme considerations based on feedback from individuals delivering the surf therapy

programme provided during the focus group. These combined factors will have significant influence in future programme development, delivery, and adaptations for children with disabilities participating in surf therapy programmes.

The International Classification of Functioning, Disability and Health (ICF) is a classification of the components of functioning and disability related to health conditions (WHO, 2001). The ICF was approved for use by the World Health Assembly in 2001 and a companion guide for children and youth (ICF-CY) was published in 2007 (WHO, 2007). The ICF framework provides a standardised language and conceptual basis for the definition and measurement of both health and disability. One of its main underlying principles is environmental factors, recognising the importance of environment in people's functioning, including physical, attitudinal, and social factors. Environmental factors affect experiences of body function, structure, activities, and participation as either facilitators or barriers. There are five categories of environmental factors, namely attitudes, natural environment, products and technology, support and relationships, and services, systems, and policies. These environmental factors are external to the person and can have a positive or negative influence. Of the five categories of environmental factors, the following will be addressed from both a facilitatory and barrier perspective:

***Factors influencing programme delivery from the perspective of the parents, guardians, and professionals***

Facilitators, as discussed in the ICF, are crucial to improving an individual's functioning and reducing disability. These factors are present in a person's immediate environment and can have a significant impact on their overall well-being. Examples of facilitators may include the presence of an accessible physical environment, the availability of relevant assistive technology, positive attitudes of people towards disability, and inclusive services, systems, and policies aimed at enhancing the inclusion of individuals with health conditions (WHO, 2001). It is important to recognise the significance of facilitators in promoting the overall health and well-being of individuals. By ensuring the presence of these facilitators in a person's environment, we can create a more inclusive and supportive society for

those with health conditions. This in turn can lead to improved functioning and reduced disability for individuals, ultimately enhancing their quality of life.

The ICF highlights the role of the absence of a factor that may also be regarded as a facilitator in preventing limitations and restrictions that can arise from impairments. A key example of this concept is the absence of negative attitudes and stigma, which can act as facilitators by improving a person's ability to participate fully in activities. This means that the lack of certain barriers such as prejudice or discrimination can enhance the performance of an action (Ott et al., 2022).

Parents, guardians, and professionals highlighted the areas in which the programme had had an impact, and these became facilitators, as shown in figure 7.2 below.

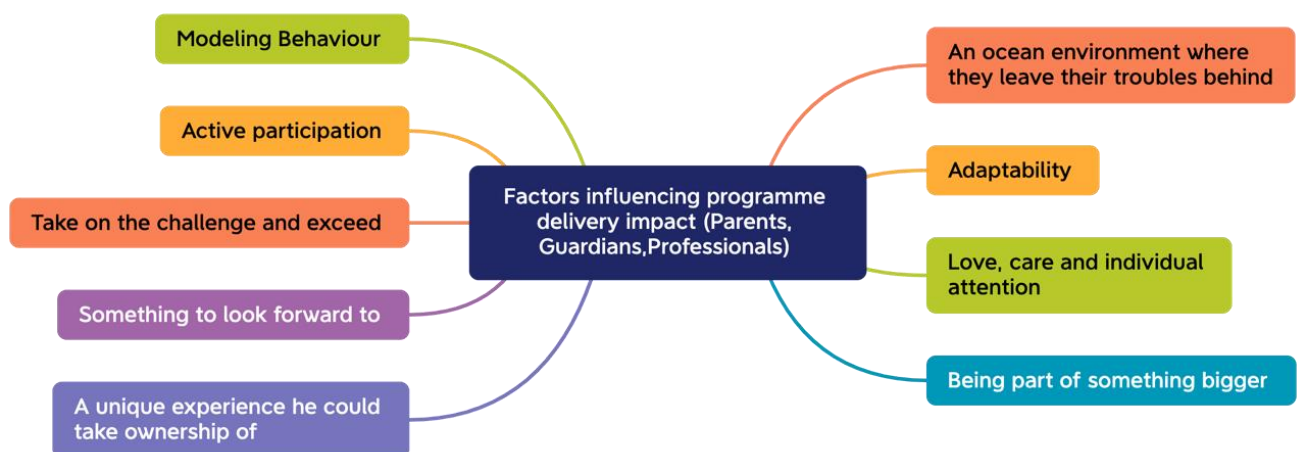


Figure 7.2: Facilitators to participation from the perspective of the parents, guardians, and professionals

### **Ocean Environment – Natural Environment**

Being in nature and in the ocean became a place the children could go to “forget everything”:

*One thing she also said was the emotions, she felt well-being at the ocean. Just being in another space and forgetting anything else so just being there. And experiencing it and taking it in. –*

Tala’s psychologist

### **Adaptability – Attitudinal Facilitators**

The children learnt to accept change and adapt to changing environments within the framework of a structured programme:

*He kind of took what was given to him in that space, as opposed to trying to have everything figured out before. – Thabo's physiotherapist*

### **Love, care, and individual attention – Support and relationships**

The children received love, care, and focused individual attention, which was important for them:

*Honestly, I think that from this programme we really recognise that it's like the thing about the star fishes. There are so many starfish on the beach but through this programme, every child that has participated, it has meant the world to, and it's not always about numbers but it can mean like just the experience for one child or a small group, it can make a big difference. – Thabo's physiotherapist*

### **Being part of something bigger – Support and relationships**

There was the awareness that each child was part of a broader community, which widened their worldview:

*Because things like this can last a lifetime. it's not just about what happens on the beach. It's about: if you feel part of something bigger, if you know that there are more possibilities just beyond your house or beyond the walls of your school – Thabo's physiotherapist*

### **Taking ownership of a unique contribution – Attitudinal Facilitators**

The personalised experience that was unique for each participant was significant:

*This was something that for him was very personal because it was unique. Going forward, there's not anybody else in his family and in his immediate community that does it other than the kids at school. It was his thing that he could take ownership of. He was always proud to talk about it. And he would reminisce sometimes and the overarching way he expressed his experience was good*

*challenges and personal accomplishment, which was big. –*

Thabo's physiotherapist

### **Something to look forward to – Attitudinal Facilitators**

Future planning and being able to look forward to a positive experience were significant:

*I think that the biggest single thing was, having something every week to look forward to, made the whole week good and easy. –*

Charlie's father

### **Take on the challenge and exceed – Attitudinal Facilitators**

The children's ability to overcome the challenging aspects of participation was significant:

*He's learnt how to take the challenge head on and how to excel and how to succeed –* Rowan's physiotherapist

### **Active participation – Attitudinal facilitators and Products and Technology**

The children were actively involved in the participation process, as opposed to being passive attendees:

*He is actively participating in the activity –* Rowan's physiotherapist

Through the inclusion of adapted equipment, it was made possible for the children to actively participate in the activity. One example of this was the addition of handles to the surfboard, which allowed the child to ride and steer with control, in turn allowing them to make the choice to ride independently without the surf instructor holding the back of the board.

### **Modelling – Attitude and the absence of prejudice, stigma, or discrimination**

The children modelled behaviours they had observed and been on the receiving end of during their experience in the surf therapy programme:

*He's loyal as a friend and kind to those around him. The help and kindness that he experienced during surf therapy impacted positively in that way. I can't say that that's a direct correlation, but*

*I can imagine that that also contributed to having the confidence to help and be kind and encourage. – Thabo's physiotherapist*

### **Barriers to participation**

An important part of developing a programme is to identify the barriers to participation and/or successful programme delivery. These barriers were identified through deductive analysis of the categories of ICF. By highlighting barriers to participation, it allows for the exploration of possible solutions to overcome these barriers. Several factors were highlighted as barriers experienced during the delivery of the programme. These barriers were highlighted during the research process by the children with disabilities, parents, guardians, professionals, and individuals delivering the programme. As the researcher, I also included the barriers I observed during this time in my observations and reflective journaling,.

One of the significant changes which supported finding solutions to the barriers included **participants' attitudinal changes** over the course of the surf therapy programme and the year afterwards:

- A surf instructor and a surf therapy participant had been students at the same school as children. The surf instructor had a learning disability while the participant had a physical disability. Through the years, they had lost touch, and then reconnected through the surfing experience. The surf instructor had expressed his challenges with a learning disability, which he had always been ashamed of. Through the experience of reconnecting with the participant during the surf therapy programme and personal reflection through the focus group process, he realised that he did “not need to feel ashamed of his journey” and was able to celebrate his uniqueness as a personal strength.
- A child's physiotherapist expressed how, through the process, he changed his own mindset and perceived barriers. He had initially thought that “*surfing it's not something most black children are doing... These people don't have money for bread and now you want them to go surf*”. Later, he expressed how his opinion had changed and now saw surfing as an inclusive and positive opportunity which more people should be told about.

- A mother expressed her change in perspective about her child’s ability, sharing that “*I used to see him as a child who was disabled...I realised it was me that was having the problem*”.
- A child’s teacher similarly expressed her perspective of challenging her opinions of what is “normal”, saying “*I don’t want to say normal, but what is normal?*”
- An unexpected barrier was the “reverse exclusion” of participation, which was that able-bodied siblings and family members were unable to participate in the lessons alongside their family members. One example of this was when a mother indicated that, on the way to the beach, her other son had said, “*mommy, I wish I had down syndrome too so I can also go surf*”. This shows the importance of family inclusion, not just on the beach but also in the water, where the opportunity for inclusion can be provided.

Barriers in all five ICF categories were highlighted through the delivery of the surf therapy. In table 7.5 below, I have included the barrier identified in relation to the ICF category and the solution to the barrier. An actioned solution highlights the steps that have already been taken to overcome these barriers, while proposed solutions are ones that have been submitted to local government or the local community for further support.

Table 7.5: Barriers identified in relation to the ICF and solutions

BARRIER	SOLUTION: Actioned or proposed	STAKEHOLDER: who will/should be accountable
<b>SURF THERAPY PROGRAMME</b>		
<b>Support and relationships:</b> Family members are not included	<b>Actioned:</b> Include family members in the surf therapy process as volunteers and participants in surf lessons	<b>Surf Therapy Programme</b>
<b>Products and technology:</b> Access to	<b>Proposed:</b> Provide a permanent facility for people	<b>Local city authorities</b>

adapted equipment and adapted surf equipment	to access adapted equipment on a daily basis	
<b>Products and technology:</b> Wetsuits are not customised for surfers with disabilities	<b>Actioned:</b> Partner with local wetsuit manufacturer for customisation of wetsuits	<b>Local wetsuit business</b>
<b>Services:</b> Tap water for drinking is not available	<b>Actioned:</b> Providing clean bottled water	<b>Local city authorities</b>
<b>Services, systems, and policies:</b> Limited access to the people with specialised training who know how to deliver a lesson to those with special needs	<b>Actioned:</b> Provide more training and mentorship	<b>Surf Therapy Programme</b>
<b>Support and relationships:</b> Participants expending energy and getting hungry after the surf lesson	<b>Actioned:</b> Prepare meals for participants after the lesson	<b>Surf Therapy Programme</b>
<b>PUBLIC CHANGING FACILITIES AND PUBLIC OPEN SPACE</b>		
<b>Natural environment/Services, systems, and policies:</b> <b>Changing Facility:</b> Limited access to disabled changerooms that include rails, non-slip floor, and changing benches	<b>Proposed:</b> Access to disabled changerooms and toilet facilities which include more bathrooms for changing with rails, benches, space, privacy, etc.	<b>Local city authorities</b>

<p><b>Natural environment/Services, systems, and policies:</b> No place to easily rinse off sand and no space for parent/assistant to help with changing; no place to hang bags and clothes while changing; limited toilets for persons with disabilities; no privacy</p>	<p><b>Proposed:</b> Upgraded infrastructure to accommodate these requirements</p>	<p><b>Local city authorities</b></p>
<p><b>Changing facility:</b> Currently, participants are required to be lying on the bathroom floor if someone is assisting them with changing.</p>	<p><b>Proposed:</b> The availability of height-adjustable plinth tables for individuals that need more space and a stable surface to change on. Chairs and seating for individuals with prosthetics to change.</p>	<p><b>Local city authorities</b></p>
<p><b>Changing facility:</b> No safe changing facility that is inclusive. For example, if a mother wants to change her teenage son, it is not possible.</p>	<p><b>Proposed:</b> Inclusive safe changing facility for families, transgender individuals, elderly, and those with mobility aids.</p>	<p><b>Local city authorities</b></p>
<p><b>Public space:</b> Uneven terrain</p>	<p><b>Proposed:</b> Upgrade terrain to consider persons with disabilities</p>	<p><b>Local city authorities</b></p>
<p><b>Public space:</b> Ramp access not close to public facilities and too far down the beach</p>	<p><b>Proposed:</b> A central beach ramp closer to the public facilities</p>	<p><b>Local city authorities</b></p>

<p><b>Public space:</b> Limited access to public spaces such as the grass picnic spot alongside the beach or the beach itself</p>	<p><b>Proposed:</b> Provide ramps or flat access to grassy areas and the beach</p>	<p><b>Local city authorities</b></p>
<p><b>Public space:</b> Visually impaired beach users experience challenges navigating the beach facilities on their own</p>	<p><b>Proposed:</b> Braille signs, guide ropes, and maintained areas without obstructions</p>	<p><b>Local city authorities</b></p>
<p><b>Public space:</b> Not wheelchair friendly: Small steps, high push taps, no handles, slippery floors, and narrow entrance prohibit access to the beach shower facilities. Wheelchair users cannot access the showers.</p>	<p><b>Proposed:</b> Widened access to the shower facilities. Non-slip shower areas. Lowered taps which can be reached when sitting in a wheelchair chair</p>	<p><b>Local city authorities</b></p>
<p><b>Public space:</b> Narrow walkways and green concrete cones on walkways are not spaced correctly, which prohibits wheelchair and beach mobility chair use.</p>	<p><b>Proposed:</b> Widened access to allow beach wheelchairs to access public pavements</p>	<p><b>Local city authorities</b></p>
<p><b>Public space:</b> Limited parking bays. There are currently only 2 disability parking bays available.</p>	<p><b>Proposed:</b> Provide more disability parking bays</p>	<p><b>Local city authorities</b></p>

<p><b>Public space:</b> Limited access to public facilities such as bins, lockers, showers.</p>	<p><b>Proposed:</b> Make sure all public facilities are accessible to persons with disabilities</p>	<p><b>Local city authorities</b></p>
<p><b>Public space:</b> Safety at the beach. A space for safe storage for mobility aids such as white canes, prosthetics, and wheelchairs.</p>	<p><b>Proposed:</b> A universal access information centre and facility that provides large lockers and safe space to store prosthetics and wheelchairs while using the beach.</p>	<p><b>Local city authorities</b></p>
<p><b>Public space:</b> Limited shelter from wind and over exposure to sun for persons with disabilities while at the beach.</p>	<p><b>Proposed:</b> Access to local beach amenities such as the “beach huts” or a sheltered space incorporated into the beach design.</p>	<p><b>Local city authorities</b></p>
<p><b>Disability equipment:</b> Difficult public access to municipal beach wheelchair or mobility mat to reach the beach and water’s edge.</p>	<p><b>Proposed:</b> Beach Universal Access facility to provide public daily use of these items.</p>	<p><b>Local city authorities</b></p>
<p><b>SAFETY AND ACCESSABILITY</b></p>		
<p><b>Support and Relationships/Services:</b> Seasonal presence of lifeguards for all beach users, including in the “surf zone” particularly for persons with disabilities.</p>	<p><b>Proposed:</b> Explore ways to increase safety year round</p>	<p><b>Local city authorities</b></p>

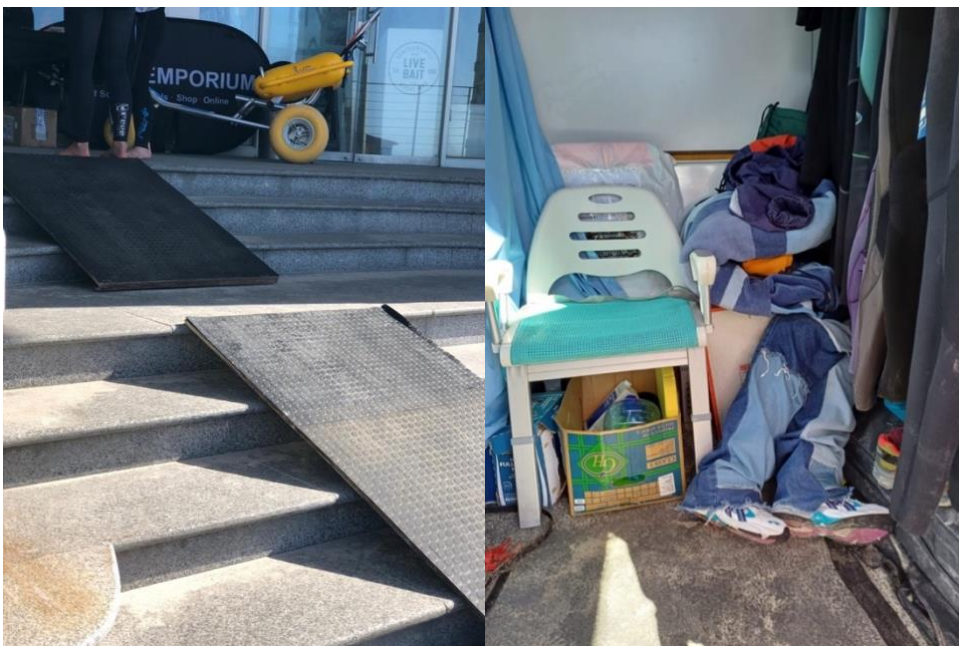
<p><b>Support and Relationships/Services:</b> Additional training for lifeguards to rescue persons with disabilities is limited</p>	<p><b>Proposed:</b> Provide training of lifeguards on duty to rescue persons with disabilities</p>	<p><b>Local city authorities</b></p>
<p><b>Support and Relationships/Services:</b> Limited visibility of beach signage, including blue flag status, shark spotter information, and emergency numbers.</p>	<p><b>Proposed:</b> Upgrade beach signage</p>	<p><b>Local city authorities</b></p>
<p><b>Natural Environment: Accessibility:</b> Limited access to shops at the beachfront that are accessible to persons with disabilities.</p>	<p><b>Proposed:</b> Educate local businesses and surrounding community regarding disability inclusion and providing support to find more inclusive solutions.</p>	<p><b>Surf Therapy Programme</b></p>
<p><b>Services, systems, and policies:</b> <b>Transportation:</b> Limited safe transportation for children with disabilities, their parents, guardians, and family members</p>	<p><b>Proposed:</b> Providing more transport opportunities for more family members to join for the day at the beach</p>	<p><b>Local city authorities</b></p>

Overcoming physical barriers was discussed during interviews, with participants using positive outlook wording such as:

- *'He was free in the water.'*
- *'It means there is longevity of us being able to do things.'*
- *'We are just two people with different disabilities, kicking the football and accommodating each other's disability.'*



*Image 7.3: Beach mobility chairs to provide access to the ocean*



*Image 7.4: Ramps built to support inclusive access to a surf shop*

*Image 7.5: Inside the mobile trailer which provides changing and safe storage facilities*

**Surf therapy programme considerations based on feedback from individuals delivering the surf therapy programme**

During the focus group with the individuals delivering the surf therapy programme, one of the questions asked was “Are there negatives or downsides of the programme you can speak to?”, which are important considerations in the adaptation of a surf therapy programme. The following points highlighted were within the context

of a surf therapy programme that ran after the research was completed and not in the context of the six-week research programme.



Figure 7.3: Programme challenges from the perspective of the participants delivering the surf therapy programme

1. **Resources:** A lack of funding which impacts the ability to reach programme goals. Dependence on resources such as volunteers and transport. Equipment limitations and the reality that limited resources cannot always accommodate everyone.
2. **Volunteers:** The programme does not have enough consistent volunteers, which leads to volunteer burn out. Additionally, more volunteers would increase the number of participant sessions available. It was highlighted that the programme is always reliant on a small group to show up and the volunteers would appreciate more and consistent volunteers.
3. **Training:** First time volunteers need more training and there is a lack of training because programmes are volunteer based. As programme requirements increased, the ability to provide consistent training reduced. This led to volunteers learning as they went along and head coaches not providing thorough and sufficient team briefings. Some volunteers felt they were not capable. There is also no clear training progression for volunteers.
4. **Planning and preparation:** There were continuous challenges around planning and changes. The amount of planning required, including logistics, changing, and sunscreen application, was time consuming and changed constantly.

5. **Transportation:** Unreliable transportation, including collections and drop offs. Often surfers do not arrive on time and have to drive in transport for many hours to reach the beach.
6. **Consistency:** The structure post-research programme was inconsistent in contrast to the six-week programme. Volunteers felt it worked well in the research programme but not was sustained afterwards. The number of volunteers per surfer needed to be constantly assessed and reassessed.
7. **Time:** The limited time available for participation was highlighted in the context of needing to deliver multiple sessions within a specific period of time. Some participants had to wait because of uncontrollable variables, which led to agitation or overstimulation for some of them. The volunteers' personal time constraints were also highlighted – they were not able to be as involved as they would like and requested more time and date options. Time is limited in the water as they only have one hour per surfer.
8. **Programme structure and delivery:** It was highlighted that more surf therapy fundamentals are needed, such as the surfers' circle. Sometimes volunteers did not get to work with the same child, and therefore handover of participant information is required, particularly for head volunteers, including medical conditions, abilities, and history. Volunteers acknowledged the need to have understanding and empathy for the children and their disabilities. An example raised was a child being worried about disappointing his parent. A volunteer raised the unique qualities required to be part of the team delivering a surf therapy programme – *"You need to have a calling to be there"* – while another highlighted that body language considerations from volunteers need to be factored into training and programme delivery. It was highlighted that in the research sessions, everything was improved from session to session.
9. **Logistics:** There were practical implications highlighted, such as working with tides and considering a different venue or another beach to include a different community. The limited number of times the programmes are delivered (once per month) was highlighted, as was the lack of continuity in programme logistics and the decreased volunteer endurance during longer clinics or when conditions are rough or cold.
10. Another point highlighted was the limitation of not being able to get more participants or "reach more children", both because of the vast programme

delivery requirements and the lack of awareness of the programme's availability to the public.

11. **Emotional impact:** A volunteer highlighted the difficulty in helping people to understand the extent of their own power, and there is no clear way of how to do so. One OT volunteer struggled to help lead sessions with volunteers who hold on too tightly to their "power and self-importance". Another volunteer highlighted the experience as being overwhelming for the volunteers in light of some of the backgrounds/experiences of the participants and what they have dealt with.

### ***7.3.6. Step 6: Applying Bronfenbrenner's Bioecological Model of Human Development to Disability Inclusion and a Surf Therapy Programme in South Africa***

Bronfenbrenner's Bioecological Model Of Development has provided a powerful framework for examining the potential impact of surf therapy for children with disabilities in South Africa and highlighted the importance of considering the larger context in which surf therapy programmes operate, including the various systems that impact participants' development. It emphasises the multiple layers of influence that shape human development, from immediate settings to broader societal contexts. The model highlighted the importance of understanding the complex interplay between different systems in shaping human development. Through the delivery of a surf therapy programme, there were various environmental systems that influenced the development of the children with disabilities, including the individual, microsystem, mesosystem, exosystem, and macrosystem. This model emphasises that development occurs within a larger context and that interventions should address the needs of individuals in the context of their environment.

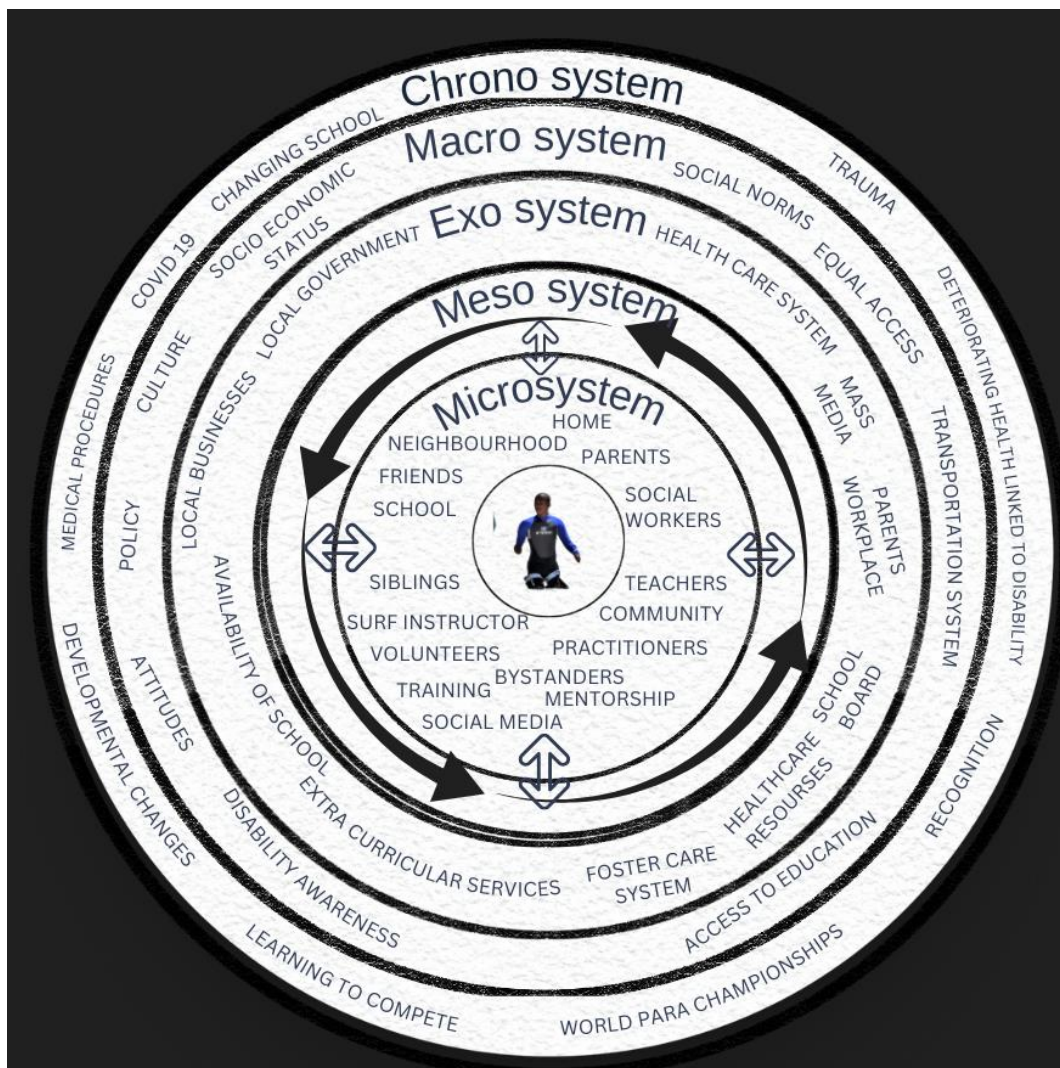


Figure 7.4: Bronfenbrenner's Ecological Systems Model applied to a surf therapy programme (researcher's own design)

In the context of the surf therapy programme, the microsystem consisted of the immediate environments and people with which the children interacted. The quality of relationships and experiences within this microsystem significantly impacted the children's development and the effectiveness of the programme delivered. The mesosystem included the connections and interactions between different microsystems, and a coordinated and collaborative approach between these different systems facilitated the children's development and overall health promotion. Effective communication and coordination between these groups was crucial for ensuring the children's progress and providing ongoing support. The exosystem incorporated settings that indirectly influenced the children's development, while the macrosystem represented the larger cultural and societal values, laws, and policies

that have influence on the children's development. The macrosystem included the cultural norms, values, and beliefs that shape the larger societal context in which the programme operated. The chronosystem included the influence of time and change on the children participating. This included specific life transitions such as moving to a new school, changes in the children's overall health, and changes in policies and societal attitudes towards disability inclusion.



Figure 7.5: Bronfenbrenner's Process, Person, Context, and Time applied to a surf therapy programme (researcher's own design)

The overall consideration of process, person, context, and time (PPCT) were crucial to the development and understanding of the proximal processes. The same process had an effect on individuals differently (Bronfenbrenner & Evans, 2000). In addition, the bi-directional influences had impact in both directions, both away from and towards the individual. The PPCT framework in relation to therapy considered the following: the process including interactions, relationships, and activities; the children

participating and their individual characteristics, attributes, and personal factors; the context, including the environment and contextual factors; and time, recognising that development and change occur over time.

This helped to identify the various systems that impact the effectiveness of Surf Therapy programmes for children with disabilities and promoted a coordinated and collaborative approach to disability inclusion. It also provided a useful framework for understanding the various environmental systems that had impact for children with disabilities participating in surf therapy programs in South Africa. By examining the PPCT processes a more comprehensive approach to disability inclusion and surf therapy programme development led to positive outcomes for individuals with disabilities, as well as the broader community.

### ***7.3.7. Step 7: Explore and develop a theory of change for delivering a surf therapy programme for children with disabilities***

A theory of change (ToC) is a framework used to articulate the expected causal pathways between an intervention and the desired developmental outcomes, based on available evidence (UN Development Group, n.d.). It serves to clarify the underlying mechanisms and reasons behind the success of an initiative (Weiss, 1972), and is widely used in the field of public health (Breuer et al., 2015). ToCs emphasise the connection between programme activities and their intended impact, as evidenced in programmes such as surf therapy. This approach allows for a deeper understanding of how specific activities contribute to broader goals, and can provide a foundation for evaluating the effectiveness of interventions. By explicitly mapping out the logical steps and assumptions that underpin an intervention, ToCs also enable stakeholders to better communicate their expectations and hypotheses about how change will occur.

In the context of an existing surf therapy programme for children with disabilities being delivered in Cape Town, South Africa, the programme has a clear outline of structured activities, but it was necessary to understand whether, and how, the programme works (Coryn et al., 2011). This process helped identify gaps, priorities, and areas within the programme that needed to change or improve, which lead to clearer goals and better plans for achieving them. ToC is a structured and systematic

process for thinking things through, a key component of which is “backwards mapping” (A. Anderson, 2009), which involves working back toward the earlier changes that needed to occur (Taplin & Clark, 2012). I started with a thorough understanding of the issue I was trying to address and its causes through situation analysis. I clarified the precise target groups I was working with, namely children with disabilities. In backwards mapping, I started with defining impact, moving on to focus on the intermediate outcomes, and then the activities. Finally, I explored how the activities are intended to work, and the quality of work the programme intends to deliver. The output from this ToC process describes how I believe the activities will lead to the outcomes and impacts intended to be achieved. The process has provided me and others the opportunity to think about, discuss, collaborate, and strengthen a programme through a considered decision-making process and stronger teams as people were brought together. The outputs have provided a greater sense of clarity and purpose, and a clear plan that will help to evaluate and communicate the work, both internally and externally. The inputs described below are investments and resources required for the delivery of a surf therapy programme for children with disabilities. Outputs are divided into activities and participation. Output activities are what is delivered in the programme, while participation output refers to the individuals involved in the process. Outcomes are focused on three areas in terms of what the programme is aiming to achieve during the short term (0-3 months), medium term (3-6 months), and long term (6 -12 months). The impact is the longer term changes, which are the results derived from the accumulation of outcomes. Enabling factors are factors that will support the process, limiting factors are factors that may hinder the process, and delivery assumptions are the conditions that need to exist for planned change to happen.

The most critical perspective in the ToC development is that of the child participants themselves. The children in this study experienced significant improvements in a number of domains following participation in the surf therapy programme. Findings also expanded on the experiences and perspectives of the parents, guardians, professionals, and volunteers, which are instrumental in the development of a ToC. The development of a ToC for surf therapy programmes for children with disabilities is a multi-faceted approach, considering the perspectives of all stakeholders. The existing literature supports the benefits of surf therapy, but it also underscores the

need for a structured, evidence-based approach to maximise its potential (Benninger et al., 2020; Podavkova & Dolejs, 2022). The ToC can support programmes for surf therapy for children with disabilities in South Africa, guiding them towards the successful delivery of outcomes and impact. It is important to express that chapters 3, 4, 5 and 6, as well as all the steps in this chapter, informed the development of the ToC. This ToC may continue to evolve and change over time.

The ToC has the following outcomes:

1. Knowledge development
2. Change in affective behaviour
3. Well-being
4. Values
5. Advocacy
6. Worldview change
7. Health promotion

Impact categories are highlighted in figure 7.6 below in relation to applicable SDGs, the CBR Matrix, and the CRPD (Hendriks, 2007; Madans et al., 2017; OHCHR, 2020; WHO, 2010).



### 7.3.8. Step 8: Develop a programme guide for adapting a surf therapy programme for children with disabilities in South Africa

The final stage of adapting a surf therapy programme for children with disabilities was creating a guide for surf therapy adaptation in South Africa. This was divided into three focus areas, namely programme design, programme content, and programme delivery, as shown below in figure 7.7. As programme evaluation is an ongoing process, this guide may continue to evolve and change over time. The full guide is available here: [A GUIDE FOR SURF THERAPY ADAPTATION IN SOUTH AFRICA](#)

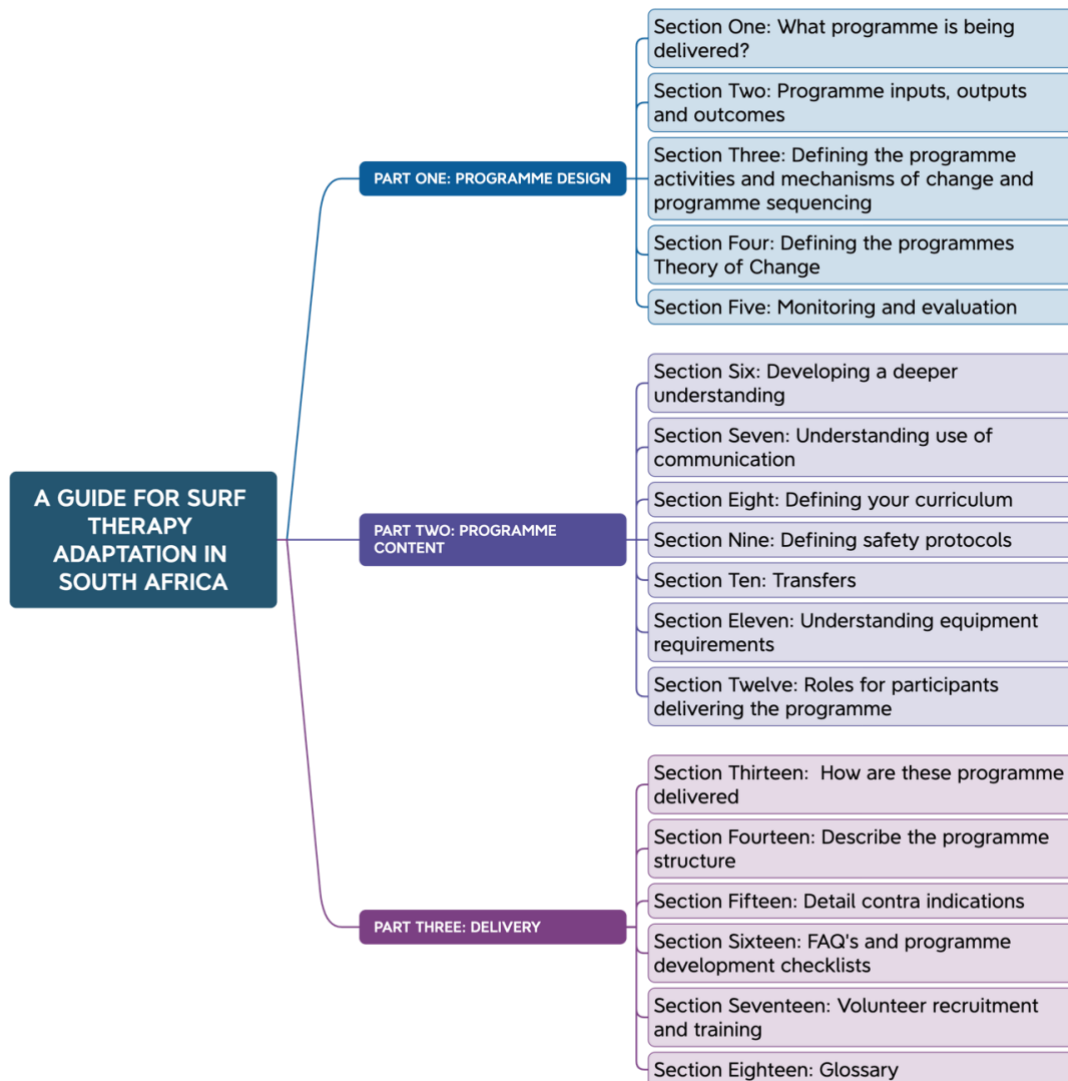


Figure 7.7: The outline of a guide for surf therapy adaptation for children with disabilities in South Africa

Overall, while developing an adapted surfing programme for children with disabilities requires careful planning and consideration, the benefits of such a programme can be significant. Through adapting a surf therapy programme and describing the adaptations of the programme, a guide for delivering surf therapy for children with disabilities in South Africa was developed.

## **7.4. Limitations**

### ***7.4.1. The development and implementation of an adapted surf therapy programme***

An existing surf therapy programme in South Africa had been running since 2016 and in a formal capacity since 2019. It is only this existing programme's design which was documented during this research process, no others. The adaptations for this research were also developed specifically for children with disabilities participating in a surf therapy programme in the Western Cape, and it has not been established if this programme could be adapted to other populations. Both of these factors are limitations of this study. Specific considerations in this regard include the following:

1. Development of the programme took place in one organisation and in one location.
2. The newly adapted programme has not been used for a prolonged duration. Formal research documentation, design, and delivery took place in 2021, with adaptations taking place from 2022 to 2023.
3. Updates and changes will continue to be made to the programme adaptation document as the programme develops and evolves to meet the requirements of the community.

### ***7.4.2. Continued participation***

Although children's participation continued for one year after the six-week surf therapy programme had been completed, the participation attendance varied from 5 to 16 sessions.

- a. The reasons for the attendance fluctuation were not established.

- b. The programme manager suggested five key reasons for this fluctuation:
1. Girls participating were more reluctant to surf during menstruation.
  2. Injury and medical procedures were a limiting factor for participation due to prolonged recovery.
  3. Frequency of illness was highlighted as an influencing factor.
  4. Family support: Participants under guardianship or not receiving positive family support participated less frequently.
  5. Even through the children received the service of private transportation, the programme requirement was that children under 16 years of age were required to have a chaperone present in the transportation from their home to the beach and on the return trip. These children would therefore not have been able to attend if there was no one available to chaperone them.

It was noted that the high cost of surfing equipment and lessons makes sustainable programme delivery a challenge. The current programmes in South Africa provide surf therapy at no cost to participants for as long as the organisations themselves can sustain programme delivery and the associated costs.

## **7.5. Recommendations**

- There is a need for support for the capacity development of organisations of persons with disabilities delivering surf therapy programmes in South Africa.
- Assistive technologies such as the inclusion of wheelchairs and hearing aids may be used to increase the independence of persons with disabilities in surf therapy programmes in South Africa.
- A surf therapy programme for children with disabilities can potentially influence government policy in South Africa by demonstrating the positive impact of such programmes on the lives of children with disabilities and their families.
- The barriers to participation have been presented to the City of Cape Town's coastal, environmental, and special planning management team.

## **7.6. Reflections**

“We are confident that we will succeed in the end, because the future of this country depends on its young people, including those who have disabilities.” – Nelson Mandela, 1994

The contribution of all voices to adapting a surfing programme for children with disabilities was important and the programme could not have been implemented successfully if it had been created from only a singular perspective. In particular, the children participating were the experts, providing insight into the programme delivery and the barriers to participation. They supported the development of innovative solutions to overcome barriers, which may not have otherwise been considered.

## Chapter 8: A World of Possibilities: Experiences of children with disabilities who participate in a surf therapy programme



*Image 8.1: Rowan riding a wave*

### 8.1. Introduction

As an introduction to chapter 8, I remind the reader of the central research question: How do children with disabilities experience their participation in a surf therapy programme in Western Cape? A qualitative research paradigm was used to construct new knowledge through participants' lived experiences. The research design adopted a longitudinal exploratory case study underpinned by interpretive phenomenological analysis to provide an extensive and in-depth description of a social phenomenon (Alase, 2017; McCoy, 2017). The data from the experiences of thirty-five participants was sufficient to gain a foundation to assist in understanding the experiences of surf therapy for children with disabilities in the Western Cape (Mason, 2010).

Participation in the surf therapy programme for children with disabilities supported the overall promotion of their mental, physical, social, and emotional health, which aligns with ISTO's stance of surf therapy promoting psychological, physical, and psychosocial well-being (Sarkisian et al., 2020). This research found that the development and mastery of new skills are an important part of programme

participation, which supported similar findings in surf therapy programmes with at-risk youth populations in Australia (Drake et al., 2021; McKenzie et al., 2021) and vulnerable young people in the UK (Marshall et al., 2019). The findings of this study also highlighted the impact of the surf therapy programme on reshaping the participants' worldviews, both in terms of how children saw and how they interacted with the world. Additionally, all of these findings applied not only to the children participating in the programme, but to the parents, guardians, professionals, and individuals delivering the programme.

**This research produced four unique key findings:**

1. **The ambassadors' journey of change:** this highlights how the development and mastery of new skills led to participants becoming ambassadors for their own stories of change.
2. **Reshaping a worldview:** *Not all scary circumstances lead to a negative outcome* reflects the effects of participating in a surf therapy programme.
3. **Reciprocity of healing:** this describes opportunities for healing and shows how the surf therapy programme supported a sanctuary of self-discovery and overall mental, emotional, and physical health promotion.
4. ***The ripple is longer than you think:*** This demonstrates the influence of a surf therapy programme on the broader community.

This research produced two significant outcomes that can be practically applied to surf therapy programmes for children with disabilities in South Africa:

1. **The development of a Theory of Change** for surf therapy programmes for children with disabilities in South Africa.
2. **Adapting a programme and the development of a guide** for delivering surf therapy for children with disabilities in South Africa.

In addition, this research has **influenced policy based on the CRPD in South Africa**. I will discuss how programme adaptations informed planning at provincial government level, which, in the future, will lead to the inclusion of Universal Access and the reduction of barriers to public beach facilities at Muizenberg beach, Cape Town, South Africa.

## **8.2. An integrated approach to identifying key findings**

Various methodologies were used in this participatory research, all of which focus on capturing and analysing qualitative data to understand complex social phenomena (Clandinin & Connelly, 2004; Dart & Davies, 2003). The synthesis of findings provides a comprehensive understanding of the experiences of participation of participants in this research.

In chapter 3, I introduced the experiences of participation from the perspective of the children with disabilities. In chapter 4, the attention shifted to the analysis and interpretation of the data to deepen the understanding of the experiences of participation in a surf therapy programme for children with disabilities. Chapter 5 highlighted the changes experienced by the children from the perspective of the parents, guardians, and professionals. Chapter 6 identified the experiences of the individuals delivering the surf therapy programme for children with disabilities, while chapter 7 described the adaptations of the surf therapy programme.

Data gathering used three participatory methods: Narrative Inquiry, Most Significant Change (MSC) stories, and Ripple Effects Mapping (REM) (Davies & Dart, 2005). Additionally, the study used repeated data gathering at three points over one year.

1. Narrative Inquiry, the methodology used in chapter 4, explored the experiences of participation in a surf therapy programme of children with disabilities. It emphasises the collection and analysis of narratives to gain insights into individuals' experiences, perceptions, and meanings, and involved understanding and interpreting the lived experiences of the children through storytelling. Narrative Inquiry uncovered the complexities and nuances of the personal narratives as well as their significance within the broader social, cultural, and historical contexts (Clandinin & Connelly, 2004; Connelly & Clandinin, 1990; Hatch & Wisniewski, 1995; Polkinghorne, 1995; Riessman, 2008).

Table 8.1: Findings from chapter 4

SURFING MAKES ME FEEL DIFFERENT: CHILDREN WITH DISABILITIES		
THEME	SUB THEME	CATEGORY
<i>Surfing has taught me to be more myself: Promoting mental, emotional and physical health)</i>	How I think	Identity Development
		Improved Self-Confidence
		Independence of thought
		I feel free and have achieved my dream
	How I feel	Surfing makes me feel so many emotions
		Improved Self-Acceptance
		As I grow, I learn something new
		Reducing anxiety through a flow state
	How I do	Changes in Physical mobility
		Physical Independence
Learning new movements		
<i>People realised that they must not underestimate me: Reshaping a world view</i>	How I see the world	Future Outlook Change
		Not all scary circumstances lead to a negative outcome
	How I interact with the world	Changes in School
		Trying New things
		Active Friendships
		Family Changes
<i>Now I like to (am) stress free: Developing new skills</i>	<i>If I fall, it's a sign I am trying: Skill Mastery</i>	Learning to Surf
		Learning to compete
	Factors that support skills development	Mentorship and goal setting in the right environment
		The ocean makes me feel powerful
		I found my surfing family
		Being challenged

2. The Most Significant Change (MSC) technique is used to capture the stories of significant change resulting from social interventions or programmes. This approach was used in this study to explore the experiences of participation of the parents, guardians, and professionals in chapter 5, and involved collecting stories about the most meaningful and impactful changes they experienced. The MSC stories provided rich, context-specific insights into the outcomes and effects of the programme, highlighting unexpected or unintended consequences (Dart & Davies, 2003; Willetts & Crawford, 2007).

Table 8.2: Findings from chapter 5

It Was A Place They Visited In Themselves: Parents, Guardians and Professionals		
THEME	SUBTHEME	CATEGORY
A Sanctuary of Self Discovery	How they think	A mindset open to growth
		Developing independence
		<i>She is more confident in herself than ever before</i>
	How they Feel	<i>He is more grown up, more mature</i>
		<i>It was a still joy</i>
		A change in self-perception
		<i>Leaving his stress behind like he was a lighter boy</i>
	Nurturing Physical Wellbeing	<i>He is free in the water</i>
		<i>Now there is a door that has opened for him and his health</i>
<i>His balance has gotten better</i>		
<i>She is now sitting straight and not slumpy</i>		
Broadening the Horizon	How they see the world	Increased mobility
		<i>They came through their fear</i>
	How they interact with the world	<i>He grew to trust</i>
		Increased engagement
		Changes at school
		Family changes
An Open Door	<i>It was like they were healing me : The significance of change</i>	Becoming an ambassador of change
		<i>I realised It was me that was having the problem</i>
		<i>At home with the family he is more open</i>
	<i>Freedom from limitations : The Reasons for Change</i>	<i>Her work doesn't stop when the surfing stops</i>
		<i>I used to see him as a disabled child</i>
		<i>Challenge yourself to what is possible</i>
		<i>It's the whole new world thats opened up</i>
	<i>It's like he took part in counselling or an extraordinary love</i>	
	<i>We all have a metaphorical crutch</i>	
	<i>But suddenly he has his thing</i>	

3. Thirdly, Ripple Effects Mapping (REM) is used to identify and visualise the intended and unintended impacts of interventions within complex systems. In this study, it was used to explore the experiences of participation of the individuals delivering the programme, in chapter 7. It involved a group discussion and the creation of a visual map to represent the ripple effects of the programme and the participants' experiences (Kollock et al., 2012). REM captured the interconnectedness of various stakeholders, activities, and outcomes, illustrating the pathways and diffusion of change beyond the immediate target population (Chazdon et al., 2017; Washburn et al., 2020).

Table 8.3: Findings from chapter 6

The Ripple Is Longer Than You Think: The Experiences Of Individuals Delivering A Surf Therapy Programme For Children with Disabilities		
THEME	SUBTHEME	CATEGORY
It is both a learning and a teaching experience	First-hand experience of what it's like to have a disability	Training for volunteers
		I want to learn to help people and make connections like you do
	We are a diverse group of people, like-minded, goal-orientated, collaborative	Multidirectional interaction
		Never underestimate the power of passion
		Welcome Challenges
		With gratitude we serve
Being unapologetically who you are	I am who I am	Love
		Screw it, this is me
	Small beginnings happen on the beach and in between	We are breaking down personal barriers
		It's more than surfing, we are able to express ourselves in words
		It felt like massive group therapy
		Transformative thinking
View differently abled differently	Being seen as more than 'something broken'	Multidirectional Trust
		Adults with disabilities that participate in surf therapy become volunteers
	Inclusivity feels like normality	Become spokesperson within community
		Understanding respect and human dignity
Our ripple effect is longer than we think	This is my community, my family	Evolution of fear to confidence
		Silver lining (effects) of COVID-19
		We are just two people with different disabilities, kicking the football
	She speaks of adaptive surfing through her lived experiences	Building relationships
		Bystanders
		Families
	I didn't realise I needed this until I was here	Volunteers
		Broader Community
		Feeling Free
	It's both healing and preventative	Occupational possibilities
		The happiest time of her life
		So many personal needs are fulfilled
		I know I'm making a difference
		We are doing something right
		We underestimate the importance of participation being awarded
		Though this programme, disability is not a death sentence

### 8.3. Considering the utilisation of the Theoretical Framework and Conceptual Framework

As Bronfenbrenner’s Bioecological Model of Human Development describes, in order to understand the processes which have impacted the development of the children with disabilities, the children have been the focus within the context and developmental outcome. The same process effected each child with disabilities differently (Bronfenbrenner & Evans, 2000). In addition, the bi-directional influences have impacted the children in both directions, both away from and towards them. The PPCT framework in relation to surf therapy considered: the children participating and their individual characteristics, attributes, and personal factors; the process including interactions, relationships, and activities; the context, that is, the environment and contextual factors; and time, recognising that development and change occur over time (El Zaatari & Maalouf, 2022; Rosa & Tudge, 2013).

Within the context of the Social-Ecological Model of Disability, the surf therapy programme delivery considered the personal competencies, environmental demands, resources and strategies to enhance human functioning, and supported the children's needs with a focus on their application to decision making (Shogren et al., 2018). In line with the CBR Guidelines, the surf therapy programme supported the practice of rehabilitation and development of persons with disabilities through the elements of health promotion and assistive devices, primary school education, family life and relationships, sports and recreation, and empowerment, including advocacy, communication, and political participation (Buchanan et al., 2015; Rule et al., 2019; WHO, 2010).

**Surf therapy for children with disabilities highlights the complexity and multidimensionality of community-based inclusive development.** This programme supports the inclusion of children with disabilities through the use of disability-specific services, including specialised and community-based rehabilitation (WHO, 2010). The surf therapy programme provides accessible, affordable, appropriate disability and rehabilitation services to people, including children, with disabilities. Reflecting on the CBR Guidelines, health included promotion, prevention, rehabilitation, and the provision of assistive devices. In terms education, the experience of participation had an influence on the children's schoolwork, addressing the guidelines around primary education. The structured training programme additionally supported non-formal and lifelong learning and provided livelihood through skills development and skill mastery. The surf therapy programme's social component supported personal assistance, relationships and family, as well as recreation, leisure, and sports. The surf therapy programme supported participant empowerment through advocacy and communication, community mobilisation, political participation, and working alongside disabled people's organisations. This research highlights the importance of including community-based programmes in CBR.

#### **8.4. Surf therapy population context considerations**

Existing research indicated that the social and historical contexts of surfing need to be considered (Benninger et al., 2020), and that further research was needed within

the context of surf therapy to examine the diversity or absence thereof in this sector and its impact on the participants' outcomes, which was addressed in this research. Benninger et al. (2020) highlighted the need for further research exploring the impact of surf therapy among additional populations within various social, historical, cultural, and socio-economic contexts. This would contribute towards the understanding of the effectiveness of surf therapy across a diverse range of populations. This research explored the influence of surf therapy among a vulnerable and marginalised group of children with disabilities, including black children with disabilities living in poor socio-economic communities. The key findings contribute towards the understanding of the effectiveness of surf therapy for children with disabilities in South Africa.



*Image 8.2: Princess with her surf instructor and volunteer team watching the waves*

## 8.5. Key findings

### 8.5.1. Key finding 1: The ambassadors' journey of change

The children became ambassadors of change within their own lives regarding what they had gained through participation in the surf therapy programme. The ambassadors' journey of change was discussed in chapters 3, 4, 5 and 6.

The children did not speak of recognising themselves as ambassadors directly; however, it was evident through their stories and actions that they became ambassadors of change within their communities as children with disabilities participating in a surf therapy programme. During interview three, Thabo highlighted his ability to share the changes he experienced from participating in the surf therapy programme, *'telling everyone about it'* and *'trying to help some people going through the same thing'*. Thabo recognised that for children with disabilities, the opportunities to participate in sport are limited, and through sharing his experiences, more children with disabilities were able to participate. He described the example of his friend Mich, who has a visual impairment and is of short stature; surfing has had a significant impact on Mich's life as he can now participate in and enjoy sport, and through that has learnt to "love himself".

Parents, guardians, and professionals highlighted the significance of mentorship of the children by the individuals delivering the programme, which supported and encouraged the children to emulate the same actions in their own environments towards others. Opportunities such as being able to talk to another child with the same condition and motivate them through sharing lived experiences were significant. At times, the children were often unseen, overlooked, and their voices not heard. Through participation in the surf therapy programme, the children grew in confidence to have their voices heard as role models for others with similar disabilities.

The individuals delivering the surf therapy programme highlighted that the children's participation in the programme challenged the individuals and the broader community to "view differently abled differently". The changes in the children that the

parents, guardians, and professionals observed showed that setting challenging but achievable goals can have a positive impact on children's overall health promotion. When they achieved their goals, such as Princess weaning off the use of nappies, they experienced a sense of accomplishment and pride, which boosted their self-esteem. Princess has spina bifida with paralysis from the waist down, and her guardian described the achievement of no longer wearing nappies as "winning a gold medal". Princess began motivating other girls with similar disabilities to do the same and "challenge themselves to what is possible", including two of her friends at school. Thuno was able to no longer use nappies and Caty reduced her use of nappies to only one a day.

**The journey of Rowan**, one of the children with disabilities who began by participating in surf therapy and eventually represented his country at the world championships, can be seen as a remarkable example of the potential impact of surf therapy within Bronfenbrenner's Bioecological Model of Human Development. In the volunteer focus group, one volunteer shared that Rowan had had meningococcal disease and was induced into a coma at three months old after his heart had stopped on multiple occasions. The doctors had wanted to give up on him and leave him to die because he was so sick, believing that his life was not worth saving. This emphasises the significance of giving individuals the chance to realise their own worth and potential for transformation and achievement in an environment that supports their needs.

**Rowan's mother** described the experience of his illness, saying that she had to "rush him back to the hospital because he turned purple" and that his "heart stopped multiple times". They amputated both his feet, his left arm, and his right hand. In the final interview, she expressed that participation in the surf therapy programme for her son, a child with a disability, was significant and that he is now thriving. During the second interview, **Rowan** described his experience in the first surf therapy lesson, when he accidentally left his crutches at a local store at the beach and felt panicked. He was always used to using crutches and did not walk without them. He spoke about his recognition that if he could balance on a surfboard riding a wave, he could balance on his prosthetics. The following week, he went to school without crutches and never used them again. His motivation, focus, and drive continued to grow and

were observed during the second and third interviews. He spoke about his goal to become a national champion in South Africa and paralympic champion, competing on the global stage in para surfing.

**Rowan's journey continued.** In June 2022, a year after his third interview, Rowan participated in the Western Province Provincial Championships and won his division, prone assist. Two months later, he placed second in the South African Championships and was selected for the 2022 South African National Team. Nineteen months after his first interview, Rowan's dream became a reality. In December 2022, on his 16<sup>th</sup> birthday, he competed at the World Para Surfing Championship at Pismo Beach, California, and placed 17<sup>th</sup> in the world. The following year, in April 2023, Rowan continued to build on his success in competitive para surfing and won the 2023 South African National Championships.

At the microsystem level, Rowan's participation in surf therapy provided him with opportunities for physical activity, skills development, and increased self-confidence (Feltz, 2007). Through regular engagement in surf therapy sessions, he continued to develop his passion for surfing and found a sense of joy and fulfilment in the sport. The support and guidance from the surf instructors and individuals delivering the surf therapy programme, along with the encouragement of his mother and school, played a crucial role in nurturing his interest and talent. Within the mesosystem, effective communication and collaboration between the surf instructors, individuals delivering the surf therapy programme, professionals, and his family were essential. As Rowan's surfing abilities progressed, these stakeholders worked together to support his continued growth and development. Coordinated efforts between stakeholders helped identify additional training opportunities, secure necessary resources, and establish a supportive network that fostered Rowan's advancement to compete in para surfing at provincial, national, and international levels.

In the exosystem, the broader community continued to play a significant role. The surf therapy programme that Rowan continued to participate in is well-integrated into the community that supported him in an environment of acceptance and inclusivity. A local wetsuit manufacturer sponsored a customised wetsuit for him and a local surf school supported in the sponsorship of additional surf lessons for him to be able to

train for competition surfing. As Rowan gained recognition for his surfing achievements, the community's and his school's support further enhanced his self-esteem and motivation. The involvement of volunteers and mentors contributed to his social integration, expanding his network of support beyond his immediate family. This further supported his transition as it came at a time when he was required to move schools and move from home to dormitory accommodation (Hayes et al., 2017).

At the macrosystem level, Rowan's journey from surf therapy to para surfing, and representing South Africa at the World Championships, highlights the importance of inclusive sports policies and disability rights. The success and visibility of Rowan's achievements can shed light on the potential of athletes with disabilities, and influence policymakers and organisations to provide more resources and opportunities for individuals with disabilities in sports in South Africa (Eriksson et al., 2018). This advocacy and community mobilisation may lead to improved accessibility, funding, and support systems at a broader societal level. Rowan's journey also demonstrates the transformative power of inclusive sports programmes, and exemplifies the positive impact that can be achieved through the interconnectedness of various ecological systems. Such achievements have inspired other children with disabilities, challenged societal perceptions, and contributed to the ongoing progress of disability inclusion in sports and society as a whole.

It was highlighted that many studies on surf therapy focus on short-term outcomes, and there is limited research on the long-term impact of programmes and outcomes for participants (Benninger et al., 2020), which was addressed in this study. Follow-up interviews, one week after the surf therapy programme had been completed and one year later, helped to determine whether participants continued to experience benefits after the intervention ended. These follow-up interviews also provided valuable feedback for improving the surf therapy programme and tailoring it to participants' individual needs.

### **8.5.2. Key finding 2: Reshaping a worldview: Not all scary circumstances lead to a negative outcome**

A surf therapy programme for children with disabilities living in South Africa, particularly those in areas affected by violence and poverty, can provide a meaningful place for the children to face challenging circumstances, express themselves, build resilience, and reframe their understanding of fearful circumstances. Through experiencing surfing, which initially had been a “scary experience”, the children with disabilities were able to confront and overcome their fears in a controlled and supervised environment. As Princess described, she started out being extremely nervous but was able to “face her fears”, ending the six-week programme feeling relaxed and happy. Tala similarly highlighted how a “scary” situation during a surfing lesson reduced her fear and increased her ability to feel “brave”. Thabo was fearful he “might die” if he fell in the water but later ended up loving falling in the water after he realised that “nothing bad happened”. Thabo’s physiotherapist recognised the importance of coming through the fear, stating that the children “came to realise not all scary circumstances lead to a bad ending”, which was highlighted in chapter 5. For the children, being capable of facing and overcoming fears was a skill learnt and translated to other environments in their lives.

Through learning to surf, the children were constantly being challenged in circumstances such as falling off and getting back onto the surfboard. The repeated exposure to failure and subsequent success helped foster resilience, a crucial skill for children living in violent or impoverished situations. Being a social programme consisting of group activities, the surf therapy programme allowed the children to form positive social connections. The sense of community supported the mitigation of feelings of isolation and encouraged other opportunities to form social connections. The mastery of new skills supported increased self-confidence and self-esteem for the children, which in turn empowered them to better handle challenging circumstances that arose. The mentorship of the children by the volunteers supported, provided guidance, and demonstrated positive behaviours and coping strategies to be able take on challenging circumstances in the children’s lives that arose.

It was also highlighted that surfing provides a significant adrenaline rush, a physiological reaction that mostly occurs in response to a perceived harmful event, attack, or threat to survival. Charlie's father highlighted the significance of this experience when he expressed that:

*most of the time, adrenaline only gets created in life these days for a bad reason. You get threatened, challenged or pissed off and adrenaline comes out. It is only the people that follow passions and hobbies that get any sort of adrenaline for good things. I think that's what he craves in his life. Being in a wheelchair to get adrenaline is just amazing.*

This rush contributed to feelings of excitement and focus. It was evident that when a child with a disability surfs, they may initially experience fear or apprehension, however as they learn to navigate the waves and gain control of their board, their fear can turn into exhilaration and a sense of accomplishment. This adrenaline rush can be a powerful confidence booster as they prove to themselves and others that they are able to conquer challenges. This was particularly empowering for the children participating as they are often confronted by societal limitations or misconceptions about their abilities. Charlie highlighted how most of his time is spent in his wheelchair, and the activity of surfing provided the opportunity for him to feel the experience of adrenaline. He shared how the experience allowed him to relate to his father's and uncle's experiences of finding adrenaline through sporting activities, which he could now share with them.

### **8.5.3. Key finding 3: Reciprocity of healing**

This finding shows that a surf therapy programme can be a sanctuary of self-discovery and overall mental, emotional, and physical health promotion by **providing an opportunity for healing**, both during and after participating in the programme. Reciprocity of healing in a surf therapy programme refers to the mutual exchange and benefits experienced by all participants involved, including children with disabilities, parents, guardians, professionals, and individuals delivering the surf therapy programme. Healing is not a one-way process but an interactive one where both people giving and receiving can experience emotional growth and healing. It emphasises mutual respect, empathy, and the interconnectedness of all

individuals. Where one party provides care or support to another, both can experience healing or growth as a result. Benninger et al. (2020) suggested that surf therapy programmes use the physical activity of surfing as an anchor for the healing process, while Harris (2015) explored the notion that therapists can facilitate the healing of the mind-body split and help those struggling with addiction using surfing as a healing modality for trauma and addiction (Harris, 2015).

Thabo shared that his participation in the surf therapy programme was a “spiritual” experience, Princess expressed that she “found her family”, and a professional expressed her opinion that “surfing saves lives’ and described the experience as being “part of healing” for a child with a disability. Thabo’s mother described the experience as “it’s like he took part in a therapy”, adding that “it’s like I took part in therapy too”. Thabo’s mother said it was as if the individuals delivering the programme were “touching her heart” through the process. She realised there were other people that could also care for her child and it provided the opportunity to “shine light in a dark room” for her, the metaphorical dark room she used to put her son in. She had initially voiced her concern regarding Thabo’s well-being in the future once she was “not there” any longer, but she came to realise there are people that could care for her son and that he could “stand for himself”. She also highlighted the extraordinary love her son received through the participation process.

Healing was also described by a professional who shared that “surfing saves lives” and how healing was experienced through participation in a surf therapy programme for a young child who had tried to commit suicide. During the focus group, it was highlighted that through the relationship developed between the children with disabilities and the individuals delivering the surf therapy programme, the latter may also experience healing, personal growth, learning, and emotional satisfaction through interacting with the children and the programme itself. Additionally, the peer support between the individuals delivering the surf therapy programme provided experiences of and a platform for mutual support, which encouraged healing. In this process, they not only offered help but also received it, leading to shared healing.

Family members were impacted by the experience, and a volunteer expressed how a mom started to see possibilities for her son, sharing that “she is coming alive

through him and with him through the experience” of participating in the surf therapy programme. Surf therapy promoted inclusivity, challenged stereotypes, and increased community awareness and acceptance of children with disabilities. By engaging with the community, the surf therapy programme fostered a sense of belonging, promoted social integration, and reduced social isolation for the children with disabilities and their families. The individuals delivering the surf therapy programme described the children’s experiences as being more than just a surfing programme but also a place to “express themselves in words” through multidirectional interaction. Adult participants highlighted the evolution from fear to confidence for the children participating, as well as their being able to experience inclusivity, which felt like normality and was, in itself, a healing process.

During the focus group, volunteers highlighted the confidence and opportunity for self-reflection the programme provided them. One volunteer expressed how she “didn’t realise she needed it until she was here” and that joining the focus group and reflecting on her experience was a healing process for her. Participants in the focus group also highlighted that the process was healing, preventative, and curative. A participant expressed that the experience was similar to taking part in “massive group therapy” and that the surf therapy programme provided a space for many individuals to “accept themselves as who they are”, in an environment where inclusivity is part of the process. The participants delivering the surf therapy highlighted that their experiences allowed them to “view differently abled differently” and make “extraordinary connections”, expressing how these individuals became “like family”. The non-judgemental and non-pressured environment where volunteerism was not outcomes-based made a significant difference to participation:

*In life everything is outcome based and achievement driven in adaptive it’s not which takes the edge off for yourself as a volunteer.*

#### **8.5.4. Key finding 4: The ripple is longer than you think**

This finding highlights the influence of a surf therapy programme on the broader community. During the focus group, the individuals delivering the surf therapy programme highlighted the significance of the impact of the programme on the children, parents, families, professionals, volunteers, surf instructors, broader

community, bystanders, and government. The experience not only opened the eyes of the individuals delivering the surf therapy programme but also those around them during the sessions. While the study's purpose was to gain a better understanding of how children with disabilities in the Western Cape experience participation in surf therapy, their participation had far-reaching effects beyond their own experiences.

For the parents, guardians, and families of the children participating, the programme provided a wider network of social support, encouragement, and understanding through a shared experience within a supportive community. Parents experienced an increased awareness of their child's capabilities, leading to enhanced parental engagement and advocacy.

Professionals, such as the children's teachers, physiotherapists, and psychologist, reflected on changes observed in their own thinking and frame of reference. The programme motivated them to seek opportunities for change outside of the programme, such as fixing the school pool.

The individuals delivering the surf therapy programme, including the surf instructors, professionals, and volunteers (both with and without disabilities), played a crucial role in facilitating the surf therapy sessions. The PPCT framework highlights the importance of the professional-child relationship and the influence of the professionals' skills, knowledge, and attitudes on the therapeutic process. The process of delivering surf therapy also has an impact on the individuals delivering the programme, which extends beyond the benefits to the children participating and should be considered when delivering programmes in the future.



*Image 8.3: Rowan greeting his surf instructor at the beginning of session 6 (the final session)*

Surf therapy programmes can have a positive impact on the broader community. They promote inclusivity, challenge stereotypes, and increase community awareness and acceptance of persons with disabilities. By engaging with the community, surf therapy programmes can foster a sense of belonging, promote social integration, and reduce social isolation for children with disabilities and their families.

Bystanders who witnessed the surf therapy sessions experienced an increased awareness and understanding of disability issues. This increased exposure can challenge preconceived notions, reduce stigma, and promote empathy and inclusivity within the community.

The government plays a vital role in supporting and promoting surf therapy programmes for children with disabilities. Through partnerships and collaborations, surf therapy programmes can influence policy initiatives, funding, and regulation. The government can facilitate the availability and accessibility of such programmes, and

can advocate for inclusive practices, community engagement, and research to further develop evidence-based interventions.

In summary, when applying Bronfenbrenner's Ecological Systems Model and the PPCT framework to surf therapy for children with disabilities, it becomes evident that the impact extends beyond the individual child. It encompasses parents, guardians, families, professionals, volunteers, the broader community, bystanders, and government. Understanding these ecological systems and the interaction between the person, process, context, and time can guide the development, implementation, and evaluation of surf therapy programmes, leading to positive outcomes for all involved.

Many elements of empowerment within the CBR guidelines have been demonstrated through the engagement with all participants. The empowerment and empowering children with disabilities, their family members, and their communities to facilitate the mainstreaming of disability across each sector has been significant and reported on by participants at length in chapters 5 and 6.

## **8.6. Key outcomes**

### ***8.6.1. Key outcome 1: The development of a Theory of Change for surf therapy programmes for children with disabilities in South Africa***

The most critical perspective in the ToC development was that of the children participating, however the impact of the programme was highlighted for both the children and broader community. The ToC was developed through consultation with all stakeholders in the research process, including the parents, guardians, professionals, and individuals delivering the surf therapy (UN Development Group, n.d.). The ToC highlights outcomes to advance the implementation of the SDGs (UN Development Group, n.d.), the CBR Guidelines, and the CRPD (UNICEF, 2017, 2021).

### **8.6.2. Key outcome 2: Adapting a programme and developing a guide for the delivery of surf therapy for children with disabilities in South Africa**

As there are no standardised protocols for delivering surfing therapy, making it difficult to compare results across studies (Brymer & Schweitzer, 2013), this new tool kit could support in standardising surf therapy programmes for children with disabilities in South Africa. The development of the adapted surf therapy programme supports the principles of the CRPD by including respect for inherent dignity (chapter 7), individual autonomy (chapter 4), the freedom to make one's own choices, and the independence of persons with disabilities (chapter 4, 5, 6).

The programme provided full and effective participation in society, non-discrimination and respect for difference, and acceptance of persons with disabilities as part of human diversity (chapter 4, 5, 6). The programme supported accessibility and respect for the right of children with disabilities (chapter 7) (Hendriks, 2007).

One of the primary challenges highlighted in previous research was the availability of suitable surf therapy programmes for children with disabilities (Clapham et al., 2019). The physical demands of surfing are highlighted through the dynamic and high challenging environment (Lopes et al., 2018), which can pose a difficulty for children, particularly with severe disabilities, making it difficult for them to participate in the programme. This was addressed through the creation and utilisation of the Surfer Safety Level (SSL) and Surfer Ability Level (SAL) assessment tools. The SSL and SAL were designed to support participants of all levels of disability based on their specific needs and depending on their personal profile. The SSL and SAL assessments provide recommendations for programme adaptations for participants with all level of disabilities, including those with severe disabilities. For the purpose of the six-week surf therapy research programme, there were parameters within the ability and safety scales for participation. However, the continued use of the SSL and SAL assessment tools has been successfully implemented in an ongoing surf therapy programme at Muizenberg.

Despite the benefits, there remains limited research on the effectiveness of surf therapy for children with disabilities. One of the main limitations highlighted was the

absence of standardised protocols for surf therapy programmes (Benninger et al., 2020). In an attempt to address this challenge for future research, the development of, delivery of, and feedback about the surf therapy protocol for children with disabilities were documented during the course of this study.



*Image 8.4: Charlie following adapted hand signals and verbal cues from his surf instructor*

## **8.7. Implications**

### ***8.7.1. Key implication 1: Influencing policy based on the CRPD in South Africa and how programme adaptations informed planning in provincial government***

The provincial government, City of Cape Town (COCT), plays a vital role in supporting surf therapy programmes for children with disabilities in the Western Cape. Through supportive initiatives, the COCT has facilitated the availability and accessibility of adaptive equipment, including a universal accessibility beach mat and mobility chairs. The adaptation of a surf therapy programme was based on various stakeholders' input, which has had an important influence on the future development

of universal access facilities at the beach where the surf therapy programme is delivered in the Western Cape.

Within the context of Bronfenbrenner's Bioecological Model of Human Development, at the microsystem level, the input of stakeholders (namely the children with disabilities, their parents, guardians, professionals, and the individuals delivering the surf therapy programme) has been crucial. Their first-hand experiences and perspectives have highlighted the multiple barriers faced by individuals with disabilities in accessing public spaces, including the beach, and participating in a surf therapy programme. These were highlighted in chapter 7, when the contextual factors of the ICF, including environment, were addressed (WHO, 2007). These stakeholders' input has actively informed the guidelines for universal access facilities that address the specific needs not only of children participating in a surf therapy programme but of all persons with disabilities wanting to access public open spaces such as Muizenberg beach, leading to inclusive access.

Within the mesosystem, the effective communication and collaboration between stakeholders was essential. Stakeholders' feedback was provided to local authorities responsible for beach management, ensuring that the voices and concerns of stakeholders regarding accessibility are heard and taken into account during the planning and implementation of universal access facilities. By fostering strong partnerships and shared goals, the mesosystem supports the creation of inclusive environments that benefit all participants.

In the exosystem, the involvement of the broader community was also important. Community members, local businesses, and relevant organisations have contributed their perspectives to support the development of universal access facilities. Their input has helped to raise awareness about the importance of inclusivity and generate public support.

At the macrosystem level, the impact of adapting a surf therapy programme and its highlighted barriers has influenced the design of the newly proposed universal access facilities at Muizenberg beach, the building of which is due to commence in 2025, therefore extending to the larger societal context beyond just surf therapy.

The successful implementation of inclusive facilities can serve as a model for other beaches and recreational areas, and can create awareness among governmental bodies and policymakers about the importance of accessibility and the rights of individuals with disabilities. This collaborative process fosters a sense of ownership, empowerment, and social change, promoting equal opportunities and enhancing the overall accessibility of beach environments.

The Muizenberg universal beach access has been a positive step towards providing the facilitators of inclusive access (and no longer barriers) which I highlight next. I also include the positive nature in which the community's voices have been able to inform these changes that the COCT will be implementing in the new development. Muizenberg universal beach access will include: a building to accommodate universal access for all beach users, including but not limited to adaptive surfing opportunities; a space dedicated to store the beach access mats and beach mobile chairs; a dedicated safe space for persons with disabilities to be accommodated at the beach; the main ablution being designed to include good universal access provisions, including family changerooms and universal access bathrooms; and improvement in the general landscape layout, including the ramp being in the middle of the beach, close to the bathroom and universal access amenities.

The Senior Professional Officer for Coastal Engineering and Design, Coastal Management, Environmental Management, Spatial Planning and Environment highlighted how the design makes “*the entire beachfront wheelchair accessible and Universal Access (UA) a core part of the design philosophy*”. The design includes the following:

- Dedicated building to facilitate universal beach access and adaptive surfing activities and to store beach access wheelchairs, beach access mats, and other related equipment.
- Above-mentioned building is located in the central area of the beachfront at the ablutions and showers, where the primary surfing and recreation activity on the beach is.

- Large, 2.5m-wide, wheelchair beach access ramp, designed to allow beach access mats to be easily and regularly deployed, located in the central area of the beachfront and amenities.
- The new ablution building includes 3 extra-large UA ablutions with a large bench (single bed) for changing into wetsuits. These ablutions are unisex, and also serve as multi-use family changerooms.
- One of the UA ablutions has a warm shower inside.
- The buildings are designed to SANS 10400 Part S standards for facilities for persons with disabilities.
- The general outside showers used to rinse-off after surf/swim are wheelchair accessible, one of the showers has a grab handle for a limited mobility person to stand up with, and the space between seating walls is wide enough for wheelchairs to effortlessly move through.
- Universal wheelchair access is provided along the full 3m-wide promenade and other recreational areas along the promenade from the eastern side, where the existing beach access ramp is, to the start of the St James walkway.
- The playground is wheelchair accessible, with some of the play equipment suitable for assisted play for children with disabilities (nest-type swings, land slide, sculptures) as well as other elements that can be interacted with.
- Each parking bay for persons with disabilities is provided with the required ramps to the sidewalks. Six spots are provided, four centrally located and two at the southern end of the resurfaced paved parking area (existing gravel parking) in order to access the southern end of the promenade and the start of the St James walkway (the St James walkway only has assisted wheelchair access).
- A drop-off spot is provided at the eastern end of the beachfront, close to the existing beach access ramp (which remains in place).
- All pedestrian crossings are either at grade or level crossings, with the required ramps along pedestrian desire lines. The paving follows the pedestrian movement across the road so that the surface is continuous for the wheelchair users, without material changes where wheels can get stuck.



*Image 8.5: Example of the beach access mat*

These implications support the purpose of the CRPD to promote, protect, and ensure equal enjoyment of human rights and fundamental freedoms by persons with disabilities (Hendriks, 2007).

Furthermore, the provincial government has acknowledged the immense social and community cohesion value which the surf therapy programme brought to Cape Town through the success of encouraging active participation of persons with disabilities in what they recognise as transformative ocean-based experiences. They have acknowledged not only the community level benefits but also the various programme initiatives, which they consider critical in terms of contributing to people's well-being both physically and mentally.

In a follow-up meeting with the COCT, the Senior Professional Officer of Coastal Engineering and Design recommended that education about universal access be integrated at the national engineering level to support the inclusion of universal access in government engineering designs.

**8.7.2. Key implication 2: The guide for delivering surf therapy can be used for the implementation of surf therapy programmes across other beaches in South Africa**

These findings build on existing evidence that supports surf therapy in the global context. They also suggest that, through the adaptation of a surf programme and the development of a guide for delivering surf therapy for children with disabilities in South Africa, further programmes can be implemented on other beaches across South Africa for children with disabilities in the same format as the programme at Muizenberg beach.

**8.7.3. Key Implication 3: The opportunity to support students with practical disability inclusive experience in relation to their field of study**

In South Africa, many occupational therapists work in communities where their work is focused largely on community-based rehabilitation. Buchanan et al. (2015) highlight the struggle therapists have with no examples of how evidence-based practice can be applied in such settings and how it may be used to inform their practice. Surf therapy programmes may support occupational therapists in South Africa to implement an evidence-based approach in the development of occupational therapy services.

The participants delivering the surf therapy programme also included physiotherapy and occupational therapy student volunteers. Their experience in the delivery of the surf therapy programme provided them with practical training and first-hand experience with children with disabilities in a dynamic and supportive environment. This opportunity can be described as service learning, which provides a natural context for students to experience community practice while contributing to reducing existing social injustices (Hansen et al., 2007). Participation in a surf therapy programme through both training and delivery of the programme provided students with the opportunity for personal skills development and skill mastery, which were skills that were transferable to their field of studies. Many volunteers returned to future surf therapy programmes, highlighting the benefits of the experience in relation to their field of expertise, such as feeling more confident in their abilities to engage with children with disabilities. These results should be considered in health

professional education as volunteering in surf therapy programmes may provide opportunity for occupational therapy, physiotherapy, and biokinetics students to gain practical experience in a real-time environment under the supervision of a professional.

## **8.8. Recommendations for future research**

1. Future research should include individuals from the foster care system where children are under guardianship or a foster care facilitator has been assigned.
2. Research on improved infrastructure related to accessible and available transport needs to be highlighted for children with disabilities in South Africa, and not limited to their participation in a surf therapy programme.
3. Future research should include the replication of this study in other surf therapy programmes for children with disabilities in South Africa in order to compare results between different programmes and attempt to support consistency across different settings.
4. Future research is recommended to explore collaborative work with government engineers, including coastal engineering and design, coastal management, environmental management, and special planning teams, to incorporate disability inclusion and universal access education and training in the support of universal access design at other beaches, public open spaces, and buildings.

## **8.9. Conclusion**

This research supported the effectiveness and feasibility of surf therapy for children with disabilities in South Africa and has provided evidence-based recommendations for the use of surf therapy as a therapeutic tool in South Africa. This study contributes to a deeper understanding of the experience of surf therapy for children with disabilities. To my knowledge, it is the first study completed in South Africa over the duration of one year for children with varied disabilities. This study contributes to the understanding of the long-term impacts for children with disabilities who participated in a surf therapy programme and has made a significant contribution to the area of disability inclusion and surf therapy programmes. The experience in participation supported overall health promotion through mental, physical, social, and

emotional health, and had an impact on reshaping worldviews and the development and mastery of new skills. These findings were highlighted for not only the children participating but also the parents, guardians, professionals, and the individuals delivering the surf therapy programme. This research produced four unique key findings and two significant key outcomes that can be practically applied to surf therapy programmes for children with disabilities in South Africa. The research produced three implications, including influencing provincial policy based on the CRPD in South Africa (Hendriks, 2007).



*Image 8.6: Rowan entering the water with his surf instructor and head volunteer*

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