Recreation Handbook for State and Local Unit Recreation Committees

National Association for Retarded Citizens/2709 Avenue E. East Arlington, Texas 76011
# RECREATION HANDBOOK FOR STATE AND LOCAL UNIT RECREATION COMMITTEES

National Association for Retarded Citizens *

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* Formerly National Association for Retarded Children
WHAT DOES THIS HANDBOOK DO?

-- Lists suggested readings, information resources and films concerning recreation
-- Tells about the importance of recreation in the lives of mentally retarded persons
-- Reviews current needs and problems in the field of recreation for mentally retarded persons
-- Tells the part played by the ARC movement in expanding recreational programs and services for retarded citizens
-- Discusses desirable ARC Recreation Committee organizational structure, functions and goals
-- Outlines suggested actions which could be taken by state and local committees to catalyze and monitor recreation projects
-- Contains recreation standards, lists of organizations and other sources of help in achieving appropriate recreation services

WHY IS RECREATION IMPORTANT?

Ask any small child what the word "recreation" means, and he probably won't be able to give you a definition. But ask him if he wants to "go play," and you're bound to get an enthusiastic and knowledgeable response. However, much more is involved in recreation than just playing, especially where mentally retarded persons are concerned.

Unfortunately, many people think that recreation is simply an activity used to fill leisure time when we are not working or learning. The truth is that recreation is much more than a way to kill time pleasurably; actually it's a very useful tool in creating valuable educational and social learning experiences.

Through play, children develop basic physical skills and patterns of social and emotional behaviors. In fact, evidence strongly suggests that lack of this kind of stimulation during the first years of life can interfere with intellectual development and cause prob-
SELECTED READINGS, INFORMATION RESOURCES AND FILMS

GENERAL RESOURCES


Guidelines and suggestions for initiating, evaluating, and expanding education and/or recreation programs for mentally retarded persons.


Compilation of best articles from the newsletter of the American Association for Health, Physical Education, and Recreation.


Provides an approach to developing and conducting recreation and physical activities for mentally retarded persons and groups of all ages and functioning levels.


Research and demonstration needs in the area of recreation for handicapped persons are presented.


Methods are outlined for establishing model programs and demonstration projects within the community.


Describes ways scouting helps the mentally retarded and how the scout unit serves the boys.


Proceedings of 10 public forums on nationwide outdoor recreational planning conducted by the U.S. Department of the Interior, Bureau of Outdoor Recreation.


This book is intended to help parents working with a retarded child in the home and in outside play groups.
lems in later learning. All of us need continuing recreational opportunities throughout life to keep us refreshed, alert and active.

USES OF RECREATION:
It is essential for growing children to have opportunities for mobility and exercise. Without this activity, muscles will not develop properly, and solid groundwork will not be laid for later acquisition of important self-care skills. Consider the various coordinated movements and awareness required by a simple game like "Drop the Handkerchief." Through physical activity, children learn about the world around them and are able to acquire that important sense of themselves as functioning parts of that world. Recreation offers a wealth of sensory experiences to increase a child's cognizance of himself and others.

In addition to early physical and sensory development, children learn social behavior through recreation. For example, playing with toys or enjoying the familiar games of childhood can stimulate the imagination, encourage creative role-playing, and teach children how to interact cooperatively with others. Games with increasingly complex rules further develop social skills, and engaging in hobbies and crafts during youth establishes life-long patterns of self-occupation, preventing boredom and loneliness in later life.

Participation in clubs and organizations during childhood is also beneficial and takes on greater importance during the adult years. Children who join organized groups such as Scouts, gain opportunities to acquire leadership skills and develop personal independence. For example, swimming and camping are recreational activities which provide learning experiences related to independent living and self-protection. Camp life also offers the chance to work and play with many different people, learn to accept direction, encourage proper health and safety habits, and improve basic self-care skills such as eating, dressing, bathing and toilet use.

Calisthenics, coordination exercises and organized sports are other important recreational pursuits throughout our lifetimes. Physical fitness promotes
This book explores special recreation programs for retarded persons, existing community programs in which the retarded individual can take part, and recreation at home.


Discusses the philosophy of habilitation, program planning and administration.


This is a curriculum guide on leisure time activities used with the mentally retarded residents at the Elwyn Institute in Pennsylvania.


Basic principles are presented for teaching physical activities to young mentally retarded children.


Lists 442 references from January, 1965 to January, 1967, concerning recreation for the handicapped.


Provides a comprehensive view of recreation in relation to rehabilitation and medicine.


A handbook for girl scout leaders involved with handicapped girl scouts.


Designed for parents and specialists planning recreation and socialization programs for brain injured children.


This booklet presents guidelines and specific activities for physical conditioning and social recreational activities.


Describes a balanced activity program for the retarded child in a residential institution.


Points out that community teamwork is absolutely necessary if recreation departments are to meet the needs of retarded persons.


A bibliography of 34 selected items reflecting current thinking on recreation and rehabilitation for mentally retarded persons.
feelings of well-being and self-acceptance, and organized sports provide opportunities for personal achievement while teaching rules of competition and controlled release of aggression.

Good habits of physical fitness and constructive use of leisure time continue to be essential during adulthood. Since vocational training and home economics are not the only necessary skills in preparing an individual for community life, the challenges presented to a retarded person should also include learning how to live with leisure (Sengstock & Stein, 1967).

Unfortunately, mentally retarded adults who are proficient in their jobs may fail to adjust to community life because they are not aware of recreational resources available to them, or they have not learned how to use these outlets. Therefore, it becomes essential that well-rounded programs of recreation be developed for all ages of mentally retarded persons if they are to take their places in society as productive, well-adjusted adults.

WHAT ARE THE CURRENT NEEDS AND PROBLEMS?

In spite of the obvious benefits recreation brings, most mentally retarded people have not been adequately served in the community. In 1965, only two percent of the 2,200 community recreation programs offered programming for retarded children or adults (CEC & AAHPER, 1966). A survey made in 1966 proved to be equally discouraging. At that time, less than 20 percent of all retarded children had access to a recreation program in school. In addition, only four percent had a chance to play at a public recreation facility, and only 10 percent were given opportunities to join a swimming program (AAHPER, 1968). A recent survey (NARC, 1972) indicates that a serious shortage of recreational services for mentally retarded persons still exists.

The major problems currently hindering the expansion of recreation services include: (1) few qualified personnel at all levels who are fully aware of the recreational needs of mentally retarded and other developmentally disabled persons; (2) insufficient practical guidelines for program planning and imple-
This special issue contains articles concerning recreation programs for profoundly retarded persons.

Newbitt, J.A. (ed.)

Papers on Program Development in Recreation and Physical Activity for Handicapped Children.
San Jose, California: Institute of Interdisciplinary Studies, San Jose State College, n/d.

Parks, D.C.

Therapeutic Program: A Community Responsibility.

Discusses philosophy that public recreation programs must accept responsibility for providing special programs for handicapped persons.

Pomeroy, J.A.

Mobile Service for the Homebound.
Rehabilitation Record, 1972, 12, 3, 34-36.

A homebound recreation program in San Francisco is described.

Schwartz, A.L. & Ramseur, J.A.

Guide to Organizing Leisure Time Services for Mentally Retarded.

Discusses planning of community based leisure programs.

Southern Regional Education Board.

Atlanta, Georgia: Southern Regional Education Board, 1964.

This is a guide for planning games and crafts for the retarded person living in a residential institution.

Stevens, A.

Fun Is Therapeutic.

Presents leisure and recreational activities for elderly and handicapped persons.

Witt, P.A.

Mental Retardation, 1971, 9, 1, 50-53.

A review of periodical literature from 1920 to 1968 concerning recreation for the mentally retarded.

ADDITIONAL SOURCES OF GENERAL INFORMATION

The American Association for Health, Physical Education and Recreation has recently received a three-year grant from the Bureau of Education for the Handicapped to develop and operate an Information and Research Utilization Center in Physical Education and Recreation for the Handicapped.

For information about this Center and its services contact:

Director, Information and Research Utilization Center in Physical Education and Recreation for the Handicapped
c/o AAHPER Unit on Programs for the Handicapped
1201 Sixteenth Street, N.W.
Washington, D.C. 20036

Other organizations which have information concerning recreation for the mentally retarded and handicapped are:

Council for Exceptional Children
900 Jefferson Plaza
1411 Jefferson Davis Highway
Arlington, Virginia 22202

Director, Scouting for the Handicapped
Boy Scouts of America
North Brunswick, New Jersey 08902

Girl Scouts of the U.S.A.
830 Third Avenue
New York, New York 10022

Information Center: Recreation for the Handicapped
c/o Little Grassy Facilities
Southern Illinois University Carbondale, Illinois

National Easter Seal Society for Crippled Children and Adults
2023 West Ogden Avenue
Chicago, Illinois 60612

National Therapeutic Recreation Society
National Recreation and Park Association
1601 North Kent Street
Arlington, Virginia

United Cerebral Palsy Association
66 East 34th Street
New York, New York 10018

Consult the following reference sources for recent articles and books concerning recreation for mentally retarded persons:

Mental Retardation Abstracts: Research in Education, Educational Resources Information Center (ERIC) and Challenge, a newsletter published by the American Association for Health, Physical Education and Recreation, Unit on Programs for the Handicapped.
mentation; (3) lack of public awareness regarding recreational requirements and availability of existing services; (4) logistical problems such as inadequate resources for transporting handicapped persons to needed programs; and (5) not enough financial support for modifying existing facilities or establishing new recreational areas and programs.

The inadequate number of recreational programs in communities seems to stem from the complicated set of problems which must be solved before starting such programs, rather than from apathetic recreational personnel or volunteers. Too often, professionals who want to get involved are unaware of existing problems and unfamiliar with the resources available for attacking them. And, many times, professionals in the field of recreation are unprepared for the complex challenges associated with mental retardation.

In addition, the average citizen does not understand the recreational needs of mentally retarded persons and is therefore not in a position to provide the necessary support for programs. The problem of public awareness is made more complex by the fact that the majority of mentally retarded individuals are found among the poor, urban and rural disadvantaged and the aging. The President's Committee on Mental Retardation (1968) estimates that some 75 percent of our nation's mentally retarded citizens reside in urban and rural low-income areas. More comprehensive preparation of professionals is needed for work in inner-city neighborhoods and rural areas where problems of securing transportation, appropriate facilities and community support may be very hard to deal with.

WHAT PART HAS THE PARENT-VOLUNTEER MOVEMENT PLAYED?

Early programs of education and habilitation for mentally retarded persons contained few provisions for recreation, and prior to the mid-1940's, such activity was primarily restricted to residential institutions. In the residential setting, recreation was used to preserve order, maintain morale, and prevent boredom. Thus, it was principally viewed as a means to prevent behavior problems (Witt, 1971).

Following World War II, recreation became increasingly recognized as beneficial and practical for all
FILMS: GENERAL

**Cast No Shadow**
(16 mm, Color and Sound, 27 minutes)
Shows wide range of recreation activities for physically and mentally disabled participants, at Recreation Center for the Handicapped in San Francisco.
Professional Arts, Inc., Box 8484 Universal City, California

**Recreation Activites for Mentally Retarded Children**
(A Community Enterprise)
(16 mm, Color and Sound, 28 minutes)
Presents summer recreation program including games, crafts, music, swimming, etc.
West Hartford Recreational Department
West Hartford, Connecticut 06107

**Recreation and Occupational Therapy**
(16 mm, Black and White, Sound, 13 minutes)
Adapted activities suited for patients with limited mobility or physical disability.
Audio-Visual Media Center
Washington State University
Pullman, Washington 99163

**Recreation Center for the Handicapped**
(16 mm, Color and Sound, 23 minutes)
Shows a center providing a year-round program for the severely handicapped.
Mrs. Morris Pomeroy, Dir.
Recreation Center for the Handicapped
Great Highway near Sloat Boulevard
San Francisco, California 94105

**Recreation for the Handicapped**
(16 mm, Color and Sound, 23 minutes)
Shows program, over several months, serving varied ages of disabled.
Filmed by Stanford University film group.
Recreation Center for the Handicapped
Great Highway near Sloat Boulevard
San Francisco, California

**You're It**
(16 mm, Color and Sound, 20 minutes)
Emphasizes the importance of recreation as a means of educating mentally retarded persons.
MacDonald Training Center Foundation
4424 Tampa Bay Boulevard
Tampa, Florida 33614
retarded persons. Although the enormity of the need hampered the expansion of recreational services, the parent-volunteer movement, which came into being at this time, was the catalyst for stimulation of renewed interest in this area.

Recreation is a top priority for programming by many state and local ARC units. Before 1950, there were few educational, vocational, rehabilitation and diagnostic programs, and the local Associations did not have the professional resources to develop these services. However, responding to the need for some type of immediate action to prevent wasting the potential of retarded children and adults, a sizable number of ARC units started recreational programs in many areas of the United States. Through the leadership of the NARC movement, cooperative agreements with a variety of community agencies have since provided the backbone for recreation services which exist even today.

In October, 1964, the NARC Board of Directors adopted the following statements to provide direction in recreational program development:

1. Recreation is a vital factor in contributing to the total growth and welfare of the mentally retarded individual.

2. The mentally retarded are entitled to be included in public and community recreation programs. Special programs geared to meet the varying needs, ages, intellectual levels, etc., should be provided for those who find it difficult to participate in the existing community programs.

3. Recreation programs for the mentally retarded should be under the supervision of professional recreation leaders who have an optimistic insight into the expectations possible with the mentally retarded as well as their limitations.

4. Recreation programs sponsored by associations for retarded children should, wherever possible, be established and operated on a demonstration basis with the objective of involving the appropriate agency in the community at the earliest possible date.
5. Institutions of higher education should be encouraged to include courses related to recreation and physical education for the mentally retarded in their special education, physical education, and recreation curricula.

6. NARC units have the responsibility to cooperate with and encourage the local directors of existing recreation programs for the mentally retarded to establish the best possible standards of operation. The National Association for Retarded Children will cooperate actively with the National Recreation and Park Association, the American Camping Association, and other public and private agencies to achieve this goal.

7. The recreation program for the mentally retarded should encompass a wide spectrum of activities as offered in programs for all citizens of the community. The program should include year-round activities (scouting, cantems, hobbies, etc.) as well as seasonal ones (camping and baseball).

8. Both the professional staff and volunteers should be given orientation prior to the start of the recreation program. In addition, provision should be made for in-service training to be given to both the volunteers and professional staff.

Since these statements were adopted, significant advancements in the field of recreation have occurred. For example, university programs for recreation professions have expanded markedly over the last several years. There has also been an increase in the number of active recreation committees at both state and local levels of the ARC.

A resolution was adopted by the voting delegates at the 1972 NARC Annual Convention in Montreal regarding the provision of recreational services for mentally retarded and other developmentally disabled persons. (See Appendix A). The essence of the resolution is that mentally retarded citizens should have equal access to publicly supported recreational facilities, and that public recreation agencies should do everything within
National Society for Crippled Children and Adults.

This is a listing of resident camps in the United States and Canada serving handicapped children and adults.

Orzak, L.H. et al

An introduction to the need for day camp activities.

Painter, G.

Recreation activities observed at six summer camps are reported.

ADDITIONAL SOURCES OF CAMPING INFORMATION

American Camping Association (Bradford Woods, Martinsville, Indiana) -- list of existing camps known to the Association and materials on planning and implementing a camp program.

Boy Scouts of America (New Brunswick, New Jersey) -- information on site and facility development and scout camping for mentally retarded persons.

Joseph P. Kennedy, Jr. Foundation (719 13th Street, N.W., Washington, D.C. 20005) -- information available regarding guidelines for camping programs and listings of camps now operating in your state or area.

National Easter Seal Society for Crippled Children and Adults.
(2023 West Ogden Avenue, Chicago, Illinois) -- information to assist in planning and implementing a camp program.

National Therapeutic Recreation Society, National Recreation and Park Association (1601 North Kent Street, Arlington, Virginia) -- information concerning camping in general and lists of camps in operation.

FILMS: CAMPING

New Experiences for Mentally Retarded Children
(16 mm, Black and White, Sound, 36 minutes)
A summer camping experience for severely retarded children is described.
Film Production Service
State Department of Education
Richmond, Virginia

Partners in Play
(16 mm, Black and White, Sound, 15 minutes)
Demonstrates how an institution and community recreation department can cooperate to offer a day camp program.
National Medical Audiovisual Center (Annex) Station K
Atlanta, Georgia 30324

These, My Brethren
Depicts the educational benefits of camping in the woods.
Gregory Productions
260 Carmel Avenue
Jackson, Mississippi 39204

Time Is for Taking
(16 mm, Color and Sound, 23 minutes)
Focuses on Camp Kenton, a residential camp in Middleburg, Virginia.
Psychological Cinema Register Audio-Visual Aids Library
Pennsylvania State University
University Park, Pennsylvania 16802

To Lighten the Shadows
(16 mm, Black and White, Sound, 21 minutes)
Emphasizes that day camp programs are in an area of need of further development.
International Film Bureau, Inc.
332 South Michigan Avenue
Chicago, Illinois 60604
their power to make their facilities adaptable to the needs of mentally retarded and other handicapped persons.

The NARC Recreation Committee has disseminated the resolution to many key agency and governmental representatives and meets periodically with such groups as the President's Committee on Mental Retardation, American Association of Health, Physical Education and Recreation, National Recreation & Park Association, and Bureau of the Interior's Division of Outdoor Recreation. The Committee intends to continue its advocacy role at the national level through similar actions while it simultaneously develops information resources and other aids for state and local ARC use.

**HOW CAN STATE AND LOCAL ARC UNITS HELP?**

Considerable planning and re-evaluation of services is currently underway in every state which will markedly shape the type of programs provided for mentally retarded and handicapped persons during the remainder of this decade. It is important, therefore, that knowledgeable consultation and input be provided now to relevant public and private agencies in order that the service systems developed in the next several years will indeed be appropriate and effective. The materials which follow address themselves to this need and suggest action steps which can lead to increased use of interagency resources to achieve normalizing recreation services.

**RECREATION COMMITTEE STRUCTURE AND FUNCTIONS** - There is a need for Recreation Committees at both the state and local levels to achieve a workable statewide program of recreation for all mentally retarded citizens. Although their functions may differ somewhat, the activities of committees at both levels should be complementary and provide a consolidated effort in the areas of recreation development, expansion and monitoring.

--- Organizing the Committee: The first step is to recruit a dynamic, interested chairman who is committed to developing a comprehensive program of recreational services for all retarded citizens, not just the children of the membership. Where it is possible, the chairman should be a person who is knowledgeable in the field of recrea-
American Association for Health, Physical Education and Recreation.
An article dealing specifically with swimming for mentally retarded persons, with list of suggestions on starting programs and teaching techniques.

American Red Cross.
This is an instructor's manual for organizing swimming programs and teaching the handicapped to swim.

Braaten, J., & Lee, I.
Swimming Program for the Trainable Retarded. Toronto, Ontario, Canada: Canadian Association for Retarded Children, n.d.
A set of teaching manuals including lesson plans and information on organizing and conducting swimming programs.

Bundschuh, E.L. et al
Teaching the Mentally Retarded to Swim. Mental Retardation, 1972, 10, 3, 14-17.
This article presents a modification of the Gabrielsen Teta: Push-Kick Method for teaching preschool children to swim.

Council for National Cooperation in Aquatics.
Describes numerous water games and activities.

Council for National Cooperation in Aquatics and American Association for Health, Physical Education and Recreation.
This guide is a composite of the ideas and experiences of many individuals who have taught mentally retarded persons to swim.

Hardie, J.F.
An article describing a swimming program for the handicapped in Manchester, Connecticut.

Miles, N.R.
This is a manual for teaching swimming to children with learning disabilities.

Robinson, P.M. et al
This article presents a variety of instructional ideas for volunteers and instructors.

Strawn, J.
This article includes teaching hints and information on adaptations necessary for different handicapping conditions.

United Cerebral Palsy Association.
Provides an outline of a complete swimming program for the cerebral palsied individual.

FILMS: SWIMMING

Splash
(16 mm, Color and Sound, 28 minutes).
Water learning activities for the severely retarded and multiply handicapped.
Documentary Films 317 Trout Gulch Road Aptos, California 95003.
tion. However, if he is a good organizer, he can skillfully delegate responsibilities and utilize the expertise of professionals and other persons interested in the field.

-- Committee Structure: The Recreation Committee should be representative of the ARC membership, and the various recreational programs in which the unit might be engaged, as well as of the state or local community at large. Representatives of other voluntary agencies, service organizations and public departments of recreation should be considered as potential members in forming the committee. If these persons are unable to serve as members, they should be asked to serve in a consultative capacity. However, it is suggested that the Committee be kept to a manageable size, i.e. approximately five to seven members.

Committee members should be appointed in the manner consistent with the ARC constitution and by-laws. The selection of the members requires careful consideration of the charge to the Committee given by the unit's Board of Directors and President. Selection, of course, should always be made on the basis of individual ability, interest and the willingness to accept responsibility for necessary assignments and work.

-- Coordinating Committee Activities: Programming for retarded persons must be viewed as a team effort involving many different programmatic aspects if a meaningful life-long plan of training and habilitation for retarded persons is to be achieved. Therefore, it is essential that the Recreation Committee work closely with other program committees, including the Education, Residential Services, Vocational Rehabilitation, Religious Services, Poverty, Public Relations and Publicity Committees. The Recreation Committee should also be involved with other committees in ARC governmental affairs activities to ensure a united legislative program.

SUGGESTED ACTIVITIES FOR STATE RECREATION COMMITTEES - Within the policies of the organization, the state Recreation Committee must: (1) take the initiative in assessing statewide needs in the area of recreation; (2) maintain liaison with other relevant state organizations and agencies; and (3) establish a comprehensive plan which will ensure recreation services for all retarded citizens. The Committee should further serve
Bannon, J.J.  
Problem Solving in Recreation and Parks.  
Provides guidelines to help park and recreation personnel develop new approaches to the problems they may encounter.

Bureau of Outdoor Recreation.  
Outdoor Recreation Planning for the Handicapped.  
The requirement that handicapped be given special consideration as a prerequisite to state participation in the Land and Water Conservation Fund Program is discussed.

Georgia Department of State Parks.  
Outdoor Recreation Facilities for the Disabled.  
Atlanta, Georgia: Georgia Department of State Parks, 1966.  
 Presents a plan for a centrally located state park designed to meet the needs of physically handicapped persons.

Miller, P.L.  
Creative Outdoor Play Areas.  
Emphasizes the improvement of play areas provided on school sites, municipal and county parks, and in urban mini-parks.

Orange County Board of Public Instruction.  
An Adaptive Playground for Physically Disabled Children with Perceptual Deficits.  
Describes equipment and architectural aspects of a specialized play area for physically handicapped pre-school children with perceptual deficits.

Smith, J.W. et al.  
Outdoor Education.  
The varied aspects of outdoor recreation and a broad program that covers public and voluntary agencies is discussed.

Films: Outdoor Recreation, Parks and Playgrounds

New Concepts in Children's Play Areas.  
(Filmstrip, 80 frames, sound, color, 20 minutes, 33-1/3 rpm record).  
Shows innovations in playground design to meet children's developmental needs.  
Associated Film Services 3419 West Magnolia Burbank, California 91505
as a primary resource to the local ARC Recreation Committees. Services to the local units should include consultation, information dissemination, training and coordination of ARC recreation efforts throughout the state.

-- **Action Steps for State ARC Units:**

- Obtain the names of key state agencies or persons responsible and/or potentially responsible for statewide recreation services. Examples of relevant agencies would include:

  -- State Recreation and Parks Commission
  -- Department of Parks and Forestry
  -- Department of Recreation
  -- Department of Community Affairs
  -- Environmental Protection and Recreation
  -- State Recreation and Parks Society

- Survey other state social service, educational, commercial or religious organizations regarding their potential for contributing to the expansion of recreational opportunities. Examples of appropriate agencies and organizations to survey would include:

  -- State Department of Education
  -- Volunteer Agencies such as YMCA or YWCA
  -- Council of Churches
  -- Chamber of Commerce
  -- Service Clubs and Fraternal Organizations

- Compile information regarding existing policies that govern the delivery and administration of recreation services in your state.

- Disseminate NARC resolutions and publications regarding the provision of recreation services
A fitness test with national norms based on 4,200 retarded persons between the ages of 8 and 18.

Contents describe (a) net, racket, and paddle; (2) rolling, pushing, throwing, and catching; and (3) striking and kicking activities.

Developed primarily for use by volunteers and teachers of mentally retarded youngsters. Covers activities, methods, teaching/coaching hints and progressions for conditioning and fitness.

An article describing the importance of physical education with suggestions for movement activities and equipment.

A guide which shows how physical education activities may be adapted for exceptional students at school levels.

Methods for teaching physical education to Mentally retarded children are presented.

Written for prospective physical education teachers in a variety of settings.

A guide to physical education for profoundly and severely retarded persons.

Contains a review of literature and list of equipment and apparatus.
to appropriate state agencies. Develop your own resolution or policy statements to complement NARC statements.

- Visit several representative recreational facilities to examine the ways in which services are actually being delivered. To facilitate your evaluation, review: (1) the Accreditation Council for Mentally Retarded Standards related to recreation in community and residential facilities; and (2) the American Institute Standards pertaining to barrier-free architecture which are reprinted for your convenience in Appendix B.

- Develop a comprehensive plan of action for establishing a continuous working relationship with state agency personnel. Remember to discuss the plan with your State Developmental Disability Council or seek representation on the Council.

- Since federal funding for all programs is often changing, contact the Department of Health, Education and Welfare and the Bureau of Outdoor Recreation regional offices for information pertaining to current funding patterns for recreation programming. The addresses of these regional offices are contained in Appendix C.

- Work in close liaison with your Governmental Affairs Committee to make recommendations for endorsement or resistance to legislation.

- Keep local ARC units informed of State Recreation Committee activities through a periodic newsletter or other communication device.

- Use newsletters, brochures and other public information devices to encourage parents of mentally retarded persons, including those who are not members of the Association, to take advantage of existing recreational areas, facilities and programs which you have identified in your state.

- Encourage universities to develop training programs to improve the recreational skills of professionals and parents.
Loewendahl, E.
This manual outlines developmental sequences and describes exercises and physical activities appropriate to attain these developmental objectives.

McCowan, L.L.
A training manual on therapeutic riding for the handicapped.

Peters, R.
Bullseye! Outlook, 1970, 1, 4, 3.
Describes an adapted archery instruction program for mentally retarded persons.

Seaman, J.A.
Describes an innovative approach for teaching bowling to moderately retarded persons.

Voss, D.G.
Discusses philosophy and purpose of physical education and includes practical games, sports, and recreational activities to develop.

FILMS: PHYSICAL EDUCATION, FITNESS & SPORTS

And So They Move:
(16mm, Black and White, Sound, 19 minutes).
Use of creative play, in specially designed environment, with physically disabled children.
Audio-Visual Center
Michigan State University
East Lansing, Michigan 48824

A Demonstration Lesson in Physical Education:
(16mm, Black and White, Sound, 28 minutes).
Depicts approaches and techniques in physical education.
NEA Audio Visual Department
National Education Association
1201 Sixteenth Street, N.W.
Washington, D.C. 20036

A Dream to Grow On:
(16mm, Color and Sound, 28 minutes).
About 1968 Chicago Special Olympics.
Bono Film Service
3132 M Street, N.W.
Washington, D.C. 20007

Everybody Wing:
(16mm, Color and Sound, 22 minutes).
Discusses physical education which assists in keeping every child actively involved in learning and shows how activities are presented in developmental sequence.
Bradley Wright Films
309 W. Duane Avenue
San Gabriel, California 91775

EA, Look Us Over:
(16mm, Color and Sound, 23 minutes).
Features Canadian Special Olympics, June, 1969.
Association-Industrial Film
333 Adelaide Street, West, Third Floor
Toronto, Canada

Just for the Fun of It:
(16mm, Color and Sound, 19 minutes).
Demonstration of a series of motor skills and the purpose of each physical education exercise.
AIMS
Instructional Media Service
P.O. Box 1010
Hollywood, California 90028

Patterns:
(16mm, Color and Sound, 17 minutes).
Demonstrates how motor development is promoted and how physical fitness is improved.
Educational Service Center
Region XIII
7504 Tracor Lane
Austin, Texas 78721
• Compile a list of recreation consultants who would voluntarily assist in training efforts to upgrade the quality of recreation programs and services of local ARC units.

• Involve agency representatives in recreation conferences, workshops or training seminars in order to promote interagency cooperation and coordination.

• Devote a portion of the state convention program to relevant areas of recreation. Offer a workshop for parents designed to help them use recreation activities in the home, and to promote leisure time opportunities in the community.

• Develop cooperative working relationships with civic and fraternal organizations that can provide valuable financial and volunteer resources. A list of such organizations is presented in Appendix D.

• Determine the location of "barrier-free" facilities for physically handicapped persons and be sure to specify where facilities are located, who to contact and how ARC units can best utilize the facilities.

• Prepare a public information leaflet to alert parents, professionals and concerned citizens to the need for expanded recreational opportunities.

• Use news releases and announcements at public meetings to publicize the meritorious efforts of outstanding agency or organization recreation projects in order to reinforce their efforts.

• Participate in NARC's Annual Fitzhugh Boggs Award program to identify outstanding ARC and non-ARC programs deserving national recognition. Additional information on the Boggs Award is contained in Appendix E.
The Promise of Play:
(16mm. Color and Sound, 22 minutes).
Illustrates a number of activities wherein the physical education program serves to motivate all those who work with the handicapped.
Bradley Wright Films
305 North Duane Avenue
San Gabriel, California 91775

To Taste Victory:
(16mm. Color and Sound, 18 minutes).
Story of fourteen boys from Parsons State School who participated in Southwest Regional Special Olympics.
Audio-Visual Department
Parsons State Hospital and Training Center
Parsons, Kansas 67357

Buffalo Public Schools.
Art Projects and Activities for the Mentally Retarded.
Forty-two art activities are suggested for use with mentally retarded children.

Corkin, H.S.
Instant Art Lesson Plans.
A photo-illustrated manual which provides descriptions of 50 art projects appropriate for mentally retarded and elementary school students.

Alexander, D.W.
Arts and Crafts for Students with Learning Difficulties.
Directions and materials for a number of arts and crafts projects are presented.

Baumgartner, B.A. & Shultz, J.B.
Reaching the Retarded Through Art.
Included in this manual on art instruction is a wide variety of suggested projects and activities.

Gingland, D.
Expressive Arts for the Mentally Retarded.
Contains articles on arts and crafts in addition to music, dance, dramatics, and other expressive arts.

Hollander, C.H.
Creative Opportunities for the Retarded Child.
A series of six booklets covering creative opportunities: printmaking, drawing and painting, clay, and dimensional media, weaving, and woodworking.

Lindsay, Z.
Art Is for All: Arts and Crafts for Less Able Children.
Art activities involving numerous materials are illustrated.

Pattemore, A.W.
Arts and Crafts for Slow Learners: Instructor Handbooks Series.
Describes successful projects used in special education art classes.
SUGGESTED ACTIVITIES FOR LOCAL RECREATION COMMITTEES –
Local governments in thousands of communities have em-
ployed personnel to provide recreation services for their
citizens. In communities which have an organized recrea-
tion department or commission, recreation programs for
the retarded and other disabled persons should be organ-
ized as an integral part of existing community recreation
programs. These programs are conducted by Park and Re-
creation Departments, City Recreation Commissions, Pub-
lic Schools, and other governmental districts or public
agencies. Regardless of the type of public program
provided in your community, the local ARC unit must ac-
tively work to (1) ensure the maximum inclusion of re-
tarded individuals in existing projects; (2) catalyze
the further expansion of public supported programs;
and (3) continually monitor the quality of services.

In communities which do not have a well-organized re-
creation program, it may be necessary for the local
ARC to initiate a demonstration program in concert with
other public or voluntary agencies. The range of pos-
sible recreation projects is wide, varying from elabor-
ate programs to easily organized and administered ac-
tivities including: (1) swimming; (2) day and residen-
tial camping and/or camperships; (3) bowling; (4) track
and field events; (5) scouting for the handicapped;
(6) arts and crafts; (7) dancing and folk games; (8)
trips of interest; and (9) social clubs. An important
aspect of such programming, however, should always be
to teach mentally retarded persons the proper use of
community facilities such as public parks and playgrounds,
theatres, bowling centers, and other recreational re-
sources.

Before initiating a new program or demonstration pro-
ject, the unit should conduct a survey to determine the
number of retarded persons who could be expected to
participate in such a program, and to identify the
special recreational interests of parents and others
who will serve as volunteers. The local public schools
may be a valuable resource in helping to identify poten-
tial participants and particular areas of need.

Because a site for carrying on recreation activities is
essential, available space in public, private, commer-
cial and other voluntary agencies' facilities should
also be explored before embarking upon a new program.
Churches and synagogues are particularly good resources
Schmidt, A.
Provides suggestions and instructions for the unskilled teacher involved in teaching crafts to mildly retarded students.

Special Education Curriculum Development Center.
This is intended as an aid to the teacher in integrating art into other subject matter.

Taylor, F. et al.
A developmental sequence of 146 tasks is presented.

Uhlin, D.M.
A discussion dealing with the multitude of interrelationships regarding the physical, emotional, and rational forces with which the individual frcas his reality, through the use of art teaching and therapy.

Wycoff, J.
Illustrations of a variety of crafts that can be pursued at home.

FILMS: ARTS AND CRAFTS

Art and the Exceptional Child: (16mm, Color and Sound, 14 minutes).
Suggests ways art should play an important part in the curriculum of the exceptional child.
William Little 9101 Patterson Avenue, No. 67 Richmond, Virginia 23229

Arts and Crafts for the Slow Learner: (16mm, Black and White, Sound, 27 minutes).
Shows value and contribution of arts and crafts to total development.
SWS Education Films 3031 Kallin Avenue Long Beach, California 90808

Painting Is Loving: (16mm, Color and Sound, 21 minutes).
Self-expression through art for moderately retarded children and adults.
Charles E. Conrad Films 3305 Cahuenga Blvd. West Hollywood, California 90028

The Shape of a Leaf: (16mm, Black and White, Color, and Sound, 26 minutes).
Creative approach to arts and crafts instruction with retarded children.
Perkins School Lancaster, Massachusetts 01523
in this regard. Church facilities can readily be used to provide a center for social activities, and almost every church has access to play areas and other recreation facilities.

Units must further anticipate some of the following problems: (1) the need for financial support; (2) the need for public understanding and acceptance of the goals of the unit; (3) the need to attain active involvement of parents and volunteers; (4) the need for identifying competent recreation leadership; and (5) the need for sound information about appropriate recreational programs for mentally retarded persons.

Units should be aware of two possible self-defeating traps which may be associated with the independent operation of recreation services. First, a local ARC unit can become so intensely involved with its own project that it loses sight of the broader purpose of providing a comprehensive array of services for all mentally retarded citizens. Second, publicly supported agencies may give up their responsibility to provide appropriate services.

Remember that even though a demonstration program has been transferred to another agency, Recreation Committee responsibility does not end. The Committee and its advisory group must continue to work toward broadening the financial base of support for programs, and monitoring the quality of services provided for its mentally retarded citizens.

-- Action Steps for Local ARC Units:

- Formulate in writing the purpose of the Committee.

- Determine the steps agreed upon for attaining the Committee's objectives.

- Review the suggested reading materials and other resources contained in this handbook and compile a library of literature and training aids.

- Maintain close communication with the State Recreation Committee to ensure a coordinated state plan.
TOYS, GAMES & EQUIPMENT

Abbatt, P.
New Toys for the Handicapped.
Special Education, 1966, 55, 5, 12.

Buist, C.A. & Schulman, J.L.
Toys and Games for Educationally Handicapped Children.
Comprehensive list of toys and play materials classified as to general age level, sex interest, and intellectual skills.

Dorward, B.
Teaching Aids and Toys for Handicapped Children.
Describes construction and use of pegboards, puzzles and other toys for developing size and space perception, color discrimination and reading and number readiness.

United Cerebral Palsy Association.
Equipment Manual.

FILMS: TOYS, GAMES AND EQUIPMENT

Innovative Equipment and Inventive Activities for the Handicapped:
93 slides on different pieces of equipment;
50 slides on variety of balance activities with improvised materials;
34 slides on tire activities;
89 slides on physical education and recreation for the handicapped.

Unit on Programs for the Handicapped
AAHPER
1201 16th Street, N.W.
Washington, D.C. 20036

A World of Playthings:
Describes many ways of using household materials to create playthings.
Mrs. Mary Lewis
c/o OCD-HEW
Federal Office Building
50 Fulton Street
San Francisco, California 94102
Contact agencies in the community having responsibility for recreation services as well as other public and voluntary organizations which currently, or potentially, could contribute to your recreation program. Such agencies and organizations include:

-- City, township, or county Recreation and Parks Departments.

-- Local voluntary youth service agencies; e.g., YMCA, YWCA, churches, Scouts, Boys' Clubs, etc.

-- Commercial organizations; e.g., bowling centers, skating rinks, theatres, etc.

-- Local fraternal or civic groups.

Initiate formal correspondence with the community's policy-making body, such as the City Council or Commission, in order to explain the need for community recreation services and objectives of your Committee.

Maintain continuous personal contact with the administrators of community recreation agencies in order to keep them fully advised of progress and plans of the Committee.

Request a hearing before the community council or commission in the event problems or questions are encountered.

Work to ensure that the community recreation administrator, or his designate, assumes administrative authority over recreation programs for retarded persons in the same manner as he does for all other recreation programs.

Keep the public informed of your continuing efforts through news releases to local newspapers, radio and television. Public recognition of deserving persons or agencies for their outstanding work in areas of recreation can serve as one basis for such publicity efforts.
MUSIC ACTIVITIES

Alvin, J.
Discusses the therapeutic value of music in the total development of handicapped children.

Antey, J.W.
Presents songs and rhythm exercises, illustrates the construction of rhythm instruments and ways of using the tape recorder.

Canner, N.
Describes the creative use of movement and dance with mentally retarded children.

Doepke, K.G.
Describes methods involved in teaching songs to moderately retarded students.

Ginglend, D.R. & Stiles, W.E.
This is a handbook for teachers and parents working with moderately and mildly retarded children.

Iowa State Department of Public Instruction.

Provides tips for teachers regarding music and dance for special class children.

Littleton, A.C. & Grelle, M.
Describes the benefits of music activities with mentally retarded children.

This special issue contains a series of articles concerning the use of music in special education.

Nordoff, P. & Robbins, C.
This book gives direction to teachers in choosing and arranging music materials, and in leading each kind of activity.

Robins, R. & Robins, J.

Seale, T.F.

Strum, B.A.

Thresher, J.M.
Describes a three-week workshop to assist special class teachers in using music more effectively in their classrooms.

Weigl, V.
As was the case with state committees, use public information media to encourage parents of mentally retarded persons, including those who are not members of the Association, to take advantage of existing recreational areas, facilities and programs.

Aggressively monitor existing programs and do not be content with isolated examples of quality programs which may serve only a minority of mentally retarded individuals in your community. Your goal should be full recreational opportunities for all mentally retarded persons regardless of age or functioning level.

The above are only a few of the possible action steps for ARC Recreation Committees. They should be used to stimulate and/or guide the development of specific action plans which are appropriate to the unique needs and resources of your community or locale.

CONCLUSION

The preceding information and suggestions were intended to provide some broad guidelines for state and local Recreation Committees. The NARC Recreation Committee is hopeful that this handbook will assist these committees in establishing a full array of recreation programs throughout the nation. The NARC Recreation Committee is seeking reactions to this document from all ARC units and soliciting ideas and suggestions for future editions of this handbook. Please help us make this a viable document which will continue to be of use in the years to come.
FILMS: MUSIC ACTIVITIES

And A Time to Dance:
(16mm, Black and White, Sound, 10 minutes).
Demonstrates use of creative movement with young retarded children.
Commonwealth Mental Health Foundation
4 Marlboro Road
Lexington, Massachusetts 02173

Show Me:
(16mm, Black and White, Sound, 28 minutes).
Designed to promote the teaching of movement and rhythms.
Universal Education and Visual Arts
221 Park Avenue South
New York, New York 10003
REFERENCES


Witt, P.A. A historical sketch of recreation for the mentally retarded. Mental Retardation, 1971, 9, 1, 50-53.
APPENDIX A: NARC RESOLUTION REGARDING INCLUSION OF MENTALLY RETARDED PERSONS IN FEDERALLY FUNDED RECREATION PROJECTS

WHEREAS, recreational pursuits promote optimal physical health and provide a broad spectrum of educative and social learning experiences which assist persons to take their place in society as productive, well-adjusted adults, and

WHEREAS, hundreds of millions of federal dollars are channeled annually to states and local municipalities for planning, acquisition and development of recreational facilities and programs, and

WHEREAS, every citizen is entitled to participate and enjoy the benefits of such tax supported, public recreational facilities and programs, and

WHEREAS, federal agencies have further recognized the need for regulatory standards to eliminate architectural barriers and other impediments to the full involvement of citizens with special recreational needs such as the physically handicapped, and

WHEREAS, the special recreational needs of mentally retarded persons, however, have not been adequately considered in the past regarding operational programming, and

WHEREAS, only a small proportion of the mentally retarded citizens of this nation have actually been involved in existing tax supported, public recreational facilities and programs;

NOW, THEREFORE, BE IT RESOLVED, that all future federally funded recreational projects must fully take into consideration and provide for the special recreational needs of mentally retarded and other developmentally disabled persons, and

that hereafter, no municipality, organization or agency be eligible for continuing federal support unless their new recreational facilities conform to the ANSI recommended standards for barrier-free architecture, and

that hereafter, where possible, existing facilities and structures should be modified to conform to the ANSI recommended standards for barrier-free architecture, and

that those municipalities, organizations or agencies currently operating tax supported recreational programs not only provide appropriate facilities and programs but also with parental support, actively seek the participation of mentally retarded persons and other developmentally disabled persons in their programs, and

that recreational equipment manufacturers, recreational planners and other professionals with potential impact on the field of recreational programming be stimulated to design recreational facilities and equipment which will accommodate varying ages and degrees of retardation, and

that NARC actively seek the cooperation of other national organizations such as the National Recreation and Parks Association, the American Association for Health, Physical Education and Recreation, United Cerebral Palsy, National Health Council and others in its efforts to catalyze and improve recreational opportunities for mentally retarded and other developmentally disabled persons, and

that state and local ARC units be encouraged to closely monitor the delivery of recreational services in their locales in order to ensure that the needs of mentally retarded persons are provided for equitably.

--Adopted by the Delegates at the 1972 Annual NARC Convention in Montreal, Canada
AC/FMR RECREATION STANDARDS AND
APPENDIX B: ANSI STANDARDS CONCERNING
BARRIER FREE FACILITIES

ACREDITATION COUNCIL FOR FACILITIES FOR THE
MENTALLY RETARDED

The following standards are reprinted from the Accreditation Council for Facilities for the Mentally Retarded, Residential Services Standards. This reprinted version is for illustrative purposes only since the standards are subject to periodic revision. Interested committee chairmen should contact the Program Director, AC/FMR, for further information at the following address:

Joint Commission on Accreditation of Hospitals
875 North Michigan Avenue
Chicago, Illinois 60611

I. Standards for Community Agencies Serving Persons with Mental Retardation and Other Developmental Disabilities.

2.6 RECREATION AND LEISURE

DEFINITION:

Recreation is the satisfying use of leisure time. Recreation and leisure activities are elements of an individual's daily life in which participation may be planned, requested, or self-initiated to meet a basic need and to provide personal enjoyment.

PRINCIPLES:

Recreation services should provide for planned and supervised activities designed to help meet specific, individual, personal and therapeutic needs in self-expression, social interaction, and entertainment; to develop skills and interests leading to enjoyable and satisfying use of leisure time; and to improve socialization and increase interaction with other community residents. The primary goal of recreation and leisure time activities should be to give individuals skills with which they can later exercise their own freedom in fulfilling leisure time pursuits in a normalizing manner. Recreation and leisure time activities should also provide coping experiences that encourage emotional growth. A major objective of the recreation program should be the inte-
egration of the developmentally disabled into the recreation mainstream of the community. Without special attention, some developmentally disabled persons may be excluded from community programs because they are not motivated to participate, are not physically able to participate, or do not have access to transportation. Programs should be designed to assure that all handicapped people will have opportunities to participate in planned recreation activities.

STANDARDS:

2.6.1 The agency provides, or obtains, recreation and leisure time activities that are designed to:

2.6.1.1 Allow the individual to choose whether or not to participate, and to choose the type of activity;

2.6.1.2 Develop skills and interests leading to enjoyable and satisfying use of leisure time;

2.6.1.3 Provide opportunities to be successful;

2.6.1.4 Provide experiences that develop social interaction skills;

2.6.1.5 Provide activities that promote physical and emotional health.

2.6.1.6 Provide individualized therapeutic activities for the alleviation of disabilities and the prevention of regression.

2.6.2 Planning and organization of recreation programs and activities include:

2.6.2.1 A specific set of objectives for each individual, based on his individual program plan;

2.6.2.2 Assessment of the individual's abilities and performance level, to determine the type of recreational activities that are appropriate;
2.6.2.3 Grouping of individuals according to their expressed wishes and probable abilities;

2.6.2.4 Careful selection of the method of presentation in accordance with the abilities of the participants;

2.6.2.5 Availability of and access to desired activities;

2.6.2.6 Communication and coordination with other agencies to develop wider opportunities in programming;

2.6.2.7 Opportunities to participate with non-handicapped people;

2.6.2.8 Attention to any fees that are charged to participants.

2.6.3 Recreation activities provided by the agency are available to the developmentally disabled who are served by other agencies, and to others who are not served by any direct program, through the provision of:

2.6.3.1 After-school activities;

2.6.3.2 After-work and evening activities;

2.6.3.3 Weekend activities;

2.6.3.4 Summer activities.

2.6.4 If generic, community recreation programs are not available to the developmentally disabled, the agency initiates action with appropriate agencies in order to make such programs available.

2.6.4.1 The agency offers consultation services to generic agencies in developing and implementing programs for the developmentally disabled.

2.6.5 Recreation programs are available to severely and multiply-handicapped persons.
2.6.6 The agency keeps the population that it serves informed of all recreation opportunities.

II. Standards for Residential Facilities for the Mentally Retarded

3.11 Recreation Services

3.11.1 Recreation services should provide each resident with a program of activities that:

3.11.1.1 Promotes physical and mental health;

3.11.1.2 Promotes optimal sensori-motor, cognitive, affective, and social development;

3.11.1.3 Encourages movement from dependent to independent and interdependent functioning;

3.11.1.4 Provides for the enjoyable use of leisure time.

3.11.2 The facility shall have a written statement of its recreation objectives for residents, consistent with:

3.11.2.1 The needs of its residents;

3.11.2.2 Currently accepted recreation principles and goals;

3.11.2.3 The philosophy and goals of the facility;

3.11.2.4 The services and resources the facility offers.

3.11.3 Recreation services available to the residential facility should include:

3.11.3.1 Recreation activities for the residents;

3.11.3.2 Recreation counseling;

3.11.3.3 Individual and group instruction of residents in recreation skills, to achieve maximum proficiency and develop leadership potential;
3.11.3.4 Therapeutic recreation;
3.11.3.5 Education and consultation;
3.11.3.6 Research and evaluation.

3.11.4 Recreation activities available to the residents should include, as appropriate to the size and location of the facility, and as adapted to the needs of the residents being served:

3.11.4.1 Excursions, outings, and other trips to familiarize the residents with community facilities;
3.11.4.2 Spectator activities, such as movies, television, sports events, and theatre;
3.11.4.3 Participation in music, drama, and dance, such as rhythms, folk dancing, community sings, group music sessions in the living units, performance in music or dramatic productions, performance in choral and instrumental groups, and informal listening to records or tapes;
3.11.4.4 Outdoor and nature experiences, including activities such as camping, hiking, and gardening;
3.11.4.5 Team sports and lead-up activities;
3.11.4.6 Individual and dual sports, such as bowling, archery, badminton, horseshoes, miniature golf, bicycling, and shuffleboard;
3.11.4.7 Hobbies, such as collecting, photography, model building, woodworking (including use of power tools), cooking, and sewing;
3.11.4.8 Social activities, such as clubs, special interest and discussion groups, social dancing, cook-outs, parties, and games;
3.11.4.9 Service clubs and organizations, such as leaders clubs, Scouting, 4-H, Junior Red Cross, Junior Chamber of Commerce, Hi-Y, Tri-Hi-Y, residential councils, and senior citizens clubs;
3.11.4.10 Aquatics, including water play, swimming, and boating;

3.11.4.11 Arts and crafts, including a wide range of activities from simple to complex, from reproductive to creative, and consistent with activities found in the community;

3.11.4.12 Physical fitness activities designed to develop efficient cardiovascular and cardiorespiratory functions, strength, endurance, power, coordination, and agility, sufficient for both usual and extra demands;

3.11.4.13 Library services for reading, listening, and viewing, such as looking at books, listening to records and tapes, and viewing film strips and slides;

3.11.4.14 Celebration of special events, such as holidays and field days;

3.11.4.15 Winter activities, including snow sculpture, snow play, games and sports;

3.11.4.16 Opportunities to use leisure time in activities of the resident's own choosing in an informal setting under minimal supervision, such as a "drop-in center";

3.11.4.17 Frequent coeducational experiences, to promote acceptable social behavior and enjoyment of social relationships;

3.11.4.18 Activities for the nonambulatory, including the mobile and nonmobile.

3.11.5 Maximum use should be made of all community recreation resources.

3.11.6 Recreation counseling should be a continuous process that provides for:

3.11.6.1 Modification of resident's recreation behaviors;

3.11.6.2 Guidance to residents on how to find, reach, and utilize community recreation resources;
3.11.6.3 Family counseling in relation to recreation activities;
3.11.6.4 Interpretation of residents' needs and abilities to community agencies.

3.11.7 Therapeutic recreation, defined as purposive intervention, through recreation activities, to modify, ameliorate, or reinforce specific physical, emotional, or social behaviors, should include, as appropriate:

3.11.7.1 Participation on an interdisciplinary team, to identify the habilitation needs and goals of the resident;
3.11.7.2 Determination of appropriate recreation intervention, to achieve the stated habilitation goals;
3.11.7.3 A written plan for implementing the therapeutic recreation objectives, consistent with the recommendations of the evaluation team;
3.11.7.4 Evaluation of the effectiveness of such interventions, and subsequent redefinition of the resident's habilitation needs and goals.

3.11.8 Education and consultation services should include:

3.11.8.1 Provision of stimulation, leadership, and assistance with recreation activities, conducted by the direct-care staff;
3.11.8.2 Staff training and development;
3.11.8.3 Orientation and training of volunteers;
3.11.8.4 Training of interns and students in recreation;
3.11.8.5 Consultation to community agencies and organizations, to stimulate the development and improvement of recreation services for the retarded;
3.11.8.6 Public education and information, to encourage acceptance of the retarded in recreation activities.

3.11.9 Recreation services shall be coordinated with other services and programs provided the residents, in order to make fullest possible use of the facility's resources and to maximize benefits to the residents.

3.11.9.1 Activities in health, music, art, and physical education shall be coordinated with recreation activities relevant to these areas.

3.11.10 Records concerning residents should include:

3.11.10.1 Periodic surveys of their recreation interests;

3.11.10.2 Periodic surveys of their attitudes and opinions regarding recreation services;

3.11.10.3 The extent and level of each resident's participation in the activities program;

3.11.10.4 Progress reports, as appropriate;

3.11.10.5 Reports on relationships among peers, and between residents and staff;

3.11.10.6 Evaluations conducted by personnel at all levels and, where appropriate, by staff from other services.

3.11.11 Established procedures for evaluating and researching the effectiveness of recreation services, in relation to stated purposes, goals, and objectives, should include:

3.11.11.1 Utilization of adequate records concerning residents' interests, attitudes, opinions, participations, and achievements;

3.11.11.2 Time schedules for evaluation that are appropriate to the service or program being evaluated.
3.11.11.3 Provision for using evaluation results in program planning and development;

3.11.11.4 Provision for disseminating evaluation results in professional journals and in public education and information programs;

3.11.11.5 Encouragement of recreation staff to initiate, conduct, and/or participate in research studies, under the supervision of qualified personnel.

3.11.12 There shall be sufficient, appropriately qualified recreation staff, and necessary supporting staff, to carry out the various recreation services in accordance with stated goals and objectives.

3.11.12.1 Scheduling of staff shall provide:

3.11.12.1.1 Coverage on evenings, weekends, and holidays;

3.11.12.1.2 Additional coverage during periods of peak activity.

3.11.12.2 Recreation personnel shall be:

3.11.12.2.1 Assigned responsibilities in accordance with their qualifications;

3.11.12.2.2 Delegated authority commensurate with their responsibility;

3.11.12.2.3 Provided appropriate professional recreation supervision.

3.11.12.3 Personnel conducting activities in recreation program areas should possess the following minimum educational and experiential qualifications:

3.11.12.3.1 A bachelor's degree in recreation, or in a specialty area, such as art, music, or physical education; or

3.11.12.3.2 An associate degree in recreation and one year of experience in recreation; or
3.11.12.3.3 A high school diploma, or an equivalency certificate; and two years of experience in recreation, or one year of experience in recreation plus completion of comprehensive inservice training in recreation; or

3.11.12.3.4 Demonstrated proficiency and experience in one or more program areas.

3.11.12.4 Personnel performing recreation counseling or therapeutic recreation functions should possess the following minimum education and experiential qualifications, and should be eligible for registration with the National Therapeutic Recreation Society at the Therapeutic Recreation Specialist level:

3.11.12.4.1 A master's degree in therapeutic recreation and one year of experience in a recreation program serving disabled persons; or

3.11.12.4.2 A master's degree in recreation and two years of experience in a recreation program serving disabled persons; or

3.11.12.4.3 A bachelor's degree in recreation and three years of experience in a recreation program serving disabled persons; or

3.11.12.4.4 A combination of education and experience in recreation serving disabled persons that totals six years.

3.11.12.5 Education and consultation functions in recreation should be conducted by staff members, in accordance with their education, experience, and role in the recreation program.

3.11.13 Appropriate to the size of the recreation program, there shall be a staff development program that provides opportunities for professional development, including:
3.11.13.1 Regular staff meetings;

3.11.13.2 An organized inservice training program in recreation;

3.11.13.3 Access to professional journals, books, and other literature in the fields of recreation, therapeutic recreation, rehabilitation, special education, and other allied professions;

3.11.13.4 Provisions for financial assistance and time for attendance at professional conferences and meetings;

3.11.13.5 Procedures for encouraging continuing education, including educational leaves, direct financial assistance, and rearrangement of work schedules;

3.11.13.6 Provision for workshops and seminars relating to recreation, planned by the recreation and other professional and administrative staff;

3.11.13.7 Provision for staff consultation with specialists, as needed, to improve recreation services to residents.

3.11.14 Recreation areas and facilities shall be designed and constructed or modified so as to:

3.11.14.1 Permit all recreation services to be carried out to the fullest possible extent in pleasant and functional surroundings.

3.11.14.2 Be easily accessible to all residents, regardless of their disabilities;

3.11.14.3 Appropriate recreation consultation shall be employed in the design or modification of all recreation areas and facilities;

3.11.14.4 Toilet facilities, appropriately equipped in accordance with the needs of the residents, should be easily accessible from the recreation areas.
3.11.14.5 Appropriate and necessary maintenance services shall be provided for all recreation areas and facilities.

3.11.15 Indoor recreation facilities should include, as appropriate to the facility:

3.11.15.1 A multi-purpose room;
3.11.15.2 A quiet browsing room;
3.11.15.3 Access to a gymnasium;
3.11.15.4 Access to an auditorium;
3.11.15.5 Access to suitable library facilities;
3.11.15.6 Access to kitchen facilities;
3.11.15.7 Adequate and convenient space for storage of supplies and large and small equipment;
3.11.15.8 Adequate office space for the recreation staff.

3.11.16 Outdoor recreation facilities should include, as appropriate to the facility:

3.11.16.1 Access to a hard-top, all-weather-surface area;
3.11.16.2 Access to gardening and nature activity areas;
3.11.16.3 Access to adequately equipped recreation areas;
3.11.16.4 The facility's residents should have, as appropriate and feasible, access to year-round swimming and aquatic facilities.

3.11.17 Adequate transportation services for recreation programs shall be provided.

3.11.18 Recreation equipment and supplies in sufficient quantity and variety shall be provided to carry out the stated objectives of the activities programs.
3.11.18.1 Toys, games, and equipment shall be:

3.11.18.1.1 Selected on the basis of suitability, safety, durability, and multiplicity of use;

3.11.18.1.2 Adapted as necessary to the special needs of the residents.

3.11.19 If a music therapy program is provided, it should include:

3.11.19.1 Participation by the music therapist, when appropriate, on an interdisciplinary evaluation team to identify the resident's needs and ways of meeting them;

3.11.19.2 Determination of music therapy goals for the resident and development of a written plan for achieving them;

3.11.19.3 Periodic progress reports, reevaluations, and program changes, as indicated;

3.11.19.4 Direction by a therapist eligible for registration with the National Association for Music Therapy;

3.11.19.5 Appropriate space, facilities, and equipment, with special consideration of the acoustical characteristics of rooms used for performing and listening.
American Standard Specifications for Making Buildings and Facilities Accessible to, and Usable by, the Physically Handicapped

1. Scope and Purpose

1.1 Scope

1.1.1 This standard applies to all buildings and facilities used by the public. It applies to temporary or emergency conditions as well as permanent conditions. It does not apply to private residences.

1.1.2 This standard is concerned with non-ambulatory disabilities, semi-ambulatory disabilities, sight disabilities, hearing disabilities, disabilities of incoordination, and aging.

1.2 Purpose. This standard is intended to make all buildings and facilities used by the public accessible to, and functional for, the physically handicapped, to, through, and within their doors, without loss of function, space, or facility where the general public is concerned. It supplements existing American Standards and reflects great concern for safety of life and limb. In cases of practical difficulty, unnecessary hardship, or extreme differences, administrative authorities may grant exceptions from the literal requirements of this standard or permit the use of other methods or materials, but only when it is clearly evident that equivalent facilitation and protection are thereby secured.

2. Definitions

2.1 Non-ambulatory Disabilities. Impairments that, regardless of cause or manifestation, for all practical purposes, confine individuals to wheelchairs.

2.2 Semi-ambulatory Disabilities. Impairments that cause individuals to walk with difficulty or insecurity. Individuals using braces or crutches, amputees, arthritics, spastics, and those with pulmonary and cardiac ills may be semi-ambulatory.

2.3 Sight Disabilities. Total blindness or impairments affecting sight to the extent that the individual functioning in public areas is insecure or exposed to danger.

2.4 Hearing Disabilities. Deafness or hearing handicaps that might make an individual insecure in public areas because he is unable to communicate or hear warning signals.

2.5 Disabilities of Incoordination. Faulty coordination or palsy from brain, spinal, or peripheral nerve injury.

2.6 Aging. Those manifestations of the aging processes that significantly reduce mobility, flexibility, coordination, and perceptiveness but are not accounted for in the aforementioned categories.

2.7 Standard. When this term appears in small letters and is not preceded by the word “American,” it is descriptive and does not refer to an American Standard approved by ASA; for example, a “standard” wheelchair is one characterized as standard by the manufacturers.

2.8 Fixed Turning Radius, Wheel to Wheel. The tracking of the caster wheels and large wheels of a wheelchair when pivoting on a spot.

2.9 Fixed Turning Radius, Front Structure to Rear Structure. The turning radius of a wheelchair, left front-foot platform to right rear wheel, or right front-foot platform to left rear wheel, when pivoting on a spot.

2.10 Involved (Involvement). A portion or portions of the human anatomy or physiology, or both, that have a loss or impairment of normal function as a result of genesis, trauma, disease, inflammation, or degeneration.

2.11 Ramps, Ramps with Gradients. Because the term “ramp” has a multitude of meanings and uses, its use in this text is clearly defined as ramps with gradients (or ramps with slopes) that deviate from what would otherwise be considered the normal level. An exterior ramp, as distinguished from a “walk,” would be considered an appendage to a building leading to a level above or below existing ground level. As such, a ramp shall meet certain requirements similar to those imposed upon stairs.

2.12 Walk, Walks. Because the terms “walk” and “walks” have a multitude of meanings and uses, their use in this text is clearly defined as a predetermined, prepared-surface, exterior pathway leading to or from a building or facility, or from one exterior area to another, placed on the existing ground level.
and not deviating from the level of the existing ground immediately adjacent.

2.13 Appropriate Number. As used in this text, appropriate number means the number of a specific item that would be necessary, in accord with the purpose and function of a building or facility, to accommodate individuals with specific disabilities in proportion to the anticipated number of individuals with disabilities who would use a particular building or facility.

Example: Although these specifications shall apply to all buildings and facilities used by the public, the numerical need for a specific item would differ, for example, between a major transportation terminal, where many individuals with diverse disabilities would be continually coming and going, an office building or factory, where varying numbers of individuals with disabilities of varying manifestations (in many instances, very large numbers) might be employed or have reason for frequent visits, a school or church, where the number of individuals may be fixed and activities more definitive, and the many other buildings and facilities dedicated to specific functions and purposes.

Note: Disabilities are specific and where the individual has been properly evaluated and properly oriented and where architectural barriers have been eliminated, a specific disability does not constitute a handicap. It should be emphasized that more and more of those physically disabled are becoming participants, rather than spectators, in the fullest meaning of the word.

3. General Principles and Considerations

3.1 Wheelchair Specifications. The collapsible-model wheelchair of tubular metal construction with plastic upholstery for back and seat is most commonly used. The standard model of all manufacturers falls within the following limits, which were used as the basis of consideration:

1. Length: 42 inches
2. Width, when open: 25 inches
3. Height of seat from floor: 19 1/2 inches
4. Height of armrest from floor: 29 inches
5. Height of pusher handles (rear) from floor: 36 inches
6. Width, when collapsed: 11 inches

3.2 The Functioning of a Wheelchair

3.2.1 The fixed turning radius of a standard wheelchair, wheel to wheel, is 18 inches. The fixed turning radius, front structure to rear structure, is 31.5 inches.

3.2.2 The average turning space required (180 and 360 degrees) is 60 x 60 inches.

Note: Actually, a turning space that is longer than it is wide, specifically, 63 x 56 inches, is more workable and desirable. In an area with two open ends, such as might be the case in a corridor, a minimum of 54 inches between two walls would permit a 360-degree turn.

3.2.3 A minimum width of 60 inches is required for two individuals in wheelchairs to pass each other.

3.3 The Adult Individual Functioning in a Wheelchair

3.3.1 The average unilateral vertical reach is 60 inches and ranges from 54 inches to 78 inches.

3.3.2 The average horizontal working (table) reach is 30.8 inches and ranges from 28.5 inches to 33.2 inches.

3.3.3 The bilateral horizontal reach, both arms extended to each side, shoulder high, ranges from 54 inches to 71 inches and averages 64.5 inches.

3.3.4 An individual reaching diagonally, as would be required in using a wall-mounted dial telephone or towel dispenser, would make the average reach (on the wall) 48 inches from the floor.

3.4 The Individual Functioning on Crutches

3.4.1 On the average, individuals 5 feet 6 inches tall require an average of 31 inches between crutch tips in the normally accepted gaits.

3.4.2 On the average, individuals 6 feet 0 inches tall require an average of 32.5 inches between crutch tips in the normally accepted gaits.

4. Site Development

4.1 Grading. The grading of ground, even contrary to existing topography, so that it attains a level with a normal entrance will make a facility accessible to individuals with physical disabilities.

*Extremely small, large, strong, or weak and involved individuals could fall outside the ranges in 3.3.1, 3.3.2, 3.3.3, and their reach could differ from the figure given in 3.3.4. However, these reaches were determined using a large number of individuals who were functionally trained, with a wide range in individual size and involvement.

Most individuals ambulating on braces or crutches, or both, or on canes are able to manipulate within the specifications prescribed for wheelchairs, although doors present quite a problem at times. However, attention is called to the fact that a crutch tip extending laterally from an individual is not obvious to others in heavily trafficked areas, certainly not as obvious or protective as a wheelchair and is, therefore, a source of vulnerability.

Some cerebral palsied individuals, and some severe arthritics, would be extreme exceptions to 3.4.1 and 3.4.2.

Site development is the most effective means to resolve the problems created by topography, definitive architectural designs or concepts, water table, existing streets, and atypical problems, singularly or collectively, so that ingress, ingress, and egress to buildings by physically disabled can be facilitated while preserving the desired design and effect of the architecture.
4.2 Walks

4.2.1 Public walks should be at least 48 inches wide and should have a gradient not greater than 5 percent.6

4.2.2 Such walks shall be of a continuing common surface, not interrupted by steps or abrupt changes in level.

4.2.3 Wherever walks cross other walks, driveways, or parking lots they should blend to a common level.7

Note: 4.1 and 4.2, separately or collectively, are greatly aided by terracing, retaining walls, and winding walks allowing for more gradual incline, thereby making almost any building accessible to individuals with permanent physical disabilities, while contributing to its esthetic qualities.

4.2.4 A walk shall have a level platform at the top which is at least 5 feet by 5 feet if a door swings out onto the platform or toward the walk. This platform shall extend at least 1 foot beyond each side of the doorway.

4.2.5 A walk shall have a level platform at least 3 feet deep and 5 feet wide, if the door does not swing onto the platform or toward the walk. This platform shall extend at least 1 foot beyond each side of the doorway.

4.3 Parking Lots

4.3.1 Spaces that are accessible and approximate to the facility should be set aside and identified for use by individuals with physical disabilities.

4.3.2 A parking space open on one side, allowing room for individuals in wheelchairs or individuals on braces and crutches to get in and out of an automobile onto a level surface, suitable for wheeling and walking, is adequate.

4.3.3 Parking spaces for individuals with physical disabilities when placed between two conventional

5. Buildings

5.1 Ramps with Gradients. Where ramps with gradients are necessary or desired, they shall conform to the following specifications:

5.1.1 A ramp shall not have a slope greater than 1 foot rise in 12 feet, or 8.33 percent, or 4 degrees 50 minutes.

5.1.2 A ramp shall have handrails on at least one side, and preferably two sides, that are 32 inches in height, measured from the surface of the ramp, that are smooth, that extend 1 foot beyond the top and bottom of the ramp, and that otherwise conform with American Standard Safety Code for Floor and Wall Openings, Railings, and Toe Boards, A12-1932.

Note 1: Where codes specify handrails to be of heights other than 32 inches, it is recommended that two sets of handrails be installed to serve all people. Where major traffic is predominantly children, particularly physically disabled children, extra care should be exercised in the placement of handrails, in accordance with the nature of the facility and the age group or groups being serviced.

Note 2: Care should be taken that the extension of the handrail is not in itself a hazard. The extension may be made on the side of a continuing wall.

5.1.3 A ramp shall have a surface that is nonslip.

5.1.4 A ramp shall have a level platform at the top which is at least 5 feet by 5 feet, if a door swings out onto the platform or toward the ramp. This platform shall extend at least 1 foot beyond each side of the doorway.

5.1.5 A ramp shall have a level platform at least 3 feet deep and 5 feet wide, if the door does not swing onto the platform or toward the ramp. This platform shall extend at least 1 foot beyond each side of the doorway.

5.1.6 Each ramp shall have at least 6 feet of straight clearance at the bottom.

5.1.7 Ramps shall have level platforms at 30-foot intervals for purposes of rest and safety and shall have level platforms wherever they turn.

6 It is essential that the gradient of walks and driveways be less than that prescribed for ramps, since walks would be void of handrails and curbs and would be considerably longer and more vulnerable to the elements. Walks of near maximum grade and considerable length should have level areas at intervals for purposes of rest and safety. Walks or driveways should have a nonslip surface.

7 This specification does not require the elimination of curbs, which, particularly if they occur at regular intersections, are a distinct safety feature for all of the handicapped, particularly the blind. The preferred method of meeting the specification is to have the walk incline to the level of the street. However, at principal intersections, it is vitally important that the curb run parallel to the street, up to the point where the walk is inclined, at which point the curb would turn in and gradually meet the level of the walk at its highest point. A less preferred method would be to gradually bring the surface of the driveway or street to the level of the walk. The disadvantage of this method is that a blind person would not know when he has left the protection of a walk and entered the hazards of a street or driveway.
5.2 Entrances

5.2.1 At least one primary entrance to each building shall be usable by individuals in wheelchairs.

**Note:** Because entrances also serve as exits, some being particularly important in case of an emergency, and because the proximity of such exits to all parts of buildings and facilities, in accordance with their design and function, is essential (see 112 and 2000 through 2031 of American Standard Building Exit Code, A9.1-1953) it is preferable that all or most entrances (exits) should be accessible to, and usable by, individuals in wheelchairs and individuals with other forms of physical disability herein applicable.

5.2.2 At least one entrance usable by individuals in wheelchairs shall be on a level that would make the elevators accessible.

5.3 Doors and Doorways

5.3.1 Doors shall have a clear opening of no less than 32 inches when open and shall be operable by a single effort.

**Note 1:** Two-leaf doors are not usable by those with disabilities defined in 2.1, 2.2, and 2.5 unless they operate by a single effort, or unless one of the two leaves meets the requirement of 5.3.1.

**Note 2:** It is recommended that all doors have kick plates extending from the bottom of the door to at least 16 inches from the floor, or be made of a material and finish that would safely withstand the abuse they might receive from canes, crutches, wheelchair foot-platforms, or wheelchair wheels.

5.3.2 The floor on the inside and outside of each doorway shall be level for a distance of 5 feet from the door in the direction the door swings and shall extend 1 foot beyond each side of the door.

5.3.3 Sharp inclines and abrupt changes in level shall be avoided at doorills. As much as possible, thresholds shall be flush with the floor.

**Note 1:** Care should be taken in the selection, placement, and setting of door closers so that they do not prevent the use of doors by the physically disabled. Time-delay door closers are recommended.

**Note 2:** Automatic doors that otherwise conform to 5.3.1, 5.3.2, and 5.3.3 are very satisfactory.

**Note 3:** These specifications apply both to exterior and interior doors and doorways.

5.4 Stairs. Stairs shall conform to American Standard A9.1-1953, with the following additional considerations:

5.4.1 Steps in stairs that might require use by those with disabilities defined in 2.2 and 2.5 or by the aged shall not have abrupt (square) nosing. (See Fig. 1.)

**Note:** Individuals with restrictions in the knee, ankle, or hip, with artificial legs, long leg braces, or comparable conditions cannot, without great difficulty and hazard, use steps with nosing as illustrated in Fig. 1a, but can safely and with minimum difficulty use steps with nosing as illustrated in Fig. 1b.

5.4.2 Stairs shall have handrails 32 inches high as measured from the tread at the face of the riser.

**Note:** Where codes specify handrails to be at heights other than 32 inches, it is recommended that two sets of handrails be installed to serve all people. Where traffic is predominantly children, particularly physically disabled children, extra care should be exercised in the placement of handrails in accordance with the nature of the facility and the age group or groups being serviced. Dual handrails may be necessary.

5.4.3 Stairs shall have at least one handrail that extends at least 18 inches beyond the top step and beyond the bottom step.

**Note:** Care should be taken that the extension of the handrails is not in itself a hazard. The extension may be made on the side of a continuing wall.

5.4.4 Steps should, wherever possible, and in conformation with existing step formulas, have risers that do not exceed 7 inches.

5.5 Floors

5.5.1 Floors shall have a surface that is nonslip.

5.5.2 Floors on a given story shall be of a common level throughout or be connected by a ramp in accord with 5.1.1 through 5.1.6, inclusive.

**Example 1:** There shall not be a difference between the level of the floor of a corridor and the level of the floor of the toilet rooms.

**Example 2:** There should not be a difference between the level of the floor of a corridor and the level of a meeting room, dining room, or any other room, unless proper ramps are provided.
5.6 Toilet Rooms. It is essential that an appropriate number* of toilet rooms, in accordance with the nature and use of a specific building or facility, be made accessible to, and usable by, the physically handicapped.

5.6.1 Toilet rooms shall have space to allow traffic of individuals in wheelchairs, in accordance with 3.1, 3.2, and 3.3.

5.6.2 Toilet rooms shall have at least one toilet stall that—

(1) Is 3 feet wide
(2) Is at least 4 feet 6 inches, preferably 5 feet, deep
(3) Has a door (where doors are used) that is 32 inches wide and swings out
(4) Has handrails on each side, 33 inches high and parallel to the floor, 11 1/2 inches in outside diameter, with 11 1/2 inches clearance between rail and wall, and fastened securely at ends and center
(5) Has a water closet with the seat 20 inches from the floor

Note: The design and mounting of the water closet is of considerable importance. A wall-mounted water closet with a narrow understructure that recedes sharply is most desirable. If a floor-mounted water closet must be used, it should not have a front that is wide and perpendicular to the floor at the front of the seat. The bowl should be shallow at the front of the seat and turn backward more than downward to allow the individual in a wheelchair to get close to the water closet with the seat of the wheelchair.

5.6.3 Toilet rooms shall have lavatories with narrow aprons, which when mounted at standard height are usable by individuals in wheelchairs; or shall have lavatories mounted higher, when particular designs demand, so that they are usable by individuals in wheelchairs.

Note: It is important that drain pipes and hot-water pipes under a lavatory be covered or insulated so that a wheelchair individual without sensation will not burn himself.

5.6.4 Some mirrors and shelves shall be provided above lavatories at a height as low as possible and no higher than 40 inches above the floor, measured from the top of the shelf and the bottom of the mirror.

5.6.5 Toilet rooms for men shall have wall-mounted urinals with the opening of the basin 19 inches from the floor, or shall have floor-mounted urinals that are on level with the main floor of the toilet room.

5.6.6 Toilet rooms shall have an appropriate number* of towel racks, towel dispensers, and other dispensers and disposal units mounted no higher than 40 inches from the floor.

5.7 Water Fountains. An appropriate number* of water fountains or other water-dispensing means shall be accessible to, and usable by, the physically disabled.

5.7.1 Water fountains or coolers shall have up-front spouts and controls.

5.7.2 Water fountains or coolers shall be hand-operated or hand- and foot-operated. (See also American Standard Specifications for Drinking Fountains, Z4.2-1942.)

Note 1: Conventional floor-mounted water coolers can be serviceable to individuals in wheelchairs if a small fountain is mounted on the side of the cooler 30 inches above the floor.

Note 2: Wall-mounted, hand-operated coolers of the latest design, manufactured by many companies, can serve the able-bodied and the physically disabled equally well when the cooler is mounted with the basin 36 inches from the floor.

Note 3: Fully recessed water fountains are not recommended.

Note 4: Water fountains should not be set into an alcove unless the alcove is wider than a wheelchair. (See 3.1.)

5.8 Public Telephones. An appropriate number* of public telephones should be made accessible to, and usable by, the physically disabled.

Note: The conventional public telephone booth is not usable by most physically disabled individuals. There are many ways in which public telephones can be made accessible and usable. It is recommended that architects and builders confer with the telephone company in the planning of the building or facility.

5.8.1 Such telephones should be placed so that the dial and the handset can be reached by individuals in wheelchairs, in accordance with 3.3.

5.8.2 An appropriate number* of public telephones should be equipped for those with hearing disabilities and so identified with instructions for use.

Note: Such telephones can be used by everyone.

5.9 Elevators. In a multiple-story building, elevators are essential to the successful functioning of physically disabled individuals. They shall conform to the following requirements:

5.9.1 Elevators shall be accessible to, and usable by, the physically disabled on the level that they use to enter the building, and at all levels normally used by the general public.

5.9.2 Elevators shall allow for traffic by wheelchairs, in accordance with 3.1, 3.2, 3.3 and 5.3.

5.10 Controls. Switches and controls for light, heat, ventilation, windows, draperies, fire alarms, and all similar controls of frequent or essential use, shall be placed within the reach of individuals in wheelchairs. (See 3.3.)

*See 2.13.
5.11 Identification. Appropriate identification of specific facilities within a building used by the public is particularly essential to the blind.

5.11.1 Raised letters or numbers shall be used to identify rooms or offices.

5.11.2 Such identification should be placed on the wall, to the right or left of the door, at a height between 4 feet 6 inches and 5 feet 6 inches, measured from the floor, and preferably at 5 feet.

5.11.3 Doors that are not intended for normal use, and that might prove dangerous if a blind person were to exit or enter by them, should be made quickly identifiable to the touch by knurling the door handle or knob. (See Fig. 2.)

Example: Such doors might lead to loading platforms, boiler rooms, stages, fire escapes, etc.

5.12 Warning Signals

5.12.1 Audible warning signals shall be accompanied by simultaneous visual signals for the benefit of those with hearing disabilities.

5.12.2 Visual signals shall be accompanied by simultaneous audible signals for the benefit of the blind.

5.13 Hazards. Every effort shall be exercised to obviate hazards to individuals with physical disabilities.

5.13.1 Access panels or manholes in floors, walks, and walls can be extremely hazardous, particularly when in use, and should be avoided.

5.13.2 When manholes or access panels are open and in use, or when an open excavation exists on a site, particularly when it is approximate to normal pedestrian traffic, barricades shall be placed on all open sides, at least 6 feet from the hazard, and warning devices shall be installed in accord with 5.12.2.

5.13.3 Low-hanging door closers that remain within the opening of a doorway when the door is open, or that protrude hazardously into regular corridors or traffic ways when the door is closed, shall be avoided.

5.13.4 Low-hanging signs, ceiling lights, and similar objects or signs and fixtures that protrude into regular corridors or traffic ways shall be avoided. A minimum height of 7 feet, measured from the floor, is recommended.

5.13.5 Lighting on ramps shall be in accord with 1201, 1202, 1203, and 1204 of American Standard A9.1-1953.

5.13.6 Exit signs shall be in accord with 1205 of American Standard A9.1-1953, except as modified by 5.11 of this standard.
DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Regional Offices

Region 1 -
(Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont)
John F. Kennedy Federal Bldg.
Government Center
Boston, Massachusetts 02203
(617) 223-6831

Region 2 -
(New York, New Jersey, Puerto Rico, Virgin Islands)
26 Federal Plaza
New York, New York 10007
(212) 261-1600

Region 3 -
(Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia)
401 North Broad Street
Philadelphia, Pennsylvania 19108
(215) 597-9050

Region 4 -
(Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)
50 Seventh Street, N.E.
Room 404
Atlanta, Georgia 30323
(404) 526-5817

Region 5 -
(Illinois, Indiana, Minnesota, Michigan, Ohio, Wisconsin)
300 South Wacker Drive
Chicago, Illinois 60607
(312) 353-5160

Region 6 -
(Arkansas, Louisiana, New Mexico, Oklahoma, Texas)
1114 Commerce Street
Dallas, Texas 75202
(214) 749-3396

Region 7 -
(Iowa, Kansas, Missouri, Nebraska)
601 East 12th Street
Kansas City, Missouri 64106
(816) 374-3436

Region 8 -
(Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)
9017 Federal Office Bldg.
19th & Stout Streets
Denver, Colorado 80202
(303) 837-3373

Region 9 -
(Arizona, California, Hawaii, Nevada, Guam, American Samoa, Wake Island, Trust Territories of the Pacific Islands)
Federal Office Building
50 Fulton Street
San Francisco, California 94102
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1312 Second Avenue
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Connecticut, Delaware, Maine,
Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia, District of Columbia)
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Seventh Floor
1421 Cherry Street
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1000 2nd Avenue
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98104
(206) 583-4706

NEW MEXICO -
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Arkansas, Louisiana, New Mexico, Oklahoma, Texas)
5301 Central Avenue, N.E.
Albuquerque, New Mexico
87108
(505) 843-3502
APPENDIX D: ORGANIZATIONS AND AGENCIES

I. Sources of Information, Assistance and Referral

American Association for Health, Physical Education and Recreation
1201 16th Street, N.W.
Washington, D.C. 20036
(202) 223-9400

American Camping Association
Bradford Woods
Martinsville, Indiana 46151
(317) 342-3042

The American National Red Cross
17th & D Streets, N.W.
Washington, D.C. 20006
(202) 337-8300

Boy Scouts of America
New Brunswick, New Jersey 08903
(201) 249-6000

Bureau of Outdoor Recreation
Department of the Interior
801 19th Street, N.W.
Washington, D.C. 20006

Children's Bureau
Office of Child Development
300 Independence Ave., S.W.
Washington, D.C. 20201

Center of Leisure Study
University of Oregon
1587 Agate Street
Eugene, Oregon 97403

The Council for Exceptional Children
Jefferson Plaza
Suite 900
Arlington, Virginia 22202
(703) 521-8820

Epilepsy Foundation of America
733 15th Street, N.W.
Suite 1116
Washington, D.C. 20005
(202) 638-4350

Girls Clubs of America, Inc.
133 East 62nd Street
New York, New York 10021

Girl Scouts of the United States of America
830 Third Avenue
New York, New York 10022
(212) 751-6930

National Association for Music Therapy
P.O. Box 610
Lawrence, Kansas 66044

National Easter Seal Society for Crippled Children and Adults
2023 West Ogden Avenue
Chicago, Illinois 60610

National Park Service
Department of the Interior
18th & C Streets, N.W.
Washington, D.C. 20009

National Recreation and Park Association
1601 North Kent Street
Arlington, Virginia 22209

New York University
Department of Physical Education, Health and Recreation
61 South Broadway
Washington Square
New York, New York 10003
II. Service Organizations and Agencies with Expressed Interest in Mental Retardation

American Legion
700 North Pennsylvania St.
Indianapolis, Indiana 46206
(317) 635-8411

Association of the Junior Leagues of America
825 Third Avenue
New York, New York 10022
(212) 355-4380

Big Brothers of America
341 Suburban Station Bldg.
Philadelphia, Pennsylvania 19103
(215) 567-2748

Camp Fire Girls
65 North Street
New York, New York 10013
(212) 925-1980

Civitan International
115 North 21st Street
Birmingham, Alabama 37203
(205) 324-7555

Division of 4-H Youth Development
Federal Extension Service
U.S. Department of Agriculture
Washington, D.C. 20250
(202) 388-5673

Gamma Sigma Sigma
399 Ocean Parkway
Brooklyn, New York 11218
Junior Clubwomen
General Federation of Women's Clubs
1734 N Street, N.W.
Washington, D.C. 20036
(202) 347-3168

Kiwanis International
101 East Erie Street
Chicago, Illinois 60611
(312) 943-2300

National Federation of Grandmothers Clubs of America
203 North Wabash Avenue
Chicago, Illinois 60601

National Rural Letter Carriers Association
1750 Pennsylvania Avenue, N.W.
Suite 1204
Washington, D.C. 20006
(202) 298-9260

United States Jaycees
Box 7
Tulsa, Oklahoma 74102
(918) 584-2481

Variety Clubs International
P.O. Box 1408
Crossroads Building
South Miami, Florida 33143

Zeta Tau Alpha
708 Church Street
Evanston, Illinois 60201
(312) 864-7695
APPENDIX E: FITZHUGH BOGGS AWARD IN RECREATION

The NARC Board of Directors has established two annual recreation awards in the name of Fitzhugh W. Boggs. The purpose of these awards is to give public recognition each year to: (1) the Local ARC Unit that has utilized the physical and professional resources of its community most effectively in fostering the development of recreative activities for mentally retarded persons; and (2) a non-ARC organization, agency or group that has made outstanding contributions toward the provision of recreational services for mentally retarded persons.

Who Is Eligible for Nomination:

Awards will be presented each year; i.e., one award will be given to a Local ARC Unit and other to a non-ARC organization or agency. In both cases, the awards will be presented to a unit or organization, not to an individual.

Former Fitzhugh Boggs Award winners will not be eligible for the award unless they have shown marked expansion or innovation in recreational activities during the specified period.

Who May Submit Nomination:

Local ARC Units are to be nominated by their State Associations. Therefore, Local Units should apprise their State Associations of new or innovative unit programs of which the State Unit may be unfamiliar. In no case will self-nomination be accepted by NARC.

Non-ARC organizations or agencies are to be nominated by Local ARC Units. However, a State Unit may also nominate a state level organization or group, if it so desires. Any type of organization or group, other than an ARC Unit, is potentially eligible for an award in this category.

Nomination forms will be mailed to State and Local Units in March. More than one nomination may be submitted by a given ARC Unit; however, the Unit should exercise discretion in selecting only those potential nominees that they feel are truly deserving of national recognition. If additional nomination forms are required, they may be obtained from the NARC Program Services Department, P.O. Box 6109, Arlington, Texas 76011.
NARC RECREATION COMMITTEE MEMBERS, 1973

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Department of Recreation Education
Cortland, New York 13045

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New Brunswick, New Jersey 08901

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