

Inclusive Physical Education Methodological Recommendations for Organizing Training Sessions for Children with Disabilities

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Received: 21 June 2025; **Accepted:** 17 July 2025; **Published:** 19 August 2025

Abstract: This article highlights the scientific and methodological foundations for organizing physical education sessions for children with disabilities in an inclusive education environment. The study analyzes pedagogical approaches, adapted programs, the individual characteristics of physical activity, safety measures, and mechanisms for socio-psychological support in this process.

Keywords: Inclusive physical education, children with disabilities, adapted exercises, pedagogical technologies, physical rehabilitation, social adaptation.

Introduction: In recent years, the development of inclusive education has become one of the priority directions of state policy in Uzbekistan's education system. This process is reinforced by the UN Convention on the Rights of Persons with Disabilities, the Law "On the Rights of Persons with Disabilities," as well as decrees and resolutions of the President of the Republic of Uzbekistan in the field of education. The main goal of inclusive education is to create equal educational opportunities for all children, including children with disabilities.

Physical education plays an invaluable role in shaping a healthy lifestyle for children, developing their motor activity, and ensuring social adaptation. For children with disabilities, it is not only a means of strengthening health but also a key factor in enhancing psychological stability, fostering a sense of belonging to society, and developing social communication skills.

The effective organization of inclusive physical education classes requires teachers to have a high level of pedagogical mastery, specialized methodological knowledge, an individualized approach, and the ability to develop adapted curricula. This is because children with disabilities differ significantly in their physical capabilities, motor activity, sensory functions, and levels of psychomotor development.

Moreover, the teacher's role in this process goes beyond teaching exercises. It also involves boosting the child's self-confidence, helping them find their place in

a group, and creating a positive emotional environment during physical education sessions. This, in turn, requires the collaborative efforts of teachers, special education specialists, physiotherapists, psychologists, and parents.

Thus, inclusive physical education for children with disabilities is not only a means of health improvement but also a highly relevant and essential pedagogical process that ensures their full integration into society [1,3].

Organizing inclusive physical education sessions for children with disabilities is one of the most pressing areas of modern education, based on the principles of social justice and equal opportunities. The aim of this process is not only physical development but also the formation of the child's personal qualities, social adaptation, psychological stability, and self-confidence. Therefore, the teacher's methodological preparedness, special knowledge, and skills are of crucial importance when planning and conducting such sessions.

The principle of differentiated instruction holds a central place in inclusive physical education. Each child's age, gender, health condition, physical preparedness, motor abilities, and psychomotor development level are carefully assessed. In this process, medical examination data, psychological diagnostics, and pedagogical observations are combined to develop an adapted training program. For example, for a child with limited mobility, static

exercises, breathing exercises, and coordination tasks may be introduced instead of dynamic exercises; for a child with hearing impairment, all instructions can be explained through visual cues and demonstrative examples [2,4].

Creating a positive psychological atmosphere is essential for effective classes. The teacher must ensure that the child feels valued, strives for success, and enjoys even small achievements. To achieve this, motivational techniques, positive reinforcement, peer assistance, and collaboration are encouraged. This not only supports physical development but also strengthens social adaptation.

Modern technologies create great opportunities in inclusive physical education. For example, digital tools that teach movements step-by-step through animated programs, virtual sports games, and sensory devices increase children's interest and help them perform exercises effectively. Adapted sports equipment—such as special chairs, hand supports, orthopedic devices, and safety belts—makes training safer and more comfortable [5].

The effectiveness of inclusive physical education depends not only on classroom activities but also on the continuity of exercises at home. Therefore, teachers work closely with parents, recommending adapted exercise sets that can be performed at home and providing practical guidance on correct execution. This continuity principle further strengthens the child's physical development.

In addition, during sessions, the child's individual response to physical load is regularly monitored. This monitoring can include indicators such as heart rate, breathing rate, fatigue level, and movement amplitude. Based on the results, the intensity and complexity of exercises are adjusted, preventing any negative consequences from overloading [6].

In general, inclusive physical education for children with disabilities is a complex yet effective system that combines pedagogical, psychological, and medical aspects. It not only strengthens the child's physical health but also prepares them for social life, increases their independence and self-awareness, and promotes a healthy lifestyle. This process can achieve maximum results only through the cooperation of teachers, medical professionals, psychologists, special educators, and parents.

CONCLUSION

The organization of inclusive physical education sessions for children with disabilities has a positive impact on their physical, psychological, and social development. Such classes serve not only as a means of

improving health but also as a way to adapt the child to society, increase self-confidence, and enhance social activity. Therefore, methodological recommendations developed through cooperation between teachers, medical professionals, and parents should be widely implemented in practice.

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