First-Person Accounts of the Impact of Leisure Spaces on the Mental Health and Well-being of Children with Disabilities in India.

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Abstract:

Internationally, child development practitioners are seeking to co-create meaningful leisure experiences that support the mental health of children with disabilities. However, in the Indian context, there is a dearth of research regarding this issue. The current study sought to understand the impact of Fun Club, an inclusive leisure space run by Ummeed Child Development Center, Mumbai, on the mental health and well-being of children with disabilities from the perspective of the children themselves. Twelve participants aged 8-12 years who had attended Fun Club were recruited for semi-structured interviews. Thematic analysis of data revealed three themes: A Space to be Myself, reflected participants' experience of feeling accepted in being themselves; Opportunities to Explore and Learn highlighted access to resources and new experiences that instilled a sense of confidence; and Being in a Community revealed how participants valued 'not feeling alone' in the community leisure experience. The study revealed the importance of creating leisure opportunities for children with disabilities in India that are child-centred and contribute to positive mental health. More broadly, the findings contribute to understandings from firstperson accounts of children with disabilities regarding what makes leisure experiences meaningful and how it contributes to mental health and well-being.

Keywords:

leisure, mental health, well-being, children with disabilities.

Introduction

Ummeed Child Development Center is a not-for-profit located in Mumbai, India that provides multi-disciplinary clinical services to children with disabilities.

After recognizing a lack of inclusive leisure spaces for children with disabilities,

in 2017, the organization started a leisure group for children with developmental disabilities called the 'Fun Club'.

Fun Club was informed by disability leisure (Aitchison, 2003), and sought to center voices of children to co-create leisure spaces; moving away from locating the problem of leisure participation in children's bodies and functioning, to critically engaging in thinking about inclusion, accessibility, and community. Research recognizes the importance of leisure opportunities and its impact on mental health and well-being of children with disabilities (Shikako-Thomas et al., 2012); however, leisure opportunities for children with disabilities that have primarily focused on keeping up with developmental goals and developing adaptable skills, negatively impacted their quality of life, brought in a sense of failure, and generated a non-inclusive environment (Kanagasabai et al., 2017). It is only in the recent 10 years that researchers have sought to explore what makes leisure meaningful for children with disabilities (Powrie, 2019).

In India, and other developing countries, leisure spaces are often unorganized for children with disabilities (Mehrotra, 2016). Further, in India, where the right to leisure for children with disabilities and its impact on their mental health has not yet been fully recognized, there is a marked absence of research that documents first-person accounts of what leisure means for children with disabilities. Hence, the current study interviewed children to answer the question, 'What is the impact of inclusive leisure spaces on the mental health of children with disabilities?'.

Frameworks that Guide Leisure Spaces

Researchers have conceptualized leisure in many ways but commonly acknowledge leisure as a 'subjective experience', a fundamental right. Majnemer et al. (2008, pp. 751-758) defined leisure as 'activities that individuals freely choose to participate in during their spare time because they find such activities enjoyable'. For children, leisure is viewed as activities or spaces accessible to them that are essential in developing cognitive skills, social competencies, and generate enjoyment, and relaxation (Simpkins et al., 2005).

The benefits of leisure and its contribution to health has been supported by the World Health Organization's International Classification of Disability which emphasizes the importance of the environment as enabling child's involvement in leisure opportunities. Despite disability leisure studies critically examining the environment, the problem gets located within the child as needing to build skills that enable them to be a part leisure spaces (Imms et al., 2008). More recently, researchers have focussed on 'disability-leisure', exploring environmental factors such as accessibility, accommodations, and availability that impact disability-leisure (Aitchison, 2003).

Hodge et al. (2013) offered the lens of 'internalized ableism', rooted in the notion that typical abilities are superior. They highlighted that leisure spaces structured from able-bodied frameworks negatively impact participation of children with disabilities and children view themselves as failures in their inability to participate. White (2002) referred to 'personal failure' as the failure of the systems around normativity that children with disabilities often internalize as personal failure and consider themselves responsible for being excluded from leisure activities. It is important for disability research to consider environmental factors that facilitate or challenge leisure and the impact of such leisure access on children's mental health and well-being.

Centering Voices of Children with Disabilities

Research around disability and leisure has increasingly recognized the importance of centering children as experts to define what leisure means to them (Melboe et al., 2017) which includes positive experiences of fun, being challenged and achieving, and sense of independence. Powrie et al. (2019, pp. 5) noted that children with physical disabilities experienced leisure as 'a sense of escape and relaxation – where worries were laid aside and children were free to be themselves without demands from others'.

The project, 'Hello! Are you listening?' revealed that for service providers, leisure is an opportunity to develop 'life skills', whereas for children and teenagers with disabilities it is less about 'getting it right' and more about having a good time (Murray, 2002). There is a dearth of literature around disability leisure in the Indian

context. In a large-scale study by Dada et al. (2020) to understand participation of children with intellectual disabilities in India and South Africa, children and caregivers were interviewed and significant differences in enjoyment were reported between the two. Dada et al. (2020) further noted that children with disabilities in India have access to leisure opportunities with immediate family/relatives but accessing community leisure happened less frequently. There is no known research that bring in voices of children with disabilities to understand their meaning-making of leisure. Hence, the current research sought to gather first-person accounts of children with disabilities to understand what leisure means to them and its impact on their mental health and well-being.

Methods

Ethical approval was granted from the institutional review board of Kasturba Hospital Research Society, Mumbai, India, September 2022 (IRB/07/2022). Once study intent was shared with participants and their questions answered, written informed consent was taken from families of the children and assent from the children (Neill, 2005) prior to the interview to participate and have interviews be digitally audio-recorded and transcribed. All data were anonymised to ensure privacy and stored on a password protected hard-disk.

Recruitment

Children aged 8-12 years who had attended Fun Club were invited to participate. Recruitment was through purposive sampling of children who had a diagnosis of one or more developmental disability and had attended at least 5 (online and/or offline) Fun Club sessions. Any child in direct contact with the researcher was excluded from participating to avoid bias. Flyers in Hindi and English were circulated among families of children who had been part of Fun Club. In total, 12 participants were recruited (see Table 1).

Table 1: Participant Demographics

	Gender	Diagnosis	Language of Interview
P1	Male	Autism Spectrum	Hindi
P2	Female	Cerebral Palsy	Hindi

Р3	Female	Learning Disability	Hindi
P4	Female	Autism Spectrum and Intellectual Disability Marathi	
P5	Male	Intellectual Disability	Hindi
P6	Female	Autism Spectrum	Marathi
P7	Female	Attention Deficit Hyperactivity Disorder and Learning Disability	English
Р8	Male	Intellectual Disability	Marathi
Р9	Male	Attention Deficit Hyperactivity Disorder and Speech Disorder	Marathi
P10	Male	Attention Deficit Hyperactivity Disorder	Hindi
P11	Male	Attention Deficit Hyperactivity Disorder and Oppositional Defiant Disorder	Hindi
P12	Male	Autism Spectrum	Hindi

Data Collection and Analysis

Interviews were conducted in Hindi (n=7), Marathi (n=4), and English (n=1) via Zoom. A semi-structured interview was guided by a pre-determined list of questions designed to be scaffolded and simplified to suit the need of the child; for example, 'Do you remember your favourite moment in the Fun Club and why was it your favourite moment?' or 'Could you share about times when you didn't like anything about Fun Club?'. Interviews lasted between 20 and 40 minutes.

Following the interview, recordings were transcribed verbatim and the transcribed interviews in Hindi (n=7) and Marathi (n=4) were translated to English by a professional translator and back translated by the first author. The back-translation process was an opportunity to engage with and become familiar with the data (Bird, 2005). Data analysis was completed in English and followed the 6 steps of thematic analysis (Braun & Clarke, 2006): familiarization with the data, generation of initial codes, searching for themes, reviewing potential themes, defining and naming themes, writing theme descriptions. Thematic analysis is a widely used qualitative analysis method applied in research where little is known about the phenomenon being studied (Bradshaw et al., 2017).

The transcripts were read line-by-line and each transcribed line and identified codes were documented on a coding template alongside researcher interpretations of the codes. An example of the coding process can be seen in Table 2.

Table 2: Coding Process

Transcript	Codes	Categories	Themes and subthemes
I: You said it's nice at the Fun Club because you can be yourself. Can you tell me in what ways can you be yourself in the Fun Club? What does that look like?	can be yourself	Being my weird self	A Space to be Myself
P7: You can really be yourself in Fun Club and don't need to worry about people judging you. You can do any weird thing you want to. You can do anything you want.	no worry about being judged	No worry of being judged	Exploring Activities in Preferred ways
	can do any weird thing	Freedom to do anything	
	can do what you want		
The best activity from fun club was t-shirt painting, I did it for the first time. The art I drew in that t-shirt was a big achievement for me. I feel like I can do t-shirt painting again.	did t-shirt painting for the first time	Explored a new experience	Opportunities to Explore and Learn Engage in Newer Leisure Experience
	Felt like a big achievement	Felt like it was a big achievement	
	Can do t-shirt painting again	Confidence to do the same	

Further analysis revealed that some categories could be merged; for instance, sub-themes Engaging with New Leisure Experiences and Access to Resources were combined to form the theme Opportunities to Explore and Learn. Through the data analysis process, three final themes were generated.

Trustworthiness

Trustworthiness was achieved by ensuring the confirmability, transferability, and rigor of the study methodology (Amankwaa, 2016). Provisional findings were shared with Fun Club facilitators who agreed that the results were reflective of

their observations of children's participation. By providing a thorough explanation of the study context and participants' demographics, transferability has been enhanced. Undertaking translation and back-translation of interviews in Hindi and Marathi retained the meaning of experience provided by participants; thus enhancing study rigor.

Results

'I would attend Fun Club everyday if I could. My world would look full of fun and I won't feel depressed or anxious, would never lose my confidence. I will enjoy in such a world' (P7).

Fun Club supports mental health and well-being of children with disabilities by offering 'A Space to be Myself', a non-judgemental environment wherein they could access Opportunities to Explore and Learn leisure skills in ways that were preferred for them, while Being in a Community with other children with disabilities. P1 commented 'If everyone can be part of Fun Club, they can live a life of fun. And when people can have fun, they are able to live long, like even 200 years'. Fun Club offered participants a space to explore collective leisure in their preferred ways where they could be themselves. Doing so, fostered a sense of safety, agency, and mental well-being.

A Space to be Myself

This first theme encapsulates participants' experiences of being able to be themselves, feel safe in their explorations, and not be judged for their preferred ways of engaging with the Fun Club space. For all participants, *A Space to be Myself* meant accessing a space away from normative, able-bodied understandings of how they should perform leisure activities. This was illustrated through participants taking their time to finish an activity, adaptations made to activities and Fun Club being facilitated as per participants' needs.

In Fun Club, when I am drawing, they let me continue what I'm doing and don't ask too many questions. At home and school, they tell me,

'How can you only like to draw? Don't you like doing something else?' I don't like it. I love to draw all the time. (P5)

Participants mentioned not feeling judged; instead, they felt respected, heard, and seen for their individual disabled selves in the Fun Club space. For participants, this space to be themselves facilitated a non-competitive, stress-free environment that fostered a sense of relaxation and confidence to be able to unmask and redefine leisure for themselves. 'You can be yourself in fun club and don't need to worry about people judging you. You can do any weird thing you want to. You can do anything you want' (P7). A Space to be Myself facilitated for participants two subthemes: the ability to Explore Activities in Preferred Ways and have the agency and Choice to Socialize.

Explore Activities in Preferred Ways

This subtheme captures how Fun Club allowed for participants to explore activities in ways that were accommodating of their disability. 'My favourite moment is to doodle/scribble on a whiteboard outside of the fun club room. There are lesser kids around and it is quieter. It is good because I like the quiet. And I can do whatever I want' (P8). This invitation to rethink their version of leisure for themselves, made participants feel a sense of agency, think creatively, and advocate for their needs; as opposed to subscribing to able-bodied understandings of how leisure should be performed.

- P3: Haha, she always does funny drawings.
- P2: Yes, I draw blue fruits or green sky.
- I: That's so amazing, I've never thought of them this way! What made you think about fruits and sky so creatively?
- P2: Just like that.

In the Fun Club, participants were trusted as experts and were given agency and freedom by the facilitators to explore activities in ways that were meaningful for them. Further, participants valued that they were not pushed, their pace was respected, and they could create their own versions of the leisure activities. P4 commented, 'liked doing the dinosaur puzzle alone and that's the only thing I do.

I like that no one stops me or forces me to do some other activity because I only like puzzles.'

Choice to Socialize

The subtheme Choice to Socialize captures participants' choice to make friends with other Fun Club members or not, and still be able to participate in the collective leisure experience. For children with disabilities, being able to assert the choice to socialize and make friends rejects the notion that one must develop social skills and understand social rules to access the Fun Club.

I: What was it like making friends at Fun Club?

P4: I did not make friends in Fun Club.

I: Is that something that you chose or was it difficult to make friends in Fun Club?

P4: No, I did not want any friends. Playing with others was really fun but I didn't want to make friends.

Some participants pointed out initial apprehensions around developing social skills as a requisite to be a part of Fun Club. Over time, participants felt a sense of relief, were able to be themselves and know that they did to have to interact or exhibit social skills to be accepted as part of leisure experiences.

You can make friends in Fun Club if you want to. I am a shy person but wanted to make friends and Prachi didi helped me make friends. I thought it makes me weird that sometimes I want to play alone and other times I want to make friends. But I did make friends. I haven't met my Fun Club friends for many days and I miss them. (P9)

Having the choice to socialize was important to many neurodivergent participants who had been part of other leisure and expressed how they felt pressurized to make friends, pick up social cues, and mask because of not feeling safe in social situations. One participant particularly referred to the feeling of relief at being able to unmask in the Fun Club space; that is, not concealing or suppressing their neurodivergent traits to fit into able-bodied norms. Instead, Fun Club enabled a sense of agency to redefine interactions and friendships. 'I made friends in

Fun Club. One of them is P, I would miss him when he didn't come in any of the sessions. I missed him because I felt okay around him. We took turns to play our favourite games' (P12).

Opportunities to Explore and Learn

The second theme *Opportunities to Explore and Learn* captures participants' experiences around looking forward to the varied, novel opportunities that were available in the Fun Club. P12 commented, 'There was so much to do. Every Saturday, there would be a different activity. I would look forward to knowing what topic in a particular week is'. Fun Club consisted of 5 leisure corners which gave participants access to art and craft, books, games, movies, a 'chill' or donothing corner.

I: What are these corners at Fun Club? Could you tell me more about them?

P11: Like art corner, books corner, board-games corner or nap corner.

I: Do you have a favourite of them all?

P11: I like the bean-bag corner! We would sometimes free-fall on the bean-bag or blue mat.

Thus, Fun Club meant a break from competitive environments or goal-directed intervention and an opportunity for participants to engage in their favourite hobbies, explore a new activity, or learn a skill that felt easier to access. 'The moments that were special to me was when I would make something new that I had never done before. Like crafts or t-shirt painting. I liked looking at the pictures in the books too' (P2). Participants exuded a sense of joy, confidence and excitement in anticipation of variety of opportunities and looked forward to more such experiences.

Access to Resources

The subtheme *Access to Resources* captures participants' experiences of accessing disability-inclusive resources such as toys, art-kits, books and movies that are otherwise not available for children with disabilities in their everyday

lives. Disability-inclusive resources are designed, modified, or adapted to accommodate the motor, cognitive, social needs of children with disabilities.

There was like one activity in offline Fun Club that we had to make something out of wool. And I was like I've never done anything out of wool so I didn't know much of it. So, in the start I was pretty much shy, while doing it and then I started doing it and then it was like, oh my god I'll make more of these! Then in the next Fun Club, I brought more wool from Fun Club didis (facilitators) just to make them. I still have some remaining from them. (P7)

Participants mentioned that *Access to Resources* became limited during the online Fun Club sessions, contributing to a sense of boredom, frustration, and disengagement with online Fun Clubs. Since the Fun Club space is accessed by many children with disabilities who belong to low socio-economic status, *Access to Resources* brought in joy, engagement, and initiation to explore leisure skills.

Participants further mentioned that they were able to take the resources with them and explore leisure skills at home and in other settings, which helped them continue to engage with their interests from the Fun Club. P5 commented, 'I would draw a lot but started colouring after Fun Club. I started because I liked colouring a lot. These colours we got from Fun Club are really nice'.

Engaging with New Leisure Experiences

In Engaging with New Leisure Experiences participants had opportunities to explore new leisure skills and experiences that offered excitement, built confidence, and made it possible for them to look forward to trying more unfamiliar experiences. In participants' exploration of newer leisure experiences, despite their initial apprehension, they were able to ease into the experience with encouragement from facilitators and peers and through breaking the activity down into simpler, accessible steps; thus, enabling a sense of confidence and achievement.

Even if they show us a new game, I know I will feel confident and do it very nicely. In the beginning, I am usually shy but once I know how to

play, I'll feel quite confident on doing it again. My friends, didis also help in overcoming the shyness and encourage to try something new. (P9)

Engaging with New Leisure Experiences such as collective book reading, t-shirt painting, no-gas cooking, participants experienced a sense of achievement, as P6 shared, 'The best activity from Fun Club was t-shirt painting, I did it for the first time. The art I drew in that t-shirt was a big achievement for me because it was the first time I did something so amazing'.

Being in a Community

This third theme highlights the importance of a community leisure experience that Fun Club established for the participants. *Being in a Community* alongside their fellow peers with disabilities was important for the children to experience a sense 'not being alone', which is important for positive mental health and wellbeing. P8 shared, 'I like stepping out of house only for Fun Club. ... Because there are other special children like me in Fun Club. And I can meet them'. Participants associated the Fun Club space with doing varied activities and performing leisure in the company of fellow children with disabilities. 'Fun Club is a place to play, draw, eat special foods, chat a lot with each other, watch movies together, doing things together' (P3).

Being able to experience leisure activities together, meet and 'shake hands', generated a sense of looking forward to seeing each other, experiencing collective joy and witnessing each other's journey of leisure in the Fun Club space. Many participants appreciated not feeling 'alone': 'I like being around my friends in Fun Club. They make me feel like I am not alone' (P12). 'I do not like playing alone so it was good to play with others' (P6). Being in a Community captures two subthemes – Need for a Physical Contact and Doing Things Together.

Need for Physical Contact

Initially, Fun Club was offered as a physical, in-person space in the premises of Ummeed Child Development Center. This physical space had to be temporarily discontinued owing to COVID-19 restrictions and the Fun Club leisure space

was reconfigured to be offered through an online medium. While participants appreciated having continued access to Fun Club, they waited to get back to the physical space, meet each other and 'shake hands' — 'I had more fun attending offline Fun Club. Going to Ummeed (for Fun Club) was good because I could meet everyone, shake hands with my friends' (PI). The online medium and internet glitches meant that some participants missed being able to connect with their friends and peers, felt isolated and caused irritability and frustration.

I have attended both online and offline Fun Clubs and I like offline Fun Clubs better. I remember during online Fun Clubs, it was only about sitting at one place and playing the activity online. There was no way to talk to other Fun Club people and I would often log off early because of not being able to interact with anyone. (P10)

With Fun Club resuming in the physical space post COVID-19, participants looked forward to meeting their friends from Fun Club and being in their company.

Doing Things Together

Doing Things Together emerged as something that the participants looked forward to; a collective experience. While many participants appreciated that Fun Club was accommodating of their individual needs, they also viewed Fun Club as a space that helped them navigate isolation and brought them together through varied leisure experiences – laughing, eating, watching movies or dancing together. Being able to do things together did not necessarily mean interacting with each other but it was important to participants that they were in the company of each other, which contributed to their sense of wellbeing in their leisure experience.

I: Do you talk to other people at Fun Club or not really?

P11: I don't talk much to other people at Fun Club. But I don't mind doing art with them. I quite like it.

In addition, doing activities together helped many participants feel comfortable in an experience they otherwise would not have felt comfort in.

When I see my brother dance or everyone dance, I dance and I have fun. I don't like doing it alone or with friends I don't feel comfortable with. That's also a little something that helps me feel more comfortable being a part of Fun Club. (P10)

Thus, collective experiences in the Fun Club space contributed to participants' sense of comfort and safety, encouraged ways of expressing themselves, and enhanced their mental health and well-being.

Discussion

The current study sought to uncover the ways in which Fun Club supports the mental health and well-being of children with developmental disabilities. Fun Club is an open space that invites children to engage in fun and leisure activities at their own pace with the support and encouragement of adult facilitators. Access to opportunities and resources is particularly important to address in a low-middle income country like India, where only 24% of children with disabilities are reported to participate in leisure (Hannah, 2023). Reasons associated with low rates of participation include inaccessible environments and inadequate support. The findings from the current study add to the understandings around disability leisure through children's first-person accounts in the Indian context and how leisure supports their mental health and well-being.

Children appreciated A Space to be Myself in the Fun Club space that contributed to them not feeling judged, while engaged in leisure activities in preferred ways. A Space to be Myself echoes disability leisure defined by Aitchison (2003) and demonstrated by Hodge (2013) who have argued that leisure spaces that require children with disabilities to pass as 'normal enough' to gain access, negatively impacts their well-being. In contrast, children shared that at Fun Club, they could feel free, be their 'weird' selves and not worry about being judged; suggesting that children could be themselves and feel accepted for who they are. In the Indian context, Dutta et al. (2020) theorized that inclusive leisure spaces for children with disabilities is dependent on external factors such as supportpeople and choices. The current study revealed that the Fun Club facilitators were instrumental in creating a space for children to be themselves and have freedom to make choices; thus, redefining the leisure space.

Meaningful leisure opportunities have been shown to be important for children with disabilities (Longo et al., 2020). Opportunities to Explore and Learn encompassed children's experience of accessing new leisure experiences and resources that enabled a sense of confidence to pursue leisure skills both in Fun Club and at home. In the current study, participants reflected that the novel opportunities to leisure and access to resources that were otherwise not available in their everyday lives, along with support from facilitators, enabled them to explore, initiate, and practice leisure. Hynes (2012) called this a positive leisure experience wherein children feel supported by adaptations to resources, space, motivation and encouragement from peers and adults to try new activities. In the Indian context, a recent study by Heister (2023) noted an urgent need for leisure opportunities in the community that are adapted to enable access without barriers; lack of the same has led to children with disabilities feeling incompetent to pursue leisure. In Fun Club, having access to resources to pursue leisure, looking forward to new experiences, and being encouraged by peers and facilitators, contributed to children's mental health and well-being.

Children from Fun Club shared that *Being in a Community* alongside their peers with disabilities and friends was meaningful while pursuing leisure activities and made them feel 'not alone'. A recent study by Movahed (2023) found that in the context of the COVID-19 pandemic, which prevented children with disabilities from participating in in-person activities, web-based programs offered a safe, accessible option. While study by Movahed et al. (2023) established that online access to leisure was important to address children's in-access to in-person activities, the same was not seen for Fun Club online sessions. Instead, Powrie et al. (2019) contended that leisure was most valuable when undertaken in the company of other children and there was a sense of togetherness, a finding that supports why children in the current study explicitly mentioned preferring offline over online Fun Club sessions which failed to bring a feeling of community and, instead, left them feeling isolated and frustrated at not having contact with each other.

Adsul (2011), in their observation of community leisure spaces for children with disabilities in India, highlighted a lack of inclusive leisure spaces resulting in children with disabilities having confined social relationships, not feeling

welcome. Children who attend Fun Club reported feelings of isolation in their everyday lives in being part of systems that promoted cure, rehabilitation in their disability experience and in keeping up with their non-disabled counterparts. The collective Fun Club leisure space thus, enabled access to a community of other peers with disabilities, enabled stress-free environment to be in their individual selves.

The first-person accounts by children with disabilities from the Fun Club space demonstrate how a space to be themselves, access to opportunities that facilitate exploration and learning, and being part of a community leisure experience contribute to inclusive leisure spaces and support their mental health and well-being.

Study Limitations

The participants were all children with disabilities who are verbal; no non-verbal children with disabilities accessing the Fun Club space were recruited to the study. While Fun Club extends the leisure space for younger children from ages 4 to 8 years, these children were not included in the current study. Further, participants did not report any negative experiences. The researcher is also a professional at Ummeed and the dual role may have hindered children sharing freely and interfered with safety to express difficult experiences attending Fun Club.

Recommendations and Implications

The present study is set in urban India where access to resources, spaces are relatively easier compared to rural India; exploring leisure experience for children with disabilities in rural India could further illuminate perspectives around structural barriers, meaningful leisure for children with disabilities. Other demographic factors that may influence participation in leisure experiences, including socio-economic conditions of child's family, caste, region, gender, motor disabilities or chronic illnesses would be worthy of exploration.

Drawing from the social model of disability, professionals can promote the importance of leisure participation for children with disabilities by modifying

supports and barriers in the environment to enable participation (Espin-Tello & Colver, 2017). This may include improving the quality of accommodations – infrastructure, resources, support and consulting children with disabilities to understand how leisure can be meaningful for them (Asbjornslett & Hemmingsson, 2008). The collaborative process could enable children to advocate for their needs and feel confident in their explorations.

Working with family systems, therapy or school systems, neighbourhoods to include leisure as an integral component in everyday life of children with disabilities is necessary. Supporting school systems to evaluate priorities and build awareness on the importance of leisure to support mental health and well-being of children with disabilities, may result in change of attitudes and institutional processes to support inclusive leisure.

Summary

Creating inclusive spaces have been shown to improve the mental health and well-being of children with disabilities (Imms et al., 2016). The current study contributes to co-building leisure spaces for children with disabilities in the Indian context by centering the importance of a safe space for children to be themselves, offering opportunities to explore and learn, and a sense of community to positively impact their mental health and well-being. There is a growing need to include children with disabilities in creating leisure spaces and for disability professionals to attune themselves to meanings children with disabilities can bring to shape leisure experiences.

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