Annual Disabilityand Activity Survey2020-21

Summary report February 2021



disability inclusion sport



Contents

4 - 8

9 - 13

14 - 42

43 - 51



Foreword



The Annual Disability and Activity Survey was launched in 2019 to provide a greater understanding about disabled people's attitudes towards and involvement in sport and physical activity. In its second year, the survey will play a crucial role. It helps to uncover the impact of the coronavirus (COVID-19) pandemic on disabled people's motivations and ability to be active.

The findings are worrying, especially as we were beginning to see positive progress in recent years. The fairness gap between disabled and non-disabled people's activity levels was beginning to decrease. Disabled people were feeling more optimistic about being active, and activity levels were increasing. However, the pandemic and the associated restrictions has stalled, if not reversed, that progress.

Disabled people are being disproportionately affected by the pandemic across many aspects of their lives and this shows in this year's results. This is having a negative impact on opportunities to be active, increasing the barriers that disabled people face in taking part in sport and activity. It must also be recognised that 2020 has been an incredibly challenging time for the sports sector and activity providers, and that many of these difficulties will have an ongoing impact on future planning and delivery. We must be hopeful that we can reset, with a positive outlook. We know there have been many examples of inclusive practice and delivery during the crisis. In this report, we outline five recommendations to help organisations to develop positive solutions to support more disabled people to access the benefits of physical activity in the future.

We need a strong response to minimise the long-term implications of the pandemic and to prevent the fairness gap from widening further. Activity Alliance cannot do this alone. This is why our strategic direction, to be released in the coming months, is clear. We want to grow a movement that is about collaboration as much as co-production with disabled people themselves.

My greatest fear is that those involved in sport and leisure do not maximise the opportunities to change their practices as restrictions ease. The barriers that existed before created an unjust and unfair society for disabled people in sport and leisure. We cannot be complacent and continue as before. Everyone has a role to play in reducing these inequalities. We look forward to working with more organisations to shape a positive future for disabled people.

Barry Horne

Chief Executive, Activity Alliance





Before COVID-19, inactivity levels among disabled people were decreasing and perceptions were improving



- This summary report outlines key findings from Activity Alliance's second Annual Disability and Activity Survey. Almost 2,000 disabled and non-disabled people completed the online survey from June to September 2020.
- This study shows that before the COVID-19 outbreak:
 - Fewer disabled people were inactive:

Only 1 in 3 (34%) being inactive rather than 2 in 5 (41%) in the previous year.

• Disabled people were more likely to feel they had the opportunity to be as physically active as they wanted to be:

This increased from 2 in 5 (40%) in 2019/20 to almost 3 in 5 (58%) this year.

- The proportion of disabled people who felt that their impairment affected their ability to be active 'a lot' significantly decreased.
- Disabled people were more likely to agree 'physical activity and exercise is for people like them'.
- The extent to which disabled people saw their long-term health condition as a barrier to physical activity significantly reduced.
- These findings suggest strategies and interventions that were supporting disabled people to be active were making a difference.



- Our Annual Disability and Activity Survey shows COVID-19 is having a significant impact on disabled people, their lives and their ability to be active:
 - Disabled people are more likely to feel that the pandemic reduced their opportunities and ability to be active in many types of activity compared to non-disabled people.
 - The pandemic has presented disabled people with new barriers to being active. These include self-isolating, the fear of contracting the virus, the impact on health, and concerns about social distancing. Disabled people are also more affected by a lack of space at home and a lack of support.
 - In addition, disabled people are more likely to feel that they had not received enough information about how to be active during the pandemic.
- The survey also showed that the pandemic is having an impact on disabled people's perception of the future:
 - Disabled people were more concerned about getting back to normal and a second wave.
 - They were also significantly more pessimistic about the future.

The findings of the survey were mirrored in the most recent Sport England's Active Lives data release



- The <u>Active Lives data release in October 2020</u> showed a 3.1% increase in the proportion of disabled people classed as active (150+ minutes a week) since 2017. This equates to 366,200 more disabled people being active regularly.
- However, COVID-19 and the associated restriction measures have significantly impacted activity figures for the overall year. During the March-May lockdown period, the proportion of active disabled adults significantly decreased.
- Our Annual Disability and Activity Survey 2020/21 reflects the trends seen in Active Lives and gives a deeper understanding of disabled people's experiences of sport and physical activity.
- Both studies shows a positive trend in attitudes toward and levels of physical activity for disabled people before the pandemic. However, they also both show a worrying downturn after the start of the pandemic.

In response to the findings, Activity Alliance has identified five recommendations to minimise the impact of COVID-19



We know that the sports and physical activity sector is experiencing unprecedented challenges. However, it is important that disabled people are still supported to be as active as they want to be. We must ensure that inclusive practice and the needs of disabled people are part of the response to the crisis.

Activity Alliance has identified five recommendations with action points to minimise the long-term impact of COVID-19 on disabled people's activity levels. These will help to continue the positive progress that was being made toward reducing the fairness gap between disabled and non-disabled people's activity levels.

- 1. Provide clear and consistent information about being active
- 2. Embed inclusive practice into opportunities as they recover
- 3. Work collaboratively to address new challenges arising from COVID-19
- 4. Offer a variety of ways to be active
- 5. Change attitudes towards disabled people in sport and activity

More information and guidance on how to apply these recommendations in your work is available on pages 46-51 in this report.

2. Introduction

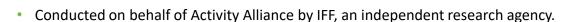
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Introduction



- This is the second year of our <u>Annual Disability and Activity Survey</u>. This study is designed to track key changes in disabled people's perceptions and experiences of sport and physical activity across years.
- The survey is intended to complement <u>Sport England's Active Lives Adult Survey</u> which is the authoritative source of data on activity levels and participation.
- The Annual Disability and Activity Survey provides a further level of understanding of the activity levels of disabled people. Its aim is to provide robust insight for Activity Alliance and other stakeholders to develop support and guidance for disabled people which will reduce the activity gap between disabled people and non-disabled people's activity levels.
- In order to understand the impact of coronavirus (COVID-19) on disabled people's lives and activity levels
 additional questions were added to this survey. In some cases, respondents were asked to think about their
 experiences before the pandemic, and to consider their current experiences during the pandemic. This enabled
 us to compare differences in people's perceptions and experiences from 2019, in 2020 before the COVID-19
 pandemic, and in 2020 during the COVID-19 pandemic.
- This is a summary report that shows the key findings, based on statistically significant differences in the data. A more detailed report is available on our website.

Method and sample



- A 20-minute online survey (including an easy read version).
- Two sample sources were used. People who had completed Sport England's Active Lives Survey (from May 2018 to May 2020) and agreed to take part in further research, and people who were part of an independent research panel.

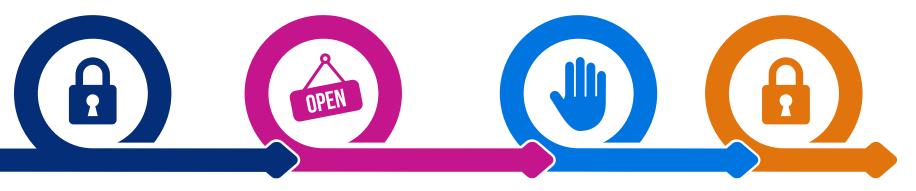
Table 1: Number of disabled and non-disabled people who took part in the 2019/20 and 2020/21 survey.

	2019/20 survey	2020/21 survey
Disabled people	1182	1023
Non-disabled people	1136	957
Total	2318	1980

- Weighting has not been applied to the data as the sample was representative of the UK profile of disabled people across key demographics (age, gender, region and ethnicity). The demographic groups were largely consistent with the 2019/20 survey, except that the age and ethnicity profiles are closer to the UK population profiles.
- The demographic make up of the sample in terms of impairment type and severity was comparable across the two years of data.

COVID-19: key events in sport and physical activity

Fieldwork took place during June to September 2020 (phase 2 of the pandemic) when lockdown restrictions were being eased. Some questions asked participants about their experience prior to the pandemic and some asked about their current experience.



Phase 1:

Mid-March to mid-May Full lockdown

- People told to 'stay home' with meetings of more than two people outside banned. Those at-risk asked to shield.
- Indoor and outdoor sports facilities closed.
- Activities restricted mainly walking, cycling, running, and informal activities.

Phase 2: Mid-May to mid-September Easing restrictions

- Advice changes to 'stay alert' with measures easing. Shielding advice lifted on 1 August.
 Some local restrictions remain.
 Some outdoor activities return, such as golf and water sports.
- From the end of July, gyms, pools, and leisure centres reopen while team sports resumed.

Phase 3:

Mid-September to end of October New restrictions

- Infection rates rise with tighter restrictions and a tiered system introduced on a local basis.
- Restrictions on indoor team sports reintroduced along with rule of six.

Phase 4:

November to December A second full lockdown

- A four-week national lockdown began on 5 November.
- All sports facilities closed, shielding advice reintroduced, and outdoor gatherings of more than two people banned.

Definitions and notes on understanding the data

The following definitions and notes will assist you in understanding the research findings and how activity levels are calculated in this survey.

Disability: is defined as anyone that has a long-term health condition, impairment, or illness that has a substantial effect on ability to do normal daily activities. This included physical, sensory, learning, social, behavioural or mental health conditions or impairments that have lasted, or are expected to last 12 months or more.

Activity: is defined as the number of days in a normal week people did 30 minutes or more of physical activity that was enough to raise their breathing rate. Physical activity includes sport, exercise and brisk walking or cycling for fun, or to get to and from places. It does not include housework or physical activity that is part of work.

This survey uses the following activity level groupings:

- Inactive: person does less than a total of 30 minutes physical activity in a week.
- Fairly active: person does 30 minutes or more physical activity on one to four days in a week.
- Active: person does 30 minutes or more physical activity on at least five days in a normal week.

To ensure accessibility, the question we used to capture activity levels is a simpler version of the Sport England's Active Lives Adult survey question. Active Lives survey records all activity done in the last four weeks and includes a vigorous activity category. Our survey question asks on how many days a person does 30 minutes or more activity in a normal week, rather than the exact number of minutes. This means more people are classed as 'fairly active' and fewer people are classed as 'active' in our survey compared to Active Lives survey.



Arrows represent significant changes across years of the survey within a group.



Asterisks represent significant changes between disabled people and non-disabled people each year.

Differences are statistically significant if at the 95% confidence level. This means there is less than a 5% chance that reported differences are a consequence of sampling error.

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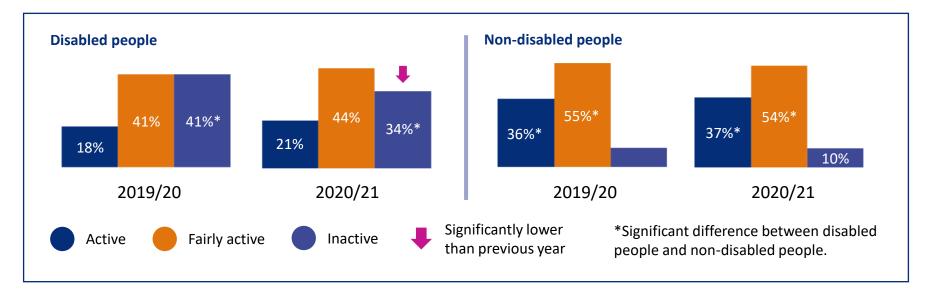
3. Key findings Disabled people's experience and attitudes towards physical activity before the COVID-19 pandemic

Before COVID-19: The proportion of disabled people who were inactive significantly decreased compared to 2019/20

When asked about their activity levels before the coronavirus outbreak, disabled people were significantly less likely to be inactive compared to the 2019/20 survey.

Figure 1 (before COVID-19)

Overall activity levels for disabled and non-disabled people in 2019/20 and 2020/21 prior to the coronavirus outbreak (activity levels defined by number of minutes per week spent being active).



Q: Before the coronavirus outbreak, in a normal week, on how many days did you do a total of 30 minutes or more of physical activity that is enough to raise your breathing rate? Base: All people that reported their activity levels.

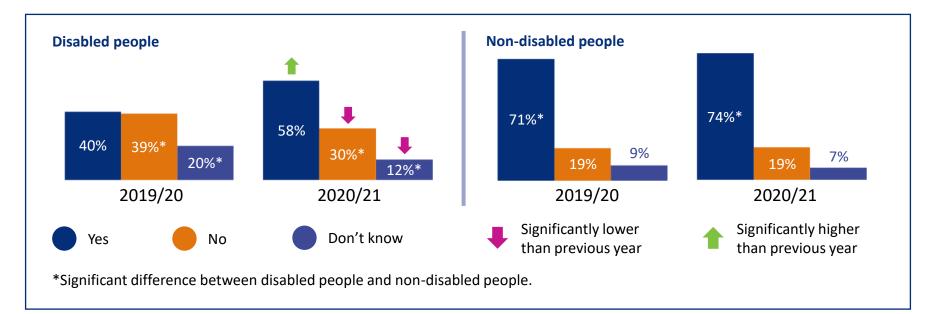
Please refer to page 13 for more information on how activity levels were calculated in this survey.

Before COVID-19: Disabled people were more likely to feel they had the opportunity to be active

Before the coronavirus outbreak, disabled people were more likely to feel they had the opportunity to be as active as they wanted to be compared to the previous year. This increase was not observed in non-disabled people.

Figure 2 (before COVID-19)

Proportion of disabled and non-disabled people who felt they were given the opportunity to be as active as they wanted to be before the COVID-19 outbreak and in 2019/20.



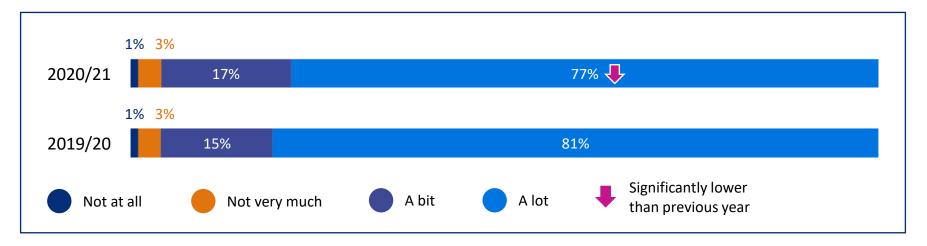
Q: Do you feel that you were given the opportunity to be as physically active as you want to be at the moment (2019/20) / before the COVID-19 outbreak (2020/21)? Base: All disabled and non-disabled people.

Disabled people were less likely to feel their health condition, impairment or illness impacted their ability to be active 'a lot'

The increased activity levels and sense of opportunity to be active could also be driven by a decrease in the proportion of disabled people who feel their impairment affects their ability to be active.

Figure 3

Extent to which disabled people feel their health conditions, impairments or illnesses affect them doing sport or physical activity in 2019/20 and 2020/21.



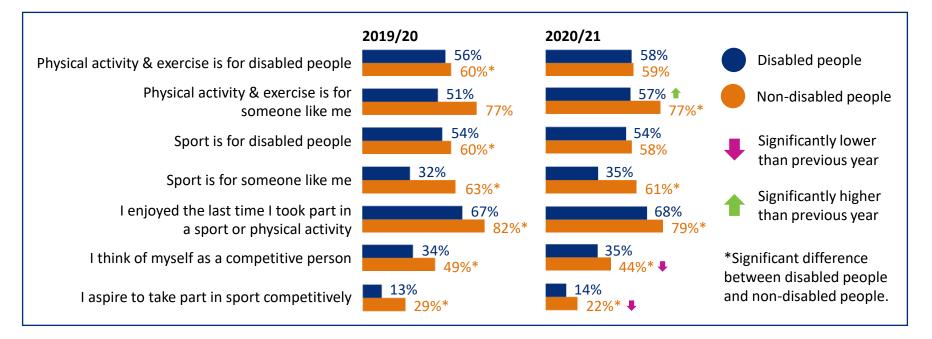
Q: How much do your health conditions, impairments or illnesses affect you doing sport or physical activity (if you wanted to)? Base: All disabled people.

Before COVID-19: The gap between disabled and non-disabled people's perceptions has slightly narrowed

There was a significant increase in the proportion of disabled people who felt 'physical activity and exercise is for someone like me'. While this is positive, the differences that remain between disabled and non-disabled people on all statements indicate ongoing challenges in tackling perceptions.

Figure 4 (before COVID-19)

Proportion of disabled and non-disabled people who agree with each statement.



Q: How much do you agree or disagree with the following comments about sport and physical activity? Please consider these statements without thinking about coronavirus (COVID-19). Base: All disabled and non-disabled people.

The top 5 motivations for being active stayed the same for disabled and non-disabled people



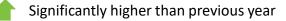
Table 2: Proportion selecting as motivation to be active (top five motivations).

	Disabled people		Non-disabled people	
	2019/20	2020/21	2019/20	2020/21
1. To improve physical health	70%	67%	70%	70%
2. To lose / maintain weight	54%	53%	57%	54%
3. To get fit	45%	44%	64%*	61%*
4. To improve mental health	44%	47%	52%*	56%*
5. To feel good about myself	37%	40%	55%*	54%*

Disabled people were significantly more likely to be motivated to take part to relax, to have something to do, and to socialise with friends than in 2019/20.

Table 3: Proportion selecting as motivation to be active (motivations that have changed since 2019/20).

	Disabled people		Non-disabled people	
	2019/20	2020/21	2019/20	2020/21
To relax	23%	28% 🕇	37%*	39%*
To give me something to do	17%	23% 🕇	25%*	27%*
To socialise with friends	13%	19% 🕇	24%*	24%*



*Significant difference between disabled people and non-disabled people.

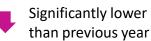
Q: Why do you/would you take part in sport, exercise or other physical activity? Base: All disabled and non-disabled people. Only the top motivations and motivations that have changed are shown on this slide. Data on other motivations can be found in the full report.

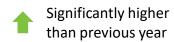
Before COVID-19: The extent disabled people saw their health condition as a barrier to activity significantly reduced

- Alongside their health condition, disabled people were less likely to view finances and lack of money as a barrier to being more active in the period before coronavirus.
- Both disabled and non-disabled people were more likely to view lack of motivation as a barrier. Though this question asked people to think retrospectively about the barriers to being active, their experience of the pandemic may have affected their response.

Table 4 (before COVID-19): Proportion of people selecting each barrier that has increased or decreased since 2019/20.

Disabled people	2019/20	2020/21
Long-term health condition	84%*	77% 🖊
General lack of motivation	25%	30% 懀
Finances / lack of money	22%	16% 🖊





Non-disabled people	2019/20	2020/21
General lack of motivation	36%*	42%* 🕇
Work commitments	37%*	30%* 🦊
Family commitments	29%*	20%* 🖊
Getting older	21%	15% 🖊
Finances / lack of money	19%	13% 🖊

*Significant difference between disabled people and non-disabled people.

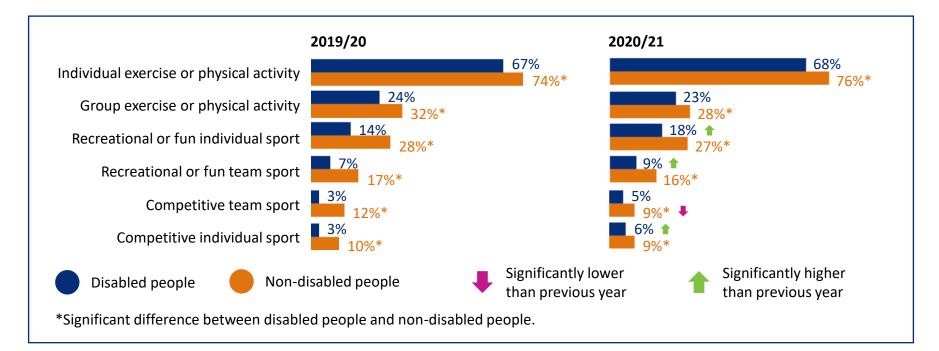
Q: Which of the following reasons stop you doing as much sport, exercise or physical activity as you would like? Please consider what prevents you from taking part in exercise under normal circumstances, so prior to the coronavirus (COVID-19) outbreak. Base: All disabled and non-disabled people who would like to do more physical activity. Only the top barriers that have changed are shown on this slide. Data on other barriers can be found in the full report.

Before COVID-19: Although taking part in individual activity remains the preference, participation in recreational/fun and competitive sport has increased for disabled people

More disabled people are taking part in recreational/fun and competitive activities. These are traditionally considered to be more challenging for disabled people to access.

Figure 5 (before COVID-19)

Types of sport, exercise or other physical activity taken part in before the pandemic.



Q: Which of the following describe how you take part in sport, exercise or other physical activity? Please consider your activities before the coronavirus (COVID-19) outbreak. Base: All respondents that take part in physical activity.

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3. Key findings Impact of the COVID-19 pandemic on disabled people's ability to be active

COVID-19 is having a disproportionate impact on disabled people's health, lifestyles and wellbeing

Many other studies evidence the overall impact that COVID-19 has on disabled people:

- Disabled people are more likely to die from coronavirus than non-disabled people. Data from the <u>Office for National Statistics (ONS)</u> showed that disabled people accounted for almost 6 in 10 of coronavirus deaths by July.
- The <u>ONS</u> also shows COVID-19 is having a more negative impact on disabled people's wellbeing, health and relationships. They are more likely to be shielding, and to feel uncomfortable leaving their home.
- <u>Research from Scope</u> shows that disabled people are feeling unsupported and unsure how to keep themselves safe at this time.

This is having a negative impact on disabled people's ability to be active. **Data from Sport England** shows disabled people are less likely:

- to be active in general,
- to have found new ways to be active during the pandemic,
- to be using exercise to manage their health.

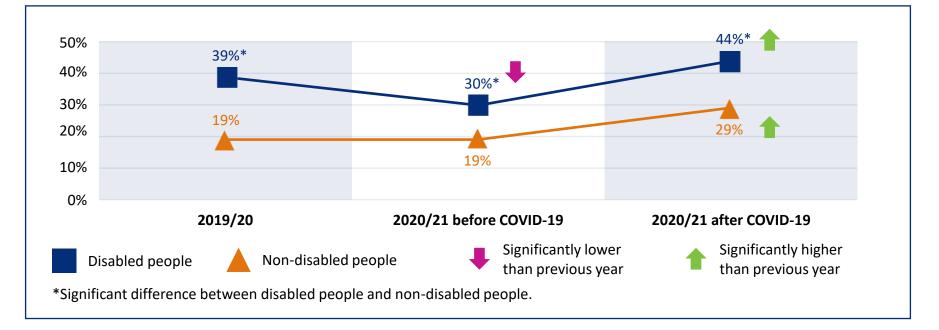
The findings from this survey give further insight on how the pandemic has affected the activity levels of disabled people.

The pandemic led to more disabled people feeling they did not have the opportunity to be active

Before the pandemic, disabled people were more likely to say they had the ability to be as active as they would like to be than in 2019/20. However, the pandemic reversed this change.

Figure 6 (COVID-19 impact)

Proportion of disabled and non-disabled people who do not feel they have the opportunity to be as active as they would like to be.

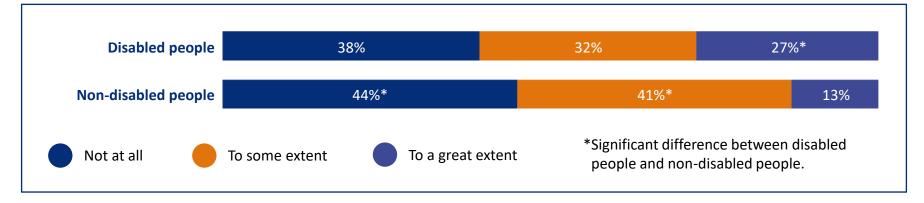


Q: Do you feel that you are given the opportunity to be as physically active as you want to be/at the moment? Base: All disabled and non-disabled people. Disabled people were also more likely to feel the pandemic reduced their ability to be active to a great extent

More than twice the number of disabled people felt that their ability to be active had been reduced to a great extent compared to non-disabled people.

Figure 7 (COVID-19 impact)

Extent to which coronavirus has reduced disabled and non-disabled people's ability to do sport, exercise or physical activity.



Q: To what extent has coronavirus (COVID-19) reduced your ability to do sport, exercise or physical activity? Base: All disabled people and non-disabled people.

The lack of opportunity and reduced ability to be active has had a negative impact on many disabled people

When asked to describe how the pandemic has affected their health condition or impairment, disabled people often mentioned the importance of the lack of exercise and activity. This largely affected them in three ways:

My health or impairment is becoming harder to manage

66 Before COVID, I did Aqua Aerobics at least twice a week which I really enjoyed and was helping me trying to get my knee more mobile. My whole life has changed. **99**

66 Being restricted in movement means I lose muscle. I spend more time sitting. When I do try to move about pain levels are higher. **99**

66 I am self shielding as a diabetic. Had hip replacement surgery and recovered well but need more unrestricted walking, gentle exercise and water-based gym routine as per prior to surgery. **99**

My mental health is getting worse

66 All my activities, enriching and exercise, have been cancelled. Mental health has been impacted by a sense of helplessness. **99**

66 I haven't been able to be as active which can make my nerve pain worse and it has really affected my mental health as I already had depression.

It's making me lonely and socially isolated

66 Shielded and staying in. The situation created a more sedentary lifestyle with reduced daily exercise, a sense of isolation, lack of enthusiasm and motivation. The feeling of loosing touch with the outside world and friends. **99**

66 I've gone from dancing five nights a week down to just walking two miles a day. I don't see any of my friends or family. I'm ready to give up because the future looks so scary. I don't even know how we're supposed to ask for help or advice now. **99**

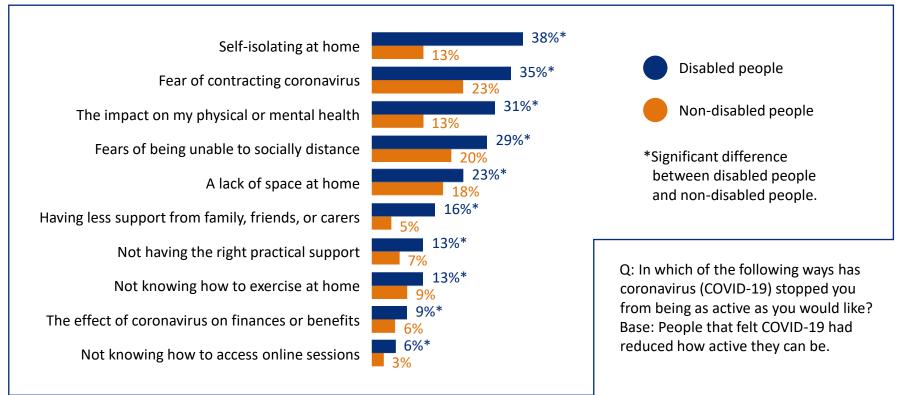
Q: In what ways has the coronavirus outbreak, and the lockdown measures, impacted your health conditions, impairments or illnesses? Base: All disabled and non-disabled people that have a health condition that have been affected by COVID-19 to at least some extent.

The pandemic has created many new significant barriers to disabled people being active

Key barriers to being active during the pandemic are: self-isolating, the impact on health, the fear of contracting the virus, and concerns about social distancing. Disabled people are also more affected by a lack of space at home and a lack of support.

Figure 8 (COVID-19 impact)

Barriers to being active caused by coronavirus. The barriers shown in this chart are more likely to be experienced by disabled people.

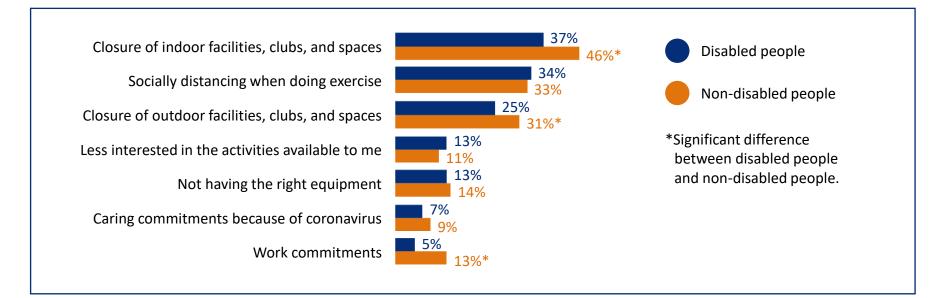


There are other new barriers which affect disabled and non-disabled people equally, or disabled people less

Disabled people are less affected by the closure of facilities and work commitments than non-disabled people. However, social distancing when exercising is a key barrier for both disabled and non-disabled people.

Figure 9 (COVID-19 impact)

Barriers to being active caused by coronavirus. The barriers shown in this chart are more likely to be experienced by non-disabled people, or at similar levels.



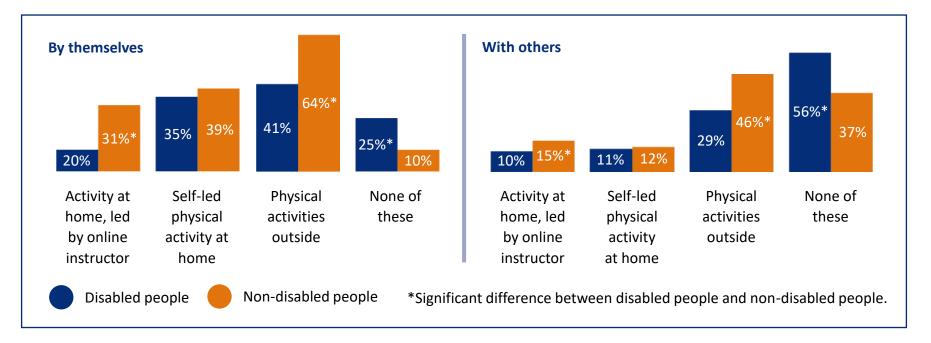
Q: In which of the following ways has coronavirus (COVID-19) stopped you from being as active as you would like? Base: All disabled people that felt COVID-19 had reduced how active they can be.

During the pandemic, for both disabled and non-disabled people taking part in activities alone was preferred

Disabled people are less likely to take part in all types of activity compared to non-disabled people, particularly outdoors. However, 41% and 29% of disabled people were still being active alone and with others outdoors.

Figure 10 (COVID-19 impact)

Proportion of disabled and non-disabled people who have taken part in different activities during the pandemic (as limited by lockdown restrictions).



Q: Which of the following describe how: you take part in sport, exercise or other physical activity during the coronavirus (COVID-19) outbreak? By myself/with others: Base: All respondents who currently take part in physical activity.

Many disabled people have tried new ways to be active during the pandemic, but often face challenges

Strategies to be active	Challenges	
 Exercising at home: Continuing low impact exercise they had taken part in previously (like chair yoga, physiotherapy exercises and Pilates. Weight loss exercises. Buying exercise equipment. 	 Not felt to be as effective as organised sessions or the gym - not getting same benefits. Unsure how to do it 'properly' or how to use equipment. Painful due to decrease in fitness or mobility. Worries about injuring self or worsening condition. Miss social aspects and being challenged. 	 I do some daily exercise, tai chi and Pilates, but it is not really enough. I do some fat burning exercises but these have not helped the muscles I use.
 Walking more: With family and friends. Going out later at night or early morning. Counting steps. 	 Lack of motivation and energy. Feeling self-conscious being around others, feeling unsafe. Unable to drive to locations to walk. Difficult to walk for long distances. Difficulties with uneven surfaces and weather. Lack of public toilets and facilities. 	I live alone and became very anxious about leaving the house, I did a few times but felt unsafe walking.
 Online classes: Through existing social and community groups. Looking through YouTube for ideas. 	 Lack of motivation and energy. Issues with following instructions and conversations. Seen as too strenuous for some. 	 I would like some help with exercise, but the sort of stuff available online is too strenuous. I did download a heart foundation daily exercise video but felt so unmotivated and isolated I didn't do it regularly.

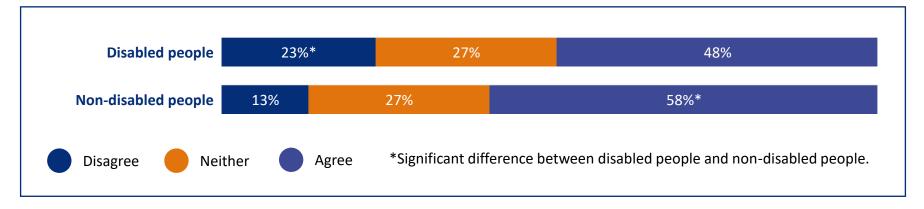
Q: In what ways has the coronavirus outbreak, and the lockdown measures, impacted your health conditions, impairments or illnesses? Base: All disabled and non-disabled people that have a health condition that have been affected by COVID-19 to at least some extent.

Disabled people were more likely to feel that they had not received enough information about how to be active

Almost a quarter of disabled said they had not received enough information on how to stay active during the pandemic, compared to 13% of non-disabled people.

Figure 11 (COVID-19 impact)

Agreement with: 'I have received enough information and advice on how to be active during the coronavirus outbreak'.



Q: To what extent do you agree with the following statement: 'I have received enough information and advice on how to be active during the coronavirus (COVID-19) outbreak'?

The way disabled people seek information and where they would turn for advice on physical activity is changing

- Almost all channels used by disabled people and non-disabled people to find information about physical activity showed a decrease in use compared to 2019/20.
 - Only social media remained stable.
 - Websites, libraries and sport and leisure clubs saw the biggest decrease.

- Healthcare professionals remain the preferred source of advice about sport and physical activity for disabled people.
 - There has been an increased in using friends, the government and family members as a source of information.

	Disabled people	
	2019/20	2020/21
1. GPs, doctors, and nurses	67%	65%
2. Physios, occupational therapists	59%	60%
3. Sports or physical activity professionals	27%	28%
4. Friends	18%	23% 🕇
5. Government	11%	22% 🕇
6. Other family members	12%	19% 🕇

Table 5: Proportion selecting each option as a top 3 types of people they listen to about sport and physical activity.

Significantly higher than previous year

Q: Where would you find information about sport or physical activity opportunities? Base: All disabled and non-disabled people. Q: Whose advice would you listen to about taking part in sport or physical activity? Base: All disabled and non-disabled people. Only the top types of people that disabled people would listen to are shown on this slide. Data on other types of people can be found in the full report.

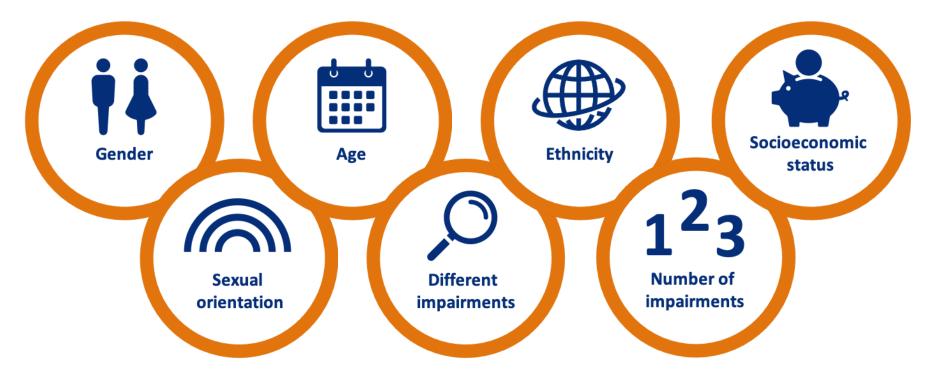
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3. Key findings Impact of other social factors on the findings

Many differences between social groups were observed in our Annual Disability and Activity Survey

- Like everyone, disabled people's lives are influenced by a range of social identities.
- Different disabled people have different experiences and perceptions of being active.
- This section summarises key differences within demographic groups where the data shows significant differences. We have also looked at the differences for people with multiple impairments and different types of impairments.



Differences are listed where the sample size for a data point was larger than 30 to allow for normal distribution.

Differences between men and women

6

Disabled women compared to disabled men

General differences

- More likely to feel they do not have the opportunity to be as active as they want to be.
- Face a greater average number of barriers to taking part in physical activity.
- More likely to feel a lack of motivation and confidence are barriers to being active.
- Less likely to take part in competitive and recreational sports.
- Less likely to agree that they are a competitive person.

Impact of the pandemic

• More likely to feel their impairment has been affected by the pandemic.

Disabled men compared to disabled women

General differences

- More likely to rate their health as 'poor'.
- Less likely to have taken part in an organised physical activity session in the last year.
- Less likely to use a range of information channels to find out about sport and activity, including posters and leaflets, community facilities, and social media.

Impact of the pandemic

- More likely to say fear of contracting the virus and the closure of facilities have affected their ability to be active during the pandemic.
- Less likely to have taken part in activity sessions led by an online instructor during the pandemic.

Differences between younger and older adults



Younger disabled adults (under 30) compared to overall disabled adults

General differences

- Less likely to want to do more physical activity.
- Less likely to say their impairment affects them being active.
- Face a greater average number of barriers to taking part in physical activity.
- More likely to feel a lack of motivation and confidence are barriers to being active.

Impact of the pandemic

- More likely to say the pandemic reduced their ability to be active.
- More likely to say a lack of space at home has affected their ability to be active during the pandemic.
- More likely to feel negative about the future.

Older disabled adults (over 70) compared to overall disabled adults

General differences

- More likely to be inactive.
- More likely to say their impairment affects them being active.
- More likely to feel they don't have the opportunity to be active.
- Less likely to agree sport is for someone like them.
- Less likely to have taken part in a physical activity session in the last 12 months.
- More likely to want advice on being active from healthcare professionals.

Impact of the pandemic

- More likely to say self-isolating has affected their ability to be active during the pandemic.
- Less likely to have taken part in online activity classes during the pandemic.

Differences between people of different ethnicity



Black, Asian and Minority Ethnic (BAME) disabled people compared to white disabled people

General differences

- Face a greater average number of barriers to taking part in physical activity.
- More likely to feel a lack of motivation and confidence are barriers to being active.

Impact of the pandemic

- More likely to say the pandemic had affected their ability to be active.
- More likely to say a lack of space at home, less support from family, and work commitments had stopped them being active during the pandemic.
- More likely to be concerned about the impact on jobs and on mental health.

White disabled people compared to BAME disabled people

General differences

- More likely to say their impairment affects them being active.
- More likely to rate their health as 'poor'.
- Less likely to have taken part in an organised physical activity session in the last year.

Impact of the pandemic

- More likely to say self-isolating has affected their ability to be active during the pandemic.
- Less likely to have taken part in activities at home led by an online instructor and in group activities at home and outside.

Sample: Disabled adults who chose Mixed, Asian or Asian British, Black or Black British, or other as their ethnic group (63), disabled adults who chose White as their ethnic group (953).

Differences for gay, lesbian, or bisexual adults



Gay, lesbian, or bisexual disabled adults compared to heterosexual disabled adults

General differences

- More likely to say a lack of motivation is a barrier to being active.
- Face a greater average number of barriers to taking part in physical activity.
- Less likely to have taken part in an organised physical activity session in the last year.

Impact of the pandemic

- More likely to say the closure of facilities affected their ability to be active during the pandemic.
- More likely to take part in self-led physical activity at home.
- More likely to feel negative about the future.

Sample: Disabled adults who identified as gay, lesbian, bisexual, or in another way (90). A question on gender identity/trans identity was not included in the survey.

Differences for people in lower socioeconomic groups



Disabled people in manual job roles compared to disabled people in managerial job roles

General differences

- More likely to rate their health as 'poor'.
- Less likely to agree that sport is for someone like them.
- Less likely to aspire to take part in competitive sports.
- Face a greater average number of barriers to taking part in physical activity.
- More likely to say lack of motivation is a barrier to being active.

Impact of the pandemic

- More likely to say the pandemic hasn't affected their ability to be active.
- More likely to say they haven't received enough information on how to be active during the pandemic.

Sample: Disabled adults who chose skilled/semi/unskilled manual worker as the occupation of the chief income earner in their household (174), disabled adults who chose higher/intermediate managerial as the occupation of the chief income earner in their household (237).

Differences for people with multiple impairments



Disabled people with three or more impairments compared to disabled people with one impairment

General differences

- More likely to be inactive.
- More likely to want to be more active.
- Less likely to feel they have the opportunity to be active.
- Less likely to agree that sport and physical activity is for someone like them.
- Face a greater average number of barriers to taking part in physical activity.
- Less likely to have taken part in an organised physical activity session in the last year.
- Less likely to take part in competitive sport.
- More likely to want advice on being active from healthcare professionals.

Impact of the pandemic

- More likely to feel their impairment has been affected by the pandemic.
- More likely to say self-isolating, a lack of support, and not having the right equipment has affected their ability to be active during the pandemic.
- More likely to say they haven't received enough information on how to be active during the pandemic.
- More likely to feel negatively about the future.

Differences for impairment types: physical and sensory impairments



Impairment types compared to overall disabled adults

Chronic health conditions

- More likely to feel their health has been affected by the pandemic.
- More likely to say self-isolating has affected their ability to be active.
- More likely to feel negative about the future.

Breathing or stamina

• More likely to say self-isolating has affected their ability to be active.

Mobility and long-term pain

- More likely to say their impairment affects them being active.
- More likely to want advice on being active from healthcare professionals.

Dexterity

- More likely to say their impairment affects them being active.
- More likely to want advice on being active from healthcare professionals.

Sensory

- Face a greater average number of barriers to being active.
- More likely to feel the pandemic has reduced their ability to be active.
- More likely to say a lack of space at home and not having the right practical support has affected their ability to be active.
- More likely to feel negative about the future.

Sample: Disabled adults who said their impairment affected them in the following areas: chronic health condition (420), breathing or stamina (428), mobility (672) and long-term pain (659), dexterity (319), sensory (hearing 167, vision 76, speech 51).

Differences for impairment types: learning, mental health, memory, and social and behavioural



Impairment types compared to overall disabled adults

Learning or understanding

- Face a greater average number of barriers to being active.
- More likely to take part in competitive sport
- More likely to feel the pandemic has reduced their ability to be active.
- More likely to feel a lack of space, not knowing how to exercise at home, access online sessions, and a lack of support has affected their ability to be active during the pandemic.
- More likely to feel negative about the future.

Memory

• More likely to feel negative about the future.

Mental health condition

- Face a greater average number of barriers to being active.
- More likely to feel their impairment has been affected by the pandemic.
- More likely to feel not knowing how to exercise at home has affected their ability to be active.
- More likely to say they haven't received enough information on how to be active during the pandemic.
- More likely to feel negative about the future.

Social and behavioural

- More likely to feel a lack of space at home and not knowing how to access online sessions has affected their ability to be active.
- More likely to feel negative about the future.

Sample: Disabled adults who said their impairment affected them in the following areas: learning or understanding (91), memory (127), mental health (252), and social and behavioural (79).



Conclusions and recommendations

Conclusions



This research, along with Active Lives, shows us that before the coronavirus outbreak, disabled people had the potential to be more active than ever before. The pandemic has seen this progress halted, highlighting a need for action to ensure the effects are temporary, and not a long-term consequence.

1. Positive changes were having an impact

The work of the sector and wider initiatives to change perceptions and behaviours, and to provide more opportunities, was having an impact. The fairness gap between disabled and non-disabled people's inactivity levels was closing. Positive changes observed in this study included:

- Disabled people were more likely to feel they had the opportunity to be active and were less likely to see their impairment as a barrier.
- Disabled people were more likely to feel physical activity and exercise was for someone like them, and to be taking part in competitive activities.
- Disabled people were more likely to be motivated to take part by reasons connected to their values rather than their impairment.

2. However, long-standing inequalities are still present

Despite these positive trends, inequalities still exist. Disabled people still have less positive perceptions of sport, and have lower participation rates in all activities. Particular groups of disabled people continue to face additional inequalities to being active, such as disabled women, young people, and people from an ethnically diverse background.

Conclusions



The pandemic is disproportionally affecting disabled people's ability to be active

We know that the COVID-19 pandemic is having a significant effect on disabled people's lives, including their ability to be active. This research further helps us to understand how this is affecting perceptions and behaviours in relation to activity.

 More disabled people feel they do not have the opportunity to be active. They are also twice as likely to feel that the pandemic has greatly reduced their ability to be active.

- The pandemic has presented new barriers to being active, including staying at home, fears of contracting the virus, and concerns about social distancing.
 Disabled people are less likely to take part in activities that have become more common during lockdown restrictions, like outdoor exercise or online activities led by a tutor.
- Many disabled people feel that they have not received enough information on how to be active at this time. The channels they are using to seek information have changed, being more likely to listen to friends and the Government than in the previous year.

Recommendations



We know that the sports and physical activity sector is experiencing unprecedented challenges. However, it is important that disabled people are still supported to be as active as they want to be. We must ensure that inclusive practice and the needs of disabled people are part of the response to the crisis.

Activity Alliance has identified five recommendations with action points to minimise the long-term impact of COVID-19 on disabled people's activity levels. These will help to continue the positive progress that was being made toward reducing the fairness gap between disabled and non-disabled people's activity levels.

- 1. Provide clear and consistent information about being active
- 2. Embed inclusive practice into opportunities as they recover
- 3. Work collaboratively to address new challenges arising from COVID-19
- 4. Offer a variety of ways to be active
- 5. Change attitudes towards disabled people in sport and activity



Disabled people need consistent and clear information to help them be active

- Frequent changes in guidelines are confusing. Organisations need to provide disabled people with clear guidance on new rules and how they affect sport and physical activity, as well as setting out strategies for the future.
- Information needs to be available in a range of formats and delivered through different channels beyond the sports sector.
- Providers need reassurance on guidelines to overcome fears about risk so they can confidently motivate and help disabled people to be active.
- Use our <u>inclusive communications guidance</u> when providing information and engaging with audiences to ensure information is accessible.
- Disabled people should be fully included in the development of sport and physical activity strategies and provision planning.



Providers need support to understand the value of inclusion when redeveloping activity

- As leaders in inclusion and organisational improvement in the sport and activity sector, Activity Alliance has
 a range of resources outlining the value of inclusion and how to embed it in practice. <u>Visit our COVID-19 page</u>
 to find out more.
- These resources have been developed to help organisations embed inclusive practice, which is critical when redeveloping provision after the COVID-19 pandemic:
 - <u>Talk to Me 'Ten Principles'</u> gives guidance for providers to increase participation and make activities more appealing and accessible.
 - The <u>Inclusive Activity Programme</u> provides training to increase confidence and competence to include disabled people in community activities and physical education.
 - Applying learning from <u>Get Out Get Active</u> outputs can help to understand how to support the least active disabled and non-disabled people be active together.
 - The <u>Lead toolkit</u> helps to develop an organisational improvement plan to embed better practice in disability equality.

3. Work collaboratively to address new challenges arising from COVID-19



Changes in lifestyles and new challenges mean that disabled people would benefit from increased collaboration between different sectors and within sport and physical activity

- Disabled people place high levels of trust in health and social care workers, so they must be adequately supported to promote physical activity at this time.
- Government bodies also have a renewed opportunity to work together to have a positive influence, using their authority to provide clear guidance and motivation on physical activity.
- Working with volunteers, leaders, and influencers that have trusted relationships within their communities to champion physical activity and inclusion for disabled people.
- Draw from the expertise and experience of a range of organisations who have already responded to the new challenges. <u>Visit our active at home page</u> for examples.



Disabled people should still be offered a choice of ways to be active that appeal to their motivations and values.

- Disabled people should have access to a range of different types and intensities of physical activity that appeal to a range of activity levels and abilities.
- Deliver or promote inclusive online activities for those who are staying at home. Some disabled people may need additional motivation and support to overcome the digital divide. Sport and activity deliverers would also benefit from training in online skills and inclusion.
- Plan for and offer in-person activities when possible (still preferred by many) with clear guidance on how the
 activity is safe and accessible. <u>Read our 'Reopening Activity: An inclusive response' resource guidance</u> to find
 out more.
- Offer activities that appeal to changing motivations and new needs such as increasing a sense of connection, providing social opportunities, and helping to manage mental and physical health.
- Using a <u>person-centred approach</u> to understand individuals needs and concerns, and to consider other demographic and social factors.

5. Change attitudes towards disabled people in sport and activity



Make the sector a welcoming place for disabled people, removing attitudinal barriers so disabled people feel truly included in all active environments.

- Increase disabled people's visibility at all levels, especially in shaping policy and decision-making.
 - Increase understanding that disabled people come from diverse backgrounds and fall into many different audience types.
- Support disabled people to feel like sport and physical activity is for them by challenging perceptions about health and impairments.
- Provide opportunities for disabled and non-disabled people to be active together challenge stereotypes through action.
- Use Activity Alliance resources:
 - Build confidence and competence of workforce challenging assumptions and misconceptions held by those who deliver sport and activity.
 - Train and empower people to develop promotional materials that will reach the widest potential audience.
 - Using the Talk to Me 'Ten Principles' to reassure, show and include disabled people in activities at this time.

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Please contact us if you would like support accessing this document.

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