

Annual Disability and Activity Survey

2022-23

Differences for people with different impairment types

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1. Introduction

This report outlines key findings from people with different types of impairments who took part in Activity Alliance's fourth Annual Disability and Activity Survey.

998 disabled people and people with long-term health conditions took part in an online survey between August and October 2022. This project complements **Sport England's Active Lives Adult Survey,** providing a deeper level of understanding of disabled people's perceptions and experiences of sport and physical activity. Active Lives data from April 2023 showed that disabled people are almost twice as likely to be inactive as non-disabled people: 41% compared to 20.9%.

This report outlines key data for seven impairment types, compared to the overall sample of disabled people, non-disabled people, and to previous years. The sample size for each impairment type was:

Mobility: 588

Learning, understanding or concentrating: 94

Long-term health condition: 367

• Mental health: 298

Hearing: 114

• Visual: 52

• Social or behavioural: 87

Most people who took part in the survey had more than one impairment type (77%). The challenges experienced by disabled people can be similar, regardless of their impairment or health condition. This report provides more detail for organisations and individuals who work with people with specific impairments.

We reviewed these findings and recommendations with the National Disability Sports Organisations.

Please contact Activity Alliance's research team to discuss how to access and use the data, or how to implement the recommendations. Email research@activityalliance.org.uk or call 01509 227750.

You can view the full Annual Survey report on Activity Alliance's website.

2. People with mobility impairments

Most people with mobility impairments have more than one impairment (89%). This is significantly higher than the 77% for disabled people overall. The most common additional impairments were long-term pain (63%), long-term health condition (39%), breathing or stamina (41%) and dexterity (27%).

588 people with mobility impairments took part in the survey:

- 10% were electric wheelchair, powerchair or scooter users.
- 11% were manual wheelchair users.
- 3% were limb amputees or had congenital limb loss.
- 1% had cerebral palsy.
- 1% had dwarfism or a restricted growth condition.

This group were more likely to think of themselves as disabled (65% vs 54% of disabled people overall).

This group was older than the overall sample (1). They were more likely to be a state pensioner.

People with mobility impairments are more likely to be inactive than disabled people on average (2), with over half (52%) doing less than 30 minutes of activity a week. This has increased from 50% before the pandemic, but lower than last year (54%).



Research findings

Participation and experience

People with mobility impairments were slightly less likely to agree that they were given the opportunity to be as active as they want to be (37% vs 41% of all disabled people).

Similar to most impairment types, people with mobility impairments were most likely to take part in outdoor green spaces (40%). This is the same as their preference (41%).

Like other disabled people, people with mobility impairments were less likely to say that activity leaders included them (79%) or met their needs (69%).

Attitudes and perceptions

79% of people with mobility impairments want to be more active (compared to 77% of disabled people overall).

65% enjoyed the last time they took part in sport or physical activity (similar for disabled people overall).

People with mobility impairments report their wellbeing as similar to disabled people overall: very high life satisfaction (5% vs 5%), happiness (12% vs 11%), life worthwhileness (18% vs 16%) and very low anxiety (24% vs 21%).

Like last year, people with mobility impairments were less likely to agree that sport is for 'someone like me' (23% vs 30% of disabled people) and that physical activity and exercise are for 'someone like me' (44% vs 50%).

Motivations

The top motivations to be active were similar to other disabled people, and to the previous year of the survey:

- To improve or maintain physical health (65%).
- To lose or maintain weight (47%).
- To improve or maintain mental health (39%).
- To get fit (35%).
- To feel good about themselves (33%).

Barriers

People with mobility impairments were more likely to say their impairment or condition stops them being as active as they would like (87% vs 80% of all disabled people).

The other top barriers were similar to disabled people:

- Getting older (36%).
- A lack of motivation (26%).
- Finances (18%).

Since the pandemic, people with mobility impairments were more likely to have experienced being less able to be active because of changes to their physical health (78% vs 75%).

They were less likely than people with other types of impairment to have been affected by changes to their mental health.

34% agree the cost-of-living crisis has affected how active they are (vs 37% of disabled people). 57% agree it has affected how much they socialise (vs 60% of disabled people).

Advice and information

People with mobility impairments were more likely than other disabled people to say they would listen to advice on activity from GPs, doctors or nurses (67% vs 64%) and physios, occupational therapists and other medical professionals (60% vs 53%). 19% would listen to advice from sport and activity professionals.

The three most common information sources about physical activity opportunities are websites (36%), medical practices or professionals (28%), and friends and family (28%).

Support and opportunities

The top forms of support that would help people with mobility impairments to be active were similar to disabled people overall:

- Support to improve physical health (48%).
- Greater awareness of suitable activities (36%).
- Practical support from a trained person (25%).
- Financial support (24%).
- Support to improve mental health (22%).

When asked what the government should focus on to get more people active, people with mobility impairments were most likely to select 'making sure activities are affordable', 'improving people's health so they can be active', 'improving outdoor spaces', and 'listening to and engaging with the public on how to they want to be active'. These were similar to disabled people overall.

They were slightly less likely to want the opportunity to influence the types of activities they take part in (29% vs 33%) or to become a coach or take on a role in delivering physical activity (10% vs 12%). They were less likely to say they see 'people like me' working in sports and physical activity (17% vs 22%).

Summary and recommendations

We have developed seven key themes in our 2022-23 report, with detailed recommendations and actions.

Additional considerations for people with mobility impairments include:

- People with mobility impairments are less active and feel less connected to sport and physical activity. Some of this may be driven by an older average age of this impairment type – organisations should consider differences between younger and older adults with mobility impairments.
- Like last year, health is especially important to many people with mobility impairments. It is a top motivator, and healthcare professionals are the preferred source of advice and information.
- Almost 9 in 10 people with mobility impairments say their impairment stops them being active. Providing physically accessible environments, and suitable and appealing adapted activities will help encourage more people to be active.

- WheelPower offer online activities, multisport events, funding opportunities and free equipment for wheelchair users, and online training for coaches.
- LimbPower, Dwarf Sports Association UK, and CP Sport provide further information and advice on including people with physical impairments in sport and physical activity.

Give us more support instead of closing each door - it's not nice to be pushed out because of being in a wheelchair, they need to see the person, not the wheelchair. We just want to be treated as equals.

Person with mobility, learning, hearing and visual impairments

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3. People with learning impairments

Almost all people with learning impairments had multiple impairments (98% vs 77% of disabled all people). Mental health impairments were the most common additional impairment (66%), followed by memory (51%), long-term pain (47%) and mobility (46%).

People with learning impairments were more likely than average to think of themselves as disabled (67% vs 54%).

People with learning impairments were more likely to be younger than people with other types of impairments.

25% took part in the survey through an Easy Read version, and 11% were carers or supporters.

Inactivity levels in this group are lower than the average for disabled people. 25% were doing less than 30 minutes of activity a week **(2)** (vs 41% of all disabled people). This is similar to levels before the pandemic (27%).

Research findings

Participation and experience

46% of people with learning impairments say they were not given the opportunity to be as active as they want to be, compared to 39% of disabled people and 22% of non-disabled people.

They were less likely than other disabled people to prefer doing their own thing (35% vs 46%).

They were more likely than disabled people on average to take part in recreational/fun team and individual sports (35% vs 19%).

People with learning impairments usually take part in sport and physical activity in outdoor green spaces (45% vs 43%). This is the same as their preference (49% vs 46%).

People with learning impairments were less likely to say that activity leaders included them (69% vs 79%) or met their needs (66% vs 72%).

Attitudes and perceptions

Similar to last year and to disabled people overall, 75% of people with learning impairments want to be more active.

79% enjoyed the last time they took part in sport or physical activity, compared to 66% of all disabled people.

People with learning impairments were less likely to report very high life satisfaction (2% vs 5%), happiness (3% vs 11%), life worthwhileness (6% vs 16%) and very low anxiety (9% vs 21%).

People with learning impairments were more likely to feel that sport is for 'someone like me' (43% vs 30% of all disabled people). However, there was a continued decrease in the proportion who felt like physical activity was for 'someone like me': 63% in 2020-21, 50% in 2021-22 49% this year (2022-23).

Motivations

Compared to disabled people overall, people with a learning impairment were more likely to be motivated to take part in sport or physical activity to:

- Improve/maintain their mental health (59% vs 45%).
- Meet new friends (18% vs 10%).
- Learn a new skill/improve their existing skills (19% vs 7%).

Things that would make the most impact on people with learning impairments being active were:

- Discounted memberships or concessions (39% vs 29%).
- Cheaper equipment or clothing (23% vs 12%).

73% of people with learning impairments agreed being active could help them feel less lonely.



Barriers

Like other disabled people, people with learning impairments were most likely to say that their impairment or health conditions stops them from being as active as they would like (65% vs 80% of all disabled people). They were more likely than other disabled people to say this was related to feeling less confident (49% vs 34%), previous bad experiences (33% vs 21%) and negative attitudes from others (27% vs 10%).

They were more likely than other disabled people to choose most other barriers. These include:

- A lack of confidence (35% vs 20%).
- Finances (32% vs 21%).
- Lack of suitable transport (18% vs 9%).
- Not enough inclusive or accessible facilities (14% vs 8%).

People with learning impairments were more likely to say a lack of support when taking part is a reason that stops them doing as much sport, exercise and physical activity as they'd like (11% vs 8%).

Over half of people with learning impairments were more likely to say the increased cost of living reduced how active they were (53% vs 37%) and how much they socialised (67% vs 60%).

A greater proportion reported 'fear of losing benefits or financial assistance' (8% vs 4% of all disabled people) as a factor that stops them being active.

Eight in 10 people with learning impairments (80%) said COVID-19 and restrictions had affected their impairment.

Advice and information

People with learning impairments were most likely to listen to advice from GPs, doctors, or nurses about taking part in sport and activity (55%).

Similar to last year, they were more likely to listen to advice from parents/guardians (19% vs 5%), supporters/carers (14% vs 8%), social workers/care support staff (11% vs 6%), and community leaders or volunteers (6% vs 2%).

The most common information source for opportunities were websites (48%), followed by family and friends (40%), social media (37%), and medical practices or professionals (30%). This group is more likely to use social media to find information.



I'd like to help more organisations do this kind of thing you know, if you work for a leisure centre, then why can't you do these (co-production) workshops with people in your community?

Person with learning and mobility impairments

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Support and opportunities

People with learning impairments were more likely to say most forms of support would help them to be more active. The most common forms of support selected were:

- Support to improve mental health (42% vs 27% of all disabled people).
- Financial support (40% vs 27%).
- Greater awareness of suitable activities (40% vs 35%).

The top three focuses for the government for people with learning impairments were making sure activities are affordable (67% vs 64%), improving outdoor spaces (50% vs 41%), and listening to and engaging with the public on how they want to be active (45% vs 38%).

When asked what sport and physical activity organisations should focus on to get more people active, people with learning impairments were most likely to say 'provide more coaching or support' (12% vs 9%).

Being involved in influencing activities mattered more to this group compared to all disabled people (42% vs 33%).

Summary and recommendations

- People with learning impairments are more likely to experience barriers to being active. They would benefit from a wide range of support, in particular support around their mental health and finances. The Foundation for People with Learning Disabilities
 (FPLD) offers resources to help people with learning impairments take care of their mental health.
- Consistent with previous years, they have less preference for advice from healthcare professionals. Family, support workers, friends and community leaders are more important for providing advice. They are also more likely to use social media to find out about opportunities.
- They are more likely to take part in organised activity and prefer being active outdoors in green spaces. Create more opportunities to be active in outdoor spaces that are inclusive and accessible.
- Tackling discrimination and ensuring people have positive experiences is important to people with learning impairments.
 They want to be involved in influencing activities.
- Mencap and Special Olympics Great Britain provide further information and advice on including people with learning impairments in sport and physical activity.

4. People with long-term health conditions

Nearly all (93%) people with long-term health conditions also had at least one other impairment, compared to 77% of disabled people overall. The most common additional impairments were mobility (52%), long-term pain (46%), and breathing and stamina (43%).

They were more likely than average to consider themselves disabled (57% vs 54%).

In comparison to findings from last year, people with long-term health conditions were more likely to be female (57%).

Inactivity levels are similar to the average for disabled people: 37% were doing less than 30 minutes of activity a week (2). This has reduced from last year (48%) and is similar to pre-pandemic levels where 41% were inactive.

Research findings

Participation and experience

44% of people with long-term health conditions say they have the opportunity to be as active as they want to be. This is similar to disabled people overall.

They typically prefer to take part in activity where they can do their own thing (47% compared to 20% who prefer organised activity).

People with long-term health conditions usually take part in sport and physical activity in outdoor green spaces (46% vs 43%). This is the same as their preference (49% vs 46%).



Attitudes and perceptions

73% want to be more active (similar to 77% of all disabled people).

Over two-thirds of people with long-term health conditions enjoyed the last time they took part in a sport or physical activity session (67% vs 66% of all disabled people).

People with long-term health conditions report their wellbeing as similar to disabled people overall: very high life satisfaction (6% vs 5%), happiness (12% vs 11%), life worthwhileness (17% vs 16%) and very low anxiety (21% vs 21%).

They have similar perceptions of sport and physical activity to disabled people overall. Only 32% and 52% agree sport and physical activity are for 'someone like me'.

Motivations

Motivations to be active were similar to those for disabled people overall. The top motivations were to:

- Improve or maintain physical health (63%).
- Lose or maintain weight (47%).
- Improve or maintain mental health (44%).

People with long-term health conditions were more likely to say help with transport or assistance costs would make the most impact on them being active (20% vs 17%).

Similar to disabled people overall, 64% of people with long-term health conditions agree being active could help them feel less lonely.



Barriers

People with long-term health conditions were most likely to report their impairment or condition as a barrier to being active (80%). This barrier was more likely to relate to bad experiences in the past (24% vs 21% of all disabled people).

People with long-term health conditions were more likely to disagree that activities are held in a convenient location (16% vs 7%).

Over a third of people with long-term health conditions were more likely to say the increased cost of living reduced how active they were (36% vs 37%) and how much they socialise (57% vs 60%).

A greater proportion compared to disabled people overall say they currently receive benefits because of their condition (58% vs 47%). Over a third (37%), say a 'fear of losing benefits or financial assistance' stops them from trying to be more active.

Nearly 6 in 10 people (57%) said COVID-19 and restrictions had made them feel more socially isolated.

Advice and information

Healthcare professionals were the top preferred sources of advice on physical activity for people with long-term health conditions (63% for GPs, doctors and nurses, and 53% for physios, occupational therapists and other medical professionals). These figures were similar to disabled people overall.

Surprisingly, people with long-term health conditions were only slightly more likely to have received information about being active from medical practices or professionals (28% vs 26% of all disabled people). They were more likely to find information about opportunities from national charities or organisations (11% vs 9%) and other disabled people (12% vs 10%).

Support and opportunities

The top forms of support that would help people with long-term health conditions be active were:

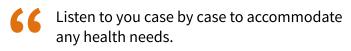
- Support to improve physical health (41%).
- Greater awareness of suitable activities (37%).
- Practical support from a trained person or coach (26%).
- Financial support (25%).
- Support to improve mental health (22%).

Like other disabled people, people with long-term health conditions thought the government should focus on: 'making activities affordable' (65%) and 'improving outdoor spaces' (43%). They were more likely to say 'listening and engaging with people on how they want to be active' was important (42% vs 38% of all disabled people).

They had similar attitudes to disabled people overall in wanting the opportunity to influence the types of activities they take part in (34% vs 33%) and to becoming a coach or taking on a role in delivering physical activity (12% vs 12%).

Summary and recommendations

- Similar to last year, there were few differences between people with long-term health conditions and disabled people overall. They are likely to have other impairments, want to be more active and want advice from healthcare professionals. Inactivity levels have reduced from last year but still remain high. There is a continued need for increased collaboration between health and disability organisations.
- We know from our research last year that over half of people with long-term health conditions were shielding during the pandemic. The impact of COVID-19 alongside the increased cost of living has reduced the amount people with long-term health conditions socialise and people are feeling more socially isolated. They may need extra encouragement and support to be active with others.
- Being listened to and influencing activities is important to people with long-term health conditions. Co-producing opportunities could help more people be included.
- Like other disabled people, people with long-term health conditions' experience, participation and attitudes have not improved since last year. People are feeling less connected to sport and physical activity.
- The We Are Undefeatable campaign provides guidance on including people with long-term health conditions in sport and physical activity. The Richmond Group of Charities resource packs provide tailored information for the sport and physical activity sector, health and care organisations, and the health and care workforce.



Person with a long-term health condition

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Be more aware of the challenges we face, listen to me... You can't just push through pain.

Person with a long-term health condition

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5. People with a mental health condition or impairment

A large majority of people with a mental health condition had more than one impairment (90% vs 77% of all disabled people). Long-term pain was the most common additional impairment (45%), followed by mobility (37%), and breathing and stamina (36%).

They were less likely to think of themselves as disabled (52% vs 54% of all disabled people).

Respondents with a mental health condition were more likely to be younger, female and in a lower social grade.

People with a mental health condition are more active than people with other impairments: 33% were doing less than 30 minutes of activity a week (2). This is similar to levels before the pandemic (34%).

Research findings

Participation and experience

Fewer people with a mental health condition feel they were given the opportunity to be as active as they want to be compared to disabled people overall (33% vs 41%).

They usually take part in sport, exercise or physical activity alone (66%).

A quarter (27%) of people with a mental health condition had taken part in an organised sport or physical activity session in the last year. They were slightly more likely than disabled people on average to take part in competitive sports (6% vs 5%).

People with a mental health condition usually take part sport and physical activity in outdoor green spaces (45% vs 43%). This is the same as their preference (51% vs 46%).

They were more likely than disabled people to want to be active indoors at a leisure or sports centre (43% vs 32%).

Attitudes and perceptions

People with a mental health condition were more likely to want to be active (81% vs 77% of all disabled people).

Nearly 7 in 10 (69%) people with a mental health condition enjoyed the last time they took part in sport or physical activity.

People with a mental health condition were less likely to report very high life satisfaction (2% vs 5%), happiness (4% vs 11%), life worthwhileness (6% vs 16%) and very low anxiety (6% vs 21%).

Positively, in comparison to last year, this group were more likely to agree physical activity is for 'someone like me' (54% vs 50% of all disabled people) and that sport is 'for someone like me' (40% vs 30%).

Motivations

This group were more likely to be motivated to take part in sport and activities to improve and/or maintain their mental health (66% vs 45% of all disabled people). Other motivations that were significantly more common included 'to have fun and enjoy it' (25% vs 22%).

Things that would make the most impact on people with a mental health condition being active were:

- Discounted memberships or concessions (39% vs 29%).
- More disposable income (36% vs 27%).

68% of people with a mental health condition agree being active could help them feel less lonely.

Barriers

Like other disabled people, people with a mental health condition were most likely to say that their impairment stops them being as active as they would like to be (68% vs 80%). For people with mental health conditions, this barrier is more likely to be related to feeling less confident (49% vs 34%), worries about making their condition worse (47% vs 37%), previous bad experiences (30% vs 21%) and negative attitudes from others (21% vs 10%).

They were more likely than other disabled people to choose most other barriers apart from getting older (20% vs 31%). Common barriers for this group include:

- Lack of motivation (49% vs 30% overall).
- Lack of confidence (37% vs 20%).
- Finances (37% vs 21%).

Those receiving benefits were more fearful that being active may lead to their financial assistance being removed (50% vs 37% of all disabled people).

People with a mental health condition were more likely to say the increased cost of living reduced how active they were (49% vs 37%) and how much they socialised (70% vs 60%).

Three-quarters said COVID-19 and restrictions had affected their health condition.

Advice and information

Like other disabled people, listening to advice about taking part in sport or physical activity from GPs, doctors or nurses was the most common preference (55%).

The most common information source for opportunities was websites (46%). They were more likely to use social media as a source of information (38% vs 23% of all disabled people), reflecting their younger age profile.



Support and opportunities

People with a mental health condition were more likely to say most forms of support would help them to be more active. The most common forms selected were:

- Support to improve mental health (55% vs 27% of all disabled people).
- Support to improve physical health (44% vs 44%).
- Financial support (43% vs 27%).

The top three focuses for the government for people with a mental health condition were making sure activities are affordable (68% vs 64%), improving outdoor spaces (48% vs 41%), and listening to and engaging with the public on how they want to be active (45% vs 38%).

When asked what sport and physical activity organisations should focus on to get more people active, people with a mental health impairment were most likely to say 'provide more funding/reduce cost' (19% vs 13%).

People with mental health conditions were more likely to agree they see 'people like me' playing sport and being active (37% vs 30% of disabled people) and working in sport and physical activity (27% vs 22%).

People with a mental health condition were more likely to disagree that it's clear how they could provide feedback on activity sessions (21% vs 16%). But they want to be more involved in influencing activities (39% vs 33%).

Summary and recommendations

- Similar to last year, although inactive levels in this group are lower than for other disabled people, there's still a large unmet demand, with over 8 in 10 people wanting to be more active.
- People with mental health conditions are motivated by improving their mental and physical health, enjoyment and meeting new people.
 They recognise the impact being active can have on their wellbeing and loneliness.
- Many want more opportunities to be active in outdoor green spaces and at leisure centres. Lack of confidence, motivation and finances are more common barriers for this group.
- Perceptions of sport and physical activity being for 'someone like me' have increased this year. People with mental health conditions are keen to be engaged in developing and designing physical activity opportunities.
- National charity Mind provide further information and advice on including people with mental health conditions in sport and physical activity.

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I think the best approach to exercise is to focus on enjoyment, socialisation and movement. It shouldn't be about weight, aesthetics or punishment! Being active should be about feeling good.

Person with mental health condition

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6. People with hearing impairments (D/deaf people)

Nearly all (97%) D/deaf people had at least one other health condition or impairment, significantly higher than 77% among disabled people overall. The most common additional impairments were mobility (55%), long-term pain (45%), and breathing or stamina (44%). Visual impairments were more common than for disabled people overall and mental health impairments were less common.

D/deaf people were more likely than average to consider themselves disabled (57% vs 54%).

Age may be partly behind some differences in this section. 76% of the sample of D/deaf people were 55 years or older.

Inactivity levels for D/deaf people are similar to disabled people overall with 38% doing less than 30 minutes of activity a week (2). This has increased from 36% before the pandemic.

Research findings

Participation and experience

D/deaf people were more likely to agree that they were given the opportunity to be as active as they want to be (46% vs 41% of all disabled people).

D/deaf people were less likely to take part in sport and physical activity alone (51% vs 59%) and prefer to take part with a mixture of disabled and non-disabled people (43%).

They were more likely to prefer someone to organise or lead the activity compared to disabled people overall (28% vs 21%).

Similar to disabled people, three-quarters had not taken part in an organised sport or physical activity session in the last year (75%).

D/deaf people who had participated in physical activity were most likely to have taken part in individual exercise or physical activity (67%).

Similar to disabled people overall and all other impairment types, D/deaf people were most likely to take part in outdoor green spaces (48% vs 43%) and preferred to do so (50% vs 46%).

Attitudes and perceptions

Two thirds D/deaf people want to be more active (65% vs 77% of all disabled people).

D/deaf people were less likely to agree they enjoyed the last time they took part in sport or physical activity (62% vs 66%).

D/deaf people were more likely to agree that sport is for 'someone like me' (34% vs 30% of all disabled people).

Motivations

Similar to other disabled people, they were most motivated to be active to improve/maintain their physical health (65% compared to 64%).

D/deaf people were less likely to be motivated by reasons related to health (for example, to lose or maintain weight or to get fit).

73% of D/deaf people agree being active could help them feel less lonely.

Barriers

D/deaf people were less likely to say their impairment or condition stops them being as active as they would like compared to other disabled people (67% vs 80%). They were more likely to say this is because their impairment or condition makes them feel less confident (47% vs 34%).

D/deaf people were more likely to say the following things stops them being active:

- Getting older (49% vs 31% of all disabled people).
- Lack of confidence (27% vs 20%).
- Being unaware of opportunities (13% vs 8%).
- Lack of available equipment (7% vs 3%).

Similar to disabled people overall, 41% of D/deaf people say the increased cost of living reduced how active they are (vs 37%) and 55% say it reduced how much they socialised (vs 60%).

Advice and information

Advice on being active from healthcare professionals is slightly less important for D/deaf people. 63% say they would listen to GPs, doctors or nurses.

D/deaf people were more likely than disabled people overall to listen to advice from social workers/care support staff/personal assistants (9% vs 6%).

They were less likely to find information about sport or physical activity opportunities from social media (17% vs 23%) and more likely to find information from other disabled people (13% vs 10%) and supporters/carers/befrienders (9% vs 6%).

Support and opportunities

The top forms of support that would help D/deaf people to be active were similar to disabled people overall.

- Support to improve physical health (43%).
- Greater awareness of activities (33%).
- Financial support (24%).
- Support to improve mental health (23%).

When asked what the government should focus on to get more people active, D/deaf people choose similar answers to disabled people overall. They were more likely to say the government should upskill sport and activity providers to support disabled people (38% vs 35%) and improve transport links (35% vs 32%).

D/deaf people were more likely to disagree they see 'people like me' working in sport and physical activity (60% vs 55%).



Summary and recommendations

- Like previous years, D/deaf people have some of the highest inactivity levels in our society. Age and other impairments are likely to be important factors to consider here – using a person-centred approach is as important as ever.
- While D/deaf people are more likely to feel being active is 'for someone like me' and they have opportunities to be active, they are more likely to disagree that physical activity is inclusive and accessible for them.
- For D/deaf people who are active, they are more likely to prefer taking
 part in organised activity but are actually more likely to have taken
 part in individual activity. Sharing positive stories in communities will
 help create inclusive environments where everyone feels welcome.
 They are also more likely to want to take part in outdoor green spaces.
- D/deaf people's main motivations to be active are similar to disabled people overall, to maintain physical health and help reduce loneliness.
- D/deaf people are more likely to say lack of confidence, opportunities and available equipment stops them from being active. They are more likely to prefer advice on being active from support workers/care workers and other disabled people. There is a need to increase awareness of opportunities and upskill the sport and physical activity workforce to be more inclusive and accessible.
- UK Deaf Sport provide further information and advice on including D/deaf people in sport and physical activity.



Important to look at all of my conditions and disabilities and give suitable activities for my body as a whole since what may help with one ailment conflicts with others.

Person with a hearing impairment and long-term health condition

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7. People with visual impairments

Most people with visual impairments have more than one impairment (95%, higher than 77% for disabled people overall). The most common additional impairment was mobility (56%), followed by breathing or stamina (42%) and long-term pain (41%). Hearing and learning impairments were also more common.

Similar to disabled people overall, over half (53%) think of themselves as disabled (compared to 54% of all disabled people).

The age profile was similar to the overall sample, with 65% being over 50. People with visual impairments were more likely to be in a lower social grade.

Inactivity levels for people with visual impairments are less than for disabled people overall (23% vs 41%). This is similar to levels before the pandemic (21%).

Research findings

Participation and experience

41% of people with visual impairments say they have the opportunity to be as active as they want to be. This is the same as disabled people overall.

Similar to disabled people on average, they usually take part in sport, exercise or physical activity alone (50%). They would prefer to take part in inclusive activities with a mixture of disabled and non-disabled people (44%).

26% of people with visual impairments have taken part in an organised activity session in the last year (26% vs 22%).

People with visual impairments who had taken part in physical activity were most likely to have taken part in individual exercise or physical activity (65%).

Like other impairment types, people with visual impairments were most likely to take part in outdoor green spaces (48%). This is the same as their preference (50%).

They were more likely than disabled people in general to want to be active indoors at a community centre or local building (21% vs 13%).

Attitudes and perceptions

59% of people with visual impairments want to be more active. This is lower than for disabled people overall (77%).

People with visual impairments were less likely to agree they enjoyed the last time they took part in sport or physical activity (61% compared to 66% of disabled people).

This group were more likely to disagree physical activity and exercise is for 'someone like me' (27% vs 25% of all disabled people).

Motivations

Motivations to be active were similar to those of disabled people overall. The top motivations were to improve or maintain physical health (59%) and to improve or maintain mental health (47%).

People with visual impairments were less likely to say they would take part to lose or maintain weight (36% vs 48%). This motivation has decreased from last year (49%).

80% of people with visual impairments agree being active could help them feel less lonely.

People with visual impairments were more likely to say help with transport or assistance costs would make the most impact on them being active (26% vs 17%).

Barriers

72% say their impairment or condition stops them being as active as they would like. Contrasting to last year, this is lower than for disabled people overall (80%). This was more likely to be related to symptoms making it hard to be active (93%).

Similar to last year, people with visual impairments were more likely to report a lack confidence to take part or contact a group or facility (36% compared to 20%).

People with visual impairments were more likely to say the increased cost of living reduced how active they were (47% vs 37%).

Since the start of the pandemic, people with visual impairments were more likely to have less support to be active from family and friends (29% vs 21%), from support workers and assistants (23% vs 16%) and people working in sport and physical activity (23% vs 13%).

Advice and information

The most common information source about sport or physical activity opportunities for people with visual impairments were GPs, doctors or nurses.

People with visual impairments were more likely to listen to advice from supporters/carers/befrienders (11% vs 8%).

They were more likely to find information from national charities or organisations (18% vs 9%), other disabled people (15% vs 10%) and supporters/carers/befrienders (15% vs 6%).



Support and opportunities

The top forms of support for people with visual impairments that would help them to be more active were:

- Support to improve physical health (52% vs 44% of all disabled people).
- Greater awareness of activities (30% vs 35%).
- Support to improve mental health (30% vs 27%).

They were more likely than disabled people overall to say other types of support would help them to be more active. This included 'support getting to activities' (20% vs 15%) and 'seeing more disabled people working in physical activity roles' (15% vs 12%).

When asked what the government should focus on to get more people active, the top choice was similar to all disabled people: making sure activities are affordable (65% vs 64%). They were also more likely to say the government should focus on improving transport (47% vs 32%), listening to the public on how they want to be active (45% vs 38%) and tackling discrimination (33% vs 25%).

People with visual impairments would like to be more involved in influencing activities (44% vs 33%).

Summary and recommendations

- The inactivity levels of people with visual impairments have nearly returned to pre-pandemic levels. However, nearly two-thirds want to be more active. Continuing to encourage and support this group in sport and physical activity remains important.
- People with visual impairments feel health is important, as maintaining physical and mental health are the top motivations to be physically active. They are most likely to seek advice and information from healthcare professionals and also are more likely to seek information from national charities or organisations, other disabled people and supporters/carers.
- Similar to last year, practical barriers like transport, a lack of support, and accessibility are more common for people with visual impairments. These barriers need to be considered and addressed when designing activities. People with visual impairments are more likely to want to influence activities, co-production can help make activities accessible and inclusive.
- Tackling discrimination, challenging perceptions, and increasing representation within the workforce will help to create a culture change where everyone feels welcome.
- British Blind Sport provides online coaching courses and resources to assist those who are delivering sporting sessions with support and guidance on how to include people with visual impairments.
 British Blind Sport also provide research and insight from people with visual impairments.



I think the one thing that definitely has to be built upon within disability sports is the role models... everybody needs to have a person to look up to, and it's good to have that mainstream person to look up to, but obviously, they've not got that lived experience... there's an inspiration behind it.

Person with a visual impairment

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8. People with social or behavioural impairments

Almost all people with social or behavioural impairments have more than one impairment (99%). The most common additional impairment was mental health conditions (84%), followed by long-term pain (47%), breathing (45%) and mobility (42%). Learning, speech, and memory impairments were also more common.

They were most likely to think of themselves as disabled (67% compared to 54% of all disabled people).

People with social or behavioural impairments who took part in the survey were more likely to be younger than the overall sample, with 22% under 30 years old.

People with social or behavioural impairments were less likely to be inactive than other disabled people. 31% are doing less than 30 minutes of activity each week (2). This is lower than the previous year (40%), and less than disabled people overall (41%).

People with social and behavioural impairments take part in sporting and fitness activities at a similar level to disabled people overall (21.5% doing sporting activities at least twice in the last 28 days, and 19.6% for fitness activities). They were more likely to be taking part in active travel – 35% at least twice in the last 28 days, vs 26.3% of all disabled people (2).

Research findings

Participation and experience

People with social or behavioural impairments were less likely than other disabled people to agree that they are given the opportunity to be active as they want (33% vs 41%).

They were more likely to take part in sport, exercise or physical activity alone (72%).

Like other impairment types, people with social or behavioural impairments were most likely to take part in outdoor green spaces (47%). This is the same as their preference (51%).

They were more likely than disabled people in general to want to be active indoor at a leisure or sports centre (46% vs 32%), outdoors at a leisure or sports centre (21% vs 12%), and at a sport-specific facility or club (18% vs 8%).

Attitudes and perceptions

80% of people with social or behavioural impairments would like to be more active (similar to 77% of disabled people overall).

68% enjoyed the last time they took part in a physical activity (similar to 66% disabled people overall).

People with social or behavioural impairments were less likely to report very high life worthwhileness (6% vs 16%), and very low anxiety (11% vs 21%).

They were more likely to say sport is for 'someone like me' (38% compared to 30% of disabled people), but less likely to feel physical activity is for 'someone like me' (47% vs 50%).

Motivations

The top motivation for people with social or behavioural impairments is to improve or maintain mental health (67% vs 45% of all disabled people). This top motivation differs from most other groups, who are most likely to be active to improve or maintain physical health.

Common motivations for people with social or behaviour impairments were to:

- Feel good about myself (46%).
- Give me something to do (29%).
- Learn a new skill (15%).

Barriers

Like other disabled people, people with social or behavioural impairments were most likely to say that their impairment or health condition stop them being as active as they would like (67% vs 80% of all disabled people). They were more likely than other disabled people to say this was related to feeling less confident (54% vs 34%), bad experiences in the past (42% vs 21%) and negative attitudes from others (27% vs 10%).

They were more likely than other disabled people to say a lack of confidence (53% vs 20%) was a barrier, as well as finances/lack of money (42% vs 21%).

For people with these type of impairments who receive financial assistance, the fear of benefits being taken away was more likely to stop them from being active (63% vs 37%).

Since the pandemic, people with social or behavioural impairments were more likely to have experienced being less able to be active because of the following:

- Changes to their mental health (72% vs 42% of all disabled people).
- Being more socially isolated (76% vs 54%).
- Having less support from friends and family (34% vs 21%).
- Having less support from paid support workers (32% vs 16%).

Advice and information

Sport and activity professionals were more likely to be a preferred source of advice on being active (34% vs 22% of disabled people overall). They were more likely to prefer advice from carers or supporters than other disabled people (17% vs 8%).

Social media is a more common source of information for people with social or behavioural impairments (35% vs 23% of disabled people overall). Websites and friends and family are other common choices.

Support and priorities

People with social or behavioural impairments were most likely to say 'support to improve mental health' would help them to be active (52% vs 27% of all disabled people). They were more likely than other disabled people to say: 'financial support' and 'better facilities and environments' would help them to be active.

When asked what the government should focus on to get more people active, people with social or behavioural impairments were more likely to say: 'improving outdoor spaces' (56% vs 41%), 'listening to and engaging with the public on how they want to be active' (50% vs 38%), and 'tackling discrimination in sport and physical activity' (38% vs 25%).

They were more likely to agree that they'd like to be involved in influencing the types of activities they take part in (42% vs 33%), and to strongly agree disabled people should have more of a say in the policies they are involved in (89% vs 81%).



Summary and recommendations

- People with social or behavioural impairments may be more active and have more positive attitudes about being active than other disabled people. However, they can face more barriers – including a lack of confidence, a lack of support, attitudes from others, the impact of the pandemic on mental health and financial barriers.
- Positively, people with social and behavioural impairments show a keenness to influence activities and policies that affect themselves and other disabled people. They're also more likely to want advice from sport and physical activity professionals.
- Engaging with people on an individual level, and empathising
 with confidence or wellbeing challenges, will help people with
 social or behavioural impairments take part. Challenging
 perceptions about neurodiversity and showing your enthusiasm
 is important. Involve a broad range of people in influencing
 and designing activities.



Make activities more inclusive for neurodivergent people.

Person with a social or behavioural impairment



(Coaches) should understand everyone is different in what they can or cannot do. They need to be trained

Person with a social or behavioural impairment

in understanding the needs of disabled people.

"



9. Appendix

Defining disability and activity

Our survey determined whether respondents were disabled if they answered 'yes' to both of these questions:

- 'Do you have any long-term health conditions, impairments or illnesses? This could include, for example, physical, sensory, learning, social, behavioural, or mental health conditions or impairments.
 Long-term means that they have lasted, or are expected to last, 12 months or more.
- 'Do these health conditions, impairments or illnesses have a substantial effect on your ability to do normal daily activities?'

We defined physical activity as the number of days in a normal week people did 30 minutes or more of physical activity that was enough to raise breathing rate. This includes sport, exercise and brisk walking or cycling for fun, or to get to and from places.

Sample

Two sample sources were used. People who had completed Sport England's Active Lives Survey in the last two years and agreed to take part in further research, and people from an independent research panel. For disabled people, 198 responses were from the Active Lives sample, and 800 from the panel.

The profile of the sample was representative of the UK profile of disabled people across key demographics and is consistent with previous surveys.

For more information, view the full Annual Survey report on Activity Alliance's website.

References

- (1) 73% of the sample were 50 years or older. This is slightly higher than the 61% of disabled people in the UK who are over 50.
- (2) **Sport England**, Active Lives Adult Survey November 2020-21 (2023).







disability inclusion sport



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This document is also available in Word format. Please contact us if you need more support. Report published in September 2023.

Photo credit: British Blind Sport, CP Sport and Dwarf Sports Association UK.

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