



Activity Alliance Annual Disability and Activity Survey 2019-20

Research Briefing



Introduction

We believe everyone deserves the right to be as active as they choose to be. Yet, disabled people are twice as likely as non-disabled people to be physically inactive. This is not fair or right.

This is a research briefing for Activity Alliance's Annual Disability and Activity Survey 2019-20. The survey looks at perceptions and experiences of sport and active recreation among disabled and non-disabled adults (16+). It was conducted by IFF Research using an online survey from April to July 2019. 1,182 disabled and 1,136 non-disabled adults took part.

It is intended to complement Sport England's Active Lives Adult Survey with greater detail on perceptions, experiences and issues of importance to disabled people. Active Lives is the authoritative source of data on activity levels and participation, among other areas, and can be found at sportengland.org.uk.

In this study, we defined a disabled person as anyone who had a long-term health condition, impairment or illness that has a substantial effect on normal daily activities. We also asked disabled respondents if they identified as 'disabled' to compare results. Around half (53%) did.

The findings provide robust insight to Activity Alliance and the wider sector. They will support organisations to create opportunities that enable more disabled people to be active.

**The full report, including
a detailed executive summary
is available on our website:**

activityalliance.org.uk/research

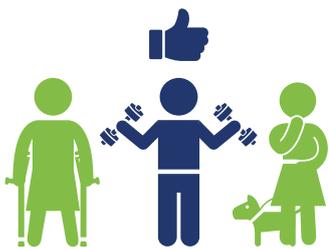
Key findings



Four in five disabled people would like to be more active.



Two in five disabled people feel they are given the opportunity to be as active as they would like to be.



One in three disabled people agree that 'sport' is for someone like them.



Seven in ten disabled people are motivated to be active to improve or maintain their physical health.



Two in five disabled people said a fear of losing benefits prevents them from trying to be more active.



Two in three disabled people said they would listen to GPs, doctors and nurses about taking part in activity.

Summary of main findings by topic



Wellbeing

Disabled people consistently reported poorer wellbeing than non-disabled people.

- Disabled people were twice as likely to say they feel frequently lonely (22% vs 10%).
- Two in five (43%) disabled people rated their overall health as poor or very poor.
- Across every wellbeing measure, disabled people who currently received benefits or financial assistance scored lower than those who had never received them.

Perceptions of sport and active recreation

Disabled people had a less positive perception of, and relationship to, sport and active recreation compared to non-disabled people.

- Disabled people were less likely to have enjoyed their most recent experience of being active (67% vs 82%).
- Disabled people were less likely to want to take part in competitive sport (13% vs 29%).
- Disabled women were particularly unlikely to think sport was for them and to want to take part competitively.

Barriers and motivators for activity

Disabled people were motivated to be active by physical and mental wellbeing, but still feel their impairment is a significant barrier. Previous qualitative research has indicated that many of these barriers may be psychologically driven (Activity Alliance, Understanding the barriers to participation, 2012).

- More than half (54%) were motivated to lose or maintain weight and almost half (45%) to get fit. Other key motivators included supporting mental health (44%) and feeling good about themselves (37%).
- Most disabled people (84%) reported that a long-term health condition, impairment or illness stopped them being as active as they would like.
- Two in five (41%) disabled people under the age of 40 cited finances as a barrier.



Types of activity and participants

- Disabled people who take part were most likely to do an ‘individual’ activity, for example jogging or going to the gym (67%).
- Half of disabled people (50%) said they currently take part alone. They were evenly split between wanting to be active with a mix of disabled and non-disabled people (25%), alone (29%) or having no preference (29%).
 - This may have been informed by the fact that just one in four (24%) disabled people had taken part in an organised activity session in the last year.

Organised activity sessions and leaders

Just one in four (24%) disabled people had taken part in an organised activity session in the last year. Disabled people considered the following aspects of activities most important:

- The activity session is welcoming (77%)
- The activity is held in a convenient location (72%)

Disabled people generally found the following more important than non-disabled people:

- People with different levels of ability feel included (69% vs 61%).
- Any questions or needs can be discussed in private before starting an activity (66% vs 49%). Disabled women were the group most likely to find this important (70% vs 57% average across non-disabled women, disabled men, and non-disabled men).

Information and advertising

Disabled people were more likely than non-disabled people to find the following important:

- Advertising is reassuring that the activity is suitable for different levels of ability (60% vs 47%).

Among disabled people who had attended an organised activity session in the last year:

- Four in five (79%) agreed they could find all information needed before taking part.
- They were least likely to agree disabled people were visible and included in advertising.

Disabled respondents used a range of channels to find information about sporting activities:

- Almost half (45%) of disabled respondents chose websites.
- Around a third (35%) of disabled people chose medical practices and professionals (vs 13% of non-disabled people).

Benefits and financial assistance

- Seven in 10 (70%) disabled respondents who received benefits said they rely on this financial assistance to be active.
- A third (34%) of benefit recipients said they would try to be more physically active if their benefits could not be taken away.

Key recommendations

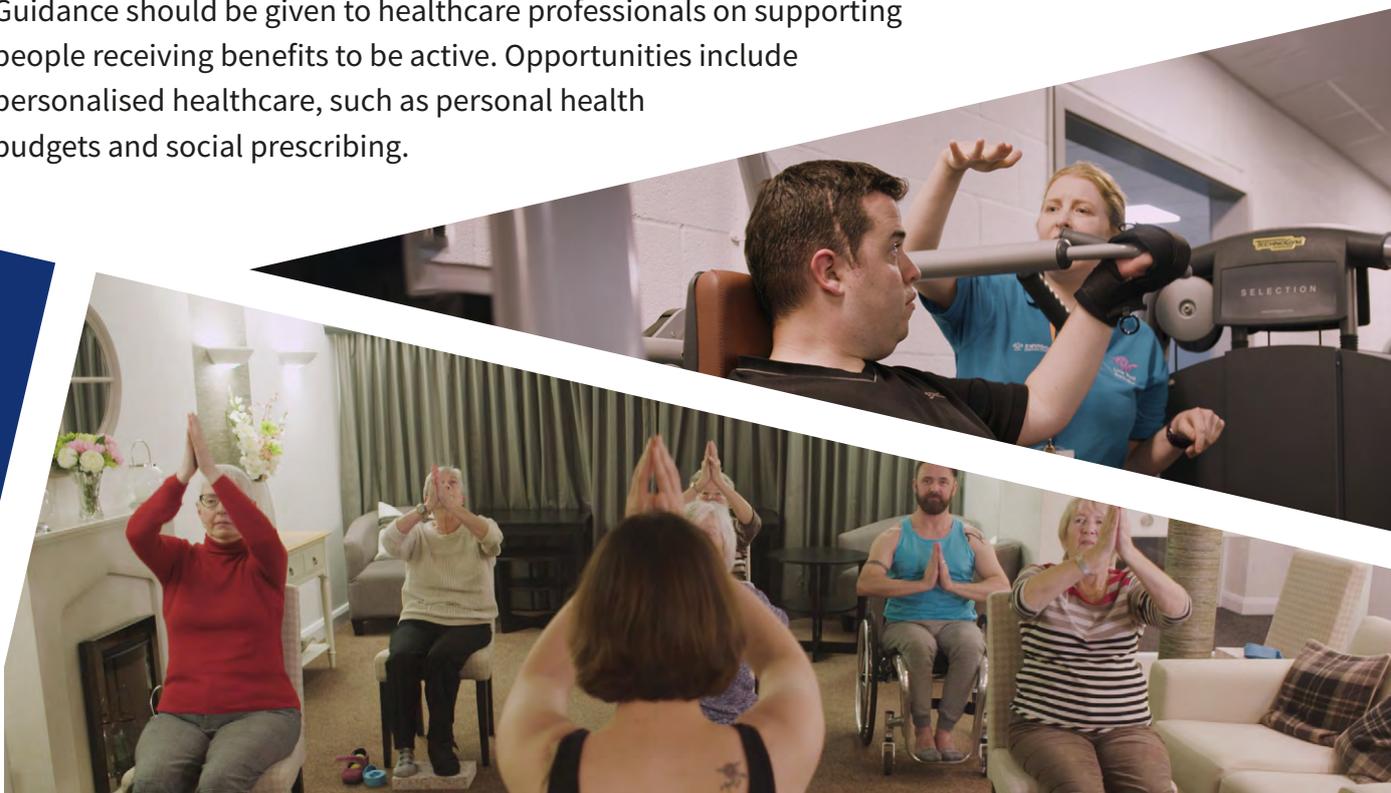
This first Annual Disability and Activity Survey reinforces that disabled people remain substantially more likely than non-disabled people to be inactive. But we now have greater understanding of why that might be. The study highlights three key recommendations on how we may be able to engage and support disabled people to be active more effectively.

1. Address the wider determinants of inactivity

Reinforcing our previous research (The Activity Trap, 2018), this study highlights that a large proportion of disabled people fear losing benefits if they were to be more active. People in lower socioeconomic groups are also less likely to have positive perceptions of activity and its outcomes.

There may be a role for campaigns such as We Are Undefeatable and programmes like Moving Healthcare Professionals to address issues around benefits and finances. Many disabled people feel their impairment is a barrier to participation. Healthcare professionals can play an important role in challenging these perceptions.

- Issues such as benefits and finances must be taken into account by providers of activity.
- Healthcare professionals must play a role in reassuring disabled people about being active while having an impairment or health condition.
- Guidance should be given to healthcare professionals on supporting people receiving benefits to be active. Opportunities include personalised healthcare, such as personal health budgets and social prescribing.



2. Design and lead a choice of accessible activities

Organised activity sessions are crucial. But they may not be what all disabled people are currently accessing or would like to access. Among disabled people who favour a group setting, sessions with a mix of disabled and non-disabled people remain crucial. Demand for impairment-specific activity must also be met.

- Offer a range of accessible options:
 - Ensure that individual activities are inclusive and accessible. Settings might include parks, gyms and leisure centres or at home via apps and videos.
 - Represent and showcase individual opportunities in campaigns and via channels that are important to disabled people.
- People with mental health problems may need particular support to feel included.
- Those delivering activity must be offered training and support that enables them to provide truly accessible options.
- Co-production is key, and those delivering activity must work with disabled people.

3. Challenge perceptions through inclusive and accessible communications

More than half of disabled people cite their impairment as the single barrier they face to being more active. Qualitative research has indicated these concerns may be psychologically driven. Communications must be accessible and demonstrate that taking part is possible.

Activity Alliance's 10 principles show how this can be done in practice, but in particular:

- Advertising must focus on reassuring disabled people. Show that activity sessions will be welcoming and that there will be opportunity to discuss any needs before the session.
- Materials should also be clear about the ability level that will be catered for.
- Disabled people should be able to '**see themselves**' in advertising and have their voices **heard** through clear opportunities for feedback.
 - Providers should be aware that disabled women may need particular reassurance.
- Language in materials must be attractive to the audience. Sport and competition may be off-putting to many disabled people.
- Use a range of channels, considering accessibility and importance of each to the audience. Websites are crucial, but traditional media remains important.
- Challenging perceptions among disabled and non-disabled people is key, including via campaigns like Who says? from Activity Alliance.





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