



**activity
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Annual Disability and Activity Survey

2020-21

Full report

February 2021



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1. Introduction and method

Introduction



- This is the second year of our [Annual Disability and Activity Survey](#). 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 [Sport England's Active Lives Adult Survey](#) 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 the full report that presents all data from the survey and commentary on the data. [A shorter summary report is available on our website](#). The survey questions are available by request.
- Demographic differences and differences by impairment number and type are explored in the commentary slides after each chart. Differences are included where they are significant and had a base of over 30 for each group.

Method and sample



- Conducted on behalf of Activity Alliance by IFF, an independent research agency.
- 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.

2. Understanding the report and definitions used

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.

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.

3. Activity levels and perceptions before COVID-19

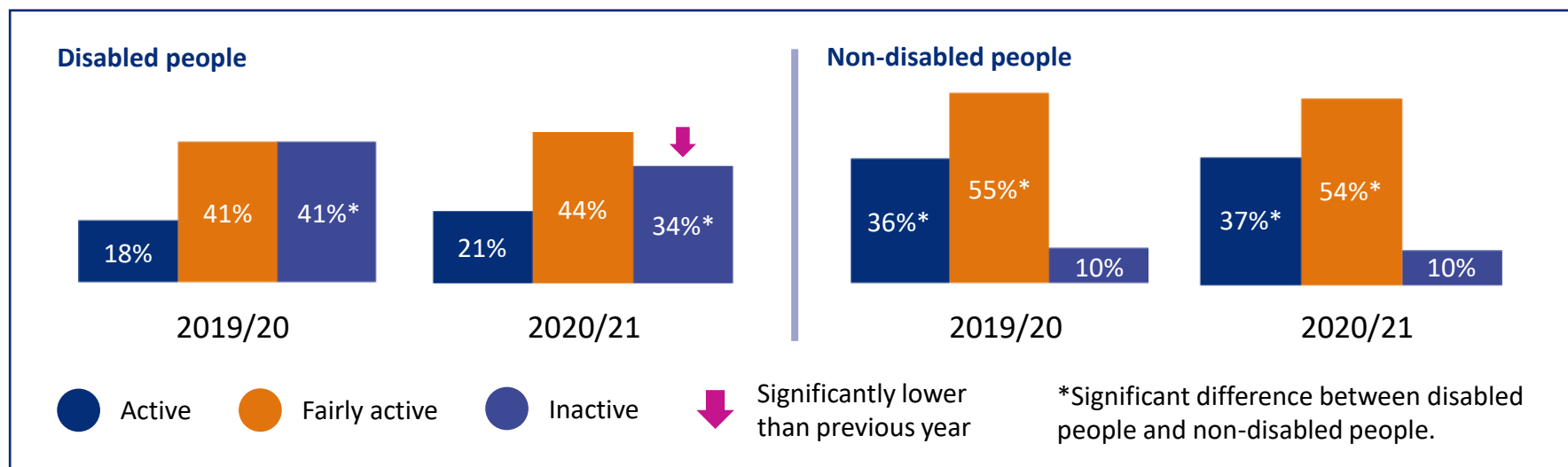
Overall activity levels (before COVID-19)



When asked about their activity levels prior to the COVID-19 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: C1a Before the coronavirus outbreak, on how many days do you do a total of 30 minutes or more of physical activity that is enough to raise your breathing rate? Base: Disabled and non-disabled people that reported their activity levels. 2020/21: disabled (n=997); non-disabled (n=941). 2019/20: disabled (n = 1,157); non-disabled (n = 1,117).

Please refer to page 7 for more information on how activity levels were calculated in this survey.

Overall activity levels (before COVID-19) – Commentary



Disabled people were significantly less likely to be inactive (34% in 2020/21 compared with 41% in the 2019/20 survey report). The proportion of disabled people reporting doing no activity at all remained unchanged (21% in 2020/21 compared to 24% in 2019/20 survey report). Whereas disabled people were four times more likely to be inactive than non-disabled people in the 2019/20 survey (41% vs 10%), the difference has narrowed this year (34% vs 10%).

Despite these positive findings, differences between disabled and non-disabled people remain. Non-disabled people were more likely to be fairly active (54% vs 44% of disabled people) and active (37% vs 21%).

As in the 2019/20 survey report, disabled people were as likely as non-disabled people to do 30 minutes or more of physical activity one or two days a week (21% vs. 22%). However, disabled people were significantly less likely to exercise at a higher frequency (three or more days per week – 43% of disabled people vs 67% of non-disabled people).

Differences between demographic groups and impairment types

Reversing the situation found last year, older disabled people were less likely to be active (17%, compared with 21% on average). Differences between disabled and non-disabled people were also more pronounced within the older age group. While last year's report found no significant differences within the oldest age category, findings from 2020/21 show that almost half (47%) of non-disabled people over 70 were active compared with less than one in five (17%) disabled people in this age group. By contrast, a similar proportion of disabled people (24%) and non-disabled people (31%) under the age of 30 were active.

Differences by impairment type and number were comparable across years. Disabled people with the following characteristics were more likely to be inactive; those with three or more impairment types (41%, compared with 34% on average), those with a chronic condition (41%), and those with mobility impairments (43%).

The 2019/20 survey report showed disabled people in lower social grades were more likely to be inactive. Around two-in-five (38%) of disabled people in skilled and semi-skilled manual labour positions were inactive compared to one in five (22%) of those higher and intermediate managerial positions.

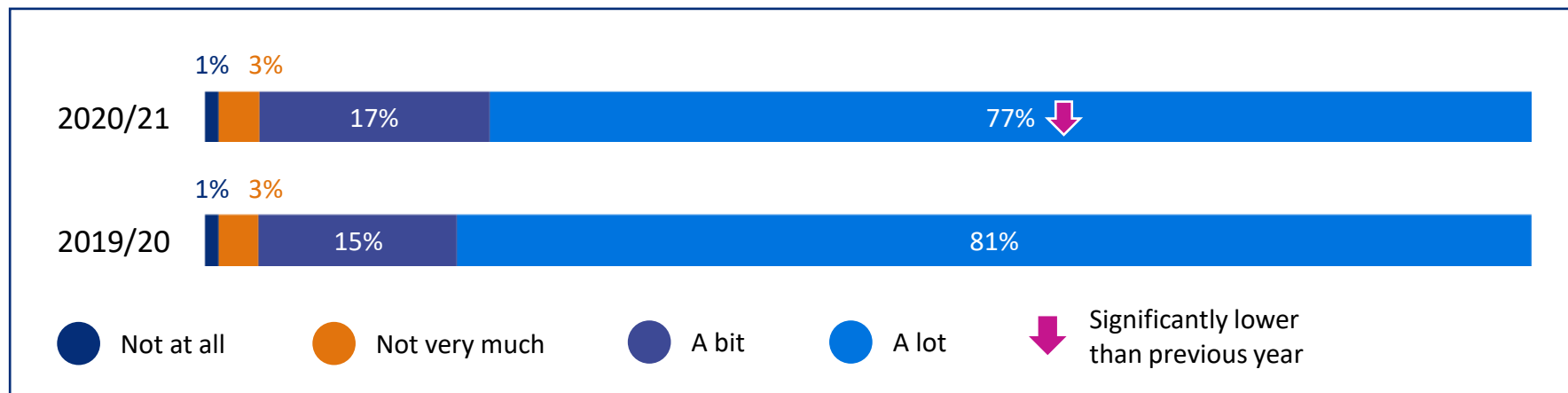
Impact of health condition, impairment or illness on ability to be active



Like in 2019-20, most disabled people say their health condition affects their ability to take part in sport or physical activity. Reflecting findings from last year, inactive and older disabled people were most likely to see their health condition as a barrier to being active.

Figure 2

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: B6 How much do your health conditions, impairments or illnesses affect you doing sport or physical activity (if you wanted to)?

Base: All disabled people.

Impact of health condition, impairment or illness on ability to be active – Commentary



The vast majority (95%) of disabled people said that their health condition affects them doing sport ‘a bit’ or ‘a lot’. This is similar to the 2019/20 survey report (96%). However, significantly fewer reported that their health condition affected them doing sport or physical activity ‘a lot’ this year (77% compared to 81% in the 2019/20 survey report).

Differences between demographic groups and impairment types

In line with findings from 2019/2020, disabled people with the following characteristics were more likely to say their health condition affects them doing sport or physical activity a lot:

- Inactive disabled people (92% compared to 77% on average),
- Older disabled people (87%),
- Mobility (90%) and dexterity (86%) impairments,
- Those with three or more impairments (87%).

Unlike in the 2019/20 Annual Disability and Activity Survey, there were no differences by socioeconomic groups this year.

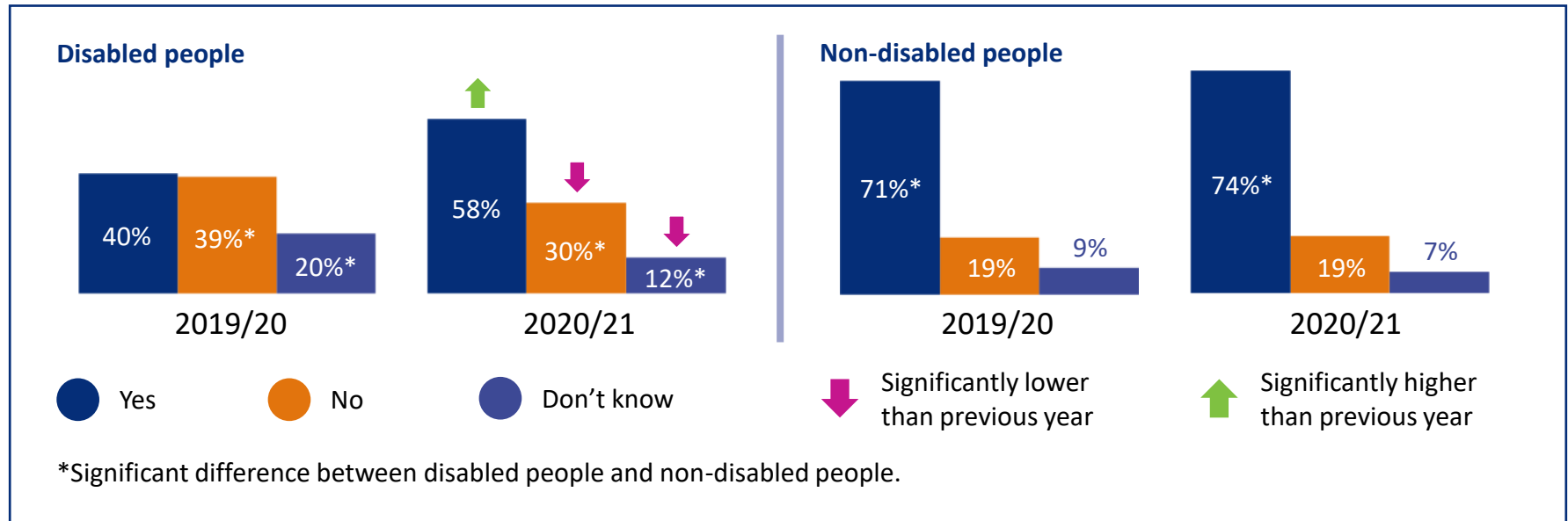
Opportunity to be active



Disabled people were more likely to feel they had the opportunity to be physically active in the 2020/21 survey report. Within the disabled group, women and younger people were more likely to say they are not given the opportunity to be as physically active as they would like.

Figure 3 (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: C6 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.



Nearly three in five (58%) disabled people felt they were given the opportunity to be as physically active as they wanted to be before the COVID-19 pandemic. This is an increase from two in five (40%) in 2019/20. This increase could be in part due to the retrospective nature of the question. However, there is a lack of the same effect among non-disabled people, and similar positive trends are observed in other questions. This indicates a meaningful positive change among disabled people prior to the pandemic.

Despite these positive developments, disabled people still feel they have less opportunity to be active compared to non-disabled people (74% of non-disabled people reported having the opportunity to be as physically active as they want to be). However, the gap between the two groups was less pronounced this year (down from 31 percentage points in 2019/20 to 16 percentage points in 2020/21).

Differences between demographic groups

Reflecting trends from the 2019/20 Annual Disability and Activity Survey, the following groups of disabled people reported they are not given the opportunity to be as active as they would like:

- Disabled women (34% vs 23% of disabled men),
- Younger disabled people (36% vs 25% of older disabled people),
- Disabled people who reported feeling dissatisfied with life (39% vs 20% of disabled people satisfied with life).

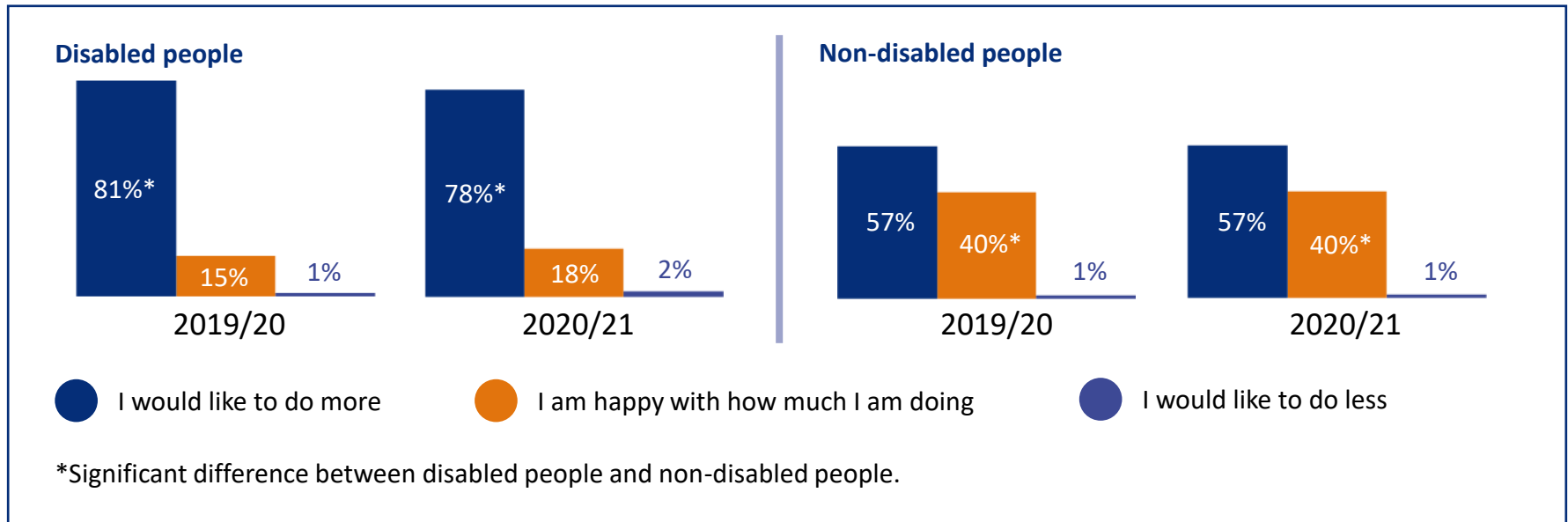
Happiness with activity level



In line with the findings from 2019/20, most disabled people would like be more active. Younger disabled people were less likely to say that they would like to do more physical activity compared with last year's survey.

Figure 4 (during pandemic)

Proportion of disabled and non-disabled people who would like to do more, the same, or less activity then they are currently doing in 2019/20 and 2020/21.



Q: C3. How do you feel about the amount of physical activity you do now? Base: All disabled and non-disabled people.



In both 2019/20 and 2020/21, only around one in six (15% and 18%) disabled people reported that they are happy with how much physical activity they are doing. The majority would like to be more active. The gap between disabled and non-disabled people also remains consistent with last year; non-disabled people were still more than twice as likely to be happy with the amount of exercise they do (40% compared to 18% of disabled people).

Differences between demographic groups and impairment types

Differences between groups of people generally echoed findings from 2019/20, but there were some key changes. In contrast to findings from the 2019/20 survey report, younger disabled people were less likely to report that they'd like to do more physical activity compared with other age groups. Less than three in five (56%) younger disabled people reported they would like to do more this year (compared with 78% of disabled people on average).

In line with findings from last year, disabled people with three or more impairments were significantly more likely to report they would like to do more physical activity (80% vs 70% of people with one impairment). Disabled people that were inactive during COVID-19 were also more likely to report this than active disabled people (82% vs 54%).

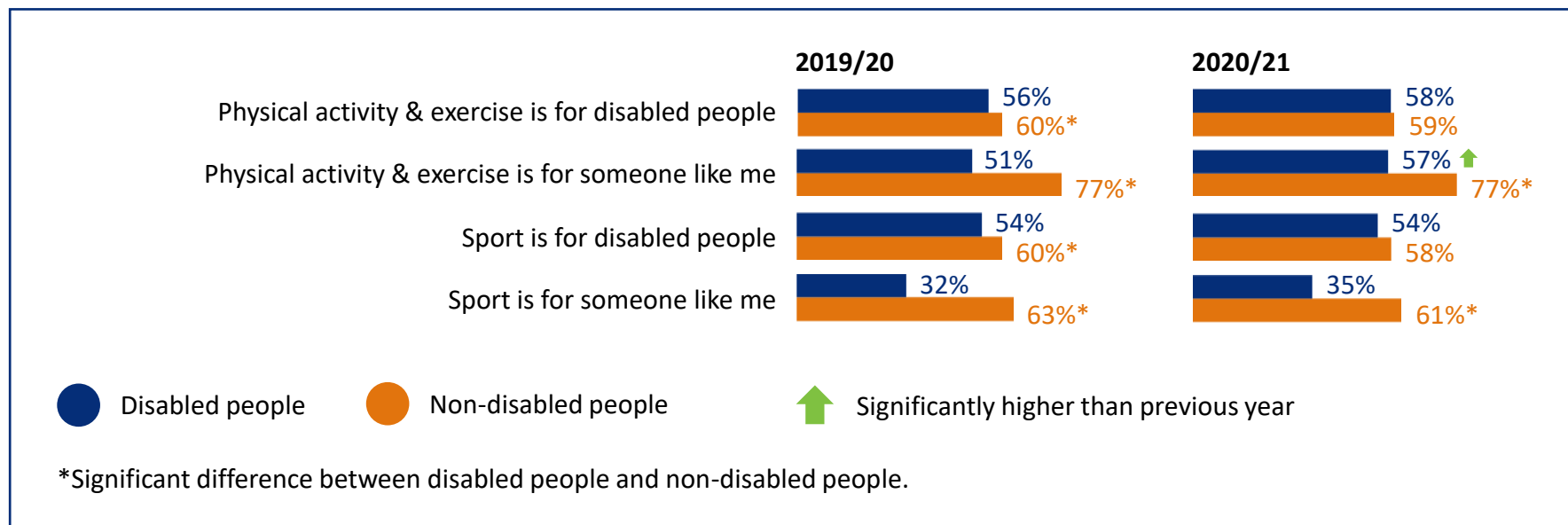
Perceptions of sport and physical activity: who is it for?



There were fewer differences this year between disabled and non-disabled people's perceptions of who sport and physical activity are for. Disabled people were still less likely than non-disabled people to feel that **sport** is for someone like them, but more likely to feel **physical activity and exercise** is for them.

Figure 5 (during pandemic)

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



Q: C6. How much do you agree or disagree with the following comments about sport and physical activity...?
 Base: All disabled and non-disabled people.

Perceptions of sport and physical activity: who is it for?

– Commentary



Disabled and non-disabled people's views of who sport and physical activity are for were more similar this year compared with 2019/20. For two of the four statements about who sport and physical activity are for ('physical activity and exercise are for disabled people'; and 'sport is for disabled people'), significant differences between disabled and non-disabled people in the 2019/20 survey report were no longer present.

Disabled people were significantly more likely to agree with the statement 'physical activity and exercise is for someone like me' in the 2020/21 survey report (57%, compared with 51% in 2019/20). This highlights a positive trend in disabled people's perceptions of accessibility to sport and physical activity.

Despite these positive changes, disabled people still have more negative perceptions than non-disabled people, especially with the word 'sport'. As referenced in the 2019/20 Annual Disability and Activity Survey report, this may, in part, reflect differences in associations with the sport (fast-paced, competitive) and physical activity (health, leisure).

Differences between demographic groups

Unlike in the 2019/20 survey report, disabled people's views on who sport and physical activity are for did not differ by ethnicity. For example, Black, Asian and Minority Ethnic (BAME) disabled people were just as likely as White disabled people to disagree that physical activity is for disabled people (22% vs 15%). This is unlike in 2019/20, when BAME disabled people were more significantly more likely to disagree (34% vs 19%).

Differences by socioeconomic factors did remain, however, with managers more likely than those in manual positions to have a positive view of sport and physical activity. For instance, nearly half (48%) of disabled people in higher and intermediate managerial positions agreed that sport is for someone like them, compared with slightly more than a third (37%) of skills and semi-skilled manual workers.

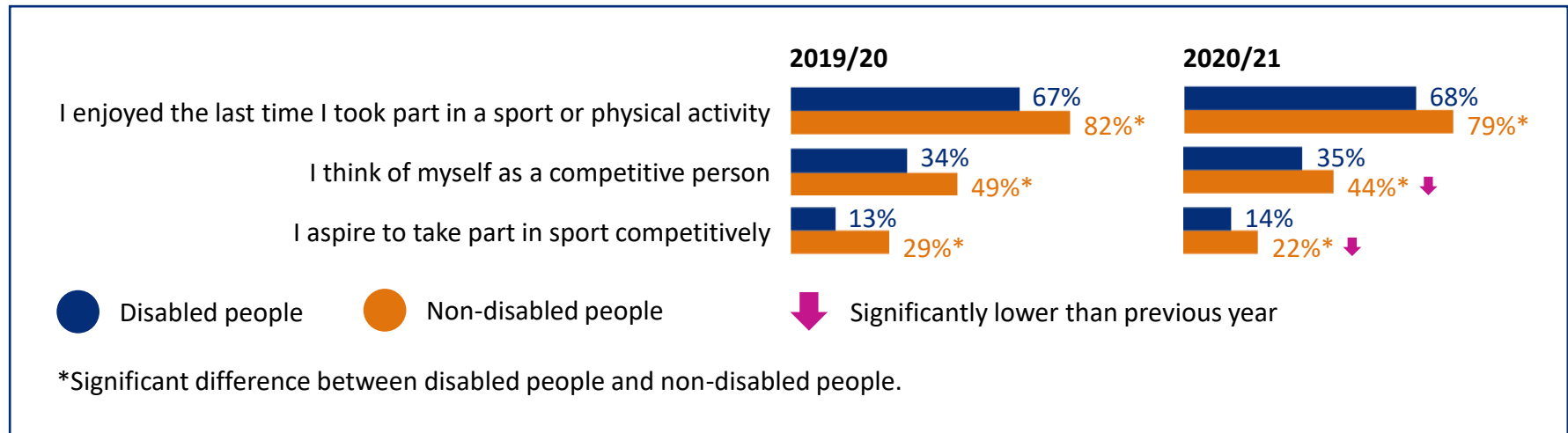
Perceptions of sport and physical activity: enjoyment and competitiveness



The gap between disabled and non-disabled groups in their enjoyment of activities and their views on competitive sport has narrowed, driven by changes among the non-disabled group. As in the 2019/20 survey, disabled women were less likely to see themselves as competitive.

Figure 6

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



Q: C6. How much do you agree or disagree with the following comments about sport and physical activity...?

Base: All disabled and non-disabled people.

Perceptions of sport and physical activity: enjoyment and competitiveness – Commentary



Disabled people's enjoyment of sport and physical activity, as well as their relationship to competitive sport, has remained stable between 2019/20 and 2020/21. While non-disabled people were significantly less likely to agree they are competitive (44% in 2020/21 vs 49% in 2019/20) and aspire to take part in sport competitively (22% in 2020/21 vs 29% in 2019/20), differences between disabled and non-disabled people continued to exist.

Differences between demographic groups

As in the 2019/20 Annual Disability and Activity Survey, disabled women were the least competitive group. They were significantly more likely than non-disabled women to disagree with the following statements:

- I think of myself as a competitive person (50% vs 38%),
- I aspire to take part in sport competitively (76% vs 62%).

Differences by socioeconomic factors also remained. Most strikingly, managers (higher and intermediate level) were twice as likely as manual workers (skilled and semi-skilled) to aspire to take part in sport competitively (23% vs 11%).

Disabled people that were active in 'a normal week (before COVID-19)' were consistently more likely than inactive disabled people to agree with the statements about enjoyment of activities and competitiveness. This highlights the positive associations those who participate in physical activity have with being active. For instance, seven in 10 active disabled people (70%) agreed that they enjoyed the last time they took part in physical activity, compared with six in ten (59%) of inactive disabled people.

Barriers to being active before COVID-19



Disabled people were less likely to view their health condition as a barrier to being active than in 2019/20. Both disabled and non-disabled people were more likely to say a lack of motivation stops them being active this year.

Table 2

Proportion selecting each as barrier to being active.

↓ Significantly lower than previous year

↑ Significantly higher than previous year

	Disabled people		Non-disabled people	
	2019/20	2020/21	2019/20	2020/21
1. Long-term health condition	84%*	77%* ↓	13%	11%
2. Getting older	32%*	32%*	21%	15% ↓
3. General lack of motivation	25%	30% ↑	36%*	42%* ↑
4. Finances / lack of money	22%	16% ↓	19%	13% ↓
5. Lack of confidence	19%	19%	18%	16%
6. Short-term health condition	16%*	14%*	12%	9%
7. Unaware of any sport opportunities	9%*	10%	6%	7%
8. Lack of suitable transport	8%	9%*	4%	5%
9. Work commitments	8%	7%	37%*	30%* ↓
10. Family commitments	8%	8%	29%*	20%* ↓

Q: C4. 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 outbreak. Base: All who want to do more physical activity. 2020/21: disabled (n=796); non-disabled (n=549). 2019/20: disabled (n=953); non-disabled (n=647).

Barriers to being active before COVID-19: differences between active and inactive disabled people



Inactive disabled people are more likely to see their impairment as a barrier to being active compared to active people. Other barriers to being active did not differ by activity level.

Table 3

Proportion selecting each as barrier to being active.

	Disabled people		Non-disabled people	
	Active	Inactive	Active	Inactive
1. Long-term health condition	68%	92%*	11%	15%
2. Getting older	33%	29%	14%	11%
3. General lack of motivation	25%	26%	34%	49%*
4. Lack of confidence	21%	15%	10%	26%*
5. Finances / lack of money	15%	11%	10%	13%
6. Short-term health condition	11%	11%	10%	9%
7. Family commitments	9%*	4%	21%	13%
8. Work commitments	8%	4%	28%	23%
9. Lack of suitable transport	7%	7%	3%	9%
10. Unaware of any sport opportunities	7%	10%	7%	8%

Q: C4. 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 who would like to do more physical activity: Disabled: active (n=163); inactive (n=313); non-disabled: active (n=358); inactive (n=53).

Barriers to being more active – Commentary



The top barriers to activity for disabled people remain similar to in 2019/20, though there have been some notable changes. Disabled people are less likely to see their health condition as a barrier to being active, and more likely to say a lack of motivation stops them from being active (30% among disabled people and 42% among non-disabled people).

Though respondents were asked to consider what prevents them from taking part under normal circumstances, the pandemic may have also influenced their answers; motivation has been seen to decrease in [Sport England's coronavirus tracking study](#). New barriers related to the pandemic are explored in the '[Impact of COVID-19](#)' section of this report.

It may also indicate that the barriers disabled people experience are becoming more similar to those experienced by non-disabled people. This would be a positive development, as it means barriers specific to impairments and health conditions are beginning to be removed.

Disabled people experience a higher number of barriers than non-disabled people. On average disabled respondents selected 2.6 barriers compared to 2.2 for non-disabled people. In addition, 26% of disabled people selected four or more barriers, compared to 12% of non-disabled people.

Differences between demographic groups and impairment types

The following groups of disabled people were also more likely to report a higher number of barriers on average:

- Disabled women (2.7 barriers vs 2.1 for non-disabled women and 2.2 for non-disabled men),
- Younger disabled people (3.3 barriers for disabled people under 30 vs 2.2 for disabled people aged 70+),
- Disabled people with three or more types of impairments (2.8 barriers vs 2.2 for people with one impairment),
- Disabled people who reported feeling dissatisfied with life (3.1 barriers vs 2.1 for those satisfied with life).

Motivations for being active






In line with previous findings, improving physical health, losing or maintaining weight, getting fit and improving mental health were the most common motivators among disabled people. To relax, have something to, and to socialise became more common reasons to be active for disabled people.

Table 4

Proportion selecting as motivation to be active (active and inactive people).

 Significantly higher than previous year

	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%*
6. To challenge myself	27%	26%	37%*	35%*
7. Because it's fun and I enjoy it	26%	29%	48%*	44%*
8. To relax	23%	28% 	37%*	39%*
9. To give me something to do	17%	23% 	25%*	27%*
10. To socialise with friends	13%	19% 	24%*	24%*

Q: C7/C8 Why do you/would you take part in sport, exercise or other physical activity? Base: All disabled and non-disabled people.

Motivations for being active: active and inactive people



Differences between active disabled and non-disabled people typically reflected differences between all disabled and non-disabled people. However, disabled people were more likely to report improving mental health as a motivator this year.

Table 5
Proportion selecting as motivation to be active (active and inactive people).

	Disabled people		Non-disabled people	
	Active ^a	Inactive ^b	Active ^a	Inactive ^b
1. To improve physical health	70% ^b	58%	71% ^b	56%
2. To lose / maintain weight	54%	51%	55% ^b	44%
3. To get fit	51% ^b	28%	61%* ^b	48%*
4. To improve mental health	54% ^b	30%	57% ^b	33%
5. To feel good about myself	45% ^b	29%	56%* ^b	20%
6. Because it's fun and I enjoy it	35% ^b	13%	46%* ^b	9%
7. To challenge myself	29% ^b	18%*	37%* ^b	6%
8. To relax	31% ^b	19%	41%* ^b	16%
9. To give me something to do	23% ^b	22%*	28%* ^b	5%
10. To socialise with friends	21% ^b	13%	26%* ^b	8%

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

^{a/b} Indicate differences between active and inactive people within the disabled and non-disabled groups.

Q: C7/8 Why do you take part in sport, exercise or other physical activity? Base: All disabled and non-disabled people.



While the top motivators for taking part in sport and physical activity remained consistent, disabled people were slightly more likely to list relaxing, having something to do and socialising with friends as motivators this year. These increases suggest that disabled people have become more aware and comfortable with a broader range of motivations to being active. These motivations are often more common among non-disabled people; appealing to these kinds of motivations suggests initiatives or programmes are connecting to more inclusive motivations.

On average, disabled people also reported a slightly higher number of motivators in the 2020/21 Annual Disability and Activity Survey. (4.6, compared to 4.3 in the 2019/20 survey report).

Despite these positive findings within the disabled population, differences between disabled and non-disabled people were similar to last year's findings. Non-disabled people were consistently more likely to report a range of motivations, from getting fit (61% vs 44% of disabled people), to challenging myself (35% vs 26%).

Differences between demographic groups and impairments types

There were few consistent differences between groups of disabled people. However, BAME disabled people were more likely to be motivated to exercise for the following reasons:

- to feel good about myself (52% vs 39% of White disabled people),
- because it's fun and I enjoy it (46% vs 27%),
- to relax (43% vs 27%),
- to challenge myself (38% vs 25%).

4. The impact of COVID-19 on physical activity

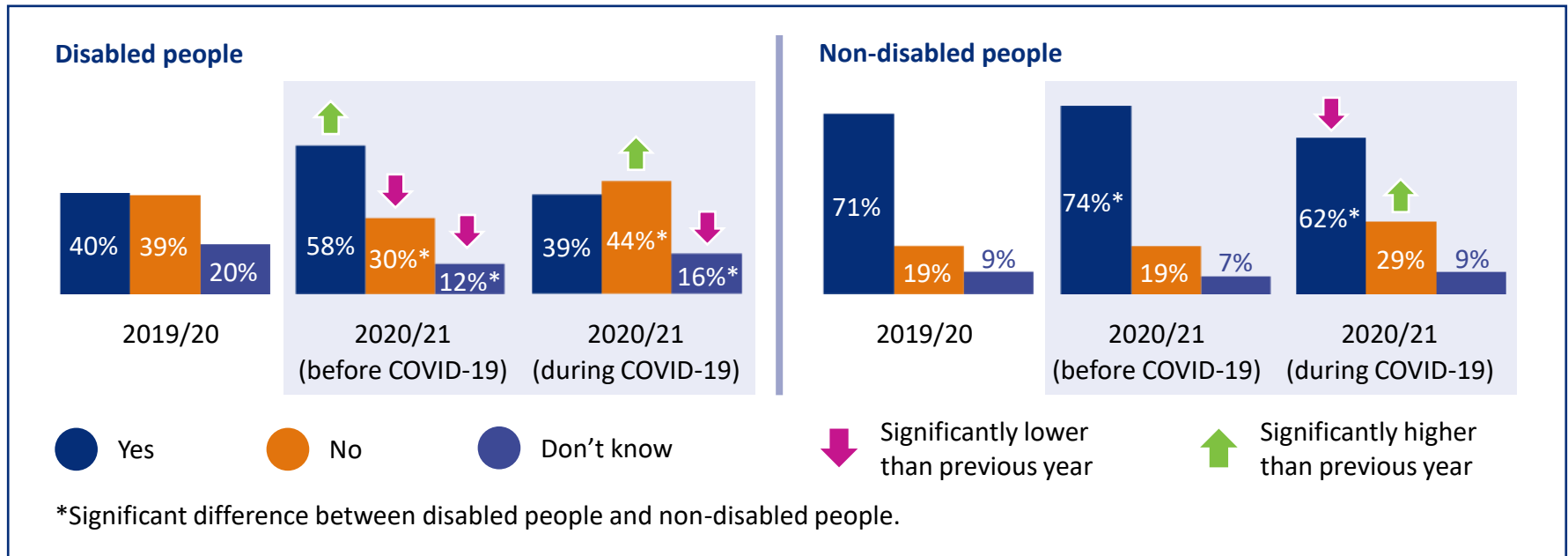
How COVID-19 has affected opportunities to be active



The pandemic has led to more disabled and non-disabled people feeling that they do not have the opportunity to be as active as they want to be compared to 2019/20 and when asked to think of 2020 before the pandemic.

Figure 7

Whether disabled and non-disabled people felt they had the opportunity to be as physically active as they want to in 2019/20, in 2020 before the pandemic, and in 2020 during the pandemic.



Q: C5/6 Do you feel that you are given the opportunity to be as physically active as you want to be?

Base: All disabled and non-disabled people.

How COVID-19 has affected opportunities to be active

– Commentary



Respondents were asked if they felt they had the opportunity to be as active as they wanted to be at the moment (with fieldwork taking place from June to September 2020). Respondents were also asked if they felt they had the opportunity to be as active as they wanted to be before the pandemic. The previous chart compares this with the 2019/20 survey, where respondents were asked if they had the opportunity to be as active as they wanted to be at the moment (in April to July 2019).

The proportion of disabled people who felt they had the opportunity to be as active as they wanted to be increased significantly between 2019/20 and 2020/21 (prior to the pandemic), from 40% to 58%. This increase could be due to the retrospective nature of the question. However, the lack of the same effect among non-disabled people, and that similar positive trends are observed in other questions, indicates a meaningful change among disabled people. However, when disabled people consider their opportunities to be active 'at the moment' (during the pandemic), the proportion decreases to 39%. Non-disabled people are also more likely to feel they do not have the opportunity to be active as they want to be during the pandemic.

Differences between demographic groups

Disabled women were less likely to say that they are given the opportunity to be as active as they want to be. A third (35%) of disabled women said they are able to be as physically active as they want. This is significantly less than disabled men (43%) and non-disabled women (60%).

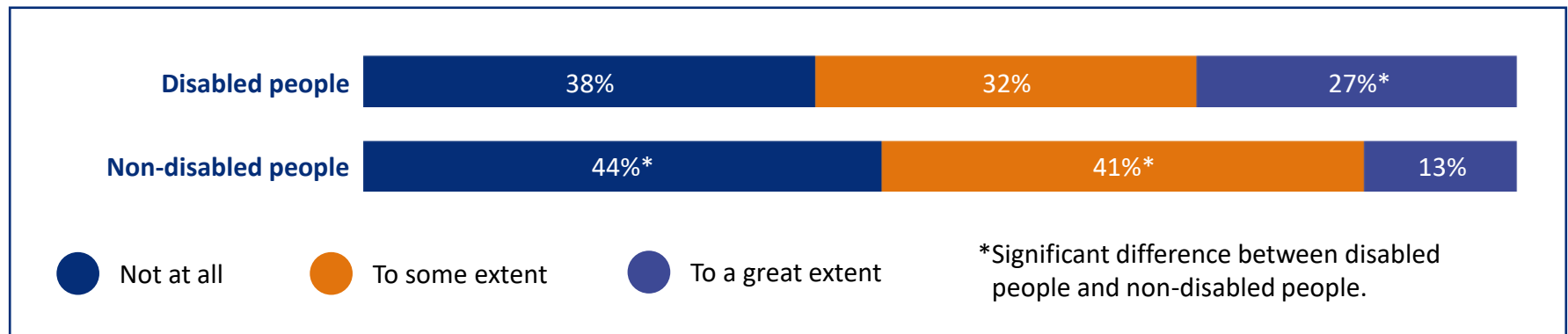
Impact of COVID-19 on ability to be active



Disabled people were more likely to report that COVID-19 had affected their ability to do sport, exercise or physical activity than non-disabled people. Younger disabled people were particularly affected.

Figure 8

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



Q: C5a. To what extent has coronavirus (COVID-19) reduced your ability to do sport, exercise or physical activity?

Base: All disabled and non-disabled people.

Impact of COVID-19 on ability to be active – Commentary



Disabled people are more likely to feel COVID-19 affects their ability to do sport, exercise or physical activity than non-disabled people. Over a quarter (27%) of disabled people said COVID-19 had reduced their ability to exercise to 'a great extent' compared with 13% of non-disabled people.

Differences between demographic groups

The impact of coronavirus differed by age. While 71% of those under 30 said their ability to be active had been impacted, this was the case for under three fifths (57%) of over 70s.

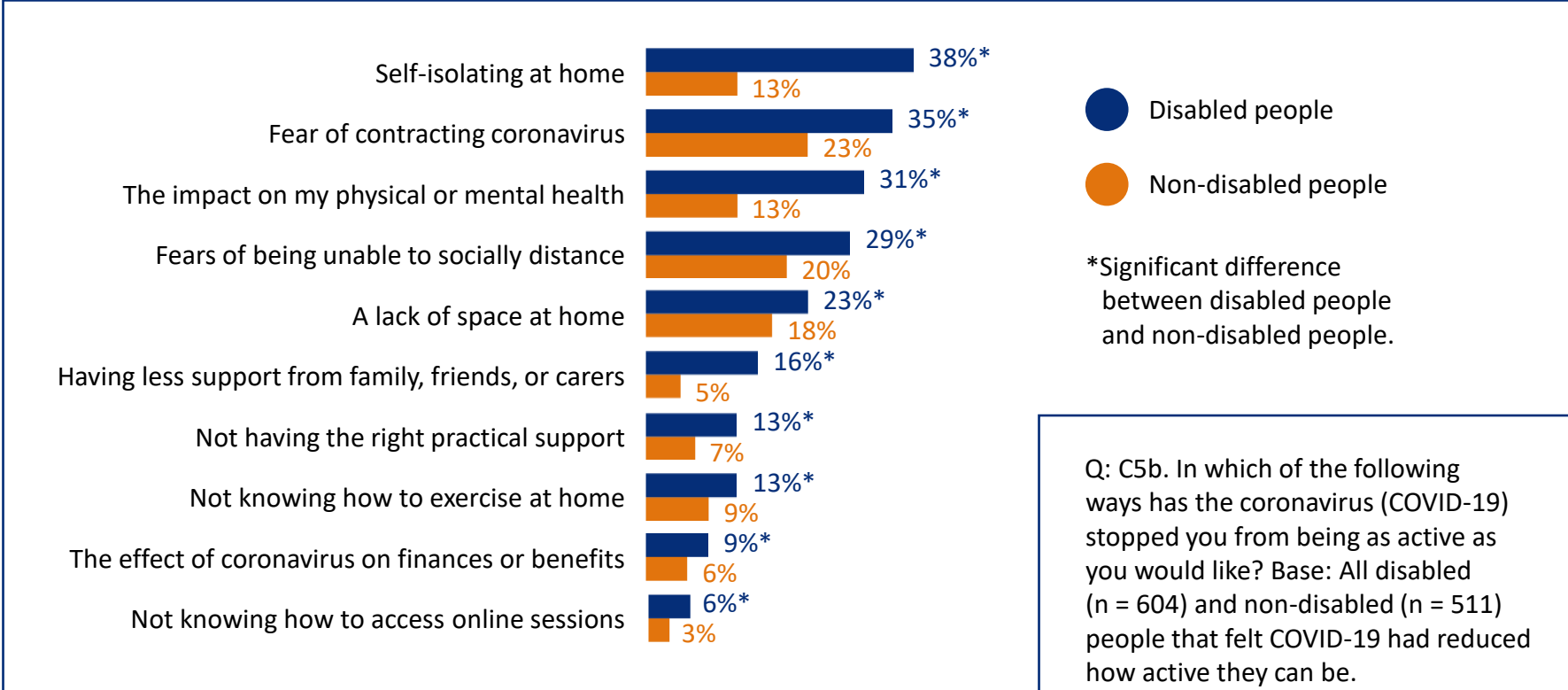
Disabled people from BAME ethnic backgrounds were also more affected. Nearly 9 out of ten (86%) said that COVID-19 had limited their ability to take part in physical activity to at least some extent. This was the case for three in five (57%) of White disabled people.

The top ways COVID-19 has reduced activity levels for disabled people



The pandemic has presented disabled people with new barriers to being active. The need to self-isolate, fear of contracting the virus, and the impact on their health were particularly common barriers for disabled people.

Figure 9
Barriers to being active caused by coronavirus (the barriers shown in this chart are more likely to be experienced by disabled people).



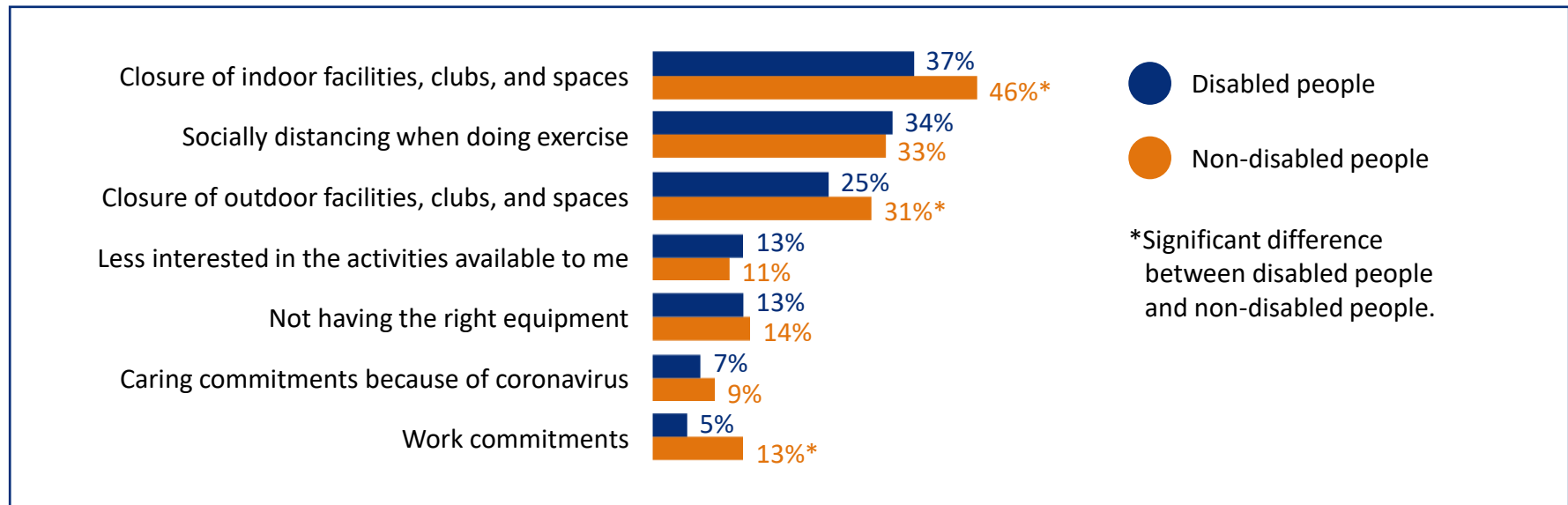
Other ways COVID-19 has stopped both disabled and non-disabled people from being active



Disabled people are less affected by the closure of facilities and work commitments than non-disabled people. Socially distancing when exercising and a lack of interest are barriers for both disabled and non-disabled people.

Figure 10

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 the 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.

Ways COVID-19 has stopped people from being active

– Commentary



Understanding how COVID-19 and the associated restrictions have affected activity levels is vital to helping disabled people be active. Disabled people are more likely to experience more barriers related to the pandemic. Self-isolation, the impact on health, the fear of contracting the virus, and concerns about social distancing are especially important for disabled people. Disabled people are also more affected by a lack of space at home and a lack of support.

Differences between demographic groups

Disabled men were more likely to list fear of contracting the virus as a barrier (41% vs 31% of disabled women). They were also more likely to say the closure of outdoor activities had stopped them from being active (32% vs 20% of disabled women).

While two fifths (40%) of White disabled people said they had been stopped from being active due to a need to self-isolate, this was only the case among a fifth (22%) of BAME disabled people.

BAME respondents were more affected than White respondents by:

- A lack of space at home (41% vs 22%),
- Less support from family (26% vs 15%),
- Work commitments (19% vs 4%).

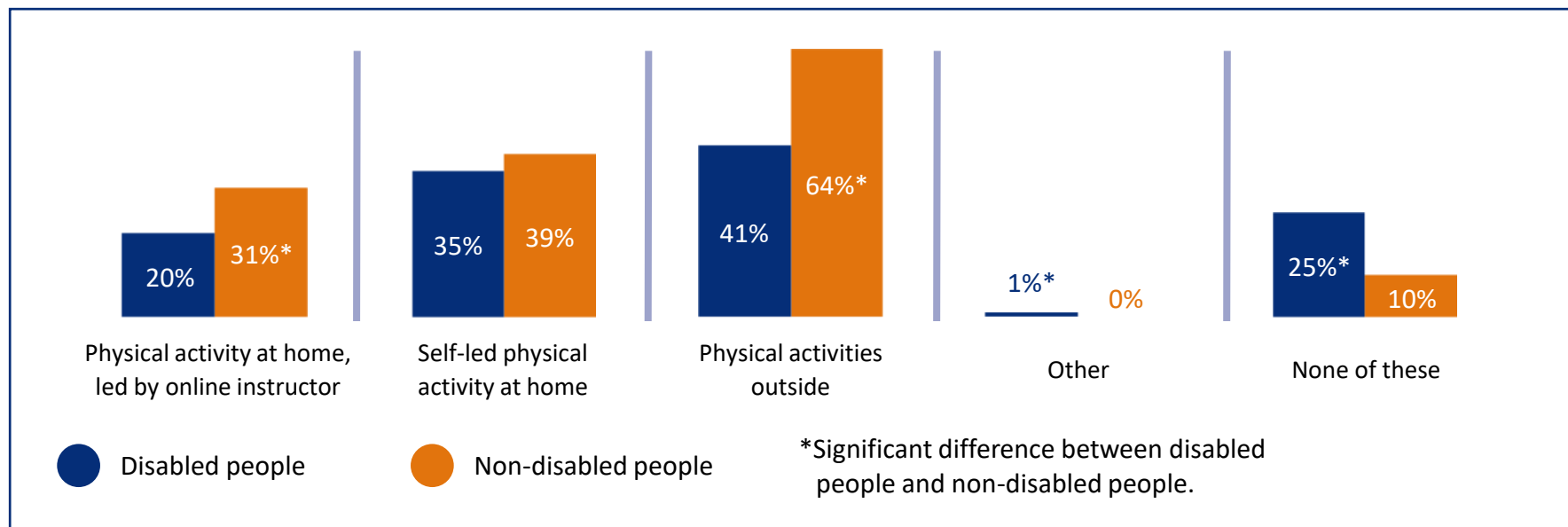
Participation in individual activities during the pandemic



Disabled people were less likely to have taken part in physical activity by themselves during the outbreak, particularly for outdoor activities and online activities led by a tutor. They were more equally likely to take part in self-led activities at home.

Figure 11

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



Q: C10a-1. Which of the following describe how you take part in sport, exercise or other physical activity during the coronavirus (COVID-19) outbreak? BY MYSELF Base: All respondents who currently take part in physical activity: disabled (n = 765) and non-disabled (n = 912).

Participation in individual activities during COVID-19

– Commentary



Overall, non-disabled people were more likely to have done any form of exercise by themselves during the outbreak. A quarter (25%) of disabled people responded that they had taken part in none of the listed types of physical activities, significantly higher than the 10% of non-disabled people who reported the same. Interestingly, the proportion who have taken part in self-led individual activity at home is more similar for disabled and non-disabled people (35% and 39%) than for activities online led by a tutor and for activities outside. It is also encouraging that though participation in online self-led activities is lower than for non-disabled people, a fifth (20%) of disabled people are accessing online activities. 41% of disabled people also report taking part in physical activities by themselves outdoors, indicating a need for activities outside of the home.

Differences between demographic groups

Disabled women were more likely than disabled men to take part in physical activity at home led by an online instructor (23% of disabled women compared to 15% of disabled men).

Younger groups were also more likely to take part in physical activity at home led by an online instructor. Over two thirds of disabled people under 30 years old (37%) and 30-39 year olds (38%) reported that they had taken part in home physical activity led by an online instructor (compared with 20% on average).

BAME disabled people were also more likely to take part in physical activity at home led by an online instructor (40% of BAME disabled people compared with 18% of White disabled people).

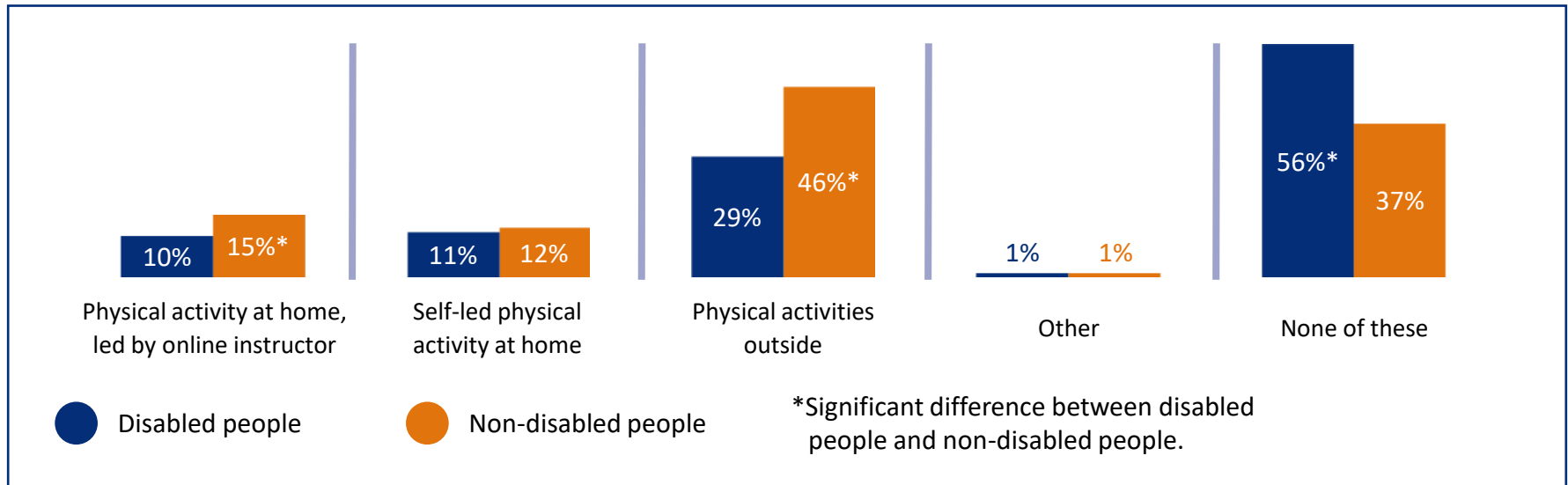
Participation in activities with others during the pandemic



Disabled people were less likely to have taken part in physical activity with others during the outbreak. This was the case particularly for activities taking place outside. Again, the proportion who take part in self-led activities at home was more similar for disabled and non-disabled people.

Figure 12

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



Q: C10a-1. Which of the following describe how you take part in sport, exercise or other physical activity during the coronavirus (COVID-19) outbreak? WITH OTHERS Base: All respondents who currently take part in physical activity: disabled (n = 765) and non-disabled (n = 912).



Perhaps reflecting fears of contracting the virus, and the need to self-isolate, many disabled people were less likely to take part in physical activities with others. This is particularly the case for activities outside of the home where only 29% of disabled people are taking part with others. Only 10% of disabled people are taking part in online tutor-led activities with others, compared to 15% of non-disabled people. Disabled people are more equally likely to take part in self-led activities with others at home (11% compared to 12% of non-disabled people).

Differences between demographic groups

Younger disabled people were more likely to take part in physical activity at home, either self-led or led by an online instructor. A fifth (21%) of those aged under 30 and those 30-39 took part in activities led by an online instructor. This is significantly higher than every age group over 50 years old where 4-6% of respondents had taken part in this activity.

Similarly, a quarter or more of disabled people aged under 30 (24%) and 30-39 years of age (28%) had taken part in self-led activities at home. This is significantly higher than age groups over 40 years, with the highest result among these age groups being 10% of 40-49 year olds.

BAME respondents were more likely than White respondents to take in many different forms of physical activity with others, including:

- Physical activities outside the house (44% vs 28%),
- Self led physical activity at home (26% vs 10%),
- Self led physical activity at home (26% vs 10%).

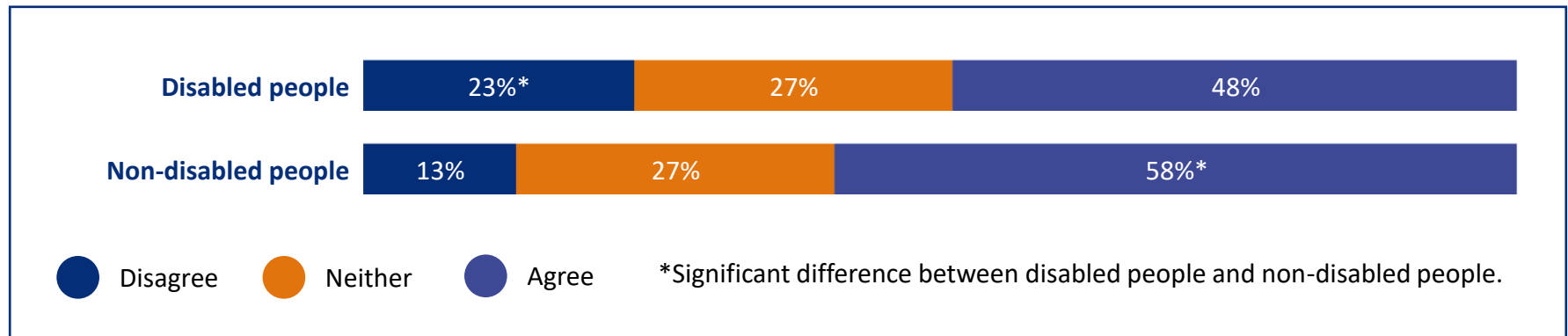
Information about being active during the pandemic



Disabled people were more likely to disagree that they had received enough information and advice on how to be active during the pandemic. Disabled people whose ability to take part in sport had been reduced by COVID-19 were less likely to agree that they had received enough information.

Figure 13

Agreement with 'I have received enough information and advice on how to be active during the coronavirus (COVID-19) outbreak.'



Q: C11a. 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'? Base: All disabled and non-disabled people.

Information about being active during the pandemic – Commentary



Nearly three fifths (58%) of non-disabled people felt they had received enough information and advice on how to be active during the pandemic, compared with under half (48%) of disabled people. Almost a quarter (23%) of disabled people felt they hadn't received enough information and advice.

People who felt COVID-19 had reduced their ability to be active were more likely to disagree that they had been given enough information and advice. 34% of those who said COVID-19 had reduced their ability to take part in sport to a great extent disagreed. In comparison 23% and 15% of those who said their ability to take part in sport had been reduced to some extent or not at all disagreed.

Differences between demographic groups and impairment types

There were some key differences among disabled people in relation to whether they agreed that they had received enough information about being active. Disabled people with the following characteristics were more likely to disagree with the statement:

- Those who do no activity (28%),
- Those with mental health conditions (34%),
- Those with three or more impairments (27%).

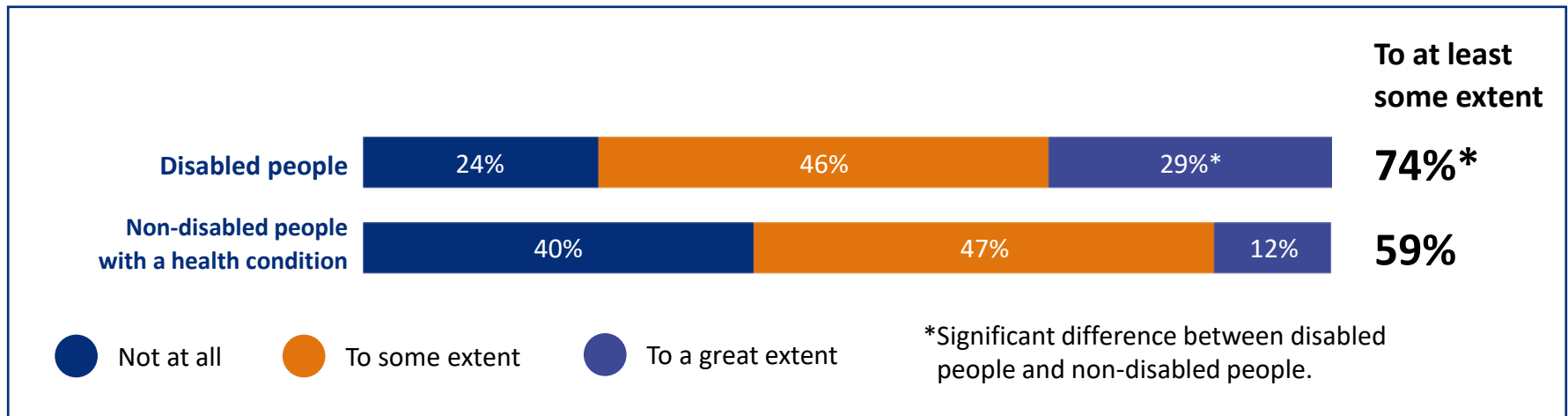
Impact of COVID-19 on impairments and health conditions



Many disabled people and non-disabled people with a health condition said the pandemic had affected their impairment or health condition. Disabled people were more likely to be affected.

Figure 14

Extent to which coronavirus has affected disabled and non-disabled people's health conditions or impairment.



Q: B9. To what extent has the coronavirus (COVID-19) outbreak, and the lockdown measures, affected your health condition, impairment or illness? Base: All disabled people (n = 1,023) and non-disabled people with a health condition (n = 261).

Impact of COVID-19 on impairments and health conditions

– Commentary



Disabled people and non-disabled people with a health condition (that didn't substantially affect their daily activities) were asked how much the coronavirus pandemic and associated lockdown measures had affected their impairment or health.

Three quarters (74%) of disabled people reported that COVID-19 and the associated lockdown measures had affected their health to at least some extent. This was also the case for three in five non-disabled people with a health condition (59%). Additionally, three in ten (29%) disabled people said the pandemic had affected their health condition to a great extent, compared with 12% of non-disabled people with a health condition.

Differences between demographic groups and impairment types

Disabled women were most likely to have been impacted by the pandemic. Over three quarters of disabled women (77%) reported that COVID-19 had affected their health condition to at least some extent. This is significantly higher than disabled men (70%) and non-disabled women (64%).

Disabled people with mental health or learning difficulties, and those with chronic conditions, were most likely to have had their health condition affected by the pandemic. Around four in five disabled respondents with a mental health problem or learning difficulty (82%) or a chronic condition (78%) said COVID-19 had affected them to at least some extent, compared with 74% of disabled people on average.

Impact of COVID-19 on disabled people



COVID-19 has impacted those with health conditions in a range of ways. The impact on **mental health** was most commonly mentioned, particularly through lack of social interaction and effect on routine. Many people mentioned the impact of cancelled **health appointments** and delayed treatments. Increased stress, difficulty obtaining medicines, and being unable to use normal strategies to manage conditions or impairments led to worsening health or symptoms. Many disabled people were **shielding** as a result of COVID-19, further reducing their social contact and increasing isolation.

“ I feel a lot more awkward and self conscious about struggling visually and regarding my poor spatial awareness. A lot more people are off work and children off school, everywhere seems so much busier.

Disabled woman, aged 60-65

”

“ I cannot attend any personal appointments with my dentist, psychiatrist, psychiatric nurse, diabetes consultant, and to my physician only in emergency cases.

Disabled man, aged 60-69

”

“ I have had to be largely shielded so I have missed all appointments and hobbies etc. I have started to feel closed in. I am not able to sleep.

Disabled woman, aged 30-39

”

“ I was advised because of diabetes not to go outside, mix with anyone or even go to the shops. Although I am not on the shielding list, it's still had a big impact on my mental health with not being able to see family and friends.

Disabled man, aged 50-59

”

Q: B10. In what ways has the coronavirus (COVID-19) outbreak, and the lockdown measures, impacted your health conditions, impairments or illnesses? Base: All disabled (n = 761) that have been affected by COVID-19 to at least some extent.

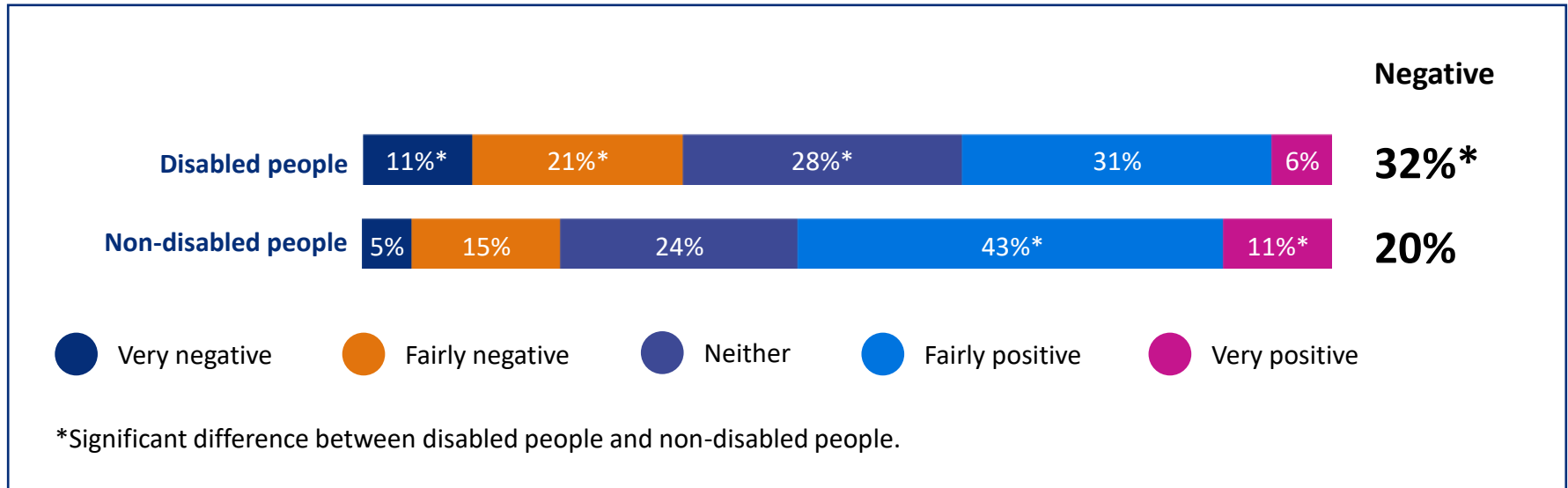
Feelings about the future



Disabled people were more significantly more likely to feel negatively about the future than non-disabled people. Disabled people with mental health conditions and learning difficulties were more likely to feel negative.

Figure 15

How positive or negative people feel about the future.



Q: E9 Which of the following best describes how you feel about the future? Base: All disabled people and non-disabled people.

Feelings about the future – Commentary



A third (32%) of disabled people were fairly negative or very negative about the future compared with a fifth (20%) of non-disabled people.

Differences between demographic groups and impairment types

Feelings about the future differed by age. Younger disabled people were most likely to feel negative about the future (47% compared to 24% of older disabled people).

There were also differences by disabled people's sexuality. Those who identify as gay, lesbian, bisexual, or in another way were more likely to report feeling negative about the future (51%, compared to 30% of those who identify as heterosexual).

Negative views of the future were more pronounced among disabled people with mental health and learning impairments. Over two fifths (45%) of those with a mental health problem said they were negative about the future, compared with around a third of those with:

- A chronic health condition (34%),
- A sensory impairment (32%),
- A physical impairment (32%).

Those with a greater number of impairments were also more likely to feel negative about the future (36% of those with three or more impairments compared with 27% of those with one or two impairments).

Concerns about the future after the pandemic



Disabled people had a range of concerns about the future. The most common concern was when **life would get back to normal** (when it would be safe to live our lives like we used to). Many disabled people were worried about themselves or someone they know contracting the virus, and their health worsening. Concerns about a **second wave and lockdown** were also common. Some were worried about the impact of the pandemic on the **economy**, the impact on their **career or job** and **society as a whole**. Concerns about society included the ability to access support, selfishness and behaviours of others, civil unrest, austerity, and inequality.

“

I have many concerns, that there will be a second wave, that someone I know will be very ill and possibly die because of it, that the economy will be really bad and the unemployment figures will rise exponentially, my children's education will suffer, that I will lose my job.

**Disabled woman,
aged 30-39**

”

“

Not being able to earn a living. Having the DWP looking at me on a weekly basis. Not able to walk, run, ride, swim. Losing my home and not ever getting another.

**Disabled man,
aged 50-59**

”

“

Having been shielding for 3 months and already using diazepam for anxiety and panic attacks, how will I be when I finally go out. I am already on the maximum dose so it cant be increased. I am scared of what it will be like.

**Disabled woman,
aged 50-59**

”

Concerns about the future after the pandemic (continued)



“

I'm still rather afraid to go anywhere there are larger crowds. Even though the government has said it is all right for us to mix a bit more now, I still have that feeling that I've been careful for so long but one stupid move could see the end of me!

**Disabled woman,
aged 50-59**

”

“

I am worried about how long I am going to be housebound because until social distancing is altered so people can physically help me. I want to be able to do my own shopping and see something other than my own four walls.

**Disabled woman,
aged 70+**

”

“

Very concerned about my health and getting treatment as soon as possible.

**Disabled woman,
aged 50-59**

”

“

It's ruined everything. The support people had in place is gone. I've had no support, mental health places over run, no staff, not enough time.

**Disabled woman,
aged 20-24**

”

Q: E10. What, if any, concerns do you have about the future following the coronavirus (COVID-19) outbreak? Base: All disabled and non-disabled people.

5. Types of activity and participants

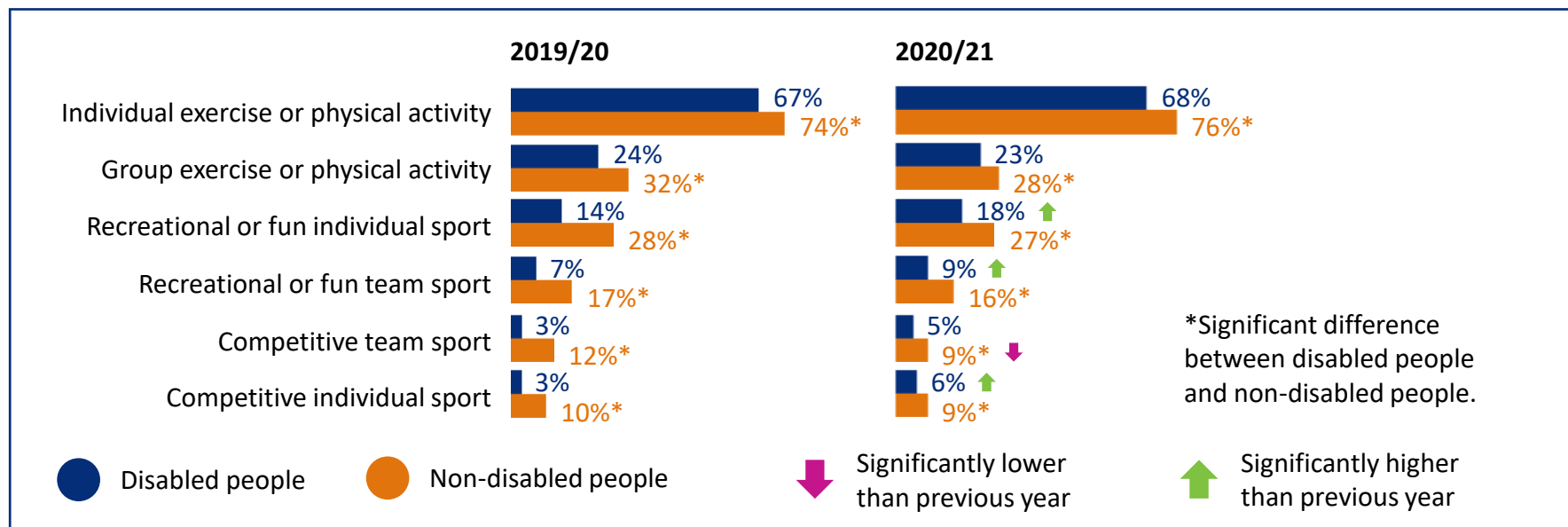
Participation in sport, exercise and physical activity before COVID-19



Disabled people remain less likely to take part in any form of sport or physical activity compared with non-disabled people. However, this year (before the pandemic) disabled people were more likely to be taking part in sport (either recreational or competitive) than in 2019/20.

Figure 16

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



Q: C10 Which of the following describe how you take part in sport, exercise or other physical activity? Please think about your participation in sports and activities before the coronavirus (COVID-19) outbreak. Base: All who take part in physical activity. 2020/21: disabled (n = 821); non-disabled (n = 917). 2019/20: disabled (n = 870); non-disabled (n = 1,071).

Participation in sport, exercise and physical activities before COVID-19 – Commentary



This question asked participants to consider what sport, exercise, and physical activity they took part in before the COVID-19 pandemic. Disabled people remain less likely to participate in any form of sport or physical activity than non-disabled people. Although differences between the two groups were typically less pronounced this year. A positive development was the proportion of disabled people taking part in competitive or recreational sport rising from one in five (20%) in 2019/20 to one in four (25%) this year.

Differences between demographic groups and impairment types

Reinforcing findings from last year, participation in any form of physical activity was higher among disabled women (80% vs 73% of disabled men). However, disabled men were more likely to participate in either competitive (11% vs 7% of women) and/or recreational (27% vs 19%) sports.

Unlike last year, there were no differences in terms of the proportion of disabled people doing any form of exercise by the number of impairment types they have (79% for those with one impairment vs 76% for those with three). However, there were differences in relation to competitive sport (14% for those with one impairment vs 8% for those with three).

As in 2019/20, disabled people with physical impairments were least likely to take part in competitive sport (7% compared with 12% of people with learning difficulties or sensory impairments).

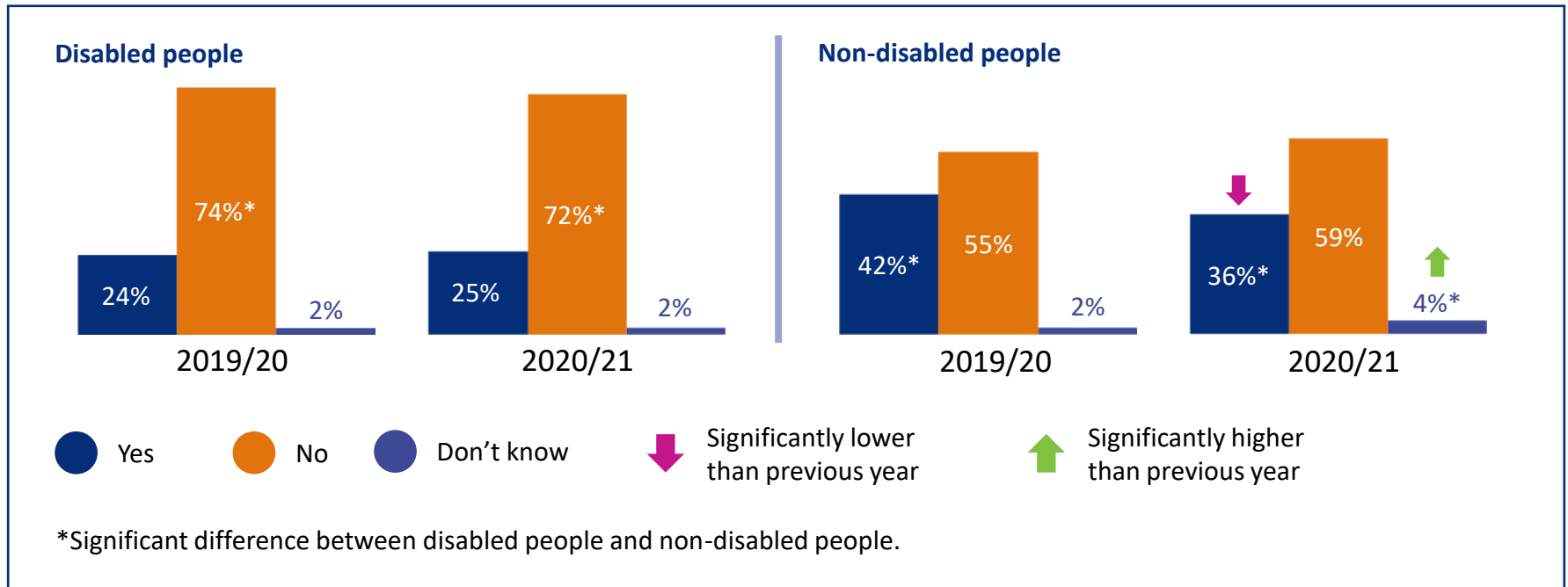
Participation in organised physical activity



The proportion of disabled people taking part in an organised sport or physical activity session in the last year has remained consistent, with those with one impairment more likely than those with three or more to have taken part in an organised activity.

Figure 17

Participation in a physical activity session in the last year.



Q: D1 Have you taken part in an organised sport or physical activity session or programme in the last year? Please think about your participation in sports and activities before the coronavirus (COVID-19) outbreak. Base: All disabled and non-disabled people.



This question asked respondents to say whether they had taken part in organised sports and activities before the coronavirus (COVID-19) outbreak. Participation remained largely unchanged among disabled people between 2019/20 and 2020/21. As in 2019/20, a quarter (25%) of disabled people took part in an organised physical activity session or programme in the last year. The proportion of non-disabled people participating in organised sport and physical activity decreased significantly from 42% in 2019/20 to 36% in 2020/21.

Differences between demographic groups and impairment types

New to this year, disabled women were significantly more likely to have taken part in an organised sport or physical activity session (27%, compared with 21% of disabled men). This is an interesting finding, as women are less likely to feel they have the opportunity to be as active as they want to be, and to face more barriers to being active.

Differences by age and ethnicity remain, with younger and BAME disabled people more likely than older and White disabled people to have taken part in an organised sport or physical activity session in the last year.

Disabled people with one impairment were more likely to have taken part in a physical activity in the last 12 months (31% compared with 23% of those with three or more impairments). This mirrors findings from last year, showing disabled people with more complex needs continue to be least likely to be accessing organised sport and physical activity opportunities.

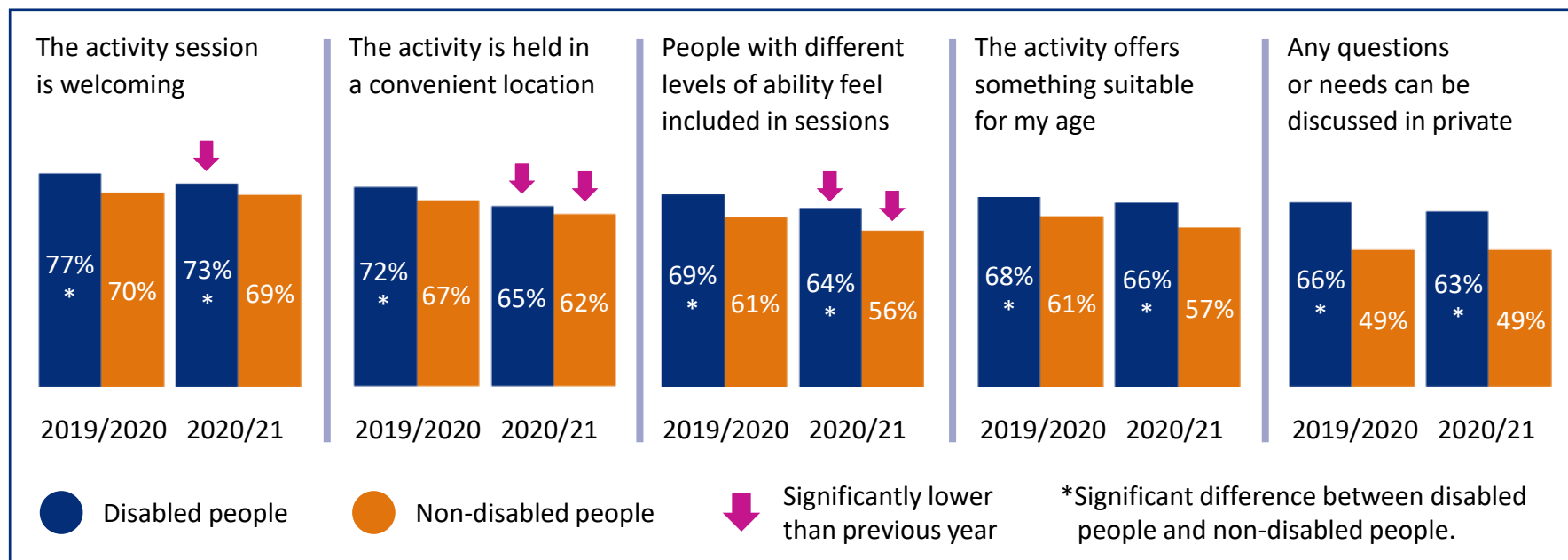
Most important factors in communication and delivery of sport and physical activity



The most important aspects of how sport and physical activities are organised have not changed since 2019/20. However, disabled people were less likely to consider some of these factors important this year.

Figure 18

The proportion of disabled and non-disabled people giving a score of 8 or more on importance scale for each aspect (most important aspects shown).



Q: D5 How important or unimportant is it to you that organisations or people organising physical activity or sport consider each of the following things? Base: All disabled and non-disabled people.

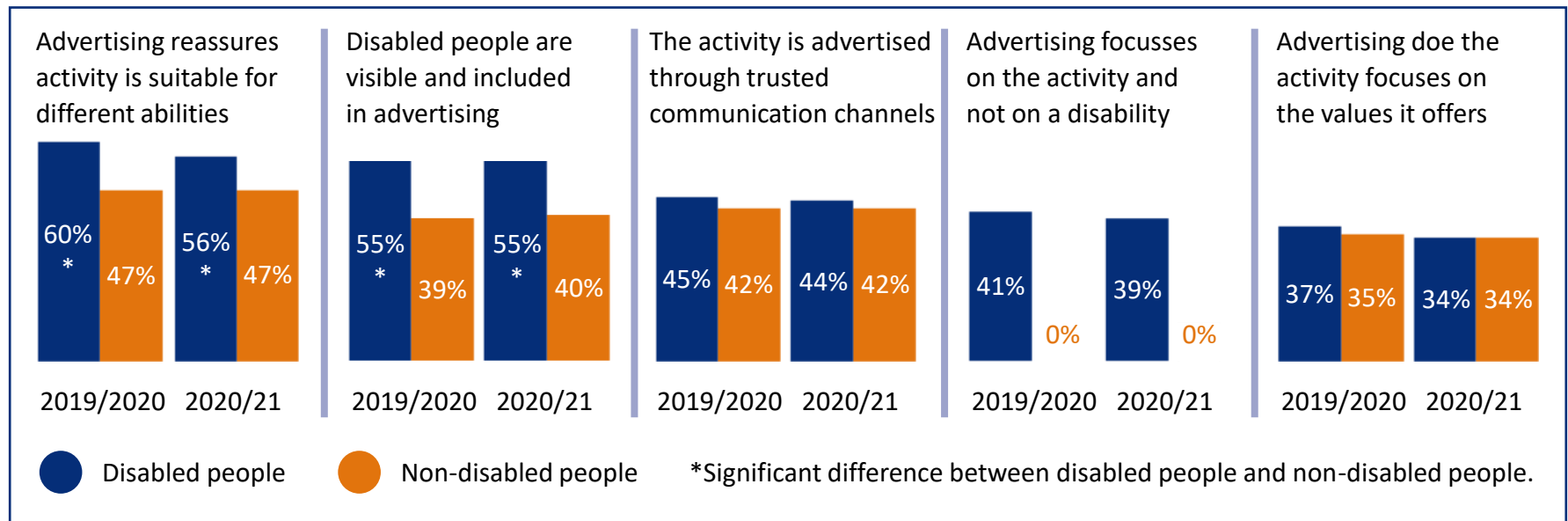
Less important factors in communication and delivery of sport and physical activities



Like in 2019/20, people rated aspects relating to advertising as less important. There were no significant changes across the two years for any group. Disabled women were more likely than disabled men to find three of the five aspects of physical activity advertising important, showing an increasing trend.

Figure 19

The proportion of disabled and non-disabled people giving a score of 8 or more on importance scale for each aspect (less important aspects shown).



Q: D5 How important or unimportant is it to you that organisations or people organising physical activity or sport consider each of the following things? Base: All disabled and non-disabled people.

Importance of factors in relation to how physical activity or sport is organised – Commentary



Disabled and non-disabled people were generally consistent in terms of what they consider important in relation to how physical activity or sport is organised. However, the following two factors were considered slightly less important by both disabled and non-disabled people this year:

- The activity is held in a convenient location (65% of disabled and 62% of non-disabled people, compared with 72% and 67% in the 2019/20 survey).
- People with different levels of ability feel included in sessions (64% and 56%, compared with 69% and 61% in the 2019/20 survey).

Differences between disabled and non-disabled people were consistent with findings from last year's survey. Disabled people generally found aspects of an activity that provide reassurance (such as how welcoming an activity is, and whether needs can be discussed in private) more important than non-disabled people.

Differences between demographic groups

Differences by gender were more marked this year. Disabled women were more likely to find a range of things important in terms of how physical activity and sport is organised, including:

- The activity is held in a convenient location (71% vs 57% of disabled men),
- Any questions or needs can be discussed in private before starting an activity (69% vs 55%),
- Advertising is reassuring (61% vs 47%),
- The activity is advertised through trusted communication channels (48% vs 39%).

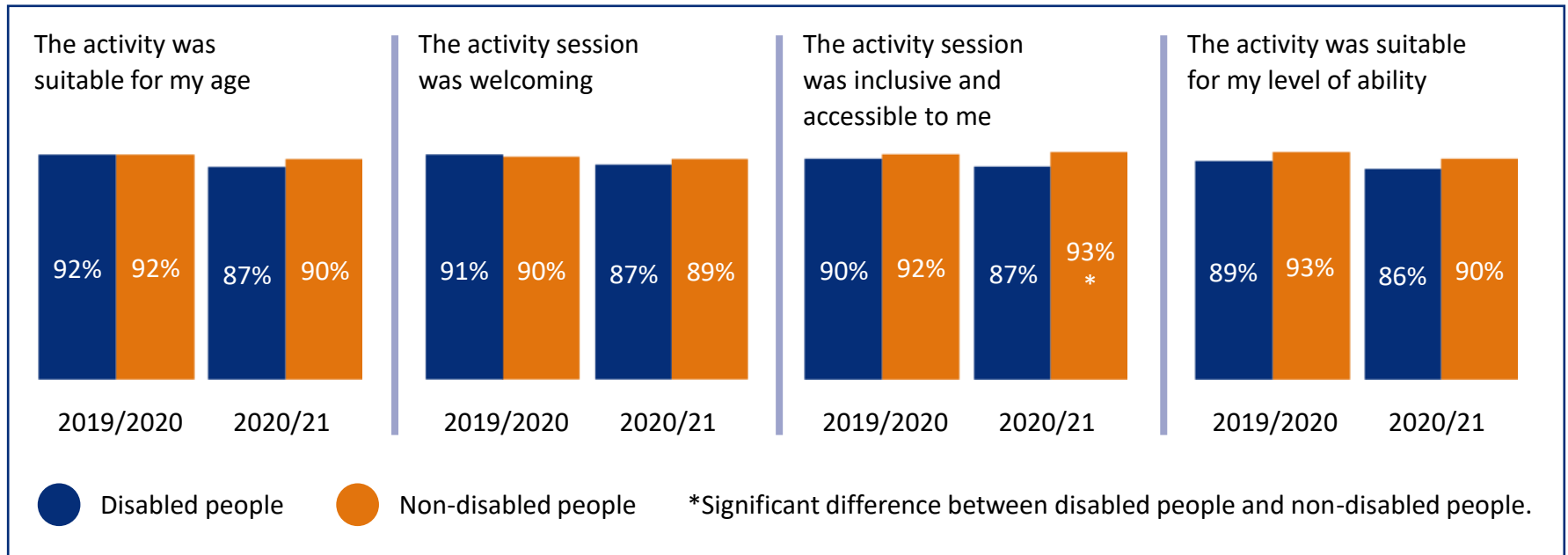
Experience of organised activity sessions



Both groups were very positive about their experiences of activity sessions. However, disabled people were less likely than non-disabled people to say the activity they took part in was inclusive and accessible this year.

Figure 20

Proportion of disabled and non-disabled people agreeing with each statement (top four).



Q: D3 And now thinking about the activity session itself, how much do you agree or disagree with the following? Base: All who had taken part in organised activity in last year. 2020/21: disabled (n = 254); non-disabled (n = 348). 2019/20: disabled (n = 279); non-disabled (n = 479).

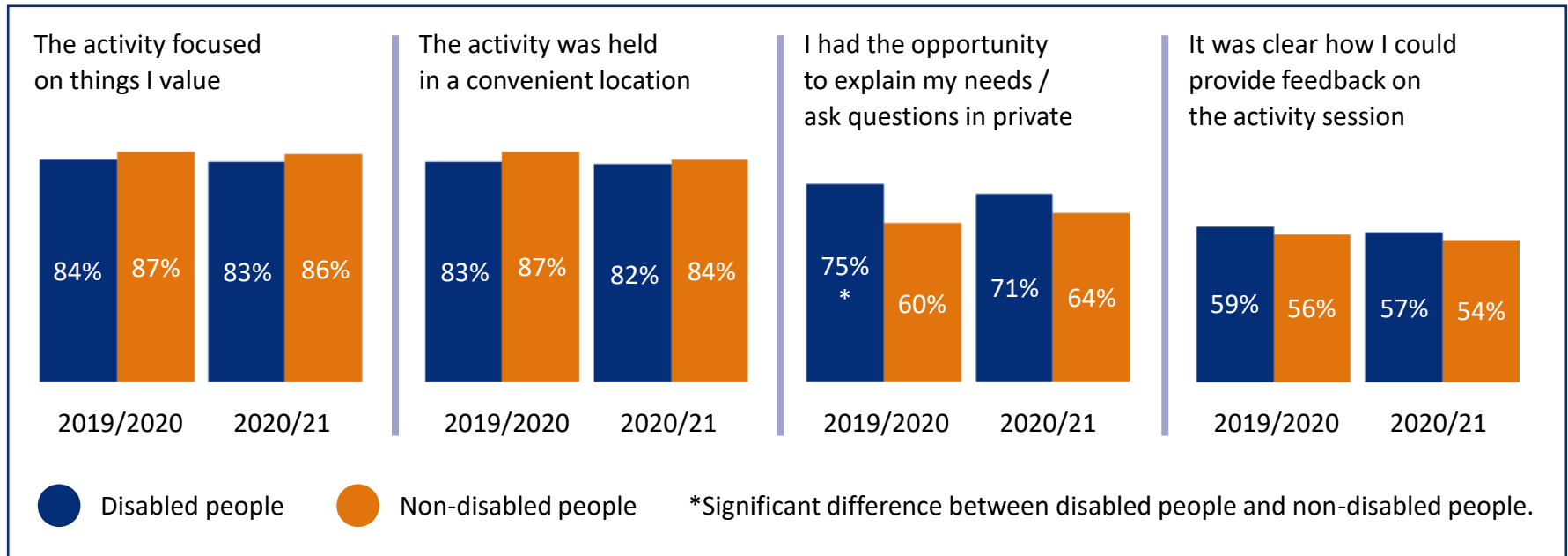
Experience of organised activity sessions



Reinforcing findings from 2019/20, both disabled and non-disabled people were less likely to feel they had the opportunity to explain their needs or provide feedback on the session.

Figure 21

Proportion of disabled and non-disabled people agreeing with each statement (bottom four).



Q: D3 And now thinking about the activity session itself, how much do you agree or disagree with the following? Base: All who had taken part in organised activity in last year. 2020/21: disabled (n = 254); non-disabled (n = 348). 2019/20: disabled (n = 279); non-disabled (n = 479).

Experience of organised activity sessions – Commentary



Both disabled and non-disabled people remained most positive about aspects like how welcoming, and inclusive and accessible the activities they took part in were (around nine in 10 disabled and non-disabled people agreed with these statements). They were somewhat less positive about how clear it was to provide on feedback on the session (less than six in 10 disabled and non-disabled people agreed with this statement).

However, disabled people were slightly less likely to say the activity session they took part in was inclusive and accessible to them (87% vs 93% of non-disabled people). Although the majority were still positive about this aspect.

These positive findings reinforce that once disabled people take part in activities, they often have a positive experience. This indicates that perceptions, communication, and barriers to accessing activity have a larger impact on the activity levels of disabled people, rather than negative experiences.

Differences between demographic groups and impairment types

Due to the relatively low proportion of disabled people that took part in an activity session in the last year, there were no significant differences between different groups of disabled people.

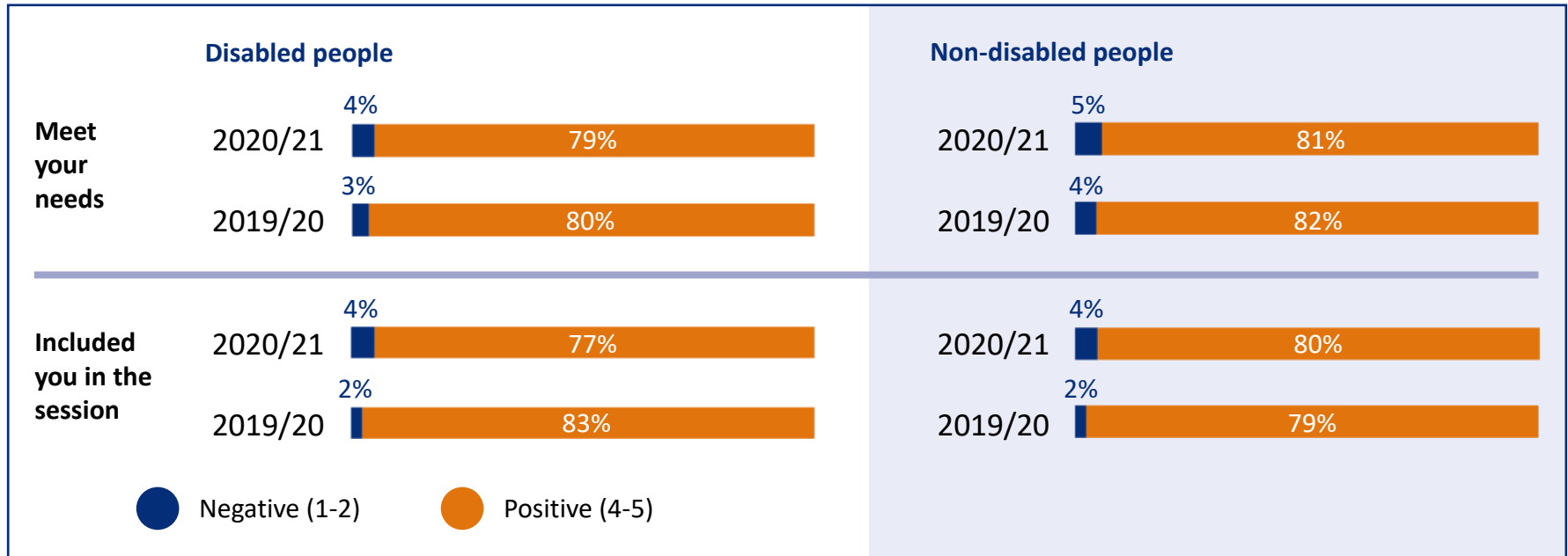
Experience of activity leaders



Disabled and non-disabled people had similar experiences with activity session leaders. Around four in five disabled and non-disabled people felt the activity leader met their needs and included them in the session in both the 2020/21 and 2019/20 survey.

Figure 22

Proportion agreeing that the activity leader in their last organised session:



Q: D4 And still thinking about that activity session, how much do you feel that the activity leader...? Base: All who had taken part in an organised activity in the last year. 2020/21: disabled (n = 254); non-disabled (n = 348). 2019/20: disabled (n = 279); non-disabled (n = 479).



Disabled and non-disabled people were similarly and consistently positive about the role of session leaders for the activity session they took part in over the last year. Around four in five disabled and non-disabled people felt their activity leader met their needs and included them in the session in both the 2020/21 and 2019/20 Annual Disability and Activity Survey.

Differences between demographic groups and impairment types

Unlike last year, there were no differences by type of impairment in relation to whether the session leader met disabled people's needs, or whether they felt included in the session. This finding is positive considering people with mental health problems were less likely to agree that they felt included in activities last year.

The only notable differences by views of the activity session leader were on socioeconomic status. The unemployed, state pensioners and those in casual work were more positive about the activity leader's role in including them in the session (89%, compared with 71% of disabled people in managerial positions). This is contrary to the findings that suggest those in managerial positions have more positive experiences of sport and physical activity. The fact there were rather few differences suggest that activity leaders are viewed near-universally positively by disabled people.

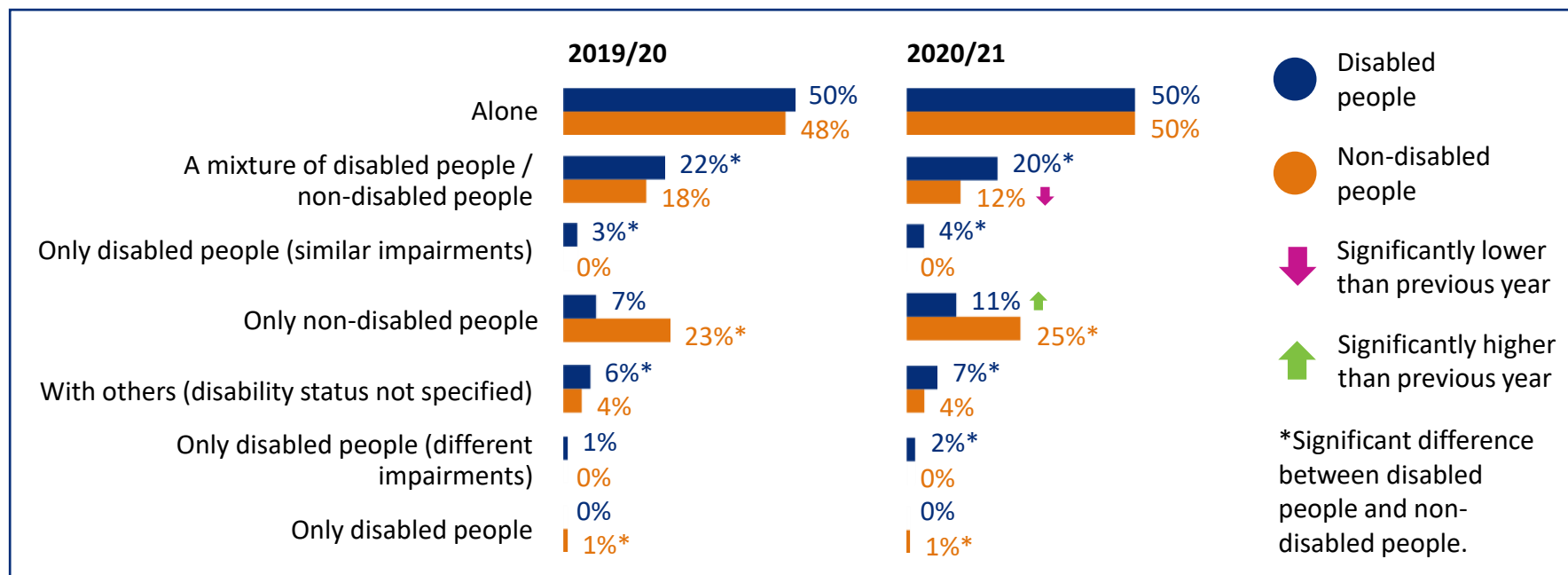
Who people were active with before COVID-19



While around half of disabled and non-disabled people typically exercise alone, disabled people were this year slightly more likely to say they take part in sport or physical activity with other non-disabled people.

Figure 23

Who disabled and non-disabled people do sport, exercise, or physical activity with.



Q: C12 Which of the following best describes who you do sport, exercise or other physical activity with when you take part? Please think about who you would usually take part with before the coronavirus (COVID-19) outbreak. Base: All who take part in physical activity. 2020/21: disabled (n = 821); non-disabled (n = 917). 2019/20: disabled (n = 941); non-disabled (n = 1,095).

Who people were active with before COVID-19 – Commentary



This question asked respondents to think about who they were active with prior to the pandemic. Overall, who disabled and non-disabled people typically exercise with has remained unchanged. Reinforcing with findings from last year, before the COVID-19 outbreak:

- disabled and non-disabled people were equally likely to be active alone (both 50%),
- disabled people were more likely to be active with a mixture of disabled and non-disabled people (20% vs 12% of non-disabled people),
- And non-disabled were more likely to be active with non-disabled people only (25% vs 11% of non-disabled people).

Disabled people were, however, slightly more likely to exercise with only non-disabled people in the 2020/21 survey report (11% up from 7% in 2019/20).

Though many people are being active alone, the next most common type of participant mix was with disabled and non-disabled people, showing that inclusive activities are popular. Ideally this figure would increase year-on-year as more inclusive opportunities become available.

Differences between demographic groups

There were few subgroup differences of note this year, although new to the 2020/21 survey report, younger disabled people were significantly more likely to report they exercise with disabled people with different impairments to them (9% compared with 1% on average).

Additionally, disabled people who reported that COVID-19 had not at all impacted their ability to do sport were more likely to report they exercised alone (63% compared with 40% who reported they had been impacted to a great extent). These findings give some indication that those who previously exercised alone may have had a more positive experience of being active during the COVID-19 pandemic, as they were able to continue exercising alone.

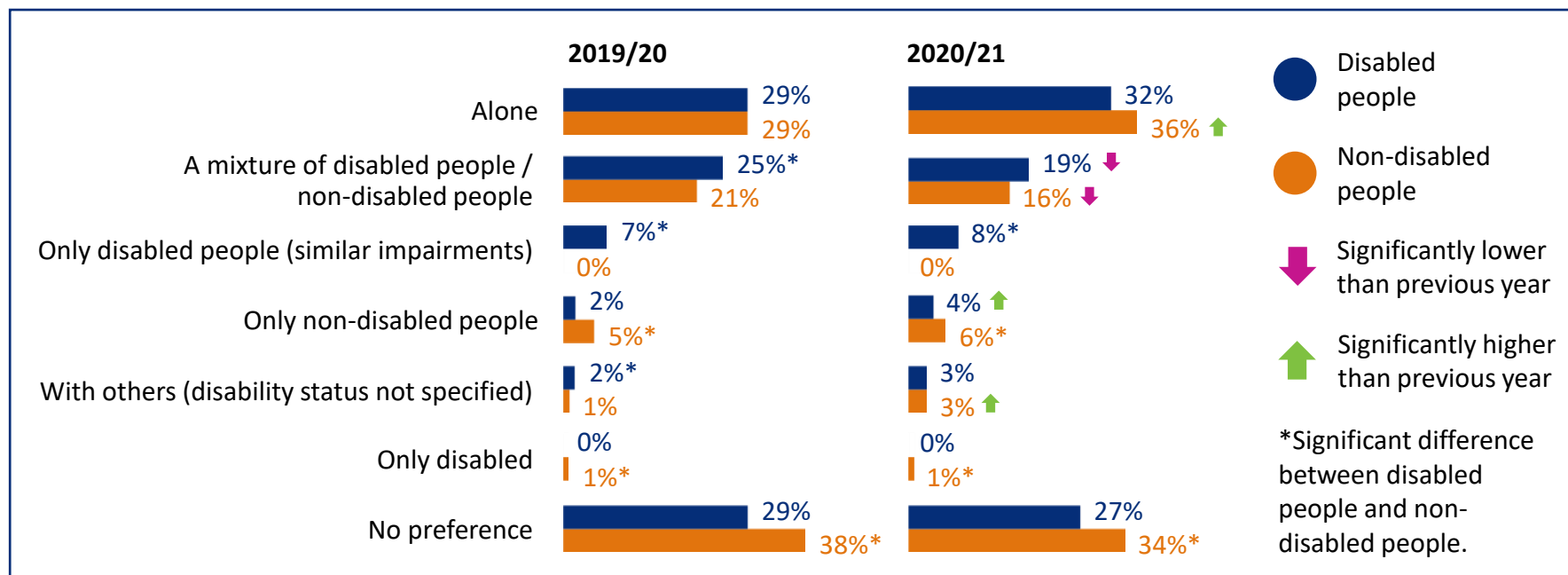
Who people would prefer to be active with



While similar proportions of disabled and non-disabled people said they prefer to exercise alone, both groups were less likely to want to exercise with a mix of disabled and non-disabled people this year.

Figure 24

Who disabled and non-disabled people prefer to do sport, exercise, or physical activity with.



Q: C13. Who would you prefer to do sport, exercise and other physical activity with if you could choose? Base: All disabled and non-disabled people.

Who people would prefer to be active with – Commentary



Although overarching trends around who disabled and non-disabled people would prefer to be active with are unchanged, there were some shifts between years of the survey. Both disabled and non-disabled people were less likely to say they prefer to be active with a mixture of disabled and non-disabled people in 2020/21 (19% and 16%, respectively, compared with 25% and 21% in 2019/20). Possibly reflecting the increase in the proportion of disabled people being active with only non-disabled people, they were twice as likely to report that they would prefer to exercise with only non-disabled people in 2020/21 (4% up from 2% in the 2019/20 survey).

This raises concerns, as changing perceptions and better experiences should lead to more disabled and non-disabled people wanting to take part in inclusive activities. It is unclear what is driving this change.

Differences between impairment types

As last year, there were differences in preference on who to be active with by number of impairments. Disabled people with three or more impairments were twice as likely to report they have a preference for being active with disabled people with similar impairments to them (10% compared with 5% with one impairment). This indicates a preference for disability-specific sports and activities.

6. Information and advice about physical activity

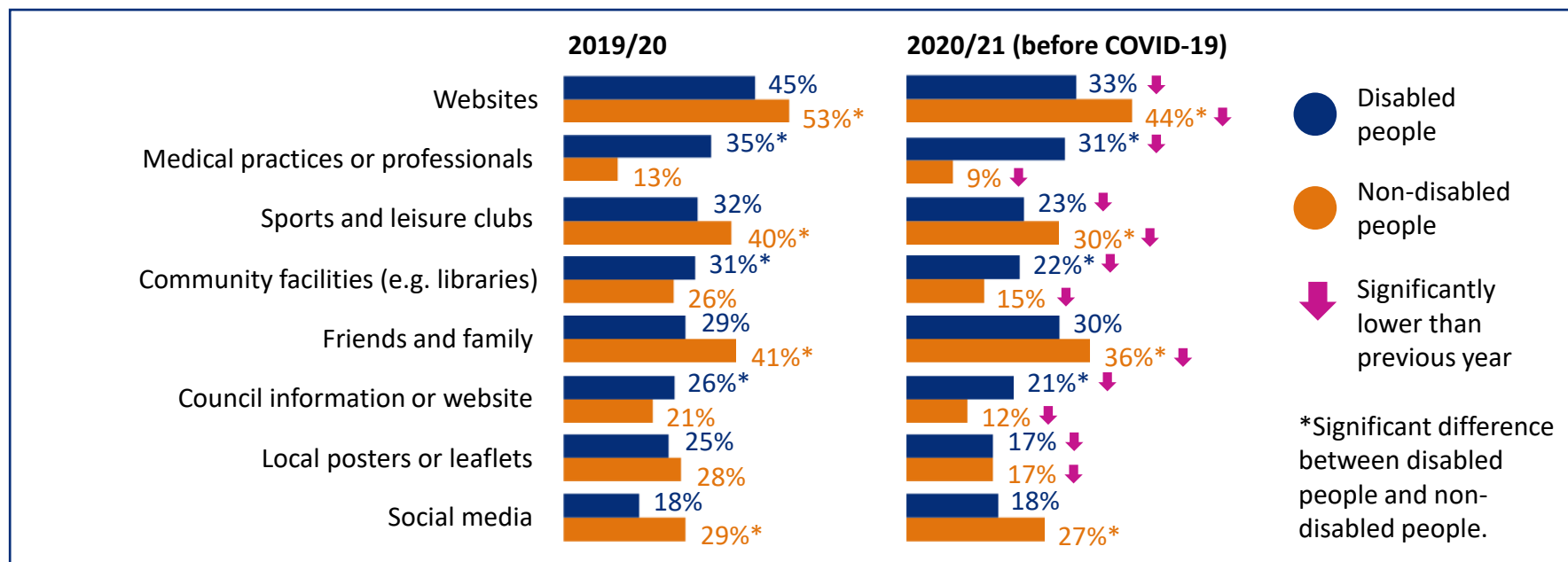
Information channels used before COVID-19



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.

Figure 25

Information channels disabled people use to find information about physical activity opportunities.



Q: C11 Where would you find information about sport or physical activity opportunities? Please consider how you would find information prior to the coronavirus (COVID-19) outbreak. Base: All disabled and non-disabled people. Other options with <18% not shown (national news, newspapers, television, radio; school, college, or university; supporters, carers, and befrienders; other).



There have been significant changes to where disabled and non-disabled find information about physical activity opportunities. Both groups were less likely to find information from a range of sources, most markedly from websites, and sports and leisure facilities (down by roughly 10% for both disabled and non-disabled people). Given the uniform drop in where both groups find information, differences remained. Disabled people were more likely to find information about sport and physical activity through medical professionals and local community facilities. Non-disabled people were more likely to use websites, social media and sports and leisure clubs.

This decrease may be related to changes caused by COVID-19; people have been less likely to access community facilities, sports clubs, or see posters. It is likely that people are using new information channels that aren't represented in this question. This could include community response teams and NHS volunteers. The time elapsed between respondents using these channels and being asked the survey question may also have led to less recall.

Differences between demographic groups

As in the 2019/20 survey, disabled women were more likely than disabled men to use a range of information channels to find information about sport and physical activity opportunities. They were more likely than disabled men to use:

- Local posters and leaflets (20% compared to 13% of disabled men),
- Community facilities (24% compared to 18%),
- Social media (21% compared to 14%).

BAME disabled people were significantly more likely to report using a range of information channels than White disabled people:

- Sports and leisure clubs (37% vs. 23%),
- Social media (37% vs 17%),
- National charities (19% vs 8%).

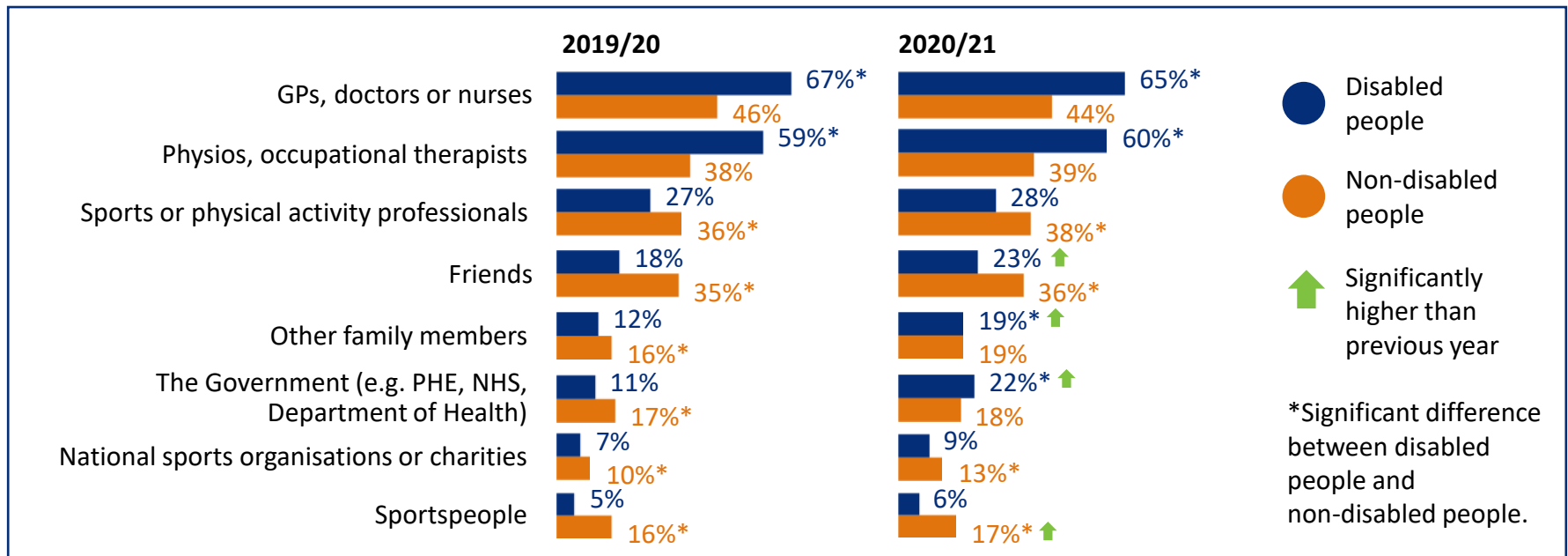
Receiving advice about sport and physical activity



Disabled people remain more likely to say they would listen to healthcare professionals about advice about sport and physical activity. This year, they were also more likely to listen to friends, the government and other family members.

Figure 26

Proportion selecting each person they would listen to about taking part in sport and physical activity.



Q: C9 Whose advice would you listen to about taking part in sport or physical activity? Base: All disabled and non-disabled people. Other options with <5% not shown (parents or guardians; politicians; teachers or lecturers; colleagues; celebrities other than sports people; supporters, carers or befrienders; social workers, care support staff, or personal assistants).

Receiving advice about sport and physical activity

– Commentary



This suggests changes in who disabled people want to listen to about taking part in sport and physical activity. Healthcare professionals remain the most common option, showing that there is an appetite among disabled people to engage with their healthcare professionals on physical activity. Interestingly, other sources of advice have increased for disabled people. In particular, Government advice on physical activity is twice as likely to be listened to by disabled people as in 2019/20. Other studies, such as the [COVID-19 Social Study](#), have shown that overall trust in the Government has decreased, but it appears that advice on physical activity is more trusted.

Disabled people remain less likely to listen to advice from sports or physical activity professionals compared with non-disabled people. Non-disabled people were more likely this year to say they listen to national sports organisations or charities, though this increase was not observed for disabled people.

Differences between impairment types

In line with findings from last year, disabled people with physical impairments were more likely than those that do not to listen to physios, occupational therapists and other medical professionals. For instance, around two thirds of people with dexterity (64%) and mobility (68%) impairments seek advice from medical professionals. This compares to 46% of disabled people with social or behavioural impairments and 49% with speech impairments.

7. Wellbeing

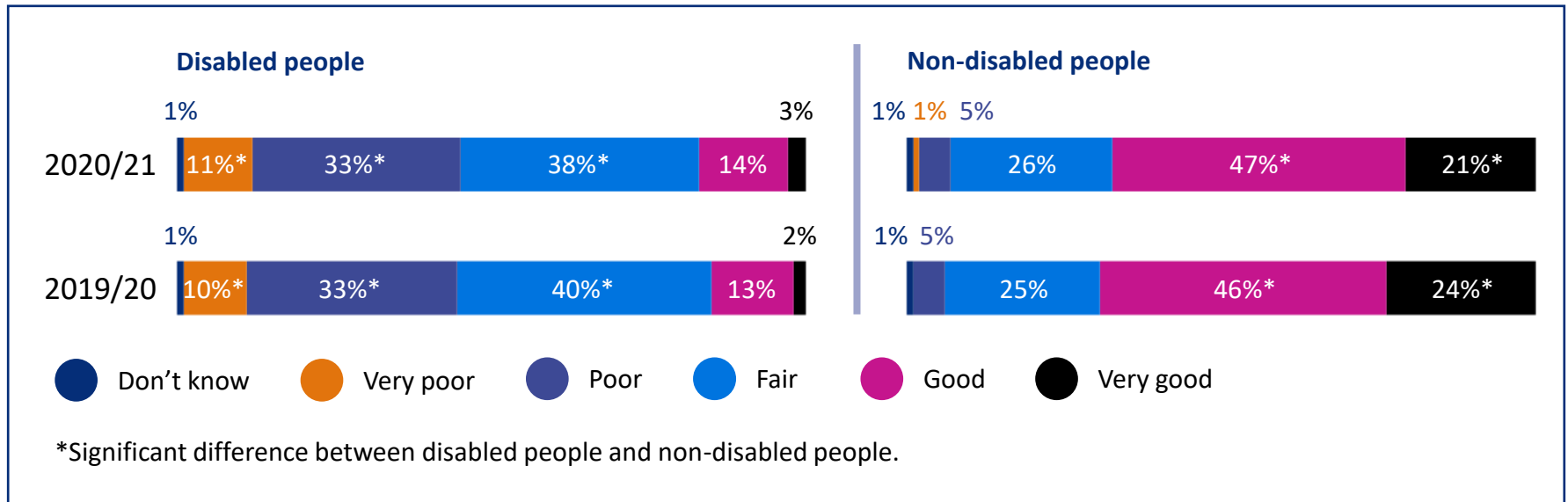
Overall health rating



Despite the context of COVID-19, there were no differences in how disabled and non-disabled people viewed their overall health this year, compared with last year. Differences between disabled and non-disabled people remained. However, disabled people were more likely to report poor health than non-disabled people.

Figure 27

How disabled and non-disabled people rate their overall health (during COVID-19).



Q: E8. In general, how would you rate your overall health? Base: All disabled and non-disabled people.

Overall health rating – Commentary



Findings related to overall health reinforce findings from the 2019/20 survey, with disabled people more likely to rate their overall health as ‘poor’ than non-disabled people. While over two thirds (67%) of non-disabled people rated their health ‘good’ or ‘very good’, only a sixth (17%) of disabled people ranked their health in the same way.

The lack of impact of COVID-19 on how people rate their overall health is surprising, as we may have expected an increase in those rating their health as ‘poor’ due to lack of access to treatments and care, and the impact of self-isolation. The Office for National Statistics’ [‘coronavirus and the social impact on Great Britain’](#) research has shown that disabled people are more likely to be worried about the impact on their health (26% compared to 12% of the general population in October 2020). It also has found that 33% of people with a long-term health condition were not receiving the same level of medical care as before the pandemic, and 36% of these people said their health was getting worse. It is not clear why this study did not see an observable impact of the pandemic on the overall health rating.

Differences between demographic groups

Disabled men were more likely to have a poor view of their health than disabled women this year. Nearly half (49%) of disabled men considered their health poor compared with two fifths (41%) of disabled women. In the previous year there were no significant difference between these groups.

BAME disabled respondents were more likely to have a positive view of their health than White disabled respondents. While 37% of BAME disabled respondents said they considered their health good, only 15% of White disabled respondents considered their health in the same way. This was different from last year where there was no significant difference between BAME and White disabled groups.

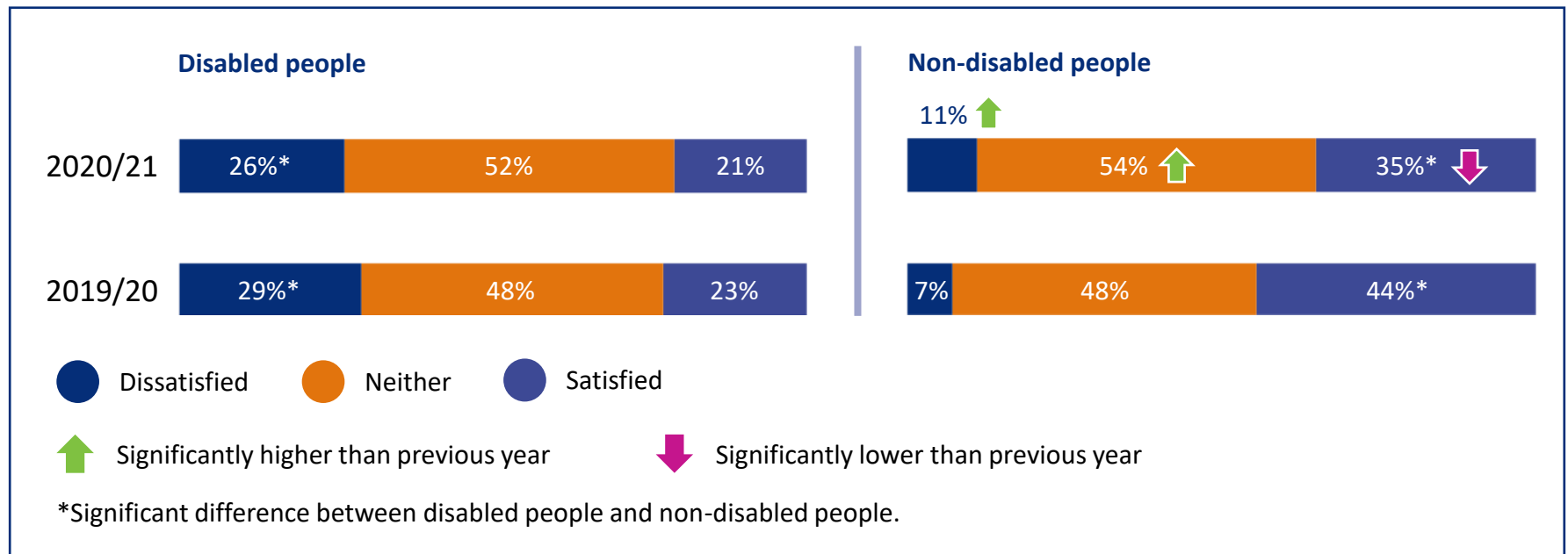
Satisfaction with life



Disabled people were more likely to be dissatisfied with life than non-disabled people. However, differences between the groups were smaller this year, largely driven by an increase in the proportion of non-disabled people who felt dissatisfied.

Figure 28

Level of satisfaction with life among disabled and non-disabled people (during COVID-19).



Q: E2. How satisfied are you with your life nowadays? Base: All disabled and non-disabled people.

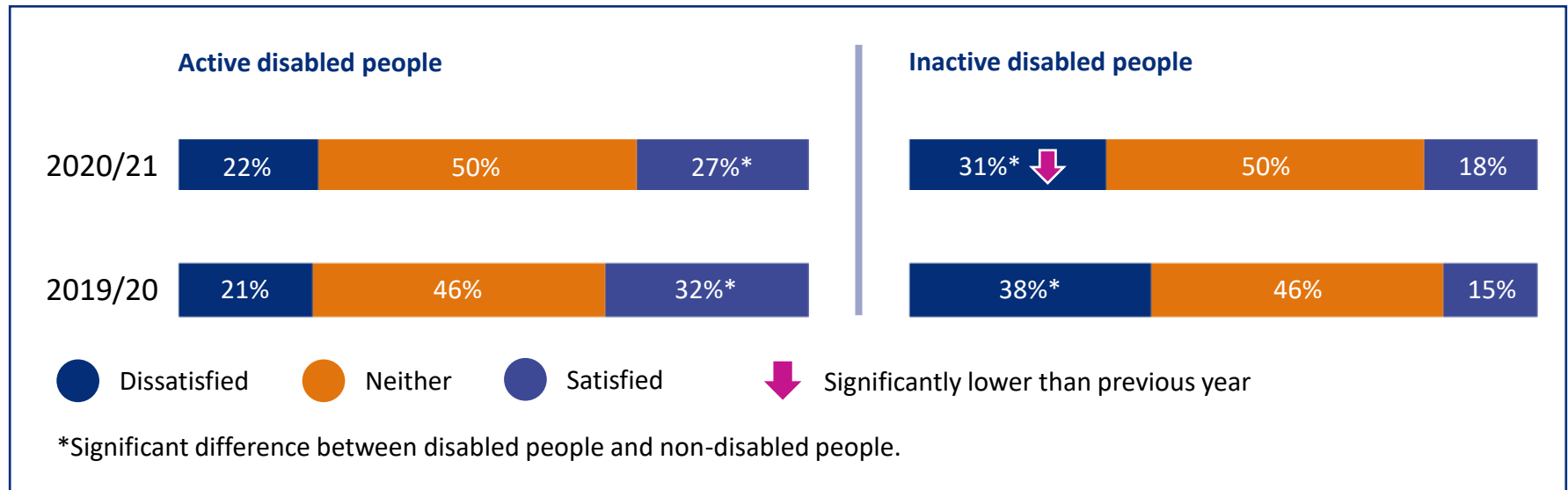
Satisfaction with life among disabled people: activity level



Like in 2019/20, active disabled people are more likely to be satisfied with their life than inactive disabled people. However, the proportion of inactive people who are satisfied with their life has increased, while the proportion of active disabled people who are satisfied with their life has decreased.

Figure 29

Level of satisfaction with life among active and inactive disabled people (during COVID-19).



Q: E2. How satisfied are you with your life nowadays? Base: All active and inactive disabled people.

Satisfaction with life – Commentary



Disabled people reported lower levels of life satisfaction compared with non-disabled people. A quarter (26%) of disabled people said they were dissatisfied with life compared with around a tenth (11%) of non-disabled people.

However, this year's survey reinforced the correlation between physical activity and higher levels of wellbeing. Nearly a quarter (23%) of disabled people who did some sort of physical activity said they were satisfied with their life, compared with one-in-six (17%) of those who did no physical activity. Furthermore, a third of disabled people (32%) who were happy with the amount of physical activity they had done reported that they were satisfied with life. This is significantly higher than those who said they would like to do more (19%).

Given the impact of COVID-19, we may have expected life satisfaction to be lower than in 2019/20. These findings contradict those of the ONS study into [the coronavirus and the social impacts on disabled people in Great Britain](#). This study suggests that the impact of the coronavirus on disabled people was greater than non-disabled people on all measures of wellbeing, including satisfaction with life. It is unclear why this was not observed in this survey. [Sport England's Active Lives May 19-20](#) (which uses the same question) also saw no change in this measure.

It is also unclear why active disabled people were less satisfied this year, while inactive people were more satisfied. It may be that active people were more likely to have their lives and activities restricted by the pandemic, whereas inactive people saw less of a change.

Differences between demographic groups

There were no significant differences between years in terms of how satisfied or dissatisfied disabled people considered themselves. Non-disabled people reported significantly lower levels of wellbeing this year with 35% considering themselves satisfied with life. This is compared with 44% in 2019/20, which led to a narrowing of the gap between the two groups.

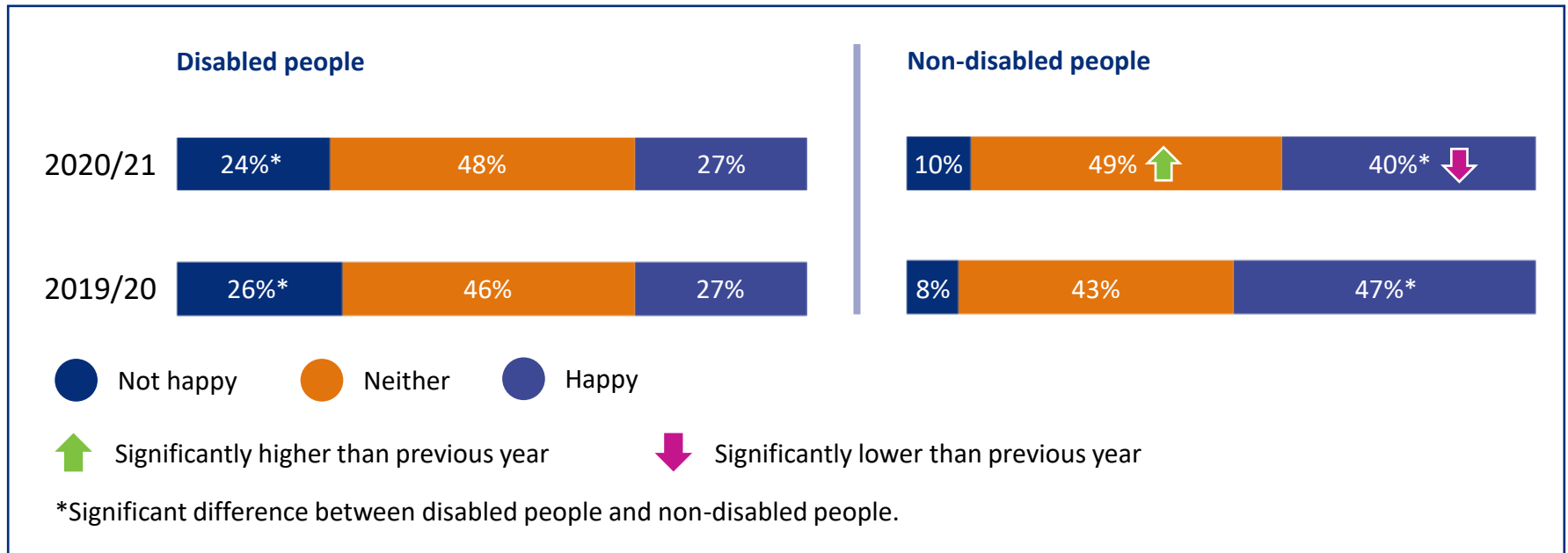
Levels of happiness



Disabled people reported lower levels of happiness than non-disabled people. However, differences between the groups were lower this year, again driven by a decrease among the non-disabled group. Younger disabled people and those with mental health and learning difficulties reported lower levels of happiness.

Figure 30

How happy disabled and non-disabled people felt yesterday (during COVID-19).



Q: E3. How happy did you feel yesterday? Base: All disabled and non-disabled people.

Levels of happiness – Commentary



Reflecting findings from last year, disabled people reported lower levels of happiness in the 2019/20 survey. A quarter (24%) of disabled people said they were unhappy the day before compared with a tenth (11%) of non-disabled people.

There were no significant differences in happiness levels among disabled people compared with last year. However, non-disabled people reported lower levels of happiness (40% described themselves as happy vs 47% last year). These changes have led to a narrowing of the gap between disabled and non-disabled people in terms of reported happiness levels.

As with the previous slides in this section, it is unclear why the pandemic has not had more of an impact on levels of happiness, particularly for disabled people.

Differences between demographic groups and impairment types

Happiness levels were lower among younger disabled people. While over a quarter (27%) of 50-59 year olds and over a third (35%) of over 70 year olds described themselves as happy. However, this was the case for only 15% of under 30 year olds and 16% of 40-49 year olds.

Disabled people with mental health problems or learning difficulties also reported lower levels of happiness compared with the average disabled person. Nearly two fifths (38%) of disabled people with a mental health problem or learning difficulty said they were not happy compared with a quarter (24%) among all disabled people.

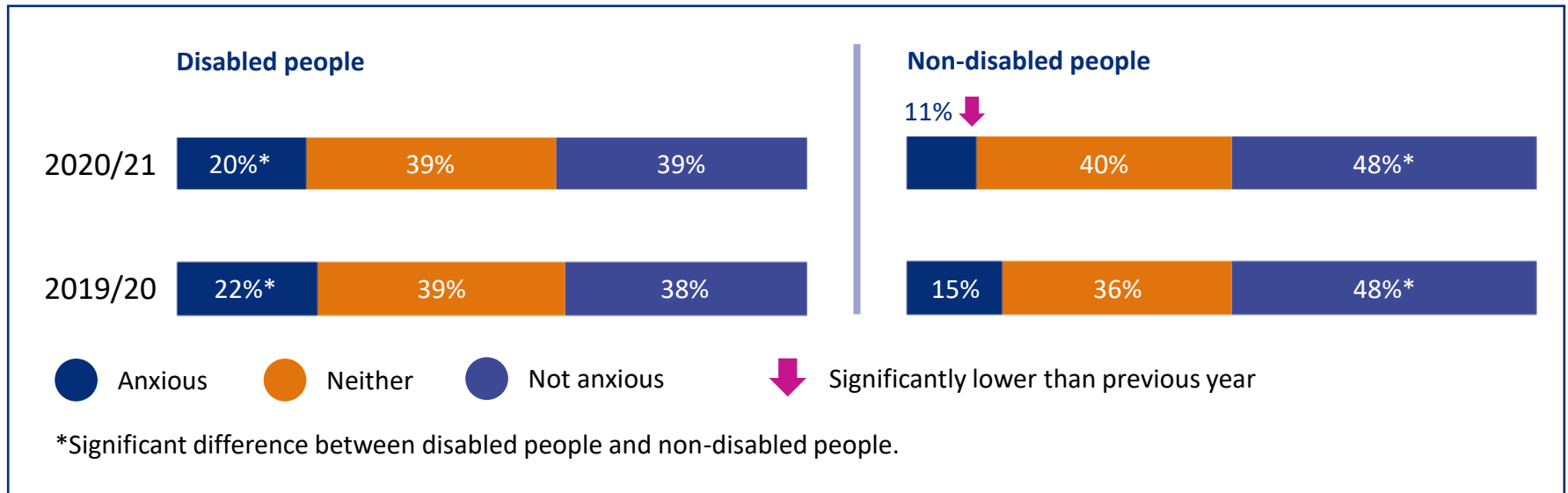
Levels of anxiety



As in 2019/20, disabled people were more likely to be anxious than non-disabled people. The gap between the groups increased this year due to non-disabled people being significantly less anxious this year. Higher levels of anxiety were found among BAME disabled people and younger disabled people.

Figure 31

How anxious disabled and non-disabled people felt yesterday (during COVID-19).



Q: E4. How anxious did you feel yesterday? Base: All disabled and non-disabled people.

Levels of anxiety – Commentary



A fifth (20%) of disabled people said they were anxious the previous day compared with a tenth (11%) of non-disabled people. Levels of reported anxiety among disabled people remained unchanged from last year's survey. Non-disabled people however reported slightly lower levels of anxiety (11% this year compared to 15% in 2019/20).

As with the previous slides in this section, it is unclear why the pandemic has not had more of an impact on levels of happiness, particularly for disabled people. It also contradicts other studies which have explored the impact on mental health, showing that disabled people are more likely to be affected. The ONS study into [the coronavirus and the social impacts on disabled people in Great Britain](#) found that people with a health condition were more likely to be experiencing high levels of anxiety (40%, compared to 33% of the general population).

Differences between demographic groups

In line with the 2019/20 survey, levels of anxiety correlated strongly with disabled age groups. Around three in ten (29%) disabled people under 30 and a third (33%) of those aged 30-39 considered themselves anxious, compared with a fifth (20%) of disabled people on average.

As last year, BAME disabled people were also more likely to consider themselves anxious than White disabled people. Three in ten (30%) of BAME disabled respondents said they felt anxious yesterday compared with one in five White disabled respondents (19%).

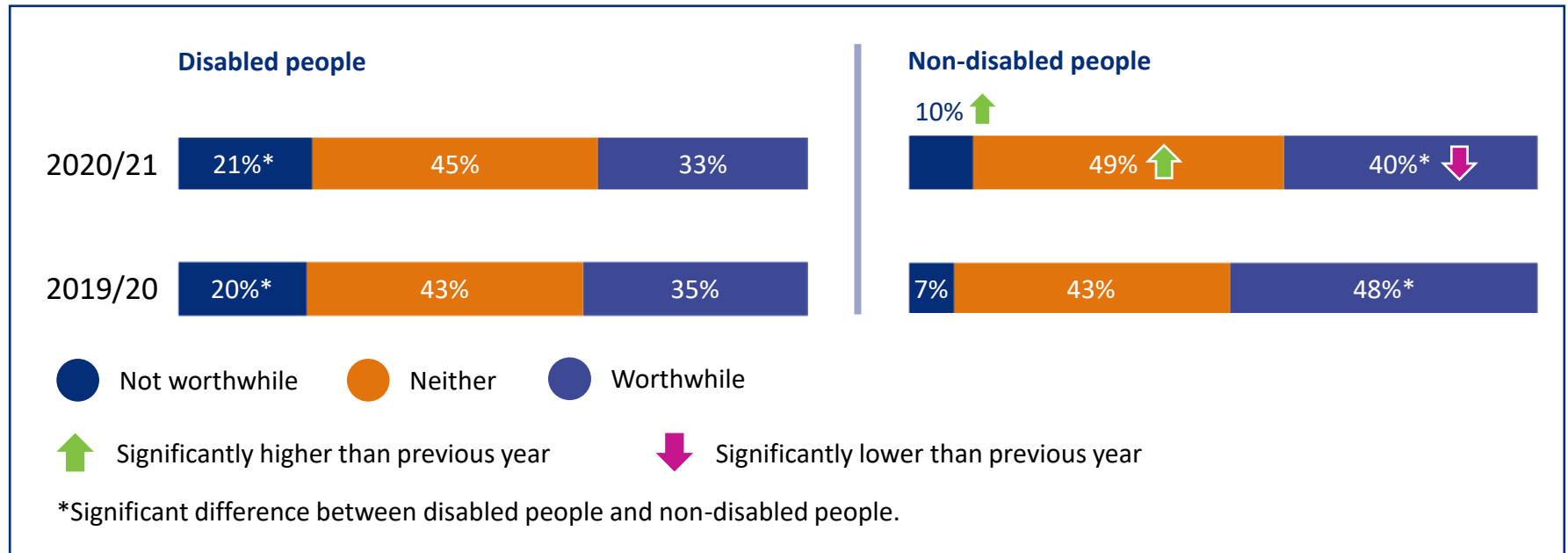
Things in life being worthwhile



Disabled people were less likely than non-disabled people to consider the things they do in life worthwhile, but the gap between the groups narrowed between years. This is primarily because there was no difference in disabled people's views on the worthwhileness of the things in their life across years.

Figure 32

Extent to which things done in life are worthwhile.



Q: E5. To what extent do you feel the things you do in your life are worthwhile? Base: All disabled and non-disabled people.

Things in life being worthwhile – Commentary



Feelings of life being worthwhile were lower among disabled people; while two fifths (40%) of non-disabled considered the things they do in life worthwhile. This was the case for a third (33%) of disabled people.

Non-disabled people were less likely to consider the things they do in life worthwhile this year (40% Year 2 vs 48% Year 1); leading to a narrowing of the gap between the two groups in this regard.

As with the previous slides in this section, it is unclear why the pandemic has not had more of an impact on this measure.

Differences between demographic groups

Like other wellbeing measures, nearly a quarter (23%) of disabled women said that the things in life they did were not worthwhile compared with a sixth (17%) of disabled men, and a tenth (10%) of both non-disabled men and women. There were no significant differences between these groups last year, suggesting that the COVID-19 pandemic has been particularly damaging for disabled women.

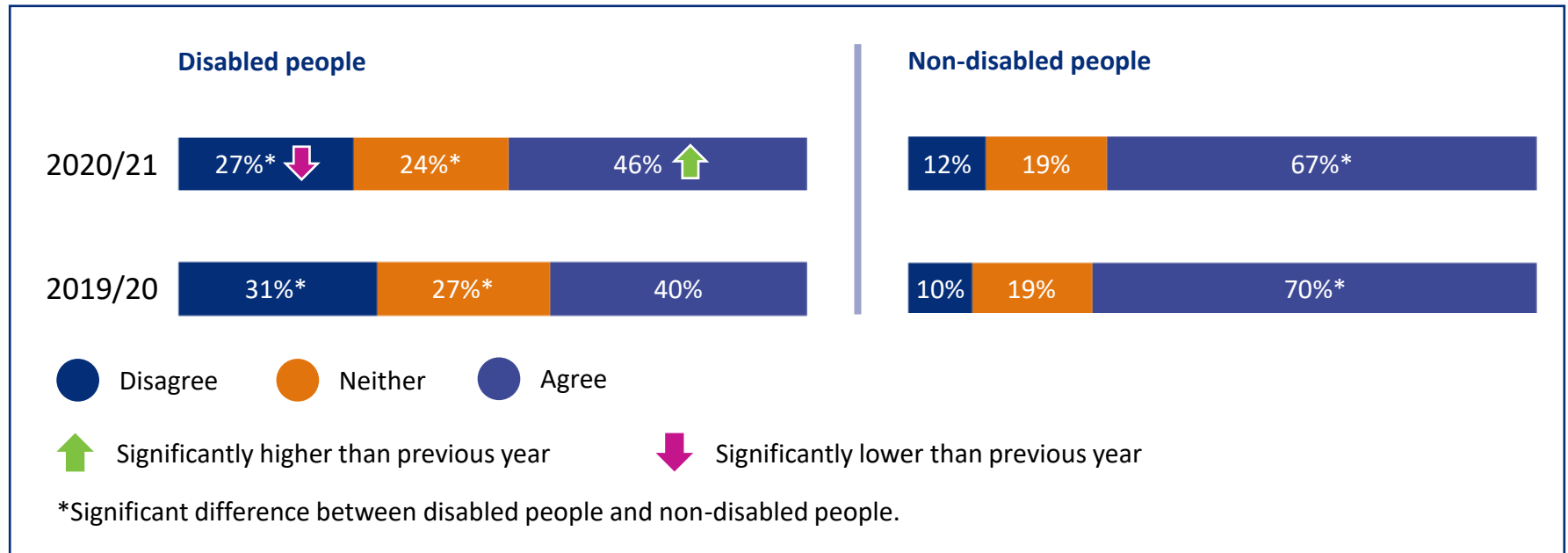
Ability to achieve goals



Disabled people were more likely to agree that they could achieve their goals compared with last year, but were still less likely to believe in their ability to reach goals than non-disabled people. Disabled women also reported lower levels of confidence in their ability to achieve goals.

Figure 33

Extent which respondents agreed they can achieve goals they set themselves.



Q: E6. To what extent do you agree or disagree with the statement 'I can achieve most of the goals I set myself'?

Base: All disabled and non-disabled people.

Ability to achieve goals – Commentary



Significantly more disabled people agreed that they could achieve the goals they set themselves compared with last year (46% this year compared to 40% in 2019/20). This change was not seen among the non-disabled group, meaning that the gap between the groups narrowed.

As with the other wellbeing measures, it is unclear why the pandemic has not had more of a demonstrable effect on this measure. [Sport England's Active Lives May 19-20](#) release (which uses the same question) also saw no change in people's ability to achieve goals.

Differences between demographic groups

Reinforcing findings from last year, disabled women were again less confident in their ability to achieve the goals they set themselves (40% of disabled women compared 55% of disabled men and 68% of non-disabled women).

Differences were also found by disability type; two in five (39%) with mental health or learning impairments disagreed that they could achieve their goals, compared with three in ten with a chronic condition (30%) or physical impairments (28%).

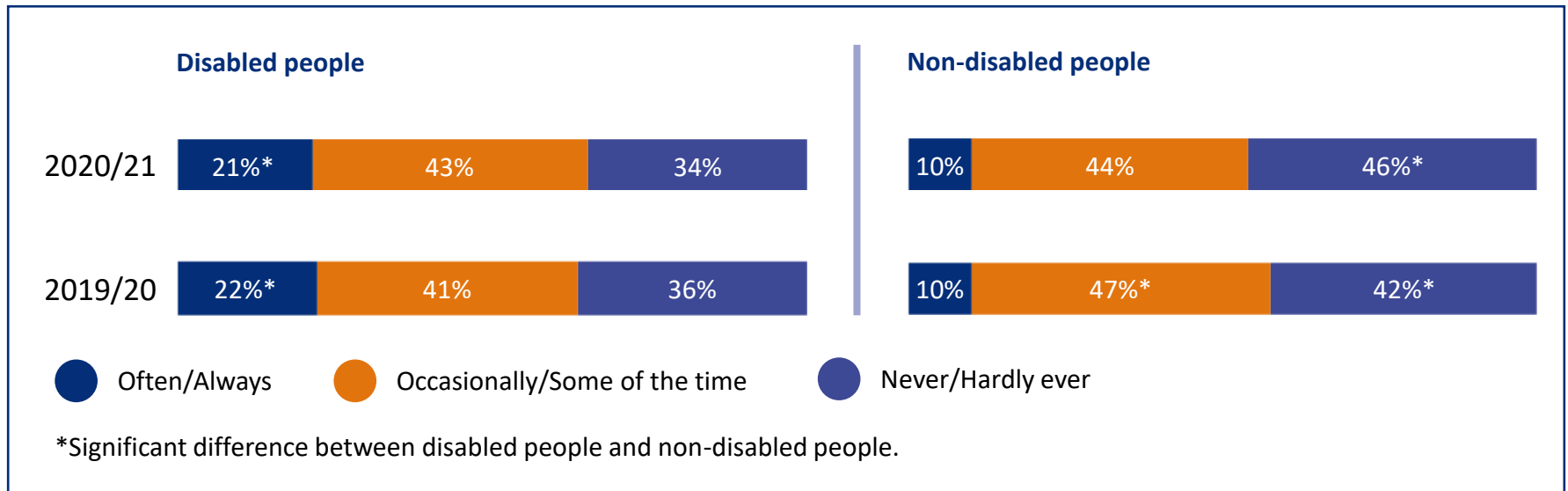
Loneliness



Levels of loneliness have remained consistent within the disabled and non-disabled groups. Disabled people were again more likely to report feeling lonely often or always, and the gap between disabled and non-disabled people never/hardly ever feeling lonely has doubled (6 percentage points in 2019/20 to 12 percentage points this year).

Figure 34

How often disabled and non-disabled people felt lonely.



Q: E7. How often do you feel lonely? Base: All disabled and non-disabled people.



Reinforcing findings from last year, disabled people were more likely to report feeling lonely often or always compared with non-disabled people (21% compared with 10% of non-disabled people). Similarly, nearly half (46%) of non-disabled considered themselves never or hardly ever lonely compared with a third (34%) of disabled people. Other studies, such as the [ONS's 'coronavirus and the social impacts on disabled people in Great Britain' project](#), show that people with a health condition are twice as likely to feel lonely than the overall population, which supports the difference observed in the previous slide.

Again, changes in loneliness scores might have been predicted, due to the impact of self-isolation and social distancing. From the open-ended questions in this study, many disabled people spoke of feeling isolated from their friends and family, and being unable to socialise with others. The [ONS's 'Coronavirus and loneliness in Great Britain'](#) release in June 2020, showed that loneliness levels were similar to pre-lockdown. It did however observe that those in “bad” or “very bad health” were more likely to be lonely, and other factors like living alone or being single or separated may be more influential.

Differences between demographic groups

Younger disabled groups also reported higher levels of loneliness this year. Around two fifths of those under 30s (37%) and those aged 30-39 (42%) reported that they were often or always lonely, significantly higher than other age groups (14%, over 70s, 22% of 50-59 year-olds).

8. Benefits, financial assistance and physical activity

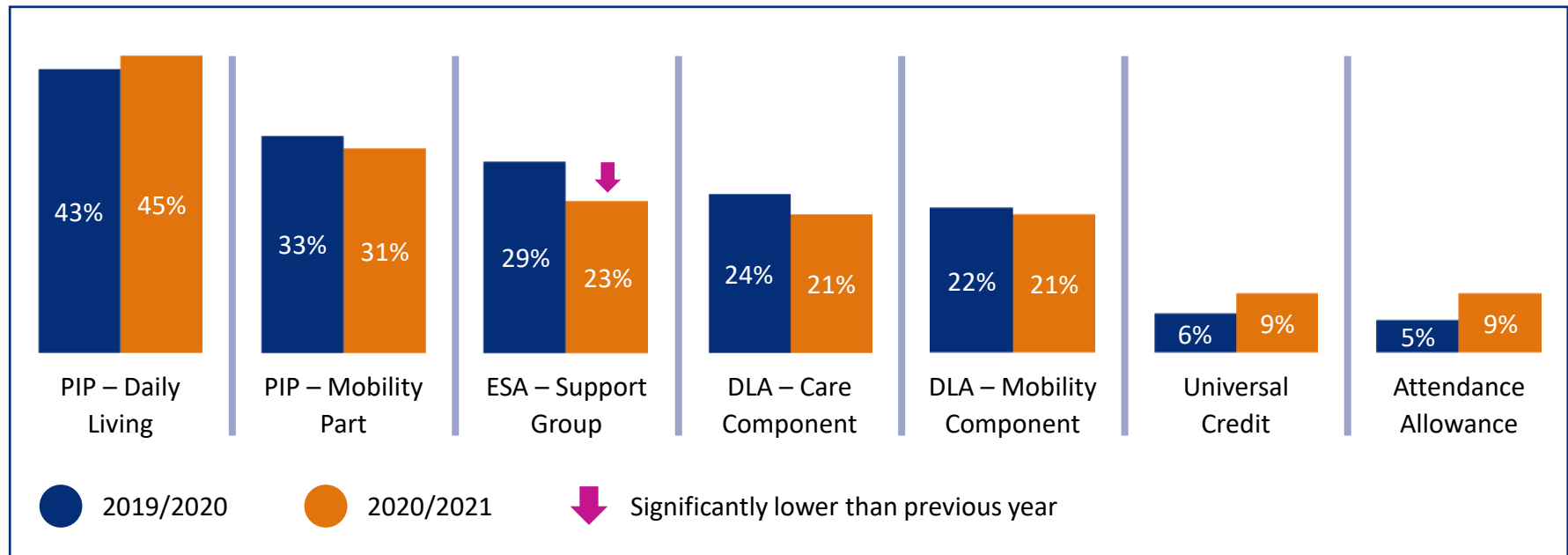
Types of benefits or financial assistance received by disabled people



Personal Independence Payments (Daily Living and Motability) remained the most commonly received benefit. Compared to last year, the proportion of disabled people receiving Employment Support Allowance Support Group decreased, while the proportion receiving Attendance Allowance and Universal Credit increased.

Figure 35

Type of benefit or financial assistance received by disabled people (benefits reported by less than 8% not shown on chart).



Q: F2/F3 Which benefits or financial assistance do you / did you currently receive related to your health conditions, impairments or illnesses? All disabled people who have previously or currently receive benefits. 2020/21: (n = 548); 2019/20 (n = 643).

Types of benefits or financial assistance received

– Commentary



Benefits and other forms of financial assistance play an important role in the lives of many disabled people. In 2018, Activity Alliance and Dwarf Sports Association UK released [The Activity Trap](#), a research report exploring how fears around benefits can prevent disabled people from being as active as they would like to be. In our Annual Disability and Activity Survey, we have continued to cover this topic to track changes in disabled people's experience and perception of the welfare system.

Roughly half (47%) of disabled people were currently receiving financial assistance for their health condition; under one in 10 (7%) had previously received financial assistance but were not doing so anymore.

Of those who reported that they had ever received benefits, the benefit that was most mentioned by respondents was Personal Independence Payments (both Daily Living and Mobility).

The likelihood of receiving types of financial was connected to activity level. Disabled people that do no activity were more likely to receive the following types of financial assistance:

- PIP (Daily living): 53%, compared with 40% who do some activity; and
- PIP (Mobility part): 38% vs. 28%.

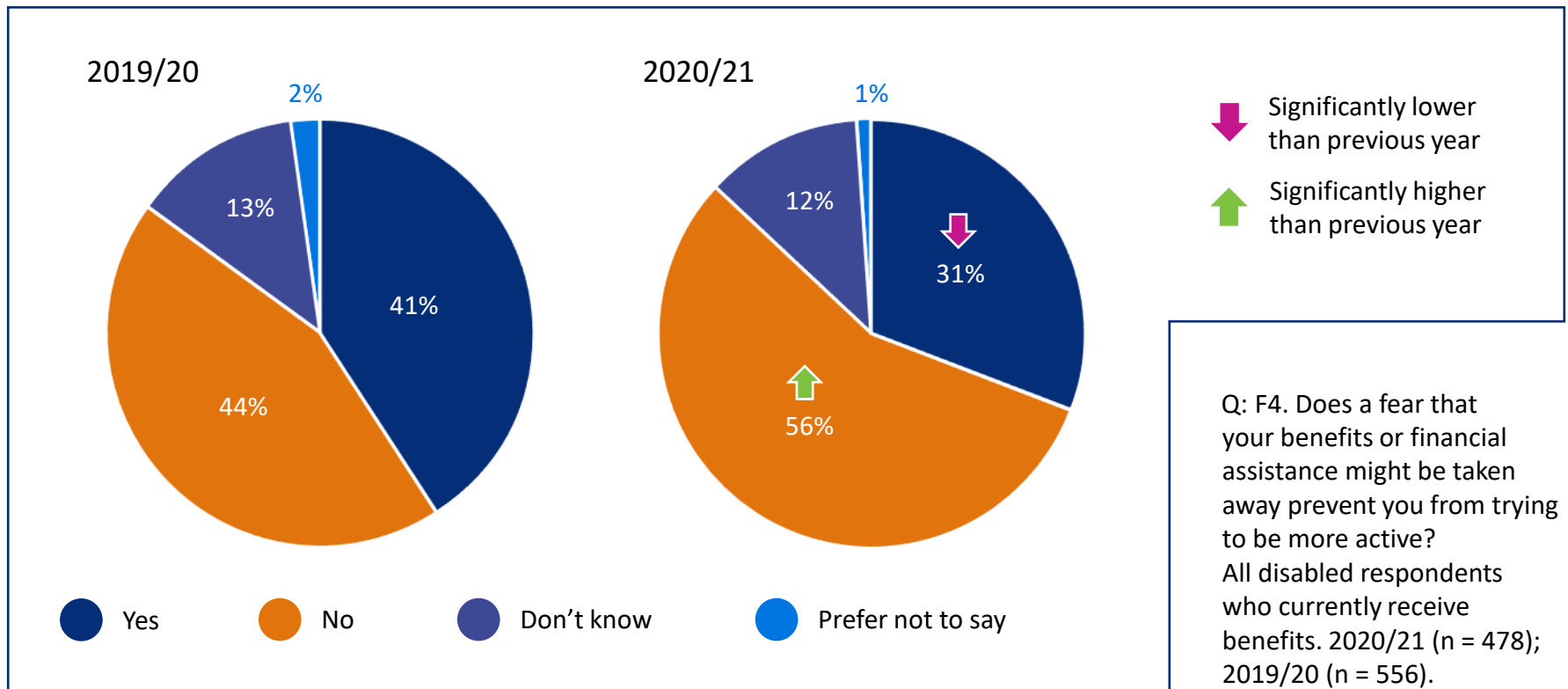
Fear of losing benefits as a barrier to being active



Disabled people were less likely to say that fear of benefits being taken away was preventing them from being active than in 2019/20. However, this still means that almost a third of disabled people say that this is a barrier to being more active.

Figure 36

Proportion of disabled people who fear that their benefits might be taken away if they are more active.



Fear of losing benefits as a barrier to being active

– Commentary



Disabled people receiving benefits or financial assistance were less likely to report that the fear that these would be taken away was a barrier to being active than in the previous year and in the Activity Trap research. It is unclear what has led to this change; it may be that the government and sports organisations have been able to reassure disabled people about this fear. Another possible reason is that this barrier has become less significant for survey respondents due to the COVID-19 pandemic presenting more tangible barriers to being active.

The fear of benefits being taken away as a barrier to being more active was greater among those who had been active. A third (34%) of those who said that they had taken part in some activity said that this fear prevented them from being more active, higher than a quarter (25%) of those who had taken part in no activity. This indicates that worries about losing benefits are more likely to limit activity, rather than prevent it at all.

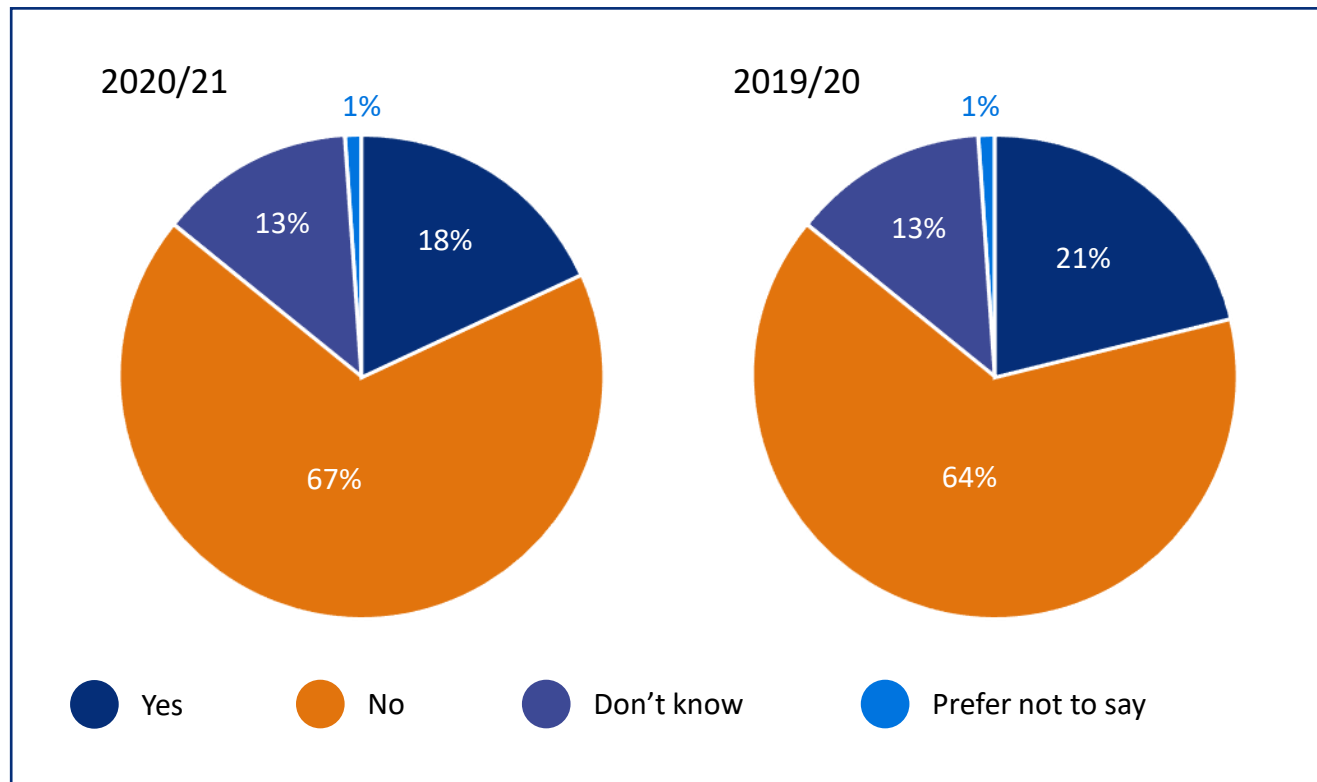
Impact of physical activity on benefits



A similar proportion of disabled people in both years of the survey reported that either they themselves, or someone they knew, had had their benefits sanctioned or reduced due to being physically active.

Figure 37

Whether own or others benefits or financial assistance negatively impacted because of being active.



Q: F5. Have you, or has anyone you know, ever had benefits or financial assistance sanctioned, reduced, suspended or removed because of being physically active? All disabled people.



There were no significant differences between the 2019/20 and 2020/21 survey report in terms of knowledge of people who had their benefits or financial assistance sanctioned, reduced, suspended or removed because of being physically active.

Disabled people who were currently receiving financial assistance were more likely to report that they knew someone who had their financial assistance sanctioned (29%, compared with 4% of those who had never received financial assistance). The difference between these groups was more pronounced this year, as the proportion of disabled people who had never received financial assistance that knew someone who had had their benefits sanctioned decreased significantly (down from 10% last year).

Unlike last year, there were no differences by benefit type in relation to the proportion reporting that they did know someone who had their financial assistance sanctioned.

Differences between demographic groups

There were differences by ethnicity: over a third (37%) of BAME disabled people said they were aware of sanctions compared with a sixth (16%) of White disabled people.

Knowledge of those who had their financial assistance sanctioned also differed by age, with younger disabled people more likely to report this (31%, compared with 8% of older disabled people).

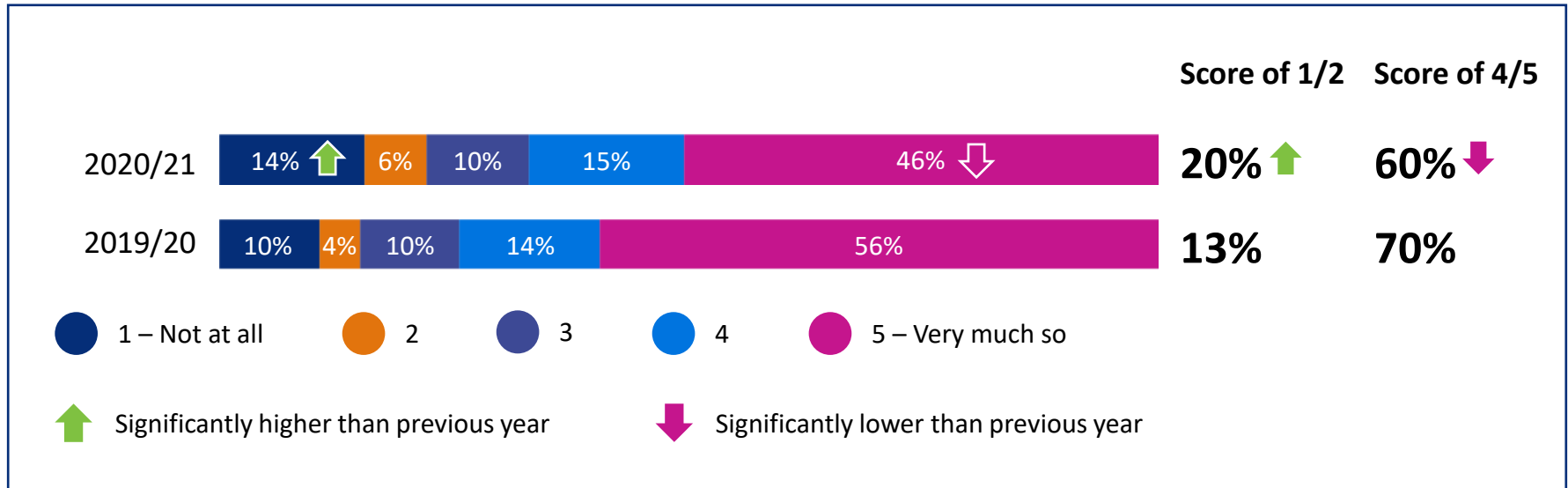
Reliance on benefits to be active



Less disabled people said they relied on benefits to be active this year. Those receiving Personal Independence Payments (PIP) were more likely to say they rely on their benefits to be active compared with those on other types of benefits.

Figure 38

Extent to which disabled people rely on benefits to be active.



Q: F6. How much do you rely on your benefits or financial assistance to be active? Base: All disabled respondents who currently receive benefits. 2020/21 ADAS: (n = 478) ; 2019/20 ADAS: (n = 556).

Reliance on benefits to be active – Commentary



Disabled respondents were less likely to report that they were reliant on benefits to be active this year (60% compared with 70% in the previous year). Similarly, the respondents who said they were not reliant on benefits to be active increased from an eighth (13%) last year to a fifth (20%). Despite the decrease, it is clear that benefits are important in helping many disabled people to be active.

It is unclear what has led to this decrease. We know that financial barriers are important for disabled people, and that many disabled people are facing increased costs and, in some cases, reduced incomes. It may be that less people are using their benefits to be active at this time, so consider themselves less reliant.

Those receiving both daily living and Motability Personal Independence Payments (PIP) were more likely to consider themselves reliant on their benefits to be active. Two thirds of both groups (67%, daily living, 68%, Motability) said they were reliant on their benefits to be active, compared with three in five (61%) on average.

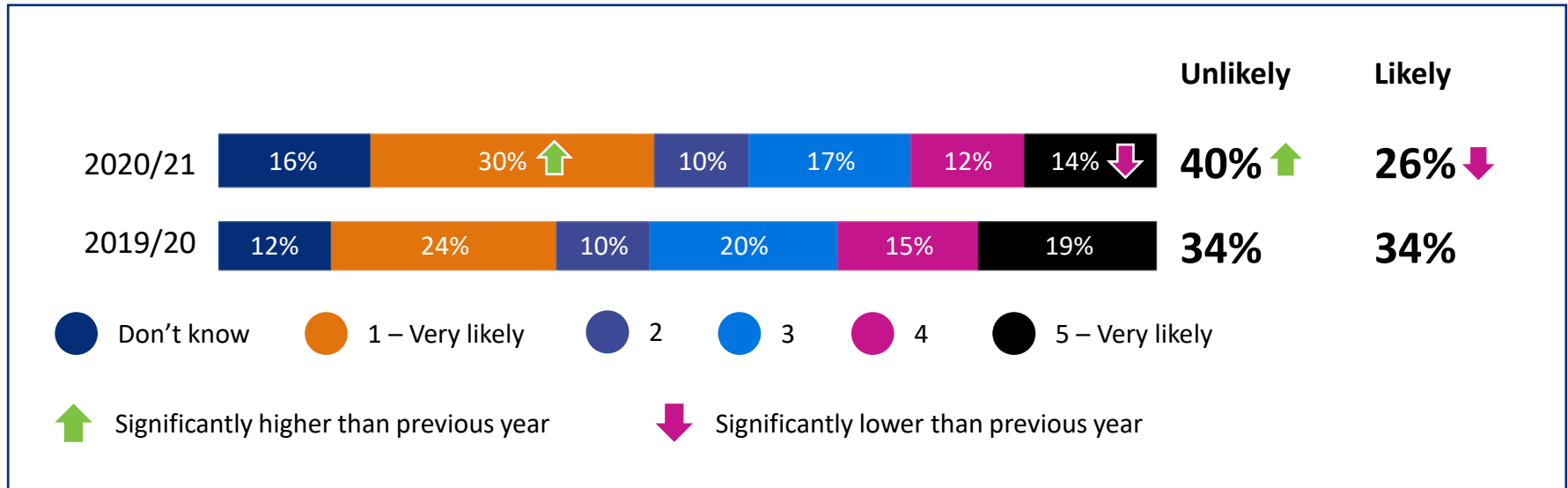
Potential impact if benefits were unconditional



The conditionality of benefits was less likely to influence how active disabled people were this year. Disabled people who were already active were more likely to report that they would increase activity levels if their benefits or financial assistance were unconditional.

Figure 39

Likelihood of trying to be more active if benefits or financial assistance were unconditional.



Q: F7. If your benefits or financial assistance were unconditional (that is, you couldn't have them taken away), how likely or not is it that you would try to be more physically active? Base: All disabled people who currently receive benefits. 2020/21: (n = 478); 2019/20: (n = 556).

Potential impact if benefits were unconditional

– Commentary



Disabled respondents were less likely to consider becoming more active if their benefits were unconditional this year (26% said that it was likely they would try to be more physically active if their benefits were unconditional, compared with 34% in 2019/20).

Again, is unclear what has led to this change. It may be that less people are using their benefits to be active at this time, or that other factors have become more important due to the pandemic.

Disabled people who were already active were more likely to report that they would increase activity levels if their benefits or financial assistance were unconditional (32% of disabled people that currently do some activity compared 16% of those who do no activity).

9. 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 a temporary not 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.



3. The pandemic is disproportionately 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**

1. Provide clear and consistent information about being active



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 [inclusive communications guidance](#) 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.

2. Embed inclusive practice into opportunities as they recover



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. [Visit our COVID-19 page](#) 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:
 - [Talk to Me 'Ten Principles'](#) gives guidance for providers to increase participation and make activities more appealing and accessible.
 - The [Inclusive Activity Programme](#) provides training to increase confidence and competence to include disabled people in community activities and physical education.
 - Applying learning from [Get Out Get Active](#) outputs can help to understand how to support the least active disabled and non-disabled people be active together.
 - The [Lead toolkit](#) 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. [Visit our active at home page](#) for examples.

4. Offer a variety of ways to be active



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. [Read our 'Reopening Activity: An inclusive response' resource guidance](#) 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 [person-centred approach](#) 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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Activity Alliance is the operating name for the English Federation of Disability Sport. Registered Charity No. 1075180.

10. Appendix

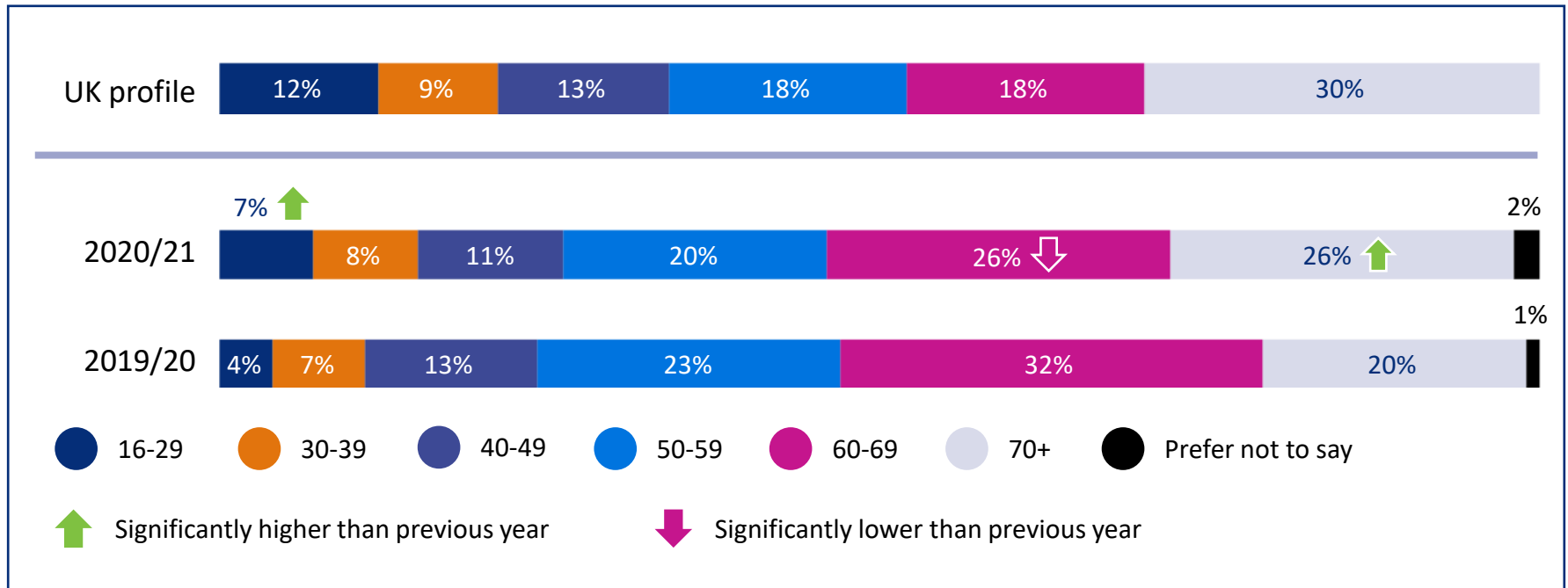
Disabled people: age profile



The age profile for the 2020/21 Annual Disability and Activity Survey was closer to the age profile of disabled people in the UK. The proportion of respondents in both the youngest (16-29) and older (70+) age group increased from last year, bringing it in line with the UK population.

Figure 40

Age profile of disabled respondents in the 2019/20 and 2020/21 survey compared to the UK profile of disabled people.



Q: A3. How old are you? Base: All disabled people. Data for the UK profile is taken from the 2018/19 Family Resources Survey.

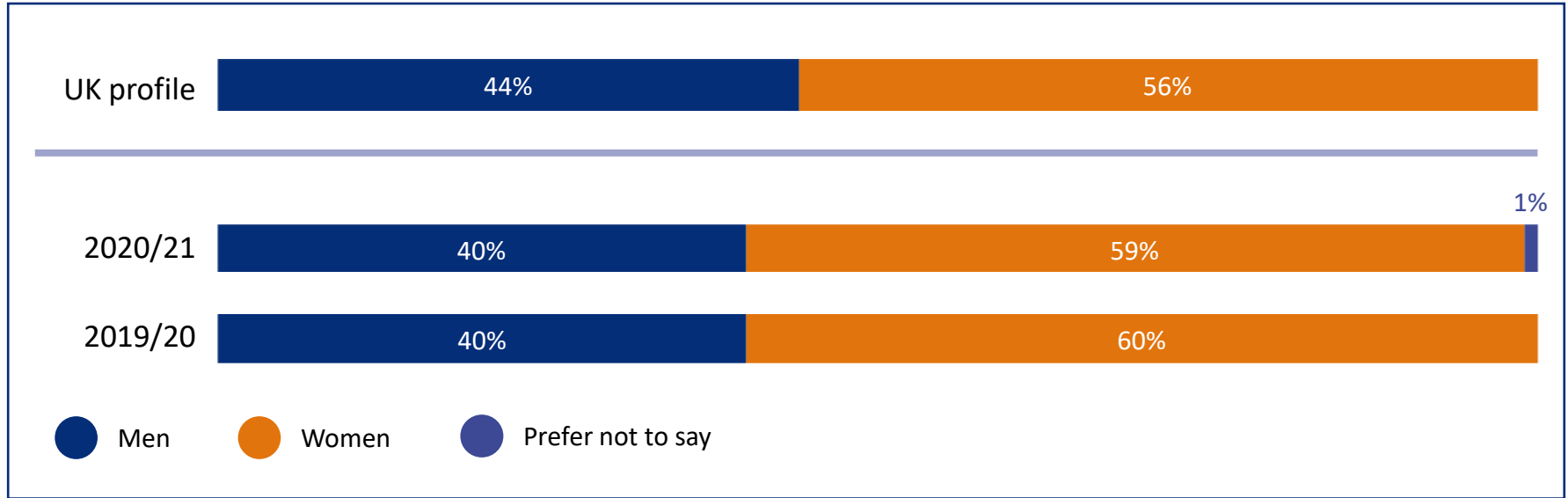
Disabled people: gender profile



The gender profile remained consistent across years of the survey, in line with the UK gender profile.

Figure 41

Gender profile of disabled respondents in the 2019/20 and 2020/21 survey compared to the UK profile of disabled people.



Q: G1. Which of the following best describes how you think of yourself? <1% selected 'in another way'. Base: All disabled people. Data for the UK profile is taken from the 2018/19 Family Resources Survey.

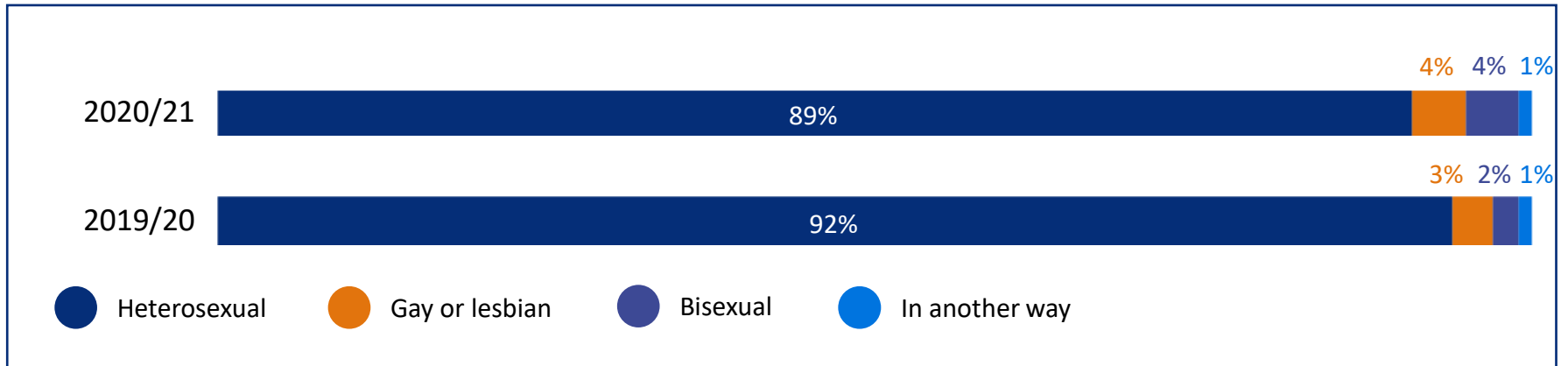
Disabled people: sexual orientation



The sexual orientation profile of disabled people was also consistent in both years of the survey.

Figure 42

Sexual orientation profile of disabled respondents in the 2019/20 and 2020/21 survey.



Q: G5. Which of the following best describes how you think of yourself? Base: All disabled people.

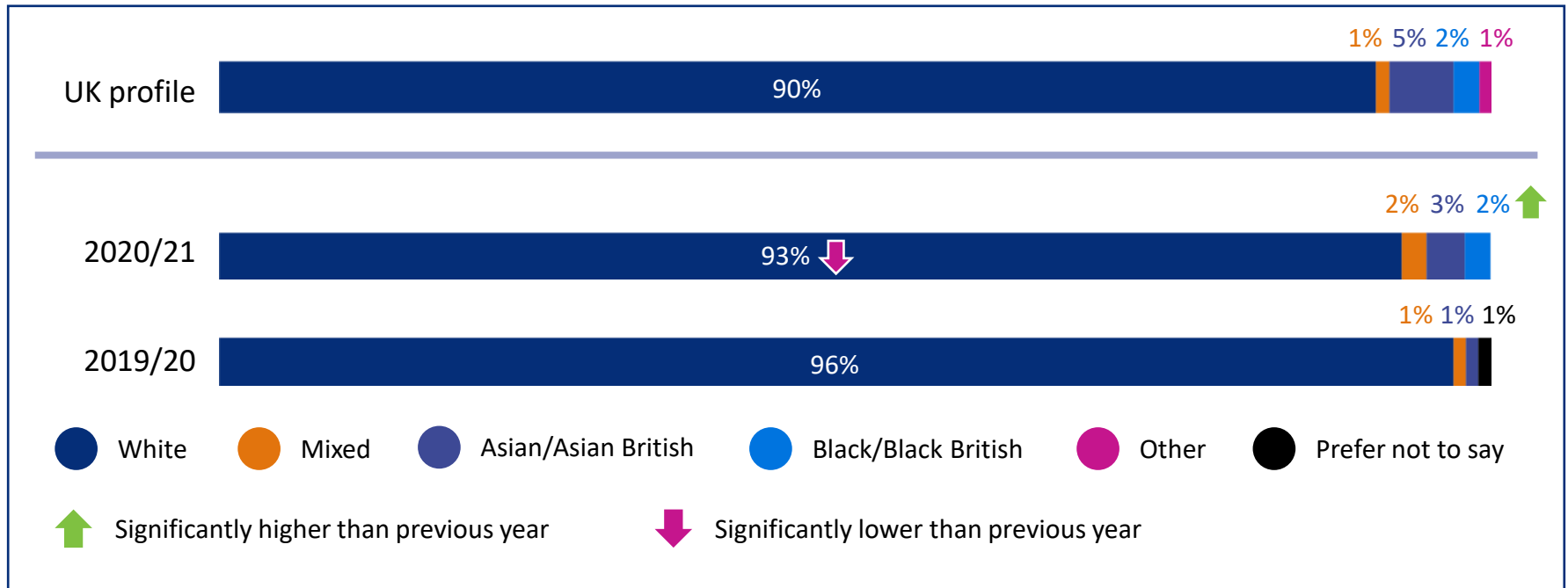
Disabled people: ethnicity profile



The ethnicity profile for the 2020/21 Annual Disability and Activity Survey is closer to the age profile of disabled people in the UK. The proportion of respondents from Asian/Asian British and Black/Black British groups increased in the 2020/21 survey report, reflecting the proportions in the wider UK population.

Figure 43

Ethnicity profile of disabled respondents in the 2019/20 and 2020/21 survey compared to the UK profile of disabled people.



Q: G6. How would you describe your ethnic group? Base: All disabled people.



Disabled people: region profile



The region profile of disabled people was consistent across the 2019/20 and 2020/21 surveys.

Table 7

Region profile of disabled respondents each year compared to the UK profile of disabled people.

	UK profile	2019/20	2020/21
North East	5%	7%	5% 
North West	11%	15%	13%
Yorkshire & Humber	9%	10%	9%
East Midlands	8%	9%	10%
West Midlands	9%	8%	10%
East of England	10%	8%	11% 
South East	11%	15%	15%
London	13%	8%	8%
South West	9%	10%	9%
Northern Ireland	3%	2%	2%
Wales	8%	4%	4%
Scotland	5%	5%	4%

 Significantly lower than previous year  Significantly higher than previous year

Q: G2 In which part of the UK do you live? Base: All disabled people. Data for the UK profile is taken from the 2011 Census.

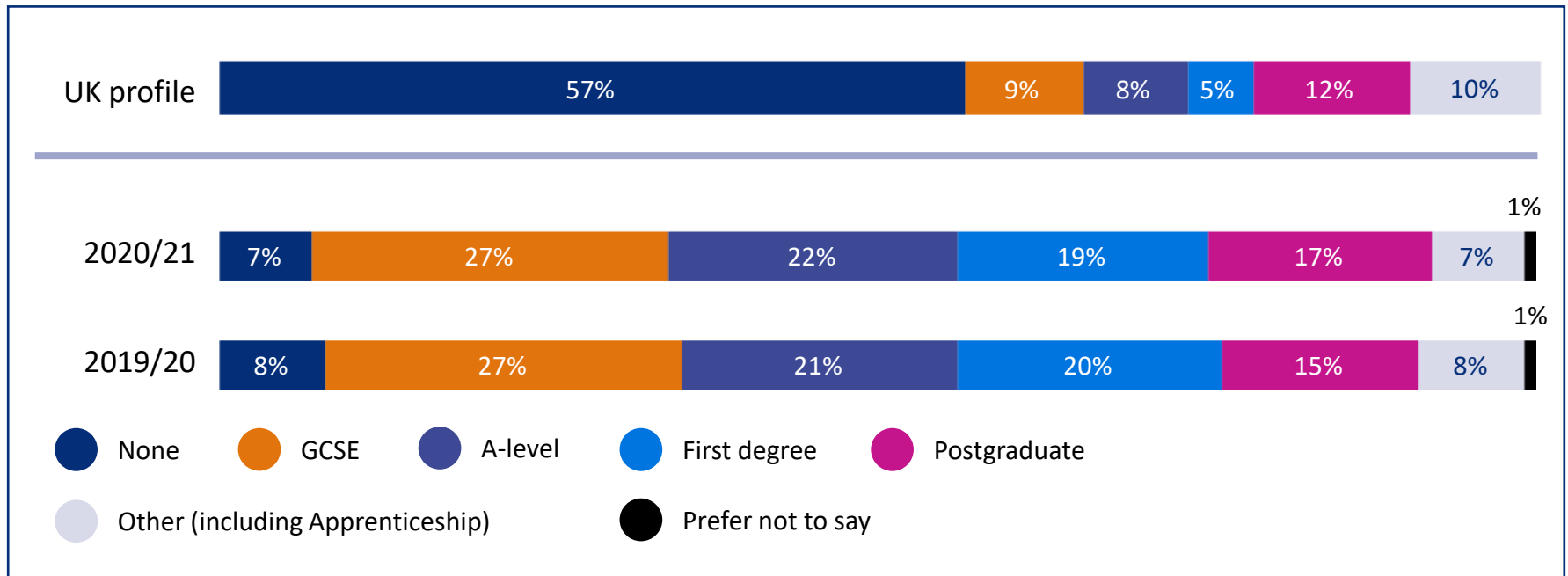
Disabled people: qualification profile



The qualification profile was consistent across years of the survey. The UK profile data is for people whose day-to-day activities are 'limited a lot' so is likely to be less representative of all disabled people.

Figure 44

Qualification profile of disabled respondents in the 2019/20 and 2020/21 survey compared to the UK profile of disabled people.



Q: G4 Please state the highest level of educational qualification you have attained. Base: All disabled people. Prefer not to say responses are not shown. Data for the UK profile is taken from the 2011 Census.

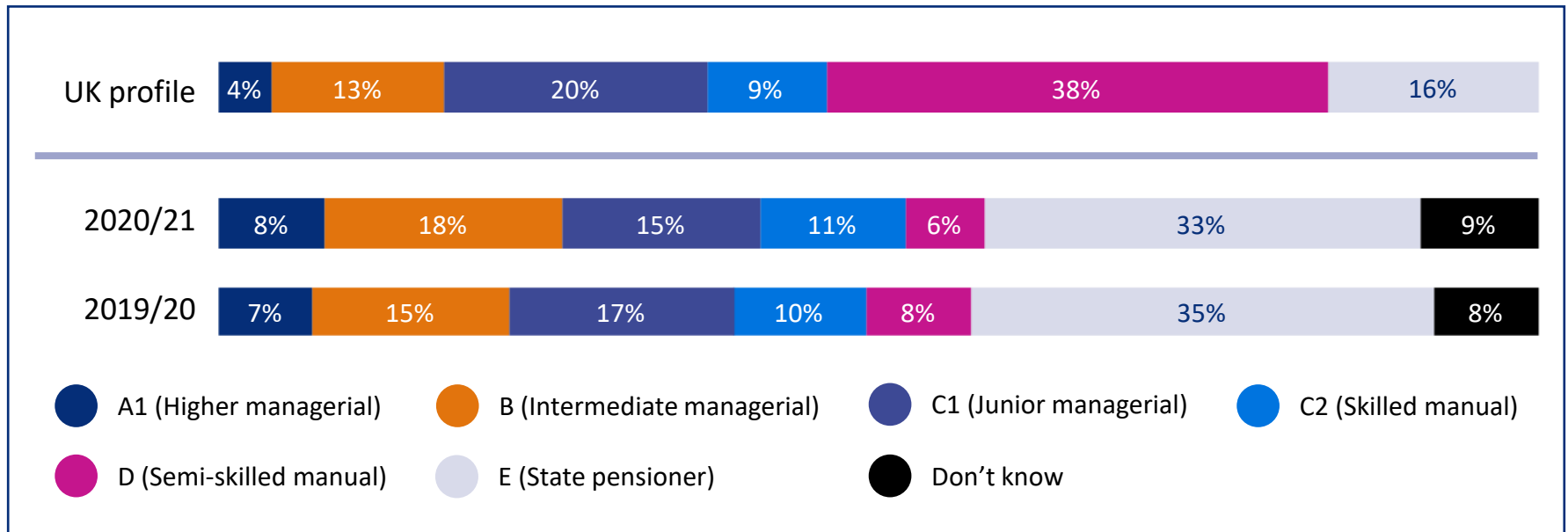
Disabled people: socioeconomic profile



The socioeconomic profile of disabled people was consistent across years of the survey. The survey population differs from the disabled population of the UK in relation to the proportion in semi-skilled positions and state pensioners.

Figure 45

Socioeconomic profile of disabled respondents in the 2019/20 and 2020/21 survey compared to the UK profile of disabled people.



Q: G3 How would you describe the job of the chief income earner in your household? Base: All disabled people. Don't know and prefer not to say responses are not shown. The difference in bar totals is due to the 'don't know' and 'prefer not to say' options.

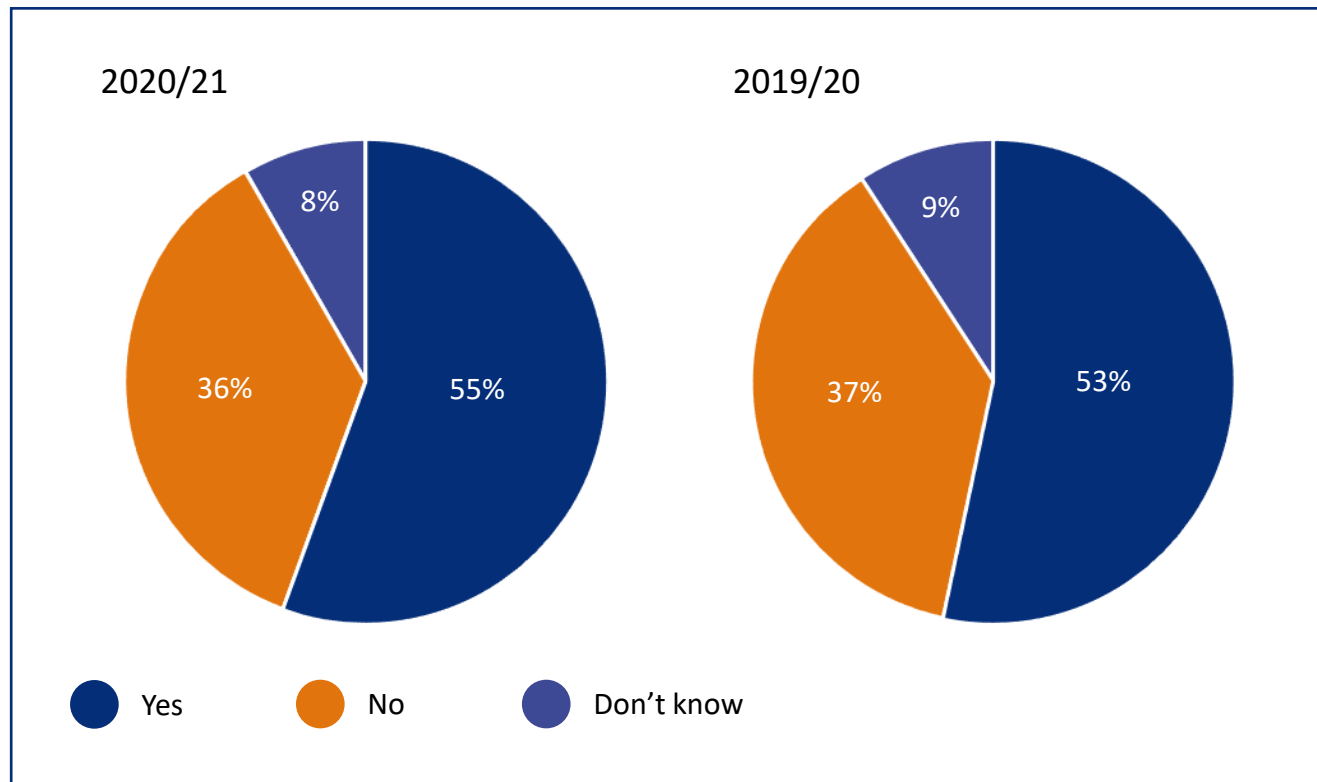
Whether disabled people think of themselves as disabled



A consistent proportion of disabled people thought of themselves as disabled in the 2019/20 survey and the 2020/21 survey. Unlike last year, disabled men were more likely than disabled women to think of themselves as disabled in the 2020/21 survey (60% vs 52%).

Figure 46

Proportion of disabled people that think of themselves as disabled, by year of survey.



Q: B7 Do you think of yourself as disabled?
Base: All disabled people. Prefer not to say responses are not shown.

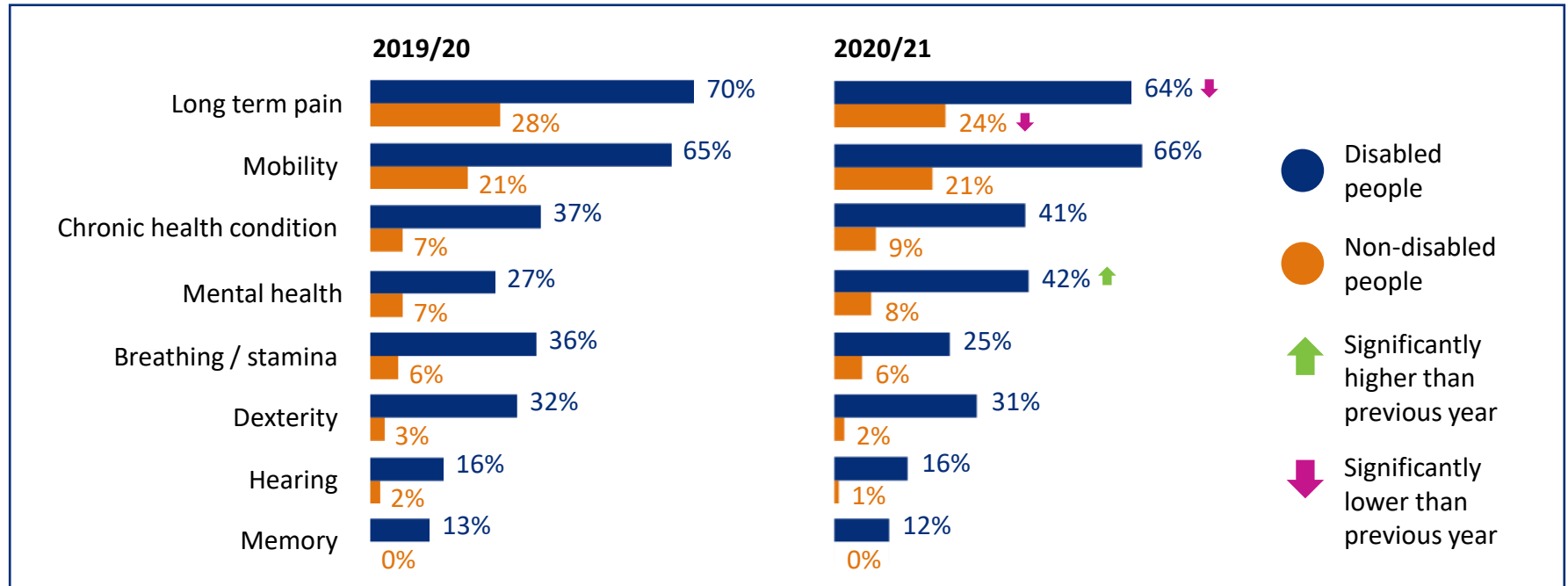
Type of impairments



A range of impairment types were represented in the survey. Long-term pain was less prevalent among disabled people that participated in the 2020/21 survey, whereas breathing and stamina was significantly more common. 8% of the sample had three or more impairments. 22% had two impairments, and 19% had one impairment.

Figure 47

Types of impairment disabled people have, by year of survey.



Q: B3/4 Do these health conditions, impairments or illnesses affect you in any of the following areas? Base: All disabled people.

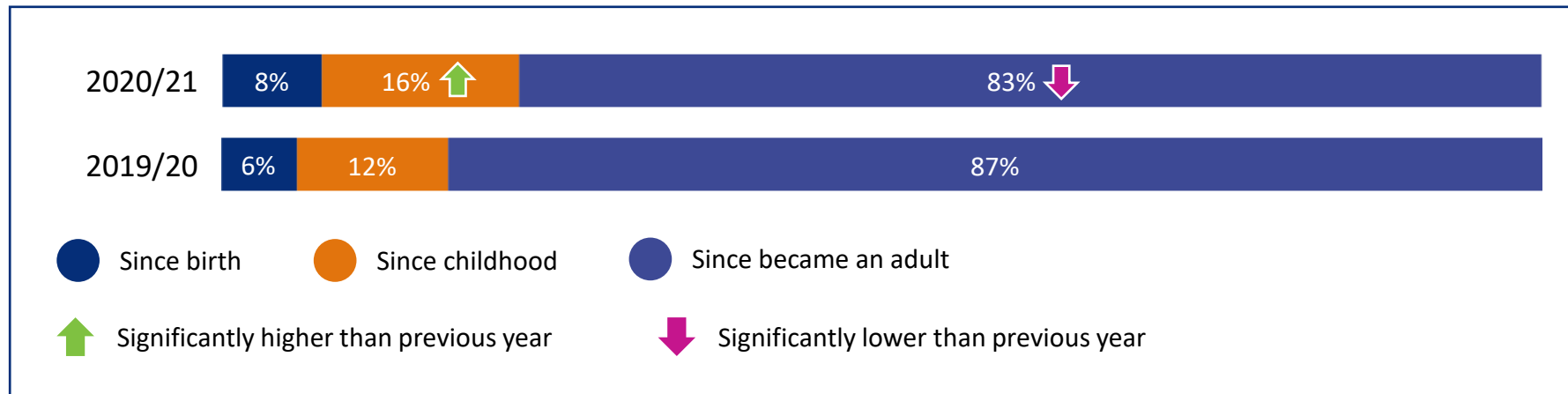
When impairment, illness, or health condition started



Between years of the survey, the profile of when disabled people's impairment, illness, or health conditions started has changed. Significantly more disabled people reported that their impairment, illness, or health condition started when they were a child. Disabled women were more likely than disabled men to report that it started when they were a child (18% vs. 12%).

Figure 48

When disabled people's health condition started, by year of survey.



Q: B5 When did your health conditions, impairments or illnesses start? Base: All disabled people. Prefer not to say responses are not shown.