

# Moving Towards Inclusivity: A Call for Increased Speed and Intensity in Making Fitness Facilities Accessible for People with Visual Impairments

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Despite the well-established evidence supporting the benefits of physical activity on health and well-being, many adults in the United Kingdom (UK) and worldwide remain insufficiently active. One in four working age adults in the UK do not reach the government recommended physical activity targets of at least 150 min of moderate intensity or combined with 75 min of vigorous intensity activity per week (NHS Digital, 2019). People living with disabilities are twice as likely to be inactive compared to the general population, placing this group at greater risk of poor health outcomes (Reiner et al., 2013; Rimmer & Marques, 2012). Of those with disabilities, people with visual impairments (i.e., a reduction in visual acuity or visual field loss which cannot be corrected using standard eyeglasses or lenses) rank among the least physically active, with activity rates comparable to individuals with physical disabilities affecting gross motor skills such as cerebral palsy (Longmuir & Bar-Or, 2000).

Fitness facilities such as gyms and leisure centers provide a range of services designed to improve physical health. In the UK there is an extensive network of approximately 7,200 fitness facilities, with over 85% of the population living within 2 miles of their closest venue (Leisure Database Company, 2022). These facilities are often the first point of contact for the general population wishing to increase rates of physical activity; however, venues remain largely inaccessible

for people with visual impairments, who describe being refused membership due to health and safety concerns or because of the requirement to pay for a personal trainer to facilitate every session (Phoenix et al., 2015).

Structural and interior design has a major effect on the ability of people with visual impairments to participate in activities. A recent scoping review of the accessibility of public buildings found most studies identified issues relating to mobility and vision, particularly with regard to parking, routes to entrances, and pathways inside the building (Carlsson et al., 2022). Designing facilities that are inclusive for the whole population requires consideration across the entire service user journey. A recent investigation from Thomas Pocklington Trust, a national sight loss charity in the UK, found that many people with visual impairments have difficulties completing basic tasks associated with popular gym equipment such as treadmills,

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cross trainers, exercise bikes, and rowing machines (Harris et al., 2018). For example, tasks such as stepping onto the machine and locating the user interface, starting or stopping the machine, and increasing or decreasing the speed or intensity were challenging or impossible, regardless of the extent of the visual impairment. Specific features that improved accessibility were use of LED consoles over touchscreens to enable tactile reference points that aided navigation, greater contrast between console buttons, and increased utilization of audio output. Besides improving and standardising equipment design, a range of other strategies can increase accessibility, including better lighting and signage, enhanced training of staff members, reduced background noise, and increased awareness about the potential of people with visual impairments (Rimmer, 2006). These measures are relatively straightforward to implement and would enable people who are visually impaired to benefit from the services of fitness facilities that are already available and accessible to others.

Recognizing the structural barriers preventing people with disabilities from accessing fitness facilities, the “Inclusive Fitness Initiative” was introduced in the UK to offer people with disabilities more choices and opportunities to enjoy the benefits of physical activity. The initiative operates an accreditation scheme to recognise the commitments of facilities on key areas relating to accessibility including equipment, training of staff members, marketing, and sports development. The standards are also intended to enable manufacturers to develop products that are appropriate for users with disabilities, including those with visual impairments, and to enable service providers to become more accessible to all individuals.

As of spring 2022, 68 facilities were listed as being compliant on the national database, an increase from 56 listings in 2018. These figures represent less than 1% of the estimated number of facilities in the UK. In the United States, the Americans with Disabilities Act (ADA) prohibits discrimination against people with disabilities by providing equal

opportunities in a wide range of public accommodations, including fitness facilities. The ADA 2010 Accessible Design standards (Department of Justice, 2010) states that “each facility, or part of a facility constructed by, on behalf of, or for the use of a public entity shall be designed and constructed in such manner that the facility or part of the facility is readily accessible to and usable by individuals with disabilities” (p. 6). However, the guidelines do not specify design requirements for exercise machines and include an exception whereby such equipment are not required to comply with standards (Americans with Disabilities Act Inspections, 2021).

Since passage of the ADA, audits have shown that venues were seldom in full compliance with guidelines (Rimmer et al., 2017). The scarcity of compliant fitness facilities may partly be explained by diminished funding to support such schemes, concerns that equipment may become too specialized, thus losing mainstream appeal, and a lack of clarity regarding the value of being compliant with accessibility recommendations.

It has been almost 10 years since Public Health England published the national physical activity framework “Everybody active, everyday” to address the burden of physical inactivity on public health (Public Health England, 2014). The framework aimed to drive a social movement whereby physical activity was to be made easy, fun, and affordable to all members of society. A 2020 review of the framework identified gradual progress towards increasing physical activity among the general population, but recognised inequalities among groups such as people with disabilities, inclusive of those with visual impairments (ICS, 2020).

Several public health campaigns have sought to promote physical activity in people with disabilities, but such operations must go beyond solely behavioural approaches focusing on individuals and should aim to encourage and facilitate meaningful change in systems and infrastructure across the fitness sector. There is a need for action to increase the understanding of evidence, improve awareness, and promote collaboration between people with

visual impairments, service providers, and manufacturers to facilitate safer and more accessible fitness environments. A recent campaign from Thomas Pocklington Trust and UK Coaching (2022) led to the development of an accessibility toolkit to enable physical activity environments to provide more inclusive facilities (UK Coaching, 2022). The toolkit serves as an educational resource for service providers when training staff members and provides details on what makes an accessible environment across a range of areas including signage, equipment, and technology. In addition, it provides advice on guiding and communicating with people with visual impairments and outlines the benefits of maintaining an accessible facility.

For the general population, fitness facilities are more than simply a place to exercise; they are community services that provide individuals opportunities for social relationships, a sense of identity, and personal growth. Addressing barriers relating to accessibility of these facilities will enable people with visual impairments to feel confident in their ability to participate in physical exercise and develop sustainable and enjoyable exercise habits, which, in turn, will help to bolster self-esteem and improve overall health and well-being in this population.

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