



Crossing boundaries: The perceived impact of disabled fitness instructors in the gym



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ABSTRACT

Objectives: For disabled individuals, the gym is perceived to be an inaccessible space to exercise due to the deeply embedded ableism within this environment. This study uniquely explored how disabled gym instructors perceived they impacted the gym environment and the possibilities of making the gym a more inclusive space for disabled people to exercise.

Design: We used an inductive, qualitative design whereby ten disabled gym instructors were purposefully sampled.

Methods: Data were rigorously collected through semi-structured interviews totalling 35 h, transcribed verbatim, and subject to thematic analysis.

Results: Participants perceived they made three key impacts in the gym. First, they believed they promoted the gym as a more inclusive environment through helping construct a more accessible physical space, embodying an alternate way of being and providing a relatable narrative. Second, instructors believed their own unique understanding of disability improved their capacity to relate to disabled gym clients by instilling a sense of camaraderie and acting as an aspirational future self. Third, participants felt they enhanced applied practice for training disabled clients through creativity in training and supporting non-disabled instructors.

Conclusion: This article makes a significant contribution to knowledge by highlighting that disabled gym instructors can play a vital role in promoting a more inclusive space to exercise. It also highlights that to increase gym use amongst disabled populations, efforts should consider the potential beneficial impacts of disabled gym instructors in relation to promoting health and well-being.

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1. Introduction

For disabled individuals,¹ one way to improve health and well-being is through exercise (Gorgey, 2014). Physically, exercise can reduce pain (Norrbrink, Lindberg, Wahman, & Bjerkefors, 2012), manage weight and enhance physical function (Martin Ginis, Jorgensen & Stapleton, 2012). Psychologically, exercise has been shown to enhance perceptions of empowerment (Blinde & Taub,

1999), enhance subjective and psychological well-being (Williams, Smith, & Papathomas, 2015), craft a positive identity and provide psychological respite (Richardson, Smith, & Papathomas, 2016). Socially, participating in exercise can also increase social status (Arbour, Latimer, Martin Ginis & Jung, 2007), reduce isolation and reduce discriminatory behaviors from others (Spornier et al., 2009). Problematically, despite these benefits disabled people are one of the most sedentary populations in society (Martin Ginis et al., 2012). Arguably, a key reason for this is the ableism which is deeply embedded into many exercise spaces.

Ableism is about, knowingly or unknowingly, the framing of images, policy, discourses and practices as if all people are able-bodied (Campbell, 2009). As such, ableism casts disability as a diminished state of being human (Goodley, 2016) and rejects variation from this fully able human form (Wolbring, 2008). Ableism therefore becomes another form of discrimination which marginalizes disabled individuals who have different corporeal

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¹ Throughout this study, we use UK social model language to describe participants as this terminology (i.e. disabled people). This approach aligns with our beliefs that this population is disabled by systematic practices of oppression in society and should be accorded a politically social status (Goodley, 2016). In turn, where making reference to a participant's impairment effects, we use the word "impairment".

realities to the ableist norm (Loja, Costa, Hughes, & Menezes, 2013). Take, for example, the gym. The gym is a space perceived to be dedicated to the improvement of physical fitness with specialized equipment, health and safety legislations and qualified instructors (Sassatelli, 2010). Problematically, it is also a space which is deeply embedded in ableism (Richardson et al., 2016). The toned, strong, perfectly crafted body has become an image deemed to represent this space (Neville & Gorman, 2016); it is an image which is reproduced through ableist discourses in the gym and through the bodies of gym instructors (Harvey, Vachhani, & Williams, 2014). As such, although the gym may promote fit bodies, it also marginalizes those that are 'unfit' with regards to not fitting into the gyms perception of good health (Crossley, 2006). Consequently, ableism in the gym may result in disabled people being subject to discriminatory and exclusory practices (Wolbring, 2008).

The discriminatory and exclusory practices experienced by disabled people can be further illustrated through the concept of *disablism*. This refers to the social oppression that disabled people face (Goodley, 2016). Disablism arises in two forms; indirect psycho-emotional disablism relating to the impact of exclusory messages through encounters with structural barriers, and direct psycho-emotional disablism pertaining to negative interactions a disabled individual has with other people or themselves (Thomas, 2007). Experiencing either type of disablism can have a profoundly negative effect on a disabled persons' psychological health (Reeve, 2012). For example, disabled people's experiences of *indirect* psycho-emotional disablism in the gym may be apparent through the structural issues they encounter such as a lack of access and unsuitable equipment (Dickson, Ward, O'Brien, Allan, & O'Carroll, 2011). In this case, structural barriers do more than just stop disabled people from physically participating in the gym; these barriers act as 'landscapes of exclusion', projecting exclusory messages that disabled people are out of place and do not belong leading to the perception of being rejected and marginalized (Kitchin, 1998). Moreover, disabled peoples' psycho-emotional well-being may be *directly* compromised through the negative interactions they have with others in the gym (Kehn & Kroll, 2009). These interactions can result in individuals feeling excluded, intimidated and lacking self-worth (Reeve, 2006).

Of concern is these disabling interactions are often with gym instructors (Richardson et al., 2016). Why this is so concerning is because gym instructors are deemed to represent the values of the gym and show through their bodies what is an accepted way of being (Harvey et al., 2014). They are a powerful means of influencing the exercise environment as they are relational beings holding authority in the gym and are deemed to possess specialized knowledge which can assist individuals in reaching their fitness goals (Lloyd, 2005). If these individuals who represent the gym are a key source of disablism, then this is yet another barrier and message to disabled people that they do not belong in the gym. Despite these issues, the gym is a space where disabled peoples physical, social and psychological well-being can be improved through exercise (Richardson et al., 2016).

Accordingly, the purpose of this research was to examine how disabled gym instructors, who did not align to the expected ableist image, perceived they impacted the gym. Disabled gym instructors are in a unique situation where they work and represent the gym but may not embody the physical expectations of a person in this role. Moreover, this research contributes to a gap in the literature by focusing on a unique population who have never before been researched with regards to their potential to promote health enhancing behaviours to disabled people. Such a focus also connects with recent calls in sport and exercise psychology to move beyond a simple concern with performance enhancement to also focus on people who may enact social missions (Smith, Bundon, &

Best, 2016) and those that shine a spotlight on under-resourced communities (Whitley, Massey, & Leonetti, 2016). Social missions are collective, social, political problem-solving ventures which can be passive, institutionalized acts or high risk, active, unconventional behaviours that convey what is needed for a better society (Corning & Myers, 2002). Within the field of disability studies, research has focused on the social missions of elite disabled athletes. These individuals used their social status as athletes to challenge disablism in their sport and society (Smith et al., 2016) and also highlighted inaccessible sporting programs for disabled people (Bundon & Hurd Clarke, 2015). While these works do contribute to the call for research on social missions and add valuable knowledge to the performance field, there is still a lack of empirical work with regards to promoting diversity and tackling oppression within the field of exercise and health (Corning & Myers, 2002). To address this gap, the aims of this research are (i) to investigate how disabled gym instructors perceived they impacted the gym and (ii) examine if and how these instructors contribute to making the gym a more inclusive space for disabled people to exercise.

2. Methods and methodologies

2.1. Philosophical assumptions

Underpinned by interpretivism, this research was informed by ontological relativism (i.e. the belief that reality is multiple and subjective) and epistemological subjectivism (i.e. the belief that knowledge is constructed through interactions with others and the social, cultural environment) (Smith & Sparkes, 2016). To reflect the assumptions of this research, we adopted an inductive, qualitative design whereby findings were constructed in a bottom-up approach (Sparkes & Smith, 2014). As such, to reflect our inductive design, no theoretical or conceptual frameworks were considered before data collection as a pre-conceived framework may simplify or diminish the extensive lived experiences of participants and cause important findings not fitting this framework to be missed.

2.2. Sampling procedure and participants

Ethical approval was granted by the University Ethics Committee before data collection commenced and informed consent was obtained prior to interviews. Both maximum variation and criterion-based purposive sampling strategies were implemented to ensure information rich cases where a great deal could be learned about the topic were collected (Sparkes & Smith, 2014). The prior sampling strategy was chosen to ensure representation of a variety of impairments, gym types and participant experiences. The latter sampling strategy ensured participants who were recruited shared important inclusion criteria attributes. These criteria attributes were a) had a physical or sensory impairment b) were employed as a gym instructor in a gym and c) had experience training disabled clients.

Recruitment for this study was part of a larger research project investigating disabled individuals who were becoming gym instructors in the United Kingdom (UK). Participants were recruited by the first author via a spinal cord injury (SCI) charity which had designed and delivered a unique program training disabled individuals to be gym instructors. This charity contacted disabled gym instructors on behalf of the first author, informed them of the research project and asked permission to share their contact details with her. Those who did not wish to participate simply got in touch with the charity who then did not share their contact details. Thereafter, the first author contacted potential recruits either by

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