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Agents of Change: Understanding User Perspectives to Guide Inclusive Gym Practices

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Abstract

Background: Gyms are a site for exercise that are of interest to people with and without a disability. Ensuring gyms are accessible and inclusive may facilitate long-term health and well-being as individuals' abilities change across the lifespan. Yet, fitness providers often fail to consider the needs of people with a disability in gyms. Understanding diverse users' experiences with gym-based exercise may inform decision-makers of resources, partnerships, and actions that can improve accessibility and inclusion. **Purpose:** This study aimed to understand users' perspectives of organizational, community, and policy factors that influence inclusive practices in gyms. **Methods:** Semi-structured interviews were conducted with diverse participants. Transcripts were analyzed using reflexive thematic analysis. **Results:** Thirty-five participants with ($n = 13$) and without a disability ($n = 22$) were interviewed. Three themes were generated: (1) Accessibility for All, (2) Acknowledging Challenges to Accessibility, and (3) Bridging Knowledge Gaps. Participants acknowledged disability as a universal experience, emphasizing that accessibility was needed, important, and beneficial to everyone. They also identified challenges to practicing inclusion in gyms, such as cost of equipment and limited knowledge of disability. **Conclusion:** Five calls to action were derived from participants' insights. The calls to action illustrated a need to develop and support (e.g., fund, enforce) accessibility standards for gyms, empower providers and staff to implement accessible practices, and collaborate with people who have a disability to develop sustainable, community-driven approaches that facilitate meaningful inclusion in gyms. Collective actions from users, organizations, communities, and policymakers may enable systemic change, transforming gyms into inclusive spaces.

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Introduction

Participation in physical activity and exercise is increasingly recognized as a right for people with a disability (Lesch et al., 2025; McConnell et al., 2025; World Health Organization [WHO], 2018). Gyms

are a common site for community-based exercise and the promotion of healthy living that draw interest from people with and without a disability (Butzer et al., 2021; McConnell et al., 2025). Facilities that are designed to be accessible, usable,

and inclusive for all people can encourage long-term exercise by enabling users with and without a disability to participate. This is important because individuals' abilities change across the lifespan (e.g., pregnancy, age-related decline, injury), meaning disability is something that anyone can experience at any time in their life (Dolmage, 2017; Easter Seals, n.d.). Accessible gym-based exercise may play a critical role in maintaining and improving health outcomes for people experiencing disability.

Barriers related to prejudice, inaccessible layouts, and inadequate programming are reported as hindering participation among people with a disability (Sharon-David et al., 2021; Richardson et al., 2017). Physical and social barriers experienced by people with a disability may be mitigated by universal design, which is a process for developing usable physical, sensory, cognitive, and social environments that meet the needs of all people without relying on specialized adaptations (Centre for Excellence in Universal Design, n.d.; Mitchell et al., 2025; Yi et al., 2022). Studies examining universal design in fitness and recreational facilities focus on designing and evaluating universal equipment (e.g., Yi et al., 2022), the potential or perceived impact on accessibility and inclusion (e.g., Nocera et al., 2022), and attitudinal changes among non-disabled individuals (e.g., Butzer et al., 2021; Staeger-Wilson et al., 2012). This enables an understanding of individual and social factors that may influence users within a universally designed facility but a deeper understanding of organizational, community, and policy factors is necessary to advance accessibility and inclusion in gyms (Lesch et al., 2025; Simplican et al., 2015).

The social ecological model, which splits environments into intrapersonal, social, organizational, community, and policy levels, illustrates that factors across all levels of the environment interact to constrain or enable participation in physical activity (Martin Ginis et al., 2016; McLeroy et al., 1988; Simplican et al., 2015). Exploring factors affecting the latter domains may enable the identification of organizational and policy changes needed to incentivize and support gyms in enhancing the inclusion of people with a disability, enabling lasting systemic change (Lesch et al., 2025; McConnell et al., 2025; Simplican et al., 2015). Facilities designed to include diverse users may increase accessibility, improve user experience for all, foster inclusive cultures, and potentially improve attitudes towards people with a disability (Butzer et al., 2021; Mitchell et al., 2025; Staeger-Wilson et al., 2012; Steinfeld & Maisel, 2012). Subsequently, gyms that accommodate the needs of a wide variety of people may benefit from an expanded pool of potential customers, better member retention, and enable healthy living for all (Butzer et al., 2021; Lesch et al., 2025). However, accessible and universal design are inadequately practiced in gyms. Poor knowledge, perceived cost, difficulties applying universal design principles, and poor awareness of the needs of people with a disability are reported as barriers to the development of universally designed spaces (Butzer et al., 2021; Dolmage, 2017; Kitchin et al., 2019; Lesch et al., 2025; Steinfeld & Maisel, 2012). Moreover, people with a disability are considered a niche population, resulting in misconceptions that accessibility benefits only a small portion of the population (Lesch et al., 2025). It is important to understand challenges related to beliefs

about and the feasibility of universal design, in order to develop strategies for overcoming and mitigating barriers to its adoption.

Gym owners and managers (i.e., fitness providers) can act as agents of change by removing barriers that hinder the inclusion of people with a disability (Rivera et al., 2024; Sharon-David et al., 2021). Working with people who have lived experiences with disability can bridge knowledge gaps and aid in making universal design a more accomplishable goal by contributing ideas and opinions to help prioritize projects, identify solutions, and ensure time, effort and money are being invested in initiatives that will have the most benefit (Dolmage, 2017; Staeger-Wilson et al., 2012). Individuals situated within communities are powerful agents of change, as their first-hand experiences can shed light on resources, partnerships, and actions that may effectively address issues related to accessibility and inclusion (Bumble & Carter, 2021). By sharing practical and realistic perspectives, users can help fitness providers improve their organizational practices, community dynamics, and policies to foster inclusive gym-based exercise. Thus, understanding diverse users' experiences can aid in educating organizations about effective implementation of universal design. Using semi-structured interviews, this study gained insight regarding participants' perceptions of organizational, community, and policy factors that may influence the application of universal design in practice.

Methods

Semi-structured interviews were conducted to understand participants' perceptions of the importance and feasibility of applying universal design in

practice from an organizational perspective. Interviews and analyses were informed by pragmatism to emphasize practical implications (Giacobbi et al., 2005).

This article was part of a broader project examining participants' views on accessibility, usability, and inclusion in two university gyms. Participants performed tasks in both a conventional and an adapted gym while thinking aloud, completed questionnaires, and then participated in an interview. This article focused on the interview data.

The study was cleared by the institutional Research Ethics Board (REB# 23-074). The study adhered to the guidelines established by the Declaration of Helsinki.

Participants

Thirty-nine individuals completed the broader study; all were invited to participate in the interview phase. The overarching project aimed to recruit a diverse sample, reflecting a range of abilities, as universal design serves both people with and without a disability. Recruitment materials were distributed through university departments and community organizations focused on disability, aging, and sport or physical activity to reach diverse populations. Eligibility criteria included: (1) having transportation to the study site, (2) being 18 years of age or older, and (3) communicating in English.

Data Collection

Consent was obtained prior to the first phase and verbally reaffirmed before the interview recording began. Interviews were conducted after the think aloud protocol in a private meeting room or remotely via Microsoft Teams or phone

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call within three days, based on participants' preferences. Participants received a brief rest period following the think aloud protocol and prior to commencing the interview. As the research aimed to understand diverse individuals' perceptions of gyms, one-on-one interviews were selected to foster rapport between the researcher and participant, afford in-depth discussion, and ensure participants felt comfortable and empowered to share their

experiences. All interviews were audio recorded.

The interviews explored participants' perceptions and experiences of: a) personal barriers, facilitators, and preferences for gyms; b) challenges and facilitators for people with a disability and, c) beliefs, motivations, and challenges related to implementing accessible practices in gyms (Table 1). Participants were probed for greater detail and clarification as needed.

Table 1: Sample Interview Questions

Topic	Sample Questions
Barriers, facilitators, and preferences	• What did you find helpful/unhelpful about the gyms? • If you could change anything, what would it be? Why?
Challenges and facilitators for people with a disability	• Think for a moment about someone with a disability, do you think they could use the gyms? Why? • Certain groups have designated gyms or a separate space to workout (e.g., varsity athletes, women). What do you think about separate gyms for people with a disability?
Implementation beliefs, motivations, and challenges	• What do you think of the importance of accessibility and inclusion in gym settings? • Who do you think should be responsible for making sure a gym is accessible? • How can people (e.g., facility owners, managers) be encouraged to care about accessibility?

Data Analysis

Data sufficiency was assessed by examining a range of evidence, including confirmatory and divergent perspectives (Braun et al., 2023; Vasileiou et al., 2018). Audio recordings were transcribed verbatim and transcripts were analyzed inductively via Braun and Clarke's six phases of reflexive thematic analysis (Braun et al., 2023; Braun & Clarke, 2006, 2021). First, each transcript was reviewed to afford familiarization with the data, then relevant segments were coded and recoded independently by the lead

researcher (Braun et al., 2023). Coding adopted a semantic orientation to focus on the explicit factors that participants perceived as influencing accessible and inclusive practices in gyms. Next, codes were grouped to develop initial categories and themes, and then reviewed and reorganized to ensure themes accurately captured key concepts and presented a meaningful story (Braun et al., 2023; Trainor & Bundon, 2021). Short definitions were written to finalize the scope and core concept(s) of each theme (Braun et al., 2023). To address the final

stage of reflexive thematic analysis, themes and the overarching analytic story were reported within the results and discussion (Braun et al., 2023).

Researcher Reflexivity

Several reflexive practices were employed throughout the research. The lead researcher maintained an electronic journal documenting the rationale for study decisions, field notes, assumptions, and/or emotional reactions (Creswell & Creswell, 2018; Trainor & Bundon, 2021). Memos enabled the refinement of study procedures (e.g., clarifying interview questions), identification of patterns and similarities across participants, assessment of data adequacy, and acknowledgement of personal biases that may have influenced data collection and interpretation (Creswell & Creswell, 2018; Trainor & Bundon, 2021). Entries were reviewed and further developed during the familiarization and coding phases (Creswell & Creswell, 2018; Trainor & Bundon, 2021). Peer debriefing was also conducted to ensure clarity, establish analytic stories, and enhance rigor (Braun et al., 2023).

Another reflexive practice involved positioning the research team in relation to the study topic (Trainor & Bundon, 2021). The researchers were primarily White/Caucasian and cisgender. Mental health-related disability and/or sensory impairments were self-identified among the researchers. Multiple members of the team were consistently involved in sport, gym-based exercise, and physical activity throughout their lives. The research team had formal training in qualitative research methods and analyses, and had extensive knowledge related to disability, including experience working with people who had a variety of chronic conditions,

impairments, and/or disabilities. Although themes were reviewed to ensure they accurately reflected participants' data (Trainor & Bundon, 2021), the lead researcher played an active role in data interpretation, which was undoubtedly influenced by her background, knowledge, and experience. To the greatest extent possible, the researchers adopted reflexive practices to illuminate these influences, while allowing past knowledge and experiences to strengthen study design and interpretation of findings.

Results

Interviews were conducted from August to November of 2024, with the majority held in-person; one was held virtually and one occurred via telephone. Thirty-five participants (22 females, 12 males, and one with no response), with a mean age of 32.4 years (range: 18–68 years), completed the interview. Fourteen participants (40%) reported an impairment (i.e., functional limitations) and 13 (~37%) self-identified as having a disability (i.e., participation restrictions due to inaccessible environments). Reported impairments included mobility ($n = 4$), pain ($n = 3$), endurance/stamina ($n = 1$), communication ($n = 1$), developmental ($n = 2$), hearing ($n = 1$), learning, mental health, or memory ($n = 2$). Five participants used a mobility device, such as a cane, walker, hiking poles, Alinker walking bike, or wheelchair. Interviews averaged 35 minutes in length (range: 12–67 mins). All participants were assigned pseudonyms; participants without a disability were indicated by PWoD, while participants with a disability and/or impairment were denoted with PWD/I.

The three themes generated from the transcripts demonstrated that

participants held a pragmatic perspective towards accessibility and inclusion in gyms. While participants acknowledged accessibility was needed, important, and beneficial to everyone, they also highlighted potential challenges to practicing universal design. These perspectives were portrayed by three themes: (1) *Accessibility for All*, (2) *Acknowledging Challenges to Accessibility*, and (3) *Bridging Knowledge Gaps*. Quotes were provided throughout to help illustrate each theme. While the quotes reflected the words and sentiments spoken by participants, they were cleaned by the authors to improve readability. For example, filler words (e.g., um, uh), non-verbal cues (e.g., laughing), and pauses (e.g., periods indicating the participant stopped mid-sentence) were deleted.

Accessibility for All

Accessibility was conceptualized as relevant to all people. This was illustrated through three key beliefs among participants: (1) access to gyms is a human right, (2) (in)accessibility impacts users with and without a disability, and (3) disability is a universal experience. Together, these beliefs highlighted that disability is part of the human experience and that creating inclusive spaces benefits society.

As exercise is beneficial for everyone, access to gyms was considered a right all people should have, as articulated by Jamie (PWOD): “It should just be . . . a right . . . because they have a disability, they shouldn't be excluded from the gym.” Recognition of the rights of people with a disability increased with transformations in societal ideologies that promoted awareness of accessibility and inclusion (Giancarlo et al., 2016). However, gyms were considered a setting in which little

progress was being made. Davis (PWD/I) described one of the gyms from the study as a “1950 gym in a 2023 building . . . there's nothing different about the equipment . . . it's heartbreaking.” To advance equitable opportunities for gym-based exercise among people with a disability, greater progress was needed. Ray (PWOD) stated: “The gym itself could be accessible. They do have improvements from what they had in the past, so I'll give them that, but for the most part . . . there's still a lot of work that needs to be done.”

Inaccessible gym environments were described as unfair or potentially deterring to users with and without a disability. Matt (PWOD) noted that, even though he was able-bodied, inaccessible environments adversely influenced his experience in gyms: “I don't have any disabilities . . . and I don't like going to gyms that aren't accessible. Because it just takes more time . . . less efficient, less enjoyable.” In addition to noting that inaccessibility could negatively impact anyone's experience, participants suggested accessible environments could benefit everyone. Hailee (PWD/I) illustrated this perspective:

[S]ometimes even as an *able-bodied* individual, we still rely on some things that are beneficial for people who have different abilities, and sometimes we don't even recognize that those little things can make *our* lives more efficient, too, it's not just for a specific population.

Participants believed, at the very least, accessibility could benefit people who have a disability without hindering the experience of individuals who do not have a disability. Tayler (PWD/I) illustrated this perspective: “Accessibility isn't hindering anyone . . . a wider walkway isn't gonna make the person that doesn't need it

suffer.” Thus, improving accessibility could be conceptualized as an endeavour that facilitates the inclusion of people with a disability and potentially benefit all gym users.

Similar to viewing accessibility as universally beneficial, participants perceived disability as a universal experience. They described that anyone could experience disability (i.e., activity limitations that arise from environmental barriers) or situational impairment (i.e., temporary limitations due to inaccessible environments or changes in abilities) at any time, resulting in a need for accessible environments. Emma (PWD/I) noted: “Accessibility is important to a pregnant woman. You may be disabled for a period of time, you might have a sports injury that you're recovering from, so it's ... serving the total group of people ...” Efforts to advance accessibility in gyms could improve user experience for people across the lifespan, offering more equitable and inclusive opportunities for exercise as individuals' abilities change over time. As participants expressed that accessibility is a right, benefits all users, and can enable lifelong participation, adopting universal design in gyms is viewed as a valuable endeavour for organizations. Accessibility initiatives such as policy development, community partnerships, and universal design modifications that support diverse users may enhance alignment between individual and organizational values, subsequently creating inclusive gyms.

Acknowledging Challenges to Accessibility

Participants identified several challenges associated with creating fully inclusive or universally designed gyms. Perceived challenges included logistical constraints (e.g., budgetary resources,

decision-making authority), competing values (e.g., profit), ableist ideologies (i.e., discriminatory attitudes), feasibility of including all people, and generating “buy-in” (i.e., encouraging gyms to value accessibility). Reflecting upon the pervasiveness of discriminatory societal attitudes towards disability, Mary (PWD/I) articulated attitudinal barriers that may hinder inclusion:

To ... gym owners ... [people with a disability are] a liability. What's the first thing they see? Lawsuit. This person wants to use my business? Well, what's it going to cost me? Ooh. We got to watch because they could get hurt.

Sayler (PWOD) further discussed how it could be costly to design gyms that accommodate all abilities: “Disabilities can go from everything from being blind to ... you can't walk ... so being able to actually provide proper, safe equipment, and have someone to monitor the area ... it can probably get a little pricey.” Expanding on barriers that may hinder organizations from implementing accessible and inclusive practices, Matt (PWOD) highlighted assumptions owners might make about integrating people with a disability in a gym: “A person with a disability may work out more slowly, take a little bit more time at a machine, which could potentially slow down the flow of the gym. Maybe that's something that gym owners are concerned about.” As illustrated by Mary (PWD/I), Sayler (PWOD), and Matt (PWOD), achieving universal design could be complicated by attitudinal and organizational barriers (e.g., cost). These challenges were noted not to justify inaccessibility and exclusion but to highlight gaps in knowledge and practice and to initiate a conversation about implementing universal design effectively.

Participants suggested a few ways financial limitations, competing values, and buy-in could be addressed. Suggestions included legislative mandates and government funding. As illustrated by James (PWD/I), participants felt accessibility and inclusion could be enforced by governments to advance adoption, “municipalities, provincial, federal government, all stepping in to help regulate to ensure that there's as much accessibility in the building as possible ... then that gets into like policy and ... legislation of it as well.” The involvement of government in enhancing accessibility was considered critical to incite change within facilities and communities.

Additionally, participants suggested the way accessibility was pitched needed to be carefully considered to communicate the value of accessibility in gyms from a business perspective. They believed focusing on the potential for increased revenue may incentivize fitness providers to enhance accessibility. Several comments highlighted how accessibility could attract additional members, potentially generating greater revenue. Ryliegh (PWOD) explained this perspective:

[I]f you have a space that caters to multiple different ability levels of people, it shows that you're in it for more than just the money, which brings in people. They feel safer there, they feel more ... appreciated and respected, they're gonna be willing to spend more money. Tell their friends and spread positive feedback... whereas if you just cater to one ability level ... you're immediately shrinking your pool of potential clients.

Without external incentives or lived experience, encouraging accessible or

universal design in practice was considered a salient challenge. Summer (PWD/I) explained:

[I]f the owner has ... a parent that's in a wheelchair or ... a sibling with Down Syndrome ... I feel like their point of view would be different... I feel like life experiences definitely make a difference, but if they aren't involved with special population any which ... they don't really think twice about it ... because they're just not really educated on it.

Illustrated by Summer's (PWD/I) quote, unless fitness providers or designers (e.g., architects, equipment manufacturers) had personal experience with or connections to the disability community, participants believed that they were unlikely to care about, understand, or implement meaningful accessibility practices. It was viewed by participants that this lack of awareness and action needed to be addressed to advance accessible environments that effectively include people with a disability.

Bridging Knowledge Gaps

To overcome knowledge gaps related to disability, participants highlighted various sources from which people (e.g., owners, managers, designers) could learn to make facilities accessible and inclusive. Christian (PWOD) summarized a few resources in the following quote:

[T]he best ... way for me to learn other than just looking stuff up... is definitely to hear someone talk about it ... I would probably go to one of the ... facility ... managers ... and get their take on what they would be doing to increase inclusiveness ... many resources online or people ... in this background that I could get even further information from.

Key sources identified across participants included disability advocates and organizations, healthcare providers (e.g., physiotherapists, occupational therapists), existing adaptive exercise programs, online sources (e.g., Google, government websites, training modules), community events (e.g., workshops), current gym members or staff, and people with a disability. Josh (PWD/I) stressed the importance of consulting people with a disability, as they have lived experience within the facilities:

[W]e're the ones that actually use it. So, we can... tell you the barriers that we've experienced and things like that. So that's where they should go, is they should be going to the teams that are actually participating in . . . parasport, whether it's sledge hockey, basketball, volleyball, it doesn't matter, these are all para-athletes that are doing this, regularly just for their own lives and satisfaction anyway . . . so they're the ones that would have the expertise . . .

When striving to learn about, evaluate, or improve accessibility, collaborating with people who have a disability or individuals who support people with a disability was believed to be critical.

Accessibility was conceptualized as a shared responsibility. It was the responsibility of facility users to point out potential issues or ask about accommodations, while the onus for ensuring anyone could access and use the facility was placed on providers. However, participants, such as Dalton (PWOD), noted it may be challenging for users to muster enough courage to advocate for themselves:

[I]t takes . . . a pretty confident person to raise concerns about something . . . and to defend themselves . . . I know I don't do that most of the time. So, I can

only imagine as somebody with a disability or an impairment . . . feels raising a concern that would change something in a public place where most people aren't affected by that concern either . . . it's almost kinda like a . . . crappy little circle of not voicing concern and unfortunately not receiving any change for the better . . .

To elicit feedback from users, participants reinforced the need for organizations to proactively seek input regarding accessibility and inclusion. They suggested having staff pay attention to the needs or challenges encountered by users, or directly asking members with a disability for feedback, may afford a better understanding of how to improve accessibility. Alternatively, they suggested surveys distributed by facilities may encourage users to voice concerns, especially if they could be completed anonymously.

Extending beyond the specific facility or organizational level, participants noted that organizations offering inclusive programming needed to strategically advertise the programs within the community. This was considered necessary for increasing awareness and attracting people with a disability to the programs. When reflecting upon trying to attract new members to her own sports club, Krystin (PWD/I) stated: "We were looking for how do you find people who have disability? Well, you don't talk to the person, you're talking to their family. Their family is gonna tell them about this wonderful new program that's accessible . . ." As illustrated by Krystin (PWD/I), participants suggested sharing information with individuals who were already connected to people with a disability, such as healthcare providers, existing clubs or organizations, and family

members. Overall, participants illustrated knowledge gaps within organizations, as well as at the community level, that could hinder accessibility and inclusion. Addressing these gaps may be essential to ensure people with a disability are aware of, can access, and can be included in gym-based exercise.

Discussion

Incorporating the voices of diverse users is critical to advancing accessibility, as it grounds organizational and policy decisions in lived experiences, reveals unmet needs, and fosters inclusive, user-centered solutions (Lesch et al., 2025; Sharon-David et al., 2021). Using semi-structured interviews, this study identifies organizational, community, and policy level factors that are perceived as impacting the implementation of universal design and inclusion in gyms. In addition to identifying barriers, such as ableist ideologies, limited financial resources, and poor knowledge of disability, participants highlight facilitators and strategies for overcoming organizational barriers. Examples include promoting accessibility as a right for all, developing and supporting legislative mandates, as well as collaborating with diverse users. Based on participant insights, five calls to action are proposed: (1) exercise is for everyone - recognizing access as a right, (2) set the standard - develop actionable policies, (3) fuel the change - fund and support implementation, (4) empower the leaders - educate, train, and hire gym personnel, and (5) listen to their voices - collaborate with users and organizations. These calls to action are intended to direct conversation, engage relevant audiences, and drive change towards inclusive gyms.

Exercise Is for Everyone - Recognizing Access as a Right

Access to physical activity and community fitness spaces must be recognized as a fundamental right, instead of a privilege, as disability, exercise, and accessibility affect all people. It is known that exercise yields health benefits for everyone and that universal design can improve accessibility for people with and without a disability (Butzer et al., 2021; Cunningham et al., 2023). Yet, participants describe limited progress towards exercise settings that are inclusive of diverse populations. This stagnation may stem from misconceptions among fitness providers regarding demand and the compatibility of gyms with the needs of people experiencing a disability (Lesch et al., 2025; McConnell et al., 2025). However, participants in this study and existing literature provide evidence that individuals across ability levels are interested in using gyms (McConnell et al., 2025). As the numbers of older adults and people experiencing disability increase (Lesch et al., 2025), designing facilities to accommodate people of diverse ages, abilities, and preferences is increasingly critical for promoting inclusion and health-enhancing behaviours (Butzer et al., 2021; Moore et al., 2023; Rimmer, 2012). Policymakers and organizations, as key change agents, have a responsibility to ensure gyms are universally designed, thereby advancing disability rights and equitable access (McConnell et al., 2025; Sharon-David et al., 2021).

Set the Standard - Develop Actionable Policies

Clear, actionable policies are essential to advancing the inclusion of people with a disability in gyms. Legislative mandates and policies are vital in driving

organizational changes, as political pressure from governing bodies (e.g., federal government, sport organizations) can incentivize fitness providers to provide accessible and inclusive facilities (Arbour-Nicitopoulos & Martin Ginis, 2011; Lesch et al., 2025; Sharon-David et al., 2021). Supported by participants in this study, gym users, staff, and managers believe government organizations are responsible for promoting the inclusion of people with a disability in sport and exercise domains through policy (Cunningham et al., 2023; Lesch et al., 2025).

Rimmer et al. (2017) highlight that fitness facilities in the USA constructed after the enactment of the Americans with Disabilities Act (ADA) are more accessible than those constructed earlier, highlighting the impact of legislation. Laws requiring accessible design, disability training, and supportive practices can significantly enhance access (McKenzie et al., 2023; Sharon-David et al., 2021). However, existing legislation in North America remains limited in scope. For instance, the Accessible Canada Act (ACA) excludes gyms (Canadian Human Rights Commission, 2025), and Ontario's legislation, similar to the ADA, focuses on physical spaces, overlooking policies, equipment, and social factors essential for inclusion (Brown et al., 2021; Rimmer et al., 2017; Sharon-David et al., 2021). Accessibility discourse often centres on mobility impairments, neglecting users with sensory, cognitive, or social needs (Brown et al., 2021; Lesch et al., 2025). Mandating universal design in both public and private gyms would more comprehensively address these diverse needs. Embedding universal design into legislation and policies could prompt fitness providers to consider physical,

sensory, cognitive, and social elements of accessibility (Brown et al., 2021; Moore et al., 2023).

To ensure effective implementation, comprehensive policies must be accompanied by actionable guidelines (Kitchin et al., 2019). Without operational frameworks, laws may fail to translate into practice, leading to inconsistent levels of accessibility in gyms (Kitchin et al., 2019). Clear guidelines help organizations interpret and apply universal design principles, translating abstract mandates into actionable steps (Kitchin et al., 2019; Moore et al., 2023). Ultimately, advancing inclusion and accessibility in gyms requires robust legislation as well as detailed, practical guidance to bridge policy and practice.

Fuel the Change – Fund and Support Implementation

Government funding and policy support are essential for translating accessibility mandates into practice, making fitness facilities more inclusive and affordable. This support may encompass financial incentives (e.g., grants, tax credits) and accountability mechanisms (e.g., strategic plans, reporting requirements) to ensure long-term compliance and impact (Kitchin et al., 2019). As suggested by participants, cost is a major barrier to implementing universal design and including people with a disability in gyms (Butzer et al., 2021; Kitchin et al., 2019; Lesch et al., 2025). Funding incentives from governments and other organizations (e.g., community, healthcare, insurance) can motivate fitness providers to create and sustain inclusive practices (Cunningham et al., 2023; Lesch et al., 2025; McConnell et al., 2025; Rimmer, 2012).

Facilities with access to funding may be more willing and able to remove barriers for diverse users through policies and programs, such as waiving fees for supporters, renovating facilities, hiring staff, or training instructors in adaptive exercise (Cunningham et al., 2023; Lesch et al., 2025; Martin Ginis et al., 2016; McConnell et al., 2025; Rimmer, 2012). Alongside funding, robust accountability mechanisms are needed to promote, monitor, and enforce compliance with accessibility standards. Governments and organizations must raise awareness, establish clear implementation plans, and evaluate progress (Cunningham et al., 2023) (Accessibility for Ontarians with Disabilities Act [AODA], 2024; Kitchin et al., 2019). Benchmarks for success help providers improve accessibility and offer governments tools for enforcement.

Mechanisms of accountability (e.g., enforcement policies) signal a societal commitment to accessibility, while the absence of enforcement – as noted for the Accessible Canada Act and Ontario’s AODA – undermines progress and perpetuates exclusion (AODA, 2024; AODA Alliance, 2024). Sustainable, inclusive change requires both financial investment and mechanisms of accountability to ensure that accessibility has guiding legislation and has actionable steps to be realized in practice.

Empower the Leaders – Educate, Train, and Hire Gym Personnel

Effective policy enforcement involves educating gym owners, managers, and staff about accessibility, inclusion, and disability (AODA Alliance, 2024). Limited training in adaptive exercise and accessibility contributes to communication barriers, stigmatizing attitudes, inaccessible facilities,

insufficient understanding of disability-related needs and accessibility requirements (Cunningham et al., 2023; Kitchin et al., 2019; Lesch et al., 2025; McKenzie et al., 2023; Rimmer, 2012). Targeted education can clarify legislative requirements and reinforce the responsibility of fitness providers to provide accessible facilities and programming (Arbour-Nicitopoulos & Martin Ginis, 2011; Martin Ginis et al., 2016). Participants in this study similarly highlight a lack of knowledge and lived experience among gym staff as barriers to inclusion. Mandated staff training and educational initiatives should address accessibility standards, universal design, inclusive attitudes, and adaptive exercise to promote safety, respect, and equitable support for people with a disability in gym settings (Cunningham et al., 2023; Martin Ginis et al., 2016; McConnell et al., 2025; McKenzie et al., 2023; Sharon-David et al., 2021).

Complementary to training, funding should support the hiring of personnel with disability expertise or lived experiences, such as inclusion coordinators or site champions (McKenzie et al., 2023). Often with a personal connection to disability or a disability organization, site champions can facilitate accessibility and inclusion in gyms through social support and community engagement (McKenzie et al., 2023). Moreover, they can increase knowledge among non-disabled staff by sharing their lived experiences and encouraging practices that support people with a disability in gym-based exercise (McKenzie et al., 2023; Richardson et al., 2017).

Listen to their Voices – Collaborate with Users and Organizations

Inclusive and equitable gym-based facilities and programs must be co-designed with individuals who have lived experience with disability (e.g., caregivers, people experiencing a disability), as well as individuals with expertise in adaptive physical activity and disability-inclusive practices (Bumble & Carter, 2021; McConnell et al., 2025; Rivera et al., 2024; Staeger-Wilson et al., 2012). Collaborating with people who have lived experience and community organizations (e.g., related to healthcare, disability, sports, adapted exercise) can enhance the relevance of suggestions leading to improved accessibility and bridge gaps in knowledge reported by fitness providers and identified by participants in this study.

Despite these benefits, few fitness providers engage people who have a disability or community organizations (Kitchin et al., 2019; McKenzie et al., 2023). Collaborating with people who have lived experiences related to disability is essential for identifying barriers and developing practical, context-specific solutions that may be overlooked by non-disabled individuals (Brown et al., 2021; Bumble & Carter, 2021; Kitchin et al., 2019; Lesch et al., 2025; Sharon-David et al., 2021; Staeger-Wilson et al., 2012). By meaningfully involving people with a disability in decisions related to accessibility and inclusion, fitness providers can develop practices that are practical, equitable, and sustainable (Bumble & Carter, 2021). Collaborative processes can encourage buy-in among fitness providers, develop gyms that are legally compliant, and afford usable, respectful, and empowering experiences across diverse users, as they include the perspectives of individuals most affected by the decision-making process (Bumble & Carter, 2021). While fitness providers

should actively seek out the perspectives of people with a disability (Kitchin et al., 2019), users also play a role by expressing interest in participation and advocating for inclusive and accessible gyms (Lesch et al., 2025; Sharon-David et al., 2021).

Partnerships with healthcare providers and disability-focused organizations – such as not-for-profits and parasport clubs – can expand organizational capacity through knowledge exchange, resource sharing, and the co-development of programs (Cunningham et al., 2023; Kitchin et al., 2019; Lesch et al., 2025; McConnell et al., 2025; McKenzie et al., 2023; Rimmer, 2012; Rivera et al., 2024; Staeger-Wilson et al., 2012). These collaborations may foster sustainable, community-embedded approaches to inclusion, ultimately increasing opportunities for equitable participation in gym-based exercise (McConnell et al., 2025; Rivera et al., 2024). Sustainable inclusion in gym-based exercise depends on collaborative design with people with a disability and their communities – transforming accessibility from an obligation into a shared responsibility and a lived reality.

Limitations and Future Directions

Although some participants indicated they were coaches, trainers, or involved in parasports clubs, the focus of this study was to understand the perceptions of gym users. Fitness providers, designers (e.g., architects), and policymakers were not explicitly represented. Future studies should gather the perspectives of stakeholders such as fitness providers, organizations (e.g., sports clubs, not-for-profit agencies, healthcare professionals), designers, and policymakers regarding universal design, in order to explore the feasibility and implementation of

strategies for enhancing accessibility (McConnell et al., 2025). Gathering insights from these groups may strengthen and expand the generalizability of the five calls to action.

Despite the potential benefits, partnerships between fitness providers, community organizations, and healthcare professionals remain difficult to establish due to limited staff capacity, skill needed to negotiate collaborative agreements, and dismissive attitudes (Kitchin et al., 2019; Lesch et al., 2025). Research is needed to examine the processes, barriers, and facilitators of collaborations and partnerships to advance the inclusion of people with a disability in gym-based exercise. A better understanding of these processes may further support the call to involve the voices of individuals with lived experience by providing a framework for successful collaborations and partnerships.

Systematic reviews, Delphi studies, and/or policy research may also be useful future endeavors. These types of research approaches may be adopted to identify areas for improvement in current legislation or policy implementation, contribute evidence-based recommendations for accessibility standards, as well as to develop tools (e.g., training modules) for increasing knowledge and application of universal design. Educational initiatives aimed at training fitness providers and designers in universal design may be warranted. Future research should consider developing interventions or training resources to support these groups in learning about and applying universal design practices. Such interventions can aid in ensuring building compliance, while encouraging providers and designers to

adopt holistic approaches that address the needs of diverse users.

Additionally, as participants volunteered for the study, it may be assumed that they had an interest in the research topic (i.e., accessibility in gyms). Their preconceived beliefs about accessibility in gyms may have introduced self-selection and social desirability biases. Participants may have responded to interview questions in a way that supported the need for accessibility in gyms, as that aligned with their personal beliefs. Consequently, the data may present favorable perceptions that are not necessarily representative of the broader population who do not have preconceived interests in gyms, accessibility, or disability.

Conclusion

Barriers and facilitators at the organizational, community, and policy levels influence the inclusion of diverse users in gym-based exercise (Martin Ginis et al., 2016; Simplican et al., 2015). Targeting these levels can have knock-on effects that result in systemic change, transforming total environments (Martin Ginis et al., 2016; Simplican et al., 2015). Understanding how diverse users perceive organizational practices and policies may assist researchers, fitness providers, and policymakers in advancing accessibility and inclusion in gyms. This study highlights how fitness providers, communities, and policymakers can promote inclusion and reduce barriers to universal design (e.g., cost, knowledge gaps), while emphasizing that participation in gyms and health-enhancing activities is a right of all people. The five calls to action outline how users, organizations, communities, and policymakers can facilitate inclusive gyms

by establishing, supporting, and enforcing policies, educating organizational staff about impairment and accessibility, and collaborating to advance the rights of people with a disability. Ultimately, collective actions are needed from users, staff, organizations, and policymakers to advance and sustain the inclusion of diverse users in gyms (Kitchin et al., 2019; Lesch et al., 2025; Rimmer & Marques, 2012; Sharon-David et al., 2021).

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