



# SUMMARY REPORT AND RECOMMENDATIONS

DISABILITY ACTIVE RECREATION AND SPORT

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**Sport NZ**

DECEMBER 2018



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# 1. QUICK FACTS: DISABILITY AND ACTIVE RECREATION AND SPORT

## 1.1 DISABILITY IN NZ

### 1 Who is affected and how<sup>1</sup>?

- 1.1 million people identify as disabled, 24% of the NZ population
- 11% of children under the age of 15 years (95,000), half have conditions that exist at birth
- 34% by accident/injury, 42% by disease/illness
- Just over half of all disabled people (53%) have more than one type of impairment
- Māori higher than average rates of impairment.

### 2 Invisible impairments

- 73% of disabled children have impaired speaking, learning and developmental delay, sometimes referred to as 'invisible impairments'<sup>2</sup>
- More common than visible impairments, but may go unrecognised or undisclosed<sup>3</sup>
- More children (8%) have psychological/psychiatric impairments compared with sensory (2% seeing and hearing), intellectual (2%) and physical impairments (1%) combined<sup>4</sup>.

### 3 Disability and poverty

- Socio-economic status and disability are inextricably linked
- More likely to be unemployed or on a low income
- Less likely to have a formal qualification
- More likely to have health issues including mental health issues.

### 4 Children

- Children may go undiagnosed or late diagnosed, and often do not get support at school
- Disadvantage in opportunities to develop physical literacy from a young age
- Barriers to parents working fulltime include access to affordable childcare, opportunity costs of negotiating a challenging system
- At least 15% of disabled children live in households with incomes under \$30,000<sup>5</sup>
- Having a disabled child costs families more.

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1 The 2013 Disability Survey (Statistics New Zealand, 2014)

2 This grouping can include "conditions on the autism spectrum, attention deficit hyperactivity disorder, and developmental delay, as well as dyslexia and dyspraxia" all of which are not usually diagnosed at birth.

3 Invisible Disabilities: accessed from: <https://invisibledisabilities.org/what-is-an-invisible-disability/>

4 The 2013 Disability Survey (Statistics New Zealand, 2014)

5 The 2013 Disability Survey (Statistics New Zealand, 2014)



## 1.2 DISABILITY AND ACTIVE RECREATION AND SPORT

### 1 Participation

- Disabled adults walk, garden, do individual workouts with equipment
- Disabled young people run, walk for fitness, play games, swim.
- Disabled people, young and old want to do more active recreation and sport.

### 2 Motivations

Disabled adults have lower motivation and their focus is on:

- Physical and emotional wellbeing
- Fun
- Time with friends and family.
- Disabled young people are motivated by:
  - Fun (significantly lower than non-disabled young people)
  - Being with friends and family
  - Fitness and health, weight management and looking good – significantly higher than non-disabled young people

### 3 Barriers

- NOT time/other commitments
- NOT always perceived as fun
- Those with more significant impairments, (e.g. challenges with concentration and communication) are more likely to experience barriers to participation
- For disabled adults, poor mental health is a major barrier to participation.

### 4 The Value of sport and recreation

- Participation in active recreation and sport is a human right<sup>6</sup>
- Participation in active recreation and sport contributes to wellbeing
- Inclusive active recreation and sport contributes to social and cultural capital.

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<sup>6</sup> United Nations, (2006) CRNPD, Accessed from: <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>





## 2. INTRODUCTION

### 2.1 THE REVIEW AND RATIONALE

Since the publication of Sport New Zealand's (Sport NZ) No Exceptions Strategy and Implementation Plan in 2005 there has been progress made in providing sport and recreation opportunities for many disabled people. In 2016, the Office of Disability Issues launched a refreshed New Zealand Disability Strategy, which identifies the importance of physical activity for disabled people. This review reassesses the delivery of active recreation and sport to disabled people and identifies how best to equitably meet their needs.

There continues to be a lack of quality data on and insights in general into disabled people<sup>7</sup> and specifically regarding the participation of disabled people in community and high performance sport. This has created issues regarding investment and resourcing. Sport NZ's recent Active NZ Survey goes some way towards providing quality data on participation rates. This information will eventually create a more realistic picture of the nature and range of participation in active recreation and sport. For the first time in its survey history, Sport NZ asked specific questions about impairments and 25% of their database confirmed that they were affected in some way by an impairment.

Statistics NZ has published a set of 'Enduring Questions'<sup>8</sup> not answered by current datasets, which would provide information for a more useful, in-depth analysis of the status of disabled people in NZ.

The complex and changing nature of society has also produced a range of definitions regarding disability which has led to confusion within the active recreation and sport sector. While there are several organisations with a clear role in servicing aspects of disability active recreation and sport, there is a lack of strong and collective leadership which has resulted in less connection between organisations than is desirable.

The disability active recreation and sport sector is complex and fragmented. This Summary Report reflects a shared understanding of the issues for disabled people and the sectors they engage with, collates and analyses existing information and uses these insights to generate recommendations. The overall intention is to improve the quality of experiences for disabled people.

The review process enabled:

- Development of relationships between Sport NZ, key disability active recreation and sport providers and the disability community
- Greater awareness of the issues and opportunities experienced by disabled people when accessing active recreation and sport experiences
- Insights that will enhance the availability and quality of active recreation and sport experiences for disabled people.

Following the launch of this Summary Report and Recommendations Sport NZ will prepare their response, which will articulate their strategy for implementation.

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7 HRC & Ombudsman's Office, (2012) Making Disability Rights Real: Second report on the Independent Monitoring Mechanism on the Convention on the Rights of People with Disabilities

8 Statistics NZ (2016) Enduring Questions in the Disability Domain: An initial view from Statistics NZ based on the NZ Disability Survey



## **2.2 METHODS**

An inclusive, developmental and collaborative process was used to work with the disability sector, disability active recreation and sport agencies, Sport NZ and other stakeholders. This was based on a comprehensive stakeholder engagement plan that included a detailed analysis of stakeholders, their interests and influence, and mechanisms for engagement. A summary of the processes used is included in the Background Report.

## **2.3 BACKGROUND REPORT**

Underpinning this Summary Report and Recommendations is a considerable body of evidence – survey data, interview and workshop themes, and information gained from the literature review. This is available as a supplementary Background Report.

This Summary Report and Recommendations is intended for the whole of the disability active recreation and sport, and disability sectors to adopt and implement. The recommendations are intended to guide the actions of Sport NZ as the lead agency.



## 3. DEFINITIONS

An agreed understanding of the meaning of 'disabled people', 'active recreation' and 'sport' is necessary. Not all people use the same language.

### 3.1 DISABLED PEOPLE

The language used in describing people is important, and reflects societal attitudes and thinking. In this Summary Report, we use the term 'disabled people' rather than 'people with disabilities'. This references the contemporary social model of disability as opposed to the traditional medical model of disability. From a social model viewpoint, disability is not something people have ('we are not people with disabilities'), but is something done to people with impairments.<sup>9</sup>

Disability is not something individuals have. What individuals have are impairments. They may be physical, sensory, neurological, psychiatric, intellectual or other impairments.<sup>10</sup>

'Disabled' in this context refers to the disabling barriers to participation in social, cultural and economic life that exist for people with impairments. People with impairments are disabled if society does not provide an environment that takes their impairments adequately into account. Consequently, they experience barriers preventing their participation in society.<sup>11</sup> In this context, environments include physical (e.g. buildings, transport, services), attitudes (stereotyping, prejudice, discrimination) and organisations (policies, practices, procedures).<sup>12</sup>

*Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others<sup>13</sup>*

### 3.2 ACTIVE RECREATION

Recreation is free-time activity that is voluntarily undertaken, primarily for pleasure and satisfaction. Recreation is the foundation concept underpinning arts, craft and culture, competitive activity and sport, fitness and health, and outdoor recreation, and active recreation is a subset that involves movement. Recreation is both a means to an end (health, fitness, therapy), and an end in itself (fun, satisfaction). Participation in active recreation and sport occurs across our lifetimes.

At a simple level it occurs in the following groupings:

- Outdoor recreation
- Health and fitness activities
- Creative activities like dance
- Competitive sport.

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9 <https://www.disabilityartsonline.org.uk/why-we-are-disabled-people-not-people-with-disabilities>

10 New Zealand Disability Strategy 2016-2026

11 <https://www.od.govt.nz/nz-disability-strategy/>

12 Definitions of Disability, accessed from: <http://www.dibservices.org.uk/definitions-disability>

13 Article One, The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)



It can be play, games or competition. Play is not just the domain of children. Play is:

- Intrinsically motivated – it is spontaneous and will happen anywhere
- Personally directed – for children it requires limited or no adult involvement
- Freely chosen – it is self-determined and has no pre-determined outcome
- Fun, accessible, challenging, social, repeatable.

People participate in active recreation and sport for the following reasons:

- Rest, relaxation, work contrast
- Skill development and mastery
- Self-expression
- Personal growth
- Sense of achievement
- Adult education
- Excitement and contest
- Companionship and belonging
- Experiencing nature.

### Continuum of participation

Participation in active recreation and sport occurs in a wide range of different ways – in different contexts, formats, levels of performance, with varying motivations and modes of delivery. It occurs at all life stages across our lifetimes. Enabling people to have quality active recreation and sport experiences is central to this model.



Figure 1 Continuum of active recreation and sport participation, Lumin



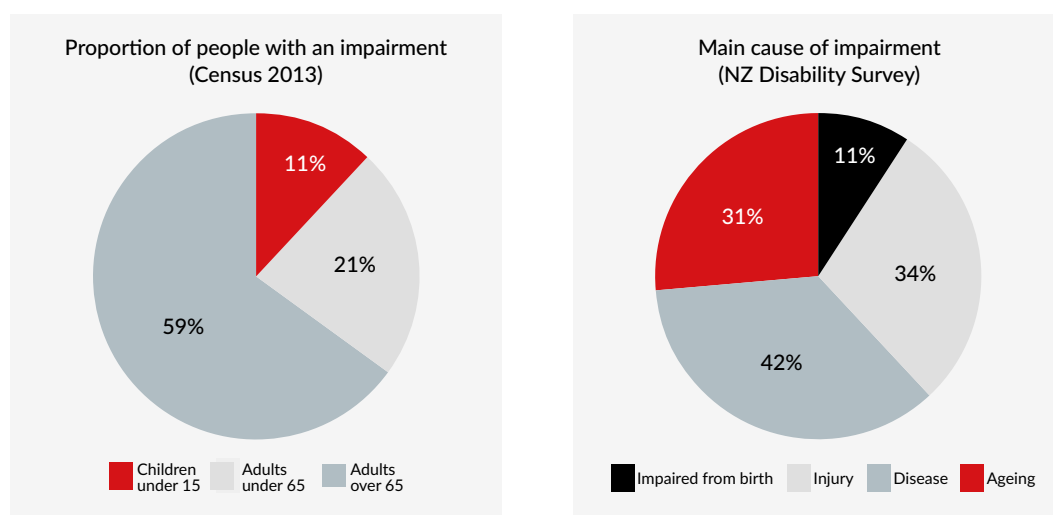
## 4. CURRENT CONTEXT

Obtaining quality data on disabled people in NZ is challenging as the Disability Commissioner (2013) noted in the second report to the United Nations on the Convention on the Rights of Persons with Disabilities:

*There is a continued absence of quality data based on consistent definitions across a range of indicators. This makes it difficult to obtain an accurate view of many issues that have an impact on the lives of disabled people. It also hinders the measurement of progress and the recognition of improvements that have been made.<sup>14</sup>*

We have taken a broad-brush approach to the data, presenting a 'snapshot' of disability in NZ based on available datasets: Ministry of Health Disability Support Services, Statistics NZ, the National Disability Survey (2014), and Active NZ 2017. This has been supplemented by selected international data.

The strategy recommends the collection and analysis of data on the *context* of disabled people in Aotearoa/New Zealand and the *participation rates* of disabled people in active recreation and sport. Increased data collection over time will enable a more detailed analysis of what is going well.



### 4.1 UNDERSTANDING DISABILITY

In 2013, (NZ Census) 24% of New Zealanders are disabled with older adults more likely to be disabled. More than half of disabled people (53%) have more than one type of impairment. Fewer people are impaired from birth (11%). As a population, most disabled people have a physical impairment caused by disease or illness (42%), accident/injury (34%) or aging (31%).

Adults aged 15–44 have a more balanced spread of impairments, across physical (7%), psychological/psychiatric (6%), other<sup>15</sup> (6%), sensory (5%).

While more boys (13%) than girls (8%) are likely to be disabled, there is little difference in disability rates for men and women (aged 15 years and over).

<sup>14</sup> HRC & Ombudsman's Office, (2012) Making Disability Rights Real: Second report on the Independent Monitoring Mechanism on the Convention on the Rights of People with Disabilities.

<sup>15</sup> Other impairments include: impaired speaking, learning, and remembering for adults aged 15 plus years



### Ethnicity

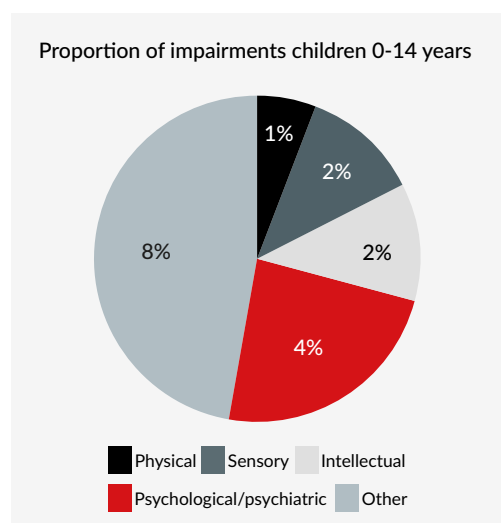
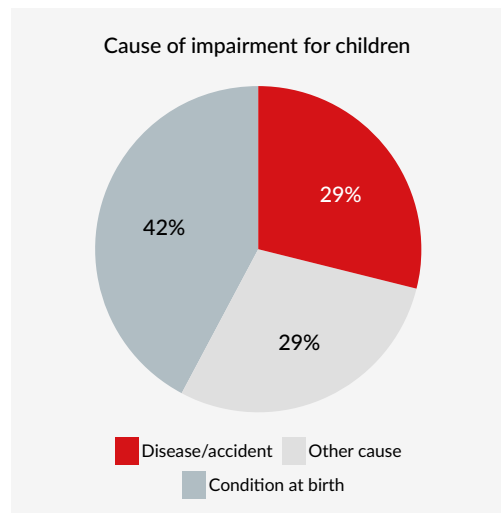
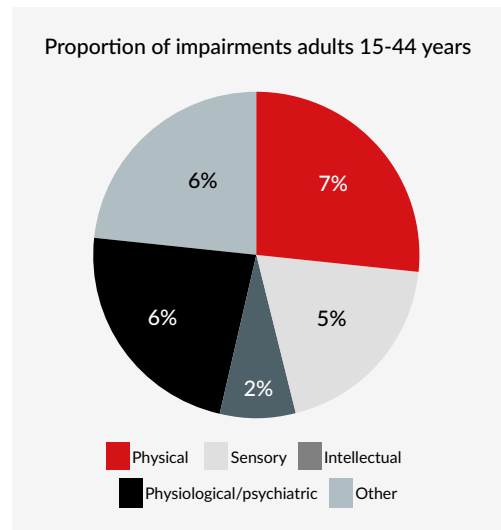
Māori<sup>16</sup> (32%) and Pacific people (26%) have higher-than-average disability rates, after adjusting for differences in ethnic population age profiles, compared with New Zealand European (24%) and Asian (17%). Disabled Māori are mostly a young population, with 38% aged under 15 years and half (49%) aged under 25 years<sup>17</sup>. Half (51%) of disabled Māori have intellectual impairments while a third (32%) have physical impairments.

### Children

Nearly half of all disabled children (49%) are affected by conditions that existed at birth. More than half of all disabled children (52%) have difficulty learning. For children, (0–14 years) learning, psychological/psychiatric, and speaking difficulties are the three most common main impairments.

Nearly three quarters of disabled children<sup>18</sup> (73%) have impaired speaking, learning and developmental delay, sometimes referred to as ‘invisible impairments’.<sup>19</sup> More children (8%) have psychological/psychiatric impairments compared with sensory (2% seeing and hearing), intellectual (2%) and physical impairments (1%) combined.<sup>20</sup>

Nearly one third of children (29%) have their cause of impairment categorised as ‘other cause’<sup>21</sup>: conditions on the autism spectrum, attention deficit hyperactivity disorder, and developmental delay, as well as dyslexia and dyspraxia. While these conditions may have existed at birth they are not usually identified until later, and may be regarded by parents or caregivers as not having been present at birth.



16 Hickey, H. & Wilson, D. L. (2017). Whānau Hauā: Reframing Disability from an Indigenous Perspective. *Mai Journal*, 6 (1), p. 89–94.

17 Ministry of Health [MOH], 2012

18 National Disability Survey 2013 (Statistics New Zealand, 2014, p. 8).

19 This grouping can include “conditions on the autism spectrum, attention deficit hyperactivity disorder, and developmental delay, as well as dyslexia and dyspraxia” all of which are not usually diagnosed at birth.

20 The 2013 Disability Survey (Statistics New Zealand, 2014)

21 National Disability Survey 2013 (Statistics New Zealand, 2014, p. 8).



*Invisible Disability: To define invisible disability in simple terms is a physical, mental or neurological condition that limits a person's movements, senses, or activities that is invisible to the onlooker. Unfortunately, the very fact that these symptoms are invisible can lead to misunderstandings, false perceptions, and judgements.<sup>22</sup>*

### **Disabled people with higher support needs**

Regular ongoing disability support services are provided to 35,000 New Zealanders, 40% of whom are under 19 years old. The largest groups are: intellectual disability (non-specified) (25%); Autism Spectrum Disorder (10%); and Down syndrome (10%). Clients are skewed towards high-deprivation deciles, and Māori and Pacific peoples are over-represented in these groups.

### **Socio-economic status**

*There is a dearth of national information available about people with disabilities in NZ and even less information about the extent that they experience financial and material hardship.<sup>23</sup>*

Disabled people experience marked social and economic disadvantages and poorer health and wellbeing than the rest of the population. This is reflected in a range of statistics relating to income, health and other indicators.<sup>24 25 26</sup>

Barriers to parental employment of disabled children include lack of appropriate and affordable childcare, the opportunity costs of negotiating multiple systems and other factors<sup>27 28</sup>

- 27,181 children live in 15,040 households where the main benefit holder or their partner receives a disability allowance
- 17,691 children in beneficiary households receive a disability allowance.<sup>29</sup>

***Disabled children are more likely to live in low income and materially deprived households. As well, acquired disability is more likely to occur in families who are socio-economically deprived. The relationship between child poverty and disability is complex.<sup>30</sup>***

22 <https://invisibledisabilities.org/>

23 Expert Advisory Group on Solutions to Child Poverty (2012). Working Paper no. 21 Child Poverty and Disability

24 [http://archive.stats.govt.nz/browse\\_for\\_stats/income-and-work/employment\\_and\\_unemployment/LabourMarketStatisticsDisability\\_MRJun17qtr.aspx](http://archive.stats.govt.nz/browse_for_stats/income-and-work/employment_and_unemployment/LabourMarketStatisticsDisability_MRJun17qtr.aspx)

25 [http://archive.stats.govt.nz/browse\\_for\\_stats/health/disabilities/social-economic-outcomes-13/income.aspx](http://archive.stats.govt.nz/browse_for_stats/health/disabilities/social-economic-outcomes-13/income.aspx)

26 MacInnes et al. (2014) Disability, Long term conditions and poverty, Accessed from; [https://www.npi.org.uk/files/7814/0490/1005/Disability\\_long\\_term\\_conditions\\_and\\_poverty.pdf](https://www.npi.org.uk/files/7814/0490/1005/Disability_long_term_conditions_and_poverty.pdf)

27 *Ibid*

28 The 2013 Disability Survey (Statistics New Zealand, 2014, p. 3).

29 MSD administrative data sourced from Expert Advisory Group on Solutions to Child Poverty (2012). Working Paper no. 21 Child Poverty and Disability.

30 Expert Advisory Group on Solutions to Child Poverty, (2012) Working Paper no 21: Child Poverty and Disability. Accessed from: <http://www.occ.org.nz/assets/Uploads/EAG/Working-papers/No-21-Child-poverty-and-disability.pdf>



### **Health status**

Disabled people are more likely to have health issues which may impact on their ability to participate in active recreation and sport, a situation which may be directly related to their impairment or as a result of other factors, such as anxiety and depression.

The overall health status of disabled people is lower than the general population, due in part to their reduced circumstances, and the challenge of accessing appropriate primary healthcare. The Active NZ 2017 survey indicates that pain, tiredness, and not feeling well are some of the factors stopping disabled people from participating. Clearly, some of the health outcomes for people with intellectual impairment are directly related to poverty.

***Women with intellectual disability live on average 23 years less than non-disabled women.*** <sup>31</sup>

### **Living situation**

Research<sup>32</sup> indicates that some people with high and complex needs do not belong to community groups or participate in formal sport, leisure or recreation clubs that include non-disabled people.

Where and how a person lives impacts on where, how and when they participate in active recreation and sport. This includes such things as:

- Level of support required (to get up and go out, and to be at a recreation or sport activity)
- Availability and control of funding
- Easy access to accessible transport.

## **4.2 SPORT NZ PARTNER ORGANISATIONS**

### **Disability Active Recreation and Sport**

Disability active recreation and sport is delivered through a wide range of partners and providers.

Sport NZ has a direct partnership with and investment in a range of organisations including disability sports organisations.

Athletics, Swimming and Cycling, amongst others are NSOs that facilitate opportunities for disabled athletes.

Sport NZ also partners with Disability Sports Organisations: Paralympics NZ (including some para sports), Halberg Disability Sports Trust, and Special Olympics NZ.

Sport NZ's No Exceptions Fund is allocated via the Halberg Foundation, some of which supports local Parafeds.

National recreation organisations (NZRA and YMCA) and Regional Sports Trusts including Aktive are also funded by Sport NZ.

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<sup>31</sup> Ministry of Health (2011) Health Indicators for New Zealanders with Intellectual Disability

<sup>32</sup> Milner, P and Mirfin-Veitch, (2012) I am Here: The Article 19 Project, CCS Disability Action





## High Performance

The high performance pathway is different, because of the range of options available to para athletes, depending on their sport.

Many talented para athletes have access to the high performance pathway with support from national sports organisations and High Performance Sport New Zealand. Some sports are directly supported by disability sports organisations or Paralympics NZ. Para athletes embarking on their competition careers are engaged with clubs, regional sport and disability sport organisations and Parafeds.

The Halberg Games, while not a high performance event, is an entry point for some para athletes, and provides opportunities for many young disabled athletes to come together and compete.

*Organisations are now pushing a pathway for our para athletes.  
In 2016 I represented New Zealand at the Junior Disability Games [Halberg Games]  
and won silver ... I hope to work my way up through the grades over the next two years.  
Online Survey Participant*

## Active recreation and sport

There is a wide range of organisations providing active recreation and sport, at a national, regional and local level, many of whom have no direct relationship or investment from Sport NZ.

Direct funding from Sport NZ supports national sports organisations, Special Olympics NZ, Halberg, New Zealand Recreation Association and the YMCA.

Community delivery of programmes, events and services occurs through clubs, branches of Special Olympics NZ, Parafed clubs, Halberg, community facilities, disability organisations and institutions/group housing. Of course, families are also key providers of opportunity.

## The current system

At present, there is a skew towards supporting organisations that provide opportunities for young people, primarily those who are physically or intellectually disabled, and those interested in participating in a prescribed range of activities. This does not reflect the profile of the disability population.

Invisible impairments predominant amongst young people aged 0 – 14 years, are likely to preclude participation in the current system, and therefore these people are less likely to develop physical literacy skills and knowledge, fundamental to lifelong participation.

There are few opportunities to participate in inclusive opportunities with friends and family. Local authorities and schools both provide spaces and places and programmes that should be reaching disabled young people and adults.



## 5. EXPERIENCE OF ACTIVE RECREATION AND SPORT

The following Information is from the Active NZ Survey (2017) and the Disability Active Recreation and Sport Survey (2018).

### Participation

Disabled people participate significantly less in physical activity, although this is more marked amongst adults. More than a third of disabled adults do not participate in active recreation and sport.

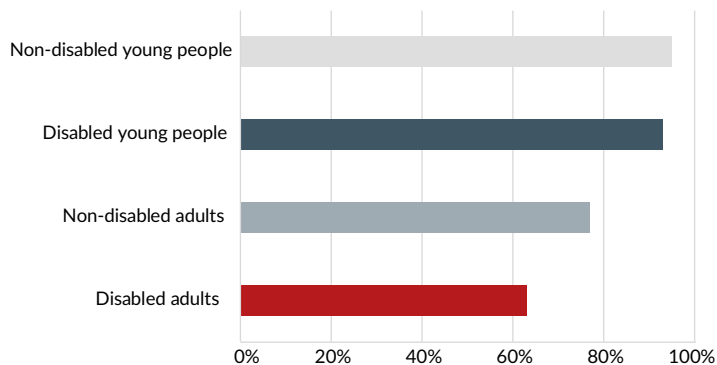
Disabled people (adults and young people) are significantly less likely to participate in competitive activity. Young people also participate less in physical education/with their class in school, and they dislike physical education more than their non-disabled schoolmates do.

Regularly-engaged-in activities are similar to those of non-disabled adults but at a significantly lower level of participation:

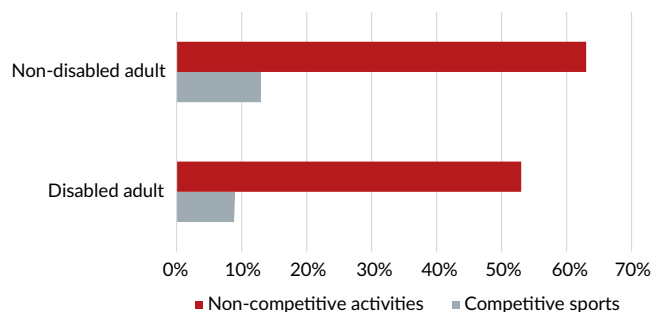
- Walking
- Gardening
- Individual workout using equipment
- Running / jogging
- Playing games (e.g. with kids).

More formal or organised activities include: all forms of cycling, swimming and cycling (aggregation of all forms). Participation over the year also includes tramping (overnight and day), fishing, Pilates and yoga, golf, dancing and kayaking. All of these were at levels significantly less than non-disabled people.

Participation in physical activity for sport, exercise or recreation over past 7 days



Weekly participation in competitive sports and non-competitive activities (Active NZ 2017)





## Motivation

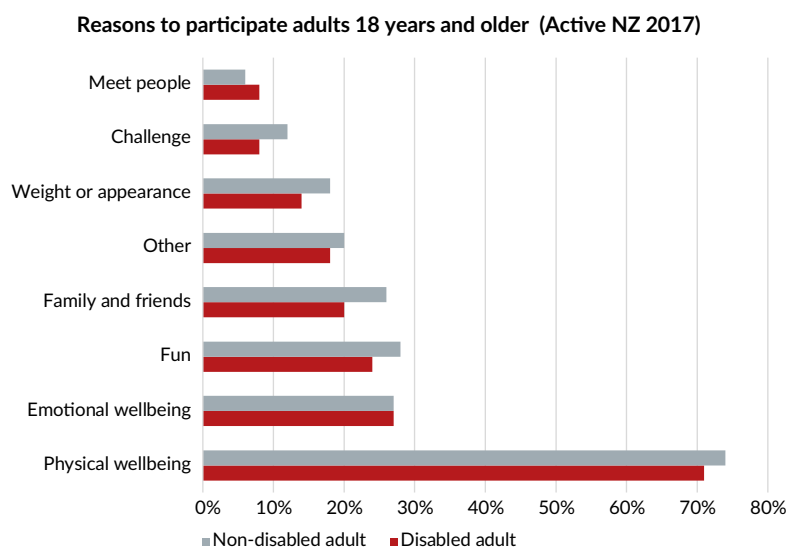
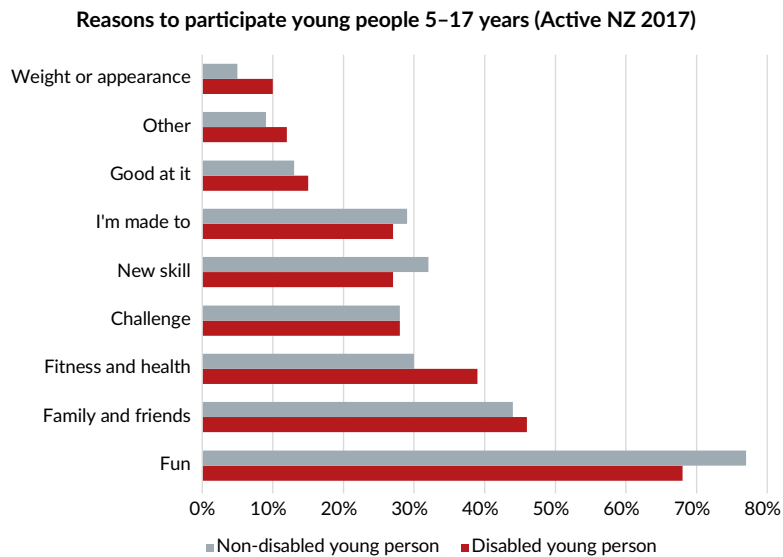
There are clear preferences for non-competitive activities amongst all groups of disabled people. More than a third of disabled adults do not participate in active recreation and sport.

The motivations of all people, both young and old, to participate in active recreation and sport are similar.

Disabled adults are motivated to participate more in physical activities, for the same reasons as non-disabled athletes. However, their motivation is significantly lower in all areas.

The significant difference is that disabled young people are more motivated to participate for weight management, because they are good at it, for fitness and health, and to be with friends and family. Their motivation to participate for fun is still primary, but less than that for non-disabled young people.

Disabled people, young (70%) and adult (72%), are keen to do more active recreation. The 70% of young disabled people keen to do more is greater than their non-disabled peers.





## Barriers

Young disabled people experience significant barriers to participation: tiredness, motivation, equipment, affordability, injury, lack of fitness and confidence, and no-one to go with. In contrast they're not too busy nor are they too active.

The barriers to participation for disabled adults, however, more closely mirror the non-disabled adults. Once again, they are less likely to have other commitments that prevent participation.

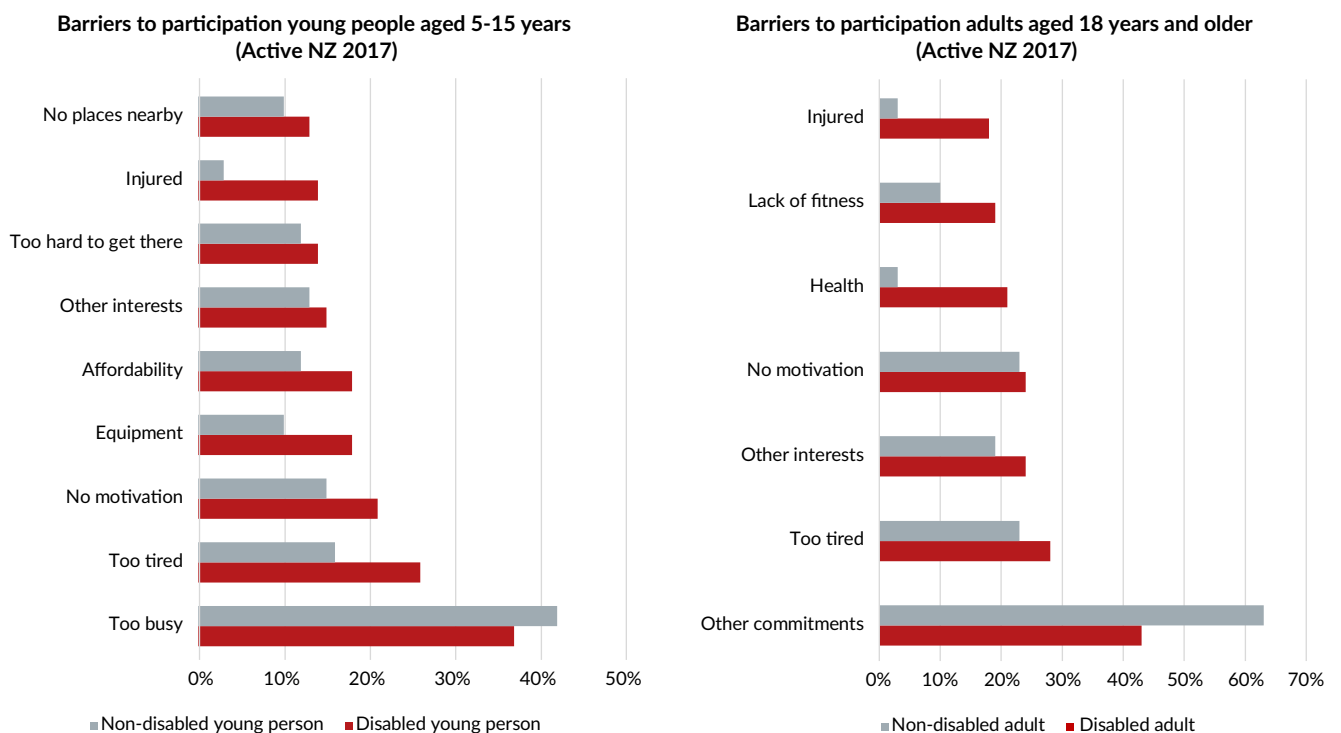
At closer inspection, using the data from the Disability Active Recreation and Sport Survey (2018), people with different impairments have different experiences. Non-disabled respondents have more positive participation experiences than disabled people.

Access to a visible competition pathway, affordability and the availability of coaches/instructors are key barriers.

People with more significant impairments experience more barriers to participation.

Having communication and learning difficulties is reflected in a greater assessment of barriers to participation.

Those who self-reported low mental wellbeing using the WHO-5<sup>33</sup> scale, have less positive experiences.



33 The World Health Organisation Five Wellbeing Index (WHO-5) accessed from <https://www.corc.uk.net/outcome-experience-measures/the-world-health-organisation-five-well-being-index-who-5/>

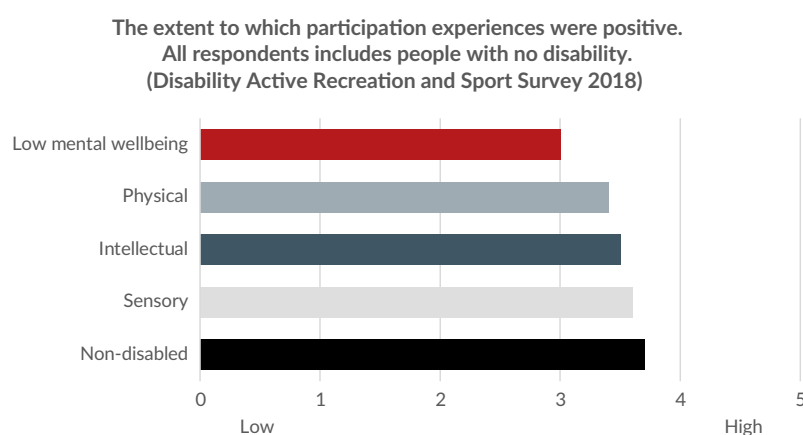


## Athletes' perceptions

Athletes who identified that they were participating at national level and local level experience the following barriers to participation:

- Lack of a clearly visible performance pathway
- Cost
- Accessibility.

National athletes also identified: availability of coaches and the attitudes of others. Local athletes were more affected by equipment that was fit for use. By comparison those competing at regional levels, experienced fewer barriers than both national and local athletes and participants.



## 5.1 IMPLICATIONS FOR ACTIVE RECREATION AND SPORT

*...there is strong (gold standard) evidence that participation in sport and physical activity can have a positive impact on physical health, on social cohesion and educational outcomes.<sup>34</sup>*

People, young and old, disabled or not enjoy participation in active recreation and sport. However, there are some people who experience more barriers that exclude them from participation. **Those with more significant impairments, and those who have challenges with concentration and communication are more likely to experience barriers to participation. In particular they have challenges in accessing opportunities and meeting the costs of participation and they are less likely to access performance pathways.**

Younger people are more highly motivated by fun and participating with friends and family, and they enjoy both the challenges and opportunities of new skills. **However, disabled young people are less likely to experience participation as fun and more likely to focus on fitness or weight management.**

Adults are more likely to focus on wellbeing. **Disabled adults have lower motivation to participate.**

Most non-disabled adults identify other commitments as being a significant barrier to participation. This is not the case for disabled adults, who are more likely to be too tired, have other interests or have low motivation.

34 Angus and Associates, (2017) The Value of Sport and Active Recreation to New Zealanders



## 5.2 AN INEQUITABLE SYSTEM

Putting aside any discussion of impairment, the social and financial inequities caused by a 'disabling' society include:

- High unemployment
- Low incomes
- Poor housing
- Transport

Another barrier is often poor mental and physical health – the latter not necessarily related to an individual's impairment.

These inequities all negatively impact on participation in active recreation and sport. For children all these issues are compounded. These and other factors, such as people's attitudes to impairment, can be overwhelming barriers to participation in everyday active recreation and sport that others take for granted. There is often no chance to develop physical literacy, or play in a team, or experience normal activities like going to the beach that others do without thinking – and these habits are established early in life. The long-term repercussions are incredibly damaging to the individual, their family and whānau, and our society.

This Summary Report and Recommendations is an opportunity to enable participation of **all** New Zealanders across their lifetimes. We can lead change by identifying barriers to participation and focusing on what motivates people. It is imperative to increase people's awareness of the 'disabling society' and its impact. Understanding and increased capability will lead to greater confidence in catering to diverse needs. Coordinated efforts across the sector will meet the needs of the widest group of New Zealanders – particularly those who are on the outside of the current delivery system. We need to ensure that we create accessible, quality experiences for all, enabling our communities to participate in and benefit from active recreation and sport.



## 6. POLICY CONTEXT

Policy guides the thinking and practice of organisations who deliver and provides a clear marker of changed attitudes to disability.

### 6.1 DISABILITY POLICY

Two important documents guide New Zealand’s disability policy: the United Nations Convention on the Rights of Persons with Disabilities, and the New Zealand Disability Strategy.

#### The United Nations Convention on the Rights of Persons with Disabilities

The 2006 Convention (UNCRPD)<sup>35</sup>, against which Aotearoa/New Zealand is monitored, has eight guiding principles:

- Respect for inherent dignity, individual autonomy including the freedom to make one’s own choices, and independence of persons
- Non-discrimination
- Full and effective participation and inclusion in society
- Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity
- Equality of opportunity
- Accessibility
- Equality between men and women
- Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.

#### New Zealand Disability Strategy 2016–2026<sup>36</sup>

<b>VISION:</b> New Zealand is a non-disabling society - a place where disabled people have an equal opportunity to achieve their goals and aspirations, and all of New Zealand works together to make this happen.	
Outcome Areas	Results <sup>37</sup>
<ul style="list-style-type: none"> <li>• Education</li> <li>• Employment and economic security</li> <li>• Health and wellbeing</li> <li>• Rights protection and justice</li> <li>• Accessibility</li> <li>• Attitudes</li> <li>• Choice and control</li> <li>• Leadership</li> </ul>	<ul style="list-style-type: none"> <li>• Increase employment and economic opportunities</li> <li>• Transform the disability support system<sup>38</sup></li> <li>• Ensure personal safety</li> <li>• Promote access in the community</li> </ul>

35 <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>

36 <https://www.odi.govt.nz/nz-disability-strategy/>

37 <https://www.odi.govt.nz/nz-disability-strategy/disability-action-plan/>

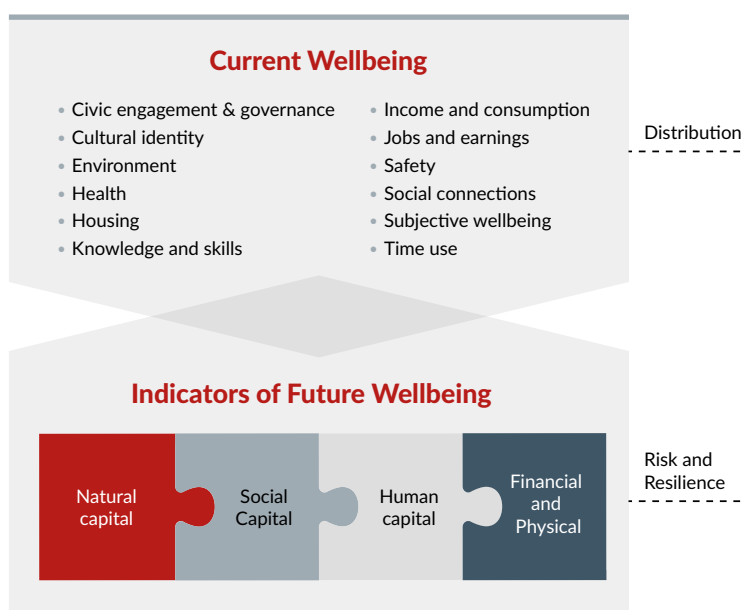
38 This work is occurring through the Enabling Good Lives approach to supporting disabled people

## 6.2 OTHER GOVERNMENT INITIATIVES

Active recreation and sport do not occur in a vacuum. A raft of strategies and policies at government level impact on the lives of disabled people.

### Living Standards Framework

The government is currently developing a Living Standards Framework<sup>39</sup> that will measure individual, community and national wellbeing – both now and for future generations. Leisure and recreation are key outcomes that contribute to life satisfaction and wellbeing.



Social, human, natural and physical capability are developed through active recreation and sport provision and engagement. The positive impact of participation is seen in health, work-life balance, education, social connections, environmental quality and subjective wellbeing.

### Enabling Good Lives – disability service transformation

Enabling Good Lives (EGL) is a new approach to supporting disabled people that offers greater choice and control over the supports they receive, so that they can plan for the lives they want.<sup>40</sup> Principles of the EGL approach are:

- Self-directed planning and facilitation
- Cross-government individualised and portable funding
- Considering the person in their wider context, not in the context of ‘funded support services’
- Strengthening families or whānau
- Community building to develop natural supports

39 Smith, Conal (2018) Treasury Living Standards Dashboard: Monitoring Intergenerational Wellbeing. Kōtātā Insight.

40 <http://www.enablinggoodlives.co.nz/about-egl/>





- Disabled people are active and valued citizens with an everyday life in everyday places. Enabling Good Lives supports people to achieve desirable outcomes such as:
- Education and training
- Employment
- Being with friends
- Having relationships and a family
- Taking part in community and cultural activities.

## Education

While those with special education needs (disability or otherwise) have the right to receive an education at state schools, and have access to the Hauora/Health and Physical Education curriculum, evidence from Active NZ (2017) indicates that many children are excluded. Funding to support students for special education requires students to have ongoing extreme or severe impairments or moderate to high difficulty with learning, combined with high needs.

Inequities arise where children have impairments which impact on their participation in school physical education and school sports. The funding is focused on classroom participation and learning.

The government is developing a Disability and Learning Support Action Plan, with the intention of building on the progress of the Ministry's new Learning Support delivery model.<sup>41</sup>

## Social Welfare

In addition to disability specific policies there are several other strategies that influence the disability sector:

- *New Zealand Positive Ageing Strategy (2001)*<sup>42</sup> which is currently under review and will include a focus on older adults and work, appropriate housing options, and maintaining social connections.
- *Whānau Ora (2018 – 2022)*<sup>43</sup>, the purpose of which is Manaaki tangata, Manaaki whānau – We help New Zealanders to be safe, strong and independent. The current focus is on *Te Pae Tawhiti – Our Future*. The outcomes of this approach are: New Zealanders getting the support they require, New Zealanders [being] resilient and living in inclusive and supportive communities, and New Zealanders participating positively in society and reaching their full potential.

Both of these strategies engage with low participation populations, and participation in active recreation and sport can be instrumental in achieving their aspirations.

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41 <http://www.education.govt.nz/news/draft-disability-and-learning-support-action-plan/>

42 <https://www.msd.govt.nz/about-msd-and-our-work/publications-resources/planning-strategy/positive-ageing/>

43 <https://www.tpk.govt.nz/en/whakamahia/whanau-ora>



## 6.3 ACTIVE RECREATION AND SPORT POLICY

There is a fundamental belief in the rights to have access to leisure (active recreation, sport and play).

### International rights

The Universal Declaration of Human Rights, endorsed by the United Nations in 1948, includes the right to leisure time, and the Convention on the Rights of the Child<sup>44</sup> specifies that:

*Children have the right to rest and leisure, to engage in sport and play and recreational activities appropriate to the age of the child and to participate freely in cultural life and the arts.*

### New Zealand policy

The active recreation and sport sector is guided by the Sport and Recreation Act which articulates the role and function of Sport NZ, and the Local Government Act which shapes expectations of territorial authorities to engage in planning and provision of recreation and sport spaces and places, programmes and services.

#### *Sport and Recreation New Zealand Act (2002)*

Sport NZ, charged with implementation of the Sport and Recreation Act, has responsibilities for people with disabilities:

*(n) encourage participation in physical recreation and sport by Pacific peoples, women, older New Zealanders, and people with disabilities*

*(o) recognise the role of physical recreation and sport in the rehabilitation of people with disabilities<sup>45</sup>*

#### *Ministerial Letter of Expectation (2018-19)*

Specific priorities in the Minister of Sport and Recreation's Letter of Expectation for 2018-19 include:

*a focus on how sport and physical activity can contribute to the Government's wider priorities across the social sector. This is recognition of the value that sport and physical activity can have in addressing wider social problems including ... strengthen the long-term opportunities for New Zealanders with disabilities.*

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44 [https://www.unicef.org/crc/index\\_73875.html](https://www.unicef.org/crc/index_73875.html)

45 <http://www.legislation.govt.nz/act/public/2002/0038/latest/whole.html>



## 6.4 SPORT NZ POLICY

Sport NZ has a suite of guiding documents that can support and enable improvements to opportunities for disabled people. The principles underpinning each of these plans can include disabled people.

### ***No Exceptions Strategy and Implementation Plan (2005 – 2009)***<sup>46</sup>

Intended to help shape the sector-wide planning, promotion and delivery of physical recreation and sport for disabled people. It focused on: organisation and sector development; best practice examples, tools and information; and training and education.

### ***Community Sport***<sup>47</sup>

A community sport system that is: participant-focused, system-led, performance-driven and requires locally-led engagement.

### ***Young People Plan***<sup>48</sup>

Enrich and inspire the lives of young people by creating a lifelong love of community sport and being physically active.

### ***Older Persons Plan***<sup>49</sup>

Valuing connections, freedom, discovery, relaxation and rejuvenation that are priorities for older people.

### ***Māori Participation in Community Sport***<sup>50</sup>

Cultural capability improvement and strong leadership are pivotal levers for change. A true partnership founded on shared values, principles and quality relationships will strengthen the platform from which Māori and Sport NZ can flourish and achieve shared and common goals.

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46 No Exceptions Strategy and Implementation Plan (2005 – 2009) accessed from: <https://www.srknowledge.org.nz/research-completed/no-exceptions-strategy-and-implementation-plan-2005-2009/>

47 <https://sportnz.org.nz/about-us/our-publications/our-strategies/community-sport-strategy/>

48 <https://sportnz.org.nz/about-us/our-publications/our-plans-and-programmes/young-people-plan/>

49 <https://sportnz.org.nz/assets/Uploads/Active-Older-People-pamphlet-2.pdf>

50 KTV Consulting (2017) 'Maori Participation in Community Sport Review' accessed from <https://sportnz.org.nz/assets/Uploads/Maori-Participation-Review-Report.pdf>



## 7. PRIORITIES FOR ACTION

This Disability Active Recreation and Sport Summary Report and Recommendations is intended to shape change in the disability, active recreation and sport, and disability sport sectors. It is informed by international and national government policy, and underpinned by some universal principles that are fundamental to disability rights.

### 7.1 PRINCIPLES

New Zealand's obligations to the UN Convention, the government's Living Standards Framework, and the New Zealand Disability Strategy all commit our nation to being inclusive of disabled people. This is an opportunity to enact the principles of inclusion in practice.

The following principles (adapted from the United Nations Convention on People with Disabilities) underpin the priorities for action:

- **Respect** for inherent dignity, individual autonomy and independence
- Value of **human diversity** and humanity
- **Gender equity**
- Full and effective **participation and inclusion**
- **Respect** for the evolving capacities of all.





## 7.2 VISION

Disabled people enjoying active recreation and sport – for their own wellbeing and the wellbeing of our communities and nation.

## 7.3 PRIORITIES

The recommendations focus on five strategic priorities:

- Take the lead
- Establish enabling attitudes
- Increase capability
- Coordinated delivery
- Provide quality experiences

The following section describes each priority with supporting rationale, clearly articulated outcomes and strategies to guide implementation.

*Disabled people participating fully alongside anyone [else] no difference.*

*Inclusion. Accessible. [opportunities] Run by educated and knowledgeable people. Influenced and guided by the person accessing the sport. A supportive learning opportunity for coaches, managers and organisations. Integrated approach between organisations.*

*Online survey participants*



## 7.4 TAKE THE LEAD

<b>Rationale</b>	<p>Sport NZ has a commitment in line with international and national policy and legislation to deliver active recreation and sport to <b>all</b> New Zealanders. Strong leadership can ensure equity of access to opportunities and resources.</p> <p>The sector is complex and fragmented, and requires leadership. Sport NZ is in a good position to lead change via NSOs, RSTs, local government, NROs, NDSOs and other partner organisations, as well as influence cross-sectoral issues, addressing fragmentation, duplication and lack of collaboration in delivery.</p> <p>All disability, active recreation and sport, and disability sport organisations have a leadership role in creating inclusive policy and practice. Their leadership will:</p> <ul style="list-style-type: none"><li>• Improve physical and mental wellbeing of disabled people – so more are able to participate in economic, social and cultural life</li><li>• Increase numbers using active recreation places and spaces</li><li>• Ensure the best use of existing resources through collaboration</li><li>• Create stronger more diverse organisations</li><li>• Be visible, leveraging action and delivery through the active recreation and sport system.</li></ul>
<b>Outcome</b>	<p>Sport NZ is the champion for active recreation and sport disability participation, recognised by government and other agencies.</p> <p>Active recreation and sport is inclusive of all disabled people, regardless of the nature of their impairment.</p> <p>The disability sector is inclusive of active recreation and sport.</p> <p>Agencies providing disability active recreation and sport are inclusive of different types of impairment.</p>
<b>Implementation</b>	<ul style="list-style-type: none"><li>• Provide good clear leadership both regionally and nationally including setting of clear expectations and facilitating change</li><li>• Work with RSTs and NSOs to include disability sport within the existing delivery systems</li><li>• Include disabled people in planning, implementation, monitoring and evaluation</li><li>• Commit to a shared vision for active recreation and sport</li><li>• Integrate disability into all Sport NZ strategies and programmes</li><li>• Implement and achieve aligned and quality practices</li><li>• Invest in the implementation of recommendations.</li></ul>
<b>Progress Indicators</b>	<ul style="list-style-type: none"><li>• A targeted number of national sports organisations and regional sports trusts with inclusive policies and practices, at governance, management and delivery levels</li><li>• Disabled people are on the agenda for providers in the active recreation and sport sector – and this is reflected in policy, programmes, staffing and delivery</li><li>• Increased numbers of disabled people in leadership and other roles across the active recreation and sport, and disability sport sectors.</li></ul>



## 7.5 ESTABLISH ENABLING ATTITUDES

<b>Rationale</b>	<p>People’s mental models<sup>51</sup> and attitudes underlie action. Attitudes of people close to disabled children are central to their participation in physical activity.</p> <p>Unconscious bias and low expectations of capability are a barrier to inclusion and reduce opportunities for disabled people.</p> <p>There are global conversations about inclusion, with expectations of inclusive activity commonplace.</p> <p>NZ is monitored against the UN Convention in terms of the rights of disabled people.</p> <p>Diversity and inclusivity are seen as strengths in active recreation and sports organisations.</p> <p>The disability support system in Aotearoa/New Zealand is undergoing radical change.</p> <p>Aspirations are shifting as disabled people are seen in leadership, creating opportunities to inspire at all steps in the life-cycle.</p>
<b>Outcome</b>	<p>Disabled people actively engaged in active recreation and sport, regardless of impairment type.</p>
<b>Implementation</b>	<ul style="list-style-type: none"> <li>• Enhance attitudes towards active recreation and sport for disabled people</li> <li>• Be aspirational about the rights and contributions of disabled people</li> <li>• Make evidence-based decisions that inform planning and provision.</li> </ul>
<b>Progress Indicators</b>	<ul style="list-style-type: none"> <li>• Targeted and measurable reduction in unconscious bias</li> <li>• Attitude change is reflected by inclusive practice</li> <li>• Increased visibility of disabled people: in the media, in active recreation and sport competition, programmes, facilities, spaces and places.</li> </ul>

### **Case Study: Learn Active**

Learn Active in Canterbury provides outdoor education opportunities for people with intellectual impairment aged 15 years and older. These include tramping, kayaking, rock-climbing, ropes courses, sailing, and first aid. All of which provide opportunities to explore, be challenged and have fun in the outdoors. With a tailored programme built around their strengths and challenges, students learn new skills, socialise and start to develop new roles. Programmes run all year round, and include weekday, weekend and holiday programmes as well as overnight trips. A high staff-student ratio, trained and highly skilled staff, volunteer involvement and close links to family and whānau all contribute to the programme’s success. From small beginnings the programme now offers activities 5 days a week to 103 students, is fast-growing, and has attracted sponsorship from the region.

***Because our programmes are not a ‘one-off’ students can build skills over time. We can push, explore, or work one-on-one with a student over a period of time – we get to know the student’s individual needs and create tailored programmes.***

***Karla Roberts, Director***

51 [https://en.wikipedia.org/wiki/Mental\\_model](https://en.wikipedia.org/wiki/Mental_model)



## 7.6 INCREASE CAPABILITY

<b>Rationale</b>	<p>Knowledge and attitudes are closely interlinked. Building capability in <b>both</b> disability and active recreation and sport sectors creates change in thinking about disability and change in thinking about the role of active recreation and sport.</p> <p>A wealth of knowledge is available and cross-sectoral sharing of information benefits participants and providers.</p> <p>A skilled workforce will deliver better opportunities for disabled people.</p>
<b>Outcome</b>	<p>Organisations across active recreation, sport and disability sectors sharing knowledge and resources to increase internal capability.</p>
<b>Implementation</b>	<ul style="list-style-type: none"><li>• Build knowledge about the value of active recreation and sport</li><li>• Create and share information and resources about disability and active recreation and sport</li><li>• Create shared learning opportunities to improve the quality of active recreation and sport experiences</li><li>• Develop a skilled and confident workforce.</li></ul>
<b>Progress Indicators</b>	<ul style="list-style-type: none"><li>• Increased competence and confidence of the workforce to deliver quality programmes to disabled populations with specific targets and measures</li><li>• More opportunities are available for disabled people with a wider range of impairments than currently on offer – including invisible impairments.</li></ul>

*We find that many instructors are nervous yet enthusiastic to work with our participants, and often misjudge their ability to complete activities; these instructors often report that their pre-conceived ideas about the participants' abilities have been altered. There is a general lack of enthusiasm to support people with disabilities to push their limits and try their hand at more involved adventures – a highly risk-averse culture.*

*Online survey participant*





## 7.7 COORDINATED DELIVERY

<b>Rationale</b>	<p>Participants have a clearer view of who is providing what, and where to seek opportunities for participation from exploring to competing.</p> <p>Funding is limited, it makes economic sense and avoids overlaps and a 'silo' approach to delivery.</p> <p>Partnerships between key stakeholders from the disability, sport, education and government sectors makes for more effective delivery.</p> <p>The complexity and fragmented nature of current delivery means that there are gaps in delivery, duplication of provision and confusion about who is doing what.</p> <p>Reduce duplication and increase delivery to meet individual and community needs.</p>
<b>Outcome</b>	<p>Active recreation and sport partners and providers have clear roles and the impact of investment is visible.</p>
<b>Implementation</b>	<ul style="list-style-type: none"><li>• Build networks at national levels to support collaboration</li><li>• Facilitate the establishment of local networks of disability agencies, sport and recreation organisations to improve provision of opportunities for disabled people</li><li>• Collaborate between the disability sector, and active recreation and sport sectors</li><li>• Establish clear roles and responsibilities</li><li>• Align funding to recommendations.</li></ul>
<b>Progress Indicators</b>	<ul style="list-style-type: none"><li>• A targeted number of new partnerships and cross-sectoral allegiances occurring to maximise the use of resources</li><li>• Increased evidence of active recreation and sport reflected in social policy.</li></ul>

*Sport changes lives, it's not just fitness [and] wellbeing but the sense of community and belonging that comes with being part of a sporting community.*

*It would be great if the disabled sports community was less 'silo' and we could come together with our respective sports to celebrate and support each other, rather than see each other as adversaries competing for funding.*

*Online survey participant*



## 7.8 PROVIDE QUALITY EXPERIENCES

<b>Rationale</b>	<p>People deserve choice about the level of participation, exclusive or integrated, affordable equipment and facilities, knowledgeable coaches, officials and volunteers.</p> <p>Universal design<sup>52</sup> enables people of all abilities to participate as equals.</p> <p>Equitable access to resources creates consistent delivery of programmes and facilities across organisations and regions.</p> <p>Differing income levels for disabled people depending on type and cause of impairment. People whose impairment is caused by accident receive funding/support at a very different level than people whose impairment is caused by illness and disease or is congenital.</p> <p>A clear pathway from play and exploration to lifelong engagement or competition encourages participation. Potential competitors are encouraged to remain engaged with their activity.</p> <p>Disabled people seek meaningful engagement in active recreation and sport, at a level that suits them with whatever support is needed to engage.</p> <p>Active recreation is of value itself, and a human right. Creating a more inclusive system that enables all people to participate social change.</p> <p>Active recreation can be a means to an end – more inclusive opportunities create change in our relationships, communities and society.</p>
<b>Outcome</b>	<p>Increased active recreation and sport participation and quality experiences for disabled people, regardless of impairment type.</p>
<b>Implementation</b>	<ul style="list-style-type: none"><li>• Consistently provide quality active recreation and sport experiences that include disabled people throughout New Zealand. Be creative and responsive to community needs and the capacity of organisations to deliver</li><li>• Facilitate play, active recreation and sport and exploration and lifetime participation</li><li>• Build a clear nationwide pathway from sports participation to excellence</li><li>• Create well-designed, inclusive and fit for purpose facilities, accessible parks, playgrounds and open spaces, including adaptations to existing facilities.</li></ul>
<b>Progress Indicators</b>	<ul style="list-style-type: none"><li>• Increased numbers (measured against Active NZ data) of disabled people participating in active recreation and sport in particular increased participation rates amongst disabled adults</li><li>• Participation rates of disabled people commensurate with non-disabled New Zealanders</li><li>• Number of local authority spaces and places completing accessibility audits.</li></ul>

52 [https://www.branz.co.nz/universal\\_design](https://www.branz.co.nz/universal_design): Universal design is about producing environments that are accessible to all people of all abilities, at any stage of life.



### **Case Study: Coastlands Aquatic Centre, Paraparaumu**

Kāpiti District Council used an accessibility error to create an opportunity. The original design of the new Coastlands Aquatic Centre did not include ramp access into the main pool due to restrictions from the moving floor supplier. Complaints from the community required a new approach, and one that engaged the whole community. Manager Alison Law ran a coordinated stakeholder engagement workshop to get feedback on the ramp as well as input on operations, equipment and programming of the whole facility. Attended by 35 people from 22 local disability and aged organisations, this workshop was the beginning of an on-going, fruitful relationship between the organisations and the pool management and staff. The workshop was the first time local disability organisations had come together, so it also provided an opportunity for their own networking and development.

All facility staff attend a disability awareness workshop within their first month of employment. Specialist equipment was installed in the higher needs disability change room as a result of consultation. The Swim School Manager works with high needs customers at no charge and spends time with caregivers to teach them how to help their clients get the most out of being in the pool.

***Being such a public process has certainly raised staff awareness of disability issues to a very high degree. Customer feedback tells us that customers with disabilities are now extremely satisfied with our facilities, our services and most importantly our staff.***

***Alison Law, Parks and Recreation Manager***



## 8. RECOMMENDATIONS

The following recommendations are intended to guide the actions of Sport NZ as the lead agency.

### **Sport NZ leadership and strategic alignment**

#### ***Strategic alignment***

- Align the relevant objectives in the priorities for action with Sport NZ's strategic focus in all areas of work
- Review policies and practice against diversity and inclusiveness principles
- Work towards disabled people in key leadership roles throughout the system
- Allocate appropriate resources to drive out the recommended priorities as lead organisation.

#### ***Partnerships: new and existing***

- Review and re-align expectations of partners in line with the Strategy's objectives
- Target new funding to deliver to identified populations particularly: children and adults with 'invisible' disability or intellectual disability; disabled people on low incomes and/or with high support needs
- Develop new partnerships with groups and organisations who deliver quality experiences to identified populations.

#### ***Inter-sectoral advocacy***

- Leverage existing cross-government relationships, especially with MSD, Education, Health to promote the value of active recreation and sport for disabled people
- Advocate for increased and aligned data collection on disabled people and in particular disabled children.

### **A campaign to raise awareness and change attitudes**

- Develop a high-profile campaign signalling strong leadership and placing disabled people front and centre
- Undertake staff and sectoral training and development – reflecting on attitudes, unconscious bias and promoting attitudinal change in the sector.

### **Disability Advisory Group**

Establish a disability advisory group made up of people with lived experience whose role is:

- to provide advice, guide and recommend on policy and programme development
- to monitor progress against the plan and review progress annually.

### **Research, monitoring and review**

- Build on existing data from the Active NZ Survey and other sources to create a detailed picture of current participation rates for disabled people.
- Monitor progress both internally in Sport NZ and overall as the lead organisation
- Review and report on progress annually.



## 9. REFLECTIONS

Creating changes starts with reflection and review. The following questions are 'trigger points' for change.

- What does an inclusive active recreation and sport and the recommendations mean for me and my organisation?
- Who are our partners in this work?
- What networks, links or systems can we connect with in our community?
- What strengths do our partners have and how can we use them?
- Where is the disability community excelling in my area? What can I / my organisation do to help build on this?
- What role can we play? What role can others play?
- How can we use principles, such as collaboration, co-design and collective action to create positive change?
- How can we keep track of how well we are doing in this area?
- What is our unconscious bias? How can we learn more to change this?
- How can we partner with disabled people as leaders, advisors, facilitators of change?



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