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Title

**Disability, the Communication of Physical Activity and Sedentary Behaviour, and
Ableism: A Call for Inclusive Messages**

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21 **Competing interests:** Kamran Mallick reports as the Chief Executive of Disability Rights
22 UK. Disability Rights UK is the leading charity of its kind in the UK. We are run by and
23 for people with lived experience of disability or health conditions.

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26

27 **Disability, the Communication of Physical Activity and Sedentary Behaviour, and**
28 **Ableism: A Call for Inclusive Messages**

29 This editorial is a call for action to make physical activity and sedentary behaviour
30 messages inclusive. It focuses on disability. Numerous definitions of disability and ways of
31 identifying as disabled exist across the globe. For example, some people, cultures,
32 organisations, and governments prefer for certain reasons to use the term ‘disabled people’,
33 whilst others prefer ‘people with disabilities’ or ‘people with an impairment’ [1].
34 Respecting difference in terminology used around the world [1], we align with the social
35 model and thus use the term ‘disabled people’ throughout this editorial. Disability refers to
36 people who have long term physical (e.g. spinal cord injury), sensory (e.g. visual
37 impairment), cognitive (e.g. learning difficulties), and/or mental impairments (e.g.
38 depression) which in interaction with various barriers may hinder their full and effective
39 participation in society on an equal basis with others [2].

40 Despite the benefits of physical activity, many disabled people live insufficiently
41 active lifestyles. They are also more likely to be inactive when compared with nondisabled
42 people [2]. Recent UK physical activity guidelines for disabled people recommended doing
43 strength activities on 2 or more days a week and at least 150 min of moderate-intensity
44 aerobic physical activity each week for substantial health gains [2-4]. It was also stressed in
45 the UK guidelines that some physical activity is better than nothing as small amounts bring
46 health benefits and the 150 min message alone can be daunting, especially for disabled
47 adults who are mostly inactive [1-4]. The new World Health Organisation global guidelines
48 for physical activity and disability [5] echoed the UK guidelines, providing support for its
49 recommendations.

50 To maximise the impact of national and global physical activity guidelines, and
51 reduce participation inequalities, inclusive and effective communication is vital [1].
52 Communicating physical activity recommendations and how to reduce sedentary time often
53 includes simple but compelling messages. When it comes to tackling sedentariness,
54 messages like these have and might be used: “Stand up, sit less”, “Sit less, move more”,
55 “Move more. Sit less. Sleep better.”, “Chairs are killer’s”, “Time to take a stand against
56 inactivity”, “Get Britain standing”, “On your Feet Britain”, “Now is the time to get up and
57 get moving!”, “Breaking up with your Chair”, and “Swap sitting for moving” [6, 7].
58 However, such messages *are* ableist.

59

60 **What is ableism?**

61 Our physical environments and social conventions like communication are often
62 designed with a nondisabled person in mind as they are assumed to be the “typical” and
63 “normal” human being. Ableism is a form of prejudice and discrimination in which
64 nondisabled people are viewed as “normal” and superior to disabled people. The cited
65 messages are infused with ableism because they favour certain individuals (e.g., those that
66 can stand or easily avoid sitting), reinforce an ideal standard for mental health, intellect,
67 and health whilst stigmatising, alienating, or excluding others (e.g., wheelchair users, those
68 in chronic pain, or with mental health conditions and intellectual and developmental
69 disabilities that find sitting or lying beneficial for their wellbeing). A message like “Sit less,
70 move more” *is* a form of prejudice and discrimination. If we use such messages we are,
71 even if unintentionally, stigmatizing and harming disabled people.

72 We write this editorial as a call for action. Messages calling individuals to sit less
73 and/or stand more must be dropped and replaced by alternative, more inclusive language,

74 such as “Don’t be still for too long”, “Be active your way”, “Enjoy moving your body
75 more”, “Unplug and play”, or “Remember to move your body often.”

76 Readers might respond to this call for action to drop messages like “Sit less, move
77 more” by insisting that “*I don’t mean to be ableist when I use them. It’s no big deal; it’s*
78 *just language.*” We appreciate that the intended goal of such messages is to reduce
79 sedentary time and promote health, not ableism. However, language acts in the world with
80 an impact on people; it perpetuates taken-for-granted beliefs and values; and it creates,
81 reveals, and reproduces forms of prejudice and discrimination. Language is where people
82 live, and ableist language is not liveable for disabled people. Imagine living in terms that
83 exclude you and assume a lesser status for you. Language paints a picture of our world and
84 the people in it, acting on them. Imagine painting a picture that sends a public health
85 message that excludes an entire group of people, that acts on them by saying consciously or
86 unconsciously - you are not part of our health policy. What does that also suggest to
87 nondisabled people and, given unconscious biases, how might it play out in everyday life?
88 Could it be that disabled people are (unintentionally) considered inferior and not worth
89 caring about?

90

91 **Language matters**

92 If you doubt the capacity of language to oppress and discriminate then consider the
93 damaging impacts of racist, homophobic, ageist, or sexist language in society. It is
94 necessary for language to evolve as society does, such as moving away from racial
95 stereotypes in advertising or re-claiming former homophobic slurs such as ‘queer’ for
96 empowered self-identification. Just as language has adapted in an attempt to stop

97 perpetuating racism, homo/transphobia, and sexism, we must now also change our language
98 to stop perpetuating ableism.

99 Some readers may also or alternatively respond to the call for action to drop
100 messages like “Sit less, move more” by insisting that “*We have used these messages for*
101 *some time now and public health messages need to be consistent. We also cannot change*
102 *messages as we now have a mantra across the physical activity world we are familiar*
103 *with.*” It might be argued that the messages under the spotlight cannot be given up because
104 consistency is important in public health. Should this be the case if consistency means
105 reinforcing and naturalising ableism? If you witnessed someone using terms in messaging
106 that were once widespread in society but now are deemed sexist, racist, classist or promote
107 fatphobia would you accept a defence that their use was justified in order to keep up with
108 historically consistent messages? If the answer is ‘No’ why then would you accept terms in
109 messaging that are infused with ableism? As part of tackling health inequalities, and
110 bringing intersectionality into our work, we must include disability much more in physical
111 activity and sport work, and work against ableism.

112

113 **A call for more inclusive messaging**

114 Physical activity promotion messaging must be more inclusive. As part of our call
115 for action for inclusive messages, we call on others to speak out and challenge ableist
116 messages like “Stand up/Sit less and move more”. Let the messenger gently know that their
117 messages are ableist, even if unintentionally so. Describe the reasons why and offer suitable
118 alternatives, such as “Move more”. We also call on organisations, research groups,

119 individuals and public health agencies to change their messages if they promote ableism.
120 We recommend they work with disabled people to co-produce public health messaging.
121 This process can make a big difference.

122

123 Signed and endorsed by:

124 Association for Applied Sport Psychology, British Association of Sport and Exercise
125 Sciences, British Psychological Society Division of Sport and Exercise Psychology, The
126 Disabled Colleagues Network from Bristol City Council, Disability Positive, Disability
127 North, Disability Rights UK, European Disability Golf Association, European Federation
128 of Adapted Physical Activity, European Network for Young Specialists in Sport
129 Psychology, International Federation of Adapted Physical Activity, International Society of
130 Qualitative Research in Sport and Exercise, International Society of Sport Psychology,
131 Mixed Ability Sport, North American Federation of Adapted Physical Activity, North
132 American Society for the Psychology of Physical Activity and Sport, North American
133 Society for the Sociology of Sport, Para Dance UK, Sense, The Canadian Disability
134 Participation Project, The United Nations Educational, Scientific and Cultural Organization
135 (UNESCO) Chair ‘Transforming the Lives of People with Disabilities, their Families and
136 Communities, Through Physical Education, Sport, Recreation and Fitness’, Welsh
137 Association of ME and CFS Support, Wheels for Wellbeing, and WomenSport
138 International.

139

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