A Critical Examination of Women with Acquired Physical [dis]abilities:

Reclaiming a Sense of Community Belonging Through Physically Active Leisure

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ABSTRACT

Using a feminist social constructivist lens, the purpose of this study was to understand the physically active leisure meanings and experiences of women with acquired physical [dis]abilities. Specifically, it aimed to critically examine how women with acquired physical [dis]abilities negotiate, resist and/or become empowered through physically active leisure within the community context. A grounded theory approach was used and a purposive sample of eight women, between the ages of 27-45, participated in this study. Three major themes emerged that best reflect my interpretation of the participants’ experiences: 1) The Essentiality of Physically Active Leisure to Negotiating Her Changing Health Considerations, 2) Confronting the Stigmatizing Gaze as a Woman with an Acquired Physical [dis]ability, and 3) Building Agency and Sense of Connection in the Community. Moreover, the major themes resulted in the culmination of experiences leading to the core theme: Reclaiming a Sense of Community Belonging Through Physically Active Leisure. This study highlights the opportunity for women with acquired physical [dis]abilities to re-engage with physically active leisure and develop a sense of belonging within both [dis]ability specific and mainstream community spaces.

Key Words: acquired physical disability, community, feminist, physically active leisure, resistance, women
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Chapter One: Introduction

The Personal is Political

Professional interest inspired this study of women’s experiences of gender and [dis]ability within the context of physically active leisure. Within my previous employment as a Therapeutic Recreationist and Practice Leader in a major Canadian spinal cord rehabilitation facility, “community integration” was the ultimate goal of rehabilitation. Unlike other areas of best practice knowledge that I acquired through clinical education and skill development; I had limited understanding about the leisure realities that individuals met in the community following their discharge from rehabilitation. My work with outpatients, individuals who resided in the community, as well as inter-professional team collaboration, revealed troubling challenges that many women living with [dis]ability experienced when they tried to engage in physically active leisure within their local communities.

Literature confirms that women with physical [dis]abilities can encounter difficulties when seeking and accessing quality physically active leisure opportunities (DePauw, 1990, Sherill & Williams, 1996). Many of the women that I worked with shared stories about their rehabilitation experiences including personal successes, challenges and sometimes fears about their post-discharge realities in the community. As I often accompanied individuals on their first community outing during rehabilitation, I observed many difficulties women living with physical [dis]abilities can encounter in everyday leisure experiences such as securing accessible, affordable and reliable transit, acquiring inclusive recreation program information and opportunities, and dealing with stigma or lack of understanding depicted by community
members unfamiliar with the many capabilities embodied by individuals who live with physical [dis]abilities.

Incorporating insights and feedback from the clients I worked with, I problematized that inclusive physically active leisure opportunities are limited within the community (i.e. availability of accessible equipment, recreation or fitness staff who possess knowledge and skills on how to effectively support and include women with physical [dis]abilities as required, recreation or sport opportunities that may allow a woman with a physical [dis]ability to participate with friends or family who do have a [dis]ability). Many inclusive physically active leisure opportunities and resources are segregated either geographically (primarily within the Greater Toronto Area) or within [dis]ability specific programming. My professional sentiments are affirmed through research by Rimmer (2012) who argued that: “fitness facilities are notoriously inaccessible, the professionals who work in them lack training in working with persons with disability, transportation to get to facility is difficult or unavailable, and many people do not have the resources to pay for the membership” (p. 857). Awareness of this inequity and its marginalizing implications deepened my purpose as a professional and a citizen in working towards inclusion and accessibility.

In my professional practice, I did note that some women appeared to be successful in their negotiation and resistance to obstructive social, structural and personal factors in order to regularly participate in physically active leisure. Inclusive physically active leisure opportunities are required for women living with physical [dis]abilities to be active and independent within their communities (Lord & Patterson, 2008). A review of the literature outlined in chapter two of this study shows that,
consistent with my professional inquiry, theoretical understanding of this subject within the field of leisure is strikingly limited. While the sport experiences of women have been well researched (Anderson, 2013; Diongi, 2013; Schmaltz, 2013) there has been limited investigation of other forms of physically active leisure experienced by women with [dis]abilities.

Leisure scholars have extensively studied people with [dis]abilities from a biomedical perspective where [dis]ability is viewed as a deficit from the norm that requires interventional treatment to normalize the [dis]abled body (Barnes, Mercer & Shakespeare, 2010). However, leisure scholars have not advanced the field in this area of study. As such, a critical gap exists in our knowledge about women’s dynamic and complex experiences of gender and [dis]ability that shape their community-based physically active leisure involvement after acquiring a physical [dis]ability. Atchison (2009) contextualized this research gap, by explaining that from the 1980s onward the leisure studies field developed a focus on leisure and social exclusion. However, Atchison (2009) drew attention to the paradox of this discourse that largely excluded people with [dis]abilities from research that focused on socially excluded identities such as race, gender, and class. Moving forward, it is vital to understand the factors and processes that influence whether and how women with acquired physical [dis]abilities engage in community-based physically active leisure contexts and the broader socio-cultural milieu. While leisure research has lagged, wider engagement with critical [dis]ability scholarship can advance this conversation (Aitchison, 2009). Intersecting the two fields of study could enable leisure researchers and practitioners to better understand and serve women living with acquired [dis]abilities while bringing leisure
studies into the [dis]ability studies scholarship (Sylvester, 2014).

Within my professional role, I made anecdotal observations about some of the realities and experiences women with physical [dis]abilities appeared to encounter in relation to physically active leisure; and seek to enhance understanding through this study. Working extensively as a rehabilitation professional, I developed a strong sense of social responsibility to promote ongoing community inclusion for women living with physical [dis]abilities. I believe that exploring the participants’ perspectives will deepen our understanding of how to promote greater inclusion of women with physical [dis]abilities within physically active leisure contexts and the broader community. My positionality as a [dis]ability advocate and professional ally in addressing this research topic is expressed through the following quote: “The trouble is once you see it, you can’t unsee it. And once you’ve seen it, keeping quiet, saying nothing, becomes as political an act as speaking out. There is no innocence. Either way you’re accountable” (Roy, 2001, p. 7).

**Physically Active Leisure**

Physically active leisure is globally regarded as a context that can contribute to individual as well as societal development, connection and well-being (United Nations Convention on the Rights of Persons with Disabilities, 2006). In fact, the World Health Organization encourages all people to engage in regular physical activity to maintain lifelong health and quality of life (Singleton & Darcy, 2013). Physically active leisure has gained prevalence within the past decade of leisure research; numerous studies have identified how physically active leisure (e.g. walking, self-propelling a wheelchair on a trail or gardening) can play an integral role in promoting quality of life.
Research highlights the physical health benefits of physically active leisure over leisure that is less physically active (i.e. Pagano, Barkhoff, Heiby, & Schlicht, 2006; Tremblay, Dahinter, & Kohen, 2003). The essentiality for women with physical [dis]abilities, in particular, to engage in physically active leisure is well evidenced within existent literature that highlights the following benefits: an increase in health and fitness; an increased lifespan; greater mental, social and spiritual well-being; increased self-esteem; socialization and decreased stress (Anderson, Wozencraft, & Bedini, 2008; Kristen, Patrickkon, & Fridland, 2002, 2003; Martin, 2006). Physically active leisure is of serious health importance for many women living with physical impairments as it has been regarded for its protective effects in the maintenance of physical function and prevention of secondary health conditions that could potentially decrease the women’s health and quality of their leisure lifestyle (Blinde & McCallister 1999, Coyle, Santiago, Shank, Ma & Boyd, 2000).

Despite scientifically evidenced need, benefits and importance of physically active leisure for women with physical [dis]abilities, (Henderson & Bedini, 1995; Kasser & Rizzo, 2013; Wilhite & Shank, 2009) this group engages in minimal physical activity (Martin Ginis et. al 2010; Odette et al., 2003). Statistics indicate that the majority of women living with [dis]ability within Canada are either: inactive, minimally active or do not engage in sport and it has been suggested that nearly half of adults with a [dis]ability are inactive (Carroll et al., 2014). Kathleen Martin Ginis (2016) a leading Canadian scholar who has extensively researched physical activity and
physical [dis]ability, recently appealed beyond academia through a newspaper article politicizing the lack of data on physical activity participation among people with [dis]abilities. She argues that in the absence of good data, we cannot develop policy or support our commitments toward the UN’s Convention on the Rights of Persons with Disabilities.

There is insufficient data to academically and practically inform scholars and practitioners about the meanings and experiences of women with physical impairments in physically active leisure. However, the limited available data specific to physical activity may provide some insight and relevance to other experiences of women with physical [dis]abilities within physically active leisure. For example, a study by Martin Ginis et al. (2010) showed women with spinal cord injuries spend minimal leisure time engaged in physical activity. In comparison to other groups within this study, women were identified among the group that experienced the greatest difficulty accessing and engaging in physical activity as reflected in their low levels of participation. Preliminary research by Odette et al (2003) cited the following areas as impacting the participation of women with [dis]abilities in physical activity: program cost (Rimmer et. al., 1999), low energy (Henderson & Bedini, 1995; Rimmer et. al., 1999) stamina, pain (Henderson & Bedini, 1995) time constraints, physical inaccessibility and transportation problems (Johnstone & Millar, 2012; Henderson & Bedini, 1995) and lack of available information on physically active leisure for women with physical [dis]abilities. These studies highlight some areas of challenge experienced by women with [dis]abilities that may relate to their low level of participation in physically active leisure.
However, despite global understanding of the benefits derived from physically active leisure as well as the intent for Canadian parks and recreation services and facilities to “increase inclusion and access for recreation for populations that face constraints to participation” (Canadian Parks and Recreation Association, 2015, p. 5), women living with physical [dis]abilities are underserved and consequently invisible within this realm. For example, a Toronto Parks Forestry and Recreation report (2008) found that only 0.4 percent of community members who identified as having a [dis]ability were registered in city parks and recreation programs. This study is consistent with other research in confirming the limited active leisure experienced by Canadian women with physical impairments (Martin Ginis et al., 2010; Odette et al. 2003) however available data is limited. Odette et. al (2003) explain that “while there is a great deal of interest in women’s health, research on health and well-being of women with [dis]abilities has not increased” (p.125). It is also important to note that existing research focuses on the benefits and outcomes women derive from physical activity and has not provided an understanding of women’s meanings and experiences of physically active leisure.

**Aim of the Study**

Using a feminist social constructivist lens, the purpose of this study is to understand the physically active leisure meanings and experiences of women with acquired physical [dis]abilities. Specifically, it aims to critically examine how women with acquired physical [dis]abilities negotiate, resist and/or become empowered through physically active leisure in the community context. Understanding the perspectives of women with acquired physical [dis]abilities is important to this study as research suggests that women who have lived only with [dis]ability have different
experiences of [dis]ability than women who acquire a disability later in life (Charmaz, 1991; Rohrer, 2005; Sherill, 1993). The term “acquired physical disability” encompasses a broad array of [dis]abilities resulting from trauma or disease (Dunn & Brody, 2008). Adjustment to living with an acquired [dis]ability is an on-going process (Tagaki, 2016). Women who acquire a physical [dis]ability such as a spinal cord injury often have to negotiate many kinds of constraints in daily life and deal with continual adjustment (Lee, Dattilo, Kleiber, & Caldwell, 1996). For example, individuals with acquired physical [dis]abilities may experience psychological conditions such as depression, lower quality of life and isolation (e.g. McKinley & Meade, 2004; Tonack et al., 2008). Additionally, some women experience changes in the way people act toward or interact with them given a clear indication of a difference in perception of the social status of that individual who has a newly acquired [dis]ability (Brittain, 2004). This was evidenced by Hogan (1999) who argued “identity as a social phenomenon becomes apparent as individuals are perceived by themselves and others as different” (p. 80).

However, as argued by Tagaki (2016), “experiences of people with disabilities cannot be simply examined from positive aspects or negative ones; both aspects are required” (p.1). Limited available research such as a study by Ashton-Shaeffer et. al (2001) has shown that physically active leisure (e.g. competitive team sport) has allowed women to “actively reconstruct their subjectivities around notions of disability very soon after their accidents or illnesses, drawing instead upon identities based on being an athlete” (p. 11).

Drawing from feminist social constructivist theory and sensitized by the critical
[dis]ability studies, this thesis frames the construct of [dis]ability in agreement with Wedgewood’s (2011) description of impairment as “the way society ‘disables’ people with impairments through attitudes, policies and built environments that exclude, oppress and/or make it difficult to participate in mainstream society” (p. 101).

Increasingly disability research and academic inquiry such as this, is moving away from the biomedical (deficit based) model toward a feminist perspective that considers the body to be socially constructed (van Amsterdam, Knoppers & Jongmans, 2015).

It is also my intent to use language which is theoretically consistent, inclusive and representative of the participants’ experiences of [dis]ability. I opted to bracket the first part of the word [dis]ability with intent to reduce the stigma that is sometimes associated with it. I noted how some [dis]ability advocates and academics represent the word [dis]ability this way and I liked the way it addresses consideration of the power and oppression that language can hold. Recording the word [dis]ability in this way shifts the focus to the abilities of the participants. However, much debate ensues around [dis]ability terminology, and I am in agreement with Shakespeare (2013) a prominent [dis]ability scholar who argued that “while terminology is important, it is not [as] important as underlying values” (p.19). Critical [dis]ability scholars and activists have developed strong critiques and alternatives to terms that refer to populations against which [dis]ability populations are often compared including able-bodied and normal (Linton, 2006; Shogan, 1998; Thompson, 1997; Withers, 2012). They have demonstrated how these terms can be value-laden, stigmatizing and socially constructed.

This research is significant because it extends existing feminist leisure scholarship
to examine the intersecting constructs of gender and [dis]ability within the emergent study of physically active leisure. Practically, it is my hope that this study can facilitate a greater understanding of how to develop and promote inclusive leisure experiences through effective education, programming, and policies. While this research may offer a contribution to knowledge on a broader, societal level, it is my hope that it also positively impacts the women who participate in my study. By creating a space where women’s unique perspectives and leisure experiences are valued and shared with others, it is hoped that participants will gain an increased understanding of their leisure realities and potentially be empowered in consideration of their personal choices and actions within leisure. This thesis will also promote understanding of how physically active leisure opportunities can become more relevant and enjoyable for women living with [dis]ability.

While I am a passionate ally and [dis]ability advocate, I am limited to an outsider perspective as a researcher and a woman without a physical [dis]ability. It is the women who will share their time and personal accounts as participants who will knowledgeably inform this topic. One of the primary goals of my research agenda is to centralize the perspectives of women too often marginalized and silenced within physically active leisure contexts and their communities. This intent aligns with the long-standing feminist qualitative tradition of women interviewing women in an attempt to illuminate concerns within a larger political context (Ashby, 2011). However, deviant from other theoretical perspectives, a feminist social constructivist approach recognizes that the women who participate within this study can best voice their meanings and experiences and do not require my assistance as a researcher to “give” them a voice. I value Ashby’s (2011) thesis that problematizes the idea of
“voice” in critical qualitative research and employ her suggestion of instead seeing my role as a researcher as standing with my participants and making space for their voices. To do this, Ashby suggests that critical scholars “need to actively participate in the de-centering of professional or medical knowledge in favour of listening deeply to the voices and silences of individuals considered to be disabled” (p. 26).

Finally, while it is the participant experiences I aim to bring forth, I recognize it is not just the women’s experiences that will be brought to light within my study; it is my interpretation of that experience (Kincheloe & McLaren, 2000). Consistent with a feminist social constructivist approach, I will incorporate my voice into the research process and into the final product and presentation of findings in acknowledgment of how my interpretation flows from my personal, cultural and historical background (Creswell, 2014). This also demonstrates reflexive practice, as used within the introduction of this chapter in the description of how my professional experience sparked a personal connection to this thesis topic. Griffiths and Tann (1992) underscore the importance of linking theory and practice arguing that theory is a combination of public (or scientific) theories and personal theories. Personal theories refer to “a practitioner’s implicit, systematic explanation for the situations she or he encounters that guide her or his action” (Greenwood Parr, n.d.) The source of personal theories is a combination of scientific/public knowledge and the practitioners own experience with the environment (Greenwood Parr, n.d.). Recognizing that practice is always value-laden, personal theories gained as a practitioner are of importance in beginning to understand, question, and pose alternatives to these beliefs, and actions resulting from these beliefs (Greenwood Parr, n.d.).
Chapter Two: Theoretical Perspectives and Review of the Literature

This chapter begins by exploring the theoretical perspectives that guide this study and then I explore women’s experiences of leisure involvement related to gender ideology. The next section of this chapter explores the ways [dis]ability may intersect with gender to impact women’s meanings of leisure. The final section of this chapter explores women’s experiences within the context of physically active leisure again considering the intersection of gender and disability. The chapter concludes with a call for research to practice, highlighting the rights of all women to access and benefit from physically active leisure.

Feminist Theory

Feminism, is “the philosophical and theoretical frameworks that embody aspects of equity, empowerment, and social change for women and men” (Henderson, Bialeschki, Shaw & Freysinger, 1996, p.13) and is a well-suited approach to guide and inform this study. The meanings of feminism are historically and contextually varied but may be broadly defined as “fundamentally about transforming patriarchal culture and society” (Snyder-Hall, 2010, p. 256). Collectively valued feminist slogans such as “the personal is political” have evolved into theory as feminist scholars evidence the political nature of everyday life and link these everyday experiences to larger social injustices (Rupp & Taylor, 1999). As feminism is a social, collective and political phenomenon it has brought attention to the existence, injustice and negative impacts of sexism imposed by both women and men (hooks, 2000). Feminism emphasizes “the equal worth and rights of all people and [has a] collective orientation to social justice” (Zucker & Bay-Cheng, 2010, p. 1911).
Social justice from a feminist perspective involves envisioning and creating a society that is outside the bounds of patriarchy (Johnson & Parry, 2015). Patriarchy is a central concept within feminist theory that has been theorized by some scholars as a social system that empowers and privileges men through their superior access to institutional power; their disproportionately higher income and labour force participation as well as greater access to social and cultural resources amongst other privileged arrangements they benefit from (Johnson & Parry, 2015; Hibbins, 2013; Kirkley 2000). Status quo is maintained by men who recognize this privilege as well as by institutions such as schools, churches and the media, that teach patriarchal behaviors and reinforce women’s inferior position (Hartmann, 2010).

Feminist theories provide intellectual tools to examine injustices and construct arguments to support particular demands for change (McCann & Kim, 2010). Feminists perceive gender as a:

Basic organizing principle that profoundly shapes/mediates the concrete conditions of our lives…Through the questions that feminism poses and the absences it locates, feminism argues the centrality of gender in shaping our consciousness, skills, and institutions as well as in the distribution of power and privilege. (Lather 1998, p. 571)

While the above description of patriarchy depicts the hierarchical social relationship that privileges men over women; feminism has also evidenced the varied access and application of power among women due to social constructions that divide women such as race, sexual identity, class and perceived [dis]ability (Hartmann, 2010). This a critical acknowledgment related to my study’s exploration of the physically active
leisure experiences of women with physical [dis]abilities and raises the question of whether or not women with [dis]abilities experience social and personal entitlement to physically active leisure. Entitlement within leisure is defined by Freysinger et. al. (2013) as “the individual’s belief that she/he has a personal right to leisure and can take advantage of leisure opportunities” (p. 90). These scholars argue that a sense of entitlement relates to “self-expression” and “self-esteem” and is “linked to the idea of leisure as a personal right” (p. 90). Henderson et al. (1996) problematize that “women’s leisure is often a reflection of their oppression in patriarchy” (p. 8). This oppression may be seen in the perpetuation of gendered ideologies that may restrict and constrain women’s access and experiences within physically active leisure. However, as previously noted, leisure can also be a site of resistance to gendered oppression.

**Feminism, social constructivism, and leisure research.** Parry and Fullgar (2013) argue that women’s lives have become visible through feminist leisure research (e.g. Bunch, 1985; Wimbush & Talbot, 1988; Henderson et al., 1989; Bialeschki & Henderson, 1986) and also suggest that this approach has acknowledged power imbalances within social structures and cultural spheres, as well as emphasized dignity and choice for women in all life domains including leisure. Additionally, women’s experiences of marginalization and positioning (structurally and discursively) in relation to the politics of identity (class, [dis]ability, race/ethnicity, sexuality, religion) choice and freedom have been approached from different perspectives in feminist leisure research (Parry, 2013). While maintaining the value of a gendered analysis, feminist theories have evolved to recognize that women’s “identities or subjectivities are relational and multiple, enduring but fluid, more important in some contexts but always present” (Freysinger et.
The advancement of leisure research with a gendered focus has highlighted the complexity of this topic and the necessity for expanded research theories and perspectives to effectively address it (Henderson & Gibson, 2013). An edited collection (Freysinger et al., 2013) of works by feminist scholars underscores the importance of leisure in relation to social experiences, contexts and the construction of personal identity. Yet, as argued by Kovac and Trussell (2015) a complex understanding of women’s lives and leisure experiences is presently disadvantaged by research that is contextually limited to areas such as family life and sport.

Expanded understanding and representation of women’s leisure may be gained by using a social constructivist research perspective that positions knowledge to lie within the mind of individuals who construct what they know on the basis of their experiences (Savin-Baden & Major, 2013). This approach suggests:

The process of knowledge construction is an active rather than a passive one. Researchers who adopt this approach believe that research involves an attempt to understand individual construction of knowledge and also believe that it is their role to understand the ways which individuals construct meaning, since knowledge, truth and reality are created rather than constructed. (Savin-Baden & Howell, 2013, p. 29)

Creswell (2014) further explains that “the goal of the research is to rely as much as possible on the participants’ views of the world being studied” (p. 8). Additionally, through the use of general open-ended questions, researchers attempt to gain an understanding of the participants socially and historically subjective meanings
Rather than other qualitative paradigms that begin with a theory, constructivists generate or inductively develop a theory or a pattern of meaning (Creswell, 2014).

In accordance with many other North American feminist leisure researchers who have used a feminist social constructivism perspective (Henderson & Shaw, 2006), I will also use this lens to frame my study. A feminist social constructivist perspective will guide me in questioning:

- Dominant discourses or ideologies through analysis of the ways in which discourses or ideologies such as those associated with femininity, “the family” or sexuality, are socially constructed or reproduced…. Moreover, this approach allows for analysis not only of how these dominant ideologies are reinforced, but also how they are negotiated and reconstructed through individual and collective action (Freysinger et al., 2013, p.73)

As physically active leisure is an emergent area of study, a feminist social constructivist approach can provide insight into women’s subjective meanings within this context. This framework is well suited for the investigation of how women may demonstrate resistance and even gain empowerment amidst binding gendered ideologies that can contribute to the culture and context of physically active leisure.

**The Construction of Gender and Women’s Leisure**

In order to better understand women’s leisure experiences and promote inclusive practice, individuals’ gendered experiences of leisure must be considered. This belief has inspired over 30 years within feminist leisure scholarship dedicated to the study of gender and leisure (Henderson & Gibson, 2013). This analysis has
revealed how gender both relates to meanings within everyday life, as well as leisure
behaviours and activities (Freysinger, Shaw, Henderson, & Bialeschki, 2013; 
Henderson & Shaw, 2006). For instance, ideological imperatives related to the social 
construction of femininity, motherhood, and familism all contribute to the shaping of 
women’s leisure (Henderson, Hodges, & Kivel, 2002).

Additionally, feminist leisure analysis has evidenced how leisure spaces and 
experiences can be sites where unequal and uneven gender relations are reproduced, 
maintained and resisted (Aitchison, 2000; Shaw, 2001). Leisure is not gender neutral as 
seen in consideration of the types of activities into which women and men are 
channeled throughout their lifespan, and the nature of certain types of free time 
activities that function to perpetuate gender stereotypes and gender-based inequities 
(Shaw, 1994).

Leisure can also be constraining when the activities into which women are 
channeled represent a narrow range that society deems appropriate for women and 
girls. For example, sports which emphasize aesthetics and body shape are considered 
more socially acceptable for women and girls, which lead parents to enroll their 
daughters in more “feminine” sports, such as dance and figure skating (Klomsten, 
Skaalvik & Espnes, 2004). Shaw critiques this practice by cautioning that “if leisure 
participation . . . reproduces gender relations and perpetuates and reinforces 
restrictions on women’s lives and choices, leisure cannot be conceptualized simply as 
a beneficial or desirable experience with no adverse consequences” (Shaw, 1994, p. 
14).

The concept of resistance. Recognizing the constructed nature of gender and
the impact of this discourse upon women’s leisure; a re-envisioned socio-cultural reality, as well as women’s individual acts of resistance, are necessary to move beyond the gendered limitations that presently define what it means to be a man or woman within leisure (Freysinger, Shaw, Henderson, & Bialeschki, 2013). The emancipatory potential of leisure is evident when it is conceptualized as “a site through which the politics of gender identity is negotiated in relation to the constructions of difference and normality via markers of sexuality, race, disability, age etc.” (Parry & Fullgar, 2013, p.576).

The concept of resistance used in the analysis of women’s leisure is one which “sees women’s leisure as offering possibilities for resistance. . . [which] arises out of the definition of leisure as a situation of choice, control, and self-determination” (Shaw, 1994, p. 9). The concept of agency also becomes important in the argument for leisure as resistance, where agency allows for the view that “women (and men) are social actors who perceive and interpret social situations and actively determine . . . how they will respond” (Shaw, 1994, p.15). Studies of women’s leisure have indicated that leisure can be an important avenue for resisting gender ideologies, for creating a sense of personal or collective empowerment and even for bringing about positive social change by challenging gendered power relations (Shaw, 2001). While individual negotiations within leisure may not be consciously or intentionally conceived as resistance, Shaw (2001) suggests the possibility that resistance should not be limited to intentional, collective acts with clear, ‘positive’ outcomes.

As previously described, feminist social constructivism positions that women’s leisure can be a site of constraining gender expectations and roles (Henderson & Shaw,
At the same time, the concept of leisure as resistance (Shaw, 2001) offered insight as to how women negotiate access to meaningful leisure. Leisure as resistance highlights the political nature of women’s leisure “specifically on the potential for leisure to enhance individual empowerment and to bring about positive social change” (Shaw, 2001, p.186). For example, this thesis evoked political consideration around the idea that the separation of leisure from work may be impossible for some women suggesting that their time must continually be fought and [re]negotiated. Key concepts within this theory include: “the collective versus the individual nature of resistance; the question of outcomes of resistance; and the issue of intentionality” (Shaw, 2001, p.186).

Conceptualizing women’s resistance within leisure has also allowed researchers to consider the role of leisure in enabling women. For example, leisure can be used to challenge social expectations and the dominant gender ideology by offering opportunities for resistance because of qualities, such as free choice and self-determination (e.g., Shaw, 1994, 2001; Wearing, 1990). Shaw (2001) argued that the idea of resistance is an important concept for understanding leisure in individual lives as well as in society more broadly, and to challenge the structured power relations associated with class, gender, and family. Numerous subsequent studies have used Shaw’s (2001) concept of resistance (e.g., Currie, 2004; Foley, 2005; Gibson, Ashton-Schaeffer, Green, & Autry, 2003/2004; Irving & Giles, 2011; Noad & James, 2003; Parry, Glover, & Shinew, 2005) which indicates the contribution of this theory in broadening feminist leisure scholarship.

**The concept of empowerment.** The idea of resistance through leisure is
closely aligned with the concept of leisure as empowerment (Henderson & Shaw, 2013; Shaw, 2001). The first theoretical pairing of these concepts has been attributed to Shaw and Henderson’s (2005) advancing study of resistance as it contributed to both women’s individual as well as collective empowerment (Henderson & Shaw, 2013). Acts of resistance to imposed gender restrictions can occur, for instance through women and girls’ involvement in sports and can challenge cultural sex-role prescriptions (Shaw, 2001). For instance, “an individual girl’s struggle to be allowed to participate on a boys’ hockey, soccer, or football team may lead to her personal empowerment” which may be seen by other girls who “may adopt the resistant behaviour themselves, or may begin to question and their own and others’ assumptions about the appropriateness of girls’ participation in “boys” sports” (Shaw, 2001, p. 195). As such, individual negotiations and acts of resistance within leisure may influence new discourses and behaviours, which challenge notions of appropriate femininity as analyzed within Shaw’s (1994) theoretical framework of women’s leisure as resistance. Other leisure scholars have also explored women’s resistance and empowerment through leisure in a variety of contexts such as: friendships (Green, 1998, 2010) gardening (Parry, Glover & Shinew, 2005; Raisborough & Bhatti, 2007) as well as travel (Berdychevsky, Gibson & Bell, 2013; Jordan & Aitchison, 2013).

Feminist scholarship has examined women’s experiences of empowerment through participation in forms of leisure not traditionally represented in the literature, such as their involvement in: The Sea Cadet Corps, (Raisborough, 2006), recreational pole dancing (Whitehead & Kurz, 2009), rugby (Ezell, 2009; Murray & Howatt, 2009) nightclub culture (Brooks, 2008; Kovac & Trussell, 2015) as well as roller derby
Key findings from these studies suggest that women continue to encounter sexism within leisure such as stigma from participation in non-traditional forms of leisure versus more conventional forms of leisure associated with passive femininity. However, women’s participation in emergent forms of leisure evidences their ability to resist and transform cultural discourses around feminine identities allowing them to utilize choice and self-monitoring to fashion identities and self-esteem (Green & Singleton, 2006). The way women’s empowerment within leisure is conceptualized is also expanding as seen in the examples of empowerment through women’s ability to exercise consumerist power in recreational pole dancing (Whitehead & Kurtz, 2009) or through altered representations or resistance of gendered stereotypes in roller derby (Parry, 2016). Women engage in “active and conscious practices and performances to both justify their access to leisure and to enable their disengagement from normative demands of femininity” (Raisborough, 2006, p. 242).

Feminist leisure scholars have demonstrated women’s experiences of resistance and empowerment within leisure that challenge and redefine traditionally gendered discourses and may indicate increasing social acceptance and legitimization of women’s expanding leisure identities and opportunities. It is argued that feminism has resulted in women’s greater participation within social structures, and their increased use of public space (Watson, 2000). However, this is not the experience of all women as seen within a study on women rugby players who challenged conventional norms of passive femininity through rough play yet encountered sexist and homophobic stigma from outsiders (Ezzell, 2009). Encouragingly another study on women’s rugby details
how that group of women overcame or rejected the social stigma attached to playing what can be perceived as a “non-feminine” sport with support from their immediate social environment (Murray & Howatt, 2009).

Framing leisure as a site for self-expression and autonomy provides an opportunity for moving beyond societal prescriptions about acceptable behaviour, including gender roles (Shaw, 1994). While earlier feminist leisure research examined reproductions of gendered relations and constraints, the leisure as resistance approach is the reverse process, where structured gender relations can be challenged to affect not only women’s leisure participation and enjoyment, but also might “affect gender equality in a broader sense as well” (Shaw, 1994, p. 17). While this review is specific to women’s experiences of leisure, it should be noted that feminist leisure research is also advancing the study of men’s gendered experiences in leisure, including the critical analysis of men and youth experiencing marginalization within leisure (Henderson & Gibson, 2013; Trussell, 2009; Henderson, 1996; Parry, 2013). Building upon the belief that all lives are enhanced through leisure opportunities, examination and reflection on gender relations empowers individuals to enact personal and social changes that enhance the leisure lives of women and men (Freysinger et al. 2013). Sharing this perspective, Parry (2013) credits fellow leisure scholars (Browne & Bakshi, 2011; Cauldwell & Browne, 2011; Lewis & Johnson, 2011) for advancing our understanding of gendered leisure practice, commenting that “gendered leisure is also being reworked beyond masculine/feminine, heterosexual/homosexual binaries by researchers who explore queer and transgender practices of identity and community formation” (p. 576).
Hence, a feminist theoretical framework can be used to understand the experiences of women with [dis]abilities and calls attention to the pervasiveness of gendered divisions in social life. This perspective also recognizes the relatedness of gender to other forms of domination including age, race, class, disability, and sexuality, and has the potential to critique and transform prevailing social conditions (Hall, 1995). Work that examines leisure of women with [dis]abilities can teach us a great deal about how to provide better leisure experiences for all women (Freysinger et al, 2013).

**The complexity of women’s leisure experiences and personal identities.**

Women from diverse backgrounds are increasingly represented within feminist theory that speaks directly to their lives (hooks, 2000). The question of marginalization and how “women are positioned (structurally and discursively) in terms of the politics of identity (race/ethnicity, religion, sexuality, class, [dis]ability) freedom and choice, has been approached from different perspectives in feminist leisure research” (Parry & Fullgar, 2013, p. 576.) Gaining breadth and depth, the first 25 years of feminist leisure research has been summarized as the evolving study of women’s leisure from “a singular focus on finding the gendered meaning of leisure to a greater recognition of the range and complexities of researching a topic as broad as women or leisure” (Henderson & Gibson, 2013, p.117).

Leisure scholars are increasingly recognizing “the limits of ‘single variable’ analyses and have begun to examine the intersection of race, ethnicity, gender, age, and social class in relation to leisure behavior and related outcomes” (Shinew et al., 2006, p. 405). Future research needs to examine the many sources of stratification which result in a “hierarchy of participation” with young white men with high levels of
education and high incomes having the greatest participation in leisure, while the lowest participation in leisure occurs for elderly minority women with low education levels and low incomes (Jin-Hyung, Scott & Floyd, 2001). Shinew et al. (2006) highlight the need for future research to examine the factors that facilitate and constrain the leisure of various groups as well as how different groups negotiate limited leisure resources.

Feminist leisure scholars responded to this need with theoretically and methodologically varied studies that addressed complexities and multiplicities experienced among women within leisure including for example: women experiencing socio-economic constraint (Forde, Lee, Mills & Frisby, 2015; Trussell & Mair, 2010), women with [dis]abilities (Anderson, Wozencraft & Bedini, 2008; Henderson, 1996), women of diverse cultural and ethnic identities (Arab- Mohaddam, Henderson & Sheikholeslami, 2007; Tirone & Gahagan, 2013; Wiggins, 2011) as well as diverse sexual identities (Trussell, 2017; Waldron, 2016). Expanded insight gleaned from studies such as these has diversified feminist research perspectives in the ongoing investigation of how gender permeates leisure and the broader society (Freysinger et al, 2013).

In summary, feminist leisure analysis has demonstrated that leisure spaces and experiences are sites where unequal and uneven gender relations are reproduced, maintained and resisted (Aitchison, 2000; Shaw, 2001). Contemporary feminist theories simultaneously acknowledge our concrete reality while also imagining possibilities beyond that reality (hooks, 2000). An outward-looking feminist analytic is described by Parry and Fullgar (2013) as “seek[ing] engagement with a variety of
social theories that explore the specificity of gendered politics (black feminism, disability, and girl studies, queer theory, critical psychology, postcolonial and ecofeminism, etc.” p.579). Parry and Fullgar (2013) argue that addressing the subject of gender and leisure requires feminist leisure scholars to “explore the possibilities for action for extending our global reach and creating opportunities for change through collaboration and exchange” (p. 579).

[Dis]ability and Women’s Leisure

Feminist leisure scholarship has promoted theoretical understanding of women’s complex and diverse leisure meanings and experiences (Freysinger, Shaw, Henderson & Bialeschki, 2013; Henderson & Gibson, 2013). However, within this scholarship, a limited number of studies have focused on women and disability (e.g. Anderson, Wozencraft & Bedini, 2008; Henderson & Bedini, 1997 & Ruddell and Shinew, 2006). Aitchison (2009) problematized that the theoretical and philosophical debates within the field of leisure studies have prevented the adoption of a common conceptual understanding of [dis]ability. She argued that this dissonance within our field has, in turn, excluded advancements that have been made around the construct of [dis]ability by the field of critical [dis]ability studies, by individuals living with [dis]ability as well as [dis]ability focused politics.

An analysis of the intersection of gender and [dis]ability offers additional insight into the multiplicity and complexity of women’s leisure experiences. In her landmark study Susan Wendell (1999) appealed for a feminist theory of [dis]ability, correlating the oppression of [dis]abled people with the cultural oppression of the body. Wendell (1999) explained that the consequence of this social construction as the definition of [dis]ability
as “the other” socially symbolized “failure of control, the threat of pain, limitation, dependency, and death” (p.104). Wendell posed the striking consideration that everyone will fit this conceptualization of [dis]ability at some point in their lives, positing the alternative consideration that if people perceived as [dis]abled and their knowledge was entirely integrated into society, everyone's relation to her/his real body would be liberated. The rising influences of feminism and women’s studies have identified women as a marginalized and disadvantaged group much like [dis]ability (Wendell, 2010). This association was similarly problematized by Garland -Thompson (1997):

Cast in opposition to the ideal American self-who is, among other things, male by definition – the freak [i.e., the disabled person] is represented much like a woman: both are owned, managed, silenced and mediated by men; both are socially defined as deviations from the ideal masculine body; both are marginalized in the realm of economic production; both are appropriated for display as spectacles; both are seen as subjugated by the body. (p. 70-71)

Now, two decades after Garland -Thompson (1997) outlined the marginalizing experiences of gender and [dis]ability, investigation of these constructs must be re-examined within our present-day socio-political context.

**Critiquing the dual oppression of gender and [dis]ability.** The intersection of gender and [dis]ability has also been problematized using the term “double-whammy” a reoccurring theme in the investigation of women and girls gendered experiences of oppression in leisure that are suggested to be compounded for those also living with a [dis]ability (Anderson et. al, 2008; Henderson, & Bedini, 1997; Henderson & Bedini, & Hecht, 1994). This idea was also theorized by Ewing (2002)
in her critical commentary of Jans and Stoddard’s (1999) research that suggested that women experienced a double jeopardy. Ewing cautions that this dual oppression may be an over-simplified concept with women’s experience of [dis]ability simply added onto their gendered realities. Ewing argues “women with [dis]abilities are seeking a path that is true to their own perceptions and life experiences. This path overlaps but is somewhat different from either the feminist or the [dis]ability movement” (p. 81). The “double whammy” (a term that is used interchangeably in the literature with double jeopardy) theory was further critiqued by Hardin (2007) who suggests it undermines women’s individual agency by promoting them as passive.

In fact, research suggests that challenges encountered by women with [dis]abilities vary (Rohrer, 2005; Sherrill, 1993). For example, women who have lived only with [dis]ability have different experiences of [dis]ability than women who acquire a disability later in life (Charmaz, 1991). Additionally, the age of onset and visibility of impairment have been shown to influence the degree to which women experience gender in relation to [dis]ability (Harrison, Umberson, Lin & Cheng, 2010). Loja, Costa, Hughes, and Menezes (2013) indicated that “identity is an embodied construction and is influenced by subjective bodily experience as well as social and intercorporeal encounters” (p. 200). This study also cited gender, nature of impairment and ideological perspective as among a host of factors that shape and modify identity. Moreover, many people are prepared to challenge ableism by adopting or redefining [dis]ability as a positive identity (Loja et al., 2013). Women’s empowered identities in relation to their perceived [dis]abilities and physically active leisure involvement will be discussed later in this chapter.
The intersection of [dis]ability and gender within leisure studies research.

Much like the way the study of gender in leisure has moved beyond representation of women as a homogenous group, the need for empirical representation of the diverse leisure experiences and meaning held by women with [dis]abilities requires ongoing attention as urged by Wickman (2007). In her related thesis ‘disabled by definition’, Aitchison (2009) calls for a reflexive critique of the role of academic discourse in “reproducing dominant, and often exclusive, definitions of leisure so that exclusive discourses and definitions can be challenged in relation to disability as they have been in relation to social class, gender and ‘race’ within leisure studies” (p. 384).

Aitchison effectively outlines the need for much greater dialogue between the fields of leisure studies and [dis]ability studies in order to produce literature that gives voice to a group of women under-represented in leisure contexts as well as research. In summation, she challenges leisure scholars to move beyond what she terms as “marking difference through exclusionary identities, places, policies and practices to making a difference through inclusive ways of knowing and ways of being that are shaped by leisure” (p. 377).

Implications of [dis]ability on women’s leisure. Key feminist leisure scholars such as Henderson and Bedini were instrumental in advancing early scholarship that examined the leisure experiences of women with [dis]abilities. Within their 1994 study (Henderson, Bedini, & Hecht) on the meaning of leisure for women with physical [dis]abilities, they found that the women perceived that others had decreased perception of their abilities, prohibiting social acceptance and resulted in their experiences of being treated in a less equal manner than those without [dis]abilities. In-
depth qualitative interviews were conducted with 30 adult women who functioned independently in their communities. Henderson et al. (1994) concluded that despite the limitations that were potentially imposed by a [dis]ability, physically active leisure was seen to be important and had perceived benefits for these women. The main benefits of physically active leisure identified within this study were described as freedom of choice and control within leisure, physical activity required not for fun but rather for therapy, and for maintenance of women’s mental and physical health.

Further to this study, Bedini (2000) examined perceived stigma and community recreation experiences of individuals with [dis]abilities. Her study illustrated the importance of social acceptance in inclusive leisure experiences and the role of leisure context in coping with stigma. While these leisure scholars did not use social construction theory as the theoretical basis of their studies, the focus and conclusions of their studies contribute to the idea of the social construction of [dis]ability negatively impacting participants’ inclusive leisure participation.

While these studies provided knowledge about the implications of social acceptance on the leisure experiences of individuals with [dis]abilities, they lacked investigation about the role of leisure contexts in determining social acceptance or greater social inclusion for this sub-group of women. This is a significant gap as explained by Devine (2004) who suggests leisure contexts “reveal privilege, status, and value [as such,] they offer insight into the social construction of disability” (p. 140).

Feminist [dis]ability theorists have posited the importance of moving beyond studying what constrains women’s leisure, for inclusion does not simply occur by
increasing women’s access to leisure (Darcy, Lock & Taylor, 2017). Leisure studies that address women’s intersecting and multiple meanings and experiences of leisure are of particular importance for seeking to better understand and improve the leisure experiences of the women who are most underserved and arguably at risk from a health and well-being perspective, such as women living with socio-economic constraints as well as women perceived as having a [dis]ability. Despite the social mandate of Canada’s community parks and recreation departments to provide services that promote the health and well-being of all citizens, women who are economically (and often consequentially socially) marginalized have difficulty accessing the benefits from participation in public recreation (Reid, Frisby & Ponic, 2002). Women with perceived [dis]abilities experience extreme levels of marginalization and poverty (Crooks, 2004). Rimmer (2012) argues that many individuals with [dis]abilities lack employment opportunities and do not have sufficient financial resources to enjoy leisure. Disability has been described as both a cause and consequence of poverty (Coakley, 2008). Early feminist leisure researchers effectively established women’s entitlement to leisure yet it is apparent this agenda must be advanced with emphasis on women who are underserved or denied their right to leisure.

The intersecting identities of gender and [dis]ability have prompted ongoing research on women and social inclusion (Henderson & Gibson, 2013). An innovative collection of articles was recently published by leisure scholars Darcy and Singleton (2015) titled ‘Cultural Life, Disability, Inclusion and Citizenship: Moving Beyond Leisure in Isolation’. In her review of this book Whyte (2016) describes the purpose of this compilation as “to engage readers in moving beyond leisure in isolation and
into the everyday lives of all citizens by considering the possibilities of leisure as it means for community inclusion” (p. 247). Whyte (2016) also outlines the value offered in the shared intent of these articles to “learn with and from people with [dis]abilities” (Whyte, 2016, p. 247) as evidenced by the involvement and contributions of individuals with [dis]abilities in two participatory action research projects (i.e. Gilles & Dupuis, 2015; Schleien, Brake, Miller & Walton, 2015). It is possible that the benefits participants gained through their active research involvement may extend well beyond the research process and promote their physically active leisure participation. A growing body of research in public health has suggested that people who are more engaged socially and politically in their communities exhibit higher levels of physically active behaviour and less sedentary behaviour (Payne, Ainsworth & Godbey, 2010).

In summary, I have outlined the importance of considering women’s experience of [dis]ability within leisure. Leisure scholarship requires perspectives of women living with [dis]ability to inform us about the ways gender and [dis]ability can contribute to marginalizing experiences for some women and conversely how other women are able to resist these influences to enjoy meaningful leisure. This will require an advancement of Susan Wendall’s (1989) call almost three decades ago for a full feminist theory of [dis]ability and the essential integration of this approach within leisure scholarship. Indeed, feminist perspectives are used to identify and understand the implications for developing policy, providing services for, and practicing with women with disabilities (Collins & Valentine, 2003). Rather than place the problem within the individual woman with a disability, this study locates
The Role of Physically Active Leisure in Promoting Health & Well-Being

One promising way to address the health and well-being of women living with [dis]ability is through physically active leisure. Physically active leisure has been defined as “activities that are encompassing sport and fitness activities such as swimming, cycling, walking and aerobics” (Lord & Patterson, 2008, p.123) The opportunity to participate in physically active leisure experiences has now been recognized through legislation as a fundamental right for all people with [dis]abilities and a vital component that contributes to their quality of life (Lord & Patterson, 2008). Both the fields of public health and leisure studies “have progressed toward an appreciation of the role of active leisure in enhancing a populations’ “health and well-being” (Ainsworth, Mannell, Behrens, & Caldwell, 2007, p. S24). Physical activity and health connected to leisure is an increasing area of focus within leisure studies that have enabled researchers to move beyond sports as the major connection between girls and women and physical activity (Henderson & Gibson, 2013, Henderson & Hickerson, 2007).

Considerable evidence suggests that physically active leisure can enhance physical health and psychological well-being (Caldwell, 2005; Trost, Owen Bauman, Sallis & Brown, 2002; Warburton, Nicol & Bredin, 2006, Martin Ginnes et al., 2010). Increased participation in physically active leisure (e.g. walking or self-propelling a wheelchair, cycling, gardening) are associated with greater self-rated health and increased vitality (Wendel-Vos, Schuit, Tijhuis & Kromhout, 2004). Similarly, in Canada Iwasaki, Zuzanek, and Mannell (2001) found evidence supporting the positive
influence of physically active leisure on health. They found a direct positive relationship between physically active leisure and physical health and well-being, as well as a direct negative relationship between physically active leisure and mental ill-health. In addition, Iwasaki, Zuzanek, and Mannell’s (2001) study supported an indirect relationship between physically active leisure and stress reduction, with physically active leisure reducing stress and enhancing health and well-being through its positive effects on social support, self-esteem, and sense of mastery.

While these studies illustrate the many benefits individuals can derive from physically active leisure experiences, greater attention is required to understand the meaning and experiences of women with physical [dis]abilities within this context. A previous study by Lord and Patterson (2008) indicated that the main benefits people with [dis]abilities experience through participation in physically active leisure included: “escape from their family or others; involvement in group or structured activities; involvement in casual participation; challenge their abilities and achieve their goals; meet others; entertainment or fun; and to relax” (p.123).

Physically active leisure has also assisted individuals living with [dis]ability to experience: improved self-confidence and quality of life (Allen, 2003); an outlet for stress management, self-management of ones’ health considerations, improved self-esteem and self-efficacy (Schneider & Young, 2010); enhanced interpersonal relationships with peers, family and community members in a variety of environments as well as community inclusion (Datillo, 2002; Devine & Wilhite, 2000); in addition to excitement and discovery that challenged ones’ previous perspectives of their abilities (Taylor & McGruder, 1996).
All these studies suggest that individuals living with [dis]ability benefit from and even experience feelings of empowerment by engaging in physically active leisure within their communities. Lord and Patterson (2008) argue that positive feelings associated with physically active leisure experiences provide individuals with physical [dis]abilities an expanded sense of control over themselves and their lives. These authors explain that “choice and freedom can be enhanced if people can choose from increased opportunities based on their personal interests and abilities” (p.128). This study will build upon the findings from the existing body of research by focusing on women with physical [dis]abilities in recognition of the previously discussed potential for gender and varied experiences of [dis]ability to influence women’s leisure experiences.

**Social exclusion & physically active leisure.** Despite numerous studies that stress the importance of physically active leisure for health and well-being, many people still do not participate in physical activity at sufficient levels. Close to half (48%) of Canadians aged 12 or older, 12.7 million people, were inactive in their leisure time in 2005, meaning that they did the equivalent of less than a half hour of walking per day (Statistics Canada, 2007). This statistic bears little relevance or applicability to Canadian women living with physical [dis]ability who may experience mobility limitations that prohibit walking. Clearly, there is a need for a conceptualization of physically active leisure (applicable to research and practice) that is more inclusive of individuals of varied physical abilities. Entitlement within leisure is defined by Freysinger et. al. (2013) as “the individual’s belief that he/she has a personal right to leisure and can take advantage of leisure opportunities” (p. 90). These
scholars explain that women who are highly immersed in leisure can reflect a sense of entitlement linked to “self-expression” and “self-esteem” (p.90). However, within Canada, it is recognized that not all women and girls feel entitled to physically active leisure (Game On- The Ontario Government’s Sport Plan, 2015).

While many women with physical [dis]abilities value and desire participation in physical activity, a study by Martin Ginis et al. (2010) about women living with spinal cord injuries showed that they spend minimal leisure time engaged in physically active leisure. This study identified women among other cohorts including older adults, people with advanced injuries, and those who use power wheelchairs and gait aids, who were flagged as experiencing the greatest activity limitations. Notably some women, (for example an older adult woman who experiences tetraplegia), may embody several of the classifications evidenced in this study as prohibiting access to physically active leisure.

Social exclusion occurs when women’s physical [dis]abilities are perceived in a way that affects their ability to access, participate in and benefit from physically active leisure. Numerous studies have illustrated the challenging and even prohibitive experiences shared by individuals with [dis]abilities in relation to physically active leisure (Katz. et al, 2009; Jurkowski, Rivera & Hammel, 2009; Almqvist, Stefansson & Granlund, 2006; Yeun & Hanson, 2002). These studies suggest that individuals with [dis]abilities are socially excluded from engaging in physically active leisure due to a multitude of oppressing factors including: inaccessibly priced membership fees, lack of available information, inaccessible or unreliable transportation; physical challenges in relation to the use of assistive mobility devices, lack of support or knowledge that
would support inclusion offered by staff, lack of accessible exercise equipment as well as a general perception that fitness facilities are unfriendly environments for individuals with a [dis]ability.

Leisure researchers continue to study the above findings but have shifted the focus beyond constraints toward what enables healthy living. Henderson and Bialleschki (2005) indicate this effort will be strengthened through trans-disciplinary collaborations in active living research. The intersecting discourses of gender and [dis]ability can also contribute to the social exclusion of many women and girls from physically active leisure contexts. As outlined earlier within this chapter, women and girls’ leisure may be shaped and even limited due to gendered influences and conceptions. Despite a broad research focus on women within the sport domain, women’s experiences of gender and disability in the wider milieu of physically active leisure is tremendously underrepresented in the literature within the field of leisure studies (Blinde & McAllister, 1999). While raising awareness of the social injustice and health disparity associated with this finding, a review of the limited existing literature can be supplemented with studies from other fields of inquiry such as sociology, physical education, sport management and critical disability studies that also inform us about active living.

Another example of the intersection of gender and [dis]ability has been found within adapted sport. Although often regaled for its inclusionary function, critical analysis has exposed women’s exclusionary experiences within adapted sport. Adapted sport (also referred to as [dis]ability sport) has in many ways replicated the gender disparity that lies within traditional sport for “it’s heavily male-dominated with
fewer female than male participants” (Hargreaves 2000, p.193). Hargreaves implicates the effect of dominant images of gender that influence many women with [dis]abilities to “choose not to participate in sport, because, in common with many able-bodied women they are influenced more by commodified anti-athletic stereotypes of femininity” (p.186-187). Women within this study revealed that while they had a strong interest in participating in sport, they resisted it due to feelings of vulnerability and body shame that arose when contemplating how their physical [dis]ability and overall body would be viewed by others and impact their ability to participate. This perceived fear of failure and low sense of self-worth can restrain women (especially young women) with [dis]abilities from becoming involved in sport. The sporting context has been suggested to exacerbate the visibility of the very physical differences that lead to such feelings and perceptions in the first place (Brittain, 2004). Such gender-specific considerations are of great importance for all involved to better understand and support inclusive practice for women of varied physical abilities in physically active leisure contexts.

Additionally, leisure scholars further problematize this topic by seeking to understand the ways power and privilege shape leisure experiences to the advantage of some and the detriment of others who are under-served within physically active leisure contexts (for example, Fox, 2006; Henderson, 2009; Henderson & Shaw 2006; Kivel, Johnson & Scranton, 2009). Relating to the participants of focus within this study, many individuals living with physical [dis]ability have been raised within a culture that has either ignored or ill-supported their athletic and recreation aspirations (Darcy & Singleton, 2015). Individuals with physical disabilities often lack sporting programs
and opportunities within their community and experience stigmatization and prejudices when participating. Recreation environments and physically active leisure facilities are often inaccessible, and inclusive coaching and training opportunities are often not a sporting priority (Ashton Shaeffer et al. 2001; DePauw, 1997; De Paw & Gavron, 2005; Promis, Erevelles, & Matthews, 2001).

In acknowledgment of these wider social influences, there is a need for research to look beyond health promotion toward critical consideration of the multiple influences and factors that women with physical [dis]abilities may experience in relation to physically active leisure. While the aforementioned health benefits are certainly desirable for all, it also important to challenge healthist assumptions and contradictions that contribute to the perpetuation of health as an individual duty—a responsibility to consume the knowledge, technologies, and practices deemed necessary are often necessary for not only presenting a “healthy” self but for “optimizing a future vitality” (Rose, 2007, p. 82). For, conceptions of health and healthiness are often used to justify inequality, we must problematize these dominant beliefs (Weist, Andrews & Giardina, 2015). For example, the World Health Organization promotes health as “a state of complete, physical, mental and social well-being and not merely the absence of disease or infirmity” (Larson, 1999, 126). Yet this definition fails to address individuals varied realities that influence their ability to access health or commit to pursuing a healthy lifestyle. Moralized lifestyle practices (e.g. purchase of a fitness membership) are often linked to healthiness and contrasted with the undesirable “diseased bodies, obese bodies, deviant bodies, and thereby irresponsible bodies—which implicate bodies (and subjectivities) in these moralized practices and performances” (Weist, Andrews &
Giardina, 2015, p. 23). As such, a short-sighted conclusion is often drawn that those who do not embody idealized aesthetics and performances are responsible for their own poor health and are therefore irresponsible citizens (Weist, Andrews & Giardina, 2015, p. 23). It is hoped that this investigation of women’s varied meanings and experiences of physically active leisure will instead invoke greater social responsibility in addressing how to make physically active leisure more inclusive of women living with physical [dis]abilities as they presently under-served and consequently under-represented in this context.

**Women’s resistance & empowerment in physically active leisure.** There has been minimal examination within leisure scholarship of resistance and empowerment in addressing issues of social exclusion of women with physical [dis]abilities. However, we can garner key insights from the limited literature. For example, Blinde and McCallister (1999) found that participants engaged in physically active leisure to prevent further loss of bodily function. Within this study, the authors note that while maintenance of physical function provided motivation to participate, women also noted a sense of empowerment developed through their active leisure pursuits. Several participants spoke about how their physical activity was a freeing experience through which women could challenge their feelings of [dis]ability and acquire newly defined perceptions associated with the strength and capabilities of their bodies.

Another example of women’s resistance through physically active leisure participation was provided through Ashton-Shaeffer, Gibson, Holt and Willming’s (2001) study that investigated the experiences of participating in an elite-level sport
for women with physical [dis]abilities. Women in this study initially experienced reluctance to participate in sport in relation to feelings of oppression and social stigma associated with disability. However, through their sport involvement, participants gained mastery of high level-sport skills, they demonstrated proficiency that contributed to their athletic identity instead of a [dis]abled identity. Women resisted stereotyped expectation related to the idea of [dis]ability and felt both mentally and physically empowered as athletes.

**Research to practice with a social justice lens.** It is clear, too, however, that while the above research shows that some women living with physical [dis]ability are able to resist or transform gendered or ableist discourse in order to experience physically active leisure, many other women remain excluded from this realm. The need for the inclusion of women with physical [dis]abilities within physically active leisure contexts can be viewed from a social justice perspective in establishing basic access to health and well-being opportunities (Tollefsen, 2010). An important mark of social justice is “providing opportunities to historically marginalized groups so they may benefit from things not previously available to them” (Smart 2009, p. 179). However, much theoretical ground must be covered before women with [dis]abilities and the broader community can recognize and experience full social inclusion within physically active leisure. Henderson and Bialeschki (2005) explain that leisure research can assist in the promotion of active living, stating that “physical activity by choice has contributed to a broader understanding of physical activity related to topics such as outdoor recreation, community recreation areas and facilities, time usage, barriers and constraints, and social interdependence” (p. 358).
There is increasing recognition of the need to be more explicit about social justice concerns in our research practices and how they impact individuals and communities involved in our studies. Floyd (2014) appeals that equality fairness and justice should not be desired outcomes from a research project or finding. These should be guiding principles embedded in the design and implementation of our studies (p. 385). Of like sentiment, Shaw (2000) encouraged leisure researchers to consider that relevance means directing our attention outwards towards pressing social needs, issues and concerns—rather than always looking inwards with a narrow focus on leisure. The tremendous personal and social value associated with participation in meaningful physically active leisure broadly transcends the field of leisure studies. In the Western context, resources and social policy may reflect our cultural appreciation for the opportunities physically active leisure produces. While some encouraging data exists on resistance and empowerment experienced by women with [dis]abilities through physically active leisure participation; the question remains if these gains contribute to greater social inclusion.

Referring specifically to sport, it has been suggested that inclusion requires “accessibility in all sport places and spaces, increased funding, supportive policies, appropriate programs, effective disability organizations, and the involvement of people with disabilities in positions of power and influence in sport organizations” (Coakley, 2008, p. 326). These recommendations can extend feminist leisure scholarship in investigating physically active leisure as experienced by women with physical [dis]abilities.
Chapter Three: Research Design and Process

In this chapter, I address the methodology that I used to answer the central research questions. An overview of a constructivist grounded theory research design is presented following a description of research participants and site, data collection and management, and data analysis and representation. Additionally, trustworthiness perspectives and techniques are discussed as well as sensitizing concepts of reciprocity and reflexivity.

Central Research Questions

As outlined in the first chapter, using a feminist social constructivist lens, the purpose of this study is to understand the physically active leisure meanings and experiences of women with acquired physical [dis]abilities. Specifically, it seeks to examine how women with acquired physical [dis]abilities negotiate, resist and/or become empowered through physically active leisure in the community context.

The central research questions for this study were designed through the guiding purpose and theoretical sensitivity to the related literature. The central research questions are as follows:

1. How is physically active leisure in the community perceived by women with acquired physical [dis]abilities to be accessible, inclusive and relevant to their personal realities?

2. How do women with acquired physical [dis]abilities negotiate, resist, and transform gendered and disabling discourses within physically active leisure in the community?
3. How does women’s physically active leisure involvement promote personal empowerment and broader social change related to community engagement?

**Methodology: Constructivist Grounded Theory**

The grounded theory method includes a systematic, inductive, and comparative approach for the purpose of constructing theory (Charmaz, 2006; Charmaz & Henwood, 2008). This method is designed to encourage researchers’ ongoing interaction with their data while remaining constantly involved in the emerging analysis (Bryant & Charmaz, 2007). Data collection and data analysis are produced simultaneously, and each informs and rationalizes the other (Bryant & Charmaz, 2007). The “iterative process of moving back and forth between the emerging data and the emerging analysis make the collected data progressively more focused and the analysis successively more theoretical” (Bryant & Charmaz, 2007, p.1). Grounded theory consists of systematic, yet flexible guidelines for collecting and analyzing qualitative data to construct theories that are essentially grounded in the data themselves (Charmaz, 2006).

Distinguishing between constructivist and objectivist grounded theory (Charmaz, 2000, 2002, 2006) provides a heuristic device for understanding different approaches in grounded theory. Constructivist grounded theory is a newer approach as opposed to the more traditional approaches termed as objectivist or classical grounded theory. What is now conceptualized as the traditional form of grounded theory, originated with Glaser and Strauss’ publication *The Discovery of Grounded Theory* (1967). Objectivist grounded theory (Glaser, 1978, 1992, 1998) is rooted in mid-20th-
century positivism. It explicitly seeks to answer the *why* questions (Holstien & Gubrium, 2008). Objectivist versions of grounded theory “assume a single reality that a passive, neutral observer discovers through value-free inquiry” (Holstien & Gubrium, 2008 p. 401). The primary focus of this approach is on the generation of theory (Savin-Baden, 2013). Charmaz (2000) argues that the classical or objectivist grounded theory perspective views the discovery of categories inherent in data, observed in the external world by a neutral observer, as the driver of theory. She argues that such a position is no longer feasible given the ‘interpretive turn’ in qualitative social science research (Denzin & Lincoln, 1998). Rather she posits a constructivist stance in arguing: “We can view grounded theories as products of emergent processes that occur through interaction. Researchers construct their respective products from the fabric of the interactions, both witnessed and lived” (Charmaz, 2006, p. 178)

Furthering her position, Charmaz (2006) introduced a constructivist orientation to grounded theory methodology, in which researchers and participants construct their own realities. In doing so, the researcher must acknowledge their own interpretations of the phenomenon of study are in themselves constructions. She describes the process as follows:

Constructivist inquiry starts with the experience and asks how members construct it. To the best of their ability, constructivists enter the phenomenon, gain multiple views of it, and locate it in its web of connections and constraints…As such, Constructivism ‘assumes the relativism of multiple social realities, recognizes the mutual creation of knowledge by the viewer and
the viewed, and aims toward interpretive understandings of the subjects’ meanings. (Charmaz, 2000, p. 510)

Constructivist grounded theorists take a reflexive stance toward their research process and explicitly assume an interpretative view (i.e., multiple realities exist) and that any analysis is contextually situated in time, place, culture, and situation (Charmaz, 2006). When grappling with the social construction of gender and [dis]ability, it is informative to have an interpretive view to understand the meaning behind the subjective experiences of physically active leisure. The realities and experiences of women with an acquired physical [dis]ability within community-based physically active leisure contexts may be much different than the realities and experiences within the same contexts of a researcher who does not have an acquired physical [dis]ability.

A constructivist grounded theory research design is well aligned with my feminist constructivist perspective that seeks to critically analyze social inequity and discover new ideas (Charmaz, 2013). Moreover, it aligns with a feminist perspective that locates the positional and relational role of the researcher rather than as objective impartial and removed from the process. Indeed, as Charmaz (2006) suggests “We construct our grounded theories through our past and present involvement and interactions with people, perspectives and research practices” (p.10). As this study has a social justice focus it began with the assumption that women with [dis]abilities have been marginalized and disenfranchised. As such, I followed the recommendation of Levy (2015) to take special care to be mindful to reflexivity and power during the study and disseminate results with advocacy and positionality in mind. For “the goal
of the research is not only to generate a justice-related grounded theory, but also to promote social justice throughout the study” (Levy, 2015, p. 89).

I believe Charmaz’s (2006; 2013) constructivist approach to grounded theory best supported the intent of this study and provided an understanding of how I could construct the data and analysis with the participants. Consistent with my feminist theoretical framework, a constructivist grounded theory approach recognizes that there is no value-free science and draws attention to the importance of understanding the interactive nature of the relationship of the researcher and the participants in knowledge creation. Moreover, I was guided by constructivist grounded theory using Levy’s (2015) social justice theoretical lens. Levy’s (2015) justice-oriented framework begins with the development of research questions and ends with the generation of grounded theories intended to further social justice. This lens “frequently highlights participants’ own words by using in-vivo coding, to generate theories that promote equality, and to advocate for understanding and change” (Levy, 2015, p. 90).

**Participant Recruitment**

Qualitative research focuses on relatively small samples that are purposefully selected to promote in-depth understanding of a phenomenon and to maximize discovery of patterns that emerge from the particular context under study. Purposeful selection strategies allow the researcher to purposefully select participants who will provide thick, information-rich data relevant to the phenomenon being explored (Patton, 2002). I initially used purposive sampling strategies as a starting point to recruit women who were most likely to provide the best information in response to the problem and research questions of this study (Charmaz, 2006; Cresswell, 2007). I also used snowball sampling
(or chain sampling) strategies, to help identify and recruit additional participants. Purposive and snowball sampling strategies were selected as they coincide with grounded theory research design (Charmaz, 2006). It was my intent to recruit 10-12 women, however, after completing two interviews each with eight women, it was apparent that data saturation was reached. Data saturation refers to the process of continually collecting data until the information begins to repeat itself (Meadows & Morse, 2001).

Participant inclusion criteria for my study initially included English speaking adult women who had resided in the community with an acquired physical [dis]ability for 2-5 years, were between the ages of 18 and 45 and lived within a one-hour driving distance from Toronto. This age range was selected to promote a level of homogeneity among participants in recognition of the diversity present among women and their experiences of [dis]ability and physically active leisure within early and middle adulthood. Women older than age 45 may experience increased severity of [dis]ability which is reported to increase in relation to aging (Lord & Patterson, 2008).

When it became evident that my sample was too narrow, I expanded the inclusion criteria to include English speaking adult women who had an acquired physical [dis]ability for 2-10 years, between the ages of 18 and 45 who resided in Canada. Participants selected included two women in their twenties, three women in their thirties and three women in their forties. The women had lived with an acquired physical [dis]ability from three to ten years. All of the participants in this study were Caucasian. The women had varied socio-economic and employment status. Although I initially aimed to recruit women from various locations throughout the Greater Toronto Area, the study included participants who resided in Ontario as well as participants
residing in Saskatchewan. Additional information is provided within participant profiles located at the start of the findings chapter that contextualizes the data for the reader.

Participants for this study were recruited through several methods. I contacted numerous community-based recreation centres, community health centres, libraries, medical offices, adapted sport organizations, [dis]ability organizations and advocacy groups, as well as university accessibility services, to ask if it would be possible to post a recruitment poster in their building/studio (See Appendix A). As it is also the intent of this study to reach women with acquired physical [dis]abilities who may be isolated in the community, I approached a diverse range of community-based sites. I asked administrators of relevant organizations if I could post information about my study on their Facebook pages and websites. I also created a Facebook page for recruitment purposes that included my recruitment poster and requested that all my Facebook contacts “like” and “share” my recruitment page and poster among their network. I shared my recruitment poster via LinkedIn and requested that my contacts forward my recruitment poster among their network. I created a Twitter account and widely shared my recruitment poster with fellow researchers and [dis]ability advocates. Based on feedback from a participant as well as a community recreation practitioner, I created more visually accessible recruitment poster for potential participants or gatekeepers with visual impairments (See Appendix B) which I distributed widely on social media and via email, in addition to or instead of the original recruitment poster (See Appendix A). Finally, I frequently shared my ongoing study recruitment efforts among my friend and family networks and requested that
they share the opportunity to participate in my study with any women who qualified and may be interested.

The target population was also recruited with assistance from community service providers. These included government-based programs as well as community groups focused on the community inclusion and physically active leisure of women with acquired physical [dis]abilities. A gatekeeper recruitment letter and consent form (See Appendix C and D) was sent to several organizations explaining the purpose of the study. Organizations were also provided with a letter of information explaining the study that a representative from each organization was requested to share with potential participants (See Appendix E). I telephoned and emailed gatekeepers within each organization to request an opportunity to meet and share information about my study in hopes of obtaining their recruitment support within their network.

It was not my intent to recruit participants who were all active within their communities. I was also very interested in learning about the experiences of women who were not able to access physically active leisure within their communities after acquiring a physical [dis]ability. However, despite using varied approaches to recruit a diverse sample, I learned (and experienced) through extensive recruitment efforts within this study that women not engaged within their communities lack representation and consequently their physically active leisure realities after acquiring a physical [dis]ability are unknown.

Data Collection and Management

Consistent with the approach of grounded theory, semi-structured interviews
were used as the primary method of data collection in seeking to understand the participants’ perspectives (Birks & Mills, 2011). In-depth or intensive interviews work well in grounded theory because they “are open-ended yet directed, shaped yet emergent, and paced yet unrestricted” (Charmaz, 2006, p.28). I used a semi-structured format and developed a two-part flexible interview guide (see Appendix F & G). Following the advice of Charmaz (2006), I devised a few open-ended questions that allowed me to focus my interview questions and invited detailed discussion. Charmaz (2006) advises that by “creating open-ended, non-judgmental questions, you encourage unanticipated statements and stories to emerge” (p. 26). The interviews in this study were structured enough to generate common information to compare across participants. However, I remained flexible enough with my questions to capture the unique experiences of each participant. I also remained open to the possible need to modify the interview guide as the study progresses (Birk & Mills, 2011). The only change I made was in choosing to use the term physical impairment instead of acquired physical [dis]ability when interviewing two participants who lived with an acquired physical impairment but did not identify themselves as having a [dis]ability.

The first interview guide was titled: Physically Active Leisure Re-engagement (See Appendix F). This interview included questions about the participant’s experiences of acquiring a physical [dis]ability, their physically active leisure involvement before and after acquiring a [dis]ability, as well as challenges, high points, low points and turning points the women encountered in their process of re-engaging in community-based physically active leisure. Other questions related to gendered influences and strategies women used to address challenges related to their
physically active leisure participation. At the end of the first interview, I requested that each participant select a personal artifact to share within the second interview. Specifically, I asked participants to select an artifact or item of personal significance that related to their experience of community-based physically active leisure since acquiring a physical disability (e.g. a photo, video or a piece of recreation equipment). Participants who were interviewed over telephone or Skype sent their artifact via email prior to their second interview. I anticipated this would be beneficial as artifacts can assist the researcher to understand the meaning of, and give shape to, the lived experiences of their participants (Creswell, 1998). An artifact such as a photograph, a painting or a special gift may represent a significant moment from an individual’s past that may assist them to reflect on, clarify and provide detail of the experiences to which it gives memory or lived experiences (van Manen, 1997).

As hoped, inclusion of artifacts provided stimulus for discussion and a means for the participants to reflect more vividly about their physically active leisure experiences in the community after acquiring a physical [dis]ability within the second interview guide titled: Informing Social Justice (See Appendix G.). This allowed the women to share a tangible piece of memorabilia that stimulated their memory as they reflected upon their previous experiences. The artifacts assisted me in better understanding the participants’ meanings and experiences. Our discussion of participants personal artifacts was guided by the first five questions of the second interview. However, the artifacts on their own post-interview were not analyzed as an additional form of data. For participants who provided photographs and videos, I ensured their anonymity was preserved by omitting the photographs and videos from
the write-up of my study. Six of the participants provided artifacts (three participants shared videos and three participants shared photos) and their description of the significance of these artifacts is shared in Chapter Four: Findings. The remaining 13 questions had a social justice focus and facilitated strong discussion about critical [dis]ability theory, women’s vision of optimal community-based physically active leisure engagement, the role of [dis]ability-specific physically active leisure opportunities, the physically active leisure and health relationship, advice for researchers and women with newly acquired physical [dis]abilities.

In the pre-interview phase, I communicated with participants over email or telephone to provide information about the study and confirm that the potential participant met the recruitment criteria. I also answered any questions that they had and once I confirmed their interest, I sent a follow-up email containing the participant letter of information (See Appendix E) as well as the consent form (See Appendix D). Upon my request, all participants signed and returned the consent form prior to their interview. A few days prior to the participant’s first interview I emailed her a copy of the First Interview Guide (See Appendix F). Likewise, a few days prior to the participant’s second interview I emailed her a copy of the Second Interview Guide (See Appendix G).

I began the interviews by reintroducing the study to the participants and I provided an explanation of what the study would involve. I reviewed the information letter (see Appendix E) outlining the details of the study and addressed any related questions. I also reviewed the participants’ signed consent form (See Appendix D) and reminded the participants of their right to decline to answer specific questions or end
their participation in the study at any time within the interview process. Participants were advised that interviews would be audio recorded with a digital recorder as recording allowed me to develop a complete and accurate account, which was useful when questions about responses or meanings arose (Savin-Baden, 2013). A recording provided a document that could be reviewed, listened to, or read again and again, particularly when clarification was required of the meaning described by a participant (Savin-Baden, 2013). I additionally took notes prior to and following the interview to record any supplementary information related to the interview process that may add to the interview transcript data. I advised the participants that I would be taking notes to serve as a backup in the event the audio recording was unclear.

I aimed to equalize power relations between myself as a researcher and the participant by sharing some information about myself and interacting in a conversational manner (Davis, 2000; Stone & Priestly, 1996). Providing the participants with a choice of interview location or the opportunity to speak over telephone or Skype is one way that I approached that goal. The research setting is an important research design consideration. Creswell (2003) recommends the use of a natural setting within qualitative research to allow the researcher to gain insight and develop a level of understanding about individuals in their natural environment. In consideration of this, I traveled to five of the participants’ homes to conduct the interviews. In consideration of geographical distance, participant availability and communication preference, two participants were interviewed on the telephone and one participant was interviewed using Skype.

I also employed active listening skills and summarized the participants’
To thank participants for their time, I gave them a $10 Starbucks gift card at the end of the first interview. Following the second interview, I provided the participants with an appreciation and feedback form (See Appendix H) welcoming any questions that may have arisen following her interview. This form indicated that upon study completion, I would provide each participant with a summary of the final results by email. At this time, I also gave participants a list of supportive community resources that they could contact if desired (See Appendix I). In further consideration of confidentiality in this study, the data collected from participants remained locked in my office at all times. Transcribed data was stored on my computer, which was password protected.

All participants but one completed two interviews. For this one participant, in our first interview it appeared she was struggling (i.e. emotionally, financially and socially) in response to acquiring a physical [dis]ability. Upon meeting with her in her home for her second interview we collectively determined that it was not a suitable time to complete an interview as she was in a period of health flux and explained that she was adjusting to a change in medication. We corresponded over email and she expressed that her research participation was valuable. For example, she suggested that she gained more from the interview than I would, explaining that sharing her experiences normalized them and that she identified with the term acquired physical [dis]ability as it felt representative of the process she was experiencing.

Data Analysis and Representation

The following section will describe the data analysis procedures utilized. By focusing on women’s’ meanings and experiences of physically active leisure, I
purposefully sought to represent the perspectives of women with acquired physical 
[dis]abilities. This was done not only by looking at the answers to specific questions 
but also through the analysis of participants’ expressed emotions and feelings. All the 
recorded interviews were transcribed verbatim as soon as possible following each 
interview, so I could supplement the transcripts with noted observations of 
participants’ body language and facial expressions. Non-verbal information (e.g. 
silence and emotional cues, observations made within the home environment) were 
collected in field notes during the interviews and embedded into the transcripts. In 
grounded theory methodology, data collection and analysis are done simultaneously. 
In consideration of this detail, I scheduled interviews so that transcription and analysis 
could take place between each interview (Levy, 2015).

Data analysis began after I finished transcribing the first three interviews. I 
followed the qualitative coding techniques characteristic of the grounded theory 
approach: initial coding, focused coding and axial coding (Charmaz, 2006). According 
to Charmaz (2006) initial coding involves reducing the interview data into small 
segments. To define these data segments, I read the complete interview to obtain a 
sense of the whole (Kavale & Brinkmann, 2009). This step assisted me to begin the 
process of transforming data segments into analytic interpretation. Guided by Charmaz 
(2006), initial coding is the first coding stage that examines differences and similarities 
between events, actions, and interactions. This was done line-by-line where codes 
were grouped together into categories and assigned a name. As a researcher who is not 
a part of the population of this study, I relied on in vivo codes to reduce 
misrepresentation or misinterpretation (Levy, 2015). In vivo codes are adopted by
researchers “directly from the data, such as telling statements they discover in interviews, documents, and the everyday language used in a studied site” (Charmaz, 2006, p. 343).

If a line of data contained two or more important data segments, I re-examined the line word-by-word to ensure important data was not lost. In this phase of coding, I used an inductive approach in congruence with Charmaz (2006) who suggested that having present concepts in mind prior to commencing data analysis may inhibit the researcher from following unique theoretical patterns found in the early analysis. After coding the first three interviews I had approximately one hundred and thirty codes. I used the in-vivo software to further data analysis by grouping and regrouping these codes. Cresswell (2013) summarizes initial coding process to include the following core components: reducing data into small segments, creating code names for those segments, re-arranging codes to form broader themes, and then making comparisons between different segments. I used a method of constant comparison where I compare data with data, interviews with interviews, and reflections with the data. At this time, I met with my supervisor to review initial data analysis. Our meeting was helpful in assisting me to refine my coding process using language that was (or could be) representative of more than one participant’s experiences. Essentially my initial coding was too narrow and limited the emergence of shared participant perspectives and experiences.

Following initial coding, I began the second phase of coding: focused coding which assisted in further refining the concepts. This step produced codes that were more directed, selective and conceptual than those formed in initial coding and this
step was completed iteratively by constantly comparing data with data, an integral component of grounded theory analysis (Corbin & Strauss, 2008). Using the advice of Charmaz (2006), I kept a memo of information throughout analysis to organize conceptual understandings, analytic examinations, and to record thoughts, questions, and relationships between interviews. I continued to use inductive analysis to connect like codes. Simply stated, focused codes were created by grouping codes together that I interpreted to share meaning or closely connect. Charmaz (2006) suggested that focused coding “requires decisions about which initial codes make the most analytic sense to categorize your data incisively and completely” (p. 57). This stage assisted in advancing raw data from a descriptive to a theoretical level (Charmaz, 2006). As recommended by Charmaz (2006), I continued to work back and forth between initial and focused coding. Furthermore, I used both interview transcripts and my personal memos.

At first, establishing categories from my initial codes within focused coding was quite challenging. I experienced a lot of confusion as it appeared that many of the codes could have been placed within numerous categories or could perhaps be categories on their own. I discussed this challenge with my supervisor and obtained clarity on how to proceed with defining emerging categories. After re-examining and re-organizing the initial and focused codes I began the axial coding stage of analysis.

Axial coding was useful for relating categories to subcategories, as it outlined the boundaries of a category and reassembled the data from initial coding to give coherence to the emerging analysis (Charmaz, 2006). Developed by Strauss & Corbin (1988) axial coding is the process of bringing the categories established in
focused coding into a coherent whole. This final phase as guided by Charmaz (2006) also included the process of theoretical coding. Charmaz defines theoretical coding as a “sophisticated level of coding that follows the codes you have selected during focused coding” and identifies “possible relationships between categories you have developed in your focused coding” (p. 63). As the early coding stages separated the data, this process reconnected it into a story advancing the analysis into a theoretical direction. After the core theme was developed I created a diagram (please refer to the findings chapter) to illustrate the relationships among the themes.

My goal was to exhaust coding procedures until categories had reached a point of saturation. According to Kirby and McKenna (1989), theoretical saturation “occurs when added information does not reveal new understanding about relations or abstraction” (p. 138). Yet, as argued by Charmaz (2006) researchers must go beyond claims of saturation to evaluate the quality of grounded theory studies. Following this recommendation, as categories were developed I also considered their quality and trustworthiness.

Memo writing is an essential tool that provides researchers with an ongoing dialogue with themselves about the emerging theory (Charmaz, 2006). During the early stages of this study, the majority of my memos related to initial reactions or reflections of the content shared by my interview participants. Second, memos were written during data analysis and served as a tool to reflect upon what I thought the data were saying and what pieces of the data fit together. Through memoing, I was able to review thoughts throughout the entire data collection and analysis period, that included emerging concepts and ideas as well as to explore hunches (Charmaz, 2006).
The memoing process allowed me to be open about any values, preconceptions, or experiences that I had in relation to my research and it helped me to determine my own values, beliefs, and experiences.

For example, my background as a recreation therapist prompted a variety of internal responses during and upon reflection of the interviews. I thought of similar experiences I had observed of other women with acquired physical [dis]abilities. Additionally, I felt a sense of responsibility to use some of my professional skills and knowledge within the interviews such as sharing resources. I also experienced a sense of responsibility related to my professional limitations or missed opportunities within my previous employment to address the marginalization within community-based physically active leisure the women described. Memoing allowed for the identification of these experiences and reflection of how they could have influenced my data.

Moreover, writing my own memos on themes emerging from the data and reflecting on how codes were being developed into categories advanced my analytical thinking as I began asking theoretical questions of the data and how everything tied together. For example, a memo that was developed after the first conversation touched upon the idea of ‘being in the same boat’ described as shared understanding among women engaging in physically active leisure with other women living with acquired physical [dis]abilities. This memo allowed me to explore this concept further in my conversation with the next participant and moved into the development of the value of [dis]ability specific physically active leisure opportunities. Though initially descriptive, these memos became more conceptual, concrete, and abstract as I learned more about each of the categories. For example, memoing in the open coding stage
reflected the idea that [dis]ability specific physically active leisure opportunities provided women resources and supports to engage in physically active leisure not found elsewhere in their communities. Yet, I remained curious as to why most of the participants preferred participating in [dis]ability specific physically active leisure spaces; and if opportunities for inclusion in mainstream physically active leisure were viewed as desirable or possible by the women.

**Representation of the Findings and Establishing Trustworthiness**

Loftland (1974) suggests that although data collection and analysis strategies are similar across qualitative methods, the way findings are reported is diverse. Miles and Huberman (1984) address the importance of creating a data display and suggest that narrative text has been the most frequent form of display for qualitative data. The results of this study are presented in descriptive, narrative form rather than as a scientific report. Thick descriptions are the vehicle for communicating a holistic picture of the participants’ meanings and experiences. The final product is a construction of the participant’s experiences and the meanings she attaches to them. This provides readers a lens through which they can view the participants’ world (Charmaz, 2014).

Trustworthiness requires the researcher to make decisions about their views of what quality is and how they may ensure it within their research approach (Savin-Baden, 2013). In consideration of the purpose and design of this study, the following three strategies were used to ensure trustworthiness within this study: 1) journaling, 2) peer debriefing, and 3) the use of rich and thick description with verbatim quotes.

Trustworthiness and authenticity were supported by my use of a journal
throughout the research process to record research steps, as well as my insights and reflections related to the study. Within this journal, I jotted any thoughts, questions or and concerns I experienced as the principal investigator. I set aside time after each interview to reflect upon journal my impressions related to overall experience and the data that had just been collected. Journaling allowed me to reflect upon the general research process as well as my own behaviours, successes, and struggles at the research site (Savin-Baden, 2013). Journaling as I was engaged in the research also helped me “to keep an open mind and differentiate what the researcher’s thoughts are versus the ideas, comments, and activities of the participants” (Strebert-Speziale and Carpenter 2007, p. 27).

I actively journaled throughout data analysis and while preparing content for the discussion section. I organized my researcher journal into the following sections: 1) logistical details, 2) critical self-reflection, 3) theorizing, and 4) theoretical emotionality. Furthermore, as illustrated earlier journaling was a valuable tool for researcher reflexivity throughout the study by assisting me to ensure that I considered potential bias and inconsistencies. I discussed my journaling content with my supervisor and that enabled a safe space for different views, opinions, and suggestions to be brought forth.

I also debriefed research developments on a regular basis with my academic supervisor, throughout the research process to confirm suitability. As a novice researcher, the data analysis process required multiple attempts to organize the data in a way that best represented the women’s experiences and stories. These meetings became essential. As interviews progressed we engaged in frequent discussion around themes that emerged throughout the interviews, with a realization of what the
predominant themes meant, which impacted the overall analysis. After the initial analysis, my supervisor provided feedback that required me to go back through participants’ transcripts with a more objective outlook on participants’ experiences. By going through this process, themes and categories were further refined revealing an overarching realization of a core theme of the meanings that participants associated with their physically active leisure experiences after acquiring a physical [dis]ability. By engaging in continual discussions and receiving feedback from my primary supervisor on the initial analysis, it ensured the validity and reliability of the results. Additionally, my supervisor verified accuracy by ensuring findings and interpretations within this study were supported by data (Cresswell, 2014; Savin-Baden, 2013). Peer debriefing also served as a useful way of addressing questions about the qualitative study so that the account resonate with readers other than the researcher (Cresswell, 2014).

Findings are conveyed using rich and thick description with verbatim quotes (Cresswell, 2014). This technique “may transport readers to the setting and give the discussion an element of shared experiences” (Cresswell, 2014, p.202). Furthermore, it was my intent that providing detailed descriptions of the setting or multiple perspectives about a theme would assist in making the results richer and more realistic (Cresswell, 2014). I chose not to condense the women’s descriptive quotes, opting instead to include long detailed quotes to represent the women’s processes of adjusting to living with an acquired physical [dis]ability and re-engaging in community-based physically active leisure.

**Reciprocity and Reflexivity**
I opted to use face-to-face interviews as a research method would facilitate a dynamic reciprocity between the participants and myself (Dupuis, 1999). This reciprocity was highly valuable for building rapport with participants and creating an environment where they felt comfortable sharing their perspectives. My own reciprocal interactions with participants also assisted in verifying my understandings of what the women were expressing. For instance, after a participant shared an experience with me, I asked them questions to ensure that I accurately understood what they have shared (Charmaz, 2006). I was not only seeking to ensure the content of the participants’ experiences but also, and more significantly the significance of the participant's experiences. Indeed, following a key characteristic of qualitative research, I focused on learning the meanings and experiences that participants held about their physically active leisure, rather than the understanding I brought from my own experiences in this context or from my review of previous research (Cresswell, 2009).

Finally, I recognize that the qualitative research I conducted involved interpretive inquiry, when as the researcher, I made interpretations of what I saw, heard, and understood from the participants (Cresswell, 2009). Indeed, as Cresswell (2009) argued these interpretations “cannot be separated from [researchers] own backgrounds, history, contexts, and prior understandings” (p.176). Given that a crucial aim of my study was to explore the perspectives of women living with physical [dis]abilities, it was particularly important for me to be mindful and reflexive about my own position as an individual that does not have a physical [dis]ability as well as a Caucasian woman who experiences many privileges, such as classification within a racial and ethnic majority, being born and raised in a developed country (Canada) and the partnership of a spouse within an
educated upper-middle-class family. I was also aware of my clinical training and employment background as Therapeutic Recreationist who worked with women with acquired physical [dis]abilities within a bio-medical rehabilitation model. I tried to remain as reflexive as possible throughout the research process by documenting my reactions, thoughts, tensions, and questions in the form of personal memos.

Notably, researchers who are attempting to explore the meanings of others’ experiences are challenged to consider their own voice in the final product. According to Charmaz and Mitchell (1996) “voice is the animus of storytelling, the manifestation of an author’s will, intent, and feeling. Animus is not the content of the stories, but the ways the author present themselves within them (p.285). Thus, my voice as a recreation practitioner and [dis]ability ally will be shared through a personal reflection upon each theme revealed within the findings chapter.
Chapter Four: Findings

Before presenting the findings, I will provide an overview of the eight women who participated in this study. A description of the women’s age, household members, the name and origin of her acquired physical [dis]ability, the number of years living with her physical [dis]ability, her physically active leisure involvement prior to living with a physical [dis]ability, as well as her physically active leisure involvement after acquiring a physical [dis]ability, are discussed. Finally, the artifact (an item of personal significance that relates to the participants’ experience of community-based physically active leisure since acquiring a physical disability e.g. a photo, video or a piece of recreation equipment) that the participant chose to share within her second interview is included within each profile. When interpreting the findings, these details may assist the reader to better understand the context of the women’s lived experiences and reflections.

Profiles

Bria (age, 27) acquired a Spinal Cord Injury (C4/C5 tetraplegia) 9 years ago due to a motor vehicle collision. She lives independently with caregiver assistance in the community and emphasized the supportive role of her family especially her Mom. Prior to her spinal cord injury, Bria’s physically active leisure included: competitive cheerleading, dance, hiking, kayaking, and cycling. Currently, Bria’s physically active leisure is comprised of weight training at her university fitness centre as well as exercising at a privately-owned rehabilitation clinic. She uses a standing frame within her home. Bria also is involved in both acting and writing theatre that promotes [dis]ability awareness and community education. The artifact that Bria
shared was a photo of her using the lateral pull-down machine at her university fitness centre. Bria explained that she used the student fitness centre when possible as the fees were included as a part of her tuition. Bria shared that the lateral pull-down machine was one of only two pieces of fitness equipment that was accessible to her. She explained that she has to hire a personal attendant for set-up assistance (i.e., position the bar and put on her Velcro gloves). Bria explained that this exercise (as illustrated in the photo) was empowering and said: “I can feel myself doing all the work”. She noted cardiovascular and core strengthening benefits from this exercise.

Keren (age 32) acquired a Spinal Cord Injury (T9/T10 paraplegia) six years ago due to a motor vehicle collision. She lives with her supportive partner in the community and has developed a strong social network through her adapted sport club. Prior to her spinal cord injury, Keren’s physically active leisure included: hiking and swimming. Currently, Keren’s physically active leisure is comprised of weight training, cardiovascular exercise, and sport-specific competitive throwing exercises. She trains within a sports club for individuals with a physical [dis]ability and competes in the javelin, discus and shotput provincially and nationally. Keren is presently advancing toward her goal of international parasport competition. Following her spinal cord injury, Keren also trialed wheelchair basketball, hand cycling, and wheelchair racing. Keren volunteers within the community as a Parasport Ambassador to provide education and resources about adapted sport. Keren’s artifact was a video that showed her competing within a track and field throwing event. She explained that this video reflected her personal growth and accomplishment as well as her ongoing effort devoted to physical activity since acquiring a physical impairment.
Gabrielle (age 28) began experiencing Seronegative Arthritis three years ago. She lives independently within the community and shares a close connection with her sister. Gabrielle’s parents have struggled to understand and accept her physical [dis]ability. Prior to experiencing Seronegative Arthritis, Gabrielle’s physically active leisure included: contra dance, cycling, weight training, and swimming. Presently, Gabrielle continues to enjoy swimming as well as contra dance which she has adapted through techniques acquired within wheel dance, a new physically active leisure pursuit. Gabrielle’s shared artifact were photos of her first experience trialing wheel dance. She shared that these photos were significant as they represented the joy of her discovering an adapted approach to furthering her dance participation.

Samantha (age 42) began experiencing a visual impairment (eventually diagnosed as Chronic Bilateral Retinal Detachment) five years ago. She lives independently within the community and values her supportive friendships and a recent reconnection with her mom and stepfather. Prior to experiencing a visual impairment, Samantha enjoyed a dynamic city lifestyle that included long walks for commuting or exercise, yoga, dancing with friends and advanced yoga practice. Like the other participants, Samantha is working to re-establish her physically active leisure within her life since acquiring a physical [dis]ability. Today Samantha has employed adaptive techniques to allow her to return to practicing yoga, she is a part of a walking group for individuals living with a visual impairment and is learning to golf. Samantha shared a photo of her bathing suit as her personal artifact. She explained the bathing suit represented her previous enjoyment of swimming. At the time of her interview, Samantha noted her goal of returning to swimming. However, she was uncertain if this would be possible as she had experienced
difficulty attempting to swim due to the disorienting symptoms of her visual impairment in addition to the pain bright sunlight created.

Julia (age 45) acquired a Spinal Cord Injury (tetraplegia) caused by transverse myelitis ten years ago. Previously married, Julia now lives independently with her two, secondary school-aged children within the community. Julia also values the close connection and mutual support she shares with her mom and friends. Prior to her spinal cord injury, Julia was a competitive swimmer and a dedicated distance runner. Julia trialed many approaches to re-establish her physically active leisure involvement within her community after acquiring a physical impairment. Today Julia exercises with the assistance of a personal trainer at a community centre within her neighbourhood. Julia’s ability to engage in physically active leisure is supported by her bi-weekly neurological physiotherapy efforts. Julia provided a video of herself exercising with the assistance of her personal trainer at her local community centre. She explained that this video was significant as it allowed her to observe her own exercise efforts and accomplishments since acquiring a physical [dis]ability.

Alexis (age 39) acquired a spinal cord injury (tetraplegia) as the result of a motor vehicle collision ten years ago. Previously married, Alexis now lives with her two, elementary school-aged children and a live-in caregiver within the community. She also has an older child who lives elsewhere. Prior to acquiring a spinal cord injury, Alexis regularly engaged in cardiovascular exercise and resistance training at a gym nearby her home. After acquiring a spinal cord injury Alexis trialed several approaches in returning to physically active leisure within her community. Today, Alexis regularly engages in physically active leisure, both in her home and in her
community. In the community, she exercises at an accessible gym with the support of her caregiver. At home, Alexis uses an arm ergometer and a motor-assisted leg bike to exercise. Alexis has recently trained to become a peer support provider to other individuals living with spinal cord injury. She is presently awaiting to be partnered with a woman newly experiencing a spinal cord injury. Alexis anticipates the opportunity to accompany women to learn about and trial the accessible community gym that she finds so valuable. Alexis did not provide a personal artifact; however, she stated that if she had the personal artifact it would have been a photo of her exercising at the accessible fitness centre where she is a member. Alexis described the importance of such a photo would have been the depiction of a physically active leisure pursuit that she greatly values.

Hannah (age 42) lives with her supportive partner and their elementary school-aged children within the community. Ten years ago, Hannah began experiencing pain, stiffness and decreased range of motion in her hip. Eventually, Hannah received a diagnosis of Osteoarthritis in her hip and opted for surgical repair to address the symptoms of this condition. While her surgical results were initially helpful, Hannah continues to experience the above-listed symptoms which she describes as increasing in severity. Prior to experiencing a physical impairment, Hannah’s physically active leisure was comprised of running, ballet and group exercise classes. Presently, Hannah has learned to modify her participation in small group exercise classes and enjoys walking and swimming with family and friends. Hannah’s personal artifact was an online video that depicted her being interviewed in a television news segment featuring new forms of exercise. Hannah shared this video as it showed her speaking about her
enjoyment of the trampoline fitness class she attended. In the video, she also mentioned that her surgeon endorsed this form of exercise.

Sophie (age 32) has lived with Ehlers Danlos Syndrome for nine years. She lives in the community with her partner and their two children. Prior to experiencing Ehlers Danlos Syndrome, Sophie’s physically active leisure lifestyle included regular cardiovascular and resistance training, group dance classes, swimming, baseball, and hiking. Consistent with the other women within this study, Sophie has persisted to find physically active leisure that she can engage in while being mindful of some of the considerations (such as avoiding overexertion) of living with Ehlers Danlos Syndrome. With the goal of returning to swimming, Sophie researched and self-advocated in pursuing hydrotherapy that she could participate in within her community. Sophie described that learning how to return to swimming within hydrotherapy was personally significant as swimming is a leisure pursuit she can engage in with her children.

Additionally, whenever possible Sophie walks as a form of exercise. Sophie did not provide a personal artifact.

While commonalities among the women can be noted within the participant profiles, it is also important to highlight the apparent differences among the participants’ personal realities.

That is, all the women had acquired a physical [dis]ability; however, the nature and onset of their [dis]ability varied. Some participants acquired a physical [dis]ability through a traumatic incident such as a motor vehicle accident, while for others their [dis]ability appeared over time, through a change in physical function or health. Health
symptoms and lifestyle considerations that impacted the women’s physically active leisure also ranged (i.e. the ability to exercise independently versus the necessity to hire a personal attendant). Further, within my researcher journal I noted the contrasting pathways and access to support and education (e.g. therapeutic recreation) among women that had experienced physical rehabilitation as opposed to women who navigated physically active leisure on their own after acquiring a physical [dis]ability.

Shared traits such as nationality (i.e. Canadian), race (i.e. Caucasian), gender (i.e. female), living within an urban setting, valuing physically active leisure, experiences of trial and error and resilience unify the women. Yet the women’s interviews and home environments depicted their diversity in areas such as socio-economic status, parenting, employment, social supports, emotional well-being, substance use and addiction, and the presence of a supportive partner.

**Introduction to Themes**

With limited earlier leisure research that has sought to understand the perspectives of women with acquired physical [dis]abilities, the analysis of the participants’ interview data, through my interpretation, provided significant insight about their experiences of community-based physically active leisure after acquiring a physical impairment. The first major theme is “The Essentiality of Physically Active Leisure to Negotiating Her Changing Health Considerations”. After acquiring a physical [dis]ability women initially experienced a sense of loss of their former physically active leisure identities. Yet, as women became increasingly familiar with how to live with their physical [dis]ability, they began to reconceptualize their physically active leisure abilities. However, attempting to re-engage in community-
based physically active leisure resulted in decreased self-confidence for some women, as it was evident that their needs within this context were not adequately addressed by recreation and sports professionals or inclusive program design. This theme demonstrates women’s persistence and self-determination to re-establish physically active leisure involvement in their communities after acquiring a physical [dis]ability. This effortful process allowed women to experience improved physical and mental health and well-being. In recognition of these benefits, women emphasized the necessity to engage in community-based physically active leisure after acquiring a physical [dis]ability.

The second theme, “Confronting the Stigmatizing Gaze as a Woman with an Acquired Physical [dis]ability” highlights ableist and gendered discourses and behaviours women experienced when attempting to participate in physically active leisure within their communities after acquiring a physical [dis]ability. These marginalizing social influences delayed women’s process of re-engaging in physically active leisure after acquiring a physical [dis]ability. Some women expressed challenges associated with the need to advocate for their physically active leisure access and participation within their communities.

“Building Agency and Sense of Connection in the Community” emerged as the third major theme. This theme reveals how women reframed ableist and gendered narratives by resisting and transforming stigmatizing encounters and actively engaging within community-based physically active leisure. It highlights women’s resistance to oppressions that constrained or detracted from their physically active leisure opportunities within their communities after acquiring a physical [dis]ability. By
steadily pursuing their physically active leisure participation amidst gendered and ableist oppressions, women experienced personal accomplishment as well as a sense of belonging in their communities. Re-establishing a sense of community belonging often allowed women to establish meaningful social connections.

Across the three major themes, it became apparent that after acquiring a physical [dis]ability women encountered ableist and gendered attitudes, policies, and built environments that excluded, oppressed, or made it difficult for them to participate in physically active leisure within their communities. Women responded by negotiating or resisting these oppressions by creating their own supportive mechanisms and strategies that facilitated their engagement within mainstream physically active leisure within their communities. Women’s physically active leisure engagement facilitated an increased sense of belonging in their communities. These concepts are discussed within the core theme “Reclaiming Community Belonging Through Physically Active Leisure” at the end of this chapter.

After the core theme was developed I developed the diagram displayed on the next page (please refer to Figure 1) to illustrate the three major themes that best reflect my interpretation of the women’s experiences. The diagram shows the three interconnected and overlapping themes as well as their subthemes. The core theme that emerged from the themes is located at the top of the diagram. The arrow running across the bottom of the diagram represents women’s encounters and responses to ableist and gendered constraints to physically active leisure embedded within all three themes.
Figure 1. Thematic Diagram
Theme #1: The Essentiality of Physically Active Leisure to Negotiating Her Changing Health Considerations

The first major theme “The Essentiality of Physically Active Leisure to negotiating Her Changing Health Considerations” focuses on the women’s experiences after acquiring a physical [dis]ability, as they responded to new health and lifestyle considerations while attempting to re-engage in physically active leisure. The women’s decision to pursue physically active leisure reflected their leisure values and identities developed prior to acquiring a physical [dis]ability, as well as new health-specific goals and shifting identities they established after acquiring a physical [dis]ability. However, as this theme reveals, the women experienced personal challenges in response to ableist discourses that impacted their pursuit of re-establishing physically active leisure within their communities. This theme shows how the women responded to this discourse with varied responses that included struggle, persistence, and self-determination. The women identified the essential role of physically active leisure within this transformative period. They indicated that amidst their experiences of loss, struggle and ongoing adjustment to living with a physical [dis]ability; re-engaging in community-based physically active leisure improved their physical and mental health and well-being. The four sub-themes that emerged are: (i) Reconceptualizing Her Physically Active Leisure Abilities, (ii) Persistence and Self- Determination Through Trial and Error, (iii) For Physical Health Improvement, Maintenance and Survival, and (iv) To Improve Mental Health & Well-Being. At the end of this theme, I share my personal reflections in response to this theme.

Reconceptualizing her physically active leisure. The women described how their physically active leisure initially shifted after acquiring a physical [dis]ability. The
women attributed the decreased relevance of physically active leisure during this period to their necessity to focus on factors of higher priority such as: attempting to understand and manage the symptoms of their physical [dis]ability while also emotionally responding to their altered reality of living with an acquired physical [dis]ability. Symptoms associated with the women’s physical [dis]abilities were unique to each woman, as women within this study experienced a range of acquired physical [dis]abilities that varied in origin, classification, and presentation. Yet, consistent among the women who described symptoms such as pain, blurred or altered vision, decreased mobility, decreased range of motion, stiffness, muscle weakness, among other physical symptoms; was their emphasis on the time, emotion and effort invested in learning how to respond to the symptoms associated with their acquired physical [dis]abilities. The women recalled uncertainty during this period of how they could fit into physically active leisure activities within their community.

The following quotes from Gabrielle and Keren identify their personal experiences of responding to symptoms of their acquired physical [dis]abilities and how symptoms such as pain, decreased energy and strength impacted their ability to engage in physically active leisure. Below Gabrielle describes the sense of disconnection and loss she felt when the flaring symptoms of her auto-immune disorder paired with an inaccessible environment prevented her from attending her contra dance group:

*In terms of like, going to contra when I'm flaring. And yeah, that's pretty much the biggest, hardest thing. And it's hard to like, in that case, I also sort of lost touch with my community because I just, I judge the amount of effort that it would take to get there. It's too much to make it functional for me. And so, I just didn't go.*
And then I didn't see my people from contra dancing for like months. And then, like, it's hard. When I flared, it's kind of very much, my world collapsed.

Keren identified her increased weight gain that resulted from her decreased mobility when she began using a wheelchair, as well as an episode of depression as the greatest challenges that impacted her ability to re-engage in physically active leisure after acquiring a spinal cord injury:

*I think [one of the greatest challenges] would have been trying to get physically fit enough to actually do the sports because I was quite out of shape after my surgeries and being so heavy. I didn't know what my actual limitations were, what was the weight and what was the injury and whatnot... that's been one of the biggest struggles is learning to get to know my body and how it works again.*

Samantha also explained that after acquiring a visual impairment her ability to exercise decreased. She shared her feelings associated with this by stating: “*I feel lumpy and dumpy, the relationship with myself has changed. The relationship with others has changed*.”

Similarly, Julia identified how acquiring tetraplegia due to transverse myelitis impacted her physically active leisure:

*Anytime I am doing something that requires physical stamina, I remember [I have a physical impairment]. But when I am just sitting with my friends talking or on a computer, I do tend to forget. That my body doesn't work the way that it used to.*

As these women struggled to identify physically active leisure that was relevant or accessible to them after acquiring a physical [dis]ability, this community leisure deficit impacted the women’s sense of entitlement to their desired active pursuits. Some women
felt hesitant to request support as they perceived this may inconvenience the instruction within group physically active leisure activities and draw increased attention to themselves. For example, Hannah mentioned that when initially experiencing her hip impairment she sought to avoid “having to take a lot of the instructor’s time away from the rest of the group and having to do a lot of modifications”.

Similarly, Julia drew attention to the struggle she has experienced in accessing the community as well as her friend networks after acquiring a physical [dis]ability:

> A lot of it too is like I mentioned earlier about my own self-confidence and not feeling like I fit in. I don't know if you ever really get over that. Unless maybe you were born with that. I don't know. I'm just hesitant a lot to do things if I'm not up to it. And I think it's hard for people to see you the same way. You're not the same person, you can't do the same things. I see my friends, you know, that are out running still and doing half marathons and I mean, their lives continue.

Julia explains that since acquiring tetraplegia her ability to engage in physically active leisure has become more challenging in the following ways:

> It’s definitely gotten a lot more difficult because [of the required] self-confidence about going somewhere and feeling that you look different or people are going to see you differently. So, it took me a long time to figure out, other than outside of a physiotherapist office, where I could go that would make me not feel uncomfortable. And I understand it's mostly me that's the problem, not the community.

Within Julia’s quotes as well as Sophie’s quote below, it is apparent that the women felt independently responsible for their own success in re-establishing their physically active
leisure involvement in the community:

If I could do the physical activity that I did previously, I think I would be a lot healthier, but I think my cardiovascular health would be better, I’d be stronger, therefore maybe I wouldn’t get injured as much but as I said, it’s more of a me barrier not as much a community barrier.

All the women described a process of acknowledging the changes imposed by acquiring a physical [dis]ability. While it was clear that it took some time, often years to arrive at this point, all women shared that acknowledging (not necessarily accepting) physical changes that resulted from their acquired physical [dis]ability enabled them to re-conceptualize their physically active leisure abilities and consider new or adapted physically active leisure opportunities available to them. Sophie articulates her experience below:

I think, at one point, I really, truly realized, I think I may still be accepting it ... my body and everything, so I think realizing that more recently that it’d be very unlikely that I can dance again in the way that I did before or you know, do all the things that, like I got to a point of accepting that, and that, finding something else to actually do like swimming... I had to accept that things weren’t going to go back, I think I was kind of holding on to some hope that I guess, I’m always hopeful like you just never know, right? You never know what’s going to happen but...once I accepted that I think I’ll be able to move forward and actually find something more doable or suitable for me.

Julia experienced a similar shift in perspective by discovering her ability to use TRX resistance training as a part of her regular exercise routine supported by a personal trainer:
Sometimes you have to go with your strengths as opposed to trying to fix all of the things that don't work. And the TRX allows me to, you know, I have a lot of stiffness. It allows me to work on my balance and work on my arms and legs all at the same time. What I really like about it is that it does sort of focus on your core muscles which you do need a lot of strength in order to move around and have balance and so on.

Likewise, Alexis arrived at a point when she felt encouraged to recognize her abilities after acquiring tetraplegia:

Then, somehow your little brain starts to think like, "it could be worse". You know? I've got caregivers who take care of people who can't move at all. And they said I was never supposed to move at all, so I've got to go with what I've got. So, it could be worse.

**Persistence and self-determination through trial and error.** After re-conceptualizing their physically active leisure abilities, the women tried physically active leisure opportunities within their communities and evaluated their satisfaction with these experiences. This often resulted in their continued search for physically active leisure that was ideally suited to them.

Many participants described a process of trial and error and determination to continue, as Julia illustrates within this quote:

There was a lot of trial and error. It's sort of, that was like how many years after... five years after my illness occurred and it had taken me a long time to get out into the community and to step outside of the comfortable neurological physiotherapy clinic and go in public and do something... I just modify, as I go
along. I wasn't really excited when I went to [the accessible fitness centre] and I met with the trainer there. We didn't really click. And then I met with another trainer who recommended to me a woman that I had done her aerobics classes years ago. I thought she would be great because her daughter had cerebral palsy. But she basically just moved me around from place to place. And I was like – this is not good.

Julia persisted to find two trainers who could support her fitness goals and collaborated with them in identifying exercises to effectively engage her physical abilities:

My new trainers …. It took them a few times to get to, like to know how to help me with machines. But they were pretty confident in their skills and it hasn't been difficult. I think if it was difficult I would find someone else.

Likewise, Keren shared her process of trial and error to find physically active leisure suited to her after acquiring a physical [dis]ability. She trialed a number of adapted sports and exercise approaches before identifying the right fit with adapted throwing field sports. Below she describes how she learned wheelchair racing was not a good personal fit and persisted to discover her ability and interest in throwing events:

It was a very long process...it was very hard because with wheelchair racing my pain increases...it's good for recreation but at a competitive level it's not really something that I would actually enjoy because it would create more issues in the long run. Whereas throwing is one of those sports that is suited to my specific disability and my needs and I can adapt it...to make it more comfortable for me so I can succeed.

Alexis and Gabrielle also shared their success in addressing their physical considerations, so they could re-engage in physically active leisure. Like Julia and Keren, Alexis also
spoke of going through a trial and error process to find physically active leisure that she could effectively engage in following her acquired physical [dis]ability. Here she describes the difficulty she encountered when she attempted to return to swimming:

*I did for a bit, but I had to have someone there holding me or I drowned. And it’s a lot of work just to get into the pool, and then when I get out, I’m done, I’m just freezing all day, it’s terrible. Because when you come out of the pool and you go in the change room, it’s cold, right? Well then, I got sores, I had sores in my ankles from my shoes. So, I had sores on my ankles for two years. And then I had one in between my toes for another two years. So that’s four years. So, you can’t go swimming with open wounds.*

Alexis persisted in her effort to re-establish physically active leisure, by instead establishing an exercise program using a motor assisted exercise bicycle in her home. In the following quote she describes how she learned to control spasticity associated with her spinal cord injury by using her motor assisted exercise bike:

*The bike it really helps with a lot of things but there are days where I go on the bike and my legs are really spastic, it detects spasms, so it will go the other way, and it, I think a couple days ago they were just spasming... so I just let them go backwards. The next day it was better, but there are just some days where if the bike goes backwards at least it stretches the legs in a different way, right?*

Additionally, Alexis prioritized her community-based leisure enthusiastically describing how much she values her membership at a community-based fitness centre that specializes in exercise for individuals with physical impairments. Yet, even through her trial and error and success in establishing a community exercise program, she still
experiences ‘uneven’ physically active leisure involvement dependent on the availability of a caregiver she employs to support her participation. This requirement of a caregiver means Alexis is reliant on others to engage in physically active leisure within her community. Her re-establishment of physically active leisure in her community did not mean that she has ongoing access to participate. As Alexis explains below, her fitness membership was on hold while her son was on leave from elementary school and her caregiver (who supports her within her exercise program) was on vacation:

   Well, I was going, and then he couldn't go to school (gestures to son who is present in the adjoining room) anymore, and so... and then my caregiver went away on vacation for a month. She is coming back on the 14th, and when she comes back, I'm going back.

Likewise, Gabrielle also persisted through a process of trial and error within her efforts to re-establish physically active leisure. Through her persistent efforts to be active in her community Gabrielle discovered that alternating between use of crutches and her wheelchair allowed her to maximize her ability to participate in her desired physically active leisure pursuits such as swimming, dance and exercising at her university gym:

   They [referring to her crutches and her wheelchair] both use my hands and like if I do use either for a long period of time my hands will get tired and kind of hurt a little bit. But being able to switch between options means that they work differently and how your hands are being used. So, it's kind of like that...I have a very strong optimization drive.

Samantha also demonstrated personal drive in her persistence to participate in physically active leisure while experiencing a visual impairment. Below she summarizes her
experience golfing with her step-father and some of his friends demonstrating her resilience in re-establishing meaningful physically active leisure within her life:

On the Monday, my step-father plays golf, you know, it was my step-father, the neighbour who is sixty-eight, and some other guy who had shoulder fucking surgery... So, I'm out there, and of course, I've got my jeans on, jacket, and a knapsack. And the neighbour is like, "do you want to take your knapsack off", and I'm like, "no. I'm good". I've golfed three times in my life. But I wasn't that bad. So, he kind of walked me through it, he's like, "how is this going to work for you"? I'm like, "I have no idea". Absolutely no clue how my eyesight is going to work [so I can], hit a ball. [Wearing her backpack while golfing] it was just my security. It was like, "this is my outfit. Leave me alone. These are my jeans, these are my sneakers. I don't know how anything in my life works, so give me my stupid backpack"... I was so busy concentrating on the fact that, how the fuck was I going to make this work? How was I going to get emotionally and mentally through all of this? But it was just like, just kind of do it ... Because it’s the only way I'm going to build a life.

Bria reflected that her experience of “figuring things out” and persisting to re-establish her physically active leisure involvement was beneficial in other areas of her life and promoted her self-confidence:

You have to figure things out and adapt things. You're adapting exercise and relationships then you take that into the world of any other avenue...so because the gym was where I spent so much more of my time that probably developed me as a young adult after my injury. I grew more so I gained more confidence I guess
that would have aided to having a voice for myself in university and you know dealing with those close-minded people or inaccessible places and finding ways to make them adaptive.

The women’s persistence and self-determination to re-establish physically active leisure involvement after acquiring a physical [dis]ability is depicted through their enduring process of trial and error. The women’s stories evidence their personal resilience amidst challenging circumstances to reconceptualize their physically active leisure abilities. It became clear that the women’s persistence and self-determination in re-establishing their physically active leisure was key to improving their physical and mental health after acquiring a physical [dis]ability.

**For physical health improvement, maintenance and survival.** It was clear, too, that their persistence may have been driven by the women’s focus on physically active leisure as a means of improving or maintaining their physical health after acquiring a physical [dis]ability. Some women emphasized that physically active leisure is an essential means of promoting their longevity after acquiring a physical [dis]ability. The findings within this sub-theme support Anderson, Wozencraft, and Bedini (2008) who reported the importance of physically active leisure participation in addressing women’s specific health needs after acquiring a physical [dis]ability. This sub-theme highlights the transformative potential and health necessity of physically active leisure for women living with an acquired physical [dis]ability. However, many of the women’s initial physically active leisure efforts after acquiring a physical [dis]ability did not meet their hopes and expectations. Below Alexis and Bria depict their frustration with their physically active leisure outcomes following rehabilitation and returning to the
You work out, workout, workout, and then you get frustrated, because you think you're going to get better, and you go through a period of... I was still doing my bike and everything, but you just go through a period of like, "why am I doing all of this". And then you have to come out on the other side going, "well, I've got to work with what I've got. It could be worse".

Alexis further illustrated how her hope of recovery motivated her to exercise, with mixed success, in the initial years after she experienced a spinal cord injury:

In your head, you're like, "I've been sick before, I've been hurt before, I'll get better". Right? And like, you get them telling you you're not, but you just kind of say, "no, I am, you don't know what you're talking about". And that mindset, like, when I went home, I thought if I worked out more I would get better. And I didn't. I did everything under the sun.

Like Alexis, Bria also relentlessly pursued regular exercise hoping that it may enable her to experience physical health recovery from her spinal cord injury. Bria described that as her spinal cord injury was classified as incomplete she had received education within spinal cord rehabilitation specific to her injury and her ability to experience recovery through ongoing therapy and exercise: “They always tell you that after this many years your injury will plateau and that physically the movement that you have is going to be what you have forever”. Hoping to experience physical functional recovery, Bria aggressively pursued this goal by temporarily relocating to the United States to participate in exercise-based rehabilitation. Upon returning home to Canada, Bria moved to a new community based on a research she had done to locate an accessible
gym that included a standing frame and a Functional Electrical Stimulation (FES) Bicycle
and trainers with expertise. These resources supported Bria in maintaining her physically
active leisure focus.

Bria shared that her hope for health improvement or ultimately recovery through
her exercise program reflected not only her personal motivations but also a sense of
responsibility she felt toward those who supported her following her injury:

> Everyone has put in all this effort and this money and now I'm not doing my
part...like that's how it felt and so like I still will feel like I didn't work hard
enough, that I didn't do enough or try enough; whether or not the confidence was
there, it was just the fact that I have to do it. I don't have a choice to say no
because I want to regain muscle so forever it was like I want to walk...I have to
walk...I have to prove to everybody that you know that has supported me that I
can do it. So not walking you're a failure in a lot of ways but you get past that
boundary so...also it's like choosing to live or not to live.

Health maintenance and engaging her abilities within physically active leisure became
more of a focus for Bria over the 10 years since she acquired a spinal cord injury.

> I gained progress typically and then maintained it but then as it went I still
maintain it...I'm lucky enough for some reason I don't lose like if I'm on a
vacation and I don't use a gym and I come back I'm still doing leg presses.

Bria prioritizes regular resistance training and cardiovascular exercise within her
schedule, sharing her perspective that:
If you're not exercising you're technically wasting away. That's another thing, the reason why I stand or the reason why I FES [Functional Electronic Stimulation] is to fill up my body because of longevity... like we have the statistics of your life is significantly...life expectancy is decreased statistically, and will all this exercise can it help prevent that? You know because exercise is something for the body in hope of that.

Like Bria, Julia also pursued physically active leisure in hopes that it could allow her to maintain her physical health following her spinal cord injury, describing:

Well, I think that the better health you are in or the more often you are physically active, it can only benefit you health-wise. And that's because there are so many secondary illnesses that seem to come with being [dis]abled...I know the days that I don't workout that I just feel so much worse. And I feel like I'm taking a step back and I'm not improving. The days that I don't exercise I feel extra stiff. I have more pain. It's really just a survival technique.

Bria echoes Julia’s perspective that physically active leisure is a survival mechanism for women living with acquired physical [dis]abilities. She advised other women with acquired physical [dis]abilities to also prioritize physically active leisure within their lives, emphasizing:

The exercise is just crucial to your survival. So keep pushing! I would really just tell [women with a newly acquired physical injury] to push themselves even if they don't want to...it's really about survival...livelihood survival as human. A girl that I know just died because of bladder cancer which is one hundred percent attributed to the injury. We all know so many people that just die so young
because of issue related to the injury.

Highlighting a different health motivation, Hannah who experiences Osteoporosis in her hip, identified that a key focus for her was to be involved in a physically active leisure activity that assisted her in maintaining a healthy body weight, explaining:

The thing is that when we’re talking about arthritis, you need to stay light, you need to stay as light as possible because gaining weight only puts more pressure on the joint.

Similarly, Alexis also pursued physically active leisure as a way of achieving a healthy body weight in response to the decreased mobility and weight gain she experienced due to her spinal cord injury, stating:

I was worried about my weight. I also go to a dietician because they [referring to her healthcare providers] said I gained too much weight. It's very hard to lose weight when you're in this situation. Much harder to lose weight, but if you don't move, you're going to gain more.

In addition to maintenance of a healthy body weight, Alexis also noted the restorative health value of physically active leisure by sharing that “It gives you more energy too” and “It helps you sleep better”. Alexis elaborated that she had regularly exercised prior to acquiring a spinal cord injury and valued the opportunity to re-establish exercise within her routine:

Before I got hurt, I worked out on my own, worked out on my own at home. You know, when the kids were smaller, and when they got older I went to the gym...and then sometimes I'd also workout at home, so it just allowed me to continue that because that is just the way I am.
Notably, Alexis reflected that her desire to participate within physically active leisure to maintain her physical health and strength following her spinal cord injury enabled her to experience increased independence. She provided the following example of how this independence promotes her inclusion within her community: *When [I] go grocery shopping, you know, I can pick stuff up now for the most part. I still have trouble, but I can.*

Thus, the above cited physical health outcomes underscore the importance of the women’s persistence and self-determination in re-establishing their community-based physically active leisure involvement after acquiring a physical [dis]ability.

**To improve mental health & well-being.** The participants' health specific hopes that motivated their participation in physically active leisure were not limited to physical health alone. Many participants approached physically active leisure following the onset of their illness or injury as a means of addressing mental health challenges such as depression that they were experiencing related to their new realities of living with a physical impairment. Feelings of depression and isolation from the community and within their relationships were consistent among the women after acquiring a physical [dis]ability. Julia spoke to the importance of women addressing these feelings and recalled how she mentally readied herself to re-establish a regular exercise program in her community:

*I had to* feel motivated enough to say – *I can do this. The alternative is not…* You have to live with it, otherwise, it would be very easy to be depressed and never leave your house. It takes a lot though to force yourself. It would be a lot easier to sit in my house and never leave.
Julia continued,

*And to, I think it's, I always feel like when I get there [referencing the community centre where she exercises] that I'm less likely to feel depressed or lonely. It's hard pushing yourself to get there but it's definitely a positive aspect psychologically.*

Keren was home-based after she was unable to return to her previous career as a Child and Youth Worker when her former employer deemed that she could not perform her job duties using a wheelchair. She identified that this role-loss in addition to other life factors negatively impacted her mental health:

*My mental health was very much suffering. My friends didn't understand me. I lost a lot of friends. I couldn't go back to work, I had no sense of community anymore. I had no family; my mom was very sick at the time she had a stroke at the same time that I went paralyzed. So, I lost everything at once and I didn't have anything left and I didn't know where to turn.*

In response to her mental health struggle and inability to resume employment, Keren used her increased time away from employment to pursue adaptive sport within her community, explaining:

*Unfortunately, I wasn't able to return to my previous employer and no position has come up since my injury that I would be able to perform from my wheelchair. I had to find something to sort of fill in the gaps in the time because my mental health wasn't doing so well. So, I got involved in sports because of that and realized that I was actually good at throwing. It sort of gave me a focus instead of focusing on what abilities I didn't have rather what I could actually do.*
Alexis also experienced isolation and depression after leaving spinal cord rehabilitation and returning to her small rural community. The following quote describes her mental health struggle at that time:

*When I finished outpatient [rehabilitation] in 2009, I had a physiotherapist that came into the house. And then insurance just said, "no more". So, I kind of had a low point there because I was like, "alright, I'm on my own now". So, I did my exercises on my own, and you don't start to see changes, they kind of stay the same. And it kind of makes you mad. And then, you just go into... I don't know... I never knew that you could get that depressed, ever, in my life. Because I told the doctors that I didn't need the antidepressants... And I started hearing voices, and I went right down the tubes. And I had to go to a psychiatrist... I don't know what happened, but I think what happened is that my son went into foster care when he was fifteen, because he has a lot of problems, my older son. And when I had to do that, that’s when I had my nervous breakdown, and that’s when I was really low. And if it wasn't for my caregivers living with me, and their father, he was still around...but if it wasn't for those caregivers...because all I wanted to do was sleep. sleep, sleep...That’s all I did. And I did it for, I think a couple of years, because the voices that I was hearing, I didn't tell anybody, I just thought... But it just got worse and worse and worse.*

This quote depicts the multiple identities held by Alexis as a mother and partner as she experienced isolation and inadequate support within her rural community after acquiring a physical [dis]ability. This reality manifested in what she describes as a prolonged period of mental illness. Alexis was able to address her mental health challenges with the
support of others, primarily her paid caregiver who encouraged her to get out of bed and resume exercise. Alexis reflects that her ability to re-engage in community-based exercise, paired with psychological intervention was transformative in improving her mental health and well-being.

Expanding this sub-theme, Keren argued that the mental (and physical) benefits derived from physically active leisure involvement extend beyond the individual to strengthening the greater society:

> I think it wouldn't even just be beneficial to me like for my health, it's beneficial to the healthcare system itself, the more active that I can keep myself, the less problems that I'm going to have in the future...I'm going to be able to keep my weight down which is going to help...you know all that I think it's one of those circles that it's helping you to help yourself. You know the community helps you help yourself. There's so many benefits to keeping physically active other than just for yourself. Your mental health, I know I was really struggling mentally and even though all I had the training to know exactly what mental health looked like. Because I was living in it I didn't see it. So, it helps me to be able to get out into a different environment and sort of have other people that can point things to you. Sort of like building a person back up after something traumatic happened.

Thus, the first theme revealed women’s internalized focus in relation to physically active leisure after acquiring a physical [dis]ability. The women initially questioned the relevance of physically active leisure as they emotionally processed their new realities living with a physical [dis]ability as well as loss or change to their former identities. After some time, the women began to reconceptualize their leisure abilities and actively sought
physically active leisure opportunities within their communities. This process revealed the limiting role of recreation and sports professionals and programs that inadequately addressed the women’s physically active leisure needs. In response to these marginalizing experiences, some of the women experienced a decreased sense of entitlement to engage in community-based physically active leisure. However, this theme depicts the women’s stories of persistence and self-determination to re-engage within their communities through physically active leisure after acquiring a physical [dis]ability. Their ongoing persistence through trial and error underscored the essential role physically active leisure served in negotiating their changing health considerations. Specifically, the women indicated that their physically active leisure involvement after acquiring a physical [dis]ability improved their physical and mental health and well-being.

**Personal reflection of theme #1.** As a Therapeutic Recreation practitioner who worked for fourteen years with women who fit the demographic of this study, it has been a tremendous opportunity to gain insight from these women. The women’s stories that shaped this theme were unlike what I heard from the women with acquired physical [dis]abilities I had worked with whose identities shifted to “patients” in the rehabilitation environment. A clinical Therapeutic Recreation assessment did include an opportunity for clients to share their previous leisure involvement and I supported individuals in re-establishing their leisure activities or developing new leisure interests and skills after acquiring a [dis]ability. This process was essentially an introduction to what leisure may be possible and meaningful as they prepared to return to living within the community. However due to the short length of stay within physical rehabilitation, and the professional disengagement that occurs between a client and a practitioner at the time of
discharge, I had limited knowledge about the post-discharge realities of the women I worked with in physical rehabilitation.

While I had initially tried to recruit study participants who had lived with an acquired physical [dis]ability for 2-5 years, the decision to expand this timeframe to up to 10 years provided me greater insight to the women’s lived experiences and physically active leisure involvement over an increased period of time. Particularly as the period of loss, decreased self-confidence and isolation from the community spanned several years for some women; I can now see how participation within this study nor the ability to re-engage in physically active leisure would have been possible for them earlier in the timeframe after they acquired a physical [dis]ability.

When it was possible, interviewing the participants within their homes revealed much more than I was previously able to learn about the lived experiences of women with acquired physical [dis]abilities. While it was never my intent to assert power when interviewing participants within the rehabilitation treatment space, I certainly acknowledged a shift that empowered the participants as I entered their homes, fell into their routines, and their schedules. I also worked within the schedules of family members as the participants who were mothers negotiated their ability to devote time to the interview process.

Further, I learned a lot by observing the participants’ home environments and from related discussion with the participants. For example, Samantha described the function served by the black fabric covering her windows was to block the sun as it exacerbated symptoms of her visual impairment. This really assisted my understanding of her daily reality and how the sun impacts her ability to engage in physically active leisure
within her community and participate in valued physically active leisure pursuits. Samantha shared a photo of her bathing suit as her personal artifact and spoke about the difficulty she has had attempting to swim due to the disorienting symptoms of her visual impairment in addition to the pain bright sunlight created. At the time of her interview, Samantha was planning to reattempt swimming in the evening in hopes that the sun would not present as much of a challenge. Observing and noting how the women addressed the complexities and multiple identities of their lives within their homes enhanced my understanding of their daily lives.

**Theme #2: Confronting the Stigmatizing Gaze as a Woman with an Acquired Physical [dis]ability**

The second theme, “Confronting the Stigmatizing Gaze as a Woman with an Acquired Physical [dis]ability” illustrates the women’s experiences confronting ableist and gendered discourses and behaviours within their communities. The women describe how these oppressions impacted their physically active leisure involvement after acquiring a physical [dis]ability. The three sub-themes: (i) Meeting the Ableist Gaze (ii) Gendered Experiences of Community-Based Physically Active Leisure, and (iii) The Burden of Advocating for Her Physically Active Leisure Inclusion in the Community, are discussed in this section. At the end of this theme, I share my personal reflections in response to this theme.

**Meeting the ableist gaze.** Within their experiences of re-establishing physically active leisure involvement in their communities, the women encountered ableist policies and behaviours. According to Saczkowski (2011), ableism is “negotiated in terms of forming an ableist gaze, which views people with disabilities as objects of pity rather than
respect” (p.24). The ableist gaze segregates and oppresses people with disabilities while maintaining the hegemony of an able-bodied norm (Saczkowski, 2011). Exploring ableist encounters the women faced in their communities illustrates the impact of this socially pervasive process on their physically active leisure.

All women have varied abilities and interests within physically active leisure. Yet the women within this study identify how they receive undesirable judgment of their abilities (both over and underestimating their physical ability to engage in physically active leisure) from service providers and other physically active leisure participants without a physical [dis]ability. Gabrielle explains that she stands as well as uses a wheelchair within her contra dance group because it maximizes her ability to participate safely and enjoyably. Yet she shares (with a note of annoyance) that other dance participants have been skeptical of this approach: “The fun thing of dancing with my chair and then standing up. They’re just like... if you can stand ... Yes, I can stand. But that does not mean I can do a full dance”.

Likewise, Bria commented on how her ability to engage in certain types of physically active leisure is misjudged by others insufficient or inaccurate understanding about her physical impairment:

There is so much you go through because when someone looks at me they think that I’m so much more physically capable than I am. People will tell my parents this all the time that I look like I could get up and walk. I get that reaction and then somebody comes up to shake my hand and I reach out my left hand instead of my right hand and it hits them.

Bria explains how this can be problematic within physically active leisure when her level
of physical function and ability to participate in physically active leisure is misjudged by service providers. She explains how service providers have been unable to understand her level of physical impairment and may initially express interest in supporting her physically active leisure participation, but then without adequate knowledge and resources of how to effectively do so, they simply disengage. This leaves Bria to independently figure out her physically active leisure possibilities, essentially marginalizing her physically active involvement within her community:

Because I have such a high injury level, so people will see me and try to recruit me for things without realizing like oh wait...like she can't...I can't probably actually do those things right? Just because my right arm's so stiff and not as mobile as my left like I couldn't get passed to get hand controls to drive and like stuff like that so like when I went to watch my friend's rugby, murderball or wheelchair rugby um the coach was like "yeah!"...likely thinking she's young and strong... and I was like, "No I'll spin around in circles" and so there's been so much adapted sports and games and equipment that's being promoted and so amazing and great but I'm just ...just not strong enough.

Bria shared some of her experiences of the ableist gaze and attributed this societal devaluation of women with physical [dis]abilities as preventing them from participating in physically active leisure:

I know why people don't want to go out right? Because you're on a pedestal or you're or you're stared at, you're gawked at you're pointed at...that confusion it like just triggers curiosity with strangers, right? So that's why it's even more unusual...like someone with a [dis]ability immobile fine, but like a young girl you
know is even stranger so it's even more or like causes even more reasons for pity and different reactions.

Julia who also experiences tetraplegia highlighted the discrimination that women can experience according to their level of functional ability stating: “there's definitely a lot more activities out there for people who are paraplegic”. Julia points out the differing access she has to a fitness centre in the community (as a woman who experiences both upper and lower mobility impairment) versus a woman with a lower extremity impairment only:

So, for me to go there I need to get a ride. And then I need somebody to open the doors and then open the elevator. And then somebody to help me train. So, I mean some people can do it on their own. But a lot of people with [dis]abilities, if they have upper extremity issues, there is certainly a difference. Between somebody that is paraplegic and quadriplegic for sure. And I think you are viewed sometimes differently within the community as well.

Julia continues explaining that she first felt the perceived difference assigned to people according to their level of [dis]ability when she was involved in spinal cord rehabilitation preparing to re-enter the community:

There were differences. It was almost like a hierarchy. Like somebody who is a quadriplegic isn't viewed quite the same as paraplegic, that's how I felt. And the nurses, I think treated people differently too. I remember being referred to as a quad. and I didn't like that.

Sophie has also experienced ableism in her efforts to remain engaged in physically active in her community while living with Ehlers Danlos Syndrome as evidenced in the
following quote:

*When I used to go to the gym a lot and I was already starting to have spine problems, in both the fitness classes [as well as] my dance class I would tell the instructors that there was you know something that I would have to avoid and I found that for the most part, people are not very supportive of that. Yet, they would for someone who would say hurt their ankle. I find that a lot of times, it's not taken seriously, and you're actually made to feel embarrassed that you have a limitation. For example, if I was doing a step [aerobics] class at a gym and I would say, you know I know all these people who are way older than me are going put two risers in their step, and I'm not... you're kind of made to feel like you're not keeping up and why aren't you trying harder? That kind of thing I kind of wish recreation practitioners would take into account; people's various abilities and comfort levels. Fitness centres need to support them because otherwise, it's a turn off if you're not able to keep up or [are perceived as] being lazy, you don't want to go back.*

Also recalling negative interactions with recreation and sport service providers, Keren explained how the opportunity to exercise and train for her sports within a [dis]ability specific sports club offers separation from potentially distressing interactions with individuals in conventional training environments:

*I think when you're disabled and especially I find that when you're in a wheelchair people will automatically try to dumb it down for you. Like they'll think that there's something cognitively wrong with you and I know for myself I need that little bit of separation and away from people that won't trigger any sort*
of negative response from me. Because if somebody talks down to me I know they don't mean any harm, but it can be extremely frustrating to be undermined or to you know feel degraded.

In addition to considering the approach of community recreation and sports practitioners, the women also evaluated accessibility and safety when trialing community-based physically active leisure programming. Julia and Keren shared examples of physically active leisure programming that was safe but did not match their abilities or desired experience. Both women explored exercise options available at a large accessible community fitness centre and determined that it was not as an inclusive environment as it was reputed to be due to programming deficits. Here Keren relates her experience: “A lot of their sports and activities they're not really developed per se where the knowledge isn't there to know how to handle the physical disabilities part. They're really great with cognitive disabilities”. That is, while this fitness centre was safe and mostly accessible, Keren and Julia both felt that the physically active leisure options available to them as women with acquired physical [dis]abilities were limited as most program offerings were targeted at individuals with developmental or cognitive impairments.

Hannah also underscored the importance of communities providing a range of physically active leisure opportunities for women who live with physical impairments. Here, Hannah who is 42 years old describes the difficulty she experienced when trying to find physically active leisure that was age-appropriate and suited to her physical ability: “Something that’s suitable, suitable for your age, you know uh, again, I don’t want to be doing, no offense to the seniors, but I don’t want to be doing older adult
exercise”.

In addition to encountering challenges within the community, Gabrielle explained that her parents have been unable to understand her Seronegative Arthritis and how this health condition affects her daily life. As previously identified Gabrielle discovered wheel dance and thrives within a local community dance group. However, as her family has not been able to effectively support Gabrielle during her health changes she opted to keep her valued wheel dance involvement a secret from her parents and share her involvements and accomplishments there with people in her life who have been supportive such as close friends:

*They're [Gabrielle’s parents] just like- "You're going to get better. Right?" And I'm like, “Uhh, I wish I could say yes. But the answer is probably not. In all reality. This is not going to be a thing to go away”. And I am fine to come to terms with it. They haven't so much... so I haven't told them anything about doing wheelchair ballroom dancing or anything like that. Because I just don't want to deal with that conversation. And like, it’s kind of hard to be like- this is a part of me which I gladly share with my friends and people from my dance community. But with my parents, I just like, kind of avoid that. And it feels somewhat like being in the closet. Because like, I don't tell people about it. I don't tell my family about it.*

**Gendered experiences of community-based physically active leisure.** In addition to ableist discourses, the women also identified varied ways that gendered discourses have shaped their physically active leisure involvement after acquiring a physical [dis]ability. Here Sophie describes how her gendered roles as a mother and
wife influence her physically active leisure involvement as a woman living with a physical [dis]ability:

_I think women, in general, are typically the people especially within a family are the people who are who are more in charge of the household items. So even if they might not be able to do all of the physical tasks, they’re still spending a lot of their time planning... while their husband works towards different things so, I think that in itself it may take a lot of the women’s time. Women are kind of known for not always putting themselves first but instead first taking care of others, so, I think that might contribute. I also think, I know this for myself, they’re also a piece about confidence, even with body image._

It was evident within both Alexis and Julia’s interviews that ableist and gendered ideologies held by their partners contributed to the end of their marriages after they acquired a physical impairment. In addition to their adjustment to living with a physical impairment, with the end of their marriage, Julia and Alexis also became their children’s primary caregiver as well as independently responsible for their family households. This loss of partnership resulted in additional responsibilities for both women and impacted their physically active leisure sense of entitlement. The following quotes demonstrate how both ableist and gendered discourses impacted Alexis’s relationship after she acquired a physical [dis]ability:

_I find a lot of women, you know who get hurt, and they are married... I find that the men, they can't handle it like the women can. Like, if a man gets hurt... they are ten times more likely to stay married than a woman with a guy, because guys just can't...they just can't, they are different, right?_
Referencing her ex-partner, Alexis summarizes:

*He has got a new wife, new life...men are more... I don't know... like, me and my husband, we tried, but... we didn't make a go of it, unfortunately. But, a lot of my... well... and then there are some of my female friends that are in chairs, that were married, and they still are. It just depends, I guess.*

Within another example of gendered discourses prevalent within women’s physically active leisure experiences, Bria explains how gendered relations prevented her from receiving the support she required to be repositioned in her wheelchair:

*I have really bad scoliosis so because of not sitting properly or like the crucial beginning stages of my injury my spine was very crooked. And now I really try to be straight constantly. I was at the gym and a friend of mine is a C2 quadriplegic and his dad is often there. He's very newly injured so he adjusts his son whenever possible. So, when he sees me he's like “Bria you're crooked you're crooked”. So, when my caregiver doesn't properly adjust me or might not know how because I do alternate chairs and such. So, he said, "well if you weren't a woman I'd grab your bum and adjust you right now". And so that really rubbed me the wrong way because I can't shift my bum by myself but because I'm a woman it's inappropriate for you to help me, right? He's an amazing guy but he's just probably old-school, right?*

Keren acknowledged a different gendered physically active leisure consideration for women living with an acquired physical [dis]ability, by sharing her thoughts on the under-representation of women in sport:

*The one thing that I've noticed is that within para-sport there is a lot of males. On*
the other hand, I've been very blessed that on my team we are a female majority which is not very common especially when you go on other sports like sledge hockey and that tend to be in a male dominant area. Right now, I think just participation is down, so there's not actually enough females to group together in specific areas and I haven't really thought about why there is a low female participation within para-sport but I think it goes back to a lot of the barriers of gender roles and expectations and the intimidation of not being sporty or not being physically active and thinking that you can't do something.

Keren continued her gendered analysis, problematizing the low participation rate of women with physical [dis]abilities who engage in physically active leisure. In the following quote, Keren speaks to inequitable promotion and funding that constrain women’s sport involvement and representation as athletes with their community:

> As somebody from a social science field, there's just so many factors that I see: not enough advertising, not enough promotion, not enough engaging females to have the confidence or empowerment to actually do these types of activities, especially with the [dis]ability...The funding for some of them isn't there per se like I may have funding coming my way for certain things but female hockey teams they're not a Paralympic sport. There's not as much development and funding within them, they have to come up with the money themselves. I think cost as well can be a major barrier, travel and I think just the one trend that I find in amongst [dis]abled people...not even specifically female is that they seem oppressed...like there's no place for them.

Alexis also identified how traditional gendered norms and culture affected her self-
image after acquiring tetraplegia and how this struggle impacted her willingness to enter the community explaining:

*There are a lot more men in chairs than there are girls. You'd be surprised how many girls you meet in chairs. I guess for girls, it's more vanity, right, than men. You know, before I knew of [name of accessible clothing store] to buy clothes it was hard, you know, and then they call it quad belly, and on a woman, that's horrible, a man... they don't...they probably care, but society is more accepting of the men, right? ...I think they should have a gym for women only. Because they say there are not as many women than there are men in wheelchairs, which is true. But... I think there are a lot of women in wheelchairs. I think there are lots. But you just don't see them, I don't know...because there are men out there who are in chairs who think that, you know, that they are all that and a bag of chips.*

Alexis reiterated that:

*When you get hurt it changes... I think, the way you look, and to a woman that is not good. And so, you don't really want to go out into the community, you don't... and then working out at home... you've gotta be really motivated to do it or have someone motivating you.*

Gabrielle was highly motivated to remain involved within her contra dance community and described how she resisted gender norms within her dance group by choosing to adapt her involvement enabling her to continue dancing while experiencing a physical impairment. Within this quote Gabrielle identifies the negative feedback she received from some members of her dance group when she adopted a typically male dance role that was more accessible for her living with Seronegative Arthritis:

*My tendency to lead in contra after acquiring my disability is also sort of*
nonstandard. Especially when I'm dancing with my partner who is a male..., it's gotten better over the years, but it is still very much like “you're in the wrong position” It's like, “no I am not. I am dancing lead and Red, he is dancing follow”. Red is totally fine dancing follow with me and we are good partners and I love dancing with him and he loves twirling, so it works out great. But a lot of older people just look at it and they're like, “you were doing this wrong”. And we are like, “No. We are doing this exactly right”. But it's just, we are breaking the standard gender type for this particular dance community.

**The burden of advocating for her physically active leisure inclusion in the community.** It became clear that the women’s visibility was also heightened by the imposed necessity for them to self-advocate for their physically active leisure access or inclusion as women living with a physical [dis]ability in the community. Within the following quote Julia describes the importance of advocating as a woman living with a [dis]ability while also highlighting the struggle that she experienced in this role:

> I didn't think a lot about [dis]ability before I became [dis] abled. And it didn't really occur to me what people had to go through to be involved and productive. And I think, I think that's unfortunately just the norm. Because unless you are out there advocating for it, and there’s a few really amazing Canadian advocates, it's really tough to relate if you don't have a [dis]ability. It's kind of like being a minority. And nobody really understands. Like – what's the problem? Why you complain about not having minority rights, or whatever it is the same thing

Julia expands upon her perspective on the need to advocate for physically active leisure inclusion by describing her discomfort with this socially obligated role. Below Julia
describes the vulnerability and discomfort she experiences when having to self-advocate for her physically active leisure inclusion. The following quote was part of a story Julia shared about an occasion when she had telephoned ahead to inquire about accessible entry into a physically active leisure space within her community:

*Then having to explain. I just tell them I use a walker and I can't do stairs.*

*Because I don't want to get into the whole thing. And then have to hear – “oh I'm so sorry”. That's not what I'm calling about.*

Julia chose to mention that she uses a walker to identify her accessibility requirement anticipating she would be less likely to receive a pitying or intrusive response from the service provider. In fact, Julia primarily uses a power wheelchair and uses a walker for walking short distances only, but purposefully only chose to identify her use of a walker. Earlier, within the second theme, Julia shared her perception that there is a socially imposed hierarchy assigned to women living with a physical [dis]ability as defined by their level of physical function.

Julia’s efforts to advocate for her community inclusion were unsuccessful as the building was inaccessible to her and her only way of entering and exiting would be through a service elevator where she may have to crouch down. Julia explained that while her experience of being denied access to a community space was unsatisfactory to her, she avoided the option to self-advocate further stating: “I'm not going to reach out and say- I can't go but can I be part of it? It's just not my personality. To have people have to accommodate for me”.

Julia further detailed her avoidance to self-advocate within a discussion about the possibility that adding accessible routes to Google Maps could enable women who use
mobility aids to better navigate community-based physically active leisure:

I thought about that and it's tough because, I agree they would be wonderful, but is that Google's responsibility? I mean, it's a socially responsible thing for them to do, but is it their... Because a lot of... I don't know, I feel like there is a lot of pressure for organizations to have to change [as though] it's imposed. And the last thing you want to do is be part of this group of people that imposes your rights on everybody. I don't know. Maybe that's just, that's just my perspective and I'm not a very good advocate.

Like Julia, Hannah expressed the difficulty she experienced when attempting to advocate for her physically active leisure inclusion within her community. Below she describes how initially communicating with exercise instructors to identify that she experienced pain in her hip and request exercise support and modifications was challenging. Ableism, reflective of the medical model approach, is illustrated in the following quote where Hannah describes how her ability to self-advocate within her exercise classes was strengthened when she referenced her medical diagnosis:

I try not to be shy about talking to the people that are running the classes like you know let them know what I’m dealing with and try to find as many different um sort of um different ways of doing some of those activities...I think I feel more comfortable you know, talking to an instructor and letting them know what is happening confidently and having the language to describe what’s going on whereas you know before I didn’t really know what was going on other than I had pain. So, I guess you know a lot of these procedures that I had, have given me the vocabulary.
Expanding upon the sense of burden associated with the need to self-advocate to experience community-based physically active leisure inclusion, Gabrielle detailed the frustration and the energy required for her to engage in this process as a woman living with a physical [dis]ability:

*Being physically active is both great for my physical well-being, and also great for mental stuff. So being able to do stuff has been very helpful in that front. But like, having to deal with the athletic center not understanding why not having a deck wheelchair is an issue. It's really frustrating! So, like, it's like a double-edged sword. So, I would love to do things because they are good for me. But it also brings a lot of frustration because there is so much in trying to be physically active that people just ignore about physical access to physical activity. And, well why don’t we have access to the elevator? Just because I want to come, and dance does not mean that I can actually do stairs... I feel that I should not have to fight to get access to an elevator that is there. But I do. And so, I will. But it also just means that it's like so much effort. And so, I can also see why a lot of people are just like – it's not worth it and don't. Because it is a lot of effort. And like you have to spend so much effort fighting for things in other aspects of your life... Energy is a finite resource. And you generally put your energy first towards the basic things that you need to be able to do things. And then you do it for fun stuff...the fun stuff is really great for you, so it would be great if you could just go and do fun stuff and not have to think about, okay, so is this going to work? How much do I have to adjust to make this work? Because that is unfortunately where it currently stands for the most part.*
In sum, the second theme illustrates the ableist and gendered discourses that delayed and detracted from the women’s process of re-establishing physically active leisure after acquiring a physical [dis]ability. Ableist and gendered attitudes present within physically active service delivery (such as in the women’s interactions with service providers and physically active leisure participants without a physical [dis]ability) constrained the women’s access and meaningful physically active leisure involvement within these spaces. Even prior to physically active leisure engagement, this theme touches on the discomfort and hesitancy women can experience when accessing the community after acquiring a physical [dis]ability. This uncertainty is a response to “the way society ‘disables’ people living with impairments through attitudes, policies, built environment that exclude, oppress and/or make it difficult to participate in mainstream society” (Wedgewood, 2001, p.101). The women also cited difficulty associated with addressing and advocating for their physically active leisure inclusion within their communities after acquiring a physical [dis]ability.

**Personal reflection of theme #2.** As a [dis]ability ally and an individual who has worked with women with acquired physical [dis]abilities, this theme sparked a lot of emotion. It is difficult but absolutely necessary to acknowledge that acquiring a physical [dis]ability can impact the way a woman experiences physically active leisure within her community. As ableist and gendered discourses and behaviours were prevalent among all the women’s physically active leisure experiences after acquiring a physical [dis]ability I wonder what I can do (and encourage other recreation service providers to do) to address this. For example, within the rehabilitation centre I formerly worked at, we were occasionally contacted by a medical supplies vendor when a former
Paralympian was available as a guest speaker for patients. While this was an infrequent opportunity at the vendor’s discretion, I always welcomed the guest speaker and promoted the event among patients and families. After one of the guest speaking events, a nurse approached me and asked “why do you always bring in male athletes? I’m sure it would be good for some of the women to meet a female athlete?” I valued her feedback and did search online to no avail as female Paralympians with sponsorship appeared to live out of province. However, once this imbalance was made known to me I could have done a lot more to advocate for female guest speakers. For example, I could have contacted the adapted sports organizations we partnered with or even the vendor who connected us with the male guest speakers and advocated for female athlete guest speakers with an acquired [dis]ability. This would have made more people aware of the under-representation of women with acquired [dis]abilities to serve as sport mentors and perhaps we could have collectively addressed this problem. I now see how even as a feminist and a [dis]ability ally that I may have contributed to the gendered discourses encountered by women with acquired physical [dis]abilities.

**Theme #3: Building Agency and a Sense of Connection in the Community**

The third major theme, “Building Agency and Sense of Connection in the Community” focuses on the women’s process of building and demonstrating their personal agency through re-engaging with physically active leisure after acquiring a physical [dis]ability. It highlights the women’s resistance to oppressions that constrained or detracted from their physically active leisure opportunities within their communities after acquiring a physical [dis]ability. By relentlessly pursuing their physically active leisure participation amidst gendered and ableist oppressions, the
women were able to experience personal accomplishment, connection, and belonging in their communities. The three sub-themes: (i) To Resist Ableist and Gendered Discourses and Practices (ii) To Experience a Vital Sense of Accomplishment and (iii) To Create a Sense of Connection and Belonging are discussed below. At the end of this theme, I share my personal reflections in response to this theme.

**To resist ableist and gendered discourses and practices.** The women shared many accounts of being aware of the ableist and gendered gaze upon them when they engaged in physically active leisure as a woman with a physical [dis]ability. While the gendered and ableist gaze was ever present (as illustrated in theme #2), the women implemented strategies to overcome or resist these oppressions to participate in their desired physically active leisure pursuits within the community. Within the following quote, Samantha describes how she learned to use strategies to address her visual impairment and support her continued yoga participation by wearing a hat and sunglasses. She described her thought process for overcoming her discomfort of potentially being viewed differently within this physically active leisure space:

*I was sitting in my yoga class, all sweaty and stuff because I do the warm yoga, and I thought... I know people look at me and are like, "why is she in a hat?". And that's fine. And I thought, "well, who fucking knows what anyone does" -- and that was the thing I liked about yoga in the first place when I started practicing it. Like, it doesn't matter what you can do. There are things that I can do just because of my body shape. I have long arms and long legs... one of the awesome things about yoga is you can adapt. And I can do the binds. Because I was sitting there, and it was a full class, and there were like three of us who could do the*
binds, so, there were 25-year-old women who couldn't. And I was thinking, I bet all of these people are staring at me, not even noticing my sunglasses and my hat going, "fuck, she can do a bind".

Sophie also shared a story of how she resisted the inner discomfort she experienced while using a flotation aid at a public pool. She was aware of her potential to be judged by others unfamiliar with her need to use the pool in an adapted way, but describes below how she negotiated this challenge to participate:

"I think to myself, how does this look to other people? The other day I was in the pool, my shoulder was in really bad shape, it was taped and I wasn't able to actually swim so I put a floatation belt on which allowed me to be able to go in and do some water running and I thought to myself "does everyone else want to laugh or I thought...I wonder what people will think of this so I didn’t actually want to go in the pool that night because I was so concerned about what people thought. [However, I did go into the pool and] it was fine, I don't think people actually really care that much, but I guess I can’t help feel a bit embarrassed, I don’t know. Also, because my [dis]ability is overall it's fairly invisible, so it's not like people would be like, "ok, so this person uses a walker and that’s why she might be swimming and having a hard time".

Gabrielle’s quote below describes her ability to intentionally resist those who were unsupportive of her moving beyond the gendered norms within her contra dance community:

"[before I acquired a [dis]ability] I would switch back-and-forth between lead and follow. And we would just have fun with that. And I don't do that anymore because"
of my own limitations. But I will, I lead with impunity. Because that's the way that works best for me. And if I want to dance with my male friends, they are going to follow, and they love it anyways. Because they like dancing both roles as well. But I've come to be more adamant about my choice. Because for me dancing lead is not just a better option, it is a necessary option now. It is interesting to see people's reactions to me not following the standard norm for here. But it is kind of slowly changing. Which is nice because I don't really feel like explaining every single time.

Gabrielle expanded upon her need to intentionally resist gendered experiences she had encountered within public spaces. Within the following quote Gabrielle describes how men have disregarded her ability to self-propel her wheelchair and in doing so threatened her feeling of personal safety:

*I have just told people off. I have, you know, it's... And people, generally, once you tell them once, seem to get it. But I think people just don't think. They're like-oh let me help you. And start helping without actually asking if you want help. I found that women will generally ask if I want help before helping. Whereas guys will try and help before asking and that is a bit more stressful because it's like sometimes what you think would be helpful is going to be pushing me right out of my chair.*

Another example of intentional resistance to ableist behaviour was provided by Bria who encountered discrimination and exclusion within one of her university classes when her professor did not attempt to adapt the class the support her inclusion. This quote exemplifies how Bria identified the ableist approach that was used and resisted it
by identifying her concern to her professor. When the conversation became increasingly difficult, Bria enacted her right to participate in her course by filing a discrimination report with her university:

* A lot of it is just ignorance...an example I had a prof she said: "everyone is going to bounce the ball around in a circle" and [she instructed] the other person in a wheelchair and I to just sit on the side and watch, [The other students] were going to throw energy balls around and we were told to sit and watch. And I was like ok “I'm not going to sit here and watch when I'm paying to participate”. So, I left the class to drop it and she stopped me in my tracks and was like “what are you doing” and I was like “well I'm dropping the class” and she said: "well I think that's a good idea because it shouldn't be in your curriculum due to your situation." It was such a nightmare and it just escalated and so I ended up filing a discrimination report and being justified according to their discrimination office.

In addition to their personal resistance and empowerment, Bria and Keren both spoke of the potential for others to learn by observing their commitment and successful physically active leisure engagement as women with acquired physical [dis]abilities:

* I think that other people that know me, especially if they're [dis]abled can potentially be encouraged also to try it themselves. Getting out there and getting more people that I don't even know see me it can help shave away some ignorance and I'll give new possibility and hope to those who are also disabled who don't do such things right now. So, if [someone asked me] "oh what were you doing today" and I'll say I was at the gym then they’re like “hmmmm” you know their mind’s turning..."if she can work out maybe I can work out...or maybe I should" (Bria)
A lot of able-bodied people that I had in my life before that may be struggling with things in their day to day that sort of count on my [Facebook] posts or whatnot and look forward to hearing how I'm doing it seeing my progression. I found a lot of people that are able-bodied that are very impressed with what I've gone through and its sort of inspired them on a day to day to not complain about minuscule things. I believe everyone has a right to complain but they've sort of used it I guess as they're “okay I'm not going to complain because she's doing it... she's been able to do it and she may have more challenges than I”. It has also impacted like my family, there was a certain trend within my family within [dis]ability and giving up if you became [dis]abled and I decided that wasn't going to be me. (Keren)

While the women’s individual negotiations within physically active leisure may not have been consciously or intentionally conceived as resistance, they illustrate the women’s effectiveness in resisting ableist and gendered discourses and practices. It was also clear that the women’s resistance enacted through their community-based physically active leisure involvement contributed to their empowerment after acquiring a physical [dis]ability. Their personal empowerment is evidenced through their stories of accomplishment, connection and belonging described in the following sections.

**To experience a vital sense of accomplishment.** The women emphasized their multiple shifting identities (i.e. employee, athlete, mother, partner) impacted by the onset or acquisition of their physical [dis]ability. In addition to experiencing a sense of loss of their former leisure pursuits, the women shared the impact of time away from their employment or permanent job loss that resulted from acquiring a physical
[dis]ability. Many of the women replaced lost work hours with physically active leisure involvement as this was deemed to be a valuable alternative use of their free time that could promote a sense of personal accomplishment. Alexis shared how her return to physically active leisure fulfilled this hope: “I think it just makes you feel like you’ve accomplished something during the day. You know, when you can't work and stuff, right, it makes you feel like you, you know, like you've accomplished something”.

Likewise, Gabrielle described how she pursued physically active leisure when she had additional free time due to a slow period within her laboratory work as a Ph.D. student. This quote demonstrates Gabrielle’s satisfaction derived through discovering community-based physically active leisure that she could participate in while experiencing Seronegative Arthritis symptoms:

> I was on leave. I really couldn't do much in the lab. So, I had way more free time than reasonable. And needed to do something to fill my time. Because it was the lead up to the Pan Am Games, they were having try para-sports stuff. So that was actually my first time using a sports style wheelchair. Because they had, you could try wheelchair basketball. And like wheelchair track. They had the stuff, they had the building. And so, I also had access because I had the [university student fitness membership]. So, I just went there to like to play the para-sports stuff. Then I was like, I'm here I might as well also use the pool. And then I absolutely loved that pool and their change rooms. Because they have a fully accessible changeroom with the adjustable height changing table.

Similarly, Bria mentioned that after her spinal cord injury she was unable to sweat during exercise, a common way that individuals can experience a sense of
accomplishment within physically active leisure. Yet, through learning adaptive exercise approaches, Bria could experience her cardiovascular efforts within exercise and described how this allowed her to experience a sense of accomplishment. Bria provided a photo of herself exercising using adaptive gloves that supported her ability to use the lateral pull-down machine at the gym. She identified that she chose this as her personal artifact because it is an exercise she is able to complete herself, adding that this exercise makes her feel strong and good about herself. Bria elaborates on the sense of accomplishment exercise provides her in the following quote:

_Exercise is so empowering in itself; because if there's something with my limited ability that I can do on my own...like I can't do anything on my own and then I get these Velcro gloves and I'm strapped to an arm bike and I can push it and it's like going fast. I just love going really fast on the arm bike because it's so hard to get your heart rate up to do cardio when it's so limited as things I can do myself so even though I can do things at the gym with a trainer I'm not necessarily out of breath...like my heart is not necessarily pumped...so there's only really like two machines that I can really get the cardio workout with and that's the arm bike and then this other one called a VitaGlide._

Julia, an avid runner and swimmer prior to acquiring tetraplegia was unable to return to those valued leisure pursuits due to her physical impairment. She instead engaged her physical abilities within a personal exercise program which allowed her to experience feelings of accomplishment:

_Having, this for 10 years I have had some improvements. You know, starting to use a walker. Or to get around my house without a wheelchair. Those are key
moments. Even though they don't happen very often, it's a reminder that whatever we are doing in terms of exercise is helping. So, you just have to be patient and, I mean, the only other alternative is not improving. Or getting worse. Because I think we need physical activity so much more now than before.

The women within this study identify that accomplishment within physically active leisure can be difficult to observe and measure due to constraints imposed by their physical impairment such as reduced mobility and strength. However, both Julia and Keren addressed this challenge by video recording their exercise or sport participation which allowed them to observe their physical abilities and personal efforts within physically active leisure since acquiring a physical [dis]ability. In the following quote, Julia describes how she could observe her accomplishment within her personal exercise program by having one of her fitness sessions video recorded. Here she describes her response to watching the video that she shared as a personal artifact within her second interview:

So again, I think it's just that it gave me a sense of... To see it from the perspective of watching on video. And not just doing it. You see what it actually looks like and areas that need to improve...and just to stand back and see, maybe even to see accomplishments or changes.

Keren also shared a video of herself engaged in physically active leisure as her personal artifact. Keren described the significance of this video that showed her competing within a track and field throwing event. She explained that watching the video of herself competing allowed her to reflect on her personal growth and the culmination of her efforts devoted to physical activity since acquiring a physical impairment:
I think because it's one of my proudest moments since my rehab. At the time I was so heavily involved that I didn't really celebrate my moments when I was going through my injury, but now I sort of get to celebrate all that work put together. And it gave me a huge sense of accomplishment because it wasn't anything that anybody gave to me actually it was something that I had to like you know put in the time, the effort the dedication and all that to accomplish it.

To create a sense of connection and belonging. In addition to re-establishing a sense of accomplishment, the women’s ability to resist ableist and gendered discourses and practices in physically active allowed them to experience further community benefits. Through their resistance, the women re-established their belonging within community-based physically active leisure spaces and their broader communities. As the women actively engaged in their new physically active leisure communities, they found social connection, learning, and belonging. It was clear that the connection and sense of belonging the women re-established in their communities through their physically active leisure involvement after acquiring a physical [dis]ability positively contributed to their mental health and well-being and promoted the development of their multiple shifting identities.

Sophie, formerly an avid swimmer prior to experiencing Ehlers Danlos Syndrome, learned how to return to swimming. Through her swimming, Sophie experienced a renewed sense of normalcy [sic] and belonging. In the following quote she describes how learning adapted approaches to swim allowed her to re-connect with her community within the pool environment:

In the water, I felt like, quote/unquote, I felt normal and I felt like a normal 32-
year-old woman, I guess, like I actually felt I could do what anyone else could do at a pool, so, that was like really exciting for me.

Hannah’s physically active leisure involvement also promoted her sense of belonging within her community. She acknowledged her positive experiences within a small group trampoline exercise class despite having initial hesitations about her ability to participate safely due to her hip impairment. Hannah shared a video of herself being interviewed for a news feature on this emergent form of exercise where she details the benefits and safety from injury she found in this low impact form of exercise. Below Hannah further describes her participation in a trampoline exercise class:

It was something I tried tentatively at first, to see, I wasn’t sure it would be a good fit, to see if it would exacerbate any pain I was having. But after trying it carefully at first, realized it was perfectly safe and I feel like I’m still progressing, I’m not seeing the decline as I am with other forms of fitness. And, even though the restrictions are continuing or getting worse in my hip, I feel like I was able to do what I could two years ago and then some. I think it’s a good example of despite limitations, still being able to find adaptations for exercise. I feel like I’m capable, I feel like I’m participating at you know a very similar level to all the other participants.

It was also apparent that an enhanced sense of community belonging shaped the way the women viewed themselves outside their active pursuits. In the following quote Julia described how re-establishing exercise allowed her to feel a part of her community again:

For the first time, I didn't look in the mirror and see myself firstly as a [dis]abled
person. I saw myself as [identifies her name]. I mean, it's not always there. But there's moments of it….and I think when you have those moments you are a lot more successful because you're mentally more focused and confident.

Re-establishing a sense of belonging in their communities through physically active leisure often allowed the women to experience greater social connection. Karen believes that women with acquired physical [dis]abilities benefit more from engaging in physically active leisure among others within their communities as opposed to being active on their own at home. Drawing from her experience of re-engaging in physically active leisure and forming new friendships after acquiring a spinal cord injury; Karen suggests that feelings of community belonging, and social connection facilitate confidence and motivation that reinforce physically active leisure involvement within the community:

I enjoy it a lot...It gets you out of your box in socializing... This year having my teammates around, the whole experience is sort of just amazing... I'm pretty close with them all. The confidence piece because a lot of people that I know...not everybody has the follow through to be able to be motivated to workout every day. So, though they can't see it within themselves why they even really need to do it. So, if you add the socialization aspect into it then it sort of 1) helps distract but 2) it sort of gives them motivation to want to do the activity.

In addition to experiencing social connection, Keren explained how her physically active leisure involvement after acquiring a physical [dis]ability provided her with a new way of engaging with her community as a volunteer:

Before I started to do physical activity I never really knew the importance of
volunteering. Like you know I mean for me it was I worked for money, I don't work for free. And now I see why it's needed because the funding and that's not there, and programs like this they wouldn't exist [name of her adapted sports club] have made me more involved in my community. Before I would just you know I worked before my injury. Now I just do my day to day thing of whatever I want to do and it's given me something to feel better about myself. It's sort of one those things it's again, it's that full loop, it helps with your mental health it helps you get to get out and be physically active. Like you're back to feeling "normal" (I'm doing air quotes) like you're contributing.

Some women identified that shared understanding was a key component of the social connection they established through physically active leisure. The term “being in the same boat” was often mentioned, best represented within this quote from Bria:

I mean the gym here as I was saying they're like a family, they really are like leisure and physical. Like you're paying so much but they know how much it costs and when I first moved here I didn't know anybody. Where now we're going out we're socializing we're having weekly dinners. We're friends with these people like we're so close and then I started organizing a social committee through the gym, so I would always bring birthday cakes for peoples’ birthdays. We started having barbeques like [name of fitness centre] annual barbeque and such so it was such a positive social environment as much as it was physical… because you are all in the same boat unlike what I find with my theatre group [where] I’m the only one there currently with an acquired injury.

Bria furthered that when exercising with other women with acquired [dis]abilities…
We can all relate to each other we can talk about things that able-bodied people... people can't understand like "Oh ya spasms like oh ya, oh my God I hate those" "Like oh you deal with caregivers" "Like oh ya totally" 

Consistent with other women, Keren valued the opportunity to relate with peers in physically active leisure specifically for individuals with [dis]abilities. She explained that in her adapted sports club:

There's a lot of people with acquired physical [dis]abilities and even congenital and I found that being in an atmosphere with that mixture of people you'd have to sort of find out what the norms are like and it sort of normalized things that you're going through that you're not used to because with an acquired injury. I know I didn't know anything about a spinal cord injury or what came with it before.

In addition to belonging and connection, learning and skill acquisition were other key outcomes that the women attributed to their physically active leisure involvement after acquiring a physical [dis]ability. This included both personal learning about their abilities or ways to adapt their physically active leisure, as well as learning from others as they observe the physically active leisure capacities of women who live with physical [dis]abilities. Here Keren shares a bit of what she has learned by re-engaging in physically active leisure:

Even more so now, I understand the importance that recreation and leisure have, not only just for able-bodied persons but for any person to be with their peers and to recover, to learn new skills that you may not have in rehab, to take a little bit more risk than regularly would in you know your family situations.

Gabrielle was equally enthusiastic in sharing her experience of becoming involved in
wheelchair dance. She first trialed wheel dance while attending a [dis]ability focused trade show. The wheel dance providers requested her permission to share photos of her trailing wheel dance for the first time on their website. Gabrielle showed these pictures as her personal artifact noting her broad smile while dancing in a transformational experience that she further describes below:

*I guess finding wheel dance has been like a huge thing because I kind of knew it existed but finding it in [her city] and, you know, getting to get those skills that make using your wheelchair to dance has been so much of a like turning point in the sense that like I was still trying to do Contra [dance] in other ways. And like, you know, pacing myself and trying to dance. And just not going when I couldn't. This means that I have an option that allows me to dance basically whenever. Because I don't have to worry about, as much about how bad I am flaring or not flaring. Because like, obviously I'm if I am flaring really bad, or if I'm flaring in my hands, that is a different thing. But that doesn't happen very often. So, it means that 90% of the time I can still do things that I thought were mostly off the table.

Additionally, being a part of a wheelchair dance community Gabrielle learned from her peers with physical [dis]abilities how to use her wheelchair more effectively:

*I basically learned all of the wheelchair skills, kind of myself for the most part. Until I did wheel dance. And one of the dancers was showing me how to do very tight turns...like where to put my hands on the wheel to do tighter turns... it has a lot of usefulness. But it also applies in everyday things where you can make a tighter turn in certain spaces. It's really a huge thing.

Thus, the third theme revealed the women’s resistance of ableist and gendered
discourses and practices they encountered within community-based physically active leisure. Through this resistance, the women re-established their belonging within community-based physically active leisure spaces and their broader communities. For it was clear that re-engagement within community-based physically active leisure after acquiring a physical [dis]ability supported the women’s ability to build agency and a sense of connection in their communities. Additionally, some women also indicated that physically active leisure provided them a vital sense of accomplishment, by serving as a means of shifting their multiple identities established prior to acquiring a physical [dis]ability and promoting their establishment of new identities.

**Personal reflection of theme #3.** I was inspired and encouraged by the women’s stories of resistance within this study, in response to the oppression they encountered when trying to re-engage in physically active leisure within their communities. Working as a researcher on this study I could connect the women’s individual resistances into what becomes a collective resistance when their experiences and insights were brought together. Their resistance has propelled me as a feminist and [dis]ability ally to share the women’s experiences within my personal and professional networks to further advance awareness of the women’s marginalizing experiences within physically active leisure. It’s my hope by joining these women in the resistance and transformation of community-based physically active leisure spaces, that we can evoke the responsibility of recreation and sport service providers and policy makers to address and eliminate this disparity.

When I previously worked as a therapeutic recreationist at a spinal cord rehabilitation centre, I was aware that after acquiring a spinal cord injury many
individuals experience unemployment. This does allow for increased available time for leisure yet could decrease women’s leisure access due to financial constraint. While I hold professional insight about the sense of accomplishment one can derive from physically active leisure involvement, the women in this study enhanced my understanding of the vital sense of accomplishment they derived from physically active leisure involvement after acquiring a physical [dis]ability. I wonder how this accomplishment can be increasingly recognized within our communities and how recreation service providers can acknowledge and support women’s shifting identities and pathways to community engagement.

Finally, I hope that there is an ongoing exploration of how community-based physically active leisure can facilitate connection and belonging for women with acquired physical [dis]abilities. The women’s stories of friendship, mentorship, and identity within this sub-theme were equally effective in demonstrating the necessity of physically active leisure for the women’s well-being to the sub-themes that cited physical and mental health outcomes. Weighing the essential role of physically active leisure identified by the women, and their marginalizing experiences in these community spaces after acquiring a physical [dis]ability, this is clearly a social justice issue requiring priority across multiple sectors.

**Core Theme: Reclaiming a Sense of Community Belonging Through Physically Active Leisure.**

From the three major themes, “The Essentiality of Physically Active Leisure to Negotiating Her Changing Health Considerations”, “Confronting the Stigmatizing Gaze as a Woman with an Acquired physical [dis]ability” and “Building Agency and a Sense
of Connection in the Community” a core theme emerged reflecting “Reclaiming a Sense of Community Belonging Through Physically Active Leisure”. This core theme captures and integrates insights gained from the overall analysis. Embedded throughout the findings it became clear that, in the absence of equitable processes and programming, women were initially disconnected from community-based physically active leisure after acquiring a physical [dis]ability. The core theme represents women’s self-determined process of trial and error to reclaim their entitlement to community-based physically active leisure. Within this effortful process, women negotiated and resisted ableist and gendered influences and advocated to repossess their belonging within community-based physically active leisure spaces and their broader communities. At the end of this theme, I share my personal reflections in response to this theme.

As the first theme showed the essentiality of physically active leisure to the women’s negotiation of their changing health considerations, information and access to physically active leisure engagement for women with acquired physical [dis]abilities are imperative. Yet, the women’s stories detail their isolating experiences of loss, physical change, and uncertainty about how to approach physically active leisure in the community after acquiring a physical [dis]ability. Women’s decreased access to physically active leisure after acquiring a physical [dis]ability contributed to their community isolation and delayed their ability to improve their physical and mental health and well-being. Women purposefully responded to the community marginalization they experienced after acquiring a physical [dis]ability by reconceptualizing their physically active leisure abilities and self-navigating resources and opportunities available within their communities. They employed persistence and
self-determination to fuel an ongoing process of trial and error that eventually resulted in physically active leisure re-engagement in their communities.

Some women reclaimed community belonging by engaging in [dis]ability specific physically active leisure. Many women felt [dis]ability specific physically active leisure opportunities provided a place of shared understanding and support among women living with physical [dis]abilities. Women also valued resources and expertise within [dis]ability specific physically active leisure activities such as specialized equipment and inclusive approaches of service providers not available elsewhere in their communities. In the following quote Karen explains that when recreation and sports providers lack inclusive expertise this inhibits women’s physically active leisure entitlement and can even pose as a safety concern:

*I had a really hard time finding anybody that was very knowledgeable about any equipment or even about how I could do things because they just put me in the [wheelchair racing] chair at first. That hurt, and it wouldn't be comfortable, and I would try to explain that it would send my back into spasms or whatnot and they just didn’t get it.*

In addition to identifying the value offered within [dis]ability specific physically active leisure spaces, both Alexis and Julia appealed to community recreation service providers for women’s only physically active leisure opportunities for women with physical [dis]abilities. The following quotes depict their negotiation and advocacy addressing women’s gendered experiences of physically active leisure in the community:

*I think a gym just for women, I think would bring more women out, because a lot of people don't like working out in front of men. I don't really care because there*
aren't any other gyms. (Alexis)

I think it would be kind of neat if there was a woman's group that, I mean it's hard because it's drawing people from all over the place and not everybody wants to work out. But I feel like if there was something that could draw everybody together, a women's group that got together it would be really neat... It's just that you have that connection with other women. (Julia)

Some women negotiated and resisted gendered and/or ableist oppressions and created their own supportive mechanisms and strategies to use non-[dis]ability specific programs and facilities in their communities. Bria shared that she is also often the only person with a physical [dis]ability exercising at her university fitness centre. She explained that being seen as a woman with a physical [dis]ability exercising frequently raises the curiosity of other students. In this quote Bria shares her perspective that exercising in mainstream physically active leisure spaces such as the university fitness centre can assist in reframing ableist discourses:

Even getting used to...even seeing people like me more...It's helpful like knowing of me existing... or that there is a need [for me to exercise] even if it's not therapeutic. A lot of times too if people see somebody exercising in a wheelchair they'll be like... are you going to be able to walk again? I’ll respond by saying "no not necessarily but I still want to work out like you guys want to work out you know... It can be [distracting when others ask [dis]ability specific questions] but in my eyes it's just like...(laughs) enlighten them... If they ask, I'll answer them because that's the only way they are going to learn ...I now think that that's important for understanding what society needs to help the ignorance.
When describing their ideal physically active leisure experiences, women resoundingly sought equitable physically active leisure access and belonging among all women within their communities. While women persisted to reclaim community belonging through physically active leisure in both [dis]ability specific and mainstream spaces, their stories emphasized the need for much greater inclusive opportunities reflective of women’s diverse interests and abilities. Re-claiming their entitlement to physically active leisure promoted women’s personal agency and empowerment. In turn, recreation and sports practitioners must also commit to advancing the social impact women initiate when demonstrating their physically active leisure abilities and belonging in community spaces.

**Personal reflection of the core theme.** When I presented my thesis proposal, Dr. Whyte asked me “Is there a difference between how you think about inclusive and segregated/adapted [dis]ability opportunities? At that early stage of research, my response reflected my practice informed insights noting pros and cons to each physically active leisure approach. I continued to reflect upon this question throughout data collection and analysis. Within my former Therapeutic Recreationist role in spinal cord rehabilitation, I facilitated adapted sports education and “Have-a-Go” programs in partnership with community-based provincial adapted sports organizations. During these programs, rehabilitation patients gained information from adapted sports practitioners as well as both recreational and competitive adapted sports athletes. The athletes shared their sport-specific knowledge as well as some of the benefits that they personally derived from their physically active leisure involvement after acquiring a physical [dis]ability.
As I facilitated this program monthly for about eight years I also learned a lot from those athletes. Consistent with the women’s stories, I heard the athletes speak about friendships, shared [dis]ability understanding, and their sense of accomplishment gained through their physically active leisure participation. Collectively these stories well-evidence the value of [dis]ability specific physically active leisure opportunities for women after acquiring a physical [dis]ability.

However, participation within [dis]ability specific physically active leisure spaces, prohibits the women from sharing their exercise or sports experiences with a friend, partner or child who does not have a physical [dis]ability. This, added to the marginalization some of the women experienced with the loss of employment, suggests a process of social isolation that could certainly have implications on the women’s health and well-being. Advancing integrative planning and resources within community-based physically active leisure spaces could assist in addressing this segregation. Additionally, expanded participation of women with acquired physical [dis]abilities in mainstream physically active leisure could educate community members without a physical [dis]ability about the presence and many abilities women with acquired physical [dis]abilities possess. Completing this study has allowed me to gain a more informed perspective for responding to Dr. Whyte’s question. At this time, I would respond by stating: “Yes, there a difference between how I think about inclusive and segregated/adapted disability opportunities. Yet, as informed by the women in this study there is an opportunity for women with acquired physical [dis]abilities to re-engage with physically active leisure and develop a sense of belonging within both spaces”.

Finally, I am left with mixed feelings when considering the revelations of this theme. I was struck by the depth of resistance amidst ableist and gendered social influences women depicted when attempting to re-engage in physically active leisure, experiencing mixed success and starting over. The time, effort and emotion women dedicated to reclaiming their physically active leisure entitlement is truly impactful. Yet as physically active leisure is a health and social necessity, it’s deflating to acknowledge this fight for access and inclusion remains necessary.
Chapter Five: Discussion

The purpose of this study was to use a feminist social constructivist lens to understand the physically active leisure meanings and experiences of women with acquired physical [dis]abilities. Specifically, I sought to examine how women with acquired physical [dis]abilities negotiate, resist and/or become empowered through physically active leisure in the community context. There were three main findings of this thesis: The Essentiality of Physically Active Leisure to Negotiating Her Changing Health Considerations”, “Confronting the Stigmatizing Gaze as a Woman with an Acquired Physical [dis]ability”, and “Building Agency and Sense of Connection in the Community”. These themes were linked by a core theme “Reclaiming Community Belonging Through Physically Active Leisure” which exposed women's initial disconnection from community-based physically active leisure after acquiring a physical [dis]ability due to an absence of equitable processes and programming. The core theme represents women’s self-determined process of trial and error to reclaim entitlement to community-based physically active leisure. Within this process, women negotiated and resisted ableist and gendered influences and advocated to repossess their physically active leisure and community belonging. The following discussion will ground the findings in the existent literature and reveal new understandings of women’s community- based physically active leisure after acquiring a physical [dis]ability, with a focus on gender and ableist discourses.

It was my intent that this study would add to the work of key feminist leisure scholars such as Aitchison, Henderson, Bedini, Anderson, and Wickman that emphasized the need for empirical representation of the diverse leisure experiences and
meanings for women with [dis]abilities. I sought to provide detailed accounts from women living with acquired physical [dis]abilities by conducting interviews with attention directed towards the following questions: How is physically active leisure in the community perceived by women with acquired physical [dis]abilities to be accessible, inclusive and relevant to their personal realities? How do women with acquired physical [dis]abilities negotiate, resist, and transform gendered and disabling discourses within physically active leisure in the community? Also, how does women’s physically active leisure involvement promote personal empowerment and broader social change related to community engagement? Thanks to the women’s interest in the topic of this study as well as their generosity and openness in responding to my interview questions I gained a great depth of knowledge surrounding these research questions through my interpretation of the data, and in turn, the theme development.

A key study finding represented the role of physically active leisure in enabling women to negotiate their changing health considerations after acquiring a physical [dis]ability. The women comprehensively explained how acquiring a physical [dis]ability initially involved a sense of personal loss and struggle to reconceptualize their physically active leisure abilities. This finding relates to Ewing’s (2002) assertion that unlike other diverse representations (i.e. race, class, gender) that have been associated with institutionalized oppression, [dis]ability is regarded as a personal tragedy. Ewing posits that responding to [dis]ability is seen as a personal responsibility “requiring psychological counseling to overcome learned helplessness and other dysfunctional behaviour” (2002, p. 79). Likewise, Collins and Valentine (2003) explained that women with [dis]abilities are oppressed through the North American
framing of [dis]ability as synonymous with individual pathology. This finding reinforces the argument that women require support from healthcare providers on how to prioritize physical activity while managing long-term health considerations (Cross & Schneider, 2010). As argued by Wendell (1989), if individuals without a [dis]ability “saw the disabled as potentially themselves or as their future selves, they would be more inclined to feel that society should be organized to provide the resources that would make disabled people fully integrated and contributing members” (p. 110).

The women shared rich and detailed accounts of their lives amidst learning about and adjusting to living with their acquired physical [dis]abilities. It became clear that the process of learning to manage the symptoms associated with their acquired physical [dis]abilities was time-consuming and emotionally challenging for many of the women. As a result, leisure held decreased relevance for the women during this time as they were required to focus on other health and lifestyle considerations such as flux in relationships, work, school, unemployment, and accessible housing. Notably, the women’s access to physically active leisure participation varied according to factors such as social supports, financial resources, and parenting responsibilities. The women also depicted varied attitudes towards their acquired physical [dis]abilities. This is consistent with the findings of Henderson, Bedini, and Hecht (1994) who found:

Disability seemed to have the most severe negative influence on leisure when it disrupted a woman’s actual or perceived abilities to perform important societal roles and when a situation was created where desire to participate was not equal to one’s ability to participate. (p. 83)
It is clear, too, that this study offers a unique perspective by exploring the relevance of physically active leisure experienced by the women after acquiring a physical [dis]ability. Many previous studies on leisure and women with [dis]abilities failed to consider the unique lived experiences and identities of women with acquired physical [dis]abilities. As noted in the literature review, the leisure (especially physically active leisure) of women with [dis]abilities, is a significantly under-researched area of study. The limited number of previous related studies lie within the much broader area of leisure of women with [dis]abilities and have essentially ignored the question of relevance by focusing on the constraints barriers or limitations to leisure participation experienced by women with [dis]abilities (Henderson & Bedini, 1995; Henderson, Bedini, Hecht, & Schuler, 1995).

Amidst their ongoing adjustment to living with a [dis]ability, the women were able to reframe their physically active leisure abilities and begin a process of re-engaging in physically active leisure within their communities. This process involved ongoing trial and error due to the scarcity of inclusive community-based physically active leisure processes and opportunities within the women’s communities. This gap contributed to the women’s experiences of internalized oppression and uncertainty of how they fit into community-based physically active leisure as women with an acquired physical [dis]ability. This initial disconnection from physically active leisure builds upon the study by Darcy, Lock and Taylor (2017) focused on women with a [dis]ability and participation in sport. These researchers concluded that while [dis]ability “may impact on their access to participation, it is not the [dis]ability that constrains the participation in sport and active recreation but rather it is a complex interplay of
structural constraints” (p.11).

Through their ongoing process of trial and error, the women exercised persistence and self-determination to address oppressions encountered when attempting to re-establish physically active leisure. The women’s sustained persistence and self-determination in re-establishing their physically active leisure was key to improving their physical and mental health after acquiring a physical [dis]ability. This finding is congruent with Schneider and Young’s (2010) study that highlighted the determination of women living with Multiple Sclerosis to lead a life in which their health considerations were not the dominant theme, and where they could live their lives to the maximum possible standard. This finding is also in line with another previous study where women who had experienced a stroke identified self-determination as a positive and essential characteristic for responding to adversity and acquired [dis]ability (Cross & Schneider, 2010).

Within this study, the women identified the essentiality of re-establishing their physically active leisure involvement for improving their physical and mental health and well-being. The women’s multiple health benefits associated with their re-engagement in physically active leisure after acquiring a physical [dis]ability, suggest that health is a multidimensional concept, consistent with the work of Bengel, Strittmatter, and Wilmann (1999) that defined health to include:

‘… not only physical well-being (e.g. a positive body feeling, absence of complaints or signs of disease) and psychological well-being (e.g. joy, happiness, and life satisfaction), but also performance, self-realization and a sense of meaningfulness’ (p. 16).
The women’s association between health and leisure is well evidenced according to Caldwell (2005) who indicates that this area of research can be loosely sorted into “three classes of research: prevention of, coping with and transcending life events” (p. 8). The women in this study experienced restorative benefits of physically active leisure involvement and viewed it as a means of improving or maintaining their health after acquiring a physical [dis]ability. This aligns with Chun and Lee’s (2010) exploration of the role of leisure in the experience of posttraumatic growth for people with spinal cord injury. Posttraumatic growth describes “positive change in the individual experiences as a result of the struggle with trauma” (Calhoun & Tedeschi, 1999, p.11). Chun and Lee’s (2010) study showed that “leisure contributed to posttraumatic growth in the following ways: (a) providing opportunities to discover unique abilities and hidden potential, (b) building companionship and meaningful relationships, (c) making sense of traumatic experience and finding meaning in everyday life, and (d) generating positive emotions” (p. 402-403).

Many women within this study indicated that re-engaging in physically active leisure allowed them to experience improved mental health and well-being after acquiring a physical [dis]ability. Several women described experiencing depression in response to acquiring a [dis]ability. These women shared that living in the community with an acquired physical [dis]ability was initially very isolating before they learned how to re-engage with their communities. The women revealed numerous factors that impacted their mental health after acquiring a physical [dis]ability including inadequate social support, loss of employment, decreased self-image and self-confidence, uncertainty related to her [dis]ability, financial strain, and symptom management. In
response to these challenges the women recognized their mental health struggle and purposefully chose to re-engage in physically active leisure hoping to improve their mental health and well-being. The women’s association between physically active leisure and improved mental health for people who have a physical [dis]ability builds upon related earlier leisure studies (i.e. Henderson et. al., 1994; Henderson & Bedini 1995; Iwasaki, Zuzanek, and Mannell, 2001; Schneider & Young, 2010) by highlighting the multiple identities held by women with acquired physical [dis]abilities that may impact their access to physically active leisure and ability to experience associated mental health benefits.

Another key finding revealed the women’s confrontation of the stigmatizing gaze they encountered in their communities as a woman with an acquired physical [dis]ability. Specifically, the women identified socially marginalizing factors (i.e. ableist discourses and behaviours of recreation practitioners or physically active leisure participants without a physical [dis]ability) that decreased or prohibited their access and inclusion within these community spaces. This finding is congruent with a study by Devine (2016) on university students that indicated students with [dis]abilities experience structural and cultural constraints to physically active leisure. Additionally, this finding expands upon leisure research that uses a gendered lens to explore women’s unique experiences of [dis]ability related stigma in community-based physically active leisure. For example, research by Bedini (2000) as well as Henderson, Bedini and Hecht (1994) used a gendered lens to highlight perceived stigma and social devaluing experienced by women with physical [dis]abilities prohibiting their acceptance within community-based physically active leisure, in contrast to women without physical
Confronting the stigmatizing gaze also supports Reeve’s (2012) assertion that disabled people face direct and indirect psycho-emotional disablism every day. Reeve notes, however, that the ways in which people with disabilities respond to this is dependent on the time and place in which such experiences occur, and whether it can be challenged by what she refers to as “returning the gaze” (p. 81). As posited by critical disability scholars Burns, Watson and Paterson (2013), by confronting psycho-emotional disablism in order to re-establish their community-based physically active leisure participation, the women challenged “constraints placed upon them by disablist attitudes and practices, and in doing so [proved] their own capacity and competence not just to others but also to themselves” (p. 1070).

It was clear, too, that the women challenged gendered and ableist discourses through physically active leisure and extends the theoretical concept of “resistance” in leisure settings (Henderson & Bialeschki, 1993; Scranton, 1994; Shaw, 2001). For example, the last finding of this study shows how the women’s physically active leisure involvement after acquiring a physical disability allowed them to build agency and a sense of connection in their communities. In response to gendered and ableist discourses and behaviours present within community-based physically active leisure, the women used various approaches in their negotiation, resistance, and transformation of these marginalizing influences. The women resisted challenges encountered in their pursuit of re-establishing physically active leisure after acquiring a physical disability. This finding builds upon the limited existing body of research that seeks to represent how women with disabilities experience physically active leisure (i.e. Ashton-Shaeffer,
Further, participating in physically active leisure was one way in which resistance was enacted and created a vital sense of accomplishment. Previous studies have shown that women with [dis]abilities lack employment opportunities and consequently experience significant levels of marginalization and poverty with insufficient financial resources to enjoy leisure (Coakley, 2008; Crooks, 2004; Rimmer, 2012). Due to the range of [dis]abilities experienced among the women within this study, some women could continue working after acquiring a physical [dis]ability while others could not. This study has shed light on a new phenomenon by which some women responded to their unemployment consequential to acquiring a [dis]ability by pursuing physically active leisure. In absence of the ability to continue their work, these women conceptualized physically active leisure as a (personal and societal) valued way of experiencing accomplishment after acquiring a physical [dis]ability. This finding builds upon a study by Lord and Patterson (2008) where people with [dis]abilities identified the opportunity to “challenge their abilities and achieve their goals” as a leading benefit of physically active leisure engagement (p. 123).

This study broadens the focus within the literature on sport and women with physical [dis]abilities to show the many forms of physically active leisure engagement valued by women with acquired physical [dis]abilities within their communities. In addition to sport, the women actively engaged in dance, independent exercise at community gyms, group exercise classes, recreational swimming, yoga, walking, and recreational golf. Through these physically active leisure pursuits, the women created a
sense belonging and social connections in their communities after acquiring a physical [dis]ability. This finding adds to previous research (e.g., see Datillo, 2002; Devine & Wilhite, 2000; Lord & Patterson, 2008) by emphasizing the role of physically active leisure in enhancing the community inclusion and interpersonal relationships (with peers, family and community members) of women with [dis]abilities.

The women’s personal empowerment developed through physically active leisure after acquiring a physical [dis]ability also impacted numerous people within their social circles and their communities. While in some of the women’s community roles and identities, such as Keren volunteering as a Parasport Ambassador, or Alexis providing mentorship as a Peer Support volunteer, this is an intentional contribution. However, the unspoken social impact of the women’s resistance within physically active leisure also influences their communities in many ways that are not intentional or formally recognized.

Finally, the findings also demonstrate the significance of agency as central to the concept of resistance, in that, “women (and men) are social actors who perceive and interpret social situations and actively determine…how they will respond” (Shaw, 1994, p.15). In the process of reclaiming their community belonging through physically active leisure the women advocated for equitable processes and resources that other women with physical [dis]abilities would benefit from as well. They promoted awareness, challenged ableist and gendered oppressions by demonstrating how women who live with an acquired physical [dis]ability can engage and contribute within their communities. As Shaw (2001) explained women’s acts of resistance can be both planned and unintentional, yet both can bring positive social change. Following the
women’s example, I advocate that recreation practitioners must engage as allies and change agents in advancing equitable community based-physically active leisure opportunities for women with acquired physical [dis]abilities.

**Limitations and Future Research Considerations**

Despite addressing several gaps in the literature, this study has limitations as well as areas that prompt further exploration. This study did not represent Canadian women’s racial diversity as the participants were all Caucasian women. Future research could focus on exploring diversity within women’s physically active leisure experiences after acquiring a physical [dis]ability. This may further inform recreation service providers on the women’s needs for meaningful participation within their communities.

Another limitation of this study is inadequately addressing how women’s socioeconomic status enabled or limited their access to physically active leisure. The women who participated in this study appeared to experience a range of socio-economic realities spoke about their financial considerations related to physically active leisure participation as well as loss of employment. Further exploration of this topic could have more accurately reflected the women’s lived experiences. Other significant factors warrant attention as they relate to women’s community-based physically active leisure experiences such as sexual orientation, geographic location, as well as ethnicity among other identities, and should be considered for future research.

In recognition of the limited study on the physically active leisure experiences and the multiple complex meanings of women with acquired physical [dis]abilities, I advocate for continued investigation of this subject. The women’s physically active leisure meanings and experiences within this study suggest the need for leisure
researchers to expand the scope of leisure activities. Traditionally defined physically active leisure activities such as running, and swimming may not be accessible for women after acquiring a physical [dis]ability. It is my recommendation that physically active leisure activities that were accessible and valued by the women within this study serve as a starting point for a broader definition that reflects women’s diverse physically active leisure interests and abilities. For example, as a woman living with tetraplegia (a condition which significantly compromises respiratory function), Bria provided unique insight into her physically active leisure experiences within the movement of performing theatre. It was also significant how Gabrielle expanded the classification of physically active leisure to include her contra dance experiences which encompassed physical exertion, challenge and skill development comparable to traditionally defined physically active leisure activities.

Therefore, this study builds upon the traditional definition of physically active leisure as “activities that are encompassing sporting and fitness activities such as swimming, cycling, walking and aerobics” (Lord & Patterson, 2014, p. 125) to include additional sport and fitness pursuits accessible to women with diverse leisure abilities and interests.

**Practical Implications**

It was my hope that this study could facilitate a greater understanding of how community-based recreation service providers and policymakers can develop and promote equitable physically active leisure experiences for women with acquired physical [dis]abilities. With regards to the practical application of this study, I provide several recommendations based on my analysis of the interviews. After acquiring a physical [dis]ability, the women in this study experienced a lengthy and challenging
process of navigating physically active leisure opportunities in their communities that could meet their needs for access and meaningful participation. This suggests the need for recreation service providers to conceptualize and implement supportive resources and processes to assist women with an acquired physical [dis]ability to learn about physically active leisure opportunities accessible to them. Inclusion is mandated by the 2011 accessibility regulation requiring Ontario municipalities to ensure alignment of their accessibility policies with Accessibility for Ontarians with Disabilities Act (AODA) legislation in its multi-year accessibility plan (City of Toronto, n.d.). There are five accessibility standards in place under the AODA to support the creation of an accessible province by 2025: Customer Service, Employment, Information and Communications, Transportation and Design of Public Spaces. The standards aim to ensure that all Ontarians can take part in everyday activities inclusive of physically active leisure in parks and other public spaces (Government of Ontario, n.d.). While accessibility gains have been made within Ontario, as recreation practitioners we must sharpen our focus by outlining and advancing our accessibility plans specific to physically active leisure.

However, access alone does not evidence inclusion and community recreation practitioners must engage women with physical [dis]abilities in program evaluation measures and ongoing process improvement. Benchmarking with other community based physically active recreation service providers may also assist recreation practitioners in improving inclusive process and practice (Klitzing & Watcher, 2005). As this study demonstrated the various health outcomes the women derived from physically active leisure participation after acquiring physical [dis]ability, a multi-
sectoral approach inclusive of both primary and secondary levels of healthcare could strengthen recreation practitioners’ inclusion planning and programming focused on women with acquired physical [dis]abilities.

By revealing women’s experiences of heightened stigmatization in physically active leisure after acquiring a physical [dis]ability, this study emphasizes the importance of recreation service providers addressing ableist and gendered discourses and behaviors within employee training and evaluation, recreation programming and policy development. Additionally, processes to seek feedback or to support women with acquired physical [dis]abilities to advocate for improved physically active leisure participation within their communities must be implemented. It is apparent that community-based recreation leaders and practitioners must employ multiple approaches to work toward the desired vision of recreation inclusion for all community members outlined within Canada’s most up to date nationally guiding document for Parks and Recreation Service Delivery: *A Framework for Recreation in Canada 2015 Pathways to Wellbeing*. Within this national framework for community recreation services, inclusion and access are one of the five leading goals and priorities for action described as: “equitable participation for all, regardless of socioeconomic status, age, culture, race, Aboriginal status, gender, ability, sexual orientation or geographic location” (p.17).

Drawing from the findings of this study, Canadian community-based recreation services may have much work to do to reach this goal. I urge that equitable community recreation participation for all remains a national priority.

This study also revealed that women may prefer to engage in segregated [dis]ability specific physically active leisure spaces after acquiring a physical
[dis]ability. Drawing from that finding, I recommend that community recreation service providers engage with women living with acquired physical [dis]abilities who are knowledgeable about inclusive programming approaches and supportive mechanisms existent within [dis]ability focused physically active leisure spaces. Employing women living with acquired physical [dis]abilities as consultants could inform service providers about inclusive resources and programming considerations that could be replicated in mainstream community recreation programming and spaces. As Aitchison (2009) emphasized almost a decade ago, it remains:

Vital that leisure studies research and researchers begin to embrace the lived experiences of disabled people reflecting the progress that has been made by listing to the progress that has been made by listing to the voices of other groups of people deemed to be underrepresented in leisure and leisure-studies. (p. 384)

In addition to leisure researchers, I extend this responsibility to leisure practitioners, policymakers and government representatives as the engagement of women who are marginalized within our communities requires a multifaceted and cohesive approach to ensure that funding, resources and community inclusion strategies are possible and sustainable.

This study highlighted the importance of recreation and leisure researchers and service providers to look beyond sport towards community-based physically active leisure opportunities that are inclusive of women with a range of physical abilities and interests. Many of the women within this study effectively described how their level of physical function after acquiring a physical [dis]ability did not enable adapted sport involvement. However, they engaged in other forms of physically active leisure that
were beneficial to their health and social well-being as well as a means of re-establishing community engagement after acquiring a physical [dis]ability.

I also recommend ongoing [dis]ability and inclusion-focused education for community recreation service providers as well as other community-based employees who work within physically active leisure environments. Community partnerships with [dis]ability specific organizations could assist recreation practitioners to acquire ongoing best practice education and strategies to ensure equitable physically active participation of women with acquired physical [dis]abilities. Recreation practitioners must know that persons with [dis]abilities in North America report lower education and employment rates, lower income levels, and face higher costs of living to meet their daily needs (Levesque, 2012). Factoring in women’s experiences of gender, women with [dis]abilities may experience higher levels of poverty than men with [dis]abilities.

One approach to addressing this may be employing women with acquired [dis]abilities as consultants informing inclusive processes and practice, as well as in varied roles within community-based recreation and sport. While this study has highlighted benefits women living with acquired physical [dis]abilities may derive from community-based physically active leisure; accessible employment opportunities are also essential for women living with acquired physical [dis]abilities to sustain themselves (and their families) financially including costs associated with physically active leisure. Employment is another way that women living with acquired [dis]abilities can demonstrate their abilities within the community.

As under-representation of women with physical [dis]abilities within physically active leisure spaces was noted within this study, recreation practitioners may support
the leadership of women who have been successful re-engaging in physically active leisure after acquiring a physical [dis]ability. The women in this study emphasized the additional time required to access their community after acquiring a [dis]ability. Perhaps if a community recreation centre offered inclusive group exercise class, a social component may be added following the class to assist the women attending to build social connections and learn additional strategies for engaging in physically active leisure from peers or guest speakers who are ideally paid. As physically active leisure was shown within this study as essential to the women’s navigation of their changing health considerations after acquiring a physical [dis]ability; ongoing education and formalized community recreation policy and programming are crucial for women to maintain life-long physically active leisure involvement.

While I have provided some practical recommendations, I am cognizant that community-based change requires politicization to advance the engagement of women with acquired physical [dis]abilities. Yet as Levesque (2016) problematizes [dis]ability policy is removed from the mainstream political agenda with only small incremental changes in Canadian [dis]ability policy occurring in the last three decades. Indeed, Canadians living with [dis]abilities have experienced marginal policy gains won through long drawn out processes (Levesque & Graefe, 2014).

This research aimed to contribute to social justice and change by encouraging personal and collective empowerment. It was my intent that participants would be empowered from having their voices heard (Hesse-Biber & Piatelli, 2012). Throughout the interviews, each woman openly shared her experiences, and these were received with sincere interest and appreciation. Some participants shared how they felt about
their participation in this research. For instance, one participant commented: “thank you for doing a study like this because it's so needed...It's so interesting and hopeful that there is someone like you getting this message out and interested in it.” Another participant remarked: “clearly I have feelings about this”. This feedback suggests the possibility of the women’s personal empowerment through the research process, which feminist research recognizes as equally important as the outcomes of research (Campbell & Wasco, 2000). More broadly, this research hoped to contribute to social justice and change by conveying the breadth of female experience (Hesse-Biber, 2012); specifically, the experiences of women with acquired physical [dis]abilities in community-based physically active leisure. This study provides some understanding of the leisure experiences and meanings of women with acquired physical [dis]abilities and posits physically active leisure as a site of resistance, transformation, and empowerment. As I complete this research project and resume my career as a recreation practitioner, I look forward to applying the tremendous insight provided by the eight women who generously contributed to this study.
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Appendices

Appendix A: Recruitment Poster

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Participants Needed for a Research Study:
Investigating Gender and Physically Active Leisure in Communities for Women with Acquired Physical Disabilities

Are you a Woman (aged 18-45) who has lived with an Acquired Physical Disability for 2-10 years who participates in physically active recreation or sport in your community?

Or have you wanted to participate in physically active recreation or sport in your community but had difficulty?

If so, we would love to hear your story!

This study seeks participants who are English speaking adult women that reside in Canada and have had an acquired physical disability for 2-10 years.

Participation includes two interviews that will be approximately one hour in length and will be held in-person or online via Skype.

Participants will receive a $10 Starbucks gift card

For more information about this study, or to volunteer for this study please contact:

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Dr. Dawn Trussell  
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This study has been reviewed by, and received ethics clearance through the Research Ethics Board, Brock University.  
Ethics File Number: (File # 16-252)
Participants Needed for a Research Study

This study seeks Canadian Women aged 18-45 who have lived with an Acquired Physical Disability (disease or injury related) for 2-10 years.

Participants will receive a $10 gift card for their time shared in 2 interviews of one hour in length.

To volunteer for this study please contact Katherine Gatt, Master's Candidate Brock University email: kw96ad@brocku.ca

This study has been reviewed by and received ethics clearance through the Research Ethics Board, Brock University. Ethics File Number: (file# 16-252)
Appendix C: Organization Gatekeeper Recruitment Letter

(Research Group letterhead or Department/School) Date
Dear __:

My name is Katherine Gatt, I have extensive experience working as a Therapeutic Recreationist and Professional Practice Leader primarily within physical rehabilitation and am presently involved in graduate studies. This letter is a request for [name of organization]’s assistance with a project I am conducting as part of my master’s degree in the Department of Recreation & Leisure Studies at Brock University, under the supervision of Dr. Dawn Trussell. The title of my research project is “Investigating Gendered Physically Active Leisure in Communities: Perspectives of Women with Acquired Physical Disabilities. I would like to provide you with more information about this project that explores the experiences of women with acquired physical disabilities who seek to access or participate in physically active leisure within their communities.

The purpose of this study is to understand the experiences of women with acquired physical disabilities. Specifically, it seeks to examine how women with acquired physical disabilities negotiate, resist and/or become empowered through physically active leisure in the community context. Knowledge and information generated from this study may lead to a greater public understanding of the experiences of women with acquired physical disabilities that may be used to inform and promote inclusive physically active leisure opportunities within the community.

It is my hope to connect with women who are engaged in the programs of the [name of organization] to invite them to participate in this research project. I believe that the women in your program have unique understandings and stories relating to leisure experiences and disability. To be included in this study, participants must be English speaking adult women who have had an acquired physical [dis]ability for 2-5 years, between the ages of 18 and 45 who reside within a one-hour driving distance from Toronto. During the course of this study, I will be conducting interviews with women to gather their stories of leisure experiences. At the end of this study, the publication of this thesis will share the knowledge from this study with other leisure researchers, leisure programmers, and community members.

To respect the privacy and rights of the [name of organization] and its participants, I will not be contacting the women directly. What I intend to do, is provide the [name of organization] with information flyers to be distributed by the [name of organization] at their discretion. My contact information will be identified on the flyers or packages. If a woman is interested in participating they will be invited to contact me, Katherine Gatt to discuss participation in this study in further detail.

Participation in this study is completely voluntary. Each woman will make their own independent decision as to whether or not they would like to be involved. All participants will be informed and reminded of their rights to participate or withdraw before any interview, or at any
time in the study. Women will receive an information letter including detailed information about this study, as well as informed consent forms.

To support the findings of this study, quotations, and excerpts from the stories will be used labeled with pseudonyms to protect the identity of the participants. Names of participants will not appear in the thesis or reports resulting from this study. Participants will not be identifiable and only described by gender and as parent/child.

A pseudonym will be used to ensure that the name of your organization remains confidential. All paper field notes collected will be retained locked in my office and in a secure cabinet in the Recreation and Leisure Department at Brock University. All paper notes will be confidentially destroyed after three years. Further, all electronic data will be stored indefinitely with no personal identifiers. Finally, only I and my advisor, Dr. Dawn Trussell in the Recreation and Leisure Department at Brock University will have access to these materials. There are no known or anticipated risks to participants in this study.

I would like to assure you that this study has been reviewed and received ethics clearance through a Brock University Research Ethics Board (file # 16-252). However, the final decision about participation belongs to the women.

If you have any questions regarding this study or would like additional information to assist you in reaching a decision about participation, please contact me by email at kw96ad@brocku.ca. You may also contact my supervisor, Dr. Dawn Trussell at (905) 688-5550 ext. 4580 or by email dtrussell@brocku.ca.

I hope that the results of my study will be beneficial to the [name of organization], to your clients, and to the communities of clients including women with an acquired physical disability across Canada, as well as the broader research community. I very much look forward to speaking with you and thank you in advance for your assistance with this project.

Yours sincerely,

Katherine Gatt
Master’s Candidate
Department of Recreation & Leisure Studies
Brock University
Email: kw96ad@brocku.ca

Dr. Dawn Trussell
Associate Professor
Department of Recreation & Leisure Studies
Brock University
(905) 688-5550 ext. 4580
Email: dtrussell@brocku.ca
Appendix D: Consent Form

Investigating Gender and Physically Active Leisure in Communities: Perspectives of Women with Acquired Physical Disabilities

Katherine Gatt  Dr. Dawn Trussell
Student Investigator  Principal Investigator

Date: (Insert Date Here)

I have read the information presented in the information letter about a study being conducted by Dawn Trussell and Katherine Gatt of the Department of Recreation and Leisure Studies at Brock University. I have had the opportunity to ask any questions related to this study, to receive satisfactory answers to my questions, and any additional details I wanted.

I am aware that the interview will be audio recorded to ensure an accurate recording of the discussion for transcription purposes.

I am also aware that excerpts from the interview may be included in the conferences and/or publications to come from this research, with the understanding that the quotations will be anonymous. I am aware that the artifact that I have shared may be used in reports, presentations or publications resulting from this study. To ensure that the artifact remains anonymous, any faces or other uniquely identifying markers will be blurred.

I was informed that I may withdraw my consent at any time without penalty by advising the researchers.

This project has been reviewed by and received ethics clearance through, the Research Ethics Board at Brock University. I was informed that if I have any comments or concerns resulting from my participation in this study, I may contact the Research Ethics Office by phone at (905) 688-5550 Ext. 3035 or through email at reb@brocku.ca.

Consent:
I agree to participate in a study regarding the physically active leisure of women with acquired physical disabilities in the community. I am 18 years of age or older. I have read and understand the above consent form and voluntarily agree to participate in this study.

Printed Name  Signature  & Date
I give permission for the researchers to contact me to clarify my responses from the interview, if necessary.

I give permission for the researchers to store electronic data indefinitely without personal identifiers.

I give permission for my artifact to be photographed.

I would like to receive information on the findings of this study

I prefer to be contacted via:
- [ ] Email
- [ ] Phone
Appendix E: Participant Letter of Information

Title of Study: Investigating Gender and Physically Active Leisure in Communities for Women with Acquired Physical [dis]abilities

Date:

Student Investigator: Katherine Gatt
Department of Recreation and Leisure Studies
Brock University
Email: kw96ad@brocku.ca

Principal Investigator: Dr. Dawn Trussell
Department of Recreation and Leisure Studies
Brock University (905) 688-5550 ext. 4580
Email: dtrussell@brocku.ca

INVITATION
You are invited to participate in a study that involves qualitative research. The purpose of this study is to understand the physically active leisure meanings and experiences of women with acquired physical disabilities. Specifically, it seeks to examine how women with acquired physical disabilities negotiate, resist and/or become empowered through physically active leisure in the community context.

WHAT’S INVOLVED?
As a participant, you will be asked to take part in two interviews that will last approximately 60 minutes. Participants may choose to be interviewed in-person, via telephone or Skype. The primary student investigator will be present during the interview and will provide an agenda of questions and issues that may be explored. Moreover, participants are invited to contribute to add to the agenda as they see appropriate. Participants will be requested to bring an artifact to the second interview that has meaning to them related to the topic of the study. The artifact can be a personal possession such as a photograph, a written document, or a piece of recreation equipment. The interviews will be audio recorded and transcribed for research purposes.

POTENTIAL BENEFITS AND RISKS
The main purpose of this research is to understand the physically active leisure meanings and experiences of women with acquired physical disabilities. Specifically, it seeks to examine how women with acquired physical disabilities negotiate, resist and/or become empowered through physically active leisure in the community context. There is the potential for psychological risk as participants reflect on how they acquired their physical disability. To minimize this risk, you are encouraged to tell me if you are uncomfortable at any point throughout the interview and you may withdraw at anytime without any negative consequences. Participants will also receive a list of supportive community resources that they may contact if desired. Conversely, this study may increase participants’ knowledge about the research process. Additionally, it will allow participants to discuss the constructs of, gender, and disability that exist within community based physically active leisure in a private, confidential setting. These insights may contribute to positive changes toward advancing the inclusion of women in physically active leisure contexts and the broader community.

CONFIDENTIALITY
All data resulting from interviews will be kept strictly confidential. This means that your name, or any other identifying features, will not be associated with interviews you provide, so as to maintain identity anonymity. The names of participants and organizations involved in this study will be replaced by pseudonyms to protect the confidentiality of participants. Only the principal investigator and the student investigator will have access to the interview data, and thus may
know your identity by first name only. Responses will be used solely for research purposes. All electronic and paper versions of the data will be securely stored on a password protected computer in the student investigator’s private office and destroyed once final publications and presentations are complete. Email addresses will be secured stored on a password protected computer in the researchers locked office until the study findings are disseminated at which time email addresses will be deleted.

**VOLUNTARY PARTICIPATION**
Participation in this study is voluntary. If you wish, you may decline to answer any questions or participate in any component of this study. One’s decision to participate, not participate, or withdraw from this study will have no bearing on any services they might be receiving from the community organization supporting this study. As a participant, you may feel some obligation to continue participating in this study, but please know that you are free to decline to participate or to withdraw from this study at any time. Should you choose to withdraw from the research be assured that there will be no negative attribution, or personal repercussion because of this decision. In addition, your decision to not participate will not affect the student investigator’s ability to complete her research project or Master of Arts program.

**PUBLICATION OF RESULTS**
Results of this study may be published and shared at academic meetings and publications. Results of this study may also be shared with practitioners to enhance program design and delivery for inclusive physically active leisure activities. Following the completion of this study, participants will be e-mailed a summary of results.

**CONTACT INFORMATION**
If you have any questions regarding this study or require further information, please contact Dr. Dawn Trussell (Principal Investigator) or Katherine Gatt (Principal Student Investigator) using the contact information provided above. This study has been reviewed and received ethics clearance through the Research Ethics Board at Brock University (file # 16-252). Additionally, if you have any comments or concerns about your rights as a research participant, please contact the Research Ethics Office at (905) 688-5550 ext. 3035, reb@brocku.ca.

**HOW TO PARTICIPATE**
If you are willing to participate in this study, please email Katherine Gatt: kw96ad@brocku.ca and suggest a day and time that suits you and I'll do my best to be available. If you have any questions, please do not hesitate to ask. This research aims to promote greater inclusion of women with acquired physical disabilities within physically active leisure contexts and the broader community.
Appendix F: First Interview Guide - Physically Active Leisure Re-Engagement

Questions:

1. Could you share with me your story of acquiring a physical [dis]ability? You can start anywhere and structure your story however you like.

2. Could you start by telling me about your physically active leisure involvement before acquiring a physical [dis]ability?

Probe: Did you feel a sense of entitlement to participate in physically active leisure within your community?

3. Could you please tell me about your physically active leisure involvement since acquiring a physical [dis]ability?

Probe: After acquiring a [dis]ability, did you feel a sense of entitlement to participate in physically active leisure within your community?

4. What are some of the challenges related to living with a disability in order to participate in physically active leisure in the community?

Probes: How do you negotiate or overcome these challenges? What support do you require in order to negotiate or overcome the difficulties you are presently encountering when attempting to access or participate in physically active leisure within your community? What is required for you to access this support? What is your ‘wish list’? In a perfect world, what would this look like?

5. In relation to your interest or participation in physically active leisure, have you experienced changes in the way people act towards or interact with you since your acquired [dis]ability? If so, in what ways? If not, why do you think it has remained consistent?

6. Could you tell me about how being a woman with a physical [dis]ability has shaped your experiences of physically active leisure in the community differently than if you were a man?

Probe: How do you negotiate or overcome gendered influences in order to participate in physically active leisure in the community?

7. Please tell me about a high point in your physically active leisure experience in the community since acquiring a physical [dis]ability.

Probes: Who was involved? When did it happen? Where did it occur? What happened? What was the impact of this high point?

8. Please tell me about a low point in your physically active leisure experience in the community since acquiring a physical [dis]ability.

Probes: Who was involved? When did it happen? Where did it occur? What happened? What was the impact of this low point?
9. Please tell me about any turning points or key moments in your experience of the transition to becoming physically active in the community since acquiring a physical [dis]ability.

Probes: Who was involved? When did it happen? Where did it occur? What happened? What was the impact of this turning point?

This has been a really good beginning to help us start to understand your experiences of physically active leisure in your community since acquiring a physical [dis]ability. We will now move on to discuss your item of personal significance (your artifact, photograph, video) as that will help you to tell us a bit more about your experience of physically active leisure since acquiring a physical [dis]ability. But before we finish, is there something else you would like to add to your story today?

*Request that Participant bring an artifact to the next session & explain that the artifact is an item of personal significance that relates to the participants’ experience of community-based physically active leisure since acquiring a physical disability e.g. a photo, video or a piece of recreation equipment*

* Date & time participant is scheduled for the second interview: _____________________
Appendix G: Second Interview Guide - Informing Social Justice

Initial brief discussion thanking the participants for their time and efforts in the initial interview with mention that we will review content from the first interview following dialogue related to the photo or artifact the participant has selected to share.

Photo Interview Guide

1. Tell me about this photo.
   a) What is happening in this photo (if it’s a photograph)?
   b) Who is involved in this experience?
   c) When did this experience occur?
   d) Where did this experience occur?

2. What did this experience mean to you?
   a) What was the importance?
   b) Why did you engage in this experience?
   c) Why did you choose to share this experience with me today?

3. How does this picture reflect your experiences as a woman living with an acquired a physical [dis]ability? (only if they haven’t already answered this)

4. How does this picture relate to your physically active leisure experiences in the community as a woman since acquiring a physical [dis]ability?

5. How does this picture reflect your personal empowerment as a woman with an acquired physical [dis]ability within community-based physically active leisure?

Artifact Interview Guide

1. Tell me about this item.
   a) What is it?
   b) What is it used for?
   c) Who is involved in this experience?
   d) When did this experience occur?
   e) Where did this experience occur?

2. What does this item mean to you?
   a) What was its’ importance?
   b) Why did you engage with this item/in this experience?
   c) Why did you choose to share this item/experience with me today?

3. How does this item/experience reflect your experiences as a woman living with an acquired a physical [dis]ability? (only if they haven’t already answered this)

4. How does this item/experience relate to your physically active leisure experiences in the community as a woman since acquiring a physical [dis]ability?

5. How does this picture reflect your personal empowerment as a woman with an acquired physical [dis]ability within community-based physically active leisure?
Questions with a Social Justice Focus

6. Research suggests that the majority of Canadian women living with a physical disability are either inactive or minimally active, why do you think this is?

7. Social approaches to understanding disability describe physical impairment as a physiological condition, whereas disability is referred to as the way society disables people with impairments through attitudes, policies and built environments that exclude, oppress and/or make it difficult to participate in mainstream society. Please share your thoughts related to this concept of disability.

8. A definition of inclusion provided by the Canadian Centre for Disability Studies describes that within inclusive communities all people regardless of any observable or unobservable difference (1) have access to quality community necessities and amenities; (2) have the same opportunities to take part in all aspects of community life; and (3) have a sense of belonging and respect in the community. How have your community based physically active leisure experiences since acquiring a physical disability evidenced inclusion or exclusion within your community?

9. If you were able to engage in physically active leisure within your community to a greater extent than you are presently, how may this be beneficial to you?

10. Research suggests that of the few people living with physical impairments who participate in physically active leisure, most do so in disability-specific clubs which are unlikely to promote social inclusion into the broader society. What are your thoughts related to this finding?

11. If you are involved in physically active leisure that is primarily for individuals with a physical disability e.g. adapted sport, what drew you to this as opposed to participating in integrated physically active leisure within your community?

12. Research has suggested that there is a general perception that fitness centres are unfriendly environments for people with disabilities. What do you believe contributes to this belief?

13. Have your experiences (including potential challenges) accessing and participating in physically active leisure in your community since acquiring a disability impacted your health and well-being? If yes, please explain how.

14. In an ideal world, what would physically active leisure experiences in the community look like for women with an acquired physical [dis]ability?

15. Do you have any advice for community recreation practitioners for how they can promote greater inclusion of women with acquired physical [dis]abilities in community-based physically active leisure?

16. Do you have any advice for researchers related to investigating the inclusion of women with acquired physical [dis]abilities in community-based physically active leisure?
17. Where do you see your physically active leisure involvement transferring to other components of your life within the community?

a) How has it helped you with inclusion?
b) How has it acted as a barrier?
c) How has your physically active leisure involvement in the community since acquiring a physical [dis]ability impacted others?

18. Looking back, what would be your words of advice to a woman with a newly acquired physical [dis]ability who is interested in becoming involved in physically active leisure in the community? What would you tell her to help her succeed?
Appendix H: Appreciation and Feedback Form

Dear ,

I would like to thank you very much for your participation in this study. As a reminder, the purpose of this study is to understand the physically active leisure meanings and experiences of women with acquired physical disabilities. Specifically, it seeks to examine how women with acquired physical disabilities negotiate, resist and/or become empowered through physically active leisure in the community context.

The data collected during interviews will contribute to a greater understanding of leisure experiences, challenges, and negotiations experienced by women living with an acquired physical disability. Practically, this study may facilitate the development and promotion of inclusive physically active leisure experiences through effective education, programming, and policies. When I have completed the study in December 2017, I will provide you with a summary of the final results.

Please remember that the data will remain completely confidential and will be kept securely stored. If you have any questions about the study, please do not hesitate to contact me by email or telephone as noted below. As with all Brock University projects involving human participants, this project was reviewed by and received ethics clearance through, the Office of Research Ethics at Brock University. Should you have any comments or concerns resulting from your participation in this study, please contact the Brock University Research Ethics Officer (905 688-5550 ext. 3035, reb@brocku.ca)

Thank you for your participation.

Sincerely,

Katherine Gatt
Department of Recreation and Leisure Studies
Brock University
Email: kw96ad@brocku.ca

Dr. Dawn Trussell
Department of Recreation and Leisure Studies
Brock University (905) 688-5550 ext. 4580
Email: dtrussell@brocku.ca
Appendix I: Community Resource List

Centre for Independent Living in Toronto
Phone: (416) 599-2458
Email: cilt@cilt.ca Website: www.cilt.ca

March of Dimes
Phone: (416) 425-3463
Website: www.marchofdimes.ca

For information about Mental Health Services in Ontario, call 1-866-531-2600 (toll-free).

Spinal Cord Injury Ontario
Phone: (416) 422-5644
Website: scio.org

Multiple Sclerosis Society of Canada- Toronto Chapter
Phone: 1-416-922-6065
Website: toronto@mssociety.ca

The Arthritis Society
Phone: 1-800-321-1433
Email: info@arthritis.ca Website: arthritis.ca