

Invisible Barriers:

How public

attitudes affect

inclusive travel

Findings from focus groups
with disabled people

Full Report, July 2025

This report is part of a series of research conducted by the National Centre for Accessible Transport (ncat) since its launch as an Evidence Centre in early 2023. Whilst this is a standalone report, we would recommend it is considered alongside other ncat research published from late 2024. As ncat progresses further, reports and insights will also be published on [ncat's website](http://www.ncat.uk) (www.ncat.uk).

ncat encourages you to freely use the data available in this report for your research, analyses, and publications. When using this data, please reference it as follows to acknowledge ncat as the source:

ncat (2025). 'Invisible Barriers: How public attitudes affect inclusive travel, Findings from focus groups with disabled people'. Available at www.ncat.uk

This research informed the development of the main report and findings within *Invisible Barriers: How public attitudes affect inclusive travel*, available on [ncat's website](http://www.ncat.uk) (www.ncat.uk), where ncat conducted a study to identify what interventions would be most impactful in improving the attitudes of non-disabled people towards disabled people when using transport.

Content warning: this report includes details of verbal and physical abuse experienced by disabled people. It also has references to suicidal thoughts. If, after reading this report, you need support, please see [RiDC's Get Support page](https://ridc.org.uk/ridc-consumer-panel/get-support) on their website: <https://ridc.org.uk/ridc-consumer-panel/get-support>

Highlights

This report explores attitudes towards disabled people when travelling. It investigates the dominant types of attitudes, their impact on disabled people and recommendations for how attitudes can be improved.

The National Centre for Accessible Transport (ncat) ran three focus groups with 14 disabled people to explore attitudes in more detail. We wanted to learn more about the negative attitudes that create barriers for disabled people to travel by all modes of transport.

We found that disabled people experience significant barriers to transport because of the negative attitudes of transport staff and other transport users. The attitudes are widespread and have a significant negative impact on disabled people's wellbeing and independence.

Disabled people recommended improvements in three areas.

1. Co-production

Disabled people want to be meaningfully involved in designing and implementing solutions to negative attitudes.

2. Education

Disabled people want increased and improved education and training for both transport staff and other travellers.

3. Regulation

Disabled people want increased and improved rules and legislation to help enforce better attitudes.

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1 Why did we do this work?

Disabled people make 38% fewer journeys than non-disabled people. This figure has not changed for over ten years (Motability, 2022).

In 2023, the National Centre for Accessible Transport (ncat) was set up to help reduce this transport accessibility gap. ncat works with disabled people and people in the transport industry to understand how transport could be improved.

To understand more about the transport accessibility gap, ncat surveyed 1,195 disabled people about the barriers they experienced while travelling (ncat, 2024). **We found that 59% of disabled people experience negative attitudes when travelling, across all modes of transport.** The survey showed that the effects of negative attitudes are a significant barrier for disabled people when using transport.

When referring to negative attitudes, we mean the negative thoughts, feelings and behaviours people have towards disabled people. You can find a more in-depth definition in section eight of this report.

To understand what these negative attitudes are, how they affect disabled people when travelling and what interventions disabled people think would help, we conducted a focus group study to explore the survey findings in more detail. This report presents the findings of this study.

2 What did we do, how did we do it, and who did we work with?

ncat ran three focus groups, each including three-to-six participants. A total of 14 participants took part. Participants were identified through a screener questionnaire sent to disabled members of the [Community of Accessible Transport](#) Panel who had told us in our previous survey on transport barriers that they had experienced negative attitudes when travelling.

Participants were selected based on the following criteria:

- Impairment types and access needs
 - ▶ Those relating to mobility impairments
 - ▶ Those relating to cognitive impairments
 - ▶ Those relating to sensory impairments
 - ▶ Those with visible impairments and access needs
 - ▶ Those with non-visible impairments and access needs
- Age
- Gender
- Ethnicity
- Region of the UK.

The focus groups were categorised loosely by participants' impairment types and access needs:

1. People with mobility impairments
2. People with cognitive impairments
3. People with sensory impairments.

Although almost all participants had more than one impairment or access need, we planned each discussion to focus primarily on one of the three broad impairment categories. However, through our discussions, we found that age and the visibility of someone's impairments or access needs were more significant factors than impairment type when it came to experiencing negative attitudes.

As these focus groups comprised a small part of a larger study examining interventions to improve attitudes, further research is needed to gain a comprehensive understanding of the attitudes unique to individuals with varying access needs.

The sessions were held online using Zoom and lasted 90 minutes each. Two moderators facilitated each session, and participants were paid £75 for their time.

The focus groups discussed the types of attitudes disabled people experience whilst using all modes of transport, including walking, wheeling and cycling. Participants also talked about the impact of negative attitudes and their recommendations for how negative attitudes could be improved.

The focus groups were audio and video recorded. These recordings were uploaded into qualitative analysis software and then transcribed. Thematic analysis was then used to code the transcripts.

Quotes have been anonymised to protect the participants' identities. This means we have removed all personal information and used gender-neutral pronouns throughout.

3 What did we find?

Disabled people experience significant barriers to transport because of the negative attitudes of other people. Whether it's verbal abuse from other passengers, or transport staff not believing disabled people when they ask for what they need, negative attitudes are widespread and have a significant impact on disabled people's wellbeing and ability to travel independently.

3.1 What are the attitudinal barriers disabled people experience?

By attitudinal barriers, we mean the thoughts, feelings and behaviours that people have towards disabled people, which make it more difficult or impossible for disabled people to travel. You can read more about our definitions of attitudes and barriers in section 8 of the report.

Finding 1: The public and transport staff have a very limited understanding of disability

- **Young disabled people experience negative treatment because members of the public don't believe that young people can have access needs.** Participants told us how images of people using walking sticks and wheelchairs tend to depict older people. They felt that this leads to young disabled people being disbelieved or not treated fairly. Some shared instances of especially harmful behaviour they had experienced from members of the public due to being young and disabled.

“I was 15 when I had my accident, and when I was sort of relearning how to walk, I was really wobbly. So, I would look like I was drunk and as a teenager, people did assume I was drunk. And then I'd have fainting episodes and people would just step over me in the street because they'd just think, “oh, [he's] a drunk teenager” ... They think if you're young, it's just because you're stupid or drunk or on drugs or high; you can't be disabled.”

Participant with hearing, vision, mobility, social or behavioural, mental health and continence impairments

- **Young disabled people receive intrusive questions and unsolicited advice when using mobility aids.** They also reported receiving less support and assistance when using transport, compared to older people with similar access needs. Multiple participants highlighted that the public assumed young people using mobility aids were not trying hard enough to get better.

“I'm in my thirties, a lot of people will say to me, ‘Oh, you're a bit too young to be disabled. Why are you using a walking stick? It's like you're giving up,’ and it's just, it's really disheartening.”

Participant with mobility, dexterity and learning impairments

- **People with non-visible impairments and access needs experience disbelief and less help and support than people using assistance aids.** Many participants explained how they'd

experienced a noticeable difference in how transport staff and other passengers treated them when using – or not using – assistance aids. Some felt their access needs were treated more seriously when they ‘looked’ disabled (such as using a white cane, assistance dog, walking stick or wheelchair). They were often stared at, questioned and discredited if they did not have any obvious impairment or access need but were needing to use assistance or a priority space. One young participant told us they were spat at after fainting on the ground, with people assuming they were intoxicated. After they got their medical alert dog, this no longer happened.

“I have noticed, though, that other passengers are much more sympathetic to my disability since I've carried a [walking] stick. That seems to be an indicator for people to actually give me the seat [on public transport], when I need it.”

Participant with mobility and dexterity impairments

- **People whose impairments or access needs don't fit other people's mental models are accused of “faking” being disabled.** Many participants told us that the public and transport staff often have a “black and white” understanding of impairments. For example, incorrectly assuming that all blind people have no residual vision, that all wheelchair users cannot use their legs, or that health conditions are static and do not fluctuate. Participants also spoke about people making incorrect assumptions about their intellectual capacity based on their wheelchair use or diagnosis.

“People have a preconceived idea of what you're supposed to look like with a visual impairment. And if you don't fit that, then you must be faking, or you're a trainer [of a guide dog rather than its owner]”.

Participant with hearing, vision, mobility, social or behavioural, mental health and continence impairments

- **People with impairments or access needs that fall outside of other's mental models have to fight to get their access needs met.** Due to assumptions and stereotypes around disability, participants experienced negative treatment when travelling. One participant told us about how they were denied their prearranged assistance off an aeroplane due to being an ambulatory powerchair user, meaning they can stand or walk in certain circumstances.

“If you can stand as well as use a wheelchair, it's like people don't think you're genuine. When I was trying to get off the plane a few years ago, because I could stand, the [staff] wouldn't help me get off the plane. You know, they use the lifts, don't they, like to get off? And he was just like, ‘well, you can stand, you can get off, you can go down the stairs’. And I could not go down the stairs. There was a bit of a standoff between us, and the other passengers were waiting, and the crew were getting impatient, and the captain got involved, and it was just so embarrassing because everybody was looking, and I had to shout down the stairs to say, ‘I'm really sorry, I'm holding you up because they won't help me get off the plane’. And in the end, [the staff] did [help], and they took my power chair out of the hold and brought

it along. It was just awful. It just put me off flying, although we still do fly. But it's just that added anxiety and [the staff member] was just like, 'Because you can stand there, you can get off the plane yourself'. And it was just really stupid."

Participant with hearing, mobility, dexterity and learning impairments

Finding 2: Frontline transport staff sometimes do not support disabled people's independence and do not to provide equitable treatment.

- **Staff don't always respect disabled people's agency.**

Participants described feeling ignored and not listened to by members of staff, who often made decisions for the passenger without consulting the individual. There were instances of people being lifted onto a train by staff members despite wanting to walk and being refused a ramp because they were told they did not need it when they did. One participant explained how staff members often directed their comments or questions to the person standing next to them rather than directly addressing the passenger, assuming they could not speak for themselves.

"The number of staff members who will speak to the person next to me who quite often I won't even know, but they will assume that I can't possibly travel on my own. So, they'll address whoever's next to me, rather than addressing me. It's ridiculous [...] I go up and ask for help, so it's quite obvious I can manage to have a conversation with someone yet, they'll still speak to some

random person who's stood too close to me and looks like they might be with me.”

Participant with a mobility impairment

- **Staff are not always willing to help.** Participants described often feeling like a burden to staff, who responded to requests for assistance with a reluctance to engage or provide help. This aversion was experienced especially with bus drivers, who were sometimes unwilling to lower the bus for disabled passengers or who refused to ask passengers with buggies to move from the wheelchair space.

“The general attitude, unfortunately, with trains and with bus drivers, is always like ‘eye-rolling’. And you can always see them about to press the button to close the doors because they’re just like, ‘Oh, no, I don’t want to have to lower the bus. I don’t want to have to deal with that.’ Which then makes you feel like this big. [Participant holds thumb and forefinger together, signifying a very small size].”

Participant with mobility, dexterity, and learning impairments

Finding 3: Other passengers are sometimes abusive towards disabled people using transport.

- **Many participants have memorable experiences concerning verbal abuse from other passengers, with many receiving threats of physical violence.** Participants described being sworn

at, laughed at, forced off a train, their carers being threatened and intimidated and being called derogatory and dehumanising names. One individual shared that they had been called a “Parasite” and told, “You should have been put down”. We know these kinds of abuse are not unique to transport (Chapman, 2020). However, within a transport context, participants described the altercations happening more often when there was a perceived competition for space – whether that is seats on a bus, a wheelchair priority area or an accessible parking space.

“I remember once when the ramp didn't work - I was on the bus and it was an electronic ramp, so I had to tell the bus driver to take the bus out of service. And these elderly ladies come up to me and said, ‘We're gonna be fu***ng late for work because of you’. And then I had another, a mother with a child in buggy and I said, ‘There was no space’ and she said, ‘You're gonna make me late for picking my fu***ng daughter up from school’.”

Participant with mobility, hearing, dexterity and learning impairments

- **Wheelchair spaces and priority seats are often a source of tension between passengers.** Focus group participants described instances where passengers on buses did not want to give up their seat. Participants also highlighted moments when they themselves had to give up their seat for another disabled or elderly person due to a lack of space. Wheelchair spaces also regularly led to tense interactions with parents with buggies, who were not always willing to share that space with someone using a wheelchair.

“I've used the bus on a few occasions, and I've only found it usable during the middle of the day, and the experience has been that pram users will not let you have the space that's allocated to wheelchairs. So I avoid that.”

Participant with mobility and continence impairments

- **Other transport users don't always understand or respect the use of Blue Badges or lanyards by disabled people.**

Participants felt that other passengers had a lack of understanding about the sunflower lanyard, questioning disabled passengers' use of it. There were instances where people were interrogated for using a Blue Badge when parking, as their validity was put into question.

“I wear a sunflower lanyard. But a lot of people will go up to me and go, ‘You do know it's not COVID times?’ Like what? And they go, ‘Well, you only had to wear it during COVID’ and, well, it actually says the charity of the condition that I have on it. And I don't understand why people think that they have a right to comment on it. Even Blue Badges, even though I use a walking stick, and I have a wheelchair, people still go up to me and whoever is driving me and say like, ‘Oh, you don't really need one’.”

Participant with mobility, dexterity and learning impairments

3.2 Where do disabled people think these negative attitudes come from?

Finding 4: Politics and news media play a significant role in shaping negative attitudes towards disabled people.

- **Contemporary politics and media portray disabled people in a negative light.** Participants noticed a significant negative shift in the last few years in people's attitudes towards disabled people and how they are discussed in politics and on the news. Participants felt that politicians portrayed disabled people as "scroungers" and as societal "baggage" and that this filtered down into the general public's perception of disabled people.

"I think one of the biggest problems we all face right now is the fact that the media are portraying disabled people as scroungers, as to be hangers-on, you know, things like that. It's such a negative concept of what disability is, and it seems to have changed quite a lot in the last few years. I'm not gonna get into government or politics or anything, but I think it's changed very much where disabled people seem to have a handout, that they always want more, which is complete nonsense. All we want is an independent life."

Participant with mobility, dexterity, vision, hearing, cognitive impairments

- **There is a lack of nuanced representation of disabled people in media.** Participants highlighted how most stories or sentiments

they see about disabled people are either through a negative benefits lens or through a lens of what is called 'inspiration porn' (Young, 2014).

"So there's kind-of two extremes. To some people, we are an inspiration and 'Oh, wow, it's amazing to see you out the house', but it's, like, done in quite a patronising way. Like, I've just been in a supermarket, buying milk, and people have told me how inspiring I am for just going out. And I find that really, I mean, it's different if I've just, like, done something that's actually inspirational, but buying milk isn't inspirational."

Participant with mobility, vision, hearing, social or behavioural, mental health and continence impairments

Finding 5: Structural and service barriers contribute to the poor treatment and discrimination from staff.

- **Current transport barriers foster uncooperative behaviours from transport staff.** Participants highlighted how they often felt that transport staff didn't know, or want to know, how to deal with physical access barriers. This resulted in tense and unhelpful interactions with transport staff, where disabled people felt overlooked or discriminated against.

"A lot of bus drivers whilst they, I don't know if everybody's aware, but there was a case a few years

ago now, Paully vs. FirstGroup¹, and the Supreme Court made a judgment, that drivers must do more than just ask people to move if a wheelchair user needs to use the wheelchair space. And so many times I have been on the bus and drivers they go, 'I've got two buggies on mate'. And I'm like, 'You still have to ask them to move' and he was like, 'No, no, sorry, I don't, bye' and drive off. And I've had some drivers not even stop at the curb and stick their fingers up at me as if to say, 'I'm not stopping because I've got two people on'."

Participant with hearing, dexterity and learning impairment

- **There are not enough staff members to deal with the needs of all passengers.** Focus group participants expressed that staff weren't always available to help at stations or onboard trains or buses. Staff shortages also led to stressful working conditions and, as a result, unhelpful attitudes towards disabled people.

"Bus service is a nightmare. You don't interact with staff. The bus driver just sits there in his little armour-plated box, and he never gets out of it. We don't have conductors anymore. We don't have people on the bus to help. You just don't get any help at all, getting on and off the bus, [you can] forget it - you don't get [help]. Interacting with staff, there is no interaction."

¹ See Disability Rights UK, no date, for more information about this court case.

**Participant with mobility, hearing, vision, dexterity
and memory impairments**

3.3 What are the impacts of attitudinal barriers on disabled people?

**Finding 6: The negative attitudes that disabled people face
when using transport have alarming implications on their
mental health and confidence**

- **Participants expressed feeling anxious and scared when using public transport.** This is due to both the physical access barriers they face and the negative interactions they've had with staff and other passengers – something which felt inseparable for many. Some participants discussed how the negative interactions had led to panic attacks, dissociation, and feeling suicidal. These barriers and experiences actively harmed their sense of confidence.

“I've been refused to get on the bus before because the driver wouldn't lower the ramp. And, you know, my experience mirrors quite a few of what other people have said, like just the attitude and it makes you so anxious. You know, you want to get on the bus [...] you've got a bus pass, so you don't have to pay. But the anxiety and the butterflies I get at just the thought of me going on a bus.”

**Participant with dexterity, hearing and cognitive
impairments**

- **Participants were experiencing suicidal thoughts because of the negative attitudes they had to deal with.** For some, the immediate impact of trying to travel whilst experiencing constant attitudinal barriers could have a devastating effect on their mental health, with one person asking, “What is the point?”.

“I'll be honest with you, there are sometimes when I've come off public transport and I will say this, and sorry to shock you, I've come off public transport feeling suicidal.”

Participant with hearing, dexterity and learning impairments

Finding 7: Disabled people are not using certain transport modes, are travelling less and are not feeling able to travel independently because of negative attitudes

- **Participants were leaving their home less because of the mental-health impacts of negative attitudes.** Disabled people told us how they leave the house less because they don't want to face the negative attitudes alone.

“You become introverted. You don't want to go out. So, you then have those long spaces of time. I don't know about anybody else feels, but I just don't want to go out unless there's someone with me. I've got my husband, or my older children and they can assist me. But I don't want to be like that. I want to be in a position of when I feel I want to go out, I can do it on my own.”

Participant with mobility and continence impairments

- **Some participants expressed avoiding public transport altogether.** As a result of the access barriers and numerous negative experiences with staff and members of the public, some participants actively chose to use private transport whenever they could.

“I've had all sorts of experiences including some aggression from people who don't like the fact that I need a space to get my wheelchair on. They just won't move. You say something, I've had abuse. So, I go in my car now, sadly.”

Participant with mobility and continence impairments

- **Participants' desire for independent travel was at odds with the realities of using public transport.** Participants expressed frustration at not being able to travel without having someone accompany them because of the physical barriers and negative attitudes they faced. They often felt they had no other choice but to travel with family members, partners and carers for assistance.

“My child, they're 16, they're a normal 16-year-old, but they just happen to need a wheelchair, and they want their independence. They don't want mum and dad to be taking them everywhere, and they've got a bus pass with the carers thing on it so they could see friends, and I just worry that they're at the age where they want to sort of get out and do stuff and be independent but attitudes towards people in wheelchairs and stuff, it's gonna put them off.”

Participant with dexterity, hearing and cognitive impairments

Finding 8: Disabled people are feeling apathetic, disaffected and don't trust that things will get better

- **Participants don't believe that transport organisations or government are going to improve attitudes towards disabled people.** People told us that they were underreporting the negative treatment they experienced when using transport because they didn't think anything would change as a result.

“Unfortunately, attitudes aren't great anywhere. Sadly, and as a person with disability, it does knock your confidence, and it does make you feel a bit inadequate and small. And sometimes it's not really worth the hassle - I don't have the energy to follow up every negative experience. Be it with public transport or be it [with other areas] because no one actually really cares, including government sometimes I don't think.

Sometimes it's just easier to just stay at home and not even try. But like people say, I want to have a life, I want to get out, but it just takes a lot of energy and a lot of courage sometimes.”

Participant with hearing, dexterity and learning impairments

3.4 What are the positive attitudes disabled people experience?

By positive attitudes, we mean the thoughts, feelings and behaviours that people have towards disabled people, which make it easier for disabled people to travel.

Finding 9: Staff providing individualised assistance as standard makes it easier for disabled people to travel

- **Despite some negative experiences, several participants told us about transport staff being helpful and accommodating.**

Participants had many experiences where staff had accommodated their needs and provided helpful assistance. Staff were described as 'sympathetic', 'understanding' and willing to go out of their way to help. Crucially, in these examples, staff provided individualised support which worked for the disabled person's needs and preferences. As well as this, staff assumed such assistance should be the norm.

"The positive attitudes have been, as I say, the ones where people do go out of their way to help and are understanding and sympathetic. And I can draw on one experience when I actually travelled on my own from my home to the town centre. And unfortunately, the tram didn't stop at the right point of the access point for the disabled. So, it was lovely that the driver actually got out with another member of the public and assisted me to get on. And then he made sure that when I got to my destination in town where I needed to alight, he made sure every other passenger let me get off first by saying 'I'm not opening the

doors until everybody's out of the way, allow this person in their scooter to get off first, and then I will let everybody else alight and get off.' And that was one of the positive experiences. I actually scooted up to where he sits in his cabin and I said, 'Thank you very much', and he said, 'No, you shouldn't be thanking me because that should be the norm.' And that is true, that should be the norm!"

Participant with mobility, behavioural and continence impairments

Finding 10: Other passengers respectfully offering help was seen by participants as a positive experience that made it easier to use transport

- **Participants told us about times when other passengers had helped them overcome physical barriers in their environment.**

A blind participant told us about members of the public helping them find their next bus after a route diversion, and a participant with a mobility impairment was offered an arm, if they wanted it, to help them up a slope. In contrast to other participants who mentioned being grabbed or pushed without being asked, in the positive stories, many mentioned being “offered” help, instead of just being given it – whether they wanted it or not. Asking for consent before touching a person or their mobility aid was what separated some negative and positive interactions.

“I had a time when I was traveling, I was using my wheelchair, so I had my [wheel]chair, my [assistance] dog and a massive suitcase and I'm trying to get on a bus with all of these things.

And this kind person saw that I was struggling, and they offered to help lift my suitcase on for me. And that just made it so much easier. And then when I was getting off, they helped lift it down as well, which was really kind.

Again, that's very situational, but I would say it's about not being afraid to ask if someone wants help. I'd say, never assume and just do it, because that's also annoying, but not being afraid to ask like, 'Do you need help?' and just respecting the answer, whether that be 'Yes, please' or 'No.'"

Participant with hearing, vision, mobility, social or behavioural, mental health and continence impairments

3.5 What improvements do disabled people recommend?

Finding 11: Meaningful collaboration with disabled people is critical in the design of transport infrastructure and improving attitudes.

- **Participants felt that many existing accessibility issues resulted from disabled people not being included in the design and planning of transport services.** Participants made distinct connections between built environment barriers and negative attitudes – suggesting that improving infrastructure, in collaboration with disabled people, would lead to improved attitudes. Participants discussed the importance of including disabled people's perspectives in the design stages of

infrastructure, as they are the experts when it comes to accessibility and barriers to transport.

“Empower transport companies to have focus groups with disabled people directly. Not private companies or anything else, just talk to us, communicate to us, that way we will educate you just like you can educate us. We will actually educate you on what we need. Just talk to us, stop alienating us.”

Participant with mobility, dexterity, hearing, vision and cognitive impairments

- **Transport organisations need to understand the diverse experiences of disabled people when traveling.** Participants felt that transport providers – including decision makers and front-line staff – do not understand the nuances of disability, and how certain design features impact people with various impairments and access needs. They felt harmful design choices are made because of the simplistic assumptions some professionals hold about disabled people. By working with disabled people, rather than relying on uninformed beliefs about disability, physical and attitudinal barriers can be reduced.

“When making these decisions, don't assume that you know what we need. And also remember that all these different disabilities are different, and everyone is affected differently. So, if they're doing some kind of project, they need to make sure they're covering mental health, neurodivergence, physical disabilities, sensory disabilities, dementia, you know, all these different sort of

areas of disability, they should have someone that sort of covers each area, you know, different mobility aid users, canes, wheelchairs, guide dogs, all of it. And just work with us rather than going, ‘Oh, yeah, that will fix it’, you know, without actually consulting the community you’re trying to help.”

Participant with mobility, hearing, vision, cognitive and continence impairments

Finding 12: Education and awareness raising through humanising disabled people, along with increasing understanding about disability and barriers, are key aspects for improving public attitudes.

- **Participants highlighted the importance of public education and raising awareness about disabling attitudinal barriers.**

They discussed the need to humanise the public perception of disabled people and help the public understand what it’s like to live with an impairment or unmet access needs. Participants particularly stressed the role of education and the importance of having young people be aware of disability as a way of combating prejudice and ableism.

“We really do need some public information films about raising awareness, showing people what it means if you park in a Blue Badge space, why you should give people space and what the impact is on the lives of other members of the society by their bad actions.”

Participant with mobility and continence impairments

- **Transport staff need improved training that includes disabled people.** Participants felt it was important for disability training to be widely available across all customer-facing roles, and for training to include disabled people and their lived experiences. Investing in training was seen as a major priority for participants who felt that it could reduce a lot of the barriers they faced.

“I just want to make sure that you've had training in every job which is customer focused so that anybody who's providing a service to the public, whether it's in a store or coffee shop, wherever, they should be trained to look and consider how to deal with people with disabilities.”

Participant with a mobility and continence impairments

Finding 13: Political and social change and a commitment to improving attitudes towards disabled people need to “come from the top”.

- **Participants felt there needed to be a large political and social shift about our perceptions of disability.** They discussed the role of government departments, political voices, campaigns, public role models and news stories in shifting the tides on how society talks about and understands disabled people. Participants stressed the importance of humanising disabled people and moving away from the negative connotations that disabled people are often associated with.

“There's just nothing coming from the government. They're just wanting to vilify because we're costing them money [...] But until they actually respect us as individuals that can play a part in society, we're not all scroungers, we're not, we're not all of this and we're not all of that. But that sort of, that insidious commenting just slowly eats away and gets into all the newspapers, social media, you know, it gets everywhere, and you know, people soon get indoctrinated into old generational thinking [...] all the hatred starts again, and all the social media starts again and it's just a continual loop.”

Participant with mobility, cognitive and learning impairments

- **Participants wanted new and improved legislation which is enforceable.** They discussed the lack of leadership from the top of government and the lack of action from local authorities. Participants talked about wanting real consequences for non-disabled drivers who park in Blue Badge parking, enforceable priority spaces on buses and repercussions when transport staff behave negatively towards disabled passengers.

“I think unless there are repercussions for poor customer service, whether it's from government... But unless there's repercussions for bus drivers that don't help, with bus drivers that stick their [middle] fingers up - and obviously, you can't prove it because they'll just deny it obviously. But unless there's like some kind of come back and if people can get away without

caring, they, they will, unfortunately. And it seems to be not just in transport, it seems to be everywhere.”

Participant with hearing, dexterity and learning impairments

4 What conclusions did we come to?

Many different disabled people experience negative attitudes when travelling for a variety of reasons. From being disbelieved to being disrespected, staff and other passengers behave in ways which make it more difficult or sometimes impossible for disabled people to travel. The impact of these negative attitudes has a significant negative effect on disabled people’s wellbeing.

This research shows that more evidence-based interventions are needed to improve disabled people’s experiences and reduce attitudinal barriers when using transport. Crucially, these interventions need to be co-produced with disabled people. This means sharing power and responsibility when making decisions and designing new ideas.

Interventions should be focused on educating the public as well as transport professionals. Disabled people want non-disabled people to understand more about what it means to be disabled and how they can respectfully support disabled passengers. Ultimately, disabled people want to see change coming from the government, with more regulation to ensure disabled people are treated fairly when travelling.

5 What should happen next?

Below are ncat's recommendations for what should happen due to these findings, both in the transport industry and local and national government.

Recommendation 1 – Co-production

Future interventions to improve attitudes towards disabled people when travelling must be co-produced with disabled people.

Recommendation 2 – Education

Both the public and transport staff need increased and improved education. This includes formal training and public perception campaigns led in collaboration with disabled people.

Recommendation 3 – Regulation

Government bodies need to take responsibility for improving attitudes towards disabled people. New and improved regulations are required to reduce discriminatory language and behaviour.

6 What will ncat do next?

Below are ncat's promises about what we will do with the findings in this report.

Recommendation 1 – ncat will use and share these findings to inform future research in conjunction with other priorities identified through the voices and experiences of disabled people.

Recommendation 2 – ncat will work with partners and stakeholders to make these findings available for them to use to robustly evidence the issues faced by disabled people when accessing transport.

Recommendation 3 – ncat will work with policy makers, transport providers and industry to translate these findings to influence future policy and to develop solutions, products and services to reduce the transport accessibility gap.

7 About ncat

The National Centre for Accessible Transport (ncat) works as an Evidence Centre developing high quality evidence, best practice, and innovative solutions to inform future disability and transport strategy, policy, and practice by:

- Engaging with disabled people to better understand their experiences and co-design solutions
- Amplifying the voices of disabled people in all decision making
- Collaborating widely with all transport stakeholders
- Demonstrating good practice and impact to influence policy.

ncat is delivered by a consortium of organisations that includes Coventry University, Policy Connect, The Research Institute for Disabled Consumers (RiDC), Designability, Connected Places Catapult, and WSP. It is funded for seven years from 2023 by the Motability Foundation.

For more information about ncat and its work please visit www.ncat.uk

To contact ncat, either about this report or any other query, please email info@ncat.uk



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9 Terms used in this report

- **Attitudes**

Attitudes refer to how people feel, think and react toward something, such as an object, person or idea. These thoughts and perceptions are shaped by past experiences, social norms, beliefs and emotions. Attitudes are not fixed and can evolve positively and negatively as we experience new events, become more knowledgeable or interact with new people. Attitudes often guide how people behave. They can automatically influence decisions and actions without much conscious thought.

- **Barriers**

Based on the Social Model of Disability, barriers are the physical, social and structural problems that make it difficult or impossible for disabled people to participate in society.

- **Behaviours**

A behaviour is any observable action or response to an organism. Behaviours are the actions or reactions that people make in response to different situations. They can be voluntary, deliberate (a conscious decision to engage in a specific way), or automatic (habits). Behaviours are shaped by a number of factors, including attitudes, habits, social norms, social influences, environmental cues, skills, and physical or cognitive ability.

- **Co-production**

Co-production is when people with lived experience work with professionals to decide how something is designed, commissioned

and delivered. In co-production, service users share the decision-making power in equal and reciprocal relationships.

- **Inspiration porn**

Coined by the disabled activist Stella Young, inspiration porn is a type of negative attitude where non-disabled people objectify disabled people by being astounded by their doing everyday things. The attitude assumes disabled people have minimal capacity in their daily lives and is used to encourage non-disabled people to overcome their personal challenges.

- **Mental models**

A mental model is an internal cognitive representation of how something works in the real world. They are the frames of reference that people use to help understand and process the world around them and influence their day-to-day behaviour.

While some mental models are similar for many (like stopping at red lights), they can vary by individual and culture. When faced with challenges to their mental models, people may adjust their thinking, leading to learning. However, this can also cause confusion or rejection of new information, resulting in negative reactions.

- **Social Model of Disability**

Developed by disabled people, this model says that disability is a result of barriers in society instead of an individual's impairment or difference.

10 Appendices

Table 1. Demographics of disabled people who participated in the focus groups

Category	Breakdown
Age	18-30 (3), 31-40 (3), 41-50 (2), 51-60 (4), 61-70 (1), 70+ (1)
Gender	Women (8), Men (6)
Impairments and access needs	Mental health (6), Memory (1), Non-visible (6), Continence (7), Vision (4), Specific learning difficulty (4), Social/behavioural (such as Autism or ADHD) (4), Mobility (13), Hearing (5), Diet (2), Dexterity (7), Communication (3), Stamina (3)
Ethnicity	Other Asian background (1), White (11), Mixed - Black and White African (1), Other mixed/multiple ethnic background (1)