Towards Barrier-Free Tourism: Initiatives In The Asia Pacific Region

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Abstract

Given the growing numbers of consumers of leisure-oriented products and services for whom barrier-free travel would be welcomed, the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP) identified Barrier-Free Tourism as presenting market potential for the Asia-Pacific region. The research, subsequently commissioned to demonstrate an economic rationale and to develop guidelines for the development of a BFT industry, fulfilled these and other objectives through the use of a literature review, secondary data, questionnaires and webbased searches The final report submitted to ESCAP incorporated numerous examples of best practice and recommendations in conjunction with the conclusion that BFT indeed presents a significant, market potential.

Résumé

Compte tenu du nombre grandissant de consommateurs de produits et de services de loisirs qui apprécieraient un tourisme sans barrière, la Commission économique et sociale de l'ONU pour l'Asie et le Pacifique (CESAP) a identifié le Tourisme sans barrière (TSB) comme étant un marché éventuel pour la région de l'Asie et du Pacifique. La recherche commandée par la suite, pour démontrer le bien-fondé économique d'une industrie du TSB et en élaborer les lignes directrices de développement, a atteint ces objectifs et d'autres en utilisant une revue de la littérature, des données secondaires, des questionnaires et des recherches sur l'Internet. Le rapport final soumis à la CESAP comprenait de nombreux exemples de pratiques d'excellence et des recommandations, conjointement avec la conclusion que le TSB représente, en effet, un marché éventuel significatif.

Introduction

The Asia Pacific region has been identified as an area that will, over the next decade, experience exceptional tourism growth in terms of international tourist arrivals and receipts. This was particularly so of East Asia and the Pacific that had the highest growth rate from 1999 to 2000 in terms of receipts (9.6%) and international tourist

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arrivals (12.7 %) (WTTC, 2002a, 2002b). Although the long-term effects of subsequent setbacks are still being evaluated, the newly developed World Tourism Barometer offers, at least for the short term, an optimistic outlook for travel and tourism in all regions (WTO, 2002, 2003).

Within a generally positive tourism scenario for the Asia-Pacific, Barrier-Free Tourism (BFT), serving people with disabilities among others, was identified by the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP), as an important, particular market segment to be developed for the region. This was above and beyond seeing tourism as "an effective tool in furthering the human rights of people with disabilities in the destination communities" (Vignuda, 2001).

The research on which this paper is based was commissioned in 2002 by ESCAP representing approximately 60 member and affiliate countries, and grew out of previous initiatives. In 2000, at the end of the period declared by the governments of the region to be the Asian and Pacific Decade of Disabled Persons (ESCAP, 2002), a conference was convened with a view to discuss and identify key policy and strategy elements for promoting barrier-free tourism. The signatories of the resultant the Bali Declaration on Barrier-Free Tourism for People with Disabilities reiterated the acknowledged need for, and benefits of. barrier-free tourism facilities and services for people with disabilities, older persons and families with young children as "growing groups of consumers of travel, sports, and other leisure-oriented products and services" (CBRDTC, 2000).

In light of the potential of BFT in a competitive global tourism market as well as an effective tool for enhancing socioeconomic benefits in the region, the signatories reaffirmed their commitment to promoting BFT in the ESCAP region. They urged and requested the various stakeholders including government bodies, disability organizations and tourism service providers to work co-operatively towards promoting barrier-free tourism.

Following the recommendations of yet other initiatives (Vignuda, 2001 and ESCAP, 2001) ESCAP then commissioned further research, the four major objectives being:

- To demonstrate an economic rationale for developing BFT;
- To identify existing constraints to BFT;
- To identify examples of BFT good practice within ESCAP member countries; and
- To develop guidelines that would foster the development of a BFT industry.

Methods to Meet the Objectives

The methods used to attain these objectives were three-fold:

- A review and analysis of the pertinent literature and secondary data on tourism, disability and barriers to disability tourism:
- An open-ended questionnaire survey of 26 member countries specified by ESCAP as having developed or developing tourism potential sought to determine the disability statistics, legislation and examples of BFT in member countries; and
- An Internet-based search to determine the extent of BFT information available to international tourists wishing to travel to these same 29 countries. This final step was deemed crucial since the Internet is becoming the preferred source of tourism information (Weaver and Opperman, 2000), a trend that applies to people with or without disabilities. Recent US research showed that 46% of people with disabilities used the Internet as their preferred source of information,

ranked third after previous experience and word of mouth (Harris Interactive Market Research, 2003).

To meet ESCAP's limited time frame, the scope of the research was reduced to include only 26 of the approximate 60 member and affiliate countries. In August 2002, each of the contact persons identified by ESCAP was sent a letter outlining the research and a questionnaire. After four weeks, if there was no response a reminder was sent, followed as necessary a week later by another reminder and a new copy of the questionnaire. Seven countries responded to the questionnaire. Follow-up with other countries revealed that the main reasons given for non-response were that they had no knowledge of BFT in their countries, information on disability was unavailable and that it was not a market segment that they had considered.

An unexpected opportunity to verify first-hand the accuracy and reliability of some of the BFT information supplied on websites for several tourism facilities came when a member of the research team, himself a wheelchair user and an Australian accredited access auditor, went to present the final report in March 2003, at the Mekong Tourism Forum in Hanoi.

For the purposes of this research Barrier-Free Tourism was defined as:

Tourism that enables people with disabilities to function independently and with equity and dignity through the delivery of tourism products, services and environments that are inclusive of physical, vision, hearing and cognitive dimensions of access (adapted from New South Wales Government, 1998;

Olympic Co-ordination Authority, 1999).

An Economic Rationale

In addition to examining the tourism statistics and trends reported by world tourism bodies for the Asia Pacific region, the literature and data with regards to disability and tourism for people with disabilities were also examined.

Although Western nations and the UN have recognized the issues surrounding the ageing of populations (United Nations, 1993), very few nations have undertaken research to determine the prevalence of disability in the community. Darcy (2003a) drew together disparate sources and summarized known disability rates and the estimation of the numbers of people with disabilities identified in various countries (Wen,1999; Takamine, 2001; van Lin, Prins and Zwinkels, 2001; Pfieffer, 2002).

The potential for Barrier-Free Tourism to and within the Asia Pacific Region comes mainly from three sources. Firstly, the Asia Pacific's established international tourism countries of origin and primary sources of arrivals and receipts have significant numbers of people with disabilities. These include the USA (53m), Germany (14.2m), UK (10.2m), France (9m) and Canada (4.7m). Secondly, tourists come through intra-regional tourism from Australia (3.6m) and New Zealand (0.7m). Together, these two groups account for 116m people with disabilities. Thirdly, developing nations that have emerging domestic and outbound tourism markets such as China (62m) and India (47.2m) offer future market development potential. These figures have to be tempered because of economic, cultural and social barriers in each country.

In the countries of the first two groups, Barrier-Free tourism is already recognized as an important market segment.

The potential economic or market significance or the lost opportunity of not servicing the tourism needs of people with disabilities was defined in a number of studies including those of Touche Ross (1993), Keroul (1995) and English Tourism Council (2000). Using secondary data about the level of disability in populations, they extrapolated the implications for tourism. More recent research from the U.S. values the disability tourism market at USD13.5 billion per year (Harris Interactive Market Research, 2003). The Australian market alone was valued at AUD1.5 billion per year (Darcy, 1998).

In those same countries of origin, the senior tourism market has also emerged as a major new segment (Blazey, 1987; Capella and Greco, 1987; Lieux, Weaver, and McCleary, 1994; Queensland Office of Ageing, 1998; Ruys and Wei, 1998; McDougall, 1998 and Schwanen, Dijst, and Dieleman, 2001). Given the nexus between the seniors market and people with disabilities due to the increasing incidence of disability as people age (United Nations 1993; Statistics Canada, 1994; Australian Bureau of Statistics, 1998), Barrier-Free Tourism offers the industry a major new market segment opportunity by recognizing the similarity of tourism needs of the groups and merging their requirements.

The important economical rationale and ramifications of this market potential are above and beyond that of seeing tourism as an effective tool for furthering human rights and poverty alleviation in the communities (Vignuda, 2001).

From literature and secondary data briefly presented above, it was shown that there is an economic rationale for developing barrier-free tourism given the growing numbers of people, many of whom are already practicing tourism, who could benefit from it.

A review of yet other literature shows that people with disabilities have the same motivations to travel as the rest of the population. Many could and would travel if the tourist environment were better adapted to their needs. While all tourists undoubtedly experience barriers to tourism participation, it has been found that these barriers disproportionately affect people with disabilities (Woodside and Etzel, 1980; Smith, 1987; Foggin, 2000; Darcy 2003b).

Constraints to Barrier-free Tourism

Smith (1987) presented the first academic paper to address disability and tourism. categorizing the barriers facing people with disabilities undertaking leisure-related travel as being intrinsic, environmental and interactive barriers. In leisure literature, similar categories are identified as intrapersonal, structural and interpersonal barriers (Crawford, Jackson and Godbey, 1991). Smith wrote of intrinsic (or intrapersonal) barriers as those resulting from an individual's own levels of physical. cognitive or psychological functioning. Environmental barriers are external to the individual and include attitudinal barriers towards people with disabilities, architectural barriers, ecological barriers, transportation barriers, economic barriers, rules and regulations barriers, and barriers of omission. Interpersonal or communication barriers result from the reciprocal interaction between the individual and their social environments. It should be noted that each category varies for each individual, based on their impairment type and the level of independence.

Following Smith's (1987) call for greater empirical research, a number of studies and research papers have focused on the barriers to tourism faced by people with disabilities from a demand perspective. This includes work in Australia (Murray and Sproats, 1990; Muloin and Weiler, 1991,

Darcy, 1998; 2002a; 2002b, 2003a; 2003b; Market and Communication Research, 2002), Canada (Keroul, 1995; Foggin, 2000), USA (Cavinato and Cuckovich, 1992; Turco, Stumbo, and Garncarz, 1998; Burnett and Bender-Baker 2001; Harris Interactive Market Research, 2003), UK (English Tourism Council, 2000; Goodall, 2002) and Israel (Israeli 2002). The ESCAP initiatives further this work by taking the investigation of seniors, disability and tourism beyond the boundaries of developed nations.

The barriers identified in these papers suggest that while the categorizations are important to conceptualising the barriers encountered, people with disabilities reflect upon their tourism experiences through the stages of the journey that they undertake. These stages and some of the major barriers identified in the literature involve:

Travel planning:

- A substantial amount of extra preplanning is required by people with disabilities to undertake travel in comparison to the non-disabled;
- Information sought is frequently unavailable, inaccurate, irrelevant or poorly distributed;
- Not all dimensions of access (e.g., visual, auditory, and mobility impairments) are represented;
- The use of travel agents is significantly lower because of unsatisfactory previous experiences;
- Tourism operators do not understand the concepts of disability or access;

Transportation:

 Air transportation still poses a series of barriers including embarking/disembarking procedures, availability of adapted toilets and damage to equipment; Inaccessibility of public transport and day tours;

Accommodation:

- Availability of suitable and affordable room stock;
- Locating accessible accommodation;
- Provision of accurate and detailed information:
- Bathroom accessibility requires a roll-in shower;
- People with disabilities need to be able to use all common-space facilities of accommodations;

The destination experience (local environment, transportation, attractions, and attitudes towards disability):

- Local accessible infrastructure is critical to destination experience (kerb cuts, footpaths, toilets, parking, entrances to buildings, etc.);
- Lack of access to day trip operators impedes the touring experience;
- Lack of access to the destination attractors and anywhere else a tourist may desire to visit in a destination region;
- The attitude of tourism service providers has a major impact on people with disabilities experiences;
- The lack of anti-discrimination legislation (or the enforcement of it) impacts on transport and regulation of the built environment, and these components are central to the barrier-free nature of a destination region.

Other considerations:

 People with disabilities face greater economic disadvantage than the nondisabled through lower levels of employment and, hence, lower incomes than the general population (Barnes, 1991; Gleeson, 1998);

- It has been estimated that holidays for people with disabilities can cost between 30% and 200% more than for the non-disabled (Flavigny and Pascal, 1995);
- Availability, appropriateness and cost of attendants:
- Availability of disability equipment or services for its maintenance or repairs.
- Differences between the Western and Eastern cultural conceptualisations of disability involving factors such as psychosocial, religious, prestige and visibility, political inequalities, and inappropriateness of training. These conceptualisations may affect the acceptance of and accessibility for travellers with disabilities in destination regions. (Miles, 1982; 1996; 2000)

Before looking to the future and recommending how to remove or at least reduce some of the barriers, and in keeping with the stated objectives, it was important to examine the current state of barrier-free tourism in the region, identifying which tourism products and services already offered "good practice" characteristics.

Examples of good practice in Barrier-Free Tourism

In addition to the examples of barrier free tourism reported in the returned questionnaires, other examples for each of the 26 countries were sought through the Internet.

The Internet research phase involved three components. Firstly, the national tourist offices' sites were assessed for compliance to two international websites access protocols, W3C and Bobby, for people with vision and print disabilities and to determine whether the offices had telephone typewriters (TTY) for communication with people who were deaf or hearing impaired. (Commonwealth Department of Family and Community Services, 1999; Human Rights and Equal Opportunity Commission, 2001).

Secondly, the search engine, *Google*, was used to search the national tourist office's websites for examples of BFT, using disability and Barrier-Free tourism terminology. The resultant search list was reviewed for up to one hundred links for each country.

Of all the national tourism offices searchable Internet sites, only 6 generated hits for the designated BFT search terms. Eight offered compliance with W3C guidelines but none were Bobby compliant (see Table 1). The Japanese, Australian, and New Zealand websites were the most accessible being W3C compliant, searchable and providing 124, 100, and 46 entries of BFT, respectively.

Table 1 Summary National Tourism Body Internet Sites

Summary National Tourism Body Internet Sites	\mathbf{Y}	N	Total
No of sites that are searchable (Disability, Disabled, Handicap)	17	12	29*
Searches for Disability, Disabled Handicap revealed access data	6	20	26
Site is W3C Compliant **	18	26	
Bobby Approved ** 0	26	26	
Notes: * More than one National Site for three members			
** Protocols for Internet accessibility for people with sight impairment.			

The same procedure was used, in a third phase, to investigate any provision of tourism products that would enable the users to make informed decisions regarding their needs for Barrier-Free Tourism.

Many examples of individual enterprises offering BFT were identified across the categories of transport, accommodation, attractions, tours and other considerations (equipment hire, attendant care, etc.). This signified that individual tourism operators recognized BFT as a market segment, had developed product regarded as BFT and had undertaken promotion internationally, targeting inbound tourists via the Internet. Examples were examined in light of the accessibility needs and barriers identified in the literature as noted above. The most informative of the sites were access guides.

One example of best practice, the *Accessible New Zealand* guide, begins its website (www.travelaxess.con.nz) with an introduction to the approach used, the information format, methodology for information collection and structured contents of the components covered. The accessibility criteria listed were based on the New Zealand access standards.

The Hong Kong access guide is comprehensive in its coverage of all inclusions required for an accessible trip to Hong Kong. "Access" was based on local and international access standards, with the information collected by trained personnel (see Appendix 1).

Other examples include an Internet site offering a searchable database that can help locate companies with wheelchair accessible taxis in New Zealand. The Sydney City Central YHA youth hostel, Clark Bay Cottages in Narooma, the Kuranda Homestay near Cairns, the Rainforest Resort at Byron Bay, and The Hilton Hotel in Adelaide are representative of the range of accessible accommodations types that are available in Australia. A bedand-breakfast in Chiang Mai, Thailand, or the St Bernard Beach Resort, Bantayan Island, Philippines, are examples from Asian countries.

Three Australian attractions or activities are worth mentioning. The whalewatching company, Whalesong, of Hervey Bay, Queensland won the Prime Minister's Gold Medal Access Award, 2000, for its provision of barrier-free access. At the entrance to Uluru - Kata Juta Cultural Centre adjacent to Uluru (Ayers Rock) in the Northern Territory is a Touch Wall including a section in brail explaining the "creation" story and encouraging visitors to feel the ancestors and weapons affixed to the wall. The Tree Tops Walk in Western Australia was designed as a barrier-free experience. Two excellent elements of good practice are its Internet search function designed to work with screen readers, and the wheelchair-accessible walkways in the treetops.

The way in which such data is collected and reported, whether on the Internet or through other media, is of utmost importance. Wrong information can be more detrimental than no information when planning a trip. Previous research has shown that people with disabilities have not often been able to rely on self-reported information from the tourism industry about the accessibility of their facilities and services (Cavinato and Cuckovich, 1992; Darcy, 1998; Turco et al., 1998; Darcy, 2002b; Market and Communication Research, 2002).

Even for the small sample of facilities assessed during the trip to Hanoi to present the final report of the research results, there were discrepancies between the self-reported information on the web and the on-site reality. Much of the BFT website information was too limited in detail or, worse, inaccurate and, hence, unreliable for people with disabilities to use to plan their trip.

One of the critical issues faced at the destination was the lack of accessible transport. The accommodations had multiple

problems including access to rooms, circulation space, roll-in showers, positioning of toilets and access to the general amenities of the hotels. While the field visits were limited in nature they do give an indication of the experiences people with disabilities may face in the region.

With reference to the barriers described in the literature and the results of the questionnaire and the web-based research, recommendations were then made.

Recommendations

Several broad strategic directions for governments and the industry to develop BFT were proposed, much being in the same line as earlier ESCAP initiatives. Firstly, it is critical to develop human rights legislation to ensure that people with disabilities are treated equally before the law.

Secondly, the requirements for Barrier-Free Tourism are based on the criteria of universal design (Aslaksen, Bergh, Bringa, and Heggem 1997; Preiser and Ostroff 2001; Center for Universal Design 2003). Thus, each country needs to engage with the international community to set national standards for access to the environment that are inclusive of all dimensions of disability. As Western countries with human rights legislation and access standards already in place evince, developing accessible infrastructure takes time.

While developing these human rights and environmental planning systems, national tourist offices can also provide the impetus for awareness and customer service training to effectively interact with customers with disabilities. It can play a coordinating role in the collection and marketing of credible and reliable BFT access information that is currently available for each aspect of the tourism product —

transport and accommodation being two of the most important.

Finally, this information needs to be marketed via the Internet that is becoming a preferred source of information for people with disabilities. This research suggests that good practice criteria for national tourist office access information websites need to incorporate:

- Multi-lingual information provision;
- Advanced search features;
- A template of systematic, third party assessed, detailed information provision;
- A broad understanding of all dimensions of access (vision, hearing, mobility and communication)
- Information on transport, accommodation, attractions, tours and areas of interest;
- Direct links to providers offering detailed information;
- National and regional coverage; and
- TTY/Bobby/W3C compliance.

For each of the various tourism sectors, in addition to tourism offices, a series of detailed good practice directions in the development of Barrier-Free Tourism for the region is provided in the full report (Cameron, Foggin and Darcy, 2003).

Conclusion

This exploratory research has shown that people with disabilities are a significant market segment of the traditional tourism markets of the Asia Pacific. When this market is seen in context to the ageing of Western populations an even more powerful market argument is presented. However, outside of Japan, Australia and New Zealand, ". . . the majority of tourism service providers in the ESCAP region do not, as yet, understand the economic and social significance of early action to create barrier-

free tourism" (Vignuda, 2001) thereby missing a competitive advantage.

The lack may be partially related to a difference between developed and developing nations in their understanding of BFT or between Western and Eastern cultural attitudes towards disability. In addition, recent world events (acts of terrorism, threats of war, and SARS) have dramatically changed the international

tourism environment. Several have had a particularly negative impact on certain countries of the Asia Pacific region, causing them to focus their attention on core tourism concerns rather than on the development of new market segments.

These among other factors offer a challenging environment in which to further develop ESCAP's initiatives towards Barrier-Free Tourism.

Appendix 1: Hong Kong Access Guide

The Joint Council for the Physically and Mentally Disabled (Rehabilitation Division, Hong Kong Council of Social Service) published the guide that is now also available at

http://www.hkcss.org.hk/rh/accessguide/def ault.htm. It provides information about access to venues in Hong Kong including hotels, shopping arcades, museums, sightseeing spots and restaurants and public transport facilities. Information about the accessibility of every site listed in this booklet was obtained either from visit by trained personnel, or through questionnaire during the period from the summer of 1997 to early 1998. Access criteria for each aspect (entrance, lifts, counters, toilets, etc) are set according to local and international standards.

Codes and Abbreviations

Box with "Y" denotes facilities accessible to wheelchair users.

Box with "N" denotes facilities inaccessible to wheelchair users.

Box marked as ¡§NA;" denotes facilities unavailable or not applicable.

Criteria used to determine accessibility:

RAMPS: Maximum gradient 1 in 12

CORRIDORS: Minimum clear width of 1050 mm COUNTERS: Maximum height of 1000mm ALL DOORS: Minimum clear width of 760mm between the open door and the opposite jamb

LIFTS: Minimum door width of 760mm; minimum internal space of 1070mm x 1070mm; maximum height of control panel 1370mm

TURNING SPACE FOR WHEELCHAIR:

1500mm x 1500mm

TOILET CUBICLES: Minimum door width of 760mm; minimum internal space 1500mm x 1750mm with grab bar; washbasin accessible FITTING ROOM: With bench of maximum height of 450mm and sufficient turning space for wheelchair

TELEPHONE DIALS AND HANDSETS:

Maximum height of 1370mm

CHANGE IN LEVELS: Should be ramped in passageway

CAR PARK: Specific parking space reserved that is accessible to a lift

SEATING SPACE FOR WHEELCHAIR USER:

Reserved space no less than 800mm x 1200mm

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