TOURIST EXPERIENCES OF INDIVIDUALS WITH VISION IMPAIRMENT

Tanya L Packer, Jennie Small and Simon Darcy

SUSTAINABLE TOURISM CRC

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ABSTRACT

People with disabilities have the right to participate fully in the community and enjoy the same quality of life as people without disabilities. This includes the right to travel and participate in leisure activities. However, people with disabilities are not travelling at the same rate as people without disabilities and fewer than expected participate fully in mainstream tourism. The reasons for such low participation rates are not yet clear, although the underlying assumption is that if barriers could be eliminated, participation rates would increase.

This research sought to develop additional understanding of the experience of travelling with vision impairment or blindness (see definitions p vi-vii). Forty people with vision impairment participated in focus groups and individual interviews. They represented a wide cross-section of age, type of vision impairment and time of onset of the impairment. An inductive approach was used—theory was developed from the data.

The participants' accounts emphasised the similarity in tourist experiences to their sighted peers. Like sighted people, they talked of 'sightseeing', of 'seeing' places. However, at the same time, they pointed out that their tourist experiences were also very different.

Firstly, the complexity of travelling with vision impairment meant they had to 'manage the tourist experience'. This includes the additional energy required to access information to ensure their safety and security. A second focus was placed on issues of 'inclusion or exclusion' with stories and experiences coalescing into four areas:

- accessing information
- navigating the physical environment—safety
- knowledge and attitudes of others
- travelling with a Guide Dog.

Finally, they had important recommendations for key market stakeholders.

The paucity of research in this area led to this exploratory study, which has provided important insights into the relationship between travellers and the industry itself. It is expected that this, together with other current CRC-funded projects, will form a foundation on which a more extensive research framework may be built. The ultimate goal is to provide the tourism industry with new and viable markets while at the same time creating an equal opportunity for people with vision impairment to access the tourist experiences that sighted people enjoy.

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SUMMARY

Objectives of Study

This research sought to develop understanding of the experience of travelling with vision impairment. It used an inductive approach with theory developed from the data. The paucity of research on travelling with vision impairment necessitated this first step in a process designed to gain a fuller understanding of the existing and potential tourism market. Without an understanding of the tourist experience, determination and creation of a viable market are not possible.

Methodology

The research approach was informed by a social constructionist approach to disability which views disability as a product of social relationships. This approach firmly places disability on the social, economic and political agendas rather than locating disability as the fault of an individual's impairment. Using an inductive, qualitative and iterative approach that drew on grounded (Strauss & Corbin 1994) and phenomenological (Holstein & Gubrium 1994) traditions, the study explored the tourist experiences of people with vision impairment through in-depth interviews and focus groups. All were transcribed verbatim and content analysis was undertaken.

Participants were selected on the basis of interest in the research topic and self-identification of vision impairment. Interviews and focus groups were audio-taped (with permission) and transcribed verbatim. The transcripts were analysed by the investigators who comprised a multi-disciplinary group. Emerging themes from the content analysis were then compared, elaborated and validated through continuous dialogue among the investigators. Research participants were recruited and focus groups held until saturation was reached. Ethical approval was obtained from the human research ethics committees at the University of Technology, Sydney and Curtin University of Technology, Perth.

Twenty-eight people (21 in Western Australia and 7 in New South Wales) participated in the focus groups and 12 (6 in each of Western Australia and New South Wales) participated in individual interviews. Most were female and had acquired their vision impairment after birth. They ranged in age from twenties to nineties with most of those in the focus groups in the older age categories. Five travelled with a Guide Dog.

From the qualitative findings, the key industry messages emerged and were used to develop the industry fact sheets (see Appendices A-C). These were reviewed by key industry partners, in particular the Association for the Blind of Western Australia (ABWS) and Vision Australia.

Key Findings

It is important to recognise that people with vision impairment have similar tourist experiences to their sighted peers—similar travel motivation, pleasures, benefits, anxieties, etcetera. They stay in the same types of accommodation, travel the same transport, go to similar attractions and do similar activities. Like sighted people, people with vision impairment talk of 'sightseeing' and of 'seeing' places**.** However, at the same time, their tourist experiences are very different.

The first theme which accentuates this difference was titled 'managing the tourist experience'. It was an overarching theme that highlighted the complexity of travelling with vision impairment. The participants' experiences were summed up by one participant who observed that '[to us] little things are big things'.

A second theme focused on issues of 'inclusion or exclusion' with stories and experiences coalescing into four sub themes that resulted either in the inclusion or exclusion from the tourist experience:

- accessing information
- navigating the physical environment—safety
- knowledge and attitudes of others
- travelling with a Guide Dog.

Finally, their recommendations for stakeholders formed the third theme.

Future Action

Theme three was composed of the recommendations for stakeholders. These are reproduced here as critical to the development of the accessible tourism market.

For the tourism industry

The key recommendations for the tourism industry were:

- provide education for members to ensure provision of safe and dignified service for people with vision impairment
- provide marketing and destination information in auditory and tactile formats
- improve navigation services
- provide specialised travel agent/websites for people with vision impairment.

For agencies advocating for people with vision impairment

Participants recommended that agencies should:

- educate the tourism industry about vision impairment and the experiences of tourists with vision impairment
- lobby the tourism industry regarding safety issues, such as evacuating a person with vision impairment from a plane or a hotel room in the event of an emergency
- develop specialist tourism planning information for people with vision impairment.

For the community

Recommendations for the community focussed on better education about vision impairment and facilitation of navigation in public spaces.

For governments

Enforcement of legislation was seen as the role of governments. Introduction of legislation mandating equal access (free entrance to companions, auditory and tactile safety features etc.) was suggested as ways for governments to improve equity of access.

For researchers

Participants appreciated their involvement in the research project and requested that researchers continue to focus on ways to improve access and equity to the overall tourist experience, with the aim of identifying, articulating and promoting best practice internationally.

Definitions

Permanent blindness

Taken directly from the Federal Department of Family, Community and Indigenous Affairs (FaCSIA)—Guide to Social Security Law section 1.1.P.210 Permanent blindness (DSP, Age) (Australian Government 2008).

When determining permanent blindness for the purposes of DSP [Disability Support Pension] or Age [Pension], the following guidelines are applied:

- visual acuity (1.1.V.50) on the Snellen Scale after correction by suitable lenses must be less than 6/60 in both eyes, or
- constriction to within 10 degrees of fixation in the better eye irrespective of corrected visual acuity, or
- a combination of visual defects resulting in the same degree of visual impairment as that occurring in the above points.

Vision impairment

From ‘Clear Insight—The Economic Impact and Cost of Vision Loss in Australia’ (Access Economics 2004), the terms ‘low vision’ and ‘vision impairment’ are often used interchangeably. Vision impairment is defined as ‘visually impaired in both eyes (visual acuity <6/12)’. Hence the terms ‘people with vision impairment’ or ‘people with low vision’ includes people who have permanent blindness. In this report, the term ‘vision impairment’ will be used to include all people with vision impairment and blindness.

Chapter 1

INTRODUCTION

People with disabilities have the right to participate fully in the community and enjoy the same quality of life as people without disabilities. This includes the right to travel and participate in leisure activities (Darcy 2003; Murray 1998; Ray & Ryder 2003; United Nations 1993).

Contrary to the expectations of many in the travel industry (Horgan-Jones & Ringaert 2001), people with disabilities also have the desire to travel. However, it is evident that people with disabilities are not travelling at the same rate as people without disabilities. Statistics in developed countries indicate that between 5% and 20% of the population has a disability (Darcy 1998; ESCAP 2000), but a disproportionately small number participate fully in mainstream tourism. A study of tourism and disability in Australia found lower participation rates in tourism, especially in international travel (Darcy 1998).

The reasons for such low participation rates are not yet clear. Existing literature tends to suggest that persons with a disability face a number of barriers to participation (McGuire 1984; Murray & Sproats 1990; Smith 1987) and that, because of these barriers they enjoy less access to tourism opportunities than people without disabilities (Turco, Stumbo & Garncarz 1998). The underlying assumption behind much of this work is that if barriers could be eliminated, participation rates would increase. Over the past twenty years, progress has been made in removing physical barriers in the transport, accommodation and attractions' sectors. Yet, a disproportionately small number of people with disabilities participate fully in mainstream tourism (Darcy 1998, 2003).

With few exceptions, the tourism literature on disability focuses on the experiences of people with mobility impairments. Work by a group of researchers in Hong Kong is an exception. Their qualitative studies have included both people with mobility and vision impairment and have concluded that travel agents lack the expertise to provide quality service (McKercher, Packer, Yau & Lam 2003); that the process of becoming travel active is a complex process that includes both a personal (hidden aspect) as well as public or visible aspect (Yau, McKercher & Packer 2004); and that the process of becoming travel active has a reciprocal relationship with environmental factors (attitudes, service received etc.) (Packer, McKercher & Yau 2007). Although people with mobility and vision impairment were included in the research, results were not reported separately. Forward (2004) specifically examined the information needs of people with vision impairment and concluded that attitudes of individuals themselves, family and tourism professionals, had an important impact on the travel process and likelihood of travelling again. She further concluded that the most frequently used sources of information (tourist bureaus, friends and relatives and tourism providers) were not the sources reported as most accurate. These studies, while limited, support the premise that structural barriers alone do not provide a full explanation of travel behaviours.

The World Health Organization's International Classification of Functioning, Health and Disability (ICF) (World Health Organization 2001), which is a revision of the 1980 International Classification of Impairment, Disability and Handicap (World Health Organization 1980), is consistent with the United Nations Standard Rules on Equalization of Opportunities (United Nations 1993) and provides a conceptual framework to understand engagement in all types of activities from education to family life to work and leisure. The ICF recognises that participation in society is the right of all individuals, that linear cause and effect relationships, based solely on impairment, are both incorrect and limiting. Instead, the ICF states that participation in life situations is a complex interaction, with disability being only one of the contributing factors, possibly not even the determining factor. Importantly, barriers and facilitators to participation may be personal to the individual or they may rest outside the individual's impairment. The ICF places responsibility on governments and society rather than individuals with disabilities for creating *enabling environments*. In examining the relationship between disability, tourism and the environment, Packer, McKercher and Yau (2007) found that participants in their qualitative study related their experiences in a way that was compatible with the ICF. Darcy (2003) and Vash (2001) echo this view of societal responsibility with regard to people with disabilities accessing the tourism market.

In summary, we currently know little about the experience of travelling with vision impairment. Without this information, it is difficult for the tourism sector to respond to this potential market. Furthermore, it is likely that, without this knowledge, the effectiveness of initiatives by the leisure, health care, and/or social service sectors, and indeed, people with disabilities themselves may be limited.

Chapter 2

BACKGROUND

Importance of Accessible Tourism

Social science literature speaks of the need to encourage people with disabilities, their friends and families to participate in community activities that those without disabilities often take for granted (Devine 2004; Devine & Lashua 2002; Li, Yeung & Yeung 2004). Many of these discussions are primarily grounded in the beliefs of human rights, social equity and inclusion.

While physical accessibility is an important component of inclusion, it has long been recognised that successful inclusion also requires social acceptance by others (Schwartz 1988). Contemporary literature recognises that 'access is not only about buildings; a truly accessible environment is one in which a person with a disability can freely express their independence, and one in which any impediment to integration is removed' (Darcy 2001, p. 74). A truly accessible tourism product will minimise or remove physical, attitudinal, information, financial and other barriers that make the tourism experience less accessible to people with disabilities.

While imperatives that ensure inclusion through legislation for human rights is important, more recent discussions within the tourism industry are placing greater importance on financial imperatives. There is now sufficient evidence that the accessible tourism market is growing and sustainable, supporting the case for a more proactive approach from the tourism industry (Darcy 1998, 2005; Open Doors Organization 2005; Packer & Carter 2005). There is increasing interest within the international arena with attention being paid to the extent, value and possible attractiveness this market represents to each country's respective tourism industries. Tourism authorities in Canada, the USA and Europe already recognise the potential of the accessible tourism market. Extensive research has been conducted in the US, Europe and Canada (Open Doors Organization 2002, 2005; Stafford, Samson & Roy 2001) where guides to best practice and online information services are now available (Keroul 2003; OSSATE 2005). Evidence of international interest is further illustrated by Dubai's substantial financial incentives (US $100 billion) to develop facilities that specifically meet the needs of travellers with disabilities (Travel Impact Newswire 2005).

One explanation for this increased interest may be current demographic trends. With declining fertility rates and people living longer, few would argue that the world is seeing a long term trend towards generally older average ages in its citizenry (United Nations 2003–04). The Australian Bureau of Statistics (2004) projects the population aged 60 years and over will triple by 2050, while the population aged over 80 years will increase fivefold. It then follows, that along with a general ageing of the world's populations, the number of people with disabilities will also grow (United Nations 2003–04). The seniors market, made up of consumers aged 55 years and over, is already large and one of the fastest growing segments of the tourism industry (Gladwell & Bedini 2004). As the association between ageing and disability receives increasing attention in the western world (Cameron 2004; Cameron, Foggin & Darcy 2003; Darcy 2003; ESCAP 2000) and in newly industrialised (and heavily populated) nations such as India and China (Taylor 2004), there may soon be extraordinary demand for accessible facilities and services. As the population ages, increasing numbers of people will acquire various physical and sensory impairments that will affect their ability to participate in future tourism experiences (Bowe 2005). It is becoming clearer that these two markets are intrinsically and irrevocably linked, for many senior travellers are likely to require similar services and facilities as travellers with disabilities.

Potential of the Accessible Tourism Niche Market

The Australian Bureau of Statistics defines a person with a disability as an 'individual who [has] any limitation, restriction or impairment which has lasted, or is likely to last, for at least six months and restricts everyday activities' (Australian Bureau of Statistics 2003). Twenty percent of Australians identify as having a disability with fifteen percent identifying as having some form of core-activity limitation. Fifty-one % of Australians over the age of 60 years reported having a disability (Australian Bureau of Statistics 2003).

In 2002 the World Health Organization (WHO) estimated that there were more than 161 million people globally who were visually impaired; 124 million of whom had low vision, and 37 million who were blind (WHO 2004). At the same time WHO noted that the ageing of the global population and the age-related nature of visual impairment was driving global changes in the epidemiology of vision loss (WHO 2004).

In Australia, approximately 500 000 people are blind or vision impaired, and this population is expected to double over the next twenty years (Access Economics, 2004). In the coming two decades, the number of Australians with vision impairments and blindness is projected to nearly double, to almost 800 000 with low vision, and 87 600 with legal blindness (Taylor, Keeffe, Vu & Wang 2005).

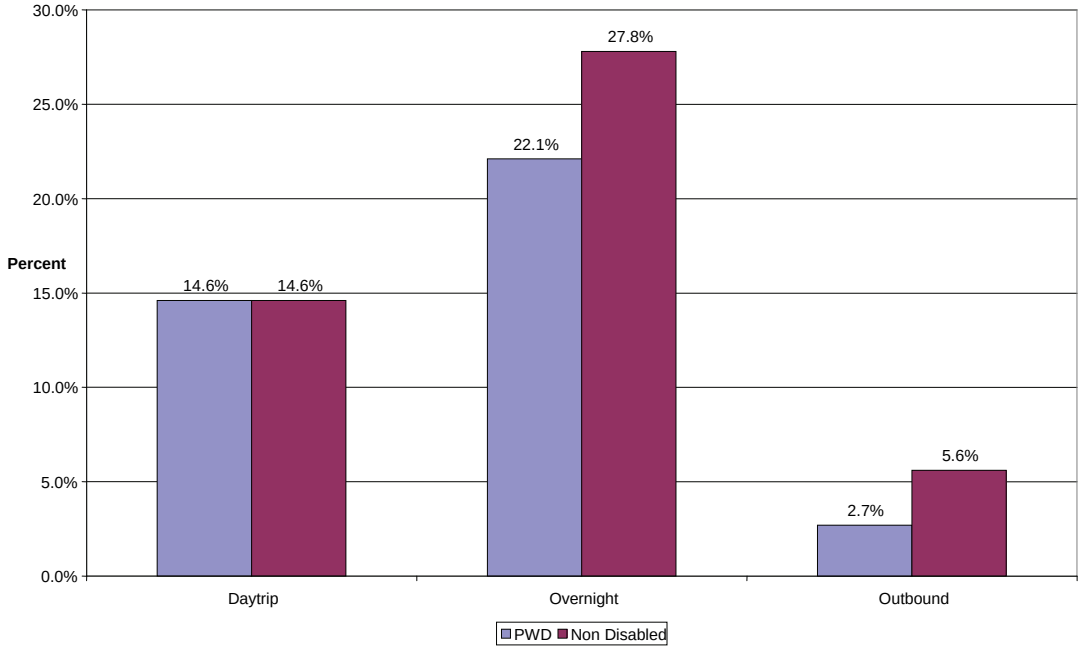
There is thus an escalating need for increased accessibility within Australia and other international destinations. The increasing average age of international tourists, their longer and more active lives, and their higher impending level of disability (Australian Bureau of Statistics 2004) are all factors in generating increased demand for accessible tourism. Meeting the needs of seniors (and younger people) with disabilities presents an enormous marketing opportunity for the future (Taylor 2004) since they have a higher level of wealth and discretional spending than ever before (Australian Bureau of Statistics 1999), greater intention to travel, a propensity to travel for longer periods of time and they continue to travel in later life.

Current Travel Patterns of People with Disabilities

During 2003–2004, more than twenty-one million US residents with disabilities travelled within their own country and internationally. Of these travellers, more than six million adults with disabilities (approximately 20 %) travelled at least six times over the two-year period. Overall, the twenty-one million people took 3.9 million trips for business purposes, 20 million trips just for pleasure, and 4.4 million trips combining business and pleasure—close to 30 million trips. While most travel was domestic, more than two million US travellers with disabilities travelled internationally (Open Doors Organization 2005).

Using National Visitor Survey (BTR 2003) data, 88 percent of Australians with disabilities took at least one trip away from home per year. Most took multiple trips with the average number being 4.3 trips over a one-year period. Average nights spent away from home was 4.98. When compared to the non-disabled, Figure 1 shows that while the rate of day trips was on par with the non-disabled peers, people with disabilities undertook overnight trips 20% less and outbound travel 52% less than non-disabled peers (chi-square p=0.000). This suggests that as the complexity of travel increases from day trip or overnight stay to overseas travel, the level of participation drops for people with disabilities as compared to the non-disabled (Darcy 2003).

Figure 1: Rates of Travel by People With and Without Disability



Source: Dwyer & Darcy (2008) based on BTR 2003 n = 8079

As with the US study, domestic travel was more frequent, though a slightly higher percentage of respondents in the Australian study (11%) undertook international travel annually. Similar results were also found in Canadian research that focused on people with physical disabilities (Stafford *et al.* 2001). The Canadian study, conducted in 2000, found that during the previous year, 56% of respondents had travelled away from home for at least one night, and 48% reported that they planned to take a vacation trip in the next twelve months. Average time away from home was eight nights, although 54% of respondents stated they were away from home for less than four days. This study reported the highest percentage of international travel with 28% of respondents indicating they had travelled outside Canada in the previous year.

It is not only the travel of the individual with a disability which is of consequence. Most people with disabilities travel with friends and family (Darcy 1998; McKercher, Packer & Yau 2002; Stafford et al. 2001). In the Australian study, Darcy (1998) found that 70% of respondents needed an assistant to be with them as they travelled, with this figure increasing to 79% for wheelchair users. On average, respondents travelled with between two to five other people (mean 4.8 for day trips and 3.4 for overnight trips) and tended to spend more nights away from home than travellers without disabilities. In Canada, research findings suggest that 82% of that country's 2.2 million travellers with a disability are accompanied by another person, an annual minimum of 1.8 million additional travellers (Stafford *et al.* 2001). Canadian research also suggests travellers with disabilities place greater importance on the human network when travelling and consequently rarely travel alone (Stafford *et al.* 2001). Unfortunately, statistics regarding specific disability groups are not routinely collected, hence there is almost no data on the travel patterns of people with vision impairment.

Economic Significance of this Market

Dwyer and Darcy (2008) estimated that Australian travellers with disabilities and their travelling companions contribute $4.8 billion on 3.7 million trips per year. In 2002, the first large scale poll of travellers with disabilities (n=1037 interviews) in the US, indicated that they spent US$13.5 billion taking 31.7 million trips (Open Doors Organization 2002). Recent US reports demonstrate consistent levels of expenditure (Open Doors Organization 2005). Further research indicates that people with disabilities could spend as much as US$27 billion per year on tourism services (double current US spending) if their needs were better met and travellers with disabilities received more encouragement to travel (Lipp 2003).

Barriers to Market Growth

Travel by people with disabilities happens despite the presence of many discouraging barriers (Darcy 1998; Lipp 2003). However, while they seek similar or same travel experiences to other travellers, travellers with disabilities tend to experience very different and unstable tourism experiences. According to US research (Open Doors Organization 2005), 82% of adults with disabilities who travelled by air encountered access problems interacting with the airline, and 82% reported obstacles at airports. In addition, 60% of disabled travellers experienced accommodation problems, ranging from physical barriers to customer service issues. In spite of all this, people with disabilities still maintain their enthusiasm for travel and want to travel more often than they presently do (Ray & Ryder 2003; Turco *et al.* 1998). Regardless of the overwhelming evidence that travellers with disabilities are likely to be one of the most lucrative tourism markets of the future, little is done to overcome many of the identified barriers that currently constrain travel for this group.

The process of being a traveller with a disability can be complex, 'requiring personal initiative, the need to accurately evaluate one's own capabilities, as well as the ability to collect reliable information, manage the trip, manage oneself, and take stock to reflect experiences' (Yau *et al.* 2004, p 958). The logistics of planning, booking, preparing to set out and experience destinations and attractions requires great patience, dedication, and cost, usually more so than for those without disabilities. Barriers faced by travellers with disabilities (McKercher *et al.*, 2002; Smith, 1987) include the following:

- **intrinsic barriers** resulting primarily from an individual's own level of cognitive, physical, and psychological function that may be exacerbated by lack of knowledge and confidence
- **economic barriers** including the overall affordability of travel due to additional expenses for people with disabilities such as buying or hiring extra equipment, and a possible requirement for personalised assistance, transportation or accommodation
- **environmental barriers** such as inaccessible buildings and transport services; lack of safe access and difficulties resulting from inadequate or inappropriate signage or lighting
- **interactive barriers** such as availability and accuracy of information; lack of encouragement to participate or negative attitudes from people encountered; lack of skill needed to navigate through travel

challenges; communication difficulties due to language and cultural differences or due to the individual's impairment.

McKercher et al. (2002 p. 378) suggest that 'intrinsic barriers are the greatest obstacle to travel, followed by economic barriers, then interactive barriers and finally, environmental barriers'. Removal of intrinsic and economic barriers is difficult to resolve for each traveller, as each will encounter individual challenges based on their personal circumstances. Of particular importance is the quality of the travel experienced during an individual's first trip, especially for those people travelling after acquiring a disability in later life. A lack of success may create further intrinsic barriers to future travel (Packer & Carter 2005; Yau *et al.* 2004).

It is worth noting that many environmental barriers are being addressed through statutory changes to building codes and the promotion of universal design principles, though guaranteed accessibility is not possible in all circumstances. While travellers with disabilities can negotiate and compensate around some physical accessibility issues (Daniels, Drogin-Rodgers & Wiggins 2005; Israeli 2002), a great number of accessibility requirements are non-negotiable (Israeli 2002). Daniels et al. (2005) argue that, in some cases, a lack of physical access to a certain site can be compensated and overcome through the cheerful assistance rendered by other travellers, guides or local residents. Consequently, the successful interactions—and triumphs—that take place may result in increases in self-confidence and contribute to an unexpected uplifting and memorable travelling experience (Daniels *et al.* 2005). However, no amount of cheer or assistance can compensate a traveller who cannot board their plane or arrives at their hotel only to find that they cannot access the room (Turco *et al.* 1998).

Despite attempts to address barriers through ongoing industry training and education, it is perhaps the availability, trustworthiness and currency of quality information that causes the greatest concerns (Darcy 2003; Packer & Carter 2005; Packer *et al.* 2007; Patterson & Hanley 1996; Turco *et al.* 1998). Information provided to travellers with disabilities is widely identified as inaccurate, incomplete and difficult to obtain (Cavinato & Cuckovich 1992; Daniels *et al.* 2005; Darcy 1998; Forward 2004; McKercher *et al.* 2002; Muqbil 2003; Stumbo & Pegg 2003; Turco *et al.* 1998). Darcy (2002) found that 45% of physical access information provided to people with disabilities was inaccurate. Inadequate information affects both people with disabilities, their travel companions and tourism providers. Tourism providers often feel unprepared to deal with travellers with disabilities due to the lack of information and training on how to work with them, as well as a lack of awareness of new legislative changes in the industry (Daniels *et al.* 2005).

It is reasonable to note that all travellers, whether they have a disability or not, are likely to experience some form of barrier to participation while travelling. While barriers may be treated as a matter-of-a-fact occurrence for travellers without disabilities, for people with disabilities, dealing with travel barriers can be an especially challenging task, often requiring strategies to adjust or compensate (Yau *et al.* 2004). Apart from considerations of inconvenience, international conventions and legislation provide a legal basis on which the tourism industry is required to provide service to people with disabilities. Due to complaints-based legislation, many large and small tourism operators are unaware of their legal responsibilities. Provision of accessible information on fire exits, visual fire alarms, and safe forms of transport is a legal responsibility of all facility managers.

It is unfortunate that travellers with disability and their companions can still expect to encounter a tourism marketplace that does not cater nearly as well for their needs as it does for travellers without disability. Travellers with disabilities have far fewer travel options, receive poorer quality service, experience higher levels of service-delivery uncertainty, and have to shoulder more personal and financial risk when contemplating travel compared to their fellow travellers. It is perhaps predictable that travellers with disabilities are not participating in travel and tourism activities as much as the rest of the community or, indeed, as much as the research suggests they could.

A Model of Tourism and Disability

Based on qualitative work undertaken in Hong Kong, Packer *et al.* (2007) proposed *The Model of Tourism and Disability* to help understand the complex interplay between tourism, disability and the environmental context. The model included three key components:

- the process of becoming and remaining travel active
- the personal/disability context
- the environmental/travel context.

The process itself has six steps (although these are not necessarily sequential), and includes both private and public aspects. The personal/disability context relates to the type of disability, the disability experience and factors such as age at onset etcetera. The environmental/travel context includes the products and technology, physical environment, attitudes, support and relationships and services, systems and policies that people encounter in their travels. It is in the environmental/travel context that barriers and/or enablers exist. While much attention has been placed on the understanding of barriers, limited research has focused on the enablers and how these influence current and future travel behaviours.

The model proposes that the relationship between the process of becoming travel active and the environmental context are interdependent with each influencing the other (Packer *et al.* 2007). A negative travel experiences (for example receipt of inaccurate or misleading information, poor quality service or physical inaccessibility) can result in people choosing not to travel again (decreasing the tourism market). On the other hand, increased visibility of travellers with vision impairment, repeated positive experiences or financial gains on the part of tourism providers, are likely to result in positive social change and increased provision for the market.

Chapter 3

METHODS

Research Design

The research approach was informed by a social constructionist approach to disability which views disability as a product of social relationships. The individual's embodiment (their impairment) is not the cause of the person's exclusion but rather it is the social environment and attitudes that produce disability (Goggin & Newell 2005; Oliver 1996). Central to this is the recognition that the 'normal activities and roles' are informed by the dominant medical model of disability and this socially constructed environment creates disabilities on top of the person's impairment. This approach firmly places disability on the social, economic and political agendas rather than locating disability as the fault of an individual's impairment.

Using an inductive, qualitative and iterative approach that drew on grounded (Strauss & Corbin 1994) and phenomenological (Holstein & Gubrium 1994) traditions, the study explored the tourist experiences of people with vision impairment through in-depth interviews and focus groups. In the best traditions of action and emancipatory research (Kitchin 2000), the research was framed with the involvement of key disability organisations for vision impairment, the Association for the Blind of Western Australia (ABWS) and Vision Australia.

Participants

Participants were selected via a snowballing technique. The focus groups were established groups of people with vision impairment who met regularly. As this was an exploratory study, participants were selected simply on the basis of their interest in the research and self-identification of vision impairment. In this way, informants themselves distinguished between 'insiders' and 'outsiders' (Morse 1989). To ensure saturation, participants were recruited and groups held until no new data or information was forthcoming.

Forty people with vision impairment participated in the study with 28 (21 in Western Australia and 7 in New South Wales) participating in the focus groups and 12 (6 in each of Western Australia and New South Wales) participating in the individual interviews. Most participants were female and had acquired their vision impairment after birth. They ranged in age from twenties to nineties with most of those in the focus groups in the older age categories. Five travelled with a Guide Dog.

Data Collection

Three focus groups (one in New South Wales and two in Western Australia) were held with people with vision impairment. Each group comprised six to ten members and lasted up to two hours. An interview guide was developed which investigated past travel experiences, travel research and booking behaviour, travel benefits, positive and negative holiday experiences, management of the tourist experience and recommendations to the tourism industry, community, agencies advocating for people with vision impairment, government, and researchers. The guide was based on the current literature and informed by a working group with Vision Australia. In Western Australia, the focus groups were conducted at the premises of the Association for the Blind of Western Australia in Perth and, in New South Wales; the focus group was conducted at a Sydney club where a group of people with vision impairment regularly met.

The individual interview was semi-structured and took up to two hours. Ten interviews were face-to-face and two were phone interviews. In Western Australia, face-to face interviews were conducted in participants' homes and, in New South Wales, face-to-face interviews were held at the premises of Vision Australia.

Based on the findings of the interviews and focus groups, brief, informative fact sheets were developed for the transport, accommodation and attractions sectors of the tourism industry (see Appendices A-C). These include basic information on tourists with a vision impairment, tips and techniques to improve customer service (how to be a sighted guide; how to orient tourists to surroundings) and how to meet expectations of tourists with a disability.

Data Analysis

Interviews and focus groups were audio-taped (with permission) and transcribed verbatim. The text that emerged from the transcripts was analysed to understand the 'essence' of experience of people with disabilities through their own words.

The transcripts were analysed by the investigators who comprised a multi-disciplinary group; some with a primary background in rehabilitation and disability while others had a primary background in tourism and industry. The transcripts were read independently, with common themes and categories being noted. Emerging themes from the content analysis were then compared, elaborated and validated through continuous dialogue among the investigators. Triangulation using multiple referents to draw conclusions is believed to improve credibility and truthfulness of qualitative data analysis (Polit & Hungler 1997).

In addition, key industry messages were extracted from the qualitative findings and used to compile industry fact sheets. These were reviewed by key industry partners, in particular the ABWS and Vision Australia.

Chapter 4

FINDINGS

It is important to recognise that people with vision impairment have similar tourist experiences to their sighted peers—similar travel motivation, pleasures, benefits, anxieties, etcetera. Those who are vision impaired stay in the same types of accommodation, travel the same transport, go to similar attractions and do similar activities. Like sighted people, people with vision impairment talk of 'sightseeing' and of 'seeing' places**.** However, at the same time, their tourist experiences are very different.

The participants were asked to consider their positive and negative experiences with the different sectors of the tourism industry (accommodation, transport, attractions, restaurants/eating experiences, shops, organised tours), their access to appropriate information, ease of booking, and their contact with other people in the community. The following are the themes which emerged from the interviews. The first theme was titled 'Managing the tourist experience'. It was an overarching theme that highlighted the complexity of travelling with vision impairment. Their experiences were summed up by one of the participants who observed that '[to us] little things are big things'.

A second theme focused on issues of 'Inclusion or Exclusion'. Finally, recommendations for stakeholders formed the third theme.

Theme 1: Managing the Tourist Experience

For a person with vision impairment, it is hard work to be a tourist. Much preparation and organisation are required before venturing from the safety of home or the safety of one's accommodation once at the destination. It can be a very anxious experience to venture away from the familiar environment.

> ***NSW4****: [Travel] can be very, very, very, scary and I think more so for those people who are blind or have low vision than those who are sighted. And I think [a] daunting thing for a person with no disability, let alone one that has one. And it's not being recognised, because, if it were, then it'd be a lot more, accessible.*

To disclose or not to disclose vision impairment is a question many travellers feel they need to make; it is a matter of choice and fine judgement and has consequences that exclude or include them in the business of tourism and travelling. They are vulnerable and reliant on their own judgement as well as those in the tourism industry. Disclosure can take many forms—a statement that the person has vision impairment; the use of a white cane/stick or; use of a Guide Dog. For a tourist experience to be successful, it is clear that the person with vision impairment has to be assertive and has to ask help from others (including strangers) while travelling.

> ***WA5****: I end up being on a tour bus with all these other people. A group of strangers and you have to put your faith in. I find myself having to ask someone 'Is it all right to stay close to you?' And you do. And you do, you have to immediately put your full trust in a stranger.*

It was suggested by participants that patience and acceptance were required characteristics of a successful traveller with vision impairment. It was clear that people with vision impairment see themselves as advocates and as paving the way for other tourists with vision impairment but this can be exhausting.

> ***NSW3****: I actually think the public awareness in relation to most disability is left up to individual people. Like the fact of you being out there in the world will educate other people. Well, that's fine, but you don't want to just spend your life as an educational facility. I'd actually like to be able to live my life.*

Theme 2: Inclusion or Exclusion

People with vision impairment can feel excluded from travel opportunities to the point that they do not travel at all or they undertake only a particular type of travel. While many had joined mainstream tours, visited attractions independently etcetera, the stories highlighted the fact that simply attending did not mean they were included. These stories coalesced in four sub-themes.

Accessing information

Accessing information prior to departure was often difficult and, in many cases, required people with vision impairment to rely on their travel companion to do the initial information gathering and planning.

> ***NSW4*****:** *Access to information I think is the biggest barrier, even before you go overseas. It's non-existent. So you can't research that country because you don't have access to information such as the 'Lonely Planets' or brochures from tourist agencies. The internet is inaccessible for people who use adapted technology. So you're very much relying on word of mouth, somebody else reading it to you*

> ***NSW3:*** *In the past I've travelled outside of Australia quite extensively. But this is the first time that I have done this since I haven't been able to see at all. And I'm struck all the time by the contrast between the experience of … planning such a holiday in the past, and planning it now … In the past, I used travel guides a lot ... Well I've been shocked to discover this time that there are no, zero, travel guides available in alternative formats … Well, I'm talking about Portugal here. I can't vouch for all other travel guides, but travel guides to Portugal, nothing available in an alternative format, not only in Australia, but I've actually had the librarians do interlibrary loan searches of the Library of Congress of, you know, any other source. Not one.*

Although many people with vision impairment are computer literate and have their own state-of-the-art assistive devices (for example, screen readers), websites are not always readable. At the destination (which included transport, hotels, tourist attractions, restaurants etc.), unless information was available in auditory and/or tactile format (and this was rarely found), access to information was again denied.

> ***WA2:*** *Hotels are set up visually not 'auditorily'.*

> ***WA4:*** *I am not one for art galleries and museums, because that is a lot of visual stuff so I will avoid them … But we had a great time in the Vatican City because there was a lot of tactile stuff. You could feel, carvings and … because I could feel it … I was blown away by it … Commentary is good, but sometimes it is too much. In Europe, they have lots of audio tours, but they are in such detail that I would just say, 'Let's move on, I have had enough now'.*

People with vision impairment found it difficult to access information about the attractions at a destination, accommodation services, transport services, restaurant menus, and critical safety information such as location of fire exits.

> ***NSW:*** *My ideal hotel would have a lift with spoken announcements and tactile indicators … tactile information on the lift buttons. It wouldn't be in a lobby full of about eight lifts where it's really difficult to discern exactly which lift has just arrived. It wouldn't have a lot of hard surfaces with sound bouncing off them. It would have a lot of soft furnishings that absorb sound so that you can identify the source of sound more clearly … It would have tactile numbering on the door of the room so that I could more easily identify my door. I have my own strategies for doing things like that, but that would certainly be very helpful. It would have shampoo and conditioner that were clearly distinguishable from each other. It would have information about [the] hotel and its facilities in a form that was available to me and that would probably be a telephone menu, most realistically, so that I knew what telephone number was reception at least, that's minimal. Room service would be good too, so that I knew how to turn the television on and change the channels and the volume and whatever, so that I had access to the in-room dining menu, all that information that other people take for granted … I suspect that a lot of other people would use the telephone menu too. It wouldn't be just for the people who are vision impaired because they are widely used for all sorts of purposes now … The other thing my ideal hotel would have, is the emergency egress information (that's on the back of the door) in a form that I could read. Because every now and then, I think well, 'God, what if there is a fire or some reason to leave the hotel quickly'. There's no way on earth that I'll know where to go and there's no record whatever in the hotel register that the person in room such and such is vision impaired. I think that's quite a big issue that just hasn't been addressed.*

> ***WA3:*** *Restaurants are badly lit and dim and I really cannot see … suddenly I am confronted by a meal I don't know how to eat, I often don't know what's on my plate.*

WA4: *Menu is not in large print or Braille. You have to listen to someone read out the whole menu. That is very frustrating. It would be great if I could do it on my own … It's frustrating going through a menu that seems to have 400 items on it. You suddenly think 'now which one did I like again?' You don't want to ask the person to go through it again so you have to quickly make up your mind and get on with it, without making too much of a fuss about it.*

Navigating the physical environment—safety

Navigating, unknown terrain requires effort and attention. Uneven surfaces can cause trips/falls, which are compounded by overhangs on pathways that can cause head injury. Tactile Ground Surface Indicators (TGSIs) were important and the participants were experts on which destinations had good TGSIs and which did not. TGSIs assist people to use tactile markers to way-find by warning of upcoming dangers (roads, edge of railway platforms etc) and changes in direction (at the crossings on roads etc).

NSW4*: [I] think Melbourne, in many ways [is] a lot more accommodating [than Sydney] for people who are blind/vision impaired. Their Tactile Ground Surface Indicators are placed correctly, for starters, and they use them a lot more than we do. And the fact that they are placed correctly, it plays a very important role when you've got low vision, like myself.*

Way-finding was a major concern for tourists with vision impairment as the nature of tourist activity is likely to include an unfamiliar environment. Way-finding is not limited to outdoor environments.

NSW3: *Well my ideal hotel would have a simple layout, I suppose it's unlikely that it would not have a large open space for its foyer, because they all do, but ideally it would have some identifiable path from the entrance doors to the reception and that might be that the floor of the hotel foyer was marble, but there was a carpet that took you from the entrance doors to the reception desk. I don't really care what it is, just that it is identifiable. That the street entrance was not too complicated or had too many stairs (I mean stairs are ok, but you know, not a huge flight of stairs), not revolving glass doors that are always very difficult to negotiate as a vision impairment person.*

Topographical locations need to be learned when visual cues are absent. For example, the proximity of the hotel room to the dining room and lobby was named as important for independence within accommodation settings. Without additional cues, locating items within a hotel room or at a buffet meal was difficult. Physical barriers, poor lighting and low colour/luminance contrast were all reported as conditions which led to exclusion rather than inclusion. Participants stressed the importance of a thorough orientation to indoor and outdoor environments whether travelling alone or with others.

NSW1: *When I stayed in London, they took me up and the gentleman was brilliant. He was like, 'You've got … the light switches … here. The remote control is here. Do you want me to describe the room?' … And he was great. He was great. And he said, 'Ok, in the morning, just give me a yell, I'll come down, and take you down to the restaurant, and I'll make sure that I tell the other receptionist downstairs' … so they were good. They were good.*

Even a brief orientation increased access both through knowledge and increased confidence in the new environment.

Knowledge and attitudes of others

Participants highlighted the impact that other people made on whether a holiday was experienced positively or negatively.

WA5: *I was talking [to the travel agent] about wanting to go on the European tour for a holiday five-day trip. He made a phone call and basically said to the operator, 'I have this person here who is legally blind and he uses a cane and do you think you could possibly get him on the tour?' The person on the other end of the phone said, 'That sounds a bit risky, I am not so sure'. So I went to another travel agent because I was not happy about his approach, you know, every phone call was becoming harder to book things. The second travel agent called exactly the same place and said, 'Oh, I am just booking this European tour for a guy here—he has a vision impairment but he is very capable, he has no night vision, and may need to hang on someone's arm from time to time otherwise he is completely mobile and totally independent. That is not a problem is it?' 'No of course not!' It's the way you sell yourself! It was true, all I needed was to hold onto someone else's arm from time to time and it was fine.*

Being treated with respect, courtesy, and sensitivity was highly appreciated.

NSW2: *[Cashing travellers' cheques] American Express goes up ten points on this last trip in my opinion … There was three different denominations. She [bank teller] put a paperclip … around the smallest; a bulldog clip around the next one, and an elastic band around the third one. So she knew … without saying a word. So she was doing initiative and did that. Some people will do that ... for me … without even me knowing it. And John [travel companion] and I were taken back by that … I said, 'Thank you, I appreciate that, that's been very kind and courteous to me'.*

However, the reaction of others was often dependent on the degree to which the person's vision impairment was obvious to others. People who did not 'appear' blind or vision impaired were more likely to report negative experiences. Some of these participants had to 'prove' that they were vision impaired to have their needs met.

NSW1*: [Boarding an aircraft] You know, this lady [flight attendant] said, 'Ok you just walk down the aisle and past first class' … And I went, 'Right, did you just comprehend … I'm vision impaired'. And it was almost as if I was this really insecure young adult that was fibbing a disability to get additional assistance. Because I really had to justify how much I could and couldn't see.*

It was evident that there was a great deal of ignorance in the tourism industry and community about vision impairment.

WA5: *Attitudes are the biggest thing that we have to manage. It is not good to be made feel that we are stupid, nor is [it] good to feel patronised and we hear how condescending people can be.*

WA5: *People treat you as if you have no brain. I feel I should not have to emphasise my disability by saying, 'I'm visually impaired, could you please tell me what is on the menu'.*

Participants reported that there was an assumption amongst many people that vision impairment would be accompanied by additional disabilities—the need for a wheelchair or the need to be spoken to slowly or loudly. Many participants reported being required to be transported in a wheelchair from the terminal to the aircraft and back to the terminal, an experience they felt was disrespectful and humiliating.

WA4*: I have had some airlines coming out with wheelchairs to take me on the plane. I go, 'Oh no, I don't think so. I can adequately walk, thank you'.*

Reports of being treated with insensitivity were frequent, resulting in a feeling of being a 'second-class citizen'. For example, many were prevented from engaging in activities because the service provider considered such engagement inappropriate for someone with vision impairment. These conclusions were reached by the provider without discussion or input from the travellers themselves.

That many sighted people considered the travel experience as solely visual was apparent in their lack of understanding as to the reason for people with vision impairment participating in tourism.

NSW1: *Just because you can't see the Eiffel Tower, or you can't see the Silk Road, it doesn't necessarily mean that you can't experience the ambience, the culture, the food, the language. And I think that that's the underlying issue there in itself, and hence the reason why there are no accommodations out there for people who are blind and vision impaired because, people's ignorance [is] … because you're blind, or you've got low vision, why would you want to travel anyway?*

Travelling with a Guide Dog

Travelling with a Guide Dog demands additional considerations. Being large dogs, Guide Dogs require space to sit and/or lie at the owner's feet. They need areas for their toileting and owners often need to travel with additional equipment (food, dishes, sleeping mats). These requirements and the role of the Guide Dog were often not understood by the tourism industry and community. In addition, the legislation which permits Guide Dogs in most places, including restaurants and taxis, was either not understood by some proprietors or was openly flouted.

NSW3: *I travel with a Guide Dog and most hotels are not really set up for Guide Dog travel. Unfortunately it's still the case that a lot of accommodation providers don't realise that they have to take the dog. It tends to be the smaller single operators, not the big ones. And I don't think that has ever happened to me personally, but I'm aware of the fact that it's quite a frequent occurrence. I have certainly experienced [it] in relation to hospitality mainly … restaurants and cafes.*

Theme 3: Recommendations

Although related to the foregoing themes, participants were very willing to articulate a number of recommendations that would improve their ability to manage their own travel and access a full tourist experience in an inclusive way.

For the tourism industry

The key recommendations for the tourism industry were:

- provide education for members to ensure provision of safe and dignified service for people with vision impairment
- provide marketing and destination information in auditory and tactile formats
- improve navigation services
- provide specialised travel agent/websites for people with vision impairment.

For agencies advocating for people with vision impairment

Participants recommended that agencies should:

- educate the tourism industry about vision impairment and the experiences of tourists with vision impairment
- lobby the tourism industry regarding safety issues, such as evacuating a person with vision impairment from a plane or a hotel room in the event of an emergency
- develop specialist tourism planning information for people with vision impairment.

For the community

Recommendations for the community focussed on better education about vision impairment and facilitation of navigation in public spaces.

For governments

Enforcement of legislation was seen as the role of governments. Introduction of legislation mandating equal access (free entrance to companions, auditory and tactile safety features etc.) was suggested as ways for governments to improve equity of access.

For researchers

Participants appreciated their involvement in the research project and requested that researchers continue to focus on ways to improve access and equity to the overall tourist experience, with the aim of identifying, articulating and promoting best practice internationally.

Chapter 5

INDUSTRY FACT SHEETS

Based on the findings of Phase 1, three brief, informative fact sheets were developed (see Appendices A to C):

- accommodation provider fact sheet
- transport provider fact sheet
- tourist attraction fact sheet.

Each is a two-sided A4 fact sheet. The front page provides information specific to the industry sector and includes information on quality service provision, facts and figures about tourists with vision impairment and quotes from people with vision impairment.

The back of each fact sheet provides useful information for employers and employees when assisting guests with vision impairment. It directs the reader to relevant web sites and answers the following questions:

- Are you aware that the vision impaired market is a potentially lucrative market?
- Are you aware that there are legislative requirements regarding the acceptance of Guide Dogs?
- How should I behave around a person who has vision impairment?
- How should I behave around a Guide Dog?
- Who is a Sighted Guide?

The fact sheets were reviewed by project partners in the disability sector after which, several revisions were made. It is anticipated that these will be housed on their websites in future.

Chapter 6

SUMMARY AND CONCLUSION

The results of this exploratory, qualitative study support the existing literature and experience of people with disabilities accessing the tourism market. The *Model of Disability and Tourism* (Packer *et al.* 2007), highlights the important relationship between the tourism environment and peoples' decision to travel or not. People with vision impairment in this study have also highlighted the importance of this relationship. Their travel experiences coloured their expectations and influenced the strategies required to 'manage the travel experience'. Lack of attention to this relationship has the potential to reduce the viability of the accessible tourism market.

Given the ageing of the population, the known and potential travel patterns of people with disabilities generally and people with vision impairment, specifically, there is a viable market. Hence, the recommendations provided by the participants in this study have far-reaching implications.

The Industry Fact Sheets have been developed based on the needs and experiences of the travellers who participated in this study. They provide a small but tangible set of actions available to the tourism industry. Few of these are structural—instead they require a positive attitude and a willingness to ensure access to the same information and the opportunity for a positive sensory experience and a pleasant holiday or business trip as people without vision impairment.

APPENDIX A: TRANSPORT FACT SHEET

Service Guide to Assist Passengers with Vision Impairment (Full or Partial)

General

- Areas on board the transport and at the transport terminus/airport should be well lit and free of objects which could hinder a guest's path.
- Signage/information on board transport and at transport terminus/airport should be in large print and appropriate contrast (AS1428 standards).
- Where appropriate, information should be tactile, and auditory (eg voice-activated messages that state the next transport stop; an audio channel to listen to journey details on plane and long distance train travel).
- Within your regular in-service education, have a session on assistance for guests with vision impairment.

Departure and Arrival Information

- Provide information that describes: transport routes; stops; timetables; and seating options for passengers and their Guide Dogs. Include details of staff that can assist passengers to organise their travel.
- Provide information in a variety of formats: hard copy (large print); online (Word, html, PDF); CD; audio tape; and telephone recording.

Getting on and off transport

Staff should let passengers know: 'We are here to assist'.

On a plane or ferry

- Allocate the passenger an aisle seat and escort to seat.
- Inform the passenger about the space which has been made available for the accommodation of their Guide Dog.
- Read any safety instructions to the passenger and show or explain location of safety vests and exit doors.

On a bus, tram or in a taxi

- Ensure that seats allocated for a passenger with a disability are used for this purpose.
- Be patient if a passenger hails you and asks for information; they often can't see the signage on your vehicle.
- Ask the passenger if they would like to be informed of arrival at their stop.
- Seat a Guide Dog at the feet of the owner.
- Ensure passenger is seated before moving the vehicle.
- If in a taxi, allow the passenger to sit in the front and ask if they would like a commentary on the route you are taking.

Other practices to consider

Ensure ground surfaces are slip resistant and where appropriate, install Tactile Ground Surface Indicators (TGSIs). Note that surfaces (floors, counters) and walls/doors which are high gloss or glass can be disorientating for a person with vision impairment.

Comments from travellers

Perth Railway station has been very good. I ring up and tell them where I want to go and where I live; they chart me the best route. They arranged a practice session [before travel]. The service is also great when you need to know timetables.

Facts and figures

Annually, *people with disabilities* in Australia take approximately 3.6 million trips, spending some 18.2 million nights away from home and generating expenditure of $4.8 billion (Dwyer & Darcy 2008).

Barriers to accessible tourism:

- Poor availability and accuracy of information.
- Negative attitudes of others.

Nearly half a million Australians have impaired vision. This figure is projected to increase to 800 000 by 2024 (Access Economics 2004).

The prevalence of vision loss trebles with each decade over the age of 40 (Access Economics 2004).

Information for Employers and Employees when Assisting Guests with Vision Impairment

Are you aware that?

- Australian and American research shows that many people with disabilities are frequent travellers with substantial spending power (Darcy 1998; Dwyer & Darcy 2008; McKercher, Packer, & Yau 2002; Open Doors Organization 2005; Stafford, Samson, & Roy 2001).
- Additional research suggests that travellers would double spending on tourism services if their needs were better met (Lipp 2003).
- 'Guide Dogs are allowed to travel free of charge on all forms of transport, including trains, buses, taxis, and the passenger section of aircraft. Guide Dogs are also allowed to enter any public place including restaurants, hospitals, shops, theatres, hotels, and motels. It is an offence to refuse entry to a person accompanied by a registered Guide Dog' (http://www.abwa.asn.au/sightedguide.html).

How should I behave around a person who has vision impairment?

There is no typical person with vision impairment. Some people have no vision, others have limited sight. Even for one individual, vision can fluctuate during the day and night. Some people are easily identified as having vision impairment (they may be carrying a cane or have a Guide Dog) while other people are less easily identified. While most people with vision impairment are older people, there are also children and young adults with vision impairment.

- Don't make assumptions about what the person can and cannot do. Say to the person, 'Let me know how I can assist you'.
- Address the person directly. Don't ask their companion to answer for them.
- Appreciate that vision is only one sense, that the person with vision impairment has the capacity to enjoy the travel experience through other senses.
- Provide information available to sighted visitors using description—'from here, the mountain is at 11 o'clock', 'we are just waiting for a few others to join us'.
- Identify yourself by name as the person may not be able to identify you by sight
- If a person tells you they have vision impairment, believe them!

How should I behave around a Guide Dog?

A Guide Dog is a working dog, leading the guest with vision impairment. Follow these principles:

- Don't pat, play, feed or interact with the dog. The dog needs to concentrate on helping the guest with vision impairment.
- Ask the guest if they need assistance. Don't grab the dog's harness.
- If asked to take the dog's harness, walk on the opposite side of the dog to its owner.
- Keep your pet dogs and cats away from the Guide Dog.
- Remember: government policy allows Guide Dogs access to all accommodation, entertainment, shopping, transport and public spaces.
- People who use Guide Dogs know how to control their dog's behaviour and attend to its needs. Ask before you assist.

How to be a Sighted Guide?

People who physically assist/lead a guest with vision impairment are called 'Sighted Guides'.
To be a Sighted Guide:

- Offer the guest **your** elbow.
- Let the guest hold **your** elbow.
- **You lead**; the guest follows.

To learn more about how to be a Sighted Guide: http://www.abwa.asn.au/sightedguide.html

Other useful websites

http://www.australiaforall.com.au http://www.guidedogs.com.au/Guide-Dog-etiquette.html http://www.visionaustralia.org.au

APPENDIX B: ACCOMMODATION FACT SHEET

Service Guide to Assist Guests with Vision Impairment (Full or Partial)

General

- Areas within and around the accommodation should be well lit and free of objects which could hinder a guest's path.
- Signage should be in large print and appropriate contrast (AS1428 standards) and, where appropriate, signage should be tactile (e.g. room numbers), and auditory (such as lifts with spoken information).
- Within your regular in-service education, have a session on assistance for guests with vision impairment.

Advertising

- Provide information about tactile and audio signage that your accommodation provides and grassed areas available for Guide Dogs to toilet and exercise.
- Provide information in a variety of formats—hard copy (large print); online (Word, html, PDF); CD; audio tape; and telephone recording.

On-arrival information

- Welcome the guest and say: 'Let me know how we can help you'.
- Offer a ground floor room with easy access for Guide Dog toileting and exercise.
- Offer additional reading or area lighting.

Offer to show the guest:

- location and route to their room
- entry key/card system and any security features
- the layout of room/s including furniture and facilities
- light switches, telephone, toiletries, extra bedding, drinks, etc.
- how to identify 'hot' and 'cold' water taps
- how to make internal and external phone calls; access internet
- how to operate the television and radio.

Provide an explanation of:

- in-house facilities (e.g., dining and entertainment)
- local attractions and transport and where to access information
- safety procedures (and take the guest to the fire exit)
- any other information that a sighted person might absorb through vision.

Restaurants and café:

- Provide a table free of objects, steps or alley ways that may hinder the guest's path; in a well lit area; and where the Guide Dog can lie at its owner's feet.
- Wait staff should introduce themself by name and, if requested to do so, *slowly* read the menu and prices (within close proximity to the guest).
- On serving the meal, offer to orient the guest to the location of their food/drink. The top of the plate is described as 12 o'clock, the bottom as 6 o'clock etc.

On Departure

- Ask the guest 'May I help you prepare for your departure tomorrow?'
- Read accommodation charges.
- Offer to scan the room for personal belongings before the guest leaves.

Other practices to consider:

- Offer an alternative to the telephone light showing 'message waiting'.
- Ensure ground surfaces are slip resistant and where appropriate, install Tactile Ground Surface Indicators (TGSIs). Note that surfaces (floors, counters) and walls/doors (including shower screens) which are high gloss or glass can be disorientating for a person with vision impairment.

Comments from travellers

Tape or CD would be good 'cos then I could do my own research and say 'hey what about this!' It may capture my imagination but not [that of] my companion … I am being screened out of things at present.

Facts and figures

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- Don't pat, play, feed or interact with the dog. The dog needs to concentrate on helping the guest with vision impairment.
- Ask the guest if they need assistance. Don't grab the dog's harness.
- If asked to take the dog's harness, walk on the opposite side of the dog to its owner.
- Keep your pet dogs and cats away from the Guide Dog.
- Remember: government policy allows Guide Dogs access to all accommodation, entertainment, shopping, transport and public spaces.
- People who use Guide Dogs know how to control their dog's behaviour and attend to its needs. Ask before you assist.

How to be a Sighted Guide?

People who physically assist/lead a guest with vision impairment are called 'Sighted Guides'.
To be a Sighted Guide:

- Offer the guest **your** elbow.
- Let the guest hold **your** elbow.
- **You lead**; the guest follows.

To learn more about how to be a Sighted Guide: http://www.abwa.asn.au/sightedguide.html

Other useful websites

http://www.australiaforall.com.au http://www.guidedogs.com.au/Guide-Dog-etiquette.html http://www.visionaustralia.org.au

APPENDIX C: ATTRACTION FACT SHEET

Service Guide to Assist Visitors with Vision Impairment (Full or partial)

General:

- Areas within and around the attraction should be well lit and free of objects which could hinder a guest's path.
- Signage/information should be in large print and appropriate contrast (AS1428 standards) and, where appropriate, signage should be tactile, and auditory (such as lifts with spoken information).
- Within your regular in-service education, have a session on assistance for guests with vision impairment.

Advertising an attraction

- Provide information about—tactile signage and audio commentary at your attraction; layout of the venue; entry and exit points; wheelchair access and; grassed areas available for Guide Dogs to toilet and exercise.
- Provide information in a variety of formats: hard copy (large print); online (Word, html, PDF); CD; audio tape; and telephone recording.

On entry to a venue or attraction

- Welcome the visitor and say—'Let me know how we can help you'.
- Show the visitor where the exit points, café and toilets are located.
- Provide a large print map that illustrates the layout of the venue.

Participating in an attraction

- Provide large signage, audio commentaries, tactile text (and tactile displays) for the exhibits in your attraction.
- Use large signage and tactile text to identify facilities (such as, toilets, cafés, exit points). Menus should also be easy to read.
- Allow additional time and opportunities to explore the attraction.

Restaurants and café

- Provide a table that is: free of objects, steps or alley ways that may hinder the guest's path; in a well lit area to read the menu; and where the Guide Dog can lie at its owner's feet.
- Wait staff should introduce themself by name and *slowly* read the menu within close proximity to the guest.
- On serving the meal, offer to orient the guest to the location of their food/drink. The top of the plate is described as 12 o'clock, the bottom as 6 o'clock etc.

On departure from an attraction

- Ask the visitor: 'Can we help you in any other way?' Check that the visitor has transport organised, and, if not, call a taxi or explore other public transport options. Indicate the cost of the journey.

Other practices to consider:

- Ensure ground surfaces are slip resistant and, where appropriate, install Tactile Ground Surface Indicators (TGSIs). Note that surfaces (floors, counters) and walls/doors which are high gloss or glass can be disorientating for a person with vision impairment.
- Consider concession entry for a companion of the visitor with vision impairment.

Comments from travellers

In the Louvre in Paris, I was allowed to actually touch the Venus de Milo … I was allowed to do that and to feel artwork. In Europe, if you are blind your companion goes in for free. It made a huge difference as I didn't have to pay for my sister's travel expenses.

Facts and figures

Annually, people with disabilities in Australia take approximately 3.6 million trips, spending some 18.2 million nights away from home and generating expenditure of $4.8 billion (Dwyer & Darcy 2008).

Barriers to accessible tourism:

- Poor availability and accuracy of information.
- Negative attitudes of others.

Nearly half a million Australians have impaired vision. This figure is projected to increase to 800 000 by 2024 (Access Economics 2004).

The prevalence of vision loss trebles with each decade over the age of 40 (Access Economics 2004).

Information for Employers and Employees when Assisting Guests with Vision Impairment

Are you aware that?

- Australian and American research shows that many people with disabilities are frequent travellers with substantial spending power (Darcy 1998; Dwyer & Darcy 2008; McKercher, Packer, & Yau 2002; Open Doors Organization 2005; Stafford, Samson, & Roy 2001).
- Additional research suggests that travellers would double spending on tourism services if their needs were better met (Lipp 2003).
- 'Guide Dogs are allowed to travel free of charge on all forms of transport, including trains, buses, taxis, and the passenger section of aircraft. Guide Dogs are also allowed to enter any public place including restaurants, hospitals, shops, theatres, hotels, and motels. It is an offence to refuse entry to a person accompanied by a registered Guide Dog' (http://www.abwa.asn.au/sightedguide.html).

How should I behave around a person who has vision impairment?

There is no typical person with vision impairment. Some people have no vision, others have limited sight. Even for one individual, vision can fluctuate during the day and night. Some people are easily identified as having vision impairment (they may be carrying a cane or have a Guide Dog) while other people are less easily identified. While most people with vision impairment are older people, there are also children and young adults with vision impairment.

- Don't make assumptions about what the person can and cannot do. Say to the person, 'Let me know how I can assist you'.
- Address the person directly. Don't ask their companion to answer for them.
- Appreciate that vision is only one sense, that the person with vision impairment has the capacity to enjoy the travel experience through other senses.
- Provide information available to sighted visitors using description—'from here, the mountain is at 11 o'clock', 'we are just waiting for a few others to join us'.
- Identify yourself by name as the person may not be able to identify you by sight
- If a person tells you they have vision impairment, believe them!

How should I behave around a Guide Dog?

A Guide Dog is a working dog, leading the guest with vision impairment. Follow these principles:

- Don't pat, play, feed or interact with the dog. The dog needs to concentrate on helping the guest with vision impairment.
- Ask the guest if they need assistance. Don't grab the dog's harness.
- If asked to take the dog's harness, walk on the opposite side of the dog to its owner.
- Keep your pet dogs and cats away from the Guide Dog.
- Remember: government policy allows Guide Dogs access to all accommodation, entertainment, shopping, transport and public spaces.
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The Sustainable Tourism Cooperative Research Centre (STCRC) is established under the Australian Government's Cooperative Research Centres Program. STCRC is the world's leading scientific institution delivering research to support the sustainability of travel and tourism – one of the world's largest and fastest growing industries.

Introduction

The STCRC has grown to be the largest, dedicated tourism research organisation in the world, with $187 million invested in tourism research programs, commercialisation and education since 1997.

The STCRC was established in July 2003 under the Commonwealth Government's CRC program and is an extension of the previous Tourism CRC, which operated from 1997 to 2003.

Role and responsibilities

The Commonwealth CRC program aims to turn research outcomes into successful new products, services and technologies. This enables Australian industries to be more efficient, productive and competitive.

The program emphasises collaboration between businesses and researchers to maximise the benefits of research through utilisation, commercialisation and technology transfer.
An education component focuses on producing graduates with skills relevant to industry needs.

STCRC's objectives are to enhance:

- the contribution of long-term scientific and technological research and innovation to Australia's sustainable economic and social development;
- the transfer of research outputs into outcomes of economic, environmental or social benefit to Australia;
- the value of graduate researchers to Australia;
- collaboration among researchers, between researchers and industry or other users; and efficiency in the use of intellectual and other research outcomes.