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IMPROVING AIRLINE PRACTICES BY UNDERSTANDING THE EXPERIENCES OF PEOPLE WITH DISABILITIES

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ABSTRACT

This paper presents an understanding of the air travel experiences of people with disabilities and draws implications for improving airline management practices. The theoretical foundation for the paper is based on applying a social approach to disability to the airline sector. The research design used a modified grounded and phenomenological qualitative approach that sought to understand the experiences of people with disabilities in their own words. These experiences were contrasted to the policies, procedures and operations of the three major Australian domestic airlines. The methods used to understand the experiences involved semi-structured, in-depth interviews that were part of a larger study into the tourism experiences of people with disabilities. Fifteen in-depth interviews were undertaken together with an analysis of the qualitative responses to a broader quantitative study on the same topic. The interviews were supplemented with complaint cases taken against airlines through the Australian *Disability Discrimination Act, 1992*. What emerged as the 'essence of experience' was that airline procedures created a newly disembodied experience that transformed a person's impairment into socially constructed disability. The social construction was a product of international air regulations, airline procedures, pressures brought about by the introduction of low-cost airlines into Australia and a new wave of occupational health and safety considerations. The resultant experience for many was one of heightened anxiety, helplessness and, in too many cases, humiliation.

Keywords: air travel; people with disabilities; regulation; lived experience

INTRODUCTION

A number of authors note that tourism experiences for people with disabilities are more than access issues (Shelton & Tucker, 2005; Stumbo & Pegg, 2005; Yau, McKercher, & Packer, 2004). For people with disabilities a foundation of any tourism experience is having accessible destinations and locating appropriate accommodation from which to base oneself while traveling. Once this is determined in the travel-planning phase then people need to travel to the destination region. A greater proportion of people around the world now use air travel as their preferred mode of travel as it has been democratized through the advent of low-cost airlines (Doganis, 2005). Studies in Australia (Access For All Alliance (Hervey Bay) Inc, 2006; Darcy, 1998; Market and Communication Research, 2002) and overseas (Burnett & Bender-Baker, 2001; HarrisInteractive Market Research, 2003; Turco, Stumbo, & Garncarz, 1998) have shown that air travel creates a series of constraints for people with disabilities.

The applicability of antidiscrimination or disability specific legislation to air travel was first discussed by Reukema (1986) and placed in a leisure travel constraints context by Smith (1987). Yet, surprisingly few studies have specifically examined the air travel experiences of people with disabilities. Abeyratne (1995) presented the legislative responsibilities of carriers for people with disabilities and seniors while Driedger (1987) discuss the accessibility of the components of air travel. A great deal of specific policy has been released by the national government agencies responsible for regulating domestic and international carriers in the USA, Canada, the UK and the European Union. Despite these policies, a review of NewsBank and Factiva databases (1995-2007) revealed many hundreds

of articles worldwide outlining the ongoing constraints that people with disabilities encounter with air travel. In the Australian context, the anecdotal accounts have been validated by the Human Rights and Equal Opportunity Commission (HREOC) (2006) complaints cases and Federal Court actions taken by people with disabilities against airports, airlines and the tourism industry generally. It is with this brief background that the paper explores the citizenship rights of people with disabilities and their experience in relation to one activity and industry - air travel. This paper presents an understanding of the air travel experiences of people with disabilities in Australia, reviews the current practice of Australia's three major domestic airlines and draws implications for improving airline management practices.

THEORETICAL APPROACH

The theoretical foundation for the paper is based on applying a social approach to disability to the airline sector. Historically research about people with disabilities has not been framed from a disability perspective but those 'studying' disability, namely the medical profession (Barnes & Mercer, 1997). This perspective has been referred to as the *medical model* of disability, which defines disability as the problem of the individual stemming from their 'deficits' (Oliver, 1996). The resultant dominant social discourse views disability as a product of the 'abnormal body' rather than seeing a person's impairment as part of human diversity (Charlton, 1998; World Health Organization, 2001). The development of social approaches to disability over the last three decades has re-conceptualized disability from a 'personal tragedy' to a complex form of social oppression (Abberley, 1987). A social approach recognizes that it is not the person's impairment that is disabling but the *social environment* and prevailing 'hostile social attitudes' (Barnes, 1996, p. 43). The social model informs this research by providing an understanding that socially constructed relationships developed from three elements: the lived experiences of disabled people; identifying disability as the combination of impairment and socially constructed environments and attitudes; and a conceptual clarification focused on creating enabling environments in which people with disabilities can participate in an independent, equitable and dignified manner (Pfeiffer, 2001; Tregaskis, 2002). The social approach has been shown to be an appropriate framework from which to analyze the relative inclusion of Australians with disabilities in all areas of citizenship (Clear, 2000; Goggin & Newell, 2005).

This research recognizes that social structures are a product of historical development and cannot be divorced from their cultural context. The cultural context of air travel by people with disabilities in Australia, involves both a material and ideological transformation of the way people with impairments are treated. As Gleeson (1999, p. 13) notes in the Australian cultural context, attitudes towards institutional oppression of other groups in society have changed (e.g. women and indigenous), 'whilst continuing to ignore the material hardships and injustices to which they are subjected'. People with disabilities have been empowered by the Australian DDA where the legislation is in principle similar to legislation enacted in other Western nations and takes its overall direction from relevant United Nations declarations (1975; 1993; 2006). However, the way that nations implement the declarations is very different in each country (Parker, 2006; Quinn & Degener, 2002). In Australia, there have been issues with the relative empowerment of people with disabilities as the DDA is based primarily on a conciliated complaint system where no fault is ascribed. Only actions taken to the Federal Court of Australia, which is a cost jurisdiction, set a legal precedent that can be used in future actions. Where a case is conciliated, a similar complaint case brought the next day with a geographical or sectoral nexus and would have no knowledge of the previous case. Issues surrounding the implementation of disability human rights legislation in Australia have been thoroughly reviewed by others (Goggin & Newell, 2005; Handley, 2001; Parker, 2006).

A great deal can still be learnt from the complaint cases and relevant Federal Court actions through a review of the HREOC (2006) complaint cases.

RESEARCH METHODS

The research design used a modified grounded and phenomenological qualitative approach that sought to understand the 'essence' of experience of people with disabilities in their own words. The methods used to understand the experiences of people with disabilities involved semi-structured, in-depth interviews that were part of a larger study into the tourism experiences of people with disabilities. Fifteen in-depth interviews were undertaken together with an analysis of the qualitative responses to a broader quantitative study on the same topic. To ensure confidentiality, all interviewees were given a pseudonym and the subsequent analysis was carried out through the Nvivo qualitative software package. The interviews were supplemented with a review of DDA complaint cases taken by people with disabilities against airlines. These experiences were contrasted against a review of the policies, procedures and operations of the three major Australian domestic airlines (Qantas, 2007; Virgin Blue, 2007; Jetstar, 2007) using their websites and other publicly available information that document their customer service procedures for people with disabilities. The length of this paper excludes and detailed examination of these documents. Popular press accounts of the airline experiences of people with disabilities or airline procedures were also used.

FINDINGS: PEOPLE'S EXPERIENCES AND AIRLINE PRACTICES

Emerging from the interviews was that the experience of air travel for people with disabilities could broadly be segmented into pre travel planning, boarding and disembarking, seat allocation, onboard personal care issues, equipment handling and customer service. Each of these areas is now examined.

Pre travel planning

People expressed frustration at the segregated systems of booking between the public and people with disabilities. Once a person has booked their airfare via any means (Internet, travel agent or packaged travel) they are required by all carriers to make phone contact to ensure that the carrier is able to guarantee their journey. 'It's a form of segregation that creates all sorts of problems when you're trying book with your friends or work colleagues. You secure the fares but then they (the airlines) can bump you for any number of reasons' (Interviewee). People spoke about being 'interrogated' as to their health and independence status, assistance animals, equipment needs and baggage. Low-cost airlines have introduced a 'independence criteria' that states that if the person, 'requires assistance with employing various safety features, including oxygen mask, seat belt and life jacket; evacuating from the aircraft, understanding the cabin crew, or administering medication, are required to travel with 'a carer'. Interestingly, these requirements have not been extended to the frail aged or children. As Paralympian Paul Nunnari, who had traveled independently for over a decade stated, 'this is an antiquated and ludicrous notion' (Metherall, 2006). This led to outrage amongst the disability community and brought about a policy back down by Virgin Blue where it 'will only require carers to accompany those weighing more than 130 kilograms' (Pelly, 2006). The rationale for the specifically stated 130kg has never been made clear.

Yet, even after these preplanning arrangements have been fully complied with an individual can still be refused the right to board based on an airline staff's perception of their relative independence (ABC Online News, 2006). Craig Wallace, a Commonwealth government employee and disability rights advocate who was well under 130kg, is currently pursuing a DDA complaint via the Federal Court after his experience of being refused by Virgin Blue check-in staff (Wallace, 2006). The New South Wales Disability Discrimination Legal Centre and the Public Interest Advocacy Centre are formulating a class action to pursue

at Federal Court level and have instigated a National Accessible Airlines Campaign (Banks, 2007). Apart from the challenge to independence, the requirement to travel with a 'carer' significantly adds to the cost of travel and only Qantas offers any form of discount for an attendant, which is only 10% off a standard domestic fare - well below that of the discounted fares (NICAN, 2007). Virgin Blue and Jetstar only guarantee the internet rate for the attendant. Of course, that is only the start of the costs, as the attendant would then require wages, accommodation and food for the duration of the trip. This significant cost constraint affects others already and impacts on their travel choices and duration of trips (Darcy, 2002). As Bob states, 'the cost of paying for an attendant is just prohibitive' (Interviewee). Yet, all three carriers are inclusive of assistance animals for the blind and other groups, and have no extra charge associated for their carriage.

A recent requirement by Qantas and Jetstar allows only one power wheelchair on narrow-bodied jets (e.g. 737) per flight. Yet, exceptions are made by Qantas for disability sporting events they sponsor. This creates a dual citizenship where multiple people can travel if they are elite sportspeople but not members of the public who both have power wheelchairs. This new regulation affects families and couples including 33% of those interviewed for this study, and any group of people with disabilities that requires air travel. One recent example was a higher education equity conference *Pathways 8* held at Wrestpoint Casino, Hobart. A significant number of attendees were wheelchair users who were students, equity officers, lecturers, partners and technology suppliers. The conference organisers reported a significant number of disruptions due to these new airline regulations, including cancellations of attendance (Roberts, 2006). Would this situation exist for a group of nondisabled cyclists and their equipment? Aircraft are designed to carry cargo yet there was a decision made by the airlines to allocate only one space for power wheelchairs.

Boarding and disembarking

The method of boarding and disembarking from the aircraft was a focus of criticism by all interviewees. This had to do with the boarding procedures and method of transfer onto the plane. Due to the aisles of aircraft not being wide enough to accommodate a standard wheelchair, people with disabilities must be transferred from their wheelchair before boarding onto an aisle chair. The aisle chairs are significantly smaller and narrower than a standard wheelchair, lack the provisions for self-propulsion and are not comfortable. In Justin's case, 'You get stuck in those bloody, shitty airport wheelchairs and you can't go anywhere. It might be for half-an-hour, and if you're stuck without access to your own chair, in one of those aisle chairs that you can't actually push around and go to the bathroom or get yourself a feed...it's a loss of independence...I'm self-catheterized, so if you don't get to the bathroom, you piss your pants; It's not the best way to be' (Interviewee).

The importance of staying in one's own wheelchair for as long as possible cannot be overstated. Yet, transfer to the aisle chair is only the beginning of what many people described as harrowing. The process involves more than discomfort in that it can directly affect a sense of self, 'my husband's self esteem plummets as we make our way through crowds waiting to board' (Interviewee). Qantas developed a hoist to assist in the transferring of people from their wheelchair to the aircraft seat but as a spokesperson for Tasmanians with Disabilities stated, 'People reported being humiliated when lifted in a swing hoist "like a sack of potatoes"' (Paine, 2005). No consultation had been undertaken prior to implementation. Qantas subsequently undertook a national consultation process with peak disability groups.

The boarding and disembarking process involves what people with impairments describe as *the first on, last off syndrome*. People with impairments are required to board aircraft as much as 45 minutes before the non-disabled. This is due to the confined nature of the aisles, the use of the aisle chair and the need to transfer people from the aisle chair to the aircraft seat (HREOC 2006). This does have the advantage of maintaining dignity and privacy

from the curiosity of non-disabled passengers given that the transfer process from aisle chair to aircraft seat can involve readjustment of clothing and seating position. Some people likened these experiences to 'being a freak in a circus' with everybody staring at them. After the aircraft has landed, people with impairments only disembark after non-disabled passengers. The length of time this takes is dependent upon the management issues discussed in the rest of the section. However, the result can be that people may spend an hour extra on an aircraft.

Most major Australian airports employ porters to assist people with impairments and older people to board and disembark from aircraft. In regional areas, this role falls to baggage handlers, cleaners or anyone else who is available. The level of expertise and training can vary tremendously. This creates a sense of helplessness that most people have overcome through their adjustments to a disabling society. When these situations arise, it creates a sense of loss. For some, they may never fly again. For others, their future travel choices are restricted to modes of transport where their independence and dignity can be maintained. Jenny also has a fear of flying and being told of the procedures for emergency egress does little to diminish her feelings of helplessness: 'They don't make you feel very good when they say to you, in the case of an emergency you are last out of the plane!' (Interviewee).

Safety issues formed part of a complaint case brought against Airlines of Tasmania in *McLean v. Airlines of Tasmania Pty Ltd [1996 HREOC 77]*. Mr. McLean sought to maintain his independence in regional air travel and alleged, '...that AT has discriminated against him, on the grounds of his disability, by imposing a condition of travel upon him that he must be accompanied by a support worker'. The Commissioner found that because McLean was a person with high support needs, he would be required to provide his own support person. It was also found that it would be an unjustifiable hardship for AT to provide such a person. The finding was due to safety reasons outlined in: the *Civil Aviation Authority Regulations*; the *Civil Aviation Orders*; and *Resolution 700 of the International Air Transport Commission*. It significantly restricts people with higher support needs from traveling independently. This places a further cost burden on the individual to hire an attendant and pay for their airfare even though they have an attendant to get them on and off the aircraft at each end of the journey. The finding was reinforced where it was found lawful to require a woman with epilepsy to be accompanied on a long international flight (HREOC 2006).

Seat allocation

All members of the public contest the allocation of seats. However, as Tim suggests, 'not all the planes have got armrests that lift up. My very first flight they put me right down the very back. I had to squeeze all the way down the aisle to the back seat. Because I can't transfer myself, I have to be lifted over the armrest by the carer and the porters at the airport ...one gets on the legs, and the other on the back and transfers me across' (Interviewee). Due to aircraft design, the combination of the seat allocation and the flip-up armrests is essential for people who need assistance to transfer to aircraft seats. This is because only certain rows of seats have armrests that flip up to allow for unhindered transfer from the aisle chair to the seat. Without this, the porters must lift the person over the arm of the chair. This can cause injury to the person and is an occupational health and safety issue for porters. A number of the interviewees who require this consideration check and double check these details with airline booking authorities to the point that it becomes an obsessive-compulsive trait when traveling.

Many people expressed similar desires as Don to improve aircraft design 'I think for a start, the provision to stay in your own wheelchair within an aircraft would be brilliant' (Interviewee). While international air regulations are unlikely to allow people to travel in their wheelchairs, the requirement for all aircraft seats to have flip-up arms is sensible. This would alleviate the anxiety experienced when seeking assurance about the allocation of seat rows. Similarly, it was suggested that people with impairments could be allocated the bulkhead seating that has extra leg space. Yet, people with impairments are specifically excluded from

these seats as they double as emergency exits and it is argued that people with impairments pose a risk of blocking these areas during an emergency.

Personal care issues and onboard toilets

Once the correct seat has been located, the arms raised and the porters ready to transfer, there are other considerations for personal comfort. To the non-disabled these procedures may seem unusual, but to a person with lower body paralysis this is essential to protect skin condition against pressure. For this purpose, many people use specialist cushions. For a person like Tim who also has upper body paralysis, he uses a chest belt to provide stability while traveling in aircraft. This is because aircraft seatbelts are lap belts and do not provide upper body support. Air travel also has a series of health issues for the non-disabled that have been highlighted by the publicity about deep vein thrombosis. For people with impairments, any health issues need to be managed along with the inherent health issues arising from air travel. For many like Tony, ‘...I mean twenty-four hours in a plane is not good for you, I get swollen ankles and stuff like that’ (Interviewee). For Annabel the effects of rheumatoid arthritis make traveling an uncomfortable experience that is exacerbated by poor seating allocation, ‘...when I am taken on board, I am placed in the middle aisle... with no leg row...with a leg that couldn’t bend, I had nowhere to put my leg’ (Interviewee).

John states that a major issue of flying for many people was that ‘planes should have toilets that are wheelchair-accessible, both within Australia and overseas flights!’ (Interviewee). Even with the newer aircraft design that offers an accessible toilet, it is so far below the Australian Standard (2001) as to be effectively unusable for people with only moderate support needs. As Jane notes, ‘On previous overseas trips I have found getting to the toilet extremely difficult because of the tiny size of plane toilets. It’s put me right off traveling by plane’ (Interviewee). For people with higher support needs, the use of the toilet requires cabin staff to provide the onboard aisle chair on the limited number of plane that have accessible toilets. The person then has to be transferred by the cabin crew from the aircraft seat to the aisle chair. The aisle chair then has to be moved from the seating location into the accessible cubicle. Yet, even where accessible cubicles are provided instances have arisen where the aisle chair has not been aboard and the person had to be carried to the toilet, which led to embarrassment and physical discomfort (HREOC 2006).

The accessible cubicle consists of an extended curtain to offer privacy. On the flights without accessible toilets, or for people who cannot use the in-flight aisle chair, deal with continence management in different ways. It is a complex issue involving the mobility of the individual and their continence regime. Some people live within this constraint by not drinking and effectively dehydrating themselves during travel as in Jenny’s case, ‘I don’t think that I could get into a toilet in a plane...I have got a normal bladder function but I tend to hold on for a very long time’ (Interviewee). Air travel is generally dehydrating and without fluid intake, people risk more significant dehydration and other side effects (Rous & Ward, 1997). This provides a constraint on where they travel based on flight duration. For Kristy this has meant ‘flights we catch are only about an hour long so I do not have to access them (toilets)’ (Interviewee). Others cannot live with these restrictions and fly in fear of not being able to get to the toilet on aircraft, which creates a great deal of angst.

Equipment handling/damage

When undertaking air travel people take their equipment with them if they cannot hire equipment at the destination. Apart from the logistical considerations, some people reported ground staff reacting in less than a professional manner. For Jenny and John (Interviewee) this involved, ‘the airports generally freak out when we get there as we have a hoist, a commode, two portable ramps, both chairs and back pillows’. In other cases, there have been procedural issues about booking flights with extra equipment based on the *Air Navigation Act*. This has led to complaint cases about oxygen for people with respiratory impairments and

power wheelchair batteries for people with disabilities. Both cases involved a misunderstanding by ground crew as to the procedures to accommodate these inclusions. The resolution of these cases involved changes in booking policy and procedures to avoid undue delays or refusal of entry onto flights (HREOC 2006). The equipment issue also relates to the secure stowing of wheelchairs once a person has been transferred onto an aisle chair. As Tim explains, he has a procedure for ensuring a safer passage in the luggage hold for his wheelchair by disassembling the chair and taking the joystick control on board as 'That is the most vulnerable part of the chair...' (Interviewee).

Equipment damage is a major issue and if it occurs to their only wheelchair on the way to a destination the damage can end the holiday experience. Some people reported being unable to continue their trip as replacement equipment was not available at the destination. Further, airlines have a limit of \$1600 on damaged luggage and unless people have specifically taken out insurance on higher priced equipment, they are only covered for this limited amount. Only one of the three airlines noted this situation on their website and suggested that travelers have extra insurance for those items above this amount. Most power wheelchairs cost in excess of \$10,000 and damage can easily exceed this limit. The other associated issue is lost equipment. This issue made national headlines when a member of the Australian Parliament had his wheelchair lost twice in a week (ABC Local Radio, 2003; Hansard, 2003). Apart from the inconvenience, these losses can have a serious impact on the individuals dignity, where in the case of a Tasmanian paraplegic whose wheelchair had been placed on another flight, he had to crawl off the plane at a regional destination (Paine, 2005).

Customer service

The role of trained porters for transferring people was seen as essential by respondents. Once a person had been placed on an aisle chair it was ideal to board and seat them in as short a time as possible. Porters need to be available to assist when needed, need to be well versed in transfer techniques and need to be comfortable working with people with impairments. Without these prerequisites, the service offered to people with impairments might be unsatisfactory. In Don's case his experience of air travel was spoiled by a series of indiscretions, 'I found the airline was really quite rude, in that June and I went to get on the plane and he yelled down the corridor, 'I've got a couple of carry ons here'...That whole bad attitude to the customers' rights' (Interviewee). These experiences are directly related to the daily management practice at airports. Even after staff have undergone disability awareness training, major oversights can occur. Many people related experiences of arriving at a destination or on the way back home only to be left on the plane for a prolonged period before disembarking. The delays of up to three hours were caused by a breakdown of communication about people being on the flight and the lack of available porters to disembark passengers. These delays created further complications with missed connecting flights and ground transport. Sometimes this may be a result of periods of high demand with seasonal travel but has become far more acute since the introduction of low-cost airlines, which have a lower personnel to customer ratio. As Jetstar states 'we provide limited special assistance services to customers who require a wheelchair' as they do not have available staff to assist. Traditional carriers have been placed under greater cost pressures as market share is eroded and a first response is to reduce staff costs wherever possible. A number of interviewees reported that staff had told them of the reduction to porters where there used to be higher numbers per shift.

Most of the customer service experiences related to individuals with mobility and vision impairments who required assistance from the terminal to the aircraft or vice versa. There are also a number of significant group related issues involving people who were blind, which could have easily been avoided if a greater understanding of blind customer's needs were understood (Wade, 2002). Further, there was one relevant case of a person who had panic attacks where the travel insurance company refused to pay a claim believing the

agreement excluded this group. Upon conciliation, the company changed their decision and honored the insurance agreement (HREOC 2006). Lastly, Annabel offers an insight into the way air travel can be and should be each time a person with a disability travels, 'I have to say that I could find no fault at all with the treatment and the facilities provided by Qantas from the moment I checked in at the airport in Sydney' (Interviewee).

APPLICATION OF RESULTS

What emerged from the findings was that air travel created a newly disembodied experience where people were unnecessarily cast back into a state of helplessness. There disembodiment involved their undue separation from their mobility aids, assistance animals and other enablers. For each individual, the development of these enablers is a response to their impairment that allows an equitable, independent and dignified citizenship. However, there were a series of airline practices that contributed towards a newly disembodied experience. These included: segregated booking procedures; boarding and disembarking practices that created feelings of dependency; emergency egress requirements that affect people with disabilities but not other groups; poor customer service practice; a reconstruction of the 'independent traveler' criteria; an imposition of a requirement for a 'carer'; inequitable cost imposition associated with the 'carer' requirement; subsequent restrictions on the assistance provided by airlines; introduction of occupational health and safety technology to compensate for the loss of personnel; restrictions on the number of power wheelchair users on a single flight due to the 'constraint' on the narrow bodied jets; and inconsistent approaches to procedures for oxygen and wheelchair batteries.

When the 'essence of experience' was compared to the review of the airline procedures, it became apparent that the experience was not the fault of the individual but was socially constructed. The social construction was a product of a lack of understanding of the needs of travelers with disabilities, international air regulations and airline procedures. While these issues have been noted for a number of years, two newer pressures have also become evident since 2000. First, the introduction of low-cost airlines into Australia has brought about radical change to traditional airline operations. Second, a subsequent bureaucratization of approaches to travelers with disabilities has gathered momentum in parallel to the first point. The outcome of these cumulative issues has led to a loss of equity, independence and dignity resulting in heightened anxiety, helplessness and, in too many cases, humiliation.

Australians with disabilities had been well served, albeit with ad hoc examples of poor customer service, by the Australian domestic two airline policy (Forsyth, 2005). The virtual duopoly had created a domestic airline sector that was regarded as expensive by international comparison. Yet, under this system people with disabilities had not experienced a systemic attack on their rights to travel independently. The advent of low-cost airlines has had a significant impact on the Australian domestic and international air carrier structures generally (Graham & Vowles, 2006). People with disabilities have not escaped the impacts of these structural changes where it is no coincidence that, "The downgrading of policy in relation to people with disabilities has coincided with increasing competition in the airline industry," (Paine, 2005). While not fully presented in this paper, there is a substantial difference to the level of service offered by the carriers with Qantas (traditional cost airline) providing a much higher level of service than Jetstar or Virgin Blue. Further, Qantas have taken a strategic consultative approach than Jetstar or Virgin Blue. While Qantas operations are not without ongoing issues their corporate approach is far more inclusive than the other carriers are.

CONCLUSIONS

The paper has highlighted how the air travel experiences of people with disabilities create a disembodied experience resulting in heightened anxiety, helplessness and

humiliation. The airline industry could reduce the 'essence of these experiences' through improved management practices based on a greater understanding of the social approaches to disability that advocate equity, independence and dignity. These management practices would not contravene essential international safety regulations but would require an organizational commitment to this market group. Travel is an essential component to citizenship and the most recent UN *Convention on the Rights of People with Disabilities* suggests that airlines will need to engage with these principles so as to not contravene international human rights agreements (United Nations, 2006). However, as evidenced in this paper, there is already a clash of human rights principles with the market pressures brought about by the globalization of the international airline industry and the increasing market share of low-cost airlines.

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