

THE NEED FOR DISABLED FRIENDLY ACCOMMODATION IN SOUTH AFRICA

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B Com (Hons.) Tourism Management

**Mini-dissertation submitted in partial fulfilment of the requirements
for the degree Master of Business Administration at the
Potchefstroom campus of the North-West University**

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October 2007

ABSTRACT

The paper reports on a Consumer Service Index (CSI) model that was developed for the accommodation industry in South Africa to assist the disabled and elderly traveler when using accommodation facilities in South Africa. The CSI model was adapted from current models used to form the Disability Index (DI) by using the results obtained through a structured questionnaire sent to hotels in South Africa. The DI forms part of the marketing tools of hotels in South Africa for improved communication and information to physical disabled and elderly travellers when selecting accommodation. Qualitative research was done in this research study and focused on key areas within the hotels that provide problems to disabled and elderly travellers. Key areas in the hotel with problems were the reception, bathroom, bar area and swimming pool. The problems with the areas were identified using the DI and recommendations were made to improve the accessibility to these areas for travellers. The response of the questionnaire was sufficient to develop the DI and to make recommendations for change to the guidelines used by the Tourism Grading Council to establish the disabled friendly status. While the statistics for disabled travellers are not clear in South Africa and most of Africa, the US and EU tourism authority claimed that the disabled traveller market is an untapped market for all countries. First world countries (USA and EU) have introduced regulations and laws to improve the accessibility to tourism sites and transportation for disabled and elderly travelers. This regulations and laws form part of the first step to obtaining this untapped tourism market of disabled and elderly travelers for every country in the tourism service and product industry. The introduction of the DI into the evaluation of hotels would support the regulations and laws of accessibility.

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CHAPTER 1

INTRODUCTION AND PROBLEM STATEMENT

1.1 INTRODUCTION

There is a need for the development of a marketing tool for hotels that would benefit the disabled and elderly traveller that require accessible accommodation when travelling. This marketing tool/consumer service index (CSI) would improve the image of the hospitality industry in South Africa that has been lacking behind the rest of the world. According to the Society for Accessible Hospitality (SATH), there are an estimated 859 million persons worldwide with disabilities (APEC, 2003:5).

The opportunity to relive history by visiting the sights that have had an influence on mankind generally poses no problem. However for persons with a disability, the chances to enjoy these same pleasures are very limited. This limitation is not only because of their disability, but also because of the failure of many governments and tourism industries to address the problem of making all forms of transportation and accommodation accessible within their own country. Even when a country adopts laws that mandate that transportation be accessible to all, there are no universality to these rules and regulations (Rosen, 2001:1).

The lack of facilities in South Africa for people with disabilities means that the country cannot take full advantage of tourism for travellers with disabilities, a sector that has the potential to significantly increase South Africa's tourism receipts. Due to the increased awareness by society at large of people with disabilities and the less than user-friendly amenities available to them, it is now the opportune time to examine the constraints and to develop opportunities for travel and tourism for people with disabilities in South Africa (Snyman, 2000:23).

Like the general population, the term 'disabled people' encompasses a diversity of individuals with different levels of ability and different requirements for travelling.

There is a wide range of impairments, including those to do with mobility, sight, or hearing, as well as learning difficulties and allergies. Many disabled people are keen to travel, but wide variation in the level of access within destinations and across the European Union generally, combined with poor information and negative experiences, discourages potential customers. Improved accessibility will not only result in economic benefits to the tourism industry but will also assist the move towards full social integration (Disability, 2005:3).

1.2 PROBLEM STATEMENT

People with disabilities have a significantly different tourism experience. For many travellers with disabilities, a travel experience includes difficulties with public transportation and often with accommodation; hotel rooms do not always meet accessibility codes. Many constraints and barriers exist, and general physical access is still the major constraints encountered by people with disabilities (Darcy & Daruwalla, 1999).

Research has indicated that interest in South Africa as a destination is high, but the hurdles in the path of a comfortable travel experience are keeping foreign tourists with disabilities away from the starting line. Hotel owners typically do not understand the vast range of challenges faced by people with disabilities when visiting hotels and as a result lose out on this significant market opportunity (Anon., 2004:1).

South Africa's inbound travel market for people with disabilities is generally regarded as one that is currently untapped, a "fledgling market with huge potential", according to Eugene Armer of Wilro Tours (quoted by Sheridan, 2001).

The tourism industry is not in a position to fulfil the needs of people with disabilities in South Africa. The problem could stem from a total unawareness, a lack of interest, or even ignorance with regard to the needs of tourists with disabilities, and thereby disregarding the economic contribution that tourists with disabilities can make to the industry itself. If one takes into consideration how many people with disabilities there

are in South Africa, then an effort should be made by government and the tourism industry to take cognizance of the problem and to put in a concerted effort to acknowledge that people with disabilities have similar needs when it comes to recreation and travel, and to provide for these needs (Snyman, 2000:24).

1.3 OBJECTIVES

The research project has set three objectives. These objectives are:

Objective 1:

Determine the accessibility of hotels in South Africa for the physically disabled tourist and elderly traveller.

Objective 2:

Review the guidelines used by the Tourism Grading Council to grade hotels in South Africa as disabled friendly.

Objective 3:

Create a model to be used by hotels to determine their disabled friendly status.

1.4 RESEARCH METHODOLOGY

The research consists of both a literature and an empirical research component. The literature research made use of articles, books, theses, and the rich source of information supplied by the Internet. The Ferdinand Postma Library at the North-West University's (NWU) electronic databases also proved a valuable source of information.

The empirical research was conducted in South Africa during the third quarter of 2007. Questionnaires were sent via e-mail to General Managers (GM) in hotels¹ in

¹ Hotel details contacted for the study is listed in Appendix 1

South Africa to obtain information regarding the disabled friendly structure of the hotels.

Quantitative research was used and the aim was to generalise about a specific population based on the results of a representative sample of that population (Martins *et al.*, 1999:125, 235). A convenience sampling method was used (selecting potential respondents on the basis of convenience or availability) to target 200 managers. A total of 91 hotels responded by completing the questionnaire. This signifies an acceptable response rate of 46%.

The structured questionnaire² (see Appendix 2 for details) collected information regarding the following aspects:

- Demographic information of the various hotel accommodation;
- Accessibility of the hotel;
 - Transport;
 - Parking;
 - Reception;
 - Elevator;
 - Hallway;
 - Room;
 - Bathroom;
 - Bar;
 - Restaurant; and
 - Swimming pool/ Recreation area.

Responses in the structured questionnaire were categorized by means of a 5 -point Likert scale where 1=strongly agree to 5=strongly disagree.

² The questionnaire used to support the research study available in Appendix 2

1.5 DEFINITION OF TERMS

The following concepts are used frequently; therefore it is necessary to define them.

1.5.1 People with disabilities

A disability is a significantly restricted (or absent) ability, relative to an individual or group norm. The term is often used to refer to individual functioning, including physical impairment, sensory impairment, cognitive impairment, or mental disorder. This usage is associated with a medical model of disability. By contrast, a human rights or social model focuses on ability as an interaction between a person and their environment, highlighting the role of a society in labelling, causing or maintaining disability within that society, including through attitudes or accessibility favouring the majority (Anon., 2007a:1).

Disability refers to the social effects of physical, emotional or mental impairment. This definition, known as the 'social model' of disability, makes a clear distinction between the impairment itself (such as a medical condition that makes a person unable to walk or unable to sit) and the disabling effects of society in relation to that impairment. As Frank Bowe put it in his book *Handicapping America* (1978), the real issue is the societal response to disability: if a community allows physical, architectural, transportation, and other barriers to remain in place, society is creating handicaps that oppress individuals with disabilities. If, on the other hand, a community removes those barriers, persons with disabilities can function at much higher levels. In simple terms, it is not the inability to walk or inability to sit that prevents a person entering a building unaided but the existence of stairs or the lack of benches to lie down, that are inaccessible to a wheelchair-user or a person with sitting disability. In other words, 'disability' is socially constructed. The 'social model' is often contrasted with the 'medical model' which sees 'disability' as synonymous with 'impairment' (Anon., 2007b:2).

Physical access involves those people with mobility disabilities who require the use of a wheelchair or walking aids. They require the provision of paths, ramps, lifts,

handrails, clear directional signs, curb cuts, circulation rooms, wide doorways, lowered counters and telephones (Anon., 2002:2).

1.5.2 Tourism

Tourism is the sum of the phenomena and relationships arising from the interaction among tourists, business suppliers, host governments, host communities, origin governments, universities, community colleges and non-governmental organisations, in the process of attracting, transporting, hosting and managing these tourists and other visitors (Weaver & Oppermann, 2000:3).

Definition of the World Tourist Organisation (WTO): Tourists are people who are "travelling to and staying in places outside their usual environment for not more than one consecutive year for leisure, business and other purposes not related to the exercise of an activity remunerated from within the place visited" (Accent, 2006:1).

Tourism is the act of travel for predominantly recreational or leisure purposes, and also refers to the provision of services in support of this act (Anon., 2007c:1).

Tourism, like any other form of economic activity, occurs when the essential parameters come together to make it happen. In this case there are three such parameters: disposable income; time in which to do so; infrastructure in the form of accommodation facilities and means of transport.

1.5.3 Accessibility

Access is not just about wheelchairs. Accessibility refers to how easy it is for everybody to approach, enter and use buildings, outdoor areas and other facilities, independently, without the need for special arrangements. Providing information on accessibility and improving access benefits a wide range of people who want to travel, but who may find it difficult.

Access is about the absence of barriers to the use of facilities. Although this is usually seen in terms of physical access or access to information and communication, poorly trained staff can represent a serious barrier for disabled people if they are unable to provide services in an appropriate, non-discriminatory way (Disability, 2005:1).

1.5.4 Accommodation

The word accommodation has a number of definitions. The following is found online (Yourdictionary, 2007:2):

- The act of accommodating or the state of being accommodated;
- Something that meets a need; a convenience;
- Room and board; lodgings; and
- A seat, compartment, or room on a public vehicle.

1.5.5 Tourist

A tourist is a temporary visitor staying for one or more nights in a destination. The purpose of the visit may include holiday (recreation, leisure, sport and visit to family, friends or relatives), business, and official mission, convention or health reasons (Disability, 2005:24).

1.6 SUMMARY

The development of accessible tourism facilities in the hospitality industry is a pressing issue in the world, the EU (European Union) has implemented regulations as well as the USA Disability Act. The South African hospitality industry has implemented grading and guidelines of resorts and hotels to change the image of the industry and make facilities more accessible.

These guidelines form the base of this research study, as to determine the success of the guidelines in the industry and the possible improvement of the guidelines to improve accessibility in the hospitality industry for physical disabled people.

The hospitality industry is growing, as shown with the recent figures available from the Department of Tourism and Environmental Affairs. The increased demand placed on the hospitality industry with the awarding of the FIFA World Cup to South Africa in 2010, also affects the accessibility of both accommodation and other facilities in the country. This pressure from this untapped market has led to guidelines for the grading of the hotels; the application of these guidelines in the grading process is also an important objective in the study.

The following chapter will support the need for a CSI for the hospitality industry in South Africa. Reference will be made of the laws in 1st world countries that enforce accessibility for disabled and elderly travellers. The development of the Disability Index (DI) for the hospitality industry will be done and used to show problem areas in the current hospitality industry especially that of hotels.

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CHAPTER 2

LITERATURE RESEARCH AND RESULTS

2.1 INTRODUCTION

It is now widely recognized from many quarters that people with disabilities, together with carers, friends and relatives and older people constitute a large potential consumer market segment for the tourism and hospitality industry (Vignuda, 2001:1).

People with disabilities and older persons are becoming a growing group of consumers of travel, sports, and other leisure orientated products and services. Furthermore, with regard to physical access, families with young children, who are also becoming part of this increasing tourist market, have similar needs to persons with disabilities and older persons. This large number of people requires tourism to be made barrier-free (Vignuda, 2001:2).

To be accessible for all, many facilities and destinations may need to make physical changes. Whilst this is to be encouraged (and is a legal requirement in some EU countries), some organisations lack the resources to implement these changes. This does not necessarily mean that such facilities are inaccessible to everyone with an impairment. Good information on current accessibility allows disabled people to judge for themselves whether a facility is accessible to them (Disability, 2005:2).

Reasonable accommodation for people with disabilities constitutes still another set of challenges. For example, very few hotels offer accessible disabled person-friendly rooms with a wider entrance; low-level switches, hand dryers, towel racks and beds; chair lifts and room information written in simple and concise language for people with cognitive disabilities (Vignuda, 2001:2).

Apart from accommodation, access throughout hotels is also problematic. Few hotels have lifts to all floors on slower timers, access to reception, pool and bar area,

clear signage, visual alarms and clear access through the entire building. While the majority of hotels provide special parking areas, often these are uncovered and quite a distance from the main hotel entrance, requiring that steps be negotiated in order to access the buildings (Vignuda, 2001:3).

2.2 THEORETICAL RESEARCH

Using the Internet to provide more information on key areas on which the research study focuses on. The information is aimed to support the development of the Disability Index (DI) for the hospitality industry in South Africa.

2.2.1 What is disabled?

The 'special needs' passengers of airlines are usually referred to as 'disabled' in US regulatory parlance. In Europe they are usually called 'PRMs' (persons with reduced mobility), but the phrase 'disabled persons' is now also being used (O' Keefe, 2006).

Like the general population, the term 'disabled people' encompasses a diversity of individuals with different levels of ability and different requirements for travelling. There is a wide range of impairments, including those to do with mobility, sight, or hearing, as well as learning difficulties and allergies (Disability, 2005:4).

The World Health Organisation (WHO) has adopted the following definition to describe this condition: disability is any restriction or lack (resulting from impairment) of ability to perform an activity in the manner or within the range considered normal for a human being (APEC, 2003:7).

The Social Assistance Act defines disabled as: "A person who has attained the prescribed age and is owing to his or her physical or mental disability, unfit to obtain by virtue of any service, employment or profession the means needed to enable him or her to provide for his or her maintenance" (Social Assistance Act 59 of 1992).

The Employment Equity Act defines disabled as: "People who have long-term or recurring physical or mental impairments which substantially limit their prospects of entry into or advancement in employment" (Employment Equity Act 55 of 1998).

2.2.2 Tourism

2.2.2.1 Accommodation

The lack of suitable accommodations will often limit persons to up-scale hotels, which are most often the only establishments that are accessible. For example, very few hotels offer accessible rooms with wide entrances or lower switches, hand dryers, towel racks and beds (APEC, 2003:9).

- **TRANSPORT**

The most common form of transport used by people with disabilities is driving their own car. This is the most cost efficient and convenient as it provides transport that they can use once at their destination (Tourism Queensland, 2002:3).

- **PARKING**

Parking spaces, which are large enough to allow easy, transfer between a wheelchair and the car, generally indicated by a wheelchair symbol, and which are reserved for people displaying a blue badge (Disability, 2005:15).

- **RECEPTION**

If the facility has more than one entrance, information should be given on the most accessible entrance, which should be easy to find. Pathways should be wide enough to let people pass easily and should be kept free of obstacles (Disability, 2005:15).

It is important to have a lowered section of the reception desk so that a disabled person, or an elderly person who prefers to sit while registering, is able to fill in the necessary forms easily and comfortably. If this is impossible, staff must come around the desk and provide the forms on a clipboard for a wheelchair user to fill in (Disability, 2005:15).

- **ELEVATOR**

Lifts need to be of adequate size, with automatic doors if possible. Lifts are well lit and not full of mirrors as this could be disorientating. The controls should also be provided in Braille and emergency buttons should be in a clear colour, which contrasts with their surroundings (Disability, 2005:8).

- **HALLWAY**

Handrails are provided for steps and ramps wherever possible. The top and bottom of stairways and ramps, and the edge of individual steps, should be clearly marked with a contrasting colour (Disability, 2005:8).

- **ROOM**

Accessible accommodation is situated as close as possible to the central services of the facility and on the ground floor where possible. A suitable system being it a telephone, alarm or other means of calling for help is available. The height of thresholds, door widths, and clear circulation space are essential for wheelchair users. Equipment, such as cupboards and switches is located within reach from a wheelchair (Disability, 2005:12).

- **BATHROOM**

Sufficient space is required for a wheelchair user to maneuver within cubicles and bathrooms, with enough space to enable a wheelchair user to transfer from the wheelchair to the toilet, bath or shower with or without the help of an assistant (Disability, 2005:13).

There is a clear space under a washbasin to accommodate a wheelchair. Taps in the bathroom are lever taps to help people with limited manual dexterity. A roll-in shower with floor drain is the easiest arrangement, as a wheelchair user can transfer to a shower chair and there are no steps to negotiate. A bath as well as the toilet needs vertical and horizontal support rails, as will the toilet (Disability, 2005:13).

- **BAR AREA & RESTAURANTS**

In restaurants, cafés and bars, aisles are wide enough to allow visitors to move around easily when the tables and chairs are in use. It is important to have some tables without fixed seating and enough room underneath the table to allow a wheelchair to fit underneath comfortably (Disability, 2005:13).

- **SWIMMING POOL/ RECREATION AREA**

The swimming pool/recreation area needs an accessible ramp to and from the area. The swimming pool needs accessible hand railings to allow a disabled person to rise and lower themselves into the pool. Access to the gymnasium also needs access ramps for wheelchairs users, as well as adequate lighting in dark areas.

2.2.3 Market and laws

2.2.3.1 Tourism market size

- **European Union (EU)**

Tourism is a dynamic and growing industry – turnover grew by about a quarter between 1999 and 2002. In 2004, foreign tourists spent more than 860 million nights in European accommodation. Mainly dominated by SMEs, it accounts for 4% of the community's GDP, with about 2 million enterprises employing about 4% of the total labour force (representing approximately 8 million jobs). When the links to other sectors are taken into account, the

contribution of tourism to GDP is estimated to be around 11% and it provides employment to more than 12% of the labour force (24 million jobs) (EC, 2006:1).

- **United States of America (USA)**

A recent Harris Interactive/Open Doors Organization market study shows that with the expansion of accessible travel opportunities, disabled travellers now spend more than \$13 billion a year on travel-related services, including more than 17 million hotel visits and 9.4 million airline flights. And those numbers are drawing the attention of the travel industry as never before (Anon., 2004:1).

There are currently more than 50 million people with disabilities in the United States and 180 million worldwide, representing the single largest untapped tourist market in the world. According to a recent Harris Poll conducted in conjunction with the Open Doors Organization and the Travel Industry Association of America, the 50 million people with disabilities in the USA, which have a combined income of more than \$175 billion. In 2002, these people took 32 million trips and spent more than \$13.6 billion on travel (\$4.2 billion on hotels, \$3.3 billion on airfare, \$2.7 billion on food and beverage, and \$3.4 billion on retail, transportation, and other activities) (Kennedy, 2006:1).

- **Australia**

Tourism in Australia is a large sector of the economy. In 2003/04, the tourism industry represented 3.9% of Australia's GDP at a value of approximately A\$32 billion to the national economy. It should be noted that tourism's share of GDP has been slightly decreasing over recent years. In 2004-05, international visitors consumed AUD\$18.3 billion worth of goods and services produced by the Australian economy. This represented 11.1% of total exports of goods and services. Australia also received the 10th biggest revenue from being a tourist destination in 2002, 2003 and 2004 (Anon., 2007f: 1).

Tourism GDP represents the total market value of Australian produced goods and services consumed by visitors after deducting the cost of goods and services used up in the process of production. It is therefore much lower than total spending. Inbound tourism accounted for \$8.1 billion of total GDP in 2004-05, an increase of 5.5%, since 2003-04 (Tourism Australia, 2007:1).

- **South Africa**

South Africa's tourism sector continues to boom, with Statistics South Africa (Stats SA) reporting a 6.4% increase in occupancy rates at the country's hotels, guest houses and other forms of accommodation in 2006 compared to 2005. According to Stats SA's latest tourist accommodation survey, released earlier this month, the number of "stay unit nights" sold during 2006 increased from 17 227 200 in 2005 to 18 330 900 in 2006. Stats SA's figures also indicate that income from accommodation totalled almost R1.3-billion in 2006, a 17.7% increase over 2005. The major contributors to the increase were hotels (10%), other accommodation (4.9%) and guesthouses and guest-farms (2.9%) (Anon., 2007e:1).

The tourism industry is to make up about 12 percent of the country's Gross Domestic Product (GDP) by the time the 2010 FIFA World Cup™ comes around. The industry currently contributes about 8.2 percent of the national GDP, which is a R79 billion contribution; 8.3 million people passed through the country in 2006 (Appel, 2007:1).

Between 1994 and 2002, the number of foreign tourists grew from 3.7 million to 6.4 million, or 72 percent, reports South Africa's Department of Environmental Affairs and Tourism. As one of South Africa's fastest-growing industries, tourism has taken the lead over gold. Tourism brings in about 8.3 billion dollars (U.S.) annually, compared to gold's approximately 6.6 billion dollars (Marshall, 2005:1)

In South Africa it is estimated that nearly 5% of the total population of 38 million has some type of disability. Despite a firm commitment by the South African Government to fully reintegrate those with physical or mental disabilities into their communities, many barriers still exist to full participation. This also holds true for other countries within the region. One of the most common complaints of physically disabled people is the inaccessibility to the environment that they experience due to architectural barriers (Losinsky *et al.*, 2003:1).

According to Truter (in Oliver *et al.*, 1999:13) no reliable statistics on the nature and prevalence of disability in South Africa currently exist. This is due to the fact that different definitions of disability are used, different survey techniques are implemented and a poor service infrastructure exists. Estimates are that between 5 and 12 percent of South Africans are moderately to severely disabled. Statistics further show that only one in five disabled people are economically active and that the majority depend on social welfare and family support (Reyneke & Oosthuizen, 2003: 91).

- **Kenya**

The service sector accounts for 54 percent of Kenya's GDP. This includes the various services provided by the government and the increasingly important restaurant, hotel, and safari industries, which have grown in response to the increasing number of tourists visiting Kenya. Tourism in Kenya has expanded dramatically since 1963, and since 1989 it has been the country's leading source of foreign currency. Tourist arrivals, mainly from Europe and North America, numbered 1,399,000 in 2005. Kenya's main tourist destinations are the beaches along the Indian Ocean coast; national parks and game reserves, such as Masai Mara Game Park, Tsavo National Park, and Amboseli National Park; and museums and historical sites (Anon., 2006a:1).

- **India**

According to the Annual Report 2004-05 prepared by the Ministry of Tourism, the year 2005 saw tourism in India emerging as a major sector of the Indian economy. International tourist arrivals grew at 13.2 percent over that of the previous year, with a real boom taking place in the first half of the year. India's share of global domestic tourism has also been very impressive at around 4.6% of the estimated global domestic tourism (Munjal *et al.*, 2004:3).

India's travel and tourism market was valued at US\$42 billion in 2005, and is growing rapidly. India emerged as the fifth most preferred destination by the world's travellers in a survey conducted across 134 countries. India also figures in the Annual Readers' Travel Awards 2005, which were announced by the prestigious magazine Conde Nast Travellers UK in its September 2005 edition. A 5,000 year history, culture, religion and alternative medicine fascinate both budget and luxury travellers alike (Euromonitor, 2006:1).

- **Brazil**

Brazil expects to receive 3.1 million foreign tourists this year, a small figure in relation to the global figure of more than 600 million - and to the country's total population of 161 million -but a figure that is growing seven percent a year. Brazil's tourist industry employs six million people and accounted for 5.5 percent of GDP - or 45 billion dollars - last year, according to the governmental Brazilian Tourism Company (Osava, 1998:1).

Brazil's Travel & Tourism Industry is expected to contribute 2.8 per cent to Gross Domestic Product (GDP) in 2006 (BRL59.3 bn or US\$25.3 bn), rising in nominal terms to BRL125.1 bn or US\$36.0 bn (2.7 per cent of total) by 2016. The Travel & Tourism Economy contribution (per cent of total) should rise from 6.7 per cent (BRL141.1 bn or US\$60.1 bn) to 6.9 per cent (BRL322.4 bn or US\$92.9 bn) in this same period (Koumelis, 2006:1).

2.2.3.2 Accessibility/disabled laws

- **United States of America (USA)**

The United States has a commendable record on civil rights for persons with disabilities and recent decades have brought a great deal of progress. As a result of US government initiatives, persons with disabilities make use everyday of corner cuts, and access facilities in public buildings and public transit (subway, bus, train and aircraft) that simply were not available twenty-five years ago. The US initiative on civil rights for persons with disabilities has spread internationally, with many US approaches becoming the norm in other countries as well (O' Keefe, 2006).

Travellers visiting or at home in the United States are relatively well served by the Americans With Disabilities Act of 1990, which strives to put disabled passengers on equal footing with their able-bodied fellows (Sullivan, 2000:1). The Americans with Disabilities Act guarantees that disabled travellers receive equal treatment under the law (Anon., 2007d:1).

Changes to accommodate the disabled have become much more than just an added expense for resorts and travel companies. Thirty years after the National Rehabilitation Act and almost 15 years after the Americans with Disabilities Act (ADA), growth in the disabled travel market means added profits for businesses and expanding travel opportunities for the disabled. Part of the new mix of choices is a growing list of adventure travel options. No one is more aware of these new business opportunities than disabled entrepreneurs who've opened their own tour and travel agencies catering to this market (Anon., 2004:1).

- **European Union (EU)**

The European Union has formalized and published its comprehensive regulation concerning the rights of disabled persons and persons with

reduced mobility when travelling by air, and a recent popular press report indicates that a counter-revolution, if not actually in the works yet, may well be on its way. The European regulation diverges from those the USA has proposed, in its particulars, but more significantly in its overall approach. The European regulation sets general standards, and establishes what is essentially a rule-of-reason regime rather than micro-managing and micro-regulating (O' Keefe, 2006).

- **Japan**

Japan has taken a number of legislative steps to address these challenges. In 2000, Japan initiated the "Long-Term Care Insurance" system (LTCI) so senior citizens could receive enough care to lead dignified lives in their homes and communities. In 1994, Japan established "The Law for Promoting Easily Accessible and Useable Building for the Aged and the Disabled," nicknamed the "Heart Building Law." Revised in 2002, this law provides guidelines for accessibility to designated buildings. In 2000, Japan established "The Law for Promoting Easily Accessible Public Transportation Infrastructure for the Aged and the Disabled," or the "Barrier-Free Transportation Law," which requires public transport to be accessible. These laws and other initiatives led by the government and socially concerned architects, engineers, and advocates are beginning to make Japanese society accessible to all (Kawauchi, 2007:1).

2.3 RESULTS

The results were compiled from the responses received by the 91 responding hotels. In total, the research encompasses 12 387 hotel rooms, 121 restaurants, 111 bars, 104 elevators, 195 disabled friendly rooms, 95 disabled public bathrooms, 162 total parking, and 116 swimming pools.

The research also calculated the mean value of each statement, computed the mean of the category hotels had to decide on the statement presented. (1= strongly agree; 2=agree; 3= neither; 4=disagree; 5 strongly disagree), the average for each

category was then computed. Ultimately, similar to the well-known CSI (Customer Service Index), the DI (Disability Index) is developed. Interpretation of the DI shows that Bisschoff & Hough (1995):

- Under 0.60 – Unacceptable;
- 0.60 and < 0.75 – Acceptable; and
- 0.75 and higher – Excellent.

Unacceptable areas are highlighted by printing these indices in *italics*.

2.3.1 Disabled friendly

Most hotels that participated in this research were found to be disabled friendly, the Disability Index indicates that the hotels are acceptable, but barely as 0.602 is on the limit between acceptable and unacceptable.

TABLE 2.1: DISABLED FRIENDLY

We cater for disabled tourists/travellers	0.602
The facilities are disabled friendly	0.602
DISABILITY INDEX	0.602

2.3.2 Transportation

The transportation system in the hotels varies depending on the grading of the hotel to the location of the hotel. Most hotels in South Africa only provide a transfer service from the airport or allow taxi's to carry the hotel guest from the airport. In the statements asked to be answered by the hotels the Disability Index reflects an unacceptable rating on all three statements. That the hotel vehicle is able to transfer disabled tourist is almost acceptable with a 0.591 rating. Almost a third (30%) of the hotels in this research survey do not have or provide a transport vehicle for tourists.

TABLE 2.2: TRANSPORTATION

TRANSPORT	
The hotel transport vehicle is able to transfer disabled tourist	<i>0.591</i>
The transport vehicle has a hand rail for use by disabled	<i>0.505</i>
A portable staircase is available for use by disabled tourist	<i>0.543</i>
DISABILITY INDEX	<i>0.546</i>

2.3.3 Parking

In the assessment of parking for the disabled tourist, 4 of the 5 statements provided to the hotels reflect a level of acceptability 0.615 – 0.688. Disabled parking provided for every 50 rooms in the facilities was unacceptable with 0.435, with some hotels having less than two disabled parking spaces for the whole hotel. The Disability Index for parking is an acceptable 0.617.

TABLE 2.3: PARKING

PARKING	
Parking is provided for disabled tourists	0.686
The parking is available close to reception	0.688
The parking is clearly marked for disabled tourists	0.615
The parking space is larger than normal parking space	0.662
Disabled parking is provided for every 50 rooms in the facilities	<i>0.435</i>
DISABILITY INDEX	<i>0.617</i>

2.3.4 Reception

The reception area in the hotels scored an unacceptable 0.554 on the Disability Index. This is due to three problem “areas”, namely: the level of the reception counter is not at wheelchair level, accessible hand railings at the reception desk, and the floor surface not covered with non-slip material.

TABLE 2.4: RECEPTION

RECEPTION	
The reception has an accessible ramp for access by disabled	0.664
The door at reception is opened easily	0.710
The reception counter is accessible at wheelchair level	0.336
The staff is trained to handle disabled tourists	0.598
There are accessible handrails at the ramp to reception	0.398
The floor surface is non slip material at reception	0.508
The movement from tile floor to covered floor is smooth	0.662
DISABILITY INDEX	0.554

2.3.5 Elevator

The elevator Disability Index reflects an amazing 0.849 which is excellent. However, 63% of the hotels in the research have no elevator. This raises some questions regarding accessibility to other areas in the hotel, including parking and access to recreation area.

TABLE 2.5: ELEVATOR

ELEVATOR	
The hotel has an accessible elevator	0.908
The elevator has been equipped to be used by disabled tourists	0.831
An accessible handrail is in the elevator	0.800
The timing on the elevator doors has been adjusted	0.820
There is adequate room for movement in the elevator	0.886
DISABILITY INDEX	0.849

2.3.6 Hallway

The Hallway Disability Index is an acceptable 0.632, with 4 of the 5 statements being acceptable. The only problem area indicated is: handrails available around corners and declines in the floor, with an unacceptable 0.409. Some of the hotels, 15 (16%), do not have a hallway linking the main building to the rooms.

TABLE 2.6: HALLWAY

HALLWAY	
The hallway is large enough to accommodate a wheelchair	0.736
There is adequate room in the hallway	0.738
A handrail is available around corners and declines in the floor	0.409
The floor is covered with a manageable rug	0.622
The floor surface is non slip material	0.659
DISABILITY INDEX	0.632

2.3.7 Room

The room component of this research study does differ, as the grading of the hotels influences the requirements in a room. These statements are based on the disabled rooms in the hotels and the rooms do differ from the other rooms in the hotel. The Disability Index is an acceptable 0.641, with 6 of the 8 statements receiving being acceptable, the 2 statements that was unacceptable has to do with the access to a balcony/veranda. The room has an accessible balcony/veranda has a Disability Index of 0.576, 23 hotels (25%) do not have access to a balcony/veranda. The balcony/veranda is accessible by wheelchair has an almost acceptable 0.591 index, 27 hotels (30%) do not have an accessible balcony/veranda by wheelchair.

TABLE 2.7: ROOM

ROOM	
The door is easy to open	0.673
There is room to allow a wheelchair to move through the door	0.681
The closets are accessible for the tourist	0.642
The beds are arranged to allow access for an wheelchair	0.657
The furniture are accessible for the tourist	0.653
The floor is covered with a manageable rug	0.651
The room has an accessible balcony/veranda	0.576
The balcony/veranda is accessible by wheelchair	0.591
DISABILITY INDEX	0.641

2.3.8 Bathroom

The bathroom component in the research study provides some interesting feedback. Disabled bathrooms are still being defined as some of the “accessories” that are helpful to a disabled traveller that are not always found in hotel bathrooms or public disabled bathrooms”. The Disability Index for bathrooms is an acceptable 0.609, which is on the limit due to 5 of the 9 statements being below the acceptable level. The biggest problem areas being: shower chair available by request with an unacceptable 0.56 rating, and handle bars are available for access to the bathtub with an unacceptable 0.591 rating. A total of 16 hotels (18%) do not have handle bars available for access.

TABLE 2.8: BATHROOM

BATHROOM	
The door is able to close with a wheelchair inside	0.640
Handle bars are available for access to the toilet	0.591
The wash basin is at the correct level for a wheelchair	0.613
The wash basin water taps are easy to operate	0.670
The bath/shower is designed to be disabled friendly	0.587
Transfer from the wheelchair to the bath/shower is possible	0.596
The towels are at the right level for access from a wheelchair	0.635
A shower chair is available by request	0.560
Handle bars are available for access to the bath tub	0.591
DISABILITY INDEX	0.609

2.3.9 Bar Area

The bar area was found to have an acceptable 0.620 Disability Index, with only 2 of the 7 statements being unacceptable, namely that of the bar counter’s accessibility to serve a person in a wheelchair (0.413) and the fact that the bathroom is inaccessible by wheelchair (0.596). A total of 20 hotels (22%) do not have a ramp available, and stairs to the area has no accessible handrail. As much as 30 hotels (33%) do not have handrails available for the stairs.

TABLE 2.9: BAR AREA

BAR AREA	
The door to the area is easy to open	0.719
A ramp is accessible by wheelchair to the bar	0.681
There is room to move the wheelchair in the area	0.688
A bathroom is available in the area	0.622
The bathroom is accessible by wheelchair	0.596
The bar counter is accessible to serve a wheelchair	0.413
Stairs to the area have an accessible handrail	0.624
DISABILITY INDEX	0.620

2.3.10 Restaurant

The restaurant Disability Index is an acceptable 0.649, with only 1 statement being unacceptable. Problem areas in the restaurant research component include: a ramp is accessible by wheelchair to the area, 18 hotels (20%) have no ramp available, and stairs to the area are accessible with a handrail. A total of 26 hotels (29%) have to use handrails to make the stairs accessible.

TABLE 2.10: RESTAURANT

RESTAURANT	
The door to the area is easy to open	0.719
A ramp is accessible by wheelchair to the area	0.699
There is room to move a wheelchair in between the tables and chairs	0.690
A bathroom is available in the area	0.618
The bathroom is accessible by wheelchair	0.593
The buffet area is accessible by wheelchair	0.611
Stairs to the area is accessible with a handrail	0.613
DISABILITY INDEX	0.649

2.3.11 Swimming pool/recreation area

The swimming pool/recreation area is an unacceptable 0.490 on the Disability Index, making this area inaccessible for disabled travellers. All 7 statements are unacceptable on the ratings, with a lot of room for improvements. Problem areas

include, the swimming pool is equipped with handrails 0.391 rating, accessible ramp is available to the area 0.49 rating; (14 hotels (15%) have no ramp available), a bathroom is available in the area 0.49 rating, the bathroom is accessible by wheelchair 0.459 rating, and stairs to the area has accessible hand railings 0.484 rating (18 hotels (20%) has no hand railings).

TABLE 2.11: SWIMMING POOL/RECREATION AREA

SWIMMING POOL/RECREATION AREA	
Access to the area is available to disabled tourists	<i>0.585</i>
Stairs to the area has accessible hand railings	<i>0.484</i>
The swimming pool is equipped with hand railings	<i>0.391</i>
A bathroom is available in the area	<i>0.490</i>
The bathroom is accessible by wheelchair	<i>0.459</i>
An accessible ramp is available to the area	<i>0.490</i>
Shelter from the elements is accessible	<i>0.536</i>
DISABILITY INDEX	<i>0.490</i>

2.3.12 Grand Disability Index

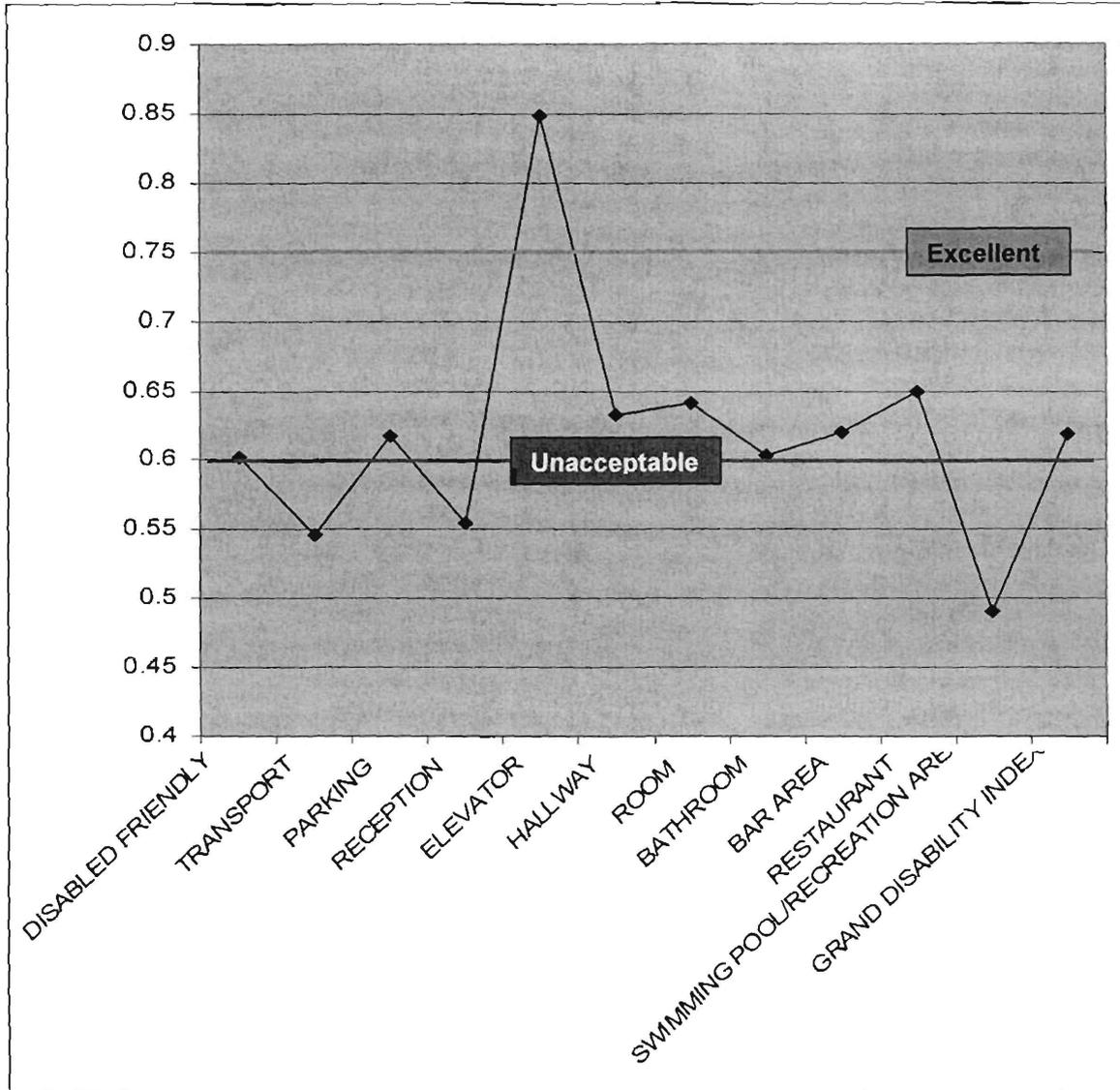
The Grand Disability Index (GDI) is a summary index of the hotel. It provides an over-all view of the hotel's disability inclination and serves as an indicator of the disability orientation thereof. The GDI is an acceptable 0.619 (see Table 2.12).

TABLE 2.12: GRAND DISABILITY INDEX

DISABLED FRIENDLY	0.602
TRANSPORT	<i>0.546</i>
PARKING	0.617
RECEPTION	<i>0.554</i>
ELEVATOR	0.849
HALLWAY	0.632
ROOM	0.641
BATHROOM	0.609
BAR AREA	0.620
RESTAURANT	0.649
SWIMMING POOL/RECREATION AREA	<i>0.490</i>
GRAND DISABILITY INDEX	0.619

Table 2.12 is displayed visually in Figure 2.1. Take note of the borders (0.60 – unacceptable and 0.75 – excellent) in the figure and also the fact that just one index is regarded to excellent while quite a number are below the unacceptable margin.

FIGURE 2.1 GRAND DISABILITY INDEX



2.4 SUMMARY

The research into accessible accommodation for physically disabled travellers and elderly persons has revealed a lot of interesting information. The average hotel has 129 hotel rooms, 1 restaurant, 1 bar, 1 elevator, 2 disabled friendly rooms, 1 disabled friendly public bathroom, 1.5 disabled parking, and 1 swimming pool. This reveals that the average hotel is capable of providing accessible accommodation to disabled travellers and the elderly. As the DI (Disability Index) reflects that there are acceptable areas within the hotel, and that some areas are problem areas.

Most hotels are acceptable of providing disabled friendly accommodation, some factors to this being the location of the hotel, age of the development, the market being serviced, and the size of the hotel. The *Grand Disability Index* is shown in Table 2.12 above.

The information collected from the hotels in this research study forms the base for changes to the guidelines used by the Tourism Grading Council, to determine the level of disabled friendly status and grading a hotel can receive. Hotels are graded for disabled friendly statutes based on findings by consultants, who have developed a standard of guidelines for grading of the mobility in the hotel. The GDI also provides an over-all measure of the hotel's disability inclination. In addition, if operationalised, the DI could provide a cognitive map of reference for disabled travellers and assist them in their booking arrangements.

The research study has identified some problem areas in hotels in general. These areas have been discussed and solutions have to be found to make the hospitality industry more mobility friendly for travellers with physical disabilities and the elderly travellers. The research study has also identified the lack of enforcement of the disabled guidelines used in the industry. This is a problem that would have to be addressed by government and the industry.

During the research study the GDP (Gross Domestic Product) of Tourism in different countries was used to determine the size of the South Africa Tourism Market and to evaluate this with that of 1st world (USA, EU & Australia) and 3rd (Kenya, India & Brazil) world countries. The research also aimed to establish the size of the disabled travellers' market in various countries (1st world and 3rd world). The lack of current statistics, especially with 3rd world countries, hampered to draw this conclusion. Accessibility laws for disabled persons were also used to highlight the difference between 1st world countries (USA, EU, Australia & Japan) and that of 3rd world countries (South Africa, Kenya, India & Brazil) regarding disabled travellers and accessibility.

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CHAPTER 3

CONCLUSIONS AND RECOMMENDATIONS

3.1 INTRODUCTION

Chapter 3 is the final chapter of this research. The chapter offers conclusions and recommendations from the results that were presented in the previous chapter. To fully harness the potential of barrier-free tourism, it is essential that the tourism industry improves its service to people with disabilities. This includes improved access of hotel facilities within all areas of the property to the entire disabled community, including those with physical, sensory, and communication disabilities (Vignuda, 2001:7).

Travellers with disabilities spent \$13.6 billion in 2002 -- but say they would have spent \$27 billion if hotels, airlines, theme parks and restaurants could better accommodate their needs (Melvin, 2004:1).

3.2 CONCLUSION AND RECOMMENDATIONS

The recommendations are structured according to the research results. It also aims to support the guidelines used in the Tourism Grading Council, and to highlight problem areas that need managerial inputs and implementation of changes.

3.2.1 Reception

Problems encountered with the reception area are few, reception is the first contact a traveller has with the hotel and creates the first impression. The lack of training to staff in the handling of travellers with disabilities is of key importance and can dramatically improve the stay of disabled travellers. The layout of the reception area is also a dominating problem factor in some hotels; this can be explained with the height of the reception desk not being able to service disabled travellers, floor surface covered with loose carpets or slippery tiles that endanger the travellers, and stairs in some places limiting access to the full reception area. Other problems

encountered are the lack of escape plans in the event of fire for disabled travellers and some problems with the reception door.

CONCLUSION 1:

Few of the hotels need extensive revamping of the reception area.

CONCLUSION 2:

There is a clear misunderstanding regarding the needs of disabled travellers.

RECOMMENDATION 1:

Evaluation of the current reception area is done using the DI.

RECOMMENDATION 2:

Staff training is important on the assistance and handling of disabled travellers.

3.2.2 Room and bathroom

The room is an important part in the stay of a traveller in a hotel. The research has shown that most hotel rooms are up to standard with just the balcony/veranda being a problem with accessibility for travellers. The bathroom is a problem area, with the lack of space for reconstruction creating problems for the adjustment for disabled travellers needs. These needs can be explained as accessible space for transfer between wheelchair and bathtub, the lack of handrails at key points in the bathroom for assistance, the requirement of shower chairs by travellers for the shower, and the need for hand dryers and liquid soap in the bathroom. Some other needs in the bathroom are communication means with reception in case of an accident and easy opening of water taps at the washbasin.

CONCLUSION 1:

The hotels have no accessible balcony/veranda.

CONCLUSION 2:

There is a shortage of hand rails in key areas in the bathroom to provide assistance.

RECOMMENDATION 1:

Review of problems and solutions with the balcony/veranda.

RECOMMENDATION 2:

Evaluation of the bathroom is done, using the DI to provide assistance to disabled travellers.

3.2.3 Bar and restaurant

The Bar and restaurant area in most hotels are fine, but some key problems have been found with the research study. The key areas of concern in the bar is the layout of tables and chairs that create interference with wheelchair movements, the height of the bar counter is unable to serve wheelchair travellers, entrance to the bar area is sometimes with stairs and limits access, access to the bar's veranda/balcony is also limited due to accessibility problems. The problems in restaurants are fewer, but some are still key problems for travellers. The problems include a lack of staff training on how to assist travellers in the restaurants, an accessible path for travellers to and from the buffet area, and access to outside tables in the restaurant. Both areas also have a key problem - that of an accessible disabled friendly bathroom in the area of service.

CONCLUSION 1:

Most hotels do not need extensive revamping of the Bar & Restaurants area.

CONCLUSION 2:

Staff is not trained to understand the needs of a disabled traveller in the restaurant.

CONCLUSION 3:

The accessibility of wheelchairs is limited to some areas in the bar and restaurant.

RECOMMENDATION 1:

Evaluation of the bar and restaurant area is done using the DI to determine problems and solutions.

RECOMMENDATION 2:

Staff training is needed on the needs of disabled travellers in the Restaurant area.

3.2.4 Swimming pool/recreation area

The swimming pool/recreation area is not defined within guidelines in the Tourism Grading Council. This area plays an important part in the total service provided by hotels in South Africa. In the research study it was found that the area has received little consideration with regard to the development of disabled friendly status. This can be more accurately described by the following: lack of an accessible ramp that provides access to the area, problems with the floors/ground that cover the area, inaccessible pool due to no hand railing at the steps of the pool, no accessible pool bathrooms for disabled travellers, lack of shelter from wind and rain for travellers at the pool, and lack of training provided to staff in assisting travellers.

CONCLUSION 1:

Most hotels need to revamp the swimming pool/recreation area.

RECOMMENDATION 1:

Use the DI to determine problems and solutions.

RECOMMENDATION 2:

Determine the needs of the individual hotels guests using the area.

3.3 PROBLEMS ENCOUNTERED

In the process of the research study some problems were encountered namely, lack of current information on barrier-free or accessible tourism for disabled travellers. There were problems with the acquiring of existing disabled statistics in the world and in South Africa from the internet or associations dealing with disabled travels. I received no information or support for this research study from the Disabled associations in South Africa, regarding disabled friendly hotels and more specifically problems with accommodation in South Africa.

3.4 SUMMARY³

Disability affects 15-20% of every country's population: There are at least 610 million people with disabilities worldwide. Conflict and poverty continue to cause high rates of disability in the less developed world. The incidence of disability is increasing in the industrialised world as populations age (Elwan, 1999:1).

Provision of accessible facilities is by far the most important area of concern for achieving a barrier-free tourism experience for people with disabilities. Taking into consideration that it is highly unrealistic to presume that the situation would change overnight, owing to cost and time limitations, what is required in the short-term is that the tourism sector strives to achieve a reasonable level of accessibility, which balances disabled users' needs, the constraints of existing conditions and the resources available for such adjustments (Vignuda, 2001:9).

The research into accessible accommodation for physically disabled and elderly travellers in South Africa has revealed an industry that has the potential to grow with the adaptation of the infrastructure to accommodate the disabled travellers and the development and introduction of laws to enforce accessibility to all buildings. While some hotels are more "disabled friendly" than others there needs to be consistency

³ Guidelines of the Tourism Grading Council in Appendix 4

throughout the whole industry, from hotels to guesthouses, regarding disabled friendly accessibility. The term “disabled friendly” accommodation also needs to be defined and categorized for reference by disabled travellers as is used in the EU. The categories would support the decision by the disabled traveller when choosing an establishment for accommodation.

The hospitality industry, especially the accommodation side, only caters for a limited number of disabled travellers. The research shows that only 1.57% of the total rooms are disabled friendly, thus of the total number of tourists arriving in South Africa the industry can only assist 1.57% of these travellers if they have disabilities.

In the development of the Disability Index (DI) through the research into accessible accommodation in South Africa, it was found that there is a need for change to provide barrier-free or accessible accommodation for travellers. The DI forms the first step in this process, as problem areas are identified within the hotel using the DI, the problem areas are then rectified with the guidelines used by the Tourism Grading Council and the refinement as the research study has indicated. The final product is an accessible establishment providing accommodation to the physical disabled and elderly travellers.

The research study has also identified shortcomings in the guidelines used by the Tourism Grading Council; these problems areas have been explained and need to be included in new guidelines for accessible accommodation.

Through continued evaluation of the guidelines and the situation in the industry progress can be made in the development of a barrier-free/accessible industry for disabled travellers and elderly persons in South Africa. The South African government needs to develop laws regarding accessibility as the USA and the EU have done in the last couple of years to assist and develop tourism in their countries and for the large untapped market of disabled travellers.

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APPENDIX 1: HOTEL DETAILS

NAME OF HOTEL & LOCATION

Andros Country House
Audacia Manor
Bakubung
Beacon Island
Beverly Hills Hotel
Breakwater Lodge
Brookes Hill Suites
Cabana Beach
Castleburn
Centurion Lake Hotel
City Lodge Bloemfontein
City Lodge Bryanston | Johannesburg
City Lodge Durban Central
City Lodge Durban, Umhlanga
City Lodge GrandWest | Cape Town
City Lodge Johannesburg International Airport
City Lodge Pinelands | Cape Town
City Lodge Port Elizabeth
City Lodge Sandton Katherine Street | Johannesburg
City Lodge Sandton Morningside | Johannesburg
City Lodge Victoria and Alfred Waterfront | Cape Town
Courtyard Hotel Arcadia | Pretoria
Courtyard Hotel Cape Town
Courtyard Hotel Eastgate | Johannesburg
Courtyard Hotel Port Elizabeth
Courtyard Hotel Rosebank | Johannesburg
Courtyard Hotel Sandton | Johannesburg
Drakensberg Sun
Emnotweni Sun Hotel
Extreme Hotel Cape Town
Fairlawns Boutique Hotel & Spa
Fairlawns Boutique Hotel & Spa
Falcons View Manor
Fordoun Spa, Hotel & Restaurant
Fordoun Spa, Hotel & Restaurant
Garden Court de Waal
Garden Court East London
Garden Court Eastern Boulevard
Garden Court Eastgate
Garden Court Hatfield
Garden Court Kimberley
Garden Court King's Beach

Garden Court Marine Parade
Garden Court Milpark
Garden Court Morningside
Garden Court O.R. Tambo International Airport
Garden Court Polokwane
Garden Court Sandton
Garden Court Sandton City
Garden Court South Beach
Garden Court Ulundi
Garden Court Umtata
Hacklewood Hill Country House
Hemingways Hotel
Hermanus Beach Club
Holiday Inn Joburg Sandton - Katherine Street
Holiday Inn Pretoria
InterContinental Airport Sun - Joburg
InterContinental Palazzo - Joburg Montecasino
InterContinental Sandton Sun & Towers - Joburg
Ka'Ingo Private Reserve & Spa
Kruger Park Lodge
Kwa Maritane
Kwa Maritane
La Cote D'azur
La Cote D'azur
Malelane Sun
Melrose Arch Hotel
Melrose Arch Hotel
Michelangelo Towers
Northen Cape
Olive Park Lodge - Temba Game Reserve
Protea Hotel Addo
Protea Hotel Balalaika Sandton ****
Protea Hotel Bathurst ***
Protea Hotel Black Mountain
Protea Hotel Bloemfontein ****
Protea Hotel Bloemfontein Central
Protea Hotel Botlierskop Private Game Reserve ****
Protea Hotel Cape Castle ***
Protea Hotel Capital ***
Protea Hotel Cumberland ***
Protea Hotel Devon Valley ****
Protea Hotel Diamond Lodge ***
Protea Hotel Dolphin Beach ****
Protea Hotel Edward and Conference Centre P.E. ***
Protea Hotel Edward Durban ****
Protea Hotel Empangeni ***

Protea Hotel Evelyn House Country Lodge ****
Protea Hotel Gold Reef City ****
Protea Hotel Grahamstown ***
Protea Hotel Hatfield Apartments ***
Protea Hotel Hazyview ***
Protea Hotel Imperial ***
Protea Hotel Imvubu Lodge ***
Protea Hotel Island Club ****
Protea Hotel Karridene Beach ***
Protea Hotel Keurbooms River ***
Protea Hotel King George ****
Protea Hotel Klerksdorp ***
Protea Hotel Knysna Quays ****
Protea Hotel Kruger Gate ****
Protea Hotel Lesedi ***
Protea Hotel Mafikeng ****
Protea Hotel Makaranga *****
Protea Hotel Manor ***
Protea Hotel Marine P.E. ****
Protea Hotel Midrand ****
Protea Hotel Mongena ***
Protea Hotel Mossel Bay ***
Protea Hotel Mphephu
Protea Hotel Nelspruit ****
Protea Hotel Nkolo Spa
Protea Hotel North Wharf
Protea Hotel Nwanedi
Protea Hotel Oasis ****
Protea Hotel Outeniqua
Protea Hotel Parktonian
Protea Hotel Polokwane
Protea Hotel President ****
Protea Hotel Richards Bay ***
Protea Hotel Riempie Estate ***
Protea Hotel Riviera Resort
Protea Hotel Saldanha Bay ***
Protea Hotel Samrand ***
Protea Hotel Sea Point
Protea Hotel Shakaland
Protea Hotel Shangri-La ***
Protea Hotel Simunye Zulu Lodge
Protea Hotel St Lucia
Protea Hotel Stellenbosch ***
Protea Hotel Suikerbosrand
Protea Hotel The Lakes
Protea Hotel The Park ***

Protea Hotel The Ranch ***
Protea Hotel Thohoyandou
Protea Hotel Transit
Protea Hotel Tsitsikamma Village ***
Protea Hotel Tyger Valley ***
Protea Hotel Umfolozi River
Protea Hotel Umhlanga ***
Protea Hotel Upington ***
Protea Hotel Victoria Junction ****
Protea Hotel Wanderers ****
Protea Hotel Waterfront ***
Protea Hotel Wilderness Resort ***
Protea Hotel Witbank ***
Pumba Private Game Reserve
Raphael Penthouse Suites
Ridge Hotel
Road Lodge Brakpan Carnival City | Johannesburg
Road Lodge Cape Town International Airport
Road Lodge Durban
Road Lodge Germiston Lake| Johannesburg
Road Lodge Isando | Johannesburg
Road Lodge Johannesburg International Airport
Road Lodge Kimberley
Road Lodge N1 City | Cape Town
Road Lodge Nelspruit
Road Lodge Port Elizabeth
Road Lodge Randburg | Johannesburg
Road Lodge Rivonia | Johannesburg
Road Lodge Rustenburg
Rosenhof Country House
Sabi River Sun
Southern Sun Bloemfontein
Southern Sun Cape Sun
Southern Sun Elangeni
Southern Sun Grayston
Southern Sun Newlands
Southern Sun North Beach
Southern Sun O.R. Tambo Intl. Airport
Southern Sun The Cullinan
Southern Sun Waterfront Cape Town
StayEasy Century City
StayEasy Eastgate
StayEasy Emnotweni
StayEasy Pretoria
Sunnyside Park Hotel
The Airport Grand

The Commodore
The Michelangelo
The Portswood
The Sands @ St. Francis
Tinga Private Game Lodge
Town Lodge Bellville The Lodge | Cape Town
Town Lodge George
Town Lodge Johannesburg International Airport
Town Lodge Menlo Park | Pretoria
Town Lodge Midrand | Johannesburg
Town Lodge Nelspruit
Town Lodge Polokwane
Town Lodge Roodepoort | Johannesburg
Town Lodge Sandton Grayston Drive | Johannesburg
Tshukudu
Tshukudu
Umhlanga Sands
Wilderness Dunes
Wilderness Dunes

APPENDIX 2: QUESTIONNAIRE



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To Whom It May Concern:

Research into Accommodation for physical disabilities in South Africa

The purpose of the questionnaire is to obtain information with regard to accommodation available for physical disabled and elderly restricted travellers using known hotels within South Africa. The study is aimed to see if hotels make adequate arrangements for these travellers.

The information obtained from the questionnaire will be utilised to create awareness in the tourism industry.

Please email this questionnaire back to francoisbreedt@hotmail.com or fax to (056) 817 7306

Thank you.

Francois Breedt

General information on the hotel

Hotel name: _____

Contact details: Telephone: _____

Email: _____

Web page: _____

The grading of the Hotel: _____

Selling point of the Hotel: _____

Travellers' classification using the hotel: _____

Occupation ratio of hotel: _____

Seasonality of the hotel: _____

Number of Hotel Rooms: _____

Total Guests that can be accommodated: _____

Number of Conferencing Rooms: _____

Number of Bars: _____

Number of Restaurants: _____

Number of Swimming pools: _____

Public Bathrooms: _____

Elevators in the Hotel: _____

Disabled hotel rooms: _____

Disabled friendly public bathroom: _____

Disabled Parking: _____

Personal details of person completing the questionnaire

Name: _____

Contact details: Telephone: _____

Email: _____

Position in the Hotel: _____

	STRONGLY AGREE	AGREE	NEIGHTER	DISAGREE	STRONGLY DISAGREE
QUESTION HOTEL ROOMS					
We cater for disabled tourist/travellers					
The facilities are disabled friendly					
TRANSPORT					
The hotel transport vehicle is able to transfer disabled tourist					
The transport vehicle has a hand rail for use by disabled					
A portable staircase is available for use by disabled tourist					
PARKING					
Parking is provided for disabled tourist					
The parking is available close to reception					
The parking is clearly marked for disabled tourist					
The parking space is larger than normal parking space					
Disabled parking is provided for every 50 rooms in the facilities					
RECEPTION					
The reception has an accessible ramp for access by disabled					
The door at reception is opened easily					
The reception counter is accessible at wheelchair level					
The staff is trained to handle disabled tourist					
There are accessible handrails at the ramp to reception					
The floor surface is non slip material at reception					
The movement from tile floor to covered floor is smooth					
ELEVATOR					
The hotel has an accessible elevator					
The elevator has been equip to be used by disabled tourist					
An accessible handrail is in the elevator					
The timing on the elevator doors has been adjusted					
There is adequate room for movement in the elevator					
HALLWAY					
The hallway is large enough to accommodate an wheelchair					
There is adequate room in the hallway					
A handrail is available around corners and declines in the floor					
The floor is covered with manageable rug					
The floor surface is non slip material					

ROOM					
The door is easy to open					
There is room to allow an wheelchair to move through the door					
The closets are accessible for the tourist					
The beds are arranged to allow access for an wheelchair					
The applicants are accessible for the tourist					
The floor is covered with an manageable rug					
The room has an accessible balcony/veranda					
The balcony/veranda is accessible by wheelchair					
BATHROOM					
The door is able to close with a wheelchair inside					
Handle bars are available for access to the toilet					
The wash basin is at the correct level for wheelchair					
The wash basin water taps are easy to operate					
The bath/shower is designed to be disabled friendly					
Transfer from the wheelchair to the bath/shower is possible					
The towels are at the right level for access from a wheelchair					
Shower chair is available by request					
Handle bars are available for access to the bath tub					
BAR AREA					
The door to the area is easy to open					
A ramp is accessible by wheelchair to the bar					
There is room to move the wheelchair in the area					
A bathroom is available in the area					
The bathroom is accessible by wheelchair					
The bar counter is accessible to serve a wheelchair					
Stairs to the area has an accessible handrail					
RESTAURANT					
The door to the area is easy to open					
A ramp is accessible by wheelchair to the area					
Room to move a wheelchair in between the tables and chairs					
A bathroom is available in the area					
The bathroom is accessible by wheelchair					
The buffet area is accessible by wheelchair					
Stairs to the area is accessible with a handrail					

SWIMMING POOL/RECREATION AREA					
Access to the area is available to disabled tourist					
Stairs to the area has accessible handrails					
The swimming pool is equipped with hand railings					
A bathroom is available in the area					
The bathroom is accessible by wheelchair					
An accessible ramp is available to the area					
Shelter from the elements is accessible					

Please email to: francoisbreedt@hotmail.com or fax to: (056) 81 77306

THANK YOU FOR YOUR TIME!!

APPENDIX 3: GUIDELINES OF THE TOURISM GRADING COUNCIL

TOURISM GRADING COUNCIL OF SOUTH AFRICA: UNIVERSAL ACCESS GRADING

Compiled by Siphokazi Gcaza in association with IDC Consultants

MOBILITY IMPAIRMENT

GRADING LEVELS	COMMENTS/EXPLANATIONS
1.0 EXTERNAL APPROACH	
1.1 Setting down point at the entrance	<ul style="list-style-type: none"> This needs to be on an area where the gradient does not exceed 1:20, so that wheelchair users may feel secure when getting out of a vehicle and into the wheelchair or from their wheelchair and into the car. If the slope is too steep the wheelchair will roll and can result in the person falling or sustaining an injury.
1.2 Number of designated 3500 wide parking bays	<ul style="list-style-type: none"> There should be one bay per 50 rooms minimum clearly designated and signposted.
1.3 Distance from designated parking bays to entrance	<ul style="list-style-type: none"> The parking bay cannot be further than 50m from the edge of the parking bay to the entrance doors and ideally should be 20m.
1.4 Gradient en-route to entrance from street	<ul style="list-style-type: none"> At best the gradient should be 1:15 and at worst 1:10 to enable the wheelchair user to enter without too much difficulty
1.5 No steps en-route to entrance from street or designated parking bay	<ul style="list-style-type: none"> The wheelchair user would be unable to access the building if there are any steps present.
1.6 Route surface firm and even slip resistance	<ul style="list-style-type: none"> The surface must be hard with no gravel or cobble type finish, which would make it extremely difficult for the wheelchair user to negotiate.
2.0 MAIN ENTRANCE	
2.1 Fixed slip resistant floor surface	<ul style="list-style-type: none"> There should be wooden flooring, tiles or close pile carpet no longer than 13 to allow the wheelchair to proceed comfortably.
2.2 Threshold not to exceed	<ul style="list-style-type: none"> The threshold ideally should be flush, however at worst it should not exceed 50
2.3 Size of opening leaf of entrance door at least	<ul style="list-style-type: none"> At least the opening should measure 760 but the clear opening measured with the door in a 90 degree open position should measure 900
2.4 Size of unobstructed level space on either side	<ul style="list-style-type: none"> There should be 1100 x 1500 distance measure clear of the door swing; but at worst this measurement should be 800

	x 1200
2.5 Pull handle on door	<ul style="list-style-type: none"> This should measure at least 120 in length and be easy to grasp at 800 – 1200 in height.
2.6 Hours of attendance	<ul style="list-style-type: none"> There should be 24 hour attendance at the door to provide assistance for those who need it, however at worst attendance should be for 12 hours per day.
3.0 RECEPTION	
3.1 Fixed slip resistant floor surface	<ul style="list-style-type: none"> Wooden floor, tiles or close pile carpet should be no longer than 13 to provide easy access for the wheelchair user
3.2 Length of 800 high check in counter or reception	<ul style="list-style-type: none"> The length of the check in desk should be 1200 however stand alone desks are acceptable for grades M2 and M3
3.3 Size of unobstructed clear space in front of check in counter or reception desk	<ul style="list-style-type: none"> The unobstructed space must measure 1200 x 1500 in front of the desk to enable the wheelchair user to comfortably negotiate the area in front of the reception desk (the shorter dimension runs parallel to the counter or desk).
3.4 Seating with seat height between 450 - 500	<ul style="list-style-type: none"> This enables the person to move comfortably from their wheelchair into a seat and enables appropriate manoeuvring back into the wheelchair from the seat, where leverage using arms from the seat achieves the correct height of the wheelchair.
4.0 ACCESSWAYS AND PASSAGES INTERNAL	
4.1 Fixed slip resistant floor surface	<ul style="list-style-type: none"> This is a precautionary measure, which applies to almost to all people with mobility impairments with and without mobility device, there is a potential of being out balance as a result of physical functional limitations or the way that physical environment is organized.
4.2 Unobstructed width of not less than 1000	<ul style="list-style-type: none"> This allows for easy access for wheelchairs and walkers
4.3 Permitted narrowing over 1500 length	<ul style="list-style-type: none">
4.4 Size of opening leaf of all doors en-route at least	<ul style="list-style-type: none"> There must be a clear opening when the door is open at a 90 degrees
4.5 Pull handle on doors en-route	<ul style="list-style-type: none"> Handles must measure at least 120 in length and be easy to grasp
4.6 Stairs to be fitted with handrails and non slip treads	<ul style="list-style-type: none"> Often the force of gravity pulls people with mobility impairment forward and

	without anything they can hold onto to steady the walking, one can find oneself seriously injured.
4.7 Height of emergency equipment, switches and controls located between 800 and 1200	<ul style="list-style-type: none"> This is essential to enable the wheelchair user to reach the switches and controls from the wheelchair.
5.0 LIFTS En-route to accessible bedrooms or other facilities	
5.1 Size of unobstructed approach space not less than 900 x 1400	<ul style="list-style-type: none"> Wheelchair users must have a clear space in order to negotiate entrance into and exiting from the lift without obstruction
5.2 Door clear opening width not less than 900	<ul style="list-style-type: none"> There must be sufficient space for the wheelchair user to enter and exit the lift opening comfortably
5.3 Lift with automatic doors	<ul style="list-style-type: none"> Must measure not less than 900 when doors are in open position to enable wheelchair users to enter and exit the lift.
5.4 Internal size of lift car 1000 x 1500	<ul style="list-style-type: none"> The lift must be large enough to comfortably accommodate the size of a wheelchair and others.
5.5 Height of internal and external controls including emergency controls must be 900 - 1200	<ul style="list-style-type: none"> This is in order for the wheelchair user to reach the internal and external controls as well as the emergency controls with ease from the wheelchair.
5.6 Handrail provided on all sides of the lift car	<ul style="list-style-type: none"> The handrail must be located between 900 and 1000 above the floor so that they may be easy for the wheelchair user to grasp in order to secure and stabilize their position.
5.7 Fixed slip resistant floor surface	<ul style="list-style-type: none"> This is necessary for almost all people with mobility impairments as there is a potential for being out of balance as a result of physical functional limitations.
6.0 BEDROOMS	
6.1 Clear opening width of doors	<ul style="list-style-type: none"> The doors must be wide enough to allow a variety of different sizes and types of wheelchairs for e.g. manual and electric wheelchairs are different sizes and makes. Preferably 775 mm
6.2 Size of clear unobstructed space in-front of doors	<ul style="list-style-type: none"> This can result in the disabled person not being able to enter his room. Doors also distinguished by colour, size or other appropriate contrast
6.3 Unobstructed access widths between walls, features, furniture and fittings	<ul style="list-style-type: none"> It is essential that the room is free of any obstructions which might result in the disabled person being unable to access certain provisions within the

	room e.g. switches
6.4 Unobstructed space to turn adjacent to bed	<ul style="list-style-type: none"> At least 1 200mm width on one side of the bed to allow for the different ways each people with mobility impairments transfer
6.5 Size of access space to all furniture and fittings	<ul style="list-style-type: none"> Access space provides easy reach
6.6 Size of firm bed 450 to 500 in height	<ul style="list-style-type: none"> People with mobility impairments need a firm surface to help their arms to lift the lower body with paralysis. The height of the bed is also crucial as it needs to be in alignment with the wheelchair that will be used for transfers. With the appropriate height of the bed there is less effort and less energy used in getting out of the bed e.g. picture a person with a mobility impairment getting out of a futon bed and a conventional bed. Who might need assistance here?
6.7 Height of light switch and environmental controls	<ul style="list-style-type: none"> Light switches should be at a height of 800 – 1200 to enable wheelchair users to comfortably reach them.
6.8 Bedside light controls	<ul style="list-style-type: none"> If there are no easily accessible controls to a person with mobility impairment. To switch on and off can be energy consuming exercise for a person with mobility impairment. A person with a moderate or significant mobility impairment e.g. paraplegia or quadriplegia requires comfort and easy reach to conserve energy. For example look at a scenario where a person with mobility impairment is already in bed and requires too switch off lights in his room. He/she has to get up, transfer to wheelchair propel towards the entrance, switch off the light, everything is dark and propel back towards the bed, transfer and settle. Further, the person might injure himself.
6.9 Remote controlled TV (if provided)	<ul style="list-style-type: none"> Same as 6.8
6.10 Bedside telephone (if provided)	<ul style="list-style-type: none"> Same as 6.8
6.11 Desk and tables to have a clear space of 750mm below the work surface	<ul style="list-style-type: none"> To provide easy access to a work surface where a wheelchair would be able to slide under the table
6.12 Curtains fitted with pull rods or closing cords	<ul style="list-style-type: none"> This is for easy reach and conservation of energy

6.13 Cupboard door handles height	<ul style="list-style-type: none"> The height of the cupboard door handles must be at 800 – 1400 so that they are within easy reach.
6.14 Cupboard hanging rail height 1400mm	<ul style="list-style-type: none"> This is important so that person in the wheelchair may easily reach his/her clothing.
6.15 Height of emergency evacuation notice	<ul style="list-style-type: none"> The notice should be at a height of 1100 to enable the wheelchair user to read it with ease.
6.16 Remote emergency alarm call system in room	<ul style="list-style-type: none"> These should be within easy reach for the wheelchair user in the event of an emergency or the need for assistance.
6.17 Light switches and door handles located between 900 -1200 above floor surface	<ul style="list-style-type: none"> As a general rule the light switches and environmental controls should be aligned with the door handle for easy access and reach
6.18 Power sockets located between 800 - 1000 above floor surface	<ul style="list-style-type: none"> This enables the wheelchair user to reach them with ease.
6.19 Fire extinguisher or fire blanket located between 800 -1200 above floor level	<ul style="list-style-type: none"> In this way the fire extinguisher or fire blanket is accessible
7.0 BATHROOMS	
7.1 Fixed slip resistant floor surface	<ul style="list-style-type: none"> Wooden, tiles or close pile carpet no longer than 13 to ensure that the wheelchair user does not slip and injure himself on a wet and slippery floor
7.2 Clear opening width of doors	<ul style="list-style-type: none"> There must be a clear opening of at least 760 with the door in the 90 degree open position
7.3 Size of clear unobstructed space in front of doors	<ul style="list-style-type: none"> All bathrooms must have enough internal space measuring at least 900 x 1200 in front of the doors to allow for door closure without any obstacle for the wheelchair user.
7.4 Wash hand basin	
7.4.1 Basin adjacent to the WC must be set at a height of 800 with 720 clear space under the basin	<ul style="list-style-type: none"> This is essential to enable the wheelchair user to comfortably manoeuvre under the basin to make proper use of it.
7.4.2 Lever action taps or mixer	<ul style="list-style-type: none"> It is easier for a disabled person to use the taps if they are lever action rather than knobs which you have to grip and turn.
7.4.3 Mirror must be located between 75 and 1500 above the basin and be at least 300 in width	<ul style="list-style-type: none"> This is to ensure that the wheelchair user is able to see his/her reflection at the basin while seated in the wheelchair.
7.4.4 Towel rails must be set at a height between 900 – 1000	<ul style="list-style-type: none"> It must be possible for the wheelchair user to reach the towel rail comfortably
7.5 Roll in shower	
7.5.1 There must be a 400x400 fold down shower	

seat set at a height of between 450 and 500. The centerline of the shower seat must be set at 480mm from the adjacent wall opposite the transfer space.	
7.5.2 Vertical and cranked grab bars on either side of the shower seat	
7.5.3 Lever action shower mixer and hand shower on an adjustable rail	<ul style="list-style-type: none"> The wheelchair user must be able to transfer from his/her wheelchair to the shower seat with ease and it must therefore be at the appropriate height and must not obstruct the ability of the wheelchair to maneuver into the shower
7.6 Bath where provided	<ul style="list-style-type: none"> The vertical grab bars must be 600 long and the cranked grab bar must be set at 800 to the lowest ends. This is to enable the disabled person to reach the bars and use them to transfer from his/her wheelchair to the shower seat and back again.
7.6.1 The access space at the side of the bath must measure at least 800	<ul style="list-style-type: none"> This is essential so that the wheelchair user may transfer comfortably from the wheelchair to the bath without any obstacles at the side of the bath
7.6.2 The height of the edge of the bath must be between 450 and 500	<ul style="list-style-type: none"> This would enable the wheelchair user to transfer across from the wheelchair to the bath at the same height and back again – varying heights can make it impossible for the disabled person to transfer into or out of the bath.
7.6.3 300 deep seat at the end of the bath	<ul style="list-style-type: none"> This enables the disabled person to have support of a suitable width to take a seated position at the height of the edge of the bath when transferring from the wheelchair onto the bath – before getting into the bath
7.6.4 Lever action bath mixer with hand shower	<ul style="list-style-type: none"> The physically disabled person will find it easier to use a hand shower with a lever action mixer rather than having to grasp and turn the different hot and cold knobs, which can often result in getting severe burns from hot water, which cannot be properly controlled.
7.6.5 “T” grab bar opposite transfer space	<ul style="list-style-type: none"> The horizontal bar must be between 100mm and 200mm above the bath rim so that the disabled person may lift himself from the bath onto the transfer space and across to the wheelchair.
7.6.6 Removable bath seat	<ul style="list-style-type: none"> People with certain physical disabilities might need to have a removable bath seat due to a physical inability to transfer in and out of the bath. Elderly people who are ill or too weak would also require this, as they do not have the strength to get in and out of a bath.
7.7 WC pan	

7.7.1 800 transfer space to the side of the pan	<ul style="list-style-type: none"> A wheelchair user would need to be able to manoeuvre the wheelchair beside the WC pan in order to transfer from the wheelchair to the WC and back again without any obstacles.
7.7.2 Front edge of pan to project at least 750 from the rear wall	<ul style="list-style-type: none"> This allows for enough space for a wheelchair user to gain access to the WC pan.
7.7.3 Centre line of toilet not more than 480 from wall opposite transfer space	<ul style="list-style-type: none"> This is to ensure that the wheelchair user may use this space to ensure adequate transfer from the wheelchair to the WC and back again.
7.7.4 WC seat height between 450 and 500	<ul style="list-style-type: none"> The seat raiser can be removable. This is to enable the physically disabled person to comfortably transfer onto the seat and off again. The ill and the elderly may also be too weak to transfer to a seat, which is too low or too high.
7.7.5 Extended flush handle located on side of transfer space of cistern	<ul style="list-style-type: none"> This enables the disabled person to comfortably reach the flush handle and use it effectively from the position of the wheelchair or the WC seat where it may be difficult to reach the conventional type of flush handle.
7.7.6 Cranked grab bar should be located 820 above the floor finish	<ul style="list-style-type: none"> This must be measured to the center line of the horizontal portion to enable the physically disabled person to use the bar to lift him/herself off the WC seat onto the wheelchair or into a standing position
7.7.7 Horizontal grab bar located at 820 above the floor finish	<ul style="list-style-type: none"> This must be measured to the centerline of the horizontal portion to enable the physically disabled person to use it to lift and support his/her weight to transfer.
7.7.8 Toilet paper holder must be within 1000 of the seat	<ul style="list-style-type: none"> This is ensuring that the physically disabled person may comfortably reach it.
8.0 GENERAL TOILETS	
8.1 Clear opening width of doors	<ul style="list-style-type: none"> There must be a clear opening of at least 760 measured with the door in 90-degree open position. This enables the wheelchair user to gain access into the toilet.
8.2 Size of clear unobstructed space in front of doors	<ul style="list-style-type: none"> All toilets should have outward opening doors or enough internal space to allow door to close. The wheelchair user needs space between the door and the WC so that he/she can close the door once in the toilet area and then negotiate manoeuvring the wheelchair next to the toilet and have the space to comfortably transfer onto and off the WC

8.3 Wash hand basin	
8.3.1 Basin adjacent to WC set at 800 height with 720 clear space under basin	<ul style="list-style-type: none"> Basin to be fitted to sidewall adjacent to WC within reach of person seated on WC pan, basin trap to be lagged or insulated.
8.3.2 Lever action taps or mixer	<ul style="list-style-type: none"> These are essential for the disabled person to enable easier use and prevent burning.
8.3.3 Mirror located between 75 and 1500 above basin and at least 300 in width	<ul style="list-style-type: none"> To enable the persons seated in a wheelchair to see themselves.
8.4 Towel rails set at a height between 900 - 1000	<ul style="list-style-type: none"> This ensures that the wheelchair user may reach the towel on the rail.
8.5 WC pan	
8.5.1 800 wide transfer space to side of pan	<ul style="list-style-type: none"> The wheelchair user needs to have the space adjacent to the WC pan to enable transferring directly from the wheelchair onto the WC pan and back again with ease.
8.5.2 Front edge of pan to project at least 750 from the rear wall	<ul style="list-style-type: none"> This provides the adequate space for the wheelchair alongside the WC pan and the ability for the wheelchair user to transfer comfortably.
8.5.3 Centre line of toilet not more than 480 from the wall opposite transfer space	
8.5.4 WC seat height between 450 and 500	<ul style="list-style-type: none"> Seat raiser can be removable, but wheelchair user must be able to transfer from the wheelchair onto the WC pan at a height, which is comfortable.
8.5.5 Extended flush handle located on side of transfer space of cistern	<ul style="list-style-type: none"> This enables the wheelchair user to comfortably reach the flush handle from the wheelchair.
8.5.6 Cranked grab bar should be located 820 above floor finish	<ul style="list-style-type: none"> In order for the wheelchair user to reach the grab bar to assist in transferring, it is essential for it to be at this height.
8.5.7 Horizontal grab bar located at 820 above the floor finish	<ul style="list-style-type: none"> This is also to enable the wheelchair user to reach it comfortably to assist in transfer
8.5.8 Toilet paper holder within 1000 seat	<ul style="list-style-type: none"> This ensures that the person in the wheelchair can comfortably reach the toilet paper holder either from the wheelchair or from the WC pan
9.0 RESTAURANTS BARS AND FACILITIES	
9.1 Size of opening leaf of all doors	<ul style="list-style-type: none"> The clear opening measured with door in 90 degree open position must measure at least 760 to enable the wheelchair user to gain access
9.2 Pull handle on doors	<ul style="list-style-type: none"> This handle must be at least 120 in length and easy to grasp so that the wheelchair user may easily open and doors
9.3 Fixed slip resistant floor surface	<ul style="list-style-type: none"> There must be wooden, tiles or close pile carpet no longer than 13 to ensure

	that the disabled person may not injure themselves
9.4 Unobstructed width of not less than 900 between fittings and furniture	<ul style="list-style-type: none"> This ensures that the wheelchair user may pass through without obstruction
9.5 800 high tables with 760 clear space below	<ul style="list-style-type: none"> At least one per 20 tables should have sufficient space under the tables that a wheelchair user may sit comfortably at the table, with sufficient height for the legs to fit beneath the table.
9.6 A lowered section of buffet/servery area and/or table service available on request	<ul style="list-style-type: none"> The permanent lower section of a buffet of servery must be at a height of 800 to enable the wheelchair user to comfortably reach whatever is being served without any obstruction
9.7 Staff must be available to offer assistance to guests	<ul style="list-style-type: none"> It is extremely important that staff is available to assist the disabled person.
10.0 EXTERNAL AREAS	
10.1 Gradient en-route to facilities	<ul style="list-style-type: none"> The gradient must be at least 1:12 but should be 1:15 to enable the disabled person to reach chalets or remote rooms
10.2 No steps en-route to facilities	<ul style="list-style-type: none"> Two risers may be at one point or located individually, however the disabled person or wheelchair user cannot negotiate steps en-route to the facilities without assistance.
10.3 The route surface must be firm and even	<ul style="list-style-type: none"> The surface must be hard with no gravel or cobble type finish, which would make it difficult for the wheelchair user or disabled person to negotiate.
11.0 KITCHENS	
Self-catering and other partial catering accommodation	
11.1 Size of clear floor space in front of cupboard units and work surfaces	<ul style="list-style-type: none"> This clear and unobstructed space should measure at least 900x900 to enable the wheelchair user to gain access to the cupboards and work surfaces without obstacles
11.2 One work surface or table should have a clear knee space of 750	<ul style="list-style-type: none"> It is essential that the wheelchair user may have a table that he/she may be seated comfortably at with the appropriate height to accommodate knee space.
11.3 A hob not more than 800mm high with large controls and 750 clear knee space below or alongside	<ul style="list-style-type: none"> This is to enable the wheelchair user to have clear knee space under the hob and the ability to reach across and use the controls
11.4 The oven must be fitted with large controls located between 800 – 1200 above floor level	<ul style="list-style-type: none"> The wheelchair user must be able to reach and use the oven controls with ease

11.5 The sink should have lever taps and clear knee space of 750mm	<ul style="list-style-type: none"> The wheelchair user must be able to have the knee space under the sink to gain access to it as well as the lever taps which would make usage easier
11.6 Wall cupboards and shelves should be located between 800 – 1400mm above floor level	<ul style="list-style-type: none"> This ensures the easy access to cupboards and shelves for the wheelchair user
11.7 Light switches and door handles must be located between 900 –1200 above floor level	<ul style="list-style-type: none"> The person in the wheelchair must be able to comfortably reach the light switches and door handles
11.8 Power sockets must be located between 800 – 1000 above floor surface level	<ul style="list-style-type: none"> This ensures that the wheelchair user can reach the power sockets easily.