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Title:

Perceptual difference in hotel accessibility between hotel staffs and people with disabilities

Authors & affiliations:

*Chia Chun Wang
Department of International Tourism Management; Tamkang University, Jiaoxi, Yilan 26247,
Taiwan
(R.O.C.)*

Abstract: (Your extended abstract must use **Normal style**, and should be no longer than 1500 words following a research paper structure (e.g., introduction, theoretical foundation/literature review, research methodology, research findings, and conclusions and implications.). The box will ‘expand’ over multiple pages as you add text/diagrams into it. Please insert tables and/or figures in the body text of your submission if you have any.)

Introduction

A great deal of studies has identified the constraints and problems that people with disabilities encounter with accessible tourism accommodation. Israeli (2002) provided an understanding of problems encountered by people with disabilities, one of the seven was the lack of accessible accommodations. Alvis et al. (2005) found that one reason why many people with disabilities did not travel was simply because facilities and accommodations were not physically accessible. In addition to the physical constraints, negative attitude from service staffs was another barrier for people with disabilities to overcome. O’Neil and Ali Knight (2000), Tantawy et al. (2004) concluded that accommodation managers did not understand the access features of their rooms or provide any level of detailed information outside of whether an establishment had an accessible room. McKercher et al. (2003) indicated that the failure of providing satisfactory services to people with disabilities was compromised by poor, inaccurate, or incomplete information by service staffs. Based on the literature, not only the physical accessibility, but also the invisible accessibility such as attitude, information, and perception provided by service staffs are critical to the success of an accessible tourism. To this point in time, no research has been investigated to test the difference in hotel accessibility between hotel staffs and people with disabilities. The research seeks to address this situation.

Methods

In this study, the Hotel Accessibility Scale (HAS) was translated and used to determine the research questions. Two research questions were asked in this study.

Q1: What is the most important hotel accessibility for people with disabilities?

Q2: Is there a difference in hotel accessibility between hotel staffs and people with disabilities?

The HAS was developed by Darcy (2010) and included six components: “core mobility”, “communication”, “safety”, “service and security”, “comfort and recreation”, and “supplementary mobility”. Participants included hotel staffs and people with physical disabilities. There were 623 questionnaires distributed and 600 were returned. Data were analyzed by Statistical Packages

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for Social Science (SPSS12.0). Descriptive Statistics, t-test, and one-way-ANOVA were used.

Results

An extensive profile of socio-demographic and psychographic variables was collected, together with their travel patterns, and perception of hotel accessibility. Of these 144 were people with disabilities, 456 were hotel staffs. The dominant lifestyle groups for people with disabilities were middle age, unmarried, below-average education level, and no current occupation. On the other hand, the dominant lifestyle groups for hotel staffs were young age, unmarried, and high education, and had basic economic ability. The results of inferential analysis indicated that the accessibility which people with physical disabilities concerned most was the number of accessible rooms in hotel. Furthermore, the space in the room and bathroom were also considered as the determinants for selection of accessible tourism accommodation. Significant differences were found in each subcategory of hotel accessibility named “core mobility”, “communication”, “safety”, “service and security”, “comfort and recreation”, and “supplementary mobility”.

Conclusion and Discussion

Based on the results, it is concluded that the people with disabilities consider every dimension of HAS as important, especially the components of safety and service and security. Furthermore, there are differences in every components of hotel accessibility between the service providers (hotel staffs) and the people with disabilities. In order to provide satisfactory services to the customers, it is necessary to establish a Standard Operation Procedure (SOP), in this case, for the people with disabilities. Starting with the reservation, every required information for each specific disability needs to be inquired and recorded; the education of serving the people with disabilities should be added into the employee-training program; detailed information about accommodation should be provided in text, images, and digital format. These management approaches may shorten the differences in hotel accessibility between the hotel staffs and people with disabilities, further improve the accessible tourism accommodation in hospitality business.

In summary, the research has the potential to contribute to a hotel business for accessible tourism accommodation by allowing a much more detailed understanding of the consumer needs of people with disabilities. In particular, the outcome of this research identified the perceptual differences in hotel accessibility between the service providers (the hotel staffs) and the service receivers (people with disabilities), it may meet the expectation of this special market segment so that their experience in tourism can be satisfied.

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Reference

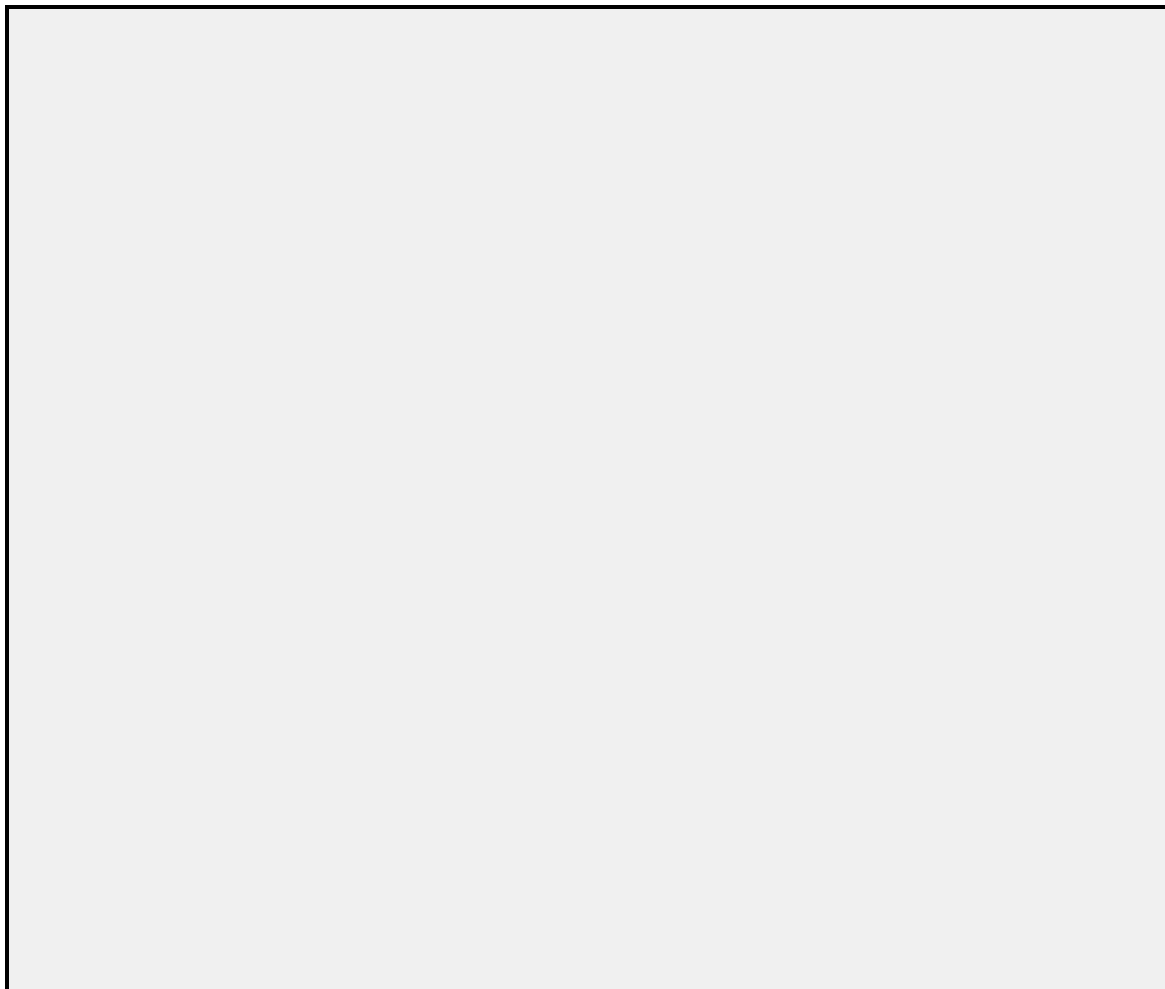
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