

ADDIS ABABA UNIVERSITY



ACCESSIBILITY OF FIVE STAR HOTELS AND NATIONAL MUSEUM FOR PERSONS WITH DISABILITIES IN ADDIS ABABA, ETHIOPIA

BY: - IYERUS KASSA

ADVISOR: -TAMIRAT TEFERA. (PhD)

A THESIS SUBMITTED TO THE COLLEGE OF DEVELOPMENT STUDIES ADDIS ABABA UNIVERSITY, IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE MASTERS OF ARTS IN TOURISM AND DEVELOPMENT

JULY, 2018

ADDIS ABABA, ETHIOPIA

**ACCESSIBILITY OF FIVE STAR HOTELS AND NATIONAL
MUSEUM FOR PERSONS WITH DISABILITY IN ADDIS ABABA,
ETHIOPIA**

IYERUS KASSA BEYENE

Approved by:

Thesis Advisor

Signature

Date

Internal Examiner

Signature

Date

External Examiner

Signature

Date

Chairman, Department

Signature

Date

Declaration

I, Iyerus Kassa, do hereby declare to the College of Development Studies, Program of Tourism and Development of Addis Ababa University, that this thesis entitled “***Accessibility of Five Star Hotels and National Museum for Persons with Disability in Addis Ababa, Ethiopia***” is a product of my own work and that all sources of references used for the thesis have been appropriately acknowledged. The paper was neither submitted nor presented in full or in-part for the attainment of any academic achievement or to public audience. This work has given credit for the views of the research participants. The whole research formats do fulfill the expected standards and regulation of the University.

Name: Iyerus Kassa Beyene

Signature: _____

Date of Submission: July, 2018

Tourism and Development Program, Addis Ababa University

Acknowledgements

Above all, thanks to God for everything he has done for me and for accomplishment of this work. Next, I express my deep gratitude to my advisor Tamirat Tefera (PhD), for his valuable advice and comments. I would like to express my gratitude to my nearest counselor Abebe Yehualwork (PhD), who guided and advised through the processes of the study. I owe special thanks for specific individuals whom I listed below for their kind collaboration, sharing experiences and knowledge for the best of the study.

1. Emebet Girma..... Expert of Accessibility Audit
2. Tewdros DerbewMinistry of Culture and Tourism
3. Amedemariam Mamo.....Addis Ababa Culture and Tourism Bureau
4. Dagnachew WakaneAfrican Disability Alliance
5. Engedawork DemekeAddis Ababa Hotels Association
6. Human Resource (HR) office all the seven five star hotels for allowing me to conduct the assessment.

Finally, I express my love to my parents who have encouraged and supported me throughout this study. I would like to extend warmest appreciation to my closest friends who have been beside me during all the bad and good days.

Contents

Acknowledgements.....	i
List of Tables.....	vi
List of Figures	vii
List of Acronyms and Abbreviation.....	viii
<i>Abstract</i>	ix
CHAPTER ONE: INTRODUCTION	1
1.1. Background to the Study.....	1
1.2 Statement of the Problem.....	4
1.3 Objectives of the Study.....	6
1.3.1 General Objective of the Study	6
1.3.2 Specific Objective of the Study	6
1.4 Rationale of the Research.....	7
1.5 Significance of the Study.....	7
1.6 Scope of the Study.....	8
1.7 Limitations.....	8
CHAPTER TWO: LITERATURE REVIEW	9
2.1 Definition of Terms.....	9
2.1.1 Tourism.....	9
2.1.2 People with Disability and Tourism.....	10
2.1.3 What is Accessibility?.....	10
2.1.4 Accessible Tourism.....	11
2.1.5 Concept of Universal Design	12
2.1.6 Concept of Ergonomics.....	12
2.1.7 Concept of Smart City	13
2.1.8 Defining Disability and Models of Disability	13
2.2 Tourism Product and Accommodations.....	16
2.3 Museum and Tourism.....	17
2.4 International Conventions (CRPD), Legislations and the Problem of Inaccessibility in Ethiopia.....	19
2.5 Accessible Tourism and Contemporary World.....	22
2.6. The Need of Accessible Tourism from Different Viewpoint.....	25
2.7. Conceptual Framework.....	26
2.8. Accessibility of Five Star Hotels and National Museums.....	26
CHAPTER THREE: METHODOLOGY	28

3.1. Research Methods.....	28
3.1.2 Research philosophy.....	29
3.1.3 Sample Size.....	30
3.1.4 Research Design	31
3.1.5 Description of Study Participants	31
3.1.6 Eligibility Criteria	31
3.1.7 Sampling Technique	32
3.1.8 Source of Data.....	32
3.1.9 Methods of Data Collection	33
3.1.10 Data Analysis Method.....	34
3.1.11 Ethical Considerations	35
CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND DISCUSSION.....	36
4.1 Aggregate Accessibility Audit / Assessments of All Seven Five Star Hotels.....	36
4.1.1 Implications of the Study	44
4.1.2 Inclusiveness of Policies and Practice.....	44
4.1.3 Premises	45
4.1.4 Entrance (Ramp and Parking)	46
4.1.5 Interior spaces	47
4.1.6 Elevators	48
4.1.7 Seats, Tables and Encounters.....	49
4.1.8 Signage and Control.....	50
4.1.9 Restroom.....	50
4.1.10 Safety and Comfort	51
4.2 Services which are Specific to the Hotel.....	51
4.2.1 Accessible room.....	51
4.2.2 Lobby, Bar and Restaurant.....	53
4.2.3 Gym, spa and swimming pool.....	53
4.2.4 Meeting hall	54
4.2.5 Shuttle	54
4.3 Accessibility of Hotels from the Perspective of Service Provider.....	55
4.3.1 Accessibility of Legal Policies, Frameworks and Guidelines.....	55
4.3.2 Accessibility of Information	55
4.3.3 Accessibility of Physical Environment	56
4.4 Accessibility of the Hotels from the perspective of Persons with Disabilities.....	56

4.4.1	Special Treatment which Simplify the Stay of Person with Disability.....	57
4.5	Accessibility of Star Rated Hotels and Tourists Areas from the Perspective of Persons with disabilities.....	58
4.6	Accessibility of Ethiopia National Museum for visitor with disability.....	58
4.6.1	Main Gate.....	59
4.6.2	Entry.....	60
4.6.3	Interiors.....	61
4.6.4	Corridors and Surroundings.....	62
4.6.5	Door.....	63
4.6.6	Electrical Equipments and Accessories.....	63
4.6.7	Public Rest Rooms.....	63
4.6.8	Museums and Galleries.....	64
4.7	Built Environmental Barrier that Hinders Person with Disability From Active Participation in Five Star Hotels and in National Museum.....	67
4.8	Document Analysis: Accessibility and Legal Instruments in Ethiopia.....	68
4.8.1	United Nations Convention on the Rights of Person with Disability (UNCRPD).....	68
4.8.2	Draft Protocol to the African Charter on Human and Peoples’ Rights of Persons with Disabilities in Africa.....	70
4.8.3	Federal Democratic Republic of Ethiopia (FDRE) Construction Industry Development Policy (2014).....	71
4.8.4	Ethiopian Building Proclamation- 624/2009.....	72
4.8.5	Building Regulation-No243/2011- Article 33 and 34.....	72
4.8.6	Building Directive- No 5/2003- Article 33.....	73
4.8.7	Addis Ababa City Government Culture and Tourism Bureau: Professional Efficiency of Service Provider on Culture and Tourism Regulation and Criteria. Directive num 3/2006 E.C.....	76
4.8.8	Ministry of Culture and Tourism: Hotels Rating Requirements and Classification.....	77
4.8.9	The Issue of Accessibility and Universal Design from International Guests of the Hotel’s.....	78
4.9	Document Analysis.....	79
CHAPTER FIVE : CONCLUSION AND RECOMMENDATIONS.....		82
5.1	Conclusion.....	82
5.2	Recommendation.....	84
5.3	Future Research Implication.....	86
<i>References.....</i>		<i>87</i>
<i>Appendices</i>		

Appendix-1: Accessibility Audit Checklist

Appendix-2: Accessibility Checklists for Museums

Appendix-3: Consent Letter

Appendix-4: Interview Guide Question for Hotel Managers

Appendix-5 Interview Guide Question for Addis Ababa Culture and Tourism Bureau and Ministry of Culture and Tourism

Appendix-6: Interview Guide for Hotel Staff Serving at Table and Receptionist

Appendix-7: Key Informant Interview with Museum Curators and Managers

Appendix-8: Questionnaire for Tourists in Star Rated Hotels

Appendix-9: Questionnaire for Tourists in Museums

List of Tables

page

Table 3.1: Showing Summarized Sources of Data.....34

Table 4.1: Accessibility Audit Check List for Hotels43

Table 4.2: Aggregate Finding of the Assessment.....44

List of Figures	page
Figure 2.1: Relationship of Hospitality Industry and Tourism	17
Figure 2.2: Conceptual Framework.....	26
Figure 4.1: Main Entrance of National Museum.....	60
Figure 4.2: Firm and Slip Resistance Route to Museum.....	60
Figure 4.3: Stair Entrance to National Museum	61
Figure 1.4: Walking Routes and the Building	61
Figure 4.5: Stair which is Accessed By Steps.....	61
Figure 4.6: Information Desk at Counter.....	61
Figure 4.7: Corridor and Displays.....	62
Figure 4.8: Surrounding and None Slippery Floor.....	62
Figure 4.9: Public Restroom.....	64
Figure 4.10: Inside the Toilet and Inaccessible Stall.....	64

List of Acronyms and Abbreviation

AATC	Addis Ababa Culture and Tourism
AT	Accessible Tourism
ATM	Auto Meted Machine
AU	African Union
ADA	The Americans with Disabilities Act
CRPD	Convention on the Rights of Person with Disability
ECA	Economic Commission for Africa
ECDD	Ethiopian Center for Disability and Development
ENAT	European Network for Accessible Tourism
ESA	Ethiopian Standards Agency
GDP	Gross Domestic Product
ICOM	International Council of Museum
ILO	International Labor Organization
IMIS	Institute of Museum and Library System
MICE	Meetings, Incentives, Conventions and Events
MOCT	Ministry of Culture and Tourism
UK	United Kingdom
WHO	World Health Organization
UNCRPD	United Nation Convention on the Rights of Persons with Disabilities
UNWTO	United Nation World Tourism Organization
US	United States
WTTC	World Travel and Tourism Council

Abstract

The issue of accessible tourism is an area which needs great focus from all sectors of tourism development, specifically in relation to persons with disabilities. We human incur some sort of disability in our lifetime, so we should think about making our tourist attraction areas and services very accessible for all segments of the people; because person with disability have the same desire and need to take part in leisure activities like others. This is why this exploratory study is very important in giving background information on the area, by assessing the accessibility of star hotels and museum for persons with disability found in Addis Ababa city. The sample was gathered through a snowballing technique from associations of disability. The study utilizes semi-structured interviews of 18 visitors with different impairment: 2 uses wheelchairs; 5 are crutches user; 5 are visual impaired 5 are hearing impaired and 1 has hand impairment and none disabled persons from services providers: Museum guide and director (2), front office supervisor (4), waiters (3) and receptionist (3). The data were subject to thematic content analysis and Interpreted by the social model of disability, the results suggest that none of the seven five star hotel was found fully accessible plus the aggregate result shows that the extent of accessibility is 51.1% and 27.9% of accessibility requirement has been found inaccessible at all and 15.6% were the requirement which are found in- partial condition and 5.4% of accessibility requirement has been found not applicable. Moreover accessibility is subjected to change of time, technology and people's disability awareness. Contradictions were found between the service provider and users on the concept accessibility, all the respondents found the hotels inaccessible by appreciating the exiting inclusiveness however, the hotelier thought they have most accessible place for everyone. This study is limited to only five star hotels found in Addis Ababa and on Ethiopian National Museum. The paper recommended for hotel managers and for government bodies on ensuring the accessibility of specific physical, information and on policy and legal frame works. This study relays the genuine voice of people with disabilities. The findings have relevance to hospitality researchers, educators, executives, and hotel staff as background information.

Keywords: *Accessible Tourism, and Accessibility Audit, Five star Hotels, Museum.*

CHAPTER ONE

INTRODUCTION

1.1. Background to the Study

Tourism industry is a service intensive industry which is dependent on the quality of customers' services experience through the service providers offer like the accommodation by hotel industry, transportation service, by transport company travel and tour service by travel agent or tour operator, flight service, by Airline company and voyage and entertainment by ferry companies. The history of hospitality sector has a significant role in tourism industry. The market segment is the targeted to specific group who usually travels more destinations. Service providers upgrade the business providing quality service according to customer's expectation including persons with disabilities which is the focus of this study and all segments of the people (Khatri, Kumar, Shrestha, Raj Kumar, Mahat, & Ujjwal 2012).

The fundamentals of accessible tourism development can be sought in Universal Declaration of Human Right which was taken up on December 1948. The declaration in its introductory article make sure freedom and quality regardless of the race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or other status (article 1, 2). In the continuation of the freedom of movement (article 13), rest and leisure (article 24) is ensured. On the basis of the Declaration of Human Right numerous regarding tourism and disabilities were adopted. The concept of accessible tourism or tourism for all appears for the first time in 1989, when this notion is used publicly by a group of British expert within the international year of the disabled (European Network for Accessible Tourism, 2007).

Accessible tourism developed and accelerated through individual vacation facilities owned by societies of the disabled which are primarily intended for vacations of their own members. In Europe, tourism for all spread quickly and important changes in the field of legislation, development, and perception of accessibility in tourism sector soon followed. The first sources of accessible tourism in Slovenia are related to spas where mostly rehabilitation of persons with disabilities was carried out and which were less concerned with the tourist offer for the disabled (World Tourism Organization and Fundación ACS, 2015).

Accessible tourism is the ongoing endeavor to ensure tourist destinations, products and services are accessible to all people, regardless of their physical limitations, disabilities or age. It encompasses publicly and privately owned tourist locations. Today “accessible tourism” appears in scientific literature under various terms: “tourism for all”, “inclusive tourism”, “universal tourism”, “barrier-free tourism”. Different definitions appear hand in hand with different conceptions. In literature the most common definition is the one by Simon Darcy, The term has been defined by Darcy and Dickson in (2009, p34) as:

“Accessible tourism enables people with access requirements, including mobility, vision, hearing and cognitive dimensions of access, to function independently and with equity and dignity through the delivery of universally designed tourism products, services and environments. This definition is inclusive of all people including those travelling with children in prams, people with disabilities and seniors.”

Although the present research topic seems different in many ways as area of research, it is one of themes that give focus for marginalized groups of people. The study present tried to assess several researches as in relation to accessible tourism however there are mare reports on the current status of people with disability in Ethiopia. Most of the available literature reviews attempted to highlight the destination image, technology advancement on tourism development, role of tour operators, future prospect of the tourism section, impact of marketing tools on Ethiopia tourism and attractions. But the study have found some articles which they gave due emphasis on the accessibility of tourist areas and hotel industries in Ghana and South Africa. More importantly, the notion of that says ‘tourism for all’ is changing many standards in accessibility of tourist destination. In our contemporary world we cannot leave them aside since disability is human condition especially in current world in which the causes are increasing what make people more disable.

According to the World Health Organization (WHO), 15% of the world’s population (1 billion people) is estimated to live with some form of disability. UNWTO is convinced that accessibility for all tourist facilities, products, and services should be a central part of any responsible and sustainable tourism policy. Tourism has the potential to ensure that persons with disability have much more quality of life satisfaction when they access varied tourist services (Card et al, 2006).

However this service sector has been neglecting the need and the interest of having visit and travel of persons with disability. Tourism activities like traveling and visiting have been considered as luxurious and privilege activity left for some selected people. However, ‘people with disabilities have the same needs and desires for tourism as others’ (Blichfeldt & Nicolaisen, 2011). Accessibility issues have severely hampered opportunities for people with disabilities to take part in many leisure activities – including tourism.

To sum up, this study assessed the accessibility of hotels and museum for persons with disabilities by conducting accessibility audit to the physical environment and on service delivery. By doing the study it has its own importance by identifying problems related to accessibility of institutions and services to persons with disabilities and able to answer the extent our tourism services and facilities are accessible for person with disability to engage in leisure activities including tourism as far as they do have the same interest like other people and tourism providers should be prepared to deliver accessible building and venues, if they want to take the rising economic wave of accessible tourism.

1.2 Statement of the Problem

Persons with disabilities inhibited to participate in national developments due to lack of assistance and the attitudes of society. Roads, buildings, transport facilities and other public recreational areas have limited participation and integration of persons with disabilities in a given society. The state of persons with disabilities in Ethiopia is even more terrible and severe due to the presence of diversified causes of disabilities before and after birth disabling factors (like infectious diseases, difficulties contingent to delivery, under-nutrition, malnutrition, harmful cultural practices, lack of proper child care and management, civil war and periodic drought and famine) and the absence of early primary and secondary preventive actions (Tirussaw, 1998).

According to world report on disability (2011), almost everyone has a chance to be temporarily or permanently impaired at some point in life, and those who survive to old age will experience increasing difficulties in functioning. Most extended families have a disabled member, and many non-disabled people take responsibility for supporting and caring for their relatives and friends with disabilities. This is an area which need a great focus as a result of the significant number of people is living with some sort of disability. Indeed people with physical disability have the same need and wants like others on participating in all sorts of tourism activities (Yau et al. 2004).

Today, significant number of hotels, transportation facilities and tourist sites are not physically accessible for many people with disabilities and older persons. In addition accurate and accessible information about the access characteristics of destinations and venues is lacking. In general, it is also rare in finding trained personnel in how to “meet and greet” people with a disability at tourist venues (European Network for Accessible Tourism, 2007).

People with disabilities have a significantly different tourism experience, for many travelers 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 and Daruwalla, 1999).

Research interest in accessible tourism for persons with disabilities is also evident in tourism and hospitality related studies. Yet, only few empirical studies have focused exclusively on the actual hotel experience of people with disabilities (Bodil and Jaqueline, 2009). Like the

work of Anuar, Ahmad, Jusoh, Hussain and Nasir, *Developing of Tourist Friendly Destination Concept: a Quantitative Study*, (2015) and Ngwi Becky Mopecha, *Barriers to People with Disabilities in the Tourism and Hospitality Industry: A Case Study of Buea in the South West Region of Cameroon* (2016) can be mentioned as exemplary.

The study have strived to review research findings which is conducted on accessible tourism for people with disability in Ethiopia, there is hardly any articles which deals or give emphasis on persons with disability to take part in tourism related ventures and/or visit. This shows the issue of accessibility is neglected as it is not our concern.

There are research and reports focused on disability, accessibility of transportation and development in Africa in general and Ethiopia in particular, for instance Yared, (2016) pointed out inaccessible infrastructure and transportation denies persons with disabilities access to community services and facilities and hinders their participation. Lack of accessibility contributes greatly to the disadvantaged and vulnerable situations faced by persons with disabilities, leading to disproportionate rates of poverty, deprivation and exclusion among persons with disabilities. The issue of inaccessibility in transport services that people with physical impaired face also seen by other researcher and on his finding revealed that most streets and transport giving vehicles in Addis Ababa are unsuitable for People with Disabilities. And also measures taken to address these challenges were also unsatisfactory (Henok, 2014).

Moreover there is a project carried by ABCON PLC IT/S and Management Consultant with funding of World Bank (2007). The project tried to see ‘‘ICT Accessibility Requirements Study for Person with Disabilities in Ethiopia’’, these study believe that in order to exploit the full potential of the benefit of the global information society, it would be very important that all nations and people of the world share this opportunity equally, therefore ICT should be as accessible as possible. Despite these negligence on the accessibility of tourist attraction areas to person with disability, there is a promising published guidebook which is prepared by non-governmental organization named ECDD, in this guidebook they have tried to assess some selected pubic building and services including hotels, museums, restaurant, supermarkets and other public facilities. Although the guidebook is very help full in giving user which building and facilities is accessible for person with disability however, it gives very specific setting which we cannot reach upon conclusion.

Having indicating the prevailing situation and constrains that persons with disability face; the intent of this study was making assessment on some selected tourism destinations (five star hotels and national museum) and conducting accessibility audit or assessment to measure the

extent of accessibility of the places for persons with disabilities. This research has focused on groups of people with some kind of physical disability in which environmental, cultural and self centered barrier which hindered them from having tourism activities. Apart from the other tourist destinations hotels and museum are located more in centers or near capitals, moreover assessing these two different tourist destination is helpful to get both intended international visitors and domestic visitor for hotel industries and museum respectively.

1.3 Objectives of the Study

This study has sought to meet both general and specific objectives.

1.3.1 General objective of the study

- Assessing the accessibility of five star hotels and national museum of Ethiopia for persons with disabilities in Addis Ababa.

1.3.2 Specific objective of the study were to:

- ❖ Figure out the extent of accessibility of five stars hotels and national museum for persons with disabilities.
- ❖ Identify built environmental barrier that hinders persons with disabilities from active participation and full enjoyment in five star hotels and in national museum of Ethiopia.
- ❖ Assess Ethiopian policies, proclamations and regulations related to persons with disabilities on accessibility.

1.4 Rationale of the Research

Based on the world report on disability and World Health Organization (WHO), (2011), with the total population of Ethiopia 17.6 % are believed they are persons with disability. Persons with disabilities are not able to participate in social, political and economical affairs because of both environmental and social services are not accessible (ILO, 2003, as cited by Abebe, 2012). This situation would be worse in developing countries in relation to their economic, political and the level they understand disability. The notion of inclusion would help not only the individuals with some sort of disability but also the whole family in particular and the community at large. This is true where the chance of being disabled in life time could be occurred easily because disability is part of human condition and the causes are increasing from time to time. This is why we should design the built environment for all segments of the people in such way that it can be accessed and we should provide a service which includes persons with disability. The researcher personally noticed some of tourist attraction areas and hospitality industries which exclude and forget people using wheelchair, Crutches and people with sensory impairment in their built environment and services provision.

1.5 Significance of the Study

This study would have invaluable academic relevance in brings new insight to the field of the study as a result accessible tourism is new emerging concept in the era of research and it seems it is neglected in our country. And the existing literature on accessible tourism in Ethiopia is very rare and few literature covering, yet which is not adequate and supportive of this issue thus it gives an insight to the extent of the problem and serves as a spring board for other researchers. Moreover the findings of the study are significant for the practitioners in showing the extent and the dimension of inaccessibility of five star hotels and museum for persons with disabilities by making different measurements and recommendations. It also contributes for policy makers in providing different valuable recommendations and best practices of other country in order to revise the existing regulations and proclamations in more inclusive and detailed way. In regard to its developmental significance, the study creates awareness for hotelier on the concepts of accessible tourism for persons with disabilities, the potential of this niche market as integral part of the main marketing system by inclusion of persons with disability in there all services they provide. Ethiopia also ratified the convention that it will be implemented practically and would help as a catalyst in inclusion development and as responsible and sustainable development strategy.

1.6 Scope of the Study

The scope of this study is seen in three considerations, these are the geographical area, the theme and the units of observation. Geographically the coverage of the study focuses on five star hotels and national museum which are found Addis Ababa city. The city has built its reputation and experience in welcoming Heads of State, Royalty and dignitaries from all over the globe, as well as through smaller workshops and seminars. Thematically the study has focuses on the physical, information and legal accessibility of five star hotels and national museum for persons with disabilities. The study identifies built environment barriers which hinders persons with disabilities from active and full participation. In this study, units of observation are the participants of the research from which relevant data are collected. The targeted groups are persons with disabilities those who have travel experience, hoteliers who manage and work in different department and level and from government offices.

1.7 Limitations

In reading and utilizing this study there are major points it should be considered as basic limitations. The first one is that the methodologically, sampling procedure decreases the generalize-ability of findings; the results cannot be taken to all hotels and museums found in Addis Ababa. To mitigate this problem the study has considered the sampling techniques and has chosen the National Museum of Ethiopia and five star hotels. Moreover some qualitative findings could be subject to other interpretations for instance factors behind why persons with disability could not engage in travel, visit or take part in tourism activities, is it from the places are not inaccessible or there is financial constraints or lack of interest, and could be other factors. However the study has left other questions open for other researcher and give focus to the pro-founding problem inaccessibility of tourist destinations, specifically to the study area. In other way there were some challenges like shortage of time which hinder the study to uncover necessary field visit, conduct different accessibility audit and to meet persons with disability with travel experience. To overcome this problem time management and commitment was a key solution. Moreover getting person with disability conveniently at the study area was impossible thus; researcher had to wait for specific conference to be hold by organization of disability. The informants that the researcher has interviewed were found by snow ball sampling and the responses were subject to the ability to recall the stay in the hotels and museum. The other challenge is that financial constraints, the study allows field visit, accessibility audit and finding respondents, this entire task has required adequate amount of money to gain sufficient information and data.

CHAPTER TWO

LITERATURE REVIEW

The study has lay out some of important parts of literature review which are relevant to the study area. As the study tried to point out the issues of accessible tourism, accessibility for tourists with disability it is recent phenomena to the research study. As a research approach it has been welcomed by few researches in developed countries, however the in developing countries like Ethiopian the issues of accessible tourism for tourists with disability as the whole has been neglected. Even though the researcher has found some research paper which are conducted in Africa, they gave due emphasis specifically to the accessibility of tourist area to tourists with disability, however this study fill the gap which is occurred by researchers negligence and the gap which is occurred by exclusion of museum from their scope and the research tried to catch both domestic and international visitors who were interested in either of tourism service and tourism product. As many of us know Ethiopia is the seat of AU, ECA and more than hundred embassies and with growing opportunity of MICE which is complementary to conventional leisure tourism. Therefore this study is very significant in giving new insight how countries would economically beneficiary if they designed for all segment of the people, apart from inclusion of people with disability.

2.1 Definition of Terms

2.1.1 Tourism

Tourism is a sum activity which is done by traveling and visiting other places away from usual residence and escape from routine daily life, and this holds true for people with disability. This definition works in the use of the term tourism in the study, however disabled people get the same problem which were facing in new and different circumstances. Tourism and travel as industry leave out person with disability from the whole population and limits their opportunity to participate in leisure activity, organizing special trips and using services and facilities (Kaganek, Ambro y, Mucha, Jurczak, Bornikowska,Ostrowski, Janiszewska,Mucha, 2017).

2.1.2 People with Disability and Tourism

World Health Organization has defined disability as “any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being” (United Nations, 2008 as cited by Turgut, Mehmet, Ali & Yüksel in 2011). The UK Disability Discrimination Act describes a disabled person who is someone “has a physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day-to-day activities” (Office of Public Sector Information, 1995).

The right to travel and access tourist activities should be perceived as a key social right for disabled people and their families. Travel and tourism is an important factor in the quality of life of all people. For disabled people and their families the chance to go away on holiday can be a particularly important chance to relax and recuperate (European Disability Forum, 2001).

Turgut, et al (2011) pointed out that people with disabilities are capable of participating in tourism activities. However, some arrangements should be made for people with disabilities in order for them to be included in tourism activities, such as tourist attractions, information resources, and transportation, accommodation and food and beverage facilities. Some countries have made legal regulations about this issue.

2.1.3 What is Accessibility?

Accessibility is the design of products, environments, programmes and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design. The design of products, devices, services, or environments for the use by all people, is one of the basic principles of UNCRPD. Accessibility is more broad than it perceived however it is the ability of tourists to conveniently reach their destination and which comes from the philosophy of *design for all*, is the basis and condition of travelling regardless of age and state of health. It is an approach to planning and realization of developed areas, products and services that allows everyone to be a participant in the community life (The Centre for Universal Design, 2016). It also makes differences among tourists in their evaluation of accessibility to tourist attractions is critical to the tourism industry, especially for services providers who intend to improve their facilities and image of their attractions (Israeli, 2002). Accessibility is pushing factor and taken as precondition for participation, but it does not necessarily guarantee enjoyment in life or quality of the leisure experience (Freeman and Selmi, 2010).

2.1.4 Accessible Tourism

We need to conceptualize and understand accessible tourism in all characteristics and dimensions in the way to cope up with people's needs and wants. The issue of accessibility and accessible tourism is a recent phenomenon, even the research studies began to appear more recently in line with leisure activity constraints and following this individual studies began to emerge focusing on the demand, supply and coordination of travel for people with disability. To understand and the conceptualize accessibility it would be helpful to see the definition of Buhalis and Darcy (2011),

Accessible tourism is a form of tourism that involves collaborative processes between stakeholders that enables people with access requirement, including mobility, vision, hearing, and cognitive dimension of access, to function independently and with equal and dignity through the delivery of universally designed tourism product, services and environments. This definition adopts a whole of life approach where people through their lifespan benefit from accessible tourism provision. This include people with temporal and permanent disabilities, senior, obese, families with young children and those working in safer and more socially designed environment(adapted from Michopoulou, Simon, Ivor & Buhalis, 2015, p.180)

The definition puts accessible tourism needs the efforts and collaborations work of many stakeholders and would benefit not only person with disability but also their families' and different type of disabilities. World Health Organization WHO (2007) also mentioned the necessity of accessible tourism by articulating relationship between disability and ageing is undoubted and presents a challenge for the global tourism industry in the future.

According to ENAT (European Network for Accessible Tourism), accessible tourism includes:

- Barrier-free destinations: infrastructure and facilities
- Transport: by air, land and sea, suitable for all users
- Quality services: delivered by trained staff
- Activities, exhibits, attractions: allowing participation in tourism by everyone
- Marketing, booking systems, web sites & services: information accessible to all

The UNWTO Recommendations on 'Accessible Tourism for All' are meant to be used as a general, basic mainstreaming framework for ensuring that people with disabilities have access to the physical environment, the transportation system, information and communications channels, as well as to a wide range of public facilities and services.

2.1.5 Concept of Universal Design

Universal design means products and buildings are accessible and usable by everyone, including persons with disabilities. Universal Design is different than accessible design. Accessible design means products and buildings are accessible and usable by people with disabilities. They actually have significant differences in meaning. Accessible design has a tendency to lead to separate facilities for people with disabilities, for example, a ramp set off to the side of a stairway at an entrance or a wheelchair accessible toilet stall. Universal design, on the other hand, provides one solution that can accommodate people with disabilities as well as the rest of the population. Moreover, universal design means giving attention to the needs of older people as well as young, women as well as men, left handed persons as well as right handed persons. An entrance that is designed to be "universal" would not have stairs at all. Instead of only one toilet stall designed for people who use wheelchairs, a toilet room with a universal design might include more than one stall with larger space clearances (Steinfeld, 2009).

2.1.6 concept of Ergonomics

Ergonomics is the process of designing or arranging workplaces, products and systems so that they fit the people who use them. Most people have heard of ergonomics and think it is something to do with seating or with the design of car controls and instruments but it is so much more. It applies to the design of anything that involves people – workspaces, sports and leisure, health and safety. Ergonomics aims to improve workspaces and environments to minimize risk of injury or harm. So as technologies change, so too does the need to ensure that the tools we access for work, rest and play are designed for our body's requirements. Ergonomics aims to create safe, comfortable and productive workspaces by bringing human abilities and limitations into the design of a workspace, including the individual's body size, strength, skill, speed, sensory abilities (vision, hearing), and even attitudes (Dohrmann Consulting, 2014).

2.1.7 Concept of Smart City

A smart city is one that extensively uses connected devices, commonly called the ‘internet of things’ or IOT, with the specific aim of delivering services as sustainably and efficiently as possible. Making our cities smarter and more inclusive will become increasingly important over the coming decades. According to the United Nations by 2050 more than 6.4 billion people will be urban — that's nearly two-thirds of the world’s population. Moreover, the world’s population is aging – and with age comes a higher level of ill-health, impairment and disability. It’s clear that smart cities won’t happen overnight. It is the time to begin the process of building integrated, tech-enabled cities, with a seamless flow between the different services provided for residents, commuters and visitors (Christopherson, 2016).

2.1.8 Defining Disability and Models of Disability

Essential elements of understanding the meaning of disability have been basically changed since the dominance of the way in which people understand disability in medical model during the pre-1970s. Nowadays the condition requiring changes within society in order to improve the lifestyle of those who are disabled. The philosophy of the social model of disability wide issue stress the society disables the impaired, as opposed to the disability itself being the hindrance (Buhalis, 2011).

Disability is an umbrella term consisting of multiple deprivations. The impairment may either be temporary or permanent. Even though it occurs all over the world the complex nature of it on interlinking the medical, social and environmental dimensions make it difficult to put simple definition, document and measure. According to the World Disability Report 2011, globally around 1 billion people experience some forms of disability and of which 200 million pass through chronic disabilities (WHO& World Bank, 2011 as cited in Chacko, 2015).

After the hard work of United Nations Convention on the Rights of Persons with Disabilities (CRPD), disability is better understood as a human rights issue. Disability is also an important development issue with an increasing body of evidence showing that persons with disabilities experience worse socioeconomic outcomes and poverty than persons without disabilities (World Disability Report, 2011).

The definition of disability is highly controversial for several reasons. First, it is only in the past century that the term “disability” has been used to refer to a separate class of people.

Historically, “disability” has been used either as a synonym for “inability” or as a reference to legally imposed limitations on rights and powers. Indeed, in 2006, the Oxford English Dictionary recognized only these two senses of the term (Boorse, 2010, as cited in the Stanford Encyclopedia of Philosophy). The vast diversity of disabilities like physical, mental, acquired disability by birth etc. creates problems in proper classification and definition (Chacko A., 2015).

According to Grönvik (2007) there are several different definitions of disability used in disability studies. Five theoretical definitions or understandings of disability are the most common:

- A subjective definition
- An administrative definition
- A functional definition
- A relative or environmental definition
- A social definition (the social model of disability)

Two common features stand out in most official definitions of disability, such as those in the World Health Organization (2001; 1980), the U.N. Standard Rules on the Equalization of Opportunities for People with Disabilities, the Disability Discrimination Act (U.K.), and the Americans with Disabilities Act (U.S.) :-

(i) A physical or mental characteristic labeled or perceived as an impairment or dysfunction and

(ii) some personal or social limitation associated with that impairment

Based on these definitions disability is seen in two distinct topics, limitation versus impairment; impairments are generally seen as *traits* of the individual that he or she cannot readily alter. Just what makes a condition a trait or attribute of an individual is obscure and debatable, but there seems to be agreement on clear cases (Kahane and Savulescu, 2009) whereas limitation is more broad and elastic in which restriction on such basic actions one’s self and from social activity. However many scholars found this definition very challenging in characterization of both futures and prevailing situation of objectivity and biologically grounded.

There is also disagreement about the conceptual and practical need for two categories of limitations, one involving personal activity, the other social or political participation ‘handicap’ and “disability,” respectively (Wright, 1983; Edwards, 1997; Nordenfelt, 1997; Altman, 2001, as cited in the Stanford Encyclopedia of Philosophy)

In addition to this we need to understand the two extremes and disagreement on the relationship between impairment and limitation. At one extreme that says biological impairments are the sole causes of limitation and the other extreme limitations faced by disabled people solely to “contemporary social organization, such definitions treat impairments merely as “evocative” causes—as conditions that are subject to exclusion and oppression.

2.1.8.1 Models of Disability

i. Charity/traditional model of disability

Until 18thc disability was coincided with the punishment of god, result of sin and malediction or curse, this was a perception of many cultural and custom of people living around the world (Abebe, 2012).

ii. Medical model of disability

This model understands disability in terms of physical or mental impairment and the other related outcomes are regarded and seen with it are directly emerged out of these problems. As a model they only see disability through internal situations within disabled person (self-centered) and advocate the careful examination and prescription suggested by expert medical professionals in addition to rehabilitation program. On this rehabilitation model which an extension model of medical believe that if persons disability continues it is up to him or her unless and other wise follow professional treatment and modification. Both medical and rehabilitation models ignore other social and institutional influences to disability (Chacko, 2015).

iii. Social model of disability

This is more comprehensive model emerged in 1980 after the publication of WHO framework. The model sees disability from different perspective, apart from individualistic and self-centered medical model to social phenomenon-constructed. According to it; the disability is emerged out of the incapacity of the social system to afford the people with different abilities and investigates the *disabling* constraints and barriers produced by the social, economic, physical and cultural environments, and prevailing hostile social attitudes. Moreover environment is a causal (although partial) agent of disability (Lars Gronvik, 2007; Anastasiou, & Kauffman, 2013).

iv. Human Right –Based Model

This model is very familiar with view point of social model of disability and the contemporary situation of current disabilities and designed with human right principles. This model is based on the notion of “any public services sectors should be accessible for all segments of the people without any difference”. According to this model any developmental questions, basic needs, social justice, human right, should be linked with disability (Abebe, 2012).

v. Ecological Perspective

This perspective is subjective and regards disability as an outcome of the interaction of impairment, activity limitations, and participation restriction in a specific environment. Accordingly, impairment does not necessarily yield disability, if the environment poses no restrictions. This approach is in line with that of Nicolle and Peters (1999), who argue that being “handicapped” is a result of “a mismatch” between the individual’s needs, abilities and the environment. This line of reasoning, i.e. the importance of the link between the individual and the environment, was adopted in the present study regarding the term “disability”. The ecological perspective also conforms to the World Health Organization’s ideology, which regards disability as “a complex phenomenon, reflecting an interaction between features of a person’s body and features of the society in which he or she lives” (WHO, 2007). Furthermore, the ecological perspective adheres to the social model of disability, which emphasizes issues such as the social construction of disability as a state of marginalization, and highlights social issues as potential barriers in line of exclusively focusing on the physical environmental aspects (Yaniv, Arie & Brandt, 2010).

2.2 Tourism Product and Accommodations

Tourism and hospitality marketing involves finding out what tourists want (marketing research), developing suitable offerings (product development), telling them what is available (promotions), and providing instructions on where they can buy the offerings (place), so they in turn can receive value (pricing), and the tourist and hospitality organization make money (George, 2001: 19 as cited by the needs of tourist with disability no name).The hospitality industry includes hotels and restaurants, as well as many other types of organizations or institutions that offer food, drink, shelter and other related services. These products and services are offered not only to people away from home, but also to local guests (Mackenzie & Chan, 2009).

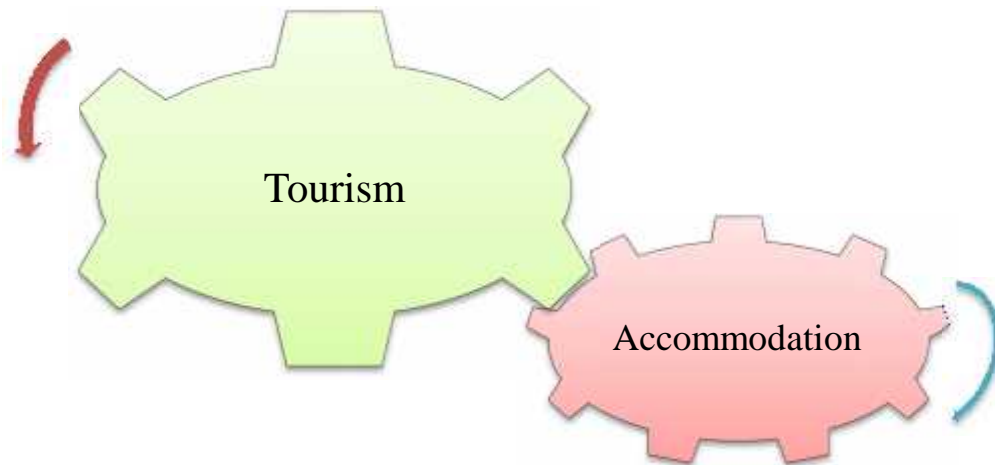


Figure 2.1: Relationship of Hospitality Industry and Tourism, Researchers own work.

The diagram shows the relationship between the tourism industry and accommodation, thus accommodation is a part of a wider group of economic activities called tourism which derives hospitality industry.

2.3 Museum and Tourism

A museum is a non-profit making permanent institution in the service of society and of its development, open to the public, which acquires, conserves, researches, communicates and exhibits, for purposes of study, education and enjoyment, the tangible and intangible evidence of people and their environment. Museums preserve, interpret and promote the Natural and cultural inheritance of humanity. Museums are responsible for the tangible and intangible natural and cultural heritage. Governing bodies and those concerned with the strategic direction and oversight of museums have a primary responsibility to protect and promote this heritage as well as the human, physical and financial resources made available for that purpose. The governing body should ensure that the museum and its collections are available to all during reasonable hours and for regular periods. Particular regard should be given to those persons with special needs (International Council of Museums (ICOM), 2013)

Museums, libraries, and archives can best serve the public by making their programs and facilities as broadly accessible as possible. This means creating opportunities that go beyond the basic requirements, and thinking expansively about how to be widely-inclusive, welcoming, and collaborative (Institute of Museum and Library Service (IMLS), 2015). The above explanations on the necessity of accessibility to the specific study area and some of international standards shows that the importance of designing for all.

The Ethiopian national museum also has the same goal and principles which has its own establishment history. The first museum was founded as part of the National Library in 1944, when for the first time an exhibition was opened to the public. In this exhibition few ceremonial costumes donated by the royal family and their close associates were displayed. The foundation of the Institute of Archaeology played a pivotal role in the promotion of the Museum. It was established in 1952 to promote and facilitate the archaeological research mission in the northern part of the country conducted by the French archaeologists. The mission collected a number of valuable historical and archaeological researches. Later, the Museum was transferred to present National Bank of Ethiopia Employees Club. Eventually, it was moved to the present place in 1966. The Archaeological Museum, which was founded in 1955, began its activities by exhibiting few archaeological collections mainly from the northern part of the country. In 1966, however, the idea of opening a National Museum and the establishment of the Ethiopian Cultural Heritage Administration paid attention and support from the Government.

Thereafter, the museum began to operate under the National Act, which provided the legal protection and preservation of antiquities and had legislative authority governing the overall archaeological and paleo-anthropological sites and monuments within Ethiopia. Then, the National Museum of Ethiopia became one department of the Authority for research and conservation of cultural heritage. At present it is located at Amest Killo on between Arat and Sidist Killo. The Museum has two buildings habitually called the old and the new building. The old building was constructed in 1935 during the Fascist Italian Occupation as a residence for one of Italian Military leaders and the then governor of Addis Ababa.

After the evacuation of the Fascist Italian troops from the country, the building was given to prince Mekonnen the Son of Emperor Haile Selassie I as a residence. Then it became office of the Ministry of Foreign Affairs. Finally, in 1967, the building was transferred to the National Museum. The new permanent Museum exhibition building was designed and constructed by the USAID fund under the supervision of the Ministry of construction between the years 1978 -1981. During the construction of the building, the UNESCO consultants contributed much in advising on the arrangement of the exhibition galleries. Now the building serves as the exhibition hall (National Museum of Ethiopia brochure and Zagol Ethiopia.com 2013).

2.4 International Conventions (CRPD), legislations and the Problem of Inaccessibility in Ethiopia.

As Abebe, (2012) tried to point out major challenges of person with disability in Ethiopia context, he tried to summarize in economic, social and accessibility problem. In his presentation out of the total number of disability found in country 98% of them are marginalized from education and employment opportunity because of the existence of attitudinal problems. These have made worse the life of person with disabilities from others. Among the multi-facial social challenges accessibilities problem is one of mentioned barrier that person with disabilities face. To live better life with rest of society social interdependence is very important beyond the free will. Apart from others attitudinal, communication and inaccessibility problem in built environment are hindering person with disability from social, economic and political participations. Despite the participation of Ethiopia in the international convention, the problem of inaccessibility in development activities are still neglected or low attention is given for person with disabilities.

However, the Federal Democratic Republic of Ethiopia (FDRE) Construction Industry Development Policy (2014), which ratified by Ministry of Federation have tried to look inclusion, safety and comfort in all buildings and infrastructure development process of all people particularly persons with disability. On this policy and suggested implementation strategy discussed in unit four under article 5.6 and sub article 5.9.6 put the mission, policy and implementation strategies. The mission is that all buildings and infrastructure development activities work out in our country be accessible for all citizens especially for persons with disability, to make sure their being equal beneficiaries and participation and become and build competitive construction industry in international level. The policy will made buildings, infrastructure designs and constructions activities inclusive of person with disability. The policy also tries public services and buildings those are giving services currently should consider the accessibility and comfort of person with disability in the process of renewal or reconstruction. In its implementation strategies are; one, create a design system in which all building and construction activities which make them accessible and inclusive for person with disabilities two, implementing standard design for public services institutions and infrastructure buildings three, implementing accessible design and universal design for person with disability.

Ethiopian Building Proclamation No. 624/2009 whereas, it has been found necessary to determine the minimum national standard for the construction or modification of buildings or

alteration of their use in orders to ensure public health and safety. And discussed under chapter four, number 36: entitled with Facilities for Physically Impaired Persons and made some directives like 1/ any public building shall have a means of access suitable for use by physically impaired persons, including those who are obliged to use wheelchairs and those who are able to walk but unable to negotiate steps. 2/ where toilet facilities are required in any building, as adequate number of such facilities shall be made suitable for use by physically impaired persons and shall be assessable to them.

Council of Ministers also set Building Regulation onNo243, (2011), under “Land Use, Related Studies and Designs”. And on this regulation there is building directives discussed under part five, for instance under number two and three as follow“2/ Designs of Category “C” buildings shall have suitable access to stairs, parking lots, and lavatories accessible for people with disability. 3/ the conditions under which public buildings of below twenty meters of height shall be accessible to people with disability without having lifts shall be stipulated by directives”

We can take many examples, huge recreational buildings without ramp or lift, giant projects those who forget or inconsiderate person with disability in case of our light city train. The following conventions discussed are that Ethiopia has signed and articles they have discussed about person with disability.

United Nation Human Rights: Convention on the Rights of Persons with Disabilities
Advocacy Toolkit:

The Convention is an international treaty that articulates the rights of persons with disabilities. Specifically, States that become parties to the Convention agree to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity. By 1 July 2008, 29 States had ratified the Convention and 18 had ratified the Optional Protocol and Ethiopia has signed on 30 March 2007, When a State signs it, it signals its intention to become a party in the future not yet legally bound to implement it however, a State should proceed to ratify it and become a State party that is legally bound to implement its provisions.

Article 9 Accessibility - States parties must ensure that communications and information services, transportation systems, buildings and other structures are designed and constructed so that they can be used, entered or reached by persons with disabilities.

Article 30 Participation in cultural life, recreation, leisure and sport - Persons with disabilities have the right to equal access to play, relaxation, amusement and physical pastimes. States parties must take all feasible steps to ensure the availability of cultural activities such as film, theatre, museums and monuments in accessible formats (e.g., sign language, Braille, closed-captioning). States parties must also take all feasible steps to ensure that cultural activities are held in places accessible to persons with disabilities.

✓ **The Rights of Persons and the World Tourism Organization (WTO)**

Ruling A/RES/492(XVI)/10 – Paper “Towards an accessible tourism for all”, which sets out the requirements that the tourist sector should take.

The paper explains, in some detail, the accessibility requirements that each element which forms the tourist service should have. The paper is the revised and updated version of the paper that the WTO published in 1991. The structure of this paper is as follows:

- Staff training
 - Common requirements in all establishments
 - Specific requirements of the different establishments
- Terminals or stations
 - Tourist accommodation
 - Restaurants
 - Museums and other buildings with tourist interest
 - Tours
 - Conference rooms
 - Main roads

2.5 Accessible Tourism and Contemporary world

According to United Nation World Tourism Organization (UNWTO), tourism is a diverse industry, which is a central economic driver for socio-economic development in a number of areas and destinations throughout the world. Tourism is a whole exertion of transportation, airlines, travels and tours agents, hotel industry, ferry companies, Information technology industry and host community of tourism destination (UNWTO, 2011). The growing population of elderly and disabled people not only in Europe but also all over the world needs a special support and service, developed the new emerging new niche as an accessible tourism in tourism industry.

The issue of accessibility and accessible tourism is recent phenomenon to research arena, especially to the developing countries (Edusei, Mensah, Badu, Pephrah, 2015, Becky, 2016). According to research conducted in South Africa on *The need for disabled friendly accommodation* revealed the importance of creating an environment, product and service accessible for persons with disability. The market for people with disabilities is generally regarded as one that is currently untapped, a “fledgling market with huge potential”. The tourism industry is not in a position to fulfill the needs of people with disabilities in South Africa (Bisschoff, & Breedts, 2012).

Study which is conducted in Cameroon also proof that some niche market segments still seem to be ignored or neglected in the marketing and development of tourism and hospitality facilities which constitute barriers to these segments. One of these segments is disability tourism. According to the researcher Becky, (2016) on his research which tries to identify *Barriers to People with Disabilities in the Tourism and Hospitality Industry* found that most of tourism and hospitality are not considering the accessibility of their product and service including some natural area destinations. However their big change in recently built and established tourism and hospitality industry.

Additional research which is conducted in the issue accessibility and accessible tourism is found in Ghana confirm that thematically the issues of disability, accessibility and accessible tourism is infant in developing countries. However it's better to play one's role than neglecting the neglected issues, as a research the study focused on *Accessibility and Participation of Persons with Disabilities in Tourism: Perspective of Tourism Workers in the Ashanti region of Ghana* and on this research findings revealed that the participation of persons with disabilities in tourism is limited due to factors such as the inaccessible tourism environment, the nature of transport services and the language barrier. Suggested provisions

were canopy walks, accessible banquets, vehicles, and sign language interpreters at various tourism destinations (Edusei, & et al, 2015)

The above mentioned studies done in South Africa, Cameroon and Ghana respectively believe the socio-economic importance of accessible tourism for all segments of population and this should be underpin by such scientific researches to put stepping stone to the field of study and to make significant change in terms of awareness creation on the need and interest of persons with disability and for making some modification of inclusion and consideration on services and products that tourism and hospitality currently delivering.

Research was recognized by tourism scholars to study the accessibility of tourism as a sector. The leisure constraints approach is supposed to contribute to the understanding of tourist motivation, decision-making processes and destination choice models (Darcy, 2010).

In his previous Research work Darcy, (2009) has investigated the criteria that people with disabilities decide as ‘important’ to selecting accommodation and their preference for presenting this information. Studies have identified constraints with the way that accessible accommodation information is documented and marketed. According to this research the issues are not limited to Australia but also are universal challenges faced by person with disability wanting to travel. Based on the research, the major issues identified were that accessible accommodation information is poorly documented, not detailed enough, not room specific and do not have an equal amenity to non-disabled rooms.

With increased number of an ageing population and hub on inclusion and accessibility has led to enhance in the literature and exploration of theoretical concepts that support the developing accessible tourism industry. The accessible tourism market includes tourists with different levels of accessibility requirements, who have been poorly served by the tourism industry (Miller and Kirk, 2002).

However the issue of accessible tourism the tourism experience of people with disabilities first emerged in the late 1970s and even in the late 1980s and early 1990s, researchers only “flirted with this issue” (McKercher et al., 2003, p. 467 as cited by Yaniv, Arie & Brandt, 2010). In developed countries it is more recognized and better conceptualized; this would be proper following review of some literature on accessibility and disability. According to a study which is carried out in Austria, Sydney under the topic of study *Disabling Journeys: The tourism patterns of people with impairments in Australia*, shows people with impairments travel significantly less than the non-disabled and due to this lower level of travel people with impairments are proportionally under represented as members of the

travelling public. And the research has find out that the majority of people with impairments did not view their impairment as the reason for non-travel but other constraints and barriers that they encounter. These constraints and barriers vary significantly based on their access requirements (vision, hearing, mobility and communication) (Darcy, 2003).

Recently Dimitri Buhalis et al (2011) published two volumes that can be positioned as landmark in this emerging research area. The first one Accessible Tourism, 'Concepts and Issues' established a framework for the study of accessible tourism, and the second 'Best Practice in Accessible Tourism': Inclusion, Disability, Ageing Population and Tourism (2012) gives an insight in the way accessibility of tourism is dealt with in practice. The authors argue that, because of the significant implications for demand and supply, inclusion, disability, ageing population and tourism are increasingly important areas of study. They contend that most studies in the field have focused on the experience of people with disabilities. (Albert Postma, 2015).

It is true that accessible tourism is one of the keys for the new and specialized travel agencies in the future. Providing appropriate product/service by targeting the individuals with accessibility needs together with a correct approach and strategy, the specialized travel agencies are able to have a competitive advantage and continue their activities.

Also this market segment would create having sustainable activity and a golden opportunity for the specialized travel agencies in the future (Özogul & Baran, 2016).

2.6. The Need of Accessible Tourism from Different viewpoint

Several academic researches and projects have found in developed world like USA, Canada, UK, and Europe especially in Scandinavian countries and Austria made significant progress in the field of study and contributed on the development of theories, conceptual framework and models how this contemporary world should understand accessible tourism and disability. Many of research that I have found understand and hold different reason why accessible tourism is so important. The General Assembly of UNWTO emphasizes accessibility as a central element of any responsible and sustainable tourism policy (UNWTO, 2013)

Buhalis and Darcy (2011) regard accessible tourism as a phenomenon that is developed in a certain way not only in academic studies, but also in practice. The dimensions of this phenomenon are multidisciplinary and they concern geography, disability studies, economy, politics, psychology, social psychology, management, postmodern cultural studies, marketing, architecture, medicine and many others.

According to Dagmar, (2016) accessible tourism is seen as a market segment with high potential due to aging population is becoming a significant demographic effect that is closely connected with this issue and will strongly influence the aspects of tourism. The senior segment concerns nowadays more than 75 million people in Europe and according to estimations the ratio of elderly people will increase by 35% by 2025 and it will mean a growing number of people who welcome an accessible tourism environment (European Commission, 2015). This would be true in research conducted in Bangladesh magnify the importance of accessible tourism and disability in terms of its economic importance (Chandra & Kumar, 2015). A further study motivation derives from data suggesting that tourist activity is an important dimension in the treatment of people with disabilities (Jooyeon, Joonkoo & Stamatis, 2017).

On the other the study conducted in Israeli argue that studies in tourism which focus on people with disabilities approach the subject from the perspectives of social justice and altruism and meeting legal requirements rather than marketing purposes. However, they believe their study is unique in the sense that it does not only adopt a marketing approach, but integrates such an approach with ecological perspective to disability. This integration may lead to concrete and applied management recommendations, based on the consumer's perspective, namely the personal experiences of people with disabilities (Yaniv, et al, 2010).

2.7. Conceptual Framework

2.8. Accessibility of Five Star Hotels and National Museums

Research which emphasis on the group people who are marginalized and have less recognition in the society, has focuses on *Disability inquiry or investigation*, primarily addresses the meaning of inclusion in schools and encompasses administrators, teachers and parents who have children with disabilities (Mertens, 1998). Mertens narrates how disability research has moved throughout stages of development, from the medical model of disability (sickness and the role of the medical community in intimidating it) to an environmental response to individual with a disability. Here the study incorporates inclusiveness a notion which is emerged in school which is one of basic need has grown to inclusiveness of other activities like tourism and leisure activities. Now, researchers focus more on disability as aspect of human disparity and not as a shortcoming.

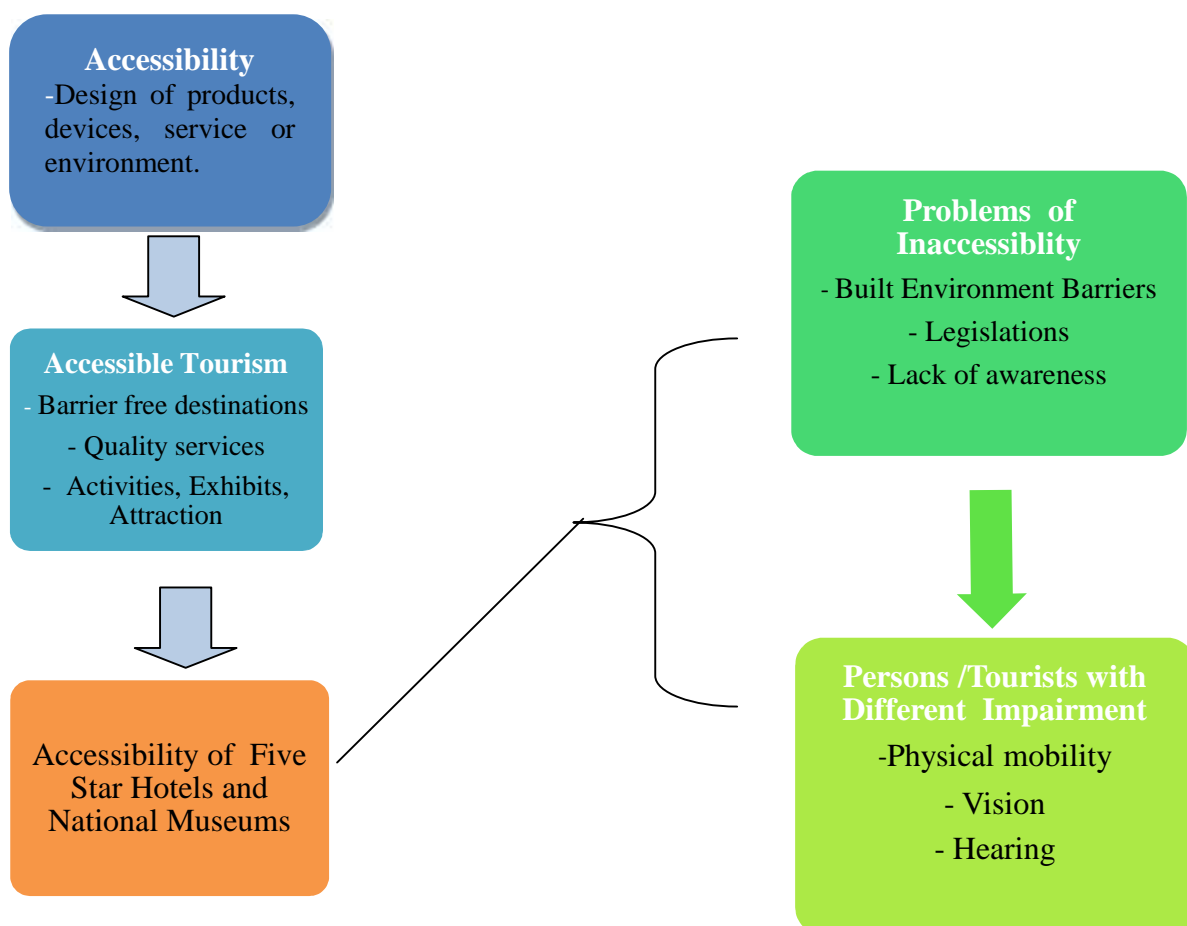


Figure 2.2: Conceptual Framework Source: own, 2017

Accessible Tourism is part of inclusive tourism which is further an integral part of sustainable tourism. It is an approach aiming to provide and facilitate leisure and recreational facilities to all. The barriers and constraints need to be mediated to foster inclusive tourism for all. These barriers could be built environment, which means human made barriers which have physical existence and hinders people with disability from full participation and enjoyment.

The other means to ensure accessible tourism is that through legal framework and policy enforcement to guarantee and to set accessible standards for built environment. The problem which creates inaccessibility is problems related to lack awareness of people on disability inclusive and accommodation practices.

This study focuses on the target group of people who have sensory impairment (hearing and vision) and physical impairment which is mobility. Most of the problem of inaccessibility is also applicable for other type of impairment in most of the time.

CHAPTER THREE

METHODOLOGY

Methodology describes “the theory of how inquiry that “involves analysis of the particular field of inquiry.” It involves the researchers’ assumptions about the nature of reality and the nature of knowing and knowledge. In other words our assumptions about what we believe knowledge is embedded in methodological discussions and therefore have consequences for how we design and implement research studies (Graduate Studies and Research Office, 2016). This part explains the entire approach to research and how the researcher met intended objectives.

3.1. Research Methods

3.1.1 Description Study Area

As the seat of the Headquarters of United Nations Economic Commission for Africa (UNECA), African Union (AU) and other regional and international organizations, Addis Ababa is not only capital city of Ethiopia but also diplomatic center for Africa. The glorious weather characterizes the capital to be a delightful place to explore. With an altitude of 2120 to 3200 meters above sea level including the Entoto chains of Mountains, the city enjoys a mild climate with an average temperature of 16⁰c. The City is endowed with hot springs, which was one of the major reasons for it to be established as the capital of the country in the last half of the 19th century. Addis Ababa is fast becoming one of the continent’s leading conference destinations, with impressive facilities, not only for large events, but also for small workshops and seminars, Conference Facilities – Operating as an international conference venue. Due to the fact that with the increased number of business traveler and high number of tourist arrival, this will be linking to the development of tourism sector, hospitality industries and accessible tourism (Addis Ababa Culture and Tourism, 2016).

There are a lot of hotel industries ranging from basic service accommodation facilities to five star luxury ones, in regard to the man-made tourism resource potentials, Addis Ababa owns a number of old palaces, churches and mosques, monuments, museums, art galleries and temporal or permanent exhibitions are the least mentioned.

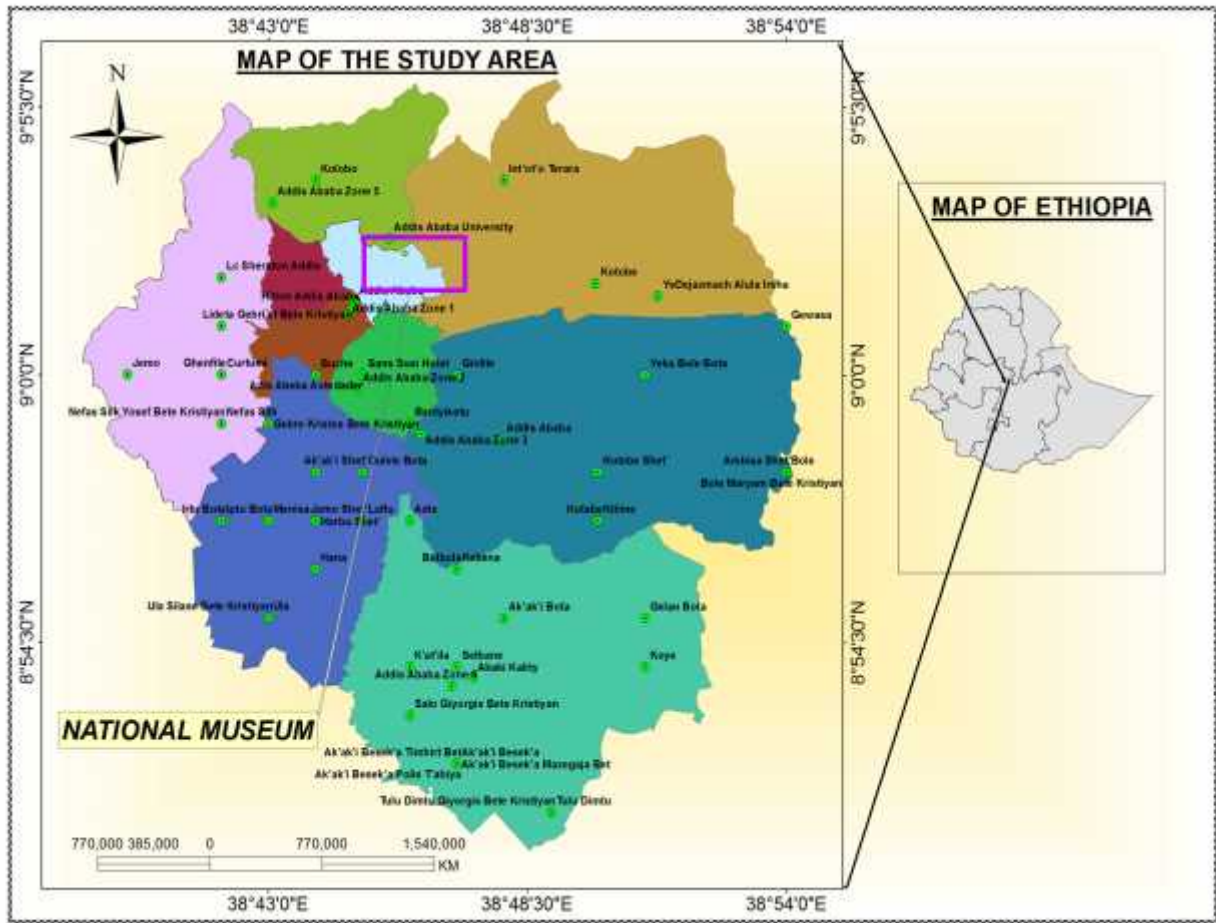


Figure 3.1: Map of Study Area

Source: Ethiopian Mapping Authority December 2017

From tourist attraction site found in the city the research has focused on hotel industries and museum as a result high arrival of business traveler and tourist to the country is experiencing recently and this two areas have probability to be consumed.

3.1.2. Research Philosophy

Now day's knowledge should be a resource and a solution to problem for social science and social theory. Although philosophical thoughts have great influence on the practice of research, for the most part in research the study of the fundamental nature of knowledge, understanding and fact remain out of sight. According to Creswell (2008), alternative knowledge claim, this research has fallen in both advocacy/participatory and pragmatic. In the first case knowledge claims are stances for groups and individuals in society that may be marginalized or disenfranchised.

Therefore, theoretical perspectives may be integrated with the philosophical assumptions that construct a picture of the issues being examined, the people to be studied, and the changes that are needed. Thus, the research has contained an action agenda for reform that may

change the lives of the participants, the institutions in which individuals work or live, and the researcher's life. In the second case which is pragmatic alternative knowledge claim and its assumptions and method of data inquiry the research identifies itself under this approach. In pragmatic knowledge claim individual researchers have a freedom of choice. They are "free" to choose the methods, techniques, and procedures of research that best meet their needs and purposes. Thus, in mixed methods research, investigators use both quantitative and qualitative data because they work to provide the best understanding of a research problem.

3.1.3. Sample Size

Based on the data of AACT (2017), There are more than fifteen museums that tourists/visitors can find their the highlights of regional or local destinations and sites prior to their departure to specific itineraries owned and administered by different organization like governmental, private and by church. They have different type of categories like Zoological, Natural History, Archaeological, Ethnological, Historical/Cultural, and Religious. According to recent data on the number of hotels found in Addis Ababa city there are more than one hundred ninety (190) hotels with different distinctions, like hotels with star rated, hotels with and without full service and accommodations, hotels with the process of construction and hotels with misused in purposes. For the sake of convenience and standardization of the study has focused on five star hotels which are seven (7) in number. The researcher has used non-probability sampling technique to select among five star hotels and purposive sampling method has employed and all five (5) star hotels have been selected. The brand, seniority, and variety of service they gave and the distance from the main road and the airport have been considered. Accordingly one (1) National museum is selected in this study.

Based on convenience sampling and snow balling techniques, there have been gained eighteen (18) respondents of person with disability from three associations of disabilities (**Ethiopian National Association of the Blind, Ethiopian National Association of the Deaf and Ethiopian National Association of Disability**) specifically individuals those who have both international and domestic travel experience. This let us to understand the exiting situation and for comparison of their experience. In regard to hotel there were respondents from receptionists three (3), front office supervisor four (4) head of waiters three (3) of five selected hotels. There were two respondents from national museum one (1) senior education officer and one (1) director of the museum. There were three (4) key-informant interviews with selected official, managers and top leadership individual from Addis Ababa city

government culture and tourism bureau, ministry of culture and tourism, and museum respectively based on their experience and their position.

3.1.4 Research Design

On this exploratory study which is carried out when little is known about a situation or a problem and for the reason the research has very short period of time for data inquiry the researcher has found mixed approaches as means of better understanding and meeting the intended objective the study have employed both qualitative and quantitative (Justus, 2001). In order to meet research problems and knowledge gap, key informant interview, systematic observation through conducting accessibility audit and analysis of relevant document on policy, legal frameworks and their implementation have been assessed.

3.1.5 Description of Study Participants

In this research there were number of participants starting from the subjects of the study persons with disability those have different impairments (mobility and sensory), professional and high officials from different governmental, non-governmental organizations, private and associations office, education officers, curators, receptionist, waiters, international visitors in the time of data collection.

3.1.6 Eligibility Criteria

For Five Star Hotels

This would help us to measure all kinds of service they deliver, hotel services may differ on the base of their capacity to provide the service and the mission they hold. For instance hotels may include bar, restaurant, swimming pool, gymnastic service, conference halls etc. Year of establishment and seniority in the sector may influence on the quality of the service they deliver plus it may have impact on peoples mind in the case of guarantee and nostalgia. Brand increase the tendency to be needed and be best competitor in the market, branding is catching peoples mind easily. Standards in which hotels are ranked also matters starting from built environment to the quality and quantity of service delivery. Hotels should be near to the main road and major services, both domestic and international users did not want to go far from airport and other facilities. The experience of hosting international and national conferences and other activities like major or minor events will determine the variety of guest from all over the world and segment of people.

For Museum

It was helpful to consider annual visitors number to increase the probability to meet the intended groups of people in case of the study. National museum has great number of visitors, collection, human power and well organized system of administration in relation to other privately and church owned. Museums found nearer to main road and centered in the city may get peoples preference to be visited. Many of museums found in the city are not built purposely for museums, as they are transferred from individual residence or from palaces this have an influence on the design of building not considering all segment of people especially person with disability.

3.1.7 Sampling Technique

There a number of individual who are selected as a sample based on non-probability sampling techniques, however in exploratory studies, the sample size is therefore estimated beforehand as precisely as possible, but not determined. The attributes assigned to qualitative research approach is relevant to the study of marginalized groups, such as people with disabilities, as it provides participants with the possibility to speak about their personal experiences. A purposive sampling method has been used, for deep investigation, discovery and understanding of the topic under study through a sample that provides accurate information. In snow balling sampling the researcher have got both persons with disability with tour and travel experience and users in museums and hotels respectively. This technique is adopted because respondents were not readily available at the study site.

3.1.8 Source of Data

The study consists of both primary and secondary sources of data which is used as, a literature and an empirical research component. The literature research made use of articles, books, thesis, conventions and reports. Similar to this assessment, has largely entailed the use of questionnaires, interviews, inquiry of documentation and interviews with relevant officials. Semi structured interviews are necessary; relevant questions has been prepared and answered by participants. In addition with personal observation accessibility audits were employed based on international check list with the guidance of related professional.

3.1.9 Methods of Data Collection

Most important data have been collected on accessibility of selected hotels and museum, participation and experience of persons with disability in tourism and, the need of accessible tourism and suggestions for provisions to ensure accessible tourism have discussed with operational managers, education officers, government official, and waiters on the prevailing situation.

I. Interview

Semi-structured interview were managed with selected relevant leaders from ministry of culture and tourism, Addis Ababa culture and tourism bureau, associations of disabilities, persons with disability, waiters, receptionist, front office supervisors, education officers. In the process of interviewing these key individuals, some forms of open-ended questions were asked on certain topics (how they perceive accessible tourism, to what extent their institutions were accessible for persons with disability, their interaction with person with disability and the role of government in making tourism services and area inclusive.

II. Observation and Conducting Accessibility Audit/Assessment

Accessibility audit/assessments have been conducted in seven five star hotels and museum by Universal accessibility checklists and designs derived from ADA were converted to the country's existing context for museums and hotels and managed by professional personnel from local NGO which works in accessibility and inclusion of disability in social life which is Ethiopian Centers for Disability Development (ECDD). These may include the following areas and services; demographic information of the various hotel accommodations, accessibility of the hotel, shuttle, Parking, reception, elevator, hallway, room, bathroom, bar, restaurant and swimming pool/ recreation area.

III. Document analysis

Documents were analyzed in order to scrutinize and give important recommendations, the following documents were seen: construction policy, building proclamations, directives, regulation, Ethiopian standards Agency hotels rating and classification document, Addis Abba City Government Culture and Tourism Bureau inspection directives and website in which tourist and travelers left their comment and experience on tripadvisor.com an agent which helps traveler in consulting and ranking. The comments are specifically related to room design, accessibility and hotel standard by non disabled guests.

3.1.10 Data Analysis Method

The data which is gathered from different data sources was analyzed through using qualitative data analysis methods. The qualitative data from interview has been categorized in themes and sub-themes. The audit report also narrated based on the measurement found. In qualitative research, idiographic interpretation was utilized, in other words, attentions are paid to particular and interpreted in regard to the particulars of a case rather than generalization. Textual description, explanation, tables and Pictures were used as required to present the results of the study (Justus, 2001).For simple and easy understanding the following table helped us by summarizing the method of the research as follow:

No	Target Population and place	Sources of data	Research Tools	Sampling technique	Sample size in quantity	Data analysis method
1	Five star hotels and museum	Primary	Accessibility audit or Assessment	Purposive	7 +1 respectively	Accessibility check list and narration
2	International and domestic person with disabilities	Primary	interview	Convenience and Snowballing respectively	International (4) domestic(14)	Qualitative, thematic analysis
3	From concerned government official.	Primary	Interview with key informant	Purposive	4	Qualitative, thematic analysis
4	Museum guide(2) front office supervisor(4) , waiters(3) and receptionist(3)	Primary	interview	Purposive	12	Qualitative, thematic analysis
Total sample size = 42						

Table-3.1: Showing Summarized Sources of Data

3.1.11 Ethical Considerations

Ethical permission has obtained from the Addis Ababa University, Centre for Environment and Development Studies for conducting this research. Addis Ababa City Government Culture and Tourism Bureau and Ethiopia Disability Association also provided their approval to enable the workers to participate in the study. Participants have been given a written consent form which describes the purpose of the study, the risks, the benefits, and the voluntary nature of their participation. Data collection was initiated only after their consent was received and the subject also assured that their response was used only for the purpose of the research and therefore name and identification were confidential. The researcher was subject to the ethical obligation to treat each person in accordance with what is morally right and proper. In addition to this the researcher had highly considered the privacy and the confidentiality of their identity.

Based on the agreement that the researcher has made with the hoteliers, the research has made only aggregate analysis as a result of the researcher is not allowed to mention names, place or any specific terms to identify the hotel and not to take pictures to protect their hotel from unnecessary trade competition. This has limited not to identify the most accessible hotel among the seven five stars and not incorporate pictures will also decreases the power of expression. In other way the researcher wants to prove the trustworthiness of the study, all the information were gathered from right informants which are service giver and users in the hospitality industry which is hotel and tourist site which is museum. Plus the requirements in the checklist are measureable and the findings are repeatable in the same accessibility checklist of ADA (Americans Act of Disability). The other thing that the researcher needs to share is field experience, if any one wants to conduct this kind of study it is better to have good quality of communication and ability of convincing the subject that, you will keep the information you are taking will be confidential. And to have student ID, support letter and being professional will help you. Plus you need to have measuring equipments like, meter which measures up to 5M, slope measuring material, accessibility check list and more importantly you need to get a trained person who will conduct the audit/assessment. Finally you need to observe every place in which the study has focused.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND DISCUSSION

4.1 Aggregate Accessibility Audit / Assessments of All Seven Five Star Hotels

Accessibility audit were conducted on five star hotels which are seven in number found in Addis Ababa. They are listed as follow,

1. Sheraton Addis Hotel
2. Elilly International Hotel
3. Golden Tulip Hotel
4. Getfam Hotel
5. Radisson Blu Hotel
6. Marriot Executive Hotel
7. Capital Hotel and Spa

The accessibility check list has 66 requirements or statements which were answered by observation. If the hotels were fully accessible and answered “yes” they would have gained 462 points, this is by multiplying (66 statements * 7 hotels). However from expected 462 total accessibility check lists aggregate point of all seven hotels only 236 which is 51.1% of it found accessible. In other word from 66 requirements, 34 requirements are found accessible. Whereas out of the aggregate point 72 “In- part “has been found which is 15.6% of 462, These means out of the 66 requirements 10 requirements were fulfilled in partial condition. And total accessibility check lists aggregate point of all seven hotels it was found 129 “No” and counts 27.9% of 462, in simple way out of the 66 requirements 18 requirements where not accessible. This shows that the issue of accessibility is not addressed even in high quality hotels. Finally out of 462 aggregate points 25 “Not applicable” was found it accounts 5.4% this would be out of 66 requirements, 4 requirements were not applicable, however not applicable does not mean inaccessible.

The assessment which is made on the hotel can be labeled on three main concepts these are Physical accessibility, Information Accessibility and Accessibility of Legal policies, frameworks and guidelines.

The following accessibility check list table contains requirements that have been measured and observation also made based on the check list and has presented as follow. The numbers in the second column shows the number of hotels which have answered “yes” or found accessible in each requirement, the third column shows the number of hotels which have found in partial condition, the fourth holds the number of hotel have been found “No” or inaccessible and the fifth column shows the number of hotels which have found in applicable to the requirements that the check list has had. For instance from out of seven five star hotels only two of them have public space which can be used by everyone and five of them are found in part. For better narration the researcher has made detail narration after the following table.

Accessibility Assessment	Yes	In Part	No	NA	Notes/Observations
1. Inclusiveness					
Can all public spaces be used by everyone?	2	5			
Policies and Practices					
Is institution governing policies disability inclusive?	3	4			
Are staff members trained in disability and/or accessibility issues?		4	3		
Are staff members trained to provide assistance and services in a non-discriminatory manner to persons with disabilities?	4		3		
Do staff members know how to provide information in alternative formats?	4	1	2		
2. (The American with Disability Act, ADA Accessibility)					
Accessing the Premises					

Is the distance to the institution/company 500 m (at most) from the main road?	2	3	2		
Is the route of travel stable, firm and slip-resistant?	7				
Is the route free of hazardous barriers: tree roots, open drains, ditches, garbage, equipment, outward opening windows and doors or overhanging materials?	3	2	2		
Is the route at least 90 cm wide?	7				
In case of gradient change, are the slopes of ramps no greater than 1:10	1	1	2	3	
Entrance (Ramp and Parking)					
If there are stairs at the main entrance, is there also a ramp or lift?	4	1	1	1	
Are the ramps 90cm wide and have 150 cm at the bottom/top of the ramp?	1	1	2	3	
Is there a continuous railing on both sides of the ramp?		1	1	5	
Are railings sturdy with the lower one being 70cm and the upper one 90 cm high from the ground?		1	1	5	
Are there adequate numbers of accessible parking spaces available? (For 1-25 total spaces, 1 accessible space)		4	3		
Are they 244 cm wide per car with additional 150 cm access aisle?			7		
Are the accessible spaces closest to the	6		1		

accessible entrance?					
Are accessible spaces marked with the International Symbol of Accessibility?	1	1	5		
Is there an enforcement procedure to ensure that accessible parking is used only by those who need it?	1		6		
If there are stairs inside a building, is there also a ramp or lift?	7				
Do stairs have continuous rails on both sides?		3	4		
Interior Spaces					
Are aisles and pathways in each space at least 90 cm wide?	7				
Are hallways at least 112 cm wide?	7				
Do doors into public spaces have at least 81 cm clear opening?	7				
Is there a 150 cm circle or a T-shaped space for a person using a wheelchair to reverse direction?	4	1	2		
On the pull side of interior doors, next to the handle, is there at least 46 cm of clear wall space?	7				
Can doors be opened without too much force (2.2 kg maximum)	5	2			
Are door handles 122 cm high or less and operable with a closed fist?	7				

Are all threshold edges .6 cm high or less, or if beveled edge, no more than 2 cm high?				7	
Are there work/study stations of various heights (70 cm high average)	7				
Does the arrangement of the room optimize visibility	2	5			
Do the library and/or IT rooms have computers with screen-reading/magnification/JAWS software?			7		
Elevators					
Is an elevator provided an alternative to the stairs/steps inside the building?	7				
Does the elevator door open widely enough for wheelchair user access? (80cm wide)	7				
Does the elevator display audible and visible information telling passengers what floor they arrive at?			7		
Do the control buttons have raised tactile and Braille information and are they at a height and in a position that can be reached by all users? (1.20 m from the ground)	1		6		
Are there grab bars provided in the elevator?	5		2		
Is the space inside the elevator wide enough (at least 150 cm) to allow someone using a wheelchair to enter, turn around and access the control panel?	3		4		

Seats, Tables and Counters				
Are the aisles between fixed seating (other than assembly area seating) at least 92 cm wide?	6	1		
Are the spaces for wheelchair seating distributed throughout?	4		1	2
Are the tops of tables or counters between 71 and 86 cm high?	1		6	
Signage and Controls				
If emergency systems are provided, do they have both flashing lights and audible signals?	1	1	5	
Is there enough signage to guide direction?	6		1	
Are all controls available to the public located at a height of between 23 - 137 cm for a side reach, and between 38 and 122 cm for a front reach?	6		1	
Are all controls operable with a closed fist?	7			
Rest rooms				
Is there at least one rest room (either one for each sex or unisex) fully accessible?	6	1		
Are pictograms/ symbols, and Braille used to identify rest rooms?		7		
Is the doorway at least 81 cm clear?	5		2	

Are doors equipped with accessible handles, 122 cm high or less?	7				
Is there a wheelchair-accessible stall that has an area of at least 150 cm by 150 cm, clear of the door swing, or is there a stall that is less accessible but that provides greater access than a typical stall?	3		4		
In the accessible stall, are there grab bars behind and on the side wall nearest to the toilet seat?	5	1	1		
Is the toilet seat 43 to 48 cm high?	7				
Does one lavatory have a 76 cm wide by 122 cm deep clear space in front?	5	2			
Can faucet be operated with one closed fist?	3	3	1		
Are soap, hand dryers, and other dispensers within reach ranges (70 cm from ground)?	1	5	1		
3. Choice					
Is there more than one option for entering/exiting public spaces and rooms?	3		4		
Can public rooms and spaces be used for different sized groups of people?	4	3			
4. Clarity					
Are routes/entrances to all public spaces easy to find?	3	2	2		
Is there signage related to public spaces usable by people with low/ no vision (Is			7		

Braille information available)?					
Is the lighting well designed to facilitate the activities and tasks that take place in each public space?	7				
Are assistive listening systems and visuals available?			7		
5. Safety					
Are floor surfaces in public spaces slip resistant and barrier free?	2	1	4		
Are emergency exit routes obvious?	4	1	2		
Are all interior spaces free of sharp, hot or rough surfaces that might not be felt by people with sensory loss?	7				
6. Comfort					
If there are multiple floors, is there an accessible restroom on each floor?	1		6		
Can all controls available to the public be easily reached and operated by people with strength limitations and of varying heights and sizes (e.g. light switches, electrical outlets, window blinds, and cabinet doors)?	3	4			

Table 4:1 Accessibility Audit Check List of Hotels

4.1.1 Implications of the Study

For more detail narration the researcher has tried to see the existing situation of the hotels by the contents of accessibility audit checklist organization. All the assessment reports are analyzed in aggregate sum and resulted out of the seven hotels and for concrete data presentation the researcher has chosen to situate the interview of informants from the direct users and service provider who are receptionist, front office supervisors, waiters and persons with different impairment. For more clarification the result of the assessment is presented here out of seven hotels hence the assessment is made all the five stars exist in the city.

Number of statements or accessibility requirement that the check list consist	Number and percentile of statement which are found accessible or answered "YES"	Number and percentile of statement which are found IN-PARTIALLY accessible.	Number and percentile of statement which are found INACCESSIBLE at all or answered "NO"	Number and percentile of statement which are found NOT APPLICABLE at all.	
Total= (462)	236 51.1 %	72 15.6%	129 27.9%	25 5.4%	= 462 =100%

Table 4:2 Aggregate finding of the assessment

4.1.2 Inclusiveness of Policies and Practice

Among the seven hotels which the study has made assessment, only two of them have applicable public space which can be used by everyone, the rest are limited to in partial condition. Based on the assessment, some public area like swimming pool, meeting hall and bar are found inaccessible for wheelchair users. In other way, all of them try to be disability inclusive in their governing policies; these can be seen by providing designated accessible room, rest room, and parking and by making available wheelchair for a person with mobility impairment. In these regard only three of them are disability inclusive in their governing policies, these happened as a result of none of them have trained their staff on disability and accessibility issue, if they did they will coincide it with other training and it will be given as highlight. However four of them have given training on providing assistance and services in a non-discriminatory manner to persons with disabilities. None of them have a person who is trained in sign language or graduate of special need field of study these situation hinders from providing information in alternative formats.

In convenient with the accessibility assessment conducted, the researcher has interviewed three receptionists among the seven hotels about the experience of accommodating a guest with some sort of disability, whether they get any training or not and they have responded as follow:

“there is no specific training concerning disability...we have hosted a guest with disability... specifically person with mobility and hearing impairment. They usually came for the purpose of conference. We just accommodate them like other normal people....” (Respondent #1...receptionists)

In contrast with the receptionists response, person with hearing impairment have shared his experience accordingly:

“It is hard to communicate with receptionist, waiter and room service. I was expecting to get special assistance like service clarification (available services) for example I missed breakfast so many times because no one told me.” (Respondent #1...person with hearing impairment)

From the above statement we can understand that hospitality industry specifically five star hotels lack disability inclusive policy and practices. These manifested by their offensive language usage, miss approach, miscommunication and the distinction which is created like *normal* and *abnormal*, *us* and *them*, *others* and *the disabled* the above problems are created due to the absence of disability inclusive training for the staff.

4.1.3 Premises

It can be said that all of the hotels found immediate to the main road which is less than five hundred meter and the route travel is stable, firm and slip-resistance. However the routes are not free from barriers like flowerpot and parking at the entrance door. Three of them have ramp, with only one accessible and standardized ramp and two have plain slope which needs no ramp and at the time of the field observation, one hotel have no wheelchair entrance at all. If there is ramp they are not intentionally built for person with disability it is either for parking or carriage of baggage.

In relation to this person with mobility impairment have shared their experience as below:

“They always expect a guest who have car or assistant... the one who live high standard life ...however their guests could be any one, hotels are public place they should think of putting directional and making the route accessible for everyone not only for person with disability” (Respondent #1... crutch user)

The other respondent with visual impairment also said:

“I have had a chance to stay in two five star hotel and the surrounding area is not clear yet. The area is construction site, there is no stable route to the hotel...it is impossible to come alone without assistance Plus the entrance gates are not clear...occupied by parking and material which is used for decoration.” (Respondent #1...visual impairment)

From both field observation and experience of respondent which is gained from respondent shows that with exception of two hotels the rest do not considered the needs and wants of persons with disability. During interview, the researcher has noticed that most of the hotels have great respect for international guest. Having in mind that respecting a guest is first hand job in hospitality industry, this should be inclusive for all segment of people without any discrimination on the bases of status health, race, sex, age and nationality. The absence of full information transfer in applicable way like putting direction and sign for person with hearing impairment and clearing the route of entrance in more accessible way for visual impairment and mobility impairment are signs for their inconsideration. The same inconsideration were observed in entrance of some hotels which is discussed below.

4.1.4 Entrance (Ramp and Parking)

The entrances of the hotels; which four of them have steps at the front door among this one of them have no definite ramp and the rest are smooth floor with zero slope. Based on the observation, the ramps are not built with standards, for instance two ramps have no handrail at all, very narrow which is applicable for one wheelchair users at once. Moreover there is no free space at the bottom or at top to maneuver wheelchair as a result the places are occupied by flowerpot or the ramps were made built stick to the wall. In other way the assessment have seen the parking area of the hotels, based on the observation only two them have designated parking area for person with disability however they have no additional aisle. The rest of the hotels have parking area but not designated and identified by symbol of accessibility plus they are far from entrance door. The front and designated parking area is occupied by other none disabled customers or by the cars owned by the hotels. Beside these all of them have stairs and alternative lift/ elevator and none of them have no continuous railing on both sides, if they have it only by one side and not continuous, these made person with visual impairment to take mistaken stride.

The respondent who is crutch user has said the following statements which consolidate the assessment finding:

“Parking space are too far from the hotel entrance and I have only sought one designated parking by symbol of accessibility but has no free space Plus the check in machine which they put at front it very narrow... sometimes I feel uncomfortable with my crutch” (Respondent # 2...crutch user)

The researcher interviewed wheelchair user who has much experience of these star hotels due to national and international conference and the respondent has said;

“Most hotels believe that they are fully accessible but the details on the ground say something else...accessibility is not all about putting “wheelchair ramp”... how can I managed to go in very steep and slippery ramp plus it does not have handrail. (Respondent #1...wheelchair user)

From the above testimonial the researcher has derived the following conclusion. Even if most of us think star rated hotels (specifically five stars) have most accessible place and service for everyone, the truth is that they lack not the universal design, but also the basic requirements and standards for ramp and parking area which is set by proclamation, regulation and directives for all public buildings. There are some inconsideration which is observed in interior space with some acknowledgments those who have accessible space in relative way which is discussed as follow.

4.1.5 Interior spaces

Almost all hotels have very wide aisle which is a clear path through corridor, rows of seating and hallways. The doors to the public space are with sensor which is four in number and two of them have 24 hour standby door attendant in which door is opened by personnel as soon you reach and the other experience is that the customer is expected to open in much effort, because the door is too heavy to either to push or to pull in each direction (entrance and exit) and the doors are the one with two wing which is wide enough for two wheelchair users at one time. The door handles are managed by closed fist. The arrangement of the room and work stations are fixed at permanent place, however customers may have many alternatives in these hotels for search of visibility and comfortable seat, the problem is person with hearing impairment could not find computers with screen-reading/magnification/JAWS software in the working station.

The respondent who has severe impairment on his hand has shared his experience on full glass door as follow;

“As you see I cannot move my hand...plus they are too short so need assistance...however once upon a time I had to attend conference and I went...unfortunately I crushed with front door...I did not notice there was a glass.” (Respondent #1...impairment on hand)

Interviewee with visual impairment also shared her experience on the importance of using different carpet as followed; *“there should be distinct carpet which could help us to sense that we are in different place, or that we are at entrance gate.” (Respondent #2...visual impairment)*

In relative expression most of them have accessible entrance gate and free space which is accessible for all target groups. However the problem is that invisible full glass door which is left without any signage, could crush by someone and harm anybody which was an incident observed in time of field observation. In addition to this non-inclusive work station which is inapplicable for person with visual impairment. Generally from other requirements of accessibility almost all of them have more accessible interior space.

4.1.6 Elevators

All the star hotels have lifts / elevators alternative to stairs or steps, however they were installed without considering the needs of person with impairments. This is proven by the assessment which discussed as follow. Even though the doors can opened widely enough for wheelchair user, none of the elevators display audible and visual information telling passengers what floor they arrive. Moreover with exception of one elevator the rest do not have control buttons have raise tactile and Braille information and also two of them have no grab bar which is used to help the person with mobility impairment and hearing impairment it also help for holding as safety in case of vibration or quake. The space inside the elevator should be exceed 150 cm to allow someone using a wheelchair to enter, turn around and access the control panel however, two of them do not met the standard. In addition to these only one elevator has video camera in it; this would help to observe what happening and to give necessary assistance for the person who needs it.

Respondent with visual impairment has complained badly about the accessibility of elevator accordingly;

“I wonder that even some government building have Braille written buttons...I have visited five of them hotel but none of them have plus audio visual system...how can I know where I reached, whether the door is open or closed...why I pay for assistance...thanks to technology....” (Respondent # 2 visual impairment)

The other respondent with mobility impairment also mentioned his occurrence in elevator as below;

“I had to use the elevator to go upstairs and the elevator started immediately as soon as I stand but there is a feeling of losing gravitational force...and I grabbed the guy next to me... I had no choice...the elevator has no handrail in it.” (Respondent # 3...crutch user)

In addition to this respondent with hand impairment has said: *“I had to wait for someone to open or to close the elevator in order to in or out... many of them assist me.” (Respondent # 1...hand impairment)*

All the evidences which are gained from the measurements and respondents, proof that almost all elevators are inaccessible. Even recently built hotels do not consider facilities which are needed in elevator to access the needs and wants of persons with disability. These requirements are the least criteria which the Ethiopian Building Directive has set standards in detail. However person with disability could not find most accessible place to enjoy and have fun without any built environment barriers.

4.1.7 Seats, Tables and Encounters

Based on the observation on bar, restaurant and meeting hall with exception one hotel the rest have wide enough aisles between fixed seating. Even if there is no designated wheelchair seat at the hotel four of the have adequate place where they can seat wherever they want. In other part with exception of one hotel reception counter all of them are above 1m plus they are closed at the bottom, these will made limited communication with a customer using wheelchair.

4.1.8 Signage and Control

In the case of emergency and control only one of them has both flashing lights and audible devices which is applicable for a person visually and hearing impaired. All controls available to the public located at reachable place with exception of one hotel. In contrast to these with exception of one hotel the rest have enough signage to guide direction these will made easy to find things, services and exits doors.

The researcher has interviewed both person with visual and hearing impairment on the problems they incurred during their stay and they have said; *“I did not know the emergency exist because...I cannot see...I know it is not their problem...but they could have prepared the way I could understand”* (Respondent # 3...visually impaired)

“It is very challenging to get information...how to find the restroom, restaurant... there should be universal sign” (Respondent # 2...hearing impairment)

Many of facilities and service are centered non-disabled consumers. This conclusion is derived from non inclusive equipments and facilities that the hotels have. The signage and controls should be accessed by people who have sensory impairment (hearing visual) and mobility. All hotels have indication written in word like bar, restaurant which is not accessible by person with hearing impairment. Plus some facilities are renamed like meeting hall by the name of their interest. This shows that lack of universally acceptable signage that could be understood by everyone.

4.1.9 Restroom

People with different impairment specifically those who were included in the research, may face many challenges in regard to restroom facilities. Based on the accessibility audit which is conducted in five star hotels have “Accessible Restroom however, the problem emanated from meeting the standards. Big hospitality industry like star hotels should have consider universal design as far as they host a customer/ a guest from all over the world. The result of the audit report is discussed as follow.

Almost all the restroom forgot people with visual and hearing impairment. These is observed by that none of have pictograms and Braille used to identify rest rooms, in addition to these the doors of the two restroom have less doorway opening from the standard. Amazingly one rest room was occupied by sanitation equipment like store. In other way only three restrooms have standardized wheelchair-accessible stall that has an area of at least 150 cm by 150 cm.

In the observation five of them have accessible grab bar nearest to the toilet seat and deep clear space in front. Faucet should be operated by closed fist for best access on these regard three restrooms have easy opening, two have medium and one has hard opening faucet. Soap, hand dryers, and other dispensers should be placed within reach ranges of 70 cm from ground however, only one hotel met the range and five of them are in between 90cm and the one is beyond. The Respondent the one who is using crutch has said regarding restroom; *“Toilets are either inaccessible or in cases if they are accessible they happen to be poorly kept plus It is challenging to move around properly because of wet slippery ceramic floor”* (Respondent # 4... crutch user)

Like other areas of the hotels restroom has the problem of standard which set by building directives. These conclusion works only for who ignores customers with some sort of impairment in the installation of equipments in the restroom. Hotels should be ready to accommodate any kind customer at any time who affords to buy the service. It should be given equal attention for safety, quality and attractiveness of materials. Which is discussed as followed.

4.1.10 Safety and Comfort

As observed from accessibility audit check list among the seven five star hotels, the finishing material that they used for floor is very slippery which made very difficult for a person using crutch and the emergency exits of few hotels are ambiguous because of inadequate signage. In terms of comfort with exception of one hotel the rest have only one accessible restroom.

4.2 Services which are Specific to the Hotel

The above mentioned contents of accessibility check list criteria are can be taken as a check list of any public building. So there are services which are given by the hotels and observations were made to identify the extent of their inclusiveness of either in the built environment or in service provision.

4.2.1 Accessible room

All the seven five star hotels have accessible room with different range inclusiveness, comfort and safety. From the entrance door only two of them have symbol of accessibility and also there is accessible camera in the door which can be accessed by wheelchair users to identify who is outside. All the rooms have none slippery floor which covered by permanent

carpet with wider class room and door which is greater than 80cm. Only three of them have shower seat with adjustable grab bar the rest are installed either with Jacuzzi or stand shower and only two of them have emergency wire are available in case any problem. Three of them have accessible towel hanger where put in lower height. There is also adjustable mustache mirror. The hand wash tab also installed at the height of 80-85cm and the bottom is opened to access a person who is using wheelchair, in these regard only two of them have closed wash tab. All the beds which are available have height of 64cm from the ground which makes very difficult for wheelchair users.

However two hotels made their own adjustment for wheelchair users and for non-disabled people who wants. The first adjustment is that using hotels' adjustable wheelchair and the second hotel made the bed accessible by removing the lower interlining. The closets which are found in the rooms are the one with shorter height which is 112cm to 136cm. Waitress of one hotel has recalled her experience of hosting a guest who is using larger wheelchair has said; *"None of the shower and restroom doors was not enough to get in and we tried alternative rooms but the door is too narrow... we have no choice we let the guest to check out."* (Respondent # 1...waitress) From the above witness the researcher has understood that inaccessibility can be observed by staff members of service provider.

The researcher has interviewed front office supervisor from one hotel and she said; *"We assist the guest with impairment by washing her body that the shower was not accessible for her and she was not happy and comfortable."* (Respondent # 1...front office supervisor) Here some unexpected situation also witnessed as if not five star hotel, which means it would have been better to have the most standardized and universally designed room which can be accessed by persons with disabilities. Furthermore wheelchair-users indicated that; *"Most showers are often too small to enable entry...plus difficulties getting into and out of the bathtub and that most bathroom items are out of their reach (e.g. the hair dryer, towel and mirror)." (Respondent # 2...wheelchair user)*

Participant who has visual impairment has complained about the equipment which is found in bathroom; *"There should be Braille indication on material that you use for hygiene purpose...there is shampoo, hair conditioner, lotion, bath foam...I cannot identify by smell."* (Respondent # 4...visually impaired) The researcher has observed the experience of one five star hotel which has used Braille indication to hygiene solutions on outer part of the material in such way can be accessed by visually impaired person.

The above statements reveal that, although there are relatively more accessible rooms that the assessment has checked which could be taken as a sample of accessible rooms; apart from that they lack many things in parallel. The problem emerged as a result of hotels considers only those who have mobility or physical impairment by neglecting sensory impairment. Here still the problems of standard also exist as built environment barrier.

4.2.2 Lobby, Bar and Restaurant

Almost all the lobbies which are found on these hotels have wide enough space with different service like accessible Auto Meted Machine (ATM), however the floors are very slippery and shiny plus have limited seat alternative. With exception of two hotels bar and restaurant the rest are accessible through either by elevator or stairs but three restaurant are in ground floor, the problem is the floor are very slippery. Based the observation all restaurant have both shorter and longer seat with comfortable table, however the counters which is found in the bar are above 130cm so it bit difficult to communicate with wheelchair user and person with shorter height.

The researcher has asked the accessibility of the places and the informant has reacted as follow, *“The floor at the lobby and to the restaurant are very slippery but the rooms and the corridors are fine and all most all the hotels do not have a menu which is prepared by Braille...but the waiters try to help when it is buffet.”* (Respondent # 5...visually impaired)

In addition to participant responses, it is observed that most of them have very slippery floor not only for a person with impairment. Slippery floor has great barrier for crutches user, wheelchair user and mobility impairment. Here the barriers are created as a result of not paying attention for safety of all customers. Plus their facilities service provider did not thought about which is *Braille Menu* and menu with *pictures of the food and beverage*. This is the problem of not paying attention to the details which create more satisfaction and access for customers with disability. The same problem also occurred in gym, spa and swimming pool which are presented as follow.

4.2.3 Gym, spa and swimming pool

According to the assessment three of them have accessible gym and spa which means accessible door with no steps and with none slippery floor additionally, three of the have accessible entrance to swimming pool and three of them do not and one hotel do not have swimming pool at all. Based on the observation many of the barriers appear in entrance,

floor, threshold and doors. However, the internal facilities also have the problem of inaccessibility which is seen in counter and chair.

4.2.4 Meeting hall

With exception of one hotel the rest have accessible meeting hall which means it can be accessed by elevator, have wide opening door and the seat can be adjusted as the preference of the guest. However the respondent who uses crutch has said; *“The meeting hall which I should attend conference was only accessed by steps in front. It was challenging going up and down...if I were wheelchair user...I would have missed the meeting”* (Respondent # 5...crutch user)

Here hotels should have full profile of their guest they hosting and also they should also provide full accessibility information for their guest before reservation is made. This kind of communication would help to eliminate the problem in alternative solutions and to adjust accordingly in accessible way.

4.2.5 Shuttle

Among the seven five star hotel only three of them have accessible shuttle service for the guest without additional payment from airport. Transport system they have, should be inclusive to be more competitive in the market. Because in hospitality industry, people usually tend to pay for more accessible, comfortable, secure and luxurious service they had.

Generally the above analysis is also evident in other researches. Similarly to previous studies which are discussed under the review part here some similar findings are discussed as follow. Bisschoff and Breedt (2012) have found key areas within the hotels that provide problems to disabled and elderly travelers. Key areas in the hotels with problems were the reception, bathrooms, bar area and swimming pool. These findings further support Poria, Reichel and Yael Brandt (2010) findings for the challenges that participants confront in hotel which derive from the physical design of the environment as well as staff behaviors.

These findings further support Kumar, Raj Kumar and Mahat (2012) on the accessibility of hotels found in Helsinki which identifies inaccessible services and physical environment. However, the findings extend this work by moving beyond hotels by including public transportation and ferry companies.

4.3 Accessibility of Hotels from the Perspective of Service Provider

For better presentation of evidence, the researcher has interviewed different department of service provider. For instance three front office supervisors, one operation manager, one sales and marketing manager, two room keeping service and one assistance food and beverage director have been involved in the interview. The general idea of all the above mentioned service provider are concluded on three main concepts which is discussed as follow.

4.3.1 Accessibility of Legal Policies, Frameworks and Guidelines

With exceptions of one hotel the rest do not have a written document which used as guideline for the inclusiveness of persons with disabilities. However all of them think they have accessible hotel in every manner. And whenever the issue of accessibility is raised they would think of more physical impairments. In addition to this with exception of one hotel of the interviewees have proven that there is no awareness creating training on disability inclusive service and there is no experience sharing of other countries and they have said; *“We just accommodate them as a normal people...but we try our best to satisfy them...may be different treatment may lead them to feel unease.”* (Respondent # 2...front office supervisor) Despite the hoteliers contemplation they are accessible for person with disability, It can be proofed from the above statement that, the absence of training on accommodation, communication, language usage and how and when to assist persons with disabilities, lack of awareness also seen in these five star hotels.

4.3.2 Accessibility of Information

The hotel staffs thought that they have very accessible information delivery system. They give a testimony word saying this is “this brand hotel, this is international hotel, this is five star hotel, “we host a guest from all over the country many of them are business travel its best place for all segment of people”. “We have our own website to deliver information for all people.” these are only applicable for non-disable customer and for those who have ability to use it, all the testimony would have worked if they have been change to practice by striving to be more inclusive in information delivery. However the accessibility of information is limited to non disabled person and on the ability to access the delivered information in different manner.

4.3.3 Accessibility of Physical Environment

All of them think they have very accessible place starting from the premise to inside. According to the interview which the researcher had with the above mentioned service provider has been expressed as follow; *“As you see there is ramp outside...we have very wide elevator... stair...disability room...designated restroom...adequate parking...it is most accessible place for everyone”* (Respondent # 1 and 3...operational manager and supervisor) Here the existence of facilities has given as evidence of accessibility; however existence cannot proof accessibility and standard. They always measure accessibility from their angle which should be from the users and from meeting the standards. In the following topic we can understand how things are inaccessible from the eyes of users.

4.4 Accessibility of the Hotels from the perspective of Persons with Disabilities.

All of the respondents that the researcher has interviewed got the hotels inaccessible. They prefer to put in relation to one another. However all of them had not the same experience of all the seven at the same time, this means if the respondents have the experience of five hotels from the study area which is seven, he/she may get relatively one accessible hotel for him/her and the rest would be leveled under inaccessible. In parallel there is respondent who have the experience of only one hotel and then if he/she found it inaccessible, then he/she would say inaccessible for the question they were asked the accessibility five star hotels they have experience. More ever the issue of accessibility goes beyond putting ramp at front door. It is being inclusive in every material you put, in every service you provide and in every environment you built. These can be seen from the respondent's response; *“It is accessing all things without any barrier or obstacle like entrances, floor, and elevator, waiters...extra further more person with visually impaired also added the following statement “No Braille, no JAWs, (a software which helps visually impaired person to read word material in computer) no audio for visually impaired person and no sign for hearing impaired person...how can it be fully accessible?”*(Crutch user and visually impaired respectively) It should consider all types of disabilities; putting ramp does not mean all people with disability are satisfied by their service.

Here we can understand that the requirements which are expected from such five stars hotels and the services which are provided by them did not much. It would have been better if the hotels think and work from services users and from international market.

4.4.1 Special Treatment which Simplify the Stay of Person with Disability

The study has interviewed eighteen people with different impairment and many of them went to the hotel with assistance, however there was additional treatment they had which is presented as follow;

“They are ready to help me...I cannot keep my balance while I walk in steps so they patronage me and the same is true when I want to use restroom” (Respondent # 1... hand impairment) “They are very nice, humble and friendly guys ... so helpful... I did not know how to use the card to open the door...I called them...and they came.” (Respondent # 2... visual impairment) “We forbid tem animal, however we allowed for a person with visual impairment ...like guiding dog” (Respondent # 2...Front office supervisor)“There were mini car...and they picked me from the main gate drove to entrance door” (Respondent # 2...crutch user)

The above statements showed the preparation and special treatments that the hotels had for persons with disability which is appreciated and acknowledged. In contrast with these, there were respondent reacted differently which is presented as below;

“I expect nothing from them...this why I went with my assistance...they are willing to help...but they did not know how to help...last time I went to one hotel and the security guy...said me “use the ramp, go the other way!” am okay with steps! Why he did not show me the door instead?” (Respondent # 2...visually impaired) “I was attending a meeting...at tea break the tables were adjusted to stand... there no seat I was so tried by standing.” (Respondent # 1...crutch user)

In contrast to the above statement these kind of experience could occur as a result of absence of training for all staff on accommodation and disability inclusive. Plus they should have been ready to give quick remedy for not only informed complain but also by searching by their selves.

4.5 Accessibility of Star Rated Hotels and Tourists Areas from the Perspective of Persons with disabilities

Almost all the respondent of the study can be said have good standard life and have the exposure of travel to tourist area including aboard. The commutative idea is presented as follow;

“We can imagine that if the five star hotels are not fully accessible... we should not expect the other to be...the worst is true for other tourist area...if these became impossible to create accessible building and service specially in recently built...it would be very unimaginable for the nature of Ethiopian tourist areas...For instance I traveled to visit Aksum and the guide forbid me not to touch the stele...am visually impaired how can other will come plus what would they say if I go to Debre Damo monastery...but if you think over it everything is possible!”

Accessibility has great impact on the experience of tour and travel of persons with disabilities. Based on the above statements there is a concept that the nature of Ethiopian tourist area would be more difficult to bring accessibility. This generalization has come from the experience of inaccessibility they had from star rated hotels and museums which are found in capital city. However there are minor accessibility works can be managed like accessible transport facilitations, and tour guide in sign language interpreters at least in Amharic and English language.

4.6 Accessibility of Ethiopia National Museum for visitor with disability

This assessment is for the accessibility of buildings and other places of public accommodation to persons with disabilities (people with mobility, visual and hearing impairments). The aim of the assessment is to assess whether the place and its interior as well as exterior facilities are accessible to visually impaired and hearing impaired persons and persons using mobility aids such as wheelchairs, crutches or white canes. For better constructions of data the researcher has interviewed museum director and senior education officer about the accessibility of national museum.

Accordingly the museum director and the education officer have revealed their concept on the accessible tourism as follow;

“As principle we know that public buildings like museum should be accessible for all segments of people. Starting from the building, infrastructure to exhibitions museum should be inclusive for all people regardless of sex, age and health status. Museums have the experience hosting different kinds of people including people with different impairment who are coming from all over the world.” (Respondent # 1...director of National Museum)

Being aware of accessible tourism would help to have better preparation in accommodating persons with disabilities. In addition it would help to make some modification where it needed. In other way they were asked about their experience of hosting person with disability and they disclose their experience as follow; *“yes of course we have the experience of hosting people with different impairment. As the education officer said even if we do not have statistical data, people like with visual impairment and mobility usually came. However recently the number is declining dramatically this is because tour guides tell them inaccessibility of the museum.”*

Having the experience of hosting a visitor with impairment also made them to realize the existing situation and the problem which occurs due to inaccessibility of the building. However the number of visitor with impairment has been declining recent, as the explanation of education officer, this is happening tour operators would tell them inaccessibility of the museum. To understand in better way the following assessment of the building explains more.

4.6.1 Main Gate

The main gate of the museum is found immediate to the main road which is connected with asphalt road. It has one entrance which used both for the people and car. The route of travel in the compound (next to the gate) is firm and slip resistant which comfortable for both wheelchair and crutch users. It seems it has no problem of inaccessibility for persons with disabilities however, there some inconsideration to the target group of this study like absence of signage at outer compound of the national museum and poor promotion at outer gate. For better demonstration the following picture would help.



Figure 4.1: main entrance of National Museum



Figure 4.2: firm and slip resistance route to museum

4.6.2 Entry

There are 15 steps at the entrance of the building with 2.45cm height and 3.60m width of stairs. The steps have proper handrails on both sides parallel line with lower 75cm higher 90cm. There is no alternative accessible entrance or ramp to the building. The front doorway is wide enough for a wheelchair if they approached by carriage or for crutches users. The rout from parking area into the entrance is close enough to walk and it is smooth, wide enough even for car if they want to drop off immediate to the entrance and also it is slip resistant. As it can be observed from the picture the entry of the museum is bit difficult for a person with disability mainly for crutch and wheelchair users. This can be proven by following statement from museum director and education officer about the accessibility of the museum as below; *“No! As we know the museum is established in 1944, it is old building so they did not consider the accessibility of all people in the construction.”* From statement we can understand that the inconsideration of the building for person with disabilities is because the awareness was not created at the time of establishment back then. This can be observed by simple observations. For better demonstration the above picture would help.



Figure 4.3: stair entrance to National Museum



Figure4.4: walking routes and the building

Correspondingly the education officer also has shared his experience of a visitor who is using wheelchair asserted that: *“One day a visitor who is using wheelchair came and we do not want to let the visitor feel as left out so we talked with my friend and we managed to carry her...but we could not pass the first eight steps. It was very disappointing moment that she could not inter and visit the museum at all.”* Respondent # 2...Education officer of National Museum) the above event could occur that, there is no alternative entrance which could be accessed by wheelchair and crutch users.

4.6.3 Interiors

Is there an information desk however, there is no written information about where places are located. The building is G+2 and the stairs are accessed by steps with no proper handrails on both sides and 20 steps each and has a height of 3.20cm and width of 120cm. unfortunately the building has no lift at all.



Figure4.3: stair which is accessed by steps



Figure4.2: information desk at national museum

From the above pictures we can see that the stair which is not accessible and hard to walk because of long steps and inaccessible encounter which blocks communication for wheelchair users.

4.6.4 Corridors and Surroundings

The corridor which is found next to steps has 140cm width and the other side has 206 free spaces along the displayed objects. There is protruding rob installed in between 30-40cm from the ground which hinders visitor not to inter which detected by a person who uses a cane. There is no adequate lighting especially in the ground. The floors throughout the building are non-slippery and covered by permanent carpet including the steps; moreover the steps have highlighting and contraction which shows the existence of steps.



Figure 4.7: corridor and displays



Figure 4.8: surrounding and none slippery floor

According to the education officer explanation despite the none slipperiness of floor which is covered by permanent carpet, it has also side effect by creating suffocation as a result of inadequate windows at ground and high number of visitor at once time.

4.6.5 Door

Visitors found only one door which used for both exit and entrance to the building which is more than 2 M widths by 2M length and two side opening. Sometimes this kind of old buildings have potential danger to visitors if something bad happens (fire and building collapse) this is because the building does not have emergency exits. Visitors are not expected both to open or to close the door as a result of it is always open and the door is capable of passing two wheelchair users at time or electronic wheelchair. Generally the door is accessible and free of barriers for the targeted group. However, it is impossible for wheelchair user and severe impairment of crutch user to reach at the door; as a result of steps which are found in front of the door unless and other wise lift by human carriage.

4.6.6 Electrical Equipments and Accessories

It is known that the building is old However, some equipments should have placed in the right place and height, in a condition they are not creating any barrier for free movement of visitor in every condition specifically persons with disability. During the inspection only Fire breaks and fire control (hydrogen) where found yet, both of them are not working. But it is placed at a height of 145cm which is suitable for both walking people and wheelchair users.

4.6.7 Public Rest Rooms

There is public restroom outside the building/museum for each sex and for both which not fully accessible and not identified by sign. There is a ramp which leads to the door have 1:26 slope (20cm height*100/76cm length) and 80 cm width with no handrail on both sides. The door to the toilet has width of 71cm which narrow for wheelchair users. It has a corridor with 121cm width which occupied by water tanker. The inner door has width of 60cm which too narrow to pass through even a person for who weights 167lbs and the lavatory has the dimension of 105cm*130cm with no free space. The toilet seat has 40cm height from the ground and has no flush and grab bar. The washbasins mounted at a height of 80cm from the ground and the mirror is placed 120cm height from the ground. The following picture helps for better visualization, and the lift side picture shows the outside look of toilet and the right side picture shows the interior look.



Figure 4.9: public restroom



Figure 4.10: inside the toilet and inaccessible stall

4.6.8 Museums and Galleries

There are guides who are in charge of explaining what exists in the museum as much as possible in visionary way for a person with visual impairment since objects in the museum are not allowed to touch in hand however there is no education officer who is trained in sign language to communicate with a person who has hearing impairment. The space in-between the displayed heritages are wide enough to maneuver a wheelchair and many visitors at once with 245cm. Descriptions and instructions of displays provided are not provided in Braille or symbol.

The distances that Paintings are displayed on the walls are with a range of 70cm to 122cm from the ground which are easy see by all people. If visitor with disability came with assistance or helpers they are expected to pay the entrance fee too.

In relation to these the researcher has questioned the comments they have been receiving about the accessibility of the museum from visitors with different impairments and they have answered by recalling their experience as follow;

“As I told you the museums is not accessible even for none disabled person let alone those who have some physical impairments...these is one of the reasons why the national museum is not member of ICOM, for instance we have visitors with visual impairment and we will try to explain the displays that we exhibit in better description but they want to touch and feel it...but it is not allowed to touch museum objects. The problem here is that the museum has no model or replica objects...they always complain about it.” (Respondent # 2...Education officer of National Museum)

Based the internet browse that the researcher tried to make to look at the building structure of few African and European countries national museum, Ethiopian has very poor in display technique and small in size of building occupancy. However, Ethiopia has very immense potential and precious heritage material to display, which could explain and show the historical, political and socio-economical background. According to the education officer the problem of inaccessibility also hinder the museum from membership of ICOM which has own impact on visitors image. Plus lack of modern technology to create models to replace the original object was not well developed, which could have been help visitors with visual impairment to touch and feel it. These why they always receive complains and few number of visitors of with impairment.

Additionally the researcher has interviewed a person with visual impairment and the response he has given has similarity with the idea which the education officer has given in above statement.

“I have visited many museums and tourist area. I really like visiting such place however, let alone the built environment the service provision is not inclusive people like me... they only think of those who have mobility impairment plus they did not allowed to touch things... I know that ... what would be the problem if touch objects which have less probability of hand touch damage like stone, or swords and the like... visitor like me is rare... and also they get shock for seeing people with visual impairment...it not only about looking when you visit a museum.” (Respondent # 4... visual impairment)

From the above response we can learn that visiting a museum is not only about looking objects, it is also hearing and understanding the background history they hold. To be more accessible museum guides are expected to demonstrate in pictograph explain the existence of the object for a person with visual impairment.

The education officer also shared his experience of visitor with mobility impairment specifically crutch users and their comment as follow; *“Am very sad for looking them having hard walk through that steep steps and they are very disappointed by the structure of the building ...We also receive comments from on the instruction which is posted beside the displays that they are not inclusive” (Respondent # 2...Education officer of National Museum)*

Here in above statement the researcher has observed that the museum is not accessible for a person with hearing impairment. The first thing is that the museum has no staff member who is trained in sign language and secondly the instruction like “do not touch”, “do not seat” and “no flash light camera” which is posted in the wall should be understandable by a person who cannot read and should incorporate symbols.

In relation to these the museum director and education officer were asked whether they get training and if they have trained person on accommodating people with disability and they answered accordingly; *“We have not taken any training in relation to accommodating person with disability so we have no trained personnel in special need education... these one of the complaints we receive from people with hearing impairment.”*

Moreover the researcher has made interview with a person with hearing impairment about the accessibility of the museum and the respondent has explained that: *“Many of as with hearing impairment have a problem of communication...I personally visited national museum...I just look at the displays and walk out”* This shows the minimal attention which is given for the need and importance of inclusive policy and practice of the museum.

For better improvement on the accessibility of the museum the researcher has raised what should have be the role of the government and their recommendation in the future and they have elaborated as follow;

“Firstly we need budget because this is additional task and needs great care. Making modification on this old museum is not easy as other building, the objects also need great care as they are national precious heritage... this is why we need trained personnel on the field secondly, the issue needs great focus from the government by providing training on accommodating visitors with disability.” (Respondent # ...Director of National Museum)

Based on the interview with both two education officer and with director, they have put direction for future solution. They believe that the museum is not accessible in terms of building structure, display techniques and facilities. And they appreciated the interview they had with the researcher in accordance with reminding the requirements which is expected to access a person with hearing impairment which they have forgot.

4.7 Built Environmental Barrier that Hinders Person with Disability From Active Participation in Five Star Hotels and in National Museum

Built environmental barrier are those barrier created by human made activity which is built for different use and have physical existence. In the case of this study the barriers were identified during systematic field observation and by the interview which is made with main actors. Major barriers are crated as a result less attention which is given for standards which is set by Ethiopian building directives to public area and the rest built environmental barriers are created as a result of lack of awareness on inclusive policy and practice and ignorance which let them inconsiderate. The study has identified the barriers according to the type and reason.

I. Problems of standards

Based on the assessment the following barriers are identified, Inaccessible routes of entrance which hinders simple and easy walking and move of crutch user and wheelchair users respectively. Slippery and steep ramps which create difficulty for entrance of wheelchair user by him/her self without assistance. Slippery floor create potential danger for walking for crutch users. Stairs with no handrail also hinders easy and safety walking of person with visual impairment and mobility impairment. Inaccessible elevators may expressed with many things like, small dimension and narrow door, absence of handrail, absence of audio visual system and Braille buttons all these matters a lot every activities of persons with disabilities. Narrow door which hinders free entrance to service and facilities for a person using wheelchair and crutch, very high thresholds also creates barrier to wheelchair user, hence the wheelchair does not have jump button. Narrow corridors also minimize to choice of wheelchair

ii. Lack of awareness on inclusive policy and practice

These barriers are identified by interview which the researcher has made with persons with who have different impairment. Which are discussed as following, glass doors which are invisible, heavy doors which are difficult to open in closed fist, very high beds, which are difficult to lay on for wheelchair user, inaccessible rooms can be expressed by its small size of the room, showering equipments and inconsiderate height of things which made the stay of the guest more difficult, inaccessible entrance swimming pool like, thresholds and steps, very far parking which time taking and uncomfortable, inadequate signage and safety measures which made difficult to find services and sometimes the hotel itself and Inaccessible computers which hinders not to use when it needed. These may not be the only barrier that hinders persons with disabilities from active participation and full enjoyment; however these are identified by this limited study. In the following topic the study to tried to look accessibility from the angle legal frameworks that our country Ethiopian binds in it.

4.8 Document Analysis: Accessibility and Legal Instruments in Ethiopia

The study has attempted to present all the documents which are relevant to the issue of accessibility of public areas. The following convention, protocol, policies, proclamation, regulations, directives, qualification criteria and rating criteria which the study have seen are the major legal framework and ground rule for the rights and full enjoyment of all people with disability specific to accessibility. The discussion which is made below is that first the above mentioned legal instruments are presented as it is without changing a word and at the end it has been analyzed by creating comparison and distinction with the result is found by field observation and responses of users.

4.8.1 United Nations Convention on the Rights of Person with Disability (UNCRPD)

By July 2008, 29 States had ratified the Convention and 18 had ratified the Optional Protocol by both developing and developed countries and *have agreed* as follows. These conventions have 50 articles in which the study focused on only to relevant articles.

Under article 1 of the convention the purpose of the present convention is defined. The purpose of the convention is to promote, protect and ensure the full and equal enjoyment of

all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.

Person with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others

Under article 3 of the general principles of the present convention is listed, accessibility is one for core issues that state parties should address.

Among the articles that convention has, the study has focused on the issue of accessibility which is mentioned **under article 9**.

Under article 9: Accessibility

1. To enable persons with disabilities to live independently and participate fully in all aspects of life, States Parties shall take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas. These measures, which shall include the identification and elimination of obstacles and barriers to accessibility, shall apply to, inter alia:

(a) Buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces;

(b) Information, communications and other services, including electronic services and emergency services.

2. States Parties shall also take appropriate measures:

(a) To develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open or provided to the public;

(b) To ensure that private entities that offer facilities and services which are open or provided to the public take into account all aspects of accessibility for persons with disabilities;

(c) To provide training for stakeholders on accessibility issues facing persons with disabilities;

- (d) To provide in buildings and other facilities open to the public signage in Braille and in easy to read and understand forms;
- (e) To provide forms of live assistance and intermediaries, including guides, readers and professional sign language interpreters, to facilitate accessibility to buildings and other facilities open to the public;
- (f) To promote other appropriate forms of assistance and support to persons with disabilities to ensure their access to information;
- (g) To promote access for persons with disabilities to new information and communications technologies and systems, including the Internet;
- (h) To promote the design, development, production and distribution of accessible information and communications technologies and systems at an early stage, so that these technologies and systems become accessible at minimum cost.

4.8.2 Draft Protocol to the African Charter on Human and Peoples' Rights of Persons with Disabilities in Africa

The conscious of the need to establish a firm legal African union framework as a basis for laws, policies, administrative actions and resources to ensure the rights of person with disabilities; and determined that the rights and dignity of persons with disabilities should be promoted, protected to enable them enjoy fully and equally all their human rights and fundamental freedoms

“Person with disabilities” includes those who have physical, mental, psycho-social, intellectual, neurological, developmental or other sensory impairments which in interaction with environmental, attitudinal or other barriers hinders their full and effective participation in society on an equal basis with others.

Under article 1 of the draft protocol has defined the purpose the protocol. The purpose of this protocol is to promote, protect and ensure the full and equal enjoyment of all human people's right by all persons with disabilities, and to ensure respect for their inherent dignity.

Under article 2 of the protocol ten general principles is defined in which the protocol is interpreted and applied in accordance with general principles among them accessibility is one of it.

Among the articles this the present protocol have the study has focused on the issue of accessibility which is mentioned **under article 13**

Article 13 Accessibility

1. Every person with a disability has the right to barrier free access to the physical, environmental, transportation, information, including communication technologies and systems, and other facilities open or provided to the public.
2. States parties shall take reasonable and progressive step measures to facilitate full enjoyment by persons with disabilities of this right, and such measures shall, among others, apply to:
 - a) Rural and urban settings and shall take account of population diversities;
 - b) Buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces;
 - c) Information, communication, sign languages and tactile interpretation services, Braille, audio and other services, including electronic services and emergency services;
 - d) Quality and affordable mobility aids, assistive devices or technologies and forms of live assistance and intermediaries; and
 - e) The modification of all inaccessible infrastructures and the universal design to all new infrastructures.

4.8.3 Federal Democratic Republic of Ethiopia (FDRE) Construction Industry Development Policy (2014)

Objective:

- 1) To make all buildings and infrastructure development activities accessible for all citizens especially for persons with disability in our country.
- 2) To make sure their being equal beneficiaries and participation and become and build competitive construction industry in international level.

Policy:

- a) Will made buildings, infrastructure designs and constructions activities inclusive of person with disability
- b) Will try public services and buildings those are giving services currently should consider the accessibility and comfort of person with disability in the process of renewal or reconstruction

Implementation strategy:

- 1. Create a design system in which all buildings and construction activities which makes them accessible and inclusive for person with disabilities.
- 2. Implementing standard design for public services institutions and infrastructure buildings and
- 3. Implementing accessible deign and universal design for person with disability.

4.8.4 Ethiopian Building Proclamation- 624/2009

36. Facilities for Physically Impaired Persons

1/Any public building shall have a means of access suitable for use by physically impaired persons, including those who are obliged to use wheelchairs and those who are able to walk but unable to negotiate steps.

2/Where toilet facilities are required in any building, as adequate number of such facilities shall be made suitable for use by physically impaired persons and shall be accessible to them.

4.8.5 Building Regulation-No243/2011- Article 33 and 34

Definition: “public building” means any building such as a theatre hall, public library, conference hall, a recreational place, academic institution, a medical center, or a market or any other similar building serving the public

Article 33 Lifts

Lifts shall:

- 1/ have alternative power source in addition to the main power supply to provide service without interruption;
- 2/ have batteries which enable users to reach the next floor and to open their doors in cases of unexpected power interruptions;

- 3/ be suitable for all users including people with disabilities;
- 4/ have continuous professional follow up, timely inspection and maintenance by a certified entity so as to prevent their interruption as a result of defects and ensure the reliability of its service

Article 34 Facilities for Disabled Persons

- 1/Any public building or a part there shall not prevent or hinder the movement of disabled persons.
- 2/ Manufacturing buildings shall fulfill suitable dressing rooms, bathrooms and other facilities for persons with disability.
- 3/ Suitability for persons with disability shall be one of the criteria to be considered in giving an occupancy permit for partially completed public buildings.
- 4/In any public buildings, international standard signs shall be posted at junctions to keep persons with disability from any obstacles and to indicate parking lots allocated for them.

4.8.6 Building Directive- No 5/2003- Article 33

Preparation for persons with disability

Any building which is under group “C” which gives public service should have fulfill the least criteria and accessible way for people with disability which is listed below.

33.1. General

33.1.1 All public building should be constructed in way to be accessed or it should be fulfilled situations that make accessible for persons with disability

33.1.2 The premise of the building should be constructed barrier free for those who uses wheelchair, visually impaired and for partial mobility impairment

33.1.3 Meeting hall which is found in any public building should be accessible and should be have suitable seat for wheelchair and crutch users according to the standard.

33.1.4 Factories, educational institutions, religious place, and market place should have accessible dressing room and restroom for persons with disability

33.2 steps

33.2.1 Stairs should have handrail in both sides

33.2.2 Railings should be strong and have height of the lower one 70cm and the upper one 90 cm height from the ground should start 30 cm before the steps.

33.2.3 If the width of steps is greater than 3m it should have handrail in the middle.

33.2.4 The footstep width should not be great than 30cm and height of 15cm.

33.2.5 The floor of footstep be should made of non slippery material.

33.3 Ramp

33.3.1 Any ramp should not exceed 10% and should be attached to the main floor or lobby.

33.3.2 The pass way of the ramp should be firm and slip- resistant and should be free of things could cover it.

33.3.3 The ramp should be sealed in both sides in material which is not less than 45cm.

33.3.4 Railings should be strong and have height of the lower one 70cm and the upper one 90 cm high from the ground should start 30 cm before the steps.

33.3.5 If the width of the ramp is greater than 3m it should have handrail in the middle.

33.3.6 There should be accessible turning point or rest point with width of 150 cm by 150cm circle or a T-shaped space for a person using a wheelchair to reverse direction

33.4 Elevator/ lift

33.4.1 Under the condition were the statement which is mentioned under article 33 and sub article 33.1.1 kept, under the condition were the services are not accessible and those building which has more than four floor elevator should be installed.

33.4.2 Any elevator door should not be less than 90cm.

33.4.3 Any elevator should be installed starting from ground floor and should reach all floors.

33.4.4 The elevator should have handrail in three sides and have height of 80-85cm from the ground.

33.4.5 The control button of the elevator should be at height of 90cm from the ground and 40cm away from the edge of the wall.

33.4.6 The elevator should have accessible sound system telling door opening and closing and the height of the floor they reached plus the outside and inside control should have Braille writing for person with visual impairment and for others.

33.4.7 The inner space, length/deepness should not be less than 130cm and should have 1m clear width.

33.5 Entrance

33.5.1 Any public building if the doorsill has difference in floor height, there should be ramp behind.

33.5.2 The corridor which is found at the entrance of building should not be less than 150cm.

33.5.3 The floor of the building should not be made of slippery material or should be covered by carpet

33.6 Door

33.6.1 Doors which are found in any public building should not be less than 85cm.

33.7 Restroom

33.7.1 For one public building at least there should be one restroom with one wash tab around the entrance.

33.7.2 The restroom stall should have an area of at least 150 cm by 150 cm, clear of the door swing

33.7.3 The door of the rest room should not be less than 90cm and should be opened to outside.

33.7.4 Inside the toilet the wall should have grab bar in three sides and should be away from the wall 8-10cm.

33.7.5 The toilet seat should have 57-60cm height from the ground.

33.7.6 Hand wash, hand dryer and soft and soap holder should be placed at the height of 50-70cm from the ground.

33.8 Parking

33.8.1 Public buildings should have accessible parking area in nearest place.

33.8.2 For wheelchair users the parking should have designated symbol of accessibility.

4.8.7 Addis Ababa City Government Culture and Tourism Bureau: Professional Efficiency of Service Provider on Culture and Tourism Regulation and Criteria. Directive num 3/2006 E.C

Task and responsibility of star hotel;

Room Service, Food, Beverage, Cinema, Meeting Hall, Cocktail, Shopping, Beauty Salon, Bank ,Foreign Currency Exchange, Tour and Travel Agent, Entertainment and Sport Like (Swimming Pool, Gym, Steam Massage, Sauna Bath, Ground Tennis) Laundry and Sewing (Tailor), Ironing, Parking Garage, Supermarket, Café And Providing pastry Service.

Required criteria

15.1.1 External appearance of the hotel

- A) For easy access the premise of the hotel, there should be sign which shows direction
- E) If the building is above four floors there should be at least one elevator
- F) The corridor which have 150 cm width and sound proof
- G) The exterior appearance of the hotel be comfortable for those who have special need

15.2.4 Shower and restroom

- b) Comfortable shower and toilet for special need people
- g) Non slippery carpet floor and shower

15.2.5 Restaurant

- H) Comfortable for special need people

15.2.12 Public wash room

- b) The restroom should be comfortable for person with special need.

4.8.8 Ministry of Culture and Tourism: Hotels Rating Requirements and Classification

This Ethiopian standard has been prepared under the direction of the technical Committee Hotel and Tourism (TC 10) and published by the Ethiopian Standard Agency (ESA).

“Acknowledgment has been made to the said ministry for the effort made through preparing the draft document and the involvement in the standardization process.”

1) scope

This Ethiopia standard specifies the method of rating for the classification/ grading of hotels including evaluation criteria for their assessment.

3, Definition: - Hotel

Is a commercial establishment which provides rooms in which people can stay, especially to travelers and sometimes to permanent residents, and which provides food, logging and other services for paying guests, including the general public.

The document has two sections for rating and classification these;

Section 1; Basic Standards Accommodation

- ✓ Exterior
- ✓ Bedrooms
- ✓ Bathrooms
- ✓ Public areas

Section 2; Category Specific Standards Hotels

- ✓ Bar and dining facilities
- ✓ Kitchen
- ✓ Housekeeping and maintenance
- ✓ General services and service
- ✓ Additional facilities
- ✓ Sustainability
- ✓ Safety and security
- ✓ Staff facilities and training

4.8.9 The Issue of Accessibility and Universal Design from International Guests of the Hotel's

The researcher has tried to assess the comments which are given in website called tripadvisor.com. In this web customers in tourism facilities like hotels, airlines, destination are rated based on the comments which are given by it users. Here the study encompasses few comments which is related to accessibility and universal design given for two five star hotels by guests without disabilities. Here what the researcher is trying show is accessible and universally designed service and product would help not only person with disability but also person without disability, in similar way when services and products become it would create discomfort and inaccessibility. For the sake of confidentiality name of the hotels are conceal however, for the sake of authenticity name of users and date are revealed. As part of limitation the researcher has found few comments which related with accessibility which is presented as follow without any paraphrasing.

“A good stay, but definitely not five stars”

“There was no usable internet in my hotel room – it ended at the door to the room. It took seven days of daily complaining before the IT person finally came to inspect the room and ultimately provided a router. In the interim, I often had to take a chair out in to the corridor to get a connection, the IT person offered to move the desk to where the cable was but that would have blocked one side of the bed and access to the balcony.”

“The room while quite large, was not well designed. In addition to the misplaced internet cable, there was no plug near the counter to plug in the kettle, and the wall bracket for the shower was at waist height, requiring you to hold the shower head when having a shower. The room was also quite dark, with only a few pot lights around the outside of the ceiling. There was no pot light over the very small desk. I had to use one of the small bedside table lamps as a desk lamp.” “Robert M February 27, 2018”

Disappointing room

“This modern hotel particularly caters for those with business at the United Nations building next door. Our room was particularly disappointing. It was very small. There was not seating for two people, nor the space for two chairs. The small balcony had a large plant on it but, again, no seating so was not

usable. The bathroom was also small. There was plenty of hot water but the towels left were variable.” “Jan S February 27, 2018”

From the above statement the problem of standard and universal design is also more evident on international guests. Which proof that accessibility should be understood more in common sense and in world wide. And I also shown as star rating should not be considered and be competitive in local concept and with local hotels respectively.

4.9 Document Analysis

Among the above mentioned all legal instruments UNCRPD's conventions are the considering and detailed statements which is incorporated that many countries have agreed upon the rights of person with disability, specifically article 9 which discuss about the accessibility have been addressed well. For better implementation of this convention the state parties should consider UN convention when they make policies, proclamations, rule and regulation and expected to abolish the old none inclusive policies.

In similar with this the protocol is all most replica of UN convention, however some changes have been made like condensing and addition of new insights. For instance the application measures have been condensed to more general and clear understanding by considering countries context plus application measurement like modification of built/old infrastructure and the universal design to all new infrastructures is newly added measurement to make them accessible for persons with disability.

In parallel with this construction industry development policy of Ethiopia also fully considered as State parties shall do for its implementation. As it is presented in the above construction policy of Ethiopia have made inclusive as if it would concise both with the convention and African protocol.

In contrast with above legal instrument that the research has discussed, Ethiopian Building Proclamation- 624/2009, is the one which is different in the following conditions;

- The definition of person with disability; the proclamation recognizes mare physical disability like those who uses wheelchair and crutches or inability to work in which other type of disabilities which is mentioned under the convention were excluded. This means the building proclamation does not cover other type of disabilities,

- And have focused on only in two areas; which are means of access and toilet facilities.

In disparity with above legal instrument that the research has discussed Building Regulation- No243/2011- Article 33 and 34 have addressed the issue of accessibility well, and it is more inclusive in the following manner;

- The scope of accessibility has widened from physical impairment to sensory impaired persons.
- Here in the regulation new areas of accessibility need has been given focus like, parking, work place changing room and toilet and importantly accessibility and suitability has been considered in giving an occupancy permit for partially completed public buildings.

Building Directive- No 5/2003- Article 33 is final, most detail and more inclusive legal instrument with list of criteria that the researcher has found in the issue of accessibility. Here in this building directives place like premises/general, lift/elevator, ramps, doors, steps, entrances, restrooms and parking areas have listed. With slight difference it has also the same list of criteria with the check list that the study has adapted. For instance some are mentioned as follow;

Building directives

- Toilet seat should have 57-60cm
- The control button of elevator height of 90cm
- The footstep width not great than 30cm and height of 15cm.

Accessibility check list

- ✓ The toilet seat 43cm to 48 cm high from the ground
- ✓ The control buttons on elevator height 1.20 m from the ground
- ✓ The check list does not have requirement on footstep

More importantly the study has tried to see the Addis Ababa City Government Culture and Tourism Bureau: professional efficiency of service provider on culture and tourism regulation and criteria. From above document presentation it can be understood that the researcher has preferred to focus on the criteria that is related to research case which is accessibility of five star hotels for persons with disabilities. Unfortunately the required criteria are not clear, detailed and ambiguous. For instance the following issues are seen;

Based the task and responsibility of star it is true that even our five star hotels lack many things. Among the all thing this criteria and inspection contradict with Building Directive- No 5/2003- Article 33. For instance under sub article 33.4.1 says, under the condition were the statement which is mentioned on article 33 and sub article 33.1.1 kept, were the condition of services are not accessible and those building which has more than four floor elevator should be installed. In this regard if the building is less than four floor and if the services are not accessible the building directive has put requirement. However the criteria and inspection has left the requirement under 15.1.1 External appearance of the hotel and mentioned on letter “E” by saying, if the building is above four floors there should be at least one elevator.

Moreover the document did not define a person who has special need. For instances, when it say “The exterior appearance of the hotel be comfortable for those who have special need” which is under letter G, it needs some distinction unless and otherwise it would be difficult to measure and it would be come self centered. In addition to this the requirements which is listed under, 15.1.2 internal arrangement of the hotel; like Lobby areas, Front office or reception, Guest rooms, Bar and functional hall for these and other none of the requirements are inclusive or not centered the comfort and accessibility of persons with disability.

Amazingly the study has tried to analyze and scrutinize the document that Ethiopian Standard Agency (ESA) used for rating star hotel, however the study has found none, plus no single word of inclusiveness, accessibility, disability and universal design.

CHAPTER FIVE

CONCLUSION AND RECOMMENDATIONS

5.1 Conclusion

In this section the researcher tried to put the overall generalizing outcome of the study, which encompasses; the intent of the study, the scope and how the researcher have meet the objectives with respective methodology and the results that the researcher have obtained are not isolated from previous scientific knowledge so the researcher has put personal interpretation in context of the existing body of scientific knowledge. Thus study has focused on the assessment of accessibility of five star hotels and National museum of Ethiopia for persons with disabilities. The study has proposed to meet three core objectives and the first one was measuring the accessibility of five star hotels and national museum by adapted and conceptualized accessibility check list. Accordingly the accessibility of seven five star hotels for person with disability has found proportionally which is 51.1% of requirement has been found “**Accessible**”, 27.9% of the requirements has been found “**Inaccessible**” and 15.6% of the requirements are fulfilled “**In –partial**” condition, the rest requirements are found not “**Applicable**”. Generally here are the overall findings which were found by both systematic observation and interview with persons with disabilities.

Amazingly among the seven five star hotels none of them are fully accessible and there accessibility is expressed in relation with one others. According to the standard all the seven five star should have found accessible. The range of accessibility also differs based the focus they have given. Based on the observations there is relatively very considerate inclusive five star hotels and unexpected negligence also observed. There are common problems of none inclusiveness, inconsideration of type of disability, less recognition for obligatory rules and regulation of accessibility have identified by this study. In relation to these, the research has found the problem of awareness on language usage and training on how to communicate with persons with disability like disabled people, handicapped and the distinction which is used as “us” and “them”, lack of awareness on market potentials of persons with disabilities in accessible tourism activities of tour and travel. In this regard many tourism activities are linked with accessibility requirements; many travelers who came for different purpose (visiting, conference and business) require more accessible destinations, hotels and city for all segments of people. Hotels are not considering the income that they are losing because; they are not fully accessible for person with disabilities.

The case of the museum under the condition where the problem which is seen in hotel industry kept the same, like problems of inaccessibility in premises, entrance, floors, door, emergency and security system toilet, elevators, stairs, information desk and staff awareness, there are problems specific to the national museum of Ethiopia. In addition to this there were specific problem which is related to the museum, which is generalized as follow; Even if they are aware of that the museum is inaccessible for persons with disabilities, they have limited chance to made modification to built environment as a result of two reasons.

1. The building itself is old enough and considered as heritage by itself, modification became difficult in such building for instance building ramp could be one of the modifications needed, however it changes the appearance and history of the building.
2. The objects which are displayed are not easy to move and apply the modification. So if any recommendations are given it would be for the new building which is going to be built in near future in front of the present location of national museum.

To meet the second objective of the study which is identifying built environmental barriers which hinders person with disabilities from active participation of study area the research had interviewed persons with disabilities who have the exposure to the five star hotels and to the national museum. And many of the barriers which were mentioned emanated from the following reasons;

1. Less awareness on universal design.
2. Lack of inclusive policy in all service delivery.
3. Inconsideration of the kind of disabilities exists.

Finally the study have seen accessibility from different perspectives (policy, legal frame work, proclamations, conventions, standard and quality) many documents related to accessibility, disability and hospitality industry. Based on the analysis the study has found lack consistency in working standards and check lists which is used to rate and classify hotels by government bodies. Plus there is no specific measurement to determine the extent of accessibility set by both Ministry of Culture and Tourism and City Government. In other way there are few comments which are found from tripadvisor.com in relation to room accessibility and universal design. The comments also justify the findings that researcher have identified in different method of data collection.

5.2 Recommendation

Here the following recommendation is needed to give the best suggestion as if the study is new theme to our context. For better understanding the researcher has chosen to put according to the focus of the study.

1. Managerial recommendations for hotels;

To ensure the physical accessibility of the hotels for persons with disabilities the following recommendations are suggested.

- ✓ Modification to built environment, like standardized ramps, easy modification to slippery floors like skinny carpet, installing grab bar at bathroom, handrail at elevators and on the stairs, turning on the audio/visual system of the elevator if it has. Room adjustment for free movement of wheelchair user. Free access of person with disability if the check in (walk through security machine) is inaccessible. As people with disabilities are perceived to be a potential source of revenue, hotel managers should attempt to improve their services to people with disabilities, particularly since those attempts often require minor efforts or costs.
- ✓ Information accessibility; provision adaptive material (Braille, Audio, Sign language) for the provision of information in accessible formats hotels should provide Braille menu, menu with food variety photography, bathroom equipments, sign language interpreter and universally acceptable signs/ symbol can enhance the equal enjoyment of person with disability.
- ✓ Accessibility of Policies, Frameworks and Guidelines; in these regard hotel managers should think of provision of training on disability awareness and accommodation. And well aware of national policies, proclamations, directives and universal design in order to be competitive in the world market.

2. Policy amendment recommendation for government bodies

To ensure the physical and information accessibility of the hotels and museums plus tourist areas in general for person with disabilities, the following are recommendations are suggested for concerned body.

- Ministry of culture and tourism and Ethiopian Standards Agency

As observed from document analysis, the document which used by the MoCT and ESA to classify and rate the hotels should incorporate accessibility and universal design as one of compulsory criteria in star rating requirements and should be prepared with direct consultation of the target group in the preparation of the document.

- Addis Ababa City Government Culture and Tourism Bureau.

Based on the document analysis findings, the directives which are used to inspection of hotels service delivery have many defaults and unclear requirements. For this matter the document should define disability according to universally and continental conventions (UNCRPD and Protocol of African) and specific accessibility requirement should be incorporated. The inspection document should incorporate the accessibility of all services which the hotels deliver to make sure equal and active participation (bar, restaurant, lobby, swimming pool, parking areas, reception counters, room equipment like closet, bed, bathroom accessibility like the width of door, installation of hand basin, faucet, shower seat with firm and adjustable grab bar) without any barriers. For a better organization of inspection document the bureau should have to look accessibility requirements from persons with disabilities. And more importantly the words which are used in document are difficult to measure. For instance it says “suitable bathroom for those who have special need” in this statement it is hard to answer the following questions, 1, how suitable? 2, from who is this suitability are going to be measured? However accessibility can be measured from the perspective of visual, hearing, mobility impairment and from meeting the universal designs.

- Addis Ababa City Government Building Permits and Control Authority

Collaborative work with other stakeholders to ensure the accessibility of the buildings for person with disability. This would be manifested by having one condensed banding rule which incorporates national and international laws, regulation, directives proclamations and conventions and protocol respectively.

The accessibility of museums matters more than any of tourist attraction areas. The reason is that museums have thousands of visitor from all over the world, this follow of visitor have many segments from this people with impairment are one of the segments.

The following recommendations are given based on the accessibility audit and responses from key informant

- It would be better if museum buildings have horizontal landscape rather than vertical floors, yet if it is G⁺ building it should have an elevator.
- Ramps, floors, stairs, entry doors, routes of entrances, restrooms, and displays should be built according to the building directives.
- Preparing model objects that could replace the original material in order to satisfy the requirement of visitors with visual impairment.
- Training on sign language both in Amharic and English.
- Training for staff members on disability awareness and accommodations.

- Free entrance fee for a person who came as assistance.
- Experience sharing with other national museums to ensure accessibility.
- All the activities need adequate budget as if they are additional tasks for the museum.
- Consulting concerned bodies like, disability associations and architects.

5.3 Future Research Implication

These kinds of exploratory of studies are very important in letting services provider fill their gaps in which enable them competitive in the sector. Here is future research implication which is identified during data collection of this present research.

- Identifying Factors / barriers that affect tourists with disability from having tour and travel experience.

References

- Abebe Yeholawork, (2012). The Concept of Disability and Special Needs of Persons with Disabilities: presentation on the concept of impairment and disability.
- Addis Ababa City Government Culture and Tourism, (2016). *A Guide to Tourist Attraction in Addis Ababa and Its Environs*.
- Addis Ababa City Government Culture and Tourism Bureau (2014). Professional Efficiency of Service Provider on Culture: and Tourism Regulation and Criteria. Directive number 3/2006 E.C
- African Disability Alliance (2018). Draft Protocol to the African Charter on Human and Peoples' Rights: on the Rights of Persons with Disabilities in Africa.
- Albert Postma, (2015). Book review, Journal of Tourism Futures, Vol. 1 Issue: 3, pp.285-288, <https://doi.org/10.1108/JTF-07-2015-0042>
- Anastasiou, D., & James M. (2013). The Social Model of Disability: Dichotomy Between Impairment And Disability. Southern Illinois University, 625 Wham Drive, Carbondale, Il 62901, USA.
- Becky, N.M. (2016). Barriers to People with Disabilities in the Tourism and Hospitality Industry: A Case Study of Buea in the South West Region of Cameroon (Master Thesis, Eastern Mediterranean University, Gazima usa, North Cyprus).
- Bisschoff, C. A & Breedt, T. F. (2012). The Need for Disabled Friendly Accommodation in South Africa. African Journal of Business Management, Vol. 6(41), pp. 10534-10541. DOI: 10.5897/AJBM09.337
- Blichfeldt, B.S. & Nicolaisen, J. (2011). Disabled Travel: not Easy, but Doable: Current Issues in Tourism. 14:1, 79-102, DOI: 10.1080/13683500903370159
- Chacko, A. (2015). Disability: A Brief Conceptual Overview, Zamorin's Guruvayurappan College, and Online at <https://mpa.ub.uni-muenchen.de/75062/>
- Chandra, S.D. & Kumar, R.R. (2015). Tourism Accessibility for Disabled Travelers: An Optimistic Concept on Tourism Industry in Bangladesh. International Journal of Advancements in Research & Technology, Vol. 4, Issue 10, ISSN 2278-7763
- Darcy, & Daruwalla, (1999). The Trouble with Travel: People with Disabilities and Tourism. Social Alternatives, 18(1):41.

- Darcy, S. & Dickson, T. (2009). A Whole-of-Life Approach to Tourism: The Case for Accessible Tourism Experiences. *Journal of Hospitality and Tourism Management*, (University of Southern Denmark).16(1), 32-44.
- Darcy, S. (2003). *Disabling Journeys: The Tourism Patterns of People with Impairments in Australia*, Working Paper in Braithwaite, R.W. *Science direct*.
- Darcy, S. (2010). "Leisure constraints theory & disability travel", Blog post, available at: <http://>(Accessed 12/ Dec 2017).
- Darcy, S. (2009). *Inherent complexity: Disability, Accessible Tourism and Accommodation Information Preferences*, Faculty of Business, University of Technology, Sydney, School of Leisure Sport and Tourism.
- Dohrmann Consulting, (2014). htm what is Ergonomics? <http://www.ergonomics.com.au/> (Retrieved 1/ June, 2018)
- Edusei, A.K., Mensah, S.A, Badu, E.,&Peprah, M.O, (2015). Accessibility and Participation of Persons with Disabilities in Tourism: Perspective of Tourism Workers in the Ashanti region of Ghana. *Kwame Nkrumah University of Science and Technology, Ghana* Vol. 26, No.3, 2015; doi 10.5463/DCID.v26i3.431
- Edward Steinfeld (2009), *The Concept of Universal Design*, Professor of Architecture Director, Center for Inclusive Design & Environmental Access State University of New York at Buffalo
- Ekanayake, & Aubrey E. L. (2012). Tourism Development and Economic Growth In Developing Countries. Bethune-Cookman University *the International Journal of Business and Finance Research* Vol. 6 N0.1
- ENAT - European Network for Accessible Tourism (2008)Archived: *from the original on 20 December 2008*. Retrieved 2017-7-04
- Ethiopian Information and Communication Technology Development Agency (EICTDA), (2007). *ICT Accessibility Requirement Study for Person with Disabilities in Ethiopia*.
- European Commission (2015). *Final Report: Mapping and Performance Check of the Supply of Accessible Tourism Services*. Accessed at 9, 12, 2017. Available at: <http://www.accessible>
- European Network for Accessible Tourism, (2007). *Services and Facilities for Accessible Tourism in Europe*.
- European Union Framework (2008). *Rights of Tourists with Disabilities in Europe*.

Federal Negarit Gazeta of the Federal Democratic Republic of Ethiopia,(15th Year No. 31 Addis Ababa 6th May, 2009). Ethiopian Building Proclamation No. 624/2009.....Page 4673 Corrigendum No. 4/2009 Page 4700

Federal Negarit Gazeta of the Federal Democratic Republic of Ethiopia,(16th Year No. 32 Addis Ababa 11th June, 2010). Proclamation No. 676/2010 Convention on the Rights of Persons with Disability Ratification ProclamationPage 5301

Federal Negarit Gazeta of the Federal Democratic Republic of Ethiopia, (17th Year No. 71, Addis Ababa 24th May 2011). Regulation No 243. /2011 Council of Ministers Building Regulation ...Page 5891

Freeman, I., & Selmi, N. (2010). French Versus Canadian Tourism: Response To The Disabled *Journal Of Travel Research*, Vol. 49, No. 4. Pp. 471-485. DOI: [10.1177/0047287509349268](https://doi.org/10.1177/0047287509349268)

Gamze Özogul, Günseli Güçlütürk Baran, (2016). "Accessible Tourism: the Golden key in the Future for the Specialized Travel Agencies", *Journal of Tourism Futures*, Vol. 2 Issue: 1, pp.79-87, <https://doi.org/10.1108/JTF-03-2015-0005>

Graduate Studies and Research Office, (2016). "Introduction to Research Methods: Preparatory module for Addis Ababa University graduate programs", Addis Ababa University

Gronvik, L. (2007). *Definitions of Disability in Social Sciences; Methodological Perspectives*, (doctoral Dissertation, Uppsala University Sweden)

Henok Tesfaye, (2014). "Transport Accessibility for People with Physical Impairment in Addis Ababa" (Master Thesis, Addis Ababa University Graduate School of Social Work)

International Council of Museums (ICOM). 'ICOM Code of Ethics for Museums.'

Israeli, (2002). *A Israeli: A Preliminary Investigation of the Importance of site Accessibility Factors for Disabled Tourists*. *Journal of Travel Research*, vol. 41 (1) (2002), p. 101

John, W., Creswell, (2008). *Research Design: Qualitative, Quantitative and Mixed Methods Approaches/- 2nd ed.* Sage Publications, Inc.

Jooyeon, J., Yun, J., Agiovlasis, S., (2017). *Impact of Enjoyment on Physical Activity and Health: among Children with Disabilities in Schools*.

- Justus, I.M., (2001). *Qualitative Research Process: Social Science Research Methodology Series* Module 2, Organization for Social Sciences Research in Eastern and Southern Africa (OSSREA).
- Kaganek, K., Ambro y, T., Mucha, D., Jurczak, A., Bornikowska, Ostrowski, A., Renatajaniszewska, & Teresa Mucha, T.(2017). “Barriers to Participation in Tourism in the Disabled” *Pol. J. Sport Tourism*, 24, 121-129 DOI: 10.1515/pjst-2017-0013 121
- Mackenzie, M. & Chan, B. (2009). *Tourism and Hospitality Studies: Introduction to Hospitality*.
- Merten, D.M. (1998). *Mixed Methods and the Politics of Human Research: the Transformative: Emanicipatory Perspective*. In Atashakkori & C.Teddlie (Eda.), *Handbook of Mixed Methods in Social and Behavioral Research (pp.135-164)*.Thousands Oaks,CA: sage
- Miller, G. and Kirk, E. (2002). “The Disability Discrimination Act: time for a stick?” *Journal of Sustainable Tourism*, Vol. 10 No. 1, pp. 82-8
- Ministry of Culture and Tourism (2014). *Hotels Rating Requirements and Classification: Ethiopian Standard*, Published by Ethiopian Standards Agency.
- Ministry of Urban Development and Construction (Building Directive- No 5/2003)
- Nicolle, C. Peters, B. (1999). *Elderly and Disabled Travelers: Intelligent Transport Systems Designed for the Third Millennium: Transportation Human Factors*. Vol. 1, pp. 121-34
- Robin Christopherson, (2016). “How Accessible Smart Cities Will Help Disabled People”/Ability Net
- Tirussaw, T. (1998). *Persons with Disabilities of High Achievement Profile in Ethiopia*, Radd Barner.
- United Nations Convention on the Rights of Person with Disabilities (UNCRPD) (2006). <http://www.un.org/esa/socdev/enable/rights/convtexte.htm.6>
- United Nation Human Rights (2008). *Convention on the Rights of Persons with Disabilities Advocacy Toolkit, Professional Training Series* No. 15, New York and Geneva.
- Wa’el International Business and Development Consultant (2000). *Country Profile Study on Persons with Disabilities, Ethiopia*
- World Health Organization, WHO (2011). *World Report on Disability*.
- World Travel & Tourism Council (2017), *Travel and Tourism Global Economic Impact & Issues*.

Yau, M.K, McKercher, B, & Packer, T.L. (2004). Travelling with a Disability: More than an Access Issue. *Annals of Tourism Research*, 31(4), 946–960

Zorková, D. (2016). The Issue of Accessibility from the Point of View of Tourism Service Providers. Vol. 19, 53–61 Doi. 10.7327/cerei.2016.06.02

Appendices

Appendix-1: Accessibility Audit Checklist

Date of Audit: April, 2018

Accessibility Assessment	Yes	In Part	No	NA	Notes/Observations
5 Inclusiveness					
Can all public spaces be used by everyone?					
Policies and Practices					
Is institution governing policies disability inclusive?					
Are staff members trained in disability and/or accessibility issues?					
Are staff members trained to provide assistance and services in a non-discriminatory manner to persons with disabilities?					
Do staff members know how to provide information in alternative formats?					
Other?					
6 ADA Accessibility					
Accessing the Premises					
Is the distance to the institution/company 500 m (at most) from the main road?					
Is the route of travel stable, firm and slip-resistant?					

Is the route free of hazardous barriers: tree roots, open drains, ditches, garbage, equipment, outward opening windows and doors or overhanging materials?					
Is the route at least 90 cm wide?					
In case of gradient change, are the slopes of ramps no greater than 1:10					
Entrance (Ramp and Parking)					
If there are stairs at the main entrance, is there also a ramp or lift?					
Are the ramps 90cm wide and have 150 cm at the bottom/top of the ramp?					
Is there a continuous railing on both sides of the ramp?					
Are railings sturdy with the lower one being 70cm and the upper one 90 cm high from the ground?					
Are there adequate numbers of accessible parking spaces available? (For 1-25 total spaces, 1 accessible space)					
Are they 244 cm wide per car with additional 150 cm access aisle?					
Are the accessible spaces closest to the accessible entrance?					
Are accessible spaces marked with the International Symbol of Accessibility?					
Is there an enforcement procedure to ensure that accessible parking is used only by those who need it?					

If there are stairs inside a building, is there also a ramp or lift?					
Do stairs have continuous rails on both sides?					
Interior Spaces					
Are aisles and pathways in each space at least 90 cm wide?					
Are hallways at least 112 cm wide?					
Do doors into public spaces have at least a 81 cm clear opening?					
Is there a 150 cm circle or a T-shaped space for a person using a wheelchair to reverse direction?					
On the pull side of interior doors, next to the handle, is there at least 46 cm of clear wall space?					
Can doors be opened without too much force (2.2 kg maximum)					
Are door handles 122 cm high or less and operable with a closed fist?					
Are all threshold edges .6 cm high or less, or if beveled edge, no more than 2 cm high?					
Are there work/study stations of various heights (70 cm high average)					
Does the arrangement of the class/study room optimize visibility and group work?					
Do the library and/or IT rooms have computers with screen-reading/magnification/JAWS					

software?					
Elevators					
Is an elevator provided an alternative to the stairs/steps inside the building?					
Does the elevator door open widely enough for wheelchair user access? (80cm wide)					
Does the elevator display audible and visible information telling passengers what floor they arrive at?					
Do the control buttons have raised tactile and Braille information and are they at a height and in a position that can be reached by all users? (1.20 m from the ground)					
Are there grab bars provided in the elevator?					
Is the space inside the elevator wide enough (at least 2 m) to allow someone using a wheelchair to enter, turn around and access the control panel?					
Seats, Tables and Counters					
Are the aisles between fixed seating (other than assembly area seating) at least 92 cm wide?					
Are the spaces for wheelchair seating distributed throughout?					
Are the tops of tables or counters between 71 and 86 cm high?					
Signage and Controls					

If emergency systems are provided, do they have both flashing lights and audible signals?					
Is there enough signage to guide direction?					
Are all controls available to the public located at a height of between 23 - 137 cm for a side reach, and between 38 and 122 cm for a front reach?					
Are all controls operable with a closed fist?					
Rest rooms					
Is there at least one rest room (either one for each sex or unisex) fully accessible?					
Are pictograms/ symbols, and Braille used to identify rest rooms?					
Is the doorway at least 81 cm clear?					
Are doors equipped with accessible handles, 122 cm high or less?					
Is there a wheelchair-accessible stall that has an area of at least 150 cm by 150 cm, clear of the door swing, or is there a stall that is less accessible but that provides greater access than a typical stall?					
In the accessible stall, are there grab bars behind and on the side wall nearest to the toilet seat?					
Is the toilet seat 43 to 48 cm high?					
Does one lavatory have a 76 cm wide by 122 cm deep clear space in front?					

Can faucet be operated with one closed fist?					
Are soap, hand dryers, and other dispensers within reach ranges (70 cm from ground)?					
Other?					
7 Choice					
Is there more than one option for entering/exiting public spaces and rooms?					
Can public rooms and spaces be used for different sized groups of people?					
Other?					
8 Clarity					
Are routes/entrances to all public spaces easy to find?					
Is there signage related to public spaces usable by people with low/ no vision (Is Braille information available)?					
Is the lighting well designed to facilitate the activities and tasks that take place in each public space?					
Are assistive listening systems and visuals available?					
Other?					
9 Safety					
Are floor surfaces in public spaces slip resistant and barrier free?					

Are emergency exit routes obvious?					
Are all interior spaces free of sharp, hot or rough surfaces that might not be felt by people with sensory loss?					
Other?					
10 Comfort					
If there are multiple floors, is there an accessible restroom on each floor?					
Can all controls available to the public be easily reached and operated by people with strength limitations and of varying heights and sizes (e.g. light switches, electrical outlets, window blinds, cabinet doors)?					
Other?					

Appendix-2: Accessibility Checklists for Museums

This is the Checklist for a survey on the accessibility of buildings and other places of public accommodation to persons with disabilities (people with mobility, visual and hearing impairments). The aim of the Checklist is to assess whether the place and its interior as well as exterior facilities are accessible to blind and deaf persons and persons using mobility aids such as wheelchairs, crutches or white canes.

Date of survey:

Type of premise (building, villa):

If building, please state the name:

Type of service/services provided:

Name of the institution:

Location:

Fax:

E-mail (if available):

Entry

- Are there steps at the entrance of the building or premise?
- If yes,
 - How many steps are there?
 - How high & wide are the steps?
 - Do the steps have proper handrails on both sides?
 - Is there an accessible entrance i.e. a ramp as an alternative to allow access to the building?
- If yes,

- is the accessible entrance clearly identifiable; is there an international symbol of accessibility?
- does the accessible entrance provide direct access to the main floor, lobby, or elevator?
- Is the ramp steep or gentle i.e. easier to climb? (a ramp can be used if the difference in level is one meter at most)
- Is it free of obstructions?
- Does it have a leveled surface?
- Does it have a hard (slip resistant) surface? (suitable materials for outdoor ramps include asphalt, concrete, & expanded metal; wood is often slippery when wet)
- Does it have proper handrails on both sides?
- Does it have sufficient landing spaces at both ends and at a turning point (if there is any) which are non-slippery?
- Is the front doorway wide enough for a wheelchair? (the door width has to be at least 0.90m)
- Is there an accessible route from the parking area into the premise?

Interiors

- Is there an information desk; is there written information about where places are located?
- If the premise is a multi-story building
 - How many stories does the building have?
 - Do the staircases have proper handrails on both sides?
 - How high & wide are the steps?
 - Is there a lift to allow access to upper stairs?
- **Lifts**
- Does the lift reach all floors & start at the basement/ground floor?
- Is the lift door wide enough to let a wheelchair in and out? (The free width of a lift doorway must be a minimum of 850mm)
- Is there adequate circulation space for a wheelchair in the lift?
- Are the elevator buttons within the reach of a wheelchair user? (900-1100mm from the floor & at least 400 mm from a corner)
- Are the elevator buttons printed using raised characters?
- Are the elevator buttons Braille marked?
- Is there an adequate (bright) lighting in the lift?
- Does it have handrails?
- Do the doors remain open as long as there is an obstruction?
- **Corridors and surroundings**

- Are the corridors and rooms in the premise free of hazardous overhangs and can all objects protruding into the circulation paths be detected by a person who uses a cane? (in order to be detected using a cane the object must be within 27 inches of the ground)
- Are safety guards or railings installed around all hazardous areas and raised platforms (more than 0.40m high)?
- Do the corridors have adequate circulation space for a wheelchair? (the minimum unobstructed width of a low traffic corridor should be no less than 0.90m and of a public corridor should be no less than 1.50m)
- Is there adequate lighting in every part/corner of the premise?
- Are the floors throughout your building non-slip and/or have short level and securely attached carpet pile (i.e. along edges)? (a maximum of ½ inch high)
- Are all high thresholds & any other differences in level bridged by ramps? (the maximum height of a threshold should be 20mm if it is higher than that it has to be bridged by a ramp)
- Are there visual (special lights) and sound warning mechanisms in case of emergencies and the need of immediate evacuation of the building?

➤ **Doors**

- Do the doors have a visual entry code i.e. a flashing light?
- Is there adequate circulation space for a wheelchair at all doorways inside? (the clear width of straight access interior doors should be at least 850mm, but if there is a turn immediately after the door the width should be wider than 850mm)
- Are accessible doors placed adjacent to revolving doors and turnstiles?
- Do automatic doors have a sufficiently long opening interval?
- Are manual door hardware (handles, locks, pulls etc.) or push buttons for automatic doors located at a height suitable for both walking people and wheelchair users? (not exceeding 1.40m)
- Can doors be opened easily/automatically without much effort? (generally the force required to open a door should not exceed 10 N)
- For double leafed doors, is the width of one of the leaves wide enough? (Is the width of one of the leaves at least 0.80m?)

➤ **Electrical equipments and accessories**

- Are the electric switches, sockets, controls and wardrobe hangers placed at a height suitable for both walking people and wheelchair users? (approximately 850mm from the floor)
- Are electronic outlets throughout the building installed properly? (electric outlets should be installed 400-1100mm from the floor & at least 400mm from a corner or built in furniture)

➤ **Public rest rooms**

- Are there rest rooms in the building/premise?

- If so,
 - Is at least one rest room (either one for each sex or unisex) fully accessible?
- If yes,
 - Is the accessible rest room identified by sign?
 - Is it one for the whole building or are there accessible rest rooms located on every floor?
 - Does the rest room have a proper toilet seat?
 - Is there sufficient space inside the rest room to maneuver a wheelchair?
 - Are washbasins mounted at a height reachable by a person on a wheelchair? (between 0.45m & 0.50) OR is there a height adjustable washbasin that moves by pressing a button?
 - Is the distance between the toilet seat and the closest adjacent wall fitted with a proper grab bar? (a proper grab bar is between 0.45 & 0.50m, non slip, & can withstand loads)
 - Are flushing arrangements, dispensers, soap, hand driers within reach ranges and usable with one hand and easy to operate?

Museums and Galleries

In addition to the above:

- Are the guides who are in charge of explaining what is there in the museum, trained sign language?
- Is the space in-between the displayed heritages wide enough to maneuver a wheelchair? (at least 95cm x 130cm)
- Does the museum provide the use of a wheelchair for people with physical impairments to ease their visit around the museum?
- Are descriptions of displays provided in Braille?
- Paintings that are displayed on the walls, are they at a distance to be seen easily by wheelchair users? (at least 1m high from the floor)
- If there is an entrance fee to the Museum or Gallery, are helpers accompanying people with disabilities admitted for free?
- **Commitments obtained to increase accessibility**

➤ **Overall comment**

Appendix-3: Consent Letter

College of Development Studies

Tourism Development and Management Program

Addis Ababa University

Addis Ababa

Dear Sir/ Madam,

My name is **Iyerus Kassa**; I am student of Addis Ababa University, studying Tourism Development and Management in masters program. For the final fulfillment of masters program am writing a research thesis which aims to “Assess the Accessibility of Star Rated Hotels and Museums for Tourists with Disability in Addis Ababa.” As a research area accessible tourism is recent phenomena in our research arena, however accessible tourism has developed well in advanced countries both in research area and as big market segment. This is by understanding the concept of accessibility in better way. Accessibility is broader than it perceived however, it is the ability of tourists to conveniently reach their destination and which comes from the philosophy of “*Universal design*”, is the basis and condition of travelling regardless of age and state of health. However there are hardly any researches works in the area of accessibility in tourists’ destinations. This study is trying to fill the gap and point out very important recommendation to the service industry in inclusion of person with disability as integral part of their marketing system. In doing this, this questionnaire is

very important source of data which is going to be answered by tourists with disability and I am asking you a couple minutes to read the questions and please answer the questions by putting existing situation you observed while you stay.

Thank you in advance for your kind cooperation!

With Best Regards!

Appendix-4: Interview Guide Question for Hotel Managers

The Profile of the interviewee

Date:

Name of the Hotel:

Sex: _____

Age: _____

Current Position:

Year of experience:

Qualification: _____

Queries

1. Are you aware of accessible tourism?
2. Have you experienced in hosting tourists with disabilities in your service delivery? If no, why? If yes, do you have statistical data of the last five years?
3. Does the hotel make available accessible/friendly shuttle for tourists with disabilities?
4. What kind of accessible facilities are available in your hotel? Please focus on the facilities attributed to the physical layout of the hotel including elevators, stairs, lobbies, bed rooms, wash rooms and the awareness of the service providers mainly front line receptionist and special service providers such as sign language interpreters.

5. Do you have disability-inclusive policy or procedure in your service delivery?
6. Have you enjoyed the experience of other countries and change it into countries?
7. Are you aware of international as well as national policy and legal frameworks that recognize accessible issues as one of inviolable human rights of persons with disabilities? If yes, are you implementing these policy statements in your service delivery? If not, why?
8. What are the challenges that you have faced while hosting tourists with disabilities?
9. Do you have a menu that Prepared in tactile format or large print for tourists with total blindness and low vision respectively?
10. Do you provide information about the accessible facilities of your hotel for those who are in need of such service? Or what kind of information do you provide for tourists with disabilities? If yes, what kind of mechanism do you use?
11. Do you have safety measures and appropriate signage to ensure the full and effective participation of tourists with disabilities in your hotel?
12. What should be done on the way forward for the availability of accessible and standardized service delivery for tourists with disabilities in your hotel in the near future?

Appendix-5: Interview Guide Question for Addis Ababa Culture and Tourism Bureau and Ministry of Culture and Tourism

The Profile of the interviewee

Date:

Sex: _____

Age: _____

Current Position:

Year of experience:

Queries

1. How much do you know about accessible tourism?
2. What is the role of AACT bureau in making tourist destination accessible for segment of people specifically for tourists with disability in hospitality industry?
3. What are the tasks have you done in making tourism more accessible?
4. What are the measurements to rate star hotels specific to tourist with different physical impairment?
5. How do you manage for those hotels that cannot fulfill the requirements?
6. What are the existing policies in addressing accessible tourism for person with disability?

Appendix-6: Interview guide for hotel Staff Serving at Table and Receptionist.

7. What do recommend in inclusive tourism?

Appendix-8: Questionnaire for Tourists in Star Rated Hotels

Dear Respected Respondent

This research questionnaire is used to the research about “Assessing the Accessibility of Star Rated Hotels and Museums for Tourists with Disability in Addis Ababa.” This questionnaire dispatches to tourists with different impairment at different hotel and to collect data about the accessibility of built environment, service and on social awareness. Please answer the following question honestly and genuinely. Please be advised that the research will be conducted in full confidentiality as information. Your name and the response provided by you strictly analyses confidentially and the result displayed in aggregate not individual case. In case you have any concern regarding this research you can contact the researcher.

Iyerus Kassa,

I am thanking you in advance for your support and willingness to participate in this research work

I. Background Information

1. Sex- Male Female
2. Age - 18 – 30 31 – 45 46 – 60 above 60
3. Marital status- single married divorced widowed
4. Educational background/status?
Primary school Diploma
Secondary school Degree and above.....

II. Research Questions

1. What kind of physical impairment did you have?
Visual impairment hearing impairment physical impairment
2. Are you domestic or international tourist?
Domestic/local International tourist
3. If you are international visitor, from which part of the country or part of the world did you came?
5. For what purpose did you come to the hotel?
Conference vacation
Visiting personal reason
6. How long did you stay in the hotel?
7. Did you get the hotel accessible for you? Yes No
If your answer is No, what challenges did you face during your stay?
.....
.....
8. Did you get special treatments (services) which simplify your stay? Yes
No
If your answer is yes, would you mention them?

.....
.....

If your answer is No, what was your expectation?

.....
.....

9. How did you get the receptionist, waiters and room service handling of tourists with impairment?

.....
.....

10. How do you evaluate the accessibility of star rated hotels and tourists areas for person with disability?

.....
.....

11. What do you recommend for better improvement?

.....
.....

Thank you!!!

Appendix-9: Questionnaire for Tourists in Museums

Dear Respected Respondent

This research questionnaire is used to the research about “Assessing the Accessibility of Star Rated Hotels and Museums for Tourists with Disability in Addis Ababa.” This questionnaire dispatches to tourists with different impairment at different museums and to collect data about the accessibility of built environment, service and on social awareness. Please answer the following question honestly and genuinely. Please be advised that the research will be conducted in full confidentiality as information. Your name and the response provided by you strictly analyses confidentially and the result displayed in

aggregate not individual case. In case you have any concern regarding this research you can contact the researcher.

I am thanking you in advance for your support and willingness to participate in this research work

I. Background Information

- 1. Sex Male Female
- 2. Age - 18 – 30 31 – 45 46 – 60 above 60
- 3. Marital status- single married divorced widowed
- 4. Educational background/status?
Primary school Diploma
Secondary school Degree and above.....

II. Research Questions

- 1. What kind of physical impairment did you have?
Visual impairment hearing impairment Mobility impairment
- 2. Are you domestic or international tourist?
Domestic/local International tourist
- 3. If you are international visitor, from which part of the country or part of the world did you came?
- 4. For what purpose did you come to the museum?
Visiting for Researching purpose other
- 5. How often did you come to the museum?
For first time for second time for third time more than three
- 6. Did you get the museum accessible for you? Yes No
If your answer is No, what challenges did you face during your stay?
.....
.....
- 7. Did you get special treatments or services which simplify your stay/visit?
Yes No
If your answer is yes, would you mention them?

.....
.....

If your answer is No, what was your expectation?

.....
.....

8. How did you get the receptionist, guide and curators handling of tourists with impairment?

.....
.....

9. How do you evaluate the accessibility of museums and tourists areas for person with disability?

.....
.....

10. What do you recommend for better improvement?

.....
.....

Thank you for your help!!!!!!