

Assessing Africa Readiness to Host Travelers with Disabilities: A Review of Accessible Accommodation Studies in African Countries

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Abstract: *Even though Africa has been involved in the movement towards protecting the rights of disabled people, the emerging market is still under-served. Despite having multiple tourist attractions, the continent has not fully implemented its tourism and disability policies to make sure that barrier-free accommodation services are offered to disabled guests. The purpose of this study was to review and analyze studies done on the accommodation sector in African countries and to establish the extent to which the existing accommodation establishments were user-friendly to disabled people. Google Scholar, EBSCOhost, and science direct were used to generate academic journals. Two main themes mainly demand and supply was developed from the content analysis. On the demand side, quality of services and user-friendly services were the main challenges limiting the accommodation sector from offering barrier-free services to disabled guests while on the supply side, accessible room facilities were seen as a critical issue. Hotel service providers needed to make sure that there were accessible facility in bar and restaurant including ramps, elevators, hearing aids, leveled access routes as well as spacious rooms to host disabled guests. Provision of barrier-free services as recommended in the social disability model would be possible if service providers were willing to change their attitude regarding disability. Once the attitude is changed then it would be easy to resolve the structural and communication barriers.*

Keywords: Travelers with Disabilities, Accessible Accommodation, People with Disabilities, African countries

INTRODUCTION

Africa is the largest and the second most populated continent after Asia. The continent covers about 30.3 million km² which is equivalent to 11.7 million square miles. The continent accounts for 6% of Earth's total surface area and around 20% of its land area. Tourism is one of the crucial industries globally, and it is the second world's largest sector after the banking industry (Edusei *et al.*, 2015). Africa is rapidly becoming a global tourism economy (Rogerson, 2007). This is possible because the continent is blessed with abundant tourist attractions that attract a larger portion of visitors from other continents as well as from Africa itself. Mount Kilimanjaro (Tanzania), the famous Pyramids of Giza (Egypt), Kruger National Park (South Africa), Marrakesh Medina (Morocco), Sossusvlei Dunes (Namibia), mountain gorillas (Rwanda), Victoria Falls (Zambia & Zimbabwe), Nyika Plateau National Park (Malawi), Makgadikgadi Pans (Botswana), Liwonde National Park (Malawi), wildlife safaris (Tanzania and Kenya), Lower Zambezi (Zambia), Gorongosa National Park (Mozambique), Etosha National Park (Namibia), Nyiragongo Volcano

(DRC), Lake Malawi (Malawi), African Renaissance Monument (Senegal), Olumo rock (Nigeria), Kakum National Park (Ghana) and Goree Island (Senegal) are some of the famous tourist attractions in Africa. Tourism is an important sector for the economic development of most African economies (UNCTAD, 2017). The industry has helped most African countries move away from the dependency economy to the service sector (Mariki *et al.*, 2011). It is the fastest-growing sector contributing significantly towards employment creation, foreign exchange, investment, strengthening regional integration, as well as reducing poverty for most of the countries (Africa Tourism Monitor, 2016). This sector also serves as a tool in creating closer bonds between cultures, countries and people (Acha-Anyi, 2018). The importance of this sector in African countries is reflected in the number of international tourist arrivals on the continent. As of December 2020, a total of 1.2 million people arrived in Africa (Doris, 2021). Apart from arrivals, the tourism sector contributed 86 billion USD to the GDP of the continent and offered 17.5 million jobs in 2020 (WTTC, 2021). Furthermore, it is estimated that the sector will contribute \$269 billion to the GDP of the African continent and offer 29 million new jobs by 2026 (African Development Bank Group News, 2018). The tourism sector is reported to create a positive effect on people that are directly involved in the sector (Ozturk, Yayli, & Yesilintas, 2008; Eichhorn, Miller, & Tribe, 2013). This sector is known for its role in bringing people closer (Edusei *et al.*, 2015).

Unfortunately, the involvement and the participation of people with disability in the tourism industry has been limited (Maskele, Woreta, & Weldesenbet, 2018). Even though that tourism is as much of a social right of everyone, to disabled people, it seems impossible (Chikuta, 2015). Little emphasis has been placed by the service providers to accommodate them even though they constitute a significant market (Chikuta, 2015). Policymakers are ignoring them and the society they live in keeps on discriminating them. They are seen as beggars, economically unproductive and lazy (Chikuta, 2015). Service providers in Africa are unaware of the disabled travel market and this is caused by ignorance regarding the economic value of the disabled travel market (Bisschoff & Breedt, 2012). Issues of disability in Africa are seen as charity matters and not as rights of a country's commitment to democracy by treating all citizens as equal members of the society (Maja-Pearce, 1998). Disabled people in African countries face a lot of challenges. These include; attitude barrier e.g., negative attitude from the community and service providers (Oladokun, Ololajulo & Oladele, 2014; Mensah, Badu & Opoku, 2015; Bombom & Abdullahi, 2016; Adam, Boakye & Kumi-Kyereme, 2017; Adam, 2019) and ignorance of service providers (Spencer & Mnqayi, 2017; Abd-Elraof, Dawood & Mohamma, 2018; Chikuta, DuPlessis & Saayman, 2018), communication barriers e.g., limited trained personnel to communicate with disabled people (Oladokun, Ololajulo & Oladele, 2014; Lwoga & Mapunda, 2017; Refaat & Ibrahim, 2017; Chikuta, Kabote&Chikaya, 2017; Chikuta, DuPlessis & Saayman, 2018), lack of clear and up- to- date information (Adam, Boakye & Kumi-Kyereme, 2017; Chikuta, DuPlessis & Saayman, 2018) and lack of user-friendly hotel websites (Khalil & Fathy, 2017); physical challenges e.g., limited facilities (Lwoga & Mapunda, 2017; Refaat & Ibrahim, 2017; Chikuta,

Kabote & Chikaya, 2017), inaccessible transport systems (Bombom&Abdullahi, 2016; Chikuta, DuPlessis & Saayman, 2018), lack of appropriate tourism activities for disabled people (Chikuta, Kabote&Chikaya, 2017), and lack of accessible accommodation (Bisschoff & Breedt, 2012; Chikuta, 2015; Khumalo & Ndlovu, 2017; Mangwiro *et al.*, 2018; Meskele, Woreta & Weldeesenb, 2018). These are among the serious problems limiting disabled travelers from enjoying their trips. As a result, few people with disabilities in Africa are engaging in leisure and tourism activities (Mensah, Badu, & Opoku, 2015). Generally, the disabled travel market has been ignored (Florence, 2018), and this is why it is an untapped market (Avis, Card, & Cole, 2005). Few countries and companies have shown interest in serving this market (Snyman, 2004), because they see it as a niche (Vila, González, & Darcy, 2019) or weak travel market (Chikuta, 2015). Globally, it is estimated that about 15% of the world's population, which is about 1 billion people, live with some form of disability of which 2% to 4% experience significant difficulties in functioning (World Health Organization , 2019). This figure is expected to rise to 1.2 billion people by 2050 (Vila, Darcy, & González, 2015), due to demographic changes, natural disasters, accidents, as well as an increase in chronic diseases such as; diabetes, cardiovascular disease, cancer and other mental health issues (World Tourism Organization UNWTO , 2011). Global statistics indicate that between 110-190 million people which is 1/5th of the world population in the tourism market would require accessibility (Burnett & Bender-Baker, 2001).

Developing countries are estimated to have a higher growth rate (NIA & NIH, 2011), with about 80% of the world's disabled population living in Africa, Latin America and South-East Asia. In Sub-Saharan Africa, 3.2 % of the total population is reported to have at least one form of disability while 1.1% is reported to be covered by those with more than one form of disability. The data specifically reported that visual impairment is the most common form of disability in Africa affecting 1.8% of the total population, followed by mobility disability (1.6%) of the total population), memory impairments (1.2%) and hearing challenges between 0.4% to 0.7% (Montes & Swindle, 2021). Disability in Africa is caused by war, violence, superstition, poor nutrition and poverty (Maja-Pearce, 1998). In Africa, disability is high in rural areas and is believed to affect those with less education (Montes & Swindle, 2021). Due to the increase in the number of people with disabilities globally, several initiatives were developed by various African countries to make sure that the rights of people with accessibility requirements are protected. For example, South Africa has passed legislation supporting people with disabilities. The country has national building regulations to support a barrier-free environment to accommodate disabled people. But the Bureau of Standards code 04400 of 1995 failed to make sure that all the existing buildings are user-friendly to disabled people. On top of that, the tourism body in the country has failed to make sure that universal designs for disabled people are well established (Ashton, 2012). On the other hand, Zimbabwe has a tourism authority responsible for ensuring that accessible facilities are fixed to accommodate disabled people (Chikuta, 2015). Furthermore, Tanzania adopted the National Policy on Disability in 2004 to provide a conducive environment for disabled people to engage in

productive activities (URT, 2004). Ghana, on the other hand, passed the Persons with Disability Act in 2006 to improve the attitude of able-bodied persons towards disabled people and to make sure that disabled people are free to access public areas. Egypt also passed the Rights of Persons with Disabilities Act in 2018 making sure that disabled people get equal opportunities in work, health and other issues just like able-bodied persons (Egypt Official Gazette, 2018). In the accommodation sector, disabled people have been neglected. As a result, tourism bodies responsible for grading accommodation establishments offering accessible facilities are failing to do their work as required (Ashton, 2012). Hence, hotel owners and managers don't take an active role in promoting hotel rooms appropriately to people with disabilities (Darcy, 2000). As a result, most of the accommodation establishments in Africa are not accessible to disabled people. Despite all the challenges, people with access needs tend to choose expensive hotels because of accessibility desires (Buj, 2010). They need to ensure that the accommodation meets their needs and desires before they make travel decisions (Darcy & Pegg, 2011). In case of the absence of accessible accommodation, disabled people are usually forced to find alternative destinations that have accessible features or cancel their trips (Stumbo & Pegg, 2010). Once they find the destination that offers accessible facilities, they are willing to pay anything to get the desired service (Magwiro *et al.*, 2018) and may return to the same destination once satisfied with the accessibility facilities and positive staff treatment (Tantawy, Kim, & Pyo, 2005).

Although the existing literature has pointed out challenges limiting people with disabilities from enjoying accommodation in African countries, their focus was on specific African countries such as South Africa (e.g., Bisschoff & Breedt, 2012; Spencer & Mnqayi, 2017; Khumalo & Ndlovu, 2017), Zimbabwe (e.g., Mangwiro *et al.*, 2018), Egypt (e.g., Tantawy, Kim & Pyo, 2005; Atef, 2011; Hussein & Jones, 2016; Khalil & Fathy, 2017; Abd-Elraof, Dawood & Mohamma, 2018), Ethiopia (e.g., Meskele, Woreta & Weldesenb, 2018) and Ghana (e.g., Adam, 2015). Also, the focus of their studies was either from the suppliers perspective (e.g., Tantawy, Kim & Pyo, 2005; Atef, 2011; Bisschoff & Breedt, 2012; Chikuta, 2015; Adam, 2015; Spencer & Mnqayi, 2017; Khalil & Fathy, 2017; Meskele, Woreta & Weldesenb, 2018; Abd-Elraof, Dawood & Mohamma, 2018) or the demand side (e.g., Hussein & Jones, 2016; Khumalo & Ndlovu, 2017; Magwiro *et al.*, 2018). A study that reviewed and analyzed the ability of the accommodation sector in Africa, both demand and supply side to host travelers with different forms of disabilities in its totality is missing. Therefore, this study intended to review whether the existing accommodation sector in African countries offers user-friendly facilities to travelers with disabilities. Furthermore, this study intended to shed some light on the strategies taken by the African countries to provide accessible accommodation to disabled people. This study was important because the disability market can be an important travel market if accommodation establishments put more emphasis (Tantawy, Kim, & Pyo, 2005). Hotel marketers need to be aware that the disabled travel market could be a profitable business if marketed well. It is known beyond reasonable doubt that the number of disabled people in Africa is increasing daily because of accidents, diseases, poor diets,

poor working conditions, violence, wars, natural disasters and higher poverty rates (WHO, 2021). Furthermore, disabled people prefer to undertake leisure trips to natural areas and take part in outdoor activities (Chikuta, 2015) hence this travel market can be used as an alternative source of tourism receipts once the mainstream travel market fails to perform due to seasonality. Furthermore, literature has also pointed out that people with disabilities do travel with caregivers, family members or friends hence any ticket purchased by a disabled customer means a double income is generated and therefore, this is an economic travel market that should not be ignored (Ater, 2011). Disability is something that should not be overlooked because some people acquire a disability in the course of their lives (Batavia & Schriener, 2001). Additionally, little has been published regarding disability and tourism in the context of Africa (Chikuta, 2015; Montes & Swindle, 2021). This study intended to bridge that knowledge gap.

Literature Review

Social Model of Disability

The foundation of this study is based on a social model of disability. The social model of disability has been extensively used by academia to understand the origin of a disabled person. This model was developed by disability activists in the 1970s and 1980s. The social model assumes that it is the society that imposes a disability on people with various impairments (Bingham *et al.*, 2013). This model assumes that the origin of disability is the mental attitudes and physical structures of the society, rather than a medical condition that one has. This model assumes that individual limitations are not the cause of disability. Rather, it is society's failure to offer appropriate services to accommodate people with various disabilities. In this model, the concept disability and impairments are differentiated. Impairment is seen as an abnormality of the body, such as a limitation or malfunction of a limb (Goodley, 2001; Forhan, 2009). On the other hand, disability is seen as the disadvantage or restriction of activity as a result of a social organization that fails to take into account people who have impairments and segregate them from society (Goodley, 2001). The distinction is crucial because the social model assumes that it is not individual bodily function that constrains his/her abilities, it is the society (Roush & Sharby, 2011; Barney, 2012).

Therefore, theorists of the social model see disability as something that is imposed in addition to impairments in the way that persons with impairments are segregated and excluded from full participation in their society (Bingham *et al.*, 2013). Isolation and exclusion can be a result of the way society are unable to willingly remove environmental barriers that limit people with disabilities in participating as active members in society (Forham, 2009). The social model assumes that exclusion and segregation of disabled people can be solved if the society changes rather than individuals' perceptions. Therefore, any change in the way people see disability has to require political action and social change rather than a change in ones' physical body (Bingham *et al.*, 2013). In the social model, impairment is seen as a form of diversity that offers reasons for people to celebrate and value. The model assumes that negative attitudes regarding disability may

disappear once people's attitudes towards disabled people change. Although the social model sees disability as impairment caused by the way society negatively perceives it, the social model is not free from critique. It is reported that the social model fails to address impairment as an observable attribute of a person which is a crucial aspect of their lived experience (Palmer & Harley, 2012). This issue has been seen when the model separated impairment from disability (Bingham *et al.*, 2013). Palmer and Harley (2012) concluded that separating the two constructs, it means the model has not fully accounted for the lived experiences of people with disabilities. Additionally, this model is also criticized because it has failed to recognize differences between individuals with disabilities.

Challenges of Serving Disabled Guests in Accommodation Establishments

Several studies have been done to assess barriers of various types of accommodation establishments in serving disabled people. Communication happened to be one of the core barriers that limit people with disabilities from getting their desired services. Based on the demand side, about 33% of the existing literature has reported that lack of reliable and up-to-date information is the key barrier limiting people with disabilities from enjoying accommodation in African countries. Research done by Khumalo and Ndlovu (2017) has reported that lack of reliable information has limited wheelchair users from choosing the right accommodation. Wheelchair users prefer to have the correct travel information before they make their decision. Issues such as spacious rooms, parking space, accessible room services are very important. Although South Africa has legislation and a tourism unit that is responsible for ensuring that accessibility features in the accommodation sector are adhered to, hotel owners have failed to offer reliable and up-to-date information to disabled guests. On the supply side, 11% of the existing research has declared that lack of accessible information is indeed the primary barrier limiting disabled guests from enjoying their accommodation. Khalil and Fathy (2017) have revealed that hotel websites in Egypt offer information that is not user-friendly to disabled people.

But researchers believe that if assistive technology is used it will help hotel websites to offer accessible information to disabled people. It was suggested that hotel websites should be improved to provide user-friendly information to assist disabled people. The structure of the website should provide titles and headings to assist those with low vision. The text should be used in videos for hearing impaired people get a clear message. Voice recordings/screen readers and Braille should be used to assist blind persons. Structural barriers are another problem limiting disabled guests from enjoying accommodation in African countries. From the demand perspective, lack of ramps (67%), accessibility features in bars and restaurants (67%), lack of elevators (33%), limited assistive technologies, lack of ground floor access routes as well as lack of spacious rooms (22%) are the main structural barriers. While on the supply side, lack of accessible room facilities (44%), lack of elevators (22%), lack of accessible features in bars and restaurants are among the key structural barriers limiting disabled guests from enjoying accommodation in African countries.

These challenges have been reported in South Africa (Bischoff and Breedt, 2012), in Zimbabwe (Mangwiro, Zengeni, Mirimi, & Chamunorw, 2018) and Egypt (Atef, 2011). Since the focus of the studies were on wheelchair users (Khumalo & Ndlovu, 2017), senior citizens (Bischoff and Breedt, 2012) as well as those with visual, hearing, intellectual and physical impairments (Hussien & Jones, 2016) It is important to take note of their needs and make sure that the accommodation sector produces what is needed. The attitudinal barrier is arguably one of the significant barriers affecting disabled guests from selecting hotels (Adam, 2019). Negative attitudes from the service providers at the front desk and hotel employees can be traced to stigma, where disability is seen as something abnormal, resulting in the disabled guest needs being overlooked. The ignorance comes from the belief that disabled people are seen as insignificant, poor and unproductive (Chikuta, 2015).

This perception shows that the hoteliers are not aware of the economic value of the disabled travel market hence they don't see why they should put more emphasis on serving them. Lack of knowledge regarding disabled peoples' needs has affected the provision of quality and barrier-free services in the hotels (Tantawy, Kim, & Pyo, 2005; Atef, 2011; Bischoff & Breedt, 2012; Hussein & Jones, 2016; Khumalo & Ndlovu, 2017; Mangwiro *et al.*, 2018) and this is why there are few disabled guests in hotels (Abd-Elraof, Dawood, & Mohammad, 2018). Based on these findings, lack of quality services (100%) and lack of user-friendly services (67%) are the main barriers reported on the demand side while on the supply perspective, lack of user-friendly services (44%) and lack of qualified staff (33%) were the main attitudinal barriers. Therefore, to close the attitudinal barrier gap in the hotel industry, service providers need to be trained on the economic wealth of this new niche market so that they will change their attitude towards disabled guests. The training needs to be geared towards the provision of quality and user-friendly services. A summary of the barriers limiting disabled guests when boarding hotels in African countries is presented in Table 1.

Table 1 Barriers affecting disabled guests from enjoying accommodation in African countries

| Sub- concepts | Specific barrier | Demand side | Suppliers side |
|---------------|--|---|---|
| Communication | Lack of reliable and appropriate communication | Khumalo & Ndlovu (2017) - 33% | Khalil & Fathy (2017) – 11% |
| Structural | Lack of balcony/veranda | Hussien & Jones (2016)- 11% | Bisschoff & Breedt (2012) - 11% |
| | Shortage of handrail in the bathroom | | |
| | Accessibility features in the bar & restaurant | Hussien & Jones (2016)- 22% | Atef (2011) Maskele, Woreta & Weldesenbet (2018)- 67% |
| | Accessible room services | Mangwiro <i>et al.</i> , (2018) – 33% | Atef (2011), Spencer & Mnqayi (2017) Chikuta (2015), Maskele, Woreta & Weldesenbet (2018) - 44% |
| | Lack of ramps | Hussien & Jones (2016), Mangwiro <i>et al.</i> , (2018) – 67% | |
| | Flat access routes & ground level rooms | Hussien & Jones (2016) – 33% | |
| | Quality services | Hussien & Jones (2016), Khumalo & Ndlovu (2017), Mangwiro <i>et al.</i> , (2018) – 100% | Tantawy, Kim, & Pyo (2005), Atef (2011), Bisschoff & Breedt (2012) - 33% |
| | Spacious rooms | | Atef (2011), Maskele, Woreta & Weldesenbet (2018)- 22% |
| | Parking space | | Tantawy, Kim, & Pyo (2005)- 11% |
| Attitudinal | Negative attitude & lack of knowledge regarding disabled travel market | Khumalo & Ndlovu (2017) – 11% | Tantawy, Kim, & Pyo (2005), Atef (2011), Spencer & Mnqayi (2017) - 33% |

Methodology

The main focus of the study was to review and analyze studies that have been done on the accommodation and disability travel market in different African countries and shed light on the strategies taken by the African countries in the provision of accessible accommodation to disabled people. In the current study, the concept-driven systematic review approach proposed by Webster and Watson (2002) and used by other researchers such as Alalwan, Rana, Dwivedi, & Algharabat (2017) was used. The technique allows the literature to be examined from the concept point of view rather than an author-driven approach that focused on how multiple authors have examined the multiple concepts in different studies. This method was appropriate in the current study because issues regarding disability and tourism seem to be evolving in the area of tourism and the hospitality industry. This study involved an extensive desk literature review. In the process of searching for articles, the researcher used several keywords such as “accessible accommodation”, “tourism”, “people with disabilities”, “African countries”, “hospitality”, “inclusive

accommodation”, “motel”, “guest houses”, “tented camps”, and “hotels”. These were used separately and at times a combination of words was employed to generate the relevant articles for the study. The references cited in the peer-reviewed published articles were also traced to assess their relevance in the study before including them in the analysis. The decision to include an article was primarily based on the full-length published in a peer-reviewed journal especially in the accommodation sector in African countries and the field of tourism and hospitality. To ensure the reliability of the data, each article was critically reviewed twice by the researcher to justify its inclusion and to ensure its accuracy and objectivity. Since the concepts used in the study were developed from peer-reviewed journals, content validity was ensured. The initial search retrieved a total of 21 articles in the form of abstracts; conference proceedings, book reviews, editor prefaces and internet columns. 9 articles of such nature were excluded from the analysis because of their limited if any, contribution to the existing knowledge. However, information from WHO country reports and country statistical data related to disability were used to justify the current problem. Some of the information such as definitions of key terms such as “disabled people” and “accommodation” was taken from books. Information regarding content analysis came from books too. The final searching process yielded 12 full-text articles that were considered relevant to the analysis in the current study (Refer Table 2). The researcher reviewed all 12 and assigned them to two themes as analyzed from the supplier and demand sides.

Finally, it was concluded that “tourism” “people with disabilities” “African countries” “accommodation” “inclusive accommodation” were among the main key search words used to get the final articles. Therefore, the population for this study was 12 fully peer-reviewed published articles relevant for the current research. Due to the relatively small population (12 articles) then census was used instead of selecting a sample. Three main tourism database search engines such as EBSCOhost, science direct, and Google scholar were used to download the reviewed articles. These databases are the largest and most popular online search engine databases used in tourism and hospitality studies (Buhalis & Law, 2008). Content analysis was employed to analyze content and concepts in the studies. This technique is a popular data analysis method in the social sciences (Berg, 2009). This method involved a careful, detailed, systematic assessment and interpretation of a particular body of material to identify patterns, themes, biases, and meanings. The technique identified the meaning of the text and, therefore, maintains a qualitative textual approach. The technique is flexible and employed to analyze different types of qualitative data (Kyngäs, 2020). Since the population was small (N= 12) then data were manually analyzed. The analysis involved reading the selected articles twice to ensure their relevance in answering the research question. Then, a unit of analysis i.e. accommodation and people with disabilities articles were used to generate open codes i.e., barrier- free accommodation, accommodation for disabled guests, user-free accommodation, accessible accommodation, then sub-concepts such as; communication barriers, structural barrier and attitudinal barriers were developed. In the end, main themes namely;

demand perspectives and supply perspectives were emerged (the summary is indicated in Table 2).

Table 2: Accessible Accommodation Studies in African Countries

| S/N | Author(s) | Aim of the study | Focus of the study | Data collection | Data analysis & sampling design | Major Findings | Themes |
|-----|-----------------------------|---|--|---|---|---|----------------|
| 1 | Bisschoff, & Breedt, (2012) | Determine the accessibility of hotels in South Africa for the physically disabled tourist and elderly travellers. | Physically disabled and elderly travellers | Questionnaire | Qualitative research Convenience sampling | The accommodation industry in South Africa can only accommodate 15% of travelers with disabilities. | Suppliers side |
| 2 | Chikuta (2015) | Assess the ability whether Zimbabwe has enough accommodation facilities to enable people with disabilities | Registered tourism operators in Zimbabwe's hotels/lodges, travel agencies, tour operators and cruise operators | Interviews, questionnaires and observations | Exploratory design Simple random & judgmental sampling Descriptive statistics Content Analysis | Zimbabwean hotels have no facilities to accommodate disabled customers | Supplier side |
| 3 | Spencer, & Mnqayi, (2017) | To establish whether owners of accommodation, transport service providers and tourism officials understand the concept of universal accessibility in tourism. | Accommodation (Bed-n-Breakfast, camping sites, accommodation in nature parks & hotels) in South Africa | Questionnaire Interviews | Descriptive statistics Content analysis | Some of the hotel offers accessible facilities to accommodate disabled customers | Suppliers side |
| 4 | Mangwirot et al (2018) | Perceptions of people with disabilities on the compliance of Zimbabwean hotels in the provision of innovative | People with mobility, visual, hearing and a category for other disabilities | Semi-structured interview | Exploratory study Thematic analysis Convenience sampling | Hotels in Zimbabwe still lag behind in terms of offering services to disabled customers | Demand side |

| S/N | Author(s) | Aim of the study | Focus of the study | Data collection | Data analysis & sampling design | Major Findings | Themes |
|-----|---------------------------------------|--|--|---|--|---|----------------|
| | | facilities for guests with disabilities. | | | | | |
| 5 | Atef (2011) | Investigate the ability of the Egyptian hospitality industry to accommodate special needs customers in Egypt | six major 5star hotel chains | Questionnaire | Opportunistic sampling Normality of distribution by the Kolmogorov-Smirnov test. Means and standard deviations | Egyptian hotels have failed to fully accommodate disabled customers | Suppliers |
| 6 | Meskele, Woreta, & Weldesenb (2018) | Evaluate accessible tourism challenges and development issues in hotels and attraction sites in Ethiopia | Hotel managers/ employees, culture and tourism office employees, destination managers, and tourist guides. | Open ended interview Questionnaire | purposive sampling Descriptive research Cross-tabulation | Some of the hotels in Ethiopia offers some facilities that are user-friendly to disabled customers | Suppliers side |
| 7 | Abd-Elraof, Dawood, & Mohammed (2018) | Evaluate disabled services and facilities provided for persons with disabilities in resorts in Egypt | (three, four and five-star) from major tourist cities in Egypt, including Cairo; Ain- Sukhna; Aswan; Luxor; Hurghada; Sharm El-Sheikh. | Questionnaire | Quantitative approach exploratory Descriptive statistics and One-way ANOVA | Some of the 5 star resort hotels have offers disabled services than four and three star resorts. | Supplier side |
| 8 | Khumalo, & Ndlovu, (2017). | Investigate the accessibility of B&B facilities by wheelchair bound persons in Durban. | Physically mobility people specifically mobility impaired people | Interviews self-administered questionnaires | Qualitative quantitative research designs Convenient sampling. Cross tabulation | The majority of B&B facilities were found not user-friendly services and their physical states do not allow ease of access and free movement. | Demand side |

| S/N | Author(s) | Aim of the study | Focus of the study | Data collection | Data analysis & sampling design | Major Findings | Themes |
|-----|------------------------------|--|--|-----------------|---|--|---------------|
| 9 | Adam (2019) | Examines the attitudinal functions of hotel frontline employees towards serving the guests with disabilities in Ghana. | Hotel frontline employees in budget hotels | Questionnaire | Two-step cluster, Kruskal-Wallis test Chi-square test of independence | Empathetic accommodating attitude helps to understand the needs Of guests with disabilities | Supplier side |
| 10 | Khalil & Fathy (2017) | Assessing the accessibility of disabled guests on hotel websites in Alexandrians (Egypt) | Hotel operators in 4 and 5 star hotels | Interview | Content analysis | Hotel websites information are not user-friendly to disabled guests | Supplier side |
| 11 | Tantawy, Kim, and Pyo (2005) | Deficiencies of hotels in Cairo to accommodate disabled customers | Room division managers Food and beverage directors Marketing directors | Questionnaire | Descriptive statistics | Most of disabled customers lack confidence to use hotels even if the hotels are promoted to have accessible facilities | Supplier side |
| 12 | Hussein & Jones (2016) | Identify disability related facilities to accommodate disabled customers in Egypt | Hearing impaired Sight impaired Intellectual impaired | Questionnaire | Analysis of variance Mann-Whitney U test Kruskal Wallis Convenience sampling | Disabled people put emphasis on different accessibility facilities | Demand side |

Discussion of Findings and Implications of the Study

This study came up with two main themes based on supply and demand perspectives. Out of 12 refereed published academic articles, 9 focused on suppliers' side and 3 of them were on demand. The overall findings from the studies have indicated that most of the existing accommodation establishments in African countries were not capable of hosting disabled customers. On the demand side, provision of quality services happened to be the most critical problem limiting disabled guests from enjoying accommodation in African countries (Tantawy, Kim & Pyo, 2005;

Khumalo & Ndlovu, 2017, Hussein & Jones, 2016; Mangwiro *et al.*, 2018), followed by lack of user-friendly services (Hussein & Jones, 2016; Khumalo & Ndlovu, 2017). This implies that the provision of quality service should be a priority to hoteliers if they are thinking of expanding their clientele to this new niche. This information is very important because disabled guests are willing to pay anything to get the desired services (Lyu, 2017) and they do care about accessibility features when choosing hotels (Hussein & Jones, 2016). On top of that, if guests with disability perceive that they are not going to get equal treatment as able-bodied guests, then their future behavioural intention may be affected. Therefore, hoteliers need to make sure that the best and user-friendly service is offered in their hotels. On the supply side, accessible room facilities were seen as the main critical areas that need improvement. Hoteliers need to make sure that things such as ramps are present as this will assist those with mobility challenges as well as those with low vision. Wheelchair users as well as blind guests prefer flat routes, ground access rooms, spacious rooms, presence of handrail in the bathroom; hence priority should be on those areas when investment in accommodation is made because disabled guests pay emphasis on hotel barrier-free facilities (Zhang & Yang, 2021). Although most African countries have disability policies, they are not implemented fully to ensure that disabled people are accommodated just like the mainstream market. The focus of the existing policies is on health welfare not on the framework to make sure that a barrier-free environment is implemented to assist disabled people to enjoy leisure and tourism (Khumalo & Ndlovu, 2017).

The existing guidelines demanding universal buildings are not implemented. Therefore, African governments need to make sure those tourism authorities responsible for grading the accommodation sector offer accessible facilities (ramps, elevators, accessible rooms, spacious rooms, ground floor access routes, assistive hearing aids). The beneficiaries of accessibility features in the hotel sector are not only disabled people but children of a young age, senior citizens, pregnant women as well as those with temporary impairments. Additionally, offering accessibility services in the sector will bring equality and quality which are pillars of sustainable tourism development (Lwoga & Mapunda, 2017). Another area of importance to be looked at is the attitudinal barrier. Negative attitude, ignorance and lack of qualified staff to assist disabled hotel guests were reported to be critical barriers on suppliers' side. Negative attitudes have been extensively reported to be one of the critical issues affecting disabled people in most studies (McKertcher, Packer, Yau, & Lam, 2003). Ignorance or misconceptions about disability leads people to equate any disability to total disability (Ray & Ryder, 2003; Yau *et al.*, 2004). This misconception regarding the level of support needed often turns to inappropriate attention or service failures. This implies that service providers in the hotel and accommodation industry need to be trained to change their mindset regarding disabled guests. Knowledge of disabilities and their needs may help them to change their mindset and start treating them just like other human beings. Failure to understand disabled guests' needs may lead to the failure of providing the desired services. It should be remembered that the root cause for this problem can be traced back to African

culture. The culture has made disabled people see themselves as “other” and not as any other ordinary member of the community (Khumalo & Ndlovu, 2017). This belief has made disabled people to be discriminated against and segregated in almost all spheres of their lives including leisure and tourism. Therefore, if African countries are to move to barrier-free accommodation, then service providers need to change their attitude regarding disability issues. On the other hand, policymakers can use the information to educate the public on the diversity of disability and learn to accept the disabled as part and parcel of the community because they have equal rights to be treated with respect just like any human being. Lack of accurate information and proper means of communication has been identified to be one of the critical areas of interest in most of the disability studies. Lack of accurate information is affecting more disabled guests than able-bodied persons (Ray & Ryder, 2003). Disabled guests need to have all the information regarding hotel accessibility features before making any travel decision. At times service providers claim that the services offered are accessible but is not always the case. Lack of accurate information has mostly been reported in the hotel sector (Ray & Ryder, 2003). Most of the hotel websites have inaccurate and out-of-date information regarding accessibility features in the hotels. Information such as accessible rooms, elevators, ramps, flat routes, spacious rooms is very important to people with both mobility challenges and vision challenges.

Wheelchair users would be thrilled to know whether the room is spacious and room facilities are placed on the lower level. Therefore, hotel service providers need to make sure that they advertise the right information on their hotel websites as this will offer meaningful details to disabled guests. On the other hand, policymakers need to make sure that they include the clause that will request the hotel service providers to offer relevant and up-to-date information when developing their marketing and promotional materials to attract customers. The information provided has to be in a form that is user-friendly to everybody. For example, visitors with low vision would prefer tactile markers or voice recorders when communicating while those with hearing impairments prefer sign language. The use of the right means of communication may make customers to be satisfied with the service and this may have an impact on future travel behaviour. Therefore, this implies that hotel staff needs to be trained to communicate properly with disabled guests because disabled guests want to be treated with respect and dignity the same way as the mainstream group. Based on the social disability model, people are becoming “disabled” when faced with barriers that are imposed on them by other people on top of their impairments. To implement the social model in the accommodation sector, service providers’ attitudes regarding disabled guests needs to be changed. This can be achieved by providing training regarding disability issues. Understanding the concept of disability, their needs and how to communicate with them clearly may help hotel staff to offer quality and user-friendly services. Furthermore, since disabled people are not homogeneous, then service providers need to make a note of their differences as this information may help them to deliver what is desired. For example, not all disabled people require architectural

modifications like those with mobility challenges; some just need assistive hearing aids to enjoy their accommodation.

Conclusion and Limitations

This study examined the ability of the accommodation sector in Africa to host disabled guests and provide strategies that can be used by different countries to make sure that barrier-free hotel services are provided. Overall, the finding indicates that the accommodation sector in Africa is not able to fully host disabled guests. Disabled guests are still constrained by communication, structural as well as attitudinal barriers that limit them from enjoying accommodation in African countries. Although most African countries have disability policies and a tourism unit responsible for ensuring that barrier-free services are given to disabled guests, these guests are still segregated and they don't receive equal treatment as able-bodied persons. For African countries to attain sustainable tourism, serious efforts need to be taken to make sure that disability policies are implemented to the point where barrier-free services are offered to disabled guests. This will only be possible if the hotel service providers change their attitude regarding disabled guests. Training on disability issues will help them to be aware of disability needs hence it will be easy for them to learn how to communicate and deliver barrier-free services to disabled customers. Once the negative attitude is changed, the quality and user-friendly services will be offered to disabled guests. Although the finding of this study confirms the social disability model, the model can only be implemented in the accommodation sector if the service providers decide to train their staff to perceive disability positively.

The introduction of inclusive hotel services is important because disabled people are willing to return to a destination that offers accessibility facilities and have staffs who can serve them well (Tantawy, Kim, & Pyo, 2005). Although accessible tourism theme has been extensively done by researchers in developed countries, little is known in the context of African countries. This study contributed to the literature by providing an overview of findings and discussions in the tourism and hospitality literature on accessible accommodation in African countries. Hence, the current study contributes to academia and industry by proposing strategies for African countries to start offering barrier-free accommodation to satisfy the needs of disabled customers. A major limitation of this is the exclusion of books and articles from conference proceedings in the analysis therefore, future studies should include them in the analysis for more insights into the subject matter. Another direction for further studies is to analyze the specific accessibility needs among disabled people so as to determine the most unique accessibility requirement for specific disabled customers. This information will help hotel service providers to deliver what is desired by each category. Additionally, this study found out that quality of services is the main barrier for disabled people from enjoying the accommodation sector in African countries. Therefore, future studies can focus on addressing different service quality dimension barriers in the accommodation sector. The information can assist service providers to attract a significant number of disabled guests.

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