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Universal Accessibility of the Tourism Product in Zimbabwe: Case Study of Hotels in Harare, Zimbabwe

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Abstract:

Tourism in Zimbabwe has been on a positive growth trend over the past few years and is showing signs of real growth after the slump experienced at the beginning of the millennium. The Government of Zimbabwe has enacted a new National Tourism Policy to ensure that this growth is supported by a robust policy intervention, which among others also does well to recognise the need to respect the rights of persons living with disabilities. Tourism players are mostly pre-occupied in making their businesses more attractive to tourists in order to generate more revenues for their properties. However, in doing so, one group that is normally overlooked are the persons living with disabilities whose needs and interests are not normally taken on board during the construction of tourism facilities. Resultantly, they experience a lot of difficulties trying to access tourism products and even when they do, there are limited facilities for their use from elevators, sanitary facilities, reserved parking and suitable accommodation rooms. This article investigated how 2-5 star hotels in Harare are faring in terms of ensuring that their tourism products are universally accessible. The choice of the hotels was based on a purposive sampling technique which regarded all graded hotels as advanced enough to respond to the global phenomenon of universal access. The study was approached from a qualitative paradigm; however, the results were transformed into quantitative form to enable presentation and analysis of the findings. The results point to a glaring picture which warrants strong Government Intervention and business mind shift by the tourism players.

Keywords: *Universal accessibility, tourism, Harare hotels*

1. Introduction

Recent debates in the tourism sector have focused on the need to foster inclusive tourism development but certain quarters in the academic community have largely quarantined inclusive tourism to the need to ensure persons living with disabilities participate in the tourism sector (Rains 2009, Cohen 2013). The need to champion rights of persons living with disabilities has been accepted as vital in many jurisdictions, tourism included. Zimbabwe has taken commendable strides to enshrine the rights of persons living with disabilities in the supreme law of the country. However, this noble initiative has not been actively followed by mainstreaming of the same to other sectors such as tourism. Resultantly persons living with disabilities still find it difficult to enjoy universal access to tourism products. This paper places an inquiry on Universal Access of tourism products in a bid to unravel policy, legislative and operational gaps that need to be closed to guarantee the enjoyment of tourism products by persons living with disabilities in Zimbabwe.

1.1. Background

The Zimbabwean Tourism has been experiencing positive growth over the last few years. According to Zimstat (2016), international arrivals into Zimbabwe grew up from 1.2 million in 2009 to 2.1 million in 2015. Statistics from the Zimbabwe Tourism Authority also indicate that tourism receipts grew from \$338 million in 2006 to \$ 886 million in 2015 (see Figure 1 below).

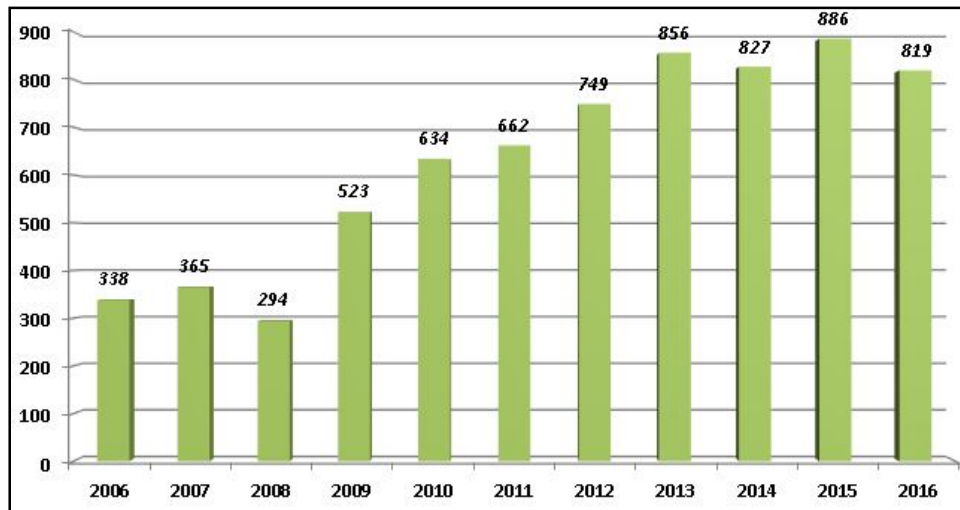


Figure 1: Tourism Receipts for Zimbabwe 2006-2011

Source: Zimbabwe Tourism Authority, *Tourism Trends and Statistics Report 2015*

Regardless of this good performance by the sector, evidence on the ground does not suggest that Zimbabwe has paid much attention to promoting the rights of persons with disabilities as stipulated by the Global Code of Ethics (1999). The country is a full member of the United Nations World Tourism and actively participates in its programmes.

1.2. Problem Investigated

According to UNWTO (2012) amid growing economic concerns it is now, more than ever, that nations need to call for the right policies, the adequate investment and the proper business practices that can advance towards fairer, more people-centered, inclusive growth". Substantial literature has been generated globally on the subject area of universal access of tourism products. However, not much academic inquiry has been done based on empirical evidence on this area in the tourism sector in Zimbabwe. Whilst Government has celebrated the growth of the tourism sector which has been on a rebound since 2009, no one has placed focus on the ethical considerations whether this growth is taking on board the needs of persons living with disabilities. Globally, the United Nations family of which Zimbabwe is a member has adopted the Sustainable Development Goals. Of these, goal number eleven emphasizes the need to make cities and rural settlements inclusive. This places responsibility on the tourism sector to ensure its products and services are universally accessible. Unfortunately, very little effort and resources have been availed to ensure the tourism sector takes positive strides in this regard. Not much inquiry has also been placed on the progress or lack of it in guaranteeing universal access of tourism products from an academic point of view. This study seeks to bring this issue under spotlight and will provide evidence based analysis on existing gaps which are constraining the application of this noble initiative in Zimbabwe. Resultantly, the study will provide empirical based recommendations to aid the implementation of universal access of tourism products which Zimbabwe has not fully embraced.

2. Literature Review

A number of scholars have often used the terms accessible tourism and universal accessibility interchangeably. However, the work by Buhalis and Darcy (2011:300), has helped unravel the distinction between the two terms. They argue that universal accessibility focuses on ensuring that tourism products and services are usable by all people without having to resort to special designs, whilst accessibility places focus on adaptations to achieve universal accessibility. Reviewed literature has also shown that authors such as Rains (2009), view inclusive tourism as a global movement to ensure the full and social participation of all persons with disabilities in travel, citizenships and cultural contribution and in the process to ensure the same for everyone else. This view is supported by Cohen *et al* (2013), who argue for the need to create inclusive spaces for people living with disabilities in order to give them a feeling of security, competence and freedom in their mobility and help establish harmonious relations with the external world.

Reviewed literature also show that not much inquiry has been done on universal accessibility in the tourism sector in Zimbabwe. However, notable researches include Chikuta (2015), who investigated universal accessibility in National Parks in South Africa and Zimbabwe. Another grey area in reviewed literature is that there is no study on the size and strength of the market of persons living with disabilities in Sub Saharan Africa. In the United States, studies by Rains (2009:192), show that travellers with disabilities in the United States spend \$13.6 billion annually. Corresponding views such as (Darcy 2009), believe that there is a business case to universal accessibility as about 88% of people living with disabilities take a holiday each year accounting for over 8.2 million visits and \$24 billion in revenue globally. This is supported by Touche Ross (1993:601), who estimated that about 8 million disables persons undertake a holiday outside Europe at least once a year. The importance of the disability market is also further enhanced by anecdotal evidence from studies from the United Kingdom, which estimated that 12% of all domestic travel to persons living with disabilities (Enat, 2012). The appeal of the market also rests on the fact that persons living with disabilities are normally accompanied travellers and this boosts expenditure (Hossain *et al* 2013).

In order to deal with barriers that persons encounter to access tourism facilities, Mace (1985), proposed the adoption of Universal Design which ensures 'the design of products and environments to be usable by all people to the greatest extent possible without the need for adaptation or specialised design'. As Rains (2009), argues that designs that are free of unnecessary barriers are useful to everyone and access should be considered a basic human right in the provision of tourism services. According to Buhalis *et al* (2014), tourism could provide a grassroots approach to community integration processes most beneficial for people with disabilities and most educational for people without disabilities.

At a global level, the UNWTO Global Code of Ethics (1999), provides that tourism for persons living with disabilities should be encouraged and facilitated'. For this to happen the need for a strong legislative and policy framework is essential. In Zimbabwe whilst the new constitution advocates for the rights of persons with disabilities, there are apparent weaknesses in the primary and secondary legislation in the tourism sector. His study also identifies weaknesses in the tourism legislation in Zimbabwe which does not guarantee Universal access of tourism products. Chikuta, (2014) bemoans the fact that the Tourism Act which is the primary legislation in the tourism sector is silent on issues of promoting universal accessibility. He also pokes holes into Statutory Instrument 128 of 2005 arguing that although it seemingly promotes rights of the disabled it is only limited to the construction of ramps which benefits those with mobility disabilities namely wheel chairs only and is not holistic. This therefore calls for urgent intervention to revamp the primary and secondary legislation in tourism in Zimbabwe and align it to the new constitution.

3. Research Methodology

The research was approached from a qualitative paradigm. Creswell (1998:15), defines qualitative approach as a process of understanding, based on distinct methodological traditions of inquiry that explore a social or human problem. According to Dooley (1992), qualitative approach is invariably conducted in the field and for this reason it is sometimes referred to as field research. This is largely because qualitative researchers conduct their research in natural settings attempting to make sense of, or interpret phenomena in terms of the meaning people bring to them. The study at hand adopts a largely qualitative approach but employed aspects of quantitative approach to enhance presentation and analysis of results.

Melville and Goddard (1996:31), provide that a sample must be representative of the population to enable general observations to be made from the sample. The study investigated the adoption of universal accessibility among 2-5 star hotels in Harare. The choice of the sample was done using purposive sampling which is synonymous with qualitative research and had the potential to advance the cause sort by the researcher (Palys, 2008). Out of 10 properties falling in this category, 7 facilities were investigated on how they are applying the principles of universal accessibility of their tourism products. Stenbacka (2001:551), encourages researchers to be more careful on the data collection instruments they use as these can affect the validity and quality of research findings. The researcher used questionnaires and physical observations to collect data used in this study.

4. Analysis Presentation and Discussion of Findings

The study indicates that almost all hotels investigated do not allow the use of guard dogs within their premises. Whilst this is a hygienic issue, guard dogs are very useful for providing assistance especially to persons with visual disabilities. In the more developed world most hotels do permit the use of guard dogs and their ban here is a major setback as most tourists coming from the developed world which is our source market are used to having them. Figure 2 below shows the results in detail.

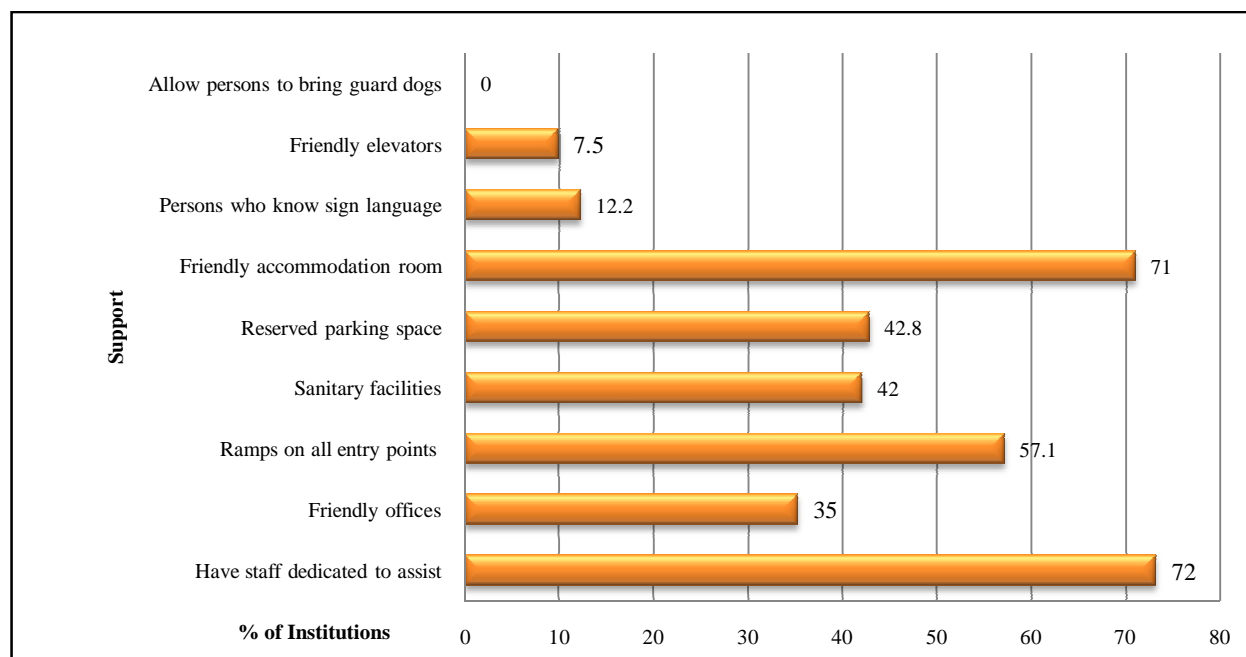


Figure 2: Findings on Universal accessibility, Harare Hotels

4.1. Friendly Elevators

As shown in Figure 1.1 above, only 7.5% of the respondents had friendly elevators which would allow persons using wheel chairs wide enough space to use them and also incorporate voice over's and Braille for persons with visual disabilities. People living with disabilities would thus find it very difficult to independently use them without any assistance.

4.2. People Who Know Sign Language

Frontline staff in the tourism sector must be able to be able to assist people living with disabilities including conversing to them in sign language. A paltry 12.2% of the respondents had employees who know sign language.

4.3. Friendly Accommodation

It is mandatory in Zimbabwe for hotels to provide friendly accommodation to people living with disabilities. In Harare, 71% of the hotel in the 2-5 category offered rooms suitable for use by persons with disability and this result is encouraging.

4.4. Provision of Sanitary Facilities

It is prescribed by law for hotels to ensure they offer cubicles for use by persons with disabilities which would have wide doors, side handles and doors that require minimum effort to open among others. Results of the survey indicate that only 42.8% of the respondents had friendly sanitary facilities available. This calls for more regulatory intervention to ensure adherence to set regulations to ensure that facilities for use by disabled are provided.

4.5. Ramps on All Entry Points

57.1 % of the facilities had ramps on all entry points. When ramps are not provided, it is nightmarish for persons living with disabilities who use wheel chairs or are visually impaired in the event of breakdown of elevators or when they are not available. This constitutes a huge discrimination for persons living with disabilities who cannot access tourism buildings either to enjoy a meal, attend a meeting or when they are guests and have their ability to move independently infringed upon.

4.6. Reserved Parking

In order to make tourist facilities accessible they are mandated to provide dedicated parking for persons living with disabilities. Results of the survey however indicate that only 42.8% of the respondents provided reserved parking for disabled.

4.7. Staff Dedicated To Assist

Results of the survey depict that the majority (72%) of the respondents had dedicated staff to assist people living with disabilities. However, only 28% of the staff were trained to do so.

4.8. Marketing and Information Availability

The researcher also visited Lonely Planet website which has developed Accessibility information schemes on various destinations and noted that for Zimbabwe it was recorded that, only a few hotels and lodges can cater for travellers in wheelchairs'. This does not put the destination in good light and given the power of such travel guides as Lonely Planet, the destination stands to lose a lot of revenue from this market. A further review of websites of the hotels that took part in the study also revealed that there was no mention by the hotels on issues of universal access and this disadvantages the destination and the potential traveller.

5. Conclusions

The article lays bare that whilst there are the policy and regulatory frameworks put in place to assist persons living with disabilities, there were some identified gaps in this regard. The main gap cited is weak legislative and policy framework in the tourism sector which needs to be addressed to promote universal accessibility in the tourism sector in Zimbabwe. It is also sad that Zimbabwe has not yet ratified the UN Conventions on the rights of persons living with disabilities regardless of having a constitution that seeks to mainstream its implementation. Hotel operators need to do more to promote information dissemination for persons living with disabilities and develop accessible websites. As a country, Zimbabwe also needs to enforce universal designs in its legislation for standards and grading of tourism products.

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