Analysing the rhetoric of accessibility: How well do New Zealand's hotel restaurants meet the needs of customers with disabilities?

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Abstract

The concept of "accessible tourism" enables people with access requirements/disabilities, including mobility, vision, hearing and cognitive dimensions of access to function independently with equity and dignity through the delivery of universally designed tourism products, services and environments (Darcy and Dickson, 2009). Using case study methods, this research aims to investigate the best practices in accessibility among hotel restaurants in New Zealand. The study has two objectives:

(1) Identify the strategies and tactics used by the three case study hotel restaurants considered as champions of accessibility, and

(2) Critically analyse the rhetoric of accessibility communicated online by the three case study hotel restaurants.

The three cases chosen for the research were Sudima Hotels, CQ Hotels and The Rydges Auckland hotel. The three cases are noted champions of accessibility. The website communications of these three cases were analysed to be able to answer the objectives of the research aim. The reason why best practices in accessibility implemented by these champions are being investigated is because research indicated that information on accessibility of restaurants in order to improve the dining experience for people with disabilities (PWDs) is scarce in hospitality and tourism scholarship. A three phase methodology with an interpretivist paradigm was implemented in this research for the exploratory study of the websites of the three hotel restaurants. The three phases in the methodology included a categorical analysis which was used to analyse visual design elements across the websites. The second phase was the content analysis which was used to provide a descriptive analysis of commonalities of content. The third phase, which was the rhetorical analysis, used phase 1 and phase 2 data, as well as company quotes and statements from the websites for a more critical view of first and second order meaning of the visual design elements, not only in relation to each other, but also in the context of the specific organisational settings, the research question and the researcher (Greenwood et al., 2019).

Through the findings of the three phase methodology, the best practices implemented by the three cases were found out. The categorical analysis findings showed the best practices in terms of accessible display of content and visual design elements on the

website. This included the use of high colour contrast for display of information on the websites, the use of two-step click process to access accessible information, and provision of a common central tab present on the top of the page consisting of links to subsequent webpages. Through the content analysis certain strategies and tactics implemented by the three cases to bring about accessibility were identified. The strategies identified through the content analysis included (i) Accreditations with social change organisations (ii) Inclusion of PWDs in the workforce (iii) Use of persuasive language and the effective (iv) Use of imagery. Similarly, multiple tactics in terms of accessible facilities that were implemented by the three cases were identified. Examples of common tactics found included provision of Braille menus and availability of trained staff to support PWDs in the restaurant. The rhetorical analysis findings showed how the three cases used quotes and statements indicating themes around (i) Accessibility is for all (ii) Persuasion for the Inclusion of PWDs (iv) Validity and (v) Persuasion for social change. This dissertation concludes with certain practical recommendations originating from the findings of the research and implications for imagining and moving towards a more moral, inclusive and accessible society.

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Attestation of Authorship

I, Eshwar Atul Shetty, hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor material which to a substantial extent has been submitted for the award of any other degree or diploma of a university or other institution of higher learning.

Signed:

Eshwar Atul Shetty

Date 30/09/2020

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Chapter 1 – Introduction

1.1 Introduction

This research considers issues of disability in the hospitality industry, specifically in relation to hotel restaurants. This chapter provides an overview of the research by providing a background discussion of disability, accessibility, and explains the purpose of the research. This is followed by presentation of the research aim and the research questions the study aims to answer. Lastly, the structure of the dissertation is explained.

1.2 Understanding disability

Within the tourism and hospitality industry, much scholarship has related disability to the concept of accessibility. According to the World Health Organization there are approximately one billion people in the world with a disability. This amounts to approximately 15% of the world's population (Linderová, 2015). In order to discuss the issue of accessibility for PWDs, it is important to first establish and understand the notion of "disability", although definitions of disability are contested and dependent on context. The World Health Organization (2013b) defines *disability* as an umbrella term which covers (1) impairments (a problem with body function or structure), (2) activity limitations (related to difficulties in executing a task or action), and (3) participation restriction (a problem encountered in involvement with life situations).

Similarly, New Zealand's Ministry of Health defines a person with a disability as

> …someone who has been assessed as having a physical, psychiatric, intellectual sensory, or age related disability (or a combination of these) which is likely to continue for a minimum of six months and result in a reduction of independent function to the extent that ongoing support is required. (NZ Ministry of Health 2007, para. 5)

1.2.1 New Zealand disability legislation

New Zealand's disability legislation is built upon the social model of disability (Stace, 2015) which recognises that PWDs (people with disabilities) should have the same citizenship and human rights as people without disabilities, with a vision of inclusion for all (Office for Disability Issues, 2011). Two of the most fundamental pieces of legislation in New Zealand were the Bill of Rights Act (1990) and the Human Rights Act (1993), which commit to ensure the human rights of all citizens while promoting harmonious relations between diverse groups of society (National Advisory Committee on Health and

Disability, 2003). Over time, New Zealand disability legislation has tried to address disability related issues such as accessibility, communication, employment and transport (Office for Disability Issues, 2011; Stace, 2015). The Office for Disability Issues was introduced in 2002 to implement a cross-government focus and independent monitoring of disability issues, with implementation of the United Nations Convention on the rights of people with disability in New Zealand (Office for Disability Issues, 2011, 2016b). Gradually, the New Zealand Government introduced disability strategies and action plans with a vision for providing an inclusive non-disabling environment, to improve the lives of PWDs. The Disability Action Plan (2019-2023) is a framework with a series of action points and priorities for outcomes, which provides guidance to cross-government sectors, agencies, and disabled people's organisations (Office for Disability Issues, 2020). The Disability Plan envisions PWDs having equal rights of citizenship, especially around community, representation, safety, wellbeing, autonomy, and self-determination (Office for Disability Issues, 2020).

The New Zealand Disability Strategy (2016 – 2026) has a vision for a society where PWDs "have an equal opportunity to achieve their goals and aspirations, and all of New Zealand works together to make this happen" (Office for Disability Issues, 2020, p. 6). Due to the global COVID-19 pandemic, the Ministry of Health has developed the COVID-19 Health and Disability System Response Plan that established a framework to manage and prepare for a national response to COVID-19 in New Zealand. The plan was primarily focused on the health and disability sector (Ministry of Health NZ, 2020). This COVID-19 Response plan recognised that special attention needed to be given to the needs of certain priority groups susceptible to COVID-19. The priority population groups included, Māori, Pacific people, PWDs, people with mental health conditions, older people, people in residential care, people with pre-existing conditions such as immunosuppressive disorders, refugees, and migrant communities (Ministry of Health NZ, 2020).

However, even though New Zealand has generally sound disability legislative prescriptions in theory, in practice, they have inadequate influence and need better enforcement and compliance (Convention Coalition, 2012). Some reasons identified for this were the lack of government funding, which affects the quality, standard, and consistency of services provided. Further it was identified that demand exceeded supply, as a result of which, provision and access to accessible facilities were fragmented and

disconnected, with limited variety and scope (Convention Coalition, 2012; National Advisory Committee on Health and Disability, 2003). It was also identified that ineffective coordination between organisations in the health and disability sector affected the navigation, ease of access, and flexibility for clients (Office for Disability Issues, 2016b). Furthermore, in relation to the workforce in the sector, PWDs face multiple issues in relation to the demographic profile of the workforce, nature and conditions of work, capabilities and skills of staff, and general perceptions of the sector (Office for Disability Issues, 2016b).

By late 2020, even with the implementation of the COVID-19 response plan, PWDs continue to be affected to a greater extent than previously, and the shutdown of essential services (for example) severely affected some (Ministry of Health NZ, 2020). A survey conducted by the Ministry of Health to understand issues faced by PWDs during the COVID-19 period indicated that PWDs still faced issues around a lack of access to adequate and appropriate support services, as well as isolation/loneliness, financial strain, and unemployment/underemployment. PWDs were being left off the radar, and there was a lack of effective communication towards these vulnerable groups, a lack of proper accessible housing, and a lack of information in the needed specialised formats (Office of Disability issues, 2020). These issues collectively indicated inadequate enforcement of disability legislation in New Zealand.

PWDs represent a substantial portion of the global population. According to the World Health Organization (WHO; 2013a), over one billion people, or 15%, of the global population have a documented disability (Kalargyrou and Volis, 2014). By 2050 this figure is expected to increase by approximately 1.2 billion. Research suggests that there is a direct link between age and disability i.e. a person is more likely to get a disability by the time they reach 65 as compared to when they are younger (Dwyer and Darcy, 2008). Research also confirms that by the year 2050, 35% of the world's population will be around the age of 60 (Rosenberg et al., 2011; Tinker, 2002). As a result, future disability rates are expected to increase with the increasing baby boomer generation.

1.2.2 Disability statistics in New Zealand

According to the Disability Survey (2013), 1.1 million (24% percent) of New Zealand's population is disabled. To better understand disability statistics in New Zealand, Table 1 presents disability comparisons between Māori and non-Māori citizens, categorised by age and gender.

Table 1

New Zealand Disability Statistics

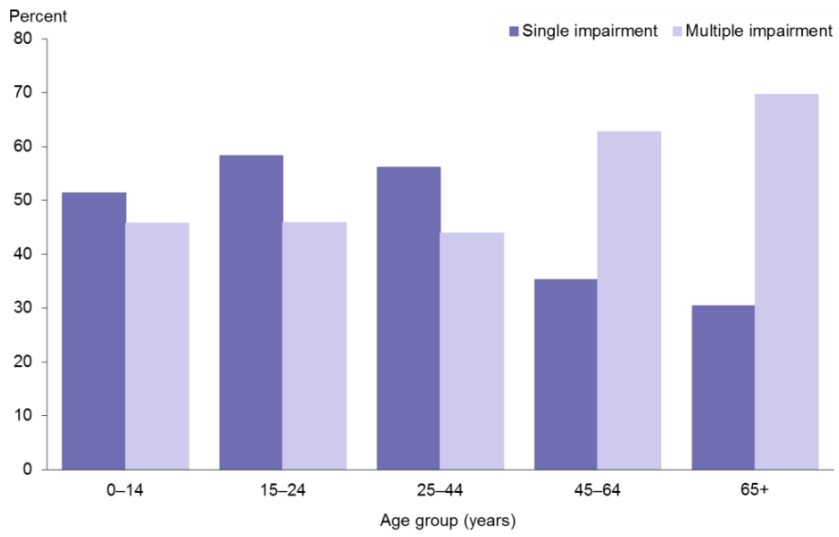
Indicator	Māori			Non-Māori		
	Males	Females	Total	Males	Females	Total
Total disabled (of total population), 0–14 years, percent, 2013	19.0	10.6	14.9	11.0	7.2	9.2
Total disabled (of total population), 15–24 years, percent, 2013	20.3	23.5	20.9	14.0	13.8	13.9
Total disabled (of total population), 25–44 years, percent, 2013	24.7	22.2	23.3	14.0	15.3	14.7
Total disabled (of total population), 45–64 years, percent, 2013	39.6	45.3	43.6	26.0	26.1	26.1
Total disabled (of total population), 65+ years, percent, 2013	73.7	50.0	62.2	55.1	57.0	55.9

Reprinted from https://www.health.govt.nz/our-work/populations/maori-health/tatau-kahukura-maori-health-statistics/nga-mana-hauora-tutohu-health-status-indicators/disability. Copyright (2013) by Ministry of Health.

According to data in Table 1, Māori had a higher disability rate than non-Māori in all age categories. Older people had a higher disability rate generally.

Figure 1

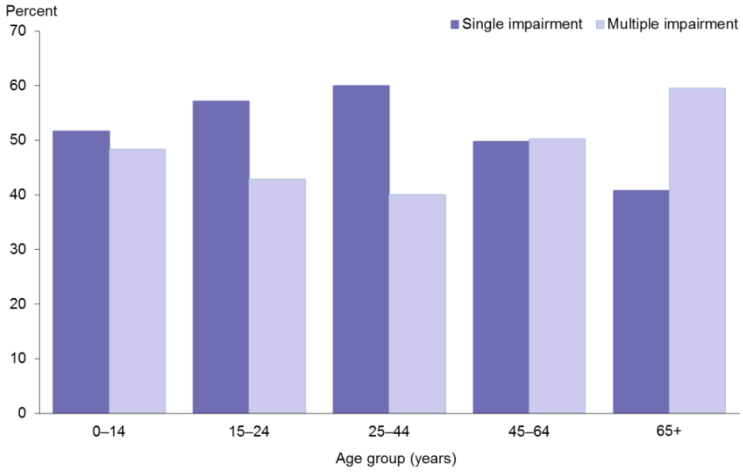
Impairments among Māori by Age and Impairments, 2013



Reprinted from https://www.health.govt.nz/our-work/populations/maori-health/tatau-kahukura-maori-health-statistics/nga-mana-hauora-tutohu-health-status-indicators/disability. Copyright (2013) by Ministry of Health.

Figure 2

Impairments among non-Māori by Age and Impairments, 2013



Reprinted from https://www.health.govt.nz/our-work/populations/maori-health/tatau-kahukura-maori-health-statistics/nga-mana-hauora-tutohu-health-status-indicators/disability. Copyright (2013) by Ministry of Health.

In Figure 1 and Figure 2 it can be seen that for both Māori and non Māori citizens, more than half the children with disabilities and young adults (under the age of 44) had a single impairment. However, more than 60% of adults over of 45 had multiple impairments. The New Zealand's Ministry of Health survey also showed that the three main impairments in both Māori and non-Māori children were speech difficulties, psychological impairments, and learning impairments. Similarly, according to the survey, the three main impairments among Māori and non-Māori adults were problems with agility, hearing and mobility.

The interesting feature of these disability statistics is that the disability survey was last undertaken by the New Zealand's Ministry of Health in 2013, so these are the most recent disability statistics available from the Ministry of Health. There is no further information on the increased numbers of PWDs over the years, or the number of PWDs visiting New Zealand each year. This may account for comments by Gillovic and McIntosh (2015) and Rhodda et al. (2012), who have stated that the New Zealand Government has not yet acknowledged the access market, and little is known about those with disabilities, or their wants and needs.

1.2.3 Tourism and disability in New Zealand

Tourism has been New Zealand's largest export industry, contributing to 20.4% of total exports. The hospitality and tourism industry's annual direct and indirect contribution to the economy has previously amounted to about NZD16.2 billion, which is about 9.8% of New Zealand's gross domestic product (GDP) (Tourism New Zealand, 2019). According to the NZ Government Forecast (2018-24), visitor arrivals into New Zealand were expected to increase by 37.1%, amounting to 5.1 million visitors in 2024. This represented a 4.6% increase in visitors annually (Ministry of Business, Innovation and Employment, 2018). However, as the COVID-19 pandemic has caused many countries to close their borders, similarly in New Zealand, it seems that international travel (with the possible exception of Australia and the Pacific islands) will not be available for some time (McIntosh and Wilson, 2020). Hence, domestic travel will be a priority in recovery efforts for New Zealand's tourism industry. However, research suggests that VFR (Visiting Friends and Relatives) travel and domestic leisure tourism in New Zealand have always been resilient forms of tourism, worth NZD23.7 billion per annum, before COVID-19 (McIntosh and Wilson, 2020). Therefore, the contribution of the hospitality and tourism industry to New Zealand's economy is important and undeniable.

As tourist numbers continue to grow in New Zealand, older tourists will have varied levels of physical ability given the statistical disability predictions above. Furthermore, with 24% of New Zealand's population being disabled, PWDs will require substantial changes and modifications to facilities, or extra assistance during their travel or stay, as compared to able-bodied tourists (Schitko et al., 2009). Increasing populations of older tourists and tourists with disabilities are major reasons to acknowledge the access market in New Zealand (Rhodda et al., 2012). Therefore, tourism and hospitality operators in New Zealand should focus on providing a range of facilities adapted to meet the needs of customers of varying ages and abilities (Schitko et al., 2009).

According to Disability Statistics NZ (2013), 1.1 million or 24% percent of New Zealand's population is disabled. This shows that approximately one in four New Zealanders have some kind of disability (Disability Survey, 2013). Even though a large proportion of the population has a disability, awareness about accessibility is poor in the hospitality industry, and as a result, the industry has not yet found a coordinated way to cater for customers or employees with disabilities (Bizjak et al., 2011; Darcy and Pegg, 2011a). New Zealand's hospitality and tourism industry is currently failing to

acknowledge the importance of the access market (Gillovic and McIntosh, 2015), in spite of the fact that the access tourism market is potentially large, and is set to grow (Rhodda et al., 2012).

1.3 The concept of accessible tourism

Most of the focus on disability in the context of tourism and hospitality scholarship has been framed within the discussion around accessible tourism. The concept of accessible tourism has gained attention over the years, which enables people with access requirements/disabilities, including mobility, vision, hearing and cognitive dimensions of access, to function independently with equity and dignity through the delivery of universally designed tourism products, services, and environments (Darcy and Dickson, 2009).

A review of literature shows that PWDs face various barriers and are not able to fully participate in mainstream hospitality and tourism activities (Bowtell, 2015; Daniels et al., 2005; Darcy and Daruwalla, 1999; Darcy and Pegg, 2011b; Linderová, 2015; McIntosh and Harris, 2018; Michopoulou et al., 2015; Poria et al., 2011; Tutuncu, 2017). Barriers include a lack of proper legislation, a lack of knowledge and education among service providers, a lack of accessible infrastructure, and a lack of information provided to PWDs. The accumulation of all these barriers prevents PWDs from having satisfactory tourism experiences (Buhalis and Darcy, 2011). Research suggests that PWDs have the same motivations to travel and participate in tourism activities as do able-bodied people, but the presence of such barriers prevents them from doing so. The concept of accessible tourism emphasises tourism for all, and provides PWDs the opportunity to enjoy mainstream tourism and hospitality experiences without barriers (Darcy and Dickson, 2009).

1.3.1 The need for accessibility champions

Within the hospitality industry, it has been argued that there is a greater need for more accessibility champions employing the best practices, so organisations can follow these champions and work towards providing inclusive and accessible environments to all people (Buhalis et al., 2012). A *champion* can be defined as someone who supports, defends or fights for a person, belief, right or principle (Gillovic, 2019). An accessibility champion aims at developing access for all, while ensuring that everyone works towards providing a positive and inclusive customer experience which promotes equality and diversity (Gillovic, 2019). According to Gillovic and McIntosh (2015), accessibility

champions exhibit aspirational leadership qualities in their attempts to transform access hopes and dreams of the future into today's reality, as they envision and are aware of the kind of environment they want themselves and others to live in. Accessibility champions focus on improving themselves and encouraging others by pushing boundaries; they challenge policies, processes, and established ideas by having difficult but necessary conversations, empowering staff, shifting organisational cultures and mind sets, and championing change (Gillovic and McIntosh, 2015). By showcasing their best practices, success stories, and leading by example, accessibility champions can pave a pathway for others to follow, which contributes to building momentum for change (Gillovic and McIntosh, 2015).

1.3.2 Website and Accessibility Communications

Within the accessible tourism discussion therefore, there seems to be a need for leaders to be promoted. However, there is no information on how these leaders can communicate their efforts to champion change. There is plenty of literature suggesting the role of communication in the tourism and hospitality industry, for example, by Buhalis et al. (2012). Websites play a very important role for hospitality organisations, as they use e-WOM (electronic word of mouth) to collect customer reviews on the provision of information and facilities (Kim and Lehto, 2012). However, very rarely have websites been used to look at persuasive types of language for social change. In the pursuit of social change, such as is need to improve accessibility, if an organisation is a particular leader or champion, then its website becomes a channel through which they can communicate what they are championing (Kim and Lehto, 2012). In the literature on hospitality communication, little is known about how an organisation can effectively communicate, through its website, about the rhetoric of what they are championing.

1.4 Problem statement

A review of literature shows that attention to disability in the context of tourism and hospitality is minimal. Even though information on accessible tourism and accessibility is scarce in the hospitality industry, most of the extant research investigates improper hotel infrastructure, bathroom facilities, service failures, and a lack of knowledge among industry workers in dealing with PWDs. There is very limited information and research available on the accessibility of hotel restaurants. Further attention is therefore needed to understand the best practices implemented by accessibility champions, and the rhetoric of their communications in the pursuit of social change.

1.5 Purpose of the research

I am a student currently pursing hospitality management studies, having studied and worked in the hospitality industry for the past five years. Now, as a researcher, I want to research the accessibility of New Zealand's hotel restaurants for PWDs. Therefore, case studies of three organisations are examined in this research: i) Sudima Hotels, ii) CQ Hotels, and iii) The Rydges Auckland Hotel. These organisations were chosen as they are noted industry champions for their efforts in promoting and implementing accessibility. Therefore this research aims to investigate best practices in accessibility among hotel restaurants in New Zealand. The study has two objectives:

(1) Identify the strategies and tactics used by the three case study hotel restaurants considered as champions of accessibility, and

(2) Critically analyse the rhetoric of accessibility communicated online by the three case study hotel restaurants.

1.6 Structure of the dissertation

This dissertation consists of five chapters, and is presented in the following structure.

Chapter 2- Literature review:

This chapter examines previous tourism, hospitality, and disability scholarship relevant to this topic, and uncovers gaps in knowledge that justify the originality and contribution of this research. A brief background to hospitality operations in New Zealand is provided, explaining the discourse in the models of disability, the barriers and constraints faced by PWDs, reasons to acknowledge the access market, and ways of improving accessibility in restaurants. The effects of the COVID-19 pandemic and how it has severely affected PWDs and the hospitality and tourism sector generally are also discussed to give current context to the research.

Chapter 3- Methodology:

This chapter details the methodological approaches applied in this study. The qualitative inductive approach and interpretivist paradigm are explained. Case study methods and the sampling of the cases are also explained, after which the three phase methodology implemented to analyse the data is described.

Chapter 4 – Findings and discussion:

The findings section of the chapter presents the findings of the research, which emerged inductively from the data from website communications of the hotel restaurants in the case studies, and analysed by the three phase methodology. The findings of each methodology phase are explained individually.

The discussion section in this chapter presents a wider discussion around both the significance and implications of the research findings, as supported by existing theories and the literature generally. Gaps or inconsistencies between the findings and those in the literature are also compared, in order to reveal any other findings. The discussions of the findings of each individual methodology phase are also explained.

Chapter 5- Conclusion:

This chapter provides a summary of all the key findings and discussions, and the contribution of the research along with theoretical and practical implications are highlighted. This chapter concludes by drawing on the possible limitations of the research whilst sharing recommendations for future research.

Chapter 2 - Literature Review

2.1 Introduction

This chapter begins by identifying and explaining the different models of disability that have historically guided disability scholarship. Drawing on a review of the literature, the next section goes on to explain the different barriers and constraints faced by PWDs. Following this, the subsequent section explains the various reasons for hospitality and tourism operators to acknowledge the access market. Lastly, the chapter explains specific recommendations made in prior research, on how to make restaurants more accessible for PWDs . The chapter concludes with a brief summary.

2.2 Models of disability

A review of the disability studies literature reveals three main models of disability that have been used over the years. These models of disability elucidate how disability was perceived at a given time or by certain social groups, which has further influenced the actions undertaken to eliminate the causes or effects of disability (Zajadacz, 2015). The most commonly used models of disability in the disability literature are overviewed in the following sub-sections.

2.2.1 The medical model of disability

The perceptions of the medical model of disability are primarily the reasons for the discourse on disability. According to this model, disability is viewed as a result of impairment in bodily functions or structures caused by injuries, diseases, or other health conditions (Barnes and Mercer, 2005; Bingham et al., 2013; Goodley, 2017; Oliver, 1995). Through the medical model, any action undertaken in terms of physical rehabilitation or medical treatment, focuses at maximising the ability of the individual to adapt to the environment (Oliver, 1995). The medical model also assumes that regardless of changes in the built environment or social structures, PWDs cannot experience the same opportunities as does an able-bodied person (Gillovic, 2019). However, the medical model of disability has faced a lot of criticism, because it prioritises the impairment over the individual, which is the basis of many negative and limiting attitudes, policies, and outcomes (Darcy and Buhalis, 2011; Oliver, 1995). Through the medical model, PWDs would feel stigmatised in society if they were identified by their dysfunction. As a result, PWDs opposed and criticised the medical model and argued for a broader perspective that challenged society to stop focusing on the indicators of disability, and instead,

provide the required support and necessary services to remove social and environmental barriers (McKercher et al., 2003). Hence there was a shift from the medical model to the social model of disability.

2.2.2 The social model of disability

During the 1970s, disability activists opposed the medical model and conventional understandings of disability. As a result, the social model of disability was introduced. The social model views disability as a result of preventing and limiting social, environmental, and attitudinal barriers that prevent a disabled person's full participation in society (Oliver, 1995). Some barriers identified by previous research are prejudice and ignorance, demeaning stereotypes, and negative social restrictions, which prevent independent participation and the involvement of disabled people in mainstream activities (Darcy and Buhalis, 2011; Mcfarlane and Hansen, 2007; Shakespeare, 2013). Oliver (1995) suggested that in order to provide PWDs with the same opportunities as those without disabilities, removal of the social barriers around disability is very important. The social model of disability emphasises social integration, as a result of which, the primary strength of this model is its assumption that it is not the person with a disability who requires adapting to the environment, but it is society and service providers who need to provide social conditions for equal participation (Buhalis and Darcy, 2011; Darcy and Pegg, 2011; Oliver, 1995). The social model of disability is also closely related to universal design principles so as to ensure a barrier-free society with full participation of all members with minimal or no adaptation required (Mole, 2013). The concept of universal design principles is explained in later sections of this dissertation.

2.2.3 The interactional model of disability

The interactional model views disability as a product of interaction between individuals and society. The basic principle of the interactional model is that it views the environment as an interactive structure, presenting individuals as active synthesisers of information from the environment (Lazarus and Folkman, 1984). As a result, behavioural changes in one person are considered to influence behaviour and transformation of another person (Lazarus and Folkman, 1984). This model emphasises the interactive element and understands that in the real world, people can influence each other in positive and negative ways (Lazarus and Folkman, 1984; Llewellyn and Hogan, 2000). Hence this model is apt for disability studies, as it builds on the social model to explain that disability is not only created and supported by non-supportive environments, but is also caused by problematic

social relationships (Llewellyn and Hogan, 2000). According to this model, any remedy for disability-related problems requires a change in the interactions between individuals and society (Gill, 1997).

2.2.4 Perceptions of disability

Each model of disability is based on a paradigm that determines the actions connected to accessibility of public spaces, buildings, or tourism services for PWDs (Zajadacz, 2015). Therefore, how disability is perceived in the different models either consciously or subconsciously, and how it is accepted by industry operators, shapes the supply side of the accessible tourism industry. The changes in perceptions of the different disability models act as a driving force that shapes current and future transformations in the accessible hospitality and tourism industry (Zajadacz, 2015).

The hospitality and tourism industry has been pushed to develop inclusive facilities, and incorporate the social model of disability either as a result of political agendas or changes in legislation worldwide (Buhalis et al., 2012). Most of the literature on the tourism and hospitality industry has framed the study of disability and accessibility in the context of social change, and the social model of disability. There is a clear differentiation between disability and impairment, as viewed by the social model. As a result, *impairment* can be used to differentiate between diverse groups of PWDs who have varying needs and requirements. The social model also acknowledges the fact that PWDs have different and unique disabilities and abilities and it is only the individual who can decide what they can do, and how. According to the International classification of functioning, disability and health, (2001) and the World Health Organization (2013b), there are seven types of impairment: visual, speech, hearing, mental/intellectual, hidden impairment, and being elderly. Accessibility requirements vary from high to low depending on the degree of impairment. This shows that as disability has multiple groups and sub-groups of people with varying needs and requirements, the accessible market should not be considered as homogenous (Buhalis et al., 2012).

Therefore, tourism and hospitality organisations should focus on providing solutions that can cater to these diverse groups and sub-groups, creating an inclusive and barrier-free environment. Even though accessibility efforts have been employed in New Zealand and its hospitality industry to incorporate the social model and create an inclusive environment, PWDs still face multiple barriers and constraints that prevent them from having a joyful travel and leisure experience (Gillovic and McIntosh, 2015; Rhodda et

al., 2012). Hence, many researchers have tried to identify the barriers and constraints faced by PWDs in the tourism and hospitality industry, in order to provide them with same opportunities as an able-bodied person.

2.3 A note on language and terminology

The social model views disability as a result of preventing and limiting social, environmental, and attitudinal barriers that prevent a disabled person's full participation in society (Oliver, 1995). Therefore this research employs the social model of disability, and hence uses person – first language (Gillovic et al., 2018) when referring to PWDs, as this emphasises the person first, and the disability, whatever that is, as secondary, and as a consequence of wider societal determination (Buhalis et al., 2012).

2.4 Barriers and constraints faced by people with disabilities

The right to travel is a fundamental human and citizenship right, as proclaimed by the United Nations Convention on Rights of People with Disabilities. Hence, providing PWDs with a suitable environment where meaningful social inclusion can take place is an imperative (Bowtell, 2015). There is a need in the market for modification of destination facilities, reliable online information, and relevant policies that allow and encourage the disabled population to travel as able-bodied tourists do (Bowtell, 2015). A review of the literature shows that there are multiple barriers faced by PWDs in the hospitality and tourism industry, as discussed in the following sub-sections.

2.4.1 Design of a building or facility

A major constraint identified in the literature is the lack of access in terms of physical infrastructural needs, due to building and facility design. A review of the literature shows that PWDs face difficulties with accessing facilities provided by hospitality organisations. For example, Darcy and Pegg (2011), Bowtell (2015), and Darcy and Pegg (2011a) found that in terms of accessible accommodation, even though most hotels met a few access provisions, not all areas of the hotels were accessible. Through their research, they discovered that most service providers offer minimal features in the rooms, instead of providing the best possible features, just to save costs. Also, Poria et al. (2011) confirmed that most accessible facilities provided were in the rooms and not other areas, due to misconceptions that PWDs prefer to stay in the room and not use other facilities. Similarly, Linderová (2015) checked the readiness of tourism accommodation and restaurants for PWDs in the South Bohemian region. Findings of their research suggested

that most tourists with disabilities found aisles of restaurants and cafes too narrow for the convenient movement of wheelchairs, and that there were few tables without fixed seating, with a comfortable space for a wheelchair to fit in. Bowtell (2015) and Poria et al. (2011) also showed the constraints faced by PWDs in hotels and restaurants. For example, a person with a wheelchair or crutches finds it difficult to reach food items on a buffet or hold a plate while walking, which is needed in restaurants using a buffet style service. They also found that people with visual impairments found buffets difficult and sometimes felt embarrassed, as they were dependent on the help of others to serve their food. A lack of accessible parking, ramps, and mobility aids, such as wheelchairs for people with mobility impairments, were other constraints faced by PWDs at hotels and restaurants (de Faria et al., 2012). All are examples of insensitive design of hospitality and tourism buildings and facilities.

Therefore, in order to meet access requirements for the hospitality and tourism industry and to provide access for all, it is important to implement universal design principles, a paradigm to engender a barrier-free environment (Darcy and Dickson, 2009). Universal design aims to provide a high quality, safe, and comfortable barrier-free environment for all guests, including those with disabilities (Papamichail, 2014). PWDs face access issues due to insensitive architectural design, which prevents them from full participation in tourism and leisure activities (Darcy and Pegg, 2011; Poria et al., 2011; de Faria et al., 2012; Bowtell, 2015). Therefore, tourism and hospitality organisations should focus on providing an inclusive environment so PWDs can participate in tourism and leisure activities along with able-bodied people, without being marginalised as an exclusive group (Figueiredo et al., 2012). This can be done by implementing universal design principles. Universal design goes beyond the minimum standards of accessibility so accessibility is integrated into the overall environment (Ostroff, 2011).

Most PWDs face difficulties in a public or private environment, primarily due to failures to deliver accessible facilities, and the poor application of accessibility standards in building design, which is largely due to the limited understanding and knowledge of designers about the needs and requirements of PWDs (Tutuncu, 2017). The concept of accessible tourism extends beyond just providing access for PWDs, but also to providing an inclusive environment for companions of PWDs, their carers, people with temporary disabilities, families with children, and the older population. Therefore, the implementation of universal design principles by hospitality and tourism operators, can

help provide venues for PWDs, families, children, and older people, so they can enjoy time together and have an inclusive experience (Buhalis et al., 2012).

2.4.2 Lack of available information

Another major constraint for PWDs is the lack of accurate and reliable information about access needs in hospitality and tourism organisations. Research suggests that PWDs often tend to abandon travel plans because of the unavailability of reliable and accurate information (Buhalis and Darcy, 2011). This is mainly because PWDs require a high degree of pre-planning in terms of reaching their destination, returning home, moving about at the location, and sourcing the availability of accessible facilities (Shaw and Veitch, 2011; Shaw and Veitch, 2004). According to Darcy (2010), Buhalis and Darcy (2011) and Darcy (2010), the tourism and hospitality industry is inadequate for PWDs in terms of general availability of information, lack of detailed and accurate information, and the formats and presentation of accessible information.

Accessible web design is the designing of web pages in order to facilitate easier usage by PWDs, so they can access information online independently, without requiring additional help (Puhretmair and Nussbaum, 2011). This involves the designing of webpages such that they can cope with the various handling and presentation options that are needed for the different assistive technologies used by PWDs (Puhretmair and Nussbaum, 2011). While accessing online information, people with varying disabilities such as hearing, motor, sensory, and cognitive impairments make use of assistive technologies such as screen readers, voice recognition, pointing devices, alternative keyboards, and refreshable Braille displays (Paciello, 2000). Hence while using a computer, PWDs use assistive technologies to facilitate input or enhance output and also to the bridge the gap between standard user interface and the user's ability to interact (Puhretmair and Nussbaum, 2011). PWDs rely on these assistive technologies to operate the computer, control software or to navigate on the internet (Puhretmair and Nussbaum, 2011).

The assistive technologies used by PWDs vary according to their needs and abilities. For example, people with visual impairments use Braille displays with audio output, which uses screen reading software. The screen reading software verbalises the content of the graphic user interface into text, plain text, buttons, lists, and menus, and makes it readable for people with visual impairments (Puhretmair and Nussbaum, 2011). Even though assistive technologies are being used by PWDs, most websites are not compatible to work with such devices (Puhretmair and Nussbaum, 2011). Hence, Puhretmair and Nussbaum

(2011) have suggested that organisations should focus on accessible webpages that are robust enough to be able to work with current and future technologies. For a website to be accessible, it should allow the use of all these assistive technologies so that PWDs can access online information without difficulty. However, (Darcy, 2010; S. E. Kim and Lehto, 2012; Williams et al., 2006) confirmed that online information on the websites of most tourism and hospitality organisations, are still not completely accessible for PWDs.

Along with the lack of accurate and reliable information, the inaccessibility of websites is a major barrier for PWDs (Pühretmair, 2004). Furthermore, Puhretmair and Nussbaum (2011) stated that webpages with low colour contrast, rich graphics, animations, pop-ups, are examples of inaccessible web design. On their websites, tourism and hospitality operators can provide images, video, maps, and street views of their locations to improve the accuracy of information available for PWDs so they can independently make informed decisions about whether they can access a particular place (Darcy, 2002; Pühretmair, 2004). Therefore, the successful marketing of accessible facilities is important on websites so they communicate this information to PWDs, who need this before visiting many tourism and hospitality establishments (Pühretmair, 2004).

Tourists with disabilities search for information that fits their requirements, so the higher the accessibility requirements, the more comprehensive the information that is required (Bowtell, 2015; Pühretmair and Miesenberger, 2006). Many hotels and restaurants use a wheelchair symbol, claiming to offer services to PWDs, but specific details are rarely provided (Bowtell, 2015). Misleading and missing information about accessibility is a major reason many tourists with disabilities do not travel, but choose alternate leisure activities (Michopoulou et al., 2015). Furthermore, PWDs use the Internet more than those without disabilities, to search for accessible information, but most abandon their travel plans due to badly designed and inaccessible web pages (Pühretmair and Nussbaum, 2011). Darcy (2010) recommended that hospitality organisations provide accurate and detailed information in an appropriate format so that someone with a disability can themselves determine the realistic offerings of accessibility at a particular facility. This is important, as it can prevent a prospective visitor from having unrealistic expectations due to a lack of accurate information (Darcy, 2010). Kim and Lehto (2012) have also confirmed that PWDs rely strongly on information available on the websites of restaurants and hotels and search for photos/ videos to access the real conditions before visiting.

2.4.3 Social barriers

Even through the social model of disability indicates an inclusive environment absent of social and environmental barriers, most tourism and hospitality organisations have not properly incorporated the concepts in this model (Daruwalla and Darcy, 2005; Horgan-Jones and Ringaert, 2001). The attitudes of people, and the way disability is perceived, is a major problem for PWDs (Horgan-Jones and Ringaert, 2001). Social barriers in terms of negative and condescending attitudes by tourism and hospitality staff coupled with their lack of knowledge in dealing with PWDs and assumptions about so-called 'professional standards' of hospitality, are major barriers faced by PWDs (Daruwalla and Darcy, 2005; McIntosh and Harris, 2018, p. 155). It is therefore not easy for PWDs to take part in tourism and hospitality activities, as they are often marginalised and face political, social, cultural, and financial barriers that oppress, disfranchise, and exclude them (Titchkosky, 2003, 2011).

Negative types of social interactions are powerful, and often the reasons PWDs experience discrimination, misidentification, stereotyping, and ignorance (Daruwalla and Darcy, 2005; Jaeger and Bowman, 2005). Due to a lack of information on the accessible market, negative assumptions such as that the accessible market is small, or that PWDs do not want leisure activities, or that accessible facilities are expensive, has resulted in a social stigma that prevents industry operators from acknowledging the access market (Darcy, 2010; Darcy and Buhalis, 2011; Darcy and Daruwalla, 1999). Gillovic and McIntosh (2015) stated that hospitality and tourism organisations provide minimal attention to legislature, provision of access facilities, education, and training, in order to serve access-dependent visitors.

A review of the literature shows other major barriers faced by PWDs, such as attitudinal barriers, especially in terms of linguistic oppression (Corker, 2000 p. 447; Daruwalla and Darcy, 2005). A major barrier is caused by hostile attitudes, manifesting in derogatory labelling and stigmas in language used to refer to PWDs (Jaeger and Bowman, 2005; McIntosh, 2020; Susman, 1994; Titchkosky, 2003). According to Daniels et al. (2005), another constraint faced by a PWDs is that of having a travel companion. Many PWDs rely on a travel companion for assistance with participation in activities. Interestingly, the literature also affirms that this should be seen as a strength of the access market – i.e., that the market is sizable (Bowtell, 2015; Yau et al., 2004).

Service failure is commonly considered as a mistake, problem, or error, that occurs in the delivery of a service (Colgate and Norris, 2001). The literature reveals that PWDs face interpersonal service provider constraints, mainly because of condescending and negative attitudes of staff, their lack of awareness of accessible facilities, and misleading information (Burnett and Baker, 2001; Darcy and Pegg, 2011b; Michopoulou et al., 2015). Most service providers show an aversion to communicate with PWDs and often avoid communication or address their companion instead (Ditlevsen, 2012; Ross, 2004). The accumulation of all these constraints together prevents PWDs from having a joyful tourism experience (Darcy and Daruwalla, 1999).

The literature also suggests that PWDs not only face social and attitudinal barriers as customers, but also when seeking work in the hospitality industry. Research by Gröschl, (2004, 2007, 2013) and Kalargyrou and Volis, (2014) confirmed that most tourism and hospitality operators are reluctant to hire PWDs because of concerns, such as thinking they need to make modifications to the workplace, accommodation costs, quality of service, and a general lack of familiarity in dealing with PWDs. It was also found that organisations refrain from hiring PWDs because of concerns around the perceived need for constant monitoring, rigorous hours of training, the inability of PWDs to multi-task, and their lack of physical attractiveness. Adding to this, Donnelly and Joseph (2012) and Houtenville and Kalargyrou (2011) found further challenges faced by PWDs as hospitality employees, which included concerns about worker compensation insurance premiums and heath care coverage, limited human resources for dealing with PWDs, transport issues, and managerial uncertainty about managing and evaluating PWDs.

Clearly, a shift from the medical model to the social model is not enough. Personal contact with PWDs as customers or employees needs to be better enforced by tourism and hospitality organisations to develop understandings and eradicate the barriers faced by PWDs, thus providing a more inclusive environment (Buhalis et al., 2012).

2.5 Reasons to acknowledge the access market

PWDs represent a largely mistaken and marginalised segment of the global tourism industry (Schitko et al., 2009). Myths about PWDs have caused negative perceptions about the access market, as a result of which, most industry operators consider this segment as a weak source of profit and unworthy of investing effort into (Robinson et al., 2007). This is the main reason most industry operators have not yet acknowledged the access market. However these myths have been proven wrong, as it was revealed by

Bowtell (2015) that PWDs tend to take longer holidays than able-bodied people (Neumann and Reuber, 2004). It was also found that PWDs have high spending potential and tend to spend more money than able-bodied tourists on their holidays (Horgan-Jones and Ringaert, 2001; Van Horn, 2002, 2007). Yau et al. (2004) observed that tourists with disabilities have the potential to generate billions of dollars in revenue, as their spending is greatly multiplied because most PWDs do not travel alone, but with a travel companion, friend, or family member (Bowtell, 2015). The Global Economics of Disability (2013) study showed that the size of the global access market was around 2.2 billion people in 2012, and along with their travel companions, contributed to around USD 8 million in annual disposable income. A Deloitte report (2002) stated that the total market value of the access market was expected to increase by 65% from 2005 to 2025, from €53.5 billion to €88.6 billion. This proves the sizeable spending potential of the access market (Van Horn, 2002).

Kalargyrou and Volis (2014) aimed to identify hospitality leaders who include PWDs in their workforces, and the related benefits and challenges. Their study focused on best practices around the initiation of disability inclusion and why it was important. The inclusion of employees with disabilities in the hospitality industry is beneficial, as they can more easily recognise and react to the needs and requirements of people similar to themselves, helping them to empathise and relate to the needs of other PWDs (Houtenville and Kalargyrou, 2011) and provide authentic service (McIntosh and Harris, 2018). Houtenville and Kalargyrou (2011) also confirmed that hiring PWDs contributes towards improving the ability of an organisation to compete in all markets, and react to the expectations of diverse consumers. Their research found that employees with disabilities helped to positively change a workplace, as they tend to set a barrier-free environment. They also found that employing PWDs resulted in increased revenue, as guests preferred integrated hotels and restaurants because of their barrier-free and non-judgmental environment and facilities (Houtenville and Kalargyrou, 2011; Gröschl, 2013; Kalargyrou and Volis, 2014). Research by Houtenville and Kalargyrou (2011), Gröschl (2013) and Kalargyrou and Volis (2014) also confirmed that as PWDs have limited options when choosing tourism and hospitality products, it is important to acknowledge the access market because PWDs become disproportionately loyal. They often return to hotels or restaurants that best serve their needs, providing positive experiences (Poria et al., 2011) and good accessibility (Turco et al. 1998).

Although previous literature has confirmed that the access market is largely untapped, the afore-mentioned reasons show there is scope for development and reasons to acknowledge this relatively new and growing market.

2.6 Improving accessibility in restaurants

A review of literature revealed that even though most of the previous hospitality literature focussed on improving accessibility of hospitality organisations, most of the extant research investigates improper hotel infrastructure, bathroom facilities, service failures, and a lack of knowledge among industry workers in dealing with PWDs (Bowtell, 2015; Buhalis et al., 2012; Buhalis and Darcy, 2011; Burnett and Baker, 2001; Colgate and Norris, 2001; Darcy and Dickson, 2009; Darcy and Pegg, 2011b; W. G. Kim et al., 2012; Menzel Baker Stacey et al., 2007; Michopoulou et al., 2015; Ostroff, 2011; Pierce, 1998; Tutuncu, 2017). Despite a focus on accessible hotel accommodation, there remains uncertainty about whether or not other areas of a hotel are accessible for PWDs, for example, the restaurant. Therefore, despite the growing attention to disability in hospitality research, a review of the literature reveals that guidance about best practice in accessible hotels restaurants is minimal. Table 2 summarises the hospitality literature and shows various methods of improving accessibility in hotel restaurants for people with different disability types. The literature mentioned in Table 2 covers accessibility of hotel restaurants as well as dining establishments not connected to hotels. The data are categorised according to the basis of disability type and corresponding practical recommendations, with reference to the researchers. This serves as a useful initial resource for researchers wishing to source studies on accessibility in restaurants.

Table 2 *Summary of Studies to Improve Accessibility in Hotel Restaurants*

Disability type- Mobility	
Author	**Recommendations**
Poria et al. (2011)	Provision of mobility aids in restaurants
de Faria et al. (2012); Linderová (2015) & Poria et al. (2011)	Presence of ramps
Linderová (2015) & Poria et al. (2011)	Broader parking spaces to facilitate easy movement in and out of vehicle

Disability type- Mobility	
Author	**Recommendations**
Linderová (2015)	Broader aisles with re-arrangement of furniture for easy movement in the restaurant
Linderová, (2015) & Poria et al. (2011)	Elevator buttons should not be high
de Faria et al. (2012); Domínguez Vila et al. (2015); Kim and Lehto (2012) & Linderová (2015)	More information about building layout on websites and promotional material
de Faria et al. (2012); Domínguez Vila et al. (2015); Kim and Lehto, (2012) & Linderová (2015)	Staff training
Disability type- Visual	
Author	**Recommendations**
de Faria et al. (2012); Linderová (2015) & Poria et al. (2011)	Print menu in large font and have Braille version
de Faria et al. (2012) & Linderová (2015)	Menu should be read out by waiter
de Faria et al. (2012)	Button on table to summon waiters
Linderová, (2015) & Poria et al. (2011)	Personal service for buffets
de Faria et al. (2012); Linderová (2015) & Poria et al. (2011)	Allow service dogs in restaurants
de Faria et al. (2012); Domínguez Vila et al. (2015); Kim and Lehto, (2012) & Linderová (2015)	Staff training

Disability type- Hearing	
Author	**Recommendations**
Linderová (2015) and Poria et al. (2011)	Staff who know sign language

It is evident that research on accessibility for PWDs in hotels and restaurants is piecemeal; however, the studies that are most informative are included in Table 2. These studies can reveal best practice for making hotel restaurants more accessible. Linderová, (2015) checked the readiness of tourism accommodation and restaurants for PWDs in the South Bohemian region. Findings suggested that most tourists with disabilities wanted wider aisles in restaurants and cafes to allow for convenient movement of wheelchairs, and the provision of some tables without fixed seating and a comfortable space for a wheelchair. Other suggestions for improving accessibility in restaurants for visually impaired tourists were to allow service dogs in tourism and catering facilities, provide menus in Braille, and in larger font, and have staff available to read out the menus if required. Another suggestion to improve accessibility for guests with hearing disabilities, was to have a few staff members trained in sign language for better communication with guests.

Poria et al. (2011) conducted an exploratory study to find out the challenges faced by guests with mobility and hearing impairments in a hotel environment. It was found that guests with mobility impairments needed wider parking spaces to allow space to get in and out of their vehicles. Provision of mobility aids in restaurants also made access easier for those with mobility impairments. Another suggestion was to place elevator buttons low enough for a person using a wheelchair or crutches to reach. Suggestions to improve accessibility in restaurants for those with visual disabilities, were to have a button for summoning a waiter, and to provide table service when food was served on a buffet, as most guests with visual impairments found it difficult to locate items on a buffet table.

Research by de Faria et al. (2012) aimed to determine the importance of service attributes to visually impaired restaurant guests. Their findings indicated that the ideal accessible restaurant for a person with visual impairments would be one where the menu was read out by a server, service was provided by empathetic servers, bright and ambient lighting,

round tables instead of rectangular, and a button on the table to summon a waiter. A common finding across all the studies suggests there is also a pressing need for information about the physical layouts of hospitality buildings, or accessible facilities available, which should be explained on websites or other promotional materials.

These practical suggestions help to understand needs of people with varying disabilities visiting hotels and restaurants, and show that people with different disabilities have different kinds of needs and requirements. Hence, the studies strongly suggest that as different disability groups have different needs, generalisations for one solution to fix all problems should not be made, as the accessible market is not homogenous. According to the literature, the majority of PWDs have experienced negative staff attitudes and a lack of training as major constraints faced by them. Therefore, education relating to PWDs is important, as short educational programmes targeting employees can help correct negative attitudes towards PWDs (Blichfeldt and Nicolaisen, 2011). It was also recommended for hotels and restaurants to start a forum with their access requiring guests to share their experiences and provide feedback on ways to improve dining experiences for them (Poria et al., 2011).

In this research, objective one sets out to identify the strategies and tactics used by the three case study hotel restaurants considered as champions for accessibility. Strategies are the sum of actions taken to achieve long term goals, whereas tactics are the specific actions undertaken to achieve the strategies (Nayager and Vuuren, 2015). The practical suggestions offered by previous researchers (summarised in Table 2 above) will be compared with the tactics employed by the case study restaurants, and data presented and discussed in the findings and discussions chapter. In order to analyse the rhetoric of accessibility communicated online by the restaurants (see objective two), this research uses analysis methods adapted from the work of Greenwood et al., (2019) to interpret the role of visual rhetoric in organisational communications. The restaurants in this study operate inside a hotel or as a part or product of a hotel and aim to build upon the above literature to shed new light on how the accessibility of hotel restaurants may be improved.

2.7 COVID-19

The COVID-19 environment has severely affected the tourism and hospitality sector (Baum et al., 2020). Even through New Zealand has made a successful response to this virus, many New Zealanders will face significant hardships because of COVID-19 (McIntosh and Wilson, 2020). Hospitality and tourism services not only build

connections between people, but can also create lasting memories. Hence, pubs, cafés, and restaurants serve more than just food and beverages but are also hubs where people can have time and space to socialise together (McIntosh and Wilson, 2020). During lockdowns in New Zealand, many hospitality outlets and restaurants were closed, affecting customers as well as the hospitality workforce (Baum et al., 2020). With international borders also closed, cruise ships were also unable to dock at New Zealand, so with no visitor arrivals, many hospitality organisations lacked sufficient revenue to retain all of their staff (Baum et al., 2020; Manch, 2020; McIntosh and Wilson, 2020). The New Zealand Government provided support to struggling businesses, such as financial supports, wage subsidies, and changes in rules around sick pay entitlements so workers could self-isolate if they were sick, rather than go to work (Baum et al., 2020). Even with government support however, little or no revenue during the COVID-19 period caused many small businesses to close. Larger multi-national companies had a better chance to retain their workforces, although this too was a major challenge, as with poor revenue it became difficult, impractical, and nearly impossible to continue providing supplemental support to keep their staff on the payroll (Baum et al., 2020). With international borders closed, until situations improve around the world, domestic travel and tourism can help to provide opportunities and support jobs locally within the hospitality and tourism sectors (Baum et al., 2020; McIntosh and Wilson, 2020).

After COVID-19, hospitality will be marketed differently. For example, at the time of writing, New Zealand restaurants and cafés follow the three “Ss” of business at level 2 lockdown: seating patrons separately, one server per table or the use of disposable or chalk menus, and removal of table condiments (i.e. salt and pepper etc.) as in Australia (McIntosh and Wilson, 2020). As the COVID-19 situation improved in New Zealand, hope lies in leaders recognising and providing greater support to the hospitality industry and its workers (Baum et al., 2020; Manch, 2020; McIntosh and Wilson, 2020). The rebuilding of the tourism and hospitality industry post COVID-19 will help provide benefits to more New Zealanders. This will provide an opportunity for the transformation of the industry into a more inclusive, equitable, and moral society, ensuring that all tourism and hospitality destinations and products are accessible to all people, regardless of age, social status, physical limitations and disabilities, and inclusive of friends, families and carers (McIntosh and Wilson, 2020). In this way, New Zealand can lead the world in its hospitality and tourism industry through a focus on inclusion, sustainability, and tourism for all (McIntosh and Wilson, 2020). Above all, there is a greater need to examine

best practice in accessible tourism, especially as it relates to making the dining out experience accessible for PWDs.

2.8 Chapter summary

The literature on accessible tourism has often focused on defining terminology (e.g. Buhalis et al., 2005; Buhalis and Darcy, 2011; Darcy, 1998; Zajadacz, 2015), analysing theoretical approaches (e.g. Buhalis et al., 2005; Buhalis and Darcy, 2011; Darcy, 1998), discussing language associated with disability (e.g. Gillovic and McIntosh, 2015; Jaeger and Bowman, 2005; Susman, 1994; Titchkosky, 2003) and barriers and constraints faced by PWDs (e.g. Bowtell, 2015; Daniels et al., 2005; Darcy and Daruwalla, 1999; Darcy and Pegg, 2011b; Linderová, 2015; McIntosh and Harris, 2018; Michopoulou et al., 2015; Poria et al., 2011; Tutuncu, 2017). An area covered in less detail however, is the accessibility of hotel restaurants. As hotels and restaurants look for their next major growth opportunity, it is evident that a major player in the industry is needed to make the first move to help the accessible market gain pace. However, for this to happen, there needs to be increased awareness, legislation, partnerships and the implementation of universal design principles. This will allow hospitality organisations to grow and benefit from the access market. Consistent with the aim of this research, it is important to find industry leaders in accessibility and analyse the strategies and tactics used by them, to examine how effective they are in communicating their messages around accessibility to persuade others of the need for social change.

Chapter 3 – Methodology

3.1 Introduction

The purpose of this chapter is to explain the methodological approaches that informed the research design, and methods implemented to collect, analyse and interpret the data. It starts by explaining the research paradigm employed. Following that, the case study method is explained, with a description of the sampling criteria and procedure, and a brief overview of the cases. Next, the three phase methodology employed for the study is discussed, and categorical, content analysis, and rhetorical analysis procedures explained. Lastly, the advantages and limitations of the methodology are reviewed.

3.2 Research paradigm

This research is an exploratory study using qualitative methods with an interpretivist paradigm. Interpretivism allows researchers to construct reality socially, which allows them to interpret data from diverse sources and contexts to add new or overlooked meanings to existing understandings (Gray, 2013).

3.3 Case study method

A case study method is employed in this research; this method is a research strategy and empirical enquiry that investigates a phenomenon within its real life context (Stake, 2013). A case study is often a descriptive and exploratory analysis of a person, group, organisation, or event, that is studied holistically by one or more methods (Gerring, 2004). In this study, the case study analysis, with the lens of an interpretivist paradigm, is appropriate for exploring the cases. Case study methods include gathering information systematically so the researcher can understand how a particular person, group, organisation, or event, functions or operates (Stake, 2013). Similarly, case studies of organisations include the systematic gathering of information of the organisation or group of organisations, so the researcher can understand the operations and overall objectives of the organisation(s) (Stake, 2013). Through a case study of an organisation, a researcher can analyse how decisions are made in the organisation, and how different communication networks are used, along with attitudes and motivators that affect organisational settings (Stake, 2013). Thus, the case study method can be used to analyse the website communications of hotels in relation to communicating strategies and tactics for accessibility.

The criteria used to select the cases were:

1) Website communications (text, images, quotes/company statements) about the organisation's rhetoric around accessibility.
2) Availability of accessible facilities in the hotels' restaurants and/or in-house dining facilities to meet the needs of access customers.
3) Inclusion of PWDs in their workforce.

3.4 Sampling procedure

Three cases were chosen after an extensive search on web browsers such as Google Chrome and Mozilla Firefox, using keywords such as "accessible hotels," "best accessible hotels," "best accessible restaurants", "most accessible hotels", "most accessible restaurants," and "New Zealand". These searches found many hotels and restaurants that offered minimal facilities such as accessible rooms or accessible parking, but none were considered as *champions* of accessibility, as defined by Gillovic and McIntosh (2015), and discussed in chapter 1.2.1. They were therefore rejected because none marketed or advertised accessibility, or mentioned the inclusion of PWDs in their workforces. Therefore, a more refined search was conducted after checking the websites of social change organisations such as Be.Accessible, The Blind Foundation New Zealand and CCS Disability Action New Zealand were also consulted to find which hotel restaurants had been accredited by their organisations in the strategic pursuit of becoming accessible. As a result, the three hotel restaurants that were finally selected were (i) Sudima Hotels, (ii) CQ Hotels, and (iii) The Rydges Auckland Hotel .These cases were chosen because Sudima Hotels and CQ Hotels were noted as champions of accessibility by Be.Accessible, and The Rydges Auckland's dining experience, Dans le Noir (Dining in the Dark) had accreditations from social change organisations such as The Blind Organisation New Zealand and CCS Disability Action New Zealand. The three cases shared the common goal of strategically promoting themselves as accessible hotels. As a researcher, I was interested in understanding the dining experience in hotels for PWDs, however, from the review of literature, it was evident that there was plenty of research on accessibility of hotels and accommodation, but not so much on restaurants (see chapter 2). Also, because of the lack of published resources on accessible dining, I had insufficient information to understand the accessibility of cafes, pubs, and restaurants more generally. A thorough review of literature showed the most visible sample was that of hotel

restaurants, and whilst there was a lot written about accommodation, there was less research on the dining elements of restaurants in hotels.

A search for social change organisations was pertinent to helping select the three cases in this study. Be.Accessible is a social change organisation in New Zealand promoting the shift to New Zealand being a more accessible country, and was recently renamed as "Be.lab." Be.Lab is a platform where people can interact and create the most accessible environment imaginable, both individually and collectively (Be. Lab, 2019). Its website provides forums about accessibility, and ways to improve accessibility in public spaces, transport, hotels and restaurants.

The CCS Disability Action group is the largest pan-disability support and advocacy organisation in New Zealand. The primary vision of this social change organisation is the inclusion of PWDs as well as providing support and advocacy while attempting to shape societal attitudes towards PWDs (CCS Disability Action, 2019).

The Blind Foundation is a social support group who are the main providers of services and facilities for people with visual impairments in New Zealand. The foundation recently changed its name to the "Blind and Low Vision NZ." It provides emotional and practical support for more than 12,000 New Zealanders with some kind of visual disability. The main focus and primary vision of the organisation is to help New Zealand develop a more inclusive environment as well as provide assistance and proper advocacy to people with visual disabilities (Blind Low Vision NZ, 2019).

3.5 Case studies

3.5.1 Sudima Hotels

Sudima Hotels New Zealand is passionate about delivering and promoting environmentally friendly and accessible hotels in its six properties around New Zealand (Sudima Hotels, 2019).The Sudima chain was first introduced in 2001, when the founder Sudesh Jhunjunwala bought the Christchurch Airport hotel and a hotel in Rotorua. The Sudima chain is owned by Hind Properties, which manages Jhunjunwala's commercial properties in New Zealand. At the time of writing, the chain had six operational hotels and two projected to open in Auckland City and Kaikoura by late 2020. Other expansion plans include new properties in Sydney, Melbourne, and Fiji. The hotel chain has been given multiple accreditations such as the country's most prestigious tourism award – the Tourism industry's "Air New Zealand Supreme Tourism Award." The chain has also

been awarded the “Enviro-Mark Solutions Environmental Award” as well as being awarded gold in the 2019 “Tourism Talent Employer of Choice Award,” and praised for diversity and inclusion. Sudima Hotels works closely with disability organisations such as Be.Accessible to improve the accessibility of its properties, and has been identified as operating the most accessible hotel in the Australia-Asia region (Sudima Hotels, 2019). All properties have been ranked bronze to gold in terms of accessibility, while aiming for platinum ratings for their new properties. The company has developed multiple programmes implementing inclusivity and acceptance of PWDs and other disadvantaged groups in society (Sudima Hotels, 2019). Sudima Hotels’ management understands the importance of providing access for all, and aims at providing an environment without discrimination so everyone can feel at home, relax, and be themselves (Sudima Hotels, 2019). Another interesting fact about this chain is that it understands that different disabilities require different requirements, as a result of which it has designed its products and services for a range of abilities. Instead of thinking in terms of disability, its management thinks about the ways in which PWDs use products and services (Sudima Hotels, 2019), and consults accessibility experts to test and refine best practice ideas to provide access for all. Examples of accessible facilities provided by Sudima include its K9 working dog package, visual and audio doorbells, and vibrating alarms.

Sudima Hotels offers the Visaya Restaurant and bar at its Auckland airport hotel, Okareka restaurant and bar at its Rotorua hotel, the Vices and Virtues restaurant and bar at its Christchurch hotel, and The Restaurant, lobby bar and rooftop bar in Auckland city. All restaurants are claimed by Sudima Hotels to be fully accessible. Provision of Braille menus and the availability of mobility aids are some examples of accessible facilities offered in its restaurants. For the purposes of this study, the accessible facilities offered in all these restaurants will be considered. Sudima Hotels strive to be industry leaders in social and environmental responsibility (Sudima Hotels, 2019).

3.5.2 CQ Hotels

CQ Hotels Wellington is a Qualmark rated 4-star plus hotel in Wellington, and is fully accessible to guests with all kinds of disability (CQ Hotels Wellington, 2019). CQ Hotels were given a gold award by Be.Accessible for its accessible facilities. CQ Hotels are owned by the Singaporean Naumi Hotel group. They have nine accessible rooms and provide a wide range of facilities such as accessible restaurants and bar areas, specially trained staff for PWDs’ evacuation, accessible car parks and ramps, availability of

mobility scooters and so forth. CQ focuses on providing the highest possible standards to its guests. The CQ group was the winner of the "Attitude ACC (Accident Compensation Commission) Employer Award" in 2015 because it employs staff with disabilities. The primary vision of the CQ group is to make everything as easy as possible for PWDs, from the planning phase to the end of their stay (CQ Hotels Wellington, 2019).

CQ Hotels offers two establishments: the CQ restaurant and bar and the CQ café. These two dining establishments within CQ Hotels are claimed to be fully accessible. CQ has won multiple awards for accessibility as it was the first in New Zealand to introduce Braille and sign language menus (CQ Hotels Wellington, 2019). Other accessible facilities offered are its staff that can use sign language, and it provides facilities especially for access customers.

3.5.3 The Rydges Hotel Auckland

The Rydges Hotel and resorts is an accommodation provider that operates primarily in Australia, New Zealand, and England. The Rydges Hotels group is owned by the Event Hospitality and Entertainment group that mainly owns and operates brands in entertainment, leisure, and hospitality. The group operates 41 properties with 7,400 rooms across six countries. The Rydges Hotel in Auckland is a 267-room property with a 4.5 star rating. It is a contemporary styled hotel in the heart of Auckland's central business district (CBD), which is ideal for business and leisure guests.

The Rydges Auckland offers four establishments: The Cut Restaurant, The Cut bar, The Rimu room, and Dans le Noir? (Dining in the dark). For this research, only Dans le Noir? will be considered, because there is no mention of accessibility efforts or accessible facilities offered in Rydges' other dining establishments in Auckland.

3.5.4 Dans le noir? (Dining in the dark) Auckland

This restaurant chain owned by the Ethik Investment Group, was founded by Edouard de Broglie in 2003. Dans le Noir? is French for "in the dark". The chain uses a unique concept in which guests are served in darkness, a concept known as "blind dining." Dans le Noir? claims that by limiting the sense of sight, other senses are intensified, as well as relationships between people. The diners are served by staff who are blind or have visual impairments. Nearly half of the staff of Dans le Noir's brand has a disability (Rydges Hotels, 2019). Dining in the dark experience became widely popular, and Dans le Noir? expanded around the world with permanent restaurants in London, Barcelona, St

Petersburg, and Auckland, along with pop-up restaurants in Bangkok, New York, Riyadh, Nairobi, Geneva, and Warsaw. Dans Le Noir? has become disabilities' largest positive awareness experience in Europe and a profitable and independent company since 2004 (Rydges Hotels, 2019). Only in Auckland, is Dans le Noir? associated with the The Rydges Hotel, where it functions as one of the hotel's restaurants. Elsewhere, Dans le Noir? functions as an independent brand in all of its restaurants and pop-ups globally.

3.6 Data analysis

This study follows the data analysis process employed by Greenwood et al. (2019). Whilst their study focused on presenting a methodology that scholars could use to analyse, explain, and critically interpret the role of visual rhetoric in organisational communications, it has the same purpose of understanding the effectiveness of organisational communication for social change in this study. Through their research, using a three phase methodology, Greenwood et al. (2009) analysed, explained, and critically interpreted the role of visual rhetoric in organisational communications. As this research analyses the website communications of the three selected cases, this methodology is well suited to gather and analyse data. The three phase methodology employed by Greenwood et al. (2019) can be used to analyse the various visual elements of websites (text, photographs, text in relation to images, quotes/company statements, typography, and layout). The three phases in the methodology are as follows-

Phase 1: Categorical analysis – categorisation against visual categories across the whole website.

Phase 2: **Content analysis** – description of visual phenomenon across the entire website.

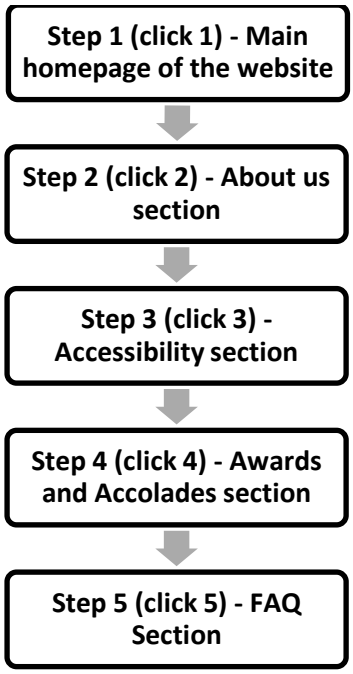
Phase 3: Rhetorical analysis – rhetorical analysis of connotative content in a context of shared cultural understandings across visual elements of the website.

Overall the first phase - categorical analysis - provides an overview of the visual design elements and provides first order meanings. The second phase - content analysis - is used to provide descriptive meanings of the content and abstract explanations of the social world, thus providing second order meanings. The third phase - rhetorical analysis - uses Phase 1 and Phase 2 data to provide a more critical view of the first and second order meanings of visual design elements, not only in relation to each other, but also in the

context of specific organisational settings, the research question, and the researcher (Greenwood et al., 2019).

This three phase methodology was considered most apt, although discourse analysis was also considered as an alternative. Discourse analysis is useful for the analysis of language and patterns of language across texts, as well as the social and cultural contexts in which the texts occur (Brown et al., 1983). However, discourse analysis was less relevant for this study because the aim was not about understanding the meaning of language or patterns of words in websites, but to find the strategies and tactics and rhetoric of accessibility communicated in the websites of the three cases. Hence, categorical analysis was selected to count frequencies and categorise visual design elements on the websites. Content analysis was used as a lens to look at content about strategies and tactics common to the three cases, and rhetorical analysis is used to analyse the rhetoric of accessibility and commonality of themes communicated online by the three cases (following Greenwood et al., (2019)).

The following systematic procedure was used to scroll through the websites of the three cases to collect data for analysis. The same steps were carried across all the three phases. The data analysis process was conducted over two months from May to July 2020.



Only information relating to accessibility and inclusion of staff with disabilities was selected from the webpages after following the step by step procedure outlined. The analysis of the webpages was undertaken online instead of downloading the webpage

content for analysis. For Sudima and CQ Hotels, after following the five click procedure, five pages relating to accessibility were identified for analysis. However, the website for Rydges Hotel and Dans le Noir? was different, and after following the five click procedure, three pages relating to accessibility were available for analysis.

3.6.1 Categorical analysis

Using categorical analysis, researchers can explain and describe a picture of the entire document under analysis (Greenwood et al., 2019). Categorical analysis involves the counting of the number of occurrences of a visual element in a document. Categorisation can be done on the basis of size, semiotic element, or compositional features (e.g., colour or angle) (Ditlevsen, 2012). Categorical analysis was used to provide an overview of the visual design elements across the websites of the three cases. It was also used to count the frequency of visual design elements relating to accessibility, which were then further categorised as

1) Photographic and non-photographic images;
2) Visual design in terms of colour and layout;
3) Overall website structure; and
4) Use of persuasive language

3.6.2 Content analysis

Content analysis is used to study items of social communication, such as written documents, transcriptions of verbal communication, newspapers, books, journals, and websites (Berg and Lune, 2017). Content analysis as explained by Holsti (1969), is the objective and systematic identification of special characteristics of messages. For the objective analysis of content conveyed through different forms of social communication, a set of criteria is established for the analysis process (Greenwood et al., 2019). Once the content has been segregated into appropriate criteria, literal words in the text, or the way those words were offered, can also be analysed (Greenwood et al., 2019; Holsti, 1969). Counts of textual elements provide a way to index, organise, identify, and retrieve data (Holsti, 1969). Content analysis therefore offers good access to words of text or transcribed accounts offered by the subjects of the research (Berg and Lune, 2017). Content analysis also offers researchers the opportunity to understand how subjects or authors of the textual materials view their social world (Berg and Lune, 2017).

Content analysis was used in this study to systematically categorise and reduce the data from the websites down to common themes (Greenwood et al., 2019). A theme is a major or recurring subject, topic, or idea that appears in the data (Ryan and Bernard, 2000). A dominant theme normally portrays what the work is all about, which helps in forming insights and analysis (Ryan and Bernard, 2000). Key categories and themes derived from content analysis are presented in the following chapter. Content analysis was used to analyse the content on the websites to identify the strategies and tactics employed by the three cases, all of whom were considered as champions of accessibility, thus meeting the first objective of the study.

The dominant themes analysed from the websites and considered to be strategies employed by the cases in the study were as follows:

1) Accreditations with social change organisations;
2) Inclusion of PWDs in the workforce

The analysis of the content of these themes is presented in the findings chapter.

The accessible facilities offered in the hotels' rooms, public areas, and restaurants were considered as tactics employed by the three cases. A table of tactics presenting the accessible facilities offered, along with the commonalities of these facilities, is presented in the following chapter. The content analysis in this study provided a descriptive meaning of the various visual design elements.

3.6.3 Rhetorical analysis

Rhetorical analysis focuses on analysing and identifying the way in which a text communicates, what strategies it employs to connect with its audience, what claims are being made, and if it persuades the audience to accept the claim (Bazerman and Prior, 2004). Using rhetorical analysis, a researcher can analyse a rhetorician's goals, techniques used, and the effectiveness of those techniques. The researcher does not need to agree or disagree with the argument presented, but just discuss how the rhetorician is making the argument, and whether the approach is successful (Leach, 2000).

Rhetorical analysis was used to provide meaning and identify common themes relating to accessibility and how it was communicated on the websites of the three cases. The themes were identified after reviewing the data from the categorical and content analysis. These themes are supported with company quotes and statements from the websites to help

understand their social meaning and the examples of persuasion that the three cases wanted to communicate to the audience. The key themes identified across the cases are presented in the following chapter. The rhetorical analysis not only provided interpretation of visual design elements in relation to each other, but also in the context of specific organisational settings, the research question, and the researcher (see Greenwood et al., 2019).

3.7 Advantages and limitations in methodology

Advantages of using case studies are (i) to understand the complex inter-relationships between the cases, (ii) to facilitate rich conceptual/theoretical development, and (iii) to explore the unexpected while understanding similarities and differences between the three cases, for example the best practices in common (Hodkinson and Hodkinson, 2001). Deriving common best practices for accessibility in hotel restaurant design and service can lend support to others to follow those practices, as well as provide essential information for PWDs to break social barriers (see chapter 2). Some limitations of case study methods identified by Hodkinson and Hodkinson (2001) are that (i) there is no simple check-list of criteria against which the validity of the case study research can be judged, and (ii) there may be issues of generalisability due to the small sample size. Thus, the conclusions of this research cannot be generalised.

According to Greenwood et al., (2019), individually, the categorical and content analyses are limited in their ability to critically examine and explain the rhetorical use and ideological aspects of visual design. However, this was overcome in this study, because all three phases together contribute to understanding overall meaning and messages communicated online by the three cases (see Greenwood et al., 2019). The credibility of the interpretivist approach is thus increased by using the three phase methodology.

A further limitation of the three phase methodology in this study was that only two-dimensional organisational communications were considered, and not three-dimensional communications such as social media or other online technologies consisting of videos, moving images, or music. There may also exist other accessibility champions that fell out-with the sampling strategy of this study using hotel website communications only. These are interesting perspectives that can be explored in future research and examined for the way they may champion accessibility.

Chapter 4 – Findings and Discussion

4.1 Chapter introduction

This chapter presents the findings and discussions of the three-phase methodology implemented in this research. The findings of the categorical analysis are explained and discussed, as this was used to explore visual design elements across the websites. Next, the findings of the content analysis are presented along with discussions about the common content of the visual design elements. Thirdly, the findings and discussions in relation to the rhetorical analysis are presented, where the meanings of the visual design elements and commonality of themes between the three cases are presented.

4.2 Categorical analysis findings

A categorical analysis was conducted to explore the visual design elements across the websites of the three cases. As mentioned in the methodology chapter, categorical analysis can be conducted using a wide range of non-exclusive categories related to visual design elements such as frequency, size, colour, orientation, font, or overall content of a website. The categorical analysis was used to provide an overview of the visual design elements across the websites of the three cases. Hence, the categorical analysis was used to count the frequency of visual design elements relating to accessibility across the websites of the three cases, and then further categorised into:

1) Photographic and non-photographic images;

2) Visual design in terms of colour and layout; and

3) Overall website structure;

4) Use of persuasive language

The five click procedure mentioned in the methodology chapter was used on the websites of all three cases to categorise the data.

4.2.1 Photographic and non-photographic images

The use of photographic and non-photographic images (e.g. logos) relating to accessibility across the webpages of the three cases was analysed. As permission to reproduce the images was not obtained, the photos from the website are not presented.

Overall, by exploring the visual design elements in the websites using the five click procedure to scroll through the webpages, it was found that seven non-photographic images and five photographic images relating to accessibility were used on the website of Sudima Hotels. Examples included an image of Braille writing with a hand on it, Be.Accessible logo pictures with ratings for each hotel, and a group photo of Sudima staff members emphasising accessibility. A total of eight non-photographic images and eight photographic images relating to accessibility were used on the website of CQ Hotels. Examples included a picture of the restaurant with a sign language menu on the wall, the accessibility symbol, the Be.Accessible accreditation symbol, a group photo of CQ staff members posing with the 2015 "Attitude ACC Employer Award" for employing PWDs, a picture of the menu in sign language, a map indicating the hotel's location, and a picture of an accessible bathroom, all emphasising accessibility**.** Just two photographic images relating to accessibility were used on the website of Rydges- Dans le Noir?, who used imagery to display pictures of food rather than emphasise accessibility. The two main images used were a map of the restaurant indicating its location, and an image of a group of customers in a line, each with their hand on the shoulder of the person in front of them, being led by a waiter with visual impairments. Rydges- Dans le Noir? also presented non-photographic images of logos of different awards they had won, but information about their awards for accessibility was not provided.

Sudima Hotels portrayed its accessibility message more through text than through images, whereas CQ Hotels used more images than text, as did Rydges- Dans le Noir? However, most of their images were related to food, as previously mentioned.

In comparing the three cases, it was observed that on their website communications, CQ Hotels used more photographic (eleven) and non-photographic images (eight) in relation to accessibility, compared to Sudima Hotels, who used five photographic and seven non-photographic images, and Rydges- Dans le Noir? who had just two photographic images relating to accessibility. Thus, whilst photographic and non-photographic images were used to communicate accessibility, use of such images varied across the cases.

4.2.2 Visual design in terms of colour and layout

Next in the categorical analysis, the visual design of the websites of the three cases in terms of colour and layout, was observed.

The main combinations of colour contrast observed on the website of Sudima Hotels, were white-black and black-gold. For example, Sudima's main homepage had a black and white contrast with a black font against a white background. The main "room booking" and "find availability" tabs were at the top of the page with black and gold contrast, using a background of gold and black font. This tab remained fixed through the subsequent clicks and webpages of the website. Similarly, on the website of Rydges-Dans le Noir? it was observed that the main themes of colour were white-black and black-gold. The main homepage had black, gold, and white contrast, with a mainly white font and contrasting colours of black and gold. While analysing the website of CQ Hotels, colour contrasts observed were white-black with combinations of grey. The main homepage of the website was in a white and black contrast with white background and black font. The webpage also used combinations of grey. On the top right corner of the main booking bar, an icon indicated "AA," which when pressed, increased the font of the entire webpage. This icon was displayed on all the webpages of the website.

Therefore, the analysis of the visual design of the websites in terms of colour in the three cases, showed that all three cases used a high colour contrast for accessibility such as white and black, with minimal use of colour, such as gold in the case of Sudima Hotels and Rydges- Dans le Noir?, and grey in the case of CQ Hotels.

4.2.3 Overall website structure

In relation to accessibility, and in order to analyse the number of clicks or pages required to reach accessibility information on the websites, it was found that for Sudima Hotels it took a minimum of three clicks, or pages, to reach the main accessibility page (step 3- click 3), with further information on the hotel's accessible facilities. However, for CQ Hotels and Rydges- Dans le Noir?, it took a minimum of two clicks or pages to reach the main accessibility page (step 3- click 3) with further information on accessible facilities of the hotel/restaurant.

It was also observed that all three cases had a main central tab on the top of their main webpages, which contained links to subsequent webpages. This main tab remained fixed on all the webpages with all the links in the same sequence. The main finding identified across all three cases was that, as such, information on accessibility, across all three cases was not readily available from the main home page, but the central tab for information search was at least clear to the audience.

4.2.4 Use of Persuasive language

A word count on the websites of the three cases revealed that for Sudima Hotels, the words “accessibility” (n=11) and “accessible” (n=21) were used more than words such as “disability” (n=1). Similarly, on the website of CQ Hotels, the word “accessible” (n=10) was also used more than words such as “disability” (n=3). However, the website of Rydges- Dans le Noir? used words such as “blind” (n=11) , “partially sighted people” (n=2), and “visually impaired person” (n=2) more than words such as “accessible” (n=0) and “accessibility” (n=0). As such, the analysis showed two of the cases’ preference for the word “accessibility” rather than “disability”, although the Rydges- Dans le Noir? website not surprisingly most frequently used words relating to visual impairments.

4.2.5 Categorical analysis discussion

The categorical analysis findings showed many similarities in the visual design elements across the websites of the three cases. The use of images indicating accessibility was notable across the website of the three cases. Of the three cases, CQ Hotels used the most imagery (photographic images [n=11], non-photographic images [n=8]) in relation to accessibility, compared to Sudima Hotels (photographic images [n=5], non-photographic images [n=7]) and Rydges- Dans le Noir? (photographic images [n=2]). Determining if one case used more imagery than another was not the objective of the analysis, which was to gain an overall understanding of the effectiveness of their best practice in accessibility. For example, if a new user of a website scrolled down and saw the image of a hand on Braille writing alongside images of Be.Accessible logo, as in the case of Sudima Hotels, or the accessibility symbol on the CQ hotel website, or the image of a people led by a waiter with a visual impairment, as on the Rydges- Dans le Noir? website, these would provide helpful indicators of accessibility. The use of such imagery by these champions of accessibility is commented on in the literature, that suggests that PWDs are strongly reliant on website images to provide information before they travel to a particular place (e.g. Darcy, 2010; Kim and Lehto, 2012; Puhretmair and Nussbaum, 2011).

It was further observed that all the cases used a high colour contrast combination on their website communications. All used black and white contrast with minimal use of colour such as gold (in the case of Sudima and Rydges- Dans le Noir?) and grey (in the case of CQ Hotels). The use of highly contrasting colours in the display of content is

not surprising, as visual impairment is a notable form of disability, and the literature has shown that high contrast colours in visual design of websites are the most accessible for people with visual impairments (e.g. Michalska et al., 2014; Puhretmair and Nussbaum, 2011). Furthermore, the literature also confirms that as people with visual impairments use assistive technologies to interpret data on a computer, information presented in black and white is the most visible and accessible (Michalska et al., 2014).

In terms of the overall website structure and the number of clicks required to reach accessibility information, the findings showed that for Sudima Hotels, it took a minimum of three clicks or pages to reach the main accessibility page (step 3- click 3) with further information on accessible facilities, whereas for CQ Hotels and Rydges- Dans le Noir?, it took a minimum of two clicks or pages to reach the main accessibility page (step 3- click 3). This was a surprising discovery for organisations wanting to be leaders in accessibility and trying to communicate their messages around accessibility, as they were not making it easy for users to readily reach accessibility information, with three clicks needed for Sudima Hotels' website and two clicks for those of CQ Hotels and Rydges- Dans le Noir? Instead, it would be helpful to display more accessible information on the main webpages to facilitate easier access for PWDs, thereby removing informational barriers, which are a major issue faced by PWDs (Buhalis et al., 2012; Darcy, 1998; Darcy and Buhalis, 2011; Shaw and Veitch, 2011).

It has been proffered that it is ideal for organisations to provide two-step access to information, either in terms of pointers to the entirety of the information, or context-related shortcuts to categorised pieces of information on a website, as this prevents user disorientation among PWDs (Michalska et al., 2014; Puhretmair and Nussbaum, 2011; Halbach, 2010). This advice was followed by CQ Hotels and Rydges- Dans le Noir?, as it took a minimum of two clicks to reach accessible information on their websites, compared to the three click minimum on the website of Sudima Hotels.

The literature on accessible webpages confirms that it is also helpful to PWDs if organisations use a central/main bar on their webpages with all the links to further webpages in one location and in the same sequence (Michalska et al., 2014; Puhretmair and Nussbaum, 2011; Halbach, 2010). Consistent with this, all three cases had a common booking bar on the top of their webpages that had all the links to further webpages, and in the same sequence. According to the literature, this is considered to be accessible web design, as it ensures clear and consistent navigation, because rows of navigational links

are placed in the same location on all webpages and in the same sequence, also preventing user disorientation among PWDs (Michalska et al., 2014; Puhretmair and Nussbaum, 2011). Therefore, the website formats were also considered as a strategy to support accessibility, as this format was evident across all three cases' websites.

Another significant finding of the categorical analysis was the count of words such as "accessible," "accessibility," "access," and "disability" across the websites of the three cases. The count showed that Sudima Hotels ("accessible" [n=11], "accessibility" [n= 21], and "disability" [n= 1]) and CQ Hotels ("accessible" [n=10], and "disability" [n=3]) used words such as "accessible" and "accessibility" more than words such as "disability." However, in the case of Rydges- Dans le Noir? words such as "blind" (n=11) , "partially sighted people" (n=2), "visually impaired person" (n=2) were used more than words such as "accessible" (n=0) and "accessibility" (n=0). The use of words such as "accessible," and "accessibility" rather than words such as "disability" on the websites of Sudima Hotels and CQ Hotels demonstrated their moves to the social model of disability from the medical model, as these two cases referred to the person first and the disability second (see Gillovic et al., 2018; McIntosh and Harris, 2018). This may also not be surprising given the cases' accreditation by the social change organisation Be.Accessible that promote the language of "accessibility" and "possibility" over "disability" in the pursuit of social change (Be. Lab, 2019) .

However this was not the case for Rydges- Dans le Noir? This was surprising, as Rydges- Dans le Noir? employed people with visual impairments, but their website communications did not employ the social model of disability; as words such as "partially sighted person" (n=2) or "visually impaired person" (n=2) on their websites indicated that they still referred to the disability first, and the individual second. Reliance on medical-based terminology can hinder progress for removing the social barriers imposed on PWDs (Oliver, 1995).

4.3 Content analysis findings

Content analysis was used to systematically categorise and reduce the data from the websites of the three cases down to common themes. All textual and pictorial material available with five clicks on the websites was considered for the content analysis. Content analysis was used to analyse the strategies and tactics employed by the three cases, which was the first objective of the study. However, to identify strategies and tactics, it is first important to understand the difference between the two terms.

Organisational strategies are all the actions that an organisation intends to take to achieve its long term goals, whereas tactics are specific actions undertaken to achieve the organisational strategies (Nayager and Vuuren, 2015). A descriptive meaning of the content of the foregoing themes is presented in this section.

4.3.1 Strategies

After analysing the website communications of the three cases, specific dominant themes were identified as common to the three cases. The most common dominant themes across the websites of the cases and considered to be strategies employed by them, were:

1) Accreditations and awards from social change organisations;
2) Inclusion of PWDs in the workforce;

1) Accreditations and Awards

Sudima Hotels work closely with social change organisations such as Be.Accessible to improve the accessibility of their properties. All properties of the Sudima brand have been accredited and ranked by Be.Accessible according to their accessible facilities, and this information is communicated on their website. Of all the hotels, just the Sudima Christchurch City had a platinum rating, which is the highest accessible rating offered by Be.Accessible. The other properties at Auckland Airport, Rotorua, and Christchurch Airport, had gold, bronze, and gold ratings, respectively. Sudima Hotels claim to be the "*first hotel group to prioritise accessibility nationally"*. Over the years, they have won many awards for their efforts in environmental sustainability, accessibility, and inclusion of PWDs in the workforce. A few of their most notable accomplishments are that Sudima Hotels were awarded winners of the "Air New Zealand Supreme Tourism Award," the "Enviro-Mark Solutions Environmental Award" and the "Tourism Talent Employer of Choice Award," in 2019. Sudima Hotels were also finalists in the "Diversity and Inclusion" category of the Human Resources New Zealand awards in 2020.

Similarly, CQ Hotels are also accredited by Be.Accessible, with a gold rating awarded for their accessible facilities. Additionally, the Q hotel has a Qualmark rating of 4.5 stars, whereas the C hotel has a 3.5-star rating. According to CQ Hotels, they were the first hotels to be ranked by the Be.Accessible group, while also claiming to be the "*most accessible hotel in New Zealand"*. CQ Hotels have won multiple awards and accolades over the years. They were awarded the Wellington Gold awards for their investments in people, wellness and human resources in 2016, the BACS "Good Business Egg award"

in 2014, and were finalists in the same category in 2015 and 2016 for their contributions to community health, and connections to local organisations working with PWDs. CQ Hotels were also awarded the "Attitude ACC Employer Award" for the inclusion of PWDs in 2015, and the "New Zealand Sign Language Award" for accessible service in 2016.

Since its opening in 2004, The Rydges Auckland Hotel introduced an unusual concept that became widely popular, Rydges- Dans le Noir? was voted among the top 10 most original restaurants of the world (Dining in the dark ?, 2019). The Rydges Auckland has a Qualmark rating of 4.5 stars, and, globally, Dans le Noir?, as an international restaurant movement, has won multiple awards over the years through its efforts to promote social and human values (Dining in the dark ?, 2019). Some of the global organisation's most notable accomplishments include: being voted among the best restaurants in France, being listed in the *Gault Millau travel guide* 2019, finalist in the "Attitude Award 2018" in the diversity category as well as the "ACC Best Employer Award 2018" for their efforts of inclusion for staff with disabilities. Rydges- Dans le Noir? is associated with many charity groups around the world and claims to donate part of the restaurant's revenue to these charities (Dining in the dark ?, 2019). Rydges- Dans le Noir? was also in association with organisations such as Blind Low Vision NZ and CCS Disability Action NZ to provide jobs for people with visual impairments in New Zealand (Accomnews, 2016). However, this association with access organisations was surprisingly not mentioned on the website of Rydges- Dans le Noir?; instead, most of their visible accreditations were food related, for example, the Maître Restaurateur award, The British Restaurants Awards, and The Best Restaurant Paris award.

2) Inclusion of PWDs in the workforce

Sudima Hotels state on their website that they have many staff with disabilities working in various departments of the different Sudima properties in New Zealand. Sudima Hotels have won multiple awards and been recognised for their efforts in inclusion and as an accessible employer, as mentioned in the previous section. However, there was no mention on the website of the number of staff with disabilities working in their properties. CQ Hotels have also been recognised for the inclusion of disabled staff in their workforce and received numerous accolades over the years, as detailed above. However, there too was no mention on their website of the exact number of staff with disabilities. Rydges- Dans le Noir? was among the first restaurant type in the world to include blind and people with visual impairments into their workforce. According to Rydges- Dans le Noir?, nearly

half their employees worldwide have a disability, and nearly 30 are blind. In the Auckland Rydges hotel branch, the website states that there were six staff members with visual impairments at the time of writing. Rydges- Dans le Noir? also mentioned that people with visual impairments are not just employed as waiters; their CEO (chief executive officer) is also blind**.**

4.3.2 Tactics

As explained earlier, tactics are specific actions taken to achieve organisational strategies (Nayager and Vuuren, 2015). For the purpose of this research, accessible facilities and amenities offered within the rooms and public areas and restaurants are considered as tactics implemented by the three case hotel restaurants.

Table 3 summarises the tactics employed by the three case study restaurants, as well as tactics common to the three cases, as identified on their websites.

The same five click procedure used in the categorical analysis was followed to find accessible features offered in the three cases. If a particular accessible feature was not mentioned on the website, then the cell corresponding to the particular case is left blank in the table. The presence or availability of a particular accessible feature is indicated with a tick (✓). The availability of accessible features is categorised into two sections: 1) hotel rooms and public spaces, and 2) the hotel restaurants. Absence of an accessible feature does not mean necessarily that it is not offered by the hotel, but that the information was not available from the website communication analysis.

Table 3

Tactics Implemented by the Three Case Study Hotel Restaurants

Tactics	Sudima Hotels	CQ Hotels	Rydges-Dans le Noir?
Hotel room and hotel public spaces			
Accessible car parking	✓		
Availability of ramps near hotel lobby	✓		
Availability of mobility aids	✓	✓	
Lowered check-in desks in lobby	✓	✓	
Lifts with tactile and Braille numbering	✓		
Availability of accessible rooms with adjoining rooms if required	✓	✓	

Tactics	Sudima Hotels	CQ Hotels	Rydges-Dans le Noir?
Lowered peep holes in all accessible rooms	✓		
K9 working dog package offered	✓		
Visual and audio doorbells	✓		
Vibrating alarms	✓		
Vibrating pillows	✓	✓	
Flashing lights for people with hearing impairments	✓		
Non-slip floors in all accessible rooms	✓		
Availability of pull-out bed for companions or caregivers		✓	
Availability of voice controlled intelligent assistant in rooms (e.g. Amazon Echo)	✓		
Trained staff for emergency evacuation	✓		
Availability of evacuation chairs	✓	✓	
Wheelchair accessible conference facilities	✓		
Accessible bathrooms in all guest rooms, ground floor, and conference floors	✓		
Hotel information available in Braille	✓		
Accessible common areas such as spa and pool	✓		
Service animals allowed on premises (e.g. guide dogs)	✓	✓	
Restaurants			
Braille menus	✓	✓	
Availability of menu in sign language		✓	
Availability of trained team for general support.	✓		✓
Accessible restaurant and bar areas	✓		
Staff who can speak NZ Sign Language	✓	✓	

Accessible features offered individually by the three cases and commonality among these accessible features are presented in Table 3.

Sudima Hotels

The following information on accessible facilities of the hotel rooms, public spaces, and restaurant, was available from the **Step 3 click 3- Accessible facilities** section of Sudima hotel's website.

1) <u>Hotel rooms and public spaces</u>

Sudima Hotels mentioned numerous accessible features in their rooms such as the options of their K9 working dog package, accessible rooms with adjoining rooms if

required, as well as lowered peep holes in accessible rooms, visual and audio doorbells, vibrating alarms, vibrating pillows, flashing lights for people with hearing impairments, and the availability of a voice controlled intelligent assistant in rooms (e.g. Amazon Echo, a voice controlled hands-free speaker).

In terms of public spaces, Sudima Hotels mentioned the availability of features such as accessible car parking, ramps near the hotel lobby, mobility aids, and wheelchair accessible conference rooms. Sudima Hotels also mentioned that common areas such as the pool and spa were accessible, and that they provide accessible bathrooms in all rooms, as well as on the ground and conference floors. The accessible bathrooms are equipped with anti-slip flooring. For emergencies, the website information showed that Sudima Hotels mentioned that they have a team of trained staff to PWDs and special evacuation chairs. They also have lifts with tactile numbering to make it easier for those with visual impairments and allow service animals on the premises. Hotel compendiums and informational material were available in Braille.

2) Restaurant

Sudima Hotels explained on their website that they provide accessible features such as accessible restaurant and bar areas, Braille menus, staff trained to support PWDs, and staff who can use sign language**.**

CQ Hotels

The following information on accessible facilities of the hotel rooms, public spaces and restaurant, was available from the **Step 2 click 2 - Contact us section** and **Step 3 click 3 - Accessible facilities** section of CQ Hotels' website.

3) Hotel rooms and public spaces

CQ Hotels mentioned the availability of accessible facilities in the rooms such as accessible rooms with adjoining rooms if required, pull-out bed for companions or caregivers, and vibrating pillows in the rooms.

In terms of public spaces, CQ Hotels mentioned the availability of features such as accessible car parking, mobility aids, and lowered check-in desk in the lobby. Furthermore, they noted that service animals are allowed on the premises.

For emergencies, CQ hotel mentioned that they have accessible evacuation chairs to help PWDs.

4) Restaurant

CQ Hotels explained on their website that they provide accessible features such as a menu in Braille as well as in New Zealand Sign Language, and have staff who can use NZ Sign Language.

Rydges- Dans le Noir? (Dining in the dark)

The following information on facilities provided in the hotel was available from the **step 1 click 1 - Main homepage** section on the Rydges Auckland website.

1) Hotel rooms and public spaces

Rydges Hotels mentioned the availability of general facilities such as high-speed internet, conference facilities, laundry service, room service, ensuite rooms, a rooftop restaurant and bar, fully equipped gym, parking facilities and so on, but none of these facilities seemed to focus on or even mention "accessibility". Hence the blanks in Table 3 corresponding to the accessible facilities of Rydges Hotels indicate a lack of information about these facilities on their website.

2) Restaurant

The following information on accessible facilities provided in the restaurant was available from the **step 2 click 2 - About us** section on the Rydges- Dans le Noir? website. Their website mentions the availability of one accessible feature in the restaurant – staff trained to support PWDs.

Commonalities of accessible facilities in hotel rooms and public spaces among the three cases

In terms of hotel rooms and public spaces, Sudima and CQ Hotels had numerous commonalities of accessible facilities and features. Both Sudima and CQ Hotels offered accessible parking, mobility aids, lowered check-in desks in the lobby, accessible rooms with adjoining rooms, vibrating pillows in the rooms, and evacuation chairs for emergencies. Furthermore, both hotels stated that they allowed service animals on the premises. However, as there was no mention of these facilities on the Rydges- Dans le Noir? website, no commonalities of accessible facilities in hotel rooms and public spaces could be observed among all the three cases.

Commonalities of accessible facilities in restaurants among the three cases

The analysis of restaurant facilities in Table 3 shows some commonalities of accessible facilities offered in the restaurants of the three cases; Sudima Hotels and CQ Hotels both offered their menus in Braille and had staff who could use NZ Sign Language.

Sudima Hotels and Rydges- Dans le Noir? had only one accessible feature in common: the availability of staff trained to support PWDs.

It can also be observed from Table 3 that there were no accessible features common to all three cases, as explicitly stated in their website communications. That said, the two of them did have similarities.

4.3.3 Content analysis discussion

After analysing the findings of the content analysis and also taking into account the findings of the categorical analysis, it was apparent from the three cases studied, that in order to be strategic as a champion in the hospitality industry, organisations need to employ strategies such as 1) accreditations and awards from social change organisations, 2) inclusion of PWDs in the workforce, 3) care with language used when referring to PWDs, and 4) the use of imagery.

In terms of accreditation with social change organisations, it was found that all three cases had such accreditations and displayed this information on their websites. For example, two of the three cases (i.e. Sudima and CQ Hotels) used non-photographic images of logos of Be.Accessible accreditations on their websites. Similarly, Rydges- Dans le Noir? indicated their Qualmark rating and accreditations from charitable organisations. This can be considered as a strategy to display accreditations for service reliability, quality, and standards. Displays of logos of these accreditations can help customers better understand the quality of service to expect (Darcy, 2010; Darcy and Buhalis, 2011; Kim and Lehto, 2012; Puhretmair and Nussbaum, 2011). This can help remove an informational barrier for PWDs and make it easier for them to make decisions about visiting a particular place. Another interesting observation from the websites of the three cases was that none of the three cases displayed the “Accessibility Tick” accreditation, which comes from the other main accessibility accreditor in New Zealand. The accessibility tick programme helps New Zealand organisations become more accessible and inclusive of PWDs (Accessibility Tick – Committed to Accessibility, 2020). Considering the three cases are

stated champions of accessibility, the question arises whether it would be beneficial for them to have this accreditation as, well and display it on their website communications?

Another dominant theme identified and mentioned widely across all three cases was the strategy for inclusion of PWDs in the workforce. From the findings, it can be seen that all three cases, through their websites, indicated the inclusion of staff with disabilities. For example, Sudima Hotels displayed awards for their inclusion efforts and pictures of a group of staff holding the award, and CQ Hotels also displayed awards and pictures of their staff with the 2015 ACC awards for inclusion. Rydges- Dans le Noir? also mentioned their inclusion efforts through their awards on their main webpage through text and a picture of a group being led by a waiter with visual impairments. The displays of information about the inclusion of PWDs in the workforces can be considered as strategies, because they indicate that in order to be a champion of accessibility, an inclusive human resources policy is important. Furthermore, the literature suggests that employing PWDs in the workforce is an advantage as it increases revenue of the organisation (Kalargyrou and Volis, 2014). Displays of information about inclusion can be beneficial, as the literature shows that PWDs prefer hotels and restaurants that employ PWDs, as they provide a barrier-free and non-judgemental environment and facilities (Gröschl, 2004, 2007; Kalargyrou and Volis, 2014). The literature also suggests that displays of inclusion activities of an organisation provide a positive social image, improves marketing, and indicates that the organisation is moving towards social sustainability (Gröschl, 2004, 2007; Kalargyrou and Volis, 2014). This is also beneficial, as customers are more likely to have a positive purchase intention and be attracted towards socially sustainable organisations that employ PWDs (Kalargyrou and Volis, 2014). This indicates that these three cases have a strategic advantage over other hotel restaurants.

The other dominant theme noticed across the websites of the three cases was the use of persuasive language. The findings of the categorical analysis showed how two of the three cases (i.e Sudima and CQ Hotels) used the words “accessible” (Sudima Hotels, n=20, CQ Hotels, n=19) and “accessibility” (Sudima Hotels, n=10, CQ Hotels, n=2) more than words such as “disability” (Sudima Hotels, n=1, CQ Hotels, n=2). This indicates the move into the social model of disability and use of person first terminology, focussing on the person rather than the disability. Furthermore, the use of such persuasive language indicated that these organisations were trying to remove the derogatory labelling and

stigmas associated with language referring to PWDs (see Gillovic et al., 2018; Jaeger and Bowman, 2005; McIntosh, 2020; Susman, 1994; Titchkosky, 2003). The literature shows that incorporating person first terminology on websites directly indicates inclusion of PWDs in the tourism industry, providing PWDs with access to the same opportunities and benefits offered to able-bodied people (Benjamin et al., 2020). The National Disability Authority (2019) argued for the implementation of person first terminology when referring to PWDs, either when writing or speaking, because use of outdated, inaccurate, and derogatory words such as " disabled," "cripple," "handicapped," "victim," etc., perpetuate negative stereotypes and attitudes to marginalised groups of people such as PWDs (Benjamin et al., 2020; Gillovic et al., 2018). Instead, the use of person first language on a website, for example, "people with disabilities," and "people who use a wheelchair" etc., emphasises the person first and not the disability, and upholds the dignity, equality, and individuality of PWDs (Benjamin et al., 2020; Gillovic et al., 2018) and can be used as a strategy for social change on website communications.

The next dominant theme identified across the websites of all the three cases was the use of imagery. For example, Sudima Hotels used images of the group photo of staff with awards for inclusion, and the image of a hand on Braille writing, on the accessibility webpage indicated inclusion and accessibility. Similarly, CQ Hotels used images such as the picture of their restaurant with a sign language menu on the wall, indicating 'normalised' accessibility in their restaurant. Rydges- Dans le Noir? also used an image of people being led by a waiter with visual impairments. The use of these images is considered as a strategy, because there is evidenced in the literature that PWDs are highly reliant on websites images for information about an organisation (Buhalis et al., 2012; Darcy and Buhalis, 2011; Kim and Lehto, 2012). The use of such images not only displays information about a product, but also indicates the representation of those who are disadvantaged in society (Benjamin et al., 2020). This is because very rarely PWDs have been indicated or represented in hospitality and tourism promotional material, therefore display of such images with the inclusion of PWDs indicates a positive environment for PWDs whilst indicating representation of these disadvantaged groups (Benjamin et al., 2020).

The content analysis also showed tactics employed by the three cases, through which commonalities could be observed. From the findings, it can be seen that there were many similar tactics in terms of accessible facilities, employed by all three cases.

In terms of hotel rooms and public spaces, Sudima Hotels and CQ Hotels had numerous commonalities of accessible amenities provided. Both Sudima Hotels and CQ Hotels offered accessible parking, mobility aids, lowered check-in desks in the lobby, accessible rooms with adjoining rooms, vibrating pillows, and evacuation chairs for emergencies. Furthermore, both hotels allowed service animals on their premises. However as there was no mention of these features on the Rydges- Dans le Noir? website, no commonalities of accessible facilities in hotel rooms and public spaces could be observed among *all* three cases.

Among the tactics that were common to two cases, it was observed that the provision of mobility aids (see Table 1) was in accordance with the practical recommendations suggested by Poria et al. (2011). Furthermore, Sudima Hotels and CQ Hotels shared another common tactic, which was the presence of ramps in the hotel, an important practical features suggested by de Faria et al. (2012) and Linderová (2015) to improve accessibility for PWDs, especially in restaurants, for those with mobility impairments.

The other common tactic shared by two cases (i.e. Sudima and CQ Hotels) was the provision of menus in Braille. This tactic is in accordance with the practical suggestions made by de Faria et al. (2012), Linderová (2015) and Poria et al. (2011). Offering the menu in Braille demonstrates that these two hotels were making it easier and trying to improve the dining experience for people with visual impairments.

Another common tactic identified in two of the three cases (i.e Sudima Hotels and CQ Hotels) was that both organisations stated on their website communications that service animals were allowed on the premises. This tactic is consistent with the practical recommendations suggested by Linderová (2015) and Poria et al. (2011) in their research, to improve accessibility and hospitality experiences for PWDs. However, in New Zealand, access in the terms of service animals has been legislated. That is, certified service animals can be brought into any public place, including buses, trains and other public transport, and places owned by private businesses such as supermarkets, restaurants and other food outlets, shopping malls, cinemas, motels, and hotels (Dog Control Act, 1996). Even though access of service dogs into hotel restaurants is legislated, Sudima hotels and CQ hotels both explicitly mentioned this information on their wesbites whereas Rydges-Dans le noir? did not. This raising a question regarding the effects of non communication, in terms of whether this deters PWDs from accessing the property.

Another important tactic identified as common to two of the three cases (i.e Sudima and CQ Hotels) was that both mentioned the availability of staff trained to support PWDs. The implementation and website displays of these tactics indicates that both hotels were trying to overcome the interpersonal service-related constraints that PWDs often face in hospitality organisations (Burnett and Baker, 2001; Darcy and Pegg, 2011b; Michopoulou et al., 2015). The literature shows that most PWDs will abandon their plans to visit a hotel or restaurant if they fear a lack of service caused by staff not knowing how to help, or staff lacking awareness of accessible facilities (Buhalis et al., 2012; Burnett and Baker, 2001; Darcy and Buhalis, 2011; Darcy and Pegg, 2011b; Ross, 2004) However, Sudima and CQ Hotels overcame these barriers and tried to improve the dining experiences of PWDs by mentioning this information in their website communications. The implementation of these tactics by the three cases indicates that all cases understood the non-homogenous nature of disability, and were trying to communicate solutions to cater to various guests with diverse disabilities.

Apart from the common tactics identified among the three cases, there were other tactics implemented individually in the cases, that linked to practical suggestions in the research. For example, Sudima Hotels provided a hotel compendium in Braille, a recommendation suggested by several authors (Domínguez Vila et al., 2015; Kim and Lehto, 2012; Linderová, 2015; Poria et al., 2011) for providing information to PWDs about the physical layout of a building. Sudima Hotels also mentioned that they organised regular training for staff members by Be.Accessible, indicating that they focused on constantly improving accessible dining experience for guests, through regular training of their staff.

What was not there?

Table 3 presented above reveals important tactics that are communicated in the three case study websites and their commonalities. What is also surprising about the findings is the number of blank spaces on the table corresponding to differences in tactics communicated given that all three cases are noted champions of accessibility. For example, in the restaurant section in Table 3, it can be seen that Rydges- Dans le Noir? did not mention the availability of Braille menus on their website, whereas both Sudima Hotels and CQ Hotels mentioned this information. This is particularly surprising, because Rydges- Dans le Noir? is noted as an accessible employer employing people with visual impairments, and an organisation trying to remove the preconceived notion of blindness through their dining experience (Dining in the dark ?, 2019).

The other blanks that were surprising to see were that CQ Hotels did not mention the availability of staff trained to support PWDs in the workforce. This was surprising, because CQ Hotels mentioned accessible features in the rooms, and the inclusion of PWDs in their workforce, but information on this particular tactic was not mentioned on their website.

It was also surprising to see that CQ Hotels and Rydges- Dans le Noir? did not explain whether their restaurants and bars were completely accessible. CQ Hotels used the accessibility symbol on their website, but more specific information on the accessibility of their restaurants and bar area was not provided. This could prove as an informational barrier for PWDs planning to visit them, and accessing information on the website. It was also surprising to see that Rydges- Dans le Noir? did not mention the availability of staff who could use NZ Sign Language, as a lack of this can be a barrier faced by someone with a hearing impairment.

Furthermore, it was particularly surprising to notice the number of blanks on the table for Rydges- Dans le Noir? On analysing the accessible facilities provided in rooms and public spaces, it was seen that there was no mention of this information on their website. This potentially indicates that Rydges- Dans le Noir? may not focus on providing accessible accommodation and dining experiences in general, but rather just on providing a particular product that is accessible in terms of the Dans le Noir? restaurant.

4.4 Rhetorical analysis findings

In this research, rhetorical analysis was used to understand meanings and identify common themes relating to accessibility, and how this was communicated on the websites of the three cases. These themes are supported with company quotes and statements, as well as reference to the use of persuasive imagery from the websites.

4.4.1 Themes

The themes that were similar on the websites of all three cases are as follows.

1) Accessibility is for all

Throughout their website, Sudima Hotels tried to express their efforts towards accessibility. This is apparent, because Sudima Hotels discuss how the accessibility of hotel restaurants is important, and how creating a barrier-free environment is their prime focus. This was be justified by statements such as

> *…for Sudima hotels, providing equal access protects a basic human right. It's about removing discrimination and creating an environment where everyone can feel at home, relax and be themselves. Our hotels are extensions of who we are so it is important to us that they are inclusive and can accommodate differences with respect and dignity.*

Through these statements it can observed how Sudima Hotels focused on providing access for all and providing an inclusive atmosphere for all PWDs. Accessibility of the hotel restaurants seemed to be of prime importance to Sudima Hotels, as they stated "*we strive to make our properties accessible to all guests, regardless of their needs, to make their stay more enjoyable,"* showing their dedication to accessibility. Through their website, they show how they aim to be industry leaders in accessibility. As they state, "*Sudima Hotels is one of the most accessible hotels in Australasia. We strive to be industry leaders in social and environmental responsibility."* Overall, and with the use of the image of a hand on Braille writing on the accessibility page, information on accessible facilities at the hotel, non-photographic images of Be.Accessible accreditations and company quotes and statements, together indicate a strong theme of accessibility on the Sudima Hotels website.

The CQ Hotels website also indicates accessibility and displays examples of visual design elements both in text and images, to communicate their message of accessibility. Statements such as "*CQ Hotels prides itself on being a fully accessible hotel and warmly welcomes all guest with any kind of disability to enjoy our facilities"* indicate how much the need for accessibility and an accessible hotel was valued by CQ Hotels. CQ Hotels mentioned that *"we cater to guests with diverse needs with our varied room offerings."* This suggests that CQ Hotels believe in access for all and providing an accessible environment. Furthermore, the use of imagery such as an image of the restaurant with a picture of the sign language menu on the wall, the accessibility symbol, and Be.Accessible accreditation logos, all focus on accessibility. Therefore overall, the CQ Hotels website themes around their position as a champion for accessibility are easily identified.

Similar themes of accessibility can be identified on the Rydges- Dans le Noir? website. However, being a restaurant, Dans le Noir? primarily focuses on food, and less on accessibility on their website. The employment of people with visual impairments can be considered as an accessibility strategy. Rydges- Dans le Noir? state on their website that "*we promote the city's social and human values,"* indicating their focus on being an

accessible employer. Use of imagery such as people being led by a waiter with visual impairments is an example of persuasive imagery used by Rydges- Dans le Noir?, and suggests accessibility. In their FAQ (frequently asked questions) section, Dans le Noir answer a question if many guests with visual impairments visit their restaurant, however they also respond by saying that "*not many visually impaired guests visit the restaurant as it is a daily experience for them. However, for those who want to educate their friends and family about their daily life, Rydges- Dans le Noir? provides that opportunity."* These examples together demonstrate the themes of accessibility that can be identified on the Rydges- Dans le Noir? website.

2) Persuasion towards inclusion of PWDs in the workforce

The second theme identified as common to the three cases, was the persuasion towards inclusion of PWDs in the workforce.

On their website, the efforts taken by Sudima Hotels in inclusion of PWDs in the workforce are very evident. Sudima Hotels have been recognised nationally for their efforts in accessibility and inclusion of PWDs in workforce, evidenced by the numerous awards displayed on their website. Sudima Hotels mention "*our staff are our most important ambassadors, so we ensure they have all the training they need."* Sudima Hotels also mentioned on their website that Be.Confident workshops are held in association with Be.Accessible to improve the team's access and confidence skills. Further Sudima Hotels believe that

> *true accessibility means empowering people so they can be independent. At Sudima we feel that the individual should be able to do what they need to do with a similar effort as anyone else – and in the same amount of time.*

Overall, the afore-mentioned examples indicate the persuasive communication about accessibility efforts taken by Sudima Hotels in relation to the inclusion and training of PWDs in the workforce. These statements indicate how Sudima hotels value the importance of their staff, as leaders and ambassadors for change. The efforts taken by CQ Hotels in terms of inclusion of PWDs in the workforce can also be observed, through the display of the numerous awards won by the hotel. Furthermore, on the awards and accolades page, the use of images such as the group photo of staff holding the 2015 ACC award for inclusion, expresses the message that CQ Hotels is an accessible employer, employing PWDs in the workforce.

Rydges- Dans le Noir? on the other hand, was one of the first restaurants in the world to develop the concept of employing people with visual disabilities. This concept became widely popular because of the unusual accompanying idea of dining in absolute darkness, served by a waiter with visual impairments. Rydges- Dans le Noir? state that they have won numerous awards for their efforts of inclusion of PWDs, as they aim to **"***promote the city's social and human values."* The image used on the main webpage is a photo of a group of people being escorted by a waiter with visual impairments, which generates a message for social change indicating inclusion of staff with disabilities. In the FAQ section of the website, Rydges- Dans le Noir? mention the total number of staff with visual impairments employed by them: "*we employ 6 visually impaired and blind guides in the Auckland restaurant and nearly thirty of our employees around the world are blind.*" Dans le Noir? indicate on their website that people with visual impairments are not just employed as waiters or guides, as they mention that **"***the visually impaired are not only involved in society as a guide waiter. For example, the CEO of our company is blind."* This illustrates that Rydges- Dans le Noir? do not discriminate based on the disabilities of their employees, but are an accessible employer. All these examples together on the Rydges- Dans le Noir? generates a message for social change, indicating a strong rhetoric around inclusion of PWDs in the workforce.

3) Validity

Another common theme identified across the websites of the three cases was the validity of accessible facilities offered by the organisations. *Validity* in this context refers to the guarantee of the standard of service to expect from the products offered (Cheney, 1983). Cheney (1983) explained that organisations indicating the validity of facilities on their communications can be seen as having identification strategies not just to indicate the standard of service to expect, but also, to communicate company values and the validity of those values.

Sudima Hotels express validity of accessible facilities, as they display the Be.Accessible logo on the main webpage as well as showing the Be.Accessible ratings for each Sudima hotel. Sudima Hotels also mention that "*we involve accessibility experts then test and refine a range of situations to give us the best chance of achieving access for all.*" These examples show how Sudima Hotels assure of the validity of their accessible facilities. CQ Hotels also through their website, assure of the validity of their accessible facilities, as they display the Be.Accessible and the Qualmark accreditations. CQ Hotels explain that

"*we have been working with key people and organisations to get to know the accessible market and to improve our accessible features throughout the property*."

Furthermore, the accessibility symbol is also displayed, which indicates accessibility and validates the accessible services offered by CQ Hotels. These examples indicate how the validity of accessible facilities is communicated on the CQ Hotels website. Rydges- Dans le Noir? also validate their accessible facilities; for example, "we *often employ blind consultants, experts or trainers in France, England and Europe.*". Another example of Rydges- Dans le Noir? indicating validity is that "*blind experts are also available for special events such as recruitment sessions, corporate events, official receptions, product launches, press events sensory workshops and brainstorming.*" However, on the Rydges- Dans le Noir? website, the names of the blind experts and consultants are not mentioned. These examples indicate how the validity of accessible facilities is assured on the website of Rydges- Dans le Noir?

4) Persuasion for social change

The theme identified as common only to the websites of Sudima Hotels and Rydges- Dans le Noir?, was their persuasive efforts towards social change. The analysis of website communications of these two cases, revealed statements and quotes around "commitment" to change and "persuasion" for others to change in their communications.

Throughout their website, Sudima Hotels provide various persuasive statements supporting social change. One such statement from the CEO of Sudima Hotels is

> *I have seen first-hand, with those close to me that have access needs, the difficulties they can face when trying to undertake everyday tasks, and the effect this can have on their confidence. A 100% accessible society can only be achieved through a commitment from us all, and I am proud to be part of this change. I hope that my participation as a member of Be's Fab 50 will encourage others to get involved in making our society more inclusive and accessible for everyone.*

Such statements by Sudima Hotels indicated their commitment to change, as well as wanting to persuade others to follow this social change so that more organisations can implement accessibility features. Similarly**,** Rydges- Dans le Noir? indicated persuasion for social change in numerous statements, and as an organisation, aimed to dispel preconceived notions around disability, by writing

> *…thanks to the remarkable service of the blind and the visually impaired guides, this unusual restaurant offers a moment of positive empathy that breaks our*

> *prejudices about disability. Driven by role reversal, the experience allows us to perceive the richness of the diversity.*

Rydges- Dans le Noir? also express the importance of raising awareness of blindness and disability by mentioning that

> *when the blind guide sees this inversion (it) turns out to be an astonishing exercise in empathy which forces us to make an unusual transfer of confidence. It is an amazing approach to positively raise awareness about blindness and disability in general.*

Examples of such statements indicate how Rydges- Dans le Noir? expressed their persuasions for social change on their website in terms of their commitment towards positively raising awareness about blindness and disability as well as persuading others to change by challenging the pre-conceived notions of blindness and disability.

4.4.2 Rhetorical analysis discussion

The categorical analysis findings showed that the visual design elements of the websites contributed to the accessible website design in all three cases. The content analysis shows that the strategies and tactics implemented by the three cases were those of industry leaders. However, in addition to these findings, through the rhetorical analysis, the actual examples of persuasions for social change towards accessibility and leadership in accessibility, can be understood by analysing company quotes and statements on their websites. This helped to see how the three cases were communicating to their audience and persuading them toward the accessibility campaign. The rhetorical analysis findings showed repeated themes across the websites such as that of accessibility. The rhetorical analysis provided evidence to show how the three cases indicated their commitment towards accessibility as well as persuasions for others to follow. For example, Sudima Hotels mentioned that "*we strive to make all our hotels accessible,*" and the fact that they mention that *"we strive to be industry leaders in social and environmental responsibility*" and "*we are the most accessible hotel in Australasia,*" together indicate what Sudima Hotels were working towards, and how. These statements are striking and powerful in that they indicate a bigger picture that the organisations were working towards. Similarities were seen in CQ Hotels, where they too mentioned, "*we pride ourselves on being a fully accessible hotel and warmly welcome guest with all disabilities.*" Rydges- Dans le Noir? used images of a group of people being led by a waiter with visual impairments. The use of such statements by Sudima Hotels and CQ Hotels and imagery by Rydges- Dans le Noir? indicate how these three organisations were using statements

and images as identification strategies to their audience about their organisational values and goals, that is, what they as leaders were championing (see Cheney, 1983; Frandsen and Johansen, 2011; Greenwood et al., 2019). In this case, there was a strong rhetoric around accessibility. This was generally surprising to see because not many hotel restaurants indicate this information on their website communications, and the fact that the three cases indicated this information, shows their commitment to championing accessibility and well as persuading others to follow.

Similarly, through the rhetorical analysis, common themes of persuasions for the inclusion of PWDs in the workforce were identified in all three cases. Examples of quotes include Sudima Hotels mentioning that "*our staff are our most important ambassadors*" and that " *true accessibility means empowering people so that they can independent,*" along with images such as the group photo of Sudima staff members holding the awards for inclusion. This was similar to CQ Hotels, who displayed an image of their staff members holding the 2015 ACC award for inclusion. Rydges- Dans le Noir? On the other hand, mention the numbers of people employed by them: they employ six PWDs in their Auckland branch and 30 of their staff worldwide are blind. Rydges-Dans le Noir also use striking statements such "the *visually impaired are not involved in society as guides or waiter, for example, the CEO of our company is also blind.*" These examples from the websites are considered to be organisational tactics as part of a wider strategy (see Cheney, 1983). The implications of these quotes and images of the inclusion of PWDs not only link the individuals and organisations, but also show that the organisations recognise the shared values between individuals and the organisations (see Cheney, 1983).

A further theme identified from the rhetorical analysis was the validity of accessible facilities. According to Cheney (1983), validity of services offered by organisations can be presented through testimonials, audits, and accreditations by other organisations on the company websites. In this analysis however, accreditation was the only measure of validity found within the 5 click procedure on the websites of the three cases. Examples were Sudima Hotels displays of their Be.Accessible logos on the main webpage along with logos of individual ratings of each Sudima property. Sudima Hotels also mention that "*we involve accessibility experts that test and refine a range of situations to give us a better chance of achieving access for all.*" Similarly, CQ Hotels also display their Be. Accessible accreditations as well as the accessibility symbol on the main webpage of their

website. They also mention that "*we have been working with key people and organisations to get to know the accessible market and get improve our accessible facilities throughout the property*." Rydges- Dans le Noir ? also assure of validity by mentioning that

> *we often employ blind consultants, experts and trainers in France, England, Europe*" and that *blind experts are also available for special events such as recruitment sessions, corporate events, official receptions, product launches, press events sensory workshops and brainstorming.*

The presentation of such statements and images about the validity of accessible facilities offered by the organisations is considered to be an identification tactic, because the validation indicates praise by outsiders and allows PWDs to identify with the organisation through the views of others (see Cheney, 1983). Furthermore, the presentation of information that validates their accessible facilities engenders trust with customers in terms of reliability and standards of service. Another interesting finding on the websites of Sudima and Rydges- Dans le Noir? was in their statements on persuasions for social change. Sudima Hotels provided a comment from their CEO:

> *I have seen first-hand , with those close to me that have access needs, the difficulties they can face when trying to undertake everyday tasks, and the effect this can have on their confidence. A 100% accessible society can only be achieved through a commitment from us all, and I am proud to be part of this change. I hope that my participation as a member of Be's Fab 50 will encourage others to get involved in making our society more inclusive and accessible for everyone*.

Similarly, Rydges- Dans le Noir? used statements such as these, indicating the importance of raising awareness of blindness and disability.

> *Thanks to the remarkable service of the blind and the visually impaired guides, this unusual restaurant offers a moment of positive empathy that breaks our prejudices about disability. Driven by role reversal, the experience allows us to perceive the richness of the diversity.*
>
> *When the blind guide sees this inversion (it) turns out to be an astonishing exercise in empathy which forces us to make an unusual transfer of confidence.*

From these statements it can understood that the two cases are fighting a common enemy: the general lack of awareness of disability and accessibility. This has been identified in the literature as a means to achieve the wider goal of accessibility, because the use of such statements implies uniting against a common enemy and stresses the identification of the organisation with "insiders" (members of the particular affected group) towards the effort

of achieving unity, whilst demonstrating their organisational values (see Cheney, 1983). Therefore it can be understood that all together, the validity indicated on the website communications by the three cases not only communicated their espoused values, but also, the validity of those values (Cheney, 1983).

By observing these statements across all the themes, it was also seen that the word “we” was commonly used by all three cases. The use of “we” in this way is an identification tactic by organisations to show their bond with members of the organisations, and present similarities to or commonalities with organisational members (Cheney, 1983; Greenwood et al., 2019). In this way, as a response to divisions in society, using the word “we” helps an organisation identify with certain target groups such as an individuals and their families, bringing about a sense of belonging (Cheney, 1983).

Through the rhetorical analysis, the effective use of organisational communication can be understood, because presenting such persuasive statements and imagery allows PWDs to spontaneously identify with the organisation (Cheney, 1983; Frandsen and Johansen, 2011; Greenwood et al., 2019). Furthermore, the advantages of such persuasive statements indicate that, as customers can identify better with the organisation, they will be open to persuasive efforts from that organisation (Cheney, 1983). Knowing this, an organisation can effectively communicate its values, goals, and information (i.e. about its own stated identifications) in the form of guidelines and collective actions, which can also be considered as best practice, and implemented by other organisations who may be persuaded of the need for change (Cheney, 1983). The literature also indicates that PWDs like such persuasive statements to be displayed on the websites of organisations (Michalska et al., 2014).

Therefore, using rhetorical analysis as a lens, the overall rhetoric of accessibility portrayed on the website of the cases was analysed, meeting objective two of the research aim.

Finally, to conclude the findings and discussions chapter of the three methodology phases, it is evident that to be an industry leader or champion of accessibility, it is important for an organisation to have accessible website design, clear strategies, clear tactics, and clear and effective persuasive communications on their websites. Whilst many of these elements were present across the three cases, it is a conclusion of this research that more could still be done. This will be discussed in the next chapter.

Chapter 5 – Conclusion

5.1 Introduction

The purpose of the final chapter of this dissertation is to present some reflective commentary and concluding remarks in response to the research aim and objectives. Following this, implications for practice are stated, which have originated from the findings of the research. Next, directions for future research are suggested, after which the dissertation concludes with a closing statement.

5.2 Best practices in accessibility

Hospitality and tourism research has indicated how PWDs face barriers and constraints in terms of their participation in hospitality and tourism activities. Prior research has also indicated that minimal attention has been given to the provision of facilities, legislature, education, and training in order to serve the access customer. The review of literature showed that attention to disability in the context of tourism and hospitality is currently marginalised. Even though information on accessible tourism and accessibility is scarce in the hospitality industry, most of the extant research investigates improper hotel infrastructure, bathroom facilities, service failures, and the lack of knowledge among industry workers around dealing with PWDs. There is very limited information and research available on improving the accessibility of hotel restaurants and dining experiences for PWDs. Therefore, this research aimed to investigate the best practices in accessibility in hotel restaurants in New Zealand. The research had two main objectives: 1) identify the strategies and tactics used by the three case study restaurants considered as champions of accessibility, and 2) critically analyse the rhetoric of accessibility communicated online by the three case study restaurants. A three-phase methodology was implemented to analyse the content of the websites of the three hotel restaurants. The hotels restaurants chosen to answer the objectives of the research aim were Sudima hotels, CQ Hotels and The Rydges Auckland Hotel.

A *champion* can be defined as someone who supports, defends or fights for a person, belief, right or principle (Gillovic, 2019). An accessibility champion aims at developing access for all, while ensuring that everyone works towards providing a positive and inclusive customer experience which promotes equality and diversity (Gillovic, 2019). From the research and its findings it was found that, to be a champion of accessibility, it is important to have accessible websites that communicate clear strategies, clear tactics, and clear persuasive communication of the organisation's espoused values and

commitment to accessibility. The categorical analysis indicated certain best practices among the three cases. These best practices included the use of inclusive photographic content to complement text used to present information on the websites. Another best practice implemented by the three cases was the use of highly contrasting colours, with minimal use of colour to display accessible information; for example, contrasting black and white design was used by all three cases. According to the literature, this is the most accessible format for PWDs (e.g. Michalska et al., 2014; Puhretmair and Nussbaum, 2011; Halbach, 2010).

All three cases had a common central bar with links to the subsequent pages of the website, placed on the bar in the same sequence, which remained constant for all the webpages. This was an appropriate format for an accessible website, as it prevents user disorientation (Michalska et al., 2014; Puhretmair and Nussbaum, 2011; Halbach, 2010). The two step click process to reach accessibility information in the case of CQ Hotels and Rydges- Dans le Noir? was also considered best practice, because this too has been proven in the literature to prevent user disorientation among PWDs while using the website (Michalska et al., 2014; Puhretmair and Nussbaum, 2011; Halbach, 2010).

Through this research, to be a champion of accessibility it was determined from the categorical and content analysis that the three cases used strategies to achieve accessibility which included accreditations from social change organisations, the inclusion of PWDs in the workforce, and the use of language and imagery on their website. These strategies for accessibility were considered to be successful, because in terms of accreditations, all three cases presented their accreditations from social change organisations, which, according to the literature, benefits the organisations; customers prefer such organisations as the accreditations show the reliability and standard of services offered (Cheney, 1983). In terms of inclusion of PWDs in the workforce, all three cases employed PWDs, and mentioned this on their websites. The literature indicates that this helps to increase revenue, as people prefer socially sustainable businesses and PWDs prefer such places as they offer them a barrier- and judgement-free environment (Gröschl, 2013; Kalargyrou and Volis, 2014).

In terms of language, two of the three cases (i.e. Sudima and CQ Hotels) used different language (i.e. person first language) when referring to PWDs. This has been found to directly indicate inclusion of PWDs and overcome the derogatory labelling they face in

terms of language on many website communications (Gillovic et al., 2018; Jaeger and Bowman, 2005; McIntosh, 2020; Susman, 1994; Titchkosky, 2003).

All three cases made effective use of imagery on their websites to provide information about accessibility. The use of photos with images of the facilities is beneficial to PWDs as they rely on images on a website to inform their travel decisions (Buhalis et al., 2012; Darcy and Buhalis, 2011; Kim and Lehto, 2012). Tactics were implemented by the three cases to change the way hotels and restaurants structure their offerings. An example of such tactics was found in the two cases that used Braille menus, indicating that they were trying to improve the restaurant experience for those with visual impairments. Two of the three cases also mentioned the availability of staff who used sign language. Similarly, two of the three cases (Sudima and Rydges-Dans le Noir?) mentioned the availability of staff trained to work with PWDs. From these tactics it is evident that these three cases were trying to change and improve the dining experiences for guest with disabilities by overcoming the service-related constraints that PWDs face in restaurants (see Burnett and Baker, 2001; Darcy and Pegg, 2011b; Michopoulou et al., 2015). However, along with the already implemented tactics, the three cases could also consider implementing additional tactics to improve accessibility in their hotels' restaurants ,as recommended by previous researchers (see Table 2), such as having broader aisles in restaurants (Linderová, 2015), providing a button on the table for PWDs to summon waiters (de Faria et al., 2012), and providing personal service for PWDs at buffets in restaurants (Linderová, 2015; Poria et al., 2011). These tactics also show that these organisations understood the non-homogenous nature of disability, as they were not just focusing on one type of disability to improve accessibility to their hotel's restaurants (see Buhalis et al., 2012; Darcy and Buhalis, 2011; de Faria et al., 2012; Kim and Lehto, 2012; Linderová, 2015; Poria et al., 2011).These findings also indicate how the strategies and tactics implemented by the three cases were successful in achieving accessibility.

It was surprising to see Rydges- Dans le Noir? have less explicit communication about accessible facilities offered in their hotels, public spaces, and the restaurant. This indicated that Rydges Hotels could improve the way in which they offer their accommodation, because there was no mention of accessible facilities in the rooms, and other services that PWDs might use as a hotel patron. Instead of focusing on just providing an accessible product, more information about accessible facilities could be presented on their website to better inform PWDs about the facilities. As such, the entire

servicescape of the hotel environment could be communicated as accessible and welcoming for PWDs (Baker et al., 2007). Furthermore, if Rydges Hotels is offering an accessible product in Dans le Noir?, mention of information on the website such as the availability of Braille menus (for example) would be beneficial, because Dans le Noir? is known for employing people with visual impairments. However, even though they mentioned that they did not host many people with visual impairments, they did explain that this restaurant could be used as a place where people with visual impairments could educate family and friends about what the experience of having a visual impairment (Dining in the dark?, 2019). Therefore, it would be useful to indicate such information on the website.

Overall, to be a champion of accessibility, along with implementing effective and clear strategies and tactics, it is also important to effectively communicate information on the organisation's website. The use of persuasive quotes was identified in the rhetorical analysis themes as a way organisations can try to connect with their audience and establish organisational values. Mention of such quotes and statements on the website not only indicates what and how the organisation is working towards, but also allows PWDs to connect with and relate to the organisation, allowing other organisations to follow their guidelines as best practices in the wider pursuit of social change (Cheney, 1983). The rhetorical analysis showed common themes among the three cases around 1) accessibility is for all, 2) persuasions for the inclusion of PWDs in the workforce, 3) validity, and 4) persuasion for social change.

Through this research and during the sampling process it was evident that there were very few hotels restaurants championing accessibility, which indicates we need more champions in the hospitality industry. This suggests a need to encourage accessibility champions in order to improve dining experience for PWDs. Through this research it has been identified that for the effective provision of accessible dining experiences for PWDs, the hotel restaurants used clear strategies and tactics as detailed, and made information available on their websites. Apart from the provision of accessible features, it was seen that as effective champions for social change, the three cases used quotes and statements not only to show their commitment to accessibility, but also to persuade other organisations who have not yet implemented accessibility, to follow and work towards this social agenda. Research suggests that other social change movements such as the climate change movement (see Frandsen and Johansen, 2011), was effective because of

increased awareness in society and among stakeholders, which resulted in more organisations implementing sustainability efforts towards climate change. This indicates that it is not very difficult to persuade organisations to follow a social change movement if there is increased awareness of the need and benefits. Similarly, in terms of the social change towards accessibility, there needs to be a greater awareness in society and among stakeholders, so the leaders or champions of accessibility can act as active "translators" that adopt new rules, norms, and ideas, that can impact and persuade other organisations and society generally (Frandsen and Johansen, 2011). As more organisations move towards this social change, ultimately the competition among hospitality organisations can lead to the development of more or better accessibility measures, which in turn can lead to collective acceptance and understanding of improving accessibility for PWDs in hotel restaurants. It is evident that a bridge is needed between hospitality operators and access organisations to ensure accessibility for all (Cockburn-Wootten and McIntosh, 2020). In the pursuit of sustainability, it is therefore timely for hotels to engage in the (social) sustainability pursuit for the benefit of all, so society (including stakeholders and hospitality operators) works towards tackling such social issues, and developing inclusive, safe community spaces. Such a movement would provide a strong sense of civic engagement, with a vision for a more hospitable and inclusive environment (Stansfield, 2020). It is therefore hoped that the results of this dissertation urge further researchers to build upon the findings of this research.

5.3 Implications for practice

This research presents practical recommendations with the idea of improving dining experiences for PWDs. The recommendations that emerged from the findings are as follows:

1) Organisations can implement similar strategies to those used by the three cases around accreditations with social change organisations, including PWDs in the workforce, use of persuasive language, and using images on their websites to achieve greater accessibility of the hotel restaurants.
2) Organisations can consider replicating tactics employed by the three cases to improve dining experiences for PWDs. These tactics can include the provision of Braille menus, availability of staff who can use sign language, and availability of staff trained in working with PWDs. Other organisations could also go beyond what the three cases are doing, and develop more tactics and follow the

recommendations of other researchers (see Table 2), to improve overall dining experiences for PWDs.

3) Organisations could consider using high colour contrast on their websites to enable greater accessibility and make it easier for people with visual impairments and those using assistive technologies, to view the information.
4) Organisations could also consider using a central bar on their websites, containing all the links to subsequent webpages in the same sequence, and which remains fixed through all the webpages.
5) Organisations could consider implementing person first terminology when referring to PWDs on their websites and elsewhere.
6) Organisations should move beyond what is regulated and detail all the accessible facilities offered, to remove informational barriers and ensure that PWDs receive an enjoyable experience.
7) Organisations could also use persuasive communication on their websites in terms of company statements and quotes, validated by accreditations, testimonies, or other forms of trusted feedback, not only to show their commitment towards social change, but also to persuade other organisations to follow in this change.

5.4 Further research

As it was challenging to find these three hotels' restaurants during the sampling process, it is evident that there are few visible champions of accessibility among hotels in New Zealand. This shows that there is a huge gap to overcome, as a result of which, champions of accessibility need to be strongly promoted. It is also important for these champions to communicate with others about what their best practice looks like, and to be persuasive in how they communicate their messages to bring others along with them, and persuade them to join the accessibility agenda. As such, there is a need to build on the conclusions made in this dissertation for a future agenda to further consider accessible dining in New Zealand, and beyond.

Given the call for important participatory research, future research could therefore perhaps be more pragmatic (Pritchard et al., 2011). For example, researchers could conduct participatory research alongside restaurants to see how these restaurants could be made more accessible. Drawing on what is known about what accessibility champions are doing, and considering the plurality of disability, further research could look at particular types of disability, such as how people with autism experience restaurants. Case

studies of other contexts could also compare the results of previous findings to build wider knowledge and uptake of access strategies.

5.5 Closing statement

Statistics indicate that one in four New Zealanders had a documented disability at the time of writing, and 60% of adults were over the age of 45 (Disability Survey; 2013). The growing disability rates and ageing population in New Zealand are pressing reasons to make greater accessibility efforts. For real change to occur in the tourism and hospitality industry, the discussion around accessible tourism needs to continue. Existing champions and leaders, through their best practices and persuasions for social change, can inspire other tourism and hospitality stakeholders who have not yet thought about accessibility of their services. In the New Zealand Tourism For All (2015) documentary, "Take The Time", Megan Barclay, the director of the Be.Welcome programme, indicated and explained the move towards accessibility using three key words: "requested, excited, expected." Through these three words, Megan indicated how we currently live in a world where PWDs have to "request" an accessible experience, either in terms of accessible accommodation or dining experience. The move into the next stage shows how PWDs are "excited" to receive a service that is accessible, and that extends to become the norm, and "expected" such that PWDs can expect accessible services from service providers. This gives service providers the opportunity for continuous improvement of service. Perhaps this evokes the image of a hospitality industry with accessibility embedded into its service instead of PWDs having to request it. Currently, research points to hardships in terms of looking for accessible accommodation or restaurants to see if they are in fact accessible and offering accessibility facilities; if not, PWDs have to request help, or abandon their plans to visiting a particular place. From this research, it is evident that if a dining experience is truly accessible and inclusive, it would not be in response to a request, but would be "the norm". In this case, the leaders or champions of accessibility and their best practices would no longer be "best practices" but "the norm", indicating 'normalisation' of disability into the everyday.

Through this research it has become evident that to bring about greater accessibility and dining experiences for PWDs, the implementation of accessible facilities by organisations is not enough. The development of a completely accessible society requires the combination of many elements in order to provide a positive tourism

experience. Therefore, a co-ordinated approach between the government, stakeholders, and all tourism and hospitality organisations is required to be able to provide that holistic experience to PWDs (Gillovic and McIntosh, 2015). Going forward, it would be ideal to have a more hopeful agenda and a more moral and inclusive understanding of disability in the tourism and hospitality industry (Pritchard et al., 2011; Scheyvens and Biddulph, 2018).

Currently, post Covid-19 research indicates how New Zealand has the opportunity to transform the industry into serving a more inclusive, equitable, and moral society, ensuring that all tourism and hospitality destinations and products are accessible to all people, regardless of age, social status, physical limitations and disabilities, and inclusive of friends, families and carers (McIntosh and Wilson, 2020). In this way, New Zealand can lead the world in its hospitality and tourism industry through a focus on inclusion, sustainability, and tourism for all (McIntosh and Wilson, 2020). However inclusion goes beyond just accessibility (Scheyvens and Biddulph, 2018). Apart from the COVID-19 situation, other recent incidents in New Zealand such as the Christchurch shootings, or the Treaty of Waikato claims, together, signal the need for inclusion, not only in terms of disability, but also in terms of race, gender, caste, creed, colour, sexuality, religion, age, and financial status. Inclusion is part of a broader narrative (Scheyvens and Biddulph, 2018). Hence, it can be understood that accessibility is part and parcel of a greater inclusive agenda that needs to lead the future direction for hospitality research (Mooney, 2020; Pritchard et al., 2011; Scheyvens and Biddulph, 2018).

To conclude, it can be understood that hope lies in a moral, inclusive, and hopeful tourism and hospitality experience for all members of society (irrespective of race, gender, caste, creed, colour, religion, sexuality, financial status, age, or disability) enabling equal participation of all members without barriers or constraints against having a joyful experience. This dissertation concludes that much more work is needed to achieve this in the case of accessibility of the hospitality hotel dining experience. More champions of social change are urgently needed. This will only be possible if everyone works together to make this happen, or as the popular Māori saying goes – "*he waka eke noa*" – "we are all in this together."

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