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The Barriers to Accessible Tourism in Phuket: Toward an Exploratory Framework with Implications for Tourism Planning

Abstract

The concept of accessible tourism is centered on advocacy for the rights of individuals with disabilities to participate in tourism activities. The study aims to close a gap in the literature by identifying the barriers to achieving accessible tourism in Phuket and contributing to tourism development by establishing a framework for tourism stakeholders. An exploratory study design was applied, and empirical data were gathered through in-depth interviews with 16 professionals residing in Phuket, Thailand. The data were analyzed thematically to identify barriers and establish an exploratory framework for tourism stakeholders. A five-dimensional exploratory framework emerged in the process. The results revealed obstacles preventing Phuket from fully engaging in accessible tourism and increasing its global market share in this emerging market segment. Moreover, the findings contribute to the field of accessibility research. The article concludes by discussing implications for tourism stakeholders.

Keywords: accessible tourism, niche tourism, sustainable development goals, Thailand

1. Introduction

The concept of accessible tourism is centered on advocacy for the rights of individuals with disabilities to participate in tourism activities (Benjamin et al., 2021). This involves removing barriers that might prevent those mentioned above from occurring (Scheyvens & Biddulph, 2018), thereby enabling enjoyment regardless of a person’s disability (Szmukler et al., 2014). Accessible tourism adds value to equality in tourism development with people of all abilities in mind (Qiao et al., 2021). Therefore, accessible tourism is an essential aspect of inclusive tourism, which seeks to achieve reduced inequalities as stated in Sustainable Development Goal 10 (SDG10) (United Nations, 2022).

When the inclusiveness of tourism is discussed, it is frequently in terms of its accessibility for differently abled tourists (Zajadacz, 2015). Over the decades, the level of disability has risen to almost 15% of the global population (World Health Organization [WHO], 2021). This is especially noticeable in Asian nations, where the number of older individuals is expanding faster than in other regions (Darcy et al., 2010). Phuket, a tourism-dependent tropical island and proclaimed world-class destination (Jarumaneerat, 2022), contributes much to Thailand’s economic development through tourism receipts (Fuchs, 2021). However, little is known about its ability to handle accessible tourism.

As an emerging field of study, accessible tourism will influence tourism destination competitiveness in the future, whether from human rights, emerging market segments, or service delivery perspectives (Michopoulou et al., 2015). It can be considered a competitive edge in positioning and marketing a destination globally. The analyzed interviews disclosed that Phuket is relatively well-positioned to engage in accessible tourism concerning airport facilities, healthcare services, and (with marginal shortcomings) accommodation services.
On the other hand, the physical infrastructure outside the facilities, the limited availability of recreational activities, and the inflexibility of transportation are the areas that require attention and improvement.

The United Nations World Tourism Organization (UNWTO, 2022) actively promoted accessible tourism through its charter, which states that “it is the United Nations agency responsible for the promotion of responsible, sustainable and universally accessible tourism.” However, the implementation often depends on a closely coordinated effort through a collaboration of local stakeholders. Improving the accessibility of facilities, transportation, attractions, and – more generally – destinations demand the cooperation of a wide range of stakeholders, including travelers with disabilities (Michopoulou et al., 2015). To exemplify, improving the limited scope of recreational activities in Phuket requires coordinated efforts among businesses, local governments, tourism agencies, and representatives who speak on behalf of tourists with disabilities.

Accessible tourism is a critical factor to consider, as accessibility is not only a human right (McCabe & Dickmann, 2015) but also a significant business opportunity (Darcy et al., 2020) and an integral part of implementing sustainable tourism (Sica et al., 2020). However, relatively little is known about the feasibility of engaging in accessible tourism in Phuket despite its emergence in the literature and growing attention from the public (Fuente-Robles et al., 2020). The study aims to close a gap in the literature by identifying the barriers to achieving accessible tourism in Phuket and contributing to tourism development by establishing a framework for tourism stakeholders.

2. Methodology
An exploratory study design is typically applied as a methodological framework when the investigated problem is not clearly defined or well understood (Crouch & McKenzie, 2006; Casula et al., 2021). Previous studies emphasized the importance of accessible tourism research (Fuente-Robles et al., 2020; Sisto et al., 2022), but limited attention has been paid to this critical and emerging topic in Thailand. Consequently, qualitative data can provide a more detailed and nuanced view and improve the understanding of a phenomenon (Lester et al., 2020). With that in mind, semi-structured and in-depth interviews are an effective method of empirical data collection to explore participants’ thoughts and beliefs (Kallio et al., 2016).

2.1. Sampling and instrument
The participants were recruited through snowball sampling, a non-probability sampling technique in which the researcher begins with a small population of known individuals and expands the sample by asking those initial participants to identify others who should participate in the study (Handcock & Gile, 2011). The data were gathered through 16 semi-structured, in-depth interviews with participants residing in Phuket, Thailand. A general understanding of physical disabilities (for example, through a close relative or personal experience), a good command of English, and written consent were the three prerequisites for participation in the study. The sample was not limited to but included disabled athletes, a representative of a non-profit organization advocating for disability rights, Thai medical staff, academics, and managers from the tourism industry. All participants were long-term residents of Phuket and, therefore, were familiar with the study site. The interviews ranged from 45 to 74 minutes, averaging 52 minutes.

The interviews took place in July 2022 and were directed by the lead investigator and a research assistant using an interview guide. The interview guide contained six main questions and suitable probe questions for each item based on good practice (Kallio et al., 2016; Bearman, 2019). The questions were not limited to but included, “Can you describe the obstacles that differently-abled people are confronted with in their daily routine while living in Phuket?” “What are the challenges for people with a disability to visit major tourist attractions in Phuket?” and “How would you describe the current state of accessibility in Phuket for people with a physical disability?”
2.2. Process and analysis

Individual interviews took place, and the process was repeated until thematic data saturation was reached. According to Weller et al. (2018), thematic data saturation occurs when "the ability to collect more fresh information has been obtained, and further coding is no longer feasible." Although thematic saturation depends on the domain, a sample of 16 can be considered adequate (Guest et al., 2006). The interviews were audio-recorded, transcribed verbatim, and grouped based on the questions posed to the participants. The acquired data were used to construct codes based on highlighted keywords and later grouped into clusters. The clusters allowed for the development of themes for the framework (Erlingsson & Brysiewicz, 2017).

3. Results

The analysis of the interviews discovered five themes related to accessibility for differently abled people in Phuket. Namely, these themes are (1) airport facilities, (2) accommodation services, (3) transportation and infrastructure, (4) recreational activities, and (5) health and wellness. Ultimately, these themes formed a five-dimensional framework (Figure 1), which shed more light on Phuket’s ability to participate in this emerging market segment. Although many empirical findings related to each theme were discovered and analyzed, the nature of this short communication focused on reporting the essential results in a summarized form.

3.1. Airport facilities

Phuket International Airport offers a sizeable route map, allowing Phuket to connect with market segments worldwide (P2, P5, P7, P12). The interviewees identified airport facilities as the physical infrastructure upon arrival (or departure), ranging from disembarking the airplane, the connecting path from the passenger boarding bridge to the baggage arrival hall, customs/immigration, shops, and restrooms. There was a consensus among the participants that, when it comes to vacationing in Phuket, airport facilities are the least problematic barrier for international tourists with a disability. A “dedicated wheelchair service via a priority lane” (from
the airplane to the transportation in the arrival hall) through an electronic car is available upon request. A common sentiment among the participants was that the airport facilities are the smallest barrier for tourists vacationing in Phuket. “It gives them false hope because everything you would expect [for differently abled people] from a five-star destination is offered upon arrival. But that does not meet the expectations when exiting the airport,” noted an interviewee.

3.2. Transportation and infrastructure
A controversial and opposing viewpoint was offered concerning transportation and infrastructure. In general, a vehicle for disabled people is available upon request. There is less flexibility for disabled tourists, as their travel must be planned. For example, taxis accommodating wheelchairs cannot be hailed and must be pre-booked. Several participants noted, “The most common type of transportation [is] motorbikes”, and in the absence of a well-developed public transportation network, “there are not many options for [the] differently abled to move around the island independently.” It was further noted that long-term residents have a modified vehicle for transportation. However, this option is minimal for short-term visitors due to a lack of supply. In the context of this study, infrastructure refers to the physical structures (roads, sidewalks, or ramps) connecting different facilities (the airport, hotels, or shopping malls). This has been identified as the most significant hazard and bottleneck for Phuket. Someone with a moderate or severe physical disability could not move around barrier-free in most parts of the island.

3.3. Accommodation services
Phuket offers a vast range of accommodation services, from backpackers to luxury. Mostly, accommodation at the lower end of the spectrum is less suited for tourists with physical disabilities due to the lack of required infrastructure (ramps, sidewalks, potholes). Many participants agree that the options for short-term visitors (i.e., tourists) are better than for long-term visitors (i.e., residents). Generally, hotels (short-term accommodation) are better equipped to handle differently abled tourists than condominiums (long-term accommodation). Many four or five-star hotels offer barrier-free access for their disabled customers. Several participants noted that mobility on the property is seamless and safe, whereas leaving the property poses the most significant threat to tourists with physical disabilities. There was a strong consensus among the interviewees that “high-end hotels generally offer the best facilities for people with physical disabilities.”

3.4. Recreational activities
Recreational activities include dining, entertainment, and daily leisure activities, such as visiting tourist sites (visiting temples or taking boat trips). While Phuket offers an extensive range of recreational activities, only a limited number of these activities are available for tourists with physical disabilities. The situation can be summarized as follows: The more significant the physical disability, the fewer the recreational options available. Many participants noted that “inclusiveness is virtually not practiced.” Although it is ethically recognized in parts, “the additional costs make it less desirable and financially sustainable” (P1, P5, P6, P13). The participants offered no insight on how the limited offering of recreational activities compares to other major tourist destinations worldwide.

3.5. Health and wellness (incl. medical facilities)
The most controversial findings emerged through the theme of health and wellness. The interview participants agreed that Phuket offers “state-of-the-art private medical centres” operated by “world-class physicians” – with a particular emphasis on ‘private.’ It was repeatedly noted that health insurance can be an expensive liability for people with a physical disability (depending on the degree of immobility). However, irrespective of medical costs, the medical assistance rendered in Phuket “does not need to shy away from a comparison
based on international standards,” as attested to by the majority of participants. There was relative agreement that healthcare facilities are among the most important attributes (besides transportation and safety) when choosing a destination for a vacation with differently abled people. Moreover, the interviewees corroborated the relative importance of access to high-quality medical facilities.

4. Discussion and implications

The study’s primary objectives were to identify the barriers preventing Phuket from participating in the emerging market segment of accessible tourism and contributing to tourism development by establishing a framework for tourism stakeholders. Based on the empirical findings, four noteworthy implications emerged in the analysis process. First, prior research focused on better understanding and overcoming obstacles that could prevent differently abled travellers from enjoying their tourism experience (Sisto et al., 2022) or on the fact that specialized travel has the potential to have a substantial positive economic impact on the travel industry (Özogul & Baran, 2016). The present research contributes to the literature by advancing the discussion by identifying specific barriers and how the investigation of satisfaction with eliminating those barriers can lead to better destination marketing and economic opportunities for destinations. More academic endeavors should be dedicated to identifying barriers and elucidating tourist preferences when selecting a destination through the lens of a differently abled person.

Second, this empirical investigation revealed a range of barriers preventing Phuket from fully engaging in accessible tourism and increasing its global market share in this emerging market segment. Improving the physical infrastructure, expanding the range of recreational activities catering to the physically disabled, or offering more affordable options for accommodation will virtually reduce inequality. Moreover, these efforts would align with the government's strategy to brand Phuket as a world-class tourist destination, focusing on health and wellness tourism (Sopha et al., 2019). Although Phuket is well positioned with attributes that attract accessible tourism, inclusiveness is virtually not practiced, contributing to inequality (Weiss et al., 2018). A subsequent first step would be to analyze and measure the state of Phuket’s physical infrastructure and compile a list of improvements. This could be achieved through an importance-performance analysis (IPA). IPA is a technique for identifying attributes of a product or service that most need improvement without significant detriment to overall quality (Esmailpour et al., 2020). Through an IPA, it would be possible to categorize the five dimensions (airport facilities, accommodation services, transportation/infrastructure, recreational activities, and health/wellness) into four clusters based on their perceived priority. Namely, these actionable clusters are ‘concentrate here,’ ‘keep up the good work,’ ‘low priority,’ and ‘possible overkill’ (Deepa & Baral, 2019). An empirically backed investigation would allow tourism stakeholders in Phuket to efficiently incorporate improvements in local tourism planning (Liu et al., 2020) that benefit Phuket as a destination but also speak to the emerging segment of accessible tourism.

Third, establishing an empirically based framework is a critical first step toward transforming the future of accessible tourism and reducing inequality in one of the most prominent tourist destinations worldwide (Gillovic & McIntosh, 2020). The five-dimensional framework allows tourism stakeholders and researchers to study this significant and emergent field empirically. Although the results are not generalizable to the entire population of Phuket, they do offer essential insights and starting points. The findings within the framework present future opportunities to survey and empirically explore Phuket’s readiness for accessible tourism and, more importantly, uncover concrete bottlenecks in different areas (e.g., physical infrastructure or recreational activities).

Fourth, the results indicate the presence of a sustainable, accessible tourism market. However, achieving the market’s potential necessitates providing excellent, accessible experiences and inclusive policies beyond fundamental access needs. Following the analysis in this article, the accessible market in Phuket features
similar characteristics from different study sites. For example, Kamyabi and Alipour (2022) identified that improving infrastructure facilities to meet the needs of disabled tourists is considered essential to growing this niche market segment. It also revealed that further evidence for developing new tourism products is necessary to capitalize on this growing market segment (Moura et al., 2018). Interestingly, disabled tourists tend to be loyal, spend more, and enjoy longer stays in their destinations (Domínguez Vila et al., 2019). Finally, the results of the study affirm previous research that identified ground transportation at the destination as one of the most significant physical bottlenecks when it comes to accessible tourism (Ribeiro et al., 2018; Kołodziejczak, 2019; Medarić et al., 2021).

5. Conclusion

The study aimed to close a gap in the literature by identifying the barriers to achieving accessible tourism in Phuket and contributing to tourism development by establishing a framework for tourism stakeholders. The findings of the study contribute to the field of accessibility research and are of current relevance to the provision and management of tourism opportunities and experiences. Accessible tourism has the potential to create momentum and contribute unique learnings on the diversity of tourism markets that will further shape tourism concepts through global policy initiatives. The study creates new avenues for future research to empirically explore the readiness of a tourist destination for accessible tourism. This can be achieved through a quantitative investigation using the five-dimensional framework. Moreover, more research in different geographical settings is needed to identify a common denominator, allowing international tourism associations to tackle this critical issue.

Acknowledgements

Ethical Statement

The participants were informed that they could withdraw from the study at any time, including removing their collected data. Moreover, confidentiality was considered and extended to all study participants (Petrova et al., 2016). The identities of the interviewees were known only to the researchers participating in the study.

Informed consent

All participants of the study provided their written consent before participating in the study. The consent form was created following the regulations of the Ethical Advisory Board in southeast Sweden and adopted best practices based on Lloyd and Hopkins (2015).

References


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