

Profiling Disabled People as Unrealised Potentially Lucrative Tourism Market Segment in South Africa

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Abstract

The study aimed at (profiling) determining sampled individuals with impairments' likelihood to participate in tourism. The quantitative-descriptive approach used online forum/group discussions as augmented by questionnaire survey which was conducted from August 2018 to March 2019. The study fostered a theoretical view as intending to give background information using academic journal articles and books. The study snowballed a total of 372 participants. The results from the demographic profiling were skewed towards the idea that access-need market (individuals with temporary and permanent impairments) as unrealised and untapped potential lucrative tourism business. The study concluded socio-demographic information may enhance further exploration into the access-needs tourism market in South Africa. This is because, the lack of such information poses development, management and marketing challenges when it comes to accessible tourism. To this effect, tourism service providers are challenged to consider the needs of this largely unserved market, through planning towards strategic preparatory approaches which may enhance channelling the potential into tourism business. The value of the study is centred on self-representation of persons with impairments, which addresses a major gap in literature, in that it focuses on individuals with impairments as an untapped tourism market segment in South Africa.

Keywords: Demographic profiling; physically impaired persons; tourism participation

Introduction

While information regarding the demographic characteristics of visitors with impairments is increasing globally, it is very limited within the South African context. The lack of such information poses development, management and marketing challenges when it comes to accessible tourism. Thus, the overview of the study was towards revealing potential value among disabled people, which might have been taken for granted within the tourism sector in

South Africa. Such is evident by the limited recorded participation as disaggregated by accessibility needs posed by different impairments when participating in tourism. This goes without say, that even the monetary and monetary equivalency of such tourism market segment is bleak with the tourism statistics/revenue contribution in South Africa. Regardless of the acknowledgement of such from international organisations, like World Tourism Organisation (World Tourism Organisation, 2018; 2019) and developed countries such as Australia (Darcy, 2010; Darcy & Buhalis, 2011). Therefore, the aim of this study was to profile (determine) sampled individuals with impairments' likelihood to participate in tourism in South Africa. In the tourism context, disability and impairments are related terms that may be confused to have the same meaning. According to Burnett and Baker (2001), as cited in Buhalis, Michopoulou, Eichhorn and Miller (2005), it is important to distinguish between disability and impairment. This is however determined by the purpose and scope of the data required as well as the way the data were classified (Euromontana Tourism Communication, 2014). While some do not perceive any need to distinguish between the two, others consider the difference to be very material (Choruma, 2007).

In this study, the two terms were used with different meanings in that impairment was defined as lacking part of or all of a limb or having a defective limb, organism, or mechanism of the body (Buhalis & Darcy, 2011). On the other hand, disability was considered to be the disadvantage or restriction of activity caused by contemporary organisations which take no or limited account of people who have physical impairments and thus exclude them from the mainstream of social activities (Buhalis et al., 2005). This definition reveals that impairment could be the result of a life cycle stage, an incident or an accident beyond human control, but disability is caused by the way people organise or arrange things (Makuyana, 2020).

According to United Nations World Health Organisation International Classification of Functioning Disability and Health (ICF) (2018), impairments are regarded in a spectrum that is defined by the severity of condition induced by the absence or deformation of a part of the body, namely mild, moderate, severe and complete impairment. This implies that not all impairments warrant one to be regarded 'sick' all the time. Thus, mild impairment implies that an impairment may induce direct challenges to be present less than 25% of the time, with an intensity that a person can tolerate and which happens rarely over the last 30 days (United Nations World Health Organisation International Classification of Functioning Disability and Health (ICF), 2018). On the other hand, moderate impairment implies that an impairment may induce problem that is present less than 50% of the time, with an intensity, which is interfering in the persons day to day life and which happens occasionally over the last 30 days (United Nations World Health Organisation International Classification of Functioning Disability and Health (ICF), 2018). Severe impairment means that a problem that is present more than 50% of the time, with an intensity, which is partially disrupting the persons day to day life and which happens frequently over the last 30 days (United Nations World Health Organisation International Classification of Functioning Disability and Health (ICF), 2018). Complete impairment means that a problem that is present more than 95% of the time, with an intensity, which is totally disrupting the persons day to day life and which happens every day over the last 30 days (United Nations World Health Organisation International Classification of Functioning Disability and Health (ICF), 2018). One therefore, opines for tourism to uphold a balance in approaches towards viewing impairments and/or disability, particularly when handling impaired individuals. Such brings the needs for inclusive tourism knowledge that upholds comprehensive understanding of impairment and disability issues.

While impairment stems from "acts of God", disability is man-made (Chikuta, 2015). In context of tourism, impairments are regarded as existing among tourists as either temporary or permanent which comes with the need for user-friendliness through physical and service

delivery. On the other hand, disability is deemed as the socio-economic discriminative/barring outcomes of the interaction of impaired person and systems designed to accommodate non-impaired tourism participants only. This brings the discourse to regards accessible tourism as conceived from disability tourism which had derogative connotations (Alen, Dominguez & Losada, 2012; Makuyana & Saayman, 2018). Thus, this paper defines accessible tourism as the systemic inclusion of impaired people and impairment and disability issues either as consumer or human resource, through universal design and accessibility approaches (least restrictive mechanism/reasonable accommodation) for the enjoyment of tourism experiences as much as possible without discriminative cues, throughout the tourism value chain (Makuyana, 2020). However, least restrictive environment/reasonable accommodation in tourism does not mean removing essentials for a job/teachable competencies/skills, creating new jobs or providing personal items such as mobility aids, but enhances the availability of reliable mechanism that may enable/support the impaired individual to participate in tourism with dignity, decency and independency (Makuyana, 2020; Nzo, 2019).

To this standpoint, this study considered individuals with physical impairments only. These include wheelchair users, spina bifida, poliomyelitis, stroke, head injury, spinal cord injury, and those who use crutches, among many others, as they all share the need for access including the ageing population, pregnant women, babies in premas. This is so because the demographic characteristics of such a population have received limited attention in the context of tourism participation, especially in South Africa. One, therefore, wonders whether it is worth while attempting to capacitate tourism facilities in conjunction with people who possess the capacity to handle visitors who have access needs.

Literature review

In addition, statistics on individuals with impairments are generally scarce in South Africa, especially regarding tourism participation within the domestic tourism context. However, the World Health Organisation (WHO) estimates that approximately over a billion persons globally have some form of impairment (United Nations World Health Organisation International Classification of Functioning Disability and Health (ICF), 2018). Furthermore, since cognitive impairments are usually very difficult, if not impossible, to identify (WHO 2002; 2007), the majority of persons with impairments are not included in surveys, not only in South Africa but also the rest of the world. This is particularly the case regarding tourism participation because tourism is viewed as being exclusive to the elite groups of society (Saayman & Giampiccoli, 2016). Agadjanian and Zotova (2012) believe that the demographics of persons with impairments are rarely represented in the demographic analyses of either the tourism consumer-market or the human resource-market. The qualitative and quantitative studies on persons with impairments have limited their scope to the demographics of key informants/advocates only with limited cross-sectional cues on the general populace of persons with impairments (Laas, 2012; Rispin, Davis, Sheaffer, & Wee, 2019; Tönsing, Van Niekerk, Schlünz, & Wilken, 2019).

Given the competitive nature of the tourism sector, more in-depth information regarding visitors is required. The lack of specific information poses challenges with respect to: i) estimating the economic value of the said market; ii) travel patterns; and iii) the size of the accessible tourism market. It is, therefore, the aim of this study to determine the socio-demographic factors that may influence the participation of persons with impairments in South African tourism. The demography of the study participants can provide opportunities to deduce value towards a positive disruptive innovation in tourism. This view is furthered by Ndlovu (2019) who argues that the demographics of persons with impairments, as part of their voice, have limited considerations when making tourism development decisions compared with their

non-impaired peers. Such limitations result in limited opportunities for people with impairments to exercise their right to recreation and leisure (Chen, 2004).

The accessible tourism market and its travel propensity

Despite the understatement of the disability statistics globally, the number of persons with impairments is estimated to be 15% of the world's population (approximately 1 billion people) and the United Nations World Tourism Organisation (UNWTO) is convinced that accessibility for all to tourist facilities, products, and services should play a central role in any responsible and sustainable tourist policy (UNWTO-Accessible Tourism Development, 2019). Among these, a great number of such tourists has the propensity to travel, either for leisure or business, which presents an opportunity for South Africa given that it is the most popular southern Africa tourism destination (Republic of South Africa Tourism, 2016). Australia's estimate of annual expenditure by tourists with an impairment is around \$3.2 billion (\$2.7 billion for overnight spending and \$546 million for day trip spending) (Childs, 2018). Again, the multiplier effect of those travelling with a disabled person means that the true value of the sector could be as high as \$8.0 billion (Childs, 2018). Europe estimates accessible tourism value extrapolation to be \$88.6 billion by 2025 (Bowtell, 2015). Again, one would believe that the accessible tourism market figures presented do not fully reflect the true picture given the fact that demand-based research in this area is still inadequate (Chikuta, 2015). Thus, the paper upholds the view that there are more people with impairments who would like to participate in tourism, but their ability has been stifled by non-structural and structural constraints (Daniels, Rodgers & Wiggins, 2005; Darcy, 1998). This study, therefore, sought to explore the South African potential accessible tourism market, generally known as the disability tourism market, by profiling their demographic characteristics.

Limited African tourism research has been conducted on disability tourism considering the actual voice of the persons with impairments. For instance, Chikuta (2015) focused on the representative opinions of persons with impairments from both the demand and supply side within a combined South African and Zimbabwean geospace (Chikuta, 2015). Chikuta, du Plessis and Saayman (2017) considered the nexus of travel motivations and demographics of tourists with different impairments. In addition, Bisschoff and Breedts (2012) considered only challenges faced by the disabled and elderly travellers, with a limited scope of the demographics. Neither the mentioned authors nor Snyman (2002) considered specific demographics informed by the persons with impairments themselves. From this standpoint, this study upholds the assertion that demographic information is important to tourism marketers and/or the general tourism industry because it plays a critical role in the consumer purchasing decision process (Vilcekova & Sabo, 2013; Cuculeski, Cuculeski & Kashkov, 2015).

Demographic characteristics and consumer behaviour

Vilcekova and Sabo (2013) opine that sociodemographic information informs marketing communication needs and content for potential markets; for instance, tourists older than 50 years consider domestic-branded products compared to younger consumers who prefer foreign brands. In this study, the researcher is of the understanding that "demographics" commonly regards the individual distribution of traits and attributes within a population, whilst "consumer behaviour" attempts to understand the decision-making process of buyers and how emotions affect buying behaviour (Chamboko, 2018). This implies that demographics and tourist behaviour are crucial determinants of sustainable destination competitiveness through the comprehension of travel trends, spending patterns, and time of travelling. This goes without saying that demographics enhances the positioning of tourism products in the mind of the

potential tourist; hence, age and ageing among other demographic elements are crucial in the marketing and branding of tourism in South Africa.

Altinay, Güçer and Bağ (2017), Deyshappriya, Idroos and Sammani (2019), and Hemsley-Brown and Oplatka (2016) opine that personal factors such as age, occupation, life cycle, personality, education, gender and family (marital) status influence consumer behaviour as informed by one’s views/perceptions, desires, and motivations to travel. Therefore, this study could provide South African tourism marketers with insights into ways to attract and serve the accessible tourism market (Slabbert & du Plessis, 2011). From this viewpoint, demographic information informs the tourism marketers regarding travel desire, motivation, and satisfaction (Ma, Chow, Cheung, Lee & Liu, 2018). This study therefore profiles the demographics of persons with impairments as a means to justify the need to mainstream them as a tourism market.

Method

This study adopted a quantitative approach in analysing and presenting the collected demographic data from persons with physical impairments. This was achieved using a semi-structured questionnaire and online Facebook forum discussions. This study acknowledges that the targeted participants possess certain characteristics of the ‘hard-to-reach’ population (Marpsat & Razafindratsima, 2010; Smith, 2012). This study forms part of Makuyana’s doctoral thesis (2017-2019), which used online questionnaires with a total of 372 responses. Thus, 32 responses stemmed from emailed questionnaires, and 340 responses were obtained from Facebook forums comprised of individuals who had some travel experience, all of which informed this article on attributes which may support likelihood to travel among impaired individuals.

Therefore, this article considered only questions which intended to gather demographic data. Thus, questions adopted for this article focused the following questions: how best can you describe your gender? What is your age range? What is your ethnicity? Which race can best describe you? What is your marital status? What are your educational levels? How do you best describe your employment status as relating such to your traveling routines? How do you best describe your experiences, as well as expressing aspect which you might have regarded as hindering your maximum participation in tourism?

Consent was obtained from the group administrators as well as the participants as the groups were used to consider both personalised, confidential issues as platforms on which to further obtain a common voice on impairment and disability issues as well as to resolve and alleviate common challenges and experiences faced by the group members. Hence, such a background enhanced the pursuit of this study through administering one question at a time, which would form a discussion thread. The participants took an average of three days to provide feedback until the participants would have stopped providing feedback on the posted theme/question. The demographic information was requested from the participants as a structured post marking the end of the panel discussion in each forum, which was followed by thanking the participants. The data collection from the virtual space fostered buy-in and voluntary willingness by the impaired participants in South Africa (Creswell, 2007; Creswell & Poth, 2018).

Table 1 below presents a summary of the targeted population, sampling strategies, inclusion, exclusion, and sampling size.

Table 1: Population, sampling strategies, inclusion, exclusion and sampling size

Population	Sampling Strategies	Inclusion criteria	Exclusion criteria	Sample size



Approx. of 25% of the recorded 7.5% of South Africa's population with disability, which amounted to approx. 1million who have physical impairments and are above 5years and below 85years of age (StatsSA,2012)	Stratified-purposive sampling	Persons with physical impairments above the age of 18years.	Persons with Sensory and communicative impairments; moderate to severe physical impairments and persons with impairments below the age of 18years were excluded.	372 persons with impairments.
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Source: compilation for this study

Table 1 highlights a sample size composed of the persons with impairments, amounting to as many as the researcher could possibly recruit for this study. The available accessible tourism literature in South Africa is dominated by the focus on the opinions of the gatekeepers representing persons with impairments. In order to avoid falling into the same trap, this study collected data from persons with impairments themselves. The 372 respondents constitute more than the recommended minimum saturation levels for qualitative studies, as opined by Gentles, Nicholas, Jack, McKibbon and Szatmari (2015) who propose a range between 10-30 interview-participants. The Grounded Theory argues for at least 25 interviews to validate qualitative data saturation (Charmaz, 2014). Corlin and Strauss (2015) suggested that a time-bound approach maintain that five to six interviews lasting for a total of one-hour could enhance the rigour of data saturation for a qualitative study. Therefore, this study obtained adequate responses from which to draw meaningful conclusions about the population in question. The demographic data drawn from the structured questions posed in threads (posts) on the Facebook forums and the responses to the survey (email) were analysed through Creswell's five-steps of content analysis which can be summarised as logging, anecdotes, vignettes, data coding and thematic networking (Creswell, 2014). This analysis was augmented by the use of the Atlas.ti 8 computer-based analysis.

Results and discussion

Gender

Of the 372 participants, 280 (75%) were males while 92 (25%) were females. This shows a skew towards male participants. Almost similar gender percentages were witnessed in the studies conducted by Tonsing et al. (2019) in their study based in South Africa and Rispin et al. (2019), who conducted the study in Kenya. This may be interpreted to mean that males with impairments have a greater boldness in airing their opinions compared to their female peers. This notion is furthered by Wickenden, Mulligan, Fefoame, and Katende (2012) and Nzo (2019) who believe that females with impairments experience marginalisation from childhood, which destroys their psycho-emotional quotient compared with their male counterparts. This male-skewed gender percentage appears to be consistent within this accessible tourism demographic profiling, which may imply that there is a likelihood that engaging in tourism would be skewed towards males. The gender distribution shares consistencies with Jamhawi, Al-Shorman, Hajahjah, Okour, & Al.Khalidi (2015) that tourism sector provides limited access and participation to women (with and without impairments) participation either as employment or consumer (tourists).

Age

The ages of the participants are presented in Table 2.

Table 2: The age of the participants

Age groups	Characteristics	Ages range	No. of participants	Percentiles	Accumulative Total (n)
1950-1960	Baby Boomers	70-60years	6	1.62%	6

1961-1970	Gen X	59-50years	25	6.72%	31
1971-1980	Gen X	49-40years	99	26.61%	130
1981-1990	Gen Y	39-30years	229	61.56%	359
1991-2000	Gen Z	29-20years	13	3.49%	372

Source: Primary data

Table 2 presents the ‘Generation X’ (40-59 years) with a combined total of 33.3%, ‘Generation Y’ (30-39 years) with 61.56%, Generation Z with 3.49%, and the Baby Boomers with 1.62% participation for this study. According to this study, Generation X is more self-directed and has resources to support visits to tourism designated facilities for longer stays if this group is mainstreamed for tourism participation. Generation Y is entering the workforce, which may imply access to disposable income that could enable them to fulfil their tourism-related desires. These two age groups dominated the research participation. The Gen X and Y age groups uphold the desire to actively participate in socio-economic tourism endeavours opposed to a confirmative attitude that is propagated by marginalisation and stereotyping by the societal disabling environment (Darcy & Buhalis, 2011). From an accessible tourism stand view, Alen et al. (2012) and Darcy and Buhalis (2011) highlighted the growing ageing/elderly tourism market segment as influencing tourism growth because such constitute a significant portion in tourism statics and value addition throughout the global tourism.

Buhalis, Michopoulou, Eichhorn, and Miller (2005) and Rebstock (2017) believe that the ageing population has a high level of spending ability and their access needs are similar to those of persons with impairments. Darcy (2006) opines that many persons with impairments are living independently and their financial wealth as well as their travel desires are increasing; yet this market is usually ignored. Pavkovic, Lawrie, Farrell, Huuskes, and Ryan (2017) and Rebstock (2017) assert that in 2012 ageing and persons with impairments in Europe spent approximately 80 Euro per person per day, 700 Euro per domestic overnight trip, and 1100 Euro per foreign overnight trip. For the said population, the gross turnover was 352 billion Euro for tourism-related service providers, a gross value adds of approximately Euro 150 billion and a Gross Domestic Product of 164 billion euros. The above statistics indicate that persons with disabilities, especially those of the aged, constitute a significant market and the industry needs to be ready.

Darcy (2010) and Makuyana and Saayman (2018) concur with the view that there is a need for more information from the voice of persons with impairments in order to develop comprehensive approaches for mainstreaming people with impairments in tourism. This is reinforced by a tourism consumer behaviour perspective set by Luiza (2010) in that: i) persons with impairments have a tendency to become brand ‘evangelists’, a tendency exhibited by generations X and Y regarding their favourite brands. Hsu and Power (2002) express this phenomenon as “the impaired persons [who] tell 10 times more people as compared to non-impaired peers”; ii) they become regular clients of facilities that address their needs; and iii) they take longer holiday-breaks and hardly ever travel alone. It has been noted that 50% of this cohort travel with a partner, 20% travel with a child, and 21-25% travel with a companion (Luiza, 2010). Hence, mild-condition impairments do not always prevent a person from accessing socio-economic activities that are geared towards enjoying dignified human endeavours in like manner as their non-impaired peers.

Ethnicity

The ethnicity of the participants is presented in Table 3.

Table 3: The ethnicity of the participants

Ethnic Groups	No. of Participants	Percentiles	Accumulative Totals (n)
English-South Africans	65	17.5%	65



Afrikaans	219	58.9%	284
Sotho	28	7.5%	312
Venda	24	6.5%	336
Ndebele	12	3.2%	348
Zulu	10	2.6%	358
Tswana	7	1.9%	365
Xhosa	7	1.9%	372

Source: Primary data

Table 3 indicates that the majority (58.9%) of the participants were Afrikaans followed by the English-speaking group with 17.5%, the Sotho group with 7.5%, the Venda with 6.5%, the Ndebele with 3.2%, the Zulu with 2.6% and the Tswana and Xhosa each with 1.9% respectively. This has implications for tourism buying behaviour in South Africa. This distribution pattern implies that participation might have been limited by poor access to information technology due to spatial distribution among persons with physical impairments in South Africa. Since the data collection was performed electronically, it could be assumed that the Afrikaans population may have had greater access to the Internet; hence they were more readily able to participate in the study. One may also suggest that the same ethnic group is more likely to participate in tourism since they have more access to information. This is crucial towards understanding other ethnic group-related interests within the trending needs towards more rural and cultural tourism among other types of tourism (Alen et al., 2012; Darcy, 2010). This may play a role towards accessibility dialogue and literature for of the tourism system.

Race

The findings regarding racial distribution are presented in Table 4.

Table 4: Racial categories of the participants

Race	No. of participants	Percentiles	Accumulative Totals
Black	88	23.7%	88
White	280	75.3%	368
Others	4	1%	372

Source: Primary data

Table 4 indicates that the racial distribution of the participants is white dominated (75.3%) with 23.7% being black and the remainder comprising coloured and/or mixed races. Mutanga (2018) highlighted that the majority of learners with impairments enrolled at higher education institutions in South Africa are white and coloured. One may interpret the results presented in Table 4 as a reflection of domestic accessible tourism in South Africa, which is dominated by the white race. The results may provide insights to strategies that may embrace the view that accessible tourism should be for all as opportunities can incept from our reach (Chen, 2004; World Tourism Organization, 2016).

The marital status of the participants

The marital status of the participants is presented in Table 5.

Table 5: The marital status of the participants

Marital Status	No. of Participants	Totals(n)
Single and unmarried	157	157
In a relationship and not living together	80	237
Married	91	328
Widowed	28	356
Living Together	10	366
Divorced	6	372

Source: Primary data

Table 5 shows that 42.2% of the respondents are single and unmarried, 21.5% are in a relationship but not living together, 24.5% are married, 7.5% are widowed, 2.7% are living together and 1.6% are divorced. This is consistent with the notion of D'souza (2004), Makuyana (2020), Vehmas (2004), and Watson (2012) who view that impairments do not compromise dignity, decency and humanity, just as any other societal membership. One may therefore interpret that disabled people are to be regarded as social beings who also require recreation and tourism. This, therefore, implies that tourism marketers should not pass this market by. The results support Darcy (2010) view that tourism should prepare to address this growing access-need market, that has propensity to travel.

The educational levels of the participants

The educational levels of the participants are presented in Table 6.

Table 6: The educational levels of the participants

Highest qualification/education	No. of Participants	Accumulative Totals (n)
No formal education	5	5
Primary education	4	9
Secondary education	91	100
Vocational certification/Diploma	114	214
Tertiary Degree	118	332
Post-Graduate	40	372

Source: Primary data

Table 6 reflects the educational and qualification status of the participants. Thus, 31.7% have degrees, 30.6% have a vocational certificate or diploma, 24.5% have secondary education, and 10.8% have earned a post-graduate qualification as their highest qualification. However, some of the participants have a primary/basic education while others do not have any formal education. Table 6 supports the opinions of Makuyana and Saayman (2018), and Mutanga (2018) that education status may influence the likelihood of participation in tourism. This is supported by Alen et al. (2012) who linked educational status as influential towards disabled people's participatory behaviours within tourism-related activities. One may assume that the educated are more likely to be gainfully employed; hence they would have disposable income available to engage in tourism and recreation. This presents an opportunity for tourism marketers in South Africa.

The employment status of the participants

Results of the employment status of the participants are shown in the Table 7.

Table 7: The employment status of the participants

Employment Status and/position	No. of participants	Accumulative Totals (n)
Unemployed and not looking for work	68	68
Going for tertiary education and unemployed	17	85
Unemployed and looking for work	4	89
Not schooled and unemployed	5	94
Employed	277	371
Retired	1	372

Source: Primary data

Table 7 highlights that the 71.0% of the participants who are employed may imply that having impairments does not diminish the desire to be economically independent and participate in socio-economic activities like tourism (Groschl, 2007; 2011). On the other hand, the 17.4% who are unemployed but not looking for work may imply that they have low esteem as a consequence of marginalisation and discriminatory experiences (Choruma, 2007; Ndlovu,

2019). About 4.4% have a career desire that they are pursuing while they are most likely to expect that the non-impaired would accommodate them in order to reduce the environmental challenges (Ndlovu, 2019). However, 1.0% are unemployed but looking for work and 0.26% are retired. This implies that persons with impairments are not always objects of charity as perceived by many of their non-impaired counterparts (Watson, 2012). If people with impairments are employed, the chances are that they have some disposable income for travel and tourism, or they can be part of the incentive tourism market which makes them eligible for paid vacations. Again, this presents an opportunity for tourism and hospitality businesses in South Africa.

The results highlighted that employment status relates to participation in tourism among impaired persons. This is supported by Alen et al. (2012), who projected a change that included greater demand on access-needs from growing elderly and impaired tourists who currently afford traveling as linked to individual's socio-economic as well as behavioural perspectives by 2020. Alen et al. (2012) pointed this as being heavily influenced by the socio-demographic context that include, education level, age, economic activity, environment and lifestyle, with the largest percentage of tourists who travel being those with a higher level of education and employment positions that include greater responsibilities and salaries. To this standpoint, this paper furthers this assertion on access-need market within a South African tourism context.

The results highlight potential betterment of experiences if tourism practitioners would have capacity to handle impaired tourist. However, communication, attitudinal barriers appeared to be more prevalent as hindering maximum participation in tourism. This shares similar views set by Makuyana and Saayman (2018) that although studies on tourism and disabilities reveal several barriers, which restrict or outright prevent disabled people from participating in touristic activities compared to their non-disabled counterparts (see also Buhalis & Darcy, 2011), much of this research is problematic. This is because currently tourism systems (including different practitioners throughout the value chain) treats disabled people as a homogenous group. Indeed, it ignores the fact that there is a wide array of impairment categories and, that to a large extent, whether or not something functions as a barrier depends on the personal circumstances of each individual and, importantly, that individual's support needs (Buhalis & Darcy, 2011; Devile & Kastenholtz 2018). This means that existing research has often adopted a "one-size-fits-all" approach when examining barriers and constraints to participation (Makuyana, 2020). In turn, this situation hinders a systematic understanding and resolution of the problems that people with different impairments face in the context of tourism (Deyshappriya et al., 2019; Makuyana, 2020). Therefore, the discourse upholds the need for an in-depth understand accessible tourism from a potential business lens and this paper foster such from a socio-economic demographic angle.

Implications

Based on the aim of the study, and the results which revealed that persons with impairments are an untapped tourism market for domestic tourism in South Africa. Evidence from literature and market research shows a prevalence that tourism system prefers to target the non-impaired tourism market segment while overshadowing their impaired peers (Buhalis & Darcy, 2011; Deyshappriya et al., 2019; Groschl, 2007;2011; Makuyana, 2020). The documented economic value is presented in a relative context aligned with the ageing population, in South Africa, which has similar needs (Alen et al., 2012; Altinay et al., 2017; Buhalis, 2005; Darcy, 2010; Groschl, 2011; Makuyana, 2020). The aforesaid is due to the establishment of limited industrial-based perceived and real economic value that the said persons contribute to the South African tourism economy.

Based on the initial findings, the majority of the respondents are working individuals which indicates that they may have disposable income which could be channelled into the tourism industry. Alen et al. (2012) agree to this notion socio-economic demographics are critical in ascertaining potential of a tourism market (Alen et al., 2012). It confirms the literature that people with impairments are well educated and form part of the workforce (Groschl, 2007; 2011). The results support the notion that this market has the possibility to contribute significantly to tourism destinations (Chikuta, 2015; Chikuta et al., 2017; 2018). This implies that governments should focus on gaining more information on who these individuals are and what their travel behaviour entails in order to include this market in the tourism industry. Secondly, it was indicated in the results that black people do not participate in the tourism market as much as their white peers. This implies that the research into enhancing the enlargement of the domestic tourism market should be conducted in order to include the black market as part of transformation drive by the South African government (National Development Plan, 2030; Broad-Based Black Economic Empowerment Act 53 of 2003; National Tourism Sector Strategy, 2016-2026). This implies the need to prioritise exploring the said potential tourism market in South Africa. It is currently part of the South Africa Tourism (SAT) strategy to grow the black domestic market and SAT should make sure that the yet undiscovered black impaired market should be included in the research.

As indicated in literature (Makuyana & Saayman, 2018; Mutanga, 2018; Ndlovu, 2019), the majority of tourists in South Africa are well educated. Likewise, the participants of the current study are significantly/highly educated. This implies that the said potential market's view on tourism could be informed by rational marketing approaches that would enhance the potential demand to be active. In addition, the said market is seeking novelty experiences whenever they participate in tourism. The push/enhancing factors indicate that the demographic profile of this group would enhance their participation in tourism when compared with the market analysis of the average tourist (Slabbert & du Plessis, 2011; 2013). Thus, this notion would lead to leveraging the travel propensity of persons with impairments in the tourism and hospitality industry, as exposed by the demographic profile presented in this study. Tourism authorities and destination marketing organisations in South Africa must deliberately ensure that this 'neglected' market is captured and satisfied. Unfortunately, there is still very limited literature in this regard from a South African tourism context.

Conclusions

The objective of this paper was to compile a profile of the demographic characteristics of the participants with impairments and to present an argument for accommodating people with impairments as tourism labour and consumer market based on the potential presented in the demographic characteristics provided. Based on the literature reviewed for this study, one, therefore concludes that only Europe, the Americas, Asia and/or Oceania have statistical value regarding the access-need market. Africa, particularly South Africa, contributes a very limited, if not a lack of, statistical tourism economic value by the ageing population and persons with impairments who share similar accessible tourism needs. This may pose implications regarding the reluctance among the tourism public and private sectors to accommodate the said market within the mainstream tourism labour and consumer markets of South Africa. From this point of view, destination marketing organisations are encouraged to explore this domestic potential market within societies who are keen to participate in tourism within South Africa.

This study recommends that further research be conducted regarding said market travel behaviour and tourism motivations. This recommendation serves to motivate South Africa Tourism to include the above-mentioned potential market in marketing campaigns. From this standpoint, this study could contribute to the information that could inform tourism marketing

managers and other managerial offices of the value that could be obtained from integrating persons with impairments into the mainstream tourism industry, either as consumers or human resources. In addition, this information could also contribute to future research, and marketing and tourism product development which would further prepare the industry with competencies to accommodate visitors with and without impairments. The paper contributes information that could improve the image and attractiveness of a destination regarding the consumption of products and services. It could also generate greater sustainable repeat visits by the access-need market that would be integrated into the mainstream tourism markets.

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