

Gaining Access at Historic Tourism Sites: A Narrative Case Study of Physical Accessibility at
Glamis Castle

by
Heather Barlow

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Author's Declaration

I hereby declare that I am the sole author of this thesis. This is a true copy of the thesis, including any required final revisions, as accepted by my examiners. I understand that my thesis may be made electronically available to the public.

Abstract

Today, tourists seek authentic experiences from places they visit. For countries where the historic environment is a key component of tourism, the concept of maintaining authenticity is vital to encourage potential visitors. Historic buildings, such as castles, were built in a time when accessibility for people with disabilities was not a major concern. Today, the number of people living with a disability is increasing and is expected to continue to grow as a result of the aging population and longer life expectancy. While all people may have a desire to participate in tourism, and a similar growing interest in an authentic experience, a historic site is enjoyed by all interested visitors only when it is accessible to all. How does a service provider enhance accessibility while continuing to preserve authenticity of the historic site? A service provider of a historic site is faced with the extra challenge of juggling both disability and heritage policy requirements. Satisfying the needs of both can be difficult and may, at times, feel like accessibility at a historic site is an impossible goal. Researching the interaction between these two types of policy and the influence they have on accessibility and disability at historic sites assists in the discovery of policy areas that interfere with a service provider's ability to enhance accessibility. This may increase knowledge of how to increase accessibility, and how policy currently influences the perpetuation of accessibility and disability at these tourist sites.

The purpose of this case study is to explore Glamis Castle in Scotland to illuminate accessibility at the confluence of three power contexts: the economics of tourism, the preservation of historic buildings, and the inclusion of people with disabilities. Stories uncovering the confluence of the three power contexts and its influence on Glamis Castle were created. Using narrative case study methodology and Roe's (1994) approach to narrative

policy analysis, stories about accessibility and disability at Glamis Castle were created through visual and textual data, and a review of policy and other related documentation.

The stories reveal the current state of disability and heritage policy and its effect on Glamis Castle, the current perpetuation of disability and accessibility at the site, and current challenges that service providers may face at historic sites. The stories reveal the need for service providers, staff, and the public to be provided with more educational opportunities to help enhance accessibility at historic sites and encourage inclusion; specifically, they provide insight into the influence choice has on enhancing accessibility at the macro, organizational and individual levels.

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Table of Contents

Author’s Declaration	ii
Abstract	iii
Acknowledgements	v
Table of Contents.....	vii
List of Figures	x
List of Tables.....	xi
Chapter One: Glamis Castle – A Key Feature in Scotland’s Historic Landscape	1
Placing Glamis Castle in the Policy Context.....	5
A Critical Framework for Understanding Disability and Accessibility	12
Reflexivity in Narrative Case Studies	14
Chapter Summary.....	15
Chapter Two: Literature Review	17
Challenges of Participation in Tourism: Issues of Disability and Access.....	17
Inclusion and Tourism.....	24
Understanding disability.....	28
The medical model of disability	28
The social model of disability.....	30
The biopsychosocial model of disability	32
Policy Directions for Tourism.....	39
Physical and intellectual access of tourism sites: A debate.....	44
Tourism industry and the perpetuation of inaccessibility.....	47
Summary of the Review of Literature	53
Chapter Three: Methodology	55
Crystallization, Data Collection, and Reflexivity.....	55
Crystallization	57
Visual Data.....	58

Policies and Other Documentation	59
Interview Participants and Sampling	61
The Trials of Obtaining Interview Participants	62
Reflexivity	70
Data Analysis.....	71
Ethical Issues	74
Chapter Summary	75
Chapter Four: Findings	77
Narratives of Accessibility and Disability at Glamis Castle	77
The Influence of Disability Policy on Glamis Castle	78
The story from the 18 th to the 20 th century.....	79
The turn in disability policy in the new millenium.....	83
Discussion of the disability policy story for Glamis Castle.....	92
A Story of Heritage Policy in Scotland	95
Discussion of heritage policy story.....	102
Disability Policy, Heritage Policy, and the Provision of Alternatives: The Story of a Balancing Act	105
Discussion of balancing disability and heritage policy and alternatives.....	116
Touring Glamis Castle in a Wheelchair: An Experience.....	119
Reflection 1: Connections with people enhances accessibility.....	138
Reflection 2: The process of negotiating constraints.	139
Reflection 3: Managing the emotion of negotiating constraints.	141
Reflection 4: New insights into disability.....	141
Discussion of Margaret’s Story	142
Maximizing independence.....	143
Choice and freedom.	145

Personal connection to Margaret’s story	148
What it means for me as an able-bodied individual to write this narrative	149
Chapter 5: Conclusions	150
A Story of Striving for Equality Through Disability Policy	150
A Counter-Story About the Limits to Achieving Equality of Access	151
A Counter-Story of the Lack of Creativity in Local-Level Changes for Accessibility	152
A Story of the Importance Placed on Preserving the Past.....	152
A Counter-Story of the Connection to Economic Generation.....	154
A Counter-story About Who Holds the Power to Create Change.....	154
A Non-story About the Impact on the Meaningfulness of an Individual’s Experience	155
A Non-story of Who Decides what is Preserved of Scotland’s History, and How?	156
The Metanarrative	156
Recasting the Issue	159
Methodological, Theoretical, and Practical Implications.....	160
Limitations of Study.....	164
Suggestions for Future Research.....	165
A Final Thought	166
References.....	168
Appendix A: Interview Protocol for Historic Tourist Site Participants.....	181
Appendix B: Interview Protocol with Tourism Board Participants.....	182
Appendix C: Interview Protocol with Participants Who Have a Disability.....	183

List of Figures

<i>Figure 1.</i> Quote from Glamis Castle visitor brochure.....	120
<i>Figure 2.</i> Example of promised service at Glamis Castle described in brochure.....	120
<i>Figure 3.</i> Symbols in brochure describing accessible facilities at Glamis Castle.....	121
<i>Figure 4.</i> Statement in visitor brochure about possible inaccessibility of Castle tour.....	121
<i>Figure 5.</i> Website address displayed in brochure.....	122
<i>Figure 6.</i> The main menu of Glamis Castle’s website.....	122
<i>Figure 7.</i> Contact information appearing in visitor brochure.....	123
<i>Figure 8.</i> Dining room of Glamis Castle.....	124
<i>Figure 9.</i> Admission sign at entrance to Glamis Castle.....	125
<i>Figure 10.</i> Map of Glamis Castle site.....	126
<i>Figure 11.</i> Wheelchair accessible path to the Walled Garden.....	127
<i>Figure 12.</i> Highland cattle on the castle grounds.....	127
<i>Figure 13.</i> Stairs leading to starting point of castle tour	129
<i>Figure 14.</i> Ramp leading to audio-visual room.....	130
<i>Figure 15.</i> Audio-visual room.....	130
<i>Figure 16.</i> Entrance to cafeteria with slightly raised divider.....	132
<i>Figure 17.</i> Image of cafeteria cash and food counter.....	132
<i>Figure 18.</i> Quote in brochure.....	133
<i>Figure 19.</i> Public washroom entrance from inside.....	134
<i>Figure 20.</i> View of stalls inside public washroom.....	135
<i>Figure 21.</i> Hallway leading towards accessible washrooms.....	135
<i>Figure 22.</i> Entrance to gift shop.....	136
<i>Figure 23.</i> View inside gift shop.....	137

List of Tables

Table 1 <i>Recruitment Process for Interviews</i>	67-69
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Chapter One: Glamis Castle – A Key Feature in Scotland’s Historic Landscape

The purpose of this case study is to explore Glamis Castle in Scotland to illuminate accessibility at the confluence of three contexts of power: the economics of tourism, the preservation of historic buildings, and the inclusion of people with disabilities. Glamis Castle was first built in the eleventh century (Glamis Castle, 2010a), a time when accessibility for people with disabilities was not considered in the planning process of a new structure. Since the eleventh century, Glamis Castle has stood in Scotland first serving as a hunting lodge for the King of Scots and belonged to the Crowne (Innes-Smith, 2000). In 1376, Glamis Castle became a large estate granted to Sir John Lyon and was no longer owned by the Crowne (Innes-Smith, 2000). Since then, Glamis Castle has been a family home and later, a site for tourism (Innes-Smith, 2000). Glamis Castle has been the home of the Bowes-Lyon family since 1372 when they were granted thaneage by King Robert II (McCann, 2008). The castle is now a popular tourist attraction for people visiting Scotland. The historic site is open to visitors from March until December of every year, but is also available year round at special request to accommodate such excursions as school trips and large bus tours (Destination 360, 2010).

Since the establishment of Glamis Castle, a number of aesthetic alterations and additions took place up until the late nineteenth century (Glamis Castle , 2010a). The castle sits on low-lying ground since the castle was originally built on the site of the royal hunting lodge (McCann, 2008). In 1400, the east wing was built, which is now the location of the Royal Apartments (McCann, 2008). It is thought that when the east wing was originally used, there was an external stair case used to access the first floor (McCann, 2008). The Great Tower of the castle commenced building in 1435 and completed in 1484; this part of the

castle was not attached to the east wing as it is today, this occurred 100 years later (McCann, 2008).

During this time, the castle resembled many other castles throughout Scotland; it was not until the beginning of the 17th Century that the building was shaped into its present structure (Glamis Castle, 2010a). In 1679 the last piece of the castle, the West wing was built (McCann, 2008), which was later demolished in 1775 (Great Scotland, 2012). Improvements to the castle occurred over a hundred years later with the replacement of the East wing roof, and rebuilding of the west wing into what it looks like today (McCann, 2008). Part of the uniqueness of this historic tourist site is that it now resembles a French Chateau instead of a fortress from medieval times, which is typically found in the country of Scotland (Destination 360, 2010).

Glamis Castle has been chosen as the site for this case due to its prominence in terms of historical significance and award winning status. During World War I, the castle was used as a convalescent home for wounded soldiers (McCann, 2008). In 1950, Glamis Castle was open to visitors (McCann, 2008). The architectural uniqueness of Glamis Castle entices visitors to the area and the castle is typically on a list of must-sees as it has a strong connection to the current monarchy; is involved in tours of royal residences within the United Kingdom; and is pictured on the back of a Scottish bank note (Destination 360; Glamis Castle, 2010a; Mysterious Britain & Ireland, 2010). The castle is probably best known as the childhood home of the Queen Mother and the birth place of Princess Margaret in 1930 (McCann, 2008). The birth of Princess Margaret at Glamis Castle was a special one as she was the first Royal baby to be born in Scotland in over 300 years (McCann, 2008). Glamis Castle is also well known for its appearance in Shakespeare's *MacBeth*. Although it appears in the play as a

thaneage in the eleventh century, it did not become one until 1264 and later became a feudal barony in 1376 (McCann, 2008). Glamis Castle is also said to be one of the most haunted castles in all of the United Kingdom (McCann, 2008). The most regular ghost appearance is that of the Grey Lady in the chapel which is supposedly the spirit of Lady Janet Douglas who was burned at the stake in Edinburgh in 1537 for witchcraft (Parkinson, n.d.). There is also said to be a ghost of a woman with no tongue who haunts the castle grounds and looks out from a window of the castle (Parkinson, n.d.).

A visitor touring the castle can walk into many different rooms, and each room carries its own story. The dining room is the first room on the tour. This room was built in the 1850s and has hosted many parties for different members of royalty and other important figures in Scotland since (McCann, 2008). Guests also have the opportunity to tour the crypt, the entrance to this room is dated 1687 and is considered the ancient heart of the castle (McCann, 2008). A room titled the Drawing Room is considered the most elegant apartment in the castle; the room began as a primitive room but developed into what it is today (McCann, 2008). The Chapel is one of the most anticipated rooms on the tour, it is one of the best private chapels in all over Northern Europe and is said to be frequently occupied by the spirit of Lady Janet Douglas (McCann, 2008). Visitors are also taken through the billiard room, King Malcolm's room, with the tour ending in the Glamis gallery. This gallery is an exhibition room that houses many photographs, costumes, and memorabilia of Glamis Castle (McCann, 2008).

Visitors can also experience the history of Glamis Castle through its surrounding land and gardens. Planting and landscaping of Glamis Castle has occurred for over five centuries, with much of the planting playing a key role in the setting of the castle today (McCann,

2008). The main interests of the grounds to visitors today include the Forecourt and Dutch Garden, the avenue, the Italian Garden and nature trail, pinetum and walled garden and the wildlife (McCann, 2008). The Dutch Garden was created in 1893 by Arthur Castings of London. It is located on the one side of the forecourt (McCann, 2008). The forecourt includes elements from the garden of the 17th century, these elements are the sundial, two statues and two old trees. Photos from the 18th century show that the forecourt was originally enclosed, but is more of an open area today (McCann, 2008).

The feature known as the avenue is a mile long and leads towards the castle. It is lined with trees from the 17th century and begins with the Queen Mother Memorial Gates that were opened in 2008 (McCann, 2008). Before the Queen Mother Memorial Gates were erected, the grand entrance to the castle grounds was a series of ornamental gateways placed in intervals along the avenue but were removed in 1775 (McCann, 2008). The Italian Garden sits to the east of the castle with the design based on Arthur Castings but implemented by the Queen Mother's mother, Countess Cecilia Bowes-Lyon, in 1910 (McCann, 2008). Next to the Italian Garden lies the nature trail, almost a mile in length. On the trail, visitors are given the opportunity to see wildlife native to the area (McCann, 2008). As visitors travel along the trail they will reach the pinetum which includes a variety of different trees native to North America. Along the pinetum is the River Dean (McCann, 2008). Close by the River Dean is the Walled Garden which was built between 1866 and 1868. For many years the Walled Garden was not looked after and recent restoration has begun to return it to its former glory (McCann, 2008).

Not only does the case study site have many enticing features for potential tourists, but it has also received a number of awards of excellence. Glamis Castle has received the *Visit*

Scotland five stars award given to businesses that excel in the areas of product quality, service to its guests, and encouraging a positive visitor experience (Glamis Castle, 2010a). Other awards received for Glamis Castle include the Green Tourism Business Scheme, the Investor in People Award, and the Tourism Retailer of the Year Award given to sites that focus on the consumer, innovation and leadership in combination with the promotion and maintenance of the history and culture of a site as well as the surrounding area (Glamis Castle, 2010a). Awards the site received may indicate the importance service providers place on quality and customer satisfaction.

Glamis Castle plays a key role in the livelihood and pride of the village of Glamis. Glamis Castle helps provide employment and a place to call home for its residents; it provides a connection to the past and is an example of Scottish hospitality (McCann, 2008). Providing access for all interested visitors is important to providing anyone with an ability to enjoy this unique feature in the historic landscape in Scotland. As history comes together with tourism in the present day, issues of accessibility arise not only through the physical structure, but also through policy and social interaction occurring in this space. As the next chapter describes, this narrative case study was designed to explore how disability and accessibility come together in this historic site in Scotland.

Placing Glamis Castle in the Policy Context

Glamis Castle exists at the confluence of three policy contexts in Scotland – the economic context of tourism, the context of historic buildings and preservation, and a concern for the accessibility and inclusion of people with disabilities in society. First, Scotland is a popular destination for people from all over the world with castles figuring prominently in the economic potential of the country. In 2009, Scotland received over 2.59 million visitors; with

the majority intending a holiday or visiting with friends and family (Visit Scotland, 2010). Research shows that people visiting Scotland, as well as Scots residing in the country, want to visit castles and other heritage attractions (Historic Scotland, 2009). Nearly three million people visit historic properties in Scotland every year (Historic Scotland). According to *Visit Scotland*, visiting castles, historic houses and palaces is the third most popular activity to participate in while touring the country. This tourist activity follows closely behind general sightseeing and visiting cities in Scotland (Visit Scotland, 2010).

Much of tourism in the United Kingdom depends on travelling and utilizing historic premises, with an estimation of 40% of tourism dependent on these particular sites (The National Trust, 2002). Heritage tourism in the United Kingdom is considered the major draw of the tourism industry; in England alone, 12 million people visited a heritage site between 1999 and 2000 (Department of Culture, Media and Sport & Department for Transport, Local Government and the Region, 2001).

Second, the historic environment is a key component to how people see and identify themselves as a community and a nation, as well as shape how outsiders may view the country or region (English Heritage, 2007; Park, 2010; The National Trust, 2002). It “provides character, distinctiveness, a sense of place and helps local people be proud of where they live” (English Heritage, 2007, p. 3). The historic environment is a “physical record of what a country is, how it came to be, its successes and failures” (Department of Culture, Media and Sport & Department for Transport, Local Government and the Region, p. 7).

A historic site is recognized as an irreplaceable resource that captures hundreds of years of history encouraging opportunities to feel moved or engaged on a personal level and gain perspective in a fast-paced ever changing world (English Heritage, 2007; Stubbs, 2004). The

authenticity of a historic site is of great importance to the tourist and is recognized by the visitor through the intangible connections made between objects, people and places encountered that are connected to the heritage (Jones, 2009). According to Jones, a historic site is authentic when it is “true to its origin in terms of its date, its materials, its form, its authorship, workmanship and construction” (p.134).

Authenticity is an important concept in tourism literature and can be applied to understanding the preservation of historic sites. The question asked is whether authenticity can be obtained at a tourist attraction, and who or what determines if authenticity is achieved? According to Cohen (2012), there are no set rules, procedures, or individuals who have authority in determining whether a tourist attraction is authentic. As a result, how can one truly determine whether authenticity of a feature at Glamis Castle is at risk if there is no clear definition of what makes something authentic? Authenticity is viewed as a concept that is negotiable, socially constructed, and highly dependent on pre-conceived notions of authenticity by the individual participating in tourism (Cohen, 1988). Even if service providers, Scottish Ministers or policymakers believe preserving a historic site encourages authenticity, a visitor to the site may have a differing view of what authenticity is (Cohen, 1988).

Third, the importance of heritage tourism in the United Kingdom is apparent, but only 8 to 9% of visitors to the sites have a disability; this is most likely a result of the inaccessibility of these attractions (Goodall, Pottinger, Dixon & Russell, 2004). Although concern for the protection of historic buildings is prominent in the United Kingdom, service providers must also consider disability or accessibility policy and its influence on buildings. Service providers are required to make reasonable adjustments to enhance accessibility and are faced

with the task of determining what this means (Goodall et al., 2004). For 15 years in the United Kingdom, the *Disability Discrimination Act 1995* was followed until the introduction of the *Equality Act* in 2010. The *Equality Act 2010* required service providers to increase effort in enhancing accessibility and to strive to make services as inclusive as possible to all potential visitors. Incorporating the expectations and requirements of both heritage and disability policy present to service providers of historic buildings a unique challenge that does not concern other tourism service providers in the same way (Kaufman-Scarborough & Baker, 2005).

Alterations made to guarantee access may never occur if there is a possibility that the authenticity of a site will be reduced. If change does occur at the destination, careful planning should be in place (Smith, 1987). Typical destinations that cannot make major alterations to increase accessibility are historic sites; these sites have legal protection from making alterations that may lower the level of authenticity (Goodall, Pottinger, Dixon & Russell, 2004). Legislative protection is granted to listed buildings in the United Kingdom (Living Heritage, 2011). Legislative protection of historic sites in Britain was introduced in 1882 with the *Ancient Monuments Protection Act*, followed by the *Town and Country Planning Act of 1947*, the *Planning (Listed Buildings and Conservation Areas) (Scotland) Act 1997* and the Scottish Historic Environment Policy (Historic Scotland, 2009; Living Heritage, 2011).

Legislation helps preserve historic buildings (and their contents and related property) to care for and protect the historic environment for the enjoyment of future generations and resulting economic benefits (Historic Scotland, 2009; UK Legislation, 2011). The *Planning (Listed Buildings and Conservation Areas) (Scotland) Act 1997* states that any alterations that may affect the character of a listed building requires consent; if alterations affecting the buildings character are made without consent, the act is punishable by fine or imprisonment

(Historic Scotland, 2009). Since historic sites in the United Kingdom are granted legislative protection from alterations that have an adverse effect on the site, service providers may have to find alternative ways to increase accessibility if they wish to increase the number of people with disabilities visiting (Goodall, Pottinger, Dixon & Russell, 2004). In other words, they must look beyond just physical access (Goodall et al., 2009) to promote the inclusion of all potential visitors.

To explore Glamis Castle, a narrative approach to case study was used. Narrative case studies allow a researcher to look at social problems and provide an opportunity to examine a phenomenon within its own environmental context (Brandell & Varkas, 2010). A narrative case study is an “intensive examination of an individual unit, although such units are not limited to individual persons” (Brandell & Varkas, 2010, p. 377). In this case, the unit is Glamis Castle. A narrative case study provides the researcher with information that might be inaccessible when other methods such as surveys or observations are solely used (Brandell & Varkas, 2010). Creating stories through information found in policies, other related documentation pertaining to accessibility and disability at the case study site, and visual data provides insights that may have been left undiscovered if other methods were used (McLeod, 2010). The purpose of this case study was to explore Glamis Castle in Scotland to illuminate accessibility at the confluence of three contexts of power: the economics of tourism, the preservation of historic buildings, and the inclusion of people with disabilities. The site was chosen for its potential to provide a substantial amount of information, knowledge, insight and interpretation of accessibility in tourism and the perpetuation of disability. Specifically, the research questions addressed included:

1. What stories about accessibility are told at Glamis Castle?

2. What stories about disability are told at Glamis Castle?
3. What structural forces work to create and perpetuate accessibility?
4. What structural forces work to create and perpetuate disability?

A case is recognized as a “bounded system”, which is “bounded by time and place” (Creswell, 1998, p. 37). A case is determined by the way the initial research questions are defined (Yin, 1994). Depending on the research questions, the case may be an individual, event or some other entity (Yin, 1994). A case study highlights decisions that have been made by society in the past and how the results of those decisions may affect happenings today (Yin, 1994). A case provides an opportunity to look at a relatively recent phenomenon using real life examples (Yin, 1994).

For this thesis, the case study focuses on the particular issue at hand, not just the case study site. The site was a vessel that provided opportunities to gain a greater understanding of an issue of interest through the data collected (Creswell, 1998). Narrative case studies deal with a growing or recent trend in society (Creswell, 2009); in this case, the need for greater accessibility and inclusion in tourism as a whole. Although the case study looked at a fairly recent phenomenon, it must be kept in mind that the data collected was limited to the time and place of the study, as well as individuals’ willingness to be involved (Creswell, 2009).

Within a case study, data are collected from a variety of sources to obtain rich data (Rushton, 2001). The researcher’s involvement is expected to be intensive, but also restricted depending on those participating in the case study (Patton, 2002). The time involved is desired to be quite lengthy and intensive, but obtaining necessary information in a restricted time is feasible (Patton, 2002). As a researcher, events that occur while at the site are highly uncontrollable, due to matters occurring presently instead of in the past (Yin, 1994).

For the purposes of this research, a single case study was utilized. Case study provides an opportunity to observe and analyse a phenomenon that has previously not been a major concern (Yin, 1994). In the literature, accessibility at tourism sites has received little attention. A single case study can be used when conducting qualitative research, as long as the data found are rich and meaningful and the purpose of the study is sufficiently met (Patton, 2002).

A case study is used when a researcher wants to illuminate a decision or multiple decisions to understand why they were made, how they were implemented, and what the result of the decision was (Yin, 1994). A case study approach is used when a researcher has little control over what is happening or has happened, and when the issue investigated is a contemporary phenomenon that is currently influencing people (Yin, 1994). Glamis Castle is a strong example of how choices made in the past affect society today. Glamis Castle was built at a time where accessibility for people with disabilities was not a concern. With more people living with a disability and increased interest in an authentic tourism experience, Glamis Castle could be the perfect destination for such a venture. A case study provides an opportunity to explore how we can preserve the past while moving into the future so that Glamis Castle is a place that everyone can enjoy.

According to Lyons (2007), use of narrative methodology is becoming increasingly popular in a variety of research fields. Through my analysis of the literature on narrative case study, I noticed its increased use in the field of psychology with very little recognition in the leisure and tourism fields. Narratives or stories arising in data collected at the case study site provides insight into the construction of disability and inaccessibility, why it may be a challenge at this historic site, and reveals what can be done to make improvements. The narratives will not give generalizations or imply the data are typical in all cases like common

systematic single case designs (Carroll, 1999). A narrative is recognized as a means for interpretation where people gain a greater understanding of a situation or topic in a way that is easily understood (Ricoeur, 1991). Narratives merge a current issue with the past to produce ideas to positively influence change and improve conditions (Angel, Kirkevold & Pederson, 2009). Understanding the interaction of increasing accessibility and economic potential while preserving historic sites may be discovered during the process.

According to Carroll (1999), researchers approach a narrative case study in a variety of ways, and use a variety of different data collection methods. The narrative that develops is a story of not only the history and tradition of a particular place, but helps to realize who and what we are, and what our prospects are for the future (Kaplan, 2003). Narrative case studies are often viewed as critical research in that they can encourage change in the ways individuals look at their own experiences (Daly, 2007). For example, it is hoped that through the research conducted the dissemination of findings will enhance the awareness of disability and accessibility and provide knowledge and insight that may be used to promote positive change.

A Critical Framework for Understanding Disability and Accessibility

This narrative case study was framed within a critical disability approach. A critical approach to disability research seeks to challenge general assumptions and presumptions about disability to enhance the participation of people with disabilities in society (Devlin & Pothier, 2006). Conducting research using a critical approach acknowledges the inequalities faced by people with disabilities in society (Daly, 2007). The approach believes the world is based around “unequal relations and consists of competing interests” (Daly, 2007, p. 34) with disability being “a question of politics and power(lessness), power over, and power to” (Devlin & Pothier, 2006, p. 2). Devlin and Pothier state that disability is believed to be an

issue of “social values, institutional priorities, and political will” (p. 9) to determine who is valued by society and who is marginalized or discriminated against. Power relations are evident when disability is viewed as a misfortune to the individual, where able-bodied individuals believe that people with disabilities should be pitied, rather than treated as equal and valuable members of society (Devlin & Pothier, 2006).

A narrative case study is appropriate when the research pertains to a social movement or seeks political change (Riessman, 2003). In this case, increasing accessibility and providing insight which may help to encourage individuals working in the tourism industry to promote higher levels of inclusion for people with disabilities. Current and past policies including Acts and related documentation pertaining to people with disabilities provide data for exploring narratives that drive policy. While utilizing narrative case study methodology, the subject is approached knowing that how people understand something is how they define it (Lyons, 2007) – in this case, accessibility and disability. As humans, we are “fundamentally self-interpreting and self-defining, living always in a cultural environment” (Lyons, 2007, p. 611). Therefore views of accessibility and disability are greatly influenced by the changing cultural environment in which people live. Results of the study do not make one overall generalization for how the rest of the world is to view disability and accessibility at historic sites - instead it sheds light on the variety of ways people view accessibility and disability.

When utilizing a critical approach in my research, the goal of discussion is to stimulate and lead people into action to create positive change (Daly, 2007; Sylvester, 1995). Within a critical approach, the main way to reach these goals is through communication. Stories developed from data collected in this study described how accessibility and disability were communicated through visual data and documentation at this historic site. Communication is a

main component involved in the construction of society and in how we view ourselves and others (Sylvester, 1995). The critical approach interrogates how language is used when discussing disability and accessibility (Devlin & Pothier, 2006). Presently, disability is described in many ways, which demonstrates the variety of ways disability may be perceived and understood in society (Devlin & Pothier, 2006). Visual and textual data, policies regarding disability and heritage, signage throughout the castle, and other related documentation (brochures, advertisements, websites, statistics, maps) from Glamis Castle were used to enhance understanding.

Reflexivity in Narrative Case Studies

A key component in the critical approach is a strong connection between the personal and professional experience of the researcher. The approach acknowledges the researcher's values and beliefs and how these influence decisions made about the research area, the formulation of the research design, and the way possible outcomes and recommendations may be recognized (Daly, 2007). Reflexivity played a key role in the research and was conducted throughout the research process (Daly, 2007). Reflexivity allows me as a researcher, to gain greater insights into my experiences throughout the research process (Finlay & Gough, 2003). The process increases my ability to situate this study and enhance my understanding – challenging the conventional ways of research that value distance and objectivity from the subject (Finlay & Gough, 2003). Reflexivity is discussed further in Chapter Three.

Travelling to Scotland to visit my family had always been an important component of my life and something I strived to do on a regular basis. I had the privilege of visiting many historic sites in Scotland and Glamis Castle was one of the main historic sites to which I enjoyed returning. Since I was a child, this historic site was a destination that I enjoyed during

my visits. Not only was it close to where my family resides, but it has a structural uniqueness compared to other castles in Scotland. Members of my family enjoyed visiting the grounds as a way to relax and escape everyday life.

My personal interest in this topic area is blended from courses taken while completing my undergraduate degree in Therapeutic Recreation and Recreation and Business at the University of Waterloo. The required courses for Therapeutic Recreation increased my awareness, knowledge, and understanding of people with disabilities. My interest in this area piqued after I was faced with temporary physical limitations of my own that impacted my ability to enjoy a full travel experience and to independently participate in desired activities. Surgery I had on my arm left me with the inability to use my left arm for the majority of my 5 months of recovery, and I still encounter occasional limitations today. During the recovery time, I travelled and found that tasks I previously thought of as easy were the hardest to successfully complete. For example, with the inability to use both of my arms it became impossible to hold onto a carry-on case while trying to manoeuvre and lift other heavier luggage. After this experience, it made me wonder what it must be like when people with disabilities wish to participate in tourism but are faced with the challenges of inaccessibility, inhibiting their participation or overall enjoyment. As a result of this piqued interest, I wanted to conduct research in the area. Completing a thesis was the perfect avenue to accomplish this.

Chapter Summary

Chapter One began with a brief introduction of what a case study is and the methodology that was used throughout this study. The purpose of the thesis and the research questions was also provided. Following the general overview, the importance of heritage tourism in the United Kingdom is explained and the challenges service providers face in

accommodating all tourists at historic sites. The Chapter continued by describing the methodology of narrative case studies in more detail, followed by a discussion of using a critical framework to understand disability and accessibility for this thesis. The role of reflexivity in narrative case studies was included along with the reasons why I decided to research this particular area.

As background for this study and to provide support for the research questions, Chapter Two provides a literature review of a variety of areas related to tourism for people with disabilities. The Chapter introduces the reader to the focus of the stories, the current participation of people with disabilities in tourism, and reasons why tourism is often viewed as a need and right for everyone, regardless of ability. Accessibility challenges encountered in tourism are discussed as well as the current lack of study concerning people with disabilities participating in tourism. The chapter further explores disability and inclusion, as well as issues related to tourism policy and accessibility. Chapter Two ends with a discussion of constraints in tourism pursuits. Chapter Three describes the methodology and research methods used, the continual role of reflexivity played throughout the research process. Chapters Four contains the findings and discussion and is presented as four main stories about accessibility, about the authenticity of heritage sites, about balancing these two demands, and a final story, Margaret's story, written about the experience of a person with a disability at Glamis Castle. Chapter Five provides the dominant stories, counter-stories, non-stories and metanarrative, as well as the methodological, theoretical and practical implications arising from this narrative policy analysis.

Chapter Two: Literature Review

The literature review provides background for the study and determines questions significant for the topic, and is a means to create sharper and more insightful questions about the topic (Yin, 2009). The following sections provide a discussion of literature focused on the inclusion of people with disabilities and tourism, disability and the models of disability, policy directions concerned with disability in tourism, physical and intellectual access at tourism sites, and the perpetuation of inaccessibility at tourist sites.

Challenges of Participation in Tourism: Issues of Disability and Access

The estimated number of people with disabilities may differ depending on the definition used (United Nations Economic & Social Commission for Asia & the Pacific, 2000); however, one estimate is that there are over 500 million people with disabilities in the world today, with the majority having a disability of a physical nature (Davidson, 2006). According to the Life Opportunities Survey Interim Report, 26% of adults are disabled in the United Kingdom (Cuddeford, Glen & Buhman, 2010). The *Disability Discrimination Act* defines a person as disabled if their physical or mental impairment has an adverse effect on their ability to carry out *normal* daily activities (*Disability Discrimination Act 1995*, 2010). The new *Equality Act 2010* shares this definition, but also adds that the impairment must also be substantial or long-term (*Equality Act 2010*, 2011).

Historically, people with a disability were not included in the overall definition of the *consumer* (Kaufman-Scarborough, 2001). Today, people with disabilities are beginning to be recognized as a market segment; this segment is one of the largest and fastest growing, and as a result, compliance to accessibility standards at tourist destinations and attractions is becoming increasingly important (Burnett & Bender Baker, 2001). Many people with

disabilities may wish to participate in tourism pursuits but face restrictions deemed unnecessary (Davidson, 2006). In the United States, one in five consumers has a disability; thus, people with disabilities are recognized as the largest minority group (Waldrop & Stern, 2003).

Regardless of the segment growth, people with disabilities are still recognized in society as an “unintended and unexpected minority, even though this minority is not so minor” (Titchkosky, 2003, p. 121). Many in society, including those working in the tourism industry, may think people who have disabilities make up a small portion of the overall population, and as a result, they are not considered a priority when planning for potential tourists (Goodall, Pottinger, Dixon & Russell, 2004). This view will need to shift as people with disabilities are currently a substantial market to invest in, and will continue to be as the number of people living with a disability is expected to continue to increase (Goodall et al., 2004). Although people with disabilities are less likely to travel than those who are able-bodied, they should not be considered any less important (Bi, Card & Cole, 2007). Given that the general population of tourists is expected to double in size by the year 2020 from what it was in 2007, the number of people with disabilities who wish to participate in tourism will also grow (Burnett & Bender Baker, 2001). Currently, over a third of people with disabilities experience difficulties accessing leisure goods and services (Office for Disability Issues, 2011).

As a whole, people with disabilities create a sizeable market of consumers, but there are difficulties in targeting them effectively. The difficulty is created by the fragmentations present within this market segment; in other words, there are a fewer common bonds found within this segment of the population compared to other minority groups such as, ethnic and

racial groups (Card, Cole & Humphrey, 2006). People with disabilities are not a homogeneous group; there are a variety of impairment levels that may influence the way each individual will go about travelling (Burnett & Bender Baker, 2001; Shaw & Coles, 2004). Due to these variations different segments of consumers with disabilities have to be taken into consideration by the tourism industry when planning or making alterations (Burnett & Bender Baker, 2001; Shaw & Coles, 2004).

Overall, tourists are exhibiting increased interest in participating in diverse holidays than what has been witnessed in the past (United Nations Economic & Social Commission for Asia & the Pacific, 2000). Tourists crave diversity in the people they see, culture and way of life they experience, as well as the nature and architecture they view (United Nations Economic & Social Commission for Asia & the Pacific, 2000); historic sites can assist in providing this experience. People with disabilities are still significantly less likely to be involved in leisure activities compared to able-bodied individuals (Office for Disability Issues, 2011); however, participation in tourism by people with disabilities is starting to increase compared to previous levels (Card, Cole & Humphrey, 2006). One reason for this growth in participation is due to advancements in technology that increased the number of information sources available regarding accessible tourism, the introduction of lightweight and manoeuvrable products to assist with mobility, and adaptations made to activities which makes it possible for a wider range of participants to be involved (Ray & Ryder, 2003). People with disabilities tend to visit cinemas and museums, and are less likely to have visited historic sites (Office for Disability Issues, 2011). Although there has been progress in the area of social inclusion for people with disabilities, individuals still encounter restriction to their

participation choices and experiences, which increases with the severity of an impairment (Goodall, Pottinger, Dixon & Russell, 2004).

With the ability to participate, tourism can provide people with an opportunity to be excited about something, to learn, to relax and rejuvenate, to experience something new, spend time with the people they care about or to develop personal and social aspects of their lives (Aitchinson, 2003; Card, Cole & Humphrey, 2006; McCabe, Joldersma & Li, 2010; Richards & Raguz, 2009). Tourism is recognized as a form of leisure and is an important aspect of people's lives. By some, participation in tourism is regarded as a human right for every individual (Ozturk, Yayli & Yesilta, 2008). Leisure has the potential to provide opportunities to experience greater feelings of dignity, self-esteem and quality in the life of someone who has a disability (Aitchinson, 2003; Card et al., 2006; Sylvester, 1995). According to Ozturk et al. (2008), where access is not upheld as a right this should be considered a form of discrimination. As a result, everyone, regardless of their ability should be able to be involved in any desired tourism pursuit (Ozturk et al., 2008).

The question of access is particularly important since people with disabilities share the same tourism needs and desires as those who are able-bodied, but tend to encounter more constraints to participation (Lavery, Davey, Woodside & Ewart, 1996; United Nations Economic & Social Commission for Asia & the Pacific, 2000; Yau, McKercher & Packer, 2004). If an individual is denied access to participation in tourism pursuits, these opportunities may be diminished (Sylvester, 1995). Over one-fifth of people with disabilities say they do not have regular choice and control in their everyday lives (Office for Disability Issues, 2011). People who have disabilities and depend on helpers or caretakers live a life that can be highly structured on a daily basis; including formalized activities and ample preplanning that

goes into each day (Stilling Blichfeldt & Nicolaisen, 2010). The high level of structure experienced could heighten the desire or need to escape the routines of everyday life – participating in tourism can provide this outlet (Stilling Blichfeldt & Nicolaisen, 2010). However, literature indicates people with disabilities find tourism a difficult venture to be involved in as it requires individuals to think about an increased number of aspects of the pursuit, including the physical, mental and social aspects (Yau et al., 2004).

The introduction of policies for people with disabilities such as the *Disability Discrimination Act* and *Equality Act 2010* in the United Kingdom, the *Americans with Disabilities Act* in the United States, and the *Accessibility for Ontarians with Disabilities Act*, in Canada has been a product of a heightened interest in equal rights for everyone. This heightened interest is in addition to public outcries; advocacy work by people with and without disabilities; and the changing political views of government actors who help to promote social inclusion, equal opportunity, increased participation and anti-discrimination of this population (Goodall, Pottinger, Dixon & Russell, 2004). By complying with the current policies, the tourism industry can increase accessibility levels as these policies make it illegal to discriminate against or deny people with disabilities the opportunity to utilize goods and services (*Disability Discrimination Act 1995*, 2010; Kaufman-Scarborough & Baker, 2005).

Presently, there is systemic discrimination experienced by people with disabilities attempting to access tourism sites. Accessibility with respect to tourism refers to the degree to which an individual can approach and utilize a building, service, or environment around the attraction (Dattilo, 1994). Access, within the disability literature, is not necessarily “an act or a state but the liberty to enter, approach, communicate with, pass to and from, or make use of a situation” (Campbell Brown, 2001, p. 164). Inaccessibility, then, is experienced if an

individual is unaccepted by others, unable to get to where they want to go, do what they want to do, go where they wish, or have the resources and information they require (Campbell Brown, 2001).

While people with disabilities desire to participate at the same level and in the same way as able-bodied individuals (Smith, 1987), systemic and structural barriers make their ability to do so much lower. Lower participation rates point to the systemic challenges this population encounters in obtaining a positive and accessible tourism experience (Smith). According to the Life Opportunities Survey Interim Report, 29% of adults in the UK have impairments and 83% of those adults experience restrictions to their leisure, social and cultural endeavours (Office for National Statistics, 2010). In the UK the most commonly reported are those that affect mobility and handling objects through lifting or carrying (Department for Work & Pensions, 2011). More specifically, 29% of adults with impairments experience difficulties when trying to enter a building outside of their home (Office for National Statistics, 2010). Impairment, as defined by the Office for National Statistics, is the loss of physiological and psychological functions of the body (Office for National Statistics, 2010).

The way an individual experiences the environment around them changes throughout their lives; some may encounter virtually no constraints to accessibility at one stage of life, and then face many at another (Campbell Brown, 2001). The prevalence of disability increases with age. Children who have a disability in the UK number approximately 1 in 20, whereas almost 1 in 2 people over the age of 65 are disabled (Department for Work & Pensions, 2011). One can experience accessibility issues in a variety of ways, including social and physical constraints that inhibit participation which can make it difficult for the tourism

industry to guarantee accessibility for all. If a person with a disability encounters fewer constraints while travelling, the inclination to participate again in the future will increase (Bi, Card & Cole, 2007). Inaccessibility at historic sites could act as a major inhibitor to an individual's participation in the activity and may decrease desire to visit these attractions. For the purposes of this thesis, physical and social accessibility will be examined, as they both may have a profound impact on an individual's ability to participate in tourism pursuits.

Department of Culture, Media and Sport & Department for Transport, Local Government and the Region (2001) believes that in the United Kingdom the needs of people with disabilities at historic sites are considered more than they used to be. Although an increase has occurred, interest in people travelling with a disability is only a recent phenomenon (Burnett & Paul, 1996); more research is required to find ways to successfully enhance the tourism experience for a visitor with a disability. Current literature regarding the experiences of people travelling with a disability is quite limited. The majority of studies focus on physical access, without seeking other alternatives or looking at overall accessibility levels (Daniels, Drogan Rogers & Wiggins, 2005; Israeli, 2002; Shaw & Coles, 2004). The lack of literature on disability in tourism is startling since the chance of acquiring impairments in one's lifetime is high if one lives long enough (Davidson, 2006). More research is also required to understand what is currently being done by tourism providers. In particular those at historic sites that have to try and overcome the additional constraint of increasing accessibility without damaging the authenticity of the site and the cost of attempting to do so.

When planning travel, many people with disabilities are impressed when a destination shows an effort to cater to everyone, regardless of ability and therefore are more likely to consider including those locations in their tourism experience (Ray & Ryder, 2003). To

enhance accessibility of tourism pursuits, further research must be conducted to assist the tourism industry in recognizing and understanding the constraints faced by people with disabilities and the heterogeneity within this population (Nyaupand, McCabe & Andereck, 2008).

People with disabilities live in a world not designed to meet their particular needs and as a result are viewed as “disabled” by the majority of society (Titchkosky, 2003). Even though most of the world is not designed to be accessible for people with disabilities, progress is slowly being made and awareness is steadily increasing to enhance accessibility through laws, acts, and a growing number of organizations with the goal of accessibility for all (Department of Culture, Media and Sport & Department for Transport, Local Government and the Region, 2001).

Overall, knowledge about the accessibility of historic destinations is minimal, as is research capturing the views of staff and policy makers in the tourism industry regarding people travelling with a disability (Daruwalla & Darcy, 2005; Israeli, 2002).

Inclusion and Tourism

Promoting the social inclusion of people with disabilities in tourism continues to be recognized as a challenge to the industry (Goodall, Pottinger, Dixon & Russell, 2004). Inclusion has a positive impact on every individual in society (Richmond & Saloojee, 2005). Presently, people with disabilities continue to encounter societal exclusion and discrimination in interactions with individuals in the context of tourism and other leisure industries (Goodall et al., 2004). Due to social exclusion, many individuals find themselves in situations where they feel helpless and unable to escape certain situations as a result of their impairment, causing them to avoid involvement in tourism pursuits (Kaufman-Scarborough, 2001).

Providing accessible tourist attractions can help promote opportunities for the inclusion of people with disabilities. Encountering an inaccessible tourist attraction prevents an individual from the full experience an able-bodied individual may easily enjoy; resulting in the potential for enhanced feelings of social exclusion (Goodall et al., 2004).

Promoting social inclusion and participation in tourism for those with disabilities encourages greater involvement, the opportunity to broaden horizons, discover new and meaningful relationships, decrease segregation in mainstream society and increase motivation to continue to participate (Devine & Wilhite, 1999; United Nations Economic & Social Commission for Asia & the Pacific, 2000). Promoting social inclusion through leisure may enhance feelings of dignity among people with disabilities and increase their quality of life (Sylvester, 1995). Through participation in tourism an individual can redefine oneself, overcome self-doubt as well as increase independence, self-reliance and confidence within the individual (Stilling Blichfeldt & Nicolaisen, 2010).

Social inclusion is recognized when everyone, regardless of their abilities or differences, has quality in the opportunity to participate in a desired activity or pursuit (Knight, Petrie, Zuurmond & Potts, 2009). If something is inaccessible to a person, social exclusion may result. Social inclusion seeks to close the “physical, social and economic distances separating people, rather than only eliminating boundaries or barriers” (Saloojee, 2003, p. ix). When people are provided with opportunities to interact with others and reduce social distances, or have the necessary resources available to them to participate in what they desire, social inclusion is experienced (Saloojee, 2003).

According to Saloojee (2003), “social inclusion involves a societal commitment to equality of opportunity that ensures that all members of society are provided with the

opportunity to develop their talents and capacities and secure the valued goods and services free from discrimination” (p. 201). The aim of social inclusion is to reduce or remove barriers to access, to promote inclusive relationships in a variety of areas such as personal relationships, social, political and economic institutions in both the public and private sectors (Friendly & Lero, 2005; Luxton, 2005).

The basis of social inclusion is belonging, acceptance and recognition; it is proactive and promotes solidarity (Omidvar & Richmond, 2005; Saloojee, 2003). The ideal outcome of social inclusion is that people are not at a disadvantage because of differences from the dominant norm, instead respecting and valuing the aspects of us that make us different to one another (Bach, 2005). Knowing one has the right or support to be included in the making of decisions that affect one’s self or others helps to enhance social inclusion (Saloojee, 2003). When social inclusion is experienced, individuals feel encouraged to involve themselves in community life and be contributing members of the community or society (Lord & Hutchinson, 2007).

Lord and Hutchinson (2007) view social inclusion as a process designed to create opportunities of citizenship, beginning with the integration of marginalized individuals with other members of society. The goal of social inclusion is to obtain full participation of marginalized individuals in different aspects of the community, including socially and economically, through the establishment of relationships (Lord & Hutchinson, 2007). Developing relationships with people in community helps increase access to quality opportunities that enhance a sense of belonging (Lord & Hutchinson, 2007). Richmond and Saloojee (2005) characterize social inclusion as a proactive, political response to the exclusion of certain groups in society. For example, a component at the core of many policies for people

with disabilities is increasing the level of social inclusion one experiences in their lives or including them in mainstream society (Frazee, 2005).

During the examination of social inclusion, one must also consider social exclusion, as the two terms can only be truly understood when analysed in relation to one another (Ravaud & Stiker, 2001). The concept of social exclusion is recognized in the literature as complex and challenging to understand because of the impossibility of finding only one dimension or meaning of the term (Saloojee, 2003). The social exclusion literature recognizes that it is most commonly experienced among people who are of ethnic minorities, older adults, people living with low socioeconomic status, and people with disabilities (McCabe, 2009). According to Walker and Walker (1997), social exclusion is defined as being partially or fully shut out from systems in society that determine the level of social integration of an individual or the denial of their rights of citizenship. Social exclusion can occur through many avenues. It can be recognized through the elimination, abandonment or care deprivation of individuals with disabilities; by segregating, marginalizing or differentiating people with disabilities through institutionalisation; encouraging the rehabilitation of people with disabilities to reintroduce them into mainstream society as *normal*; or the general discrimination of people with disabilities in society (Ravaud & Stiker, 2001).

Promoting overall social inclusion is the motivation behind conducting research using a critical disability approach. Researchers who follow the critical approach attempt to encourage a free, just and good society as a result of their efforts and enhance social inclusion (Sylvester, 1995). Finding ways to help enhance the level of accessibility at tourist attractions for people with disabilities may assist in accomplishing this goal. To enhance accessibility in tourism, those in the industry must first have an understanding of what disability means.

Understanding disability

The uses, definitions, and meanings of the term disability differ considerably throughout literature; the way someone defines or views disability can vary substantially (Neath, 1997). According to Altman (2001), the difficulty faced in defining disability is that the concept is multidimensional and complicated. Most definitions of disability are created by professionals or academics and are considered to be official when created alongside definitions developed by people with disabilities (Oliver & Barnes, 1998). The different views of disability were kept in mind during the study since the people I interacted with, and the documentation I analysed, varied in the definition and understanding of disability.

Clinical and administrative understandings of disability have been the most commonly recognized throughout society until the start of the millennium (Altman, 2001). In the administrative context, disability is associated with “injury, health, or physical conditions that create specific limitations that have lasted (or are expected to last) for a period of time” (Altman, 2001, p. 98). Clinically, disability is concerned with the pathology identified within an individual and the prognosis a practitioner expects due to the condition and characteristics of it (Altman, 2001). Disability is understood in the academic realm through conceptual frameworks that assist to explain the term. Academics attempt to look at disability from a variety of perspectives, observing relationships between “health, functioning, context, and the dynamics of conditions that go into the process” of labelling disability (Altman, 2001, p. 100).

The medical model of disability

The medical model views disability as emerging from within the individual. The focus is on the inability to meet what is considered *normal* (Kaufman-Scarborough, 2001; McColl, James, Boyce & Shortt, 2006). Many models and theories of disability, like the medical

model, see impairments as personal; that it is up to the individual to eradicate the impairment instead of changing the attitudes of others in society (Imrie, 2000). With this view, the goal of able-bodied society is to try and correct the individual with a disability, to restore them closer to a level that is considered *normal* by their standards (Kaufman-Scarborough & Baker, 2005). Many definitions of disability are medically based describing disability as being visible or invisible, severe or mild, chronic or occasional, or the individual may experience single or multiple disabilities (Goodall, Pottinger, Dixon & Russell, 2004; Kaufman-Scarborough, 2001). The focus that the medical model has on the prevention of a disability or impairment takes away the necessity for society to be accessible; the responsibility lies on the individual with a disability – not society (Neath, 1997). The medical model believes that to avoid social exclusion, a person must alter themselves in order to *fit* better into society (Cuddeford, Glen & Buhman, 2010).

Medical healthcare tends to view dimensions of the client on a singular basis, rather than holistically (Shank & Coyle, 2002). The disease and physical aspects of an individual tend to be the main focus of client care because of the major influence the medical model has had in the past (Shank & Coyle, 2002). The International Classification of Disease, 9th edition is an example of how the medical model influences how people see disability and disease as singular aspects of the individual (World Health Organization, 2011a). Chapters in the International Classification of Disease, 9th edition are divided by separate parts of the body (World Health Organization, 2011b). Within each chapter, the diseases and disabilities that may affect the designated body part are identified with minimal detail to the reader (World Health Organization, 2011b). When the International Classification of Disease, 9th edition was published, the division of chapters was deemed inappropriate and irrelevant to the proper

evaluation of medical care; therefore, the International Classification of Diseases 10 was produced to classify the disease and disability with more detail and adaptability in the evaluation of medical care (World Health Organization, 2011b).

The social model of disability

The social model of disability is an alternative view to the medical model (Aitchinson, 2003). The social model emerged as a reaction to challenge the assumptions of the predominant medical model (Aitchinson; Cuddeford, Glen & Buhman, 2010). The social model is recognized as a progressive approach to disability, in contrast to the medical model which is described as reactionary (Shakespeare, 2006). People living with an impairment of some sort are believed to be living in a world that is disabling to them (Richards & Raguz, 2009). Instead of a disability emerging from within the individual, each person is disabled by society (Richards & Raguz, 2009).

The social model disagrees with the idea that disability is caused by an attribute of the individual (Cuddeford, Glen & Buhman, 2010). Disability is caused by “aspects of society taking little or no account of the needs of people with impairments” (Cuddeford et al., 2010, p. 5). Disability occurs when society fails to act on the needs of people who have impairments, making it increasingly difficult for those individuals to feel included or as important members of society (Goodall, Pottinger, Dixon & Russell, 2004). Disability is a product of the culture in which we live, as well as the social institutions that exist within it (McColl, James, Boyce & Shortt, 2006).

Since the social model views society as the creator of disability, attempting to alter disabling practices of others in society to encourage inclusion and decrease stigmatization is the goal of those who follow the model (Leplege, Gzil, Cammello, Lefevre, Pachoud & Ville,

2007). Encouraging social inclusion and decreasing stigmatization has been, and continues to be a challenge within the tourism industry and society (Kaufman-Scarborough & Baker, 2005). Until recently, the design of tourism services and attractions were geared towards people who are able-bodied which created unnecessary barriers for people with disabilities (Kaufman-Scarborough & Baker, 2005). Although one society or country may strive to increase accessibility, others may not exert the same effort.

The standard of what is acceptable in terms of accessibility may be vastly different from country to country (Kaufman-Scarborough & Baker, 2005). Authors such as Kaufman-Scarborough and Baker argue that people working in the tourism industry should recognize the importance of increasing accessibility and view disability through the social model. Tourism operators should realise their services are flexible and can be altered or adapted to accommodate all potential visitors (Kaufman-Scarborough & Baker). By modifying the environment, the stigmatization placed on people with disabilities could decrease (Leplege, Gzil, Cammelli, Lefevre, Pachoud & Ville, 2007).

The social model recognizes that every disability is complex, and therefore requires service providers to look at increasing accessibility through a variety of viewpoints to accommodate the largest number of potential visitors (Shakespeare, 2006). Using this model, one main area tourism service providers could focus on is the training and development of its staff. It has been shown that how people who are able-bodied behave influences the level of acceptance people with disabilities experience while using a service (Devine & Wilhite, 1999). Although this model can help to enhance accessibility for people with disabilities at a societal level, it does not consider possible interactions between society and the individual, which promotes a holistic view of disability.

The biopsychosocial model of disability

Current understandings of disability also acknowledge that many challenges faced by people with disabilities are not caused by the individual's impairment alone, that a set of factors contribute to disability (Smith, 1987). This understanding of disability is recognized in the International Classification of Functioning, Disability and Health definition (The International Classification of Functioning, Disability & Health, 2006).

The International Classification of Functioning, Disability and Health view disability as the way an individual functions in multiple life areas, such as performing everyday tasks (The International Classification of Functioning, Disability & Health, 2006). Disability, as understood by the International Classification of Functioning, Disability and Health, recognizes that causes outside of the individual's control may have a greater influence on people having a disability than the impairment itself (McColl, James, Boyce & Shortt, 2006). For example, society typically serves the able-bodied population in everyday life, instead of catering to the needs of all individuals, regardless of ability (McColl et al., 2006).

Disability is recognized as a result of an interaction between a person's health condition and contextual factors (World Health Organization, 2002). Contextual factors influence how an individual experiences disability and includes external environmental factors such as social attitudes and architectural characteristics, as well as personal factors which include social background, coping style and past experiences (World Health Organization, 2002). Therefore, disability is seen as an individual's interaction with the environment rather than an intrinsic feature, with the level of functioning dependent on their surroundings (The International Classification of Functioning, Disability & Health, 2006). Disability is considered universal in that it does not focus on a particular group of impairments; it is applicable to everyone and

health is a basic human right (The International Classification of Functioning, Disability & Health, 2006).

The International Classification of Functioning, Disability and Health's definition of disability is based on the biopsychosocial model. The biopsychosocial model of disability is an integration of the commonly used social and medical models of the past (World Health Organization, 2002). The model helps plan, manage and evaluate services for people with disabilities and views disability as a result of the interaction between a person's health condition (impairment) and contextual factors (Shank & Coyle, 2002). Within the biopsychosocial model, different perspectives of health are considered when determining disability (World Health Organization, 2011a). Some people who use the International Classification of Functioning, Disability and Health framework to define disability do so by the severity of an individual's impairment (Cuddeford, Glen & Buhman, 2010). Having a disability only becomes an attribute of the person, not a defining feature; similar to how impairment is viewed (Cuddeford et al., 2010). An individual may have impairments without it limiting their participation in activities and not recognize themselves as disabled (Office for National Statistics, 2010).

To determine disability the biopsychosocial model considers what a person is anticipated to do in a standard environment and compares it to what they actually do (World Health Organization, 2011a). The International Classification of Functioning, Disability and Health model describes functioning at three levels: the body or a particular part, the person as a whole, or the person as a whole in the social context (Shank & Coyle, 2002). The level that relates most to this study is the person as a whole in the social context. To be disabled is to experience dysfunction that may have resulted from the loss of a bodily function, a limitation

in an activity and a restriction of participation in a desired pursuit (The International Classification of Functioning, Disability & Health, 2006).

The person as a whole in the social context relates to constraints negotiation in leisure participation in the sense that a constraint resulting from the interaction of society and an individual's disability influences their ability or desire to participate in activities. Participation is not solely dependent on the absence of these constraints, but an individual's ability to negotiate through the constraints; if negotiation takes place, modification of participation may occur (Jackson, Crawford & Godbey, 1993). The participation that occurs through negotiation is typically different from that that may have occurred in the absence of constraints (Jackson et al.).

The Leisure Constraint Model provides a way to enhance understanding of constraints faced by people with disabilities in tourism. The model states an individual has to negotiate through multiple factors as well as a hierarchy of constraints before participation can successfully take place (Crawford, Jackson & Godbey, 1991). The behavioural measure of constraints within the model is participation; therefore, participation in a leisure pursuit is dependent on successful negotiation of intrapersonal, interpersonal and structural constraints (Crawford & Godbey, 1987). These constraints are believed to not only have an adverse effect on the ability to participate in a desired activity, but also affect the level of enjoyment felt during participation and reflection on the activity (Smith, 1987). The constraints of the Leisure Constraint Model relate to the contextual factors found within the biopsychosocial model. The main difference between the two models is that an individual's restriction of participation comes from an interaction of factors within the biopsychosocial model compared to the negotiation of constraints through a predetermined hierarchy required for involvement

in a desired pursuit within the Leisure Constraint Model (Crawford, Jackson & Godbey, 1991; World Health Organization, 2011a).

If a particular factor inhibits or limits an individual's ability to participate in a leisure pursuit, it is considered a constraint (Raymore, Godbey & Crawford, 1993). Constraints are a subset of factors which inhibit participation, and potentially limiting or preventing satisfaction (White, 2008). Intrapersonal constraints within the Leisure Constraint Model relate to the personal factors of the biopsychosocial model. Intrapersonal constraints are the psychological state or attributes of an individual that reflects and affects the development of leisure preferences (Daniels, Drogan Rogers & Wiggins, 2005; McKercher, 2009; Samdahl & Jekubovich, 1997; White, 2008). These constraints are highly influenced by social factors such as other people's preconceived notions of people with disabilities (Crawford & Godbey, 1987). Examples of these constraints include an individual's lack of interest or knowledge about an activity, their perceived self-efficacy, health related problems and personal stress or anxiety levels (Daniels et al., 2005; McKercher, 2009; Son, Mowen & Kerstetter, 2009).

An individual's perceived self-efficacy has an influence on whether or not participation in an activity takes place. Perceived self-efficacy is the belief in one's own capabilities to effectively manage a situation, and has an influence on the way they think, feel, and act (Bandura, 1995). If an individual experiences self-efficacy, their level of self-esteem and confidence may rise (Bandura, 1995).

Interpersonal constraints relate to contextual constraints within the biopsychosocial model. Interpersonal constraints involve interactions and relationships between individuals in a social context, as well as social factors that affect the development of preferences (Daniels, Drogan Rogers & Wiggins, 2005; Samdahl and Jekubovich, 1997; Son, Mowen & Kerstetter,

2009; White, 2008). Interpersonal constraints may influence the preference of tourism pursuits and actual participation in them (McKercher, 2009; Packer, McKercher & Yau, 2007). Interpersonal constraints can include a lack of travel partners or the inability to locate someone suitable to join in tourism participation; these possible co-participants may inhibit their involvement (McKercher; Raymore, Godbey & Crawford, 1994; Samdahl and Jekubovich, 1997). Individuals may also fear that interactions with service providers will be negative and as a result, may avoid going to a particular location (Fost, 1998).

Structural factors are environmental factors, or contextual aspects of the biopsychosocial model. Structural constraints are those that tend to be out of the individual's control (McKercher, 2009). These constraints are features of the external environment that intervene between the development of tourism preferences and participation (Crawford & Godbey, 1987; Daniels, Drogan Rogers & Wiggins, 2005; Son, Mowen, Kerstetter, 2009; White, 2008). Examples of structural constraints include architectural, transportational, ecological, rules and regulations, time, and financial constraints (Daniels et al., 2005; Smith, 1987). Structural constraints have a predominant effect on the individual's actual participation in a tourism pursuit (Packer, McKercher & Yau, 2007). In terms of tourism participation, this type of constraint is easier to identify, correct and appears to only alter the shape or nature of an experience rather than preventing the pursuit all together (Samdahl & Jekubovich, 1997). An example of all types of constraints influencing participation is found in a place that is badly designed, has staff with poor attitudes towards individuals with disabilities creating an atmosphere that can be more disabling than the impairment alone, and as a result, may decrease self-efficacy for the visitor (Richards & Raguz, 2009).

The biopsychosocial model allows for the interaction of different factors to be taken into consideration in influencing the ability to participate in an activity rather than through a hierarchy of constraints. The biopsychosocial model is useful in helping to identify and understand the effect that both the physical and social environment has on the life experiences of people with disabilities (World Health Organization, 2002). The model assists in the classification of disability and health on a universal scale (World Health Organization, 2002).

Overall, reasons for non-participation in a leisure activity or tourism pursuit can come from a variety of sources with differing degrees of influence (Crawford & Godbey, 1987). Travellers who have the same kind of disability may not necessarily experience the same types of constraints during their travels (Bi, Card & Cole, 2007). Within an urban setting, most constraints can be mitigated, but historic sites are typically a challenge for those with disabilities (Shakespeare, 2006). Gaining a greater understanding of the typical constraints faced by people with disabilities will assist in the assessment of accessibility levels at historic sites, and bring awareness to those in the tourism industry to enhance future accommodations and enjoyment as a result (Nyaupane, McCabe & Andereck, 2008).

People with disabilities may be willing to negotiate constraints to participate in tourism pursuits. The anticipated level of constraint will greatly affect the individual's desire to negotiate; if a constraint is considered difficult or impossible to negotiate, it may hinder the desire to participate (Jackson, Crawford & Godbey, 1993). Offering potential visitors with disabilities few to no constraints will increase the likelihood of participation in tourism pursuits.

Proper accommodations will provide individuals who have disabilities with a greater sense of social inclusion in society and may help them to experience an improvement in their

quality of life (Card, Cole & Humphrey, 2006). For the tourism industry to accommodate people with disabilities, it must be kept in mind that people, who technically have the same impairment, may require alternative ways in overcoming a constraint (Shakespeare, 2006). Therefore, service providers may not be able to fully satisfy every potential customer who has a disability (Shakespeare, 2006). It is desired that through a greater understanding of the differences of every individual with a disability by the industry, the number of constraints faced in tourism will decrease (Yau, McKercher & Packer, 2009). If the tourism industry considers potential constraints while catering to this market segment, awareness may increase and discrimination could decrease (Ozturk, Yayli & Yesiltas, 2008).

The International Classification of Functioning, Disability and Health's (World Health Organization, 2011a) understanding of disability is the definition I related to most and considered throughout the reflexivity process while analyzing the gathered data since the definition may have affected my understanding of alternate views of disability. I had to keep in mind how others may define disability and how that may affect the data analysed. I believe that by utilizing the broader International Classification of Functioning, Disability and Health's view of disability within the tourism industry, a greater variety of ways that current services may inhibit potential consumer's participation could be discovered. If the tourism industry bases what is unacceptable at an attraction in terms of accessibility with differing views of disability, some barriers may not be observed. With greater understanding of how tourism participation may be limited for people with disabilities, a greater influence on rectifying issues that have caused inaccessibility for those working in the tourism industry could occur.

Policy Directions for Tourism

At the policy level, movement to promote social inclusion for people with disabilities in society is currently taking place. Presently, there are many groups in the United Kingdom making an effort to help people with disabilities experience tourism as barrier free as possible. The *United Kingdom's Governments Tomorrow's Tourism Strategy* aims to enhance opportunities to participate in tourism and promote social inclusion (Richards & Raguz, 2009). Other groups include *Tourism for All*, *English Heritage* and *The National Trust* who are all working towards increasing accessibility in the United Kingdom (Goodall, Pottinger, Dixon & Russell, 2004; *Tourism for All*, 2010).

The Department of Culture, Media and Sport in the United Kingdom promotes the importance of leisure pursuits to help enhance social inclusion (Aitchinson, 2003). To promote inclusion in tourism pursuits, *Tourism for All*, works with policymakers to increase accessibility. *Tourism for All* (2010) provides information to people with disabilities about where they can find places to go that will meet their specific needs. *English Heritage* (2010a) was established in 1984 and is a government statutory adviser that helps people value, understand and care for the historic environment. *English Heritage* helps people enjoy the historic sites available and ensures that the past is preserved so that it can enrich people's lives in the future (*English Heritage*, 2010b).

Another group helping people with disabilities enjoy tourism at historic sites is *The National Trust*. There are two *National Trust's* in the United Kingdom, one in Scotland and one that covers England, Wales and Northern Ireland as a whole (*The National Trust*, 2002). *The National Trust* cares for the historic environment in hopes to "make it accessible, enjoyable and relevant to everyone" (p. 1). It is an independent charity that helps to ensure

that the historic environment is protected during policy planning and acts as a consultative group on issues concerning the historic environment (*The National Trust*, 2002, p. 2).

Regardless of the abilities of any consumer, each and every individual should encounter a reasonable level of access when involved in tourism pursuits (Kaufman-Scarborough & Baker, 2005). What is considered a reasonable accessibility level for one tourism service or overall country may be vastly different from another (Kaufman-Scarborough & Baker, 2005). Throughout recent years, different Acts have been put in place in different parts of the world to address accessibility. The Acts mainly focus on the architectural side of accessibility, due to the limited amount of theoretically based research undertaken with regards to accessibility overall (Kaufman-Scarborough, 2001).

Tourism service providers face the difficult task of interpreting the architecturally based Acts to ensure that the required accessibility accommodations have been provided, no matter how limited their expertise may be in working with people who have disabilities (Kaufman-Scarborough, 2001). Although service providers must attempt to increase accessibility by following the Act given to them, it has been recognized in the literature that completing only a checklist of architectural requirements may not be enough to ensure a constraint free experience (Kaufman-Scarborough, 2001). There are other constraints that people with disabilities face, and therefore should be taken into consideration when policies are revised or created.

From 1995 to 2010, the *Disability Discrimination Act 1995* was the main Act followed within the United Kingdom hoping to enhance the equality for people with disabilities. The *Disability Discrimination Act* legislated that individuals working in the public sector, including tourism services, must promote equal opportunities to those with disabilities, but

this requirement was not introduced until 2006 (Knight, Petrie, Zuurmond & Potts, 2009). Before 2006, the *Disability Discrimination Act* related to discrimination within the workplace (*Disability Discrimination Act 1995*, 2010). The Act was established in 1995 with the purpose to make it unlawful to discriminate against disabled persons in connection with employment, the provision of goods, facilities, and services (*Disability Discrimination Act 1995*, 2010, c.50, Introduction).

The Act considers a discriminatory behaviour as one that treats someone with a disability unfavourably compared to how an able-bodied individual may be treated, or who exhibits unjustified behaviour towards an individual with a disability (*Disability Discrimination Act 1995*, 2010). For example, unjustified behaviour could include refusing to hire an individual who could successfully do the job but is not hired because they have a disability. In 2010, the *Equality Act 2010* was introduced and is now the main policy referred to with regards to equality for people with disabilities. The *Equality Act 2010* is:

An Act to make provision to require Ministers of the Crown and others when making strategic decisions about the exercise of their functions to have regard to the desirability of reducing socio-economic inequalities; to reform and harmonise equality law and restate the greater part of the enactments relating to discrimination and harassment related to certain personal characteristics; to enable certain employers to be required to publish information about the differences in pay between male and female employees; to prohibit victimisation in certain circumstances; to require the exercise of certain functions to be with regard to the need to eliminate discrimination and other prohibited conduct; to enable duties to be imposed in relation to the exercise of public procurement functions; to increase equality of opportunity; to amend the law relating to rights and

responsibilities in family relationships; and for connected purposes (2010, c.15, Introduction).

The *Disability Discrimination Act* is still referred to in conjunction with the *Equality Act 2010*, but much of the focus regarding disability policy is on the new act.

Similar Acts have been created all over the world. In North America, acts include national acts such as *Americans with Disabilities Act* and such provincial acts as the *Accessibility for Ontarians Act*. The *Americans with Disabilities Act* and the *Accessibility for Ontarians with Disabilities Act* both focus on encouraging equal opportunities for all people, regardless of ability; decreasing the amount of discrimination experienced by people with disabilities (Burnett & Paul, 1996; Kaufman-Scarborough & Baker, 2005; Service Ontario, 2009).

Compliance with the requirements of the *Disability Discrimination Act* is open to broad interpretation; services must comply in a way that makes good business sense without putting the establishment out of business, therefore full compliance may not be obtained if the business is unable to do so (Goodall, Pottinger, Dixon & Russell, 2004). People working in the tourism industry may encounter this challenge of interpretation more than other industries. Those working at historic sites are especially vulnerable when trying to increase accessibility to a reasonable standard without damaging the authenticity of the site (Goodall et al., 2004). Maintaining authenticity of the site is not only important to the service provider, but to the visitor as well (Butler, 1999). The breadth of interpretation still exists within the new *Equality Act 2010*, but not to the extent witnessed in the *Disability Discrimination Act*.

The *Equality Act 2010* is not vastly different from the *Disability Discrimination Act*, but there are additions that give people protection in additional areas than just employment and

the use of goods and services. Other additional areas include the protection against victimization and more areas of discrimination. The *Equality Act 2010* is discussed further throughout the findings chapter.

Tourists may not be overly concerned about the amusement of a destination, but seek authenticity in the experience (Butler, 1999). If a site is listed as historic, the entire site, both inside and outside is protected from being altered, enhancing the need for alternative forms of access to be discovered (Goodall, Pottinger, Dixon & Russell, 2004). Enhancing accessibility to a reasonable standard could be interpreted in many different ways depending on the individual making the changes; in the case of historic sites – the service provider (Goodall et al., 2004). The law assists in determining what is reasonable by providing minimal guidelines with regards to the practicality of making an adjustment, and the cost of the adjustments compared to what is affordable for the service (Goodall et al., 2004). Although assistance is given, service providers may have difficulty interpreting the Act and adhering to the standards. Service providers may be more apt to enhance accessibility if policy was simplified and easy to follow. Kaufman-Scarborough and Baker (2005) recognize that although policies are currently in place, they do provide leeway or are not enforced strongly enough to encourage positive change .

Overall people with disabilities should have *reasonable access* to tourist attractions, and while improvements have been made with both accessibility and awareness, there are still significant gains to be made (Kaufman-Scarborough & Baker, 2005). It is the responsibility of researchers, those working in the tourism industry or people who have disabilities to find alternative ways to have an enjoyable experience if making physical alterations is not a viable option. Even though these groups are working to increase accessibility, it is recognized that

historic sites may face difficulty in achieving complete access (Goodall, Pottinger, Dixon & Russell, 2004).

Physical and intellectual access of tourism sites: A debate

Visiting a particular attraction or site may be the sole purpose of the overall journey to an area (United Nations Economic & Social Commission for Asia & the Pacific, 2000). Like all tourists, a person with a disability's desire to visit a particular tourism destination depends on the anticipated benefits and negotiation of barriers, which is based on their former experiences in travel and other leisure pursuits (Stilling Blichfeldt & Nicolaisen, 2010). People with disabilities may encounter an increased number of constraints compared to able-bodied individuals in their involvement in a wide variety of tourism activities (Ozturk, Yayli & Yesiltas, 2008). Physical inaccessibility at attractions is one of the common constraints faced by tourists with disabilities (United Nations Economic & Social Commission for Asia & the Pacific, 2000). If a potential customer encounters a constraint they find impossible to overcome, the desire to be involved in that tourism pursuit will decrease substantially (Jackson & Scott, 1999).

Before visiting an attraction, tourists with disabilities want assurance that there is adequate accessibility that will meet their needs (Stilling Blichfeldt & Nicolaisen, 2008). Barriers to access at tourist destinations are dynamic due to the variability of encounters that can be experienced by each individual and the differing levels or types of constraints which are dependent on the person or the situation (Smith, 1987). However, the functioning level of a participant is a useful indicator of the level of constraints that may be faced while travelling (Bi, Card & Cole, 2007).

When researching constraints to participation, it can be difficult to understand what the impairment of the individual is, what is constraining them, and the outside factors that contribute to the constraint (Shakespeare, 2006). Common constraints that affect both those working in the tourism industry and those visiting with disabilities include the encountered environment, lack of knowledge about the population, and the attitude of those providing the service (Goodall, Pottinger, Dixon & Russell, 2004). Whereas main constraints purely affecting people with disabilities is the acceptance in the difficulty of entering certain facilities or attractions they wish to attend, developing coping methods when they find themselves in situations where they cannot be independent, and understanding they may feel participation results in the loss of dignity (Goodall et al., 2004).

Little is known about how people with disabilities negotiate their constraints and become active in travel (Jackson & Scott, 1999; Yau, McKercher & Packer, 2004). Although this knowledge is minimal, it is recognized in the literature that for someone with a disability to overcome constraints in travel, in addition to themselves, their social networks and tourism service providers all have to coordinate together to ensure success (Daniels, Drogan Rogeres & Wiggins, 2005). To gain an overall view of the present knowledge of these constraints, Bi, Card and Cole (2007) suggests that additional studies from the tourism provider's perspective may be useful in creating a baseline for development. With the possible information obtained in future research, an understanding of how far the industry has to go to make proper accommodations will occur (Yau et al., 2004).

When proper accommodations are made and an attraction is accessible, a tourist with a disability will feel motivated to attend, knowing there will be decreased dependence on others during the experience and help fulfill their desire to escape from everyday life (Stilling

Blichfeldt & Nicolaisen, 2010). To encourage inclusion through tourism services, physical access does not have to be the only concern. Sometimes providing physical access for people with disabilities is a challenge for a service, such as a historic tourist site therefore some authors such as Goodall, Pottinger, Dixon and Russell (2004), promote intellectual access as an alternative way to enhance social inclusion. Promoting intellectual access may assist individuals working at historic sites to provide people with disabilities the chance to have a meaningful experience without altering the building itself or its authenticity (Goodall et al., 2004). Alternative services, such as virtual reality or audio-visual tours of historic sites are examples of how the tourism industry may promote inclusion where physical alterations for access are a challenge or impossible to implement (Goodall et al., 2004).

Although policies have been put in place to help promote inclusion, the focus has mostly been on physical access for those with disabilities (Goodall, Pottinger, Dixon & Russell, 2004). Additional research is required to look at alternative ways to promote inclusion, and to see if places that are limited in their ability to make physical changes are taking the initiative to find different ways to promote inclusion (Goodall et al., 2004). By removing the systemic barriers to accessibility that people with disabilities encounter in society, more assistance may be provided (Kaufman-Scarborough & Baker, 2005). Increased assistance may not occur if one views disability at an individual level and therefore considers the barriers encountered to be at the fault of the impairment alone (Kaufman-Scarborough & Baker). When viewed at the individual level, it is believed that the person with the disability is responsible for working around or eliminating barriers encountered (Kaufman-Scarborough & Baker, 2005).

The overall current literature found focuses on the barriers and constraints encountered while travelling or participating in tourism, particularly for people with disabilities. An article by Goodall et al., provided a glimpse into the emerging research regarding the interaction between a historic site, tourism and the *Disability Discrimination Act*, however, research in this area is minimal. Studies pertaining to the barriers and constraints faced during travel and tourism are quantitative in nature, with the majority of data obtained through surveys. However, it is important to note that qualitative research in this area is beginning to slowly emerge, but is still very limited. Qualitative research was found in two studies utilizing in-depth interviews and focus groups with people with disabilities, and another study used content analysis of pre-existing narrative accounts that described experiences of people with disabilities participating in tourism to understand the current barriers and constraints faced. The majority of these studies are found in tourism research journals geared towards the management, marketing and consumerism of tourism. Studies dealing with this particular area were not found in disability journals.

Tourism industry and the perpetuation of inaccessibility

The rights of people with disabilities and people who are able-bodied are the same with regards to participating fully in desired pursuits and having an opportunity to enjoy a high level quality of life (Packer, McKercher & Yau, 2007). Tourism may be one of these desires for people with disabilities; contrary to the majority beliefs and understandings of the tourism industry that people with disabilities would rather not be involved (Packer et al., 2007). As the aging population continues to expand due to increases in expected life span as a result of medical advancements, and the Baby Boomer population reaching retirement age, so do the

number of people with disabilities (Nyaupand, McCabe & Andereck, 2008; Yau, McKercher & Packer, 2004).

The level of accessibility encountered at a tourist attraction could depend on the overall views a society has toward people with disabilities (Daruwalla & Darcy, 2005). People are becoming increasingly accepting of people with disabilities, as a result of the growth in the number of people living with disabilities (Burnett & Paul, 1996). Past research indicates that the general public assumes people with disabilities automatically experience a lower quality of life, compared to people who are able-bodied (van Campen & Iedema, 2007).

The general population is not only more accepting, but people with disabilities are becoming increasingly vocal in proclaiming their needs and wants; making it easier for the tourism industry to improve accessibility for all (Daniels, Drogan Rogers & Wiggins, 2005). People assume that when one contacts a travel agent to book an excursion, as part of the travel agent's role, they have the appropriate knowledge required to steer someone with a physical disability somewhere that is fully accessible, but in reality, this is not the case (McKercher, Packer, Yau & Lam, 2002). As people with disabilities become more vocal about their needs and wants, travel agents will have the ability and tools to increase their understanding of accessible tourism. Some of the common wants and needs expressed by people with disabilities according to Daniels et al., include increasing the accessibility of a site or facility, having a reduction in entrance fees to attractions due to their limited possible use, trust in people who provide travel information, and an increase in overall policy compliance .

Bi, Card and Cole (2007) argue that the tourism industry must understand the wants and needs of the traveler. To provide as much accessibility to travellers as possible, the concept of barrier-free tourism should be harnessed by the industry (United Nations Economic &

Social Commission for Asia & the Pacific, 2000). The industry has to recognize the uniqueness of people with disabilities and not assume that their needs are all the same when making alterations (Lepège, Gzil, Cammelli, Lefève, Pachoud & Ville, 2007). The literature also indicates that the tourism industry must also enhance the level of education and training provided to workers about customers with disabilities (Card, Cole & Humphrey, 2006; Daruwalla & Darcy, 2005; McKercher, Packer, Yau & Lam, 2002) to avoid misunderstandings of how people in the tourism industry address people with disabilities (Daniels, Drogan Rogers & Wiggins, 2005).

For a person with a disability to feel welcome at a tourist destination proper marketing is needed, especially since the size of this market is expected to grow (Burnett & Paul, 1996). Currently, many tourism marketers cater to the able-bodied population, and those who do not fit this profile feel unwelcome (Richards & Raguz, 2009). Although people with disabilities are a potentially large market, for marketers they are misunderstood when it comes to their needs or wants (Kaufman-Scarborough, 2001) and are often an afterthought in tourism marketing (Burnett & Paul). Tourism operators tend to enhance accessibility on the basis of strict compliance (Burnett & Bender Baker, 2001). Strict compliance still allows inadequate access to sites and information provided to potential tourists with disabilities as well as their possible caretakers (Smith, 1987).

Inadequate access occurs if there is little general knowledge within the tourism industry of the actual facilities and services available to people with disabilities which decreases the ability of potential consumers to participate (Smith, 1987). Information provided by travel agents and tourism providers who assist in planning a tourism pursuit is typically general and geared toward the able-bodied population failing to give accurate information that is helpful

to people with disabilities (McKercher, Packer, Yau & Lam, 2002). In addition, a potential consumer with a disability may find it impossible to purchase a last minute holiday package, may require much more time to plan and a greater financial investment than the average consumer (Richards & Raguz, 2009). Travel agents and tourism providers have the potential to create additional constraints for consumers and are viewed by many consumers with disabilities as ignorant and greatly deficient in providing appropriate information (McKercher et al., 2002)

Further research would prove beneficial as the tourism industry as a whole is currently not well suited to serve people with disabilities effectively and efficiently (Israeli, 2002). Rejection of people with disabilities exhibited in the general population and the tourism industry in particular, may be due to the scarce knowledge available regarding both people with disabilities involved in travel and the attitudes present in the industry (Daruwalla & Darcy, 2005). Gaining a greater understanding of what constrains people with disabilities from participating in tourism, and historic sites in particular, is essential if managers of these destinations are to develop or implement plans to increase accessibility (Goodall, Pottinger, Dixon & Russell, 2004).

Currently, many people working in the tourism industry view people with disabilities as a source of confusion, concern, and an expensive investment to their business due to the particular requirements for access, rather than considering their potential as a valuable market segment (Burnett & Bender Baker, 2001; Burnett & Paul, 1996). With these negative beliefs, the potential consumer group is largely ignored (Daruwalla & Darcy, 2005). Another reason for the possible reluctance in enhancing the current level of accessibility is the feeling that encouraging people with disabilities to visit a destination may in return discourage other able-

bodied individuals to attend a destination (Shaw & Coles, 2004). The assumption that more people with disabilities visiting a tourism destination could have a negative effect on a business is unrealistic; many able-bodied individuals may be impressed by a site's effort to increase accessibility and encourage universal use (Shaw & Coles, 2004).

Presently, many service providers do little to try to gain a greater understanding of the needs and wants of people with disabilities (Imrie, 2000). However, in addition to the wants and needs of this particular market segment, the literature describes some common complaints. Many individuals with disabilities express their disappointment in the way they are personally treated when involved in a tourism pursuit. For example, staff tend to talk to the individual's companion as if the person with a disability cannot comprehend what is being said (Kaufman-Scarborough, 2001). Another example is the staffs discomfort interacting with people with disabilities due to their lack of training or overcompensating by being overly helpful (Kaufman-Scarborough, 2001).

In general, people working in the tourism industry are ill-prepared to provide proper assistance to people with disabilities (Daniels, Drogan Rogers & Wiggins, 2005). When providers try to make accommodations, the adjustments made are often inadequate and do not promote inclusion for people with disabilities (Daniels et al.). For example, some providers create a complete separate entrance instead of making alterations to the entrance used by mainstream society (Goodall, Pottinger, Dixon & Russell, 2004). Often these separate entrances are at the back of buildings or near loading docks (Goodall et al., 2004).

Constraints to increasing accessibility for service providers include a general lack of awareness of the needs of potential markets, a lack of information available to help make accommodations, a perception that the costs of making changes are high and the negative

attitudes that exist toward people with disabilities (Goodall, Pottinger, Dixon & Russell, 2004). A main concern for those working at historic sites is the difficulty involved in making accommodations without causing damage to the authenticity of the site (Goodall et al., 2004). For service providers to run a business with the fewest number of complaints and legal issues, finding ways to improve accessibility or provide alternatives for this market is recommended (Goodall et al., 2004).

The training and education of those working in tourism is recognized as a major challenge facing the industry (United Nations Economic & Social Commission for Asia & the Pacific, 2000). Staff who are sensitive and have the right attitude towards people with disabilities, who are willing to help and have strong interpersonal skills, can help transform an attraction that is perceived as inaccessible into accessible (United Nations Economic & Social Commission for Asia & the Pacific, 2000). It is suggested that managers use such techniques as role-playing and interaction with people with disabilities to increase positive attitudes, and travel agents should increase their knowledge regarding useful information to provide to people with disabilities (Daruwalla & Darcy, 2005; McKercher, 2009).

Current literature focused on the perpetuation of inaccessibility in the tourism industry focuses on tourists with disabilities and how the industry caters and markets towards their needs, current attitudes toward people with disabilities, behaviours of tourists with disabilities and the industry, and constraints and barriers faced in tourism. The majority of studies used quantitative methods such as surveys and questionnaires as the main source of data. A few studies were qualitative using in-depth interviews to understand current barriers to tourism participation. These studies were found in tourism research journals mainly focusing on

tourism marketing and management, only one study was found in a journal focusing on disability.

Summary of the Review of Literature

The literature review provides a background for the study and helps discover significant questions to be explored when conducting the research. Inclusion has a positive impact on every individual and people with disabilities are a group that regularly face exclusion in society. Providing access in tourism can help promote social inclusion for people with disabilities. To enhance inclusion, the term disability must be understood by those working in the tourism industry and society at large.

Understanding what disability means has been a challenge in the past due to the multiple definitions available. The International Classification of Functioning, Disability and Health definition that combines the popular medical and social model views (to recognize disability as an interaction between an individual's health condition and contextual factors that may inhibit participation) provides a holistic view of disability. If the International Classification of Functioning, Disability and Health definition is considered when accessibility is assessed within the tourism industry, I believe that inaccessibility will be considered from different standpoints compared to what it would be if the medical model or social model views of disability were individually applied.

If the tourism industry followed the medical model, efforts to enhance accessibility for people with disabilities would be limited; disability would be viewed as the fault of the individual, and no responsibility would be placed on society to enhance accessibility for people with disabilities. The social model would place the blame solely on society, and therefore enhancing accessibility is completely out of the individual's control. The

International Classification of Functioning, Disability and Health's biopsychosocial model recognizes that both parties have an influence and the ability to enhance accessibility, encouraging collaboration to promote inclusion of all members of society as a result.

Disability and heritage policy greatly influence the accessibility of a historic building such as Glamis Castle. The influence of economics in tourism on policy, the importance placed on enhancing inclusion for all within both types of policy, and the preservation of historic sites interact to influence the feasibility, desire and implementation of efforts to enhance accessibility. One way this can be illuminated is by comparing what is currently required by historic sites in terms of accessibility to what has been implemented, gaining a greater sense of how far these sites still have to go.

There are a number of areas in disability studies and tourism research that are still waiting to be explored; this literature review identifies some of the areas that are currently lacking substantial research and provides a background for the study. It is hoped that through the findings of the research, an increased understanding in some areas of disability and tourism will result or otherwise encourage new research in these areas. The next chapter will discuss the methodology I utilized to respond to my research questions to gain a greater understanding of accessibility at the historic site as well as the overall perpetuation of disability in society.

Chapter Three: Methodology

To explore how accessibility and disability are communicated and perpetuated for people with disabilities, a narrative case study was utilized. A case study is useful in that it can handle numerous types of information-rich resources including interviews, visual data, observations and the analysis of documentation to obtain an in-depth understanding of the topic studied (Creswell, 2009; Yin, 1994). Material available to a researcher conducting a narrative case study is substantial because of the variety of sources that can be used. Methods of data collection in this study included textual and visual data, and included a review of policies and other related documentation, as well as an attempt to conduct key informant interviews, and field visits to Glamis Castle. In this chapter, methods of data collection are described. An overview of how to ensure the quality of the data, the role that reflexivity played throughout the process, and how a narrative policy analysis was conducted using Emery Roe's (1994) approach.

Crystallization, Data Collection, and Reflexivity

Narrative case study allows for a wide variety of information sources to be collected. The main source of data was policy documents. Documentation, including brochures, pamphlets, and websites, were analysed to enhance the richness of the overall data obtained (Yin, 1994). Visual data were also utilized. These data were collected through field visits to Glamis Castle. For this study, attempts were also made to conduct key informant interviews with a variety of individuals from the case study site, others working for the tourism industry in the area, and people with disabilities who are associated with accessibility policy making. Unfortunately these interviews did not materialize.

There was no particular order to the utilization of these methods; they were used in a cyclical manner. For example, if I received different documentation through analyzing the documentation I had at hand I would collect the information for analysis afterward. The documentation collection was not restricted to a certain time frame while gathering data, it occurred continuously throughout the research process.

Data collection took place throughout the research process and continued during the writing of the findings. Travelling to Scotland to visit Glamis Castle and the surrounding area, and gather data, took place over two trips. The first of which was between November 16 and December 30, 2010. Unfortunately, I was only able to access the historic site once due to family issues and because Scotland experienced its worst winter in 53 years. When I arrived I spent the first week taking care of my Grandmother who became very ill and unfortunately passed away during my stay. The following week, the weather in Scotland took a turn for the worse. For the better part of my stay, I was unable to drive out of the residential area onto the main road with my rental vehicle. During the majority of my stay the roads to Glamis Castle were inaccessible, and reopened when I only had a few days left in the country. During my last week in Scotland I went to Glamis Castle and gathered visual data. Eight months later I visited Scotland again for two weeks, from August 28 to September 11, 2011. While I was there I had the opportunity to visit the site with a family member to gather experiential and more visual data. Unfortunately ethics approval for my research was delayed and I was unable to arrange face-to-face interviews; therefore, I hoped to arrange telephone interviews once I arrived back in Canada. The collection of policy information and other related documentation took place throughout the entire research process.

The following is a description of methods I used throughout my thesis research, as well as the method I had hoped to use but was unable to do so, and why I hoped to use it for this study. An explanation is also given of what I gained from both methods used. The methods helped to provide information from different points of view regarding the perceptions of disability and accessibility, provided in-depth information, and helped shape the stories that emerged.

Crystallization

Data collected are used in a process of crystallization. Crystallization provides the qualitative researcher with a deeper and more thorough understanding of what is being studied (Richardson, 1997). The method brings together different types of analysis from a variety of areas of representation to create a rich and an openly partial account of the phenomena examined (Ellingson, 2009). Crystallization considers the vulnerabilities and position of the researcher as well as the “indeterminacy of knowledge claims” (Ellingson, 2009, p. 4) as they are made. Through use of crystallization, both readers and writers can see the “interweaving of processes in the research through the discovery, seeing, telling, storying and re-presentation” (Guba & Lincoln, 2005, p. 208) of results. Participants’ experiences with a particular phenomenon can be understood and represented in multiple ways, allowing more points of connection to be made by looking at a topic from a variety of angles (Ellingson, 2009; Richardson, 1997).

Unlike validity through triangulation, crystallization believes there is no one truth that exists in the world to discover or come near, just multiple truths that are constructed through the interpretation of results obtained by the researcher (Ellingson, 2009). As a result, knowledge obtained is “inherently partial, situated and contingent” (Ellingson, 2009, p. 22).

Crystallization assists a qualitative researcher in producing representations that are less naïve through continual re-examination of the results; helping to discover an optimal representation (Ellingson, 2009).

Visual Data

Visual methods of data collection in the form of photographs were used during the research process. Commonly, narrative research relies heavily on spoken and written data collection in the form of interviews, observations and documents (Riessman, 2008). Although this form of data typically yields interesting and valuable results, words are only one form of communication that could be used in narrative research; other forms such as visual images communicate meaning as well (Riessman, 2008). As a researcher, I must make arguments, contextualize and interpret images I see using words and creating stories as a result (Riessman, 2008). Visual data collected played a key role in one particular narrative (see Chapter Four) and also assisted in the development of other narratives.

In this study I took photographs to provide a visual depiction of locations around the castle that may be deemed accessible or inaccessible. Visual data were collected from areas such as main entrances to the castle, gift shop, restaurant and bathroom as well as inside each location. The photos include doorways, ramps and stairways of the main entrances, and provide insight into the layout of some rooms. Additional visual material includes a map provided by the castle and information seen in brochures. Images of structures around the historic site were also obtained; these include signage, the location of parking, and design of entrances.

Using photographs in research provides an opportunity to make discoveries that may be left untouched through other conventional forms of data collection (Stanczak, 2007). Visual

data can help to create vivid and authentic narratives (Spencer, 2011). Visual data are recognized as a form of “thick description” that assists in exploring and understanding phenomena (Spencer, 2011). Using visual methods as part of data collection provides a well-rounded approach to research and complements other methods used to enhance the integrity of findings (Spencer, 2011). When using a photograph as data collection, the intent behind the image captured must be recognized and stated by the individual taking the photograph (Stanczak, 2007). Therefore, if I took a photograph to exhibit an area of the castle that may be deemed inaccessible compared to an area that is accessible, I acknowledged this in the thesis.

Policies and Other Documentation

Policies and other documentation (e.g., brochures, pamphlets, websites) related to accessibility at tourist attractions were utilized as the main source of data collected during this study. This type of data collection was originally going to be used to compare and contrast the information found as a result of the interviews, but later turned into the main source when I was unable to gather interview participants. The textual sources used include:

- up to date brochures and websites advertising Glamis Castle (15);
- website and print advertisements for Glamis Castle (29);
- policies concerning accessibility that influence Glamis Castle (10);
- newspaper and online articles (including Kirriemuir Herald, The Courier, and STV News) regarding accessibility to historic sites (28);
- online blogs indicating the views of people with physical disabilities with regards to accessibility of historic sites in general (17);
- newspaper and online articles addressing the implementation of the *Equality Act 2010* at historic tourist attractions (13);

- books and articles addressing the history of disability and heritage policy in the UK (7);
- statistics of visitors to castles in Scotland and Glamis Castle (6).

Documentation was collected throughout the research process as information became available. The documentation provided examples of accessible and inaccessible information available for people with disabilities visiting the site. The documentation helped obtain valuable information that assisted in the creation of stories about accessibility and disability at historic tourist sites.

Through documentation, I analysed the information available discussing accessibility at historic attractions; examined what is currently being done to accommodate people with disabilities; obtained a greater understanding of the current perceptions of people with disabilities; and explored information available about future accommodations.

Through analysis of these data sources, stories regarding accessibility and disability at historic sites are told. Utilizing documentation as data allows the researcher to look at the information provided repeatedly and typically without disturbance (Creswell, 2009; Yin, 1994). Policies and other documentation also aid in the process of crystallization and enhance the understanding of what is being studied (Richardson, 1997).

Challenges I encountered when gathering policies and other documentation included: access to some information was restricted; documentation could be incomplete, inaccurate or in need of updating; some of the sought after documentation may be hard to find; and its reliability may be questioned (Creswell, 2009; Yin, 1994). While utilizing the documentation, the original purpose or agenda behind the documentation was considered while analysing the information as well as the targeted audience. For example, while conducting the analysis on

disability policy I kept in mind that the definition of disability used throughout the policy is based on the medical model and not the biopsychosocial model, as a result, this may affect how the policy was written and understood.

Interview Participants and Sampling

Before entering the field, I hoped to obtain approximately seven, semi-structured, key informant interviews which would involve open-ended questions allowing for opportunities to probe for additional information that may be useful (Creswell, 2009). The key informants targeted were people working for the tourism board in Angus, and people working at Glamis Castle. Interviews with individuals who work for Capability Scotland, a disability organization who try to increase accessibility for people with disabilities, were also included in the original study design.

Attempts to arrange interviews with key informants were made by sending emails to potential participants using addresses obtained on the appropriate websites. I also called the various sites to make contact and to schedule meetings. Information regarding the purpose and length of the study was provided when the individuals were initially contacted to see if there was interest in taking part in an interview (Creswell, 2009). Later communication also gave potential participants the questions in advance with the hope of enticing their involvement. Individuals and organizations I hoped to interview included:

- Glamis Castle Management
 - Chief Administrator
 - Marketing Manager
- Angus and Dundee Tourist Board Management
 - Operations Manager

- Marketing Manager
- Sales Manager

The original study design included active and narrative interviews with the key informants; however, this did not occur due to lack of willingness by invited participants.

Key informant interviews were intended to gain a greater understanding of:

- what has been implemented to increase accessibility for people with disabilities;
- experiences of people with disabilities visiting historic sites currently;
- how people working in the tourism industry perceive current accessibility levels;
- how disability is currently communicated;
- current practices that may be disabling for tourists with disabilities;
- plans to increase accessibility in the future;
- the intersection of disability policy and the quest for preservation and authenticity.

Before the process of gathering participants began, it was understood that a challenge of conducting key informant interviews was that it may take a long time to conduct and organize interviews to be completed during the stay at the research site (Creswell, 1998). This challenge occurred and interviews at the site did not take place. This is described further in the following section.

The Trials of Obtaining Interview Participants

In my thesis proposal, I indicated I planned to conduct key informant interviews in conjunction with the attainment of visual data, policy documentation and other related materials. Gathering participants for interviews proved to be a more difficult task than initially anticipated, especially with the extra barrier of arranging interviews with people in another country while I tried to conduct the majority of my research while in Canada.

After defending my thesis proposal, I went to Scotland a few weeks later with the intentions of conducting the majority of my interviews, as well as gathering other related materials that would be beneficial to my research. Unfortunately, due to timing, ethics was approved near the end of my visit, leaving me with only a couple days to conduct as many interviews as possible. During my trip I was able to gather my visual data when I took a trip to Glamis Castle with my aunt and my mother. While at Glamis Castle with my aunt I was also able to gather experiential and visual data to help write Margaret's story (see Chapter Four). Since my visit to Glamis Castle took place before receiving ethics approval, I was unable to talk to staff or management during my visit to arrange future interaction. After my visit to the castle during the day, that very same evening I received ethics approval. I proceeded to email the castle to try and arrange a meeting over the next couple days before I left. I did not hear back from the castle the next day and so I tried to call and arrange an interview but everyone was busy.

My last couple days in Scotland were unsuccessful in terms of obtaining interviews. As a result, I made the decision to gather participants when at home in Canada. I planned to arrange interview times and conduct the interviews over the phone rather than face-to-face, as I no longer had the funds to make a third trip to Scotland. I was disappointed at the reality as I was excited to have face to face interviews. I believe the interviews would have encouraged more in-depth stories as I would have the opportunity to interpret body language in addition to what the participants would have said, but I also understood that conducting interviews over the phone would be better than nothing.

When I arrived back in Canada I sent a second email to potential participants at Glamis Castle and an initial email to the Dundee Tourist Board. I also sent an initial email to

Capability Scotland in Dundee, Scotland. I gave the organizations 2 weeks to get back to me, and in the meantime gathered other data and simultaneously analyzed the information collected. Two weeks later, I had not received any response from any of the locations and so decided to call each organization hoping that by talking to me on the phone it would be harder to ignore me. When I called Glamis Castle, the office staff provided me with a contact name, and I was told the individual would be able to help me find management contacts at the castle. At the Dundee Tourist Board I was told that my message would be passed onto management and they would get in touch with me when they could; Capability Scotland did not pick up the phone. I left a message describing my study and providing contact information. I did not receive a response.

Office staff at Glamis Castle suggested I connect with my contact through email. I sent an email describing my study and how I hoped they would be able to assist me. While waiting for a response, my contact at the tourism board said they would forward my request to management, and I provided them with my contact information. When I had not heard back in two weeks, I emailed my contact again to see if there had been any progress. The contact was very apologetic in the response and said the individual who could help me was on vacation for two weeks and my message would be forwarded when the vacation was over. I sent an email back to thank them for their help.

Ten days after sending my email to Glamis Castle I had yet to hear anything. I sent a follow up. The next day I received a response from my contact at Glamis Castle stating that at this point in time everyone on staff, including management, is too busy to talk to me since they are currently short staffed with many people taking time off for the October school holidays. They were also busy with the organization of the upcoming popular Halloween

events taking place at the Castle. My contact said she would keep asking around and if she finds anyone who would be able to help me out, she would let me know.

For the next few weeks I continued to send reminders to the Dundee Tourist Board and Capability Scotland. During that time, I analysed information I had found through other sources and analyzed the photos I had taken in the hopes of getting as much work done as I could without the interviews. During data analysis I created a few additional questions about accessibility at the castle that I wanted to verify with staff at Glamis Castle. I sent an email to my contact who responded the next day stating things had slowed down and she was able to answer my questions. In addition to the questions, I asked her if it would be easier to conduct interviews via email. I thought that if staff members were provided the questions via email, they could answer at their leisure. In the response I received a few days later, my contact did not answer the interview questions, but there was a response to the few questions I had asked about Glamis Castle. I sent an email back thanking her for the response and proceeded to reiterate the question about the interviews via email once again. A couple days later my contact responded by stating that my email will be circulated to colleagues in the hopes of someone assisting me. She indicated I would hear back by the end of the week if people were willing to participate.

Around this time I decided I would focus on gathering participants solely from Glamis Castle since my other chosen locations were not materializing. As I anticipated an email from Glamis Castle about potential participants at the end of that week I continued with gathering other data. By the end of the week I had not heard from them. I decided to give a little more time to respond. A week and a half later I received an email giving the name of the Castle Administrator along with an email address and indication that the Administrator was willing

to help. I sent the Castle Administrator an email with all the necessary information, but never received a response. A couple weeks later I called to see if I could speak with the Castle Administrator, but unfortunately there was no answer. At this point I was getting very frustrated with the process and felt like giving up. I decided I would give the administrator one more try and if I did not receive a response, it was time to seriously think about how I could finish my thesis without conducting interviews.

At the beginning of February I met with my advisor to discuss options. We decided there was only so much that could be done and that if people did not want to talk to me, I could not force them. I decided to gather as much data as I could that pertained to disability policy, heritage policy, and look at the interaction between the two types of policy. We decided I would use the photos taken at Glamis Castle to create a story about someone visiting Glamis Castle while utilizing a wheelchair during their experience (see Margaret's story in Chapter Four). Although conducting interviews was the part of the experience I was looking forward to the most and felt it would have provided me with rich information, I was able to gather very interesting information through other avenues to gain a greater understanding of the physical accessibility at Glamis Castle, the influence of disability policy and heritage policy and how it currently perpetuates disability and inaccessibility.

The following table provides a detailed timeline of my process of trying to obtain participants for interviews which began the day I obtained ethics approval.

Table 1

Recruitment Process for Interviews

September 7, 2011	<ul style="list-style-type: none"> • Received ethics clearance • Initial email was sent to Glamis Castle in the hopes of arranging an interview before I left Scotland on September 11, 2011 (no response was received)
September 14, 2011	<ul style="list-style-type: none"> • Initial email was sent to the Dundee Tourist Board to set up a telephone interview
September 16, 2011	<ul style="list-style-type: none"> • Sent a follow up email to Glamis Castle regarding the possibility of setting up a telephone interview
September 21, 2011	<ul style="list-style-type: none"> • Discovered an organization called “Capability Scotland” located in the Angus Region of Scotland, emailed to arrange a telephone interview (no response was received) • Received automated out of office reply from Capability Scotland, sent an email to contact name provided in email (no response received)
September 23, 2011	<ul style="list-style-type: none"> • Sent a second follow up email to Glamis Castle regarding telephone interview
September 30, 2011	<ul style="list-style-type: none"> • Called Glamis Castle, Dundee Tourist Board and Capability Scotland – left messages at Dundee Tourist Board and Capability Scotland, and spoke with a staff member at Glamis Castle who gave me a contact name and told me to email to a particular individual
October 3, 2011	<ul style="list-style-type: none"> • Emailed the contact name at Glamis Castle regarding study
October 4, 2011	<ul style="list-style-type: none"> • Sent follow up email to Dundee Tourist Board regarding study
October 5, 2011	<ul style="list-style-type: none"> • Received email from Dundee Tourist Board apologizing for not getting back to me and was told that my email had been forwarded to a member of management. I was told that the individual who would be able to assist me was on holiday until October 11th <ul style="list-style-type: none"> • <i>I am sorry to hear you didn't get a reply as we forwarded your email to a senior member of staff. Our team leader is Debbie and at the moment she's on holiday until the 11th October so we'll will pass on your request when she's back. Apologies for any inconvenience. – Staff Member at Dundee Tourist Board</i> • Responded to Dundee Tourist Board email thanking them for their help and that I look forward to hearing from the team leader when she returns from holiday
October 13, 2011	<ul style="list-style-type: none"> • Sent follow up email to contact at Glamis Castle regarding study <ul style="list-style-type: none"> • <i>After talking to a staff member at Glamis Castle a couple weeks ago, I sent an email last Monday asking if you would be able to help me with my Master's thesis research or know of a few people I could talk to at Glamis Castle about accessibility, but I haven't heard back. I'm not sure if you received the email or, understandably, I may have emailed you at a busy time.</i> <p><i>The last email I sent should appear as an attachment if you did not receive the original. If you need any additional information</i></p>

	<p><i>regarding my research just let me know. Thank you very much for your time.</i></p>
October 14, 2011	<ul style="list-style-type: none"> Received response from contact at Glamis Castle indicating that they currently do not have time to participate in my research, but that the contact will continue to ask if anyone is able to help me and will get in touch with me if someone can. <ul style="list-style-type: none"> <i>Thank you for your e.mail regarding your Master's research. Unfortunately, I have been unable to get members of our key staff, who would be able to answer your questions, willing to help at the moment as this is a particularly busy time of year for us. We are short staffed at the moment due to school holidays and many of our staff who are parents of school age children like to take their time off.</i> <p><i>I will keep asking the question and if I can get people to help you, I will be in touch. – Contact at Glamis Castle</i></p>
October 28, 2011	<ul style="list-style-type: none"> Sent follow up email to Dundee Tourist Board asking if the team leader received my message as I had not heard anything <ul style="list-style-type: none"> <i>Hope you are doing well. I just wanted to send a quick email to see if member of management received my email regarding my study as I haven't had anything back?</i> <p><i>I'm not sure if she has looked into anything yet, but would you be able to ask member of management that if there is no one who is able to talk to me over the phone to answer my thesis research questions I sent, if anyone would be willing to answer my questions in an email if that is easier as I don't want to inconvenience anyone. I'm not sure if that would help or not. If there are questions that they are unable to answer, they don't have to, they just have to answer the questions to the best of their ability.</i></p>
October 29, 2011	<ul style="list-style-type: none"> Received response from Dundee Tourist Board with another apology for not getting back to me. <ul style="list-style-type: none"> <i>I'm sorry to hear you didn't have a reply from (my team lead) yet. I was off for two weeks so I didn't see (the team lead) to ask her about it. I forwarded your email to (them) so hopefully she'll be in contact on Monday.</i>
November 8, 2011	<ul style="list-style-type: none"> Sent follow up email to Capability Scotland as I never received any word
November 9, 2011	<ul style="list-style-type: none"> Sent email to contact at Glamis Castle indicating that I have been completing other areas of my research over the past few weeks and a few questions had arisen and asked if she could help me with some clarification in addition to locating participants. The questions were clarification for aspects of the historic site that I did not take note of during my visit gathering visual and experiential data. I also asked if it would be easier if potential participants could answer the questions via email if they did not have the time to participate in a telephone interview <ul style="list-style-type: none"> <i>Are there any doors at Glamis Castle that have an automatic</i>

	<p><i>door opener button? If so, which ones?</i></p> <p><i>Is there an elevator from the first floor to the beginning of the tour on the second floor? (I forgot to look at this when I was personally taking the tour)</i></p> <p><i>I noticed that people using a wheelchair visiting the site get free admission, if the people accompanying them are not wheelchair, do they pay the admission?</i></p>
November 10, 2011	<ul style="list-style-type: none"> Received response from contact at Glamis Castle as things have slowed down at the historic site. Contact answered the questions I sent regarding particular characteristics about the castle, but did not answer my research questions for my thesis, or indicate that there are people to help answer the questions. <ul style="list-style-type: none"> <i>With our big Halloween event now over, I now have a bit of time to concentrate on other important matters and, in particular, I am now in a position to help you with your questions for your Master's thesis research.</i>
November 11, 2011	<ul style="list-style-type: none"> Sent a thank you email to contact for answering the clarification questions, also asked if they would like me to send my research questions once again
November 12, 2011	<ul style="list-style-type: none"> Decided I would focus on Glamis Castle with regards to the interview as my other sources were not materializing
November 14, 2011	<ul style="list-style-type: none"> Received email from contact at Glamis Castle indicating that my request for participants was circulated to the staff at the historic site. <ul style="list-style-type: none"> <i>I have circulated your request to my colleagues to ask if they would be willing to participate in your research and I am waiting for them to get back to me. I will let you know by the end of this week.</i>
November 18, 2011	<ul style="list-style-type: none"> Had not received a response from contact at Glamis Castle regarding participants as of yet, deciding to give more time for response
December 1, 2011	<ul style="list-style-type: none"> Received response from contact at Glamis Castle and was given the name of the Castle Administrator who said they were willing to assist me with my research and was told to email him.
December 5, 2011	<ul style="list-style-type: none"> Sent email to contact thanking them for the information provided and notified that I will be sending an email to the Castle Administrator Sent email to Castle Administrator with an explanation of my research and research questions – also indicated that the questions could be answered over the phone or via email
December 17, 2011	<ul style="list-style-type: none"> Phoned Glamis Castle – no answer
January 2, 2012	<ul style="list-style-type: none"> Sent follow up email to Castle Administrator – received no response
February 4, 2012	<ul style="list-style-type: none"> Met with advisor and discussed my challenges with obtaining interviews, in order to progress with my thesis, we decided to focus on the data collected from other sources as the interviews did not look like a viable option – proceeding with findings using data gathered from other methods.

Reflexivity

Reflexivity supports the researcher to gain insight into personal and social experiences, and enhance understanding of a topic while data are gathered (Finlay & Gough, 2003). This insight takes great effort on the part of the researcher in identifying and interrogating personal influences on their interpretation of the information gathered (Finlay & Gough, 2003).

Qualitative research recognizes that meanings interpreted by one individual can be different from another; the same collected data can produce different stories (Finlay, 2003). Reflexivity allows a researcher to illuminate their individuality within the analysis of information collected and recognize this individuality can influence the research process and results in different ways (Gough, 2003). The process of reflexivity does not necessarily have to take place during one particular time frame of the research; it can occur continuously (Gough).

The narrative case study may pose challenges for the researcher that reflexivity can assist with to ensure the quality of the data obtained. Recognized challenges of using the narrative case study method include that quality depends on the focus of the researcher and the amount of detail they include during the study; this will influence the usefulness of the final results obtained (Carroll, 1999). Also, Brandell and Varkas (2010) state there may be artificial separation between researcher and the information gathered since interpretation of the material may be different from the original intent of the material gathered. The possible intent of the gathered data must be taken into consideration and if unclear, clarification must be made so the degree of misinterpretation is decreased (Brandell & Varkas, 2010). Examples of the questions that may be asked during the research process to enhance reflexivity include:

- How are my views affecting the story being told?
- Can there be any other interpretation of the story?

- How does my previous knowledge affect my interpretation?
- Is there anything I need to clarify about the data gathered?

The reflexive process of data interpretation will follow a *collaborative narrative method* approach developed by Marla Arvay (2003). This is discussed further in the following section.

Data Analysis

Information gathered through the collection of visual data, policies and other documentation were analysed to produce stories regarding accessibility and disability at Glamis Castle and historic sites overall. A narrative analysis examines the story told within documents collected and images and analyses how it is all put together (Riessman, 1993). To conduct narrative analysis the researcher must understand how narrative telling in documentation is facilitated, how stories are created for the purpose of the researcher, and how to analytically approach the narratives collected (Riessman, 1993). Unlike other forms of qualitative analysis, there are no concrete steps to narrative analysis; providing the researcher with more freedom (Riessman). Emery Roe's (1994) approach to narrative policy analysis was used to help shape the findings and conclusions. To gather data for the narrative policy analysis, I had to determine what information would be meaningful and useful to my study.

Data gathered and considered meaningful for this study was influenced by the research questions as well as my past education, training and experiences. While gathering visual data at Glamis Castle, my past experience conducting accessibility audits for an undergraduate course influenced what I considered important to capture. For example, I am attuned to recognizing areas considered inaccessible as well as areas of Glamis Castle that may have made alterations to enhance accessibility. Pictures taken focus on these areas. With regards to the visual data obtained through brochures, my focus was to capture the words used

throughout the brochures that allude to accessibility or inaccessibility, and also utilizing pictures available in books on Glamis Castle that represent inaccessible rooms visitors are unable to take pictures of while participating in the castle tour.

To understand policy influencing accessibility at Glamis Castle, both disability and heritage policy were researched. With regards to disability policy, the *Disability Discrimination Act* and the *Equality Act* were researched as they currently both influence service providers at Glamis Castle. The main focus with regards to heritage policy was the *Town and Country Planning (Scotland) Act* and the *Planning etc (Scotland) Act* as they are influential to Glamis Castle. While researching policy, I focused on gathering information that would directly influence service providers at Glamis Castle. I also searched for other documentation related to policy that would also affect the service providers.

The emerging stories in this study are a result of conducting a narrative policy analysis. Narrative policy analysis helps to understand and examine stories told by looking at the uncertainty, complexity and polarization typically witnessed in policy (Roe, 1994). Narrative policy analysis is useful when using a case study approach because the approach encourages the gathering of information from a variety of sources allowing taking other people's views and definitions of the issues into consideration (Roe).

To conduct Roe's (1994) narrative policy analysis, four steps are followed. The first is to tell the typical story recognized from analysing policy (Roe). These are the dominant stories commonly told when issues with heritage and disability policy are discussed (Roe, 1994). Although these can be interesting and insightful stories on their own, they are not the only stories told. A narrative does not necessarily always have to be the conventional definition of a story with a beginning, middle and end (Roe, 1994). As a result, the next step

is to discover the stories that are not being told, also known as the non-stories, or to find the story that counters the main message originally told in heritage and disability policy, these are identified as counter-stories (Roe, 1994).

Once completing the second step, the narratives produced must be compared in the hopes of creating what Roe calls a metanarrative (Roe, 1994). The metanarrative seeks common assumptions in the hopes of finding common ground for opposing sides to start working together to find a balance (Roe, 1994). A metanarrative can be expressed in a variety of ways, but is ultimately the story told by comparing the stories, non-stories and counter-stories written (Roe). Narrative policy analysis seeks to obtain as many voices as possible to create a comprehensive metanarrative (Roe). Once the metanarrative is created, the issue can be recast in the hopes of stimulating action by providing possible answers to the uncertainty and polarization witnessed in heritage and disability policy (Roe).

I reviewed the gathered information numerous times to obtain narrative segments. Once these were gathered, I printed the information and separated it by sentence or paragraph, pinning each cut-out of information to a large piece of cardboard to organize my ideas and begin to discover the dominant stories, counter-stories and non-stories told. Separating the information in this way allowed me to explore narrative segments, watch themes emerge and identify areas needing further exploration.

Narrative segments were analysed in greater detail to reveal information affecting accessibility and disability at Glamis Castle and structural forces that create and perpetuate accessibility and disability. Identifying narrative segments to be analysed is not an explicit process, by re-reading through the data gathered, interpretive categories emerged and the way the documentation is written provided clues to the meaning of each segment (Riessman,

1993). Once the narrative segments are determined, Riessman suggests re-writing segments so that each line is numbered meaningfully. Through narrative segmentation policies and other documentation start to be fully analysed. Information gathered was segmented into multiple areas; any information pertaining to a specific area was separated.

Once the narrative segments are created, to discover insights Riessman (1993) suggests starting from meanings discovered in the words used in the documentation. Words not used must also be considered as they could indicate ideas, concepts and shared themes taken for granted by the writer and reader (Riessman, 1993). Through this process, stories, counter-stories, and non-stories as recognized in Emery Roe's process of narrative policy analysis began to emerge.

Dominant stories, non-stories, counter-stories and metanarrative begin to take shape in Chapter Four and are discussed further in Chapter Five in the hopes of providing an overall understanding of the confluence of three contexts of power: the economics of tourism, the preservation of historic buildings, and the inclusion of people with disabilities.

Ethical Issues

Ethical considerations are made in a variety of areas throughout the research process, including the research problem, purpose, questions, data collection, analysis, interpretation, writing and dissemination (Creswell, 2009). Ethical considerations help protect participants, develop trusting relationships with participants, and promote the integrity of the study (Creswell, 2009). An ethical issue arises when reciprocity between participant and researcher disappears (Creswell, 2009).

Although interviews with key informants did not occur, there were people involved who assisted in gathering information about the castle and who tried to help find participants for

me. To them I communicated the purpose of the study and the interview questions that would be asked in hopes they would be able to lead me to participants who could be of the most assistance (Creswell, 2009). Communication of the research problem must ensure participants are not marginalized or disempowered (Creswell, 2009). During data collection participants were not put at risk, vulnerable populations were respected and, disruption to the site was minimal (Creswell, 2009). I created a consent form to be used in the collection of participants. This form: (a) acknowledged participants' rights would be protected, (b) identified the researcher and sponsor of the research, (c) identified how participants were chosen, (d) highlighted benefits of participation, and (e) ensured participants could withdraw at any time without penalty (Creswell, 2009).

During data analysis and interpretation, confidentiality of people I interacted with was a priority. In this thesis document, pseudonyms are used to protect the identity of individuals involved in gathering experiential data and gaining access to potential participants. The actual names of individuals are not used, nor are their position at their organization, if applicable. Only the location of their employment was given. The strength of analysis and interpretation was achieved through the use of different sources, crystallization, and clarification of information provided by documentation that may be unclear (Creswell, 2009). I hope to distribute information found in this study to organizations I attempted to obtain interviews from by providing them with an executive summary of my results, including recommendations.

Chapter Summary

Narrative case study methodology allowed for an in-depth look at accessibility, disability, and heritage tourism at Glamis Castle through data gathered from a variety of

sources. The use of visual and textual data, documentation and key informant interviews was discussed in this chapter. Unfortunately, key informant interviews did not take place. Well-rounded and informative stories with interesting insights were produced with the use of visual and textual data gathered from a collection of policies and other documentation including photographs of the site. By utilizing Roe's narrative policy analysis, stories, counter-stories, and non-stories were discovered with the data obtained. The importance of crystallization in the research process was explained as well as the role reflexivity played throughout the study, and the ethical issues considered to conduct this research with integrity.

Chapter Four: Findings

Presently, Glamis Castle is owned and funded by the Earl of Strathmore and Kinghorne in conjunction with Strathmore Estates (Holdings) Ltd. (McCann, 2008); both are considered estate trustees (Strathmore Estates, 2010). The castle is considered a privately-owned landed estate with the Earl of Strathmore taking an active role in the management of Strathmore Estates (Holdings) Ltd. (Strathmore Estates, 2010). The estate of Glamis covers 14,000 acres of land with Glamis Castle being the main tourist attraction to the area (Strathmore Estates, 2010).

Glamis Castle attracts a number of visitors. When the castle first opened its doors as a tourist attraction in 1950 they welcomed more than 1100 guests that year (Murray, 2010). Since then, approximately 4.2 million people have toured the castle (Murray, 2010). In a typical year Glamis Castle welcomes an average of 110,000 guests from all over the world (Murray, 2010). In 2011, Glamis Castle experienced a decrease of about 10,000 guests, mostly attributed to the rising prices in gasoline making it more difficult to visit Glamis Castle by car or bus trip (Brown, 2011). To accommodate the typical influx of tourists during the summer months, Strathmore Estates (Holdings) Ltd, employs 50 staff across five departments providing work for people living within the estate and surrounding areas (Murray, 2010). To maintain or improve the number of yearly visitors to the historic site, considerations of the needs of potential tourists have to be made as demographics of tourists begin to change.

Narratives of Accessibility and Disability at Glamis Castle

Accessibility and disability at a historic site was explored from a variety of viewpoints and avenues. The accessibility and disability at Glamis Castle is expressed through four stories. The four stories describe:

- **the development of disability policy in the UK**- what it looks like today, the effect policy has on historic sites and service providers, and how the perpetuation of disability and inaccessibility may still exist with its implementation;
- **the development of heritage policy in the UK**- what it looks like today, the effect policy has on historic sites and service providers, and how the perpetuation of disability and inaccessibility may still exist with its implementation;
- **the interaction between disability and heritage policy in the UK**- its effect on service providers of historic sites, and how the interaction of two policies effects the perpetuation of disability and inaccessibility at historic sites;
- **the journey of a visitor utilizing a wheelchair while at Glamis Castle**- a narrative about Margaret’s experience crafted from observations and field notes written from visits to Glamis Castle.

These four stories provide insight into the priorities of disability and heritage policy and how each influences service providers of Glamis Castle and other historic sites in Scotland.

The stories show the necessity for continual effort by service providers to assess accessibility of their service as new policies, new standards, and continual amendments to policies arise.

The Influence of Disability Policy on Glamis Castle

This story describes the historic separation between disability policy in the UK and Glamis Castle. The fight for equality has been a tough battle. Since the mid-18th century, views of people with disabilities in the UK have changed dramatically, in a positive way, with the majority of change occurring since 1945. People who faced inequality and those who supported them in enhancing equality participated in organized activism and governmental institutions were created to promote equality for all (Thane, 2010). With these changes over time, we see in the present moment the coming together of disability and accessibility policy with heritage policy surrounding Glamis Castle.

The story from the 18th to the 20th century

In the mid-18th century people with disabilities, particularly individuals identified as having a mental impairment, were placed in institutions called workhouses (Borsay, 2005), while Royalty were being entertained at Glamis Castle. Workhouses were intended to deter the use of social assistance and placing those who needed to use it within institutions (Borsay, 2005). In the beginning, workhouses locked, chained, provided little freedom of movement and excluded people with disabilities from mainstream society (Borsay, 2005). At this time there were 600 workhouses in England alone (Borsay, 2005). If individuals in workhouses disobeyed the rules in place, the result was chastisement, reduction in diet, isolation and corporal punishment (Borsay, 2005). People with disabilities who were in the workhouses and considered difficult and dangerous were sent to the asylum as they were thought to pose a threat to other inmates in the workhouse (Borsay, 2005). Reformers in the 18th century exposed the negative environment of the workhouses leading to improvements in the treatment of inmates and how inmates were placed (Borsay, 2005). This led to the modification of procedures within the workhouses in 1861 (Borsay, 2005). People with disabilities living in workhouses were allowed to wake up at a later time than witnessed in the past; full-day leisurely outings on Sundays were provided, and increased amounts of food were given during meals (Borsay, 2005), while Royalty were provided with freedom and an abundance of food that people living in the workhouses could only dream of. Although changes were in place, people with disabilities would avoid entering workhouses at all costs, even to the extent of committing suicide rather than to live in the facility (Borsay, 2005). Near the beginning of the 20th century, workhouses were renamed poor law institutions and a couple years later the Ministry of Health became the new administration (Borsay, 2005).

Not long after the end of World War 1, physical disability became more prominent in the United Kingdom. Glamis Castle became a convalescent home for wounded soldiers (McCann, 2008), and more widely, disability became a policy focus. In the 1920s, in the decade before the birth of Princess Margaret at Glamis Castle, charities were created and raised money to provide people with disabilities the opportunity to live in residential homes, instead of being sent to poor law institutions or asylums (Borsay, 2005). In 1948, the National Health Service was established to improve health care in Britain (Thane, 2010). People with disabilities, especially those with mental disabilities benefitted the least from the introduction of the National Health Service: People with disabilities occupied over half of all the hospital beds in the UK in the early 1950s, but found themselves staying in very bleak conditions (Thane, 2010). Also in 1948, the United Nations published the *Universal Declaration of Human Rights* (Borsay, 2005) which included 30 articles regarding human rights (United Nations, 1948). Article 25 is an example of a human right that directly affected many people with disabilities as it pertained to the workhouses:

Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing, and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability...or other lack of livelihood in circumstances beyond his control (United Nations, 1948).

Although this declaration came into place in 1948, all the goals of the United Nations were only aspirations in the hopes of one day becoming enforced which would not occur if the political will of a nation did not support the declaration (Borsay, 2005). Around this time, Glamis Castle opened its doors to the public and became a site of tourist attraction.

In the 1960s, Labour governments began taking action to promote equality, even when their own voters did not agree with them (Thane, 2010). Developments in society promoted equality with overall cultural change in terms of higher standards of living, education, and increased social confidence (Thane, 2010). After 20 years of Glamis Castle being a tourist attraction, the *Chronically Sick and Disabled Act* came into effect in the UK in 1970, requiring local authorities to register people with disabilities and to inform them of services available (Thane, 2010). Although requirements to enhance accessibility were not strict, providers offering services to people with disabilities were encouraged to make provisions to enhance accessibility (*Chronically Sick and Disabled Act 1970*, 1970). In 1975, the United Nations General Assembly adopted the UN Declaration on the Rights of Disabled Persons proclaiming the right for people with disabilities to receive “special treatment” for their “special needs” (Proudlock Associates, 2010). The declaration also included the right of people with disabilities to have access to an environment and living conditions that is as close as possible to that of the majority of society at their age when they have no other choice but to enter a specialized establishment (Proudlock Associates, 2010).

The 1980s were a time when attitudes towards people with disabilities were acknowledged as a major barrier to equality (Proudlock Associates, 2010). With this recognition, councils controlled by people with disabilities were established. The British Council of Disabled People was the biggest of its kind and was founded in 1981 with the purpose of promoting full equality and participation of people with disabilities in society (Proudlock Associates, 2010). The British Council of Disabled People still exists today and is recognized as an activist group who campaigns to promote the rights of people with disabilities (Proudlock Associates, 2010). The British Council of Disabled People is an

umbrella organization representing 130 organizations throughout the UK that are run and controlled by people with disabilities (Wiser, 2011).

The *Disability Discrimination Act* was created in 1995 with the purpose of making discrimination against people who have disabilities illegal in relation to employment and the workplace as a whole (*Disability Discrimination Act 1995*, 2010). It was not until 2006 that discrimination protection was extended to the provision of goods and services (*Disability Discrimination Act 1995*, 2010). The *Disability Discrimination Act* states that anyone who has a physical or mental limitation inhibiting one or more substantial activities in life is considered disabled (Burnett & Paul, 1996). The *Disability Discrimination Act* believes that it is unlawful for those with disabilities to be refused the right to utilize a service due to that service deliberately providing inadequate accessibility (*Disability Discrimination Act 1995*, 2010). Any and all services, regardless of the charge to get in, must comply with the requirements of the *Disability Discrimination Act* (Goodall, Pottinger, Dixon & Russell, 2004).

Although requirements are given, the *Disability Discrimination Act* only provides general guidance as to what may be necessary to meet them (Day, 2005). If service providers do not meet the requirements, the Act is not enforced by any local or national government body (Day, 2005). The service provider encounters legal repercussions for the inability to meet requirements if individuals take private legal action; local and national government bodies will not take action against the service provider (Day, 2005). The *Disability Discrimination Act* does not provide a compliance document to follow, duties given to service providers and employers evolve as courts take each case into consideration (Day, 2005). Since the induction of the *Disability Discrimination Act*, the responsibility of the service provider

has grown in ensuring constraints are removed or altered to provide access (Goodall, Pottinger, Dixon & Russell, 2004). In the case of Glamis Castle, estate trustees may feel alterations may be too costly to implement which would have been considered a reasonable excuse for not enhancing accessibility. Currently, the implementation of accessibility policies is not up to standard, particularly around increasing the awareness of these Acts to those with disabilities so they are more knowledgeable about their own rights (Kaufman-Scarborough & Baker, 2005). Although this improvement is still not at a desired level, there has been a vast amount of improvement in the level of accessibility along with an increase in awareness of the rights of people with disabilities (Kaufman-Scarborough and Baker, 2005) compared to before the introductions of the *Disability Discrimination Act 1995*.

The turn in disability policy in the new millenium

The *Equality Act 2010* is the most recent policy created in the UK and is meant to be an advancement on the *Disability Discrimination Act*. With the Equality Act we see some shifts in the story about disability and access. When the *Equality Act 2010* was introduced in the UK, the *Disability Discrimination Act* was still active and expected to be used by those impacted by the *Equality Act*. The idea of the act was brought to UK parliament on June 26, 2008 by the leader of House of Commons, Harriet Harman, when she announced a new Single Equality Bill in the hopes of modernizing and standardizing into one law multiple discrimination laws currently in place in the UK (Equality and Human Rights Commission, 2012; Hodder Education, n.d.). The *Equality Act* started with the introduction of the Equality Bill to the House of Commons on April 24, 2009 (Hodder Education, n.d.). On April 10, 2010, the *Equality Act* received Royal Assent resulting in the biggest change to employment law in the UK since the 1970s (Hodder Education, n.d.). Six months later, on October 1, 2010,

the majority of the provisions of the *Equality Act* became an Act of Parliament bringing nine legal statutory provisions into one single Act (Proudlock Associates, 2010). The nine legal statutory provisions concern the nine currently protected characteristics, for example, disability, sex, and race previously found under separate laws (Proudlock Associates, 2010). Every person in society has at least one protected characteristic and as a result, the Act protects everyone against being treated unfairly (Home Office, 2011). The Act provides legal framework to assist in the protection of all people who could be discriminated against and encourages equality of opportunity (Historic Environment Local Management, 2011). The Act addresses the ways an individual can be treated unlawfully, including direct or indirect discrimination, harassment and victimization, and refusal to make reasonable adjustments (Home Office, 2011). Before the *Equality Act*, the existing anti-discrimination laws were spread across a number of different Acts of Parliament and statutory instruments causing confusion and frustration to its users as each were difficult to grasp and understand (Hodder Education, n.d.).

Although the Act covers nine protected characteristics, disability is the main focus of this story. The *Equality Act 2010* protects anyone who currently has a disability or has had one in the past (Government Equalities Office, 2010). To be protected by the Act, an individual's impairment must meet the criteria of disability as defined by the Act, or be able to prove that they have encountered less favourable treatment because of someone else who has a disability or perceived disability (Office for Disability Issues, 2011). Presently, the medical model is used as the basis for the definition of disability within the *Equality Act 2010* (Proudlock Associates, 2010). As the Act states, “[a] person has a disability if the person has a physical or mental impairment, and the impairment has a substantial and long-term adverse

effect on a person's ability to carry out normal day-to-day activities" (*Equality Act 2010*, 2010, Part 2, c. 1, s. 6). An effect is considered more than minor or trivial is substantial (Office for Disability Issues). The effect an impairment has on an individual's life and normal day-to-day activities, rather than underlying conditions alone, determine whether someone has a disability (Office for Disability Issues, 2011). Day-to-day activities are defined as activities people do on a regular or daily basis, not necessarily completed by the majority of people in society (Office for Disability Issues, 2011).

Discrimination is a major focus of both the *Disability Discrimination Act* and *Equality Act 2010*. Discrimination against people with disabilities first became illegal when the *Disability Discrimination Act* was introduced (Borsay, 2005). People with disabilities were protected from direct discrimination when it could be shown their impairment affected a particular capacity, but this is no longer the case (Government Equalities Office, 2010). As a result of the *Equality Act 2010*, protection against direct discrimination is now observed in areas beyond what was included in the *Disability Discrimination Act*, for example, employment in addition to goods, services and facilities (Office for Disability Issues, 2011). Further, the *Equality Act* also protects against harassment and victimization (Office for Disability Issues; Proudlock Associates, 2010).

The definition of discrimination under the *Equality Act 2010* covers three main types of disability discrimination; direct, discrimination arising from disability, and indirect discrimination (Proudlock Associates, 2010). Direct discrimination occurs when a person discriminates against another because of the disability itself, treating the individual less favourably than they would treat others (*Equality Act 2010*, 2010; Equality and Human Rights Commission, 2011).

Discrimination arising from disability is a new type of discrimination found within the *Equality Act 2010* and occurs when a person treats an individual with a disability unfavourably because of something arising in consequence of the individual's disability and they cannot show that the treatment is a proportionate means of achieving a legitimate aim (2010, Part 2, c. 2, s. 15). To claim discrimination arising from disability, an individual is only required to demonstrate they encountered unfavourable treatment because of something connected to their disability (Equality and Human Rights Commission, 2011). One can also claim discrimination if they do not have a disability, but experience direct discrimination due to their association with a person who has a disability or incorrectly perceived to have a disability (Office for Disability Issues, 2011). It is hoped that by protecting against perceived disability, it will make it more difficult for service providers to escape liability (Tyrer, 2012). Although an individual can claim discrimination, service providers have some protection against these claims if it can be shown the service provider did not know or could not be reasonably expected to know if the person had a disability (Government Equalities Office, 2010). Indirect discrimination occurs when a person discriminates against another individual if a provision, criterion or practice is discriminatory in relation to disability (*Equality Act 2010*, 2010).

If discrimination does occur, legitimate aim for the discrimination must be demonstrated and that every option was considered to avoid the discrimination (Tyrer, 2012). A legitimate aim must be legal, not discriminatory in itself and represent real and objective consideration (Tyrer, 2012). A legitimate aim could be a business need within reason or economic efficiency; solely reducing costs is not a legitimate aim (Tyrer, 2012). A service provider

cannot argue that discriminating against visitors is cheaper and therefore a legitimate aim (Tyrer, 2012).

With regards to harassment, changes and additions to the *Disability Discrimination Act* occurred with the introduction of the *Equality Act 2010*. Harassment can now be claimed by an individual if behaviour is considered offensive, even if it is not directed towards a particular individual; harassment claims of this sort were not witnessed in the *Disability Discrimination Act* (Advisory, Conciliation & Arbitration Service, n.d.). A new addition in the *Equality Act* is that harassment can occur by a third party, for example if a staff member at Glamis Castle has a disability and encounters harassment, the service provider can be held responsible even though the harassment took place by someone not employed by the historic site (Advisory, Conciliation & Arbitration Service, n.d.). The *Equality Act 2010* defines harassment as a person (A) harasses another (B) if A engages in unwanted conduct related to a relevant protected characteristic, and the conduct has the purpose or effect of violating B's dignity, or creating an intimidating, hostile, degrading, humiliating or offensive environment for B (2010, Part 2, c.2, s.26).

Victimization is also covered in the *Equality Act*, unlike the *Disability Discrimination Act*, the claimant no longer has to demonstrate that less favourable treatment occurred by comparison, the individual only has to show they were treated badly (Proudlock Associates, 2010). Within the *Equality Act* victimization can also occur if someone has been treated unfairly due to supporting or making a complaint or grievance (Advisory, Conciliation and Arbitration Service, n.d.). The *Equality Act 2010* defines victimization as:

A person (A) victimizes another person (B) if A subjects B to a detriment because B does a protected act, or A believes that B has done, or may do a protected act. Each of

the following is a protected act: bringing proceedings under this Act; giving evidence or information in connection with proceedings under this Act; doing any other thing for the purposes of or in connection with this Act; making an allegation (whether or not express) that A or another person has contravened this Act (2010, Part 2, c.2, s.27).

The *Equality Act 2010* directly impacts Glamis Castle since the Act applies to all service providers in the UK as well as those providing goods and facilities (Government Equalities Office, 2010). A service provider is defined by the Act as “anyone who is concerned with the provision of services to the public, or to a section of the public, whether or not for payment” (Equality and Human Rights Commission, 2011, p. 147). Services include goods, facilities and all activities carried out by those providing the service (Equality and Human Rights Commission, 2011).

Service providers have a duty to make reasonable adjustments to increase accessibility for people with disabilities. Under the *Disability Discrimination Act*, service providers had to make adjustments to premises, policies, practices and procedures if it was impossible or unreasonably difficult for a person with a disability to utilize a service (Government Equalities Office, 2010). The *Equality Act* demands that where a substantial disadvantage to someone with a disability is present, adjustments must be made, encouraging service providers to make more adjustments to increase accessibility (Government Equalities Office). Where people with disabilities are at a substantial disadvantage compared to able-bodied individuals this is considered the *trigger point* and the service provider has a duty to make reasonable adjustments (Office for Disability Issues, 2011). The duty to make reasonable adjustments is comprised of three requirements. To make reasonable adjustments to avoid discrimination when the person with a disability is put at a substantial disadvantage compared

to someone without due to a provision, criterion or practice of the service (Equality and Human Rights Commission, 2011). Also, when a physical feature of the service or auxiliary aid places a person with a disability at a substantial disadvantage compared to those without a disability, the service provider should find a reasonable alternative or an auxiliary aid to provide the service (Equality and Human Rights Commission). However, reasonable adjustments made by the service provider are only required unless the adjustments will alter the service fundamentally or the service provider's trade or profession (Equality and Human Rights Commission, 2011). As a result, many service providers may not be able to make reasonable adjustments due to the importance placed on historic preservation.

The implementation of the *Equality Act 2010* brought enhancements and changes compared to what was originally witnessed in the *Disability Discrimination Act*, but the goal to protect people with disabilities remains and the majority of protection for people with disabilities in the *Disability Discrimination Act* is carried forward (Direct Access Consultancy Ltd., 2011; Office for Disability Issues, 2011). The *Equality Act 2010* does not require service providers to anticipate the needs of all individuals who might use their service (Equality and Human Rights Commission, 2011). Service providers are required to brainstorm and take reasonable steps to try and decrease or overcome constraints that may prevent people with different disabilities from enjoying or using the service (Equality and Human Rights Commission, 2011). If there is a constraint the service provider has not considered but was then made aware, it would then be considered reasonable for the provider to take steps towards meeting necessary requirements (Equality and Human Rights Commission, 2011). This is particularly the case when a person with a disability notifies the service provider of a constraint encountered while trying to access or utilize their service, or the individual has

made a suggestion to improve the difficulties faced (Equality and Human Rights Commission, 2011).

The case study at Glamis Castle was particularly concerned with the physical accessibility of the site. When there is a substantial disadvantage to people with disabilities caused by a physical feature that cannot be avoided, the *Equality Act 2010* states service providers should try to find a reasonable alternative that could make the service available to people with disabilities (Equality and Human Rights Commission, 2011). If an alternative method is decided upon, it must be a reasonable one and it cannot significantly offend the dignity of people with disabilities or cause them inconvenience (Equality and Human Rights Commission, 2011). A physical feature is anything that arises from the construction of a building, features found when approaching, exiting or accessing the building, as well as fixtures, furniture, equipment or any other physical element (Equality and Human Rights Commission). Specific examples include stairways, washroom facilities, curbs, parking areas, walkways and internal or external doors (Equality and Human Rights Commission, 2011).

When a service provider attempts to make reasonable adjustments, understanding how to implement them could be a challenging task. The *Equality Act 2010* attempts to define, and describe the importance and expectations of reasonable adjustments. Reasonable adjustments are:

The extent to which it is practicable for the service provider to take the steps; the financial and other costs of making the adjustment; the extent of any disruption which taking the steps would cause; the extent of the service provider's financial and other resources; the amount of any resources already spent on making adjustments; and the

availability of financial or other assistance (Equality and Human Rights Commission, 2011, p.98).

The importance of making reasonable adjustments to a service is to improve access to a level where every individual may experience a service to a standard normally provided to the public at large to enhance equality (Equality and Human Rights Commission, 2011). Not only do reasonable adjustments enhance accessibility for people with disabilities, they also assist in improving access for many others, including people with mobility issues such as older adults, families with small children, or pregnant women. By making reasonable adjustments, we are encouraging the concept of universal design which enhances accessibility for people with disabilities and also benefits many other tourists with a range of abilities in the process.

What is considered reasonable depends on the situation; including how much the adjustment costs the service provider, benefits the adjustment brings to potential visitors who do not have a disability, resources available to the service, and the practicality of changes (Government Equalities Office, 2010). When a service provider refuses to make reasonable adjustments, an act of unlawful discrimination will be committed and the individual who encountered the discrimination has the right to make a claim against the service provider (Equality and Human Rights Commission, 2011). Although this must be purchased privately as there is no government intervention in enforcement.

With these changes in the *Equality Act 2010*, more responsibility is placed on the management of Glamis Castle to make adjustments and show attempts are being made to increase accessibility. Although there is more pressure, meeting the requirements of the *Equality Act 2010* are not law. Unlike the *Accessibility for Ontarians with Disabilities Act*, failing to increase accessibility is not punishable by law. Requirements in the UK are minimal

compared to that in Ontario, Canada. Service providers in the UK can find ways around making alterations compared to service providers in Ontario.

The *Accessibility for Ontarians with Disabilities Act* has a goal to make Ontario accessible for people with disabilities by the year 2025 (Ministry of Community & Social Services, 2012). To do this, the Act has placed responsibilities on service providers to meet certain requirements by particular dates (Ministry of Community & Social Services, 2012). The four areas of responsibility include customer service, information and communication, transportation, and the built environment (Ministry of Community & Social Services, 2012). If service providers fail to comply, the government may intervene by conducting investigations, be given monetary penalties, or face prosecution (Ministry of Community & Social Services, 2012). If service providers in the UK fail to comply with the requirements of the *Equality Act*, none of the mentioned penalties of Ontario are witnessed in the UK.

Discussion of the disability policy story for Glamis Castle

The progress of disability policy in the UK has come a long way since the first implementation of workhouses in the mid-18th century which confined and wrongly treated people with disabilities, while Royalty at Glamis Castle were enjoying luxuries in life. Recognition of the poor treatment of people with disabilities and the intersection with the Castle occurred with the return of soldiers with disabilities at the end of World War 1. At that time, Glamis Castle became a convalescent home for wounded soldiers.

When Glamis Castle opened its doors to tourists in 1950, people with disabilities were still facing bleak living conditions (Thane, 2010). At this time, the need to increase access for potential visitors at Glamis Castle was not a concern. The 1970s brought with it policy creation encouraging services geared towards assisting people with disabilities (Thane, 2010).

In the 1980s, attitudes towards people with disabilities were recognized as a major barrier and as a result, in the following years a number of activist groups and organizations were created seeking equal treatment for all. In 1995 the *Disability Discrimination Act* was created increasing awareness of discrimination against people with disabilities influencing employers such as Glamis Castle to start thinking about discrimination against potential employees with disabilities.

In 2006, the *Disability Discrimination Act* expanded to include discrimination against people with disabilities utilizing goods and services. Although there are still improvements to be made to help limit or abolish the perpetuation of disability and inaccessibility in society, the *Equality Act 2010* provides greater protection against discrimination, victimization and harassment in a number of areas. The *Equality Act 2010* has provided people with protected characteristics a louder voice and increased awareness of the need for equality for all. Glamis Castle now has an increased responsibility to enhance accessibility, make accommodations, and be aware of possible causes of discrimination, victimization and harassment.

The *Equality Act 2010* brings with it hopes of increased levels of equality and inclusion for all. With the introduction of this new policy, the perpetuation of disability and inaccessibility will still exist, but not as strongly as before the Act. The perpetuation can be seen in various areas of the Act. Although the capacities of people are no longer included in the definition of disability, the definition is still medically based. Social causes are not mentioned or taken into consideration in the definition of disability within the *Equality Act 2010*. Disability is still thought of as the individual's *problem* or *fault*. Although social causes of disability are not recognized in the definition used, social causes are considered in the definitions of harassment, victimization and discrimination. The definition of discrimination

is now much broader in the *Equality Act 2010* than what defined disability in the *Disability Discrimination Act* which makes it more difficult for service providers to deny discrimination occurred when a claim is made by a victim. Although discrimination is difficult to deny and providing a reason that is considered acceptable is now an even harder process, service providers are still capable of explaining their way out of a discrimination claim by expressing just cause for the discrimination and providing evidence of their claims.

Social causes of disability are recognized within the *Equality Act 2010* by the importance placed on service providers to make reasonable adjustments to enhance accessibility. The *Equality Act 2010* provides a clearer definition of reasonable adjustments that is easier to interpret for service providers, making the completion of alterations or offering additional services harder to avoid. However, there are still many loop holes for service providers which encourage the perpetuation of disability and inaccessibility. For example, a service provider can claim that they were unaware of such barriers to accessibility, but once the barrier is identified, steps must be taken to try and remove or alter the barrier to utilize the service as fully as possible.

If a service provider refuses to make reasonable adjustments, the action is now considered unlawful discrimination (Equality and Human Rights Commission, 2011). Unfortunately, since the *Equality Act 2010* is not a law, legal action is not taken unless a claim is processed against the service provider, placing responsibility for finding and funding representation required to fight the claim on the person who encountered discrimination (Tyrer, 2012). For a variety of reasons, including time and income, an individual may not wish to proceed with making a claim and feel they are unable to proceed (Tyrer, 2012). In placing responsibility solely on the individual faced with discrimination to take action to

receive justice for the treatment, the perpetuation of disability and inaccessibility exists. The recognition of the need for increased levels of accessibility is apparent with the introduction of stricter requirements; however, other types of policy, such as heritage policy, have a greater influence on the actions of a service provider. In the case of Glamis Castle, a site of historical significance, this influence of other policy on accessibility is recognised in the following sections, and becomes even more complex.

A Story of Heritage Policy in Scotland

The historic environment plays a vital role in the way citizens and decedents of Scotland feel about their country. The historic environment helps create a sense of place, well-being and identity for its citizens and provide distinction among different areas of the country (Historic Scotland, 2009). Taking care to maintain the historic environment preserves its use for future generations (Historic Scotland, 2009). Preservation challenges are faced by owners or maintainers of historic points of interest. Inappropriate changes to the site would decrease the cultural value or diminish its quality (Historic Scotland, 2009). Over time the historic environment adapted and changed as society's view of what is important changed and newer buildings became historic themselves (Historic Scotland, 2009). To maintain the historic environment, important features must be identified and protected or, if possible, enhanced as change occurs (Historic Scotland, 2009).

Features of the historic environment are given designations as scheduled monuments, conservation areas and listed buildings. By designating components of the historic environment, the ability to study the history of Scotland through its environment is maintained, and opportunities are provided to encourage and explore sustainability, community identity, distinctiveness, and regeneration (Historic Scotland, 2009). Interest and

action in conserving and preserving the historic environment in the UK first occurred in 1882 with the introduction of legislation in the form of the *Ancient Monuments Protection Act* (Living Heritage, 2011). In 1947, the *Town and Country Planning Act* introduced the concept of listing buildings considered to have special historical or cultural importance to Scotland (Living Heritage, 2011). UK government is a part of the European Convention on the Protection of the Archaeological Heritage which recognizes a legal system must be in place to protect archaeological heritage (Historic Scotland, 2009). There are currently a number of treaties and conventions that underpin law and regulation in Europe and Scotland to ensure necessary steps are taken to protect the historic environment (Historic Scotland, 2009). With these treaties and conventions, change to the environment has to occur with substantial evidence proving its necessity (Historic Scotland, 2009).

Glamis Castle was given listed building status on July 11, 1971 (Historic Scotland, 2012). Listed buildings in Scotland are divided into categories, Glamis Castle is considered a *Category A* listed building (British Listed Buildings, 2012) meaning it is nationally or internationally important because of its architecture or historical significance, or it is an example of a particular period in time or type of building (Historic Scotland, 2009). A building is defined as any structure or part of a building such as walls and bridges (Historic Scotland, 2009; The Scottish Government, 2010). If a building is listed, the building in its entirety is protected, including the interior and exterior, or anything secondary to the building added before July 1, 1948 (The Scottish Government, 2010).

Along with development of heritage policy, charities were established to preserve the historic environment. In 1895, the National Trust was formed in England, Wales and Northern Ireland as an independent charity to care and conserve heritage and enhance access for

visitation; Scotland established its own National Trust in 1931 (Living Heritage, 2011; The National Trust, 2012). Presently, the National Trust cares for 128 properties in Scotland and is the third largest land owner in the country (The National Trust, 2012). Glamis Castle is not one of these 128 properties, therefore service providers of Glamis Castle are required to find other means of maintaining the site. The National Trust is the leading charity concerned with conservation of the historic environment in Scotland and is dependent on more than 250,000 members to support them through donations, grants and subscriptions to help look after the properties under their care (The National Trust, 2012). With the early recognition of the importance of preserving the past with the implementation of regulations in 1882 and foundations established throughout history to protect the historic environment, preventing change has become an ideal and as a result takes precedence over alterations that could enhance accessibility.

To change or alter a feature of the historic environment, particularly a listed building like Glamis Castle, planning permission must be obtained. Legislation such as *Planning (Listed Buildings and Conservation Areas) (Scotland) Act 1997*, *Town and Country Planning (Scotland) Act 1997*, the *Planning etc (Scotland) Act 2006*, can help service providers determine whether change or alteration can occur at the historic site, and help guide them in creating a proposal to obtain consent (The Scottish Government, 2010). With regards to planning for a historic environment, the principal Act to follow is the *Town and Country Planning (Scotland) Act 1997*, and for listed buildings the *Planning (Listed Buildings and Conservation Areas) (Scotland) Act 1997* (The Scottish Government, 2010). Under these Acts, any alteration that will affect the character of a listed building must obtain consent

before proceeding, if it is not obtained it is considered a criminal offense (Historic Scotland, 2009).

Protection or enhancement of the historic environment is ensured when participation in planning future development and alterations occurs (The Scottish Government, 2010).

Scottish Ministers are committed to the protection and management of historic environments to encourage present and future sustainability and enjoyment (Historic Scotland, 2009).

Scottish Ministers try to encourage good stewardship, provide standards of maintenance of the historic environment, and support service providers and owners by providing necessary information to make educated decisions when planning to alter their service in any way (Historic Scotland, 2009). Any proposed change should be appropriate and maintain conservation of the historic environment (Historic Scotland, 2009). Changes to improve access must also consider how appropriate it is to the character of the environment (Historic Scotland, 2009).

When service providers wish to make alterations to their historic site it is recommended they use the *Scottish Historic Environment Policy* provided by Historic Scotland to guide them in proposal creation and during the consent process. If Glamis Castle wishes to make an alteration to the historic site, they must receive approval from Scottish Ministers before proceeding. The *Scottish Historic Environment Policy* provided by Historic Scotland assists a service provider in obtaining approval. Historic Scotland is looked upon by Scottish Ministers as working in an open, inclusive and transparent way with commercial, charitable, and private owners of historic property to conserve the historic environment and encourage public access for enjoyment and educational experiences (Historic Scotland, 2009). Historic Scotland is expected to work with individuals or groups providing these opportunities to promote

Scotland within and outside the country as a tourist destination (Historic Scotland, 2009). This idea is positive but also conflicting due to the importance placed on historic preservation within heritage policy. *Scottish Historic Environment Policy* indicates everyone should have opportunity to enjoy and appreciate historic environments, but how feasible is this? Everyone may not have the opportunity to experience the historic environment fully. Alterations to the historic environment which would help to promote access for all is a lesser priority to preserving the historic environment from change.

The vision of *Scottish Historic Environment Policy* is that everyone residing in Scotland be provided with resources and opportunity to interact and understand their historic environment (Historic Scotland, 2009). With growing interest in Scotland's historic environment, these opportunities are becoming increasingly important (Historic Scotland, 2009). Scottish Minister's hope to broaden access to historic environments intellectually, physically, and economically (Historic Scotland, 2009). To do this, heritage policy finds itself working with other types of policy to enhance access to historic sites such as education, tourism and equality policy (Historic Scotland, 2009). Although the policy seeks to enhance access it still favours preserving historic assets and the wider environment (Historic Scotland).

When trying to make alterations to a historic site, a service provider must determine whether building consent or planning permission is required. Both have different statutory requirements, are governed by different laws, and serve different purposes (Historic Scotland, 2009). Both consent and permission must be obtained when development as defined in the *Town and Country Planning (Scotland) Act 1997* is carried out (Historic Scotland). Development is defined in the *Town and Country Planning (Scotland) Act 1997* as the carrying out of building, engineering, mining or other operations in, on, over under land, or

the making of any material change in the use of any buildings or other land (1997, Part 3, s.26). The definition does have some exceptions explained within the act. Specifically, consent is required when alterations to a listed building affects the character of the building and when a decision is to be made by a planning authority, there is a preference towards preserving the building or features (The Scottish Government, 2010). However, there are a few exceptions where consent is not required for alteration of a listed building including: alterations to objects or structures at the historic site, but not attached to the listed building, that were built after July 1, 1948; and like-for-like repair of the listed building which does not have a detrimental effect on the buildings character (Historic Scotland, 2009).

Listed buildings are known to be adaptable to the needs of each generation without the character of the building being destroyed; therefore, change can occur while keeping the special interests of the building in mind (Historic Scotland, 2009). Each alteration should be evaluated individually and if permission is granted the service provider should proceed with caution and make alterations with as much education and sensitivity as possible (Historic Scotland, 2009). Overall, Scottish Ministers have the ultimate authority to approve or disapprove any application for alteration they wish (The Scottish Government, 2010).

If management of Glamis Castle decides an alteration is necessary and feasible, they must go through the approval process. Alterations to a listed building must also take the requirements of other policies into account, such as health and safety, and equality; it is the responsibility of whoever submits the application to ensure these requirements are fulfilled (Historic Scotland, 2009). Consent will typically be granted when alteration will help sustain or enhance the building without adversely affecting character (Historic Scotland, 2009).

Within *Scottish Historic Environment Policy* documentation, general guidelines for service providers are given for alterations. The guidelines include:

- ensuring that the proposed alteration is absolutely necessary;
- that proposed alterations will typically evoke opposition and disagreement from some parties, but it is impossible to satisfy the interests of everyone;
- obtaining approval may only be given when the alteration is shown to be the only way of maintaining the listed building;
- costs of making some alterations can be high, so identifying funding sources is important before making the proposal (Historic Scotland, 2009).

Most of Scotland's historic environment is individually owned, owned by small businesses, charities or public bodies. For many owners, funding is not easily accessible (Historic Scotland, 2009). Scottish Minister's attempt to assist projects benefitting the community, helping enhance access to the building or site, and repair and conserve highly important elements of the historic environment as they determine (Historic Environment, 2009).

Although help may be provided by Scottish Minister's, private investment in alterations is the largest source of funding (Historic Scotland, 2010). In addition to finding funding, Scottish Ministers suggest there must be greater awareness and knowledge of the historic environment among all individuals; with increased knowledge better investment decisions will be made and policy making will be improved (Historic Scotland, 2009).

Protecting the historic environment is not necessarily trying to prevent change to the environment. Change that occurs should be done knowledgeably and with the intentions of achieving the optimal outcome of providing an authentic experience for everyone (Historic Scotland, 2009). In accordance to what was important to the society at the time, Glamis Castle has gone through many alterations (McCann, 2008). At the present time, improving accessibility at Glamis Castle could be viewed as adapting to current society. However,

alterations made throughout history to Glamis Castle were generally completed at a time when preservation of the historic environment was not legislated and recognized as a priority. Although protecting the historic environment is the goal of heritage policy, recognition of making the environment accessible is observed when Scottish Ministers decide if planning permission will be granted or not. Scottish Ministers support working with other initiatives to enhance accessibility. They also hope to promote intellectual and physical access for visitors to historic properties by incorporating duties of equality alongside sensitivities of the environment, and they support the National Trust for Scotland to care for historic buildings and landscapes under their supervision (Historic Scotland, 2009). Although intentions to promote accessibility are expressed, the probability of accessibility being enhanced is minimal as there is continual priority placed on historic preservation.

Discussion of heritage policy story

Glamis Castle is a part of the historic environment of which Scotland is proud. The historic environment plays a major role in encouraging tourists from all over the world to come to Scotland. Over the next 10 years the Scottish Government is creating targets to encourage growth in the tourism sector and the historic environment plays a key role in meeting targets (Historic Scotland, 2009). When tourists come to Scotland or even Scottish citizens visit within, they wish to see the history of Scotland, the castles, monuments, battlefields, and landscapes that shaped the country into what it is today (Historic Scotland, 2009). The importance placed on the historic environment by its citizens encourages the maintenance and regeneration within Scottish communities and as a result helps to promote a positive image to potential visitors (Historic Scotland, 2009), therefore preservation of the historic environment is considered more valuable. Workhouses and asylums are also a part of

the historic environment; however, preservation of this history is not a high priority since workhouses and asylums are a point of historical shame in modern history. By failing to preserve a part of history involving the negative treatment of people with disabilities, the goal may be to remove it from collective consciousness. There is collective choice in what is considered valuable to history and what should be preserved. As a result, it may be easier to keep parts of history that Scotland is collectively proud of, such as Glamis Castle, and try to leave what may be embarrassing to fade from memory.

The challenge in making the historic environment accessible to all is making alterations with the least amount of disruption to the environment while substantially improving accessibility. People with disabilities can play a vital role in helping to make this happen, informing a site about what they need and voicing their desires to experience historic environments. While preservation of historic environments remains a priority; alterations deemed necessary may not occur if authenticity of the site is put at risk. As a result, places may still be inaccessible even if there is awareness. If a service provider or owner of a historic building wishes to change or alter an aspect of it, a proposal must be written and consent given.

The word *access* is used throughout heritage policy in a way that makes readers think access is an important issue. Heritage policy is concerned with providing access to the historic environment so all individuals can participate if desired; however, the word *access* is also used in different contexts throughout the policy; most of the time when *access* is used it concerns the importance of making historic environments accessible to the public. Parts of the historic environment are considered private property and therefore the public cannot visit,

therefore heritage policy is mainly concerned with increasing access to the public in this regard.

An example of the different uses of the word access is recognized in section 19 of the *Scottish Historic Environment Policy* which encourages Scottish Ministers to control and regulate access by:

- setting the times of normal public access;
- charging admission;
- excluding the public from all or any part of a monument in the interests of safety or of the maintenance or preservation of the monument;
- prohibiting or regulating any act or thing which would tend to injure or disfigure a monument or to disturb the public in their enjoyment of it;
- refusing admission to anyone where there is reasonable cause to believe they will injure or disfigure a monument or its amenities, or are likely to disturb the public enjoyment of it (Historic Scotland, 2009, p.61).

Therefore, although access does seem to be a focus while reading heritage policy, the majority of the concern is for different types of access, not access for all individuals regardless of ability. If this type of access is not a main priority of heritage policy, a service provider may have difficulty finding the balance between heritage and disability policy. The historic environment plays a vital role in the people of Scotland's lives and is one of the main reasons people choose to visit the country. How can historic environments be truly enjoyed by all if inaccessibility is encountered by many potential visitors? The historic environment is an ever-changing entity, changing with needs and wants of the society of a time. The ever changing historic environment can be seen in the history of Glamis Castle. Glamis Castle did not always look like the castle it is today; the historic site has undergone many additions and alterations over the years depending on the needs of the residents at the time. However, changing historic sites to fit the needs of present society is a difficult task. For example, there is continual tension between maintaining authenticity, obtaining the authority required for

alterations, and the need for accessibility. This is a fairly unique task for service providers of historic environments. Balancing these three directions is especially difficult since the power and authority to determine if alterations are to proceed are held by Scottish Ministers.

Protecting authenticity and considering what is involved to enhance accessibility influences the decision making of those with authority, particularly with regard to listed buildings, conservation areas, and scheduled monuments. This poses a challenge to service providers.

Permission to make alterations may be difficult to obtain depending on the views of the individuals making the final decision. Consent is processed on a situational basis therefore there are no set rules as to whether alteration will be approved. For example, the final decision to allow the addition of a ramp at one particular historic site may be entirely different at another historic site. Decisions made that hinder the implementation of alterations may reinforce the perpetuation of disability and inaccessibility at historic sites. Who and what will be impacted, positively and negatively, has to be considered during the approval process.

For positive change to occur service providers must have a true understanding of effects alterations may have on their site, business, and visitors; without this, service providers may be less willing to put effort in to advocate for alterations. Glamis Castle has started to promote intellectual access by providing audio-visual tours to visitors who are unable to take the castle tour. However, there are many areas at Glamis Castle where physical and intellectual accessibility can be improved which is discussed in more detail in Margaret's story.

Disability Policy, Heritage Policy, and the Provision of Alternatives: The Story of a Balancing Act

As disability policy and heritage policy focus on different issues offering unique challenges to service providers at historic sites to try and balance both enhancing accessibility

while preserving the authenticity of the site. When a service provider tries to find ways to meet requirements of both policies in tandem, a brand new challenge presents itself. The new challenge could bring confusion and frustration with it, possibly deterring a service provider from trying to find the balance. The following is a story about the challenges a service provider may face in adhering to and balancing the requirements of disability and historic preservation policy, possible alternatives for service providers to find ways to adhere to the policies, and the process of making alterations.

Currently in the UK only 11 castles are deemed accessible for people with disabilities; only three of these castles are in Scotland (Good Access Guide, 2012). Unfortunately, Glamis Castle is not a part of this limited list. The three accessible castles in Scotland include Armadale Castle Gardens and Museum in the Isle of Skye, Ballindalloch Castle in Banffshire and Floors Castle in Kelso (Good Access Guide, 2012). Becoming a part of the list of accessible castles requires commitment and motivation from a service provider and resources. Service providers must find a way to enhance accessibility while balancing requirements of both heritage and disability policy.

Service providers are now at a point where the new *Equality Act 2010* and heritage policy are demanding more, and the market of tourists is beginning to change as the number of tourists with disabilities rise. There are currently 11 million people with disabilities living in the UK, which makes up 20% of the population, with the number expected to rise dramatically with the aging population (Hodge, 2011). The Disability Rights Commission indicates that one in four potential tourists either know of someone who has a disability or has a disability themselves (Smith, 2005). If tourists with disabilities are ignored, service providers are discriminating against 25% of their potential visitors. Along with an increasing

need for accessibility, there is increasing importance placed on preserving the past for future generations to provide an authentic experience of history.

The extra challenge of service providers trying to meet the requirements of heritage policy as well as disability policy is that the priority of disability policy is people, not buildings (English Heritage, 2004), whereas heritage policy prioritizes maintaining the authenticity of the historic environment (buildings) over enhancing accessibility (people). Information available to service providers regarding the interaction between disability and heritage policy is mainly focused on the *Disability Discrimination Act 1995*. Discussion of interaction between the *Equality Act 2010* and heritage policy is limited as the *Equality Act* is fairly new.

In the UK, the historic environment is a vital component of tourism as it is one of the main draws to the area (Historic Environment Local Management, 2011). Historic sites provide people with opportunity to learn about and appreciate the past (Historic Environment Local Management, 2011). Authenticity of a historic site is irreplaceable, but alterations can be sensitive to the historic site, as long as what makes the site special or significant is taken into consideration when change to enhance accessibility is necessary or desired (Historic Environment Local Management, 2011). Improving access to historic sites can usually be made without compromising special and significant features through enhancing ones knowledge about the site, understanding what features of it are vulnerable, and what is needed or desired by visitors with disabilities (Historic Environment Local Management, 2011). During the era of the *Disability Discrimination Act* and its protection of discrimination against people with disabilities, service providers were more likely to forego enhancing accessibility the majority of the time since building and planning legislation to maintain authenticity of

historic sites would override *Disability Discrimination Act* requirements of accessibility (English Heritage, 2004). In terms of authority the appropriate approval was required by legislation to improve access and still is to this day (English Heritage, 2004).

Although improving access of historic sites for people with disabilities is possible without compromising what makes the site authentic, this is not a view held by most service providers. There is concern that providing access for people with disabilities at historic sites is unreasonable because it takes away features people wish to retain since they may be destroyed while attempting to provide access (Smith, 2005). This view led to a general presumption in favour of the preservation of historic sites, unless there was a convincing case for the alteration; that is, authenticity was chosen over accessibility if a building was listed, steps are to be taken to ensure inappropriate or insensitive demolition or alteration to the site is prevented inhibiting possible opportunities for increased access (English Heritage, 2004).

An example of accessibility taking precedence over authenticity occurs when a constraint is so severe there is no way around it but access to it is crucial is an instance when making alterations is required by law, but this would also be a very unusual situation (Smith, 2005). This view is slowly changing as more evidence of improving access is made available which will help service providers realize it is possible to make alterations to improve access. For example, English Heritage (2004) produced documents providing alternatives to guide service providers in enhancing access to historic landscapes and buildings. Many see making alterations as ensuring someone using a wheelchair can access the site – this brings the idea of major alterations to the historic environment to mind. The reality is that less than 5% of people with disabilities use a wheelchair, a variety of different disabilities have to be taken

into consideration when deciding on alterations and the majority of alterations to enhance accessibility are typically minor (Hodge, 2011).

The *Equality Act 2010* asks service providers to make reasonable adjustments to enhance accessibility. This was also requested in the *Disability Discrimination Act*. The *Disability Discrimination Act* did not define what was meant by reasonable adjustments, whereas the *Equality Act 2010* gives service providers more direction and other organizations help to increase understanding. The Equality and Human Rights Commission (2011) created a *Code of Practice* for services, public functions and associations. The Code of Practice states a reasonable adjustment depends on the circumstances of a provider and varies in accordance with the type, nature, size, resources of the service, and the effect a disability has on an individual (Equality & Human Rights Commission, 2011). Therefore a reasonable adjustment may not occur if damage to authenticity is possible. Deciding what action is reasonable requires careful consideration and to assess what is appropriate depends on the situation (Hodge, 2011). The *Equality Act 2010* does not require an entire historic site is accessible and only that reasonable steps have been taken to improve accessibility (Hodge, 2011).

Responsibility of complying with disability policy lies with service providers (Smith, 2005). Although the building and landscape does help form part of the service, it is up to providers to find ways to make it as accessible as possible in the hopes that anyone will be able to use a service if they wish to do so (Smith). Before the *Equality Act 2010* was introduced, in 2004, service providers had to comply with Part III of the *Disability Discrimination Act* where reasonable adjustments had to be made when part of the service placed a person with a disability at an unfair disadvantage making it impossible or unreasonably difficult for them to access the service (English Heritage, 2004). Reasonable

adjustments are not only expected to be made for people with disabilities, but for potential visitors bringing young children, or the elderly (English Heritage, 2004). By making these adjustments it is thought of as an anticipatory duty of the provider to anticipate the needs of potential visitors and accommodate them in a variety of ways (English Heritage, 2004). Making reasonable adjustments is not a one-time requirement, it is expected that an assessment of accessibility is continual with adjustments being made as needed; this expectation is a main component of the *Equality Act 2010* (English Heritage, 2004). When the *Disability Discrimination Act* was the main policy to follow it was often considered radical with regards to the requirements placed on service providers to increase accessibility (Smith, 2005). The *Disability Discrimination Act* stated requirements which were not normally required by fire safety legislation, and so providers would view the requirements as unnecessary (Smith, 2005).

Although disability policy does not give service providers much assistance with specifics about how to make improvements, four general options with regard to making adjustments to physical features have been created since the introduction of the *Disability Discrimination Act* (English Heritage, 2004) which include: (1) removing the physical feature all together, (2) making alterations to the feature, (3) providing visitors with a reasonable means of avoiding the feature, or (4) providing alternative service (English Heritage, 2004). Under the *Equality Act 2010*, when service providers cannot make physical adjustments to the historic site they are required to find alternative ways to offer services to visitors who cannot access the attraction (English Heritage, 2004).

Alternatives may be the most feasible way to enhance accessibility at historic sites as physical alterations are difficult and sometimes impossible to do. Providing alternatives could

be done without the creation of a proposal if the alternative does not affect site authenticity. Finding alternatives is a particularly difficult task for service providers of historic sites as the inaccessible castle or landscape itself is the attraction. Separating these features from the visitor to provide an alternative would be inappropriate, or give an experience not considered equivalent (Smith, 2005). Due to the important relationship between the building or landscape and the service, access to the service for as many people possible is a priority (Smith, 2005).

At Glamis Castle, visitors are able to access some areas of the site, and where access is restricted there is an audio-visual room available which provides a video tour of the castle. Service providers who operate a listed building may find that features of the building needing to be altered or removed to improve access are the very features for which the historic building was initially listed (Smith, 2005). The aesthetic importance of a feature to a historic site may make alterations or removal impossible; the alteration of such features may also be very expensive making it almost impossible for service providers to complete (Smith, 2005). The value of a particular feature may also be so great that it should remain untouched for posterity sake (Smith, 2005). The front entrance of Glamis Castle provides an example of a feature that should remain untouched as it is one of the main features of the building and one of the first features visitors see while arriving at the historic site, to alter such a feature will take away from the castle's authenticity.

Although the front entrance to the castle can be used if permission is provided, the main entrance for visitors to Glamis Castle is at the back. This creates an alternative everyone uses and increases accessibility for as many potential visitors as possible without creating separate entrances for people with disabilities which could encourage the perpetuation of disability. If alterations are planned, service providers cannot carry out the duty of making reasonable

adjustments as set out by the *Disability Discrimination Act* or *Equality Act 2010* until planning permission has been obtained (Smith, 2005). Unfortunately, due to this requirement, features being altered that are considered important to the site will still outweigh the duty of disability policy (Smith, 2005).

Altering features of a listed building is commonly viewed as wrong or impossible to complete, but using a listed building as an excuse to avoid making alterations is unacceptable. A listed building or historic site only exists because they have adapted to each new era and so there are few excuses to not make alterations because of the possibility of damaging historic integrity (Smith, 2005). Glamis Castle has undergone many additions and alterations throughout its lifetime. Wings were added to the castle during the 15th, 16th and 17th centuries, with some features being taken away completely and replaced with new buildings around the land (Glamis Castle, 2012). In the mid-18th century the West wing of the castle was demolished and re-constructed at the beginning of the 19th century (Glamis Castle, 2012). The last major alteration was in 1910 with a creation of a garden designed by the parents of the Queen mother's parents (Glamis Castle, 2012). This shows alterations can be made to a historic site with authenticity remaining as long as alterations are sensitive to the significance of the past.

Historic significance is not a valid reason on its own to avoid making alterations to increase accessibility (Smith, 2005). A different way of looking at making alterations to increase accessibility is that the usefulness and interest of a historic site is dependent on its viability in current day (English Heritage, 2004). If increasing the level of accessibility makes a site more viable, alterations to it may be the best decision (English Heritage, 2004). It is important to note most access issues can be improved without compromising the historic site

(English Heritage, 2004). It is rare that absolutely nothing could possibly be done to improve or facilitate access (English Heritage, 2004).

The *Equality Act 2010* brought with it a requirement for service providers to make access statements. These access statements were introduced with the *Disability Discrimination Act*, but are now considered mandatory. Planning legislation has been amended in the UK to include access statements as a requirement when submitting planning or listed building consent applications (Historic Environment Local Management, 2011). An access statement demonstrates that design and refurbishment will address reasonable adjustments as required by disability policy (Historic Scotland, 2009). Within an access statement service providers must include what policy has been adopted, the alternative types of access that have been considered and how relevant local development documents have been taken into account with relation to current disability policy, in this case the *Equality Act 2010* (Historic Environment Local Management, 2011). With regards to historic sites, the statement should show clearly how the approach taken to access will balance the duties of the *Equality Act* and the historical and architectural significance of the building (Historic Environment Local Management, 2011). The access statement is used to demonstrate that every effort has been made to give potential visitors as inclusive an environment as possible; the statements are not produced to justify why there may be lower standards at a particular service (English Heritage, 2004). **An access statement for Glamis Castle could not be found.**

To create an access statement, service providers must go through a number of steps to ensure that the document is completed correctly. Access improvements should not be undertaken until the service provider understands the needs of people with disabilities or other

visitors who may have difficulty accessing the historic site, and options available to meet their needs (Historic Environment Local Management, 2011). The first step to creating an access statement is to conduct an access audit where the barriers to access around the historic site are documented; it is recommended the access audit be completed by professional auditors (Historic Environment Local Management, 2011). The access audit should follow the sequence of a visit, including arrival by a variety of different forms of transportation, entry into the building or landscape, accessing other services available on the site, and how visitors will exit the site (English Heritage, 2004). As the access audit is conducted, a completed conservation assessment should be reviewed or prepared to determine the current architecture or historic significance of the site (Historic Environment Local Management, 2011). Local conservation staff can assist in its completion (Historic Environment Local Management, 2011). After completing the access audit and conservation assessment, an access plan is created. The access plan should be central to any service's commitment to improving access, and is reviewed regularly to keep up to date with changes in regulations and the development of new ideas (English Heritage, 2004; Historic Environment Local Management, 2011). To be useful, access plans must be taken seriously and reinforced by ensuring staff awareness, providing training and having continual support from management (English Heritage, 2004). Both physical and intellectual access of the site should be included in the plan with proposals presented in front of focus groups made up of people with disabilities and members of local access groups (Historic Environment Local Management, 2011). With creation of this plan, alterations to create access can be identified along with necessary avenues to be taken to obtain the authority to proceed with identified alterations.

Costs of implementing the access plan could be an expense that service providers may find difficult to cover, especially since many historic sites are operated privately with many run by families. Presently organizations such as English Heritage, Historic Scotland and Heritage Lottery Fund do not offer specific grants or funding to improve physical and intellectual access of historic sites; funding is only offered for enhancing accessibility when it is a part of a wider project organizations feel important (English Heritage, 2004; Heritage Lottery Fund, 2012; Historic Scotland, 2012). If a service provider cannot financially make alterations, finding alternatives for access has to be considered. The feasibility and need of making alterations and options available to the service provider must be taken into consideration in the creation of an access plan. For example, one criteria of determining the contribution is to evaluate how often the feature is utilized (English Heritage, 2004), like the entry way to the cafeteria at Glamis Castle which is used often, but is difficult for people with disabilities to use, therefore it would be advantageous to enhance its accessibility.

In the process of creating an access plan, service providers may discover a particular physical feature that should be altered, but they could also be informed of other possible alternatives that may be implemented without adversely affecting the quality of the site (English Heritage, 2004). For example, instead of only considering standard solutions to accessibility problems, the access plan should include alternatives such as sympathetic reduction where slight alterations are made to enhance accessibility (English Heritage, 2004). Alterations could include increased training of staff in interacting and assisting tourists with disabilities (English Heritage, 2004). An access plan may help discover ways visitors could avoid the inaccessible feature by changing main visitor areas or providing additional entry options for visitors (English Heritage, 2004).

The majority of the time, alterations can be made in one way or another, but what must always be kept in mind is that the service is what must first become accessible, not the building. If a person encounters physical inaccessibility it does not necessarily mean their experience will be negative. If the attraction offers alternatives, has educated staff, or shows efforts in optimizing the experience for their visitors, a satisfying experience may be the result. Even subtle alterations could make a significant difference to an experience. If a flexible and pragmatic approach is taken to accessibility, suitable access will most likely result without compromising the historic significance of the site (Communities & Local Government, 2012). Increasing accessibility in as many areas as possible helps ensure visitors with a disability will enjoy an experience comparable to that of an able-bodied individual (English Heritage, 2004).

Discussion of balancing disability and heritage policy and alternatives

Heritage policy in Scotland now mentions accessibility as a concern, which shows that access is being taken more seriously. It is now easier to find ways to meet this balance through explanatory documents provided by historic conservation groups such as Historic Scotland and English Heritage.

The information regarding accessibility at Glamis Castle is currently limited and was challenging to locate. Visitors with disabilities are required to search unnecessarily to find the accessibility information they require which should be readily available to them or easy to locate. Limited information regarding accessibility is found on brochures advertising Glamis Castle. The potential visitor is forced to find other ways of obtaining information regarding accessibility, for example, by searching the website, calling the historic site, or searching the internet for other sources of information. The accessibility at Glamis Castle can be improved

through small alterations especially since information is available to service providers to help understand the best ways to increase accessibility, or provide advice on where to look for possible solutions to current barriers. When planning alterations, Glamis Castle must look at the funding available to them and means for the changes that could be incorporated.

Currently it is difficult to see a balance between disability policy and heritage policy at Glamis Castle. The lack of balance is not unique to Glamis Castle when looking at the number of historic sites in Scotland deemed accessible compared to what is available to visit in the country. Among thousands of historic features throughout Scotland, only three castles are considered accessible. Analysis of policies and other related documentation reveals that one of the main causes of this imbalance is a lack of knowledge concerning what needs to be done to increase accessibility and the options available to service providers.

Requirements of the *Disability Discrimination Act* caused a lot of confusion for service providers. The *Disability Discrimination Act* stated certain actions were expected of service providers, but details about how to implement those actions or clarification of the terms used within the policy were not given. For example, in the *Disability Discrimination Act*, service providers were expected to make *reasonable adjustments* but the definition was vague. The new *Equality Act 2010* provides a clearer understanding of *reasonable adjustments*, but could still use more explanation as it is up to the service provider to decide what is ultimately reasonable. With that said, documents are available to help service providers adhere to disability and heritage policy in tandem. Service providers need to be aware of these documents which are free of charge for their use.

Documentation available provides readers with a clearer understanding of what is expected when these two policies come together, gives of examples of alterations that can be

made, but also tends to favour conservation of authenticity at a historic site. If authenticity is challenged, alternative ways of making a service accessible are encouraged. Historic Scotland's *Scottish Historic Environment Policy* is the main resource for service providers, English Heritage's *Easy Access to Historic Buildings* and *Easy Access to Historic Landscapes* can also be useful for people running historic sites in Scotland.

With the *Equality Act 2010* came the expectation of the development of an access plan came with it. Creating an access plan is a lengthy and involved process, resulting in service providers possibly taking a long time to complete or cause delays in commencing its development. Service providers may also be hesitant in creating an access plan as it is a document expected to be updated regularly. As a result, there is worry about the time and cost commitment involved. Glamis Castle has yet to make an access plan available.

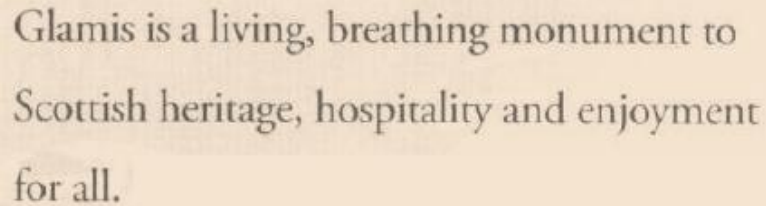
Further, to make alterations, service providers of historic sites could face a number of obstacles to obtain approval which may deter them from persevering or trying to succeed. The *Equality Act 2010* does not demand a historic site is accessible, but to demonstrate attempts to do so. Finding the balance to meet the requirements of disability and heritage policy is a challenge for service providers of historic sites, but it is possible. Alterations or alternatives can be created to enhance accessibility while maintaining authenticity. With every alteration that is or isn't made, a service provider must consider how the alteration may perpetuate disability or inaccessibility. For example, creating a separate entrance for people with disabilities to enhance accessibility may also encourage segregation and discourage inclusion for all if the separate entrance is created solely for use by people with disabilities and is distinctly separated from the main entrance.

Touring Glamis Castle in a Wheelchair: An Experience

The following is a narrative crafted about Margaret, an 84-year-old living in Dundee, Scotland. Margaret was born without a right hand and recently started to experience decreased levels of mobility due to her advanced age. To get around, Margaret finds she has to use a wheelchair when she anticipates leaving her home for day trips or activities that may cause increased levels of physical stress. When she walks around, she notices her legs tire quickly to the point where she feels as if she may collapse if she does not find a place to rest quickly. To increase her comfort level when participating in these excursions, she finds using a wheelchair is necessary to enjoy an experience as fully as possible.

Margaret has lived in the Angus region of Scotland for almost 65 years. Before her husband passed away 10 years ago, she enjoyed visiting historic sites with him on a regular basis; Glamis Castle was her favourite attraction. Margaret thought Glamis Castle was an aesthetically unique castle compared to other historic sites she had seen in Scotland. For many years, Margaret and her husband held season passes at Glamis Castle. It was the birth place of many great memories. Recently, while shopping and dining at a variety of places around her home, she noticed brochures advertising Glamis Castle located at many of the exits.

When perusing a brochure Margaret noticed a brief overview of the family heritage and importance of the castle to Scottish history was provided. The line that piqued Margaret's interest in planning another visit is shown in Figure 1.

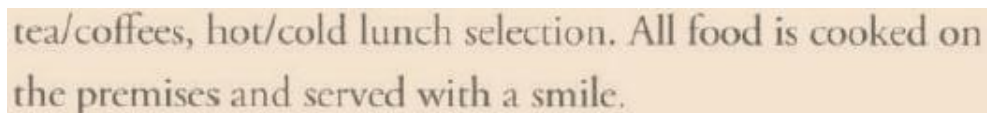


Glamis is a living, breathing monument to Scottish heritage, hospitality and enjoyment for all.

Figure 1. Quote from Glamis Castle visitor brochure describing what the historic site offers (Glamis Castle, 2010b)

The brochure also included information regarding what you can see and do at the historic site, as well as how much it will all cost. To wander the grounds it costs an adult £5.50 (approximately \$8.50 CDN); to both wander the grounds and have a castle tour it costs an adult £9.75 (approximately \$15.00 CDN). Margaret noticed the cost of visiting the castle had increased since the last visit, but thought the price was worth it since she had a strong desire to see the inside of the castle again to relive past memories.

The brochure was written in a way that expresses to visitors that Glamis Castle is a friendly and inviting place. This encouraged Margaret's desire to experience the site again. The friendly and inviting impression came from statements in the brochure (see Figure 2).



tea/coffees, hot/cold lunch selection. All food is cooked on the premises and served with a smile.

Figure 2. Example of promised service at Glamis Castle described in brochure (Glamis Castle, 2010b)

A major concern of Margaret's was whether the historic site was accessible for someone using a wheelchair. When Margaret visited Glamis Castle with her husband, her mobility was not an issue. She had been able to walk for long periods of time without any issues. A major

barrier she now faced was encountering a task involving using both hands, for example, carrying a tray of tea and shortbread in the cafeteria.

Margaret noticed a small amount of accessibility information on the back of the brochure. Symbols were provided indicating accessible parking and access to the grounds for people using a wheelchair, accessible washrooms, places to eat, and audio-visual equipment (see Figure 3).

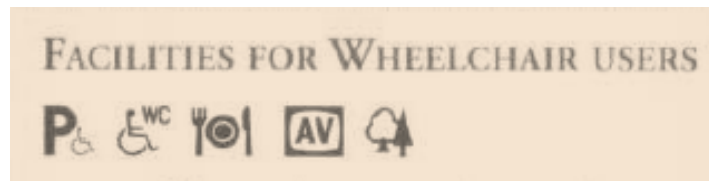


Figure 3. Symbols in brochure describing accessible facilities at Glamis Castle (Glamis Castle, 2010b)

Underneath the symbols, the brochure states that *a tour of the castle may not be possible due to the many stairs* (see Figure 4).

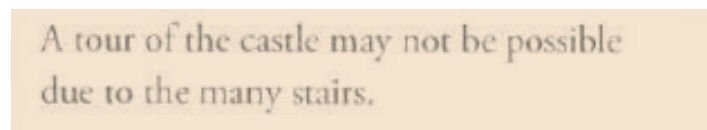
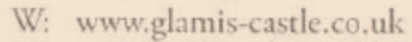


Figure 4. Statement in visitor brochure about possible inaccessibility of Castle tour (Glamis Castle, 2010b)

The possibility of not having the ability to enjoy a tour of the castle worried Margaret as it was the part of the visit she looked forward to the most. From information provided on the brochure, she was not sure whether she would be able to enjoy any part of the castle tour, or if there were alternatives for her if she was unable to participate. Margaret noticed a website address on the brochure which she thought may provide additional information regarding accessibility (see Figure 5).



W: www.glamis-castle.co.uk

Figure 5. Website address displayed in brochure (Glamis Castle, 2010b)

Since Margaret did not have access to the Internet in her home, she asked her niece to look at the website to find information for her. When her niece investigated the website, she tried to find a location where there was accessibility information regarding the castle and grounds, but quickly realized this was going to be a difficult task. There were a few different areas of the website indicated on the menu list of the homepage. The first area on the menu was entitled “Visit Us”, which her niece thought would be the most appropriate place for accessibility information to be located, since there was nothing offered on the homepage. When she clicked on the “Visit Us” link, she arrived at a page where a number of additional menu items to search through were located. When searching additional menu items in the “Visit Us” area, Margaret’s niece was unable to find any information regarding accessibility. Once exhausting the area, her niece returned to the homepage and proceeded to search through other menu categories (see Figure 6). These categories included “What’s On”, “Hospitality”, “Video and Blog”, “History”, “Tickets” and “Shop.” Margaret’s niece was still unable to find the desired information.



Figure 6. The main menu of Glamis Castle’s website (Retrieved January 29, 2012 from www.glamis-castle.co.uk.)

On the brochure and website, a phone number was provided for potential visitors to contact castle staff for further information (see Figure 7). Margaret realised phoning would be

the only way to obtain necessary information about the accessibility of the historic site before travelling to the location.

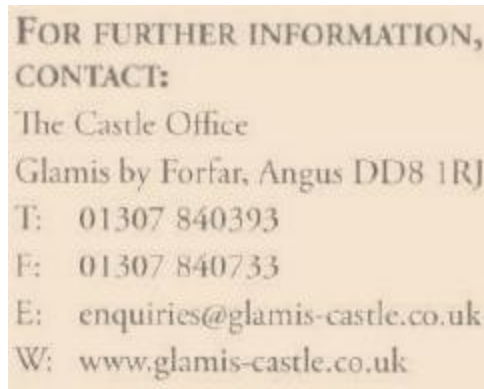


Figure 7. Contact information appearing in visitor brochure (Glamis Castle, 2010b).

Margaret called and asked what someone using a wheelchair may be able to experience during the castle tour. A staff member told her the castle tour begins on the second floor and she had seen people using wheelchairs participating. Margaret was informed that if she was able to make it to the starting point of the tour on the second floor, she could access the first two rooms. After that she will be escorted to a separate room on the main floor of the castle where she could watch a video of the rest of the castle. The first two rooms of the tour consist of the dining room and a small room just off of the dining room that holds the castles old china. (See Figure 8, photo of the second room on the tour, the China Room, is unavailable.)

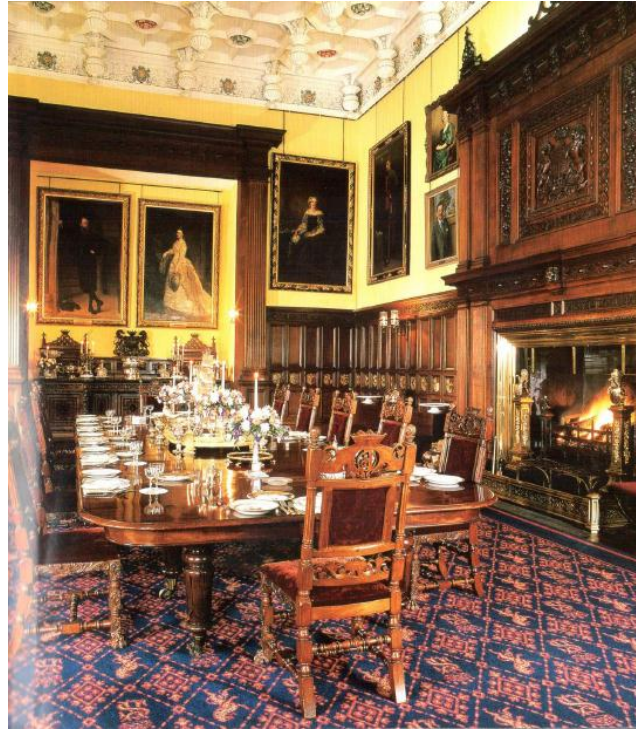


Figure 8. Dining room of Glamis Castle (first room on the castle tour) (McCann, 2008).

Margaret appreciated the information given to her over the phone, but was disappointed knowing she would be unable to tour the whole castle herself. On the other hand, Margaret was pleased to hear Glamis Castle provided alternatives so she could experience the tour in a different way. Margaret decided she still wanted to visit the historic site, and as a result her two nieces helped plan a day trip to Glamis Castle.

The day Margaret and her nieces arrived at Glamis Castle, they noticed the admission sign before entering the historic site included information regarding fares for entry. The sign indicated the cost of exploring the grounds, or touring the castle and grounds. Admission was not available for touring the castle only. Included at the bottom of the sign there was some unexpected information. The sign indicated that free admission was given to people visiting the castle using a wheelchair, which Margaret expressed as a nice surprise.



Figure 9. Admission sign at entrance to Glamis Castle. White arrow indicates information regarding free admission for people using wheelchairs (Barlow, 2011).

Although Margaret did not have to pay admission, her nieces had to pay the full fare. This made Margaret wonder if a carer or support worker assisting a visitor in a wheelchair would have to pay admission as well. Out of general curiosity, she asked the ticket attendant about that particular scenario and was informed carer's were required to pay admission (H. Barlow, personal communication, September 6, 2011).

While in the car at the entry gate, Margaret's nieces paid their admission to tour the castle and grounds and obtained their tickets. Each was provided with a map giving an overview of the historic site and the staff member verbally directed them to the parking area. Signs leading visitors towards the parking area made the lot easy to find. Once the car was parked, Margaret and her nieces could see from the parking space an area of the grounds attached to the lot, divided by a fence, which hosted many Highland cattle. Highland cattle are

one of the main attractions of Glamis Castle and so, Margaret and her nieces took a moment to observe the area before continuing on to discover more of what the castle grounds had to offer.

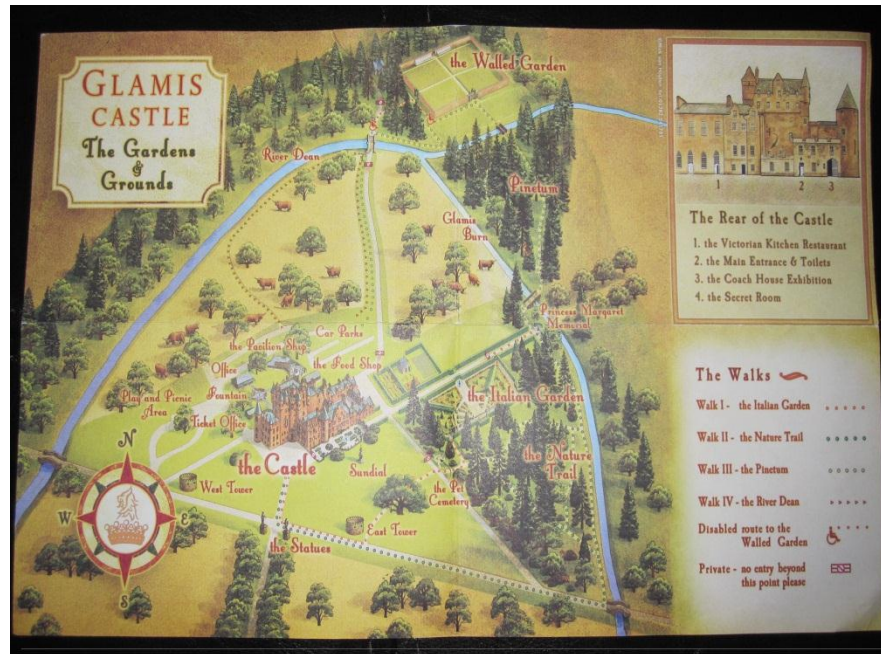


Figure 10. Map of Glamis Castle site (Glamis Castle, 2011).

The grounds were the first area Margaret and her nieces wanted to explore and so they looked at the map to decide where to venture first. On the map multiple paths could be taken; the majority of the grounds looked to be accessible by wheelchair. Margaret and her nieces decided to view the Walled Garden. According to information provided on the map, this garden once housed all the fruit and vegetables for the castle until it was left abandoned (Glamis Castle, 2010b). According to the map, the Walled Garden tour took approximately 35 minutes to complete. To gain access to the Walled Garden, two optional paths are available. One path takes visitors through a wooded area, and the other allows guests to tour along the river Dean. On the map it indicates the former path is accessible for people using a wheelchair, while the latter is only available for able-bodied individuals to travel on.

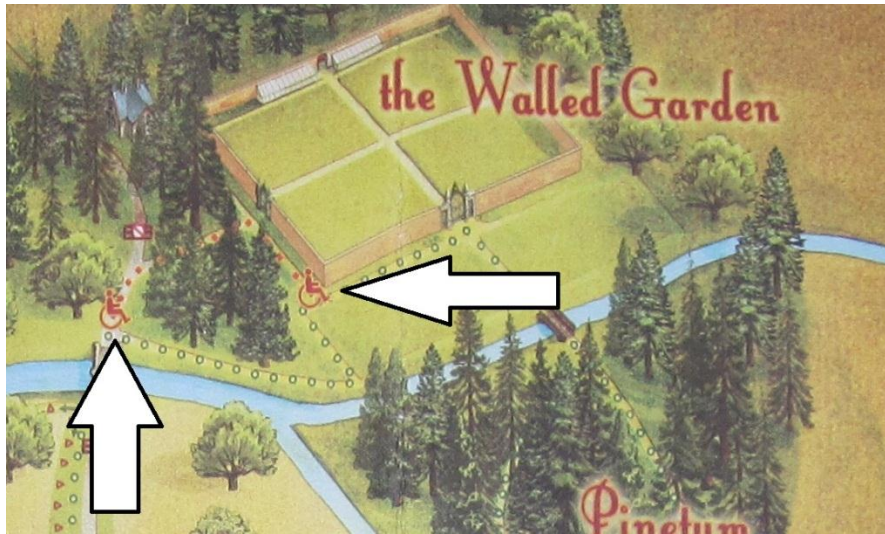


Figure 11. Wheelchair accessible path to the Walled Garden (indicated by arrows). The inaccessible trail that takes visitors along the river Dean is also visible on the map (Glamis Castle, 2011)

The river Dean flows through the grounds and exhibits a variety of Scottish wildlife that visitors may spot as they wander along the path (see Figure 12).



Figure 12. Highland cattle on the castle grounds (Barlow, 2011).

The river Dean is considered a separate walk on the Glamis Castle map, which indicates it takes approximately 15 minutes to complete (Glamis Castle, 2010b). Although Margaret

could appreciate the accessible path is away from the river and could be considered safer to use when in a wheelchair, she did not like feeling the path to her destination was chosen for her. She did not have the freedom to choose which path she would like to take.

After travelling the accessible path Margaret described it as lovely, but at the same time, she wondered what she may have missed travelling the path along the River Dean. Although Margaret did not travel through all of the grounds, she noticed that according to the map, the majority of the paths at the historic site were accessible. However, no other paths on the map indicated wheelchair designated pathways, just the path leading to the Walled Garden.

After touring the grounds, Margaret and her nieces decided to head to the castle for the inside tour. To get to where the tour commenced they were required to go up a set of stairs. To ascend the stairs one of Margaret's nieces pulled her wheelchair up the steps and the other assisted her up the stairs as she did not feel confident in climbing the steps (see Figure 13). The discomfort Margaret felt about going up the set of stairs confirmed she would not be taking the rest of the tour of the castle.

Margaret decided she would rather see the 25 minute video presentation located on the main level of the castle. Before heading to the AV room, Margaret spoke with one of the tour guides to ask what would have been seen if she was able to see the first couple of rooms on the tour. She hoped that the tour guide would provide more detail than what she received over the phone. The tour guide indicated the two accessible rooms are on the same level and provide enough room to move around in a wheelchair to explore the space from different points of view. The tour guide also indicated the rooms she would have seen on the tour are shown in the video.

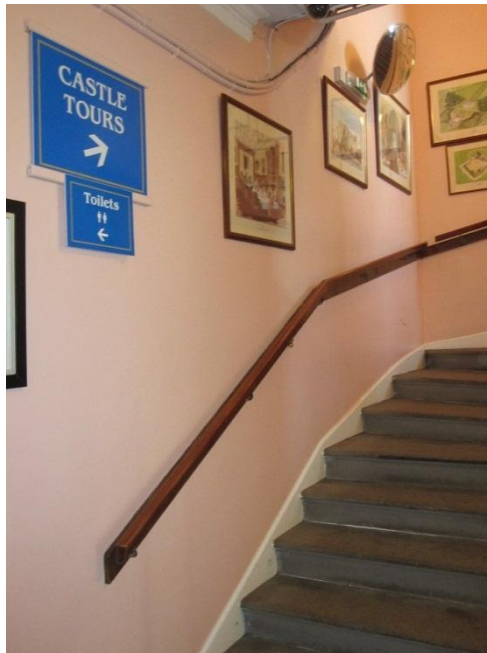


Figure 13. Stairs leading to starting point of castle tour (Barlow, 2011).

After touring the two rooms, Margaret made her way to the audio-visual room. This she discovered was easy to find. The audio-visual room was accessible from inside and outside of the castle. The entrance had a small ramp and Margaret needed assistance from her niece to make her way. There were two small swinging doors at the entrance, one of the doors was propped open but did not allow enough space for a wheelchair to get past. To enter, Margaret's niece held the door open while her other niece assisted her in entering the room. As Margaret entered the medium sized room she saw an open area near the television screen where a couple of wheelchairs could easily be placed. The remainder of the room had three benches to sit on with plenty of room in between each to move around.



Figure 14. Ramp leading to audio-visual room without space for someone in a wheelchair to easily enter on their own (Barlow, 2011).



Figure 15. Audio-visual room where visitors may view a 25 minute presentation of the Glamis Castle tour (Barlow, 2011).

Margaret found the video entertaining, informative and it provided a good representation of other rooms on the castle tour. The video allows visitors unable to physically tour the castle get a sense of the other spaces in the castle. The audio content included background music coupled with a voice-over of a tour guide to take the viewer through the castle. The interpreter told stories similar to the ones Margaret remembered hearing when she toured the castle with her husband. The video tour takes the viewer through the castle and includes panoramic views of the main rooms and stills of the rooms from past and present. The total time of the video was 25 minutes. “This is quicker than the time needed to tour the castle in person”, Margaret commented to her niece. She further described her experience. “Since photos of the rooms are only available for a limited time, I can’t look at different parts of the room as I would want to”, she claimed. “If I were able to take the tour, I could spend more time in each room” Margaret mused. She also commented that she wanted to ask additional questions of the tour guide.

Margaret also had issue with the size of the television screen the video was presented on. She thought it was a bit small and noted, “I couldn’t see the details in the rooms inside the castle.” “What would someone with cataracts or poor eye-sight do?” she wondered. “I am glad I didn’t have to sit in the back of the room!” she exclaimed.

Once the video was complete, Margaret and her nieces decided to get something to eat in the cafeteria. Entering the cafeteria from outside of the castle was a bit of a challenge as there was a slightly raised divider on the ground at the entrance door (see Figure 16). An additional challenge was that the door was not equipped with an automatic door activated with the push of a button. Since no automatic door existed, Margaret required help from her family.



Figure 16. Entrance to cafeteria with slightly raised divider shown (Barlow, 2011).

When inside the cafeteria, Margaret noticed the room was spacious and easy to get around. Approaching the food and cash counters was simple and almost everything was at a reasonable height and reaching distance (see Figure 17).



Figure 17. Image of cafeteria cash and food counter (Barlow, 2011).

If some items were out of reach, staff were more than willing to help. Margaret found their claim in the brochure was true (see Figure 18).

served with a smile.

Figure 18. Quote in brochure
(Glamis Castle, 2010b).

The cafeteria was divided into two separate rooms attached to one another providing visitors a larger sitting area. Unfortunately, access to the additional room required going up 3 steps, making it impossible for Margaret to use that space. Fortunately, Margaret and her nieces were able to find a table in the main cafeteria area. They had a snack of traditional Scottish shortbread and a cup of tea. Afterwards, they decided to go to the gift shop to see if they could pick up some souvenirs. Before doing so, Margaret needed to use the washroom facilities. In the cafeteria, she noticed a sign indicating where visitors could find the washrooms. The washrooms were located through a door down a hall from the cafeteria. The door to the hall was wide so there would be no problem fitting her wheelchair through. Unfortunately, once again, there was no automatic door opener available to enter the hallway. The door was quite heavy for a woman as frail as Margaret and as a result, she asked her nieces for assistance. Once in the hall, Margaret followed the signs to the washroom. When she arrived at a washroom, Margaret became confused because she remembered the brochure indicated accessible toilets, but this washroom seemed highly inaccessible (see Figure 19).



Figure 19. Public washroom entrance from inside.

One of her nieces went into the washroom to see if Margaret would be able to enter with her wheelchair, but found the only way she would be able to use them was to get out of the wheelchair and walk. The entrance to the washroom could not accommodate a wheelchair and there was not enough space to transfer from her wheelchair to the toilet seat while inside the stall (see Figure 20).



Figure 20. View of stalls inside public washroom (Barlow, 2011).

Margaret looked around and wondered if this particular public washroom was the only available facility at the historic site, or if there were any other washrooms more accessible. She noticed a blue sign 20 feet down the hallway and sent her niece to check it out (see Figure 21).



**Reads:
"Disabled Toilets"**

Figure 21. Hallway leading towards accessible washrooms. Sign identifying accessible washrooms on right (Barlow, 2011).

Margaret's niece returned and reported the sign indicated "Disabled Toilet." Thinking about the "Disabled Toilet" sign, Margaret realised that visitors from other countries or individuals who may not have a great understanding of the English language may be confused by how the washroom sign is labelled. Although the label "Disabled Toilet" is commonly found at public services throughout Britain, Margaret often wondered how some visitors may interpret the sign. Whether they would see it as an indication of an accessible washroom, or interpret it as the washroom facilities being currently out of order or unusable, causing unnecessary confusion as a result.

Margaret expressed to her nieces that she wished more signage was available promoting less confusion when approaching the washrooms from the cafeteria. Later, when reviewing the map in more detail she noticed information regarding the location of the accessible facilities was provided on the back of the map – an area she had not looked at in detail during her visit to the historic site. After using the facilities, Margaret continued down the hall towards the same area as the audio-visual room, where a large exit to the grounds is located. She noticed a level pathway she was able to follow to get to the gift shop approximately 50 feet away.



Figure 22. Entrance to gift shop, no automatic door opener (Barlow, 2011).

When Margaret arrived at the gift shop, she saw the entrance doors were wide, but heavy, with no button to push for the doors to automatically open (see Figure 22). She found this very surprising as the building was not considered historic like the castle and grounds. It was a new construction. Margaret commented that the gift shop was a place the historic site could easily make accessible for visitors with disabilities by making alterations without concern about damaging the authenticity of the site. Margaret's niece helped her open the large and heavy door. Once inside, getting around the gift shop was a fairly easy task. There were many things to browse and there was ample room to move around the space (see Figure 23).



Figure 23. View inside gift shop (Barlow, 2011).

While browsing the gift shop, Margaret noticed a set of stairs to the second floor of the gift shop. She realized there was no way she could get up the second floor as there was no elevator or lift in sight. For a modern building, Margaret was shocked to find an inaccessible second floor. She asked her nieces to take a look up the stairs and let her know what else was available. When they were finished looking around the gift shop Margaret took her purchases to the cash desk. The cash desk was not too high, allowing her to see over the desk and sign a receipt when she used her credit card.

Margaret saw a door on the other side of the gift shop leading directly to the parking lot. Since they had looked at everything they wanted to at Glamis Castle, Margaret and her nieces decided to take the door to the parking lot. These doors were wide and heavy and did not have an automatic door to activate. Once again, Margaret required assistance from her nieces to exit the building. The pathway outside of the gift shop was a subtle slope which proved easy to control while descending in her wheelchair without any assistance.

Unfortunately, the parking lot surface was not smooth; the area consisted of stones and dirt, with a few bumps and potholes to navigate along the way. Margaret required the help of her niece to get to the car as it had rained the night before the visit making navigation of a wheelchair difficult with the muddy conditions and puddles surrounding the area. Even if the conditions were dry, Margaret knew she would still need help to manage the rough terrain. The accessible parking spaces were located close to the gift shop entrance, which made it easy for them to get to the car. Once they arrived at the car, there was enough space between the cars for her wheelchair to fit. Margaret got out of her wheelchair at the trunk of the car and took a few steps to the passenger side while her niece loaded the wheelchair into the trunk.

Reflection 1: Connections with people enhances accessibility.

Upon reflection of Margaret's experience with the historic site, she enjoyed her time at Glamis Castle. She recognized there were hiccups along the way in trying to obtain information she needed about the accessibility of Glamis Castle, and in the assistance required to do simple activities once she had arrived. Margaret was pleased to see the Castle staff had made attempts to enhance accessibility for all visitors. Interaction she had with the staff helped to make the visit an enjoyable one.

Staff's enthusiasm about Glamis Castle and their friendly demeanor helped Margaret remember why she enjoyed visiting the site with her husband all those years ago. For example, while in the cafeteria, staff asked if Margaret needed help getting her tea and shortbread, and if she needed assistance carrying it to a table. Even though she did not need this assistance from staff since her nieces were with her, she appreciated the gesture. Although she was unable to get a full tour of the castle, or experience the castle as independently as she desired, staff assistance and effort helped enhance her tolerance of the unexpected barriers she faced during the visit.

Reflection 2: The process of negotiating constraints.

As Margaret further reflected on her experience, she remembered the moments she felt frustrated. When Margaret was trying to find information regarding accessibility, she found it was not readily available on the website or brochures and had to call to ask for the information. The restrictions placed on Margaret's participation at the historic site frustrated her. While at the site she continually encountered moments where her choice was limited in terms of what she was able to do, see, and navigate toward.

When Margaret wanted to tour the Walled Garden, the path to the garden was chosen for her. She was frustrated with this because she wondered what she was missing along the inaccessible path. When Margaret went to tour the inside of the castle, she anticipated she would be able to tour the first two rooms and was excited about the upcoming experience. She did not realize that the ascent of the stairs to access the start of the tour would be so difficult to manage. Information regarding how steep the stairs were was not provided when Margaret spoke with a staff member on the phone.

While watching the video tour in the audio-visual room, Margaret found the television too small to allow the viewer to get a feeling for Glamis Castle. It was hard to see details in the room and it was a difficult to really enjoy and appreciate a room when she was not in control of what she was able to look at, and for how long. As Margaret watched the video knowing what a tour in-person was like (she had the experience when she was more mobile), she found the video did not provide as authentic an experience as she would have desired.

Margaret found aspects of the cafeteria frustrating since opportunities for maximizing independence were minimized. She was not able to enter independently. She did not like that there were two rooms and she was only able to access the one room, although still requiring the assistance of her nieces to be successful. The other eating area would involve going up steps and having someone carry her wheelchair, which she did not have energy to do at the time.

The poor location of signs leading to the accessible washroom was also irritating. Margaret found it easy to get to the inaccessible public washrooms, but she found unnecessary confusion in locating the accessible washrooms. The sign indicating the accessible washroom was quite small and quite far down the hall from the inaccessible washroom she first encountered. The sign could also be misinterpreted to foreign visitors as a washroom that was out of order.

Margaret realized that for the majority of her excursion to the historic site, she needed help of both her nieces. She found this frustrating since she was unable to manage the majority of the excursion without the help of others, minimizing her opportunities for independence. Margaret noted feeling uncomfortable having to rely so much on someone other than herself. This was a common theme of her experience at Glamis Castle.

Reflection 3: Managing the emotion of negotiating constraints.

Upon reflection of Margaret's experience with the historic site, she found the outing exhausting. Not only because she is older and more frail than she used to be when she would visit the castle in the past, but the frustration she experienced throughout her visit played a large role in her exhaustion. The frustration that stemmed from choices being made for her because she used a wheelchair, as well as getting excited about certain aspects of the visit and later finding out that she is unable to participate. Getting excited about something and then being disappointed occurred while trying to take a personal tour and later discovering she was unable to reach the starting point of the tour. Margaret also found the experience exhausting because she had to rely on others more than she had planned to get as full of an experience as possible while at the Glamis Castle. Relying on others is something she is not comfortable with, and when she has to do so, it is very draining. Although she found the trip exhausting, she was still able to enjoy aspects of the experience. The reality of the experience was not what she anticipated or hoped for when she envisioned the visit before arriving at the site.

Reflection 4: New insights into disability.

Upon reflection of Margaret's experience with the historic site, she found it was a great learning experience. When Margaret would visit Glamis Castle in the past with her late husband, the fact that she did not have a right hand had little impact on her experiencing the castle as able-bodied visitors would. The main challenge she had was carrying a tray in the cafeteria. Her most recent visit to the castle helped her see the historic site in a different way. The experience was completely different compared to what she remembered due to her recently acquired mobility issues.

Before Margaret had to use a wheelchair for excursions, noting what was available for people with disabilities at a particular attraction or service was low on her list of things to observe; now it is her main concern. She was pleased to see the historic site made efforts to enhance the accessibility for people with disabilities by providing alternatives. Although she was pleased with this, she also noticed there are still many things that could be done to make a visitor with a disability's experience more accessible through small alterations, such as installing a larger television screen in the AV room or making the doors automatic to encourage independence instead of increasing reliance on others. Larger alternatives could also be made such as making modern buildings fully accessible for people with disabilities.

At Glamis Castle Margaret gained a greater understanding of what was offered for people using a wheelchair. She found herself more attuned to possible needs of people with other types of disabilities, for example, the needs of people with partial visual impairments who wish to watch the video tour in the AV room and difficulties they may face when viewing it on a small screen compared to the size of the room. At the end of Margaret's visit, she felt she could offer advice to friends who may want to visit the site and have similar needs to her own, or have other disabilities that may affect their experience of the castle.

Discussion of Margaret's Story

Three major themes have emerged from Margaret's story of touring Glamis Castle while utilizing a wheelchair and these include maximizing independence, choice and freedom, and the location and labelling of information at the historic site. The location and labelling of information is recognized as a subtheme and is discussed as a part of choice and freedom. The following discusses each of the three themes in more detail.

Maximizing independence.

Tourist attractions that provide opportunities for people with disabilities to maximize independence are appealing to tourists with disabilities. Some people with disabilities may live very structured daily lives requiring the help of others to complete some or all daily tasks (Stilling Blichfeldt & Nicolaisen, 2010). Tourists with a disability will be very loyal and experience higher levels of satisfaction during their visit to an attraction that is accessible, works to help fulfill their needs, and provides a place where independence can be maximized (Burnett & Bender Baker, 2001; Ozturk, Yayli & Yesilta, 2008). Positive experiences also encourage repeat visits to the site and encourage recommendations from the visitor to other potential guests.

Tourism can provide opportunities to redefine one's self, overcome self-doubt and increase levels of independence, self-reliance and confidence (Stilling Blichfeldt & Nicolaisen, 2010). Glamis Castle could provide these opportunities to their visitors by making alterations without damaging the authenticity of the site, and opening doors to independence. Currently, people using wheelchairs or with limited upper body strength will have difficulty opening doors and will need to rely on others to navigate through Glamis Castle. None of the doors at the historic site have automatic door openers to make entry easier. Many of the doors are either heavy (gift shop), very narrow (washroom), or require the visitor to open two small doors while manoeuvring on a ramp to enter a room (audio-visual room). The lack of automatic doors is not only in the castle, but in the modern buildings on the site where damaging authenticity is not a concern as they are not considered historic properties.

Automatic doors are an improvement that can greatly enhance independence for many visitors. Installing an automatic door is not invasive and is a good option for service providers

when doors are features that add to the authenticity of the site (English Heritage, 2004). With automatic doors, accessibility is increased without major alterations or damage. If an automatic door is determined to be too expensive or not feasible, a door bell that could be rung for help may be installed (English Heritage, 2004). The doorbell does not help maximize independence, but does allow an individual to ask for help if or when they need it without having to wait for someone to come by chance. A service provider may also choose to have staff manning difficult doors to offer assistance for everyone when they approach entrances, minimizing the perpetuation of disability and inaccessibility and decreasing the likelihood of a visitor with a disability having to seek assistance (English Heritage, 2004).

The gift shop is an example of a modern building at the attraction. Inside the visitor can browse merchandise available on two levels. Unfortunately no elevator or lift is available to allow people using a wheelchair or who have mobility issues to access the second level. Inaccessibility to the second level forces visitors who cannot travel up the steps to either miss out on the opportunity or rely on others to inform them of what is available on the next level; the reliance on others occurred during Margaret's experience.

The gift shop is an area of the historic site where alterations can be made without damaging authenticity to the building as it is not considered historic in itself. Installing an elevator inside the gift shop so visitors can view merchandise on the second floor is feasible, especially if funds are available. Automatic doors could also be installed to make entry to the gift shop an easy task. For the modern buildings of the site, disability policy should have more of an influence than historic preservation on making alterations or finding alternatives to enhance accessibility.

Unlike building codes in Ontario, service providers in the UK are not liable to civil or criminal procedures and do not have to pay fines if they fail to comply with requirements of the *Building (Scotland) Act 2003* (The Scottish Government, 2011). The *Building (Scotland) Act 2003* states requirements service providers *should* comply with to enhance accessibility (Ministry of Municipal Affairs and Housing, 2012, The Scottish Government, 2011). The *Building (Scotland) Act 2003* states regulations set out by the act are mandatory, but it is up to service providers to choose how; the duty to comply lies with the service provider or owner of the tourist attraction (The Scottish Government, 2011). The act recognizes buildings located near a listed building must implement alterations with care, even if the building requiring alterations is fairly new, like the gift shop at Glamis Castle (The Scottish Government, 2011). With the gift shop in the vicinity of the listed building, the inability to make alterations may be connected to its proximity to the castle.

The parking lot provided accessible spaces close to the main attraction of the site, but the surface of the parking lot made accessibility highly dependent on weather conditions. Much of the parking lot was made up of gravel and dirt, which became increasingly difficult to navigate when wet.

Choice and freedom.

Part of enjoying a leisure experience is having the freedom to choose (Dattilo, 1999), without it leisure does not exist (Haygood, Kew & Braham, 1989). A leisure experience provides opportunities to maintain personal autonomy and choice which are often absent from other aspects of an individual's life (Russell, 2002), this is especially true for people with disabilities. Leisure is concerned with the "capacity to be and develop oneself" (Haygood et

al., 1989, p. 5). The perceived freedom one feels during an experience is one of the key components of leisure (Dattilo, 1999).

Margaret found herself without the luxury of making a choice for a large portion of her experience. Paths were chosen for her, as well as the inability to view the castle personally. Where she could have her snack was also decided for her and she was unable to see the gift shop in its entirety. Margaret continually relied on the people who were with her and she realised her experience would have been even more limited if she did not have her nieces with her.

Improving the availability of accessibility information would also assist in decreasing the perpetuation of disability and inaccessibility. Providing signage around the site to help visitors find their way easily and identify accessible areas is a simple way for service providers to improve accessibility. This is an easy to implement alternative that does not damage the authenticity of the site. Appropriate signage would assist visitors to independently plan and navigate their experience at the attraction, making it easier to locate services such as accessible washrooms. Both interior and exterior signage should complement the historic site. English Heritage (2004) describes that exterior signage should indicate distances to features, the presence of ramps, and how assistance can be obtained if needed. Interior signage should be located in the appropriate position, it should be clear, and visually contrasting (English Heritage, 2004). Increasing access to information is a way to help enhance accessibility through creating alternatives at a historic site.

Increased access to information can be provided through a range of different avenues to give as much information as possible to potential visitors allowing them to plan before arriving at the tourist attraction and to encourage an enjoyable visit by feeling prepared and

having reasonable expectations of what the site has to offer. Information can be provided by leaflet, websites, and ensuring knowledgeable staff are available to answer inquiries, and accessibility information is provided categorically addressing different types of disability (English Heritage, 2004). A service provider could also make an access guide available for potential visitors which includes information on how to plan their visit, how to get to the historic site, what can be accessed within the site, and highlighting restrictions to access (English Heritage, 2004). This is another option in enhancing intellectual accessibility with no damage to the authenticity of the site.

The location of information regarding accessibility and labelling around Glamis Castle, is frequently mentioned throughout the story. To obtain accessibility information before arriving at the historic site, it is apparent the potential visitor has to conduct research of their own. Accessibility information regarding Glamis Castle is not highly accessible, limited information is provided on the brochure and the website does not provide any additional information. Calling the historic site helps obtain general information. By providing a website address on the brochure it indicates to the reader an opportunity to explore what the historic site has to offer in more detail than what is available on the brochure. Unfortunately, accessing the Internet is a luxury every person with a disability or older adult may not have.

People with disabilities are less likely to live in households that have access to the internet, therefore, even if more detail about the site is provided and useful accessibility information is available, many individuals may not be able to obtain it (Office for Disability Issues, 2011). As of 2010, in the U.K., only 58% of people with disabilities had internet available in their households, compared to 84% of able-bodied individuals (Office for Disability Issues, 2011). If a historic site provides accessibility information on their website,

this may still be inaccessible for people with disabilities and may require the potential visitor to seek alternative ways of obtaining the information.

Personal connection to Margaret's story

Writing Margaret's story was a challenge, but one that would have been even more challenging if I was not fortunate enough to have people in my life who could help the story take shape. Margaret's story was written based on a combination of verbal communication and my own personal experiences with two close family members. One of my family members, Helen, was born without a hand and is currently in her mid-eighties, experiencing increased frailty and lack of energy. My other family member, Eleanor, found it increasingly harder to walk as she got older and began to rely on a wheelchair or others to get around while going on day trips or out for extended periods of time. This was an experience she did not enjoy as her independence was an aspect of her she fought hard to hold onto for as long as possible.

I was able to take a trip to Glamis Castle with Helen, where we experienced as much as possible during our visit. This is when I gathered the majority of my experiential data, asking Helen questions during our visit and observing her as we participated in the variety of activities the site had to offer. I noted what she enjoyed, what she found challenging, frustrating, confusing or what she told me she was feeling at a particular time. We visited the gardens, toured the castle and gift shop, and enjoyed what the cafeteria had to offer. Helen was able to take a tour of the castle, but found the tour to be very tiring and would have preferred if it was shorter, or to only tour a portion of the castle and watch the video of the tour in the audio-visual room.

Throughout our visit to the castle, I was constantly attuned to what someone in a wheelchair may experience while they were there. Unfortunately, I was unable to take a personal tour of Glamis Castle with Eleanor who would have used a wheelchair during her experience since she passed away during the research process. I took my experiences with her using a wheelchair before she passed away, along with what she expressed to me about her personal experiences getting around in a wheelchair or relying on others to participate in activities. This knowledge helped me greatly while touring Glamis Castle with Helen, providing me with a more realistic view of what someone in a wheelchair may experience while at Glamis Castle. I gathered additional information about wheelchair accessibility to fill in the gaps in my story while I was at the castle by chatting with a tour guide and asking questions of administrative staff following my visit. With this collected information, I was able to develop Margaret's story in combination with my personal experiences, research, and past education.

What it means for me as an able-bodied individual to write this narrative

Although my experiences with short-term disability and past education piques my interest in conducting this research, it is hard for me to fully grasp how people with disabilities feel and everything they encounter when visiting a tourist attraction that may be partially or fully inaccessible. To write Margaret's narrative, I blended knowledge gained through my education, research, personal experiences with disability, and stories told by people who have a disability participating in the actual experience or discussing troubles they encountered in the past while using a wheelchair. With the variety of information sources used to conduct this narrative, I hope I have reflected a possible experience of Glamis Castle for a person using a wheelchair during their visit.

Chapter 5: Conclusions

The four narratives produced demonstrate the gap between the requirements of disability policy and heritage preservation, and individual experience at heritage sites. Through the narratives we see the forces of the economics of tourism, historic preservation, and inclusion for people with disabilities coming together. The narratives helped to create a number of dominant stories, counter-stories, non-stories and a metanarrative which provide a glimpse into the current perpetuation of disability and accessibility at Glamis Caste.

A Story of Striving for Equality Through Disability Policy

The *Disability Discrimination Act* and the *Equality Act* were created to encourage equality among all individuals in society, regardless of their ability. The *Equality Act* strives to provide protection for anyone who encounters discrimination, victimization or harassment as a result of a protected characteristic. Incidentally, each of us possesses at least one of these characteristics or will do so at some point our lives. For many years in the UK, people with disabilities were segregated and experienced discriminated. In recent history, action has been taken through the introduction of disability policy to enhance equality. However, protection for people with disabilities has been limited to specific areas such as the workplace which was the only area of protection within the *Disability Discrimination Act* for 10 years. It was not until 6 years ago that protection against discrimination was expanded to include goods and services. With the introduction of the *Equality Act* in 2010, protection against discrimination has expanded into more areas, includes different types of discrimination, and incorporates broader definitions of victimization and harassment.

A Counter-Story About the Limits to Achieving Equality of Access

Although policy to enhance equality is a rather recent phenomenon, the evolution of disability policy in the UK makes it easier for individuals who experience discrimination, victimization or harassment to make a claim. While disability policy in the UK recognizes the need for equality and increasing accessibility to encourage universal design; however, it remains weak in its implementation since no local or national government action is taken for those who do not follow its requirements. Unlike the *Accessibility for Ontarians with Disabilities Act*, there are no consequences or penalties imposed by the local or national government for those who fail to comply with the Act. Therefore it is up to the individual who encountered the discrimination to make a claim. When a claim is made, each case is considered on an individual basis. This raises the question of how important is equality in society if it is not enforced by law? Furthermore, the responsibility is placed on the service provider to interpret the policy, meet requirements, and ensure reasonable adjustments are made. The *Equality Act* has implemented *mandatory* requirements of service providers, including Glamis Castle, to create an access statement. However, although stated as mandatory, there are no consequences in place for those who do not complete one.

While disability studies in the UK set many standards for critiquing policy and exploring the social construction of disability, a number of organizations and groups in the UK exist to actively enhance equality and provide services for people with disabilities, it was surprising to see that disability policy does not have more teeth. This lies in contrast to stated legal enforcement in the policy documents such as the *Accessibility for Ontarians with Disabilities Act* in Ontario, Canada. Further, funding in the UK for enhancing accessibility is also minimal to not existent from external sources. Funding is up to the service provider,

mostly private owners in the case of historic sites, to make necessary alterations or create alternatives.

A Counter-Story of the Lack of Creativity in Local-Level Changes for Accessibility

Enhancing accessibility is recognized as a key component to increasing levels of equality and inclusion within disability policy and literature however, through my research, it is not deemed a necessity or a priority of service providers at historic sites. Although attempts have been made to enhance accessibility at Glamis Castle through the creation of a video tour, effective simple alternatives that may not require the attainment of planning permission from Scottish Ministers, such as automatic door openers, have not been implemented. This raises the question of whether enhancing accessibility is or is not important? Or is the limited implementation of alternatives a result of the lack of awareness among service providers due the limited opportunities currently available to gain knowledge regarding what can be done to enhance accessibility, or understand the importance to do so? Disability policy may encourage the enhancement of accessibility through the requirements, however, the lack of implementation of alterations and alternatives to do so speaks louder to the importance currently place on accessibility.

A Story of the Importance Placed on Preserving the Past

Heritage policy in the UK stresses the importance of preserving the past. The historic environment of Scotland is one of the main enticing features for tourists coming to and residing in the country. Scotland prides itself on its highlights of history and by preserving elements of that history for the future is a priority. The history Scotland takes pride in is has a major influence on Scottish nationalism as well as their cultural legacy, as a result, holding onto what is thought to be important examples of this history is preserved.

Legislation restricting the ability to destruct or alter the historic environment has been in place for over 140 years. The importance of maintaining and preserving historic environments has continued to grow stronger in the UK and greatly influences cultural views on what is interpreted as authentic and worthy of preservation to maintain Scotland's cultural legacy and nationalism. A goal has been set in place by Tourism Scotland to increase the number of tourists to the country over the next 10 years; the historic environment plays a key role in meeting their targets as one of the main draws to the country is this environment. Due to the key role the environment plays, the importance placed on the preservation of the historic environment is greater as the belief is preservation equals authenticity for the tourist.

Not long after legislation was introduced, the importance of historic preservation was reinforced with the development of groups such as the National Trust helping to preserve the historic environment. With the emergence of designations such as listed buildings, conservations areas and scheduled monuments, groups like the National Trust began to take some responsibility over protecting a number of sites or areas with these designations through ownership and funding.

The requirements of heritage policy are well thought out and defined with regards to historic preservation. The importance of historic preservation is recognized through well-defined requirements, the strict approval process one must go through to make alterations, and monetary and legal punishments for failing to follow the requirements set in place.

The importance of preserving the past is also revealed in the funding provided to preserve the historic environment compared to the funding given to enhance equality. Many established groups protecting the historic environment and hoping to promote utilization by potential tourists and residents give funding to projects that promote preservation, but locating

funding for equality enhancement is more difficult to secure. This greatly demonstrates where the collective importance is placed within the country.

A Counter-Story of the Connection to Economic Generation

Tourism is an important economic force in Scotland, if preservation is recognized as a key component to entice tourists resulting in increased revenues and economic growth, preservation will take precedence and alterations that are considered a risk to this preservation will not be implemented. Strict parameters and legislative protection for the historic environment has been put in place with severe repercussions.

The main players influencing the importance placed on preservation by UK society is money, those creating policy and those enforcing it. Since the historic environment plays a major role in the economic growth of Scotland by enticing tourists to come to the country, preservation is thought to maintain what potential visitors see as authentic and to continue to attract tourists in the future, they must hold onto the past.

A Counter-story About Who Holds the Power to Create Change

When we explore who hold the power to create change distinct inequities are revealed. Scottish Ministers and local government ensure that historic preservation is a priority, and alterations to improve accessibility but feared to negatively change the historic site will be denied. Service providers who wish to make alterations or create alternative to enhance accessibility, may feel discouraged due to the amount of work involved in creating a proposal to obtain planning permission with the understanding of the importance placed on historic preservation by the players who have the power to decide whether accessibility enhancement takes place.

In contrast, requirements of the *Equality Act* places more responsibility on service providers to enhance accessibility and eliminate discrimination. Support from local and national government is minimal in terms of legal and financial repercussions. Further, the policy is not enforceable by law to the same degree as heritage policy. Therefore, discrimination can still persist. Further, raising claims to discrimination are placed on the shoulders of individuals with disabilities. Individuals who have faced discrimination and as a result may already feel powerless are required to take action into their own hands and make a claim.

A Non-story About the Impact on the Meaningfulness of an Individual's Experience

What is left out of this policy discussion is the experience of individuals with disabilities visiting heritage sites such as Glamis Castle, and specifically, opportunities for leisure experiences that offer freedom of choice and independence. To participate in leisure, we know people must have the freedom to choose what they do. During Margaret's experience, choice was limited due to the inaccessibility faced when utilizing a wheelchair at the castle. Margaret had to heavily rely on others, was unable to access and view areas of the site, and alternative arrangements were at times poorly crafted. For example, tourists who are unable to personally tour the castle can watch a video tour in the audio visual room available; however the video screen was small and did not afford self-guided exploration (the viewer was limited to the timing and pace with which the video camera panned). Further, during a castle tour questions can easily be asked of the tour guide if there is an aspect of the tour that interests the visitor. Watching the video does not allow these opportunities.

A Non-story of Who Decides what is Preserved of Scotland's History, and How?

We see the importance placed on preserving the past and maintaining the authenticity of the historic environment through the regulations and requirements of heritage policy however, the parts of history maintained are mostly the parts of history that make Scotland proud. We do not see a focus on preserving parts of history that may tarnish the image of Scottish culture, such as maintain workhouses and asylums in which people with disabilities were placed. By removing negative components of Scottish history, they are also removed from the collective conscious.

Further, who defines authenticity in what is being preserved? As discussed earlier, authenticity is a subjective concept and everyone has their own interpretation of what is authentic (Cohen, 1988). Throughout the past significant structural renovations have been to Glamis Castle in keeping with the design features and needs of the time period in which those changes were made. In other words, they are authentic to that time period.

The Metanarrative

This policy discussion is often set up as a question of balancing heritage preservation and accessibility but this keeps us in a static position on this issue. This narrative case study instead reveals the tensions and pressures at work, which have resulted in a lack of movement and silence on this issue. With the preservation of the historic environment taking precedence over the enhancement of accessibility, the perpetuation of inaccessibility and disability continues. Without recognition of this followed by struggle and action, and some hard choices and more flexible definitions of authenticity opportunities for all to experience tourist attractions will remain limited and continue to construct disability and perpetuate inaccessibility. There is need to re-think heritage sites as living, breathing landmarks of the

past, of which our understanding changes as the landscape and social conditions around it shift.

Huge inequities between the two policy realms exist that maintains the dominance of heritage policy. First, in comparison to heritage policy, disability policy is a more recent development entering the policy arena almost a century later. Heritage policy has existed for over 140 years and as the years have gone by, the importance of preserving the historic environment has continued to strengthen with the implementation of stricter legislation. In comparison, disability policy promoting equality for all is a relatively recent phenomenon in comparison. The first form of disability policy was introduced in 1970, with the importance of equality and providing protection against discrimination in relation to the workplace, as well as the utilization of goods and services, only recognized in policy since 2006.

Second, there is a significant discrepancy in the enforcement of standards related to each policy. Government will take action in the event that heritage policy is violated, however people who encounter violations to disability policy are responsible to take their own action in the form of making a claim; there are no legal or financial repercussions in place to reprimand those who fail to meet the requirements of disability policy, therefore the requirements are not enforced.

At the heart of this tension and struggle, without knowing how to turn to create change, actors may fall into silence. While there could have been a number of reasons why potential participants chose not to participate in this study, some plausible interpretations of their silence can be made. Discussing an issue that one may not be knowledgeable about may be embarrassing, or they may feel as if due to their lack of knowledge, they are unable to add anything of importance to an interview. There may also be embarrassment if the service

provider recognizes that their historic site is inaccessible and that alterations or alternatives could be implemented, but for different reasons have not taken action to enhance accessibility, therefore they may have been avoiding the discussion altogether.

The end result is that through the perpetuation of inaccessibility, the social construction of disability continues in historic sites. With the refusal to make alterations or create alternatives to enhance accessibility, the service can become disabling to the potential tourist. For example, a visitor who is frail may not encounter high levels of difficulty opening doors in their own home, or while using automatic door openers while out in public, may find the heavy doors or the failure to install automatic door openers at Glamis Castle disabling to them. This continues to reinforce definitions of disability which place the disability in the individual and requires the individual to fit into society (Kaufman-Scarborough & Baker, 2005). However, the inaccessibility found at historic sites is an example of the effects society has on creating disability.

This imposition of a rigid concept of authenticity is a policy choice that is being made. However, authenticity is considered a negotiable concept (Cohen, 1988); therefore accessibility enhancements can be implemented at historic sites without damaging what is considered authentic. Denying alterations to enhance accessibility for fear of damaging authenticity is unnecessary, therefore disability is influenced by society and the built environment. Cohen suggests the majority of tourists only seek a small taste of what society considers authentic as their concept of what is authentic is vague compared to what is conceptualized by experts of the area. As a result, we may conclude that alterations to enhance accessibility will not hinder the majority of tourists' concepts of authenticity.

Choice greatly influences the enhancement of accessibility. Conscious choices are made in the creation of policy, as well as by government and service providers as to what will represent Scottish history, what will be preserved and what will disappear. The history of Scotland is very important to Scottish nationalism and cultural legacy however, there is a tendency to preserve the parts of history that the country is proud of. Through the choices made as to what is important to keep for future generation's enjoyment and what to eliminate, it is hard to imagine a tourist or resident of Scotland receiving an authentic experience of Scotland's history. As choices are made, they also shape the image of Scotland as constructing disability as they attempt to preserve the past.

Recasting the Issue

Roe's final step of narrative policy analysis is to recast the policy issue. I will do this by offering a few recommendations to service providers. Change can occur in management practices at the local level and significantly disrupt the continued construction of disability and inaccessibility. Steps to enhance accessibility can be taken to bring about change for visitors with disabilities to historic sites and benefit many others in the process. A major barrier to enhancing accessibility is a lack of awareness of the importance of accessibility, therefore, providing opportunities for education regarding tourists with disabilities, creating a meaningful experience, and understanding authenticity can help encourage a balance between heritage and disability policy. Through education, action among service providers to find ways to enhance accessibility may be encouraged.

Enhancing accessibility can start with the training of staff to know how to interact with visitors with disabilities and as a result help encourage a positive experience. Accessibility can also be enhanced by providing information for potential tourists that is easy to find and

understand for all visitors. The information regarding accessibility may not only benefit tourists with disabilities, but other tourists as well. Specifically, with regards to Glamis Castle, some recommendations to start enhancing accessibility include the installation of automatic door openers, a lift in the gift shop so the entire building can be explored, and an improvement of the audio-visual room to make it more interactive for visitors with disabilities. This can be done by installing a larger television screen, possibly provide the visitor with control of the video so they can pause or zoom in on images of the castle. Objects or replicas from the castle could be on display so visitors are provided with examples from the castle. These are only a few suggestions to enhance accessibility, but they can help to create a meaningful experience.

As service providers continue to think about changes for accessibility they can also be considering a more flexible notion of authenticity of a heritage site as a living, breathing landmark of the past of which our understanding changes as the landscape and social conditions around it changes.

Methodological, Theoretical, and Practical Implications

The major methodological implication of this study is that the use of a narrative case study contributes to the analysis of the interaction between heritage and disability policy and its impact on historic tourism sites by implementing a methodology that has not been widely used in leisure and policy research. Although research exists focusing on the interaction between these two policies, I was unable to find research utilizing narrative case study, particularly with regards to research of disability and heritage policy in the UK. Narratives are optimal in understanding human experiences since it is the way in which humans typically understand their own lives (Richardson, 1990), as well as in relation to others (Glover, 2004).

Narratives allow individuals, groups or society as a whole to explain experiences in a temporal manner and help to link the past, present and future (Richardson). People make sense of their world through narratives (Richardson). Communicating my findings through stories may enhance the reader's connection to the material.

These narratives also help to theorize about accessibility in heritage tourism sites. Narratives demonstrate the goals and intentions of individuals involved, allows us to reflect on actions we have taken and start to look at how we can alter or improve the results of these actions (Richardson, 1990). This narrative case study gives a glimpse into current disability and heritage policy in the UK and how they influence accessibility, what is considered important to those creating policy, and allows us to identify possible improvements to accessibility. Through stories a detailed look at the current views of the government and service providers with regards to accessibility and heritage in the UK is provided.

Stories provide an opportunity to look at heritage and disability policy and its influence on historic sites from a different perspective compared to what may be seen through the use of other research methods. The stories may also help in the understanding of challenges a service provider of a historic site may face when trying to enhance accessibility. A narrative can be considered a mode of reasoning, representation or argument, helping to highlight the significance of decisions and choices made, and how they affect what is witnessed today (Glover, 2004; Richardson, 1990). A narrative allowed me as a researcher to be a key component in the findings; I was not separated from the information I gathered to maintain objectivity, but rather was connected to my research throughout the entire process (Reid & Robertson, 2005). Stories I created through the information gathered and personal experiences were unique and could change depending on a different individual researching the same

subject. Narrative case study is greatly influenced by the understandings and beliefs of the researcher, whereas many other forms of research encourage the separation of researcher and participant or material.

Practical implications arise from this study in different ways. The narrative case study looked at where the UK currently is with regards to accessibility at historic sites and how the new *Equality Act 2010* requirements influence accessibility. The study allowed a comparison of the *Disability Discrimination Act* and the *Equality Act 2010* with regards to the components of each act that influence a historic site open to tourists. Narrative case study is a method to research policy in a way that has not been widely implemented; therefore new understandings of the interaction of policy can be discovered due to different viewpoints.

Through the research, a report will be created to provide Glamis Castle and other historic sites a document to refer to that helps them to navigate four layers in understanding how to navigate accessibility. The report will provide ideas for simple alternatives or alterations that can be made at a low cost, and provide more information on what makes a historic tourist site accessible. It is also hoped that through this report, a snapshot of accessibility and disability at Glamis Castle will be given. Specific suggestions for alterations and alternatives are mentioned throughout the findings chapter. For example, the installation of automatic doors or the increased use of signage. Significant practical implications emerged from this narrative policy analysis. First, the research has shown there is a greater need for increased opportunities for education and awareness of the need for accessibility and the various ways it can be enhanced. The greater awareness of service providers, policy makers and society as a whole is the key component to successfully enhancing accessibility for all. Education is a key component to improving accessibility. The need for increased levels of

education among service providers and their staff as well as policy makers and those who have authority to approve alterations is apparent. Throughout the analysis, education is mentioned as a suggestion, but as I delved deeper into understanding documentation available and what it meant for physical accessibility at Glamis Castle, it became increasingly clear education was a key component in enhancing accessibility at historic sites and developing a historic environment that is inclusive to all. A service provider's understanding of disability could greatly influence what is viewed as accessible, possibly encouraging the perpetuation of disability and inaccessibility. To increase opportunities for education, appropriate learning materials that are easy to use must be created and distributed to service providers of historic sites. One way to increase awareness through education is requiring service providers to take online training courses in providing services to people with disabilities. Perhaps sharing stories like Margaret's will help to provide the level of insight required to make a site more accessible.

The findings also address areas where disability and heritage policy lack in terms of a service provider attempting to adhere to the standards set out by both types of policy, and where interaction between the two could be improved. This information could be helpful to policy makers when reviewing documentation and making revisions to policy. When interactions between the two types of policies were observed, areas for improvement were recognized. Policies have to become user-friendly and cater to service providers so that implementation of requirements is done so correctly. Documentation discussing the interactions between the policies would assist in decreasing service provider's confusion and may encourage steps to enhance accessibility to be taken.

Limitations of Study

The study was limited to disability and heritage policy as it pertains to the UK, with a particular focus on policy concerning service providers of historic sites in Scotland. The study was conducted at one case study site, Glamis Castle. There are numerous historic sites in Scotland and the UK as a whole, therefore, the results of this study cannot be generalized and taken as true to all historic sites in the UK, and more specifically, Scotland. However, the disability and heritage policies studied in this narrative case study influence the majority of historic sites in Scotland, with a large amount of the policy influencing sites in the UK as a whole. Requirements of each type of policy concern historic sites open to tourists all over Scotland and the UK, therefore the findings are relatable to other historic sites, or could be used as a starting point at different case study sites.

The timeline at the case study site and conducting research acted as a great limitation to this study. The introduction of the *Equality Act 2010* in the UK occurred during the research process, creating new standards influencing historic sites in ways not yet fully understood. As a result, information gathered and analyzed in this study focuses both on the *Disability Discrimination Act* and the new *Equality Act 2010*. The length of time available to conduct research at the case study site was limited due to financial restrictions, inability to access the site due to weather conditions, or inability to contact potential participants during my stay due to delays in ethics clearance.

The main limitation to this study was the inability to obtain willing participants to conduct key informant interviews. Finding participants proved to be an impossible task, and I believe was made especially difficult due to the majority of the study taking place in a different country. The distance may have made it easier for potential participants to ignore my

requests for interviews since I was someone they had not met face to face and I also lived in a different country. Potential participants may also have felt uncomfortable with the research topic and chose to avoid an interview. I believe that having the opportunity to speak to people during my study could have offered different insights and experiences that could have added or possibly changed the outcome of my research.

Suggestions for Future Research

This narrative case study explored the confluences of three power contexts: the economics of tourism, historic preservation, and inclusion for people with disabilities. The study explored the interaction between disability and heritage policy and how it influences the service providers' ability or willingness to increase accessibility at historic sites. How inaccessibility and disability are perpetuated at the historic site is only the tip of the iceberg. Researching disability and heritage policy at historic sites through narrative case study could be completed in other parts of the world to gain a greater understanding of where each country is at with regards to increasing accessibility at historic sites. Also, obtaining participants willing to participate in this type of study will also provide a different perspective to the research. For this study I had hoped to talk to management, but I believe that additional valuable information could be collected through interviews with other staff members; staff who may interact with tourists with disabilities more regularly than management. Interviewing people with disabilities visiting or wanting to visit historic sites would provide an entirely different perspective on how disability and inaccessibility are currently perpetuated at historic sites.

It may be interesting to study the current training conducted with staff at multiple historic tourists sites to gain a greater understanding of how much training is received, how

effective the training is, and to identify areas of improvement. Training staff is only one component of enhancing accessibility, therefore studying the implementation of disability and heritage policy requirements in the form of a long term narrative case study could provide a different picture of the struggles encountered when trying to enhance accessibility over the long term. A long term narrative case study could also investigate the maintenance of accessibility at historic sites.

Overall, this study is only a stepping stone to what can be discovered about the influence of disability and heritage policy on accessibility at historic sites, the current perpetuation of accessibility and disability at historic sites, and the tensions of authority, accessibility, and authenticity at historic sites. This study could be taken in different directions to research different areas or discover new stories from alternative perspectives. This study could also be conducted the exactly same way, with the same questions and yield different insights. It could also be completed at a different historic tourist site, or multiple sites which may produce different results by the same or different researcher.

A Final Thought

As has been stressed throughout this thesis, the need for accessibility at tourist attractions is becoming ever more important with the aging population and the increased number of people living longer with a disability. Providing increased accessibility at historic tourist attractions in Scotland is particularly important as these sites are one of the main tourist draws to the country. Unfortunately, service providers currently encounter difficulty in finding ways to maintain authenticity of a site while providing physical access needs of tourists with disabilities, but as shown through the findings of this study it is not an

impossible task. There is a continual battle between accessibility, maintaining authenticity of a historic site, and obtaining the authority to enhance accessibility.

Providing more opportunities for education regarding the need for accessibility and possible ways to enhance accessibility to service providers, staff and the public is essential to create of an inclusive world for all tourists, regardless of ability. There is also a need for easy to follow policies or materials available to service providers to help find ways of enhancing accessibility while balancing disability and heritage policy. I hope service providers begin to gain a greater understanding of the need to increase accessibility at their attractions and that little steps taken to improve access could mean the world of difference to a potential visitor. Everyone has the right to enjoy a tourism experience to the fullest – denying people of this right continues to be a form of discrimination.

References

- Advisory, Conciliation & Arbitration Service. (n.d.). *Equality*. Retrieved from:
www.acas.org.uk/index.aspx?articleid=1363
- Aitchinson, C. (2003). From leisure and disability to disability leisure: Developing data, definitions and discourses. *Disability and Society*, 18(7), 955-969.
- Altman, B. M. (2001). Disability Definitions, Models, Classification Schemes, and Applications. In G. L. Albrecht, K. D. Seelman & M. Bury (Eds.), *Handbook of Disability Studies* (pp. 97-122). Thousand Oaks, CA: Sage Publications.
- Angel, S., Kirkevold, M., & Pederson, B. D. (2009). Rehabilitation as a fight: A narrative case study for the first year after a spinal cord injury. *International Journal of Qualitative Studies on Health and Well-being*, 4(1), 28-38.
- Arvay, M. J. (2003). Doing reflexivity: A collaborative narrative approach. In L. Finlay & B. Gough (Eds.), *Reflexivity: A Practical Guide for Researchers in Health and Social Sciences* (pp. 163-175). Oxford, UK: Blackwell Science Ltd.
- Bach, M. (2005). Social inclusion as solidarity: Re-thinking the child rights agenda. In T. Richmond, & A. Saloojee (Ed.). *Social Inclusion: Canadian Perspectives*. (pp. 126-154). Halifax, NS: Fernwood Publishing.
- Bandura, A. (1995). Exercise of personal and collective efficacy in changing societies. In A. Bandura (Ed.), *Self-Efficacy in Changing Societies*. New York, NY: Cambridge University Press.
- Bi, Y., Card, J. A., & Cole, S. T. (2007). Accessibility and attitudinal barriers encountered by Chinese travellers with physical disabilities. *International Journal of Tourism Research*, 9(3), 205-216.
- Borsay, A. (2005). *Disability and Social Policy in Britain Since 1750: A History of Exclusion*. Basingstoke, UK: Palgrave Macmillan.
- Brandell, J. R., & Varkas, T. (2010). Chapter 20: Narrative Case Studies. In B. Thyer (Ed.), *The Handbook of Social Work Research Methods* (2nd ed.) (pp. 376-396). Thousand Oaks, CA: Sage Publications.
- British Listed Buildings. (2012). *Listed buildings in Glamis, Angus, Scotland*. Retrieved from:
www.britishlistedbuildings.co.uk/scotland/angus/glamis

- Burnett, J. J., & Bender Baker, H. (2001). Assessing the travel-related behaviours of the mobility-disabled consumer. *Journal of Travel Research*, 40(1), 4-11.
- Burnett, J. J., & Paul, P. (1996). Assessing the media habits and needs of the mobility disabled consumer. *Journal of Advertising*, 25(3), 47-59.
- Butler, R. W. (1999). Understanding Tourism. In E. L. Jackson & T. L. Burton (Eds.), *Leisure Studies of the Twenty-first Century* (pp. 97-111). State College, PA: Venture Publishing.
- Campbell Brown, S. (2003). Methodological Paradigms That Shape Disability Research. In G.L. Albrecht, K. D. Seelman & M. Bury (Eds.), *Handbook of Disability Studies* (pp. 145-170). Thousand Oaks, CA: Sage Publications.
- Card, J. A., Cole, S. T., & Humphrey, A. H. (2006). A comparison of the accessibility and attitudinal barriers model: Travel providers and travelers with physical disabilities. *Asia Pacific Journal of Tourism Research*, 11(2), 161-175.
- Carroll, J. (2000). Evaluation of therapeutic play: A challenge for research. *Child and Family Social Work*, 5(1), 11-22.
- Chronically Sick & Disabled Persons Act 1970. (1970). *Chronically Sick & Disabled Persons Act 1970*. Retrieved from: www.legislation.gov.uk/ukpga/1970/44/contents
- Cohen, E. & Cohen. S. A. (2012). Authentication: Hot and cold. *Annals of Tourism Research*, 39(3), 1294-1314.
- Cohen, E. (1988). Authenticity and commoditization in tourism. *Annals of Tourism Research*, 15, 371-386.
- Communities and Local Government. (2012). *National Planning Policy Framework*. London, UK: Crown.
- Crawford, D. W., & Godbey, G. C. (1987). Reconceptualizing barriers to family leisure. *Leisure Sciences*, 9(2), 119-127.
- Crawford, D. W., Jackson, E. L., & Godbey, G. (1991). The hierarchical model of leisure constraints. *Leisure Sciences*, 13(4), 309-320.
- Creswell, J. W. (2009). *Research design: Qualitative, quantitative, and mixed methods approaches*. Thousand Oaks, CA: Sage Publications.
- Creswell, J. W. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage Publications.

- Cuddeford, J., Glen, F., & Buhman, J. (2010). *Life Opportunities Survey: User Guide to Defining and Coding Disability*. T. Howe (Ed.). Retrieved from http://www.statistics.gov.uk/about/methodology_by_theme/downloads/los-userguide.pdf
- Daly, K. J. (2007). *Qualitative methods for family studies and human development*. Thousand Oaks, CA: Sage Publications.
- Daniels, M. J., Drogin Rogers, E. B., & Wiggins, B. P. (2005). "Travel tales": An interpretive analysis of constraints and negotiations to pleasure travel as experienced by people with physical disabilities. *Tourism Management*, 26, 919-930.
- Daruwalla, P., & Darcy, S. (2005). Personal and societal attitudes to disability. *Annals of Tourism Research*, 32(3), 549-570.
- Dattilo, J. (1999). *Leisure education program planning: A systematic approach* (2nd ed.). State College, PA: Venture Publishing.
- Dattilo, J. (1994). *Inclusive leisure services: Responding to the rights of people with disabilities*. State College, PA: Venture Publishing.
- Davidson, M. (2006). *Universal Design: Work of Disability in an Age of Globalization. The Disability Studies Reader* (2nd ed.). L.J. Davis, (Ed.). New York: NY: Routledge.
- Day, P. (2005). *Access to the Built Environment; is it improving?* Retrieved from: [www.leeds.ac.uk/disability-studies/archiveuk/day/Access Leg2 05.pdf](http://www.leeds.ac.uk/disability-studies/archiveuk/day/Access%20Leg2%2005.pdf)
- Department of Culture, Media and Sport & Department for Transport, Local Government and the Region. (2001). *Historic environment: A force for our future*. Retrieved from: <http://www.tourisminsights.info/ONLINEPUB/DCMS/DCMS%20PDFS/HISTORIC%20ENV%20FORCE%20-%201.pdf>
- Destination 360. (2010). *Glamis Castle*. Retrieved from <http://www.destination360.com/europe/uk/glamis-castle>
- Devine, M. A., & Wilhite, B. (1999). Theory application in therapeutic recreation practice and research. *Therapeutic Recreation Journal*, 33(1), 29-44.
- Devlin, R., & Pothier, D. (2006). Introduction: Toward a critical theory of dis-citizenship. In D. Pothier & R. Devlin (Eds.), *Critical Disability Theory: Essays in Philosophy, Politics, Policy, and Law* (pp.1-22). Vancouver, BC: UBC Press.

- Direct Access Consultancy Ltd. (2011). *Equality Act*. Retrieved from:
[www.accessdda.com/equality act.html](http://www.accessdda.com/equality%20act.html)
- Disability Discrimination Act 1995. (2010). *Disability discrimination act 1995: 1995 chapter 50*. Retrieved from <http://www.legislation.gov.uk/ukpga/1995/50/section/1>
- Ellingson, L. L. (2009). *Engaging Crystallization in Qualitative Research: An Introduction*. Thousand Oaks, CA: Sage Publications.
- English Heritage. (2010a). *History of English Heritage*. Retrieved from <http://www.english-heritage.org.uk/about/who-we-are/how-we-are-run/history-of-english-heritage/>
- English Heritage. (2010b). *What We Do*. Retrieved from <http://www.english-heritage.org.uk/about/interactive/>
- English Heritage. (2007). *Valuing our heritage: The case for future investment in the historic environment*. Retrieved from <http://www.english-heritage.org.uk/publications/valuing-our-heritage/valuing-our-heritage.pdf>
- English Heritage. (2004). *Easy access to historic buildings*. Swindon, UK: Vitesse.
- Equality Act 2010. (2010). *Equality Act 2010*. Retrieved from
www.legislation.gov.uk/ukpga/2010/15/contents
- Equality and Human Rights Commission. (2011). *Equality Act 2010 code of practice: Services, public functions & associations statutory code of practice*. Norwich, UK: The Stationery Office.
- Finlay, L. (2003). The reflexive journey: mapping multiple routes. In L. Finlay & B. Gough (Eds.), *Reflexivity: A Practical Guide for Researchers in Health and Social Sciences* (pp. 3-20). Oxford, UK: Blackwell Science Ltd.
- Finlay, L., & Gough, B. (2003). Introducing Reflexivity. In L. Finlay & B. Gough (Eds.), *Reflexivity: A Practical Guide for Researchers in Health and Social Sciences* (pp. 1-2). Oxford, UK: Blackwell Science Ltd.
- Fost, D. (1998). The fun factor: Marketing recreation to the disabled. *American Demographics*, 20(2), 54-58.
- Fraze, C. (2005). Thumbs Up! Inclusion, Rights and Equality as Experienced by Youth with Disabilities. In T. Richmond & A. Saloojee (Eds.), *Social Inclusion: Canadian Perspective* (pp.10-12). Halifax, NS: Fernwood Publishing.

- Glamis Castle. (2012). *History of Glamis*. Retrieved from:
<http://www.glamiscastle.co.uk/history.cfm>.
- Glamis Castle. (2011). *Glamis Castle: The Gardens & Grounds* [Brochure]. Glamis Castle by Forfar, Angus, Scotland: Glamis Castle.
- Glamis Castle. (2010a). *History of Glamis*. Retrieved from:
<http://www.glamiscastle.co.uk/history.cfm>.
- Glamis Castle. (2010b). *Glamis Castle* [Brochure]. Glamis Castle by Forfar, Angus, Scotland: Glamis Castle.
- Glover, T. (2004). Narrative inquiry and the study of grassroots associations. *Voluntas: International Journal of Voluntary and Nonprofit Organizations*, 15(1), 47-69.
- Good Access Guide. (2012). *Visitor attractions castles*. Retrieved from:
<http://www.goodaccessguide.co.uk/BusinessList.php?urlcategory=Visitor+Attractions~Castlesurlsimplesearch=castles>
- Goodall, B., Pottinger, G., Dixon, T., & Russell, H. (2004). Heritage property, tourism and the UK disability discrimination act. *Property Management*, 22(5), 345-357.
- Gough, B. (2003). Deconstructing reflexivity. In L. Finlay & B. Gough (Eds.), *Reflexivity: A Practical Guide for Researchers in Health & Social Sciences* (pp. 21-36). Oxford, UK: Blackwell Science Ltd.
- Guba, E. G., & Lincoln, Y. S. (2005). Paradigmatic controversies, contradictions, and emerging confluences. In N. K. Denzin & Y. S. Lincoln (Eds.), *The Sage Handbook of Qualitative Research* (3rd ed.) (pp. 191-216). Thousand Oaks, CA: Sage Publications.
- Heritage Lottery Fund. (2012). *Pick a programme*. Retrieved from:
<http://www.hlf.org.uk/HowToApply/programmes/pages/programmes.aspx>
- Historic Environment Local Management. (2011). *Access and inclusion*. Retrieved from:
<http://www.helm.org.uk/server/show/nav.19634>
- Historic Scotland. (2012). *Act Implementation*. Retrieved from: <http://www.historic-scotland.gov.uk/index/heritage/environmentbill/bill-timetable.htm>
- Historic Scotland. (2010). *Scotland's Historic Environment Audit*. Retrieved from:
<http://www.heritageaudit.org.uk/sheareport2010.pdf>
- Historic Scotland. (2009). *Scottish Historic Environment Policy*. Retrieved from
<http://www.historic-scotland.gov.uk/shep-july-2009.pdf>

- Hodder Education. (n.d). *A short history of the Equality Act 2010*. Retrieved from:
www.hoddereducation.co.uk/SiteImages/30/304e4375-77a4-4407-88f3-de1c4d3fe1a4.pdf
- Hodge, T. (2011). *The Equality Act 2010 and its effects on heritage open days*. Retrieved from: <http://www.heritageopendays.org.uk/news/new-factfile-equality-act-2010-and-its-effect-on-heritage-open-days>
- Holstein, J. A. & Gubrium, J. F. (2003). Chapter Four: Active Interviewing. In J. F. Gubrium & J. A. Holstein (Eds.), *Postmodern Interviewing* (pp. 67-80). Thousand Oaks, CA: Sage Publications Inc.
- Home Office. (2011). *Equality Act 2010*. Retrieved from: www.homeoffice.gov.uk/equalities-act/.
- Imrie, R. (2000). Disability and discourses of mobility and movement. *Environment and Planning, 32*, 1641-1656.
- Innes-Smith, R. (2000). *Glamis Castle*. Derby, UK: Pilgrim Press Ltd.
- Israeli, A. A. (2002). A preliminary investigation of the importance of site accessibility factors for disabled tourists. *Journal of Travel Research, 41*(1), 101-104.
- Jackson, E.L., Crawford, D.W., & Godbey, G. (1993). Negotiation of leisure constraints. *Leisure Sciences, 15*, 1-11.
- Jackson, E. L., & Scott, D. (1999). *Constraints to leisure: Leisure studies prospects for the twenty-first century*. State College, PA: Venture Publishing.
- Jones, S. (2009). Experiencing authenticity at heritage sites: Some implications for heritage management and conservation. *Conservation and Management of Archaeological Sites, 11*(2), 133-147.
- Kaplan, D. M. (2003). *Ricoeur's Critical Theory*. Albany, NY: State of New York Press.
- Kaufman-Scarborough, C. (2001). Sharing the experience of mobility-disabled consumers: Building understanding through the use of ethnographic research methods. *Journal of Contemporary Ethnology, 30*(4), 430-464.
- Kaufman-Scarborough, C., & Baker, S. M. (2005). Do people with disabilities believe the ADA has served their consumer interests? *The Journal of Consumer Affairs, 39*(1), 1-26.

- Knight, A., Petrie, P., Zuurmond, M., & Potts, P. (2009). 'Mingling together': Promoting the social inclusion of disabled children and young people during the school holidays. *Child and Family Social Work*, 14(1), 15-24.
- Lavery, I., Davey, S., Woodside, A., & Ewart, E. (1996). The vital role of street design and management in reducing barriers to older peoples' mobility. *Landscape and Urban Planning*, 35, 181-192.
- Leplege, A., Gzil, F., Cammelli, M., Lefevre, C., Pachoud, B., & Ville, I. (2007). Person centredness: Conceptual and historical perspectives. *Disability and Rehabilitation*, 29(20), 1555-1565.
- Living Heritage. (2011). *Managing and owning landscape: Preserving historic sites and buildings*. Retrieved from <http://www.parliament.uk/about/living-heritage/transformingsociety/towncountry/landscape/overview/historicsites/>
- Lord, J., & Hutchinson, P. (2007). *Pathways to Inclusion: Building a New Story with People and Communities*. Concord, ON: Captus Press.
- Lyons, N. (2007). Narrative inquiry: What possible future influence on policy or practice? In D. J. Clandinin (Ed.), *Handbook of Narrative Inquiry: Mapping a Methodology* (pp. 600-631). Thousand Oaks, CA: Sage Publications.
- Marvasti, A. B. (2004). *Qualitative Research in Sociology: An Introduction*. Thousand Oaks, CA: Sage Publications.
- McCabe, S. (2009). Who needs a holiday? Evaluating social tourism. *Annals of Tourism Research*, 36(4), 667-688.
- McCabe, S., Joldersma, T., & Li, C. (2010). Understanding the benefits of social tourism: Linking participation to subjective well-being and quality of life. *International Journal of Tourism Research*, 12(6), 761-773.
- McCann, N. (2008). *Glamis Castle*. Derby, UK: Heritage House Group Ltd.
- McColl, M. A., James, A., Boyce, W., & Shortt, S. (2006). Disability policy making: Evaluating the evidence base. D. Pothier & R. Devlin (Eds.), *Critical Disability Theory Essays in Philosophy, Politics, Policy, and Law* (pp. 25-46). Vancouver, BC: UBC Press.
- McKercher, B. (2009). Non-travel by Hong Kong residents. *International Journal of Tourism Research*, 11, 507-519.

- McKercher, B., Packer, T., Yau, M. K., & Lam, P. (2002). Travel agents as facilitators or inhibitors of travel: Perceptions of people with disabilities. *Tourism Management*, 24(4), 465-474.
- McLeod, J. (2010). *Case Study Research in Counselling and Psychotherapy*. London, UK: Sage Publications Inc.
- Ministry of Community & Social Services. (2012). *Making Ontario Accessible*. Retrieved from: www.mcsc.gov.on.ca/en/mcsc/programs/accessibility/index.aspx
- Ministry of Municipal Affairs and Housing. (2012). *Your Ministry*. Retrieved from: <http://www.mah.gov.on.ca/page41.aspx>
- Mysterious Britain & Ireland. (2010). *Glamis Castle*. Retrieved from <http://www.mysteriousbritain.co.uk/scotland/angus/hauntings/glamis-castle.html>
- Neath, J. (1997). Social causes of impairment, disability and abuse: A feminist perspective. *Journal of Disability Policy Studies*, 8(1), 195-230.
- Nyaupane, G. P., McCabe, J. T., & Andereck, K. L. (2008). Seniors' travel constraints: Stepwise logistic regression analysis. *Tourism Analysis*, 13(4), 341-354.
- Office for Disability Issues. (2011). *Equality Act 2010 Guidance: Guidance on matters to be taken into account in determining questions relating to the definition of disability*. London, UK: Crown.
- Office for National Statistics. (2010). *Statistical Bulletin: ONS publishes life opportunities survey interim report*. Retrieved from <http://www.statistics.gov.uk/pdfdir/los1210.pdf>
- Oliver, M., & Barnes, C. (1998). *Disabled People & Social Policy: From exclusion to inclusion*. London, UK: Addison Wesley Longman.
- Ozturk, Y., Yayli, A., & Yesiltas, M. (2008). Is the Turkish tourism industry ready for a disabled customer's market? The views of hotel and travel agency managers. *Tourism Management*, 29(2), 382-389.
- Packer, T. L., McKercher, B., & Yau, M. K. (2007). Understanding the complex interplay between tourism, disability and environmental contexts. *Disability and Rehabilitation*, 29(4), 281-292.
- Park, H. (2010). Heritage tourism: Emotional journeys into nationhood. *Annals of Tourism Research*, 37(1), 116-135.

- Patton, M. Q. (2002). *Qualitative research and evaluation methods* (3rd ed.). Thousand Oaks, CA: Sage Publications.
- Proudlock Associates. (2010). *The Journey to the Future*. Retrieved from:
www.proudlockassociates.com/menu_bottom/what-we-do/inclusive-design/inclusive-design-the-journey-to-the-future/the-journey-to-inclusion/
- Ravaud, J., & Stiker, H. (2001). Inclusion/exclusion: An analysis of historical and cultural meanings. In G. L. Albrecht, K. D. Seelman & M. Bury (Ed.). *Handbook of Disability Studies* (pp. 490-512). Thousand Oaks, CA: Sage Publications.
- Ray, N. M., & Ryder, M. E. (2003). "Eibilities" tourism: An exploratory discussion of the travel needs and motivations of the mobility-disabled. *Tourism Management*, 24, 57-72.
- Raymore, L. A., Godbey, G. C., & Crawford, D. W. (1994). Self-esteem, gender, and socioeconomic status: Their relation to perceptions of constraint on leisure among adolescents. *Journal of Leisure Research*, 26(2), 99.
- Reid, H. & Robertson, B. J. (2005). Weird yet wonderful: The potential of narrative inquiry in leisure research. *Proceedings of the Eleventh Canadian Congress on Leisure Research*. Nanaimo, BC: Malaspina University-College.
- Richards, V., & Raguz, A. (Eds.). (2009). *Proceedings from The Third Critical Tourism Studies Conference Connecting Academics of Hope: Critical Actions and Creative Vistas*. Zadar, Croatia.
- Richardson, L. (1997). *Fields of Play: Constructing an Academic Life*. New Brunswick, NJ: Rutgers University Press.
- Richardson, L. (1990). Narrative and sociology. *Journal of Contemporary Ethnography*, 19(1), 116-135.
- Richmond, T., & Saloojee, A. (2005). Introduction and overview. *Social inclusion: Canadian perspective* (pp. 1-31). Halifax, NS: Fernwood Publishing.
- Ricoeur, P. (1991). *From Text to Action: Essays in Hermeneutics II*. Evanston, IL: Northwestern University Press.
- Riessman, C. K. (2008). *Narrative Methods for the Human Sciences*. Thousand Oaks, CA: Sage Publications.

- Riessman, C.K. (2003). Analysis of personal narratives. In J.A. Holstein & J.F. Gubrium (Eds.). *Inside Interviewing: New Lenses, New Concerns* (pp. 331-346). Thousand Oaks, CA: Sage Publications.
- Riessman, C. K. (1993). *Narrative Analysis: Qualitative Research Methods Series 30*. Newbury Park, CA: Sage Publications.
- Roe, E. (1994). *Narrative policy analysis: Theory and practice*. Durham, NC: Duke University Press.
- Rushton, S. P. (2001). Cultural assimilation: A narrative case study of student-teaching in an inner-city school. *Teaching and Teacher Education*, 17(1), 147-160.
- Russell, R. V. (2002). *Pastimes: The context of contemporary leisure* (2nd ed.). Champaign, IL: Sagamore Publishing.
- Saloojee, A. (2003). *Social Inclusion, Anti-Racism and Democratic Citizenship*. Toronto, ON: The Laidlaw Foundation.
- Samdahl, D. M., & Jekubovic, N. J. (1997). A critique of leisure constraints: Comparative analyses and understanding. *Journal of Leisure Research*, 29(4), 430-452.
- Service Ontario. (2009). *Accessibility for Ontarians with Disabilities Act, 2005*. Retrieved from http://www.elaws.gov.on.ca/html/statutes/english/elaws_statutes_05a11_e.htm
- Shakespeare, T. (2006). The social model of disability. In L.J. Davis (Ed.). *The Disability Studies Reader* (2nd ed.) (pp. 197-204). New York, NY: Routledge.
- Shank, J., & Coyle, C. (2002). *Therapeutic Recreation in Health Promotion and Rehabilitation*. State College, PA: Venture Publishing Inc.
- Shaw, G., & Coles, T. (2004). Disability, holiday making and the tourism industry in the UK: A preliminary study. *Tourism Management*, 25(3), 397-403.
- Smith, M. (2005). The impact of the Disability Discrimination Act on historic buildings. *Journal of Building Appraisal*, 2(1), 52-61.
- Smith, R.W. (1987). Leisure of disabled tourists: Barriers to participation. *Annals of Tourism Research*, 14(3), 376-389.
- Son, J. S., Mowen, A. J., & Kerstetter, D. L. (2008). Testing alternative leisure constraint negotiation models: An extension of Hubbard and Mannell's study. *Leisure Sciences*, 30(3), 198-216.

- Spencer, S. (2011). *Visual Research Methods in the Social Sciences: Awakening Visions*. New York, NY: Routledge.
- Stanczak, G. C. (2007). *Visual research methods: Image, society, and representation*. Thousand Oaks, CA: Sage Publications.
- Stilling Blichfeldt, B. & Nicolaisen, J. (2010). Disabled travel: Not easy, but doable. *Current Issues in Tourism*, 14(1), 79-102.
- Strathmore Estates. (2010). *Strathmore Estates*. Retrieved from: www.strathmore-estates.co.uk
- Stubbs, M. (2004). Heritage-sustainability: Developing a methodology for the sustainable appraisal of the historic environment. *Planning, Practice & Research*, 19(3), 285-305.
- Sylvester, C. (1995). Critical theory, therapeutic recreation and health care reform: An instructive example of critical thinking. *Annual of Therapeutic Recreation*, 5, 94 -104.
- Thane, P. (2010). *Unequal Britain: Equalities in Britain since 1945*. Retrieved from: <http://www.historyandpolicy.org/papers/policy-paper-99.html>
- The International Classification of Functioning, Disability & Health. (2006). *The International Classification of Functioning (ICF) defines*. Retrieved from <http://www.un.org/esa/socdev/enable/rights/ahc8docs/ahc8whodis1.doc>
- The National Trust. (2002). *Position Statement: The Historic Environment*. Retrieved from: [http://tourisminsights.info/ONLINEPUB/NATIONAL%20TRUST/POSSTATE/NATIONAL%20TRUST%20\(2002\),%20The%20Historic%20Environment%20-%20A%20Position%20Statement,%20NT,%20London.pdf](http://tourisminsights.info/ONLINEPUB/NATIONAL%20TRUST/POSSTATE/NATIONAL%20TRUST%20(2002),%20The%20Historic%20Environment%20-%20A%20Position%20Statement,%20NT,%20London.pdf)
- The Scottish Government. (2011). *Technical Handbooks 2011: October Non Domestic – Consolidated*. Retrieved from: <http://www.scotland.gov.uk/Resource/0040/00400718.pdf>
- The Scottish Government. (2010). *Scottish Planning Policy*. London, UK: Crown Publishing.
- Town and Country Planning (Scotland) Act 1997. (1997). *Town and Country Planning (Scotland) Act 1997*. Retrieved from: www.legislation.gov.uk/ukpga/1997/8/contents
- Titchkosky, T. (2003). *Disability, Self, and Society*. Toronto, ON: University of Toronto Press.
- Tourism For All. (2010). *About TFA*. Retrieved from <http://www.tourismforall.org.uk/AboutTFA.html>

- Tyrer, A. (2012). *Equality Act 2010*. Retrieved from:
www.stammeringlaw.org.uk/changes/sea.htm
- UK Legislation. (2011). *Historic Buildings and Ancient Monuments Act 1953*. Retrieved from
<http://www.legislation.gov.uk/ukpga/Eliz2/1-2/49/contents>
- United Nations. (1948). *The Universal Declaration of Human Rights*. Retrieved from:
www.un.org/en/documents/udhr/
- United Nations Economic and Social Commission for Asia and the Pacific. (2000).
Proceedings from the Asia-Pacific Conference on Tourism for People with Disabilities: Barrier-Free Tourism for People with Disabilities in the ESCAP Region. Bali, Indonesia.
- Van Campen, C., & Iedema, J. (2007). Are persons with physical disability who participate in society healthier and happier? Structural equation of modeling of objective participating and subjective well-being. *Qualitative Life Research*, 16(4), 635-645.
- Visit Scotland. (2010). *Scotland: The key facts on tourism in 2009*. Retrieved from
<http://www.visitscotland.org/pdf/Tourism%20in%20Scotland%202009.pdf>
- Waldrop, J., & Stern, S. M. (2003). Disability status: 2000. *Census 2000 brief*. U.S. Department of Commerce, Economics & Statistics Administration.
<http://www.census.gov/prod/2003pubs/c2kbr-17.pdf>
- Walker, A. & Walker, C. (1997). *Britain Divided: The Growth of Social Exclusion in the 1980s and 1990s*. London, UK: Child Poverty Action Group.
- White, D.D. (2008). A structural model of leisure constraints negotiation in outdoor recreation. *Leisure Sciences*, 30(4), 342-359.
- Wiser. (2011). *British Council of Disabled People BCODP*. Retrieved from:
www.wiser.org/organization/view/8e4b5475f63a562737120558304189dc
- World Health Organization. (2011a). *Classifications*. Retrieved from:
<http://www.who.int/classifications/icd/en/>
- World Health Organization. (2011b). *History of the development of the ICD*. Retrieved from:
<http://www.who.int/classifications/icd/en/HistoryOfICD.pdf>
- World Health Organization. (2002). Towards a Common Language for Functioning, Disability and Health: ICF. *World Health Organization, Geneva, 2002*. Retrieved from:
<http://www.who.int/classifications/icf/en/>

- Yau, M. K., McKercher, B., & Packer, T. L. (2004). Traveling with a disability. *Annals of Tourism Research*, 31(4), 946-960.
- Yin, R. (2009). *Case study research: Design and methods* (4th Ed.). Thousand Oaks, CA: Sage Publications.
- Yin, R. (1994). *Case study research: Design and methods*. Thousand Oaks, CA: Sage Publications.

Appendix A: Interview Protocol for Historic Tourist Site Participants

Date:

Location:

Interviewer: Heather Barlow

Interviewee:

Phone Number:

I want to thank you for agreeing to meet with me and taking the time to have a conversation to help further my research. The conversation will take less than an hour, and you are free to refuse to answer any questions or stop the conversation at any time. Striving to make a historic site accessible for every tourist, regardless of ability, is a difficult task due to the legislative restrictions faced when attempting to make alterations to the site to meet the needs of potential tourists. Today, I want to hear your stories about different aspects of physical accessibility at Glamis Castle.

To begin I would like to get an understanding of what tourism means to you.

1. What does tourism mean to you? Do you think it is important? Why or why not?

An individual with a physical impairment enjoys tourism as much as someone who is able-bodied, but encounter increased restrictions to enjoyment when trying to participate in tourism. The interaction between their impairment and the surrounding environment could be disabling to them.

2. What does disability mean to you? Can you tell me stories about experiences with disability at Glamis Castle?

Next, I would like to talk about accessibility at Glamis Castle for potential tourists.

3. What does accessibility mean to you? Can you tell me any stories about when accessibility has been a challenge at Glamis Castle?

As stated earlier, making alterations to a historic site can be a challenge for a service provider. A major issue in making alterations is doing so without damaging the authenticity of the site.

4. What does authenticity mean to you?
5. What are the principles in place to keep Glamis Castle authentic to the tourist while also enhancing the accessibility? Can you tell me about times when you have experienced this challenge?

That is all the questions I have for you at this time. I would like to thank you very much for taking the time to speak with me and helping to further my research, I really appreciate it. If I have any additional questions or need clarification on something to ensure your voice is represented accurately in this study, may I contact you in the future? Upon completion of this study I would be happy to share the results with you in the form of a summary report if you like.

Appendix B: Interview Protocol with Tourism Board Participants

Date:

Location:

Interviewer: Heather Barlow

Interviewee:

Phone #:

I want to thank you for agreeing to meet with me and taking the time to have a conversation to help further my research. The conversation will take less than an hour, and you are free to refuse to answer any questions or stop the conversation at any time. Striving to make a historic site accessible for every tourist, regardless of ability, is a difficult task due to the legislative restrictions faced when attempting to make alterations to the site to meet the needs of potential tourists. Today, I want to hear your stories about different aspects of physical accessibility at Glamis Castle.

To begin I would like to get an understanding of what tourism means to you.

1. What does tourism mean to you? Do you think it is important? Why or why not?

An individual with a physical impairment enjoys tourism as much as someone who is able-bodied, but encounter increased restrictions to enjoyment when trying to participate in tourism. The interaction between their impairment and the surrounding environment could be disabling to them.

2. What does disability mean to you? Can you tell me stories about experiences with disability at Glamis Castle or a castle in general?

Next, I would like to talk about accessibility at Glamis Castle for potential tourists.

3. What does accessibility mean to you? Can you tell me any stories about when you have observed accessibility as a challenge at Glamis Castle or a castle in general?

As stated earlier, making alterations to a historic site can be a challenge for a service provider. A major issue in making alterations is doing so without damaging the authenticity of the site.

4. What does authenticity mean to you?

5. What do you think are the principles in place to keep Glamis Castle authentic to the tourist while also enhancing the accessibility?

That is all the questions I have for you at this time. I would like to thank you very much for taking the time to speak with me and helping to further my research, I really appreciate it. If I have any additional questions or need clarification on something to ensure your voice is represented accurately in this study, may I contact you in the future? Upon completion of this study I would be happy to share the results with you in the form of a summary report if you like.

Appendix C: Interview Protocol with Participants Who Have a Disability

Date:

Location:

Interviewer: Heather Barlow

Interviewee:

Phone #:

I want to thank you for agreeing to meet with me and taking the time to have a conversation to help further my research. The conversation will take less than an hour, and you are free to refuse to answer any questions or stop the conversation at any time. Striving to make a historic site accessible for every tourist, regardless of ability, is a difficult task due to the legislative restrictions faced when attempting to make alterations to the site to meet the needs of potential tourists. Today, I want to hear your stories about different aspects of physical accessibility at Glamis Castle.

To begin I would like to get an understanding of what tourism means to you.

1. What does tourism mean to you? Do you think it is important? Why or why not?

An individual with a physical impairment enjoys tourism as much as someone who is able-bodied, but encounter increased restrictions to enjoyment when trying to participate in tourism. The interaction between their impairment and the surrounding environment could be disabling to them.

2. What does disability mean to you? Can you tell me stories about any experiences you may have had with disability at Glamis Castle?

Next, I would like to talk about accessibility at Glamis Castle for potential tourists.

3. What does accessibility mean to you? Can you tell me any stories about when accessibility has been a challenge at Glamis Castle?

As stated earlier, making alterations to a historic site can be a challenge for a service provider. A major issue in making alterations is doing so without damaging the authenticity of the site.

4. What does authenticity mean to you?

5. What do you think are the principles in place to keep Glamis Castle authentic to the tourist while also enhancing the accessibility? Can you tell me about any time when you have witnessed this challenge at a castle or historic site?

That is all the questions I have for you at this time. I would like to thank you very much for taking the time to speak with me and helping to further my research, I really appreciate it. If I have any additional questions or need clarification on something to ensure your voice is represented accurately in this study, may I contact you in the future? Upon completion of this study I would be happy to share the results with you in the form of a summary report if you like.