

Path to Accessibility:

**The current state of disability access in Aotearoa
New Zealand museums**

by

Riah King-Wall

**A dissertation submitted to Victoria University of Wellington in partial fulfilment
of the requirements for the degree of Masters in Museum and Heritage Studies.**

**Victoria University of Wellington
2016**

Abstract

The New Museology posits museums and galleries as institutions entwined with issues of social justice and political responsibility. The relationship between museums and their communities is the founding aspect of this theoretical and practical framework. ‘Path to Accessibility’ explores the ways museums and galleries around Aotearoa New Zealand are engaging with communities of people with disabilities, consulting both with representatives from the disability sector and cultural organisations from around the country. This dissertation addresses a current gap in the literature available on how New Zealand museums are adapting to the needs of these audiences; a shift that is necessary given one in four New Zealanders identifies as having lived experience of disability. It also forges a valuable contribution to the field of museum studies by drawing on theory such as audience development and visitor research, and utilising emancipatory research frameworks from disability studies, as well as conducting original research on an under-examined topic.

The research comprised a multi-method approach to ensure credibility. Focus group and interview stages collected the experiences and viewpoints of existing museum visitors with disabilities. This provided a foundation on which to create a nationwide survey of 41 museums and galleries. The survey explored multiple aspects of disability access, including physical ingress, inclusive exhibition design, tailored public programming, digital accessibility, and levels of disability representation in staff and management positions.

The findings of this research project reveal that museums and galleries in Aotearoa New Zealand are for the most part considering disability access in some way. However, actioning related initiatives is often limited to achieving minimum legislative requirements rather than approaching it comprehensively as part of wider audience development strategies. The analysis of data gathered puts forward a number of suggestions around improving practice in New Zealand museums, central to which is establishing relationships with communities of people with disabilities and their advocacy groups to ensure long-term sustainability. These recommendations have global applicability for museum practice as comparative overseas studies demonstrate strong similarities to the New Zealand context.

Acknowledgements

To my supervisor Dr. Lee Davidson, Victoria University of Wellington: An extra big thanks for juggling the trickiness of time zones and bad Skype connections this year! As always I have truly appreciated your calm directives, thoughtful guidance and generosity of time.

To Dr. Conal McCarthy, Dr. Bronwyn Dalley, Dr. Gerald Smith and Annie Mercer: What a brilliant learning environment you have provided throughout this degree, I feel so much richer for being a part of it. Cheers for putting up with my thematically-appropriate novelty baking on occasion too.

To my focus group and interview participants: Without you this dissertation would not have been possible. My heartfelt thanks for being so open with sharing your time and experiences as part of this project.

To the many museums and galleries around the country who participated in the survey: As we all know museums are time-poor places, so I truly appreciate your contributions, frank responses and willingness to share. Without you there would be none of the following.

To Arts Access Aotearoa: Your support and expertise was an immense help from the very outset of this project. I am extremely grateful for all the assistance you have given me and hope the results are useful for you too.

To Libby Sharpe and my fellow Whanganui Regional Museum staff: The study leave, the managed workload, the active encouragement... you are all the absolute best.

To my Masters of Museum and Heritage Studies compatriots: What a privilege it has been to spend time around such a brilliant sodality of women!

To Maddie and Jess: Thank you, thank you, thank you! Proof reader extraordinaires and incomparable chums.

To my long-suffering partner Oscar: Let's go get some celebratory kai, my shout.

Finally to my mum Sue: It's soppy and clichéd but you've been my rock. I don't think I can ever say thank you enough.

List of Figures

Graph 1: <i>Museums Aotearoa 2014 Sector Survey Museum Size Results</i>	43
Graph 2: <i>Disability Accessibility Survey Respondents Classified by Museum Size</i>	43
Table 1: <i>Facilities and Services Provided</i>	47

Table of Contents

Abstract	2
Acknowledgements.....	3
List of Figures.....	4
Chapter 1: Introduction	6
Introduction.....	6
Literature Review	8
Museum Studies	8
Disability Studies	15
Accessibility and museums.....	18
Summary	22
Research Design:	23
Conclusion:	32
Chapter 2: Lived Experience of Disability Access to New Zealand Museums....	34
Focus Group and Interview Themes:	34
Building access:	35
Accessible exhibition design:.....	35
Public programmes:.....	38
Digital content:.....	38
Staff attitudes and responsiveness:.....	39
Summary:	40
Chapter 3: Current Institutional Perspectives on Disability Accessibility	42
Introduction:	42
Survey Results:	44
Summary:	50
Chapter 4: Towards Improved Accessibility.....	53
Staff, Governance and Leadership Representation and Responsiveness:	56
Access in Plans and Policies:.....	58
Access to facilities, exhibitions and programmes:.....	61
Digital access:	64
Museum barriers to increasing access:	65
Conclusion:	67
Appendix 1: Focus Group and Interview Schedule	73
Appendix 2: Web Questionnaire Schedule	74
Bibliography:	76

Chapter 1: Introduction

Introduction

“One Saturday afternoon while on vacation in a major American city, a friend and I made the mistake of acting like typical tourists; we tried to ad lib.”

Kudlick (2005)

Kudlick’s first person account of her vision impaired experience when spontaneously visiting a local history museum brings into sharp relief some of the barriers faced by people with disabilities when visiting cultural institutions. Previously, in her roles as a historian and a visitor, the author had been well acquainted with local history museums making allowances for her getting up close to exhibits, and being relaxed around rules regarding the handling of objects; vital for visitors who live with visual impediments. However in this instance Kudlick found that instead of a docent or audio guide, she encountered staff members who were seemingly unaware of, or disinterested in, providing access for people with disabilities in their public spaces (Kudlick, 2005, 76-77).

A visit to the Fine Arts museum in the same city offered Kudlick a distinctly more accommodating experience. This museum was trialling a pre-recorded audio access option, providing audio tours that were extremely popular with all museum visitors, not just those with vision impairments. The author was impressed with the verbal descriptions, the historical context, and the inclusion of navigational instructions (Kudlick, 2005, 80). Kudlick also recounts snippets of her experiences in other museums, such as the Smithsonian's Museum of Natural History, and the Cité des Sciences et de l'Industrie in Paris. With both institutions accessibility was integral to the museum design, and a key component in the construction and conception of their exhibits (Kudlick, 2005, 79).

This narration of just a single visitor experience gives insight into some of the inconsistent approaches museums are employing to engage with their disabled community members. The past two decades have seen an increasing awareness of the

need for literature on this topic, with international discussions and research primarily addressing ways to encourage and enable people with disabilities to successfully engage with museums and galleries. Within New Zealand it is important to examine current accessibility issues and actions for such a context as a basis for further investigation.

Almost one in four New Zealanders identified themselves as disabled in 2013, up from 20% in 2001 (Statistics New Zealand, 2013). This included 27% of the adult population and 11% of children who stated they were limited in their daily activities by a varying range of impairments such as physical, sensory, or learning. With the New Zealand population aging, this figure will likely rise in the future. (Statistics New Zealand, 2013).

Disabled people constitute a significant proportion of our population, so it is therefore surprising that research investigating how museums in Aotearoa New Zealand are working to engage with these communities is practically non-existent. Despite extensive research I was unable to find anything published by Museums Studies scholars on this subject in the New Zealand context. Overseas, particularly in the USA and UK, the topic has been investigated by a number of researchers and museums are increasingly consulting with communities of disabled people (Hollins, 2010). The Museums Aotearoa National Visitor Survey 2014 found that 41% of museumgoers interviewed were above the age of 60 (Museums Aotearoa, 2014). Of these, a significant number identify as living with an impairment and are therefore a crucial museum demographic.

In my own experience taking exit surveys at various museums and art galleries, I have encountered a wide cross section of people who have had negative experiences with accessing exhibitions. Along with complaints, many visitors have suggested how issues could easily be rectified. Working as an Electronic Live Transcriber in Victoria University of Wellington's Disability Services team I also have first-hand experience how an awareness of peoples' different needs, and simple changes to processes, can have a huge impact on their experiences in learning and interfacing with cultural institutions. These experiences have strongly motivated this research.

The purpose of this dissertation is to contribute to the academic field of museum studies by documenting the current state of engagement New Zealand museums have with their

community members who are living with disabilities and providing recommendations for future practice. This research seeks to benefit professionals working in the industry, further researchers on the topic, and most importantly it is hopefully advantageous for communities of disabled people. This research assists in not only providing a barometer for the current day physical and sensorial access capabilities in New Zealand museums, but also acts as a basis for further research on the inclusion of disabled peoples' representation in these domains.

This chapter consists firstly of a literature review exploring museum studies, disability studies and existing work on accessibility in museums. It then introduces the research design and methodologies of this project.

Literature Review

This literature review examines theoretical frameworks in the museum studies field. New Museology, visitor and community engagement, democratisation of the museum, its role in social inclusion activism, and audience development are all explored. These areas all focus on visitor-centric aspects of museum studies, which are important when exploring the topic of disability access in museums as this topic necessitates understanding of varying audiences and their visiting practices. It then reviews current definitions and models of disability, with key debates and concerns addressed by disability studies. There is little existing literature combining these two areas, and work on disability access in museums specifically is similarly lacking – however, research in this area is examined in this chapter. Finally, current literature on the topic of access levels to cultural sites are considered, including reports written by disability sector services in Australia and Aotearoa New Zealand.

Museum Studies

Museum studies describes the academic and critical examination of the history, theory and practice of museums and their place in society (McCarthy and Cobley, 2009, 396). It is an interdisciplinary area, drawing on fields such as art history, anthropology, history, visual and material cultural studies, and gender studies among many others. This

broad scope consequently includes a wide range of theories and methodologies which can be used to critically inform working practice (McCarthy and Cobley, 2009, 396). The field of museum studies is a networked discourse community, sharing common values while exploring various facets that merge into one another (Latham and Simmons, 2014, 15). It encompasses both museology, describing the theory around museums and their functions, and museography, which details the practical and technical aspects of museum work (Latham and Simmons, 2014, 15). This combination of theory and practice points to a framework that values the unique aspect of both approaches, with each informing the other (Davis, 2011, 459). Due to the complex nature of museums, which have numerous functions and typologies, the field is dynamically evolving to include new characteristics and features (Latham and Simmons, 2014, 16).

One theory developed within the museum studies framework is the 'New Museology'. Originally defined by Peter Vergo in 1989, New Museology differentiated itself from earlier models by focusing on museum purpose, rather than analysis of methods and procedures. Responding to the significant changes in the societal contexts that museums sit within, New Museology considers a critical component of development as having cultural heritage institutions broaden their social values and influence (Stam, 2005, 55). As institutions where social roles are regarded as integral to policy and presentation, museums must acknowledge social justice and community inclusion as part of political responsibilities (Stam, 2005, 55). Writing from the context of Australia in the early 2000s, Andrea Witcomb charts the progression of early museum workers who exhibited distrust of academic analysis, moving through to situations where theory was built from practical experience in tandem with strong academic positions (Witcomb, 2003, 8). Described as a movement attempting to challenge dominant perceptions of museums as elite institutions holding final power, New Museology is an effort to concentrate on the political dimensions of museum work, thus focusing on the relationships between museums and communities (Witcomb, 2003, 8). The movement contends that institutions are subject to a myriad of external influences, such as political, economic, cultural or otherwise. It is therefore necessary for industry professionals to communicate with, and respond to, various communities and sectors in order to achieve best working practice (Witcomb, 2003, 79-80).

A response within museums to the attitudes of New Museology has been the rapid rise of visitor studies as an aspect of museum development. Questions around identity, social inclusion, and the political frameworks that museums sit within, can only be answered when viewpoints and perspectives of museum audiences are included (Hooper-Greenhill, 2006, 362). To become more visitor-focussed requires both organisational and strategic shifts in professional practice from museums. Visitors are defined as people who interpret and perform meaning-making within the context of museums as cultural sites (Hooper-Greenhill, 2006, 362). This focus on audience leads to encounters with the term 'communities', although a strict definition can be difficult to pinpoint as it adapts and shifts based on different contexts of use (Crooke, 2006, 172). Communities are created intangibly, as social networks determined by shared experiences or characteristics. These can encompass common histories, religions, attachments to place, shared rituals, or involvement in political structures (Crooke, 2006, 173). Community creation is bound within identifiable symbolic and impalpable markers which speak to meanings. Although these markers may be recognised through signifiers such as land or uniform, the deeper significance of the characteristics represented gives a sense of inclusion (Crooke, 2006, 173). This feeling of belonging provides inclusivity as security for some, and alternatively discomfort for those who feel disenfranchised (Crooke, 2006, 173). For museums to increase true social inclusion and community representation, a commitment must be made to understanding the varied nature of visitors, their contexts and needs.

A number of case studies serve to demonstrate how museums are critically analysing efforts to increase community inclusion and demonstrate social responsibility. Taken together a reading of these precedents gives an opportunity to explore ideas, approaches and results. This is useful for critically analysing whether similar models could work in wider contexts such as disabled communities. For example, the representation of social diversity and exploration of human rights, gender equality, and histories of shared traumas is considered imperative for museum exhibitions in Taiwan (Varutti, 2013, 243). The public representation of indigenous groups and ethnic minorities in Taiwan is being explored in earnest. Since the country's transition to democracy in 1987, previously 'invisible' communities are represented increasingly through exhibitions, and as a voice contributing to narratives presented within museum settings (Varutti, 2013, 243). Varutti notes that the pursuit of social equality requires strong recognition and

direct legitimization of varying forms of difference. While the material culture of indigenous groups has long been displayed within major Taiwanese museums, this has been frequently undermined by the perspective of colonial and post-colonial practice and policy (2013, 246-247).

The Council of Indigenous Peoples is a Ministry-level group within the government of Taiwan dealing exclusively with indigenous matters. Since its inception, there has been greater awareness of the significance of museums as spaces to display and explore cultural differences (Varutti, 2013, 247). Museums devoted solely to the representation of indigenous groups have been created, while in existing mainstream public museums the exhibition of related material has been significantly expanded. This includes re-examining the national history of Taiwanese indigenous communities and their distinctiveness from mainland China (Varutti, 2013, 248). Collaborations between indigenous groups, initiated by both government and individual museums, have been successful. Additionally larger museums are working with smaller institutions to provide resources and expertise which assist in increasing representation of groups which might otherwise be restricted by time and finances (Varutti, 2013, 249). However, there have been challenges identified with establishing cultural representation and integration into permanent gallery settings as opposed to temporary exhibitions. While historical representations of indigenous communities are being displayed, the current issues facing many groups (high unemployment, AIDS levels, poverty, prostitution) are conspicuously absent from exhibitions, indicating a lack of commitment to contemporary social change. Finally, there are very few numbers of indigenous curators or other influential museum staff. This demonstrates a disparity between the heightened awareness of the role of a museum in social inclusion, and actual cognitive participation in concrete decision-making processes that embrace true representation and institutional change (Varutti, 2013, 251).

Other case studies parallel the Taiwanese reports around addressing inclusivity. Three Canadian museums and heritage sites have assessed theoretical and practical levels of community engagement with Blackfoot First Nation groups. Collaboration methodologies and the inclusion of traditional tribal protocols and practices have been evaluated. Referencing Clifford's influential work on the term *contact zones*, these case studies detail the efficacy of the Canadian Museums in creating positive interaction

experiences so all visitors have the possibility of establishing meaningful contact with the institution. Such communication allows for shifts in power balances and social structures, with two-way relationships forming (Onciul, 2013, 83). While contact zones are acknowledged, Onciul prefers the term *engagement zone* to also include intercommunity work that takes place when cross-cultural interactions occur. Regardless of these differences, both theories emphasise the agency of individual participants, with the larger underlying principles of both used to analyse the case studies (Onciul, 2013, 83). Examples cite how in some instances Blackfoot people bypassed mainstream museums to create their own self-led cultural centres. Many of the public museums have also actively initiated engagement and collaboration with their local indigenous communities, albeit at varying levels (Onciul, 2013, 86-87). The representation of Blackfoot staff involved in museum hierarchy is highlighted and considered key to shifting power balances and adopting authentic inclusive changes (Onciul, 2013, 93). Onciul notes that museums making alterations at an organisational level determine the degree of community engagement possible and change so that traditional systematic forms of consultation do not continue to disadvantage communities (Onciul, 2013, 94). Museums that work with the populace, through honest communication strategies, create opportunities to incrementally change existing power relationships. This increases cross-cultural engagement and empowers social groups (Onciul, 2013, 94).

Shared authority is a term used to describe the relationship between creators of cultural institutional narratives (such as historians and curators), and community members who contribute to those narratives through sharing lived experiences and understanding. Practical applications of shared authority are particularly visible in museum environments, and are used by Mary Hutchison to examine and assess exhibition development in Canberra (Hutchison, 2013, 143). Of particular interest to the author is the visible agency of both curators and collaborators in final exhibition outcomes. Specific mention is made of design elements, material selection and interpretation strategies that clearly display such visible agency (Hutchison, 2013, 143). Of note is her criticism of the term *community engagement*, which Hutchison argues has become more of a marketing scheme than a method of democratic practice in museum environments (2013, 160). Genuine shared authority is intended to connect with and explore differences in skills, knowledge, culture, and viewpoints. This recognises that distinctive qualities between groups and individuals is a positive aspect to be celebrated within the

environment of exhibition development (Hutchison, 2013, 143). In order to work with as much shared authority as possible, the unique skill sets of each participant should be tacitly employed, so together a cohesive and collaborative product can emerge (Hutchison, 2013, 146).

Civil engagement is used to describe a model whereby museums seek to engage with broader aspects of civil society, rather than being a public body merely acting as an authority-holder (Black, 2010, 130). Museums have opportunities to move, excite, empower, and grow the individuals and communities they interact with (Black, 2010, 131). They are able to enhance the wellbeing and social inclusion of their community base by applying theoretical principles to significantly help define identity (Black, 2010, 131). Accounting for such capacities it follows that museums hold great responsibility to the communities they serve, being funded in part to build civil engagement. There is a mutual-dependency operating, as increasing a museum's profile and relevancy within its geographic and community context provides returning and highly engaged audiences. This in turn demonstrates relevance to funding bodies (Black, 2010, 131). Black argues that five key factors enhance a museum's place in civil engagement; memory, learning, social interaction, democracy, and responsiveness. Together these aspects augment social, cultural, and generational interaction – museums therefore provide opportune spaces for the enhancement of inclusivity, creating dialogues around difference and potentially contentious issues (Black, 2010, 138). Once again, it is emphasised that for a dedicated response to working meaningfully with and for communities, museums must be prepared to undergo changes to wider internal and external museum culture (Black, 2010, 142).

The case studies discussed demonstrate theoretical analyses of museum efforts towards increasing social inclusion and encouraging equality. They reflect the auspices of a human rights focus in general, where sets of values and beliefs around standards of fairness and social equality are described, with widespread support between countries, governments, social groups, and cultures (Sandell, 2012, 195). When human rights changes are manifest at a localised level, they can in some instances prompt highly visible clashes, because they illuminate conflicting moral perspectives. While museums are largely risk-averse institutions, the case studies and theories referenced earlier in this literature review do show that museums are actively working towards addressing

grievances, and constructively participate in discourse around diverse contemporary social issues (Sandell, 2012, 195). The dynamic nature of such discourse stems from tensions between socially or culturally constructed moral standpoints, and the idea of universal application of those rights (Sandell, 2012, 197). The discussion around this conceptual ideology of human rights recognises historical, cultural and geographical locations. This political and social dimension orientates museums uniquely towards challenging social justice roles within a society, as well as actively negotiating understandings and institutionalised concepts of rights. Successful adoption of these principles can influence the everyday experiences of marginalised groups in positive ways (Sandell, 2012, 198-199). Museums must grapple with the interests of their stakeholders when intending to work within a mandated human rights framework, as institutions working within a human rights framework push professional and political boundaries when moral activism is exercised (Sandell, 2012, 212). This could potentially invite both painful and damaging controversy. Museums can seek to mediate this, however, by framing possible conflict and counter opinions as an inevitable part of the process when working to advance concepts of human rights (Sandell, 2012, 212).

The case studies also corroborate parallels that can be drawn with existing issues of disability accessibility, and therefore have relevance for issues around this form of access for museums and galleries. Examples of museum contexts in Taiwan using exhibitions as areas for increased intercultural engagement and understanding were positive. This tends to happen on a temporary basis though, and does not then further translate into increased levels of staffing representation of source communities. Similarly, efforts by Canadian museums to increase access to museum narratives for Blackfoot First Nations through shifts in power structures are commendable. These demonstrate commitment to authentic collaboration with communities, and acknowledge that traditional hierarchies of consultation do not result in effective long-lasting representation strategies. As the next section of this literature review will confirm, there are numerous similarities with concepts of the social model, between these perspectives and those in the field of disability studies. This commonality therefore has strong relevance for the topic of disability accessibility in museums, particularly when considering existing models of engagement for practitioners to draw on.

Disability Studies

Before describing the scope of disability studies it is necessary to first define the nature of disability itself. Disability as a term connotes that something is awry, be it physically, mentally or financially – the experience of being disabled suggests marginalisation within society, culture, or political structures (Goodley, 2011, 1). Disability is globally extant, more so in some areas than others, and becoming increasingly visible (Goodley, 2011, 1). Current international estimates place numbers of disabled people at over 1 billion, or 15% of the global population, which makes disabled people the world's largest minority community (World Health Organisation, 2014). These rates are rapidly increasing due to aging populations and burgeoning chronic health conditions (World Health Organisation, 2014). New Zealand, in line with changing international contexts, will see a rapidly aging populace inflate these figures further. (Statistics New Zealand, 2013).

Disability studies identifies a breadth of theory, research and practice that shifts perceptions of disability from personal narratives of tragedy to a cultural and political pathology (Goodley, 2011, xi). As a field, disability studies responds to the social and political constructions of people with disabilities being subject to discrimination, patronising attitudes, fascination or sympathy (Goodley, 2011, xi). Such discrimination stems from processes of oppression and exclusions that are institutional as well as individual, and are regardless of location or surrounding economic or cultural conditions (Roulstone et. al., 2012, 3). Disability studies is diverse and multifaceted in approach as it seeks to understand the lives of disabled people and to reappraise cultural understandings of disability (Roulstone et. al., 2012, 4). It has grown through close associations to disabled people, disability organisations and political movements. It has also developed to become interdisciplinary, providing multiple pragmatic solutions to contemporary issues (Roulstone, et.al. 2012, 4).

The social model of disability puts forth that cultural constructions build negative attitudes towards people with impairments. It asserts that disability exists in the public domain as a social construct, rather than from the perspective of an individual person with an impairment to be 'cured' (Dodd et. al., 2013, 6). Western history is riddled with oppression and prejudice against people with disabilities; the Industrial Revolution

cemented the institutionalisation of these discriminatory practices, and provided a catalyst for the systematic withdrawal of disabled people from everyday life (Barnes, 2012, 13). A proliferation of services offered by communities and nation-states since World War I are built on models of disability as an individual medical problem – due in part to perceived political responsibilities towards those injured during the war.

The development of a medical model of disability was instigated in the health and medical fields. It focused on the issue of medical impairments as a problem that required adaptation by the individual (Hughes, 2010, 508). In response to this perception of disability, the latter half of the 20th century saw an increase in the political activism of disabled people and the organisations they associated with (Barnes, 2012, 13). Thus a distinction was clarified between the biological conception of an impairment and the social construction of disability - describing the limitations caused by contemporary social platforms which exclude people from full mainstream participation (Hollins, 2010, 228). The concurrent rise in academic theory around the subject of disability, not just from a health-sector perspective, saw consolidation of the social model of disability. Disability studies research seeks to highlight the barriers put in place by cultures and societies as opposed to limitations individuals put on themselves, so that practices and policies that enable the dismantling of such obstacles can be built (Barnes, 2012, 18).

The social model informs the language used in this dissertation. In New Zealand as well as internationally, two approaches exist around the terms used to describe disability: person-first language, and the social model (Arts Access Aotearoa, 2014, 80). Unlike the medical model, both perceive society as the disabling factor. In this document efforts have been made to use the social model, to align with the New Zealand Disability Strategy and the Office for Disability Issues, which uses the term ‘disabled people’ to describe those who have been disabled by societal barriers (Sullivan, 1991, 255). The alternative, person-first language, is also popularly used and is designed to focus on individuals and their abilities first. It affirms a definition that is not centred on physical impairments – here, the terminology would be ‘person with a disability’. The Web Questionnaire used as a research method in this research project was written using person-first language. However, some people see person-first language as the erasure of an important part of their identity. Consequently, this dissertation is written up in line with recommendations from disability sector organisations as well as disabled people, in

full recognition of the fact that this language may not be used by some disabled people to describe themselves.

The social model currently sits as the dominant framework in disability studies, although critiques of the model and its core assertions certainly exist. While acknowledging the importance of personal experience, and the role this social model has played in influencing policy, the social constructionist viewpoint has however been criticised as overly dismissive of the scientific and healthcare perspective (Dewsbury et. al., 2004, 146). While the political purposes are treated as sound, the practical applications of the theory (for instance the design of assistive technologies) can require alternative frameworks for analysis (Dewsbury et. al., 2004, 146). Criticism has also been levelled against the social model for failing to centrally address the formation of a positive personal and community identity (Swain and French, 2000, 571). A more affirmative model would address such issues by celebrating the positive aspects of disabled identity and rejecting presumptions of personal tragedy. In this framework disabled people are viewed as self-determined arbiters of their own lives, cultures and identities (Swain and French, 2000, 578). The social/medical model dichotomy has also been criticised for being too polarised; increasingly researchers are acknowledging that the experience of being disabled is complex and dynamic (Martiny, 2015). The interactions between individual intrinsic physical factors and external social constructs can create a continuum of disability (Martiny, 2015). An alternative or additional framework is a phenomenological approach. Here, priority is given to first-person narratives around lived experience with disability, emphasising the importance of personal aspects of disability (Martiny, 2015).

These perspectives on disability have applications for this research through as they inform how processes and methods are designed, as well as how and why information is collected from different interest groups. The research design will demonstrate how an application of the social and phenomenological models was applied to this project and the effects of this on results.

Accessibility and museums

Thus far this literature review has explored frameworks from museum studies and disability studies. It now investigates specific examples of where the two fields interact. Increasing international awareness of the need for literature on museum accessibility has seen a growth in academic texts on the topic. These resulting works utilise a number of different research frameworks around museums and disability representation. Although important, these are outside the scope of this dissertation for reasons explained in this section below.

The social model of disability has exerted a level of influence in the development of emancipatory research methods. These methods seek to give disabled people a voice in the research agenda, and focus on benefits and outputs obtained from the investigation targeted towards the groups being researched (Hollins, 2010, 230). An emancipatory research model aims for research outputs that are used as active tools for societal change and improvement (Hollins, 2010, 231). Hollins argues that emancipatory methods can inform the ways museums develop relationships with communities of disabled people, as they go beyond a focus on physical access and aim to create genuine collaborative dialogues (2010, 235). Hollins speaks to the museum as a context, exploring how the sector has been involved with and responded to disability issues. She pertinently references that in 1990, disability activist and academic Mike Oliver declared disabled people had been denied access to key political, educational and cultural institutions that allowed for full participation in society. Hollins asserts that provisions for disabled people are still variable today (2010, 235). While issues of access and inclusion have developed in some museums, few institutions take a holistic and comprehensive approach to their planning and practice. Improvements in accessibility are continuing to be small in scale and fragmented in delivery (Hollins, 2010, 236).

This chapter opened in Kudlick's personal account, which distinctly follows a phenomenological approach with a first-person narrative from a vision-impaired person visiting a local history museum. Other authors have used this process when examining disability access in museums. Poria, Reichel and Brandt consulted with, and interviewed, Israelis with physical and sensory disabilities. Despite museums publicly advertising their own efforts to address accessibility issues, interviewees shared being

consistently unable to experience museums in ways they wanted to (Poria et. al. 2009, 120). Non-physical components of the museum visits, such as staff attitudes, impacted significantly on successful experiences for participants. These findings, and Kudlick's first hand account referenced above, indicate that physical access is only part of what constitutes a barrier to access. A suitable social environment is paramount when creating an inclusive public space for diverse audience members. The authors suggest this is unlikely to be changed by legislative processes that focus on the physical environment alone.

It is important to distinguish the various ways museums are approaching their relationships with disabled communities. As the topic of inclusion has become widely considered, and the benefits of this acknowledged, concerted efforts have been made towards increasing the visitation of previously excluded audiences. Environmental and programming efforts have focussed on increasing accessibility for disabled people (Sandell and Dodd, 2010, 10). However, broader aspects of access beyond physical mobility requirements are not always getting adequate attention. More active collaboration has, however, become normative for other marginalised community groups. In these cases inclusion is often extended to developmental areas, such as exhibition programming, with both historical and contemporary representation considered important (Sandell and Dodd, 2010, 11). Much of the work discussed in the museum studies section of this literature review focuses on inclusive and collaborative practices. These increase access of marginalised communities to museums, and empower said groups to present their own stories within such institutionalised spaces. Museums, on the whole, have not applied similar modes of working to disabled communities as they have other minority groups. Staff hesitation to enact these practices appears to stem from possible offence to disabled people through the use of out-dated language or stigmatising representations, or general apprehension around the ability of other museum visitors to behave appropriately around the subject matter (Sandell and Dodd, 2010, 12). While criticisms of focussing discussions only on access are valid, the lack of advice and guidance for staff is contributing to the reluctance of museum staff to broach more complex topics around disabled experiences. By addressing issues of access, which itself has layers of meaning, staff empathy needs to broaden and attitudes reconfigure (Sandell and Dodd, 2010, 12).

The dual definition of the term ‘access’ speaks to the tension arising when museums claim they are accessible to all as part of a conceptual museological framework. Practitioners need resources to redress exclusion of potential visitors, and to be able to balance this with provisions for adequate access to collections (Graham, 2013, 65). Graham also states that museum priorities need to take into account parameters regarding the safety and continued existence of valuable exhibits. Disability activists have used the term ‘access’ pointedly over the past few decades to exert pressure on public spaces and organisations to remove barriers. Some museums have worked to address the physical components of accessibility as a result of this pressure to comply with respondent legislation around guaranteeing access. Ramps have been built, font size and type on exhibition labels have been monitored, and Braille signage has been added to walls. Tactile opportunities for experiencing collections and exhibits have been developed, sign language tours are more common, and consultations with advisory panels on disability access issues are implicit in exhibition development at a number of institutions (Graham, 2013, 66).

According to Bunch and Majewski, accessibility in a museum context extends far beyond structural approaches to physical spaces. To fully embrace the concept of access museums must consider more than what makes them just legally compliant (Bunch and Majewski, 1998, 153). Museums can respond to demands for increased disability access through ensuring direct interaction with disabled visitors. The public facing role of front of house workers means those staff should be encouraged to be active enablers of access in the museum space, through their day-to-day interface opportunities with visitors (Graham, 2013, 75). Moving further than the structural components of access, such as ramps and suitable restrooms, includes consideration of a multitude of impairments like sensory or learning disabilities when designing and developing exhibitions (Bunch and Majewski, 1998, 153). The authors state that differences in learning styles should be considered by presenting information that appeals to multiple sensory responses, and which accurately represents the history and resources of disabled audience members (Bunch and Majewski, 1998, 154). From managerial to administrative to curatorial to educational, a philosophy and awareness of diverse audience needs will result in more accessible institutions serving all potential visitors (Bunch and Majewski, 1998, 159).

Some literature exists relating to the accessibility of tourist attractions, which includes museums. Zenko and Sardi discuss, from a tourism studies perspective, how increasing socially responsible behaviour reduces the prevalence of discriminatory or inequitable behaviour displayed by employees of such organisations (2014, 652). A holistic approach will provide benefits for both disabled people and tourism organisations themselves. Disabled people are often poorly integrated into tourism methodologies. Groups of people with various impairments constitute a huge potential set of clients and staff members across many tourism fields (Zenko and Sardi, 2014, 661). Tourism enriches the lives of participants by allowing them to access and experience a diversity of people, nature and the environment (Zenko and Sardi, 2014, 658). By including disabled people and their family members or companions, tourist organisations stand to profit economically, while participants (both hosts and visitors) will benefit from the increased social inclusion. Accessible tourism allows for destinations, services, and recreational facilities to be usable and enjoyable for all people. Museums (as a component of tourism sites) have a particular interest in, and often-designated mission statement, to be available and accessible for everyone. Therefore, issues of access should be paramount to their working practices.

While a wide-ranging survey on museum access issues and audience development has not been undertaken in the context of Aotearoa New Zealand, one such report has been produced in Australia. Published by Arts Access Australia, a national organisation advocating for increased access to the arts for disabled people, the research project assesses the current state of disability access to heritage institutions, and offers suggestions for how access to museums and galleries can be increased (Wreford et. al., 2010). This research surveyed a number of Australian museums and galleries, the most proactive of which received public funding (Wreford et. al., 2010, 7). The report illustrates a clear lack in provision of disability resources and strategies (Wreford et. al., 2010, 8). It also highlights an inadequacy of targeted financial support from governmental bodies to develop facilities and programs that increase accessibility for disabled people, which is particularly evident in regional and rural areas. The report states that responsibility for enabling access lies with all stakeholders involved in exhibition processes, which includes addressing the very low levels of employment of disabled people in museum and gallery sectors. Recommendations made include: the development of industry-wide accessibility guidelines; the governance skills of disabled

people identified and enhanced through mentorship and leadership programmes; that disability access be adopted at strategic planning stages; and that resources for museums be easily accessible in one place (Wreford et. al., 2010, 21). The report is comprehensive and is supplemented by the thorough, pragmatic and practical recommendations made from the outcomes of the research. For these reasons it provides a useful model for examining the topic of disability access from a New Zealand context.

In New Zealand, Arts Access Aotearoa (Whakahauhau Katoa o Hanga) is an organisation advocating for people as both creators and audience members, who experience participation barriers around the arts. It primarily serves people with physical, sensory or intellectual impairments, individuals and organisations in the community and professional arts sectors, and mental health service users. It also helps facilitate the arts as a rehabilitative tool for prisoners. They have produced a practical guide designed to provide strategies for varying organisations and individuals around encouraging access (Arts Access Aotearoa, 2014). In the 2014 edition an entire chapter is included on how to increase such measures specifically in museums and galleries (Arts Access Aotearoa, 2014, 45-51). Additionally, they provide snapshots of how other venues, organisations and projects have embraced accessibility successfully. In 2011 they completed a survey to assess accessibility levels in arts organisations and venues around New Zealand, but did not include non-art museums in their investigation (Arts Access Aotearoa, 2011).

Summary

Museum Studies describes the wide range of theories and methodologies that have been developed to critically inform working museum practice. This dissertation is primarily concerned with subsets within the field that concern theory around audience development, visitor research and the social responsibility of museums. These tend to stem from the framework of New Museology. As New Museology posits the viewpoints of audiences as an integral aspect of community engagement, as well as increased representation in narratives and staffing positions, this is significant for the topic of this dissertation given its focus on access. These components hold specific resonance for this research project as it considers accessibility in a broad sense, in particular that access for

disabled people to cultural organisations is a human right and therefore important for museums as socially responsible sites to consider.

Disability Studies is a branch of theory developed in response to the social and political systems of oppression of disabled people, historically and contemporarily. This dissertation is informed by the social model of disability, which positions disability as a societal and cultural construction rather than the result of an individual's impairment. The barriers faced by disabled people are therefore established by society and can be broken down by actively understanding their needs. This has applications for museums in their own approaches to becoming more accessible institutions. By positing disability as institutionally created, museums and galleries can critically examine their own practices to identify barriers to access that exist within their own organisations.

With little published research currently available on the topic of disability access in New Zealand's heritage sectors, most critical literature is written from the context of other countries. Although these suggest insights into the experience of visitors in the UK, USA, Slovenia, Australia, and Israel, these do not necessarily mirror those of sector visitors throughout New Zealand. This dissertation seeks to provide a broad record of the current state of accessibility in New Zealand museums, and uses a definition of access that involves concentrating on the engagement levels museums currently display towards disabled communities. I believe that focusing on museum accessibility for disabled people is a suitable launching pad for future research, and the most appropriate course for this dissertation. I hope the results will help inform practitioners of current baselines standards and thus address the disparate levels of inclusivity afforded to this populous yet marginalised group.

Research Design:

The previous sections introduced the research project and literature that informs it. This section outlines the research design, including research questions and the methodological frameworks that have been used to investigate them. The foundations of this project are in emancipatory research methods, intended to ensure collaboration with

and accountability to disabled people throughout the process. These principles will be explained in further detail throughout the remainder of this chapter.

This study draws from the research aims and methodologies employed by Arts Access Australia in their 201 sector survey and consequential report, as this provides a proven foundation and framework for my own research.

My primary research question is: *How are museums in Aotearoa New Zealand engaging with their disabled community members?*

To answer this question I employ a number of secondary questions:

1. *How do disabled people currently experience museums, and what changes to existing accessibility strategies would they like to see take place?*
2. *What kind of information is publicly and readily available about accessibility in NZ museums?*
3. *How are disabled people included in museum policy documents?*
4. *How are public and education programmes being constructed to include communities of disabled people, and encourage access?*

Aligning with the principles of emancipatory research, as outlined by Hollins (2010), I have ensured that the outputs of my research are presented in consultation with disabled people and stand to benefit those involved with the process. Social models of disability are at the core of these practices, with the objective being to remove barriers from the research process (Hollins, 2010, 230). As explained in the literature review, the social model of disability views disability as societally constructed, as opposed to a problem with individual people. As emancipatory research principles were developed to advance the rights of people with disabilities, and shift power structures between researcher and those being researched, it is important to address that I am not living with any impairment. A number of critics have argued it is impossible to conduct emancipatory research practices if the researcher is non-disabled. Others, however, such as Barnes and Shakespeare refute this, stating that due to the huge range of impairments people live with, not even someone living with a disability can comprehensively appreciate the needs of someone else living with an impairment different to their own (Hollins, 2010,

234). With that being said, as I do not have any lived experience of any disability it has been crucial to remain in conversation with disabled people throughout the entire process. This was done to ensure power dynamics in the research process were not unfairly skewed. I believe these aims grounding my research have been achieved by being judicious of, and accountable to, people with lived experience of disability throughout all stages of the research.

The emergence and causes of emancipatory disability research have parallels within the museum studies field. Museums and their source communities have traditionally seen power relationships be controlled by institutions and industry professionals. These interactions have gradually been changing to become more democratic, with increasing authority given to voices from source communities (Hollins, 2010, 235). However, there remain many instances of one-sided directives. Research utilised to inform exhibition curation, interpretation, or education is still frequently undertaken for the benefit of the museum, without specifically targeting the interests or concerns of focus communities. Emancipatory disability research responds to situations where research practices assist both researcher and groups of disabled people (Hollins, 2010, 237). It is important to consider an agenda that is cognizant to the needs, wants, considerations, concerns, and values of disabled people. This research project has been structured to ensure these objectives were in place from its inception. Furthermore, following the conclusion of this dissertation I will undertake ongoing work to distribute the results to museums and galleries around the country, as well as enacting all recommendations in my own workplace, to ensure that those who participated in the research can see tangible positive change as a result in the wider sector. As one way to ensure ongoing benefits for the focus group and interview participants as well as their communities I will be providing an executive summary of results, including recommendations and support services, to museums that indicated an interest in this during the overall research project.

Qualitative research was conducted to investigate the research questions. Merriam defines qualitative researchers as those “interested in understanding how people interpret their experiences, how they construct their worlds, and what meaning they attribute to their experiences” (2014, 5). The focus of qualitative research is on meaning and understanding. This research investigated how audience members with disabilities experience museums in the context of Aotearoa New Zealand, and the varying ways

those institutions are responding to the needs of their disabled communities. I believe it is important to contribute to the field of museum studies with a body of research on this topic, founded upon qualitative ideals.

A focus group and interview phase, with disabled people and members of disability organisations as participants, grounded this research. This allowed me to canvas desired outcomes of the project, as well as avenues of interest for those involved. The results of this focus group informed a series of questions, which became part of an initial survey of open-ended questions for museums. Denscombe states that focus groups are small groups of people who, with a moderator, explore attitudes, feelings, and reactions to concepts around a particular topic (2010, 177-178). Focus groups are particularly useful for exploring areas of new research to quickly gain an idea of how issues are perceived by certain people. They make use of group dynamics, with interactions between group members forming a means to generate information (Somekh and Lewin, 2011, 62). This allowed me to ascertain how many standpoints are shared among participants, as well as determine where points of view diverge. Focus groups are relatively quick to conduct, and large enough to gather a scope of viewpoints and opinions present within the group. As the moderator I was responsible for organising the session, as well as keeping discussion on track, rather than directing conversation. Moderators need to ensure that all participants' viewpoints are equally expressed. This aligns with emancipatory research principles. The focus group investigated viewpoints and responses around personal histories and expectations of accessibility, which provided the basis for my museum survey questions.

Participants in this Wellington-based focus group were contacted in association with Arts Access Aotearoa and Victoria University of Wellington Disability Services (VUWDS). VUWDS is a university student support organisation that works with disabled students and the wider university environment to create an accessible and inclusive learning institution. Arts Access Aotearoa was also consulted throughout the project to help guarantee credibility of my emancipatory research process. This was done through regular communication both online and in person with members of staff (particularly in the early stages of project design) and engagement in workshops that Arts Access Aotearoa ran throughout the year. Participants sourced through Arts Access Aotearoa were contacted individually based on prior interest in research participation

and the cultural sector. Those found using Victoria University of Wellington Disability Services were notified of the focus group through publicity on social media. The varying availability of potential participants meant the size of the focus group was limited to four people. While this was a relatively small group size, those present were able to speak to issues affecting people with physical, sensory, and learning disabilities, as well as Autistic people and people with chronic illness. All participants were based in Wellington at the time of the focus group, and ranged in age from early 20s to late 60s. All but one participant was female, and all were existing regular museum visitors. In order to increase the diversity of this sample I chose to interview a participant who expressed an interest in participating but could not make the focus group at a time suitable to them. While this meant we were unable to build off group dynamics as was possible in the focus group setting, the depth of conversation allowed for by the interview process provided data that helped significantly with forming the subsequent research stage.

The small number of research participants at this stage of the project was not a barrier to gaining useful results. Theory on sampling posits that accurate findings can be deduced without needing to collect data from every member of a population being researched – rather, it relies on the idea that a sample can be representative of the views of this whole (Denscombe, 2010, 23). Non-probability sampling selects research participants through non-randomised methods, instead selecting participants based around specific criteria (Denscombe, 2010, 34). A specific aspect of non-probability sampling is the technique of purposive sampling, which utilises the principle that the most useful information can be gathered through selection of participants based on their knowledge and experience of the topic being researched, as well as ensuring that as wide a cross section as possible is represented in a small sample size (Denscombe, 2010, 35). This purposive sampling method was appropriate as the participants in the focus group and interview all had experiences with museums and disability advocacy that meant their contributions were critical for the research.

Using the focus group and interview responses I initiated a web questionnaire to send to museums and galleries across New Zealand. This was done through first summarising focus group and interview content and sending the synopsis to the original participants with lived experience of disability, to ensure that the conclusions reached were

indicative of their perspectives. The resulting survey allowed for the collection of a wide range of information for later data analysis. Questionnaires are appropriate as a research tool, and are most useful, when conducted with large numbers of respondents in varying locations and contexts (Denscombe, 2010, 156-157). The data collected from this research method is best analysed when responses offer straightforward information (Wolfer, 2007, 289). The question design for the survey was purposeful to reduce the likelihood of ambiguous answers. As I collected factual information to be collated, around the methods in which museums are engaging with disabled people in their communities, the questionnaire was not reliant on the personal attitudes of the staff members who responded. This ensured a stronger reliability of information than an opinion-orientated questionnaire would have provided for this research topic (Denscombe, 2010, 157).

The questionnaire consisted of a range of closed and open-ended questions and was sent to a wide range of public and private museums throughout New Zealand. All museums and galleries with a listed email address on the Museums Aotearoa Directory were emailed an individual link to the survey, created using the Qualtrics Survey Tool, a web survey platform provided by Victoria University of Wellington for students and staff. The most appropriate individual contacts to send the questionnaire to in certain institutions were determined through consultation with Arts Access Aotearoa as well as my own pre-existing knowledge. For others where there was no specific targeted contact, the link was sent to a generic enquiry email. This resulted in the link being sent to 405 working email addresses. Of those, the software showed that 157 opened the email with the link, and of those 41 completed the actual survey. This low response rate could be due to time constraints of staff members approached as well as a self-perceived lack of ability to answer the questions comprehensively. Strategies to increase the response rate could have included follow-up reminders as well as asking sector organisations to contact institutions on my behalf. However, time constraints precluded this. The implications of the respondent museum sample size are that some museums and galleries with interesting and relevant projects may have not been included in the research sample. The museums that did respond ranged in size from micro to large, in focus from contemporary art museums to small-scale targeted social history museums, and in region from Northland to Southland. A more thorough breakdown of demographics and how these correlate with the wider national picture is discussed in

Chapter 3 – positively, these show that the sample does match the national ratios demographically.

Merriam states that the credibility of a study relies both 'upon the ethics of the investigator', as well as ensuring the use of methods that are rigorously justified. A meticulous knowledge of qualitative research is also important (Merriam, 2009, 229). Some strategies for ensuring validity of this research project have included triangulating multiple sources of data, confirmation of results with research, critical reflexivity on my own role as a researcher, and peer reviews with my colleagues and supervisors throughout the research process. Merriam argues that the success of research depends on the ethics and values of the researcher (2009, 228), so I have worked consistently to ensure the processes undertaken were as robust and ethical as possible.

Ethical approval for this research was granted by the Victoria University of Wellington Human Ethics Committee prior to any interactions with the people involved in the research process. As part of the ethical considerations of this project I obtained informed consent from all participants, both in the focus group and interview stage as well as the survey. Therefore all who participated in the research were involved willingly, and competently give permission to be a part of the research. This consent was obtained voluntarily, and participants were all informed about the potential benefits and burdens of the research, as well as notified of the proposed methodologies.

A component of ethics in research is ensuring reflexive practice. Reflexivity refers to a researcher's ability to be reflective and aware of their own perspectives and the impact this may have on research undertaken. While historically the concept of a researcher as unbiased and objective was considered sound, this has been discredited given contemporary understandings of the complexities of constructed identities. To achieve best practice in research methods a researcher is expected to critically examine their role in relation to the investigation being undertaken, the aims of the study, and the impacts they may have on the process (Elliot, 2005, 153). Reflexivity is particularly important when undertaking qualitative research, and it was vital in my own process in order to align with emancipatory research practices and action research principles. From designing research, to gathering data, to the analysis and interpretation of it, reflexivity is critical for ensuring an ethical and credible result. At all points within this research I

endeavoured to remain aware of my personal biases, beliefs, and how my own experiences could be impacting upon the process. As mentioned above, I do not have lived experience of disability; so remaining conscious of my lack of expertise in this area was critical to ensuring the implementation of emancipatory research methods and a reflexive research practice. The results of this research are drawn from my own interpretations of data gathered during both collection phases, but at all times I have strived to represent the opinions and responses of focus group and interview respondents, as well as museum and gallery participants, in a respectful and accurate manner.

Data from each research stage necessitated systematic analysis. Denscombe writes that qualitative data analysis “can take a number of forms, reflecting the particular kind of data being used and the particular purposes for which they are being studied” (2010, 272). Hence there is no straightforward approach to the analytical process. A general principle is that the analysis is an iterative exercise, where data collection and analysis phases occur together, and can help inform one another. The analysis is also inductive, whereby it moves from the particulars and individual pieces of data, to more generalised statements around the topic. Finally, qualitative data analysis is researcher-centred, as the values and experiences of the researcher inform and influence the analysis. This is why reflexivity is essential.

As such there were a number of stages involved in evaluating and analysing the data collected from my research process. Denscombe sets out a prescriptive process, which is similarly aligned to that of other authors writing on the topic of social research (2010, 240). Firstly, the data must be prepared for analysis. In order to do this, original data was protected and backed up, as it is irreplaceable. The back ups were stored separately to the originals, in a safe location. The data was then catalogued in a methodical manner and indexed for ease of access later on in the analytical progress.

Secondly, any audio needs transcription and annotation. For the first focus group and interview stage of the research the raw data was in the form of an audio recording, which I then transcribed. Both the recordings and transcriptions were backed up securely. For data analysis of both the focus group and interview I relied on a full transcript of the session, as well as notes taken at the time to supplement my

understanding of group dynamics or inflections in speech. Berg states that both the transcript and observations, when taken together, form a complete picture of what transpired in the discussion (2004, 180). For both transcriptions I also wrote informal annotations to refer to later, which denoted information not contained on the recording, or particular points that cannot be transcribed, such as long silences and gestures.

Finally, I undertook a grounded theory approach to analyse the data. This involved a detailed scrutiny of the texts (questionnaire results, focus groups transcripts and notes, and interview transcripts), alongside a systematic process of coding and categorizing the data, which was used to ascertain more generalised results. This method is a recognised strategy in qualitative research, as it is inductive and allows for rigorous examination of the data presented (Denscombe, 2010, 123). It is also well suited to exploratory research as there is also a measure of flexibility in the analysis process. This is useful as I have no basis of prior research to inform predictions of the results (Denscombe, 2010, 123). A grounded theory approach is complex, and it is important to be explicit that the generalisations or conclusions I have found are abstracted from the data and limited case studies of investigation. This will be reiterated in the final stage of this dissertation.

As this dissertation forms only part of an overall degree its potential scope is limited, particularly with regards to time. If this project were to be undertaken on a broader scale it would be worthwhile completing the process with an additional action research phase, to explore the practical implications of recommendations from the previous chapters. Action research describes an inquiry process designed to support practitioners to be collaborative and reflective in their approach to specific problems. Those traditionally perceived as 'subjects' are instead viewed as equal and full participants in the research process (Stringer, 2007, 10). This aligns with emancipatory research principles. More of a strategy than a prescriptive method, action research is conducted around a set of principles that practitioners can apply to real-world problems using varied methods of data collection deemed appropriate for each situation (Denscombe, 2010, 126). I had hoped to be able to conduct a small pilot project exploring these themes at the Whanganui Regional Museum (WRM), where I am currently employed as the Programmes Officer. However, it became quickly evident that the communities of disabled people I approached needed a much longer timeframe to prepare than the dissertation requirements allowed for. Therefore, the pilot programme, after being run

successfully in February of 2016 and with positive feedback from both the WRM and the community it was tailored for, now forms part of an ongoing wider examination of accessibility strategies at the museum. While this action research process could therefore not form part of this dissertation, it does demonstrate an ongoing positive effect of the results discovered in the dissertation that follows.

Conclusion:

This chapter has outlined the existing theory and literature that informs the following dissertation project, as well as the research methods and justification for their inclusion in the process. The literature review combines theory from both Museum Studies and Disability Studies to demonstrate the relevance of both for museum practice, particularly in the realm of audience development, visitor research and the social responsibility of museums. The practices and principles of New Museology are applied specifically to issues around disability accessibility, through the acknowledgement that as museums have grown to become more socially and politically responsible organisations their responsibility to their communities has also increased. This research project applies the social model of disability to a museum context, exploring how the resulting perspective of disability as a cultural and societal construct creates barriers to access to cultural institutions, and in doing so prevents communities of disabled people from engaging as visitors. The literature review also explores international case studies around issues of access to museums by members of minority communities, and draws comparisons to potential similarities that these may hold for working practice when engaging with communities of disabled people.

The research design lays out a process founded on principles of emancipatory research methods, as well as an explanation of how these original aims could be further explored in research projects with longer timeframes and a larger scope. The following chapters lay out the results of both the first and second research phases, as well as detailing the conclusions that can be reached from exploring this data. Chapter 2 details the findings of a focus group and interview stage with members of disability communities and organisations. This creates a baseline record of lived experience, upon which a nationwide survey of museums and galleries was developed. The results of this survey

are presented in Chapter 3. Finally, Chapter 4 explores the conclusions that can be gathered from examining both phases together, as well as comparing the results to international examples.

Chapter 2: Lived Experience of Disability Access to New Zealand Museums

This chapter introduces the perspectives of selected disabled museum and gallery visitors, established through focus group and interview methods. Analysis establishes key areas of concern for these visitors around museum disability access strategies, and provides the reader with an introduction to approaches to address the needs of diverse visitors. This chapter also provides the grounding for subsequent chapters, in that analysis of these focus groups and interviews constitutes the basis for data gathering in the survey stage of this project.

As my primary research question is ‘How are museums in Aotearoa New Zealand engaging with their disabled community members?’ it follows that establishing the perspectives of said communities is of utmost importance. In an effort to practice research aligning with emancipatory methods, I decided to begin with focus groups of participants whose feedback would form the basis for any research going forward. The findings below are separated into broad themes of building access, accessible exhibition design, public programmes, digital content, and staff attitudes and responsiveness; specific conversation points are highlighted.

The conclusion will examine the key themes that emerged from analysis of the focus group and interview data.

Focus Group and Interview Themes:

The focus group and interview questions were designed to establish firstly how participants had experienced museums and galleries in the past, and how they felt about these encounters. This was then followed by a set of questions asking what participants would like to see from these organisations in the future. Both the focus group and interview responses had very similar content, so the following results constitute a combination of the qualitative data obtained through both gathering methods.

Building access:

Participants felt that while building access was the area of disability accessibility most commonly addressed by museums and galleries, there were in fact significant barriers to access that remained in a number of museums and galleries around the country. When trying to visit these organisations participants mentioned the apparent difficulty museums and galleries faced in trying to raise their level of access while remaining compliant with heritage building requirements. Legislation for the heritage buildings was seen to take precedence over that of a human right to access. This particularly affected building elements such as ramps, lifts, room and doorway width, as well as accessible bathrooms.

Wheelchair access is not good there and if you have multiple people that use chairs that wish to go together they kind of have to be behind one another, there are very few places where they can group and talk. So whereas we [non wheelchair users] might go and see something with a friend and group and talk from time to time, that is not possible to do...

– Focus Group Participant

Additional barriers also exist around accessible travel to museums and galleries. Affordable and ample accessible parking is of key concern, as is the provision of reliable public transport close to building entrances.

...there has to be more than one wheelchair accessible park outside.

– Focus Group Participant

Accessible exhibition design:

Accessible exhibition design was the discussion point most extensively covered in focus group and interview discussions. While building accessibility was predominantly (but not solely) of concern to those with physical mobility impairments or their friends and family, exhibition design affects everyone visiting a museum or gallery.

Participants stated that in their experience this area of access was overlooked by museums, for the most part. All agreed that aesthetic priorities often trump ease of access for disabled people, and that the decisions made to prioritise often this discouraged them from visiting exhibitions at particular institutions. The following points detail particular exhibition design components that the focus group attendees found were barriers to access.

Labels and wall texts are frequently problematic, either being too difficult to read due to text size or poor colour choices, or inaccessible entirely due to where they have been placed on a wall. Methods to address these issues were suggested by participants. These included large print labels (on the wall, or available separately as a handout), different placement upon the wall, hearing loops or audio guides with label information, or digital interactives that allow for customisable text size and contrast options.

... it is really hard going with someone, getting them to read out all the labels! They get bored and drift off.
- Focus Group Participant

Lighting can also affect accessibility, with low light levels or overly strong lighting contributing to poor experiences for people with vision impairments or sensitivity to visual stimuli. For instance, one participant with low vision found that one museum they visited used lights shining upwards from the floor, which was extremely disorienting. They took long routes around the museum in order to avoid areas with that lighting scheme.

I'll do anything I can to walk around them because they just dazzle me, they shine in my eyes and are really disorienting
– Focus Group Participant

Similarly, having inadequate lighting on labels meant that visitors with vision impairments could not read otherwise legible wall texts.

The placement of objects or cases in an exhibition is a recurring problem, with precarious and cluttered positioning creating stress and inconvenience for people with

mobility impairments. Spaces with wide walkways are preferable, as these mean visitors using mobility aids can navigate through the exhibition together in a group, rather than in single file. This allows for a social experience if desired, which improves the quality of visits for many of the participants.

Audio and video content is also often inaccessible for people with a hearing impairment, due to a lack of subtitling or transcription. Participants suggested that this could be addressed through the inclusion of captions, transcriptions, or translations into sign language where appropriate. These access strategies can be delivered in a variety of forms, including digital (through a website or app, on the visitor's smartphone or a museum-provided device) and hard copy (such as printed materials). The interview participant stated, “... *I'm Deaf and there are lots of TV screens and films, and things like that, and I don't understand them because there are no subtitles*”.

While participants were all aware of the conservation concerns around touching collection objects they spoke positively of opportunities to use 3D printed replicas or prop simulations of artefacts and artworks. These increase the depth of understanding around the process of a work's creation as well as its final presented form.

... so you can feel the shape of something or the texture of something, if it is a small item it could even be the size of it [the original object]
- Focus Group Participant

Sensory overload is a major barrier for many of the research participants, who would like greater awareness of this when creating more accessible exhibition environments. Sensory overload is the result of overstimulation of one or more sense, through environmental conditions such as loud noises, strobing lights, bright lights, strong aromas, or certain tactile sensations.

Public programmes:

All participants positively received public programmes specifically designed for people with varied accessibility needs. In particular, sign language tours and audio description were rated highly based on the past experiences of the focus group attendees. However, the rarity of these programmes was disappointing to everyone, as it prevented them from accessing exhibition and object content. As one participant stated, “... *it would be nice to go at any time that I choose and have access provided.*”

Digital content:

Participants found that accessibility information is often difficult to locate on museum and gallery websites, if included at all. When present it is often found to be out of date. One person stated that a gallery had advertised large print labels being available on request for all exhibitions, but when the participant visited they found no large print labels available and hosting staff did not remember offering them in the recent past. Accessible events and programmes are not often advertised on these digital platforms either. They are more often publicised via advocacy groups, who may not reach all potential participants.

Participants were extremely optimistic about the potential of digital material to increase museum and gallery accessibility. The ability of personal devices to customise engagement and interpretation strategies was a highlight. Specific ideas suggested included sign language guides, customisable large text labels, and self-selected way-finding guides for exhibitions and entire museums based on sensory intensity in certain areas. Participants stated that these offerings needed to be worthwhile in content and not tokenistic or simply a welcome.

We have the technology and the Internet. I think more people would feel that digital options are more engaging. People can do things; they can interact and make choices, whereas hard copy is a bit more staid. Just jump straight into the digital sphere.

- Interview Participant

As many visitors may not have smart devices of their own it is also important for museums and galleries to offer their own for visitors to take around as they visit. Most will require some form of downloadable data if using these digital access strategies, so the provision of free Wi-Fi was highlighted as a necessary commitment.

Staff attitudes and responsiveness:

Staff attitudes and responsiveness to accessibility needs are often underwhelming. Many participants mentioned occasions where they or people they knew had been discouraged from engaging with staff as most did not have any training in disability access and responded to approaches awkwardly. However, participants also mentioned staff (both front and back of house) in specific museums and galleries who had done their best to find ways to provide access to content even when buildings, exhibition design, or digital content did not immediately allow.

I think it is quite hard sometimes for people to actually get the right person on the reception desk to be able to comfortably say “I might need some assistance, when would be a good time to come”. So some of that courtesy awareness stuff is not always readily available.

– Focus Group Participant

Participants expressed disappointment that higher level management staff do not appear to treat disability access as a priority. Lack of leadership in the area of disability access and representation was seen as something to improve upon. There is a perceived lack of inclusion of disability access issues in strategic plans and museum goals, suggesting that while individual staff in museums may be involved in accessibility projects there is no overarching support structure in place to ensure widespread efforts across the organisations.

Participants were also discouraged from supporting organisations by a perceived lack of disabled staff in the museum and gallery sector, particularly at board and managerial levels.

Summary:

The social model of disability views disability as a cultural construction, rather than the result of an individual person's impairment. As such, the removal of barriers to access is a key part of developing inclusive and welcoming museums and galleries. The research participant responses above demonstrate a current lack of provision among museums and galleries around Aotearoa New Zealand for meeting different access needs.

All research participants had experienced disappointing visits to museums and galleries around New Zealand. They often felt their varying access needs were not being adequately addressed through facets such as building accessibility, exhibition design, public programmes, digital content, or interactions with staff. Participants felt that none of the institutions they had experienced have taken an overarching and holistic approach to the delivery of their services and content, and what provision for access and representation there was remains variable. All involved in the focus group and interview are motivated to visit museums, through their existing interests in art, social and cultural history, and science. To less-motivated visitors with disabilities museums and galleries may be even less appealing. Given that one in four New Zealanders identifies as disabled, if museums ignore the needs of disabled visitors they run the risk of alienating a large number of potential audience members.

Of primary concern to research participants were expansions of practitioner thought around accessibility from building access to a wider understanding of the term. Having access to senior decision-making processes at the museum, through the provision of disabled senior management staff and board members, was one example of some of the wider accessibility provisions desired. Being able to directly influence decision-making throughout the museum through representation at the most senior level of the museum and gallery hierarchy was seen as integral to shifting practices to allow for widespread inclusion within museum environments. Other opportunities discussed included tailored visiting options based around access needs and visitor preferences, and the use of digital content to appeal to diverse audiences. However, the most widely explored facet of access was inclusive exhibition design, and how current museum strategies generally disappoint in this area.

This chapter has addressed the secondary question of how disabled people are currently experiencing museums, and what opportunities they see for improvement and development. This analysis contributes a basis of understanding around how disabled people are engaging with the museums and galleries in their communities, as well as cataloguing their positive and negative experiences. While they are limited in their scope due to small number of research participants, they demonstrate commonalities with worldwide museum practices in this area. Parallels with these studies are examined in more detail in Chapter 4.

Chapter 3: Current Institutional Perspectives on Disability Accessibility

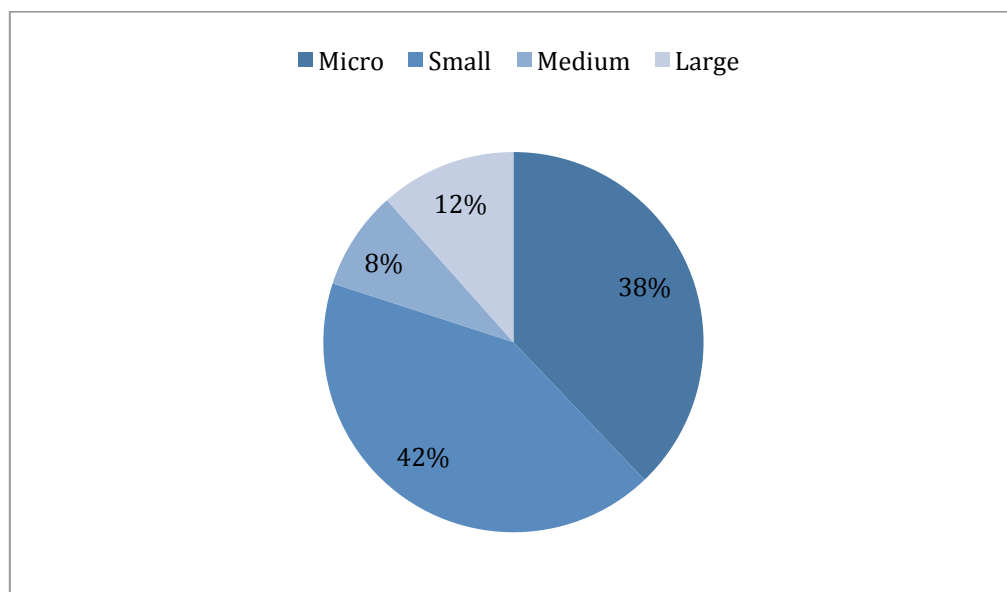
Introduction:

As outlined in Chapter 1, my primary research question is *'How are museums in Aotearoa New Zealand engaging with their disabled community members?'* In Chapter 2 I sought to establish an understanding of how this question is currently being answered by members of disability communities around the country. This chapter details the findings of a sector-wide survey exploring the perspectives of museums and galleries around Aotearoa New Zealand around their accessibility standards. This survey sought to answer the secondary questions: *what kind of information is publicly and readily available about accessibility in NZ museums, how are disabled people included in museum policy documents, and how are public and education programmes being constructed to include communities of disabled people, and encourage access?* Together, both chapters paint a picture of how disability access is being approached by museums and galleries as well as how these efforts are being received by the communities they seek to serve.

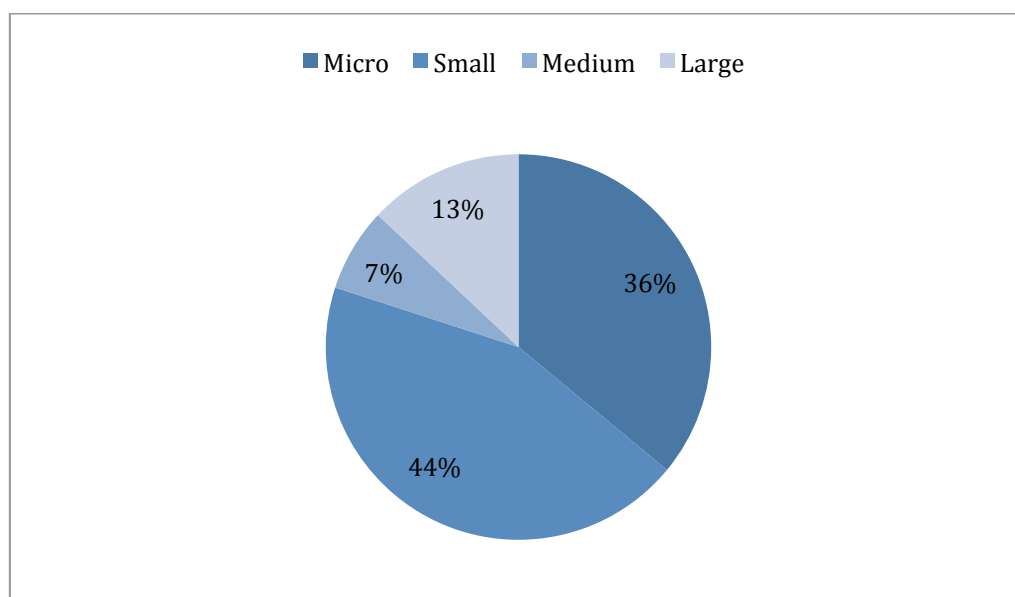
This survey was built around themes discussed during the focus group and interview discussed in Chapter 2. These points raised by participants were integrated into a short web-questionnaire sent to museums and galleries of varying sizes and types around the country.

Each museum with an email address on the Museums Aotearoa Museums Directory was sent an individual link to the questionnaire – in total 405 working addresses. This method of surveying as many institutions as possible was chosen over other methods involving purposeful targeting of specific museums and galleries, as I was interested to gather results from as wide a range of organisations as possible. The nature of museums and galleries around the country is varied, with staff size, regional area, type, and collection size all potentially influencing their accessibility. As such, I determined that it would most likely be representative of the sector if all organisations were approached. While there were a limited number of respondents (around 10% of the Museums Aotearoa listed museums and galleries, 45 in total) they provided a reasonably indicative

sample of various sized and themed museums and galleries, from small volunteer institutions through to large national organisations. Using the Museums Aotearoa definitions of museum size it was possible to determine that the actual respondents were slightly weighted towards large and small institutions than the national ratio of the sector as a whole, based on the 2014 MA Sector Survey Report. This report determined that micro sized museums consisted of 0 full time equivalent (FTE) staff members, small sized museums employed between 1 and 5 FTE staff, medium sized museum had a staff of between 6 and 20 FTE, and large sized institutions employed more than 20 FTE staff.



Graph 1: Museums Aotearoa 2014 Sector Survey Museum Size Results



Graph 2: Disability Accessibility Survey Respondents Classified by Museum Size

As demonstrated above, there were very similar response rates when compared with the MA 2014 Sector Survey. In the case of micro museums the time constraints of volunteers may have precluded many from responding. Due to the small number of responses and weighting of size of respondents, the results found should be viewed as a snapshot of those particular institutions rather than as truly indicative of the sector as a whole.

The responses received are analysed and examined below, with results being arranged thematically in the order of questions of the survey itself. This chapter is concluded with a section drawing links between answers and summarising the results.

Survey Results:

Focus group and interview results showed concern at the perceived lack of disability representation in leadership positions at museums and galleries around the country, as this was seen to be a major barrier towards achieving long-term holistic accessibility. In order to gauge whether this perception was well grounded, the survey asked whether any members of museum boards or management committees identified as having lived experience of disability. Around a third of institutions had members in these high-level management positions with experience of impairments. Those that answered ‘yes’ to this question were all from micro or small institutions, while the medium and national institutions that responded either did not answer (two museums) or responded ‘no’.

As indicated in the previous chapter, the attitude of staff members is integral to a positive visitor experience for disabled people. As part of this, it was vital to establish the numbers and roles of museum and gallery staff who have lived experience of disabilities. The survey found that of the 38 out of 45 institutions who responded to this question, only 10 (26%) had disabled staff members. Some of the institutions did not collect data on their disabled staff members, or were reluctant to share their positions as this could risk identifying individuals. However, those that did share position information showed that disabled staff members fill many varied roles from Director to Front of House. While the following information was not requested, many responded with a description of their staff members’ impairments. As a result, it is possible to state

that there is also a range of impairments that staff members experience. The most common impairment was limited mobility due to age-related causes.

It was important to focus group and interview participants to see representation within museum working positions, so the survey also sought to establish whether there were volunteers in various organisations with lived experience of disability, and what kind of roles they played within those organisations. As many of the institutions surveyed were volunteer-run it was important to determine whether volunteers were in positions of high responsibility or if paid staff members were managing them. Almost half (46%) of museums and galleries that responded stated that they have one or more disabled volunteers. These volunteers played a wide range of roles within different museums, including front of house duties as well as back of house administration work. Many smaller institutions consisted entirely of volunteers and had disabled people in numerous roles throughout their institutions, from managerial levels to gallery cleaners. While this information was not requested, many museums stated that their volunteers were generally retired and most had age-related disabilities including limited mobility as well as sight and hearing loss.

In order to assess the level of commitment to increasing disability accessibility the survey explored whether responding institutions had incorporated this into their strategic objectives or as part of their mission and goals. Of the 33 organisations that had a strategic plan, 13 included increasing accessibility as part of their objectives. Of these, 6 specified disability as a component of accessibility, whereas the others approached increasing access as a broader aim that encompassed a number of communities. Interestingly, this question elicited seven answers that this aspect of access was not a necessary part of their strategic plan or mission and goals as they were already accessible institutions.

No, it does not seem relevant. We have accessibility for disabled people and they can decide what they want or can do...

- Survey Respondent

However, when going into detail about the access levels provided, all of those same institutions only mentioned that entrances and walkways were accessible for visitors

with mobility impairments. They did not indicate how their accessible institutions accommodated visitors with other requirements (for instance, considerations around sensory or intellectual disabilities). Eight organisations indicated that while it was not a component of their strategic plans, disability accessibility was included as an integral component of their institutional processes, particularly when considering digital content or exhibition design.

Following on from the previous question, survey participants were asked whether their organisations had a disability policy or action plan. This was intended to capture policy frameworks that encompass entire organisations, while not specifically being a component of a strategic plan or mission. The responses show that nearly half (n=17, 49%) of organisations that took part in the survey and answered this question do have a disability policy or action plan of some sort. All institutions that did have such a policy or plan were medium or small in size. There were no trends in whether an organisation had a policy *or* a strategic objective around disability access, with eight having both and the rest having one or the other.

As staff responsiveness to disability access needs was mentioned by focus group and interview participants as an area requiring improvement, the survey attempted to ascertain whether institutions commonly provide or encourage training for their staff in disability awareness. Of the 35 respondents to this question, 40% stated that staff had undertaken some form of paid or voluntary disability awareness training. This was provided through a range of third party organisations such as ACC, private companies, and in association with the Blind Foundation, Be. Accessible, and Autism New Zealand, among others. Those who responded affirmatively came from a range of differently sized institutions. This suggests that staff training in this area can be achieved on a range of budgets and adapted to each institution, regardless of size.

Respondents were asked whether disabled people are currently visiting their museums and galleries, and if so how was this information being recorded. Most stated that disabled visitors do spend time using their organisations, with only one institution stating that they do not.





















Facilities and Services Provided	Bar Representation of Number of Museums	Number of Museums	%
Accessible entrances		17	89.47%
Lifts between floors		10	52.63%
Free entry for companions		7	36.84%
Discounted entry for companions		1	5.26%
Accessible bathrooms		17	89.47%
TTY (text-enabled) phones		0	0.00%
Accessible water fountains		5	26.32%
Mobility parking		16	84.21%
Audio Induction (Hearing) Loop System		3	15.79%
Wheelchairs provided		6	31.58%
Large print labels		7	36.84%
Braille labels		0	0.00%
Audio recording of labels		0	0.00%
Transcribed audio		1	5.26%
Tactile maps		0	0.00%
Captioned video		2	10.53%
Audio-described tours		3	15.79%
New Zealand Sign Language tours		2	10.53%
Designated opening times for people with disabilities, outside of regular hours		1	5.26%
Specialised tours for people with disabilities		7	36.84%
Quiet room(s)		3	15.79%
Sensory resources		2	10.53%
Publicly available accessibility information (if so, please explain how this information is distributed)		6	31.58%
Other		4	21.05%

Table 1: Facilities and Services Provided

Museums and galleries who responded ‘yes’ were asked what methods they used to collect this visitor information. This was a multiple-choice question which allowed for more than one option. Around three quarters of museums and galleries collected this information through observations or anecdotes, while 11% gathered it through formal collection of visitor data. A total of 9% recorded the number of disabled visitors through

education bookings, and 17% through public programme bookings. Three museums do not formally collect any form of visitor data and therefore could not answer.

Having already been asked about whether disability access was an aspect of strategic plan or included in museum and gallery policy, respondents were then asked whether they provided targeted facilities or services for disabled people. Interestingly, half stated that they did not. This result may have been due to a lack of understanding around what constitutes targeted facilities or services. The following percentages are of those that stated they did offer these considerations.

Most of those that responded to this question offered accessible entrances, bathrooms and mobility parking (see Table 1). This is in line with the New Zealand Standards for Design for Access and Mobility (NZS 4121:2001). Half of the institutions that responded offered lifts between floors, however information was not collected on whether the organisations without lifts have more than one floor. These physical mobility access aspects are those most commonly referred to when respondents in other questions (notably those around strategic plans and disability policies) stated they were already accessible. Outside of these physical mobility access aspects, the next highest consideration was specialised tours for disabled people, with just over a third of respondents who provided targeted accessibility strategies offering these services. Similarly, 37% offer large print labels and free entry for companions to paid exhibitions. Just under a third of organisations provide wheelchairs for their visitors who may need them, and all but one of these were medium or large institutions. The same number provide publicly available accessibility information through forums such as targeted advertisement with disability organisations, pamphlets at the front desk, online information, and email newsletters. Only 16% use audio induction loop systems, audio described tours, or quiet rooms, and 11% of respondents provide sensory resources, New Zealand Sign Language tours, and captioned video. When viewed in comparison to the numbers that cater for physical access requirements, there is a lack of inclusion for those with sensory barriers. It was interesting to note that none of the respondents provided visitors with text-enabled phones, braille labels or audio recordings of labels, and similarly none offered tactile maps.

Given that the majority of time spent in discussion during focus groups and interviews was around aspects of exhibition design and areas where this can be improved, it was interesting to see how museums and galleries responded to a question enquiring whether the requirements of disabled people were considered when exhibitions were being formed. Around two thirds stated that they did think about these requirements when designing exhibitions, and it was heartening to see that of those who responded positively, many included in their considerations aspects such as the use of New Zealand Sign Language where appropriate, colour and contrast choices, font size, the height of labels and room to move, tactile displays, and the style of written text to be intellectually accessible. Two medium-sized institutions mentioned working closely with a dedicated accessibility organisation to consult on access issues, and one large organisations mentioned that a significant part of exhibition development was co-curation with source communities of material – assumedly this applies to disabled communities where appropriate.

The publicity of accessibility was important to focus group and interview respondents, and so a question in the survey examined whether organisations have a marketing plan, and whether it includes considerations for disabled people. Of the 65% of respondents who indicated they do have a marketing plan, only 20% targeted disability groups as part of this strategy.

Only 27% of the museums and galleries surveyed had at some point offered dedicated exhibitions, public programmes or events with a specific focus on disability. A broad range of themes and topics were included in these targeted events. They ranged from exhibitions that included disabled people as part of a broader history as well as dedicated exhibitions in collaboration with specific communities (such as an exhibition held in support of Autism Awareness week). Many institutions have and do offer a range of impairment-specific programmes or events, including panel discussions presented solely by disabled people, audio-described tours, early opening hours for families with members on the autism spectrum, sign language tours, and guided visits and programmes for children and adults with vision impairments. Four of the respondents offered inclusive education programmes where adaptations would be made to suit specific requirements of the children visiting.

In publicising these events and exhibitions, 7 respondents stated that they target disability groups or disabled individuals in promotion. This was done through contact with disability advocacy groups and national organisations associated with the communities, as well as with teachers in schools.

Half of respondent organisations use digital resources as a method of increasing disability accessibility. Larger institutions demonstrated an awareness of Web Content Accessibility Guidelines and attempts to adhere to these, ensuring that information is accessible to screen readers and therefore the visitors who use them. Dynamic web content offered by these institutions is tagged and a more readable alternative is offered for those who require one. Small institutions demonstrated that they are making efforts to put as much information online as possible to ensure their material is accessible to those who cannot visit physical institutions. Some larger museums offer sign language resources in a number of ways. One partnered with Deaf Radio to create material that is accessible throughout the exhibition to complement audio material as well as collection objects. A number also record artist talks and public events then distribute these online for those who can't make it or prefer audio material.

The final question of the survey was designed to ascertain what, if any, barriers had been experienced by museums and galleries in increasing access. Only 30% of museums and galleries surveyed stated they had encountered difficulties in becoming more accessible, and these primarily fell into two categories: funding limitations and heritage building restrictions. One respondent also stated they were limited by the inadequate accessibility standards of their web technology vendors, meaning extra time and budget was required to maintain web accessibility standards.

Summary:

The results above illustrate how museums and galleries around Aotearoa New Zealand are currently engaging with their disabled community members. This was accomplished through surveying organisations to establish what material is publicly available around accessibility in their institutions, as well as how issues of disability access are included in policy documents and the formation of targeted programmes. Points in the survey

were developed in consultation with people who have lived experience of disability and an interest in museums and galleries. While there were only a limited number of respondents (around 10% of the Museums Aotearoa listed museums and galleries) they were a representative sample of various sized and themed museums and galleries, including small volunteer institutions through to national organisations. Although it would have been optimal to hear from a wider range of respondents in the sector, this initial response was all that could be gathered given the size and time restrictions of this small dissertation project.

Findings show that while a number of organisations are offering some form of access for disabled people, there is variability in what is provided across museums and galleries in Aotearoa New Zealand. The perception of focus group and interview participants in Chapter 2 was that a lack of representation in leadership positions, be that in staff or in governance roles, meant long-term and far-reaching accessibility strategies were not being enacted. Results from institutions demonstrate that a third of high-level leaders in the museum and gallery sector had lived experience of disability. This is significant, but when explored further the results show that the majority of institutions with this form of representation are small or have voluntary board members, the majority of whom are retired. While this information was not requested, many respondents chose to mention that their governing members with lived experience of disability had age related impairments. Large institutions for the most part did not answer questions on this topic, which suggests that this area is worth exploring further to gain greater insight into leadership practices around disability access in museums and galleries of larger sizes.

The results above also reveal that there are innovative and lateral projects being undertaken in accessibility by some institutions. In areas such as exhibition design, web design, and public programmes, there are an assortment of targeted activities developed by museums and galleries to increase access to their collections, stories, facilities, and staff. However, it was disappointing to note that half of respondents stated they did not provide any targeted facilities or services. This is worth investigating further to see whether this is actually the case or whether they merely sold themselves short.

This survey provides a general overview of the current state of disability accessibility in Aotearoa New Zealand museums and galleries. Chapter 4 will explore the implications for the sector in more depth, as well as links to existing literature and theory in this area.

Chapter 4: Towards Improved Accessibility

This final section synthesises the content and results of the previous three chapters and highlights the significance this research has for museum practice and theory. It answers the key primary question this project has been built around: *how are museums in Aotearoa New Zealand engaging with their disabled community members?* Suggestions and strategies for increasing access based on these findings are introduced, and propositions for further research are discussed.

To help answer this primary question a focus group and interview phase were undertaken. These were designed to establish the viewpoints of disabled people regarding the current accessibility offerings from museums and galleries around New Zealand. As outlined in Chapter 2, this phase found five pertinent areas of particular interest to research participants: architectural accessibility, inclusive exhibition design, responsive public programming, accessible digital content, and staff attitudes and responsiveness to the needs of varying disability communities. Overall participants felt that the primary focus of institutions around the country was on catering for those with physical access needs and limited mobility. A desire was expressed for an expansion of awareness around approaches to disability access, to be more inclusive and adaptive to a wide range of impairments.

This stage was integral in addressing the aim of employing emancipatory research methods, whereby the communities of people directly affected were involved as collaborators. As this research is intended to be beneficial for these groups and bring about positive societal change within the museum sector, it was important to establish a project baseline upon the perspectives of people with lived experience of disability.

As demonstrated in Chapter 2, the input of research participants with lived experience of disability, as well as backgrounds in disability advocacy, provided a wealth of information around the preferences and patterns of visitors who experience barriers to access. This dissertation project is ultimately designed to benefit disabled people as visitors to museums, through determining current accessibility standards and the provision of recommendations for museum and gallery practitioners. The focus group

and interview phase of the research project provided a platform for the perspectives and lived experience of disabled people. The results of these discussions demonstrate how important and illuminating this method of collaboration can be for individual museums and galleries. As Hollins states, emancipatory research methods can be utilised to build long-term relationships between museums and their communities of disabled people that are inclusive and genuinely equitable (2012, 228). In working collaboratively with visitors with impairments, museums can share their own knowledge on effective and achievable museological practice, while at the same time improving their capacity for access. This benefits both museum and gallery practitioners, as well as disabled visitors.

The benefits of working with smaller groups as part of this qualitative research were felt in a number of ways. The small focus group size allowed for deeper insights into personal experiences, where participants were all given space to speak and share their perspectives. Being able to develop a relationship with focus group members and interview participants made the process of following up on the sessions, which involved confirmation of points raised in the research, more personalised. Upon completion of this dissertation I will also ensure that these original research participants are given the opportunity to provide feedback on a draft summary of results that will be sent to museums around the country, as their perspective on the recommendations I make will ensure potential strategies for museums to employ are in line with the preferences of members of the communities they seek to engage with. The emancipatory research model mentioned in Chapter 1 is designed to begin from disabled peoples' embodied knowledge of their own impairments and then build on this information using the skills of the researcher. This gives a greater authority to the lived experience of the group of people being researched. Positioning this phase at the beginning of the research was advantageous in that it clarified the barriers participants encountered, and gave due significance to lived experience of obstacles faced as disabled museum visitors to guide subsequent research. Hollins states that building relationships in this way can result in genuine inclusive collaborations that move beyond a short-term focus on physical access or a singular project (2010, 228). The information gathered as a part of this process demonstrates the breadth of opportunity for museums to become more inclusive. While limited in scope the results indicate some of the measures museums and galleries in New Zealand can take to improve disability access across a number of areas. If similar consultative processes were undertaken at individual cultural organisations, as part of a

long-term disability accessibility project, then there is enormous possibility for those institutions to become more holistically equitable.

As mentioned above the focus group and interview results demonstrated five primary categories of interest for participants: building accessibility, inclusive exhibition design, tailored public programmes, accessible digital design, and responsive staff members. This is similar to studies undertaken and guidelines produced overseas, although differences in terminology exist. For instance, Arts Access Australia's 2010 report titled *Access and Audience Development in Museums and Galleries* investigated whether cultural organisations addressed disability access within governance, staffing, facilities, programmes, strategic plan goals, staff training, marketing, web material, digital resourcing, exhibitions and disability representation in content (2010, 26 – 36). All of these components are integrated into the five categories that this research project identified in Chapter 2. Art Beyond Sight, an international collective comprised of museum and disability professionals, academics, and advisors produced accessibility guidelines for Museum Studies programmes addressing aspects including Museum Governance, Exhibition Design, Information Technology, Facilities, Human Resources, and Marketing (Art Beyond Sight, 2014). In a study undertaken by the Museum of Science in Boston and Art Beyond Sight, focus groups of potential vision impaired visitors found that accessible programmes were of key interest. Participants highlighted how addressing concerns with staff attitudes and responsiveness, facility accessibility, and exhibition design was integral for a good experience for disabled users, and noted that travel to and from institutions was often difficult (2011, ii). This similarly mirrors the results of Chapter 2.

A web survey was undertaken to establish a picture of how museums and galleries around Aotearoa New Zealand are engaging with their disabled visitors. This also investigated the range of information available around museums and accessibility, inclusion of disabled people in museum policy documents and the current design and frequency of public and education programming in this area. The results of this were laid out in Chapter 3 and will now be examined here in conjunction with the findings from Chapter 2.

Staff, Governance and Leadership Representation and Responsiveness:

The survey found that one third of respondents did have disabled people in high-level management positions within their organisation. This is a very positive result given that a quarter of New Zealand's population lives with an impairment of some sort. A trend was apparent in that micro and small institutions were the only ones with representation from people with lived experience of disability in governance roles. This bias may be due to the volunteer nature of membership on boards in smaller museums (Museums Aotearoa, 2015, 19), and their consequent population by retired people who may experience age-related disabilities (Museums Aotearoa, 2015, 52). With the length and general nature of the survey this aspect was not explored in additional depth, but would be worth investigating further to ascertain a more accurate picture of disability representation on boards or management committees around the country. Comparing results to a similar sector survey from Australia demonstrates a close resemblance to their outcomes. Arts Access Australia's survey of museums and galleries, completed in 2010, found 25% of participating organisations had at least one disabled board member, with regional institutions more likely to have this form of representation than those in metropolitan areas (Wreford et al, 2010, 25).

Around a quarter of responding institutions stated that staff members had lived experience of disability, and filled a range of positions from Director to Front of House. There were no trends around the roles that staff members with disabilities held, nor were there connections made between levels of representation and size of museums, although this may be due to the small pool of respondents. Disability representation in volunteer positions was much higher, with almost half of museum and galleries responding that they had one or more volunteers with a disability. The significantly higher representation of disabled volunteers is again likely weighted to this group predominantly constituting retirees, thus often dealing with age-related impairments (Museums Aotearoa, 2015, 52).

When compared to the Arts Access Australia report mentioned above, direct comparisons between results cannot be made in this instance, as their question in this area did not distinguish between volunteers and paid staff members. Their results showed that 47% of respondent institutions in Australia had staff members or volunteers

who self-identified as disabled. Only a quarter of the New Zealand institutions had paid staff members with disabilities, but almost half had volunteers with this experience. The Australian report mentioned a case study of the Queensland Art Gallery whose overall management plan included an integration concerning disabled people specifically targeted to ensure they have access to equal employment opportunities within their institution. This included ensuring that advertised vacancies were distributed among networks with links to disabled people, and interview situations adjusted to be based on an applicant's access needs (Wreford et al, 2010, 28). It would be interesting to determine whether any New Zealand museums or galleries have similar policies around staff diversity in this area.

Representation at volunteer, staff and leadership level is important for a range of reasons. Governing boards and management committees establish policies and oversee implementation, therefore are responsible for top level down directives around disability access. By actively ensuring public access to the museum and resources, the board is able to support the establishment of various initiatives. Having board or committee members with lived experience of disability ensures a first-person understanding of the importance of access for all. Having disabled board members and senior staff also demonstrates a commitment to having an open and accessible museum or gallery, for all users of the organisation including staff, volunteers, consultants, visitors, and others.

While there were some standout examples of staff members doing their utmost to meet access needs of visitors, focus group participants agreed that in general staff attitudes and responsiveness to their needs were often extremely underwhelming. Interactions were frequently awkward and embarrassing. As this is obviously a key area of concern for visitors, the survey sought to establish at what levels staff and museums around the country had participated in disability awareness training. Of the 35 institutions that responded to this question, 40% had staff members who had participated in either paid or voluntary disability awareness training, through a range of third party organisations. In some instances this was supported by their employing museum or gallery, but more often it was individual staff initiatives that saw this training take place. These results mirror those found in the Arts Access Australia report, where 40% of responding institutions had staff who had undertaken some form of disability awareness training (Wreford et al, 2010, 28). They are significantly better than those found in Arts Access

Aotearoa's survey of arts organisations, which established that only 26.8% of responding organisations had provided this form of training. It is worth noting that Arts Access Aotearoa's survey did not investigate whether staff members had committed to training using their own resources, so is not directly comparable (Wreford et al, 2012, 22).

For New Zealand institutions, both formal training provider options and the more informal partnership organisations are available to assist with the professional development of staff, addressing disability awareness and responsiveness. CCS Disability Action is a national group advocating for the rights of disabled people to be fully included in communities. They provide awareness training designed to develop an understanding of disability related issues and show how barriers can be dismantled to create a more inclusive society. The organisation Be Accessible provides consultancy on disability access issues by assessing current strategies and then creating a set of recommendations. They work with staff in participating institutions to implement some of those changes. Arts Access Aotearoa supports cultural organisations in becoming more accessible for disabled. They also manage the national Arts for All partnership programme made up of networks of representatives from the disability sector, arts organisations and venues. These regional groups meet regularly to seek advice and share information and resources with each other. Other impairment-specific groups such as Autism New Zealand and the Blind Foundation New Zealand can also provide suggestions, training and support to museums and galleries.

Access in Plans and Policies:

Of the 90% of institutions with a strategic plan, 61% stated that disability access was not included within their strategic objectives, with 21% stating it was not mentioned specifically but was considered within wider access goals. Just 18% of respondents addressed disability access as an aspect of their strategic plan. Interestingly, of the 20 museums and galleries that stated accessibility was not a component of their strategic plan, seven stated it was an unnecessary objective as they were already accessible organisations. Looking at the data collected on what specific facilities were offered by museums for disabled people, all seven of those institutions stated that walkways,

pathways and entranceways were accessible, but did not indicate that they were catering for visitors with non-mobility-oriented impairments, such as sensory or learning disabilities. This possibly demonstrates a lack of awareness around broader definitions of disability, or a perspective on disability access as being legislatively compliance-driven rather than meeting community needs. Arts Access Australia found over one third of the total respondents to their report included disability access specifically as part of their strategic plans (Wreford et al, 2010, 26). While this is significantly higher than the equivalent 18% of New Zealand survey participants, when including those New Zealand institutions that included disability access inside a wider accessibility strategic aim, this number increases to 39% and is more in line with the Australian results. Additionally Australian results found regional institutions were overwhelmingly more likely to have disability access included in their strategic plans. It was posited by Arts Access Australia that this could be attributed to regional museums being more inclined to respond to the needs of their smaller local community than their metropolitan equivalents (Wreford et al, 2010, 26).

In order to capture information about disability policies that encompass museums and galleries while not specifically being stated as part of a strategic plan or mission, the survey also asked whether respondents had a disability policy or action plan. An action plan ideally prescribes strategies for determinedly eliminating discrimination, improving services to visitors and communities, enhancing the public perception of an organisation, and attracting new audiences by breaking down barriers to access. Nearly half of respondents who answered this question (17 in total) do have a policy or action plan of some sort to address this. All institutions that did have these policies and plans were small or medium in size. Half of those had both a strategic plan and disability action plan, whereas the remainder had one or the other. Interestingly Australian survey results showed that only 24% of total respondents did have a policy and action plan in place. This is significant given national legislation in Australia, in particular the *Disability Discrimination Act 1992*, prescribes that organisations implement a disability action plan to prevent discrimination, while also acting as a protection medium against potential liability if a complaint is made. Arts Access Aotearoa's 2012 sector survey of arts organisations found that a key area where overt improvement needed to be manifest was in the area of disability policy and action plans, as these guidelines clearly demonstrate an institution's commitment to improving disability accessibility (2012, 46-

47). Given the significance of these types of policies and plans nationally and internationally, deeper investigation would be beneficial to ascertain the breadth of existing strategies and to provide support for institutions in their future development.

The literature review at the beginning of this dissertation demonstrated clearly how visitor studies is critical for understanding the needs and contexts of communities. The survey asked museums and galleries across Aotearoa whether people with disabilities visit and use their organisations, and if so how such data is collected. All but one respondent noted visitors with disabilities do spend time within their institutions. However, when asked to identify methods of data collection that clarified this assertion, around three quarters of respondents indicated that information was collected through anecdotes or observations. This is a high proportion, which presumably relies on museum staff determining subjectively whether a visitor has a visually distinguishable physical or sensory disability. This does not necessarily take into account invisible disabilities such as fatigue, chronic pain, learning disabilities, and mental health impairments. Without more tangible evidence it is therefore difficult to establish if visitors with such disabilities are using organisations, and what targeted strategies can be applied to encourage visitation by this demographic. Arts Access Australia similarly found that their museum and gallery respondents produced little concrete evidence to reinforce anecdotal presumptions when categorising visitors with disabilities who are accessing venues and material (Wreford et al, 2010, 36). The collection of more thorough visitor data would assist in producing more reliable understandings of different communities and their access needs (Hooper-Greenhill, 2006, 362).

The survey results indicate a sector-wide deficiency of strong policy and credible understanding of the needs of disabled visitors. Having many organisations declare that disabled people do visit their museums is itself a positive indicator. However without firstly understanding how those existing audiences find their museum experience or what their particular access needs and preferences are, it is difficult to create targeted and useful policy or planning goals which apply to this visitor demographic and attract new audiences. Adopting more rigorous visitor market research strategies would assist in this, as would implementing advisory groups comprised of disabled people. Feedback generated would offer a more accurate reading and comprehensive understanding of current access requirements by community members, whereby a determined policy or

range of strategies could be created. Should a museum or gallery choose to devise a Disability Policy or Action Plan there are a number of resources currently available to assist them in that venture. Arts Access Aotearoa has Accessibility Policy Guidelines available for organisations undertaking policy projects, as well as offering pragmatic recommendations in their *Arts for All 2012* publication on the best way to manage and publicise developed policies. They also offer a set of advisory directives specifically for cultural institutions on what to consider when initiating an Action Plan and how best to effectively enact it. Finally, in the same publication they provide a breakdown of legal requirements around disability access from a New Zealand context and how to use these as guidance on approaching access (Arts Access Aotearoa, 2012, 17-18).

Access to facilities, exhibitions and programmes:

While much of this dissertation has focussed on broader definitions of accessibility, physical access to buildings and facilities is still a critical component for disabled users. Focus group and interview participants reiterated frequently that such aspects were a principal consideration when planning a visit to a museum or gallery. Functional features like ample mobility parking or the provision of subtitled videos gave capacity to engage with cultural organisations. A number of museums chose not to include disability access in their strategic plan, instead perceiving their institution met access criteria. It was of interest to note that most (but not all) only offered accessible entryways, bathrooms, and parking. Provision for those with non-mobility impairments was rarely addressed. Provision of large print labels, hearing loop systems, captioned video, sign language tours, accessible water fountains and designated opening hours for disability groups specifically were practically negligible and only offered in part by a few organisations. Some of these options, such as large print labels or captioned video, are fairly low cost and require only a minimal time investment to introduce. Their absence in museums and galleries may be due to a lack of awareness around the needs of particular visitors, or a hierarchy of values where a staunch commitment to aesthetics prevails over cheap practical endeavours towards dismantling accessibility barriers. As most respondent access provisions were mobility focussed only, it could also indicate that institutional commitment revolved around fulfilling minimum legislative requirements, as opposed to a true commitment to wider accessibility for their disabled

communities. With that being said, it was positive to note a number of museums and galleries were exploring tailored public programming with disability access needs in mind. While the survey options given to respondents allowed for a number of different types of programmes, it would be worthwhile exploring the frequency, variation, and reception of these offerings. Finally, it is also important to note that this question was phrased as such so that organisations had to say whether they offered targeted services – this may have excluded some organisations that did not realise they were offering these unconsciously, for instance mobility parking.

Exhibition design was an important component of museum accessibility for all focus group and interview participants. Two thirds of museums and galleries believed they took due consideration of disability access needs when designing exhibitions, which is a very positive result. The variety of strategies employed demonstrated a clear cognisance of tangible applications to remove a range of barriers to access. Some examples included: the use of New Zealand Sign Language where possible, consideration of colour and contrast choices, font size, the height of labels, the style of written text, and the provision of tactile displays. It was also promising that two organisations had actively worked with disability advocacy groups who specialised in accessibility. Conversely only one institution, out of those that responded to this question, mentioned a key component of their exhibition development process was co-curation with source communities. This would assumedly only apply to exhibitions using material sourced from disability communities. It would be worthwhile discovering whether any museums are utilising advisory panels of disabled people to help inform all new exhibition design.

The initial focus group and interview participants responded favourably to dedicated exhibitions, programmes and events that focus on disability. As the literature review in Chapter 1 demonstrated, representation of different communities in museums is important for achieving widespread social change. The provision of dedicated programming can cover a range of initiatives which are broad in approach and application. It was therefore disheartening to see that only 27% of museums and galleries surveyed had at some stage undertaken any such project for disability users. Arts Access Aotearoa's *Arts for All* publication offers case studies of successful projects undertaken, ranging from touch tours and early opening hours for disabled people and their companions, to relaxed chamber music concerts and sign-language interpreted

theatre events (2014, 45-66). They also put forward ideas and frameworks for other possible programmes based on effective overseas case studies that would adapt easily to a New Zealand context. In addition to targeted programming and events, focus group and interview participants emphasised the value of attending dedicated exhibitions around disability, such as those including artworks by disabled artists or exploring histories of disability in New Zealand.

Publicising dedicated and targeted disability programming is critical to ensuring success for both the institution and the disabled communities. Similarly, generating public awareness of the everyday access considerations available at individual museums and galleries is essential. Only seven of the survey respondents declared budgets which actively directed advertising and publicity towards disability-specific groups or disabled individuals. This was predominantly enacted after contact with advocacy or support associations and educators in schools. Although a step in the right direction, methodology such as this runs the risk of minimising potential community member involvement as not all people with an impairment are strongly involved with those streams of support. Focus group participants felt that the promotion of disability-specific events and exhibitions, as well as general access information, was unfortunately not often executed thoughtfully enough. In Arts Access Australia's museum survey around one fifth of respondents utilised the international access symbols in their promotional material. The use of these symbols demonstrates a commitment to accessibility for employees, visitors and others entering a museum or gallery. International access symbols also make it simple and clear for potential visitors to determine whether their access requirements will be met, rather than having to read lengthy text in print or on screens, or have this read to them.

There are a number of guidelines and support services available for institutions interested in actively breaking down barriers to access. The Smithsonian Accessibility Program aims to provide staff with information on best practice policy, procedures and practice around access for disabled people (Smithsonian Institution). They offer prescriptive documents covering topics such as accessible exhibition design and publication design. Arts Access Aotearoa also has an information service with similar tailored material specific to a New Zealand context (Arts Access Aotearoa, 2014). Many disability sector organisations are also happy to offer advice on their relevant areas of

expertise, such as the Blind Foundation, Be Accessible and Autism New Zealand. Finally, if a museum or gallery has the resources and capability to do so, developing an advisory consultative group of disabled people will result in strong relationships with those community members and demonstrate a commitment to ongoing partnerships that aim to create a more accessible museum.

Digital access:

The adaptability of digital media to different needs and varying methods of engagement meant it was highlighted as a valuable method of access for participants in the initial focus group and interview research phase. Optimism was expressed by participants around customised experiences and interpretation methods when using their own personal smart devices to interact with exhibits. Offerings such as sign language guides, changeable font size and colour on labels, and maps to allow for self-selected way-finding around exhibitions and wider museum buildings based on sensory input were appreciated. Many of the suggestions from focus group and interview participants concentrated on technology usage as a readily accessible tool for increasing disability access and overcoming some of the current barriers faced when visiting an institution. It was of key importance to determine whether museums and galleries around Aotearoa New Zealand are utilising adaptive technology in any way. Survey responses demonstrated half the organisations did employ digital resources in some way to increase disability accessibility. This included all of the large institutions, which spoke to their use of Web Content Accessibility Guidelines (WCAG) and their efforts to adhere to them where possible through strategies like dynamic web content. It was also promising to hear from micro, small and medium institutions working to place more of their content and collections online, in order to create pathways to access for those who cannot physically visit in person. It should be noted here also that focus group and interview participants were dismissive of ‘tokenistic’ use of digital media which they felt limited their visiting experience rather than being offered the full potential of possible digital platforms.

Focus group participants with visual impairments had significant issues with museum website access. For example:

...their website is so bright, I can only go there for a short length of time before I have to leave. Because it is so yellow and so white, the text is so spidery...

- Focus Group Participant

The WCAG some museum respondents mentioned are theoretical accessibility guidelines rather than prescriptions for the needs of specific audiences, such as those with partial or no sight. In order to better inform cultural organisations of practical steps involved in advancing web accessibility, Art Beyond Sight has developed a checklist for museums that evaluates their current websites, and then creates a set of recommendations for web design vendors they employ. This includes sections on visitor-specific information finding, ease of navigation and presentation, understanding content, and compatibility with screen readers (Art Beyond Sight, Accessible Websites and Apps). Using this resource can help medium, small and micro museums self-evaluate their own website offerings and make changes where possible.

Museum barriers to increasing access:

In examining the current state of disability access in New Zealand museums and galleries it was important to establish what barriers there were, if any, to museums increasing and expanding their potential accessibility strategies. Surprisingly only 30% of institutions reported that they had encountered difficulties in becoming more accessible. Impediments to adopting change primarily regarded funding limitations and legislative heritage building requirements as issues. It does appear that barriers to access include a wide lack of awareness from the industry towards the complications faced by visitors. Potential considerations, other than major facility upgrade projects, are not universally well understood by institutions.

As previously discussed in this dissertation, access to museums and galleries for disabled people necessitates a variety of approaches. For institutions grappling with physical access issues there are a number of best practice guidelines to consider. Universal design is an accessibility concept covering principles relating to the design of products, spaces, programmes and services to be usable by as many people as possible

without the need for additional adaptive technologies or design (McClean, 2011, 7). It also includes the provision of assistance devices for disabled people. In New Zealand it would appear tension exists between the preservation of heritage buildings and the adherence to goals of accessibility in facility design. This was alluded to by a number of survey respondents as well as focus group and interview participants. The aspects of heritage buildings that make them distinctive, such as doorways, handles, bathrooms, walkways and their siting on special locations, can also create barriers to access for visitors (McClean, 2011, 8). When the principles of universal design were developed it was recognised that they would need to be flexible when applied to heritage buildings (McClean, 2011, 9). Therefore it is important to implement practices and projects that strive for aspects of universal design, while recognising that the integrity of a building is also a significant component of the institutions housed within (McClean, 2011, 9). Helpful guidelines on this topic can be found in the 2011 publication by Robert McClean for Heritage New Zealand entitled *Providing for Physical Access to Heritage Places*.

Conclusion:

This dissertation began by following along with Kudlick's first-person lived experience of visiting a museum as a person with a vision impairment. Throughout both that account and the rest of the research project it has become obvious that there are a number of strategies museums can utilise to increase their disability access capabilities. This final chapter speaks to the contributions this dissertation makes to the field of museum studies as well as museum practice, and will employ central findings to answer the research questions that founded the project. It provides a concise summary of suggestions from Chapter 4, as well as indicating worthwhile points of interest for future research in this area. First and foremost, it asserts that increasing access for disabled people to museums and galleries is an essential part of audience development, community relationship building, and sound human rights practice.

The overarching primary research question was: *How are museums in Aotearoa New Zealand engaging with their disabled community members?* This was broken down into a series of secondary questions, which were explored through multiple methods. The first, *How do disabled people currently experience museums, and what changes to existing accessibility strategies would they like to see take place?* was answered during the initial consultancy stage of the project with members of disability communities. Research participants felt strongly that while some institutions were demonstrating a desire to become more accessible to disabled people, that access strategies overall remain sub-par throughout the museum sector. Individual projects museums and galleries have undertaken were mentioned and received positively. Focus group and interview contributors expressed frustration, however, that these are not more widespread throughout the industry, given the strong desire to visit these institutions and experience their material. The contributions of these research participants provide an important insight into the experiences of a particular set of museum visitors. Their feedback is incredibly useful for cultural sector practitioners examining disability access in their own institutions.

The following survey portion of the research project, in which museums and galleries around the country responded to access-related questions, found that while disabled people do visit their institutions, very few museums actually collect feedback or

undertake visitor research to confirm this assertion and explore the needs of these visitors. Taken in conjunction with the initial results expressed by disabled people, this demonstrates a widespread lack of understanding on the part of museums around what their communities of disabled people need in order to feel like welcomed audiences.

This research identifies positive efforts that museums and galleries around the country are making in order to become more accessible to disabled people. The survey stage demonstrates that a majority of respondents are ensuring their buildings are adapted where possible to increase mobility access, through methods such as ramps, lifts, accessible toilets, and dedicated parking as well as wide walkways. It is not surprising that this facet of access is the most frequently utilised targeted access approach, given that legislative requirements around building access for disabled people are prescriptive. That being said, participants in the focus group and interview stage felt significant issues remained with regards to this form of access. It was suggested that this could be due to tensions between heritage building legislation and human rights to access, as well as funding issues. This was confirmed in the survey portion of the research project, with respondents identifying both of these as impediments to accessibility projects in general. An important barrier to access for many of the focus group and interview participants was inaccessible transport options to museums and galleries, with affordable and accessible parking often lacking and reliable public transport not stopping close to building entrances. Museums and galleries need to be cognisant of wider accessible infrastructure and transport systems in order to effectively target this area of access – it is not enough to ensure that buildings alone are easy to enter and move around in. If it is difficult for potential visitors to even reach the building then adaptations of facilities may not be as well utilised as hoped when undertaking capital works projects in this area.

A number of museums and galleries around Aotearoa New Zealand are increasingly developing targeted public programming that meets the needs of different groups of visitors. Particular examples of such approaches to access include the initiation of touch-based and audio described tours to appeal to groups of people with vision loss, as well as sign language interpreted tours and early opening hours for families with Autistic children. These programmes were most often created in consultation with groups of disabled people or disability sector organisations, and indicate a willingness to adapt

approaches to how material is delivered by museum staff in creative and individualised processes. The frequency of these offerings is a key indicator of commitment to catering for the access needs of visitors on a long-term basis. However, if these efforts are not consistent they run the risk of being perceived as tokenistic and therefore ineffective in their efforts to establish ongoing relationships with communities of disabled visitors. Additionally, programming in this manner is not sufficient to ensure particular groups of visitors are able to access content within the museum on an everyday basis. This instead requires consideration in all aspects of design, from exhibition to website to digital, which is frequently not happening in organisations around the country.

Focus group and interview participants were extremely optimistic about the possibilities for cultural organisations to increase access to objects and concepts through digital means. This had applications in a number of areas, including within exhibitions by ensuring captioned video or customisable routes based on sensory requirements, through to offsite access to collection material through websites and virtual exhibitions. Museums and galleries responding to the survey were similarly interested in exploring the capabilities of digital to increase access in a variety of methods. It was positive to discover that large museums were conscious of Web Content Accessibility Guidelines and proactive in working to those standards. There are also excellent cases where museums have developed applications for smartphones that allowed for customised interpretation outputs based on a visitor's preferences, such as sign language translated labels or guides. Once again it is important to reiterate that tokenistic offerings can elicit negative reactions among visitors who do not feel authentically catered for. When developing these methods a commitment must be made to working with the communities intended to benefit from the digital access strategies. This will help ensure that the product designed genuinely fulfils the needs of its target audience.

A final promising result as one component of widespread accessibility is that museums and galleries demonstrate disability representation in staffing areas, from governing bodies to paid staff to volunteers. This is partially due to the predominance of retirees constituting a volunteer base within museums and in voluntary governance positions, meaning that age-related impairments are the majority. This has ongoing effects in the adaptations made to working practice within museums and galleries to increase access from a staffing perspective and that should consequently flow on to increased access for

visitors. Aging populations will have effects on museums and galleries in a number of ways, and this is a worthwhile area for future researchers to build upon.

While the above discussion highlights the positive results taken from the research, some common shortfalls also exist in the ways museums and galleries are approaching disability access. Many organisations appear to perceive accessibility as a legislative adherence issue as opposed to an opportunity for comprehensive audience development. A focus on adapting physical spaces to break down mobility-related access barriers is only a starting point when working towards increased disability access. Museums and galleries around Aotearoa New Zealand are beginning to expand their accessibility strategies in a range of ways to mimic overseas examples and precedents, and respond to the needs of their local community members. This dissertation has demonstrated a range of creative and adaptive solutions for improving access. Strategies can be initiated and developed on achievable scales by working with both support organisations and potential visitors. Establishing particular community access needs and responding proactively once these are determined, can create change and engage user groups without massive financial input or needing to adapt architectural issues. In doing this a museum or gallery has the potential to reach a wide range of engaged audiences and become more accessible for all visitors; not only those with disabilities. The flexible adaptability of tools and methods to increase access mean projects in this area can be realistically undertaken by a range of museums from micro to large, irrespective of budget or regional restrictions.

As focus group and interview respondents made clear, the attitude and perspectives of staff can heavily influence their experience as a visitor. As such it should be a priority to ensure that staff are trained in disability awareness and responsiveness, to allow them to create a welcoming and approachable environment for all potential visitors. This would also result in the creation of a work environment that is more responsive to the needs of disabled staff members and volunteers, thereby assisting in achieving stronger disability representation among people working within museums and galleries.

Worryingly, a number of organisations responded that disability access was not required as an aspect of their strategic plan as they already considered their institutions fully accessible. What this dissertation has demonstrated is that no single museum

participating in the study is entirely accessible to disabled people. Given that result, combined with the knowledge that around a quarter of New Zealanders identify as being disabled, it seems imperative that disability access constitutes an important consideration in future museum development. Ensuring that this is supported at a policy and governance level will help to achieve the widespread change required.

The results in this dissertation are compiled around the outcomes of analysis on data gathered in both the focus group and interview stage of the research project, as well as tabulating the survey section. Comparisons with international literature on this research topic demonstrate that the New Zealand findings are predominantly in line with a similar study in Australia. While reassuring, it is important to note some of the limitations of the conclusions reached. Due to the small sample size in both research phases, a fully comprehensive picture of the current state of disability access in museums and galleries around Aotearoa New Zealand was not possible. Rather, the findings represent a snapshot of a range of offerings from a variety of cultural organisations at this point in time. The effects that institutional access strategies have on particular disabled visitors who have an interest in museum and gallery content is also only represented in scale. The short length of the survey, designed to encourage a higher response rate from time-poor staff and volunteers at various museums and galleries, means that many of the individual facets of accessibility were not explored in great detail. However, as intended it does provide a baseline of varying access strategies to springboard further, and more in-depth, research.

As this is the first time an assessment of this nature has been undertaken in the sector in New Zealand, it begins to address the gap in the literature discussed in Chapter 1. It attempts to formulate an understanding of this topic in respect to a particular local context, thereby contributing to existing international literature exploring similar themes that lack New Zealand specific understandings. This broad scoping project provides a basis for further and more in depth research around disability accessibility in museums and galleries around the country. By identifying the current strengths and weaknesses of accessibility in the sector, areas of improvement have been determined which allow institutions and organisations around the country to target strategies where they are currently lacking.

Through employing emancipatory research methods and drawing on theories from disability studies, this dissertation has enriched the field of museum practice by investigating an aspect of Aotearoa New Zealand museums that has previously been under-researched. It has also demonstrated the applications disability studies can have for both research and practice. By creating the first nationwide exploration of the current state of disability access in museums and galleries around the country this study functions as an indicator for the sector on current practice and fills a gap in professional literature. It also provides a basis for future research in this area and offers potential aspects of this topic to hone in on in more depth. Finally, the dissertation gives suggestions for improving access based on focus group and interview research with disabled museum visitors, as well as comparisons with existing international literature and guides. This allows museums and galleries to assess their existing strategies and provides achievable methods to increase their offerings, thereby developing their audiences and demonstrating a widespread commitment to access as a human right.

As Kudlick's first person account of visiting museums and galleries as a person with a vision impairment ends, "It felt great to be part of the mainstream". Aotearoa New Zealand museums exist in a context where potential audiences of disabled people form an increasing proportion of the overall population. Their lived experiences are already becoming part of the mainstream. In order to grow museum audiences and develop meaningful community relationships institutions must change their working practices to ones of meaningful inclusion, and make their way down a path to accessibility.

Appendix 1: Focus Group and Interview Schedule

1. What was the last exhibition you visited?
2. What key words or thoughts come to mind when I mention museums and art galleries?
3. Before you visit a museum, what do you do to prepare for your visit?
4. Who do you visit museums with?
5. What kind of museums do you enjoy visiting and what is it you enjoy about them?
6. What kind of museum programmes (public or education) have you taken part in before, if any? How did you find them?
7. How welcome do staff make you feel when you visit museums?
8. How have you found using museum websites, if you have done so in the past? What about other digital resources?
9. Have you ever had any negative experiences when visiting museums or galleries?
10. What issues, if any, have you had in accessing the buildings museums are in?
11. Are there any other prohibitive barriers that have prevented you from experiencing museums?
12. What kind of things would you like to see museums doing differently?
13. Is there anything else important to you that we have not covered?

Appendix 2: Web Questionnaire Schedule

1. Do any people on your Board or Management Committee identify as having lived experience of disability?
2. Do any volunteers in your organisation identify as having lived experience of disability?
 - a. What are the main responsibilities of your volunteers with disabilities?
3. Do any staff in your organisation identify as having lived experience of disability?
 - a. What roles do your staff with disabilities perform?
4. Does your organisation have a strategic plan and/or statement of mission and goals?
 - a. Is increasing access for people with disabilities included in your plan as a strategic objective, or in your statement of mission and goals?
5. Does your organisation have a disability policy and/or action plan?
6. Have staff at your organisation ever undertaken any disability awareness training, paid or voluntary?
 - a. What kind of disability awareness training have your staff undertaken?
7. Do people with disabilities visit your venue, exhibitions or programmes?
8. How do you collect information about visitors with disabilities?
9. Do you offer any targeted services or facilities for people with disabilities?
 - a. What services or facilities do you provide?
 - Accessible entrances
 - Lifts between floors
 - Free entry for companions
 - Discounted entry for companions
 - Accessible bathrooms
 - TTY (text enabled) phones
 - Accessible water fountains
 - Mobility parking
 - Audio Induction (Hearing) Loop System
 - Wheelchairs provided
 - Large print labels
 - Braille labels
 - Audio recording of labels
 - Transcribed audio
 - Tactile maps

- Captioned video
 - Audio described tours
 - New Zealand Sign Language tours
 - Designated opening times for people with disabilities, outside of regular hours
 - Specialised tours for people with disabilities
 - Quiet rooms
 - Sensory resources
 - Publically available accessibility information (if so, please explain how this information is distributed)
 - Other
10. Are the requirements of people with disabilities considered in your organisation's exhibition design processes?
- a. Please explain how the requirements of people with disabilities are considered in your organisation's exhibition design processes?
11. Does your organisation have a marketing plan?
- a. Are disability communities targeted as part of your organisation's marketing plan?
12. Have you ever presented an exhibition, event or public programme with a focus on disability?
- a. Please give an overview of the groups of people that have been a focus of exhibitions, events or public programmes.
13. Do you target promotion of any exhibition or event specifically to disability groups?
- a. How do you engage with those targeted groups?
14. Does your organisation use digital resources to increase accessibility?
- a. How does your organisation use digital resources to increase accessibility?
15. Has your organisation ever faced barriers to increasing access?
- a. What barriers has your organisation faced?
16. Any other comments around the practicalities of improving accessibility in your museum or gallery?

Bibliography:

- Art Beyond Sight. *Accessible Websites and Apps*. Accessed 18/08/2015 from <http://www.artbeyondsight.org/dic/module-3-effective-communication-and-interacting-with-people-with-disabilities/tools-for-building-accessible-websites/>
- Art Beyond Sight and Museum of Science, Boston (2011). *Formative Evaluation of Accessible Programming*. Accessed 22/09/2015 from <http://www.artbeyondsight.org/mei/formative-evaluation-of-accessible-programming/>
- Arts Access Aotearoa (2014). *Arts for All: increasing access to the arts for disabled people*. Accessed 05/09/2014 from: <http://artsaccess.org.nz/arts-for-all/Resources?src=nav>
- Arts Access Aotearoa (2011). *Arts for All survey: how accessible are New Zealand's arts organisations and venues?* Accessed 11/09/2014 from: <http://artsaccess.org.nz/arts-forall/Resources?src=nav>
- Barnes, Colin (2012). Understanding the Social Model of Disability: Past, present and future. In *Routledge Handbook of Disability Studies*, edited by Nick Watson, Alan Roulstone and Carol Thomas. New York: Routledge.
- Berg, Bruce Lawrence (2004). *Qualitative Research Methods in the Social Sciences*. Boston: Pearson.
- Black, Graham (2010). Embedding civil engagement in museums. *Museum Management and Curatorship*, 25(2), 129-146.
- Brandt, Yael, Reichel, Arie and Poria, Yaniv (2009). People with disabilities visit art museums: an exploratory study of obstacles and difficulties. *Journal of Heritage Tourism*, 4(2). 117-129.

- Bunch, Lonnie and Majewski, Janice (1998). The Expanding Definition of Diversity: Accessibility and Disability Culture Issues in Museum Exhibitions. *Curator* 41(3).
- Crooke, Elizabeth (2006). Museums and Community. In *A Companion to Museum Studies*, edited by Sharon Macdonald. Oxford: Blackwell Publishing.
- Davis, Joy (2011). Putting Museum Studies to Work. *Museum Management and Curatorship*, 26(5), 459-479.
- Denscombe, Martyn (2010). *The Good Research Guide: for small-scale social research projects*. Berkshire: Open University Press.
- Dewsbury, Guy, Clarke, Karen, Randall, Dave, Rouncefield, Mark & Sommerville, Ian (2004). The anti-social model of disability. *Disability & Society*, 19(2), 145-158.
- Dodd, Jocelyn, Sandell, Richard, Jolly, Debbie, and Jones, Ceri (2013). Re-thinking Disability Representation in Museums and Galleries: Supporting Papers. To accompany the published report *Rethinking Disability Representation in Museums and Galleries*. Accessed on 11/04/2015 from:
<http://www2.le.ac.uk/departments/museumstudies/rcmg/projects/rethinking-disability-representation-1>
- Elliott, J. (2005). The researcher as narrator: Reflexivity in qualitative and quantitative research. In *Using Narrative in Social Research*. pp. 152-170.
- Goodley, Dan (2011). *Disability Studies: An Interdisciplinary Introduction*. London: SAGE Publications.
- Graham, Helen (2013). Museums and How to Know about Access. *New Formations: a journal of culture/theory/politics*, 79. 64-81.
- Hooper-Greenhill, Eileen (2006). Studying Visitors. In *A Companion to Museum Studies*, edited by Sharon Macdonald. Oxford: Blackwell Publishing.

- Hollins, Helen (2010). Reciprocity, Accountability, Empowerment: emancipatory principles and practices in the museum. In *Re-Presenting Disability: Activism and Agency in the Museum*, edited by Richard Sandell, Jocelyn Dodd and Rosemarie Garland-Thomson. London and New York: Routledge.
- Hughes, Rhidian (2010). The social model of disability. *British Journal of Healthcare Assistants*, 04(10), 508-511.
- Hutchison, Mary (2013). “Shared Authority”: Collaboration, Curatorial Voice, and Exhibition Design in Canberra, Australia. In *Museums and Communities: Curators, Collaborations and Collaboration*, edited by Viv Golding and Wayne Modest. London and New York: Bloomsbury Academic.
- Kudlick, Catherine (2005). The Local History Museum, So Near and Yet So Far. *The Public Historian*, 27(2). 75-81.
- Latham, Kiersten F., and Simmons, John E. (2014). *Foundations of Museum Studies: Evolving systems of knowledge*. California: Libraries Unlimited.
- Martiny, Kristiane Moltke (2015). How to Develop a Phenomenological Model of Disability. *Medicine, Healthcare and Philosophy*.
- McCarthy, Conal and Copley, Joanna (2009). Museums and Museum Studies in New Zealand: A Survey of Historical Developments. *History Compass*, 7(2), 395-413.
- McClean, Robert (2011). *Providing for Physical Access to Heritage Places*. Heritage New Zealand Pouhere Taonga.
- Merriam, Sharan B. (2009). *Qualitative Research: a guide to design and implementation*. San Francisco: Jossey-Bass.
- Museums Aotearoa (2014). *2014 National Visitor Survey Results*. Accessed on 16/02/2015 from <https://blog.museumsaotearoa.org.nz/2014/05/30/2014-national-visitor-survey-results/>

Museums Aotearoa (2016). *Museums Aotearoa 2014 Sector Survey Report*.

Onciul, Bryony (2013). Community Engagement, Curatorial Practice, and Museum Ethos in Alberta, Canada. In *Museums and Communities: Curators, Collaborations and Collaboration*, edited by Viv Golding and Wayne Modest. London and New York: Bloomsbury Academic.

Roulstone, Alan, Thomas, Carol, and Watson, Nick (2012). The Changing Terrain of Disability Studies. In *Routledge Handbook of Disability Studies*, edited by Nick Watson, Alan Roulstone and Carol Thomas. New York: Routledge.

Sandell, Richard (2012). Museums and the Human Rights Frame. In *Museums, Equality and Social Justice*, edited by Richard Sandell and Eithne Nightingale. New York: Routledge.

Sandell, Richard and Dodd, Jocelyn (2010). Activist Practice. In *Re-Presenting Disability: Activism and Agency in the Museum*, edited by Richard Sandell, Jocelyn Dodd and Rosemarie Garland-Thomson. London and New York: Routledge.

Somekh, Bridget and Cathy Lewin (2004). *Research Methods in the Social Sciences*. New York: SAGE publications.

Stam, Deirdre C. (2005). The informed muse: the implications of 'The New Museology' for museum practice. In *Heritage, Museums and Galleries: An Introductory Reader*, edited by Gerard Corsane. London and New York: Routledge.

Statistics New Zealand (2013). *Disability Survey – Media Release*. Accessed 03/09/2014 from:
http://www.stats.govt.nz/browse_for_stats/health/disabilities/DisabilitySurvey_MR2013.aspx

Stringer, Ernest T. (2007). *Action Research*. Los Angeles: Sage Publications.

- Sullivan, Martin (1991). From personal tragedy to social oppression: the medical model and social theories of disability. *New Zealand Journal of Industrial Relations*, 16(3), 255-272.
- Swain, John and French, Sally (2000). Towards an affirmation model of disability. *Disability & Society*, 15(4), 569-582.
- Witcomb, Andrea (2003). *Re-Imagining the Museum: Beyond the Mausoleum*. London and New York: Routledge.
- Wolfer, Loreen (2006). *Real Research: Conducting and Evaluating Research in the Social Sciences*. London: Pearson.
- World Health Organisation (2014). *Disability and Health Fact Sheet No. 352*. Accessed 11/05/2015 from:
<http://www.who.int/mediacentre/factsheets/fs352/en/>
- Wreford, Gareth, Yin Lo, Cheryle, Driver, Emma and Scudds, Krissie (2010). *Access and Audience Development in Australia: museums and galleries research project*. Australia: Arts Access Australia.
- Varutti, Marzia (2013). Learning to Share Knowledge: Collaborative Projects in Taiwan. In *Museums and Communities: Curators, Collaborations and Collaboration*, edited by Viv Golding and Wayne Modest. London and New York: Bloomsbury Academic.
- Valentina, Sardi and Zdenka, Zenko (2014). Systemic thinking for socially responsible innovations in social tourism for people with disabilities. *Kybernetes*, 43(3/4) 652-666.

