

Disability-Friendly Tourism Accessibility Factors for Accessible to Persons with Disabilities (PWDS) in Ghana

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Abstract: Tourism serves as a crucial economic and cultural catalyst; nevertheless, individuals with disabilities (PWDs) have substantial obstacles in enjoying its advantages. Due to policy-related, informational, behavioral, and physical limitations, people with disabilities (PWDs) have a difficult time taking advantage of the economic and cultural benefits of tourism. Using statistical tools such as paired t-tests, this study examines how accessible Ghana's tourist industry is to people with disabilities.

The results show that tourist attractions have a moderate level of physical and mental accessibility, with staff attitudes and walkways showing some degree of accommodation.

According to the study's findings, closing these gaps calls for improved infrastructure, focused regulatory enforcement, and inclusive communication tactics. However, government incentives, policy execution, and communication and information accessibility are considered insufficient. It suggests encouraging travel agencies to adopt inclusive practices, implementing technology-driven communication solutions, and enhancing both physical and mental accessibility. Resolving these issues not only guarantees PWD equity but also opens up social and economic advantages, positioning Ghana as a world leader in inclusive travel.

Keywords: Inclusive Tourism, Accessibility, Persons with Disabilities, Ghana Tourism, Disability-Friendly Policies.

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I. INTRODUCTION

A major force behind the world economy, tourism creates jobs, fosters cross-cultural interactions, and advances infrastructure (Cloquet et al., 2018). Despite its importance, PWDs have numerous obstacles while trying to participate in tourism activities, such as informational, behavioral, and physical barriers (Kaganek et al., 2017). These barriers affect PWDs' quality of life and the inclusion of the tourist industry by preventing them from fully participating in it.

By implementing inclusive and accessible methods, Ghana's growing tourist sector offers a special chance to overcome these gaps. Current programs emphasize how crucial it is for people with different capacities to participate in tourism equally.

However, studies show that Ghana's tourism infrastructure is still not ready to meet the demands of people with disabilities, with gaps in staff attitudes, accessibility

measures, and policy enforcement (Edusei et al., 2015; Preko, 2020).

In order to create a complete, disability-friendly tourism model, this study aims to investigate and evaluate accessibility elements within Ghana's tourism industry. The research seeks to establish Ghana as a global leader in inclusive tourism by focusing on legislative improvements as well as physical, attitudinal, communicative, and informational accessibility. The results will act as a guide for developing hospitable and advantageous surroundings that foster social inclusion and economic development.

II. METHODS

The study was conducted in Ghana, a country blessed with rich tourist destinations with beautiful and diverse cultural festivals, the respondents of the study were local and international tourist with disability. the study employed a descriptive quantitative approach thus using quantitative

methodologies to gain a comprehensive understanding of disability inclusivity in Ghana's tourism sector.

The total sample for the study was grouped into various strata using stratified sampling, these included visual impairment, mobility impairment and hearing impairment, simple random sampling was further used to select respondents from each stratum, this is to ensure each member of a stratum stands an equal chance of being selected, A total of 250 respondents was used for the study.

The study used the paired t test in addressing disability-friendly accessibility factors in Ghana for persons with disability. A one-sample paired t-test is a parametric statistical test used to compare the mean (average) score of a single related sample. The test was used to evaluate the extent to which disability-friendly tourism accessibility factors make accessible to persons with disabilities (PWDs) in terms

of Disability-Friendly Tourism Accessibility Factors and Disability Support Policies and Incentives.

III. RESULTS

The study considered various dimensions of accessibility including physical, attitudinal, communication and information access, The study also investigated Ghanaian tourism industry awareness towards PWD needs as well as types of disability and policy support on disability by evaluating the understanding of their effectiveness and means for improvement.

➤ Physical Access Factors

Tables 1, 2 and 3 present the results of on the physical access factors for people with disabilities (PWDs). The paired samples analysis reveals significant gaps between expected and implemented accessibility features at tourist sites, underscoring the need for targeted improvements.

Table 1 Physical Access Factors Code

	Physical Access	Expected	Implemented
Pair 1	The entrance to the tourist sites is easy to use for people with disabilities	PAE1	PAI1
Pair 2	Walkways and paths support ease movement for people with disabilities	PAE2	PAI2
Pair 3	Restrooms are more accessible for people with disabilities (handrails and space)	PAE3	PAI3
Pair 4	There is transportation services parking and shuttles to support people with disabilities	PAE4	PAI4

Table 2 Physical Access Factors Paired Samples Statistics

Paired Samples Statistics	Code	Mean	N	SD
Pair 1	PAE1	3.350	250	1.197
	PAI1	2.690	250	0.921
Pair 2	PAE2	3.980	250	1.179
	PAI2	2.680	250	1.083
Pair 3	PAE3	3.800	250	0.877
	PAI3	2.570	250	0.943
Pair 4	PAE4	4.160	250	1.363
	PAI4	2.530	250	1.069

Table 3 Physical Access Factors Paired Samples Test

Paired Samples Test		Paired Differences		t	df	Sig. (2-tailed)
		Mean	SD			
Pair 1	PAE1 - PAI1	0.660	1.518	6.873	249	0.000
Pair 2	PAE2 - PAI2	1.292	1.578	12.949	249	0.000
Pair 3	PAE3 - PAI3	1.236	1.260	15.515	249	0.000
Pair 4	PAE4 - PAI4	1.628	1.788	14.393	249	0.000

For **Entrance Accessibility (Pair 1)**, the mean score for expected ease of use (Mean = 3.35) exceeds the implemented score (Mean = 2.69), with a significant mean difference of 0.660 ($t = 6.873$, $p < 0.05$). The standard deviations (PAE = 1.197; PAI = 0.921) suggest moderate variability in expectations and relatively consistent but insufficient implementation. This highlights the need to enhance entrance designs to better accommodate individuals with disabilities.

In terms of **Walkways and Paths (Pair 2)**, expectations are notably higher (Mean = 3.98) than current implementations (Mean = 2.68), with a significant mean difference of 1.292 ($t = 12.949$, $p < 0.05$). The SDs (PAE =

1.179; PAI = 1.083) indicate diverse expectations and uneven implementation, suggesting that universally accessible pathways could significantly improve ease of movement.

For **Restrooms (Pair 3)**, the expected accessibility (Mean = 3.80) far surpasses what is implemented (Mean = 2.57), with a significant mean difference of 1.236 ($t = 15.515$, $p < 0.05$). The SDs (PAE = 0.877; PAI = 0.943) reflect agreement on the need for accessible restrooms but a lack of sufficient adaptations, such as handrails and adequate space. Addressing these deficiencies is essential to meet the needs of visitors with disabilities.

Transportation Services (Pair 4) show the most pronounced gap, with expected access (Mean = 4.16) far exceeding implementation (Mean = 2.53). The mean difference of 1.628 ($t = 14.393$, $p < 0.05$) is the largest among the pairs, indicating this as the most critical area for improvement. The SDs (PAE = 1.363; PAI = 1.069) highlight varied expectations and inconsistent availability of parking and shuttle services, necessitating significant upgrades in transportation infrastructure.

Overall, the disparities in SDs reveal inconsistent service delivery, emphasizing the need for standardized improvements to align implementations with visitor expectations. By addressing these gaps, tourist sites can create more inclusive and accessible environments for all visitors.

➤ Attitudinal Access Factors

Tables 4, 5 and 6 present the results on attitudinal access factors.

Table 4 Attitudinal Access Factors Code

	Attitudinal Access	Expected	Implemented
Pair 1	Staff are helpful, show respect and understanding towards people with disability	ACE1	ACI1
Pair 2	Staff welcome people with disability thus people with disability feel welcomed	ACE2	ACI2
Pair 3	Staff are trained and equipped about the needs of people with disability	ACE3	ACI3
Pair 4	There is equity and strong commitment in providing equal services for all with people with disability inclusive	ACE4	ACI4

Table 5 Attitudinal Access Factors Paired Samples Statistics

Paired Samples Statistics	Code	Mean	N	SD
Pair 1	ACE1	3.540	250	1.502
	ACI1	2.960	250	1.192
Pair 2	ACE2	4.110	250	0.88
	ACI2	2.360	250	1.264
Pair 3	ACE3	3.770	250	1.23
	ACI3	2.390	250	1.104
Pair 4	ACE4	4.000	250	1.16
	ACI4	2.660	250	1.555

Table 6 Attitudinal Access Factors Paired Samples Test

Paired Samples Test		Paired Differences				
		Mean	SD	t	df	Sig. (2-tailed)
Pair 1	ACE1 - ACI1	0.584	2.035	4.538	249	0.000
Pair 2	ACE2 - ACI2	1.752	1.553	17.836	249	0.000
Pair 3	ACE3 - ACI3	1.376	1.663	13.082	249	0.000
Pair 4	ACE4 - ACI4	1.336	1.918	11.015	249	0.000

The paired samples analysis examines gaps between expected and implemented attitudinal access for people with disabilities at tourist sites, revealing significant discrepancies in all areas assessed.

For Staff Helpfulness (Pair 1), the expected behavior (Mean = 3.54) surpasses the implemented behavior (Mean = 2.96), with a mean difference of 0.584 ($t = 4.538$, $p < 0.05$). The standard deviations (SDs: ACE1 = 1.502, ACI1 = 1.192) indicate moderate variability in expectations and consistent but inadequate implementation. This suggests the need to enhance staff attitudes towards respect and understanding for individuals with disabilities.

Welcoming Behavior (Pair 2) shows a significant gap, with expectations (Mean = 4.11) far exceeding implementation (Mean = 2.36), resulting in the largest mean difference of 1.752 ($t = 17.836$, $p < 0.05$). The SDs (ACE2 = 0.88, ACI2 = 1.264) highlight uniform high expectations but inconsistent practices. This indicates a critical need for improved efforts to make people with disabilities feel welcome.

Regarding Staff Training (Pair 3), expected preparation (Mean = 3.77) is notably higher than implementation (Mean = 2.39), with a mean difference of 1.376 ($t = 13.082$, $p < 0.05$). The SDs (ACE3 = 1.23, ACI3 = 1.104) reflect consistent recognition of the importance of staff training, but inadequate implementation. Enhancing staff education on disability needs is imperative.

For Equity in Services (Pair 4), expectations (Mean = 4.00) again exceed implementation (Mean = 2.66), with a significant mean difference of 1.336 ($t = 11.015$, $p < 0.05$). The SDs (ACE4 = 1.16, ACI4 = 1.555) show higher variability in implementation, suggesting unequal service delivery. This underscores the importance of fostering equity and a commitment to inclusive services.

Overall, the gaps between expectations and implementations, combined with varying levels of SDs, reveal critical areas for improvement in attitudinal access. Addressing these disparities will require training, cultural change, and policy enhancements to ensure equitable and welcoming experiences for people with disabilities.

➤ *Communication Access Factors*

Tables 7, 8 and 9 also present the results of communication access factors looking at the strengths and

weakness in addressing people with disabilities (PWDs) within the tourism sector.

Table 7 Communication Access Factors Code

Paired Samples Statistics	Code	Mean	N	SD
Pair 1	CAE1	3.860	250	1.328
	CAI1	2.430	250	1.089
Pair 2	CAE2	3.850	250	1.056
	CAI2	2.420	250	0.889
Pair 3	CAE3	4.340	250	0.473
	CAI3	2.500	250	1.176
Pair 4	CAE4	4.490	250	0.501
	CAI4	2.700	250	1.278

Table 8 Communication Access Factors Paired Samples Statistics

Paired Samples Statistics	Code	Mean	N	SD
Pair 1	CAE1	3.860	250	1.328
	CAI1	2.430	250	1.089
Pair 2	CAE2	3.850	250	1.056
	CAI2	2.420	250	0.889
Pair 3	CAE3	4.340	250	0.473
	CAI3	2.500	250	1.176
Pair 4	CAE4	4.490	250	0.501
	CAI4	2.700	250	1.278

Table 9 Communication Access Factors Paired Samples Test

Paired Samples Test		Paired Differences				
		Mean	SD	t	df	Sig. (2-tailed)
Pair 1	CAE1 - CAI1	1.428	1.711	13.194	249	0.000
Pair 2	CAE2 - CAI2	1.436	1.358	16.714	249	0.000
Pair 3	CAE3 - CAI3	1.832	1.266	22.884	249	0.000
Pair 4	CAE4 - CAI4	1.792	1.390	20.382	249	0.000

The analysis of paired samples on communication access highlights substantial gaps between expectations and implementations, with significant discrepancies observed across all evaluated aspects.

For Accessible Communication Methods (Pair 1), the expected availability of tools like sign language (Mean = 3.86) exceeds the implemented availability (Mean = 2.43). The mean difference of 1.428 ($t = 13.194$, $p < 0.05$) reflects a considerable shortfall. The standard deviations (SDs: CAE1 = 1.328, CAI1 = 1.089) suggest some variability in expectations and a consistent lack of implementation. Addressing these gaps by integrating accessible communication methods is crucial.

Effective Staff Communication (Pair 2) reveals a similar gap, with expected effectiveness (Mean = 3.85) much higher than implementation (Mean = 2.42). The mean difference of 1.436 ($t = 16.714$, $p < 0.05$) underscores a significant issue. The SDs (CAE2 = 1.056, CAI2 = 0.889) indicate consistent expectations and inadequate delivery. This calls for training programs to enhance staff communication skills to meet diverse needs.

For Accessible Information Formats (Pair 3), expectations (Mean = 4.34) are significantly higher than

implementation (Mean = 2.50), with the largest mean difference of 1.832 ($t = 22.884$, $p < 0.05$). The SDs (CAE3 = 0.473, CAI3 = 1.176) highlight strong consensus on the importance of accessible formats and a wide gap in current practices. Providing information in formats suitable for people with visual and hearing impairments is a priority.

Finally, Clear Information About Facilities (Pair 4) shows the highest expectation (Mean = 4.49), which far surpasses the implemented clarity (Mean = 2.70). The mean difference of 1.792 ($t = 20.382$, $p < 0.05$) reflects a critical need for improvement. The SDs (CAE4 = 0.501, CAI4 = 1.278) reveal consistent expectations but inconsistent delivery, emphasizing the need for clear, accessible communication about facilities and services.

Overall, these results point to a systemic gap in communication access for people with disabilities. Bridging these gaps requires enhanced training, tools, and policies to provide equitable access to communication and information.

IV. DISCUSSION & CONCLUSION

According to the survey, tourism destinations have a moderate level of physical accessibility for people with disabilities (PWDs). PWDs have above-average physical

mobility thanks to partially accessible walkways and pathways. Additionally, acceptable ratings for attitude accessibility among tourist establishments showed some degree of support and acceptance for PWDs. Furthermore, the general perception of the tourism industry's knowledge of PWDs' requirements was positive.

The results point to small but noteworthy variations in PWD accessibility, especially in the areas of communication and information access, which were deemed inadequate. These disparities highlight shortcomings in guaranteeing that tourism offerings sufficiently address the unique requirements of people with disabilities. In terms of disability-friendly tourism accessibility aspects, particularly information and communication access, as well as Disability Support Policies and Incentives, the study finds that there are substantial implementation gaps. This deficiency highlights the tourism industry's inability to adequately integrate PWDs. Gillovic and McIntosh (2020) stress that acknowledging PWDs' rights and their position as active participants in the tourism economy is essential to their integration into the sector, which calls for more than just physical accommodations. In addition to ensuring compliance, accessibility is essential for improving PWDs' well-being, encouraging inclusiveness, and advancing diversity in tourism narratives.

Additionally, by lowering barriers, tourism businesses can take use of PWDs' economic potential, boosting earnings and promoting long-term growth (Ibănescu et al., 2018). Transportation, lodging, and leisure are among the industries that profit from this economic knock-on impact, which boosts the tourist industry (Manzoor et al., 2019). Through the creation of shared experiences and the dismantling of social barriers, inclusive tourism promotes community and social cohesion. By promoting travel as a human right that promotes tolerant and diverse cultures, inclusive practices aid in dispelling the stigmas attached to impairments (Cloquet et al., 2018). This supports demands that Ghana's tourism industry guarantee PWDs are completely integrated and not at a disadvantage in any way.

RECOMMENDATIONS

➤ *Enhance Physical Accessibility*

Stakeholders should concentrate on developing and enhancing physical infrastructure that accommodates people with disabilities (PWDs) to make tourist destinations more inclusive. This include constructing ramps, enlarging walkways, putting in railings, making sure facilities are accessible, and offering transit alternatives that are wheelchair accessible. Furthermore, to make sure that these facilities continue to operate and adhere to global accessibility requirements, routine audits must be carried out. The tourism sector will draw more PWD tourists and enhance their entire experience by improving physical access.

➤ *Promote Inclusive Communication*

One major obstacle for PWDs is the absence of accessible communication outlets. Technologies that assist people with hearing or vision impairments, like braille

signage, voice-to-text conversion mobile apps, and sign language interpreters, should be implemented by tourism operators. These resources, along with knowledgeable employees, can assist close the communication gap at information kiosks. To make sure PWDs have access to all the information they want, it is also crucial to provide accessible websites with multimedia options and clear directions.

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