MANY VOICES MAKING CHOICES:

MUSEUM AUDIENCES WITH DISABILITIES

Peta Landman, Kiersten Fishburn,
Lynda Kelly, Susan Tonkin

A JOINT PUBLICATION BY

AUSTRALIAN MUSEUM

AND THE

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About the Authors

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Susan Tonkin is responsible for evaluation and visitor research at the National Museum of Australia, Canberra. The study of visitors with disabilities is one of a series of audience segment studies which she has helped the Museum to commission. Susan formerly managed National Museum programs at Old Parliament House, Canberra.

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FRANK HOWARTH
DIRECTOR, AUSTRALIAN MUSEUM, SYDNEY

Across the world museums are increasingly recognising the diverse range of access needs and the benefits that meeting those needs brings to all audiences. Travelling to Brazil recently I noticed the increased emphasis museums across South America were giving to audiences with disabilities. Innovative ways were used to offer rich and diverse experiences for people with a disability, many making use of art and touch.

At the Australian Museum we are currently re-thinking what it means to be a contemporary museum for the 21st century and how we can deliver on our new mission statement – Inspiring the exploration of nature and cultures – in ways that are respectful of audiences and involve a true dialogue with our diverse stakeholders.

Interestingly, this study found that access, independence and choice are of key importance for audiences with disabilities. Yet these issues aren't only applicable to audiences with disabilities. Older people, young people, people from diverse cultural backgrounds all want to see themselves reflected in the work of museums, their public programs, collection policies and research projects.

This landmark report brings together for the first time the vast range of resources available for audiences with disabilities and, most significantly, provides this audience with a voice – one that we will be seriously considering as we renew ourselves as a museum for the 21st century.

CRADDOCK MORTON
DIRECTOR, NATIONAL MUSEUM OF AUSTRALIA, CANBERRA

The National Museum of Australia Mission Statement commits us to promoting an understanding of Australia's history and an awareness of its future possibilities in a number of ways, including 'engaging and providing access for audiences nationally and internationally'.

As people with a disability and their friends and families already know, the full implications of providing access are not always understood by those who plan and develop museum operations. Access, independence and choice often depend on relatively simple measures which may be neglected or forgotten in the pressure to meet deadlines or stay within budgets. And yet so many of those improvements such as automatic doors, large print, uncluttered floor areas, low positioning of interesting items or absence of background noise, improve access and enjoyment for all kinds of visitors, not just those with recognised disabilities.

Like other museums, we know there is some way still to go before all of our exhibitions and programs are disability-friendly, but we will ensure that the insights gained from the present study contribute to strategic planning and programming at the National Museum, particularly during our current commitment to gallery redevelopment and the improvement of visitor amenities. In considering ways to enhance the visitor experience and improve access to our stories, our ideas and our collections, we can now be guided by the experiences and comments of visitors with disabilities.

The National Museum is especially pleased to be associated in this project with the Australian Museum. The partnership, like others before it, has enabled our resources to extend beyond the two individual institutions and develop broader principles from the experiences of visitors with disabilities in Canberra and Sydney. This publication will make those same insights available across the Australian museum sector.

SANCHA DONALD
Chief Executive Officer, Accessible Arts

Research can be a cornerstone of progress if it is thoughtfully developed, professionally undertaken and actually applied.

When you read this research I hope you are struck by the thoughtful methodology used. In general the groups were divided according to access needs rather than by disability type. Where exceptions were made it was to enhance the abilities of those participating to fully contribute to the research.

The issues of access were discussed as part of the research, and this principle was also applied to the methodology. People with a disability who were not able to participate by attending in person were encouraged to contribute to the consultation via email and phone.

Much of the methodology was decided upon after previous experience by Accessible Arts in similar undertakings. The findings offer rich material for all readers to apply to their domain and it is a credit to those who commissioned the research that they selected a consultant with extensive experience in this area.

On behalf of Accessible Arts I would like to thank Kiersten Fishburn for conducting the research in such a professional and thorough manner. I am confident that this research will become a resource for those who are genuinely interested in extending access in its broadest sense to public institutions for all sectors of society.

The findings are varied and will provide you with concrete information to improve the experience of visiting a gallery or museum for people with a disability. The information in many cases can also be applied to the ageing population and to the public at large. The same barriers to having an enjoyable time at a cultural institution as those articulated in this research equally affect many people.

Of particular note is that people with a disability *want* to go to galleries and museums, they believe that they have much to offer them and would welcome the opportunity to visit galleries and museums more regularly.

What are you waiting for!

1. Introduction

'Most of my friends like to learn about history, and we talk about who has been to what museum. It is just good to look at the real thing. The real deal.'

❊

One in five Australians has some type of disability. People with disabilities represent a large, diverse and important audience for museums and galleries. The aim of this study is to give voice to the views of visitors with disabilities and suggest ways in which museums and galleries can better support their access needs.

Overall, it was found that people with a disability are supportive of museums and galleries, they are motivated visitors and see museums and galleries as excellent environments for learning, education and social interaction. People with a disability have strong networks and often visit in groups or with friends and family.

Ensuring their access needs are met offers the potential for museums to increase both visitor numbers and the diversity of their audience. In addition, by finding better ways to meet the needs of visitors with disabilities, museums and galleries will be improving the visiting experience for all visitor groups.

Access, independence and choice were the key issues identified by people with a disability consulted in this study. As one respondent noted, 'Not everyone should be expected to go and ask for information, it shouldn't be a requirement of your visit. You might want to just be anonymous and independent. There should be an option, it's your choice.'

How museums and galleries respond to the needs of people with a disability is critically important. However, it is also important to keep in mind that disability is just one part of a person's personality rather than the defining element, and that their interests are as diverse as those of any other visitor.

For ease of reference, 'museums' should be taken to refer to 'museums and galleries' throughout the text.

1.1 This study

'I like visiting museums and looking at stuff like dinosaurs and bones.'

❊

This research project builds on the partnership between the Australian Museum and the National Museum of Australia, Canberra that has already resulted in the publications *Energised, Engaged, Everywhere: older audiences and museums* (Kelly,

Savage, Landman and Tonkin, 2002), which focused on museum visitors aged over 65 years and *Knowledge Quest: Australian families visit museums* (Kelly, Savage, Griffin and Tonkin, 2004), which focused on family audiences and learning.

A literature review on visitors with disabilities found that while there is much information on access, there is little information on the arts generally and none at all about museums, that is gained directly from the perspective of people with a disability. Therefore, a series of consultation sessions were organised to ask people with a disability about their experiences as visitors to museums. Four sessions were run in both Sydney and Canberra. Specific sessions for people using Auslan and for people with an intellectual disability were held. Workshops with museum staff, peak bodies and carers were also organised.

Many potential participants found it difficult to get to the venue or find the time to attend in person. Therefore, respondents were also given the opportunity to contribute their comments via email or telephone. It is recommended that these options are made available in any future studies to reduce barriers to participation.

Qualitative research methodologies used in this study focused on:

• motivations for museum visits
• factors that influence museum visits
• barriers to visiting museums
• a detailed description of a recent visit, including highs and lows
• depth of knowledge of what museums offer
• exhibition topics and programs
• internet and leisure habits.

For the purposes of this report only, findings are grouped in four areas:

• people with a physical or mobility disability
• people with a sight disability
• people with a hearing disability
• people with an intellectual disability.

The study group understands and respects the diversity of the disability community. Within this report we use the term 'Deaf' (capital D) to refer to people who speak Auslan and identify as culturally Deaf. We use the term 'deaf' (small d) to refer to people who are deaf or have a hearing impairment but do not necessarily identify with the Deaf community or use Auslan (for example, older people who have acquired a hearing impairment).

The information gained from this study can be used to provide better services

and to ensure that programming and marketing can better meet the needs of this audience sector, with a view to increasing the number and regularity of attendance. It can also be used by organisations to help them meet government accessibility requirements.

1.2 What is disability?

'MY SON HAS AUTISM AND OBSESSIVE COMPULSIVE DISORDER AND MUSEUMS ARE GREAT FOR HIM BECAUSE HE IS INTELLIGENT AND CAN READ. BUT, WITH NOISE HE PUTS HIS HANDS OVER HIS EARS! ESPECIALLY WITH HARD SURFACES WHERE THE SOUND REVERBERATES.'

❧

The World Health Organisation uses 'disability' as an umbrella term for any impairment, activity limitation or participation restriction influenced by environmental factors. Disability generally does not include experiences that are not health-related, such as restrictions due to socio-economic factors.

Disability is a broad term that is applied to a diverse range of people. Each individual's experience of disability is unique and can be influenced by age, cause, attitude, family or cultural background, opportunity, adjustment of physical, sensory and other factors. 'Disabilities can be permanent or temporary, debilitating or not, clearly defined or 'hidden'. Asthma, diabetes, heart and lung conditions, migraines and epilepsy are all hidden disabilities!' (Accessible Arts, 1999, p 8–9). It is also important to remember that disability encompasses a whole range of factors, including physical and sensory impairments, learning disabilities and mental health problems.

Although people with a disability have experiences in common and some view themselves as a distinct culture (for instance the Deaf community), it would be inappropriate to view people with a disability as an homogeneous group, or even to assume that individuals define themselves by their disability. As Delin (2003a) has suggested, 'they may have cultural identities based on ethnicity, social background, religion, interest or regional identity. A disabled person is as likely to be a member of a historical society, a researcher in a reference library or a student on a fine art course as they are to come to a touch tour, sign-interpreted talk or community consultation' (p 14).

While it is still common for the terms 'disabled' and 'the disabled' to be used, it is considered more appropriate in Australia to use the phrase 'person with a disability'. This places the person before the disability. Therefore, the phrase 'person with a disability' is appropriate, but 'disabled person' is not. A disability

does not 'disable' a whole person. When discussing disability, it is a courtesy to avoid referring to people who do not have a disability as 'normal'. They are 'people without a disability' (Accessible Arts, 1999).

It is also more appropriate to speak about specific support or access needs rather than to refer to a level or degree of disability. This again takes the focus off the disability and places it instead on the support that a person needs to function in society (Walsh and London, 1995). The term 'people with special needs' is no longer appropriate, as people with a disability prefer to see their needs as 'unmet' rather than 'special'. The word 'special' also has patronising connotations (Arts Council of Wales, 2001).

There are two main models of disability definition: the 'medical model' and the 'social model'.

The medical model is the traditional perception that sees disability as a 'condition' to be 'cured'. Disability is perceived as a personal calamity, resulting in a pitying, charity-based response. The medical model assumes that disability is something pathological, a condition rather than an experience, and the responsibility of the individual. The ultimate aim is to 'overcome' the disability and become 'normal' (Walsh and London, 1995; D'Art, 2004, Accessible Arts, undated).

The social model acknowledges that it is the barriers created by society that are 'disabling' to an individual and that it is our collective responsibility to remove these barriers. For example, many buildings are inaccessible to people with mobility impairments, but this is because of specific conventions and traditions in building design rather than because of a person's mobility impairment. The use of the phrase 'people with a disability' reflects the social model as it puts the individual, not the disability, first. It is the model used within this study. (Accessible Arts, undated; Fishburn, 2002a).

1.3 Disability in Australia

'I PREFER TO GO TO THE MUSEUM BY MYSELF WHEN IT IS ACCESSIBLE. I PREFER INDEPENDENCE.'

❧

In research carried out in 1998, the Australian Bureau of Statistics (ABS) identified that 19% of the Australian population had a disability, which at that time was equivalent to 3.6 million Australians. The figure most commonly used by the disability sector is that one in five people have a disability. It is important to remember that disability is not an isolated experience; people with a disability have friends, families and colleagues and therefore the number of people affected by poor services or inadequate access is far greater than just one in five (Accessible Arts, undated).

Age is directly linked to the incidence of disability in the community. Less than 10% of the population below the age of 35 has a disability. Above 35, the percentage rapidly increases. Between the ages of 45 and 54, 21% have a disability; between 60 and 64, the figure is 36%; and 67% of those aged 75 and older have a disability (Accessible Arts, 1999). Physical disabilities represent the largest proportion (89% of people with a disability) and intellectual/mental disabilities account for the remaining 11%. Only 2% of people with a disability use a wheelchair (Accessible Arts, 1999).

Little visitor research has been carried out among people with a disability; however a 1998 ABS survey revealed that 72% of Australians over the age of 18 with a disability (2.2 million people) had been involved in a community or sporting activity away from home in the preceding 12 months. Involvement rates decreased with age, with 85% of those aged 18 to 44 involved in at least one community or sporting activity compared to 60% of those aged 65 and over (ABS, 2002). These rates indicate that people with a disability are an active audience. However, for the most part these rates are lower than similar statistics for the non-disability population and participation rates decrease as barriers to activities become more pronounced (see Table 1).

Table 1: people with a disability who attended an activity outside the home in the previous 12 months (by age group)

Activity attended	18 and over	18 to 44	45 to 64	65 and over
Any community or sporting activity	72%	85%	73%	60%
Cinema	42%	61%	42%	26%
Library	32%	39%	31%	26%
Botanical gardens or an animal/marine park	28%	38%	29%	18%
Theatre or concert	26%	31%	28%	19%
Museum or gallery	19%	23%	21%	13%

The 1998 ABS data also identified that one in four people with a disability is from a non-English speaking background. (Multicultural Disability Advocacy Association of NSW, 2000). Being from a non-English speaking background is an experience which can compound disability and increase the barriers to participation. As there may be cultural sensitivities around identifying people with a disability within non-English speaking communities and within Indigenous communities, the figure of one in four may not be an accurate reflection of those communities.

1.4 The Disability Discrimination Act in Australia

'For me I have enough stuff, enough knocks in my life, and sometimes I won't take my son out as I don't know if I'll be able to manage and I don't want to be in a situation where I don't know what is there.'

❧

The Commonwealth Disability Discrimination Act (DDA) came into effect in July 1992. Under this Act discrimination on the basis of disability is unlawful. The Act recognises that people with a disability have the same fundamental rights as other people and should have equal opportunities to access and participate in community life.

The Act affects all public and private arts, cultural and entertainment organisations offering services and facilities to the public. It also applies to organisations offering education or training in the arts. Many states and territories also have their own legislation which makes discrimination against people with a disability unlawful. Arts organisations must comply with both federal and state legislations.

The definition of disability given under the Commonwealth Disability Discrimination Act (1992) is broad and includes:

- physical
- intellectual
- psychiatric
- sensory (including sight and hearing impairments)
- neurological (including acquired brain injuries)
- learning difficulties
- physical disfigurement
- the presence in the body of disease-causing organisms (e.g. HIV/AIDS).

The Act covers people who have now, have had in the past, may have in the future, or are perceived to have a disability. This recognises that disability may be hidden or temporary and that attitudes towards disability can also be a cause of discrimination.

The Act aims to:

- eliminate, as far as possible, discrimination on the grounds of disability
- ensure that people with a disability have the same rights to equality before the law as the rest of the community
- educate the community about the rights of people with a disability.

The Act requires agencies to monitor themselves on the provision of services for people with a disability. Institutions which rely on public funding or public support have an ethical obligation to ensure that all members of the public are able to access their services and fully participate in any experience (Walsh and London, 1995). However, this is usually not a requirement of funding. There is no centralised facility to ensure that public institutions meet the requirements of the Act as most funding and compliance activities take place on a state-by-state basis.

1.5 Discrimination

'MOST DISABLED PEOPLE PREFER TO BE INDEPENDENT AND NOT CAUSE DIFFICULTY, SO IF THEY CAN ACHIEVE THIS FOR THEMSELVES IN PUBLIC PLACES THEY REMEMBER THE PLACES AND RECOMMEND IT TO OTHER DISABLED FOLK.'

Discrimination is always unlawful except where it can be shown that removing a barrier to access would impose unjustifiable hardship. Discrimination can be both direct and indirect. Direct disability discrimination occurs when people with a disability are treated less fairly than people without a disability, for example, if a wheelchair user is refused entry to a nightclub while non-wheelchair users are being allowed in. Direct discrimination also occurs when people are treated less fairly because they are relatives, friends, carers, co-workers or associates of a person with a disability.

Indirect discrimination occurs when the needs of a person with a disability are not met, for example, when a person with a mobility disability is unable to enter an art gallery due to a lack of access provisions. The indirect discrimination provisions contained in the DDA effectively impose an obligation on arts organisations not just to remove barriers but to improve access and opportunities for people with a disability to participate fully (Arts Access, 1998).

The consequences of being the subject of a complaint under the Act can be serious. They may include:

• large compensation pay outs
• loss of reputation
• costly legal fees
• considerable time spent dealing with complaint bodies or legal bodies (Arts Access, 1998, p 22).

The following areas affect the arts and cultural sectors. They have been addressed under the DDA and are likely to be further developed:

- independent entry to premises
- independent access within premises
- captioning of television and audio-visual material
- provision of Auslan interpreters
- provision of accessible parking
- access to premises for a person with a guide dog
- wheelchair seating spaces (in all price areas of a theatre)
- access to information in alternative formats – specifically Braille
- access to and provision of TTY phones
- companion seating in theatres and cinemas
- support of costs of companions' ticketing on entry and to public programs
- accessible websites and online services (Fishburn, 2002d).

2. Improving access

'I FEEL QUITE COMFORTABLE WITH THE [MUSEUM], AS I HAVE HAD SOME PRACTICE WITH THAT. AFTER A WHILE I AM PRETTY MUCH FAMILIAR WITH THE LAYOUT OF THE BUILDING. BUT WHEN I FIRST GET SOMEWHERE [NEW] IT IS HARD AND I GET ANXIOUS AND THE EMOTIONS BUILD UP.'

❧

People with a disability generally visit museums with family or friends. Many visit independently when good access is assured. Many more would like to be able to visit independently and wish that more access services (such as tactile experiences, captioning, provision of Auslan, alternative format labels, audio tours or guides, guaranteed wheelchair access to all parts of a museum) were available to make this possible. Many commented that without these services, the content of some museums and exhibitions was literally inaccessible and there was therefore no point in visiting.

As Bawden (2002) points out, increasing the general availability of opportunities for cultural exchange does not necessarily lower barriers to participation. Venues and means for participation must also change to better anticipate the needs of people with a disability. 'Access ... should be understood in its broadest sense. Though increased physical access is perhaps the most obvious interpretation of improving access, it can also be understood in terms of improving people's attitudes and actions' (Accessible Arts, 1999, p 9). Access means considering the needs of the disability community when putting in place processes such as online access and bookings, promotion of activities and events, pricing scales and deciding when and where events are held.

There are three main types of access:

• physical access
• access to services
• access to information.

The main barrier to museum visits identified by the people consulted for this study was physical access. Barriers included the basic problem of not being able to enter or move through a building at all, but also included not being able to enter and enjoy the museum independently. The opportunity to use a museum independently is crucial for people with a disability. Having to request assistance to physically enter, or to rely on staff help to move through a building (for example,

where maps are confusing or not available in a range of formats) would stop many people with a disability from visiting. The necessity of relying on help was not only felt to make a visit difficult, but was seen as undignified, making the visit unpleasant. As one participant said, 'I prefer to go the museum by myself when it is accessible. I prefer independence.'

The main barriers to access arise because the needs of people with a disability are not considered at the original design stage, or when refurbishments and improvements are planned. Fishburn (2002a) points out that 'understanding the varied specific needs of people with a disability, and being alert to the possible impact of design decisions that you make, will help ensure that your environment is accessible and "disability friendly"' (p 8). Publicly-funded buildings should be as accessible as possible to all members of the public, which may mean finding a creative solution if renovation is not possible.

Limitations to access can also arise through high admission costs, lack of adequate accessible public transport, inadequate facilities, inhospitable public programs and difficult-to-access visitor information, in particular detailed information about access provisions. These issues are expanded on in the next chapter.

2.1 WHY IMPROVE ACCESS?

'FOR THE ENTRANCE AND EXIT AT MUSEUMS, I THINK THERE SHOULD BE SOMETHING TACTILE ON THE GROUND SO WE HAVE SOME IDEA IF WE ARE HEADING IN THE RIGHT DIRECTION. I KNOW I HAVE [MY GUIDE DOG] AND THAT'S FINE, SHE CAN FIND IT ALL, BUT SOMETIMES SHE JUST STOPS TO A HAVE A SNIFF AND I THINK SOME TYPE OF TACTILE SURFACE WOULD BE GOOD.'

In its online publication *Accessibility for the Disabled* the United Nations states that 'We are all physically disabled at some time in our lives ... it is important that [the built environment] should be barrier-free and adapted to fulfil the needs of all people equally' (2003–4, n.p.). Accessibility is, therefore, simply a matter of social justice. Buildings and exhibitions must be designed with the needs of all people in mind. Arts Access point out that 'The rewards for service providers include more diverse and larger audiences, greater customer satisfaction and better-designed services and premises' (1998, p 2).

Improved access automatically benefits audience groups who do not identify as having a disability. For example:

- Improving physical access helps parents with prams, older people and people with a physical injury or a temporary disability (e.g. a broken leg).
- Large print on labels helps people who use glasses, older people and young people.
- Plain English helps younger people and people from non-English speaking backgrounds (including tourists).
- Providing subtitling for the Deaf or people with a hearing impairment will benefit people with limited English, who may be able to read English better than they can understand spoken English.
- Making signage simple and legible will benefit tourists.
- Alternative presentations, for example multi-sensory exhibits, provide different points of reference for everyone (Fishburn, 2002h, p 19).

Many improvements made for people with a disability will also be relevant to older visitors, an increasingly important group as the population ages.

Museums can also be seen as places which can support people to overcome specific difficulties in their lives. Lois Silverman (2002) writes about people who are wrestling with depression, coping with the onset of old age and related losses of function, adjusting to life with a terminal illness, or dealing with substance abuse, who 'crave opportunities to learn, to reflect, to restore, and perhaps, most importantly, to affirm a sense of self and continued connection to others in the face of difficulty' (p 69).

2.2 Universal Design

'TO GO TO THE TOILET AT THE [GALLERY] YOU HAVE TO GO DOWN A SET OF CARPETED STAIRS. I DON'T HAVE TROUBLE WITH STAIRS EXCEPT THERE ARE NO MARKINGS ON THE STAIRS TO TELL YOU WHERE THE NEXT ONE IS. IT IS A REAL ISSUE IF THE SURFACE LOOKS THE SAME THE WHOLE WAY DOWN. IT IS LITTLE THINGS LIKE THAT THAT CAN REALLY MAKE A DIFFERENCE.'

Universal Access and Universal Design are the main principles that have been developed to guide accessible design. These concepts relate to designing environments, products and services so that the greatest number of people can access them equitably. Rather than emphasising a particular disability, Universal Design focuses on making all environments, products and services accessible to all people. 'In this way, universal access and design reflect the adoption of the "social" model of disability – rather than focusing on the disability, the focus is on removing "disabling" barriers' (Fishburn, 2002a, p 8).

The principles were developed by the Center for Universal Design at North

Carolina State University. A group of architects, product designers, engineers and environmental design researchers developed guidelines covering areas such as environments, products, and communications. The seven principles of Universal Design can be applied to evaluate existing designs, guide the design process and educate both designers and consumers about the characteristics of more usable products and environments.

The seven principles of Universal Design are:

1. *Equitable use* – The design is useful and marketable to people with diverse abilities.
2. *Flexibility in use* – The design accommodates a wide range of individual preferences and abilities.
3. *Simple and intuitive* – Use of the design is easy to understand, regardless of the user's experience, knowledge, language skills, or current concentration level.
4. *Perceptible information* – The design communicates necessary information effectively to the user, regardless of ambient conditions or the user's sensory abilities.
5. *Tolerance for error* – The design minimises hazards and the adverse consequences of accidental or unintended actions.
6. *Low physical effort* – The design can be used efficiently and comfortably and with a minimum of fatigue.
7. *Size and space for approach and use* – Appropriate size and space is provided for approach, reach, manipulation, and use regardless of user's body size, posture, or mobility.

2.3 Developing an action plan

'IT WOULD BE GOOD IF THERE WAS SEATING IN THE EXHIBITION ITSELF. CHAIRS THAT YOU CAN GET UP FROM EASILY. OFTEN IT IS DIFFICULT TO WALK LONG DISTANCES WITHOUT A BREAK.'

❁

The best way to address discriminatory practices and lack of services is to prepare an action plan. This requires an audit to discover the areas of discrimination within the organisation, and the writing of a plan for overcoming the problems identified. The development and implementation of action plans fits with wider organisational practices such as enhancing corporate image, delivering services more efficiently and accessing a wider market. Once implemented, the action plan should be reviewed regularly, with continuous feedback encouraged.

To develop an action plan, organisations need to:

• consult with people with a disability and/or their representative organisations
• review their policies and practices
• identify barriers for people with a disability in accessing services
• plan strategies to eliminate these barriers (Fishburn, 2002d, p 7).

2.3.1 Conducting an audit

Delin points out that 'a thorough audit of your buildings, services, policies and practices, carried out by a competent auditor, is the most effective way to demonstrate your organisation's commitment to inclusive provision and full access for [people with a disability] ... Even if you have a disability access plan in place, it is good practice to evaluate its effectiveness with an audit' (2003b, p 22).

Hornsby developed a list of some of the questions that arts organisations need to answer in the audit stage of preparing an action plan:

• What they have and what they provide? (Including premises, adaptations, services, equipment, resources, budgets, skills, formats, knowledge.)
• What can be provided with short, medium and long-term notice? (Including ramps, interpreters, support, budgets, guidelines/policies.)
• What they tell people about? (Including marketing, information, publicity, image, representation, accessibility, ethos.)
• Who they ask for support/advice? (Including governance, consultation, expert opinion, resources, local links, local support.)
• What they do? (Including access, programming, participation, interpretation, context, representation and role modelling.)
• What they ask? (Including procedures, proactive or reactive, staff, recruitment, participation.)
• Who they employ? (Full or part-time staff, people on contracts, freelance or volunteers) (2003, p 13).

2.3.2 Consultation

To examine and improve access – physical, informational, attitudinal – it is important to consult with people with a disability. Consultation can be also be achieved through development of partnerships with agencies or organisations that have links into and are respected by the disability sector.

Hornsby suggests that organisations should consult:

- Before new buildings, or refurbishments are carried out and before new developments and new services are introduced.
- When carrying out access audits, both physical, attitudinal and intellectual with regard to programming, information and marketing.
- In developing policies and procedures.
- In the provision of training and developing staff and boards' awareness of disability issues (2003, p 11).

She notes that many professional agencies and consultants will be able to provide specialist consultation. Local groups and individuals may be keen to offer expertise either for a fee, a donation, or on a voluntary basis. Expenses should be paid, refreshments provided and time and expertise should be properly recognised. In addition, offering free tickets or invitations to private views are an excellent way to say 'thank-you'.

Consultation can also provide links to the communities that an organisation is trying to attract and can provide a good sounding board for programming ideas and suggested access improvements. However, be aware of tokenism – consulting as a lip-service and failing to do anything with the result. But, remember that there will be a wide divergence of opinions that should be considered, but not be allowed to impede progress. 'If you don't take any notice of what the user groups tell you then they are bound to feel exploited and undervalued and unlikely to give you their time again. Be realistic about what changes can be implemented and by when' (Hornsby, 2003, p 12).

2.3.3 Further information

The Human Rights and Equal Opportunity Commission has a range of action plans available on their website, including many from the arts and cultural sector. These are useful to organisations in the process of developing their own action plan. People with a disability can also access these and see what a particular organisation has committed itself to achieving. These registered action plans can be found at www.humanrights.gov.au. Follow the link to Disability Rights from the main page, then to 'Action Plans' in the 'Information and Legislation' section of the Disability Rights page.

To be accepted by the Human Rights and Equal Opportunity Commission action plans need to fulfil several legal requirements and the Commission will provide detailed information.

3. Visiting museums and galleries

'I would like to go with a [museum] club to make new friends.'

❀

Participants in the consultation groups for this study indicated that there were two main issues they considered when deciding whether to attend a museum. First, whether there was something of interest they particularly wanted to see and second, whether there were access services available. These services included tactile, multi-sensory and interactive experiences, guided tours, including those targeted at specific groups (for example, Auslan interpreted tours), good physical access and the provision of access information so a visit could be planned and they would know exactly what to expect.

As Fishburn (2002) points out, people with a disability may have specific needs or customer service requirements when accessing services or environments. It is critical that these needs are pre-empted as far as possible, so that the onus of asking for services is not placed on the person with a disability. Establishing services or protocols in the organisation to accommodate the needs of people with a disability will go a long way to encouraging them towards visiting and ensuring their comfort and enjoyment during the visit. A whole-of-organisation approach will ensure that the services provided are meaningful and respectful and will demonstrate that the organisation recognises the importance of this community group and is actively working to break down access barriers.

The following headings deal with a range of suggested improvements, which arose out of discussion with the consultation groups for this study.

3.1 Visiting times

'We have a daughter with a mental disability and I've been to cultural events with her when she hasn't been well. Just the behaviours of people with mental disability can be embarrassing. I would like to see, if it could ever be managed, a separate event that they could come along to and feel that other people are going to understand.'

❀

A common request was for the provision of special opening hours (or events) for people with a disability and their carers. Participants identified that museums

are often noisy or too crowded, making it impossible, particularly for wheelchair users, to actually see exhibits. It was suggested that an invitation to a museum or exhibition outside of normal hours, or a viewing specifically for visitors with a disability, would be an opportunity to see exhibits in a more accessible environment with less crowds and noise. Museums and galleries that already provide this service were highly praised and were also seen as encouraging and welcoming of visitors with a disability.

People with a disability also found school groups difficult to deal with in museums, again due to crowding and noise. It was suggested that museums could promote the times when schools are unlikely to be in the space to allow people with a disability to plan their visits accordingly.

3.2 Cost

'IF YOU HAVE TO HAVE SOMEONE COME WITH YOU TO THE MUSEUM BECAUSE YOU CAN'T GO BY YOURSELF, AND THEY DON'T REALLY WANT TO COME, WELL IF THEY COULD GET IN FOR FREE, THAT MIGHT SWING IT FOR YOU.'

Cost can also be a barrier to attendance for people with a disability. This was particularly true for carers/companions. All the consultation groups for carers found that without carers' concessions, paying two entry fees was a financial burden and would often prevent them from visiting. Other groups commented that there should be a recognition of the additional costs associated with a disability; many found museum entry (or exhibition entry) prices too high while on disability support pensions. One respondent said, 'for me, the barrier to museum attendance remains the cost of entry fees. I am on a disability support pension and to take my son to the museum is prohibitively expensive.'

3.3 Transport

'WHEN I GO TO A PARTICULAR LOCATION I ALWAYS HAVE TO GET USED TO IT AND LEARN THE ROUTE A FAIR BIT. SOMETIMES IT TAKES A COUPLE OF WEEKS TO GET MYSELF COMFORTABLE.'

Three clear issues in relation to transport arose from the consultation sessions:

• ease of public transport use, including information about services
• availability of accessible parking
• ease of taxi drop-off and pick-up points.

The type of transport used by people with a disability is often dictated by the individual's disability: those unable to use public transport would drive or take a taxi; those unable to drive would take public transport or occasionally use a taxi. The need to use a taxi because of inaccessible public transport often added a further cost limitation.

Museums that are easily accessible by public transport were identified as the most attractive for people with a disability. Ease of access includes public transport stops close to the museum entrance, accessible public transport and clear information provided about public transport options. The links between public transport and the museum are also important. As one respondent asked, 'why can't you have front entrances on the same level you have the bus-stop? It is really hard when you have to get up one level just to enter. It can be really off-putting for a lot of people.'

With parking, the provision of accessible parking spaces was a critical issue. Again choice was important: the option to pre-book an accessible space was one preference, while others wanted to simply turn up and see if a space was available. Independent access to parking and the museum entrance – without having to ask for assistance or contact security – was also preferred. Again, links between the parking spaces and entrance are important, as one participant noted: 'I have to make sure it isn't raining, because there is no shelter and it is a fair walk from the car to the entrance.'

3.4 FACILITIES

'SHOPS AND CAFÉS ARE NOT USER FRIENDLY FOR PEOPLE WITH A DISABILITY. THE SHOPS, QUITE OFTEN, ARE OVER-CROWDED WITH DISPLAYS AND LITTLE ROOM IS AVAILABLE TO MANOEUVRE (FOR ANYONE). IT IS HARD TO HEAR THE PERSON SERVING YOU, AND I HAVE GIVEN UP ON MORE THAN ONE OCCASION, SIMPLY BECAUSE I COULD NOT UNDERSTAND/HEAR THE PERSON SERVING ME.'

❄

Participants in the consultation groups for this study identified a range of facilities they liked to use, such as cafés, restaurants and shops. They also identified a number of specific facilities that would improve their experience and make them feel welcomed and supported.

A specific restroom/relaxation space for people with a disability was a particularly popular suggestion. This was seen as a space where they could relax, eat lunch, take a break if they were tired, access drinking and hot water and get out of crowded or noisy environments if they were uncomfortable or felt threatened.

It was felt that this space should be near the accessible toilets to assist people with a mobility disability.

Many carers felt this kind of space would be a place where they could also take a break, or could provide assistance (for example, with feeding) to their companion in privacy and comfort. Feeding in particular can be awkward, as one of the carers reported: 'last time I was at the museum I had to feed [my son] and I couldn't find anywhere to feed him because he is peg fed, tube fed. Sometimes we go to the coffee shop, but it is hard.' It was suggested that this space be like a members' room, promoted exclusively to people with access needs.

Visiting the café was identified as an enjoyable part of the museum visit and most participants said that they would visit the café or restaurant each time they visited the museum. However, it was generally felt that cafés in museums were quite expensive and that there should be a lower-cost option. Some said they would bring their own lunch because of the expense of the food and would only have a coffee in the café. The option of a luncheon room or other space to eat lunch in was requested, or if that wasn't possible, for café staff to be understanding about them eating their own lunch at the café tables.

The museum shop was generally seen as an enjoyable and interesting part of the museum experience. Most only 'window-shopped' and were unlikely to make a purchase due to the costs of products in the shop. Some participants commented that shops were difficult to navigate or move through and that they would be reluctant to enter for fear of breaking something or knocking over a display.

3.5 Public programs

'WHAT I THINK IS THAT THEY SHOULD JUST TREAT [MY SON] AS THEY WOULD ANYBODY ELSE AND ENCOURAGE HIM TO PARTICIPATE IN WHATEVER IS GOING ON, THE SAME WAY THEY WOULD ANYBODY ELSE.'

As with any other visitor group, lectures, talks and public programs are also of interest to people with a disability and are accessed depending on the individual's interest in the topic. Generally, participants in this study were most enthusiastic about attending lectures, talks or public programs on topics they were interested in and felt that it enriched and enhanced their knowledge and experience.

Watching films was identified as a particularly popular activity. However, participants stressed that it was important for films to be captioned and it was

noted that the provision of captioned or signed films would make a museum visit very attractive to the Deaf community.

Many participants commented that they were not aware when lectures and talks were on. It was suggested that a greater effort be made to inform disability service providers and peak organisations about lectures, talks and special events and to ensure that information about lectures, talks (and indeed films) is readily available in a number of formats in the museum itself.

The failure to provide disability access to public programs was the key reason (other than interest) why people with a disability would not attend. Barriers include:

• inaccessible venues (e.g. no wheelchair access or difficult access for a person with a mobility disability)
• failure to provide Auslan (signing) interpreting
• failure to provide live captioning.

Additional cost was also identified as another reason why a person with a disability would not attend a lecture or a talk.

Bell (2003) provides some useful suggestions to improve the accessibility of public presentations:

• Flexible seating arrangements for wheelchair users and their companions or people with assistance dogs can be achieved by creating space at the end of rows.
• Some reserved spaces should also be available at the front for people who need them.
• Sight lines need to be clear and unrestricted.
• Consider acoustics and make sound enhancement equipment available.
• Provide accessible presentation facilities for disabled speakers.

Many participants also stated that they would like to get more involved with museums and indicated they would be interested in membership or museum clubs targeted specifically at people with a disability. They felt that this would assist them to become more comfortable with the museum environment.

3.6 Tours

'IT'S EXTREMELY DIFFICULT FOR ME TO UNDERSTAND WHAT I AM LOOKING AT BECAUSE I DON'T HAVE ANYONE THERE TO EXPLAIN THINGS TO ME AND IT CONTINUALLY FEELS LIKE I'M WASTING MY TIME. GOING TO AN ART GALLERY WHERE THERE ARE PICTURES IT DOESN'T MATTER BECAUSE YOU CAN DREAM WHATEVER YOU WANT. TO WANT TO STAY IN THE MUSEUM AND SEE EVERYTHING I WOULD NEED ONE OF THOSE GUIDED TOURS.'

❋

Guided tours were seen as an excellent way of getting more information about a museum or exhibition. It was felt that they enhanced the educational experience, made the occasion more social, provided the chance to ask questions and made the museum generally more accessible.

The issue of choice arose in the discussion about guided tours. Many participants wanted guided tours to be fully accessible to all people with a disability, including (a) ensuring that all aspects of the tour experience were physically accessible, (b) that provisions were made for people with sensory disabilities who had to stand close to the guide and (c) that Auslan interpretation was provided in general guided tours. It was felt that guided tours were often not designed with access needs in mind and that staff needed disability awareness training to ensure that the needs of people with a disability in all guided tours were met.

Others favoured exclusive groups for guided tours, as they felt these would better meet their access needs. This was particularly the case for Auslan users who felt that a small group would give more access to the interpreter and would also be easier for the interpreter. People with intellectual disabilities also expressed some preference for smaller groups and for groups designed to meet their needs to help them overcome anxiety and make the museum visiting experience more relaxing and enjoyable. Many also expressed a preference for smaller guided tours outside of regular visiting hours or when the museum was less crowded, as one respondent explained: 'I don't like big groups, I like small groups. In big groups I get scared, I get anxiety feelings and get upset. I like small groups at the museum.'

Touch-tours were highly praised by participants who were blind, deafblind or had a sight disability. One comment was that 'to get your hands on things makes it so much better. A special tour that gives tactile experiences is marvellous.' Touch-tours are seen as a good way to access information and also as a fun social experience. People with intellectual disabilities also gave a positive response to tactile experiences and it would be a good option to open up touch-tours (or provide touch-tours) for that community as well.

Ideally, a museum should ensure that all guided tours are accessible to people with a disability and that staff have had disability awareness training. In addition they should meet the access needs of specific groups with exclusive guided experiences and varied tour times.

3.7 Outreach

'I WOULD LIKE TO GO THE MUSEUM BY MYSELF, BUT I CAN'T BECAUSE OF MY DISABILITY AND BECAUSE THERE IS NOTHING THERE TO HELP ME. IF I CAN'T FIND SOMEONE TO GO WITH I DON'T GO.'

❁

'Being outside of the mainstream immediately creates a barrier of confidence, with all those associated feelings of being undervalued and disconnected. Outreach work offers a means to cross these barriers, to open up our cultural and learning centres to a greater number of people. By definition it is about reaching out into communities, of networking and working in partnership' (Sargent, 2003, p 7).

Outreach programs were positively discussed by some participants in the consultation groups. It was felt that they provided a good introduction to the museum and were an enjoyable experience. Some school students with intellectual disabilities felt that an outreach experience at their school (including meeting museum guides) prior to coming to the museum would help them feel more relaxed about the museum content and about asking for assistance.

Many people with a disability spend much of their time with people with similar disabilities, for instance in group homes or in sheltered employment. An outreach program to those places may be a good way of introducing people with a disability to the content of museums and provide an enjoyable experience in itself (Walsh and London, 1995).

Outreach programs are generally regarded as an addition to the museum visiting experience. While they provide a good gateway to visiting the museum, they should not be seen as a substitute for an actual visit or for the provision of access services.

3.8 Finding out what's available

'I WOULD PREFER THERE TO BE ACCESS INFORMATION ON THE GENERIC INFORMATION BROCHURE, RATHER THAN A SECOND ACCESS BROCHURE, SO IT IS AVAILABLE FOR EVERYONE. YOU NEED A PLAN OF THE MUSEUM WITH RAMPS, ALTERNATIVE ROUTES, TOILETS, CONTACT NUMBERS, COSTS AND CONCESSIONS. AND IT MIGHT HAVE SPECIAL TOURS LISTED LIKE THE TACTILE EXPERIENCE.'

❧

Intellectual access includes all the practices museums employ to encourage visitors to access, enjoy and understand its collections. People with a disability need to be invited into museums. Participants in this study identified a need for better and easier ways to access information and for museums to promote directly to the disability community. Different modes of providing information need to be offered, as one carer explained, 'a lot of parents of kids with disabilities don't have access to the internet so we need to get it as a brochure or a mail loop and then we get it out to other groups.'

The museums community could generally improve visitation by people with a disability simply by raising their public profile in the disability sector. This could involve:

• direct promotion to disability peak groups
• media material sent to disability specialist media
• invitations to disability groups to visit the museum
• museum introduction sessions
• outreach to disability organisations.

People with a disability find out about museums and exhibitions in a variety of ways, depending on their impairment. Word-of-mouth is particularly important and museums are encouraged to send information to disability organisations and groups, especially when promoting a specific service such as a touch-tour. Most people with a disability also use newspapers to find out information; however for people who are blind, or have a sight disability, it is critical that information is also available via radio. One participant in this study stated, 'for me things must be on the radio, there's no point in getting a newspaper! It has to have radio coverage.' The internet is used by many people with a disability and especially by people who are Deaf or have a hearing disability. Surveys show that people are happy to find out information via websites and email, but often comment that

access information is either not available or very difficult to locate on most websites.

Wyatt-Spratt explains that 'for many people with a disability it is important to have information about where they are visiting so they can plan their trip. Any information that you can provide to the public (brochures, media releases, programs etc.) should also include disability access; information to let people know what to expect. Be honest in this information as this encourages people with a disability to visit and lets them know what is or isn't available' (2001, p 2).

The museums sector as a whole may consider the production of a museum access guide, detailing both content and access services, to be distributed to the disability community or promoted online. This would need to be conveyed in a variety of ways, such as in a large-print format, visually and by audio material. The provision of access guides and access information often determines whether a person with a disability feels confident and/or interested in visiting a museum.

Consultation for this study reinforced the importance of being candid about exactly what is provided. Participants were very clear about this. 'You need to know exactly what the access is. We need more descriptive information about access, for example gravel path leading to three steps. That means that it is actually possible to assess whether you can go there, a description actually from the point of view of a person using a wheelchair. It adds an element of knowing what you are going to encounter. It needs to be honest.'

3.9 WEB ACCESS

'IT WOULD BE GOOD TO HAVE ALL THE INFORMATION ON THE INTERNET SO I COULD JUST PICK WHAT I WANTED TO GO TO.'

As the internet is used by many people with a disability as their first introduction to a museum, it is essential that websites are as accessible as possible. The World Wide Web Consortium (W3C) and its Web Accessibility Initiative (www.w3.org/WAI), in coordination with organisations around the world, researches web accessibility and provides a series of technical standards and guidelines to enhance the accessibility of online information. It is recommended that all sites at least meet their minimum standards.

Websites should take into account the needs of a wide range of users such as the blind, the sight impaired, those with dyslexia and those with motor skills impairments. Pages should also be accessible to a broad range of web-enabled devices, such as voice, Braille, and plain text-based browsers, PDAs (Personal Digital Assistants), search engines and printers. For e-commerce sites, alternative

payment options to credit cards should be provided, as some people with a disability are unable to use credit cards.

The Internet resources section at the end of this book gives a list of websites that address other accessibility issues.

4. Improving exhibition access

'IF I WERE TO DREAM, I'D LIKE TO SEE THAT MUSEUMS AND ART GALLERIES PROVIDE TRANSCRIPTS FOR THOSE WITH A HEARING IMPAIRMENT AND SEE THAT ALL VIDEOS ARE SUBTITLED. I'D LIKE TO SEE SIGNAGE BE A LITTLE LARGER SO THAT PEOPLE WITH SIGHT IMPAIRMENT MAY HAVE A FIGHTING CHANCE TO SEE WHAT THEY ARE. USE EVERYDAY LANGUAGE, IF TERMINOLOGY HAS TO BE USED, THEN AN EXPLANATION OF THAT TERM INCLUDED.'

❈

While many participants in this study enjoyed and were enthusiastic about services designed for and specifically targeted at the disability community, museums that provided the opportunity to visit independently were particularly attractive. There were a number of issues raised in relation to the presentation of material in museums which can present barriers to independent visits. If designed with people with a disability in mind, the areas identified below can actively enhance the visiting experience, encourage people with a disability to visit and enable them to visit independently. The key areas identified were:

- exhibition spaces:
  – the size of exhibitions
  – the complexity of exhibition space and signage
- labels
- lighting levels
- hanging height
- exhibition inclusions, including:
  – display cases
  – audio-visual
  – tactile experiences (and multi-sensory experiences)
  – interactive opportunities.

An excellent resource to assist in identifying and eliminating barriers in these and other areas is the *Smithsonian Guidelines for Accessible Exhibition Design*, which can be found at www.si.edu/opa/accessibility/exdesign/start.htm. The following section outlines specific comments and suggestions relating to the areas noted above, as discussed by the consultation groups in this study.

4.1 Designing exhibitions for improved access

'I'VE WONDERED IF FOR PEOPLE WITH A SIGHT DISABILITY VISITING THE MUSEUM IF THERE COULD BE SOME TYPE OF GUIDANCE FOR THEM. LIKE MARKS ON THE GROUND? OR BRAILLE SIGNS? PEOPLE ACCESS INFORMATION IN DIFFERENT WAYS. MAYBE IF THERE WERE THEMES, LIKE AT THE BOTANIC GARDEN WHEN YOU CAN FOLLOW A YELLOW TRAIL, A RED TRAIL AND ONE WILL BE ON ABORIGINAL FOODS ... JUST TRAILS YOU CAN FOLLOW THROUGH.'

❧

4.1.1 Exhibition spaces

A number of participants commented that moving through an exhibition space was tiring, either due to the size of the space or a crowded environment. A lack of suitable rest seating was identified as a serious problem in most museums, which made it less likely that visitors with a mobility disability would attend. While participants were happy about the provision of loan wheelchairs at some museums, it was noted that borrowing a wheelchair required attending with a friend or carer to push the chair, preventing independent visits. It was suggested that large museums could provide motorised scooters for loan, similar to those available in shopping centres.

Many participants also noted that exhibition spaces could be overly-complex. They described difficulty finding entry and exit points, or moving comfortably through a space. Maps were often considered confusing and the lack of ground tactile indicators or colour-coding in spaces also made them difficult to navigate. Directional signage and signage for services was considered poor: it was either non-existent, difficult to read for a person with a sight disability or too confusing; relying on too much text and not enough pictograms. A number of services were identified that would make moving through the general museum and through exhibition spaces easier:

- tactile ground indicators on the floor, stairs and ramps
- audio indicators in lifts
- clearly marked exhibition entry and exit points
- tactile ground indicators to suggest movement through an exhibition space
- colour-coded 'pathways' to suggest movement through an exhibition space or through the museum generally
- maps on touch screen computers
- large print, easy-to-read signage
- Braille signage
- plain English maps

• pictogram signage
• simple floor plans for exhibitions.

The use of space within museums may need to be rethought. Bell suggests that 'the most heavily used collections, services or facilities are best located in the most accessible parts of the building, near the main accessible entrance. Space in staff areas should also be accessible to disabled employees' (2003, p 24). Burda proposes that by accommodating all learning styles, the more 'universally accessible our exhibits and programs will be. Thus, providing aural, visual, and tactile access to an exhibition is important not just for accessibility needs but for education in general' (1996, p 25).

As the Smithsonian guidelines point out, 'exhibitions are complex presentations that convey concepts, showcase objects, and excite the senses,' but they must also respond to different learning styles, issues of cultural and gender equity, and offer multiple levels of information. This suggests that rather than provide separate interpretive programs for visitors with different abilities, the full range of ability and learning styles needs to be incorporated in capital works, exhibition planning, public programs and throughout the organisation as a whole.

4.1.2 Labels
Label size, contrast and content were commented on by all the consultation groups. Generally participants felt that labels should be more accessible (for example larger in size with good contrast) and that there should be a range of label types including Braille, audio, simplified (plain English) and without the use of complex language. Two particular comments were: 'I'd rather see labels on a computer screen because that would be a bit easier. I could take more time with it. I could look at what I want' and; 'I would like to see press-buttons with talking explanations, I don't read the labels.'

The location of the label was also important. Labels must be easily read by a person using a wheelchair and, to assist people with a sight disability, should not require close viewing. The option of having an audio guide or live tour guide to explain the content of the exhibition without having to rely on label text would also be welcomed.

4.1.3 Lighting levels
Lighting levels impact on the visitor experience for people with a disability in a number of ways, affecting:

• ability to read labels
• ability to move easily through an exhibition
• ability to see objects and paintings clearly
• ability to communicate in Auslan or by lip-reading
• sense of comfort in the museum generally.

Participants were both knowledgeable about and understanding of the need to keep light levels low in some exhibitions and for some objects. They were sympathetic with museum concerns, but would like better lighting wherever possible, particularly for special visiting groups such as people using Auslan or with a sight disability.

4.1.4 Hanging heights
Hanging heights were identified as an issue for people using wheelchairs, people of short stature and children (both with and without a disability). Paintings and objects were often found to be hung or displayed at a height that made viewing literally impossible, totally denying access to exhibition content for these groups. The use of reflective glass compounds this problem, in that it prevents viewing from particular angles.

4.1.5 Audio-visual and interactive experiences
The use of audio-visual material in exhibitions had a mixed response from the consultation groups. For some it was incredibly intrusive in the exhibition space and interfered with their hearing, was too loud, posed a health risk (for people with epilepsy) or made the environment disorientating or unpleasant. Other concerns were raised about uncaptioned audio-visual material, or audio used without a written alternative. For others the audio-visuals in exhibitions were enjoyable, enhanced knowledge of an exhibition, made an exhibition more interesting and provided information that could not be accessed from written labels or text.

To satisfy those who enjoy audio-visual material while addressing the concerns of those who find it unpleasant or dangerous, a number of steps could be taken, including:

• warning visitors of audio-visual content before they enter an exhibition
• making sure audio-visual material does not dominate a space
• having dedicated areas for audio-visual material
• providing captions for all audio-visual material
• providing written alternatives to audio material.

Tactile experiences and other interactive, multi-sensory experiences were incredibly popular with all the participants in the consultation groups. It was felt that tactile or multi-sensory experiences significantly added to the museum experience, gave far greater access to the content of an exhibition and were a very enjoyable part of a visit. For those who are blind or have a sight disability, these experiences are their primary method of accessing an exhibition. Participants with these disabilities greatly enjoyed any opportunities to touch objects (or replicas) and felt that that this made a museum visit worthwhile.

As one participant said, 'touch is how I see and without it, museums can be very dull and boring places to visit.'

Interactive experiences were also highly praised by people with intellectual disabilities. It was felt that interactive experiences made a visit more fun and provided extra information about an exhibition (or provided an alternative to inaccessible written material). A respondent said that 'I like the touch screens and looking at the microscopes and the computer magnifying screens, they are cool ... It is fun to have things you can muck around on.' The types of interactive experiences enjoyed ranged from the most simple (drawers you can open or plaques you can lift) to complex hands-on experiences (such as those in Canberra's Questacon). Also very popular was anything involving a computer including touch-screens, computer games and computer experiences such as designing an object or taking an interactive tour.

However, as Fishburn (2002g) points out, 'It is critical that in both the design and application of new technologies that Universal Design is considered and integrated into the use. If Universal Design principles are not applied, then new technologies may actually end up decreasing access to services, products and environments and may be another barrier for people with a disability' (p 16).

Poole also points out that interactives may in themselves present barriers for people with a disability. Anything that enhances the accessibility of a piece of technology for the user is generally referred to as 'adaptive technology' and the need for adaptive technology is universal. 'Accessibility is not limited to addressing the needs of disabled people. Some examples of adaptive technology include: screen readers and magnifiers; alternative input devices; alternative output devices; alternative platforms for the delivery of content' (Poole, 2003, p 9).

Poole suggests that design briefs should therefore consider the following:

• Location – where is the interactive located?
• Height – can the height be adjusted for users in wheelchairs?
• Screen – does screen glare from overhead lighting reduce the visibility of the screen?
• Interface – can the users navigate through the interactive without a keyboard or mouse?
• Buttons – if the interactive is a touch-screen, are the buttons large enough to enable use?
• Braille – are buttons and notices presented in Braille as well as text?
• Control – can the user control the speed and presentation of animation?
• Noise – is the user able to hear the content over the ambient noise? (2003, p 26).

4.2 Practical exhibition access solutions

'I'VE NOTICED AT MUSEUMS AND ART GALLERIES SOME OF THEM SUPPLY HEADSETS AND WALKMAN TYPE SYSTEMS AND WHEN YOU GET TO PAINTINGS OR ARTICLES IT TELLS YOU INFORMATION ABOUT THAT ARTICLE THAT IS ACTUALLY WRITTEN ON THAT PLAQUE. I'VE FOUND THAT VERY HELPFUL BECAUSE YOU CAN ADJUST THE PACE IN WHICH THEY ARE READING IT.'

❧

The Accessible Arts publication 'Guiding and Visitor Services for People with a Disability or Specific Needs' contains useful guidelines for ensuring exhibitions are accessible. Below are reproduced some of the key points made.

'Asking the following questions when developing an exhibition will assist in meeting accessibility needs:

- Are there any physical barriers to this accessing this exhibition?
- Are alternative formats provided for all information – including catalogues, labels and publicity/promotional material?
- Do any design aspects of the exhibition create a barrier – for example, areas of low lighting, reflecting glass? Are alternatives provided if these barriers are unavoidable?
- Have alternative ways of accessing the exhibition content been provided – for example, tactile models, pictogram labels?
- Are there any hazards that need to be removed?
- Have multi-sensory experiences in presenting the exhibition been considered?
- Is exhibition content likely to offend and/or exclude members of the disability community?' (Fishburn, 2002h, p 24).

Some general exhibition design solutions might include:

- Bringing the object to the person. If it is not possible for a person in a wheelchair to view an object, it might be possible to bring the object (or a replica of it) to them. This way they can examine something more easily and it is an opportunity for a guide to give greater information. You might like to select a few key pieces that show off your collection and make them available for viewing this way. If it is possible to touch the object this will make the experience even better and is sure to be enjoyed by everyone.
- Creating a touch box or touch table. A touch box will be particularly useful for

people who are blind or have a sight disability but can also assist in access for a person with a mobility disability. A touch box is a collection of objects that can be handled by the general public. This will be useful if you have inaccessible areas as it allows people to experience objects they normally are unable to access.

- Making a photo guide. Photograph the object and make the information available in a book. If a room or area is inaccessible, a good solution is to photograph the key objects and then put together an information book. If someone in a wheelchair is unable to enter the space they will still be able to experience part of your collection this way. For museums or galleries with an inaccessible second floor this could be an excellent solution, and the photographs can be also used when providing outreach to groups such as people in nursing homes.
- Utilise your wheelchair 'friendly' space. Even if your gallery or museum is mainly inaccessible for people in wheelchairs there may be other areas you can use. Do you have a garden space that could be used for talks, rather than holding them in the gallery? Or a courtyard in which non-perishable objects could be displayed? Thinking about alternatives like this will not only ensure that you are including people in wheelchairs, but could also give a whole new outlook on the way that you use your space (p 11-12).

4.3 Disability in exhibitions

'I LIKE TO PAINT AND DRAW AND TO SEE SOMETHING AND KNOW IT IS BY A PERSON WITH A DISABILITY THAT IS SO INSPIRING; IT MAKES SUCH A DIFFERENCE, A BIG DIFFERENCE.'

All the groups consulted were extremely enthusiastic about the idea of increased representation of people with a disability, and the experience of disability, in museums. Generally, participants could recall no specific mention of disability (or exhibitions pertaining to disability) in any museum. It was felt that it would be extremely valuable to include representation of disability in museums to (a) increase awareness of disability issues, (b) break down stereotypes and (c) provide positive representation of disability to encourage pride in people with a disability. People with a disability also felt that an exhibition that looked at the development of technology (including communications) used by people with a disability would be extremely interesting to both the disability and the general community.

Delin (2002) describes how, in the past, disability has been represented only in terms of medical specimens, freaks or charity cases. 'Any casual visitor to museums ... would assume that disabled people occupied a specific range of roles in the nation's history. The absence of disabled people as creators of arts, in

images and artefacts, and their presence in selected works reinforcing cultural stereotypes, conspire to present a narrow perspective of the existence of disability in history' (p 84).

She also states that within museums people with a disability might not see a single image of a person like themselves, no affirmation that in the past people like themselves lived, worked, created. If individuals are represented that they are often not named, but referred to in labels as 'the dwarf', 'the giant', a 'marvel of nature'. These factors implicitly make people with a disability feel like outsiders. 'A good example is when, in a library, all material about disability appears under the category "health" and never under search words such as "arts" and "politics"' (p 22).

The consultation groups in this study also felt strongly that disability should be included as part of the display in any cultural or historical exhibition. Disability should be recognised as part of the life experience and part of all history and culture. Ways to do this may include profiling people with a disability in general exhibitions, including information about a person's disability in exhibition text (for example, mentioning when an artist was also a person with a disability). Among the consultation groups, it was clear that participants want disability to be recognised as a part of life and a part of Australian community and culture.

The inclusion of disability in museums and galleries (either as a separate exhibition or in general exhibitions) has a universal relevance. Inclusion can serve to:

- educate the general public about disability
- educate teachers about including students with disabilities
- show pride in the achievements of people with a disability
- profile disability technology and show how it impacts on the lives of people with a disability
- increase understanding of Auslan and ensure it survives as a language
- break down stereotypes about disability
- show that disability is part of normal life
- document and record the history of disability issues.

The consultation groups were overwhelmingly positive about the possibility of increasing the representation of people with a disability in museums and galleries. In particular the following exhibition concepts were proposed:

- the development of disability technology
- the history of disability in Australia
- works by artists with disabilities
- the history of Deaf culture in Australia.

5. Staff awareness

'Due to my love of history, house museums are high on my list of must-visit places, but are actually difficult to visit because most of them are guided – and it depends on the guide what kind of experience I will have.'

All the groups consulted in this study raised the issue of staff awareness and training. It was seen as one of the most important factors affecting people with a disability and their attendance at and enjoyment of museums. The Australia Council's 1995 research report, *Arts and Disability*, identified that for many people with a disability the major obstacle to attending events is the sometimes rude or patronising attitude of staff.

Staff awareness of and attitude to people with a disability was generally considered poor by the participants in this study. While most considered museums friendly places, they identified a critical need for staff to have general disability awareness training and specific Deaf awareness training. For example, it was noted that people need training in making eye contact. This of course would not just assist Deaf people, but would improve staff interaction for all people. Staff also require a very broad understanding of their museum facilities. For instance, a participant noted that she would like, 'staff who know where things are ... and know the access routes and physical limitations – if I can't use the stairs how do I get there, that sort of thing'.

Front-of-house staff are not the only members of an organisation that require disability awareness. Fishburn (2002a) notes that the level of awareness of staff in all the areas listed below will impact on the experiences of a person with a disability:

• marketing, publicity and media
• ticket sales
• volunteers and guides
• curators and education officers
• administration, finance, human resources and reception
• cleaning, security and building maintenance
• sales assistants or bar and café staff (p 10).

Playforth (2003d) writes that 'training raises the level of awareness, responsiveness and resourcefulness of staff. It can lead to substantial improvements in accessibility and encourage the organisation to adopt an holistic and cross-disciplinary approach that informs everything from the director's office, by way of the

trustees, through the galleries to a warm welcome at the barrier-free front door' (p 5). Even curatorial staff who may not have direct contact with visitors, yet who develop exhibitions, would profit from training.

Playforth also points out that there is a difference between disability awareness and disability equality. 'Disability equality training may include issues common to awareness training such as customer care, etiquette and language. It is likely to encourage exploration of the social model of disability in greater depth. This would cover how people are disabled by attitudes and barriers present in society and institutions' (p 19).

Pearson states that disability awareness is important and 'emphasis should be placed on disabled people as individuals in order to counteract the easy and fallacious categorisation of disabled people as those who visit the museum in groups for some kind of special labour-intensive service' (1985, p 2.2.25).

5.1 General guidelines

'MY EXPERIENCE IS THAT THEY WILL ASK ME QUESTIONS RATHER THAN ASKING MY SON QUESTIONS. WHEN PEOPLE TALK TO THE PEOPLE THAT WE CARE FOR, THAT IS SO IMPORTANT ... IT IS AWFUL WHEN THEY DON'T SAY ANYTHING AT ALL, WHEN THEY DON'T KNOW WHAT TO SAY.'

It is important to avoid all assumptions when dealing with any member of the public. Playforth (2003c) notes that disability relates to a variety of physical, sensory and intellectual needs and that a person's needs can vary from day to day and according to environment and circumstance. How people view themselves may also affect how much information they will give about their needs.

When deciding what services a person with a disability might need, the most important thing to remember is to ask them. They are the person best able to give information about what they require. It is essential to establish ways for people with a disability to discuss their needs. These could involve:

- ensuring all staff have disability awareness training and are able to respond to requests
- establishing a disability access committee that can get input from the disability community and from individuals with disabilities
- establishing an access hotline (and email address) so that people know where they can make contact for information
- ensuring that information about disability services is provided in all publicity and promotional material (Fishburn, 2002a, p 19).

The following are some general guidelines for approaching visitors with a disability or specific needs, compiled from Fishburn (2002) and The Disability Services Commission of Western Australia (2001).

- Remember that a person with a disability is a person first. Their disability is part of their personality; not the defining element and their interests will be as diverse as any other visitors.
- Avoid focusing unnecessarily on a person's disability. If it is not necessary to acknowledge that a person has a disability, then don't mention it.
- Speak directly to the person with the disability not to their carer, companion or interpreter.
- Don't be over familiar – extend the same respect and courtesy as you would to any other visitor.
- Be adaptable and patient in your communication.
- Don't assume someone with a disability needs your assistance; always ask first. If you have any services that you think may assist a person with a disability, offer them to the person rather than assuming they will want to use them.
- Never touch a person with a disability without asking and receiving permission.
- Many disabilities are hidden or invisible, if someone asks for assistance on the basis of their disability don't make an assumption about them simply because they do not appear to have a disability.
- Make sure you are aware of what services you can provide and where they are.

In their 2003 Fact Sheet on *Disability and Appropriate Language* the Disability Services Commission of Western Australia notes that the way we speak or write about people with a disability can also have a profound effect. 'Some words, by their very nature, degrade and diminish people with a disability. Others perpetuate inaccurate stereotypes, removing entirely a person's individuality and humanity'. They suggest the following:

- Portray people with a disability positively by recognising what a person can do rather than focusing on their limitations, for example, the person walks with an aid, not that he or she has limited mobility.
- Recognise that many of the difficulties facing people with a disability are barriers created by community attitudes and the physical environment. We can all help to break down these barriers by using appropriate language.
- Be specific about a person's circumstances and avoid stereotypes, generalisations and assumptions based on limited information.
- Avoid any word or phrase that has a negative connotation – for example, 'confined to a wheelchair' instead of 'uses a wheelchair' – or phrases that imply people with a disability are suffering (p 1-2).

5.2 Guidelines for dealing with people with specific disabilities

'PEOPLE DON'T MEAN TO BE DIFFICULT, BUT THEY JUST DON'T GET IT! HOW CAN I GET MY SON [IN A WHEELCHAIR] UP THE STAIRS?'

The following summaries are compiled from a variety of sources, including Accessible Arts, 1999; Disability Services Commission of Western Australia, 1996 (revised 2001); Fishburn, 2002; Playforth, 2003c.

5.2.1 People with a physical or mobility disability
- Don't touch a person's wheelchair or aid without their permission; it is part of their personal space.
- When talking, try to be on the same eye level of the individual; get a chair or squat.
- Be aware that some visitors may need to take rest breaks, direct them to rest seating if required and continue guiding from there.
- Consider distances, accessibility of pathways and surfaces when giving directions.
- If a person looks tired or is having difficulty with balance, offer them the use of a wheelchair.
- Speak directly to the person with a disability, making eye-contact – don't ignore them or talk to their companion instead.

5.2.2 People with a sight disability
- Never touch a companion animal such as a guide dog when it is in harness or without the owner's permission.
- Introduce yourself and address your comments towards the individual.
- Ask permission before you guide an individual, allow the person to take your arm and show you the best way to guide them. Give verbal signals at changes of direction, steps or near hazards.
- Use verbal descriptions to assist in their visit, for example, describe seating locations.
- Don't shout: use a normal volume and tone of voice.

5.2.3 People with a hearing disability
- Make sure that the person is looking at you before you start speaking, ensure they can see your mouth.
- Check how they want you to communicate with them, they may want you to speak clearly, change position, provide an interpreter or to write things down.
- Speak directly to the individual not to their interpreter.

- If the person is lip reading, speak clearly and slowly, don't over-enunciate, and keep your hands away from your face.
- Keep the background noise as low as possible and ensure you are clearly visible and in good light.
- Do not shout or use exaggerated gestures.
- If you have not understood what they are saying, ask them to repeat it.

5.2.4 People with an intellectual disability

- Speak to the visitor, not their companion. Use plain English and short sentences.
- Be patient and allow the visitor time to think about and process what you are saying.
- Use alternative ways of conveying information, it may be better to show or demonstrate something rather than just rely on words.
- Don't make assumptions about what a person can and can't understand, work together to find a way of conveying information and ideas to the visitor.
- Treat the visitor with the same courtesy and respect you would show any other visitor.
- Don't shout or raise your voice, keep your volume and tone at a normal level.
- If a visitor becomes overexcited or begins to behave inappropriately, be considerate of the individual but don't allow threatening or dangerous behaviour. Seek assistance if it is necessary.
- Don't touch an individual without their permission.
- Some people may require the consumption of food and drink to take medication, be aware of and responsive to this need.

5.3 DEVELOPING A TRAINING PLAN

'SECURITY PEOPLE NEED TO BE AWARE OF PEOPLE WITH A DISABILITY AS WELL. THEY TEND TO GET A BIT JUMPY WHEN THEY SEE US STARING AT PAINTINGS VERY CLOSELY, IT'S NOT LIKE WE ARE TRYING TO STEAL THEM OR ANYTHING. JUST RAISE THE LEVEL OF AWARENESS.'

❦

Having a designated staff member responsible for the proper training of all staff is important. The training should be a regular activity that includes everyone, from new and casual staff, to volunteers, security guards and senior administrators.

Jans (2003) developed a staff-awareness training program for the National Museum of Australia. The information below gives a summary of some of the training goals she suggests.

5.3.1 Short-term goals

- Access awareness training should involve understanding the needs of different audiences in terms of physical access, different communication techniques and intellectual access; understanding the laws that apply; and practical ways of making the museum more accessible.
- Provide site-specific training – this is best done by someone in-house who understands the needs of staff (both paid and voluntary) and the environment of the museum, such as; what objects can be used in a tour for people who are blind, where guides can take children with special needs, who will help in an emergency.
- Use local disability and access specialists to deliver general training.

5.3.2 Medium-term goals

- Training must be appropriate to all staff, provide tailored sessions for employees that deliver services or work on the ticketing counter, for staff that design interpretive programs and events, for those that produce publications and label text, for the exhibition team, for human resources departments and for those that set policy and procedure.
- If possible, train specific people to deliver services for people with a disability, especially education services. However, all program delivery staff require audience awareness training.

5.3.3 Long-term goals

- Employ an access coordinator who is responsible for the provision of services across the organisation. This would include the development of interpretive services and materials, staff training, the production of accessible promotional and informational material, exhibition design, access to services such as toilets, restaurants, festivals and events, coordinating access consultants and/or advisory panels, forming and maintaining partnerships.
- Include other communities in the access coordinator's area of responsibility, make access about the widest possible audience.
- The position should be within the education, public program and visitor service areas. This recognises that access is about different learning needs, and not simply about providing entry to a building, exhibition or place.

5.4 Staff and volunteer diversity

'IT'S FUN TO GO TO THE MUSEUM WITH FRIENDS BECAUSE IT IS AMAZING AND NOT BORING.'

❧

Access means more than just the ability to attend arts activities, but also the right to participate in the arts at all levels, including as practitioners and employees. Many of the participants in this study were interested in becoming more involved in museums, including working either as a volunteer or a guide. However, it was generally felt by people with a disability that they were discouraged from volunteering at museums due to their disability. Some people reported active cases of discrimination in which they were refused the opportunity to act as a volunteer because of their disability. However, our research shows clearly that people with a disability would like to have other people with a disability available as guides, volunteers or staff.

In his 2004 Churchill Fellowship research, Phillips reported, 'We should encourage disabled staff or volunteers to work in our museums and galleries. They should be able to carry out the same duties as regular staff. This, I hope, would encourage other impaired people to visit our sites. They would tell their friends and family that our museums are "user friendly". Also any visiting impaired people would get a sympathetic hearing' (p 18).

Implementing a non-discriminatory employment policy can result in a much more diverse staff, that is better equipped to respond to the needs of a broader range of visitors. Having people with a disability on the staff of an organisation can also serve to raise the awareness of staff without disabilities.

6. Key findings and recommendations

'YOU HAVE TO UNDERSTAND THAT NOT ALL DEAF PEOPLE HAVE A VERY GOOD GRIP OF ENGLISH. SOME DEAF PEOPLE DON'T HAVE VERY GOOD READING SKILLS AND SOMETIMES THEY'LL JUST NOT BOTHER READING, THEY'LL JUST LOOK AT THE DISPLAYS AND IF THEY FIND IT VERY DIFFICULT TO READ THEY WON'T BOTHER. I'D SUGGEST A SMALL SUMMARY UNDERNEATH THE DETAILED WRITTEN WORK THAT MAY HELP THEM EASILY UNDERSTAND THE INFORMATION.'

This study has shown that for people with a disability the decision to visit a museum or gallery is influenced by a wide range of factors. The key findings and recommendations of this study are put forward here for further consideration by the museum community. Additional recommendations are from a variety of sources, including Accessible Arts, 1999; Disability Services Commission of Western Australia, 1996 (revised 2001); Fishburn, 2002; Hornsby, 2003 and Playforth, 2003b.

When addressing any of these areas, it is important to make use of published standards, most of which are available on the web. The Internet resources section at the end of this book gives website addresses for published standards relating to buildings, symbols, websites, training and general accessibility, and also gives the web addresses of peak disability bodies.

6.1 Access

- At a minimum, ensure all museums meet Australian Standards for access.
- Ensure ramps comply with Australian Standards (Standards Australia AS 1428.1) and avoid excessive slopes generally.
- Avoid abrupt vertical changes of level (such as kerbs, steps, ruts, gutters).
- Ensure even and slip-resistant floors.
- Ensure spaces are easy to negotiate, with aisles as wide as possible.
- Ensure all stairs and ramps have handrails, well-designed stairs or ramps can be a useful alternative to escalators.
- Provide automatic doors, which are more accessible than manual doors.
- Avoid the use of glass doors.
- Provide doors of sufficient width for people in wheelchairs and space within rooms to allow for wheelchair turning
- Ensure telephones and other amenities are at appropriate heights for people in wheelchairs.

- Ensure appropriate lifts, controls and settings, including audio information.
- Ensure clear, even lighting levels in and around buildings.
- Ensure tactile ground indicators are used in the museum to indicate pathways and hazards.
- Use colour-coding to suggest pathways of travel and to delineate museum sections.
- Ensure exhibition entry and exit points are clearly marked.
- Provide easy-to-read, plain English maps.
- Ensure signage is of a reasonable size and is at a convenient, appropriate height.
- Use international symbols (e.g. the symbol indicating wheelchair access) in all signage.
- Provide information that is both written and spoken (e.g. visual display boards as well as voice announcements).
- Provide Braille signage.
- Provide touch-screen computers with maps and general information on them.
- Provide opportunities to visit the museum in specific groups, with different opening hours or by special invitation.
- Promote times when the museum is less crowded and/or free of school students in access information.
- Ensure services are available that allow independent visits to a museum (e.g. guiding services or access provisions) including independent entry and maps and signage in alternative formats.
- Ensure that specific access services are provided for people with a range of access needs.
- Ensure suitable rest seating is provided in exhibition spaces.
- Provide wheelchairs for use internally.
- Investigate the possibility of motorised scooters that can be used in large museums.
- Provide a specific restroom or space for people with a disability and their carers/companions, with sinks and amenities at wheelchair height and adequate clearance under basins.
- Provide facilities for guide dogs.
- Ensure minimal background noise, including noise-spill from other rooms and floors (use soft furnishings and insulation where possible).
- Provide hearing induction loops, infrared system, or portable conference aid.
- Ensure staff are easily identifiable.
- Ensure staff are aware of and can respond to different access needs.

6.2 Audience research

- Use peak bodies and consultants that are credible within the community.
- Source sample groups through email and posting to websites, as word of mouth is key way of getting involvement.
- Be aware that organising research groups may stretch the capacity of each organisation to supply services for their members in providing parking and transport; location of rooms (need to be easy to find, no stairs) and catering.
- Staff involved in the research need to be comfortable with people with a disability and/or have had awareness training.
- Be clear about the outcomes of the research; many people with disabilities feel that they have been over-consulted without ever seeing any tangible changes resulting from their comments.

6.3 Costs

- Ensure that carer discounts or concessions are recognised.
- Ensure that there is a defined price point for people on a disability pension and that this is clearly listed at the front desk.
- Encourage people with a disability to take up membership at museums.
- Provide a disability membership price.

6.4 Transport

- Ensure information about public transport (including accessible services and accessible pathways to the museum) is easily available.
- Provide the option to either book an accessible parking space or to simply turn up and use the space if available. This could be arranged, for example, in the form of two spaces requiring booking and a third being generally available. Ensure this information is easily available.
- Ensure that some accessible parking spaces can be accessed without staff assistance.
- Ensure the pathway from parking to the entrance is easy to navigate, clearly identified and a short distance.
- Ensure pick up/drop off zones or points are available and are a limited distance from the entrance. Ensure this information is easily available.
- Ensure dignified physical access to institution (e.g. not through rear or up the service lift).

6.5 Cafés and shops

- Provide a lunch room or sheltered area where people can eat their own food.
- Ensure staff have had disability awareness training.
- Provide alternative formats for menus (for example, large print and Braille).
- Ensure café menus are legible and easy to read (black text on white ground).
- Ensure there are pathways where a person can navigate through a café.
- Ensure shop layouts are easy to move through with wide aisles and no hazards.
- Ensure that café counter heights and service counter heights are suitable for a person using a wheelchair or a person of short stature.
- Ensure café furniture can be used by a person using a wheelchair.
- In self-service cafés, ensure that staff are available to assist a people with a disability who cannot manage self-service facilities.
- Provide water for guide dogs/companion animals.

6.6 Public programs and outreach

- Ensure films are captioned or signed.
- Promote captioned films to the Deaf community.
- Ensure all lectures/talks/public programs are held in fully accessible venues.
- Provide Auslan interpreting for lectures or have script or synopsis available.
- Provide live captioning for lectures and public talks.
- Ensure disability concessions are available for public programs.
- Provide touch-tours for the blind, deafblind and visually impaired community.
- Provide touch-tours for people with intellectual disabilities.
- Provide outreach services to specific needs schools and students with disabilities.
- Provide museum introduction sessions for people with a range of disabilities or access needs.
- Develop a museum club service for people with an intellectual disability.

6.7 Guides

- Ensure all guides have disability awareness training.
- Ensure guides are aware that people with sensory disabilities need to be at the front of guided groups.
- Ensure tour pathways have been designed with the needs of wheelchair users or people with a mobility disability in mind.
- Provide Auslan interpretation where possible on guided tours or specific Auslan guided tours.
- Provide guided tours specifically for people with intellectual disabilities.
- Provide options for tours outside of normal visiting hours or at quiet times in the museum.

6.8 MARKETING

- Include peak disability groups/media in all marketing and promotional work (mail-outs, media releases and so on).
- Ensure information about specific services is targeted at the relevant groups (e.g. information about Auslan tours sent to peak Deaf groups).
- Encourage the use of 'Ambassadors' representing particular disability groups.
- Ensure radio is targeted for promotion of exhibitions and events, including Radio for the Print Handicapped.
- Ensure access information is available on museum websites and that this information is easy to find.
- Ensure access information is easily available (both online and printed)
- Provide museum introduction sessions for specific disability groups.
- Create a museum access guide for the disability sector that gives access and content information for a range of museums.
- Ensure access services are marketed and promoted to the disability sector.
- Promote the museum as space for a social occasion for people with a disability; encourage social groups of people with a disability through the provision and promotion of access services.
- Promote any additional museum visiting benefits (for example, location, views) when communicating with the disability sector.

6.9 PRINT AND PUBLICATIONS

- Ensure all text is written in clear, plain English. Short sentences are recommended.
- If text is technical or uses complex language and cannot be rewritten, ensure a plain English version of the text is also provided (check your material with a reading complexity assessment program).
- Ensure information on access and services for people with specific needs or disabilities is integrated into all other information.
- You may wish to also develop a separate access and information guide for people with specific needs or disabilities. Ensure that this makes relevant connections to all other service information.
- Ensure images and graphic material contributes meaningfully to the text.
- Ensure images and graphic material includes people with a disability; they should be represented in this material in the same manner as any other community member.
- Ensure language used to describe people with a disabilityis appropriate and non-offensive.
- Provide disability access pictograms to indicate services for people with a disability (these are available to download free at www.gag.org/resources/das.php).

6.10 WEBSITES

- Ensure websites meet web accessibility standards and are designed to maximise accessibility for all users. For published guidelines, see www.w3.org/TR/WAI-WEBCONTENT/
- Ensure a text-only version of your site is provided.
- Use the 'alt' text to provide meaningful descriptions of images/graphics.
- Documents that are available as PDFs are also provided in a Word format.
- Ensure that information is clearly laid out, and that links are clearly identified.
- Provide captions or a text translation of any audio or audio-visual material.
- Ensure that navigation through a site is consistent and does not change in structure from page to page.
- Ensure that text and background contrast is high.
- Ensure that text is proofread and uses proper punctuation.
- Do not use blinking text or throbbing, pulsing or flashing graphics or buttons.
- Provide a site map for ease of navigation.
- Include material on disability culture/s or information of interest to the disability sector in any information provided.

6.11 EXHIBITIONS

- Ensure exhibitions are laid out using a simple, easy to navigate floor plan.
- Ensure good lighting levels (wherever possible).
- Ensure labels are easy to read and meet accessibility guidelines for printed material.
- Ensure labels are well-lit.
- Ensure labels are available in a range of alternative formats including Braille, audio, plain English or pictograms and are in suitable fonts and sizes.
- Ensure labels are located in positions and angles accessible for people who use a wheelchair or with a sight disability.
- Ensure label placement in display cabinets is accessible for people with a disability.
- Ensure display cabinets and tables meet access standards for people with a disability and that they can be seen by people who use a wheelchair.
- Ensure works are hung or displayed at suitable height and objects are displayed at a wheelchair-friendly height. This will also make a gallery or museum more accessible for people of small stature and children.
- Ensure adequate reach space so that objects that can be touched or manipulated (consider replicas).
- Ensure objects are placed or displayed so that a person will not be blocking a thoroughfare when looking at them.
- Limit the use of reflective glass on display cabinets or tables.

- Provide alternative ways of presenting information and exhibits – e.g. tactile models, Braille guides, touch boxes, different sensory experiences.
- Provide large-print catalogues or information sheets.
- Provide plain English information guides.
- Provide audio alternatives to all visual material.
- Provide captions or text alternatives for all audio-visual material.
- Information in layouts and text should move from the concrete to abstract.
- Warn visitors of audio-visual content and interactive experiences before they enter an exhibition.
- Ensure audio-visual material does not dominate the exhibition space, perhaps provide dedicated areas for audio-visual material.
- Provide audio descriptions of spaces, objects, and exhibitions.
- Ensure all information technology equipment is easy to access, including keyboard settings and design, and is located in a physically accessible environment.
- Provide a catalogue or printed material that is easy to manipulate.
- Provide the option of tours for people who are unable to access written information.
- Ensure hearing loops/hearing augmentation systems are available in exhibition areas and at information desks.
- Ensure guides have undergone disability awareness training.
- Investigate disability related topics, themes and images for inclusion in exhibition program.

6.12 STAFF TRAINING

- Provide all staff with general disability awareness training.
- Provide all staff with Deaf awareness training.
- Actively recruit people with a disability as staff, volunteers or guides.

APPENDIX:
ACCESSIBLE ARTS EXHIBITION DESIGN CHECKLIST

Exhibition and Gallery Spaces

Note: It is recommended that people also refer to the 'Access Audit' to assist in the evaluation of their venue.

Exhibition Environment	Yes	No	Comments
Is your exhibition space accessible to people using a wheelchair or mobility aid?			
If any part of your space is not accessible, have you provided an alternative way of viewing work? For example photographic reproductions of works or videos			
Is your reception area and any service counters at a height that can be accessed by a person using a wheelchair? (No higher than 1000mm)			
Are there clear pathways through your exhibition environment? (1100mm or more)			
Are any hazardous objects (things jutting from a wall etc) clearly marked?			
Are noise levels reasonable?			
Have you avoided overlapping sounds as they may make navigation confusing for a person who is blind?			
Is lighting consistent throughout the space?			
If lighting levels change, is this change gradual or clearly identified?			
Is there rest seating with arm rests in the viewing space? (Seating should be higher than 500mm from the ground)			
Display of Objects	**Yes**	**No**	**Comments**
Are wall mounted works hung at a height of between 1220m and 1675mm from the floor?			
Are display cases or tables no more than 915mm in height (from floor to display surface)?			
Under display cases and tables is there knee room of at least 750mm in height, 900mm in width and 400mm in depth to allow wheelchair users to look at displays?			
Is glass used in display cases non-reflective?			
Is there a contrast between works displayed and the surface or back panel of any display case (eg. ensure that there is clear colour contrast)?			

Accessible Arts

Display of Objects continued	Yes	No	Comments
Are smaller objects mounted at the front of display cases?			
If objects are very small, have you provided a reproduction (photographs/illustrations) of works?			
If objects are mounted on a pedestal, is the pedestal no more than 1000mm in height?			
Have you ensured that it is easy to move between display cases, tables, pedestals in the exhibition space (aisles of at least 1100mm)?			
Have you ensured that any pedestals, display cases etc are hazard marked (using tactile ground indicators)?			

Note: Refer to the 'Print and Publication Guidelines' for information on alternative formats and general print guidelines.

Labels & Text	Yes	No	Comments
Are main panels and introductory text in 24-point or larger?			
Is label text 18-point or larger?			
Is all text in a simple sans serif font?			
Is text left justified?			
Is text printed on a solid background?			
Is text and background contrast at least 70%?			
Have you used Plain English in all labels/text?			
If Plain English is not used, have you provided a Plain English version?			
Is there an audio version of labels/text available?			
Do you also use Braille labels?			
Can visitors get close to all labels/text? (labels should not be put at the back of display cases)			
Is there adequate light to read labels/text?			
Is the placement of labels/text consistent throughout the exhibition space?			
Are labels/text placed at a height of between 1220m and 1675mm from the floor?			
Are outdoors labels/text composed of a black or dark background with white or light type (this assists in legibility)?			

Accessible Arts

Catalogues Do all printed catalogues meet print guidelines for accessibility?	Yes	No	Comments
Have you developed a Plain English catalogue? Do you provide a large print catalogue?			
Do you provide a Braille catalogue? Is there an audio version of the catalogue available?			
Can any alternative format catalogues be purchased or taken by visitors?			
Exhibition content	**Yes**	**No**	**Comments**
Do you use appropriate language/images in the description or portrayal of people with disabilities?			
Have you included people with disabilities when appropriate? (For example as part of a social history exhibition)			
Where appropriate, have the disability community and people with disabilities been consulted in exhibition development?			
Audiovisual material	**Yes**	**No**	**Comments**
Can audiovisual material be viewed by a person using a wheelchair?			
Can any interactive audiovisual material be accessed by a person using a wheelchair?			
Can interactive audiovisual material be operated using only one hand?			
Is audiovisual material captioned?			
Are the instructions for use of audiovisual material clear and easy to follow?			
Does the audio used in audiovisual material provide as much information as the visual does?			
Theatrettes and auditoriums	**Yes**	**No**	**Comments**
Do theatrettes or auditoriums have seating spaces suitable for people using wheelchairs?			
Can people using wheelchairs sit with their companions?			
Do you have a hearing augmentation system (eg. hearing loop) in your theatrette or auditorium?			

Accessible Arts

Theatrettes and auditoriums continued	Yes	No	Comments
Do you caption all audiovisual material?			
Do you provide Auslan sign interpreters for all public events?			
Access services	**Yes**	**No**	**Comments**
Do you have tactile opportunities for people in your gallery?			
Are tactile opportunities part of your normal display?			
Do tactile opportunities enhance the exhibition experience and assist in understanding the display?			
Do you have any Braille information or guides?			
Do you provide an audio guide of the exhibition?			
Has this been developed in consultation with the blind community?			
Do you provide Auslan sign interpreted tours?			
Do you incorporate multi sensory experiences, eg. sound, scent?			
Have you considered ways that people with an intellectual disability may access your exhibition?			
Do you use pictograms (basic symbols) to assist in exhibition access?			
Do you clearly mark any elements of an exhibition that may be hazardous? For example strobe lighting, smoke effects, loud noises.			
Have you consulted people with disabilities about access services and displays?			
Do your public programs cater for people with disabilities?			
Do your outreach services cater for people with disabilities?			
Have all staff received disability awareness training?			
Is there a staff person responsible for disability access services?			
Is the staff person responsible for disability access clearly identified in all publicity and promotional material?			
Are all access services and facilities included in all publicity/promotional material?			

Further Information: Accessible Arts, 02 9251 6499, info@aarts.net.au

Accessible Arts

REFERENCES

Accessible Arts, Sydney, undated flyers:

– *Disability awareness information*
– *Disability media information*
– *Guiding & visitor services for people with a disability or specific needs*
– *Print and publication guidelines*
– *Visitors with disabilities – information sheet* (2002)

Accessible Arts, undated checklists:

– *Exhibition design*
– *Marketing to the disability community*
– *Ticketing and seating checklist*

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INTERNET RESOURCES

PEAK BODIES

Arts Access Australia – the national umbrella organisation for disability arts in Australia
www.artsaccessaustralia.org

Accessible Arts (NSW)
www.aarts.net.au

Access Arts Inc (QLD)
www.accessarts.org.au

Arts Access (VIC)
www.artsaccess.com.au

Arts in Action (SA)
www.artsinaction.asn.au

GOVERNMENT RESOURCES

Arts Victoria - Disability Action Plan, September 2001
www.arts.vic.gov.au/arts/publications/publications/disability.htm

Human Rights and Equal Opportunities Commission
www.hreoc.gov.au

UK – Museums and Galleries Disability Organisation
www.magda.org.au

UK – Museums, Libraries and Archives Council (MLA) Resource Disability Portfolio
www.mla.gov.uk/information

US – The National Arts and Disability Center (NADC)
www.nadc.ucla.edu

Western Australia Disability Services Commission
www.dsc.wa.gov.au

Women with Disabilities Australia (WWDA)
www.wwda.org.au

DEFINITIONS

Australian Institute of Health and Welfare
www.aihw.gov.au/publications/index.cfm/title/9671

Arts Victoria
www.arts.vic.gov.au/arts/publications/publications/disability.htm

Australian Human Rights and Equal Opportunity Commission
www.hreoc.gov.au/disability_rights/dda_guide/about/about.html

ACCESS / DESIGN

American Institute of Graphic Artists (AIGA) – Symbol signs
www.aiga.org/content.cfm?ContentAlias=symbolsigns

Arts Access Australia
www.artsaccessaustralia.org/accessibility.htm

Center for Universal Design
www.ncsu.edu/www/ncsu/design/sod5/cud/index.html

Collections Australia Network
www.collectionsaustralia.net/sectorinfo/2649.html

Graphic Artists Guild – Disability Access Symbols
www.gag.org/resources/das.php

Human Rights and Equal Opportunities Commission
www.hreoc.gov.au/disability_rights/faq/Access/access.html

**Human Rights and Equal Opportunities Commission – Australian requirements
for web accessibility**
www.humanrights.gov.au/disability_rights/webaccess/index.htm

Smithsonian Guidelines for Accessible Exhibition Design
www.si.edu/opa/accessibility/exdesign/contents.htm

**United Nations – Accessibility for the Disabled, a Design Manual
for a Barrier Free Environment**
www.un.org/esa/socdev/enable/designm/

Universal Design
www.universaldesign.com

US Department of Health and Human Services – website accessibility
www.usability.com

W3 Website Accessibility Initiative
www.w3.org/WAI

Watchfire® Bobby™ – web accessibility testing
www.watchfire.com/products