Museum access: two case studies of outreach programs that engage audiences with disabilities

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Publication Date:
2011

DOI:
https://doi.org/10.26190/unsworks/23770

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MUSEUM ACCESS: TWO CASE STUDIES OF

OUTREACH PROGRAMS THAT ENGAGE AUDIENCES WITH DISABILITIES

by

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A thesis submitted in fulfillment of the requirements for the
Masters of Art and Design Education (Honours) in the School of Art History and Art
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March, 2011

Abstract

This study examines two museum outreach programs developed for people with disabilities at the Boulder Museum of Contemporary Art (BMoCA) in Boulder, Colorado, U.S.A and the Museum of Contemporary Art (MCA) in Sydney, Australia. The purpose of this research is to investigate the BMoCA and the MCA's educational outreach programs that engage people with disabilities using the nine-step strategy of accessibility for museum visitors written by John P.S. Salmen and published by the American Association of Museums (AAM) in *Everyone's Welcome: The Americans with Disabilities Act and Museums*.

This study is a qualitative case study research design. The two research questions of this study are: (1) How do two contemporary art museums incorporate recommended accessibility guidelines into their disability outreach programs in order to become more accessible to people with disabilities? and (2) What strategies can art museums implement to become accessible for all individuals, including people with disabilities?

The results reveal that art museums in both Australia and the U.S. have implemented strategies which resemble those found in the *Everyone's Welcome* document in order to provide accessible educational programs for people with disabilities. The MCA and the BMoCA have made significant efforts to improve disability access in their educational outreach programs according to Salmen's *Everyone's Welcome* guidelines. Salmen's nine-step strategy of accessibility, however, is merely a starting point to address the need for improved disability access in art museums. Opportunities remain for both museums to further meet the needs of people with disabilities. Moreover, until all art museums fully adopt and implement recommended accessibility guidelines, like those found in *Everyone's*

Welcome, the community of people with disabilities will remain socially excluded from art museums.

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CHAPTER ONE – OVERVIEW OF THE STUDY

Introduction

This study examines two museum outreach programs developed for people with disabilities at the Boulder Museum of Contemporary Art (BMoCA) in Boulder, Colorado, U.S.A and the Museum of Contemporary Art (MCA) in Sydney, Australia. The purpose of this research is to investigate the BMoCA and the MCA's educational outreach programs that engage people with disabilities using the nine-step strategy of accessibility for museum visitors published in 1998 by the American Association of Museums (AAM) in *Everyone's Welcome: The Americans with Disabilities Act and Museums* (*Everyone's Welcome*).[1] The AAM's guidelines were designed to assist museums in becoming accessible to all individuals, including people with disabilities. Written by John P.S. Salmen, an internationally recognized scholar on museum disability with the assistance of a national advisory panel comprised of museum administrators[2] and the United States Department of Justice, the AAM's guidelines are a tool for assessment that allows museums to measure their access progress against recognized standards. As a result of this document, museums began to question how people with disabilities experience their collections (Constantine, 2007, p. 1). For example, science museums developed multi-sensory exhibits that encouraged learning through other senses apart from sight (Constantine, 2007, p. 1). History, anthropology, and art museums began to see the value of lowering display cases, the

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[1] This was first published in 1996 in video format by the American Association of Museums, entitled "Everyone's Welcome: Universal Access in Museums".

[2] Salmen's nine-step strategy is endorsed by the National Center on Disability; the Smithsonian Institution; the National Endowment for the Arts; the American Association of Museums; and museum staff from numerous U.S. Art, Science, and Natural History museums.

placement of labels, and the importance of mobility and accessibility of wheelchairs throughout exhibits (Constantine, 2007, p. 1).

ADA legislation and *Everyone's Welcome* encouraged art museums to produce innovative exhibitions designs and programs that offered user-friendliness, accessibility, and rich learning opportunities for all museum visitors (Constantine, 2007, p. 2). Additional accessibility documents have surfaced since Salmen's (1998) building blocks, such as the *Access for All Self-Assessment Toolkit* (2004) published by the Museums and Libraries Archive in the UK, however, *Everyone's Welcome* is still recognized as the principal source of disability awareness and access for museums (King, 2010, p. 41).

Museums in the U.S. are not alone in their pursuit of accessibility. Legislation in more than twenty-five countries has been enacted to protect the rights of people with disabilities (Constantine, 2007, p. 2). Australia and the United Kingdom have their own versions of the ADA, called the Disability Discrimination Act (DDA), both of which are fashioned closely after the ADA (Disability Rights, n.d.). Although *Everyone's Welcome* is tailored toward ADA compliance of museums in the U.S., it is a pertinent source for all museums throughout the world because its principles of disability are universal (United Nations Convention on the Rights of Persons with Disabilities, n.d.). Moreover, when coupled with Australian DDA laws regarding disability, Salmen's nine-step strategy coincides with Australian government standards which encourage cultural institutions to produce Disability Action Plans (DAPs) in order to comply with Australian disability access laws (Disability Discrimination Act, 1992).

The findings of this study come at a time where there is increased awareness and research regarding the importance of disability access in art museums (Sandell, Dodd, and

Garland-Thomson, 2010, p. 3). However, the results of this study indicate that there are still opportunities for art museums to further advance disability access.

The Problem

According to the United States Census Bureau (n.d.), nearly fifty million Americans have a disability. Similarly, the Australian Bureau of Statistics (2003) reports that nearly four million Australians have a disability. Despite these numbers and decades of legislation and policies aimed at advancing the treatment and understanding of people with disabilities, some art museums have lagged behind in fulfilling the legal requirements of disability access (Sandell, Dodd, and Garland-Thomson, 2010, p. 3). In response, the art museum industry has attempted to promote programs to reach broader audiences. For example, universal design principles began to influence the design of exhibitions (Reich, 2006, para. 2). Art museums also increased their accessibility, created tactile and raised prints of artworks, provided audio tours for the blind, and instituted guided tours in sign language to accommodate the deaf (Constantine, 2007, p. 10). The 1998 exhibition at the Cooper Hewitt National Design Museum in New York entitled, "Unlimited by Design" focused exclusively on inclusive exhibition design and demonstrated that accessibility does not equate to the lowering of aesthetic standards (Constantine, 2007, p. 10). In the mid-1990s, the Museum Access Consortium (MAC) was founded in New York to provide a forum for addressing accessibility issues specific to museums (McGinnis, 1999, p. 282). MAC was then re-created with a broader purpose:

> believing that the strongest institutional commitment to accessibility occurs when all
> departments share in the responsibility for physical, programmatic, and attitudinal

accessibility, the group sought to include individuals from all departments of

museums and cultural institutions (McGinnis, 1993, p. 282).

Despite these efforts, however, some have suggested that art museums could be

doing more to reach all potential audiences (Hooper-Greenhill, 2006, p. 363). Furthermore,

not everyone within the museum industry is convinced of the need to attract diverse museum

audiences, specifically those with disabilities (Hooper-Greenhill, 1988, p. 214). Lost in this

ongoing debate, however, are the millions of potential art museum visitors who do not have

suitable museum access and are not experiencing art due to various impediments.

As the primary cultural institutions within their communities that provide

opportunities for life-long learning, entertainment, and leisure-time (Salmen, 1998, p. 2), art

museums should cater to a range of audiences and encourage active participation, address

varying levels of knowledge, and provide ways of accessing information while allowing

visitors with disabilities to feel welcome (Falk and Dierking, 1992; Heumann Gurian, 1991;

and Hooper-Greenhill, 1999). Modern definitions of museums often prescribe museums as

educational institutions of public service and places of "inclusion that welcome a diverse

audience and reflect our society's pluralism in every aspect of its operations and programs"

(American Association of Museums, 1992, p. 5). As a result of the AAM report of 1992,

Excellence and Equity, museums today are focusing their energies on the communities in

which they reside and the public they serve (Salmen, 1998, p. 2).

Purpose and Significance of the Study

The purpose of this study is to investigate two contemporary art museums with

disability outreach programs using Salmen's nine-step strategy of accessibility for museum

visitors. The nine-steps were designed to assist all museums in becoming accessible to all individuals, including people with disabilities. These nine-steps serve as strategies whereby museums can design internal policy and standards for educational outreach programs that engage people with disabilities, as well as gauge their own effectiveness in attaining accessibility.

The AAM in the U.S. and Museums Australia (MA) in Australia both aim to uphold national museum standards and policy. In the strategic plans of both organizations there is a renewed focus to ensure equitable access and social development for all museum audiences (American Association of Museums, 2009). For example, both the AAM and MA strategic plans stress the importance of social equality, openness, and inclusiveness. The AAM guidelines, *Everyone's Welcome*, are designed to help museums achieve these renewed goals since the nine building blocks to accessibility provide art museums with a framework to promote social equality, openness, and to be as inclusive to as many visitors as possible.

Since the passage of the ADA in 1990, research on disability access has been conducted in a range of other areas, such as recreation, sport, and other public venues (Bullock, Mahon, and Killingsworth, 2010, p. 19). However, no study currently exists which examines whether art museum outreach programs meet recommended accessibility guidelines or whether art museum outreach programs created specifically for people with disabilities meet recommended accessibility guidelines (Sandell, Dodd, and Garland-Thomson, 2010, p. 20).

Research Questions

In order to better understand art museum disability access, two research questions were asked: (1) How do two contemporary art museums incorporate recommended

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accessibility guidelines into their disability outreach programs in order to become more accessible to people with disabilities? and (2) What strategies can art museums implement to become accessible for all individuals, including people with disabilities?

These research questions are used to explore what strategies art museums can implement to become accessible for audiences with disabilities and also how art museums can measure their access progress against recognized standards using Salmen's *Everyone's Welcome*. This study is of particular value to art museum educators because it addresses a significant gap in museum studies literature and applies guidelines to determine how two museum outreach programs are endeavoring to achieve accessibility for visitors with disabilities.

Limitations and Delimitations

This study examines and compares two museum cases and their disability access programs and practices. However, in case study research, no two situations or phenomena are exactly alike. Each case will always be unique and reliant on specific factors related to its own context. For example, while both museums are called the "Museum of Contemporary Art," no contemporary art museum is a replica of another, regardless of similarities. Moreover, virtually every art museum has its own, unique educational programs, practices, communities, audiences, and funding sources. This research, therefore, does not attempt to generalize the findings to all art museum education outreach programs, but rather attempts to develop a general understanding of two contemporary art museums and their educational approaches in providing accessible educational outreach programs to visitors with disabilities. Nevertheless, while the individual outcomes for each case study cannot be generalized to all museums, the core significance and findings of this study are

relevant to all art museums. For example, art museums in the U.S. and Australia must strive to meet ADA and DDA compliance in all aspects, including their educational outreach programs for visitors with disabilities.

Additional museums on the west coast of the U.S. and in Australia were contacted in a search of education outreach programs for people with disabilities. Of those museums contacted, only a handful had outreach programs that were designed and implemented specifically for people with disabilities. The two museums chosen were located in two different countries which served as a challenge to visit both museums. During the course of this study, the director of Education at the MCA, Sydney was replaced three times. This has caused some disruption and eliminated a continuity of leadership and historical knowledge of the institution and its past programs.

In case study design research, it is common to focus on one or two subjects. Therefore, only two museum education outreach programs where chosen so the researcher could thoroughly investigate the structure and policies of each museum's disability outreach program. In addition, the participants of the study were purposely selected because of their affiliation with the museum and specific knowledge of the programs.

The focus of the study is on Salmen's *Everyone's Welcome* nine-step strategy, not on the political policy of disability access or the physical accessibility of art museums. This study provides a case study exemplar of two exhibitions, as evidence of developing audience engagement strategies in two innovative and contemporary art museums.

This research utilizes Salmen's *Everyone's Welcome* nine-step strategy and acknowledges that no other recognized standards provide a systematic tool for art museums to measure their access progress. While Salmen's nine-steps are recognized by the AAM, no

study has determined the effectiveness of these building-blocks and more research is needed in this area. In addition, because of the legal mandates of the ADA and DDA, this study does not focus on the broader debates of the changing roles of the art museum or general audience engagement and visitor studies.

Definitions

Accessibility: The term *accessibility* means different things to different people. For example, under the ADA, accessibility means compliance with the requirements of the ADA standards for accessible design for new construction and alterations (United States Department of Justice, 1990). For museums, accessibility means making the site's exhibits and programs available to all visitors (Salmen, 1998, p. 3). The goal is to eliminate physical, communication, policy, and procedural barriers. This study uses the term accessibility in the museum context. This study does not address universal design or physical accessibility barriers, but rather focuses solely on accessibility regarding communication, policy, and procedural barriers.

Inclusion: The term *inclusion* is used in reference to art museums, specifically visitor outreach toward people with disabilities. This term does not refer to the broader term of social inclusion which encompasses all people-groups that may be in danger of exclusion, on the basis of issues such as multiculturalism, age, or gender (Sandell, 1998, p. 406). The term inclusion in this research refers specifically to how art museums, and in particular visitor outreach programs, accommodate visitors with disabilities.

CHAPTER TWO – LITERATURE REVIEW

Part One: Art Museums and People with Disabilities

Understanding Disability

Despite the significant number of people in both the U.S. and Australia who have disabilities, few people outside of the disabled community understand disability and its impact on the daily lives of millions of Americans and Australians (United State Department of Labor, n.d). The vast range of disabilities and conditions, along with the varying degrees of severity and impact, often lead to confusion and misunderstanding over what it means to have a disability (United State Department of Labor, n.d).

After decades of legislation and policies within both the U.S. and Australian governments that have aimed to positively advance the treatment and understanding of people with disabilities, few can still distinguish between the terms disability, handicap, and impairment (Bullock, Mahon, and Killingsworth, 2010, p. 2). In an attempt to bring some clarity to the term "disability," in 1980, The World Health Organization (WHO) published a definition of disability entitled *The International Classification of Impairments, Disabilities and Handicaps* (ICIDH), which incorporated a discussion of the differences between impairment, disability, and handicap (World Health Organization, 2001). According to WHO (2001), the term "impairment" was defined as "any loss or abnormality of psychological, physiological or anatomical structure or function, which might result from disease, accident, and genetic or other environmental agents" (p. 2). "Disability" referred to restriction or lack of ability to perform an activity in the manner or the range considered normal for a human being (World Health Organization, 2001). The term "handicap" meant

a disadvantage for a given individual that limits or prevents the fulfillment of the role that is normal (depending on age, sex, and social and cultural factors) for that individual (Helander, Mendis, and Nelson, 1989, p. 6).

Despite the WHO's good intentions, it was argued, largely by the Union of the Physically Impaired Against Segregation (UPIAS) and other self-advocacy movements and advocacy groups (Masala and Petretto, 2008, p.1233) that its definitions were too narrow and did not meet modern standards of cross-cultural applicability needed for an international classification (Bullock, Mahon, and Killingsworth, 2010, p.6). In 1993 the WHO agreed to make changes to the ICIDH, resulting in a new draft of ICIDH2 (Bullock, Mahon, and Killingsworth, 2010, p. 4). After extensive discussions between WHO collaborating centers, advocacy groups, consultants, health programs, and researchers, a new classification was adopted by the World Health Assembly in 1999 (Bullock, Mahon, and Killingsworth, 2010, p. 4). The revisions to the definition of disability reflected a greater awareness of the limitations faced by many people with disabilities (Bullock, Mahon, and Killingsworth, 2010, p. 4).

The term "disablement" became an all-inclusive term with three dimensions: (1) body structures or functions; (2) personal activities; and (3) participation in society (Bullock, Mahon, and Killingsworth, 2010, p. 4). The term "impairment" was now defined as "a loss or abnormality of body structure or of a physiological or psychological function" (World Health Organization, 2001, p. 2). The dimension of "activity" was now equated to the level of functioning of the individual which may be limited in terms of the nature, duration and quality, and refers to the capacity of the person to perform tasks which are generally considered typical in everyday life (Bullock, Mahon, and Killingsworth, 2010, p. 5). The

term "participation" in society is now referred to as the operation of the disablement process as it refers to the individual's engagement in life activities, as a function of their impairment, health conditions and contextual factors (Bullock, Mahon, and Killingsworth, 2010, p. 5). In sum, the WHO'S revised ICIDH definition demonstrates that it is more appropriate to refer to an individual's ability rather than a "medical condition" or "dis-ability". The WHO's revised 1999 definition of disability was a necessary step toward the continued remedy of past discrimination of people with disabilities (Masala and Petretto, 2008, p. 1235). Throughout time, individuals and even entire countries, governments, and organizations, have committed vile atrocities toward people with disabilities.

Historical Treatment of People with Disabilities

For much of the last century, people with disabilities in Australia and the U.S. were living in institutions such as mental hospitals, nursing homes, or hostels (Life to Live, 2001). People with disabilities were separated from the community and often were institutionalized for their entire lives (Life to Live, 2001). Separation from society has been the norm for people with disabilities throughout history. Not only have they been misunderstood, people with disabilities have been cast as subhuman, diseased organisms, and even assumed to be a punishment from God because of their sinful parents (Wolfensberger, 1972, p. 12).

Inhumane treatment of people with disabilities dates back for centuries. Dating back to ancient Mesopotamia, it was believed that if a person had a disability it was the direct result of demon possession, evil spirits, or transgressions against the gods (Bullock, Mahon, and Killingsworth, 2010, p. 30). In ancient Rome, written records illustrate that those who controlled the Roman Empire were afraid of people with disabilities and demanded protection. In fact, Roman laws protected the general public from people with disabilities,

rather than advocate for those who needed protection from the vile treatment of society (Bullock, Mahon, and Killingsworth, 2010, p. 31).

In other early societies, infants believed to have deformities were abandoned and left to die (Macklin and Gaylin, 1981, p. 207). In militaristic societies like Sparta, infants deemed unfit to the challenges of Spartan life were thrown from cliffs to their death (Scheerenberger, 1983, p. 3). In such societies, those who survived infancy were often used for public entertainment or as slaves (Bedini, 1991, p. 63).

In the twelfth and thirteenth centuries, some societies attempted, with little success, to advance the treatment of people with disabilities. Referred to as "defectives," people with disabilities were put into hospitals in order to be off the streets and out of sight. At the time this inhumane segregation was looked upon favorably by a society that thought it was taking care of those who could not look after themselves by placing people with disabilities into "safer" environments (Bullock, Mahon, and Killingsworth, 2010, p. 33).

During the Middle Ages, people with disabilities continued to be treated as outcasts by society and were abandoned, sent away to prisons, or even murdered (Welsford, 1935, pp. 78, 94). Those fortunate enough to survive were often treated as cargo and sailed from port-to-port in a "ship of fools" to be displayed to curious onlookers as shock entertainment (Foucault, 1965, p. 19).

By the sixteenth century in Europe, people with disabilities were placed in institutions under the guise of administering necessary medical treatment, but instead were exploited and in the process, dehumanized for profit (Bullock, Mahon, and Killingsworth, 2010, p. 35). In one of the first European institutions for people with physical and developmental disabilities, the Bethlehem Royal Hospital in England, known as "Bedlam,"

residents were exhibited before visitors who on Sundays paid a penny entry fee. These "open days" sadly were popular. In 1815, the annual revenue for Bethlehem was approximately four hundred pounds, which equates to an audience of approximately ninety-six thousand visitors per-year (Evans, 1983, p. 37).

In Colonial America, (1492-1776) life for people with disabilities was no better. People with disabilities generally were cared for at home since no institutions existed and the colonization of the country was the nation's top priority (Bullock, Mahon, and Killingsworth, 2010, p. 36). People with disabilities were viewed as a family disgrace and often were locked up in a basement or outhouse with no amenities (Bullock, Mahon, and Killingsworth, 2010, p. 37).

By the mid-nineteenth century in North America, new institutions were built which attempted to incarcerate the mentally ill and treat people with disabilities as criminals (Deutsch, 1967, p. 410). In 1848, the state of Massachusetts provided funding for the Massachusetts School for Idiotic and Feebleminded Youth to prepare "feebleminded youths" to become self-supporting members of the community (Bullock, Mahon, and Killingsworth, 2010, p. 37). Within forty years there were twenty-four similar state-supported institutions in the United States (Bullock, Mahon, and Killingsworth, 2010, p. 37).

By the early twentieth century, many within the general public from a variety of social circles feared that "mental defectives" were reproducing themselves and by 1926, twenty-three U.S. states instituted mandatory sterilization laws. In 1927, the Supreme Court of the U.S. upheld the constitutionality of these state laws by holding that:

it is better for all the world, if instead of waiting to execute degenerate offspring for crime, or to let them starve for their imbecility, society can prevent those who are

manifestly unfit from continuing their kind…three generations of imbeciles are

enough (Buck vs. Bell, 1927, p. 247).

Between 1925 and 1955, it is estimated that over fifty thousand people with

disabilities, or those labeled as "defective" were sterilized in the U.S. (Bullock, Mahon, and

Killingsworth, 2010, p. 39). While these statistics are shocking, it does not compare to the

atrocities carried out upon people with disabilities in Nazi Germany. There, adults with

disabilities were mass-murdered by Nazis, and mid-wives were ordered to report for

extermination any births of babies with medical conditions, such as Down's syndrome,

blindness, deafness, and deformities (Friedlander, 1997, p. 216).

The dehumanization and sordid conditions pervasive in institutions for people with

disabilities began to improve in the 1950's (Bullock, Mahon, and Killingsworth, 2010, p.

41). There are several theories as to why this may have taken place. Some researchers have

suggested that the general public in both the U.S. and Australia had been repulsed by what

had taken place in Nazi Germany (Bullock, Mahon, and Killingsworth, 2010, p. 41). Other

believed that parents of children with disabilities began to advocate for their children's

needs at a point in history in which they were now being heard (Bullock, Mahon, and

Killingsworth, 2010, p. 41). Finally, some have averred that in the early 1960's, President

Kennedy legitimized these fledgling efforts by creating a Presidential Commission to

recommend a national strategy to assist people with disabilities.[3]

In the late 1960s and early 1970s in the U.S., there was a move away from large-

scale institution-based care for people with disabilities toward small-scale community-based

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[3] This was largely due to the fact that President Kennedy had a sister with developmental disabilities. Bullock, C., Mahon, M., & Killingsworth, C. (2010). *Introduction to recreation services for people with disabilities*, (3rd ed.). Champaign: Sagamore Publishing, 41.

facilities (Dear and Wolch, 1997, p. 16). Gradual de-institutionalization, however, brought

about problems within the general community as previously institutionalized people were

not always welcome in the general public. In addition, there were few vocational,

educational or recreational opportunities, and few services available to people with

disabilities including accessibility to businesses and services (Bullock, Mahon, and

Killingsworth, 2010, p. 43).

In Australia, the earliest schools for children with disabilities were established in the

1860s for children who were deaf or blind (Life to Live, 2001). However, it was not until

the 1920s that schools for children with other disabilities were established, as well as

"hospital schools" for children with significant physical disabilities (Life to Live, 2001). By

1939, only eleven percent of the estimated twenty-two thousand Australian children with

intellectual disabilities were receiving a school education (Life to Live, 2001). By the 1970s,

there were about eighteen hundred "special schools" throughout Australia, however, most

were privately operated by voluntary organizations (Life to Live, 2001).

In the late 1960s to early 1970s, the Australian government took a more active role

in the education of children with disabilities. This was a result of the Australian Council for

Rehabilitation of Disabled (ACROD) and their recommendations for the integration of

children with disabilities into other schools (Life to Live, 2001). In 1976, the Australian

government provided funding, appointed a Minister for Special Education, and provided

special education training for teachers (Life to Live, 2001). By the late 1970s, the number of

children being educated in special schools rose to approximately twenty-five thousand and

by 1980, all Australian states were advocating the education of children with disabilities

within traditional school settings (Life to Live, 2001).

The United Nations (UN) played a significant role in bringing about changes in both Australia and the U.S., by issuing the Declaration of Rights of Disabled Persons in 1974 (Life to Live, 2001). In 1981, the International Year of disabled Persons was also declared by the UN which helped raise public awareness about the rights of people with disabilities (Life to Live). It was not until 1990, however, with the passage of the ADA, and in 1992 with the DDA, that the U.S. and Australia began to remedy the effects of past discrimination toward people with disabilities. Today, public institutions, such as art museums, must comply with a range of ADA and DDA laws that mandate appropriate treatment toward people with disabilities. It is to society's advantage that everyone be treated equitably and that all barriers to accessibility be removed (Wyatt-Spratt, Wyatt-Spratt and Haley, 1999, p. 7).

In the U.S. and Australia, art museums must comply with a number of disability laws to make their programs and facilities meet the needs of people with disabilities. Therefore, some art museums are designing innovative strategies to make their programs more accessible to a broader audience (Wyatt-Spratt, Wyatt-Spratt and Haley, 1999, p. 7). At the core of any art museum outreach program should be a strategic plan implemented, monitored, and embraced by art museum staff that meets the needs of visitors with disabilities.

Disability Laws in the United States and Australia

The first federal law in the U.S. designed to support people with disabilities dates back to 1798 when the Fifth Congress sanctioned a Marine Hospital service to provide medical services to sick or disabled sailors (Bullock, Mahon, and Killingsworth, 2010, p. 89). However, little else changed until the 1960's when new federal laws were passed which

resulted in more programs, better trained professionals, further research and information

dissemination, and technical assistance for people with disabilities (Bullock, Mahon, and

Killingsworth, 2010, p. 89). Nonetheless, it has only been since 1990 that the rights of

people with disabilities in the U.S. have changed significantly.

Public Law 101-336, the Americans with Disabilities Act, was signed into law by

President Bush on July 26, 1990 and has been referred to as the twentieth century

emancipation proclamation for people with disabilities (Bullock, Mahon, and Killingsworth,

2010, p. 90). The main purpose of this act is to ensure that people with disabilities have the

same opportunities available to persons without disabilities (Salmen, 1998, p. 9). Under the

ADA, an individual is considered to have a disability if he or she:

> has a physical or mental impairment that substantially limits one or more major life
>
> activities (e.g. paralysis, seizure disorders, hearing or visual impairments, HIV
>
> infection or AIDS, mental retardation, specific learning disabilities) or has a record
>
> of such impairment (e.g. cancer survivors, people recovered from mental illness) or
>
> is regarded as having such impairment (e.g. people with facial or other
>
> disfigurements that are limiting only because of the attitudes of others) (United
>
> States Department of Justice, 1990, para. 4).

The ADA is comprised of five separate parts or titles. Each of these titles addresses a

specific category of coverage (United States Department of Justice, 1990). Title I covers

employment; Title II covers programs, services and activities of state or local governments;

Title III covers private companies and nonprofit organizations which provide goods and

services to the public; Title IV addresses telecommunications access, and Title V contains

miscellaneous provisions applicable to all other Titles (United States Department of Justice,

1990). Art museums are covered by Title II if they are owned and operated by a state or local government, regardless of their size or whether they received federal funding. Title III applies to art museums that are privately owned and operated (Salmen, 1998, p. 23).

Preventing discrimination is at the heart of Title II. Title II's primary goal is to ensure equitable services, programs, and activities for everyone (Salmen, 1998, p. 12). Public services and programs must be designed to ensure equal opportunity, as well as be appropriate to the needs of individuals, with or without disability (Salmen, 1998, p. 12). For example, under the ADA, if an art museum does not generally allow visitors to touch exhibits, it should offer a specialized tour for visually impaired participants so they can touch certain objects, such as sculptures and artifacts (Salmen, 1998, p. 12). However, individuals with disabilities should not be excluded from regular tours or programs, nor forced to utilize the alternate services accessible to them, or in any way segregate them from other museum visitors (Salmen, 1998, p. 12).

To comply with the ADA's provisions, art museums are required to modify their policies, practices and procedures (Salmen, 1998, p. 13). For example, if a museum has a policy of no food or drink in the galleries, this policy would need to be waived if a visitor has diabetes or another blood-sugar related condition in which they must regularly eat or drink (Salmen, 1998, p. 13).

Art museums also monitor their communication with people with disabilities. In order to provide equal access, a publicly funded museum is required to make auxiliary aids and services available to ensure effective communication, unless it can demonstrate that there is another effective means of communication, or that the means chosen would cause a significant change in the service, program or activity or cause undue financial or

administrative burdens (Salmen, 1998, p. 14). For example, in order to comply with Title II, an art museum must provide interpreters, note-takers, computer-aided transcription services, written materials, telephone handset amplifiers, assistive listening devices, hearing-aid-compatible telephones, closed-caption, decoders, and telecommunication devices for people who are deaf (Salmen, 1998, p. 14). The type of auxiliary aid or service required for effective communication varies, depending on the length and complexity of the communication involved, as well as the communication skills of the person with the disability (Salmen, 1998, p. 14).

Art museums must also ensure that all museum programs are reasonably accessible. Visitors with and without disabilities must be able to attend. Art museums may provide program accessibility by altering existing facilities, or relocating a service or program to an accessible facility (Salmen, 1998, p. 15).

Another important component of Title II is the mandatory availability of an effective process to resolve ADA complaints that arise from the museum's operations (Salmen, 1998, p. 17). Art museums are encouraged to appoint an ADA coordinator to help ensure that the museum carries out self-assessments of its current programs and services (Salmen, 1998, p. 10). Self- assessments should identify problems that prevent or limit access and also suggest solutions for those policies and practices that are inconsistent with Title II in order to comply with the ADA (Salmen, 1998, p. 16).

While art museums must be careful to adhere to the ADA, public institutions do not have to modify their programs or facilities if such modifications would pose a "direct threat" to the health or safety of visitors or staff, or result in a "fundamental alteration" to programs, services or collections (Salmen, 1998, p 22). A direct threat is considered "a significant risk

to the safe operation of the facility or to the health and safety of others that cannot be eliminated by modification of policies, practices or procedures or by the provision of auxiliary aids or services" (Salmen, 1998, p. 22). For example, a "direct threat" might be where an art museum chooses not to admit a person with an active infectious airborne disease since other visitors and staff may also become infected. The museum would, however, be required to admit a visitor with HIV or AIDS since it is not an airborne disease (Salmen, 1998, p. 22). A fundamental alteration is "a modification that is so significant that it alters the essential nature of the goods, services, facilities or accommodations offered" (Salmen, 1998, p. 22). For example, before an art museum excludes a visitor with a disability or refuses to grant a specific request for accommodation, museum staff must determine whether there is a major health or safety risk or a fundamental alteration to the program, goods, services or collection that cannot be eliminated by reasonable modifications to the museum's policies, practices or procedures (Salmen, 1998, p. 22). Furthermore, according to the ADA, art museums cannot impose surcharges on people with disabilities to cover costs associated with ADA compliance (Salmen, 1998, p. 22).

Complying with the ADA is an ongoing obligation for American art museum directors and staff working within publically funded institutions. Museum officials and staff must also understand how local, state, and federal laws affect museum practices in achieving ADA compliance (Salmen, 1998, p. 31). Ongoing ADA training, therefore, is critical.

While the ADA is the most comprehensive and recent of disability-related laws in the U.S,. there are several other non-discrimination laws and accessibility standards which also apply to art museums (Salmen, 1998, p. 8). The Architectural Barriers Act (ABA), for example, provides standards for art museums receiving federal money for the design,

construction or alteration of facilities (Salmen, 1998, p. 8). Art museums must ensure that buildings and facilities are accessible in accordance with the minimum accessibility standards of the ABA (Salmen, 1998, p. 5). According to Section 504 of the Rehabilitation Act of 1973, art museums that receive federal financial aid and those operated by federal agencies are required to make their programs accessible to all people with disabilities. The coverage of Section 504 is not limited to specific programs, but all operations of the museum receiving federal financial aid (Salmen, 1998, p. 9). Art museums should also be aware of state and local laws which include various forms of human rights, civil rights or antidiscrimination laws (Salmen, 1998, p. 9). Some of these laws require museums to provide higher levels of accessibility for people with disabilities than is required under federal laws, particularly with regard to buildings, programs and facilities (Salmen, 1998, p. 10). It is important to note that this study, however, does not investigate the nature of accessibility regarding the physical structure of museums or "universal design." Instead, the focus of this study is on understanding the qualitative dimensions of art museum education outreach programs within American and Australian museums and the AAM's nine-step building block strategy to achieve both ADA and DDA compliance. In Australia, art museums must comply with the Commonwealth DDA of 1992 as guided by the principles of the UN Convention on the Rights of Persons with Disabilities (Gration, 1998, p. 5). The aims of the DDA are similar to the ADA: to eliminate discrimination on the grounds of disability; to ensure that people with a disability have the same rights to equality as the rest of the community; and to educate the community about the rights and needs of people with disabilities (Gration, 1998, p. 5).

The definition of disability under the DDA is broad and includes the areas of physical, intellectual, psychiatric, sensory (including visual and hearing), neurological (including brain injuries), learning difficulties, physical disfigurement, and disease (including people living with HIV/AIDS) (Accessible Arts, n.d.). DDA also covers people with a disability who presently have or have had a disability in the past, along with a disability they may have in the future or are believed to have (Accessible Arts, n.d.). The DDA recognizes that disability may be hidden or temporary and that attitudes toward disability may be a cause of discrimination (Accessible Arts, n.d.).

The DDA covers all areas of public life in Australia, including cultural activities, such as art museums. Similar to the U.S., the DDA standards exist to ensure the universal design in building structures and accessibility for people with disabilities (Accessible Arts, n.d.).

Policies have been developed for people with disabilities using a social model which acknowledges that the barriers created by society are "disabling" to an individual and those barriers should be eliminated (Accessible Arts, n.d.). Likewise the policies designed and implemented in contemporary Australian art museums should, according to the DDA, be created with the same intent – to eliminate barriers for people with disabilities and to ensure a quality learning experience for all.

Discrimination, Barriers, and Accessibility

The ADA and the DDA are laws written to address discrimination toward people with disabilities. As Bullock et al (2010) outlines, the primary reasons why the ADA and the DDA were enacted are because people with disabilities tended to be isolated or segregated;

they experience intentional and unintentional discrimination; discrimination is pervasive in society; discrimination occurs in all areas of life; there was no satisfactory legal recourse for people with disabilities, and people with disabilities generally have inferior social positions and had been powerless to address all of these inequalities (p. 123). While the ADA and the DDA are some of the most significant pieces of civil rights legislation written, there are numerous challenges that people with disabilities and their advocates, still face, including social exclusion (Bullock, Mahon, and Killingsworth, 2010, p. 123).

Bullock et al (2010) agree there are many reasons why people with disabilities have been socially excluded. Often referred to as barriers, these reasons are both intrinsic and extrinsic in nature (Bullock, Mahon, and Killingsworth, 2010, p. 124). Intrinsic barriers, according to Bullock et al, result from an individual's own physical, psychological or cognitive limitations. These are real barriers which are usually permanent and reduce a person's ability to be involved in a normative society (Bullock, Mahon, and Killingsworth, 2010, p. 124). Extrinsic barriers are things external to people with disabilities that impress limitations upon that person, such as inaccessible architecture, rules and regulations and negative attitudes (Bullock, Mahon, and Killingsworth, 2010, p. 124).

Negative attitudes toward people with disabilities are easy to detect but often difficult to change. There often are predetermined perceptions of people with disabilities and when these perceptions are negative, they become extrinsic barriers (Bullock, Mahon, and Killingsworth, 2010, p. 125). Negative attitudes may also be intrinsic barriers if they belong to a person with a disability. If a person with a disability has a negative attitude about themselves, this may in turn create a bad attitude from people without disabilities toward them, thus creating barriers (Bullock, Mahon, and Killingsworth, 2010, p. 125).

Attitude theory has been important for understanding the issues surrounding art museums and people with disabilities (Triandis, 1977, p. 130). According to Triandis (1977, p. 130), an attitude is an idea charged with emotion that predisposes a class of actions to a particular class of social situations. Attitudes help people adjust to their environment by providing a level of predictability as well as enabling us to get along with people who have similar attitudes (Bullock, Mahon, and Killingsworth, 2010, p. 125). Fishbein and Ajzen (1975) suggest that attitude can be described as "a learned disposition to respond in a consistently favorable or unfavorable manner with respect to a given object" (p. 32). Bullock et al (2010) suggests that attitudes are learned, rather than innate traits, and are also latent or underlying tendencies rather than observable behaviors. Fishbein and Azjen (1980) go even further in their Theory of Reasoned Action and suggest that subjective norms, or the influences of significant others and the corresponding motivation of the individual to comply with these norms, combine with attitudes of the individual toward a given behavior to determine a person's behavioral intention, which then influences actual behavior (p. 32). Fishbein and Azjen's Theory of Reasoned Action, highlights the need for promoting understanding in how to create accepting behaviors of people with disabilities by society (Bullock, Mahon, and Killingsworth, 2010, p. 127).

In his work, *Interdependence: The route to community*, Condeluci (1995) recounts stories of devaluation and oppression experienced by people with disabilities (p. 6). Not only have people with disabilities felt the negative attitudes toward them, but some people have also internalized these attitudes and come to believe them (Higgins, 2002, p. 756). As a result, people with disabilities often have been scripted or stereotyped into preconceived roles. For example, Wolfensberger (1972, p. 14) describes various labels that are often

assigned to people with disabilities, such as menaces, objects of pity, sickness, and burdens of charity, objects of ridicule, eternal children, and holy innocents. The term "eternal children" may be used in reference to a person with disabilities regardless of age which in turn places them in a role of a permanent child. People with disabilities are often talked down to, especially for those who may have extreme physical disabilities, like cerebral palsy, where speech and physical movement is very limited.

Although such social labels provide a greater understanding of attitudes toward people with disabilities, it is important to understand that social attitudes can be changed. Bullock et al (2010) suggest there are at least three ways to enhance the possibility of changing attitudes toward people with disabilities: (1) through personal contact and interaction with people with disabilities, (2) persuasive communication in support of people with disabilities, and (3) the assumption of disability, whereby someone puts themselves in the shoes of a person with a disability in order to gain a greater understanding of what it is like (p. 32).

While the ADA and the DDA were enacted to combat discrimination toward people with disabilities, the law alone does not eliminate discrimination. Thus, highlighting the existence of unintentional attitudes and the nature of preconceived social roles contributes to greater awareness for the social inclusion and equality of people with disabilities. Furthermore, understanding the difference between types of barriers is important when examining art museum programs and how they are implementing steps to accessibility.

The examination and disclosure of barriers as applied within the context of the art museum may be varied. For example, a physical barrier is the condition of the physical environment that restricts access, movement or participation by individuals who want to use

facilities or areas (Bullock, Mahon and Killingsworth, 2010, p. 134). Physical barriers generally are easier to understand because they often are more obvious. According to the ADA and DDA, public entities, such as art museums are required to remove architectural barriers such as stairs, curbs, narrow hallways or doors to ensure access, where it is possible to do so in an achievable manner (Bullock, Mahon and Killingsworth, 2010, p. 134). While the removal of physical barriers is important to ensure access in art museums for people with disabilities, this study focuses on attitudinal barriers, specifically relating to programmatic accessibility in art museums for people with disabilities.

Programmatic accessibility requires art museums to operate each program so that, in its entirety, the program is accessible to people with disabilities (Bullock, Mahon and Killingsworth, 2010, p. 134). *Everyone's Welcome,* written by John Salmen, a world renowned researcher and architect who specializes in barrier-free and universal design, was published in 1998 by the AAM as a manual for museums to aid in the development and implementation of accessibility strategies. To ensure the accuracy and quality of the content of this document, Salmen was assisted by the U.S Department of Justice Disability Rights Section along with a National Advisory Committee (see Acknowledgements of Salmen, 1998). Salmen's nine-step strategy is endorsed by the National Center on Disability, the Smithsonian Institution, and the National Endowment for the Arts, the American Association of Museums, and museum staff from numerous U.S. Art, Science, and Natural History museums (see Acknowledgements of Salmen, 1998).

In *Everyone's Welcome,* Salmen (1998) outlines a nine-step strategy of building blocks so museums can plan, implement, and evaluate their programs and exhibitions to meet the needs of people with disabilities and comply with current disability law. Salmen's

nine steps encourage museums to: (1) Publish an *accessibility statement*; (2) Designate an

accessibility coordinator, (3) Employ an *accessibility advisory council*; (4) Provide *staff*

training; (5) *Review of existing facilities and programs*; (6) *Plan for accessibility*; (7)

Promote and advertise accessibility in the museum; (8) Institute *grievance procedures*; and

(9) *Review access efforts* (pp. 36-49).[4] The following is an overview of these nine-steps.

According to Salmen, an *accessibility statement* or policy should detail the art

museum's support and commitment toward people with disabilities by the museum board

and director. The accessibility statement/policy should incorporate all nine building blocks

outlined in *Everyone's Welcome* (Salmen, 1998, p. 36). Salmen maintains that the language

and spirit of the *accessibility statement* should affirm that the museum welcomes people

with disabilities and strives to achieve the goal of providing access to the museums

programs, goods, services, and facilities. Art museums may further demonstrate their

commitment toward disability access by hiring qualified staff, board, and advisory council

members who also have disabilities (Salmen, 1998, p. 36).

Art museums from around the world are beginning to implement *accessibility*

statements and disability policies similar to Salmen's recommendation. The Horniman

Museum in London, England is one example of a museum that has implemented a specific

accessibility statement to express their commitment toward disability access and social

inclusion:

> The Trust welcomes all visitors to its premises and is committed to implementing
>
> fully its obligations as an employer and service provider under the Disability
>
> Discrimination Act. The Trust believes that improvements in access to its facilities

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[4] Each of Salmen's nine-steps are italicized to make for clearer identification of the nine steps throughout this
research.

and services for people with disabilities are of general benefit to all visitors and staff

(Horniman Museum, 2000, p. 1).

An *accessibility statement,* however, is only the minimum policy statement art

museums should implement. Salmen (1998) also notes that an accessible policy statement or

action plan should include performance indicators and performance measures to ensure

museums can gauge the effectiveness of their disability access strategies (p. 36). The

National Museum of Australia in Canberra provides a good example of disability strategies

that contain performance indicators and performance measures specific to educational

programs created specifically for people with disabilities (National Museum of Australia,

2008).

In sum, a well written accessibility statement, policy or a disability action plan

provides art museums and museum organizations with a solid framework for implementing

the remaining eight building blocks to accessibility. A well-crafted policy statement should

outline the museum's commitment toward disability access.

Salmen's second building block toward accessibility is to designate an *accessibility*

coordinator. Ideally, the *accessibility coordinator's* role is delegated to a single individual

whose formal job responsibilities relate solely to facilitating access within the museum

(Salmen, 1998, p. 36). However, Salmen notes that art museums do not necessarily need to

hire someone specifically as the *accessibility coordinator*. In some museums, the

accessibility coordinator's role is shared between a group of employees, each of whom

would serve as an "expert" for a specific accessibility goal, such as coordinating effective

communications or developing staff training programs (Salmen, 1998, p. 36).

The primary task of the *accessibility coordinator* is to oversee the implementation of an overall accessibility program (Salmen, 1998, p. 37). Salmen suggests that an *accessibility coordinator*, at a minimum, should serve as an in-house accessibility consultant and staff liaison for all exhibits, programs, activities, and events (Salmen, 1998, p. 37). This role requires knowledge of accessibility standards and laws, an ability to educate staff regarding accessibility, the coordination of a museum review processes, and the planning and implementation of museum's short term and long term plans (Salmen, 1998, p. 37).

Having an *accessibility advisory council* is the third building block to accessibility proposed by Salmen. The new council may be specifically appointed, or an existing council can be utilized (Salmen, 1998, p. 38). The *accessibility advisory council* should be comprised of professionals familiar with disability laws and best practices (Association of Science Technology Centers, n.d). Preferably, these professionals would also work or be familiar with organizations that exist to encourage participation in the arts for people with disabilities (Salmen, 1998, p. 38).

Salmen (1998) encourages art museums to elect members to the council who have disabilities because they may provide valuable insight on art museum policy or programming via their personal experiences as well as assist in the education of staff, volunteers, and board members with disability outreach and access issues (p. 38). Additional roles of the *accessibility advisory council* are to assist in the evaluation of facilities, programs and services, develop or comment on the access policy of the museum, provide technical assistance, participate in staff training workshops, and to serve as a resource or outreach body (Salmen, 1998, p. 38).

Staff Training is Salmen's fourth building block to accessibility. According to Alison

McLaren (2007) audience development officer of *Accessible Arts* in Sydney Australia,

disability awareness training for museum staff members is a critical component to ensure

that a positive message of inclusion and accessibility is communicated to people with

disabilities (p. 5). McLaren recommends that training for museum staff should be provided

on a regular basis and should be comprised of the following goals: (1) break down

attitudinal barriers between staff and people with disabilities, (2) provide specific and

accurate information on the needs of people with disabilities, (3) educate staff regarding the

legal responsibilities of the museum, and (4) to develop staff expertise on accessibility

related solutions for foster team effort. These goals in turn should continue to be

communicated to all visitors when they visit a museum's education program or exhibit

(McLaren, 2007, p. 5).

Training should also attempt to broaden staff's knowledge regarding the needs of

people with disabilities by becoming familiar with the various types of disabilities (Salmen,

1998, p. 40). Understanding the degree to which disability may affect a person's life enables

museum staff to more effectively design and implement a variety of museum services and

programs which caters to people with disabilities (Association of Science Technology

Centers, n.d.).

Salmen's fifth building block to accessibility for museums is to *Review Existing

Facilities and Programs*. This is the self-evaluation required by law in both the U.S. and

Australia and should include the following key issues and areas in the review process of

programs and facilities: (1) The language used for policies and practices should ensure that

people with disabilities are included in all programs and services. For example, the

Smithsonian Institution has comprised guidelines for Accessible Exhibition Design and states the importance for the use of correct language when implementing policies and practices (Guidelines for Accessible Exhibition Design, n.d.); (2) The accessibility of programs, exhibitions and publications should communicate effectively to people with disabilities. For example, the Association of Science-Technology Centers (ASTC) in the U.S. provides a sound list of best practices for accessibility in museums and suggests that providing access guides are a small but effective way to list offerings available to people with disabilities (Association of Science Technology Centers, n.d.); (3) The accessibility of buildings where programs take place or services are provided should be free from physical barriers. For example, information desks in museums may need to be considered for their height and the amount of turning space around it; and (4) Art museums must provide adequate staff training for visitor access (Salmen, 1998, p. 43).

Planning for Accessibility is Salmen's sixth building block to accessibility. Art museums should regularly review all of their education and outreach programs and then make any needed modifications, such as implementing additional staff training or correct any physical modifications to building structures (Salmen, 1998, p. 44). For example, the ASTC provides a detailed step-by-step access plan which all museums can use as a guide for education and outreach program reviews. ASTC (n.d.) suggests museums investigate their obligations, make a list of barriers, set priorities, use worksheets to record an access plan, and periodically review and update their access plans.

Promoting and Advertising Accessibility in the Museum is Salmen's seventh building block to accessibility. Art museums in the U.S., the UK, and now Australia, are beginning to see the benefits of disability access, not only for the purpose of complying with disability

laws, but also to increase their audience base and to be more socially inclusive (McLaren, 2007, p. 8). McLaren (2007) stresses the importance of advertising and promoting disability access and suggests that by projecting attitudes of inclusion to all, museums can enhance their cultural standing and image as a valid and important educational and entertainment resource (p. 8). McLaren also notes that one of the easiest ways to achieve this within the art museum is to include accessibility symbols wherever possible, including on websites, closed-captioned television, radio- reading services or relay services or information lines (p. 8).

Wyatt-Spratt, Wyatt-Spratt and Haley (1999) also notes that communicating that an art museum has taken action to improve disability access should be a primary marketing strategy. Including access information within the museum, but also in promotional materials is important to ensure the message is heard by as many audiences as possible (p. 5). Museums may also advertise through disability organizations to reach these audiences directly (Wyatt-Spratt, Wyatt-Spratt and Haley, 1999, p. 5).

Salmen's eighth building block to accessibility is the establishment of a *grievance process*. The ADA (1990) and the DDA (1992) requires art museums to have a grievance procedure in place that outlines the process for identifying and resolving problems, specifies the grievance process, and provides documentation for each complaint. Salmen (1998) argues that art museums should have a readily accessible description of the procedures for submitting a grievance and a reasonable time frame for the review and resolution of any complaints (p. 48). While many museums may not have a specific person assigned to grievances affecting people with disabilities, most art museums typically have a *grievance process* for general museum complaints. Grievances pertaining to disability issues could be

added to these procedures. If a museum already has a disability coordinator in place, disability grievances would fall under their domain after the coordinator has received appropriate training and guidance (Salmen, 1998, p. 48).

Salmen's ninth and final building block for accessibility is the *Ongoing Review of Access Efforts*. Providing accessible environments for all art museum visitors is an ongoing endeavor. The ADA and DDA requires museums to continually evaluate potential barriers to accessibility (Salmen, 1998, p. 49). Museums should, in Salmen's view, instigate long-term policies and procedures that are built into the fabric of the museum in order to incorporate accessibility into all new building construction, projects, programs, and activities. (p. 49) These changes in museum's programs and priorities have the potential to positively influence a museum's compliance to accessibility over time. Even so, museums must periodically re-evaluate themselves to ensure that accessibility standards are continually being met (Salmen, 1998, p. 49).

Salmen's nine building blocks to accessibility provide a starting point by which museums may begin to assess their level of accessibility while still providing practical strategies for improvement. Given that one in five Americans (United States Department of Commerce, 2007) and one in six Australians have a disability (Australian Bureau of Statistics, 2003), it is evident that there is a wealth of possible opportunities for art museums to reached out to people with disabilities (Wyatt-Spratt, Wyatt-Spratt, and Haley, 1999, p. 2).

While physical barriers are an important issue for art museums, equally important are the hidden attitudinal barriers related to the design, planning, and implementation of art museum education programs, as well as program policies, practice, and communication for

people with disabilities. As Salmen (1998) indicates, self-evaluation is crucial for a museum's assessment of its current programs, activities, and services, as well as the implementation and maintenance of effective programs, facilities, policies, and practices offered to people with disabilities (p. 34).

Salmen's nine building blocks to accessibility also provide an effective starting point from which art museums may begin the process of self-evaluation. Through self-evaluation, museums can remain receptive to the identification of problems or limitations of people with disabilities, along with providing suggestions for possible solutions in policy and practice which currently may be inconsistent with Title II requirements in the U.S. (Salmen, 1998, p. 16). The process of self-evaluation identifies all programs, activities and services and investigates whether policies and practices adversely affect the full participation of people with disabilities (Salmen, 1998, p. 16).

Salmen maintains that the close examination of policies and practices and communication within museums should also be included in the self-evaluation. While not a focus of this study, Salmen (1998) does note that a museum's self-evaluation should closely examine all museum programs to determine the presence of possible physical barriers (p. 50). Steps should be then identified which will enable the programs to be accessible and if structural changes are required, these would be noted in a transition plan (Salmen, 1998, p. 16). In addition, staff training programs should also be reviewed to ensure museum staff are familiar with and able to carry out the policies and practices for people with disabilities (Salmen, 1998, p. 16).

Communication is another important aspect of the self-evaluation process of museums (McLaren, 2007, p. 8). Museum policies should be reviewed to ensure the

museum communicates effectively with applicants, participants, and members of the public with disabilities in the same manner as those without disabilities (McLaren, 2007, p. 8).

Under Title III of the ADA, and Section twenty-four of the DDA, museums may not discriminate against people with disabilities (Salmen, 1998, p. 21). People with disabilities may not be denied the full and equal enjoyment of goods, services, facilities, privileges and advantages offered by museums (Salmen, 1998, p. 21). Salmen illustrates how people with disabilities in the U.S. who are blind cannot be excluded from standard museum tours despite the existence of a separate tour of museum sculpture. In other words, the overall requirements for access are not fulfilled in establishing a special program designed to enhance the experience of people with specific disabilities. There may still be obligations of the museum to provide opportunities for blind individuals to benefit from the regular program (Salmen, 1998, p. 24). As Salmen (1998) states "the fact that a separate program is offered may be a factor in determining the extent of the obligations under the regular program, but only if the separate program is appropriate to the needs of the particular individual with the disability" (p. 24). Another common example is when art museums provide sign-language interpretation with a regular scheduled tour. The existence of this tour, however, does not eliminate the museum's obligation to provide effective communication (Salmen, 1998, p.14). For example, an art museum's obligation might include providing an interpreter for a different tour, or providing different aids such as assisted listening devices for people with impaired hearing who do not use sign language (Salmen, 1998, p.14).

U.S. and Australian art museums should also be aware of the specific requirements applicable to public accommodations, such as eligibility criteria, modifications of policies,

practices and procedures, and effective communication (Salmen, 1998, p. 13). Art museums cannot impose eligibility criteria which screen out people with disabilities from the full and equal enjoyment of all aspects of the museum experience (Salmen, 1998, p.15). Criteria that are necessary for the safe operation of the museum are acceptable, but must be based on real risks, not speculation, stereotypes, or generalizations concerning people with disabilities (Salmen, 1998, p.15). For example, an art museum would violate the ADA or the DDA if museum staff required people with developmental disabilities to be accompanied by non-disabled persons based on the staff's belief that people with developmental disabilities cannot tour the museum independently (Salmen, 1998, p.15).

Art museums should also reasonably modify their policies, practices and procedures, to avoid discrimination (Salmen, 1998, p.12). For example, if the museum store holds an event where an artist is signing posters of his or her work, the museum's standard policy may be that signed posters are only available to people attending the event in person. However, according to the ADA, the museum's policy would have to be modified if the entrance is inaccessible so visitors in wheelchairs could attend (Salmen, 1998, p.12).

In ensuring effective communication, a museum should-make available appropriate supplementary aids and services (Salmen, 1998, p.16). The type of aids implemented will vary depending on the length and complexity of the communication involved and the communication skills of the person with a disability (Salmen, 1998, p.16). Museums are not required to provide a particular auxiliary aid or service if it would fundamentally alter the nature of the service provided or if it would pose an undue financial or administrative burden (Salmen, 1998, p. 25). In addition, it is not necessary if it would jeopardize the safe operation of a public accommodation (Salmen, 1998, p. 25). For example, if a person who is

blind wants to know the prices of several items in a museum store, the museum store is not required to provide Braille price tags (Salmen, 1998, p. 25). Instead, the shop assistant can provide the price information verbally to the customer (Salmen, 1998, p. 25). The shop assistant, however, would not have to tour the store with the patron if doing so would mean leaving the cash register unattended (Salmen, 1998, p. 25).

Through self-evaluation procedures, art museums can identify problems or limitations along with suggestions of possible solutions for policies and practices which are inconsistent with ADA and DDA requirements (Salmen, 1998, p. 49). The process of self-evaluation includes all programs, activities and services, and investigates whether policies and practices adversely affect the full participation of people with disabilities (Salmen, 1998, p. 49).

In summary, understanding the definition, history, and legal issues related to disability is important in order to be able to full understand the need for disability access in art museums. Salmen's nine building blocks to accessibility provide an effective starting point from which art museums, whether in the U.S. or Australia, may begin the process of self-evaluation. Once accessibility is achieved, only then can art museums move forward and fine-tune their education programs to be effective and inclusive learning tools for people with disabilities.

Part Two: Art Museums, Education, and Outreach for Audiences with Disabilities

Part two of this research is divided into four sections and examines different theories that relate to the design and implementation of accessible educational programs for people with disabilities. The first section provides a brief history of art museums in the U.S. and Australia, including the development of museums as both public and educational institutions. The second section overviews museum education learning theory. The third section overviews disability theory and the fourth section addresses theories of outreach and social inclusion.

Museum Education and Outreach in U.S. and Australian Art Museums

Public museums are widely acknowledged to have their origins in the eighteenth century (Alexander, 1996; Duncan, 1995; Hein, 1998; Horne, 1984; Mainardi, 1998; and Roberts, 1997). Art museums, as we know them today in the West, evolved and grew out of the Enlightenment, now referred to as the Modern era (Hooper-Greenhill, 1999, p. 68). During the eighteenth century, works of art were presented in the art museum where pieces could be observed, classified, measured and named in a way that presented a reliable and unchanging picture of the world (Hooper-Greenhill, 1999, p. 68). People viewed art museum objects and interpreted the world around them (Hooper-Greenhill, 1999, p. 68). Popular humanist ideals held that art museums would help educate humankind and aid its progress toward perfection (Alexander, 1996, p. 43). However, since the origins of the art museum often held a political agenda associating governments as symbols of power and wealth, the earliest museums were largely patronized by the privileged (Belcher, 1991, p. 171).

The democratizing changes of European life, brought about by both political and industrial revolutions were accompanied by growth of public art museums (Alexander, 1996, p. 32). As a result of these changes, the nineteenth century is often considered the "Golden Age" of Art Museums (Alexander, 1996, p. 32). A new public service ideology aimed at making museums more accessible was enhanced by wider social changes, including an increase in the number of public museums, improvements in schooling, and the increase in availability of printed books (Belcher, 1991, p. 171). With developments in the new science of archeology and advanced studies in art history, museums were able to greatly improve their exhibition methods (Alexander, 1996, p. 32). Art museums in many countries also sought to expand their art collections which had usually begun with a royal collection as the core (Alexander, 1996, p. 32).

The notion of the "pursuit of perfection" and a perfect society, no doubt contributed to the categorization of people with disabilities as being inferior and excluded (Alexander, 1996, p. 32). Delin (2002) provides a brief outline through literary history that reveals horrid stories of people with disabilities chastised and represented as "freaks." Literature, such as *The Child of Hale*, *Tom Thumb*, and *The Elephant Man* further suggests that people with a range of diseases and disabilities were remembered largely for their "abnormalities." (p. 88)

There is a scant collective visual history in art museums that represents people with disabilities (Delin, 2002, p. 84). Delin (2002) argues this lack of representation may be one of the many reasons why people with disabilities historically may have felt dissociated, underrepresented, and unwelcome in art museums (p. 84). It is not surprising, therefore, that Salmen (1998) recommends art museums develop an *accessibility statement* and

accessibility advisory council to demonstrate the museum's acceptance and commitment toward inclusion and to provide input on museum accessibility issues (p. 36).

The origins of art museums implementing educational outreach programs for diverse audiences in the U.S. and Australia can be traced to the late nineteenth century. In the 1870's, U.S. art museums began to flourish with the establishment of the Metropolitan Museum of Art in New York, and the Museum of Fine Arts in Boston (Berry and Mayer, 1989, p. 33). Both of these museums emphasized their collections as being for the general public, rather than for royalty or the upper class, demonstrating a shift in museum audience inclusion. From this time forward, museums gradually began to recognize the importance of museum education and outreach to broaden their audiences beyond the elite few (Berry and Mayer, 1989, p. 33).

While the majority of European museums were founded by ruling classes and governments to glorify national culture, in the mid-1800's philanthropists, families, and communities founded most art museums in the U.S (Berry and Mayer, 1989, p. 33). During that time, the common goal of a museum was to not only celebrate local and regional traditions and practices, but also to enlighten and entertain the community (Berry and Mayer, 1989, p. 33). However, the emphasis to include the local community was largely out of necessity since early Americans viewed the fine arts as "luxuries of a decadent aristocracy" (Berry and Mayer, 1989, p. 34). Even America's heralded statesmen at the time, Benjamin Franklin, held a pessimistic view of art. Franklin once wrote, "To America, one school master is worth a dozen poets, and the invention of a machine or the improvement of an implement is of more importance than a masterpiece of Raphael" (Berry and Mayer, 1989, p. 34).

Given such a long history of deep-seated suspicion of art among Americans, art museum staff insisted that practical educational benefits be provided by museums to the general public. (Berry and Mayer, 1989, p. 34). George Brown Goode (1851-1896), secretary of the Smithsonian Institution, played a significant role in supporting art museums, helping foster deeper educational and all-inclusive audience-focused perspectives (Berry and Mayer, 1989, p. 33). In essence, Goode was a precursor to Salmen, advocating for accessible museums. According to Goode, along with libraries and universities, art museums, were "the principle agencies for the enlightenment of the people" (Berry and Mayer, 1989, p. 33). Goode believed art museum were "for the educated and uneducated alike, and [are] a powerful stimulant to intellectual activity in any class" (Berry and Mayer, 1989, p. 33). Goode's words echo the overriding purpose of Salmen's building blocks of accessibility, that is, museums should make a commitment of inclusion for all people, not just those who are able bodied.

Arguably the earliest best-known advocate for museum inclusiveness and educational outreach in America is John Cotton Dana (1856-1929) (Berry and Mayer, 1989, p. 35). Dana's community-centered philosophy replaced the idea that art museums are store-houses of objects with a new concept; art museums are a work-shop for people in the community. Dana in effect, urged art museums to develop a policy that instructed visitors to loan objects to schools and civic groups, as well as establish storefront museums in business districts of cities and branches in factories (Berry and Mayer, 1989, p. 35). Service, or usefulness to the community, became the recurring theme of Dana's career (Berry and Mayer, 1989, p. 35). Dana understood that the real value of an art museum was not in its collections, buildings, or the market price of its objects – it was in the people and

community it served (Berry and Mayer, 1989, p. 35). In Dana's presentation "Increasing Usefulness of Museums" at the AAM conference in 1916, he encouraged art museums to be 'life-enhancing institutions," proclaiming that "a museum is good only insofar as it is of use" (American Association of Museums, 1916, p 80). Salmen's building blocks of accessibility essentially put into practice Dana's vision for museums; museums should be relevant to all visitors and useful in fostering learning and rich, life-enhancing experiences for the entire community (American Association of Museums, 1916).

Another notable advocate for art museum education in the U.S. was Arthur Parker (1881-1955) (Berry and Mayer, 1989, p. 35). Parker referred to art museums as universities of the people and viewed them as "research and educational institutions eager to make facts available in a form that will attract, interest, and inform the masses" (Berry and Mayer, 1989, p. 35). Parker insisted that the art museum give people what they wanted which, at the time, was to be entertained by exhibits, collections, and the sights and sounds of the art museum environment (Berry and Mayer, 1989, p. 35). In other words, Parker believed it was essential for art museum visitors to have a connection or personal contact with the art museum (Berry and Mayer, 1989, p. 35). Parker's desire for museums to be educational institutions that will "attract, interest and inform the masses" hint to the early stages of an inclusive museum that caters to all visitors.

Goode, Dana, and Parker were early catalysts of American art museum's education programs that strove not only educate and inspire, but also to be inclusive of all museum visitors' needs. As service centers to the community, art museum education programs are beginning to understand the roles they play in outreach and educational programming for museum visitors, including those with disabilities.

Information on the history of art museums and national heritage in Australia is relatively scarce when compared to Europe and the U.S. There are few published accounts of the development of museums in the Australian context. Unlike the U.S. and Europe, early forms of heritage legislation were absent in Australia (Bennett, 1995, p. 135). This type of legislation provided the basis for heritage organizations and aided in the preservation and the administration of historic sites at a national level. Such developments were not seen in Australia until after the Second World War (Bennett, 1995, p. 136). For example, Britain's National Trust was established in1895, whereas a similar organization, the Australian Council of National Trusts, was not established until 1965 (Bennett, 1995, p. 136).

While Australia may not have a well documented legislative time capsule for its arts, what we do know is that public interest in art grew steadily from the development of initial institutions, such as the Sydney Mechanics' School of Art and the Academy of Art, established in 1833 (Sydney Mechanics School of the Arts, n.d.). In 1874, the Australian government recognized the need for an official art museum in Sydney and a government grant contributed to the further development of the Academy of Art. Six years later, at its ninth annual meeting, the Academy of Art became a public art gallery known as The Art Gallery of New South Wales (The Art Gallery of New South Wales, n.d).

Smith (1975) in his account of the development of Australian art museums notes that the development of national galleries in Australia was initially bound up in the prestige of individual colonies, p. 35. Smith (1975) outlines how the differences between museum professionals, such as directors and museum trustees, were a key factor that influenced the development of the art museum in Australia (p. 35).

For a considerable length of time after their establishment, in the latter part of the nineteenth century, art museums throughout the world, including Australia, still viewed art a static way, i.e., merely presenting objects to the public (Smith, 1975, p. 36). As such, museum trends, which emerged in the U.S. and Europe, were generally embraced in Australia at around the same time or slightly later. It was not until the 1930s, that a more dynamic and broader cultural view of art was identified in Australian art museums. In the 1970s, Australia's blossoming cultural maturity led to a shift in emphasis in art museums which became an educational and socially inclusive force in the community (Smith, 1975, p. 36).

Implementing educational outreach programs for diverse audiences in both U.S. and Australian art museums has evolved over time. In the twentieth and twenty-first centuries, art museums in the West are often referred to as the post-museum (Hooper-Greenhill, 2000, p. 8). Bauman (2000) suggests that the present period of post modernity is characterized by endless incomplete processes of modernization (p. 199). In this respect, the museum industry is no exception. One of the main characteristics of the post-museum is the creative re-imagining and re-working of the identity of the museum (Hooper-Greenhill, 2007, p. 1). The concept of the post-museum involves an understanding of the complex relationships between communication, culture, learning, and identity that supports a new approach to museum audiences (Hooper-Greenhill, 2007, p. 1). A second basic characteristic is the promotion of a more egalitarian society. Linked to both characteristics is an acceptance that "culture works to represent, reproduce and constitute self identities and that this entails a sense of cultural and ethical responsibility" (Hooper-Greenhill, 2007, p. 1). For the most part, artworks and objects are no longer displayed in a seemingly objective way with an

authority that presumes one interpretation or meaning (Hooper-Greenhill, 2007, p. 2).

Scholars have questioned the ideals of nineteenth century art museum models, and as a

result have begun to re-examine the art museum's role, its purpose, and how they operate.

Today, some art museums focus more on art museum outreach and strategies of social

inclusion, rather than on intellectual imperialism and high idealism (Vergo, 1989, p. 41).

Because of this, art museum visitors are now more often viewed as individuals with various

needs, learning styles, expectations, and cultural needs (Vergo, 1989, p. 41). Nonetheless,

there remains a need for art museums to take into account the needs of visitors with

disabilities. The examination of key models of museum learning in light of Salmen's nine

steps towards disability access is useful in order to further understand how museums view

audience learning and how museum visitors experience the museum.

Models of Museum Learning

The Transmission Model of Learning

Contemporary U.S. and Australian art museums have, for the most part, shed their

old European models of art museum education where the collection and classification of

objects were placed together from a Western encyclopedic perspective (Hooper-Greenhill,

2000, p. 1). Older models of learning were based on what was referred to as the

"transmission model of learning," where visitors would be provided with information which

had been predetermined by museum staff as something worthy of knowing (Hooper-

Greenhill, 2000, p. 2). In addition, learning tended to be predictable and it assumed a

predetermined level of knowledge of the learner (Hooper-Greenhill, 2000, p. 2). In other

words, when art museums use the transmission model of learning, an absorbent audience can

obtain knowledge through the delivery of "relevant" facts (Hooper-Greenhill, 2000, p. 2).

In 1969, another art museum educational theory emerged in San Francisco which linked educational theory with an empowered visitor (Hooper-Greenhill, 1999, p. 139). The role of the art museum was to make it possible for visitors to understand the world around themselves (Hein, 1990, p. 102). This educational theory and goal centered on a broader philosophical belief that the art museum should be a place where people could experience and manipulate things, as opposed to being told how to think or merely recite facts about objects (Hooper-Greenhill, 1994, p. 139). Essentially, visitors helped themselves and each other in the learning process through a non-hierarchical teaching approach (Hein, 1990, p. 127). This democratic philosophy to knowledge and ideas led to the development of greater interactivity within art museums and helped fuel greater interest in museum issues, such as social inclusion, outreach, and the refining of educational programs for broader audiences like people with disabilities (Hooper-Greenhill, 1994, p. 256).

In the 1970s, art museums in the U.S. began to work systematically with educational theory and looked at current educational research to help them develop more effective exhibitions in order to better educate audiences (Hooper-Greenhill, 1994, p. 139). Like the transmission model of learning, this was largely a didactic model of teaching (Hooper-Greenhill, 1994, p. 69). While learners were encouraged to be curious, learning was more of a journey along a previously defined path (Hooper-Greenhill, 1994, p. 21). Learners were seen as "mythical" participants (Hooper-Greenhill, 1994, p. 68). However, as this research progressed, discussions and evaluations revealed how important it was to understand audiences as "real" (Hooper-Greenhill, 1994, p. 68). As a result, museum education theory became more interactive, flexible, and emphasis shifted from theories of how to teach toward theories of how the visitor actually learns (Hooper-Greenhill, 1994, p. 23).

In the early 1980's, as museum education became a primary focus of art museums, educators were invited to sit at exhibit design tables alongside curators (Roberts, 1996, p. 11). This marked the beginning of an approach to exhibition development that recognized curatorial design and a new educational outlook. The educator's role became defined as one whom:

> establishes the link between the content of the exhibit and the museum audience. Educators understand the ways people learn, the needs that museum audiences have and the relationship between the museum program and the activities of other educational institutions including schools. Educators plan evaluation activities that will examine the exhibit's success in meeting its intended objectives and communicating with visitors. (Roberts, 1996, p. 11).

Much like Salmen's nine building blocks to accessibility, the role of the museum educator is closely related to the issue of *planning for accessibility*. In other words, much of the focus toward art museum disability access is to implement short and long-term accessibility and to ensure any barriers are removed. Like other aspects of museum education, the museum educator and staff are critical components to ensuring a positive, enjoyable, and educational museum-going experience for audiences with disabilities (Salmen, 1998, p. 44).

The Constructivist Model of Learning

Over the past two decades, there has been a growing interest in art museum learning and its relationship with planning and practice. As learning institutions, art museums have had to re-think how best to provide active learning opportunities in what has traditionally been a passive environment (Lankford, 2002, p. 144). Constructivist learning is a theoretical

model that emphasizes the general museum experience (Hein, 1994, p. 76). Lankford (2002) suggests that we are in a museum era of constructivist meaning-making, dynamic human engagement, and "in-your-face" social relevance (p. 144). Theories of learning in recent years have largely been constructivist-centered which suggests that most people benefit by instruction in a variety of means of engagement (Lankford, 2002, p. 152). In addition, engagement is said to be the most satisfying when it challenges actively, builds upon, and extends the knowledge and abilities of the museum visitor (Lankford, 2002, p. 141). Similarly, Salmen's nine building blocks to accessibility, overviews the need for museums to take certain steps toward more effectively including audiences with disabilities.

Unlike museums only a few decades ago, contemporary art museums are becoming more apt to display artworks within broader social contexts, to offer reinterpretations of history along with works of art which include a wider range of perspectives (Lankford, 2002, p. 146). In addition, increased emphasis on the process of inquiry is seen as critical for asking questions, forming and evaluating decisions, and weighing information in order to encourage learners to think (Lankford, 2002, p. 146).

Learning in art museums today is now understood as a "complex, nonlinear, active process in which individuals draw upon previous knowledge and experiences and apply these to their interpretation and understanding of present circumstances" (Lankford, 2002, p. 146). In other words, learning takes place when individuals construct meaning rather than receive it passively (Lankford, 2002, p. 146). It is not only the art museum, but also the visitor who determines the art museum experience. According to Lankford (2002), goals for constructivist art museums should include capturing the imagination, provoking thought, stimulating curiosity and connecting with prior knowledge (p. 146). In doing this, art

museums motivate visitors to form their own interpretations, ask their own questions, and find a personal relevance in exhibits and programs. With this shift in learning models, art museums are transformed from an authoritative institution of inherent knowledge, to places where visitors construct knowledge or meaning themselves.

Some approaches based on constructivist learning theory hold that both knowledge and the way it is obtained depend on the mind of the learner.

> Learners construct knowledge as they learn; they do not simply add new facts to
> what is known, but constantly reorganize and create both understanding and the
> ability to learn as they interact with the world. Further, the knowledge that is
> constructed through this process is individual or social, but has no ontological status
> outside the mind of the knower (Hein, 1994, p. 76).

Constructivist learning theory provides a solid foundation for the development of a more finely tuned, and sophisticated approach to museum visitor studies (Hooper-Greenhill, 2006, p. 373). The meaning of the museum visit by the visitor must be taken into account because audiences are more active, have their own agenda, and are less predictable than previously thought (Hooper-Greenhill, 2006, p. 367). As a result, a more open-ended approach to the museum experience is needed. Researchers, therefore, soon realized that the learning process is far more complex than simply acquiring facts and is not limited to what a curator wants or intends one to learn (Hooper-Greenhill, 2006, p. 367).

Generic Learning Outcomes

In the UK, government reports on the importance of social inclusion for all audiences set into motion a re-evaluation of current theory (Department for Culture, Media,

and Sport, 2001). The report *Inspiring Learning for All*, by Resource/MLA (Museums,

Libraries and Archives Council) established a framework to encourage art museum staff to

increase and improve educational provisions for all museum visitors through developing

their own understanding of what learning and education entailed (Resource, 2002). This was

achieved through the Learning Impact Research Project (LIRP) out of Leicester University

in the U.K (Hooper-Greenhill, 2002, p. 2).

In 2001, the Research Centre for Museums and Galleries (RCMG) was appointed by

Resource/MLA to develop a methodology of measuring impact and outcomes of learning in

museums (Resource, 2002). In 2002, a conceptual framework was developed based on a

system of generic learning outcomes (GLOs) that could be then used to shape research into

learning (Hooper-Greenhill, 2007, p. 52). The five GLOs were identified as: (1) an increase

in knowledge and understanding, (2) an increase in skills, (3) a change in attitudes or values,

(4) enjoyment, inspiration, creativity, and (5) action, behavior, and progression (Hooper-

Greenhill, 2007, p. 52). The use of these five categories allows for the identification of the

outcomes of learning within each of these dimensions (Hooper-Greenhill, 2007, p. 52). If

museum staff can gain a greater understanding of what learning and education in the

museum entails, the quality and variety of educational provisions may be increased. This

may be seen, for example, through the offering of accessible educational outreach programs

for people with disabilities.

The GLOs and Audiences with Disabilities

Research on art museum visitors is rapidly evolving (Hooper-Greenhill, 2006, p.

362). Hooper-Greenhill suggests that questions of the place and purpose of art museums can

only be fully addressed when art museums gain a broader perspective that includes the

views and inclusion of their audiences. As a result, this will require museums to re-prioritize their resources, professional skills, and make changes in art museum policies and plans (Hooper-Greenhill, 2006, p. 362).

Atkinson and Wells (2000, p. 288) also found that art related programs and activities for people with disabilities may allow self-exploration, self-discovery, and self-determination and self-help. These areas also relate to the five areas of GLOs as outlined by Hooper-Greenhill with self-exploration and self-discovery relating to *Activity*, *Behavior* and *Progression,* as well as *Knowledge* and *Understanding*. Self-determination also relates to these two points, as well as *Attitudes* and *Values*. In addition, self-help is similar to the *Skills* portion of the five GLOs.

Through research on how creative learning is facilitated through programs for people with disabilities, Fuller et al (2008) found that there were three main themes that stood out in support for the value and need of education programs tailored toward people with disabilities: (1) the development of self-expression, (2) the development of the individual, and (3) the ways in which creative art can enhance disability service programs (p. 1). According to Fuller (2008), a variety of art programs carried out for people with disabilities illustrate that participation in educational programs aided in the development of self expression and self-esteem along with creative expression and positive behavior (p. 1). In addition, educational art programs which are designed specifically for people with disabilities were seen to facilitate the development of the individual through spending time and building rapport with participants and also through group contexts where individual identities are nurtured and developed (Fuller, 2008, p. 7). Fuller et al also found that participating in creative, artistic educational programs enhanced the lives of people with

disabilities bringing about sense of joy, socialization, self-esteem and purpose. These three main themes relate closely to the five categories of GLOs: *Knowledge* and *Understanding*; acquiring *Skills*; *Activity, Behavior* and *Progression*; *Enjoyment, Inspiration* and *Creativity*; and *Attitudes* and *Values* (Hooper-Greenhill, 2007, p. 52).

Constructivist learning theory in museums emphasizes dynamic human engagement and social relevance (Lankford, 2002, p. 141). As a result, museums have begun to rethink their purpose and community relationship (Lankford, 2002, p. 141). The GLOs were formulated for museum staff to help develop their own understanding of what learning and education entails in order to improve educational provisions for all museum visitors. In order for art museums to be successful in educational outreach, they should ask the question of whether what they are doing is accessible to the audiences to which they are targeting. If museums' target audiences are people with disabilities, a deeper understanding of disability theory and the museum should be sought.

Disability Theory and the Art Museum

The AAM claims that the annual museum visitor attendance in the U.S. is close to one billion visits each year, which is greater than the annual attendance at professional sporting events (Hein, 2005, p. 357). Hein maintains that this fact alone underscores the powerful social role museums play in society. With such social influence, it is not surprising that Salmen (1998) believes that museums are the ideal mechanism to propel social inclusion reform for people with disabilities (p. 2). Moreover, Skramstad (1995) argues that "in the world of the future, every institution, including an art museum, must be judged on its distinctive ability to provide value to society in a way that builds on unique institutional

strengths and serves unique community needs" (p. 33). The task of outreach for art museums

becomes not just about trying to engage the community with the art museum's agenda, but

rather, to shift in the art museum's focus and actions from internal to external (Koster, 2006,

p. 2). This shift from internal to external relates to the relationship an art museum has with

its audience and provides a more external, constructivist, person-centered approach to

educational programming than an internal, transmission approach (Koster, 2006, p. 2).

Bullock, Mahon, & Killingsworth (2010) also maintain that a person-centered

approach is crucial in enhancing quality of life (QOL) for people with disabilities (p. 56). In

2004, the National Organization on Disability completed a longitudinal study, the most

comprehensive survey of its kind, which measured ten key QOL indicators (National

Organization on Disability, 2004). The findings indicate that just over one in three (thirty-

five percent) Americans with disabilities are satisfied with their life, compared to nearly

eight out of ten (seventy-eight percent) non-disabled Americans (National Organization on

Disability, 2004). These results suggest that little has been done to close this gap since the

first survey was conducted in 1984.[5] For these reasons, QOL is seen as a way to bridge the

vast differences between people with and without disabilities (Bullock, Mahon, and

Killingsworth, 2010). The concept of QOL, therefore, is central to a person-centered and

inclusive approach toward the treatment of people with disabilities and the services they are

provided.

According to Schalock (1996), the core principles of QOL for people with

disabilities are composed of the same factors and relationships that are important to all

individuals (p.123). For example, QOL is experienced when a person's basic needs are met

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[5] Results of the 2004 survey which also compare the results of the 1986 survey can be viewed here.
http://nod.org/assets/downloads/NOD-Harris-Summary-2004.pdf

and when they have the same opportunities to pursue and achieve the same goals of home, community, family, education, and work (Schalock, 1996, p. 123). QOL also enables individuals to participate in decision-making that affects their own lives and is also enhanced by their full integration and inclusion within their local community (Schalock, 1996, p. 124).

Closely linked to the concept of QOL is the concept of Normalization. The relationship between QOL and Normalization lies in the fact that that, in both cases, the person with a disability has the same patterns of life and experiences of everyday living as someone without disabilities. First introduced by Nirje in the late 1960s, the principle of Normalization has become an internationally recognized paradigm and cornerstone of service delivery and program offerings for people with disabilities (Bullock, Mahon, and Killingsworth, 2010, p. 58). According to Nirje (1992):

> the Normalization principle means that you act right when making available to persons with intellectual and other impairments or disabilities patterns of life and conditions of everyday living which are as close as possible to or indeed the same as the regular circumstances and ways of life of their communities (p. 16).

When applying Normalization to the planning and implementation of museum education programs and services for people with disabilities, the rights of the individual with a disability to freely choose such things as where to participate, with whom, when, how or whether to participate at all become central concerns (Bullock, Mahon, and Killingsworth, 2010, p. 60). This principle is not unlike constructivist learning theory, which advocates that individuals construct meaning rather than receive it passively and they are far more actively involved in the learning process. According to Normalization theory, people with disabilities

should be actively involved in the everyday patterns of life just as able-bodied persons and become central to any decision-making processes.

Wolfensberger (1983) maintains that "the most explicit and highest goal of Normalization must be the creation, support, and defense of *valued social roles* (italics added) for people who are at risk of social devaluation" (p. 234). Wolfensberger's Social Role Valorization theory advocates for each person's right and responsibility to assume a valued social role in society and society's obligation to allow individuals to pursue that role without constraint (Bullock, Mahon, and Killingsworth, 2010, p. 62). According to Wolfensberger (1983), the main goal of Social Role Valorization is achieved by way of two sub-goals: (1) enhancement of their social image, and (2) enhancement of their competencies (p. 234).

Social image is said to be influenced by factors such as physical setting, relationships and groups, activities and programs, language, symbols and images (Wolfensberger, 1983, p. 234). In a similar way, personal competencies can be enhanced in relation to physical setting, relationships and groups and activities, programs, and other uses of time (Wolfensberger, 1983, p. 234). Wolfensberger suggests that the enhancement of social image and personal competency is reciprocally reinforcing. For example, individuals who have a high competency generally have a positive image, whereas those with low competency often are associated with negative social images (Wolfensberger, 1983, p. 234). However, Rancourt (1990) raises the issue of Social Role Valorization theory as being a dilemma and challenge to the field of cultural recreation, claiming that neither the identification with disability nor leisure / recreation are socially valued roles (p. 50). Rancourt suggests that in order to foster more positive social images of people with

disabilities experiencing leisure time activities, that we create positive social roles for people with disabilities (p. 50). As such, we should strive to have society value people with disabilities and in so doing we will enable people with disabilities to take on various valued social roles, including those associated with leisure activities, such as participating in museum education programs (Rancourt, 1990, p. 51).

The theories of QOL, Normalization, and Social Role Valorization are interrelated and help form a base by which people with disabilities should be understood and treated in society. In addition, they also relate disability access in art museum programs and provide a greater understanding of the importance of the AAM's *Everyone's Welcome* guidelines upon which this research is based. For example, understanding these disability theories can help art museum staff better comprehend the importance of complying with the nine steps to disability access and enable museums to achieve accessible art educational programs for people with disabilities.

Closely linked to the concepts of QOL and Normalization is the concept of "inclusion." According to Pearpoint and Forest (2008),

> inclusion means inclusion! It means affiliation, combination, comprisal, enclosure, involvement, surrounding. It means joining with new and exciting educational concepts. Inclusion means inviting those who have been left out (in any way) to come in, and asking them to help design new systems that encourage every person to participate to the fullness of their capacity – as partners or members (para. 2).

Essential to social inclusion is the belief that being a part of the community positively influences the QOL of people with disabilities (Wehmeyer and Schwartz, 1998, p. 4). Inclusion is a process that enables individuals to be a part of their environment by making

choices, being supported on a daily basis, having friends and being valued (Dattilo, 1994, p. 186). Inclusion also gives people equal opportunity to grow and develop to their fullest potential.

One fundamental principle of inclusion is valuing the diversity of a community. When inclusion is fully embraced, there is no longer the idea that someone must become "normal" in order to contribute to the world. Typical ways of being a valued member of society are no longer seen as the *only* way and it is recognized that the task of providing all people with a sense of belonging may be achieved (Bullock, Mahon, and Killingsworth, 2010, p. 78). In the context of art museum education programs, whether for children or adults with disabilities, inclusion may be seen to be about programs that embrace difference, where all people have their needs met, people learn to live with one another, and basic values are important to each person, not just to some.

Outreach, Social Inclusion and the Art Museum

In order for museum staff to be able to offer accessible educational outreach programs to audiences with disabilities, it is important to understand the relationship between museum learning theory, disability theory, and theory on outreach and inclusion. Kawashima (2006) suggests that areas of cultural policy, such as audience development and social inclusion within the art museum sector are closely related to accessibility (p. 55). Kawashima's research, although not specifically tied to audience development for people with disabilities, nonetheless relates to disability access and social inclusion within the art museum. Advocates of audience development and social inclusion have suggested that cultural institutions and their programs be accessible, educational, and inclusive to as many audiences as possible (Kawashima, 2006, p. 55). With these overriding goals regarding

social inclusion and audience development, museum staff have begun to create audience

development projects in order to increase audience numbers and to diversify their audience

base. In addition, they are being asked largely by government bodies to show their

contribution to tackling the issue of social exclusion (Kawashima, 2006).

Kawashima (2006) suggests that there are four different types of audience

development: (1) Extended Marketing, (2) Taste Cultivation, (3) Audience Education, and

(4) Outreach or sometimes referred to as Cultural Inclusion (p. 56). The fourth style of

audience development, Outreach, usually refers to the many projects and programs which

take art from its usual venue to areas where audiences have limited or no access to the arts

(Kawashima, 2006, p. 57). Outreach contributes to social policy in a broad sense through the

use of artistic resources. Examples may include taking artwork into hospitals to sick

children, or taking exhibitions into prisons, or alternately providing museum learning

programs and opportunities specifically for children and adults with disabilities

(Kawashima, 2006, p. 57). Outreach is similar to Salmen's nine building blocks to

accessibility because it focuses on a specific target audience whom is unlikely to participate

unless the group's specific needs are met.

Sandell (1998) further frames the issue of outreach by identifying three social

inclusion strategies for museums: (1) The Inclusive Museum, (2) the Museum as Agent of

Social Regeneration, and (3) the Museum as Vehicle for Broad Social Change (pp. 410-

414). Sandell explains the inclusive museum to be one which removes any barriers that

hinder art museum access for all (p. 410). These types of barriers may be physical,

economic, intellectual, psychological, or geographical. Sandell's social inclusion strategies

relate to Kawashima's fourth type of audience development, Outreach, as the strategies

target people who are not likely to visit the museum unless a specific project, program, or event takes place which is accessible to them. In addition, Sandell's social inclusion strategies relate to QOL as they address meeting a person's basic needs and provides opportunities to them that are the same as everyone else (Bullock, Mahon, and Killingsworth, 2010, p. 56). Normalization and Social Role Valorization may also be linked because they advocate for each person's right and responsibility to assume a valued social role in society and address society's obligation to allow individuals to pursue that role without constraint like everyone else.

Using Sandell's (1998) social inclusion strategy to view the museum, as *The Museum as Agent of Social Regeneration,* requires the art museum to directly enter social, economic, and political domains (p. 407). This strategy tends to be in the form of projects or programs implemented by art museum education and outreach staff, often working together with organizations within the community (Sandell, 1998, p. 407). This may appear to be similar to outreach in audience development, however, there are distinctions in the ultimate goals of these projects. The projects of outreach in audience development are seen as satisfactory if they emotionally move participants with the artwork that museums bring to them (Kawashima, 2006, p. 60). In the *Museum as Agent of Social Regeneration*, however, the goal is that participants become empowered to positively change their lives or that the problems associated with these communities become less severe (Kawashima, 2006, p. 59). Since the goal of the *Museum as Agent of Social Regeneration* is to improve individuals' and communities' quality of life, the concepts of QOL and normalization are closely related. For example, if people with disabilities' basic needs are met, they have the same opportunities to pursue and achieve the same goals of home, community, family, education,

and work as everyone else (Schalock, 1996, p. 125). QOL also empowers individuals to participate in decision-making that affects their lives and is enhanced by the acceptance of full integration and inclusion of persons in their local communities (Schalock, 1996, p. 125).

As Kawashima (2006) notes, distinctions between social inclusion and outreach can be rather elusive and the two are inter-penetrative (p. 60). The term social exclusion originated in France during the 1970s and while its meaning has shifted over time and varies from the contexts in which it is used, it remains multidimensional in nature (Kawashima, 2006, p. 60). Initially, social inclusion in art museums was perceived as a synonym for access or audience development (Sandell, 1998, p. 402). Sandell, who has surveyed current literature of the area of social inclusion and the museum, however, suggests that if art museums are to become effective agents for social inclusion, then a paradigmatic shift in the purpose and role of art museums, along with serious changes in working policy, practices and outcomes, must take place (Sandell, 2003, p. 45). Sandell maintains that art museums have the potential to empower individuals and communities and help combat the many disadvantages people with disabilities face which place them at risk of being socially excluded (p. 45).

According Sandell (2002), art museums have the ability to contribute toward social inclusion on an individual, community, or even societal level (p. 4). On an individual level, for example, art museums can help promote enhanced self-esteem, confidence, and creativity. On a community level, art museums may be a vehicle for social regeneration which empowers communities to take greater control in the development of the type of neighborhoods in which people want to live. For example, outcomes may include enhanced community self-determination, increased participation in decision-making processes and

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democratic structures (p. 7). From a societal level, art museums have the potential to promote tolerance and respect and to challenge stereotypes such as misconceptions about people with disabilities (Sandell, 2002, p. 8).

Understanding the connections between museum theories on learning, outreach and social inclusion and how they relate to disability theory and disability access guidelines like *Everyone's Welcome,* is important for museum staff. Without this knowledge, the educational outreach programs that museums design and implement may be hindered.

CHAPTER 3 – METHODOLOGY AND DESIGN

This study examines the disability outreach programs of two contemporary art museums: the Boulder Museum of Contemporary Art (BMoCA) in Boulder, Colorado, U.S. and the Museum of Contemporary Art (MCA) in Sydney, Australia. This research is based on the nine-step strategies addressed in *Everyone's Welcome.* The purpose of this research is to investigate how the BMoCA and the MCA incorporate recommended accessibility guidelines into their disability outreach programs in order to become more accessible to people with disabilities. The AAM's guidelines provide a tool for assessment that allows art museums to measure their access progress.

The BMoCA and the MCA purposely were selected to provide a comparative perspective of U.S. and Australian art museums. A qualitative case study design is used in this study because: (1) the research is exploratory (2) qualitative study allows for detailed analysis of disability access policies for both museums, and (3) case studies focus on the unique features of each museum's education program for visitors with disabilities. One of the primary benefits of the case study approach is that it allows for the engagement of an exploratory examination and observation of the multi-faceted nature of disability access policies and educational outreach practices for visitors with disabilities in contemporary art museums (Yin, 2003, p. 34).

This study helps to fill gaps in research on art museum disability compliance for visitors with disabilities (American Association of Museums, 1992). Since the passage of the ADA in 1990, research on disability access has been conducted in a range of other areas, such as recreation, sport, and other public venues (Bullock, Mahon, and Killingsworth,

2010, p. 292). However, no study currently exists which examines whether art museum outreach programs meet recommended accessibility guidelines or whether art museum outreach programs created specifically for people with disabilities meet recommended accessibility guidelines (Sandell, Dodd, and Garland-Thomson, 2010, p. 3). This study not only investigates how two contemporary art museums with disability outreach programs incorporate Salmen's nine-step strategy or "building blocks" of accessibility, it also demonstrates how art museums can measure their access progress against recognized standards. This study is of particular value to art museum educators because it addresses a significant gap in museum studies literature and applies guidelines to determine how two museum outreach programs are endeavoring to achieve accessibility for visitors with disabilities. This research, therefore, provides a needed investigation of an increasingly current topic in museum studies.

Research Design

Case study research is distinct from other social science research methods such as surveys, experiments, histories, and archival analysis (Yin, 2003). A widely accepted definition of case study research is that it "involves an investigator who makes a detailed examination of a single subject or group or phenomenon" (Borg and Gall, 1989, p. 52). Stake (2003) suggests that a case study is defined by the object of the study's uniqueness and specificity (p. 52), while Yin (2003) noted that a case study is "an empirical inquiry that investigates a contemporary phenomenon with its real life context, especially when the boundaries between phenomenon and context are not clearly evident" (Yin, 2003, p. 34).

This research examines contemporary art museum outreach programs specifically for people with disabilities against the guidelines set out in *Everyone's Welcome.* The research questions for the study are:

(1) How do two contemporary art museums incorporate recommended accessibility guidelines into their disability outreach programs in order to become more accessible to people with disabilities?

 (2) What strategies can art museums implement to become accessible for all individuals, including people with disabilities?

Methodology

The two museums selected for this study, the Boulder Museum of Contemporary Art and Museum of Contemporary Art, were purposely selected. The primary reasons these museums were chosen were: (1) availability of a current disability outreach program,[6] (2) commitment toward social inclusion,[7] (3) access to museum staff and disability policy information, and (4) proximity and familiarly to the researcher (Atkinson, 2002).

In addition, six internationally recognized art museums were contacted in order to compare their outreach programs, however, at the time of this study none had established education outreach programs specifically designed for people with disabilities.[8] While some

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[6] The term *outreach* in this study may be understood to mean the processes by which museums seek to implement strategies to reach out to audiences of society who would otherwise not enter or engage with the museum, in this case, people with disabilities.

[7] BMoCA and the MCA offer educational outreach to this segment of society, but also foster social inclusion and make positive steps toward compliance with disability access laws concerning museum education programs and services.

[8] The art museums contacted on the west coast and central locations of the U.S. were the San Francisco Museum of Modern Art; The De Young Museum of Fine Art; The Denver Art Museum; The Museum of Contemporary Art, Chicago; Museum of Contemporary Art, San Diego; and The Los Angeles County Museum of Art.

of the museums, in the past had offered small tours for the deaf or the visually impaired, they did not currently offer a specific educational program for visitors with disabilities.

This research focuses solely on essential disability access policy and museum standards for disability access as proposed in the document *Everyone's Welcome* and seeks to investigate how the BMoCA and the MCA integrate Salmen's nine-step strategy of accessibility and thereby provide accessible educational outreach programs. This study does not focus on Universal Design or the physical barriers concerning accessibility, but rather on museum accessibility regarding its communication, policy, and non-physical procedural barriers in relation to their outreach programs for people with disabilities. For this reason it was determined that direct observation of the two programs was not necessary and that the data gathered would provide sufficient data to determine how both museums incorporated recommended accessibility guidelines into their disability outreach programs in order to become more accessible to people with disabilities.

Data for this study were collected from personal interviews and telephone conversations with relevant museum staff including the education directors, education staff, librarians, and administrative assistants, for each art museum. Further data was collected and reviewed through program materials, brochures, presentations, press releases, website material, and investigation of the education programs in relation to applicable education and disability policy guidelines and statements.

Open-ended, semi-structured interview questions were designed to gather data from the participants on specific topics, such as disability compliance and accessibility, social inclusion, outreach and museum learning. Respondents were then probed for additional information based on their initial responses. All interviews were recorded and transcribed.

The outreach programs *BMoCA Access* and *Good Vibrations* purposely were chosen

because they catered to the needs of visitors with disabilities. *Good Vibrations* at the MCA,

Sydney, is not a permanent education program, but has been offered at different times since

its inception in October and November of 2006 and again toured Wollongong in May 2008

and most recently to Victoria in 2009 (Good Vibrations, n.d.). *Good Vibrations* is dependent

upon funding and donations in order to function. In other words, the outreach program is

offered only when funds are made available and was not operating during data collection.

BMoCA Access at the BMoCA is a current and year-around educational outreach

program. *BMoCA Access* offers a new program as exhibitions are changed over and obtain

most of their program participants though the organization *Imagine!* who caters to and

provides people with disabilities the opportunities for enriching leisure time activities.

The two programs chosen for this study are unique in that they are designed

specifically for all people with disabilities, not a specific type of disability, such as visual or

hearing impairments. In addition, the programs offered are both highly respected

contemporary art museums in their communities.

This research follows Yin's (1994) *Case study research: Design and methods*. Notes

were independently recorded during the interviews. Responses were also recorded within

Salmen's nine-step areas. The researcher worked inductively and iteratively to give

meaning and structure to the data. The researcher independently read through the interview

notes, supplemental data, and observations separately. The researcher then compared and

contrasted records for consistency, meaning, and interpretation. Data were then categorized

within the *Everyone's Welcome* nine focus areas (*Accessibility Statement, Accessibility*

Coordinator, Accessibility Advisory Council, Staff Training, Review of Existing Facilities

and Programs, Planning for Accessibility, Promoting and Advertising Accessibility in the Museum, Grievance Process, and *Ongoing Review of Access Efforts*). Data analysis involved two strategies, direct interpretation of the individual instance and categorical aggregation of multiple instances. Direct interpretation allowed the emergence of meaning from a single instance of data, such as a participant's specific comment regarding disability outreach programs and categorical aggregation allowed the emergence of meaning from the repetition of themes.

The ADA and the DDA requires art museums to be accessible to people with disabilities. To determine accessibility, the researcher conducted two case study analyses of the BMoCA and the MCA's educational outreach programs for people with disabilities to investigate how the incorporate recommended accessibility guidelines into their disability outreach programs.

Case Study 1 – Boulder Museum of Contemporary Art (BMoCA).

The Museum

In order to provide a clearer view of the context in which the BMoCA operates, this section discusses the local area of Boulder, the history of the museum, background of the director of the museum, and a brief discussion of the museum's budget. Understanding this background information allows for a more informed comparison of how both the BMoCA and the MCA operate and how these differences may affect the designing, planning and implementation of museum disability access.

The city of Boulder is located in the foothills of the Rocky Mountains, thirty-five miles northwest of Denver and sits approximately five thousand four hundred feet above sea

level (City of Boulder Colorado, n.d.). Boulder is known for its natural beauty, outdoor recreation, natural product retailers and technological and academic resources as well as the Boulder Museum of Contemporary Art, or the BMoCA, which boasts innovative educational outreach programs (City of Boulder Colorado, n.d.).

Originally called the Boulder Arts Center, the BMoCA was founded in 1972 by a group of local artists as a venue to showcase and promote Boulder's visual arts (Boulder Museum of Contemporary Art, n.d.). The museum moved to its current space, a warehouse-style historic landmark building, in 1976, was renamed in 1995 and through a series of renovations, has expanded the facilities (Boulder Museum of Contemporary Art, n.d.). While the BMoCA does not have a permanent collection it presents its diverse community with a regularly changing schedule of exhibitions of contemporary art by local, national and international artists. The BMoCA's audience base has grown steadily through community collaborations, exhibition excellence, multi-age art education programs and creative fundraising events (Contemporary Art Colorado, n.d.). The mission statement for the BMoCA is to:

> provide a dynamic venue dedicated to the presentation of significant art of our time. Through an innovative program of regional, national and international exhibitions and performance, the museum inspires and educates its communities and visitors from around the world to explore the forefront and evolution of contemporary art (Giving First, n.d., para 1).

The current executive director of the BMoCA is David Dadone who began his tenure at BMoCA in 2010.[9] Originally from Argentina, Dadone served as the deputy director of Museo de las Americas in Denver, Colorado (Giving First, n.d.). As executive director, Dadone is responsible for the day-to-day operations of the BMoCA, including its financial operations, government and community relations, fund-raising development, and human resources management (Giving First, n.d).

At the time of this study, the BMoCA employed five full-time staff, six part-time staff and one hundred and eighty-five volunteers. Of the staff members, two of these employees comprise the education department, a director of adult programs and a director of youth programs Giving First). The overall operating budget for BMoCA is $345,482 with a programs budget for $227,597. There is no specific funding for the *BMoCA Access* program, however, according to the director of youth programs, at the time of this study, the BMoCA was searching for funding and applying for a grant from MetLife.

Education at the BMoCA

According to director of youth programs, Shannon Crothers, the BMoCA targets diverse audiences, and seeks to offer fun, educational opportunities for people of all ages through an array of creative programs (S. Crothers, Personal Communication, November 4th, 2009). These may vary from *Young Artists at Work* to *Art Stop* to monthly digital arts salons and artist lectures. In addition, the BMoCA conducts tours for schools, corporations and any group interested in learning about contemporary art (Boulder Museum of Contemporary Art, n.d.).

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[9] The current executive director of BMoCA began his tenure at BMoCA during the course of this study. Prior to Dadone there were two co-executive directors of BMoCA.

The goals of the BMoCA include growth of its educational programs, deeper outreach to underserved communities, such as those linked to *Imagine!*, *The Family Learning Center* and the *I Have a Dream Foundation,*[10] and facility improvements that include an elevator to the second floor, entrance redesign and gallery rental venue expansion (Giving First, n.d.). As a result of these goals, the museum underwent a five month renovation where an elevator was installed to meet the accessibly standards of the ADA. Floorboards were also reinforced and the fire system was updated (Giving First, n.d.). In addition, further discussion took place surrounding the planning, development, and implementation of *BMoCA Access*, an educational outreach program specifically for youth and adults with disabilities. Given that some of the larger, more internationally recognized art museums within the U.S. are not yet offering specific programs for people with disabilities, the BMoCA's interest to offer such an outreach program is progressive and cutting edge.

BMoCA Access

BMoCA Access is a relatively new educational outreach program for young people and adults with disabilities. Started in June of 2009, *BMoCA Access* seeks to implement strategies to reach out to those audiences who may not otherwise enter or engage with the museum, specifically young people and adults with disabilities. The BMoCA staff work closely with staff and volunteers from *Imagine!*. Established in 1963, *Imagine!* is a private not-for-profit organization and the first community-centered board (CCB) in Colorado (Imagine!, n.d.). A CCB is a local area's single point of entry into local, state and federally

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[10] Since 1999, BMoCA has partnered with the *Family Learning Center* and the *I Have a Dream Foundation* to provide arts educational opportunities for underserved Boulder youth and their families. The program is designed to support youth education creative expression.

funded programs for people with developmental disabilities in a community. *Imagine!* is

currently one of twenty CCBs in Colorado and works alongside the BMoCA in providing art

museum visitors and participants for the *BMoCA Access*. *BMoCA Access* consists of one the

BMoCA instructors (the coordinator of Youth Programs), two of the BMoCA's interns, the

Imagine! day program (*Out and About*) coordinator, and two chaperones. The participants,

either youth or adults, have disabilities ranging from Down's syndrome to Multiple

Sclerosis. The number of participants for *BMoCA Access* depends largely on the numbers of

participants that *Imagine!* bring to *BMoCA Access* through their *Out and About* program.

Young people and adults with disabilities and their caregivers or chaperones from

Imagine!, are invited to the BMoCA to view art exhibits and participate in an art workshop

arising out of the current exhibition.[11] There is no formal selection process for participants

of *BMoCA Access,* who attend by their own choice and desire to participate in an

educational art program at the BMoCA. *BMoCA Access* primarily advertizes and markets

the program to the general public via its website which discusses the access program. The

web page is a simple white background with black text and minimal images. The website

states that the BMoCA engages people with disabilities and visitors can view works on their

own or request a program (*BMoCA Access*) which includes the presence of specially trained

docents who lead tours and educators who facilitate art-making workshops. Visitors to the

site can obtain further information from the director of youth programs. The BMoCA also

advertises the program to the disability community primarily through *Imagine!* via word of

mouth, phone calls, and their already established connections.

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[11] At the time of this research exhibitions are changed every three months.

In addition, the BMoCA markets and advertises through a social network presence through Facebook® and Twitter® internet sites. These sites are updated regularly promoting the museum's upcoming events and exhibitions, however, there is no discussion to date, on the *BMoCA Access* program.

Visitors with disabilities can seek a tailored experience at the BMoCA which caters specifically for groups with disabilities, or alternately, they may seek to tour the galleries individually or with the general public. The BMoCA does not limit the museum experience for people with disabilities to be in groups solely with these audiences. Audiences are free to choose which group they prefer to participate in.

The purpose of *BMoCA Access* is to provide adults and young people with disabilities the opportunity to attend the Boulder Museum of Contemporary Art and experience the art exhibitions that the museum offers to visitors without disabilities. In addition, *BMoCA Access* provides participants the opportunity to participate in more hands on group activities, related to the current exhibition. Overall, the goals of *BMoCA Access* are to: (1) create and offer quality contemporary art education with a particular focus on the logistical concerns for people with disabilities, and (2) establish a reputation as an accessible museum for people with disabilities. (S. Crothers, Personal Communication, November 4th, 2009).

Visitors of the *BMoCA Access* program tour the current exhibition in the setting of the museum. The BMoCA is housed in a medium sized, two story red-brick building. The interior space of the building has an open and contemporary style. The high ceilings and spare unornamented surfaces generate a spacious warehouse-like feeling within the gallery spaces. Artwork is accessible to viewers through an open layout and exhibition design which

allows for people with disabilities to move easily around the work. Ramps provide an easy transition where the floor height changes.

When participants of *BMoCA Access* arrive, museum staff aim to be flexible allowing for ample time for visitors to move through the exhibition at their own pace and to ask questions. According to the director of youth programs, museum staff are mindful not to overload visitors with information in order to foster a higher comfort level for visitors and provide a greater ability to focus on the exhibition without distractions. *Imagine!* staff and chaperones (who are often family members) assert that this is a more effective means by which to foster a positive learning museum experience for visitors with disabilities.

After visitors have toured the exhibition for approximately thirty to forty-five minutes and have discussed questions about the exhibition, they then engage in a one and a half hour long art-making workshop related in some way to the exhibition they have just seen. In one visit, for example, participants were intrigued by the work of local artist Phil Bender. Bender collects everyday objects and arranges them in massive geometric grids, suggesting both nostalgia and scientific classification. Bender's objects convey a sense of archeology, recovering evidence of life in the recent past (The Lab, n.d.).

According to the director of youth programs and visitors chaperones, many of the BMoCA participants enjoyed the structure and organization of Bender's grids. *Imagine!* staff indicated that routine is very important in these visitor's daily lives, so the way the artist displayed his work appealed to this sensibility. Many visitors also enjoyed the subject matter. Bender's use of postcards depicting landscapes, castles, and other vacation-like scenes were easy for the group to relate to and create associations with their own travels.

BMoCA Access projects implemented in the workshop generally are simple, but designed to positively impact museum participants by providing them with the opportunity to create works of art inspired by the exhibition, in an accessible environment which fosters inclusion and acceptance. For example, in one workshop, photographs of the participants were taken when they were viewing the galleries and then printed off so participants could create collages with them. According to *Imagine!* staff and caregivers, it was observed that participants enjoyed being photographed and incorporating these images into their collages. Participants were asked during the activity to use images from magazines to illustrate what they find "pleasure" in to create a collage. According to the director of youth programs and staff members from *Imagine!* this provided participants with a greater comfort level than drawing or painting which is usually more difficult because of physical disabilities or limitations. In addition, being able to see oneself in their own artwork had a powerful and positive impact on *BMoCA Access* participants.

After each *BMoCA Access* program, a post-evaluation discussion is carried out between the BMoCA director of youth programs and the *Imagine!* day program coordinator. Both the positive and negative aspects of the program are discussed to determine whether there are any needed changes to the program. These decisions are made in conjunction with prior conversations with *BMoCA Access* participants. For example, for the *BMoCA Access* program on June, 2009 the director of youth programs and *Imagine!* Staff concluded that extra time should be provided at the end of the program in order for participants to be able to share their work with one another. This decision was the result of suggestions from participants of the *BMoCA Access* program. Since many visitors with disabilities arrive in different modes of transport and then leave for various destinations afterwards, it was seen

as beneficial to have that time for sharing and discussion (Crothers, 2009, para. 8). Another

change made from critical reflection was that the art museum will now reserve parking

spaces through the city council directly outside the museum to provide ease of parking and

utilization of the wheelchair ramp (Crothers, 2009, para. 10). Critical reflection has also

revealed that although the *Imagine!* visitors with disabilities usually like to be integrated into

the public sphere for their first visit to the BMoCA and enjoyed having the space to

themselves. After they had been there once, visitors indicated that they would be more

comfortable to attend when the museum is open to the public.

      BMoCA Access is an innovative educational outreach program which has catered for

people with disabilities between the ages of eight and sixty years old. While it is still in its

infancy, *BMoCA Access* provides a unique example of how museums are beginning to

implement the guidelines found in documents like *Everyone's Welcome* and what some art

museums are doing to outreach to audiences with disabilities.

Case Study 2 –Museum of Contemporary Art, Sydney (MCA)

The Museum

      The MCA is located at Circular Quay in the historical "Rocks" area on Sydney

Harbor. The city of Sydney, Australia, is home to approximately four million people, well

over half of the state of New South Wales' total population of over six million (Cultural

Sydney, n.d.). Because of the MCA's prime location at Circular Quay on Sydney Harbor, it

attracts a wide variety of visitors, including many tourists. Those walking by the Harbor

Bridge, Opera House, restaurants, shops, or other nearby attractions, are often drawn into the

MCA to view its collection free of charge. Local Sydney residents are also drawn to the

MCA, both on weekends and mid-week. Situated on the cusp of Sydney's Central Business District (CBD), the MCA is close at hand for a brief lunch-hour visit and meal at the MCA's restaurant.

The MCA was established to fulfill the wishes of Australian expatriate artist John Power (The History, n.d.). Power's intended for his estate be left to the University of Sydney to educate Australians in the contemporary visual arts (The History, n.d.). Initially the museum's collection was housed at The University of Sydney until relocating to its present site in 1989 (The History, n.d). After moving to its current site, the term *museum* was adopted as it was considered more interactive and encouraged research and education (The History, n.d). The MCA is one of Australia's few art museums dedicated to collecting, interpreting and exhibiting contemporary Australian and international art (The History, n.d).

The largest of the MCA's collections, the J.W. Power collection, was established through the Power Bequest to The University of Sydney (The MCA Collections, n.d.). John Power's will required that his bequest be "put towards the purchase of contemporary art...so as to bring the people of Australia in more direct touch with the latest art developments in other countries" (The MCA Collections, n.d., para 1). The Power Collection is a varied collection of works by Australian and international artists from the late 1960s up until the establishment of the MCA in 1989.[12] From 1989 to the present, the MCA's Collection has been developed further through purchases and gifts to the MCA including the Loti and Victor Smorgon Collection of Contemporary Australian Art.[13] This collection contains one hundred and fifty-four works and is considered an extraordinary study of work of the 1980s

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[12] Artists in the Power Collection include: Ulay and Marina Abramovic, Valerio Adami, Joseph Beuys, Christo and Jeanne-Claude, Juan Davila, Neil Dawson, Gilbert and George, Richard Hamilton, Keith Haring, Edward Kienholz, Barbara Kruger, Roy Lichtenstein, Robert Longo, Sidney Nolan, Ed Ruscha, Mike Parr, John Power, Cindy Sherman, Imants Tillers, Peter Tyndall, Andy Warhol, Jenny Watson, and John Young.

[13] This collection was gifted to the MCA in 1995 by private collectors Loti and Victor Smorgon.

and 1990s by Australian artists spanning several generations (The MCA Collections, n.d.).

Other collections of the MCA include various Aboriginal art works including the Arnott's

Biscuits Collection of Aboriginal Bark Paintings which contains two hundred and eighty-

five bark paintings, donated to the MCA in 1993 by Arnott's Biscuits Limited (The MCA

Collections, n.d.). The collection is one of the most significant and in-depth Aboriginal bark

painting collections in the world (The MCA Collections, n.d.).

> According to its mission statement the MCA:
>
> aims to be a distinctive and vibrant centre for the promotion of contemporary art and
>
> visual culture, which seeks to engage audiences with recent ideas in art in all media.
>
> This is achieved through imaginative programs of exhibitions, screenings, public
>
> forums, debates, education projects, events and the inventive use of new media
>
> technology (Museum of Contemporary Art Annual Report, 2009, p. 2)

In addition, the MCA aims through its exhibitions and related programs to be both an

internationally respected and locally valued national organization dedicated to exhibiting,

interpreting and collecting contemporary art (Museum of Contemporary Art Annual Report,

2009).

The current director of the MCA is Elizabeth Ann Macgregor who has held this since

1999. With a strong background and focus on education and outreach programs,

Macgregor's vision and mission has filtered throughout the museum and into its outreach

programs. Macgregor's past experiences of museum outreach include organizing traveling

art exhibitions in Scotland and taking them to highland villages, schools, factories, inner city

estates, hospitals, and prisons on board a converted bus (Board and Directorate, n.d.).

Macgregor's involvement with such outreach and inclusive programs as these exemplify her

concerted efforts and dedication to achieve broader visitor access in museums. Since

Macgregor's success in securing a Telstra sponsorship for free access to the MCA in 2000,

the museum has seen significant growth in visitor numbers. Macgregor has also worked with

the City of Sydney to secure the MCA's future through a major redevelopment of the MCA

building. In 2001, she established long-term funding from the New South Wales state

government, thus securing stability and viability for the museum for years to come (Board

and Directorate, n.d.).

More recent developments of the MCA under Macgregor's directorship have also

seen the acquisition of government and private funding for the addition of a fifty-three

million dollar building re-development. The new addition will increase the size of the

museum by almost fifty percent to more than sixteen thousand square meters and is

scheduled for completion in early 2012.[14] Plans for the design of the new building were

approved in June 2009 and in addition to a wide variety of new facilities, also include

attention to disability access such as a new, fully accessible entrance to the museum, and

new facilities for the *Bella* program for young people with disabilities.

Largely as a result of its free access, the MCA has also increased the number of

school groups that visit the museum and gained excellent reviews from the media (Work

Starts, n.d.). In addition, regional touring programs have been developed in order to

establish ties with regional galleries outside of Sydney. The MCA is committed to making

art available to diverse audiences or audiences with diverse needs, which provides further

indication that the MCA is living up to its mission statement as "a distinctive and vibrant

centre for the promotion of contemporary art and visual culture, which seeks to engage

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[14] *Work starts on $53 Million MCA redevelopment*, (n.d.) Retrieved from,
http://www.mca.com.au/default.asp?page_id=81&content_id=7075

audiences with recent ideas in art in all media" (Museum of Contemporary Art, 2009, p. 2).

The MCA intentionally targets diverse audiences, from tourists to school children, young

professionals, families, young adults, and high school and tertiary students and as a result,

attendance figures for the MCA have continued to climb in under Macgregor's leadership

(Board and Directorate, n.d.)

At the time research for this study commenced, the current senior manager of

education and access was Emma Nicolson.[15] Prior to working for the MCA, Nicolson

worked in a number of senior positions at the National Galleries of Scotland, Edinburgh

where she was responsible for the management of gallery-based learning programs along

with the education department and a range of education projects, all which had a focus on art

accessibility (Museums and Gallery Service Queensland, n.d.) Prior to this, Nicolson

worked at Kirkcaldy Museum & Art Gallery in the county of Fife, Scotland and has been

involved with a range of different education and public engagement programs in the visual

arts (Museums and Gallery Service Queensland, n.d.)

Education at the MCA Sydney

The education department at the MCA, previously termed *Education and Access*, is

now referred to as *MCA Learning*.[16] *MCA Learning* has four full-time and approximately

sixteen casual staff with an annual budget of over two million Australian dollars that allows

for a far greater range of programs than the BMoCA.[17] The *MCA Learning* encourages

patrons to enhance their educational experience with a wide range of resource materials,

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[15] Emma Nicholson left the MCA in 2010. At the time of writing this thesis, there is currently no senior manager of MCA Learning.

[16] The MCA has changed the name of its education department since the commencement of this research and now is termed *MCA Learning*.

[17] The BMoCA's annual program budget is $227,597 USD.

produced in-house. *MCA Learning* produces curriculum and exhibition-linked resources, and generic resources including worksheets, teacher kits, student notes, and adventure trails for all types of education audiences (MCA Learning Resources, n.d.). While the resources are primarily aimed for use with the artworks on-site, there is also information and access to educational resources prior to or after a visit (MCA Learning Resources, n.d.).

Apart from these services, *MCA Learning* offers numerous programs which help connect the MCA to a diverse range of people in the community and thus enable the MCA to function as an institution which fosters social inclusion (J. McLisky, personal communication, March 12, 2008). Programs offered via *MCA Learning* range from school programs including pre-school, primary, secondary and tertiary level students. Programs are also designed especially for families, students who speak English as a second language (ESL) or who are from a non-English speaking background (NESB), programs for children with special needs, programs for community or special interest groups, holiday programs and more specifically, educational outreach programs.

In the effort to be accessible to broader audiences and positively contribute to the cultural wealth of all Australians, *MCA Learning* offers programs for young people with disabilities.[18] Since its inception in 1993, the MCA's program for young people with disabilities**,** named *Bella,* has grown into a successful and rewarding series of events (J. McLisky, 2008). In 1997 the *Bella* program was expanded as a result of a grant from the New South Wales Department of the Ageing and Disability and the supportive patronage of Dr. Edward and Mrs. Cynthia Jackson in memory of their late daughter Belinda (MCA Bella Program, n.d.).

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[18] Phelps, L & Wallace, S. (1998). Programming for young people with special needs, *Museum National*, *6*, (3), 23.

Bella

  In 1994 and 1995 the *Bella* program sharpened its focus to provide activities tailored to the needs and interests of different groups. For example some schools were invited whose students had intellectual and physical disabilities or with vision impairment (MCA Bella Program, n.d.). A variety of programs were offered like the two-hour workshops led by museum educators which took place in the galleries and which were based on artists' work and on museum exhibitions (MCA Bella Program, n.d.). The *Bella* programs were offered to audiences who were unable to visit the museum, such as in hospitals and youth welfare centers (MCA Bella Program, n.d.). It was also at this time that the programs began to incorporate artist-led activities for children with behavioral disabilities. According to Phelps and Wallace (1998), the students who participated in these programs enjoyed working with the artists and using the materials that were made available to them.

  The *Bella* program is free to all participants and initially targeted only children between the ages of five and eighteen years with physical, intellectual, behavioral or emotional disabilities, or for those who were disadvantaged due to financial, social or geographic factors. Today, the *Bella* program has now been expanded to include adults. The *Bella* program is connected with the NSW Government body, *Accessible Arts,* whose aim is to make the arts accessible to people with disabilities (Good Vibrations, n.d.). In its seventeenth year, the *Bella* program continues to offer gallery-based sessions and hands-on workshops addressing issues of access to contemporary art and culture for people with specific needs, including sensory, behavioral and intellectual disabilities, financial, social, and geographically disadvantage. The *Bella* program currently runs only a few months, from September 1st to December 17th but continues to draw a large audience (MCA Annual

Report, 2009). The fact that the program could not been offered year-round has been a key limitation of the *Bella* program, especially since response to the program has continued to be positive. *Bella* continues to have the support of local politicians and organizations from the disability field like *Accessible Arts* and the *Smith Family.* In addition, other art-related organizations like the *Biennale of Sydney*, *The University of Sydney*, and the *Alternative Media Group of Australia* and *J.P. Morgan*, have also shown their support and high regard for the program (McKew, 2010).

Good Vibrations

The program *Good Vibrations* was initially part of the original *Bella* program developed by Lyndal Phelps and Sue-Anne Wallace of the MCA, Sydney (Good Vibrations, n.d.). *Good Vibrations* was the first international artist-in-residence project for *Bella* which connected children with disabilities with high-profile international artists (Museum of Contemporary Art, 2006). In October 2006, the MCA invited two internationally respected U.S. artists to come to Australia: sound artist, composer Bruce Odland and New York-based interactive new media artist, designer Michael Luck Schneider (Good Vibrations, n.d.).

According to Odland and Schneider, *Good Vibrations* is born of a single observation, that each of us has a set of senses with which to perceive the world, yet our reactions and perceptions are always different. Some people like to touch, others gaze into the distance, others orient through their ears, taste or smell (Museum of Contemporary Art, 2006). After working with children in a New York hospital, the artists realized that they could not be reached through our preference of visuals and sounds, but that these children were masters at reading the world around them through vibrations. The question arose, "can we devise a way

to reduce the world to patterns of vibration which could be shaped and shared?" and the answer came through the project *Good Vibrations* (Museum of Contemporary Art, 2006).

Schneider and Odland were asked to work with students with disabilities (comprising physical, sensory, intellectual, behavioral and emotional disabilities) from schools in the Sydney area in order to develop and present a unique, multi-media, sensory art installation environment (Museum of Contemporary Art, 2006). The installation environment for *Good Vibrations* came in the form of a 1960s caravan (campervan) equipped with electronic "eyes" and "ears" that allow participants to meditate on the world around them. The artists drove the caravan to various locations, and worked with children with disabilities and captured their environment into patterns of light, sound and vibration. When the caravan left each place, it carried with it each location as a memory to be triggered later at another site.

The artists' residency and outreach preparation component of the program was held between October 16th and November 1st, 2006. The schools and centers involved in the initial preparation stages were JJ Cahill Memorial High School, Kingsgrove North High School, Redfern Community Center, Wyndham College, the Royal Far West School and Nepean High School. Each location, selected for its different outlook or landscape, contributed a varied set of images and sounds which were selected and re-mixed by the students to form a memory collage of their surroundings (Museum of Contemporary Art, 2006). Sound, vibrations, and light patterns were collected from various sites around Sydney, including near the Blue Mountains and Manly (Museum of Contemporary Art, 2006). Sounds and light patterns were gathered in small groups around the selected site, and the final information was edited by the children in the caravan in an assisted process with the artists (Good Vibrations, n.d.). This was achieved through the outfitting of a caravan

with highly advanced technical receptors and equipment, panels of speakers and sensory computers.[19] The participating public step into the caravan to trigger past experiences and explore the world around them. Children with sensory disabilities, including vision and hearing impairment, were able to have a fully engaging experience of the environment. This experience is explained by the artists Odland and Schneider:

> When you enter the caravan you experience the environment through your perceptions, quite differently through color, vibration, and sound, and patterns of the elements that the caravan has collected in its journey. The level of mediation, resolution and clarity will all be controlled through interacting with a simple vibro-tactile interface inside the trailer. Our previous work together went well beyond accessibility requirements into communication with populations previously thought unreachable, and we are very interested in keeping this wide accessibility at the center of our new work, including wheelchair access (Museum of Contemporary Art Good Vibrations [brochure], 2006, p. 1).

The *Good Vibrations* caravan returned to the MCA forecourt at Circular Quay and remained there from November 4th -14th, 2006. The program toured again to Wollongong in May 2008 but during 2007 the *Good Vibrations* caravan was not utilized due to lack of funding, but stored at the MCA. In 2009, however, with a generous fifty thousand dollar donation from Deutsche Bank, the *Good Vibrations* outreach program travelled to rural Victoria, Australia to provide educational and interactive art experiences for children with disabilities from areas that had been affected by the destruction of bushfires. In addition, the *Good Vibrations* outreach program was also made available to families who had been

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[19] *Good Vibrations* (n.d.). Retrieved from http://mcagoodvibrations.org.au/

affected by the bushfires, thus expanding its audience base from young people with disabilities to include families in need.

With each subsequent tour, the caravan is made available to a range of groups from the local community, for hands-on workshops. The nature of each of the *Good Vibrations* tours has been different each time. *MCA Learning* staff decide how the traveling program will be arranged, where it will go, and for what reasons. The most recent tour, for example, came about because of financial donations to assist those impacted by the bushfires. Therefore, the caravan toured to Victoria as both an art education outreach program for people with disabilities and also for those whose homes and livelihood had been affected by the bushfires.

When the caravan is touring, there are generally two or three workshops held per day which are tailored specifically to the needs of primary, early secondary, and students with disabilities. Each workshop is tailored to the specific needs and learning level of the group. The group is introduced to the caravan and encouraged to discover all its capabilities of a creative experience. For example, the external environment around them has been reduced to lights, sounds or vibrations and participant's interaction may be as simple as laying their hands on a panel, or squeezing other fixtures, while being guided by light and vibration (Museum of Contemporary Art, 2006). Participants' perception and memory is engaged as these simple actions help evoke how humans perceive, remember and interact with the world around them. This is followed by an expedition into the surrounding environment where the group records their own sounds and takes photographs. A volunteer is selected to record the sounds and another to be the photographer. The group then returns to the caravan and the material is edited. The group is then able to playback, interact, and remix the

material that they have collected. This workshop structure assists in removing the barriers that people sometimes have when working with art materials since most are able to express themselves through the use of sound and collecting imagery. The workshop is akin to creating a diary entry; children go on a visual and sound journey and document their experience. In a subtle way this could be very therapeutic and not too demanding as the emphasis is on generating an environment in which all participants feel capable and comfortable. For the public interacting with the artwork, stepping into the caravan is a transformative experience in two ways: (1) it feels like entering into a futuristic world, and (s) it also enhances their sensory responses (Museum of Contemporary Art, 2006). Feedback has shown that *Good Vibrations* has had a transformative effect on the children, school staff, venue staff, and artists who have taken part (Museum of Contemporary Art, 2006).

The *Good Vibrations* program has also recently been expanded to include adults, particularly the deaf and visually impaired. This is a positive advancement in broadening the audience base even further. The program is now no longer just for school children but instead incorporates all people with disabilities.

In our technological society with increasingly technologically savvy audiences, museums are utilizing websites to keep people informed and more connected to the programs they are offering. In order to help promote the *Good Vibrations* program, the MCA created a website to and allow those who were interested to follow updates. The website layout *www.mcagoodvibrations.org.au* is in the form of a blog which allows for ease of use in uploading information and images for web administrators. In addition, blog websites have greater ability for Search Engine Optimization (SEO) which means when potential visitors to the website search similar key words in an online search engine, such as

Google® or Yahoo®, the website has a greater chance of showing up prominently in visitors' search results.

Once web users have found their website of choice, providing a user-friendly platform is important to keeping visitors on the website and to provide a rich and educational experience even after (or before) participation of the actual *Good Vibrations* program. Visually, the layout of the *Good Vibrations* website is a simple design with white background, black text throughout the body of the website with a fluorescent green *"Good Vibrations"* heading on each page. There is a section which appears permanently on all the site's pages entitled "Latest Photos" where the most recent photos are uploaded. When a viewer clicks on an image they are taken to the Flickr® website which hosts a platform where people may upload images and others may make written comments about pictures. Currently, this is set to where Flickr® does not open in a separate window. This is not a user-friendly configuration since viewers to the website must click the back button to get back to the main *Good Vibrations* website and are unable to view both pages simultaneously. Also permanent on the pages is a section entitled *Extra Information* which includes information *About Bella, About the Artists, Accessible Arts, Contribute!, Good Vibes Pix,* and *Project Sponsors*. Viewers may click on each of these headings and are lead to various other websites such as to the Accessible Arts website or to the official MCA website or Flickr® for the viewing of a photo stream of images of the project.

The website content is easy to comprehend and informative. There are four tabs at the top of the page which visitors to the website may click on which are labeled *Home*, *About Good Vibrations*, *MCA Bella*, and *Program Schedule*. All of these headings except for *MCA Bella* lead viewers to a page within the blog website. The *MCA Bella* page takes

viewers to an outside webpage which is the *Bella* information page of the official MCA website. Under the *Project Schedule* and *About Good Vibrations* tabs, viewers are able to leave a comment regarding their thoughts or experiences of the *Good Vibrations* program.

Maintaining the *Good Vibrations* website for the purpose of providing rich information for potential participants and to engage this community of participants is important for the promotion of the program. However, in addition to this, in order to ensure that *Good Vibrations* is a quality educational outreach program, the MCA also reviews its existing museum facilities and programs. The program reviews are carried out during the post-season at the conclusion of every new exhibition and program. This review process involves aspects of physical access, as well as program access. For example, there is a walk-through with every exhibition which ensures the gallery spaces are wheel chair accessible and that label heights are correct. In addition, after each program, museum education staff writes a program review including evaluations of the program from participants (M. Garcia, personal communication, January 27 2010). This review process resembles Salmen's building block five, *Review of Existing Facilities and Programs* where the main goals of the review process concern the language of the museum's policies and practices, the accessibility of programs and exhibitions, the accessibility of buildings and spaces where programs and exhibitions or goods and services are provided, and that staff training for visitor access is adequate (Salmen, 1998, p. 42).

CHAPTER FOUR – RESULTS OF THE STUDY

The results of this study outline how the two case study exemplars, the BMoCA and the MCA, incorporate the guidelines found in Salmen's (1998) *Everyone's Welcome* into their disability outreach programs in order to become more accessible to people with disabilities. This section is divided into nine individual parts to match Salmen's nine-step strategy of accessibility for museum visitors.

The BMoCA, the MCA, and the Nine Building Blocks to Accessibility

Accessibility Statement

Salmen (1998) states that the most effective way to communicate a museum's dedication to accessibility is to include an accessibility policy statement or declaration within the overall mission statement of the museum (p. 36). A museum's philosophy of its commitment to accessibility may be integrated into all museum functioning activities, such as its policies, guidelines, plans, budgets, meetings, conferences, panels, and community outreach (Salmen, 1998, p. 34).

Both the MCA and the BMoCA have recognized the need to accommodate visitors with disabilities. Each museum has attempted to eliminate physical accessibility barriers by providing additional ramps and elevators. MCA and the BMoCA also have offered staff training in disability access, as well as educational programs for people with disabilities. However, neither museum has a formal *accessibility statement* that formally welcomes people with disabilities or specifies the museum's support, commitment, or programs and services offered to people with disabilities (Salmen, 1998, p. 36). The BMoCA acknowledged that it would like to work toward an *accessibility statement* in the near future.

Likewise, although the MCA does not have a specific *accessibility statement*, MCA staff

noted that accessibility is implied within its museum purpose statement, "To make the MCA

an internationally respected and locally valued national organization dedicated to exhibiting,

interpreting and collecting contemporary art" (Museum of Contemporary Art Vision and

Purpose Statements, n.d., p. 1). Nevertheless, there is no specific language or mention of

visitors with disabilities within the MCA's vision or purpose statements. Thus, the

museum's official vision and purpose statements are not accessibility statements as

described in Salmen's guidelines. The only reference on the MCA's website to disabilities is

a link to its *Good Vibrations* program (Good Vibrations, n.d.) and a statement under "FAQs"

that the MCA is wheelchair accessible (Frequently Asked Questions, n.d.). However, in the

MCA's 2009 annual report, it states that "the MCA seeks to make contemporary art

accessible for a broad spectrum of public audiences through a diverse range of exhibitions

incorporating new and more traditional media, stimulating and hands-on educational

programs and special events" (p. 2). This statement implies that the museum is interested in

reaching a broad range of audiences, however, there are no specific comments on their

commitment to provide rich and exciting learning experiences for people with disabilities. In

addition, there is not a clear indication that the issue of accessibility will be integrated into

all aspects of museum functioning.

Accessibility Coordinator

An *accessibility coordinator's* role typically is delegated to a single individual whose

formal job responsibilities relates to facilitating access within the museum at large (Salmen,

1998, p. 36). Neither the BMoCA nor the MCA have a formal *accessibility coordinator*.

Both art museums, however, have qualified individuals informally functioning in this

capacity. For example, the BMoCA's director of youth programs is in charge of the new

access program for youth and adults with disabilities, *BMoCA Access*. Similarly, at the

MCA each department has one person who is generally responsible for ensuring

accessibility standards are met (M. Garcia, personal communication, January 27 2010).

According to Salmen, once an *accessibility coordinator* is formally assigned the

coordinator would need to conduct preliminary research on museum staff's attitudes toward

disability and disability outreach programs. At the BMoCA, the director of youth programs,

commented that the overall attitudes of museum staff were positive toward the outreach

program *BMoCA Access*. However, some museum staff were at times concerned about

artworks being damaged when visitors wanted to touch works or alternatively when they

accidentally bumped into displays. The BMoCA did not note any discriminatory resistance

by other members of the museum field, except passing concerns for the protection of the

artwork. The MCA Sydney stated that it had received only positive responses from its staff

toward the *Good Vibrations* program (E. Nicholson, personal communication, June 14

2010). Both the BMoCA and the MCA indicated that they would like to expand their

outreach programs to reach broader audiences.

Accessibility Advisory Council

An *accessibility advisory council's* (AAC) role is to provide expert advice to the

accessibility coordinator, director, and museum board on disability policies and practices

(Salmen, 1998, p. 38). The AAC may also help evaluate facilities, programs and services,

may develop or comment on the access policy of the museum, provide technical assistance,

participate in staff training workshops, and serve as a resource or outreach body (Salmen,

1998, p. 38).

Neither the BMoCA nor the MCA have a formal AAC. However, both follow the common museum practice consulting with recognized experts on accessibility and outreach (M. Garcia, personal communication, January 27, 2010). For example, to gain input regarding the design and implementation of the *BMoCA Access* program, the BMoCA consulted with outside persons from other museums that had implemented similar programs along with consulting members of *Imagine!,* a local organization for people with disabilities in the Boulder and surrounding areas. The MCA has also used various external accessibility consultants, referred to internal policy, and worked with *Accessible Arts* which is a notable organization in New South Wales that provides opportunities for people with disabilities to participate in arts and cultural activities (Accessible Art, n.d.).

Staff Training

According to Salmen, making accessibility *staff training* an ongoing part of all educational efforts helps cultivate an environment where accessibility then becomes "normal" and more easily implemented within the museum (Salmen, 1998, p. 39). The BMoCA does not conduct formal *staff training* to educate museum staff on issues and needs of people with disabilities. The BMoCA indicated that if they did training in the future it would be for specific staff members because the museum is relatively small.

The MCA conducts annual *staff training* on the issues regarding disability access. Training is mandatory for all MCA staff and is conducted once a year and lasts for one to two days, depending on available finances (M. Garcia, personal communication, January 27 2010). The purpose of this training is to keep staff up-to-date on disability access policy. Training is conducted by an external specialist in disability access awareness. Sometimes the

MCA focuses on a specific disability area. For example, in 2009 the training specialist

focused on the autistic visitor audience and various related issues.

Neither the BMoCA nor the MCA have conducted formal research on the nature of

museum staff's attitudes toward disability and disability outreach programs. However,

according to the director of youth programs at the BMoCA, the overall attitudes of museum

staff were positive toward the outreach program *BMoCA Access*. "I don't think anyone has

had a necessarily negative attitude towards the program, in fact if anything people think very

positively of it" (S. Crothers, personal communication, November 4, 2010). The director of

youth programs did not note any discriminatory resistance by other members of the museum

field, apart from passing concerns about the protection of the artwork.

> But there have been moments where when we had a tour of thirty people in our
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> galleries, since our galleries are really small, then there were moments when the staff
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> was very concerned for the art. (S. Crothers, personal communication, November 4,
>
> 2010).

Review of Existing Facilities and Programs

Salmen argues that in order to determine how well a museum facilitates participation

for people with disabilities, museums should review all existing activities, programs,

services, policies and facilities and is required by law (Salmen, 1998, p. 42). According to

Salmen, there should be four major goals when initiating such a review process: (1) ensuring

the language used in museum's policies and practices do not limit or exclude people with

disabilities; (2) ensuring programs, exhibits and publications are accessible from a

communications standpoint; (3) to make sure there are no physical barriers toward

accessibility in the buildings and spaces that programs and activities are held; and (4) to ensure adequate accessibility staff training.

To understand the context of how both museums function, the BMoCA is a non-collecting museum so its focus geared more toward temporary exhibits and educational programs. The BMoCA noted that while collections are important for museums, they felt that it is more important to determine what museums do with their art such as reaching out to broader audiences and making a positive impact on people's lives. The MCA houses permanent collections as well as temporary exhibits and believes that education programs are critical in reaching the broadest possible audiences, including people with disabilities.

Both the BMoCA and the MCA have begun to examine all existing activities, programs, services, and policies. Insight gained from these reviews assist museums in further planning for accessibility. For example, the BMoCA currently reviews existing museum facilities and programs to determine compliance with disability laws. The BMoCA's review generally is conducted by members of the museum board who investigate facilities and keep an eye out for issues that may not meet ADA requirements. At the time that interviews were carried out at the BMoCA, museum staff were uncertain as to how often the review process of existing facilities and programs takes place. However, the BMoCA staff did conduct reviews of the *BMoCA Access* program each time it is offered to the general public. This consists of a review session with the external disability professional from *Imagine!* to determine weaknesses and strengths of the program. These sessions are documented so that museum staff may refer back to notes when implementing future changes. Based on this review, program improvements are then made the next time it is offered.

Salmen also recommends that museum education staff consult with people with disabilities to provide a deeper insight into the needs and wants of this target audience, before implementing an educational outreach program (Salmen, 1998, p. 7). The BMoCA did not consult with any of the actual participants of the proposed program before it was implemented. Staff at the BMoCA believed that because its program was new, that it was best to only consult with the director of *Imagine!* and learn from them what they had done in the past and what had worked for them and their clients. Because of time, budgetary, and staff constraints, the BMoCA did not think it was feasible to bring together a round table of people with disabilities for its *BMoCA Access* program.

> I did not consult with any of the actual participants, so I didn't do a formative evaluation with them. I felt that in the first year it would probably be best just to work with her and see what they've done in the past, what has worked and what hasn't…but I don't think we have the ability to just pull together a round table of people that would be participants. (S. Crothers, personal communication, November 4, 2010).

When possible, the BMoCA and the MCA consulted with the local community regarding their attitudes toward a museum outreach program. For example, the BMoCA consulted with the chaperones that brought the group and asked them what kinds of comment and feedback they had received. The chaperones are with the visitors every day and know them very well, often times they are friends and family members. However, verbal communication can be limited so results and feedback are not always measurable.

> I always just talk to the person who had chaperoned…in the group and ask them what kind of comments they heard on the ride back or back at the center. Because a

lot of times the people we do get really are fairly…physically handicapped and so for them, sometimes they really can't speak either, so with them, in order to get any sort of real feedback from them, it's really difficult. (S. Crothers, personal communication, November 4, 2010).

The BMoCA has yet to conduct any research on the community reaction toward the *BMoCA Access* program. However, members of the BMoCA board often are consulted and their response was seen as positive.

> In terms of research, we haven't done any research for like the local community whatsoever. I noted the people that are on our board which we consider kind of our links to the outside community have felt this is a wonderful program to set up. I would say that's all I could really say on that topic because I really haven't been able to do that kind of broad evaluation of the people and say, look we're doing a really great thing, I'm sure they would feel that way, but I don't really know. (S. Crothers, personal communication, November 4, 2010).

On an informal basis, the MCA, Sydney has conducted some research regarding the views of the local community towards educational outreach programs for people with disabilities.

> This has been on an informal basis, we would love to have more time to devote to this type of work, however due to being a very small and over stretched team with limited time and resources this is rarely possible. (E. Nicholson, personal communication, June 14, 2010).

When asked whether facilities or programs and services are more important, the BMoCA and the MCA both indicated that both facilities and programs and services are essential. However, the BMoCA acknowledged that at the time of the study, programs and services were more significant to improving the BMoCA's accessibility since the museum facility is almost completely accessible from a physical standpoint. Because museum outreach programs may also be conducted outside the museum walls, such as a traveling programs or art carts, the BMoCA noted that the facilities of the museum do not always have to hinder the programs and services they offer to provide accessibility.

Planning for Accessibility

According to Salmen (1998), when a museum has closely examined its programs and facilities, it should begin planning for needed accessibility modifications (p. 44). Some changes may be easy to make right away, where others may require several years to resolve. Such changes to existing facilities and programs may be sorted into short-term, intermediate and long-term goals. Short-term fixes may include staff training, providing accessible parking, or lowering signage for exhibits and are all fairly easy changes that museums can make. Intermediate modifications can include structural or physical modifications to ensure barriers to accessibility are removed. Long-term planning goals for museum accessibility generally include planning for new structures which incorporate universal design as required by the ADA (Salmen, 1998). Salmen recommends that museums make a list of needed changes, the methods the museum will use to implement these changes, and a timeline for such changes (p. 44).

The BMoCA began systematically planning for accessibility when its building needed a new elevator. Under the ADA, new building structures and renovations must

comply with accessibility laws. These modifications provided a springboard by which the BMoCA was able to examine the issue of accessibility for people with disabilities and in turn, designed and implemented *BMoCA Access*, the educational outreach program for young people and adults with disabilities.

The BMoCA is in the beginning stages of becoming fully accessible. In order to provide access for people with disabilities, the BMoCA installed an elevator and ramps at the front door, allowing wheelchair access for all but one gallery space. According to the director of youth programs:

> We put in an elevator so…our front door is completely accessible through a ramp and we have … no ramp to the back gallery. Right now we are not actually completely accessible. There is one gallery that still has just two stairs to go down into it. So that's something that we're going to look at in the next five years hopefully to make the entire museum accessible, but at this point we still do have one gallery that isn't. (S. Crothers, personal communication, November 4, 2010).

As indicated by the director of youth programs, the BMoCA is planning to become completely wheelchair accessible in the next five years. In addition, the BMoCA is hoping to eventually have more audio tours and a touch tour in conjunction with exhibitions that may show bronze or other sculptural mediums in which visitors with disabilities may be able to touch the artworks. As such, *BMoCA Access* is accessible to young people and adults with disabilities, in conjunction with *Imagine!*. The program allows for groups of visitors to view the current exhibits and engage in an art workshop at the museum.

The BMoCA staff also consulted with staff from the Philadelphia Museum of Art regarding a range of programs that they were conducting for people with disabilities. The disability access programs carried out at the Philadelphia Museum of Art aligned with the philosophy and purpose of the *BMoCA Access* programs despite differences in disability audiences, budget size, and museum facilities. While the Philadelphia Museum of Art offers a greater variety of programs, *BMoCA Access* was modeled off the Philadelphia Museum of Art's *Specially Tailored Accessible Tours* for individuals or groups with mobility, hearing, visual, cognitive, and communication impairments. Staff from the Museum of Modern Art (MoMA) in New York, were also contacted in order to seek guidance for the organizational structure of *BMoCA Access*.

The MCA's attempts to *plan for accessibility* is seen in the *Good Vibrations* program which helped provide funding for a new wheelchair accessible ramp. In addition, the MCA has ensured its current facilities are physically accessible with the installation of elevators. The *Good Vibrations* program evolved from MCA staff seeing a need for programs for children with disabilities or who were socially excluded. Upon receipt of grants and further support of the New South Wales Department of the Ageing and Disability, the MCA continued to *plan for accessibility* with subsequent tours of the *Good Vibrations* program (Phelps and Wallace, 1998). Further *planning for accessibility* is evident as the MCA conducted outside consultation through the New South Wales Department of the Ageing and Disability along with commissioning artists to help with the programs (Phelps and Wallace). Furthermore, *planning for accessibility* is also evident in the MCA's new designs and plans for their multimillion-dollar redevelopment project expected to be completed in early 2012. The MCA redevelopment page of the MCA website states that "there will be new facilities

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for the Museum's renowned *Bella program* for young people with special needs" and "the

development will also provide revamped and extended gallery spaces and a new fully

accessible entrance" (MCA Redevelopment, n.d. para 7 and 8).

Promoting and Advertising Accessibility in the Museum

According to Alison McLaren (2007), Audience Development Officer of *Accessible*

Arts in Sydney Australia, it is crucial for museums to advertise and communicate their

commitment to disability access (p. 5). By projecting attitudes of inclusion to all, a museum

can enhance its cultural standing and image as a valid and important educational and

entertainment resource (McLaren, 2007, p. 5). The use of accessibility symbols wherever

possible, including for example, both in the physical museum and on websites, helps

communicate that a museum is accessible to people with disabilities (McLaren, 2007, p. 5).

In addition, communicating that a museum has taken action to improve disability access is a

powerful marketing strategy (Wyatt-Spratt et al, 1999). Including access information in

promotional materials disseminated within and beyond the museum is important to ensure

the message is received by as many audiences as possible. Museums may also advertise

broadly through disability organizations to reach audiences with disabilities. Both the MCA

and the BMoCA have adopted this strategy along with marketing directly to people with

disabilities. If museums continue to communicate their message of being accessible to

people with disabilities, they will in turn promote social inclusion. The means by which the

BMoCA and the MCA have implemented the promotion and advertising of accessibility is

discussed herein.

The BMoCA does not outwardly promote and advertise its accessibility to people

with disabilities. Because of existing attitudes from people with disabilities concerning the

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desire to be treated like everyone else, the BMoCA did not want to draw unnecessary

attention to over-advertising things like symbols, ramps which are not generally viewed in a

positive light by people with disabilities. Because of a small marketing budget, and the fact

that the current *BMoCA Access* program is not open to the general public, outward

promotion and advertising of the museum's accessibility was not deemed necessary. In order

to promote the *BMoCA Access* program, the BMoCA staff contacted employees from

Imagine! to make them aware of a new educational outreach program for people with

disabilities. Staff determined that some existing *Imagine!* programs could work well in

bringing audiences to the BMoCA for the *BMoCA Access* program. These *Imagine!*

programs were *Out and About* for youth between the ages of seven and twenty-one and the

Day Program for people ages sixteen and up. Both programs often include day outings that

focus on learning and having fun. Museum staff decided that bringing these audiences to the

museum for *BMoCA Access* would work well with the aims of both *Imagine!* and BMoCA.

Further promotion of *BMoCA Access* was carried out through word of mouth and the

Imagine! website.

  The MCA did not develop a formal marketing or advertising campaign to promote

the *Good Vibrations* program specifically to people with disabilities. According to museum

staff, *Good Vibrations* is reliant on sources of funding that makes advertising and promotion

challenging. However, the MCA did create a website specifically for *Good Vibrations*

(Good Vibrations, n.d.). The site details the artists who created the interactive art and

program, a chronological history of how it was created, and lists of updates of when the

caravan will travel again. The *Good Vibrations* site is intended to promote this outreach

program is also linked to the official MCA website (Good Vibrations, n.d.).

In addition, the MCA uses the *Good Vibrations* program as a promotion tool in

conjunction with the International Day of People with Disabilities (Special Event, n.d.). For

this event, the *Good Vibrations* campervan is positioned on the lawn at the front of the

MCA. The local community is invited to experience the unique multi-sensory installation

inside the fully accessible caravan. Hosting special events like this, in conjunction with the

International Day of People with Disabilities, according to MCA staff is an affordable

method to advertise and promote the *Good Vibrations* program.

Additional advertising mediums used by the MCA include the creation of brochures

for *Good Vibrations* featuring colorful images of the art installation. The brochure provided

information about the artists and artist's statements, the locations of where the caravan had

travelled, the museum staff involved, and the sponsors for the *Good Vibrations* outreach

program. Press releases were created for advertising the program when it initially toured in

2006 to Australian schools, as well as in 2009 when it toured to the state of Victoria as a

project to provide an educational leisure activity for families affected by recent bush fires.

Another public promotional tool of *Good Vibrations* included a lecture on this

program at the 2007 *Aotearoa New Zealand Association of Art Educators (*ANZAAE)

Conference. This lecture by the then museum educator in charge of *Good Vibrations,*

expanded and promoted awareness of its educational outreach program for people with

disabilities.

Grievance Process

Grievance procedures are a method for people to voice their complaints or concerns.

U.S. law requires Title II museums to have a grievance procedure in place and to provide

documentation for each complaint concerning accessibility issues (Salmen, 1998, p. 48).

Under the ADA, visitors and volunteers have the legal right to file complaints and a lawsuit against any museum that does not provide accessible programs and facilities (Salmen, 1998, p. 48). Salmen suggests that a museum's grievance process include a detailed description of procedures for submitting a grievance, identifying whom it should be submitted to, reasonable time frames for the review and resolution; and documentation of each step in the grievance process for each complaint. However, many formal complaints may be avoided simply by letting people know that a complaint form is provided along with a contact person (Salmen, 1998, p. 48).

The BMoCA and the MCA have an accessible description of the procedures for submitting a grievance and a reasonable time frame for the review and resolution of any complaints. Neither museum, however, has a specific person in charge of grievances of people with disabilities. For example, while the BMoCA does not have an official grievance process to resolve complaints pertaining to museum or program access, the current director of the museum generally handles forms of grievance or complaint. Likewise, the MCA also does not have a specific grievance process pertaining to disability access, but museum grievances are handled through the operations department and the visitor coordinator.

Ongoing Review of Access Efforts

Disability laws in Australia (DDA, 1992) and the U.S. (ADA, 1990) require museums to continually evaluate and remove accessibility barriers. As Salmen (1998) suggests, all museums should instigate long-term policies and procedures for the incorporation of accessibility into all new projects, programs, and activities (p. 49). These changes in museum's programs and priorities will positively influence museum's compliance to accessibility over time. Even so, museums must periodically re-evaluate

themselves to ensure that accessible standards are continually being met. The nine building blocks provide strategies to assist museums in their review efforts.

The BMoCA does not have an ongoing review of access efforts in the broad sense for the entire museum to ensure an accessible environment for all art museum visitors. However, it does have an informal process for the *BMoCA Access* program. Due to the early stages of the program, it is continually reviewed by the program director, in conjunction with staff from *Imagine!* Likewise, the MCA does not have a specific process of ongoing review of access efforts. Rather, it is an internal process that takes place usually after each program or event in the form of a debriefing session.

To ensure the continuation of successful outreach programs to people with disabilities, some museums consult with experts in the field of accessibility regarding the museum's facilities and programs. The BMoCA consulted with persons from external museums who had implemented similar programs to gain input regarding the design and implementation of the *BMoCA Access* program as a successful educational outreach program. In addition, the BMoCA consulted members of *Imagine!,* a local organization for people with disabilities in the Boulder and surrounding areas. The MCA also used various external accessibility consultants, referred to internal policy, and worked with *Accessible Arts*.

Art museums face numerous issues which are important factors that affect the successful functioning of art museums whose focus is reaching out to broader audiences and to foster social inclusion. When asked what is the most important issues facing the museum, the BMoCA and the MCA indicated that resources and funding are the most vital to the art museum.

CHAPTER FIVE – DISCUSSION AND CONCLUSION

Legislation in the U.S. and Australia mandates the equitable treatment of people with disabilities. Both the ADA and DDA contain strict guidelines to compel inclusion of people with disabilities in all cultural institutions. Despite decades of legislation and research on the expansion of the ways in which disability is publically portrayed, embraced and catered for, museums have entered this conversation rather cautiously (Sandell, Dodd, and Garland-Thomson, 2010, p. 3). Only in the last few years, has there been an increasing interest in developing art museums as sites of social inclusion and equality (Sandell, Dodd, and Garland-Thomson, 2010, p. 3). Furthermore, this may explain how, until recently, art museums had no systematic method to determine whether they were making strides toward disability access (Sandell, Dodd, and Garland-Thomson, 2010, p. 3). Salmen's *Everyone's Welcome*, not only provides a framework for art museums to plan, design, and implements effective educational outreach programs, but also serves as a tool for art museums to measure their disability access progress, and in so doing, demonstrate their inclusiveness as cultural institutions. Nonetheless, Salmen's *Everyone's Welcome* has been published since 1998 and therefore it raises the question as to why it has taken over a decade for museums to begin implementing the AAM's guidelines.

This chapter discusses *Everyone's Welcome* and how the nine-steps of accessibility can be incorporated into the BMoCA and the MCA's *BMoCA Access* and *Good Vibrations* educational outreach programs. This section also highlights how current learning, social inclusion and disability theory relates to the context of disability access in the two museums. Finally, this section concludes with recommendations of further research needed in this area.

Salmen's Nine-Step Strategy for Accessibility

Salmen's nine-step strategy of accessibility is a starting point toward an open and accessible environment for people with disabilities. Before any systematic or program change can take place, Salmen maintains that accessibility must first be embraced at the highest levels of the art museum and also among all museum staff (Salmen, 1998, p. 36). One of the most effective ways to communicate a museum's commitment to accessibility is to first establish an *accessibility statement* or declaration within the overall mission statement of the museum (Salmen, 1998). The language and message of the *accessibility statement* should state that the museum embraces people with disabilities and strives toward the goal of providing access to the museum's programs, goods, services, and facilities (Salmen, 1998, p. 36). A museum's pledge to accessibility should then be integrated into all museum functioning activities, such as its policies, guidelines, plans, budgets, meetings, conferences, panels, and community outreach (Salmen, 1998, p. 36).

While both museums recognized the need to accommodate visitors with disabilities, neither the MCA nor the BMoCA had formal *accessibility statements* that acknowledge people with disabilities. While one may argue that a museum cannot individually acknowledge all members or groups of society, Salmen's point is not to single out a few select groups, i.e., people with disabilities, but rather, to internally acknowledge its pledge toward serving the community and then to publicly state the museum's commitment of programs and services for all persons, including people with disabilities.

The BMoCA's acknowledgment that it would like to eventually create an accessibility statement in the near future is an important realization that it is not where it wants or needs to be in terms of disability access. Likewise, although the MCA does not

have a specific accessibility statement, museum staff indicated that there is an implication of accessibility within its museum purpose statement (Museum of Contemporary Art Annual Report, 2009). This can mean one of two things: either the MCA is far beyond the need to publicly acknowledge its commitment to disability access because inclusion is already so well embedded into its policies and action that there is no need to "backtrack," or conversely it could mean that it has yet to fully understand how people with disabilities have been excluded from its front steps. In defense of the MCA, its 2009 annual report states "the MCA seeks to make contemporary art accessible for a broad spectrum of public audiences through a diverse range of exhibitions incorporating new and more traditional media, stimulating and hands-on educational programs and special events" (p. 2).

Salmen's building blocks are not designed to be a starting point for finger pointing, but rather serve as an internal, reflective lens. However, an art museum's self-reflection should be measured from inside out, not outside in. In other words, the most important determining factor of whether a museum has met any of Salmen's nine building blocks should be assessed from the perspective of the group who historically, either intentionally or unintentionally, has been excluded from art museums – people with disabilities. Otherwise, an art museum may fully believe that it has met and achieved access and inclusion, but unless people with disabilities believe they are welcomed inside the museum, no change or inclusion has truly taken place. From the perspective of people with disabilities, if there is no formal policy to indicate otherwise, why should people with disabilities think anything has changed inside the art museum's walls? Moreover, without any specific language or mention of visitors with disabilities within the MCA's vision or purpose statements, how are they to know that past treatment is no longer the current practice?

According to the *Everyone's Welcome* guidelines, museums are encouraged to validate their beliefs toward museum accessibility in formal, written policy statements that are open to the public, so it, too, can share in the museum's goals and direction. While generalized mission statements may assume to include audiences with disabilities, having a specific *accessibility statement* eliminates any doubt, and reiterates that a museum is committed to disability access and inclusion.

An example of a museum organization that goes beyond the guidelines found in *Everyone's Welcome* is found in Museum Victoria. Museum Victoria cares for Victoria's cultural and scientific collections over four different museum venues (Museum Victoria, n.d). Museum Victoria's Disability Action Plan (DAP) builds on current initiatives to ensure that people with disabilities are able to fully engage with museums (Museum Victoria, 2009). Museum Victoria's DAP provides a useful exemplary starting point for all art museums to fashion their own *accessibility statements*. DAPs, such as the one used by Museum Victoria, can also be used to respond to the four disability action plan outcome areas addressed in the Australian Disability Act 2006:

1. Reducing barriers to persons with a disability accessing goods, services and facilities;
2. Reducing barriers to persons with a disability obtaining and maintaining employment;
3. Promoting inclusion and participation in the community of persons with a disability; and
4. Achieving tangible changes in attitudes and practices which discriminate against persons with a disability.

Performance indicators are also important in the development of an accessibility policy statement or action plan, particularly to ensure museums gauge the effectiveness of their disability access strategies (National Museum of Australia Annual Report, 2008). For example, the National Museum of Australia in Canberra includes disability strategies

containing performance indicators and performance measures specific to educational programs created for people with disabilities (National Museum of Australia Annual Report, 2008). While the BMoCA and the MCA openly support disability access, neither museum utilizes performance indicators to measure the effectiveness of their disability access strategies.

Given that there are still museums that do not utilize accessibility guidelines such as *Everyone's Welcome*, or implement DAPs like Museum Victoria, it may be premature to assume that museums will readily use performance indicators to develop an accessibility policy. However, if museums can apply disability strategies containing performance indicators to their educational programs for people with disabilities, then both the museum and its educational programs would benefit by becoming more accessible as well as by providing enriched learning museum experiences for all.

Another essential component of an effective access policy should be the creation, recognition, and training of an *accessibility coordinator*. Most art museums do not have the funding to hire an independent *accessibility coordinator*. Lack of funding, however, does not abrogate the responsibility or need for such a position. Art museums already strained by funding, therefore, can simply delegate this role as a shared position between qualified volunteers or staff members. Each person can easily serve as a specialist for a specific accessibility goal, such as coordinating effective communications or developing staff training programs. While the BMoCA and the MCA did not have an official *accessibility coordinator*, they both had staff who assumed similar roles. For example, the BMoCA's director of youth programs was in charge of the new access program for youth and adults with disabilities, *BMoCA Access*, and at the MCA, each department had one person who is

responsible for ensuring that accessibility standards are met. Because the primary task of the *accessibility coordinator* is to oversee the implementation of an overall accessibility program, the coordinator helps ensure inclusion, outreach, and learning. The *accessibility coordinator* is also largely responsible for ensuring museum staff understands the importance of social inclusion, museum educational outreach, and especially issues regarding disability access.

According to Salmen (1998), an *accessibility coordinator* has the responsibility to promote disability access by making sure that (1) art museum staff attitudes are supportive of disability access and learning, (2) art museums provide educational outreach programs for those with disabilities, and (3) that Salmen's nine building blocks toward accessibility are being met and maintained (p. 37). For example, the Philadelphia Museum of Art employs an *accessibility coordinator* and an accessibility manager both of whom oversee these tasks. The Metropolitan Museum of Art (MET) in New York takes it a step further and has an entire access coordination division within its education department. Within the MET's access coordination division are a full-time *access coordinator*, a part-time *access coordinator*, and a full-time program administrator (C. Gunther, personal communication, January 7, 2011).

Given the importance of the role of an *accessibility coordinator* and the fact that other museums have implemented this role in the endeavor to be accessible institutions, the absence of specific *accessibility coordinators* at the BMoCA and the MCA is made more evident. While the BMoCA and the MCA are making admirable efforts to provide programs for people with disabilities, it would appear that implementing an *accessibility coordinator* would only further augment their efforts. Museum staff may argue that lack of funding does

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not allow for the hiring of an *accessibility coordinator,* however, as an alternative, this responsible may be added to the role of a current museum staff member. However, merely assigning the title, *accessibility coordinator,* to museum staff without regular disability access training would have little impact on the desired outcome of accessibility.

In order to facilitate interest, attitudes and programs that support and foster QOL and Normalization for people with disabilities, museums should create an *accessibility advisory council* (AAC). An AAC's role is to provide expert advice to the *accessibility coordinator*, director, and museum board on disability policies and practices (Salmen, 1998, p. 38). An AAC may be specifically appointed or could be a qualified existing council given additional responsibilities that provides input on a wide variety of accessibility issues (Salmen, 1998, p. 38). Ideally, the AAC would be comprised of professionals familiar with the ADA in the U.S or the equivalent DDA in Australia and preferably some who have a disability or significant disability training and/or education (Association of Science Technology Centers, n.d.).

Neither the BMoCA nor the MCA have a formal AAC, although both museums have qualified individuals informally functioning in this capacity who could serve together and form an AAC. For example, BMoCA could create an advisory council using its museum director, staff from *Imagine!* and selected BMoCA museum staff members, such as the director of youth programs who is already in charge of *BMoCA Access*. Likewise, the MCA could coordinate a similar AAC comprised of community members with whom it already liaises. For example, there are a variety of people from *Accessible Arts* who already are working with the MCA, depending on the area of need and their area of expertise. To their credit, it appears that the BMoCA and the MCA have groups of people who are functioning

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as an AAC. The advantage of a formal AAC, however, is that it gives credibility to the

AAC, provides for more consistent sharing of ideas, and is offers a more efficient forum for

discussion of accessibility goals. Guidelines, such as *Everyone's Welcome* can assist

museums in formulating such councils and provide a specific vision of how to implement

and achieve accessibility goals.

The importance of disability awareness training for museum staff members is

important because it communicates a positive message of inclusion and accessibility

(McLaren, 2007, p. 5). *Staff training* is most effective when it is provided on a regular basis.

Training should cover techniques to help break down attitudinal barriers between staff and

people with disabilities, provide specific and accurate information on the needs of people

with disabilities, educate staff regarding the legal responsibilities of the museum, and

develop staff expertise on accessibility-related solutions to foster team effort (Salmen, 1998,

p. 40). By making accessibility *staff training* an ongoing part of all educational efforts,

accessibility then becomes "normal" and more easily implemented within the museum

(Salmen, 1998, p. 40). *Staff training* also helps to ensure that the museum services made

available to persons with disabilities are carried out in such a way that experiences are as

close as possible to or the same as the regular circumstances and ways of life of people

without disabilities (Nirje, 1992, p. 19). At the time of this study, the BMoCA had not

conducted formal *staff training* to educate museum staff on issues and needs of people with

disabilities. The BMoCA did not report any negative staff attitudes toward their accessibility

outreach programs. This could be an indication of positive staff attitudes or simply one of

indifference. The MCA, however, does conduct *staff training* on a yearly basis on a variety

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of issues, including disability access. In fact, training is mandatory of all MCA staff and lasts for one to two days.

Formal research has not been conducted by either museum on the nature of museum staff attitudes toward disability and disability outreach programs. Three primary themes surfaced as to why this appeared to be the case, such as lack of resources, time, or the sensitivity of this type of research. From conversations with both the BMoCA and the MCA staff, it was evident that staff wished to do more but did not have the human resources to do so. However, *staff training* provided on a regular basis can impact staff attitudes and social values toward people with disabilities and thereby more effectively foster enjoyment, inspiration, and creativity for audiences with disabilities. Effective art museum *staff training*, therefore, may result in positive changes in action, behavior, and learning of visitors with disabilities.

The MCA is already ahead of the curve in its staff training, but it may want to consider increasing the number of days per year in which museum staff undergoes training in areas of disability access and inclusion. More training would mean museum staff possess greater levels of knowledge and understanding of disability access issues. Conversely, BMoCA may want to commence *staff training* on disability access by using its established connections with staff from *Imagine!* This would seem a wise choice given that both organizations would stand to benefit from such a partnership. For example, the BMoCA would benefit by becoming more fully accessible and inclusive and possibly drawing more regular audience groups from *Imagine!* In addition, the BMoCA staff would gain greater insight into the needs and wants of people with disabilities which may ultimately help to foster improved educational outreach programs for people with disabilities. *Imagine!* would

in turn benefit by being able to raise greater awareness of their organization through partnerships with the museum.

The *review* of all museum *programs, facilities,* activities*, services, and policies are required by law (Salmen, 1998, p. 42). In addition, it is also important to help determine how well an art museum facilitates participation for people with disabilities. The BMoCA conducts a review of the *BMoCA Access* program each time it is offered to the general public. This consists of a review session with an external disability professional from *Imagine!* to determine weaknesses and strengths of the program. These sessions are documented so museum staff may refer back to notes when implementing future changes. Based on this internal review, program improvements are then made the next time the program is offered.

Existing museum facilities and programs are also reviewed at the MCA and also during the post-season. This *review* process involves aspects of physical access as well as program access. For example, there is a walk-through with every exhibition which ensures the gallery spaces are wheelchair accessible and that label heights are correct. In addition, after each education program, museum education staff write a program review including evaluations of the program.

The strategy of *review of existing facilities and programs* ensures accessibility for people with disabilities and holds museums accountable to their commitment to social inclusion for all audiences and also fosters sound disability access policy (Association of Science Museum Technology Centers, n.d.). Without the *review of existing facilities and programs*, museums have no way of knowing if what they are doing is effective and accessible. In addition, museums may not be able to tell which facilities and programs might

need to be changed or eliminated. Since the goal of disability access is ongoing, the periodic review of programs and facilities is essential. As new education programs are developed, art museums should be mindful that offering an inclusive program is only the initial step in achieving accessibility.

A fundamental technique that art museums sometimes overlook is consulting with individuals with disabilities when *planning for accessibility*. Emancipatory disability research suggests that art museums should consult people with disabilities whenever a museum considers creating, modifying, or implementing program and services for people with disabilities (Hollins, 2010, p. 228). Not only does this provide deeper insight into the needs of those who will be impacted the most, it also allows for the art museum's *accessibility statement* to be put into full practice (Salmen, 1998, p. 36). The access policy does not simply lie dormant in a desk drawer, but is moved into action and serves as a measurable indicator that the museum is dedicated to achieving its disability access goals.

BMoCA's *Good Vibrations* initially was designed through contact with a variety of institutions that cater for young people with a variety of disabilities. After considerable collaborative *planning, Good Vibrations* was designed and developed (Phelps and Wallace, 1998, p. 23). Once both programs were in place, BMoCA and the MCA consulted with the local community regarding their attitudes toward a museum outreach program. While the BMoCA had not conducted any research or *planning* on the community's reaction toward the *BMoCA Access* program at the time of this study, the BMoCA museum board often was consulted as representatives of the outside community. The MCA has also conducted research regarding the views of the local community toward their programs for people with disabilities. The MCA staff indicated that they would like more time to devote to more in-

depth planning with the disabled community. However, due to lack of staff and limited time and resources this is rarely possible (M. Garcia, personal communication, January 27, 2010).

An overall and not surprising theme emerged from both BMoCA and the MCA – lack of staff and limited time and resources impede further progress in disability access. Understandably, there is only so much time and resources a museum can invest into a program. Given their already busy schedules, it is admirable that both museums have instituted an education outreach program for people with disabilities. However, if *staff training* regarding disability access could be increased, perhaps museum staff could work more efficiently in implementing and *planning for accessibility*. Museum staff could then build a seamless accessibility *planning* process into the design and planning stages of each educational outreach program and museum function without adding significantly to their already hectic schedules. In other words, if a museum desires to be fully accessible, rather than viewing *planning for accessibility* as something which must be "added on" or "fit into" their schedule, *planning for accessibility* could be incorporated as the normal standard for museum staff. For example, rather than spend the time and resources to develop an education outreach program and then ask whether it's accessible, museum educators who are equipped with education, training, and disability access knowledge can, from the beginning, design, plan, and implement accessible program features. This saves both time and valuable resources.

The BMoCA did not outwardly *promote* and *advertise* its accessibility programs directly to people with disabilities. Museum staff stated that this was largely because of existing attitudes from people with disabilities concerning the desire for normalcy and to be treated like everyone else. The BMoCA also indicated that it did not want to unnecessarily

draw attention to things like symbols, and ramps which, according to the BMoCA, are not generally viewed in a positive light by people with disabilities. In addition, because of a small marketing budget, and the fact that the *BMoCA Access* program at the time of this research was not open to the general public, outward *promotion* and *advertising* of the museums accessibility was not deemed essential. Instead, in order to promote the *BMoCA Access* program, the BMoCA staff contacted employees from *Imagine!* to make them aware of a new educational outreach program for people with disabilities. Further *promotion* of *BMoCA Access* was carried out through word of mouth and the *Imagine!* website.

Art museums need not have a dedicated marketing department to effectively spread their message and commitment toward accessibility. Nearly two billion people and growing, regularly use the Internet to access information (World Internet Usage Statistics, n.d.). Having a strong web presence can provide a powerful, yet inexpensive opportunity to generate public awareness for any museum program. Thus, it would be beneficial for the *BMoCA Access* program to be available online. While respecting people with disabilities desire for normalcy is important, providing one small paragraph on the BMoCA website indicating that there is a disability access program could be viewed as a missed opportunity to broadcast to additional audiences its *BMoCA Access* program (Access Program, n.d.). In addition, a more detailed description and images of past *BMoCA Access* programs would be beneficial for people to see what the program consists of and what to expect when they visit. BMoCA could also easily implement testimonials, a marketing form of emancipatory disability research theory (Hollins, 2010, p. 229). This not only encourages participation but also helps market the program via the most cost effective source of marketing – word of mouth.

Art museums should be mindful of their accessibility information on their website. Websites that merely refer to the physical accessibility of the museum or limited services, such as assisted listening devices, accommodations for services animals, and large print signage, fail to fully and effectively meet the needs of people with disabilities. Art museum websites should include in-depth information about the museum's accessibility statement, accessibility coordinator, and additional information about inclusive and accessible programs offered to people with disabilities.

More and more businesses and non-profit organizations are realizing the power of world of mouth marketing. This is a largely being achieved through two social media giants: Facebook® and Twitter®. The BMoCA's social network presence is updated regularly promoting the museum's upcoming events and exhibitions, however, there is no mention, discussion, or promotion of the *BMoCA Access* program. Facebook® and Twitter® can be treated as an extension of an art museum's web page and as an impactful method to *promote* and *advertise* the *BMoCA Access* program. In fact, more people now visit Facebook® than Google® (Pepitone, 2011, para. 1).

Utilizing BMoCA's online presence, coupled with social media is an easy, inexpensive and effective way to increase awareness and *BMoCA Access* participants. Not all people with disabilities have access to the Internet so these marketing methods should not be the only means to promote and advertise. For example, another effective marketing method is to become a welcoming partner with the disabled community. Art museums should regularly contact local disability organizations and invite them to their programs. Sending an email invitation or making a phone call does not cost the museum anything.

There was no formal marketing or *advertising* campaign developed by the MCA to *promote* the *Good Vibrations* program specifically toward people with disabilities. MCA staff noted that *Good Vibrations* was reliant on a variety of sources of funding which can make *promotion* and *advertising* more challenging. However, the MCA implemented a variety of marketing techniques to promote the *Good Vibrations* program. The MCA created a website specifically for *Good Vibrations* which describes the artists who created the art for the program, a chronological history of how it was created, and lists updates of when the caravan will travel again (Good Vibrations, n.d.). The *Good Vibrations* website is also linked to the official MCA website. The *Good Vibrations* website provides a potentially rich platform on which the MCA may advertise and foster visitor participation both before and after a visit to the *Good Vibrations* caravan. However, since the *Good Vibrations* initial debut in 2006, only once in 2007, was there an updated blog entry regarding the caravan and project when a MCA staff member posted a discussion about the project at a conference in New Zealand and then again when the caravan hit the road in 2008 to travel to Wollongong. Also, the *Good Vibrations* caravan had been to Victoria in 2009, yet there was no announcement of this and no update or discussion of the event or of participant's comments. However, since the *Good Vibrations* program is not a permanent, ongoing program, it likely is challenging for museum staff to keep current and up-to-date information about the *Good Vibrations* program. In addition, it may not be financially realistic for the MCA to provide funds to employ a staff member who would regularly monitor this website. As an alternative to the *Good Vibrations* site, the MCA could create a free Facebook® page for *Good Vibrations* or utilize the museum's current general Facebook® page to advertise this program. Images, videos, and other links can easily be added to Facebook® which would

provide potential museum visitors with rich visual information and an easy means by which to tell others about the program.

Another way that the MCA utilized the *Good Vibrations* program as a promotion tool was in conjunction with the International Day of People with Disabilities (Special Event, n.d.). For the duration of this event, the *Good Vibrations* campervan was positioned on the lawn out front of the MCA in full view of people passing by. The local community was then able to experience the unique installation inside the accessible caravan. Hosting special events such as these are inexpensive methods to advertise and promote the *Good Vibrations* program to a wide variety of audiences.

The MCA also promoted the *Good Vibrations* program through colorful brochures (Museum of Contemporary Art, 2006). The content of the brochure included information about the artists and artist's statements, the locations of where the campervan had travelled, the museum staff that were involved, and the sponsors of *Good Vibrations*. In addition, press releases were also created for advertising the program when it initially toured in 2006 to Australian schools, as well as in 2009 when it toured to the state of Victoria.

The MCA staff also promote the *Good Vibrations* program in professional museum arenas designed to share news about its program practices for audiences with disabilities. For example, in 2007, the then museum educator in charge of *Good Vibrations* presented a lecture at the 2007 *Aotearoa New Zealand Association of Art Educators* (ANZAAE) conference. This lecture further promoted awareness of the MCA's educational outreach program for people with disabilities on an international level. While few, if any, of the *Good Vibrations* target audience likely heard this presentation, MCA's presentation demonstrated to other art museums how they can implement similar programs, thereby indirectly

promoting museum accessibility. *Staff training* and education is a core building block of

accessibility and more museums should be encouraged to present their accessible programs

at conferences so museums staff and can bring back new ideas to the museum education

department.

As the MCA and the BMoCA demonstrate, art museums can enhance their

community standing and image, as well as provide unique and educational outreach

programs for people with disabilities. Communicating that a museum has taken action to

improve disability access can be a powerful marketing strategy (Wyatt-Spratt et al, 1999, p.

14). Including access information within the museum and in promotional materials is

important to ensure the message is heard by as many audiences as possible. Museums, like

BMoCA and the MCA did, may also promote themselves through disability organizations to

directly reach audiences with disabilities. In sum, BMoCA and the MCA demonstrated a

variety of effective advertising and promotion techniques for their programs. Moreover, in

the area of online and social media advertising, there remain additional cost effective

opportunities that all museums can take advantage of.

Under the ADA in the U.S. and the DDA in Australia, visitors to art museums have

the legal right to file complaints and lawsuits against museums that do not provide

accessible programs and facilities (Salmen, 1998, p. 48). The purpose of a *grievance process*

is twofold. First, it highlights the commitment of the art museum to provide equal

opportunities. Second, the *grievance process* helps lesson any unnecessary hindrances or

barriers during the museum experience.

Both the BMoCA and the MCA had general procedures for people to submit a

grievance and instituted a time frame for the review and resolution of any complaints.

Although the BMoCA does not have an official *grievance process* to resolve complaints pertaining to museum or program disability access, the current director of the museum handles general forms of grievances or complaints. Similarly, the MCA does not have a specific *grievance process* relating to disability access, but grievances are handled through the operations department and the visitor coordinator. While it is commendable that both museums have basic grievance procedures in place, there is no specific procedure in place for people with disabilities. If museums are to be fully accessible and inclusive, addressing the needs of all visitors, implementing a grievance procedure for people with disabilities is an important next step.

BMoCA does not have an *ongoing review of access efforts* for the entire museum, however, it does have an informal process for the *BMoCA Access* program. Due to the fact that the program is still in its infancy, *BMoCA Access* is continually being reviewed by the program director, in conjunction with staff from *Imagine!* In a similar way, the MCA does not have a specific process of *ongoing review of access efforts*. Instead the MCA's process is an internal process that usually takes place after each program or event in the form of a debriefing session.

Museums often can consult with experts in the field of accessibility to ensure the continuation of successful outreach programs to people with disabilities. For example, the BMoCA consulted with persons from external sources such as other museums who had implemented similar programs.[20] The purpose of consultation was to gain helpful input on the design and implementation of the *BMoCA Access* program. BMoCA also consulted members of *Imagine!* who were very familiar with implementing accessible programs.

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[20] BMoCA staff contacted museum staff from the Museum of Modern Art (MoMA) in New York and the Philadelphia Museum of Art in Pennsylvania.

Likewise, the MCA also used various external accessibility consultants and worked with *Accessible Arts* in order to ensure successful ongoing review of access efforts.

Accessibility in the Art Museum

More recent constructivist models of learning in the art museum aim to empower the visitor and allow for people to experience and manipulate things for themselves (Hooper-Greenhill, 2000, p. 3). In essence, constructivist learning models give visitors more freedom to learn and make meaning in their own way, which in turn, makes art more accessible to everyone. Constructivist models also focus on dynamic human engagement and social relevance (Lankford, 2002, p. 140). In a similar way, disability theory empowers individuals with disabilities and promotes them as socially relevant, upholding concepts of QOL and Normalization. QOL and Normalization enables people with disabilities to participate in the decision-making that affects their own lives and is enhanced by their full integration and inclusion within the community (Schalock, 1996, p. 123).

When applied to the museum, the concepts of outreach and social inclusion also relate to constructivist and disability theories as they also promote the inclusion and empowerment of the museum visitor. The BMoCA and the MCA's disability access programs parallel Normalization (Nirje, 1992, p. 19). Since Normalization seeks to ensure that patterns of life and conditions of everyday living are as close as possible or the same as the regular circumstances and ways of life of the community, the BMoCA and the MCA's approach to accessibility seeks to be inclusive (S. Crothers, personal communication, November 4th, 2009).

The concept of social inclusion has been embedded into central governmental policy in places like the UK, U.S., and Australia and is increasingly becoming more prevalent in

the museum industry. Socially inclusive concepts have contributed to greater awareness of the needs and wants of audiences with disabilities along with the publication of other strategies for disability access. For example, the Cultural Ministers Council of Australia and National Arts and Disability Strategy offer similar objectives to Salmen's building blocks for access. Through the Cultural Ministers Council of Australia, the Australian government has agreed to improve the opportunities and choices for people with disabilities to more fully engage with and participate in the arts (Cultural Minister's Council, 2009). The National Arts and Disability Strategy (2009), an Australian government initiative developed along with the arts and disability sectors, provides a framework to promote a more inclusive society and to highlight best practices. The strategy is guided by the principles of the United Nations Convention on the Rights of Persons with Disabilities, ratified by the Australian Government on July 17th, 2008. The National Arts and Disability Strategy is one of several whole-of-government approaches in Australia being developed to support social inclusion and address the barriers to full and active citizenship and participation faced by people with disabilities.

The National Arts and Disability Strategy (2009) was developed by a national public consultation process, which included the art industry, the disability sector, and people with disabilities, in the hope of improving access and participation for people with disabilities. The strategy is comprised of the following four focus areas: (1) Access and Participation, (2) Arts and Cultural Practice, (3), Audience Development, and (4) Strategic Development (Cultural Minister's Council, 2009).

Area one focuses on access and participation in the arts which relates closely to Salmen's *Everyone's Welcome* document. According to the National Arts and Disability

Strategy (2009), people with disabilities face a range of barriers which can prevent them from accessing facilities, services, and resources. Barriers may include physical, communication, attitudinal or financial barriers. As a result, the National Arts and Disability Strategy developed three goals to help address these barriers:

Goal One is designed to improve physical access to arts organizations and cultural facilities for people with disabilities (National Arts and Disability Strategy, 2009). This includes identifying the levels of accessibility in cultural institutions and addressing the needs of people with disabilities in facility management plans (National Arts and Disability Strategy, 2009). Another strategy for achieving goal one is the promotion of best practice in inclusive programming and universal design for all arts organizations and cultural facilities. *Goal Two* is designed to ensure that information on access to arts and cultural facilities is widely available to all (National Arts and Disability Strategy). *Goal Three* is designed to ensure that people with disabilities have access to quality arts and cultural experiences (National Arts and Disability Strategy, 2009).

The second area of The National Arts and Disability Strategy focuses on arts and cultural practice. Artists and arts/cultural workers with disabilities share the same needs and aspirations as any other artist or worker, such as suitable creative spaces, support, opportunities to present their work, training, mentoring, and career opportunities (National Arts and Disability Strategy, 2009). The National Arts and Disability Strategy goals and strategies are designed to help address these common issues. *Goal One* improves access to arts and cultural funding programs for people with disabilities (Cultural Minister's Council, 2009). *Goal Two* increases the opportunities for the presentation of work by artists with disabilities (Cultural Minister's Council, 2009). *Goal Three* is designed for artists and

arts/cultural workers with disabilities to have greater access to mentors and professional development opportunities (Cultural Minister's Council, 2009).

The third area of The National Arts and Disability Strategy addresses audience development. While there is increasing discussion regarding work produced by artists with disabilities, it is often difficult for artists with disabilities to reach a wider audience. Artists with disabilities require opportunities to present and market their work to gain recognition and advance their careers. In addition, audiences need greater opportunities to experience the talents and achievements of people with disabilities which in turn help to challenge community perceptions toward people with disabilities. According to the National Arts and Disability Strategy (2009), one goal would be to raise the profile of disability arts in the community to increase opportunities for audiences to experience work by artists with disabilities. This could be improved with greater exposure of art and artists with disabilities, as well as initiatives which encourage and promote sponsorships with partners for artists with disabilities, and the recognition of artistic achievements of people with disabilities (National Arts and Disability Strategy, 2009).

The final area of The National Arts and Disability Strategy is strategic development. This provides strategies for local and state governments to improve policy development and planning for arts and disability issues. The main goal in strategic development is that the needs and aspirations of people with a disability are addressed in arts and cultural policy and program development and the impact of policies and programs on people with a disability is measured (Cultural Minister's Council, 2009). Strategies that may help accomplish this goal are the facilitation of greater collaborations between governments and peak bodies representing people with disabilities, the encouragement, support and promotion of people

with disabilities in art and cultural policy planning, and the identification of gaps in research

data on arts and disability issues (Cultural Minister's Council, 2009).

The framework of the National Arts and Disability Strategy strongly resembles many

of the concepts laid out in *Everyone's Welcome* as both strategies address the issue of

disability access in art museums. More overt similarities can be seen in Salmen's first step

toward accessibility (*accessibility statement*), step four (*staff training*), step five (*review of

existing facilities and programs*), step six (*planning for accessibility*), and step seven

(*promoting and advertising accessibility in the museum*). While the overall goals of the

National Arts and Disability Strategy are relevant, and the similarities between them and the

nine steps in *Everyone's Welcome* are evident, the National Arts and Disability Strategy

appears to be broader and does not provide a specific, detailed guideline of what museums

can actually do in order to become accessible cultural institutions. As the two case studies of

the BMoCA and the MCA indicate, while museums may have good intentions to be

accessible, there are still gaps in some of the disability access strategies. If museums were to

follow more specific guidelines such as those found in *Everyone's Welcome*, the goals of

becoming more accessible and offering quality accessible programs to people with

disabilities may become more of the norm and not the exception for all art museums.

Further research on the issue of disability access in the art industry has been carried

out by *Accessible Arts*, New South Wales' peak arts and disability organization through the

document *Speak Up: Arts and Disability Priorities for NSW* (Accessible Art, 2009). The

purpose of this research was to: (1) address and redress discrimination with a prioritized and

targeted approach and thereby motivate social change, and (2) to provide local communities

with a lobbying tool to gain additional support for their arts and disability endeavors

(Accessible Arts, 2009). *Speak Up* was carried out over a three year time period and consulted over five hundred representatives from twenty-two communities in both the arts and disability sectors across regional and metropolitan New South Wales (Accessible Arts, 2009). Similar to the National Arts and Disability Strategy (2009), *Speak Up* identifies issues and barriers faced by people with disabilities and recommends solutions to address these issues and create positive change (Accessible Arts, 2009).

While this illustrates that other governments are recognizing the importance of disability access, these frameworks found in *Speak Up* and *National Arts and Disability Strategy* are not as comprehensive as Salmen's *Everyone's Welcome* document. The nine steps in *Everyone's Welcome* provide more detailed guidelines and break down accessibility into more manageable, achievable, and measurable steps.

Strengths and Limitations of the BMoCA and the MCA

The strengths of the MCA and the BMoCA museum access programs are seen in that they became aware of major accessibility issues upon the removal of their physical museum barriers, and then took action. Eventually both museums made systematic attempts to make the museum space accessible and in addition, create educational outreach programs specifically to people with disabilities. Both accessible programs had received positive feedback from program participants, caregivers, family, other museum staff, and the media. When both museums and programs were examined in light of Salmen's nine steps to accessibility, it was evident that many of the nine steps were being addressed and implemented.

However, despite accessibility efforts, neither the MCA nor the BMoCA

implemented all of the recommended nine steps in *Everyone's Welcome* and like all museum

education programs there are areas that might be improved in order to maximize their

program's potential. Museum staff can only do so much given their already overreaching

schedules and lack of resources. However, in some instances making changes to be more

accessible does not have to cost money or increase one's workload. For example, both

museums could make more efficient use of the Internet and social media to help *promote*

and advertise accessibility in the museum with a few clicks of the mouse. Likewise,

assigning a staff member the additional task of *accessibility coordinator* does not require

adding any new staff or additional funding.

By their very nature, art museums are staffed with creative people where, for them

thinking outside the box to find solutions to inherent problems are presumably the norm. If

these same skills are applied to disability access, once armed with *Everyone's Welcome* and

the nine building blocks, art museums have all the resources they need to begin achieving

the goal of disability access.

Conclusion

People with disabilities deserve the right to enjoy, experience, and learn about art

like the rest of society. Governments and independent cultural bodies in both the U.S. and

Australia are becoming more acutely aware that people with disabilities are still

experiencing violations of their cultural and social rights (Accessible Arts, 2009). The

Australian examples of the *National Arts and Disability Strategy*, and *Speak Up: Arts and*

Disability Priorities for NSW are indications of the positive changes taking place in the arts

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and cultural environments for people with disabilities. Furthermore, they reiterate and strengthen the importance of Salmen's strategies laid out in *Everyone's Welcome*. They do not, however, provide practical guidelines for museums to achieve accessibility as found in *Everyone's Welcome*.

Salmen's nine-step strategy to accessibility as found in *Everyone's Welcome,* illustrates that accessibility is important for all museum audiences and builds upon learning and disability theories which seek to be inclusive to all people. In addition, *Everyone's Welcome* provides sound strategies for museums to implement in order to achieve accessibility in manageable steps. The *Everyone's Welcome* guidelines are founded in U.S. governmental policy which aligns closely with those of Australian government policy regarding disability access in the cultural sector. Museums in both Australia and the U.S. have begun to implement strategies which resemble those found in the *Everyone's Welcome* document and have also provided accessible educational programs for people with disabilities. This suggests that museums recognize the importance and need to improve disability access. If art museums will utilize the nine-steps to disability access found in *Everyone's Welcome*, not only will museums work toward the goal of becoming fully accessible institutions, they also will be better equipped to provide richer learning experiences for people with disabilities.

Change never comes quickly or easily. More research is needed to fully understand how art museums can effectively achieve museum access. Further research must examine the nature and effectiveness of specific accessibility steps, e.g., the cost effective promotion and advertising strategies to reach people with disabilities. Research should also compare and contrast the similarities and differences of accessibility strategies to determine best

practices for museum accessibility. All art museums would benefit from a universal set of accessibility guidelines. If these guidelines were designed as manageable steps, similar to *Everyone's Welcome,* but could be applied to each country's disability laws, not just the U.S., then museums around the world can better achieve a universal accessibility standard. Perhaps a good starting point is to develop guidelines based on the United Nations Convention on the Rights of Persons with Disabilities (United Nations, n.d.). Additional research should examine why more art museums have not implemented Salmen's nine-steps, as well as the effectiveness and research uptake of the nine-steps to ensure that the gap between research, policy, and action is minimized.

The MCA and the BMoCA are working toward disability access and have made significant efforts to improve disability access in their educational outreach programs for audiences with disabilities according to Salmen's *Everyone's Welcome* guidelines. Salmen's nine-step strategy of accessibility, however, is merely a starting point to address the need for improved disability access in art museums. Until all art museums fully adopt and implement recommended accessibility guidelines, like those found in *Everyone's Welcome*, the community of people with disabilities will remain socially excluded from art museums.

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Acronym Key

AAM – American Association of Museums

ACROD – Australian Council for Rehabilitation of Disabled

ADA – Americans with Disabilities Act

ASTC – Association of Science-Technology Centers

BMoCA – Boulder Museum of Contemporary Art

CBD – Central Business District

CCB – Community-Centered Board

DAP – Disability Action Plan

DDA – Disability Discrimination Act

GLO – Generic Learning Outcome

ICIDH – The International Classification of Impairments, Disabilities, and Handicaps

LIRP – Learning Impact Research Project

MA – Museums Australia

MCA – Museum of Contemporary Art, Sydney

MLA – Museums, Libraries and Archives Council

QOL – Quality of Life

RCMG – Research Centre for Museums and Galleries

SEO – Search Engine Optimization

UK – United Kingdom

UN – United Nations

UPIAS – Union of the Physically Impaired Against Segregation

U.S. – United States

WHO – World Health Organization