

Inclusive Tourism in Public Spaces: An Accessibility and Visitor Experience Study of Mobility-Impaired Individuals on Malioboro Street

Zachary Ryan¹, Mohamad Rachmadian Narotama^{1,2*}, Iswan Bahri¹ & Hikmah Kamarudin³

¹ Tourism Study Program, Faculty of Cultural Science, Universitas Gadjah Mada, Indonesia

² Center of Transportation and Logistics Studies, Universitas Gadjah Mada, Indonesia

³ Studies of Building Surveying, College of Built Environment, Universiti Teknologi MARA, Malaysia

Keywords:

Disability,
Malioboro street,
Accessibility,
Tourist
experience.

Abstract.

Everyone has the right to tourism, including individuals with disabilities. Unfortunately, not all tourist destinations can ensure a positive experience for disabled travelers. For instance, even popular sites like Malioboro Street in Yogyakarta may fail to provide an accessible and inclusive experience for people with disabilities. This study investigates the experiences of wheelchair users regarding facilities, culinary areas, and community responses in the Malioboro Street area. The research methodology employed in-depth interviews, observational fieldwork, and data documentation. Interviews were conducted with 10 participants who were wheelchair users and had visited Malioboro Street. The findings reveal that wheelchair-using tourists could not provide positive feedback on the facilities, culinary zones, or community responses in the area. This is attributed to the lack of accessibility in navigating facilities and dining areas, which were not adequately designed for wheelchair users. Additionally, the low awareness among local residents and workers—such as street vendors and shop staff—in assisting disabled tourists with special needs further contributed to their negative experiences. These barriers hindered participants from forming favorable impressions, underscoring the need for improved accessibility and inclusive practices in public tourism spaces.

Kata Kunci:

Disabilitas,
Jalan Malioboro,
Aksesibilitas,
Pengalaman
wisatawan.

Abstrak.

Setiap orang memiliki hak untuk melakukan wisata, termasuk individu dengan disabilitas. Sayangnya, tidak semua destinasi wisata dapat menjamin pengalaman yang positif bagi wisatawan penyandang disabilitas. Misalnya, bahkan tempat populer seperti Jalan Malioboro di Yogyakarta mungkin gagal menyediakan pengalaman yang dapat diakses dan inklusif bagi penyandang disabilitas. Penelitian ini menyelidiki pengalaman pengguna kursi roda terkait fasilitas, zona kuliner, dan respons masyarakat di kawasan Jalan Malioboro. Metodologi penelitian yang digunakan meliputi wawancara mendalam, observasi lapangan, dan dokumentasi data. Wawancara dilakukan dengan 10 peserta yang merupakan pengguna kursi roda dan telah mengunjungi Jalan Malioboro. Temuan menunjukkan bahwa wisatawan penyandang disabilitas tidak dapat memberikan umpan balik positif terkait fasilitas, zona kuliner, maupun respons masyarakat di kawasan tersebut. Hal ini disebabkan oleh kurangnya aksesibilitas dalam menavigasi fasilitas dan area makan, yang tidak dirancang secara memadai untuk pengguna kursi roda. Selain itu, rendahnya kesadaran di antara penduduk lokal dan pekerja—seperti pedagang kaki lima dan staf toko—dalam membantu wisatawan penyandang disabilitas dengan kebutuhan khusus turut berkontribusi pada pengalaman negatif mereka. Hambatan-hambatan ini secara kolektif menghalangi peserta untuk membentuk kesan yang menguntungkan, menekankan perlunya peningkatan aksesibilitas dan praktik inklusif di ruang pariwisata publik.

* Corresponding author.

E-mail addresses: m.r.narotama@ugm.ac.id (Mohamad Rachmadian Narotama).

Article history: Received 27th July 2025; Accepted 13th May 2026; Available 31st August 2026.

1. Introduction

Tourism accessibility is a fundamental right for all individuals, including those with disabilities or special needs. To ensure inclusive tourism experiences, many countries have implemented policies and programs to enhance accessibility in their destinations. For example, the UK government introduced the “*Access for All*” initiative, providing grants to businesses to improve accessibility in their facilities. Similarly, the United States enforces the Americans with Disabilities Act (2010), which mandates accessibility standards for public accommodations such as hotels, restaurants, and tourist sites. The European Union has also developed guidelines for web and mobile application accessibility in public sector services. These efforts reflect the critical role of accessibility in shaping both the physical and emotional experiences of disabled tourists, empowering them to travel independently and freely (Aliyah et al., 2012).

Accessible tourism destinations enable individuals with disabilities to break free from limitations and immerse themselves in new environments, cultures, and social interactions. Dancy & Dickson (2009) emphasize the profound social, psychological, and economic benefits of tourism for people with disabilities, particularly those facing daily challenges such as discrimination and limited access to public services. As integral members of society, disabled individuals deserve equitable opportunities to enjoy recreational spaces, unwind with loved ones, and engage in leisure activities. However, many continue to face barriers to full participation in tourism. Wheelchair users are commonly used as a benchmark group in accessibility studies due to the fixed spatial and infrastructure restrictions that limit their movement (Sahoo & Choudhury, 2023; Beale et al., 2006). Wheelchair users’ experiences with deficiencies thereby highlight structural accessibility issues that are likely to impact broader accessible design, generally improving usability for their demographics, such as elderly persons and families with small children through a broader universal design principle (Iwarsson & Stahl, 2003).

This study looks into the case study of Malioboro Street, a prominent cultural and commercial hub in Yogyakarta, Indonesia. Malioboro Street, located in the heart of Yogyakarta, is a bustling tourist destination renowned for its vibrant shopping and cultural attractions. According to Beritasatu.com, Ekwanto, Head of the Malioboro Cultural Heritage Management Unit, reported that the area welcomed 105,270 visitors between April 19 and May 1, 2023, with wheelchair users accounting for 3.2% of this total. Despite its popularity, efforts to accommodate tourists with disabilities remain inconsistent. For instance, an accessibility audit conducted by Ohana Indonesia—a local disability advocacy group—revealed inadequate accessibility features for disabled visitors in both Malioboro Street and Yogyakarta City Hall (Kabarkota.com, 2021).

Existing studies on accessible tourism in Indonesia have mainly focused on facility compliance, policy, and general experience. Few studies acquire subjective experience from disabled tourists to understand the inclusive tourism ecosystem at a destination comprehensively; both physical and psychological barriers that may reduce their overall experience. More detailed research can also advocate the voices of tourists with disabilities. Thus, this study aims to examine wheelchair-using tourists’ perceptions of spatial and psychological/emotional experience in the Malioboro Street area. Guided by our theoretical framework based on Mossberg’s (2007) tourist experiences concept and Kim & Adu-Ampong’s (2024) capability approach, the research addresses the following question: How do wheelchair-using tourists experience Malioboro Street in terms of mobility and emotional comfort, and how are these experiences shaped by the current condition of facilities when assessed against established accessibility standards?

2. Literature Review

2.1. *Review of Accessible Tourism and Mobility-Impaired Accessibility*

Accessibility refers to the provision of inclusive infrastructure and services that ensure equal opportunities for all individuals, including the elderly and persons with disabilities, across all aspects of life and livelihood. Based on UN Convention on the Rights of Person with Disabilities (2006) Article 9, to promote independent living and full societal participation for persons with disabilities, state parties are required to implement appropriate measures that guarantee equal access to the physical environment, transportation, information, and communications systems—including digital technologies and other facilities lies with governments, institutions, and stakeholders, particularly in tourism, where infrastructure development must integrate technical accessibility standards to accommodate individuals with disabilities (Duignan et al., 2023). This includes incorporating accessible design during the planning, construction, and maintenance of public spaces to guarantee equitable participation in societal activities.

In the context of tourism, accessibility is embodied in the concept of accessible tourism, which is defined as “*tourism that addresses the needs of individuals with disabilities, including mobility, visual, auditory, and cognitive impairments*” (UNWTO, 2016). Its core objective is to ensure equal opportunities, enabling disabled tourists to travel and enjoy experiences comparable to those without disabilities. Buhalis & Darcy (2011) conceptualize accessible tourism as the practice of designing universally inclusive travel experiences, transcending mere accommodations to proactively address the diverse needs of disabled individuals. This theory underscores the importance of embedding accessibility into the foundational planning of tourism services rather than treating it as an afterthought. A critical question that arises is how the principle of accessibility enhances the tourism experience for people with disabilities.

The implementation of accessibility standards is guided by both international and national legal frameworks. At the international level, The UN Convention on the Rights of Person with Disabilities (2006), mandates states to ensure accessibility in public spaces. In the context of Indonesia, these principles are operationalized through Law 8/2016 on Persons with Disabilities and *Ministerial Regulation No.14/PRT/M/2017, which provide technical guidelines for inclusive infrastructure*. However, the implementation of these inclusive principles remains inconsistent across regions and sectors.

Pravita et al. (2023) critically examine Indonesia’s disability rights framework under Law Number 8 of 2016 article 16, revealing significant gaps between regulatory mandates and on-ground accessibility in tourism. Their study highlights that despite legal provisions for cultural and tourism rights of persons with disabilities (PwD) still face systemic exclusion due to inadequate infrastructure, unenforced policies, and fragmented stakeholder coordination. This underscores an urgent need for policy internalization beyond legislative symbolism, particularly in popular tourist destinations such as Yogyakarta.

Zahari et al. (2023) also highlight the persistent accessibility challenges in tourism, especially within heritage tourism destinations, where preservation requirements and physical barriers often limit inclusive access. Zahari et al. (2023) demonstrate through go-along interviews with wheelchair users in Malaysian heritage sites that architectural features (e.g., steep ramps, locked accessible toilets, staircases) and attitudinal hurdles (e.g., untrained staff) directly impede social participation. Their findings reveal that physical accessibility alone is insufficient; inclusive experiences require proactive environmental adaptations (e.g., tactile guidance, audio cues) and staff sensitization to convert heritage assets from “spaces of exclusion” to “sites of belonging” (Zahari et al., 2023, p. 489). This aligns with Darcy’s emphasis on universal design but exposes unique tensions between conservation ethics and disability inclusion in historical urban landscapes.

Theoretical advancements reframe accessibility beyond physical infrastructure toward capability empowerment. (Kim & Adu-Ampong, 2024) introduce Sen's *capability approach* as a transformative lens, arguing that accessible tourism must prioritize PwD's *freedom to achieve valued function* (e.g., autonomous travel, cultural engagement) rather than merely providing facilities. This paradigm shifts highlights conversion factors—personal (skills), social (caregiver support), and environmental (policy)—that determine whether resources translate into meaningful opportunities. For instance, economic disparities may render accessible infrastructure irrelevant if PwD lacks financial means or agency to utilize it (Kim & Adu-Ampong, 2024:8) Thus, true inclusivity requires dismantling *ableist norms* through interdisciplinary policy redesign that centers PwD's diverse aspirations.

When accessibility is reconceptualized through this capability lens, its benefits extend beyond conventional economic metrics to encompass fundamental freedoms. For tourists with disabilities, accessibility in tourism fosters opportunities to explore new destinations, engage with diverse cultures, and build social connections, thereby enhancing self-confidence and independence. Such inclusivity allows them to participate in society on equal terms (Darcy & Dickson, 2009). For destinations, accessible tourism not only expanded market reach and revenue but also enhanced social equity and reputational capital as inclusive hubs, attracting ethical travellers and strengthening community well-being.

2.2. Theoretical Framework: Experience, Capability, and Regulations

The previous section has elaborated how inclusivity and accessibility cover a wide range of aspects; from physical to psychological, this in turn is reflected by the overall tourist/visitor experience. Following, this section attempts to provide a theoretical framework to analyze this case study (See Figure 1).

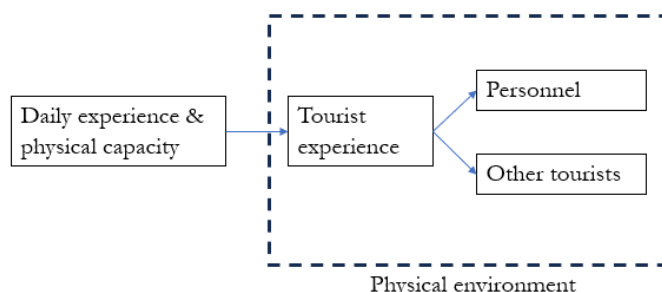


Figure 1. Theoretical framework for personal capability induced tourist experience
Source: Fletcher et al. (2018)

The theoretical framework incorporates physical and non-physical aspects that contribute to the overall experience. According to Fletcher et al. (2018), tourism experience refers to “the perception retained or recalled by an individual from their interaction with tourism products, environments, and services”. This is in line with other operational definitions of the term, such as by (Sujanto, 2009) defining experience as “impressions retained in consciousness after observing or engaging with an object or event”. These responses derive from sensory inputs (auditory, visual, tactile) and contextual factors (objects, language, etc.). For the purpose of analyzing tourist experience in the context of this study, we borrow Mossberg’s (2007) overarching framework of tourist experience; the personal experience is influenced by the physical setting that the subject is situated in, how they interact with tourism product (attraction, amenities, etc.), tourism related personnel (guide, restaurant staff, etc.), and other people the subject interacts with – both tourists and local communities. For the purpose of this research focusing on people with disabilities, we consider that personal tourist experience also

significantly depends on personal capability and capacity to move, gain access, and interact with the tourism environment. Using (Kim & Adu-Ampong, 2024) Capability approach, we understand that the ability to participate and enjoy is a critical part of the experience; it is subjective but, collectively, to some extent can be generalized to other mobility-impaired tourists. As Reindrawati et al. (2022) argue, embedding disabled voices in policy and design—from transportation to attraction development—is essential for transforming tourism into an equitable, empowering experience.

In developing countries like Indonesia, mobility-impaired individuals frequently encounter unaccommodated needs at destinations, including inaccessible pathways, insufficient seating, and inadequate signage. The barriers limit independent exploration and diminish experiential quality. For instance, wheelchair users in Surabaya reported frustration when unable to access attractions like zoos due to steep stairs or absent ramps, forcing reliance on companions and amplifying feelings of exclusion (Reindrawati et al., 2022). Another study also confirmed by go-along interview studies in Malaysia. Kamarudin et al. (2023) found that even in urban areas like Kuala Lumpur, mobility-impaired travelers encounter physical, psycho-emotional, and attitudinal barriers that disrupt their independence and quality of experience. These findings support the view that inaccessibility is not merely a technical issue but a form of social exclusion with structural and emotional dimensions. This study revealed that participatory input from mobility-impaired travelers is critical for identifying overlooked barriers and co-creating solutions (Kamarudin et al, 2023).

In contrast, studies have shown how accessible conditioning can alleviate mobility-impaired tourists' experiences; Indonesian tourism villages (e.g., Kaki Gunung Wedon, Bon Pring Lake, Krabyakan Water Source, and Jenon Lake), flat roads, ramps, and attentive staff enable wheelchair users to engage fully with cultural and natural attractions (Kusufa et al., 2022). Through this study, participants emphasized that such facilities—combined with staff empathy—fostered memorable experiences, proving that inclusive design outweighs cost considerations in destination selection. Kusufa et al. (2022) highlight that for persons with mobility disabilities in Indonesian tourism villages, the choice of destination is often based not on price, but on the site's ability to address their mobility-related challenges. Facilities that reduce physical and emotional barriers—such as accessible toilets, pathways, and trained human resources—are perceived as central to creating memorable and dignified tourism experiences. Collectively, these studies underscore that mobility-impaired tourists prioritize dignity, safety, and autonomy in their experiences. Facility accessibility is not merely a logistical concern but a determinant of emotional well-being and social inclusion.

Following our theoretical framework, we start with the spatial conditionings by assessing facilities using the Indonesian Regulatory framework Permen PUPR No.14/2017. This regulation mandates that public buildings ensure safe, comfortable, and barrier-free access *to, from, and within* their premises for all users, including individuals with disabilities. Key indicators include the presence of accessibility features (e.g., ramps, tactile pathways), navigability for wheelchair users, and overall compliance with inclusive design principles. Accessibility in infrastructure is a prerequisite for shaping high-quality tourism experiences, particularly for wheelchair users, whose ability to engage with destinations depends heavily on inclusive design. Furthermore, the study addresses subjective responses – contributing to a holistic evaluation of accessible tourism requires the integration of both quantitative standards and qualitative user responses. For people with disabilities, responses are inherently multidimensional, encompassing emotional, functional, and psychosocial dimensions. Suryabrata (1993) conceptualizes responses as opinions or reactions formed after encountering stimuli. In the context of this study, responses refer to how wheelchair-using tourists perceive the accessibility of facilities, culinary zones, and local community attitudes in Malioboro Street.

3. Research Methods

This study employs a qualitative methodology with a descriptive approach, conducted in the tourist area of Malioboro Street, Yogyakarta. Data were collected between March 10 and May 8, 2023, through participant observation and in-depth interviews, with an emphasis on deriving insights inductively from empirical data rather than testing predetermined hypotheses. Participant observation was carried out directly along key areas of Malioboro Street, including pedestrian pathways, culinary zones, and public facilities, to capture real-time accessibility conditions. In-depth interviews were conducted with wheelchair-using tourists who had previously visited the location, applying a purposive, criterion-based sampling strategy. Due to the limited presence and accessibility of mobility-impaired tourists on site, a mixed-mode interview approach was adopted: three wheelchair users were interviewed in person on site, while seven were contacted via WhatsApp and interviewed online to accommodate their mobility constraints and availability. Contacts were made available by local rehabilitation organization YAKKUM. All participants provided informed consent prior to participation, ensuring adherence to ethical research standards.

Purposive sampling was used to find mobility-impaired tourists that have visited Malioboro Street in the past year. The study does not aim to generalize statistically to all visitors but to identify recurring accessibility patterns and barriers experienced by wheelchair users. Therefore, research focuses on depth, relying on qualitative interviews until the data is saturated, hence data from ten participants can be justified for this research. Following data collection, qualitative analysis was performed using a contextual evaluation framework (Soerjono, 2016) which prioritizes understanding issues within their broader context rather than isolating causal relationships. Interviews were transcribed and followed by analysis which adhered to three criteria: 1) providing operational context for collected data; 2) organizing and categorizing facts based on the investigated issues; and 3) accurately and transparently interpreting observable data. The analytical process began concurrently with data collection, aligning with an inductive analytical strategy (Sutopo, 2018).

Thematic analysis proceeded through several steps; familiarization of data by repeated reading, initial coding was used to identify broad aspects relating to travel experience as a mobility-impaired tourist. These coded data were then further analyzed in specific observed locations which is compared to regulatory standards. The discussion themes derived from the analysis are perceived experience relating to Malioboro Street – famous for its unique heritage ambience, attractions around Malioboro Street, facilities, and interaction with other people; especially other tourists and tourism related personnel during respondents' visit. In this study, we only observe public spaces that are considered part of the Malioboro visitor experience, and do not include assessment of museums, as each museum is by itself can be considered a specific environment or setting that needs their own detailed observation regarding disabled visitor experience.

Triangulation was made by comparing the subjective experience of wheelchair users to physical assessment of facilities based on government regulation. Observation for the assessment was conducted in several places; Malioboro Street, Teras Malioboro food court, Malioboro Mall, and Titik Nol Malioboro. The thematic analysis was developed iteratively, reflecting on the findings and relating it with the theories used. This corroborative method supports how qualitative data from several personal experiences may be validated and used to make generalizations from the findings.

4. Result and Discussion

This section presents findings from interviews with wheelchair-using tourists regarding their experiences accessing facilities, culinary zones, and interactions with the community and street vendors in Malioboro Street. Interviews focused on intrinsic factors shaping their perceptions,

supplemented by observational data on facility conditions and societal attitudes. Responses were analyzed using an adoption of Mossberg (2007) framework (See Figure 1 in the previous section), which observes personal experiential feedback that is also influenced by the individual's (in)capabilities.

4.1 Mobility-impaired tourist experience on Malioboro Street

Mobility constraints occur because of overcrowding, exacerbating issues like uneven pavements, high curbs, and steep ramps. Many reported exhaustion from the physical effort required. Thus, led to limited exploration. Some chose to remain in vehicles, viewing attractions from afar due to inaccessible pathways. A participant lamented:

“My experience in Malioboro was deeply unpleasant. Facilities for physically disabled tourists are insufficient, though the street now feels more spacious without roadside parking.” (Direct interview, March 18, 2023).

Table 1. Analysis of Wheelchair-Disabled Visitors' Perceptions

Variable	Positive Feedback	Negative Feedback	Conclusion
Pedestrian pathways	1. Pathways feel more spacious post-revitalization. 2. Areas near Pasar Beringharjo are suitable for leisurely strolls 3. Diverse culinary options available	1. Uneven pathway surfaces. 2. Many sidewalks lack low curbs. 3. Inconsistent curb heights complicate street crossing 4. 182 out of 220 shops have stairs without ramps. 5. No sheltered areas during rain. 6. Step ramps require assistance from strangers. 7. Reduced mobility during crowded periods. 8. No staff assistance available. 9. Some visitors opt to remain in vehicles or sit beside pathways.	Predominantly negative (9 negative, 3 positive).

Source: Author's Analysis (2023)

Although some positive feedback was noted, most participant responses were negative. This negativity stems from poor accessibility features of the pedestrian pathways, such as uneven surfaces for wheelchairs, inconsistent curb heights, difficulty crossing due to excessively high curbs, steep ramps without handrails (requiring assistance from others), lack of staff to assist with steep ramps, numerous stair-only store entrances, inadequate shelter during rain (due to small steps at shopfronts), and reduced mobility during crowded periods (e.g., peak seasons like Eid al-Fitr). These issues led most participants to remain stationary near seating areas or avoid exiting their vehicles entirely, observing the surroundings from inside. Thus, wheelchair-using tourists' experiences with pedestrian pathway accessibility can be concluded as negative.

As a premier tourist destination in Yogyakarta, Malioboro Street has not been designed and maintained to prioritize accessibility for visitors with disabilities, particularly wheelchair users. To further evaluate physical accessibility, observational research was conducted. Observations focused on visible infrastructure guided by parameters from *Indonesian Ministerial Regulation No. 14/PRT/M/2017 (JDIH, 2017)* on accessibility standards. The findings are summarized in Table 2 below.

Table 2. Observational Findings of Malioboro Street

Facility	Parameter	Yes/No	Notes
Pedestrian Pathways	Stable, durable, weather-resistant, and non-slip surface.	Yes	Durable and non-slip, but uneven surfaces.
	Safety curbs (low curbs) to prevent vehicle encroachment.	Yes	Available.
	Minimum curb height is 10 cm and width 15 cm	No	Uneven curbs; heights vary (see Figure 3)
	Ramps at intersections, pedestrian zones, or building entrances.	No	Only 38 out of 220 shops have ramps; most entrances feature stairs.

Source: Author's Analysis (2023)

**Figure 2.** Malioboro Street's Safety Curb as a Barrier for Wheelchair Users

Based on observations of the 2 km pedestrian pathway along Malioboro Street, it was found that the pathway surface is strong, weather-resistant, and non-slip but unstable due to unevenness and sidewalks difficult for wheelchair users to navigate. It was also noted that the low curbs along the pedestrian pathway are uneven, with some sections higher or lower than others. Additionally, many store entrances still lack ramps, increasing difficulty for wheelchair users. According to the parameters of *Indonesian Ministerial Regulation No. 14/PRT/M/2017*, Malioboro Street's pedestrian pathways meet the requirement of curb standard in terms of dimension, but the unevenness of the curb and pavement tiles contributes to difficult mobility for wheelchairs. The findings provide input for government regulations to include evenness as a standard, as it significantly affects mobility. The findings also show low conformity of shops in terms of providing accessible entrances from the street.

4.2 Experiences and perception of accessibility in local attractions

Besides the main street, which is the main attraction, where visitors experience the ambience of Jogja's heritage, the main places that visitors are attracted to are Plaza Malioboro Mall, Teras Malioboro culinary area, and Beringharjo Market. The infrastructure in these places, such as ramps and elevators, was not accessible. The ramps were not equipped with handrails, which made store access hazardous. *Plaza Malioboro* and *Pasar Beringharjo* lacked elevators, restricting mobility to the ground floor. The elevator was only available at *Teras Malioboro 1*, but restricted for staff only, leaving wheelchair users unable to access upper floors. One participant urged:

"At minimum, there should be more than one accessible toilet, provide elevators, and ensure all shops have ramps—even if they're steep—to make entry easier." (Direct interview, March 19, 2023)



Figure 3. Building Facilities in Malioboro Without Lifts



Figure 4. Narrow Mobility Space in Malioboro's Building Facilities

Findings showed that while all three buildings have multiple floors, only Teras Malioboro 1 has a lift. Plaza Malioboro and Pasar Beringharjo rely solely on escalators and stairs, inaccessible to wheelchair users. Besides the lack of lifts, wheelchair mobility inside buildings like Pasar Beringharjo, Teras Malioboro 1, and Teras Malioboro 2 is severely restricted by narrow aisles (often barely accommodating two people) and vendors obstructing pathways (Figure 5). Malioboro Street's culinary offerings, while diverse, present significant accessibility barriers for wheelchair users. Observations revealed that popular eateries, including the popular *Teras Malioboro 1* and street-side stalls, lack adequate space for wheelchair maneuverability (Figure 6). These conditions contributed to negative experiences for most wheelchair-using participants.

Tables and chairs are densely arranged, leaving less than 90 cm of clearance—insufficient for standard wheelchair turning radii (WHO, 2023). Compounding this issue is the prevalence of *lesehan* (floor-seating) establishments (Figure 6), which are structurally inaccessible to wheelchair users who cannot transition from their mobility devices. Interviews indicated that 75% of participants opted for takeaway services, citing discomfort from cramped spaces and social stigma.



Figure 5. Movement Space in the Culinary Center of Teras Malioboro 1



Figure 6. Culinary Center of Teras Malioboro 2

One participant noted, “I avoid dining onsite—people stare, and there’s no room to move.” While some appreciated the culinary variety, these positives were overshadowed by systemic design flaws that contravene *Indonesian Ministerial Regulation No. 14/PRT/M/2017*, which mandates accessible seating and circulation spaces in public venues (Table 3).

Table 3. Analysis of Responses to the Culinary Area on Malioboro Street

Positive Feedback	Negative Feedback	Conclusion
Some participants enjoyed Malioboro’s culinary variety.	1. Insufficient space for wheelchair mobility. 2. Floor-seating models are inaccessible. 3. Majority prefer takeaway due to discomfort.	Predominantly negative (3 negative, 1 positive).

Source: Author’s Analysis (2023)

Table 3 highlights the culinary area’s limited inclusivity for wheelchair users, as most seating arrangements do not accommodate mobility aids and often force visitors to opt for takeaway instead of dining in. While the culinary diversity of Malioboro was positively acknowledged, the lack of accessible seating and spatial flexibility undermines the social and experiential value of culinary tourism for disabled visitors. These findings mirror those of Kusufa et al. (2022) who emphasize that even low-cost infrastructure like flat flooring or adaptive furniture can transform everyday activities into dignified tourism experiences. Without these adjustments, a vibrant food culture becomes an

isolating experience, reinforcing the need for inclusive spatial planning in all tourism components—not just major attractions.

While participants appreciated Malioboro's diverse food options, structural barriers and social discomfort undermined the dining experience. Overcrowding and narrow seating arrangements physically excluded wheelchair users from communal dining spaces, forcing most to opt for takeaway. The failures of culinary areas align with (Reindrawati et al., 2022), where environmental barriers (overcrowding) generate shame and withdrawal, transforming potential joy into emotional labor. These findings illustrate how physical infrastructure, social practice, and symbolic representation intertwine to shape exclusion.

4.3 Inaccessibilities of Supporting Facilities in Malioboro Street Area

The parking area was described as excessively distant, with no designated spaces for wheelchair users. Participants emphasized the need for reserved parking zones, noting that existing facilities catered mainly to *pedicabs (becak)* and *horse-drawn carriages (andong)*. Parking layouts often blocked pathways to restrooms, forcing participants to navigate cumbersome detours. Furthermore, only one wheelchair-accessible restroom exists at Kilometer Zero (see Figure 8), far from the main area. Other toilets were criticized for narrow entrances and inadequate space, deterring wheelchair users from exploring fully. As a result, participants avoided extended visits, opting instead for shorter trips to specific locations such as *Teras Malioboro*, *Pasar Beringharjo*, and *Plaza Malioboro* as needed.



Figure 7. Entrance and Interior of the Wheelchair-Accessible Restroom

Despite the presence of a wheelchair-accessible restroom, interviews revealed negative perceptions of its accessibility. Criticisms include one restroom, located far at Kilometer Zero; frequent elevator breakdowns, rendering the underground restroom inaccessible (alternative access requires stairs); parking obstructions blocking restroom entry; insufficient space for wheelchairs inside the restroom. One participant remarked:

“If accessible restrooms were available at multiple points along Malioboro Street—not just one at Kilometer Zero—more wheelchair-using tourists would visit frequently.”

Observations of parking accessibility revealed that Malioboro Street lacks designated wheelchair-accessible parking. Interviews indicated that wheelchair users currently rely on the Abu Bakar Ali parking area, deemed the most viable option. However, this parking area poses challenges. A member of the Yogyakarta Disability Committee stated:

“Before constructing this parking area, we proposed dedicated first-floor parking for disabled groups, as modified vehicles for disabilities vary significantly. Unfortunately, this plan was never realized.”

Despite recent parking reorganization, the absence of designated wheelchair-accessible parking resulted in negative feedback, including distant, cramped, and poorly located parking; uneven sidewalks, unramped speed bumps, and heavy traffic complicating access from Abu Bakar Ali parking to Malioboro Street. One participant emphasized:

“Designated parking for disabled individuals would greatly assist our community.”

Ensuring accessible facilities, culinary areas, and inclusive community responses, including engagement with street vendors (PKL) were critical to meeting the needs of all tourists.

In addition to conducting observations on facility accessibility in Malioboro Street, the researcher also performed interviews to understand wheelchair-using tourists' perceptions of accessibility, which includes pedestrian pathways, restrooms, parking areas, and building facilities. A summary of the analysis of these responses is presented in Table 4 below.

Table 4. Analysis of Wheelchair-Disabled Visitors' Perceptions of Facilities in Malioboro Street

Variable	Positive Feedback	Negative Feedback	Conclusion
Restroom	Some participants appreciated the single accessible restroom despite its limitations.	1. Only one accessible restroom, located far from the main area. 2. Need for multiple accessible restrooms. 3. Frequent elevator breakdowns. 4. Parking obstructions block restroom access. 5. Insufficient space for wheelchair maneuverability. 6. Unfriendly staff attitudes.	Predominantly negative (6 negative, 1 positive).
Parking	-	1. No designated wheelchair-accessible parking. 2. Distant and difficult to access. 3. Cramped parking spaces. 4. Designed parking would significantly aid disabled visitors. 5. Lack of accessible parking discourages visits.	Negative
Building facilities	-	1. No elevators in Pasar Beringharja and Plaza Malioboro. 2. Narrow aisles due to crowded merchandise placement. 3. Vendors obstructing already narrow pathways. 4. Absence of elevators limits exploration and diminishes tourism experience.	Negative

Source: Author's Analysis (2023)

Table 4 reveals that most physical facilities along Malioboro Street remain inaccessible or inadequate for wheelchair users, reinforcing structural exclusion despite regulatory frameworks like Permen PUPR No. 14/PRT/M/2017. While some positive impressions emerged, particularly regarding pedestrian space and culinary variety, they were overshadowed by fundamental access barriers such as steep ramps, the absence of elevators, and the lack of designated parking. These challenges reflect findings by Reindrawati et al. (2022), who note that mobility-impaired tourists often face infrastructural neglect that diminishes their independence and satisfaction. Moreover, the absence of staff assistance and the inaccessibility of commercial areas support Kamarudin et al. (2023) argument that exclusion is not only physical but also emotional. From the perspective of the capability approach

by Kim & Adu-Ampong (2024), the inability to convert available spaces into autonomous experiences undermines the very goal of inclusive tourism.

Subsequent observations focused on the wheelchair-accessible public restroom in Malioboro Street, of which only one exists. This restroom partially complies with *Indonesian Ministerial Regulation No. 14/PRT/M/2017* in aspects such as—restroom dimensions (221 cm x 155 cm), sufficient for wheelchair maneuverability; inward-opening door with 180° clearance for wheelchair users; accessible levers and grab rails. However, several criteria remain unmet—door width (80 cm < required 90 cm); lack of kickplates at the base of the door; absence of self-closing hinges; no panic lights, emergency sound buttons, or pull levers for emergencies.

4.4 *Attitude of Staff and Other Tourists Affecting Inclusive Experience*

A revealing experiment, where a participant feigned wheelchair maneuvering difficulties—exposed critical attitudinal barriers. Street vendors and parking attendants consistently ignored pleas for assistance, while foreign tourists intervened. This indifference reflects a normalization of exclusion in local service culture, contrasting sharply with global inclusivity standards (Kusufa et al., 2022). As one participant stated:

“They didn’t react at all—they even pretended to be busy. In the end, I was helped by a foreign tourist.”
(Direct interview, March 21, 2023)

The indifference between foreign and local response dichotomy further reveals how inclusive norms are globally mobile yet locally unadopted. This underscores an urgent need for systemic disability awareness training targeting Malioboro Street staff, vendors, and public service workers. The participant emphasized that publicizing information about Malioboro’s accessibility features and disability-friendly facilities through mass media could enhance visibility and encourage inclusive practices.

This spatial segregation was compounded by psycho-emotional disablism (Kamarudin et al., 2023), as participants reported discomfort from intrusive public scrutiny while attempting to eat. One participant noted:

“People stare as if I’m an exhibit. It’s easier to take food home than endure their gazes.” (Direct interview, March 21, 2023)

Additionally, participants reported discomfort from public scrutiny, with phrases like *“awkward stares”* and *“feeling out of place”* recurring in narratives. This social friction, coupled with inaccessible infrastructure, led many to avoid crowded areas entirely, opting instead to remain stationary or view attractions from vehicles. These findings highlight a disconnect between Malioboro’s status as a cultural hub and its failure to foster inclusive social practices, as outlined in Table 5.

Table 5 underscores the often-overlooked social and attitudinal barriers that significantly impact on the tourism experiences of wheelchair users in Malioboro. The lack of assistance from vendors, low awareness among other visitors, and discomfort caused by intrusive stares reveal that accessible tourism must address more than infrastructure—it must foster a culture of empathy and inclusion. These findings are consistent with those who argue that spaces become inclusive not only through physical design but also through social behaviors and awareness. Further stress the psycho-emotional toll of these barriers, which can invalidate physical access if not accompanied by supportive community responses. This confirms that true accessibility must be holistic, encompassing both the built environment and social interaction.

Table 5. Analysis of Perceptions Toward Community Responses in Malioboro Street

Positive Feedback	Negative Feedback	Conclusion
-	1. Street vendors did not assist wheelchair-using tourists' needs. 2. Vendors should proactively assist disabled visitors. 3. Low awareness among community members (staff and non-disabled tourists). 4. Most participants felt uncomfortable in crowded areas. 5. Some participants felt uneasy due to stares from others. 6. Need to enhance awareness of wheelchair users' specific needs.	Negative

Source: Researcher's Analysis (2023)

Community responsiveness emerged as a critical determinant of wheelchair users' experiences in Malioboro Street. Participant interviews and covert behavioral tests revealed low disability awareness among stakeholders. In one staged scenario, street vendors (*PKL*) and parking attendants ignored a wheelchair user feigning distress, with assistance ultimately provided by foreign tourists. Restroom staff were frequently described as “*unfriendly*” or “*indifferent*,” exacerbating users' discomfort.

These empirical findings align with the social model of disability Kamarudin et al. (2023), which posits that exclusion stems from environmental barriers—not individual impairments. The inaccessible parking, restrooms, and infrastructure at Malioboro exemplify structurally disabling conditions that force dependency and restrict autonomy, directly contradicting the principles of universal design. Furthermore, the psycho-emotional toll described by participants—mental exhaustion, frustration, and spatial avoidance—resonates align with Reindrawati et al. (2022) where inaccessible environments trigger negative emotional responses (e.g., humiliation, anxiety) that diminish experiential quality and deter repeat visitation. Critically, the absence of elevators and ramps reflects a participatory gap in urban planning; as emphasized by Kamarudin et al. (2023), mobility-impaired individuals are “experts of barriers” whose lived experiences must inform facility design. Without their inclusion in decision-making, interventions remain superficial, perpetuating exclusion despite cosmetic improvements like vendor reduction. Ultimately, Malioboro's failures underscore that accessibility is not merely a convenience but a *dignity imperative*—one that demands embedding inclusive design into tourism infrastructure to transform spaces of marginalization into places of equitable belonging.

5. Conclusion

This study explores the perceptions of wheelchair-using tourists regarding their experiences in Malioboro Street, focusing on facility accessibility, culinary areas, and community responses. The research involved ten wheelchair-using participants, selected for their direct relevance to the study's focus, as their lived experiences provide critical insights into accessibility challenges.

The qualitative descriptive analysis reveals that wheelchair-using tourists generally provided negative feedback on facilities, culinary accessibility, and community attitudes in Malioboro Street. First, regarding facility accessibility, uneven sidewalks, lack of ramps at shop entrances (182 out of 220 shops), and absent elevators in iconic locations like *Plaza Malioboro* and *Pasar Beringharjo* hinder mobility. In addition there is no designated wheelchair-accessible parking, and the sole accessible restroom at Kilometer Zero is far from the main area, often obstructed by parked vehicles.

Second, in terms of culinary accessibility, most participants opted for takeaway meals due to cramped dining spaces and the prevalence of *lesehan* (floor-seating) setups, which are inaccessible to wheelchair users. Third, regarding community responses, low awareness and indifference from street vendors

(PKL), staff, and non-disabled tourists exacerbated discomfort. Furthermore, participants reported feeling self-conscious due to public stares and avoided crowded areas, often remaining stationary or viewing attractions from vehicles.

These findings highlight how wheel-chair users' experience is affected by systemic failures in complying with *Indonesian Ministerial Regulation No. 14/PRT/M/2017* on accessibility and undermine Indonesia's commitments to the UN Convention on the Rights of Persons with Disabilities (CRPD), requiring both physical intervention and educating tourism personnel to cater people with all type of (dis)abilities. To transform Malioboro into an inclusive destination, urgent interventions are needed: (1) Infrastructure upgrades (ramps, elevators, accessible parking); (2) Policy enforcement to ensure compliance with accessibility standards; and (3) Community education to foster disability awareness and inclusive practices.

By addressing these gaps, Malioboro Street can align with global inclusive tourism benchmarks, ensuring equitable experiences for all visitors. It is important to note that since this research, Malioboro has seen some renovations which need to be continuously monitored.

References

- Aliyah, S., Nahar, A., Tinggi, S., Nahdlatul, I. E., & Jepara, U. (2012). Pengaruh Penyajian Laporan Keuangan Daerah Dan Aksesibilitas Laporan Keuangan Daerah Terhadap Transparansi Dan Akuntabilitas Pengelolaan Keuangan Daerah Kabupaten Jepara. *Jurnal Akuntansi Dan Auditing*, 8(2), 137–150. <https://www.neliti.com/publications/73595/>.
- Americans with Disability Act. (2010, September 15). *Guidance on the 2010 ADA Standards for Accessible Design*. U.S. Department of Justice Civil Rights Division. <https://www.ada.gov/law-and-regs/design-standards/standards-guidance/>.
- Beale, L., Field, K., Briggs, D., Picton, P., & Matthews, H. (2006). Mapping for Wheelchair Users: Route Navigation in Urban Spaces. *The Cartographic Journal*, 43(1), 68–81. DOI:10.1179/000870406X93517.
- Buhalis, D., & Darcy, S. (2011). Accessible Tourism: Concepts and Issues. *Tourism Planning & Development*, 1–316. DOI:10.1080/21568316.2011.603886.
- Darcy, S., & Dickson, T. J. (2009). A Whole-of-Life Approach to Tourism: The Case for Accessible Tourism Experiences. *Journal of Hospitality and Tourism Management*, 16(1), 32–44. DOI:10.1375/JHTM.16.1.32.
- Duignan, M. B., Brittain, I., Hansen, M., Fyall, A., Gerard, S., & Page, S. (2023). Leveraging accessible tourism development through mega-events, and the disability-attitude gap. *Tourism Management*, 99, 104766. DOI:10.1016/J.TOURMAN.2023.104766.
- Fletcher, J., Fyall, A., Gilbert, D., & Wanhill, S. (2018). *Tourism Principles and Practice*. www.pearson.com/uk.
- Indonesia's Disability Law No.8/2016. (2016). <https://peraturan.bpk.go.id/Details/37251/uu-no-8-tahun-2016>.
- IWARSSON, S., & STÅHL, A. (2003). Accessibility, usability and universal design—positioning and definition of concepts describing person-environment relationships. *Disability and Rehabilitation*, 25(2), 57–66. DOI:10.1080/dre.25.2.57.66.

- Kabarkota.com. (2021). *Malioboro Dinilai belum Cukup Aksesibel bagi Penyandang Disabilitas*. Kabarkota.Com. <https://www.kabarkota.com/malioboro-dinilai-belum-cukup-aksesibel-bagi-penyandang-disabilitas/>.
- Kamarudin, H., Kadir, S. A., Alias, R., & Othman, R. D. (2023). TRANSPORTATION BARRIERS CONFRONTED BY MOBILITY-CHALLENGED TRAVELLERS IN KLANG VALLEY. *PLANNING MALAYSIA*, 21(2), 240–251. DOI:10.21837/PM.V21I26.1274.
- Kim, S., & Adu-Ampong, E. A. (2024). Disabilities, functionings and capabilities: the capability approach in accessible tourism. *Current Issues in Tourism*, 28(2), 272–286. DOI:10.1080/13683500.2023.2300989.
- Kusufa, R. A. B., Nurfarida, I. N., Wilujeng, S., Firdaus, R. M., Kusufa, R. A. B., Nurfarida, I. N., Wilujeng, S., & Firdaus, R. M. (2022). Tourism Experience in Tourism Villages: Persons with Disabilities (PwD) Perception. *European Journal of Development Studies*, 2(4), 24–28. DOI:10.24018/EJDEVELOP.2022.2.4.126.
- Mossberg, L. (2007). A Marketing Approach to the Tourist Experience. *Scandinavian Journal of Hospitality and Tourism*, 7(1), 59–74. DOI:10.1080/15022250701231915.
- Pravita, V. D., Sembada, A. D., Santoso Muharam, R., Danang, P., Sekolah, T., Pariwisata, A., & Yogyakarta, I. (2023). FULFILMENT OF DISABILITY RIGHTS IN TOURISM POLICY. *Kepariwisataan: Jurnal Ilmiah*, 17(3), 204–219. DOI:10.47256/KJI.V17I3.251.
- Reindrawati, D. Y., Noviyanti, U. D. E., & Young, T. (2022). Tourism Experiences of People with Disabilities: Voices from Indonesia. *Sustainability 2022, Vol. 14, Page 13310*, 14(20), 13310. DOI:10.3390/SU142013310.
- Sahoo, Sushil Kumar, Choudhury, Bibhuti Bhusan (2023) Wheelchair Accessibility: Bridging the Gap to Equality and Inclusion. *Decision Making Advances*, 1(1), 63–85. DOI:10.31181/dma1120239.
- Soerjono, S. (2016). *Teori Perubahan Sosial*. Gramedia Pustaka Tama.
- Sujanto, A. (2009). *Psikologi Umum*. PT. Bumi Aksara.
- Suryabrata, S. (1993). *Psikologi pendidikan*. PT Rajagrafindo.
- Sutopo, H. B. S. (2018). *Metode Penelitian Kualitatif*. Universitas Sebelas Maret.
- UN Convention on the Rights of Person With Disabilities. (2006). *Article 9 - Accessibility | Division for Inclusive Social Development (DISD)*. Department of Economic and Social Affairs United Nations. <https://social.desa.un.org/issues/disability/crpd/article-9-accessibility>.
- UNWTO. (2016). Accessible Tourism for All: An Opportunity within Our Reach. *UNWTO Publications*. DOI:10.18111/9789284417919.
- WHO. (2023, June 5). *Wheelchair provision guidelines*. <https://www.who.int/publications/i/item/9789240074521>.
- Zahari, N. F., Kamarudin, H., Zawawi, Z. A., Rashid, R. A., & Bahari, M. M. (2023). HERITAGE TOURISM: A DISABLED PERSON'S RIGHTS TO ENGAGE IN SOCIAL ACTIVITY. *PLANNING MALAYSIA*, 21(1), 484–494. DOI:10.21837/PM.V21I25.1252.