

The joy of riding or walk of shame? The theme park experience of obese people

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Abstract

This exploratory study focuses on obese people's perceptions of their theme park experience. Given this study's objective and the gap in the literature on obese people's tourist experience, a qualitative research approach was adopted. In-depth semi-structured interviews were conducted. Participants revealed that their theme park experiences included a strong sense of humiliation. This is clearly associated with the interaction between their body, the physical environment and most importantly the human environment. Managerial implications are suggested.

Keywords: theme-park; obesity

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Introduction and literature review

More and more tourism scholars have been increasingly interested in the accessibility of disenfranchised segments of the population, whose physical characteristics hinder their tourist and leisure experiences. This interest is a response both to legal regulations and to societal recognition that tourism and mobility should be recognized as a social right. Obese people are not usually foremost in mind when discussing physical disabilities. Yet, these individuals face difficulties in many public places. This exploratory research focuses on their theme-park experience.

In 2011-2014, obese people made up some 36.5% of the adult population in the USA (Ogden *et al.*, 2015), and current trends indicate that this rate is on the rise (Fitzpatrick *et al.* 2018). The International Association of Amusement Parks and Attractions (IAAPA) reports that there are more than 400 major theme parks and amusement parks and attractions in the USA, and about 300 in Europe, hosting 375 million and 161 million visitors annually, respectively (<http://www.iaapa.org/resources/by-park-type/amusement-parks-and-attractions/industry-statistics>). If the proportion of obese visitors to theme parks matches that of the general population, then one third of all visitors are obese. To date, surprisingly, researchers and park administrators have paid little attention to this rapidly growing segment of their visitors.

While there are numerous studies on theme or amusement parks (e.g. Slåtten, Krogh, & Connolley, 2011; Wakefield & Blodgett, 1994), there seems to be a gap in the understanding of the nature of the visit experience of people whose body might be a barrier to full enjoyment and participation. This corresponds with the ongoing attention to the study of the body in tourism and hospitality (Crouch, 2000; Harris & Small, 2013; Pons, 2003; Pritchard & Morgan, 2011; Veijola & Jokinen, 1994).

Bitner (1992) identified three dimensions of the theme park experience which could assist in contextualising the barriers to its experience: visitors' initiative to participate, experience with fellow visitors, and interaction with the staff. As these dimensions involve both the personal and the interpersonal spheres, and with studies focusing on the accessibility of marginalized segments in mind, this study uses a holistic approach that emphasizes the significance of people's emotions, self-respect, and self-perceptions (Darcy, 2010; Poria & Beal, 2016).

The apparent gap in studies concerning obese visitors could be attributed to an overall lack of recognition, in research and the industry, of the role of visitors' body and physical appearance in shaping the tourist experience (Berdychevsky, Poria, & Uriely, 2013). This, despite the fact that elements such as one's body and the social stigma it may carry, are highly recognized when conceptualizing human behaviour.

Research objective

This exploratory study was guided by two objectives: first, to highlight the onsite theme park experiences of obese people and, second, to identify ways to overcome the hurdles and barriers they confront. The focus on obese people stems from their current proportion in the population, and more so, from indications that obesity will become more prevalent in the near future. Beyond its effect on tourism, the present research will also contribute to the broader field of obesity studies by enhancing our knowledge of the meaning and reality of obese people's leisure experience (Small & Harris, 2012).

Methodology

Given the exploratory nature of the study as well as the research objectives, a qualitative research approach was adopted. In-depth semi-structured interviews were utilized as a means to obtain

subjective accounts and allow for comparisons between participants' reports. The findings reported here are part of a larger research project focusing on obese peoples' tourist experience, conducted in the USA in Virginia and West Virginia. Initially, 40 people were contacted through Craigslist, and were offered \$20 for their participation; all those who responded ended up participating. For ethical reasons, participants were not asked about their weight or their BMI, and their definition of obesity or morbid obesity was by self-report. During the interviews, almost all participants revealed their weight and BMI, although they had not been asked about. The decision to focus on theme park visits evolved during the interviews. The interviewer (one of the authors) asked participants to relate to four components of the tourist experience: hotels, museums, restaurants, and flights. At the end of the interview, participants were asked to report on other tourism experiences related to their obesity. This procedure is based on studies elucidating the significant role of remembering noteworthy elements of past vacations, including unpleasant emotional experiences (Fuchs, Chen, & Pizam, 2015; Torres, Wei, & Hua, 2017), as well as studies highlighting the importance of memorable moments on the perception of the tourist experience (Poria, Butler, & Airey, 2007).

Interestingly, of the entire sample (N=40), 14 participants volunteered to share "an additional frustrating experience", and all referred to the same issue – theme parks. Some even wondered why they had not been asked about theme-parks to begin with ("Why did you ask me about museums and not about my visit to Disneyland?"). In addition, participants mentioned that if asked to compare the various components of their tourist experience, flights and theme parks would be the worst. The interviews were inspired by the recognition that the body is a socio-cultural entity inscribed with meaning. Moreover, it is suggested here that the visit experience is a corporeal experience as well as emotional one.

Findings

The 14 obese/morbidly obese participants made it clear that visiting theme parks was a major component of their travel experience, referring almost exclusively to theme parks in the USA, primarily Disneyland, Disney World and in and around Virginia (e.g. Busch Gardens in Williamsburg). Interestingly, they revealed that theme parks were often the main – if not the sole reason for travel. For some, it was 'a dream come true'. Moreover, it was often part of a long-awaited planned family vacation for which participants had saved money for long time to cover the high costs.

The interviewees had clear and high expectations of the theme park to be visited. It also became evident that participants had planned accurately how to experience the site. Ruth commented about her recent vacation with her two children and husband: '...it was me and my two kids. We planned it and dreamt about it for almost two years. We knew exactly what we were going to do. We knew exactly which rides we should take. When will we eat, when does the show begin. Everything. You have to know, it is a very expensive vacation for us. We were all so excited – my kids, myself and even my husband.'

Theme park issues

The content analysis of the responses highlighted several noteworthy issues. All but one of the 14 participants in the obese/morbidly obese group complained about the long distances between park attractions, the long queues, and the "endless waiting time for each ride." The interviews revealed that the participants' physical condition resulted in mobility difficulties, which, in turn, caused frustration and fatigue. Participants argued that due to their weight and size '...it is extremely difficult to move between the park's various attractions or to stand on line'. Some voiced their frustration that obesity is not formally classified as a disability. Therefore, they could not use the special line for people with disabilities or the golf carts. However, the main concern that all participants shared and expressed was

their strong feeling of humiliation, caused mainly by their inability to experience a ride (due to the small seats or too-short seatbelts), and by the insult of being asked to leave the line – all in front of other visitors.

The content analysis clearly showed that the participants were greatly embarrassed by the attraction operators' request that they leave the line in order not to block the next visitors. This request was especially embarrassing when made in front of their children. Participants used words such as "humiliating," "embarrassing," "devastating," and "I wanted to cry." Dana said, "I felt the world was shattering... and all of it in front of my kids. I was devastated." Moreover, this is especially difficult when children are not allowed on a ride unless accompanied by a parent, or when the children wanted to take the ride with the parents only. Clearly, these highly memorable humiliating moments are crucial for the understanding of the painful theme park experience of obese people.

The findings indicate that the reported experience might cast a long shadow onto the future. Participants stated that their humiliating experiences tainted their theme park visit with hard-to-heal wounds, some going so far as to claim that "it ruined our vacation". To aggravate the situation, some participants felt that bystanders seemed to be happy seeing them and their children barred from the ride, being punished for their intentional choice to be obese. Interviewees felt that bystanders' facial expressions indicated that it was socially acceptable, judicious, and even commendable to punish obese people, by expulsion from the line: "they view us as people who made a choice to be obese, so treated us like people who chose to be disabled and enjoy government support paid for by ordinary working people's taxes".

Obese people's feeling that others view them as "thieves", was a shameful and humiliating experience that lingered on as a painful memory. Thus, the joy of ride turns into a public walk of shame.

Summary

The findings indicate the theme park experience is highly affected by obese peoples' look and body size. Their body determines their interaction with the physical and human environments, creating a physically challenging and mentally humiliating visitor experience. The physical environment is challenging for obese people. It calls upon them to cover considerable distances, and this entails great effort. The restrictive park regulations have a major effect on obese people's park experience, an effect that has not yet been documented in tourism studies. At the core of the experience is participants' perception that the bystanders who watched and stared at them when asked to leave, considered the request to be a mark justice made. The ensuing sense of humiliation was highly devastating. The findings indicate that people's appearances should be considered when conceptualizing the tourist experience, especially the theme park experience. The findings suggest that obesity should be approached as a "social disability" which might be more punitive and restrictive than physical disability. In other words, it is the social arena that may create long-term negative memories rather than the physical attributes of the site.

The findings highlight that accessibility should be conceptualised not only in terms of the individual's ability to move from one point to another, but also in terms of respect and acceptance by others. Relying on previous studies, it is suggested in line with the neo-liberal approach (Small & Harris, 2012; Small, Harris, & Wilson, 2008) that one's physical body should be approached as a social construct crucial to the understanding of the tourist experience.

Implications

Several simple, yet effective, inexpensive and easy to implement managerial implications arise from this exploratory study. Obese people could be advised to use the line for people with disabilities, and be offered golf carts to facilitate greater mobility. The humiliation felt at ride's embarkation point can be easily solved via expectations management. Theme park visitors should be informed prior to ticket purchase and arrival about the 'servicescape' limitations. Just as there are age and height limits for some rides, clear information should also be posted about weight or body size. This is especially significant when a parent is obese and is barred from a ride, the impact on the family is devastating. Services for obese people, as well as restrictions, should be clearly posted on the park website.

Ride operators should be instructed on how to handle sensitive situations with obese people. In addition, as one of the interviewees suggested, a designated area of the park could display the various rides' seats, so that people can see in advance whether a particular ride is suited for their body size.

The management of theme parks could consider providing obese people with a booklet of coupons only for the rides they can use, rather than the common all-inclusive expensive pass, offering a lower entrance fee. In addition, since obese people find it difficult to walk long distances, it is possible to provide them with extended period of ticket validity. Park management should also consider the possibility of designating service employees to escort children of obese parents in restricted rides. All these suggestions also apply to people using wheelchairs or crutches.

Obese people should be aware that due to their physical limitations they will not be able to fully enjoy the park, and this may also impact their children. A way to better plan the visit may be by contacting other obese people who have been to theme parks. In other words, pro-active planning may enhance their theme-park experience and adjust expectations level.

Finally, we must bear in mind that many theme parks and attractions were designed and constructed more than fifty years ago, and there has been a significant increase in people's weight and size since then (Pozza & Isidori, 2018). New theme parks and attractions should be planned to accommodate these changes. For example, roller coasters, often cited by interviewees as a major disappointing experience as participants could not be buckled up, should be equipped with longer, more flexible seat belts. Finally, one of the interviewees suggested to examine the possibility to install 'adjustable seats' for different people's sizes ('small seats for kids, big seats for the parents'). In line with previous studies, this could be relevant also to the airline industry (Poria & Beal, 2016).

Limitation and future research

This exploratory study focuses on a small group of American interviewees, from a limited geographical area. Future studies in other locations may reveal different experiences. In addition, this study was conducted after the visit. Future studies conducted on site may provide further insights. The current study's emphasis on the social stigma attached to obesity, may encourage further exploration into other groups of distinct appearance in tourism and leisure servicescapes (e.g., ultra-Orthodox Jews or religious Muslims). Inspired by the idea of lookism, such studies could assist improving people's ability to enjoy tourism and leisure, improving their quality of life. Also, future studies should compare and contrast between obese people's perception of their experience and non-obese people's attitudes and reactions to obese people.

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