

# A Blending of Disability Studies, Art Education, and Museum Education

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## Abstract

Many museums have been critically characterized as elitist institutions that offer few inclusive services to meet the needs and interests of marginalized populations and communities (Hill, 2016; Sandell & Nightingale, 2013). Some museums, however, are turning to visitor-centered approaches that refocus their efforts to concentrate on the needs and interests of visitors instead of the objects on display (Love & Boda, 2017; Weil, 1999). One population often still overlooked by museums are adult visitors with developmental disabilities, thus the need for increased museum programming. This work represents a literature review that begins with a close examination of conceptual frameworks provided by disability studies, followed by how disability studies relates to art education and inclusive art-making for individuals with developmental disabilities. Next, the review presents an overview of literature related to developmental disabilities, with a specific focus on adults with developmental disabilities and recreational options available to them. Finally, the literature review delves into the museum experience and visitor-centered museum education. By blending

best practices in disability studies, art education, and museum education, museums are primed to create needed inclusive programming and connect with new audiences.

## Introduction

In order to create accessible and engaging museum programming to benefit visitors with developmental disabilities, the framework of disability studies is an essential place to begin. Wexler (2012) defined disability studies as research “initiated by people inside the label with discursive and narratological accounts of being disabled” (p. 72). Snyder (2002) described disability studies as a culture of activist-scholars who examine a category of individual diversity—such as disability—similar to race, gender, or sexual orientation, which spans across the discipline of social sciences.

Activist-scholar groups who have responded against inequality based on individual differences, voiced their struggles, and fought for equality often align their efforts with critical theory frameworks. A brief definition describes critical theory as a theoretical viewpoint that explores the historical, cultural, and sociopolitical makeup of authority and underlying social conditions (Sawyer & Shenvi, 2019). In short, critical theory examines the ways in which groups deemed (previously) subordinate, such as women, people of color, the poor, the different, those with disabilities, and persons from the LGBTQ+ community, are oppressed by dominant groups such as men, white people, the rich, the able bodied, and heterosexuals through established power structures and societal ideals. Using traditions of critical theory, disability studies is focused on the power dynamics of individuals with disabilities.

Disability studies is based on four tenants outlined by Conner et al. (2008): (a) contextualizing disability within political and social spheres; (b) privileging the interests, agendas, and voices of people labeled with disabilities; (c) promoting social justice, equitable educational opportunities, and full access to all aspects of society for people labeled with disability; and (d) assuming competence and rejecting deficit models of disability. Within disability studies frameworks, the word “disability” is often used to describe individuals with physical, intellectual, or developmental incapacities while also acknowledging their capabilities and aptitudes.

Disability studies recognizes disability as not a weakness or insufficiency but rather a fictional narrative culturally fabricated by outsiders, similar to stereotypes of race and gender biases (Garland-Thomson, 2002). Disability studies distinguished that individuals with disabilities represent a marginalized minority group composed of individuals who do not require attention for whatever deficits the non-disabled perceive (Roulstone et al., 2012). Disability studies research seeks to recognize individuals with disabilities for their strengths instead of perceived deficits and also to show nondisabled individuals how we all can work with those with differences without emotions of pity, fear, or disgust (Hughes, 2012).

Individuals with disabilities have historically been thought of as lacking or inadequate. Disability studies, however, recognizes persons with disabilities as a marginalized minority group and not as individuals in need of medical or therapeutic attention (Roulstone et al., 2012). As a way to overcome this negative stigma and give a voice to the disabled, some disability studies scholars have called for new and ongoing research led by or including individuals with disabilities.

### Nothing About Us, Without Us

For scholars working within disability studies, it is vital to include individuals with disabilities as collaborators in the design of organized research investigations (Derby, 2016). Without input from individuals with disabilities, how could one recognize individuals with disabilities for their unique strengths, abilities, and firsthand knowledge rather than for any perceived deficits or setbacks? Derby (2013, 2016) summed up the importance of including individuals with disabilities in research with the motto “nothing about us without us” because individuals with disabilities can make meaningful contributions to research. When discussing disability studies, Couser (2011) noted how past research on individuals often included narratives and findings primarily determined by the views of nondisabled people, which does not accurately represent the viewpoints of the population under investigation. Adults with developmental disabilities can easily be incorporated into such research, as they have firsthand knowledge of their lived experiences, strengths, and perceived limitations. The ways in which individuals with disabilities are portrayed in disability-studies-based research offers a stark contrast to how such individuals have been viewed throughout history.

These earlier viewpoints were often heavily influenced by either moral or medical views of disability. The moral model of disability suggests disability is a

punishment from a higher spiritual/religious power, while the medical model sees disability as a problem in need of a cure by medical experts (Gill, 1999). The medical model is often dominant in research focusing on individuals with disabilities, as this viewpoint believes disabilities are a degenerative predicament to be managed by caregivers in search of a cure, where practitioners have the ability to fix specific symptoms of a disorder (Wexler & Derby, 2015). Wexler and Derby (2015) associated the medical model with labeling individuals with disabilities as different, not normal, or as outsiders, which expands the negative social stigma associated with those individuals. Derby (2013) noted that the medical model seemingly fosters the notion that disability research should be done on individuals instead of with individuals.

In a shift away from both moral and medical models, current trends in disability studies have moved toward the acceptance of the resilience theory of disability, also known as the social model, which focuses on the strengths of the individual and ways to modify the environment to remove barriers and increase successful experiences for individuals with disabilities (Mertens & McLaughlin, 2004). Berger (2013) noted that a common stance among social models of disabilities is that individuals' perceived impairments do not create obstacles in their lives: it is inaccessible buildings, limited modes of transportation, communication, and damaging attitudes of outsiders that create disability as being a lesser social class with cheapened life experiences. In addition, the social model of disabilities also calls for the elimination of obstacles through anti-discrimination legislation, independent living arrangements, and a response to social justice issues within the community (Davis, 2006).

Disability studies often empower individuals with disabilities to become collaborative research partners, add their voice to research outcomes, dismiss historical ignorance, and potentially change the environment for future generations (Berger, 2013; Wilson & Lewiecki-Wilson, 2002). In order for collaborative research to occur, another critical component within disability studies involves the building of trust between researchers and participants with disabilities. Fox and Macpherson (2015) described trust as something not to be rushed because researchers and participants need time to listen and respond to one another. In cases where participants are asked to reflect on their experiences, time is also necessary for the creative process to develop and for meaningful creative self-expression to blossom. Disability studies also recognizes the building of trust as imperative, especially with individuals with disabilities who may have been taken advantage of previously (Berger, 2013)

sometimes by institutions that have a history of reinforcing unequal power dynamics (Wilson & Lewiecki-Wilson, 2002), like museums (Sandell & Nightingale, 2013). Finally, trust between researchers and participants leads to higher quality data as deeper rapport develops with increased collaborations (Mertens, 2009).

Overall, within both disability studies, it is generally important to include individuals with disabilities directly into the research design as collaborators and research partners. No matter how disability studies are incorporated into research, Kallio-Tavin (2019) stated, “It is important to realize that the disability studies approach does not provide a practical tool kit for [educators], but rather offers a possibility for a deep understanding of the lives of disabled people and a worldview beyond ableist and normative thinking” (p. 28).

### Developmental Disabilities

Data on the prevalence of adults with developmental disabilities is currently lacking and misunderstood, however, we can correlate 2010 US Census Bureau statistics on children with disabilities to estimate adults with developmental disabilities today. The US Census Bureau (2010) approximated 3.4 million children had one or more selected intellectual, emotional, or developmental conditions leading to a fully diagnosed disability into adulthood. These disabilities are grouped together into the larger umbrella term of developmental disabilities. The Centers for Disease Control (CDC) (2021) also estimated the US prevalence of developmental disabilities to be about 15% of the total population of children between the ages of 3 and 17. As a whole, developmental disabilities represent a group of several conditions that cause impairments in physical, learning, emotional, intellectual, language, or behavioral areas.

Developmental disabilities can include, but are not limited to, Autism Spectrum Disorder (ASD), Cerebral Palsy, Down’s syndrome, intellectual disabilities, learning disabilities, vision impairments, and a combination of multiple disabilities. The CDC (2022) calculated that the majority of developmental disabilities are caused by a mix of genetics, parental health, smoking and drinking during pregnancy, complications during birth, maternal infections during pregnancy, and exposure to environmental toxins during the development of the individual. While the exact cause of many developmental disabilities is unknown, the causes of certain disorders have been narrowed down. For example, drinking alcohol during pregnancy causes fetal alcohol syndrome, which causes several developmental and intellectual disabilities later in life.

Another developmental disability, ASD, uses a spectrum of severity based on an individual's ability to form normal social relationships, communicate with others, and by behavior patterns (APA, 2013). Cerebral Palsy describes the development of brain disturbances that lead to limitations in movement and posture, accompanied by a loss of sensation, perception, cognition, communication, and behavior (Rosenbaum et al., 2007). Finally, Down's syndrome, also known as Trisomy 21, occurs when individuals are born with an extra set of chromosomes, leading to mildly-to-moderately low intelligence ratings, slower speech development, and smaller physical features (CDC, 2021).

While the majority of children diagnosed with developmental disabilities receive additional support within their K-12 educational settings, their support systems can differ greatly as they transition into adulthood. These transitions most often occur around the age of 21, when students with disabilities can no longer receive public school services and assistance outlined by their individual education plans. Many parents of young adults with developmental disabilities who have aged out of the public school system have described the transition as jumping off a cliff into a world with very few support systems in place (Hughes, 2018).

Even before reaching adulthood, individuals with developmental disabilities often have low educational expectations, as perceived by society, and are more likely to drop out of school and receive insufficient support in more advanced educational and vocational options (Roulstone, 2012). Macpherson et al. (2015) speculate that adult individuals with developmental disabilities may often represent the most undervalued or forgotten members of their communities. These individuals are also more likely to live in poverty, be taken advantage of, and have little access to recreational or vocational activities.

Being fully aware of the abilities, strengths, and obstacles of individuals with developmental disabilities will be an essential step when recognizing barriers in numerous educational settings. One such educational setting includes museums, which can offer visitors with developmental disabilities beneficial programs and opportunities to fully participate in a museum experience (Fox, 2014). Such inclusive experiences would provide the opportunity for these individuals to be involved in positive recreational activities and to interact with their peers in educational, social settings. Beyond beneficial programs, museums can also create partnerships with researchers focused on disability studies in order to challenge and change the perceptions of marginalized and underrepresented groups (Fox & Macpherson, 2015).

## Art and Art Education

Art-making for individuals with disabilities has a number of benefits, but when paired with disability studies, the art may be more effective in establishing social growth and identity (Wexler, 2011). Art plays a vital role in our lives beginning in childhood, when young children develop new forms of expression when they learn to draw and paint (Dissanayake, 2017; Lowenfeld & Brittain, 1970). Hanline et al. (2007) noted that children with disabilities equally enjoy art-making activities but develop artistic skills at a slower rate than children without disabilities. However, Wexler (2011) noted that art-making is a behavior that satisfies an inherent human need, and the creation of art should not be restricted or diminished from individuals with disabilities, even as they move into adulthood.

Even though art-making has many benefits, it is not available to every individual with a disability due to the inaccessibility of some arts programming, social stigmas, perceived inabilities, or individuals' own interests. Like much of society, not all individuals with disabilities will want to participate in art activities, and those who do may not desire to display their work. However, "access to the arts is still very important for these people because the arts can help aid communication and foster confidence, choice, and self-empowerment" (Fox & Macpherson, 2015, p. 183). Gerber and Guay (2006) associated deficits in imagination, the need for control over one activity at a time, and multiple sensory issues with the absence of positive art experiences due to difficulties appropriately engaging in activities without specialized attention or proper adaptations.

Even with those difficulties, individuals with disabilities have benefited from exposure to making art (Fox & Macpherson, 2014; Gerber & Guay, 2006). Art-making has become a successful recreational choice for individuals with disabilities because art can help meet the following goals: developing imagination, sensory regulation, emotional self-expression, developmental growth, visual-spatial skills, and the promotion of recreation skills (Gerber & Guay, 2006). The misconception that individuals with disabilities lack the required skills to participate in art-making activities has been dispelled as individuals with disabilities continue to have successful art-making experiences. This fallacy also illustrates a key component of disability studies, where individuals with disabilities are often looked down upon or thought of as missing the skills required to fully participate in an activity (Berger, 2013).

## Notable Efforts and Programs

Despite the inherent benefits noted in combining disability studies, art, and art education, there is no consistent or coherent body of work on the subject. However, there are several programs worth mentioning. While The National Art Education Association has pushed for inclusivity in the United States, international programs also exist to promote disability studies theory and its practice of respect toward individuals with disabilities. Notable organizations in the United Kingdom have made strides to provide planning and support systems so individuals with disabilities can successfully participate in art-related activities and more advanced programs (Austin & Brophy, 2015). One of these organizations, the *Rocket Artists* in the United Kingdom, focuses on a group of artists with learning and developmental disabilities who make visual and performance art with a community of supporting figures. Since 2004, the *Rocket Artists* has been an innovative model for inclusive learning and art-making for individuals with disabilities (Fox & Macpherson, 2015).

Over time, the *Rocket Artists* have built partnerships between several museums and galleries, including the Tate Modern in London. Macpherson et al. (2016) noted that the *Rocket Artists* use inclusive arts-based methods to construct more conducive spaces where collaborations occur between artists with and without disabilities. Art-making and the use of art materials serve as a meeting point between artists, enabling a non-verbal artistic conversation to take place where knowledge and practices are exchanged (Macpherson et al., 2016).

While working with the *Rocket Artists*, Fox and Macpherson (2015) developed another influential art programming method, Inclusive Arts, focused explicitly on art-making and adult artists with a multitude of disabilities. Inclusive Arts was formed in the United Kingdom as a partnership between researchers from the University of Brighton and the *Rocket Artists*. Inclusive Arts programming is noted for fostering creative collaboration between disabled and non-disabled individuals to support the acquisition of knowledge, skills, and competence within the arts (Austin & Brophy, 2015). The Inclusive Arts approach focuses on efforts to reveal the creative and artistic potential of individuals with developmental disabilities while facilitating different modes of communication and promoting individual self-advocacy (Fox & Macpherson, 2015). Fox (2014) maintains that the Inclusive Arts approach can be applied directly to museums to shape a more inclusive and collaborative experience where visitors feel more welcomed and at ease. Inclusive Arts programming intends to bring people together to explore art with uniform access, full

acceptance of a variety of viewpoints, and within a supportive environment free from obstacles (Austin & Brophy, 2015; Fox, 2014).

Anna Cutler, the former director of learning at the Tate Modern, described the use of Inclusive Arts programs in museums as an “exciting opportunity that invites us to rethink the contribution of those who have been excluded from the ‘art’ conversation” (Fox & Macpherson, 2015, p. xii). However, Cutler also noted that such programming is “underrepresented” amongst museums even though it offers “clarity... and provides personal stories by participants who articulate and represent their own sense of value in their artistic expressions” (Fox & Macpherson, 2015, p. xii). The ultimate goal of Inclusive Arts programming in museums is to create new opportunities for and with visitors with developmental disabilities (Fox, 2014; Fox & Macpherson, 2015; Hollinworth et al., 2016).

Overall, when compared to the United Kingdom, disability arts access in the United States does not receive the same level of government funding and appears to be a more detached segment of public service offerings for individuals with disabilities (Austin & Brophy, 2015). Even with the current organizations adopting disability studies research and inclusive arts programming for individuals with developmental disabilities, more can be done for this population, and efforts from the *Rocket Artists* and Inclusive Arts programming appear to be few and far between. Derby (2011) believed art educators can influence disability studies by creating opportunities where art-making curricula addresses the concept of disability. When disability studies are integrated into the multiple facets of art education and art experiences, whether in classrooms, studio spaces, or museums, the findings have the potential to reach beyond academia to impact a broader, more diverse audience and create change. The lack of research focusing on adults with developmental disabilities and their art experiences creates an added need for continued research on the subject, and museums could serve as research locations.

## Museum Education

Historically, museums have been ideal locations for people to reflect and learn from the objects on display (MacGregor, 2001; Samis & Michaelson, 2017). Museums also offer their visitors a place to have educational and recreational experiences through their exhibitions or programming. More recently, museums have become actively involved within their communities as visitor-centered

museum practices become more mainstreamed (Samis & Michaelson, 2017). However, museums can do more than provide opportunities for reflection, educational experiences, and active involvement. They can also foster other opportunities to serve underserved, marginalized, potential visitors in beneficial ways by creating new programming designed to meet their needs and interests. To accomplish this, many museums have education departments or specialized staff members who focus solely on improving its services and educational programming for visitors of all ages and interests.

Universities first formed museum education programs in response to similar courses of study like museum studies and art history (Hooper-Greenhill, 1995). Together, these university curricula have rethought the way knowledge is shaped within museums, refocusing the mission of museums around the visitor instead of the object (Hooper-Greenhill, 1995; Weil, 1990). This, in turn, made creating a positive visitor experience a prime objective. This change in museums from being artifact warehouses to places of active involvement has created a rise in museums with visitor-centered mindsets.

### The Rise of the Visitor-Centered Museum

Hirzy (1992) introduced the belief that museums need to open themselves up as sites for research in order to move into the future and keep from stagnating. Old ideas are becoming less relevant as museums are responding to the need to “engage in active, ongoing collaborative efforts with a wide spectrum of organizations and individuals who can contribute to the expansion of the museum’s public dimension” (Hirzy, 1992, p. 8), and building visitor-centered programming is the future of museums. Creating visitor-centered museums provides several benchmarks for museum educators to achieve, including offering opportunities for reflection, gaining practical experiences, creating chances for active involvement, orientating visitors, allowing freedom of choice, building on social interactions, teaching art-making skills, and promoting repeat visitation (Villeneuve & Love, 2017).

Museum educators can accomplish this, all while retaining relevance to society, by continually improving and becoming receptive to new ideas in the field (Hirzy, 1992; Simon, 2016). The concept of the visitor-centered museum was first introduced in the 1980s (Hooper-Greenhill, 1995) due to a rise in museum studies programs at the university level. This and other changes in the field can be credited to the awareness that museums must become about someone (the visitor) instead of something (the object), which demands a more inclusive and relevant visitor experience (Weil, 1999). Without visitors coming

to see and experience the objects on display, there is little need for museum curators and conservation departments to protect and research objects.

The path to the modern visitor-centered museum began with the first museum, the Ashmolean Museum, which opened on the campus of Oxford University in 1683 and was established for the benefit of the public (MacGregor, 2001), even though it was only accessible to elite members of society. Soon after, other major museums followed suit—the British Museum in London, the Louvre in Paris, and the Smithsonian in Washington D.C. These museums were all established from donations of expansive private and mostly aristocratic personal collections, and visitors came out of curiosity to see foreign and intriguing objects never before seen. With unique collections and often rare scientific specimens, museums became centers of highly intellectual research and spaces where sophisticated education flourished, creating an elitist environment that offered little to benefit the general public (Hill, 2016; Woodruff, 2018). Hill (2016) described elitist museums as divided between social classes and education. In this framework, urban elites, mainly concerned with civic prestige and tying their family name to a donation, used museums to falsely convey a rhetoric of service and community improvement. Fortunately for local communities, museums started looking for ways to evolve by examining public engagement and visitor satisfaction in the 1980s. This initial transition sparked the rise of the ideal visitor-centered museum, which is still being developed across many types of museums (Villeneuve & Love, 2017).

However, the museum was not a lone voice suggesting changes toward a visitor-centered experience. Best practices within museums have also been transformed because of audience activism and cultural critiques that challenged museums' focus on assembling content and programming geared specifically to the cultural elite (Karp & Kratz, 2014). The 1990s saw a rise in the criticism of museum culture that coincided with trends in the critical examination of art histories and the rise of museum studies and museum education programs in universities. During this time, the objects incorporated into museum collections and exhibitions were seen in a new light as visitors' interpretations became more centrally important to the goals of museum educators (Duncan, 1995; Karp & Kratz, 2014; Weil, 1990).

Through the advent of museum studies programs in the 1990s, museums became more aware of how museum collections and their programming often misrepresented marginalized communities or did not take their needs into consideration (Falk & Dierking, 2000). Instead of engaging in exhibition designs

based solely on information delivery, museums started looking toward participation and programming where the individual actively constructs knowledge through accessible and personally relevant learning experiences (Falk & Dierking, 2012). As museums started developing more exhibition models based on visitor participation and the visitor-centered approach, the visitor—rather than the object—gradually became the focus of many museums (Weil, 1990). However, visitor-centered exhibitions have yet to be fully implemented within the majority of museums across the United States.

The new concentration on visitors has allowed museums to become more relevant to their communities as they look toward providing more enriching museum experiences (Villeneuve & Love, 2017; Woodruff, 2018). Simon (2016) proposed that providing visitors with opportunities to voice their opinions and participate fully in developing personal experiences leads to museums that are more appreciated and captivating for everyone. Feldman (2017) also urged museums to delegate some responsibility to the visitors themselves in regard to creating educational programs and new visitor experiences, as they are experts in their own right as to what appeals to their interests and captures their attention. Koke and Ryan (2017) even pointed out that “one of the most cost-effective and practical ways of engaging visitors in the process of making an exhibition is to invite them to provide input on how your organization will deliver your content” (p. 48). Ultimately, including the visitor in museum decision-making empowers the visitor, as they take ownership of the museum and work with collections in new ways (Berger, 2013; Fox, 2014; Fox & Macpherson, 2015; Koke & Ryan, 2017).

In the transition to becoming visitor-centered, museum education departments have started to recognize the importance of working more with disenfranchised communities; however, more can be done for visitors with special needs and disabilities (Silverman, 2013; Woodruff, 2019). The museum experience of adult visitors with developmental disabilities is unique and requires additional support. While some well-known museums have made significant efforts to provide needed programming for these individuals, the vast majority of museums have done little to nothing for individuals with disabilities beyond remaining ADA compliant (Weisen, 2010).

### **Disability and the Museum Experience**

Educational laws and special education support systems have positively impacted the lives of individuals with disabilities. Nonetheless, the vast majority of museums have yet to take on the responsibility of devoting specific

programming to address the needs of visitors with developmental disabilities. As Weisen (2010) pointed out:

Billions have been spent in recent years on new museums, major extensions and refurbishments across the globe, with little or no regard paid to providing a shared experience of the collections for disabled peoples. The cumulative effect is discrimination on a grand scale against disabled people. (p. 54)

To further illustrate how museums are becoming more culturally inclusive while leaving out individuals with disabilities, Falk and Dierking (2000) stated:

Museums have made considerable efforts to broaden their intellectual and material cultural base to include the contributions of historically underrepresented populations. Efforts have been made to understand the art, history, and culture of African Americans, Asians, Native Americans, Hispanics, and other minority racial/ethnic populations; also included have been the contributions of women, the working class, the poor, and other traditionally disenfranchised populations. (p. 228)

Within this statement, individuals with disabilities are represented as an afterthought, included within “other traditionally disenfranchised groups”; their absence further suggests their exclusion from mainstream opportunities and as forgotten members of society even though individuals with disabilities make up a large portion of our population.

Despite this exclusion, there is growing evidence that museums can offer meaningful services aimed at marginalized communities by becoming more inclusive through educational programming, and specifically programming for individuals with disabilities (Sandell, 2003; Sandell & Nightingale, 2013). If new audiences are attracted to museums through successful educational programming aimed at their needs and interests, it seems likely that these individuals and their families may want to return (Hein, 2001). Furthermore, multiple visits to museums have proven beneficial to young visitors, as it allows them to create personal connections to the museum or its objects on display, which reinforces learning, fosters new skills, encourages social exchanges, and offers time for reflection (Atoji, 2018). Research also shows that multiple visits to the same museum helps visitors build a sense of comfort with increased learning opportunities and chances for social inclusion (Hein, 2001; Melber, 2006).

To aid in the learning process, additional support and programming are needed to eliminate any possible barriers (Woodruff, 2019), especially those experienced by individuals with developmental disabilities. Prizant and Fields-Meyer (2015) distinguished how an individual with a developmental disability may feel anxious or upset about going into a different environment or experiencing something new. However, if the individual tries the novel experience with the appropriate support, it can become a positive learning experience. For individuals with developmental disabilities in a museum setting, appropriate support can come in the form of additional programming and inclusive, visitor-centered provisions (Woodruff, 2019).

Several museums have responded to the need to create programs for visitors with disabilities, like London's Victoria & Albert Museum and Boston's Museum of Fine Art. Both offer larger group and family days specifically for individuals with disabilities and content created specifically for individuals with blindness, deafness, and learning disabilities. Several museums even have programming designed specifically for individuals with ASD, like The Ringling Museum in Sarasota, Florida, New York City's Metropolitan Museum of Art, and The Melbourne Museum in Australia. These museums offer individuals with ASD and their family members orientation materials like *sensory maps*, *social narratives*, and *guided checklists*. Fletcher, Blake, and Shelffo (2018) described a *sensory map* as a layout of the museum with information used to prepare visitors by focusing on the noise, light levels, and presence of other visitors throughout a museum's gallery spaces. A *social narrative* consists of positive, first-person statements an individual with ASD would read to themselves or aloud in order to prepare them for what would happen next (Zimmerman & Ledford, 2017). A *guided checklist*, also known as a *visual activity schedule*, includes a list of the possible activities available in a given space and a box where activities can be checked off once completed (Pierce et al., 2013).

The examples above illustrate ways that select museums are striving to offer meaningful experiences to visitors with special needs. Although a "number of organizations have made considerable progress toward improving access to content [for visitors with intellectual disabilities], many more have consistently overlooked this issue" (Smith et al., 2012). Through a visitor-centered approach, there are opportunities for reflection, participation, practical experiences, active involvement, and new museum education models for best practice (Simon, 2010; Villeneuve & Viera, 2014). However, individuals with disabilities are among the most isolated, vulnerable, and least mobile groups, requiring more

support to have equitable access to both exhibition spaces and the collections within them (Fox, 2014; Hart & Heaver, 2015). Furthermore, museum visits have been known to become tremendously stressful and overwhelming for individuals with developmental disabilities (Atoji, 2018). When not properly prepared, these visitors may experience feelings of discomfort, anxiety, and confusion and have increased difficulty learning when finding themselves in a social situation, like those presented by many museums, that does not offer appropriate accommodations for their specific needs (Prizant & Fields-Meyer, 2015).

To address this, museums have been working to become more inclusive and accommodating, but most accessibility studies in museums are almost exclusively conducted with neurotypical children, very few adults, and limited amounts of populations with disabilities (Crowley, 2000; Falk & Dierking, 2000). There has been a recent push for museums to appeal to families that include a child with ASD (Lam et al., 2010; Langa et al., 2013), but even these studies are lacking at times. To help fill this gap in the literature, there is a greater need to focus future research on adult visitors with developmental disabilities and blend disability studies into the museum space.

Current studies specifically involving the museum experiences of individuals with ASD often point out the negative incidents these individuals have encountered or behavior modifications desired by the museum to improve their experiences. Langa et al. (2013) found families that include a child with ASD are often anxious around large groups of people, and waiting in long lines could create potential sources of discomfort for the family if their child becomes stressed. Parents of children with ASD often feel forced to obstruct the museum experience with quick interventions, exiting to a quieter space until the stressed behaviors recede, or they may end up leaving the museum entirely. The anxiety and stress driving these undesirable behaviors can lead to a negative museum experience and lessen visitors' desire to return to the museum later (Langa et al., 2013; Woodruff, 2019).

Families that include children with ASD are often challenged to access museums comfortably and benefit from museum programs and exhibitions due to the unique needs of the child (Lam et al., 2010; Langa et al., 2013; Woodruff, 2019). In general, all community outings, like going to the grocery store or movie theater, include challenges for families with a child with a disability; the same can be said about the museum, which has its own set of obstacles and unwritten societal rules. Similar to parents, classroom teachers, and direct

support professionals are also confronted with challenges when on field trips to museums with their students with developmental disabilities. Teachers often feel that loud noises, bright lights, crowds, and long lines are among the most nerve-racking obstacles to overcome when on a field trip to a museum (Langa et al., 2013). Atoji (2018) pointed out that crowded, noisy spaces with bright lights could be too much for not only individuals with ASD but also those with complex medical or emotional needs and other developmental disabilities.

To further illustrate the need for orientation materials and ease the frustrations of visitors with ASD, Woodruff (2019) conducted a pilot study with young children with ASD who attended a museum experience with their parents. After visiting the museum, parents were asked how museums can become more accessible. Parents continued to push for the use of social narratives and other pre-visit orientation materials, with one parent saying, “It really seems simple, but it’s usually the simplest little thing that can make or break a new experience for someone on the spectrum.”

Other parents in the pilot study mentioned keeping lighting and audio/visual noise levels lower, having a pleasant and patient staff, developing interactives and objects that were safe to touch, and even specifically assigned accessibility times for families that have a child with special needs (Woodruff, 2019). Another parent addressed a common concern related to the expenses involved in family activities that may become stressful. The parent stated, “It’s important for museums to be free so families with children with ASD aren’t hurt financially when their child may become upset and the family feels the need to leave earlier than expected.” Museums can easily improve their visitors’ experiences by actively listening and responding to their visitors’ needs. As disability studies suggests, one of the simplest and most inclusive actions a museum can do is ask individuals with disabilities what they need in order to make their experiences better.

## Summary

Multiple scholars maintain that museums are well-positioned to become more inclusive by providing visitor-centered programs to audiences with special needs, including adult visitors with developmental disabilities (Fox, 2014; Fox & Macpherson, 2015; Sandell & Nightingale, 2013; Weisen, 2010; Woodruff, 2019). When institutions collaborate with such individuals, it is important to adopt collaborative and inclusive frameworks (Wexler, 2011), such as disability

studies. Current trends in disability studies move beyond a deficit model of conceptualizing disability and toward the acceptance of the resilience theory that focuses on the strengths of the individual and a recognition of their skills and abilities (Berger, 2013).

One such skill, for some people, includes creating art. Art-making can be advantageous for individuals with developmental disabilities because it can foster their strengths in overcoming deficits and provides an opportunity for reflection and sharing experiences with others (Fox, 2014; Gerber & Guay, 2006; Hartman, 2018). Without a doubt, art-making opportunities foster our creative abilities, but when done with others through Inclusive Art methods, art-making also opens up dialog opportunities with others, creating an appreciated and accepting community.

According to Fox (2014), the inclusion of individuals with disabilities within a museum experience can provide a number of benefits including the following: high-quality learning experiences; resources for inspiration and creative experiments; enhanced opportunities for reflection, practical experiences, and active involvement; chances to make art in new ways within the gallery space; challenge perceptions of marginalized people and the values placed on them and their creativity; and opportunities to develop new ways of working with collections that are beneficial and transferable. Visitors with disabilities belong in museums, and the blending of disability studies, art education, and museum education can be beneficial to those looking to create long-lasting change.

Museums have the potential to reach out to new audiences, who are often marginalized or forgotten about due to unsubstantial and perceived deficits society places on individuals. A blending of disability studies, art education, and museum education allow for a new model in visitor-centered museum education methodology. Museums need to form meaningful bonds with their local communities and reaching out to individuals with disabilities is a great place to start. Adults with developmental disabilities can be incorporated into new research studies, educational programming, and visitor-centered planning in the creation of new exhibitions as they have firsthand knowledge of their own lived experiences, strengths, and perceived limitations. I anticipate museums that blend disability studies, art, and education will become vibrant resources for inspiration and creative experiments with opportunities for reflection and practical dialog to occur. This path is an exciting one, and I encourage other researchers, educators, and people to join me on this journey.

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