

# Travelling of families of children with special needs: The case of Finland

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**Keywords** | Accessibility, hospitality, inclusion, family tourism, children with special needs

**Objectives** | It is estimated that 15 percent of world's population is living with disability (WHO, 2011) and 40 percent of individuals' lifespan is impaired in motion and functioning (Ruskovaara, 2009; WHO, 2011). All persons with disabilities have a right for meaningful experiences in tourism (UN, 2006; UNWTO, 1999, 2016). Compared with accessible tourism (e.g. Michopoulou, Darcy, Ambrose & Buhalis, 2015; Small & Darcy, 2010), accessible hospitality (Harju-Myllyaho & Kyrrä, 2013; Harju-Myllyaho & Jutila, 2016) gives a new perspective to inclusion in tourism by providing a broader understanding of accessibility; travellers' needs and wishes are taken into account regardless of travellers' background or personal characteristics, such as culture or sub-culture, social minority, sexual orientation, age or a special mental or physical need.

According to Southall (2012, p. 79) family tourism involves the family unit in all its diversity and tourism industry should consider the complex nature of the family. However, in tourism and hospitality research, family travelling has been rather an uncommon research topic (e.g. Obrador, 2012, p. 402) and has not been studied in the context of accessible hospitality either. In the current paper, we approach accessible hospitality from the perspective of families of children with special needs in order to provide a wider understanding of accessible hospitality and family travelling. Although there are already well-designed experiences for families of children with special needs, there is still lack of knowledge among tourism providers about special needs of this market segment travelling, and lack of know-how on how providers could offer more improved experiences for the segment. In this context, we study accessible hospitality by illustrating the concept with the empirical findings of travelling of Finnish families of children with special needs.

**Methodology** | In the study, children with special needs are defined as children who need special support, with (e.g. ADHD) or without (e.g. sleeping problems) a medical diagnosis. The similar approach

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to definition is a premise for action at ELO ry (an association for peer support for families and next of kin in Finnish Lapland) and Leijonaemot (an association for the parents of children with special needs in Finland) which both work beyond limitations to diagnosis, diagnosis specific associations and geographical regions. The associations offered a possibility for experience-based data collection during the study. Four theme interviews for families of children with special needs were conducted in Finnish Lapland to produce first-hand information about the travelling of the target group. To expand theme interview results, an electronic questionnaire (23 answers) emphasizing the open answers was conducted. The data was analysed with theme analysis to obtain families' travelling behaviour, communication practices, encountering tourism workers, and accessibility of physical tourism environment. The results helped tourism providers to discuss practical implications to develop tourism experiences for families of children with special needs. The results were disseminated during the discussions in the interactive workshops with tourism businesses and developers utilizing experience-based expertise.

**Main Results and Contributions** | Families of children with special needs value empathic, flexible and patient encounters with tourism workers; the will to serve in a hospital manner is more important than the competence for it. Families appreciate tourism workers' knowledge and know-how for accessibility and children with special needs. However, it would be even more important for the workers to ask how they could assist the customer.

Families of children with special needs plan their travelling usually carefully before the journey. They are interested in and appreciate finding information about child-friendly services, assistant practices, physical accessibility, and safety and security in the destination, for instance. Families wish tourism providers to improve their communication by sharing experiences of other families of children with special needs in their channels of social media, use symbols (e.g. disabled parking place) to support the action of impaired persons and invest in visual communication tools.

In the means of transportation, families preferred their own car because of the flexibility it provided. For many families public transportation caused problems because of the lack of space for the multiplicity of equipment they needed during travelling. As their accommodation choices, families preferred a hotel, spa, cottage or staying overnight at friends or relatives. When choosing commercial accommodation families valued clearly noticeable and with signposts guided environment, diverse room facilities (e.g. big room, tableware and pots, night lightning) and check-in as soon as possible. In the context of eating, families called for a restaurant not only to take into account special diets but also to offer a menu with varied options for special diets. Families appreciated also minimizing all waiting and the possibility for children with special needs to have own food with although others order from a menu. In tourism activities (e.g. skiing, theme parks, nature watching) calm and clear guiding, and a place where to calm down during the action, as well as availability of sport and physical activity equipment, for instance, were important for families to participate in activities.

**Limitations** | There are at least two different limitations in the study. First, it is recognized that the use of participant observation as well as interviewing during the travelling of families could have given broader insight to travelling practices of families of children with special needs. Second, the type of travelling was not defined in the questionnaire. The aim was to include all types of travelling (e.g. leisure, healthcare and rehabilitation) but it might be that families active in leisure travelling solely answered actively to the questionnaire.

**Conclusions** | By studying the phenomena of travelling of families of children with special needs we can gain better insight in their travelling practices, and in how to provide better tourism services for this market segment. Concerning the results, it has to be noted that families of children with special needs do not represent a homogenous group, even though are affected by the same factors. Because the research provided an approach for families' perspective on hospitality, the future studies should be widened tourism businesses that have conducted successful service development for children with special needs. By increasing the understanding of families with special needs and how to answer to these needs, it is possible to widen the understanding of the concept of accessible hospitality and the phenomenon of family travelling.

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