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# Accessible Sports Tourism: The Challenges in Travel Planning for Disabled Athletes

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## Accessible Sports Tourism: The Challenges in Travel Planning for Disabled Athletes

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Despite the growing trend of accessibility in tourism, disabled people still face a multitude of challenges when traveling abroad. Disabled athletes encounter all the same challenges as disabled travelers who are not athletes, and possibly some additional sports related issues. The aim of this Bachelor's thesis is to find out some of the challenges in the travel planning and execution of disabled athletes as well as to specify some ways to alleviate these challenges. This Bachelor's thesis was compiled on the basis of opinions of experts who work with disabled athletes. These experts interviewed were employees of the Finnish Sports Association for Persons with Disabilities, Suomen Vammaisurheilu ja Liikunta VAU registered association, and an accessible travel expert from the tour organizer Matka-Agentit.

The Finnish Sports Association for Persons with Disabilities, Suomen Vammaisurheilu ja Liikunta VAU registered association is the commissioner of this thesis. Even though the topic of this thesis is disabled athletes and their challenges related to travel, it was necessary to analyze accessibility and disability in general to understand the specific challenges related to the travel arrangements of disabled athletes. A great percentage of the challenges in question are related to accessibility and the nature of disability and illness. Therefore the results of the research also relate to accessible tourism in general.

The research focuses on two aspects, accessibility in tourism in general, and creating flight reservation guidelines for the Finnish Sports Association for Persons with Disabilities. The results of the research are explained in themes. These themes include the different challenges that disabled athletes and disabled people in general face when travelling, as well as some suggestions on how different organizations and establishments might improve their accessibility. The policies of the Finnish Sports Association for Persons with Disabilities in regards to travel arrangements are also examined. Compiling all the information and interviewing experts led to the creation of an athlete profile which also works as a flight reservation guideline for the Finnish Sports Association for Persons with Disabilities.

All of the gathered information led to the conclusion that there is a great demand for universal standards of accessibility. Universal accessibility standards would make it possible for the people reserving services for disabled people to trust the information given by establishments without having to have it verified by someone who is known to have a greater understanding of accessibility. The research indicates that one of the greatest challenges in making travel arrangements for disabled people is that accessibility information is regrettably often untrustworthy due to the poor accessibility knowledge of the establishments in question.

accessibility, accessible tourism, disability, disabled sports, tourism

Suursalmi, Joanna

**Esteetön Urheiluun Liittyvä Matkailu: Haasteet Vammaisurheilijoiden Matkajärjestelyissä**  
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Vaikka esteettömyys on kasvava trendi matkailun alalla, joutuvat vammaiset matkailijat silti kohtaamaan suuria haasteita ulkomaan matkoillaan. Vammaisurheilijat kohtaavat näiden haasteiden lisäksi myös urheilulajiin liittyviä haasteita. Tämän opinnäytetyön tarkoitus on ollut selvittää, minkälaisia haasteita liittyy vammaisurheilijoiden kansainvälisten matkojen valmisteluihin ja toteutukseen, sekä määritellä tapoja joilla näitä haasteita voisi lievittää. Tutkimus on tehty vammaisurheilijoiden kanssa työskentelevien asiantuntijoiden näkökulmasta. Haastatellut asiantuntijat ovat Suomen Vammaisurheilu ja Liikunta VAU ry:n työntekijöitä sekä esteettömän matkailun ammattilainen Matka-Agentit matkatoimistosta.

Suomen Vammaisurheilu ja Liikunta VAU ry on tämän opinnäytetyön tilaaja. Vaikka opinnäytetyön aihe on vammaisurheilijoiden matkustamiseen liittyvät haasteet, on esteettömyyden ja vammaisuuden tarkastelu yleisesti tarpeen jotta voidaan ymmärtää vammaisurheilijoiden matkailuun liittyviä erityispiirteitä. Suuri osa esille tulleista haasteista liittyy esteettömyyteen sekä vamman tai sairauden laatuun. Tämän vuoksi tutkimuksen tulokset liittyvät suoraan myös esteettömään matkailuun yleisesti.

Tutkimus keskittyi kahteen näkökulmaan: esteettömään matkailuun yleisesti ja Vammaisurheilu ja Liikunta VAU ry:tä varten tehtävään ohjeistukseen vammaisurheilijoiden matkajärjestelyistä. Tutkimuksen tulokset esitellään teemoittain. Näitä teemoja ovat muun muassa vammaisurheilijoiden ja muiden vammaisasiakkaiden matkustaessa kokemat haasteet. Lopuksi esitellään parannusehdotuksia erilaisille tahoille siitä miten heidän esteettömyyttään voisi parantaa. Myös Vammaisurheilu ja Liikunta VAU ry:n käytäntöjä matkajärjestelyihin tarkastellaan. Asiantuntijahaastatteluiden sekä muun taustatiedon koostaminen johti urheilijaprofiilin kehittämiseen. Urheilijaprofiili toimii myös matkajärjestelyiden ohjeistuksena Vammaisurheilu ja Liikunta VAU ry:lle.

Kaikki aiheesta kerätty tutkimustieto johti siihen lopputulokseen, että on olemassa tarve yleispäteville esteettömyysstandardeille. Ne mahdollistaisivat sen, että eri tahojen antamaan tietoon paikan esteettömyydestä voisi luottaa sen sijaan, että mahdollisesti jonkun esteettömyyttä ymmärtävän kolmannen tahon täytyisi käydä varmistamassa tiedon oikeellisuus. Tässä tutkimuksessa todettiin, että tietoon jonkun paikan esteettömyydestä voi valitettavan harvoin luottaa.

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## 1 Introduction

Accessible tourism is a growing industry, yet there are still a vast number of challenges that disabled travelers face when travelling abroad. This is a Bachelor's thesis on Accessible Sports Tourism and especially the challenges of making travel arrangements for disabled athletes. The first part of this thesis introduces some general concepts related to and intertwined with the subject of the research. These concepts are accessibility; disability; disability categories in sports; Matka-Agentit tour organizer and VAU, Finnish Sports Association for Persons with Disabilities.

After inspecting these aforementioned concepts and associates, the research methods, conduction of the research and analysis of the data gathered will be briefly explained. In the third part of this thesis the results of the research are revealed in themes which arose in the analysis of the data. In the last part suggestions to VAU are disclosed. In conclusion and reflection the thesis process and satisfaction thereof as well as results are reflected upon.

VAU is the commissioner of this thesis and one of the aims of this thesis was to come up with complete and comprehensive guidelines for the reservation of flights for the personnel of VAU. These guidelines can be found as an appendix at the end of this thesis, and are made to also function as a permanent profile for each athlete. This profile includes the personal information of the athlete as well as any special features related to the disability that might influence travelling or travel arrangements in any way.

The reason for choosing this thesis topic and VAU as a partner was the author's will to write about something generally beneficial to the society. The author contacted several non-profit organizations that did not reply, and when they then saw an amputee athlete skiing on spring break, they came up with the thought of contacting VAU and asking if they had any interest in commissioning and providing a mutually beneficial subject for a thesis.

## 2 Accessible Tourism and Disability Sports

The topics that will be discussed in the next segment of this thesis are The Finnish Sports Association for Persons with Disabilities; Suomen Vammaisurheilu ja Liikunta Vau ry. They are the commissioner of this research. Matka-Agentit, the tour operator in co-operation with VAU and the other party interviewed, will also be briefly introduced. The next topic is disability in general, after which the different categories of disabilities in sports will be explained. The last topic is accessible tourism.

### 2.1 Suomen Vammaisurheilu ja Liikunta VAU ry, Finnish Sports Association for Persons with Disabilities; the Commissioner of this Thesis



VAU:n logo (VAU 2015)

The Finnish Sports Association for Persons with Disabilities, Suomen Vammaisurheilu ja Liikunta VAU, which will be henceforth referred to as VAU for the purpose of this thesis, is an association for both leisure and competitive sports of disabled people. They are a non-governmental organization that works as an umbrella for numerous sports organizations around Finland. (VAU 2015.)

They also work as a sport federation for certain sports that do not have a separate sports federation, such as Boccia and goalball. Their main activities include activities with children and youth, recreational sports, competitive sports and organizational activities. They list regional work, education and training and communication as their supporting activities. There are over 40 sports to choose from in para-athletics, and 18 sports in the Special Olympics. Special Olympics Finland, the organization for competitive and recreational sports for intellectually disabled persons, is a part of VAU. (VAU 2015.)

VAU is also known for conducting accessibility development and training for sports venues in Finland. They have a goal of integrating able-bodied sports with disabled sports, and are

working towards getting all disabled sports under the able-bodied sports federations, thus enabling disabled athletes to train with mainstream sports clubs which are under the able-bodied sports federations. This integration work is mainly done in cooperation between VAU, national sports federation and Finnish Paralympics Committee. (VAU 2015.)

They have a sports program for children and adolescents under the age of 20 called “Sportti-klubi.” It is a program where children can try different sports and forms of exercise in clubs, camps and events. They organize family camps and events for children under 13 and offer possibilities for trying different sports suitable to the specific category of disability for kids aged 13-19. There are also around 40 local sports clubs for disabled children. VAU supports their operation by training instructors and by providing exercise equipment. (Yhdessä ja Erikseen VAU 2014.)

## 2.2 Matka-Agentit Tour Organizer



Matka-Agentit Logo (Matka-Agentit 2015.)

Matka-Agentit is a tour organizer specialized in accessible tourism and providing customers with accessible travel experiences. They were founded in 2000 and they offer a broad spectrum of guided trips and tours as well as independent trips. They have a few themes that they specialize in such as motorsport tourism, sports tourism and nature tourism. Accessibility however is a central theme for the company. They are currently the only accessible tourism travel agency in Finland, and they offer their expertise in both guided accessible trips and also in independent accessible trips. They have been arranging accessible trips for twelve years. (Matka-Agentit 2015; Väänänen 2015.)



Matka-Agentit has several offices, but the accessible tourism function has been centralized into the Helsinki office. All Matka-Agentit employees have a basic knowledge on accessible tourism and how to reserve these trips, but the in-depth knowledge is found in Helsinki with Kaisu Väänänen and a few other accessible travel experts. Sanna Kalmari is an accessible tourism expert and tour leader for Matka-Agentit, she herself uses an electrical wheelchair, and therefore is a great asset to the credibility of Matka-Agentit in the area of accessibility expertise. (Matka-Agentit 2015; Palmuasema 2015; Väänänen 2015.)

Matka-Agentit are well-known with people with different disabilities, their accessible tourism marketing is targeted to publications that are associated with disability. Väänänen also credits accessible tourism expert Sanna Kalmari for spreading the word on Matka-Agentit and accessible travel and thus bringing new clients to Matka-Agentit. Väänänen states that specializing on accessible tourism has created a much broader clientele for Matka-Agentit, as well as co-operation with some accessibility unions and associations. It has also brought special expertise, knowledge and tolerance to the agents. (Matka-Agentit 2015; Palmuasema 2015.)

### 2.3 Disability

“A disability is a condition or function judged to be significantly impaired relative to the usual standard of an individual of their group” (Shekhar, R 2015, 6).

Disabled people are the largest minority in the world. According to the World Health Organization's and World Bank's World Report on Disability from 2011, 15% of the world's population is in some way disabled; however in developing countries this number is significantly larger. (WHO 2015; Ulkoasiainministeriö 2011.)

Disability is a very broad term. It includes everything from temporary disabilities, such as having a cast from an accident to being permanently paralyzed. However, more often than not the term disabled is reserved for people with long-term impairments, and is very rarely used for short-term impairments. Disability may be something that one is born with; it may be sudden or happen gradually through a deteriorating illness. Disability as a term can mean physical disability, intellectual or sensory impairment, mental health issues or chronic illness. (WHO 2015.)

The World Health Organization divides disability into three categories; impairment; activity limitation and participation restriction. Impairment means a problem in the structure or function of one's body; activity limitation means difficulty in executing an action or a task, and

participation restriction is a problem regarding involvement in life situations. (WHO 2015; Shenkar 2009.)

The number of people with disabilities is growing due to various reasons, of which the two major ones are aging populations and an increase in illnesses associated with disability. Age is a significant factor in disability statistics. Whether it is something brought on by age, such as impaired vision, hearing or mobility, or whether it is a higher risk of accidents; seniors have a higher probability of disability. The other cause as stated is the increase of chronic illnesses, such as diabetes, mental illnesses and cardiovascular diseases. (WHO 2015; United Nations 2007.)

There are factors that affect the scope of disability in certain cultures; traffic behavior, health trends, and conditions of nature being some. Demographical factors also play a great role in the multitude of disability; the percentage of disabled people in developing countries is inordinately large compared to the global average. There is also a higher risk of disability for people in lower income classes, women, people with lower education, and people from ethnic minorities. (WHO, The World Bank 2011, 7-8.)

The World Report on Disability lists disabling barriers that restrict participation of disabled people.

These barriers are:

- Inadequate policies and standards. Inadequate policies and standards mean that there are not enough policies and standards in place to alleviate the challenges of living as a disabled person. It can also mean that if there are such policies, they are not properly enforced. For example the lack of global standards for what can be called accessible.
- Negative attitudes. Negative attitudes in general towards disability or negative attitudes towards disabled people. Prejudices towards the abilities and capabilities of disabled people. Prejudices often stem from ignorance and lack of information and education.
- Lack of provision of services. Lack of provision of services refers to the poor availability of services needed, for example healthcare services or assistance.
- Problems with service delivery. Poor quality and accessibility of services is likely to affect disabled people significantly more than people who are not disabled. This could be due to the fact that disabled people might need much more personalized treatment, and therefore are greatly affected by the lack of proper and sufficient education of the service personnel.
- Inadequate funding. Both in high income countries and in low income countries there is a serious gap between the prices of necessary services for disabled people and what

is generally perceived as affordable. Health-care costs and the costs of necessary assistance can be unbearable.

- Lack of accessibility. Lack of accessibility together with the lack of accessibility standards are some of the greatest obstacles in disabled life. Lack of physical accessibility such as only having a staircase as well as lack of communicational accessibility such as only having information in writing or only in audio.
- Lack of consultation and involvement. When disabled people are not involved in the decision-making process of issues regarding their own lives.
- Lack of data and evidence. Lack of information regarding disability and its effects on a person and the society. (WHO, The World Bank 2011, 7-10.)

## 2.4 Disability Categories in Competitive Sports

There are four different categories of disability in competitive sports. These categories are Physical Disability, Intellectual Disability, Visual Impairment and Transplant recipients. In the next segment these categories will be thoroughly explained. The author will also go into detail on how these disabilities affect travelling and which factors need to be taken into consideration when travelling with said impairments.

### 2.4.1 Physical Disability



Disabled Athlete (VAU 2015.)

Physical Disability in this context means every type of physical disability apart from sensory disabilities. Even disregarding sensory disabilities physical disability is a very broad term ranging from birth defects to disabilities caused by an accident. The Paralympics website states that the Paralympics movement offers sports opportunities for athletes whose primary impairment falls under one of ten categories; impaired muscle power; impaired passive range of movement; limb deficiency; leg length difference; short stature; hypertonia; ataxia; athetosis; vision impairment and intellectual impairment. (Paralympic 2015.)

Visual impairment and intellectual impairment however are considered their own group of disability along with transplant recipients. The process of determining whether an athlete is suitable to compete in a certain sport is called classification. In this process the degree of activity limitation is determined and the athletes with similar impairments are grouped in order to have as fair and equal a competition as possible. (Paralympic 2015.)

The challenges with these aforementioned disabilities concerning travelling are strongly related to infrastructure and mobility aids. The simplicity in making things accessible for this group of people is that the only things that need to be considered are the tangible aspects of infrastructure. One must be able to move from place to place and lead a normal life in a certain venue. The space requirements and need for built-in aids such as ramps and rails however vary greatly from individual to individual and thus makes it slightly more challenging to consider this group as a whole when thinking about accessibility. VAU and Invalidiliitto- The Finnish Association of People with Physical Disabilities are the parties in Finland who provide accessibility training and consulting. (Invalidiliitto 2015.)

## 2.4.2 Intellectual Disability



Special Olympics (VAU 2015.)

Intellectual Disability is a disability affecting a person's skills and functions such as communicational skills, self-care skills and social skills. Intellectual impairment affects intellectual functioning and adaptive behavior. Intellectual functioning refers to how a person learns, how they solve problems and so on. Adaptive behavior refers to social, practical and conceptual skills such as how one can take care of themselves, how they act in social settings and how they understand concepts such as money, time and numbers. (American Association for Intellectual and Developmental Disabilities 2013 A, B; Special Olympics 2015.)

Intellectual impairment is the most common developmental disability. As developmental disabilities in general, intellectual impairment must have occurred before the age of 18 to be classified as intellectual disability. Developmental disability is a term that includes intellectual disabilities and other disabilities that are apparent during the developmental stage of a person. The most common developmental disabilities not affecting intelligence are cerebral palsy and epilepsy. Down syndrome for example includes both a physical and an intellectual disability. (American Association for Intellectual and Developmental Disabilities 2013 A, B; Special Olympics 2015.)

The three criteria for diagnosing an intellectual disability are: significant limitations in adaptive skills, significant limitations in intellectual skills and the onset before the age of 18.

There are many causes for intellectual disability, such as a genetic condition; complications during pregnancy or birth; diseases; malnutrition or poison exposure. It can happen before birth, during birth or later during childhood. (American Association for Intellectual and Developmental Disabilities 2013 A, B; Special Olympics 2015.)

Intellectual disability does not directly affect travelling in most cases, as there usually are very few or very mild physical disabilities associated with intellectual disabilities. A large percentage of intellectually disabled people live and travel with guardians or assistants. There are however a few aspects which can make it easier for intellectually disabled people to get around and to feel relaxed in new settings. (Kuja-Kyyny 2015.)

Firstly it is very important that all information is very clearly stated. It is important that there are clear signs in public places for example restrooms, restaurants, wardrobe etc. and that all information is easily available and very clearly communicated. Another aspect is that especially when travelling in confined spaces for longer period of time, airplanes and trains for example, that there are familiar people travelling with an intellectually disabled person. This ensures that there are people near who know how to soothe the intellectually disabled person if there are behavioral issues or if said person gets scared of the situation. (Kuja-Kyyny 2015.)

### 2.4.3 Visual Impairment



Seeing-eye Dog (VAU 2015.)

According to the World health organization there are four levels of visual function. These levels are normal vision, moderate visual impairment, severe visual impairment and blindness. The categories moderate visual impairment and severe visual impairment together form the term “low vision”. The term visual impairment can be used for all of these categories except for normal vision; therefore it is an umbrella term for people suffering from blindness or from low vision. (WHO 2014; American Optometric Association 2007.)

WHO estimates that there are approximately 285 million visually impaired people globally, of which 39 million are blind and 246 suffer from low vision. As with all disability, people living in low-income countries are the most likely to be visually impaired; close to 90 percent of the world’s visually impaired people come from a low-income environment. (WHO 2014.)

Low vision and blindness affects all age groups, but people over the age of 50 are significantly more at risk of blindness. Blindness and low vision will therefore also affect more people in the future, as the large generations of the 1940’s, 1950’s and 1960’s age. However, in the last

20 years visual impairment has decreased due to a reduction of visual impairments from infectious diseases. (WHO 2014.)

For visually impaired people accessibility means slightly different things than to a person in a wheelchair. There are many things that can be done to help visually impaired people cope with day-to-day life and also with new places and new situations. Some of the ways to ensure accessibility for visually impaired people include:

<ul style="list-style-type: none"> <li>• Clear contrasts in color, so it is easier to see where the floor ends and the wall starts</li> </ul>
<ul style="list-style-type: none"> <li>• Braille writing or audio together with normal writing</li> </ul>
<ul style="list-style-type: none"> <li>• Clear contrasts and large letters for signs and other writing</li> </ul>
<ul style="list-style-type: none"> <li>• Miniatures of buildings that one may feel to help with navigation in a new venue</li> </ul>
<ul style="list-style-type: none"> <li>• Bright but not blinding lighting.</li> </ul>
<ul style="list-style-type: none"> <li>• A small rail on the floor to help people using a cane to know they are on the right track</li> </ul>
<ul style="list-style-type: none"> <li>• Web-pages are made accessible</li> </ul>

(Iris 2014.)

One of the less thought of barriers for visually impaired people is the lack of knowledge of service staff. The staff may be overly helpful, and insist on helping a perfectly functional person with the most private and basic of tasks, such as enjoying a meal. This is very harmful to a person's self-esteem and also to the reputation of the service provider. The will to cope and to show other people that one is a functional, productive member of society is embedded in all of us, and should not be disputed by well-meaning yet ignorant personnel. (Buhalis & Darcy 2011, 154.)

Another ignorance-stemming action that visually impaired people may come across is that people may talk to visually impaired people as if they are children, loud and clear as if the person can't hear or understand normal conversation. These are things that could be mended by having a small staff meeting about how to serve disabled people, what to help with and how to act. The most important aspect to remember is to ask how one can help, and take no for an answer if help is not needed. (Buhalis & Darcy 2011, 154.)

"Sometimes I feel like a baby. The waiter decides that since she didn't have chance to help an old lady cross the street today, she will take care of me. I don't need this help. She doesn't need to cut the steak for me or twirl the spaghetti on my fork. Such acts are devastating." (Buhalis & Darcy 2011, 154.)

There are a few aspects that need to be taken into consideration when thinking about traveling as a visually impaired person. Even though blind people often travel with other people,



some aspects still need to be differently organized and planned than with seeing persons. With transportation there are not many differences between visually impaired and seeing people. Airlines state that they need to be notified of a blind person travelling with them, and seeing-eye dogs as well need to be declared. Otherwise the preparations for transportation do not differ greatly from those of a seeing person. (Kuja-Kyyny 2015; Väänänen 2015.)

However there are other aspects such as emotional barriers that are significantly more important for visually impaired travelers to be taken care of. Human interaction becomes more important for visually impaired people, and therefore the quality of service is extremely important when dealing with a person with low vision or with a blind person. It is of utmost importance that the person providing service to a visually impaired person is trustworthy, friendly and assertive. (Buhalis & Darcy 2011, 155-157.)

For example if the service provider does not look at a visually impaired person while talking to them it gives the sensation to the person being helped, that the service provider is not concentrating in the interaction. This in turn may create a feeling of unsafety. The role of accurate and clearly stated information is truly crucial for a visually impaired person to feel safe and secure in a new environment. (Buhalis & Darcy 2011, 155-157.)

Some adjustments may need to be made with traditional holiday activities for them to be suitable for visually impaired persons. For example traditional sightseeing tours may not bring much content for a visually impaired person, as they tend to depend on the visual. Sightseeing tours for visually impaired persons may have more stops and more descriptive audio content; so that the visually impaired tourists get a feel of the atmosphere of the place they are visiting. (Väänänen, 2015.)

#### 2.4.4 Transplant Recipients



Arm of Patient Receiving Dialysis (Frodesiak, A. 2012.)

Transplant recipients as a category of disabled sports includes people who have had organ transplants and people on dialysis. Dialysis patients are rarely in competitive sports teams. If there are dialysis patients in these competitive teams, it causes some challenges with time management with having to fit dialysis treatment into the competition program. (Lakkasuo 2015.)

Dialysis is a treatment for patients whose kidney no longer functions at the level that it needs to in order to remove toxins and fluid from the blood. There are two types of dialysis, hemodialysis and peritoneal dialysis. Hemodialysis is when an external artificial kidney is used to clean the blood. The blood is filtered through the artificial kidney. All smaller toxins are filtered through a membrane in the dialysis machine, whereas blood cells, proteins and other important substances stay in the blood, as they are too large to fit through the membrane. Hemodialysis is typically conducted three times a week, four to five hours at a time. Hemodialysis is commonly conducted at the hospital, but also home dialysis is an option for some patients, and dialysis centers outside of hospitals also exist. (National Kidney Foundation 2015 A, C; Dialysis 2010.)

Peritoneal dialysis is where the lining of a persons' stomach is used as a filter. There are two methods of peritoneal dialysis. First method, called Continuous Ambulatory Peritoneal Dialysis *CAPD* is done during the day by the patients themselves. This is where a cleansing fluid usually consisting of sodium, chloride, lactate or bicarbonate and glucose is inserted into the belly through a shunt. A plastic bag with the fluid is fastened on to the shunt and the fluid then

goes into the belly and flushes out all the small toxins through the filter of the stomach lining again leaving the larger, important particles in the blood. This is normally done in the day, approximately five times each day. In the other method, called Automated Peritoneal Dialysis *APD*, the dialysis is automatically done during the night by a machine. (National Kidney Foundation 2015 B; Dialyysi 2008.)

The other more common group in disability sports are the actual recipients of organ transplants. Lakkasuo explained that the general fitness level of this group is very inconsistent. The level of their ability to function may vary from 30-90% of that of a healthy person. Lakkasuo revealed that the best fitness level is generally with those who have received a new kidney, while the lowest level of physical fitness is generally with those who have received a new heart or lung, or a heart-lung transplant. "A 50% decline in performance might not be visible in normal walking or sitting, but it might already show in carrying bags for example." (Lakkasuo 2015.)

Anti-rejection medication is the greatest cause for the decline in performance, not the transplant in itself. The recipients of transplants have to take a great number of medications, especially immunosuppressant's. The athletes have to be very careful with bringing all of the prescriptions and documentation of the large quantities of medicine that they have to bring with also when they travel. (Lakkasuo 2015.)

The medium age of transplant recipient athletes is quite a bit higher than in other sports categories. Also the turnover of athletes is quite small, as the athletes usually stay with the team as long as they possibly can. Lakkasuo said that the oldest competitor in the current team has been a competitive athlete close to three decades. The starting age for these athletes is quite high, as the age for receiving an organ transplant in Finland is higher than 45. (Lakkasuo 2015.)

One of the important features of this disability group and the people travelling with them is that everything has to be done on the terms of the current level of energy of the athletes. It is crucial to pay attention to the energy level of the athletes and if it seems to be declining, measures have to be taken to get the energy level back to tolerable. There have to be enough possibilities for rest. Another special feature of this group is that everything happens under the supervision of doctors. Doctors are consulted to ensure the safety of the destination, as well as to find out if the athlete has permission to enter the competition in the first place. (Lakkasuo 2015.)

According to Lakkasuo, the life expectancy of transplant recipients has declined from that of a normally healthy individual. There are statistically speaking deaths in every major trans-

plant recipient competition, so far the Finnish team has had no losses. The deaths stem from the strain of travel coupled with the strain of competitive sports. The athletes are aware of the risks, but the positive impact of this social and challenging event on the quality of life of the athletes seems to outweigh the risks. (Lakkasuo 2015)

## 2.5 Accessible Tourism

Accessible tourism and accessibility in general do not just serve the people who are traditionally viewed as disabled. Accessibility is going to become increasingly important due to the ageing population. These generations are used to travelling, and will most likely continue to do so also in the future despite having possible vision loss, loss of hearing or limitations in movement. It is important to understand, that while disability might not affect everyone, accessibility does. We all age, and we all will have some sort of permanent or temporary impairment at some point of our lives. Accessibility serves everyone and it benefits all.

“Accessible tourism is a form of tourism that involves collaborative processes between stakeholders that enables people with access requirements, including mobility, vision, hearing and cognitive dimensions of access, to function independently and with equity and dignity through the delivery of universally designed tourism products, services and environments. This definition adopts a whole of life approach where people through their lifespan benefit from accessible tourism provision. These include people with permanent and temporary disabilities, seniors, obese, families with young children and those working in safer and more socially sustainably designed environments.” (Buhalis & Darcy, 2011, 10-11.)

This aforementioned definition of accessible tourism lists mobility, vision, hearing and cognitive disabilities. Ageing and Hidden are also mentioned as disability groups in other sources. Ageing of course refers to the ageing population and the difficulties that come with ageing that need to be taken into consideration. Hidden as a disability group means a variety of illnesses that cannot be seen, but that need to be considered anyway when planning trips and travelling. Blood pressure or circulatory problems, heart problems, epilepsy, diabetes, breathing difficulties and of course transplant receivers are a few of those hidden attributes that may need some special care and consideration in everyday life and especially when travelling. (Buhalis & Darcy 2011, 50-57.)

These different groups of disability need slightly different processes for a space, event or a webpage to be accessible. Mobility is possibly the most characteristic disability, with people in wheelchair being the most evident representative of this group. Accessibility for this group is an entity which is assembled of many seemingly simple adjustments. These adjustments

should be universally standardized for tourism to be available for everyone, yet there are many establishments globally that advertise themselves as accessible, when in fact they do not fill the simplest of accessibility demands. (Väänänen, 2015.)

For the physically disabled people it is absolutely necessary that there are accessible routes everywhere, also a route from a hotel to tourist attractions needs to be accessible and barrier free. There should be no high thresholds and if there are stairs, there should also be an elevator or a stair lift large enough to fit an electrical wheelchair or any other walking or moving aid. It is important that hotel rooms have toilets that can also fit said aid in through the door, that the toilet seat is higher than normal, and that there is room to turn around in a wheelchair in a hotel room and in public spaces. There also needs to be accessible transportation available for an accessible tourism market to arise in a certain venue.

One of the most important aspects of making something accessible is communication. Since there currently are no global standards of what can be called accessible, the information about the measurements of doorframes or elevators and other such crucial information should be readily available for disabled customers to be able to effortlessly find suitable accommodation or attractions. (Väänänen 2015; Kuja-Kyyny 2015.)

For the hearing impaired it would be very useful to have a communicational device, so that communication would be in writing. It would also be useful to have a device with a program that translates foreign languages, as a large percentage of the hard of hearing are elderly and might not know other languages. Hearing loops are a very desirable addition to any public space. For official situations a sign language interpreter is a great asset. Furthermore it is suitable to have an alarm system that depends on other aspects as well as on audio, such as a fire alarm that uses bright lights as well as an audial alarm. (Buhalis & Darcy 2011, 34-41, 46-51.)

Accessibility for visually impaired people means clear visual and audial information. Service minded personnel that are trustworthy and helpful, yet do not force their help on customers is a great comfort and helps visually impaired people to feel safe and secure in strange settings. Tactile ground surface indicators help blind people to navigate as well as tactile miniatures of buildings. Not all visually impaired people use braille, but braille should nonetheless be used in all public spaces as an alternate means of communicating important information. It would also be helpful to have areas for guide dogs with perhaps a possibility for a water bowl for the dog. (Buhalis & Darcy 2011, 34-41, 46-51.)

For people with cognitive, developmental or intellectual disabilities the fundamental aspect of accessibility is clear and comprehensible communication in both writing and in speech. It is important to have clearly spoken, patient and approachable staff. The hidden group does not have any clear instructions that most of the people in this group would require, they are mostly self-manageable attributes that this group possess. Then again the ageing group might have impairments of all of these aforementioned disability groups, or none at all. However, making accessibility a norm would benefit all of these disability groups.

(Buhalis & Darcy 2011, 34-41, 46-51.)

### 3 Research Methods and Conduction

The subject of this thesis is Accessible Sports Tourism: The challenges in travel planning for disabled athletes. The aim was to find out some of the challenges regarding the travel planning for disabled athletes, as well as to come up with a conclusive template for the reservations of flights for VAU employees. Information on the subject was gathered using a qualitative method, specifically by conducting expert interviews. These experts were VAU employees and an accessible tourism expert from Matka-Agentit tour organizer. The qualitative method will be explained below as well as the process of choosing the research question. The last part of the research methods segment is going through the procedure of conducting the research.

#### 3.1 Choosing the Research Question

The subject of this thesis was decided on together with a representative from VAU. The author of this thesis came up with the idea of contacting VAU on a vacation in the north of Finland when they saw a disabled athlete downhill skiing. The personnel at VAU were very open and encouraging about the idea of conducting a research about the different aspects of international competitions and travelling for disabled athletes.

The interview questions are set around a few themes. The themes that were common for VAU and Matka-Agentit were: Practices and Policies Concerning Travel Arrangements for Disabled People; the Challenges Concerning Travelling as a Disabled Person; Attitude Issues and Bureaucracy and Suggestions for Improvement for Associates. Both were also asked about the co-operation between VAU and Matka-Agentit and how they feel it has been working. Matka-Agentit was additionally asked about accessible tourism in general, how they became a tour operator specializing in accessible tourism and about the ratio between supply and demand in accessible travelling.

The difficulty with this sort of a research question is limiting the area of studies. It is an interesting field, and as it is so closely related to accessibility, sports tourism, service chains and other extensive concepts, it is challenging to keep the research focused on just one or two aspects. That is why the research is slightly broader than the original concept of finding out a guide for the personnel of VAU for the reservations of international competition trips. However, it was important to have quite a broad understanding of different aspects of disability and how it affects travelling, as well as accessibility in general in order to be able to differentiate the important themes in the interview answers and come up with a satisfactory template for the reservation of flights for VAU.

The interview questions asked from VAU employees were:

<ul style="list-style-type: none"> <li>• Does VAU have common policies regarding the travel arrangements of international competition trips?</li> </ul>
<ul style="list-style-type: none"> <li>• What are the challenges regarding the travel arrangements for disabled athletes?</li> </ul>
<ul style="list-style-type: none"> <li>• Have you encountered prejudice or bureaucracy?</li> </ul>
<ul style="list-style-type: none"> <li>• What kinds of suggestions for improvement would you give VAU's associates?</li> </ul>
<ul style="list-style-type: none"> <li>• What are the practical tips you would give to a person who is making travel arrangements for disabled athletes for the first time?</li> </ul>
<ul style="list-style-type: none"> <li>• In what ways can the travel of disabled people be made more effortless?</li> </ul>

The Matka-Agentit interview questions were:

<ul style="list-style-type: none"> <li>• Do Matka-Agentit have common policies regarding the travel arrangements of international competition trips?</li> </ul>
<ul style="list-style-type: none"> <li>• What are the challenges regarding the travel arrangements for disabled athletes?</li> </ul>
<ul style="list-style-type: none"> <li>• Have you encountered prejudice or bureaucracy?</li> </ul>
<ul style="list-style-type: none"> <li>• What kinds of suggestions for improvement would you give your associates?</li> </ul>
<ul style="list-style-type: none"> <li>• What kind of co-operation would you like to have with VAU in the future?</li> </ul>
<ul style="list-style-type: none"> <li>• Is there demand for special needs tourism and is there enough supply? Do you think customers find your company easily?</li> </ul>
<ul style="list-style-type: none"> <li>• What are the ways in which the service chain of a disabled person differs from the service chain of the average customer?</li> </ul>
<ul style="list-style-type: none"> <li>• You have been profiled as an accessible tourism tour organizer. What does it mean for the company, and what have you gained from it?</li> </ul>

### 3.2 The Qualitative Approach

The research method used for this thesis was qualitative, as the information that the author wanted to gain was complex and very detailed. Also the interviewees were experts of many different aspects of the topic, and therefore it was necessary that each were interviewed from slightly different perspectives.

Qualitative research may be considered as a research method relying on verbal information when quantitative research relies on numeric data. Qualitative methods include interviews, observation, and analysis of different type of verbal or visual information. Qualitative research methods are often used in many social and humanistic sciences and may sometimes be referred to as soft research compared to the hard numerical data of quantitative research methods.

The purpose of qualitative research methods is to come up with considerable amount of heterogeneous information that may then be studied and analyzed. The analysis of qualitative information begins with carefully reading through the material numerous times to find the carrying themes in the data. The purpose is to find answers to the research question while keeping one's eyes open for reoccurring themes and also for possible polarities in the results. (Sarajärvi & Tuomi 2013, 71-74.)

The expert interviews were conducted using a fusion of theme interview and structured interview in that there was a structured set of specific questions that were asked from all of the interviewees, but supplementary questions were then asked from all the interviewees according to their own area of expertise, thus making it quite like a theme interview. A theme interview is a method where there is a certain theme, around which the interview is set. Theme interviews are normally quite fluid in structure and the interviewee is allowed to tell freely about the subject at hand, while the interviewer makes sure that the interviewee does not deviate too far from the original topic. Usually some sort of visual aids are used in theme interviews to help with the conceptualization of the themes and how they are related.

There was a predetermined set of questions in these interviews, yet the answers of the interviewees varied greatly depending on the additional questions. The questions were set so, that they could be answered based on the different viewpoints of the interviewees. The umbrella term for this method is called a semi-structured interview. This term includes all types of interviews that are not merely a set of pre-meditated interview questions asked in a set sequence, but have a more fluid form.



### 3.3 Analysis and Conduction of the Research

The process for this research began with coming up with the topic for the thesis. Once the topic was decided on, the decision needed to be made about what type of research methods would be used. Qualitative method was decided for the reasons mentioned in the previous chapter. Specifically expert interviews seemed to be the appropriate information gathering tool, to gain as much viable and valid information on the topic as possible.

After the research method, topic and manner in which the information would be gathered was decided, it was time to generate a frame for the interviews. It was important to find questions that would stay on the same topic, yet provide as much diverse information as possible. In the first meeting with a representative from VAU, a list of names of knowledgeable people on this topic was mentioned. All were then contacted, and five showed an interest in participating. The people who responded to the interview request were four VAU employees and an accessible tourism expert from Matka-agentit.

During the interviews the object was to ask the questions in the interview frame, while focusing on the interviewees' topic of interest, asking specified questions about the topic that the interviewee was an expert on. The interviews were recorded and the recordings were later transliterated. The scripts of these interviews were then carefully examined and themes were gathered from these scripts. Next these themes were named, and the information gathered from the interviews translated from Finnish and compiled into the results of the research which is the next segment of this thesis.

The analysis of the transliterated data was made challenging by the fact that there could be sentences belonging to a completely different theme in the answer of another theme's question. This is why the data was analyzed as a whole and not just question to question. A color was chosen to represent a certain theme, and every sentence related to said theme was marked using the color, thus making it easier to perceive themes as a whole beyond the frames of theme-related questions.

## 4 Results of the Research

In this part the results of the research conducted by interviews will be analyzed and divided into themes relevant to the research question. There will also be themes related to Accessible Tourism in general. The experts interviewed for this research are VAU personnel Viivi Kujja-Kyyny, Membership Services Coordinator; Teemu Lakkasuo, Responsible for the International Operation of Transplant Recipients/ Chief of Marketing; Harri Lindblom, Sports coordi-

nator; Hannele Pöysti, Branch Chief of Competitive Sports and the Matka-Agentit Tour Organizer District Chief of Sales Kaisu Väänänen. The results were satisfying and provided the author with a great deal of new information. All of the results in the next segment are based on these interviews. The interviews can be found in their entirety with the author, and may be requested upon. The author will have the data of these interviews available for review for a minimum of six months.

#### 4.1 The Policies of VAU Regarding Travel Arrangements

During the interviews with VAU personnel it became apparent that there is a need for some clarification of policies regarding the reservations of international flights for the athletes. The first person interviewed was Viivi Kuja-Kyyny, Membership Services Coordinator formerly in charge of the communication between VAU and the co-operating travel agency. She explained that formerly the reservations had been her responsibility, but due to her not knowing all of the athletes and their special needs, the reservation process had been reallocated to the sports coordinators and trainers of teams. They are better acquainted with the athletes with whom they work.

This relatively new policy however is not quite clear to everyone, as a portion of the interviewees stated that Kuja-Kyyny is in fact in charge of the reservations. Kuja-Kyyny stated that she may reserve flights for small groups of less than 9 people, while another interviewee said that Kuja-Kyyny reserves the flights for larger groups, and trainers may do the reservations for smaller groups. All respondents however felt that it would be useful to have written instructions for the procedures of reserving flights for a vast amount of people with different needs and features. There will be a suggestion of how such a form for the purpose of reserving flights might look like.

#### 4.2 The Challenges Regarding International Trips and How They May be Alleviated

There are many different types of challenges associated with travelling as a disabled athlete. For the purpose of this research they have been categorized into challenges regarding different types of tools and aids; challenges regarding health, disability and illness, and challenges with accessibility. These challenges will be further examined in the next chapters.

#### 4.2.1 Challenges Regarding Tools and Aids



Mobility Aids (VAU 2015.)

In many disabilities there are some tools that the athlete needs in order to have mobility, such as a wheelchair or a walker. These tools are essential to the athletes' quality of life, and yet may prove to be a challenge when travelling. Many airlines have quotas concerning how many people in wheelchairs may be on board a flight. This presents a challenge for some teams, as they would like to fly together, yet have too many people in wheelchairs and have to be divided into several flights. (Pöysti 2015.)

This is one of the reasons why it is essential to be in co-operation with a travel agency with knowledge of accessible travelling, as they have the information in advance of which airlines take how many people in wheelchairs. According to Väänänen, these quotas can however sometimes be discussed and some airlines do compromise on their regulations. These are not any state laws, but regulations set by airlines themselves. (Väänänen 2015.)

Other challenges regarding tools and aids are related to the sports. In some sports there are many tools that belong to the game, or enable the athlete to play the sport despite the disability. For example wheelchair rugby, most of these athletes must have two wheelchairs on the competition trips; the one they use in day-to-day life for mobility, and the one that is especially designed for the sport. This extra baggage brings often with it extra costs. Airlines

charge by weight of luggage and these mobility- or sports aids can weigh quite a bit and therefore cost a great deal for the athlete. (Kuja-Kyyny 2015.)

#### 4.2.2 Challenges Regarding Health, Disability and Illness

There are a few issues that come up when thinking about how different disabilities affect travelling and travel arrangements. Firstly with intellectual disabilities it is important to have assistants that the disabled athletes trust, so that the stress and possible fear factor of travelling does not become too great. The reactions of intellectually and developmentally disabled people may be unpredictable and strong, and there may be behavioral issues related to these disabilities. On longer flights this behavior might cause friction with the other passengers who might not be able to understand why these people are acting in a strange manner. Therefore having familiar assistants who know how to get the intellectually disabled people to calm down is crucial. (Kuja-Kyyny 2015.)

For some of the more severely disabled people keeping the flight time reasonable is essential in order to avoid complications brought on by the stress of long flights to the body. One of the physical challenges in flying is the lack of accessible toilets in aircrafts. There are means of making it through even long flights without using the toilet, and it is very unlikely that there would ever be an accessible toilet in an aircraft, but this is a challenge that needs to be considered before the trip. Also when there are longer flights the goal is to have an overnight stop-over to make the voyage less strenuous. (Lakkasuo 2015; Lindblom 2015.)

The strictest rules in travelling apply to transplant recipients. Medically they do not belong to any flight risk group per se, but the strain of flying and competitive sports together with possible jetlag puts a great strain on transplant recipients' bodies. Flight time is one great factor in the overall strain of travelling. It is crucial to minimize the flight time for transplant recipients, or have a layover if the flight time is very long. People in peritoneal dialysis must have their dialysis liquids with them onboard the flight, which may cause some challenges with the current flight safety regulations. (Lakkasuo 2015.)

Lakkasuo explained that as the strain of flying is greater on transplant recipients, longer flight times may cause the athletes to fall ill or for their fitness level to decline. As we are talking about athletes, it is necessary for them to be at their best fitness level when they arrive to the competition venue. He also disclosed that in the coming competition trip to Argentina they are arriving two days earlier than the official arrival date to have enough time to recover from the strain of the voyage. (Lakkasuo 2015.)

Transplant recipients must have a doctor's permit to enter competitions, thus releasing some of the responsibility from VAU. The northern countries have a very strict vaccination regime, and as transplant recipients cannot receive many vaccinations due to their condition, the vaccination requirements of competition venues are evaluated based on the Nordic vaccination scheme. The challenges with transplant recipients tend to be medical and health-related, and this is why this group in particular should have a person who is acquainted with the special features and the medical inclinations of these conditions. (Lakkasuo 2015.)

Matka-Agentit also arranges trips for dialysis patients. Väänänen explained that these trips tend to have a trained nurse as the tour leader, who then organizes the dialyses in the destination. She also revealed that on these trips there is a higher possibility of cancellations close to the trip due to the condition of the organ, there is always a risk of kidney failure in dialysis patients. The possibility of the customer then receiving any monetary compensation for the price of the trip is very low, but in these cases it is a risk they take willingly or at least knowingly. (Väänänen 2015.)

According to Väänänen it is possible for dialysis patients to travel abroad. This is not a well-known fact though, as the arranging of dialysis in the destination falls to the hospital responsible for patient's care in their home country and takes up the hospital's resources. It is however possible and inside the EU also free of charge for the patient. (Väänänen 2015.)

#### 4.2.3 Challenges Concerning Accessibility

The theme that came up the most in the interviews concerning the accessibility challenges was the fact that accessibility information is rarely trustworthy. If an establishment says they are accessible or that they have accessible spaces it is not something that one can just blindly trust. If a hotel has accessible rooms, many specifying questions must be made in order to get a real picture of the level of accessibility of the place. For example what are the measurements of the bathroom door, what are the measurements of the elevator, does accessibility for this establishment mean that only people in wheelchairs are taken into consideration or is it also accessible for those with sensory disability; is the pathway to other spaces in the hotel accessible, for example the breakfast room or the bar. (Lindblom 2015; Kuja-Kyyny 2015; Väänänen 2015.)

Väänänen talks about the lack of information of establishments of their own products; how a hotel might not have the measurements of the accessible room door, or the height of the bed. This information should be publicly displayed on the webpages of companies, or at least available from the personnel of the venue. (Väänänen 2015.)

This is why there is a great need for universal standards on accessibility, it would make it possible for an establishment to disclaim in their advertisement that they comply with the accessibility standards level A, B, C, etc. Different levels could mean how many different aspects of accessibility are being considered. This way the information could be trusted, instead of having to ask confirmation on all the details.

In addition to having to ask the details of how accessible an establishment really is, if a person has any disability-related aid such as a wheelchair or a seeing-eye dog, they cannot use the normal reserving channels such as reservation websites. They have to contact either a travel agency or the hotel or airline directly. This is the main difference in the service chain of disabled people and the general population. Because of this people are in quite an unequal position, as disabled people can't use many cheaper services and must pay either for the services of a travel agency or possibly very expensive customer service calls. (Kuja-Kyyny 2015; Väänänen 2015.)

The ratio between supply and demand in Accessible tourism is notably lopsided. The demand for new destinations and new accessible tourism products is ever growing, yet the supply is not responding at the same rate. According to Väänänen there are destinations which do not have transportation for disabled people, or as stated before, which claim to be accessible but in fact are not. In many destinations the infrastructure is not there to bring in disabled tourists. There is a definite need for new accessible destinations and venues. (Väänänen 2015.)

A few challenges unrelated to health, accessibility or tools and aids came up in the interviews. One of these challenges was from the perspective of a travel agency, and that was the number of available seats with airlines. Airlines always have quotas concerning groups, and even if there were seats available for a certain flight, there might not be any for groups. Another airline and travel agency related challenge is that the service for confirming the possibility to bring an aid to the flight is mostly outsourced. According to Väänänen it may take as long as weeks for the travel agency to get a confirmation of whether a disabled person with an aid and a need for assistance has a place on the flight or not. (Väänänen 2015.)

Financing may be a challenge for the athletes, as a very large percentage of the costs of the competition trips are mostly financed by athletes themselves. Especially for longer trips, the costs may become quite high, seeing as with different disabilities and aids any last minute flight offers or low-cost airlines are out of question. Sponsorships are relatively rare with disabled athletes. Mostly very young or very well-known athletes acquire sponsors, but mainly all competition activity is financed by athletes. (Lakkasuo 2015.)

As the middle age for the transplant recipient athletes is quite a bit higher than in other disability groups, language issues might be more of a challenge for this group in general. There are however always people in the team who do speak other languages, and can help teammates if communicational issues arise. Lakkasuo talks about the importance of clear communication when leading a group abroad. Especially when there are people with language issues, he would rather communicate too much information than too little. He also said that the most difficult situation language wise is when the organizer of a competition is not quite fluent in English as was the case in the Polish European Championship games. (Lakkasuo 2015.)

#### 4.3 Attitude Issues and Bureaucracy

“In most parts of the world there are deep and persistent negative stereotypes and prejudices against persons with certain conditions and differences (UN 2007).”

The question of whether there is prejudice against disabled people should in fact be asked from the disabled. It is a very personal issue, and people feel very differently about what they perceive as prejudice or discrimination. All of the interviewees replied that they had not faced any attitude issues with anyone they have been in co-operation with professionally. Väänänen also stated that Matka-Agentit chooses their affiliates carefully, which limits the possibilities of ignorant or prejudiced associates.

Väänänen did however go into detail on how the luggage is handled at the airport when they are transported to and from airplanes. This can be seen as an attitude issue as such, as the employees handling these precious walking and moving aids have been informed about the invaluable nature of these aids to their owners. Yet no improvement has occurred to the careless and indifferent way these personal items are handled. Understandably the employees are in a rush to get the plane flying, but there should be some way of ensuring that at least these indispensable aids would be treated with the care and respect that they need. While handling of luggage might leave something to be desired there should at least be respect for invaluable aids that ensure quality of life. (Väänänen 2015.)

While there haven't been any major issues regarding affiliates of both VAU and Matka-Agentit, Väänänen states that there still is a lot of prejudice towards the concept of disabled people travelling. The prerequisite for the advancement of accessible tourism is the general realization of the fact that if there would be a service, there would be customers. Disabled people want to travel; they only need more possibilities to do so. (Väänänen 2015)

#### 4.4 Suggestions for affiliates

The respondents felt that all in all the co-operation with different affiliates has been satisfactory, but there were many concerns with lack of accessibility or accessibility standards and also with bureaucracy when the respondents felt that there was not a clear need for it.

##### 4.4.1 Suggestions for Airlines and Airports

The first suggestion that came up was that it would be greatly beneficial to VAU if the names of passengers could be given in the latest possible time. There are always options for the final composition of the team depending on the current performance and fitness level of the athletes. Some flexibility in this matter would be appreciated. Another area where flexibility would be needed are the extra costs that come from the extra baggage that disabled athletes have with all the possible mobility aids and the aids related to the sports. (Pöysti 2015.)

An important improvement would be for the baggage handlers to get a broader education on the need to treat mobility aids carefully and with the utmost respect, as they are not only monetarily valuable but also extremely valuable to the quality of life of the disabled person. Some attitude and professional competence training is called for in this matter. (Väänänen 2015.)

Another improvement suggestion concerning non-airline related companies is the often poor time management of the companies providing assistance to those needing it. Often check-in starts two hours before departure, but disabled people many times must wait for assistance close to an hour, which then takes away from their personal time on the airport. As there are no disabled toilets on the airplanes it is very important for some disabled people to have the chance to use the toilet at the airports, but sometimes the wait for assistance takes away from that time. (Pöysti 2015; Väänänen 2015.)

One great improvement and a large step forward for accessibility would be the possibility to book flights online for disabled people without having to call affirmations and additional information to the airlines in question. This would require the one booking the flights to have the information of the measurements and weights of possible aids ready when they are making the reservation so that all the necessary information would be given to the airline right away. The need to contact the airline directly or to go through a travel agency puts disabled people in an unequal position compared to the general population.



#### 4.4.2 Suggestions for Companies Providing Accommodation

The need for general, global standards for accessibility came up in almost all of the interviews. The requests for accommodation companies were always related to accessibility and the need to have trustworthy information about the level of accessibility of the establishment in question. The interviewees told stories about hotels that claimed to be accessible, still were in multiple floors and had no elevators. Or where the only accessible aspect was the room itself, all the features that are generally a part of the price of the accommodation such as breakfast rooms and swimming pools were impossible to get to.

The aforementioned features of some hotels are quite acceptable, if they are honestly stated in the hotel information. Yet if a hotel claims to be accessible, and this is the level of accessibility in reality, it is false advertising and quite harmful. The problem is that accessibility is not often thought of, or known about. It is rarely that companies knowingly embellish their offer, rather it stems from ignorance.

This is why it is crucial that companies focus on disability and accessibility training and can thus knowingly give accurate information on the accessibility of the facilities. Accessibility should be a factor in the building and designing of all new public spaces and accommodation companies. It is much easier to take accessibility into consideration from the beginning than trying to renovate and improve old hindered establishments to be accessible. (Kuja-Kyyny 2015; Väänänen 2015.)

One improvement suggestion was about the websites of cities. Some cities have great websites that have a comprehensive section on the accessibility of the city and information of accessible destinations and accommodation. This is a reasonably small investment for cities but brings a great additional value to those who need accessible services, and also creates a positive image of the city. (Väänänen 2015.)

#### 4.5 Co-operation between VAU and Matka-Agentit

All respondents seemed to be aware of the co-operation between VAU and Matka-Agentit, however there were some uncertainties regarding the nature of this co-operation with some of the respondents from VAU; one respondent stated that the centralization of the reservations to Kuja-Kyyny is a positive thing, so that people don't reserve flights from all over and from different companies. This was a slightly confusing concept, as all the flight reservations are meant to go through Matka-Agentit.

Interviewees felt that the co-operation between VAU and Matka-Agentit has been working seamlessly so far. There was however some confusion whether Matka-Agentit have profiles of the athletes so that when given a name from VAU, they would know the additional information of this certain athlete. For example whether they have any aids for walking or if they have a seeing-eye dog. Some interviewees seemed to think they do, and some thought that they do not. This would be a suggestion from VAU employees to Matka-Agentit to have these profiles, if they do not currently exist.

Matka-Agentit also felt that the co-operation has been satisfactory, but would like to extend the co-operation to other possibilities. One idea for additional co-operation from Väänänen was for VAU athletes to have practice camps in warmer climates, as the possibility for training outside in Finland is limited to a very short season. They would also be interested in receiving information about the competition destinations, as it is not possible for them to personally test every new possible destination. They would be very grateful for hints and tips for destinations where either everything works exceptionally well or if someplace is not worth considering at all. (Väänänen 2015.)

## 5 Recommendations to VAU

One of the issues that came up in the interviews with VAU personnel was that not everyone was fully aware of who in fact is in charge of reserving flights for the athletes at the moment. Some were under the impression that it was the responsibility of Kuja-Kyyny, while she herself stated that the responsibility had been delegated to the coaches and the persons responsible for a certain sport. It might be useful to go through the current procedure once more with the people who it concerns.

Another issue that was not quite clear with many VAU employees was whether Matka-Agentit have permanent profiles of the athletes. Some said that they do, while some were under the assumption that only the previous co-operation tour organizer had such profiles. The author feels that whether the tour operator has these profiles or not, it would be quite useful for VAU themselves to have these profiles of all the athletes who travel with the sports.

One of the aims of this thesis was to come up with a unified protocol for reserving flights for the athletes. The author's suggestion of this protocol can be found as an appendix of this thesis. It is designed to work as a profile of an athlete, and it should have all the information that is needed when making travel arrangements. Thus it works as a combination of the flight reservation protocol and a profile of a certain athlete.

This profile contains all the personal information of a certain athlete as well as information on the possible special features or aids that the athlete might have which may affect the reservations. It would work as a certain type of checklist of what needs to be remembered and taken into consideration in regards to different types of disabilities.

## 6 Conclusion and Reflection

The aim of this thesis was to find out as much as possible about travelling as a disabled athlete. It was quite a narrow subject, but the background information needed to understand the concepts and issues related to the subject was vast and diverse. The author now feels better inclined to understand the concepts, issues and general lack of understanding and knowledge regarding disability, accessible tourism and accessibility in general.

The thesis process as a whole has been extremely interesting and eye-opening especially regarding accessibility and lack thereof. It has also been rewarding and confidence-building after hearing so many horror stories about people choosing the wrong subject and about the thesis process going on for even a few years to have had the process go this seamlessly. A great factor in the ease of this thesis process has been choosing an interesting topic that still after the whole process feels right, and like there would be so much more to study and research regarding this subject. Another beneficial factor has been having such an encouraging, positive and helpful commissioner as VAU. Also Kaisu Väänänen from Matka-Agentit was extremely helpful and brought a great deal of travel expertise into this study.

Many aspects related to the subject of this thesis were left uninspected. The author would have liked to further explore these aspects, had the requirements for a bachelor thesis been more comprehensive. As the bachelor thesis is quite limited by nature, many aspects had to be overlooked and left out of the research. For example this research had to be limited to solely be based on the expert interviews of people working with disabled people.

A possible subject for further examination and research would be to interview the users, i.e. the disabled athletes themselves. It would be truly interesting to find out how disabled athletes, if not disabled travelers and tourists who are not athletes, feel about the service chains of travelling as a disabled person, and how they feel the individual aspects of the service chain could be improved. Another idea for further studying would be to research the accessibility of online reservation websites and how it could be made possible to make reservations directly online for disabled customers.

There are still a vast number of opportunities for research and new innovations in the accessibility area both in qualitative and quantitative methods of research. Hopefully as the information about accessibility is starting to spread and as more and more students are finding the accessibility aspect in more and more subjects, there will be more global and local pressure for companies to invest in more accessible products and services.

The author feels that the results of the research of this thesis were conclusive. The author is very satisfied with the choice of subject, as they feel that this new expertise is a great asset in future employments. They also feel that the information gathered for the making of this thesis can be beneficial in many different situations and applications. All in all the thesis process was a positive and affirming experience.

The author would like to thank all the interviewees for their time and expertise, as well as Head of Research at VAU Aija Saari for her quick and patient help and for working as a mediator between the author and VAU. Senior lecturer and thesis counselor Leena Kuosmanen from Laurea University of Applied Sciences should also be acknowledged for her never ending understanding towards all different types of students and constant support and encouragement during this thesis process and during our studies in general.

## References

### Literature

Buhalis & Darcy, 2011. Accessible Tourism. Concepts and Issues. Ontario, Canada. Channel View Publications.

Buhalis, Darcy & Ambrose, 2012. Best Practices in Accessible Tourism. Inclusion, Disability, Ageing Population and Tourism. Ontario, Canada. Channel View Publications.

Higham & Hinch, 2009. Sport and Tourism. Globalization, Mobility and Identity. Massachusetts, USA. Butterworth-Heinemann.

Hinch & Higham, 2004. Sports Tourism Development. Channel View Publications.

Saari, A. 2015. Vammaisurheilu ja erityisliikunta lajiliitossa. Valtion Liikuntaneuvoston julkaisu 2015:1

Sarajärvi, A & Tuomi, J. 2002. Laadullinen Tutkimus ja Sisällönanalyysi. Helsinki. Tammi.

Shekhar, Ravi, 2009. Global Perspective on Disability. Chandigarh, IND: Abhisek Publications.

### Internet Sources

American Association for Intellectual and Developmental Disabilities. 2013 A. Definitions. Accessed 5.10.2015.

<http://aaidd.org/intellectual-disability/definition#.Vhlb0uztmkp>

American Association for Intellectual and Developmental Disabilities. 2013 B. Frequently Asked Questions.

Accessed 5.10.2015

<http://aaidd.org/intellectual-disability/definition/faqs-on-intellectual-disability#.VhlyuOztko>

American Optometric Association. 2007. Care of the Patient with Visual impairment.

Accessed 5.10.2015

<http://www.aoa.org/documents/CPG-14.pdf>

Dialyysi. 2010. Hemodialyysi.

Accessed 17.10.2015

<http://www.dialyysi.fi/doc.aspxid1070.htm>

Dialyysi. 2008. Peritoneaalidialyysi.

Accessed 17.10.2015

<http://www.dialyysi.fi/doc.aspxid1058.htm>

Explanatory Guide to Paralympics Classification. 2015. Paralympic Summer Games.

Accessed 5.10.2015

[http://www.paralympic.org/sites/default/files/document/150915170806821\\_2015\\_09\\_15%2BExplanatory%2Bguide%2BClassification\\_summer%2BFINAL%2B.pdf](http://www.paralympic.org/sites/default/files/document/150915170806821_2015_09_15%2BExplanatory%2Bguide%2BClassification_summer%2BFINAL%2B.pdf)

Finnish Sports Association for Persons with Disabilities.

Accessed 7.5.2015.

<http://www.vammaisurheilu.fi/in-english>

Invalidiliitto. 2015. In English. Organizational Work.

Accessed 19.10.2015

[http://www.invalidiliitto.fi/portal/en/fpd/organisational\\_work/](http://www.invalidiliitto.fi/portal/en/fpd/organisational_work/)

Kajaanin Ammattikorkeakoulu. Laadullisen analyysi ja tulkinta.  
Accessed 8.10.2015

<http://www.kamk.fi/opari/Opinnaytetyopakki/Teoreettinen-materiaali/Tukimateriaali/Laadullisen-analyysi-ja-tulkinta>

Matka-Agentit. 2015.

Accessed 14.10.2015

<http://matka-agentit.fi/>

Munuais- ja Maksaliitto. Hemodialyysi.

Accessed 17.10.2015

[http://www.musili.fi/munuaispotilaan\\_opas/munuaispotilaan\\_opas/hemodialyysi](http://www.musili.fi/munuaispotilaan_opas/munuaispotilaan_opas/hemodialyysi)

National Kidney Foundation. 2015 A. Hemodialysis.

Accessed 17.10.2015

<https://www.kidney.org/atoz/content/hemodialysis>

National Kidney Foundation. 2015 B. Peritoneal Dialysis: What You Need to Know.

Accessed 17.10.2015

<https://www.kidney.org/atoz/content/peritoneal>

National Kidney Foundation. 2015 C. What is Dialysis?

Accessed 17.10.2015

<https://www.kidney.org/atoz/content/dialysisinfo>

Palmuasema. A 2015. Mitä on Esteetön Matkailu?

Accessed 14.10.2015

<http://www.palmuasema.fi/p/mita-on-esteeton-matkailu.html>

Palmuasema. B 2015. Pääosissa.

Accessed 14.10.2015

<http://www.palmuasema.fi/p/paaosassa.html>

Paralympics. Categories and Classifications.

Accessed 7.5.2015.

<http://www.paralympic.org/classification>

Special Olympics. 2015. What is Intellectual Disability.

Accessed 5.10.2015

[http://www.specialolympics.org/Sections/Who\\_We\\_Are/What\\_Is\\_Intellectual\\_Disability.aspx](http://www.specialolympics.org/Sections/Who_We_Are/What_Is_Intellectual_Disability.aspx)

Travelling Despite the Disability. Hartikka, H. 2014.

<http://urn.fi/URN:NBN:fi:amk-2014061112557>

U.S Equal Employment Opportunity Commission. Questions & Answers about Blindness and Vision Impairments in the Workplace and the Americans with Disabilities Act (ADA).

Accessed 5.10.2015

[http://www.eeoc.gov/eeoc/publications/qa\\_vision.cfm](http://www.eeoc.gov/eeoc/publications/qa_vision.cfm)

Ulkoasiainministeriö: Global Finland. Kehityskysymykset ja Globaalikasvatus. 2011. Vammaiset Ovat Maailman Suurin Vähemmistö.

Accessed 6.10.2015

<http://global.finland.fi/public/default.aspx?contentid=213229>

United Nations Enable. 2007. Frequently Asked Questions.

Accessed 5.10.2015

<http://www.un.org/esa/socdev/enable/faqs.htm>

World Health Organization. Global Estimates of Visual Impairment 2010.  
 Accessed 7.10.2015  
[http://www.who.int/blindness/VI\\_BJO\\_text.pdf](http://www.who.int/blindness/VI_BJO_text.pdf)

World Health Organization. 2015. Disabilities.  
 Accessed 5.10.2015  
<http://www.who.int/topics/disabilities/en/>

World Health organization. 2014. Visual impairment and blindness.  
 Accessed 5.10.2015  
<http://www.who.int/mediacentre/factsheets/fs282/en/>

World Health Organization. The World Bank. 2011. Summary. World Report on Disability.  
 Accessed 5.10.2015  
[http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2012/05/30/000333038\\_20120530230029/Rendered/PDF/627830v200ENGL0ity0Summary00Arabic0.pdf](http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2012/05/30/000333038_20120530230029/Rendered/PDF/627830v200ENGL0ity0Summary00Arabic0.pdf)

#### Unpublished Sources

Interview with Hannele Pöysti, Branch Chief of Competitive Sports at VAU. 27.05.2015

Interview with Harri Lindblom, Sports coordinator at VAU. 03.06.2015

Interview with Kaisu Väänänen Tour Organizer District Chief of Sales at Matka-Agentit.  
 26.05.2015

Interview with Teemu Lakkasuo, Responsible for the International Operation of Transplant Recipients/ Chief of Marketing at VAU. 25.05.2015

Interview with Viivi Kuja-Kyyny, Membership Services Coordinator at VAU. 18.05.2015

Yhdessä ja Erikseen, VAU. Somero. Suomen Uusiokuori. 2014.

Visit to Iris Center for the Visually Impaired 2014.

#### Illustrations

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Picture on page 15: Seeing-eye Dog, VAU 2015

Picture on page 18: Arm of Patient Receiving Dialysis, Anna Frodesiak. 01.05.2012. Accessed 28.10.2015 [https://commons.wikimedia.org/wiki/File:Dialysis\\_-\\_arm\\_-\\_01.jpg](https://commons.wikimedia.org/wiki/File:Dialysis_-_arm_-_01.jpg)

Picture on page 27: Mobility Aids, VAU 2015





Appendixes

Appendix 1: Urheilijaprofiili, Muistilista lentovarauksista/ Athlete profile, checklist for the reservation of flights ..... 42

Appendix 1: Urheilijaprofiili, Muistilista lentovarauksista/ Athlete profile, checklist for the reservation of flights

## URHEILIJAPROFIILI

Urheilijan Nimi (Kuten se on passissa)

\_\_\_\_\_

Urheilijan Syntymäaika (ppkk.vvvv.)

\_\_\_\_\_

Urheilijan Osoite

\_\_\_\_\_

Urheilijan puhelinnumero (+358-xx xxx xxxx muodossa)

\_\_\_\_\_

Urheilijan sähköpostiosoite

\_\_\_\_\_

Urheilulaji

\_\_\_\_\_

**Matkustamiseen liittyvät erityispiirteet:**

Avustustarve (Pystyvkö ottamaan askelia, pystyvkö nousemaan rappusia?)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Liikkumisen Apuvälineet (Pituus, leveys, syvyys, paino)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Urheilijan Kuva

Urheilulajiin Liittyvät Apuvälineet (Pituus, leveys, paino)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sairauteen Liittyviä Erityispiirteitä (peritoneaalidialyysi, hemodialyysi, lääkkeet ym.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Elinsiirtourheilijat

Viimeisin Lääkärin Osallistumislupa

Päivämäärä \_\_\_\_\_

## MUISTILISTA LENTOJEN VARAAMISTA VARTEN:

- Urheilijan koko nimi niin kuin se on passissa
- Urheilijan koko syntymäaika
- Apuvälineet, niiden mitat (jos  
kokoontaitettava, niin mitat kokoontaitettuna)
- Opaskoira?
- Lajiin liittyvät apuvälineet sekä urheiluvälineet
- Vammaan/ sairauteen liittyvät erikoispiirteet
- Lentojen pituuden pitäminen kohtuullisena  
sekä tarpeeksi pitkät vaihtoajat
- Avustustarve
- Pystyykö ottamaan askelia tai nousemaan  
portaita

## ATHLETEPROFILE

Athlete's whole name ( As stated in their passport)

\_\_\_\_\_

Athlete's date of birth (dd.mm.vvvv)

\_\_\_\_\_

Athlete's address

\_\_\_\_\_

Athlete's phone number (+3 58 -xx xxx xxx)

\_\_\_\_\_

Athlete's email address

\_\_\_\_\_

Sports

\_\_\_\_\_

\_\_\_\_\_

**Special features related to traveling:**

Need for assistance (Can they take any steps, or walk up some stairs)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mobility aids (Weight, length, depth, width)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Picture of athlete

Sports related aids (Length, width, weight, depth)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Special features related to illness or disability (Dialysis, medicine etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Transplant athletes:

Latest doctor's permit for participation.

Date \_\_\_\_\_



## A CHECKLIST FOR RESERVING FLIGHTS:

- Athlete's whole name as it stands in their passport
- Athlete's date of birth
- Mobility aids and their measurements (if collapsible, measurements as collapsed)
- Guide dog?
- Aids and sports gear related to the sport
- Special features related to disability/illness
- Reasonable flight times and long enough stopovers
- The need for assistance
- Can they take steps or some stairs

