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¡ME GUSTA LA FIESTA!

**Organizing a Mexican Theme Party for the Residents of Kokkolan
Hoitokoti**

Thesis

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ABSTRACT

CENTRIA UNIVERSITY OF APPLIED SCIENCES Kokkola-Pietarsaari Unit	Date April 2013	Author Eveliina Laine
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Name of the thesis ¡ME GUSTA LA FIESTA! Organizing a Mexican Theme Party for the Residents of Kokkolan Hoitokoti		
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Supervisor Katarina Broman		
<p>The commissioner of this thesis was Kokkolan Hoitokoti and the instructor was Kristiina Huhtala. The aim of this thesis was to learn about different disabilities, disabled people as tourists and organizing a Mexican theme party for the residents of Kokkolan Hoitokoti. The event was organized together with two other students, Riia Finnilä and Ida Termonen.</p> <p>The theoretical part of the thesis gave information about different disabilities and what to take in to consideration when travelling with a disabled person. The practical part included planning and organizing the event. The final part reported the event. The research method used in this thesis was qualitative questionnaire. The staff members of Kokkolan Hoitokoti who took part in the event were interviewed after the event.</p> <p>The whole event went very well and according to the questionnaire results the staff members of Kokkolan Hoitokoti agreed with this. Only one answer was negative when asking if the organizers knew how to communicate with the residents. The staff members thought it was nice when someone else organized the event because they do not have that much time to do it. The residents seemed to have fun and everything went as planned.</p>		

Key words

Accessibility, disability, event management, travelling

TIIVISTELMÄ OPINNÄYTETYÖSTÄ

Yksikkö Kokkola-Pietarsaari	Aika Huhtikuu 2013	Tekijä/tekijät Eveliina Laine
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<p>Tämän opinnäytetyön toimeksiantajana toimi Kokkolan Hoitokoti ja työelämäohjaajana toimi Kristiina Huhtala. Opinnäytetyön tarkoituksena oli oppia eri kehitysvammoista, kehitysvammaisten matkailusta sekä meksikolaisen tapahtuman järjestämistä Kokkolan Hoitokodin asukkaille. Tapahtuma järjestettiin yhdessä kahden muun opiskelijan, Riia Finnilä ja Ida Termosen kanssa.</p> <p>Tämän opinnäytetyön teoreettinen osa antoi hieman tietoa erilaisista kehitysvammoista sekä tietoa, mitä pitää ottaa huomioon kun matkustaa kehitysvammaisen henkilön kanssa. Käytännöllinen osa oli tapahtuman suunnittelu ja toteuttaminen sekä lopuksi tapahtuman raportointi. Työssä käytetty tutkimusmenetelmä oli kvalitatiivinen kysely. Kyselyyn osallistui neljä Kokkolan Hoitokodin työntekijää, jotka olivat mukana tapahtumassa.</p> <p>Koko tapahtuma onnistui todella hyvin ja kyselytulosten mukaan Kokkolan Hoitokodin työntekijät olivat samaa mieltä. Vain yksi vastaajista oli sitä mieltä, että järjestäjät eivät osanneet kommunikoida asukkaiden kanssa. Työntekijöistä oli mukavaa, että tapahtuman järjesti joku toinen, koska heillä ei ole siihen niin paljon aikaa. Asukkailla näytti olevan hauskaa ja kaikki meni suunnitelman mukaisesti.</p>		

Asiasanat

Esteettömyys, Kehitysvamma, Matkailu, Tapahtuman järjestäminen

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1 INTRODUCTION

The aim of this practice-based thesis is to learn about different disabilities, disabled people as tourists and organizing an event for disabled people. The commissioner for the thesis is Kokkolan Hoitokoti. ¡Me Gusta la Fiesta! – Mexican theme party, will be the final project done together with two other students, Riia Finnilä and Ida Termonen. Me Gusta la Fiesta is Spanish and it means “I like to party” in English.

The thesis will start with an introduction to disabilities and describing the disabilities occurred with the residents in Kokkolan Hoitokoti. Then there is information about travelling with a disability or with disabled person. The final part is the practical part where the process from planning to evaluating the event is done.

According to the UN, there are about 650 million people in the world with different disabilities, both mental and physical. If you count their family, there are about 2 billion people who are affected by disabilities. Adding the people who have accessibility needs for some other reason, for example, older and less mobile people, accessible travelling is very important. (European Commission, Accessible tourism 2013.)

People have been travelling for ages and the tourism industry keeps growing and growing. The reasons why people travel are many. One can go to visit friends and relatives, one wants to go on a holiday to a sunny place and one travels for a business meeting. Some may think that travelling is granted, if you only have the time and money. There are people who need to think a lot further; disabled people.

It is not obvious where to travel if you have barriers to live an independent life. There are a lot of things to think about other than money and time. Nowadays many destinations all around the world offer for example resorts with good accessibility.

2 KOKKOLAN HOITOKOTI

Kokkolan hoitokoti is a nursing home for 17 residents who are disabled. It was founded in October 1988 and in 2004 they transferred to operating under Kokkola city. They offer home and 24/7 care for the residents and temporary care for those who need it. Kokkolan Hoitokoti includes two separate buildings, A- building and B- building. The residents are separated by their age, younger and older. All of the residents have their own personal nurse. (Kokkolan hoitokoti, perehdystyskansio 2013.)

The residents in Kokkolan Hoitokoti have their own room, common living rooms and dining rooms. All of them take part in their everyday chores according to their abilities. In the free time they do activities such as outdoor activities, go to clubs, parties and do horse riding both individually and in groups inside the centre and outside. They also get therapy, music-, activity- and physiotherapy individually. (Kokkolan hoitokoti, perehdystyskansio 2013.)

The principles of Kokkolan Hoitokoti are: good basic care and safety, treatment of residents' individual needs, homely environment and residents' possibility to move to a different area of the place according to their development. (Kokkolan hoitokoti, perehdystyskansio 2013.)

3 PEOPLE WITH DISABILITIES

This chapter introduces the concept of disability. The chapter includes disabilities in general and short descriptions of some common additional disabilities. They are: CP disability, Down syndrome, autism, visually impaired people and people with reduced mobility. These types of additional disabilities occur with the residents in Kokkolan Hoitokoti.

People with disabilities are those who were born with or were diagnosed at the age of under 18, with mental disabilities (IQ is under 70) and that is why the person is unable to take care of personal things like other people are. (Oy Duodecim, Kehitysvammaisuus 2009.)

The 'disability' concept includes body impairment, performance and participation limitations. The disability Services Act in Finland defines who is able to get special care services. People whose physical development or mental function is inhibited or deranged and who have been diagnosed when they were born or in the age of growth, are legally entitled receiving special care services. (Kaski, Manninen & Pihko 2012, 15-16.)

3.1 CP disabilities

Cerebral Palsy, better known as CP, mostly appears before birth. Also premature children are in the risk of getting it. The most common reason to get CP is when the brain does not get enough oxygen before birth or during the delivery. The second common reason is cerebral haemorrhage. Other reasons are virus infections, poisons and brain-, spinal cord dysfunctions. All these factors can

damage those parts in the central nervous system which control the muscles and movement. (Kaski et al. 2012, 121.)

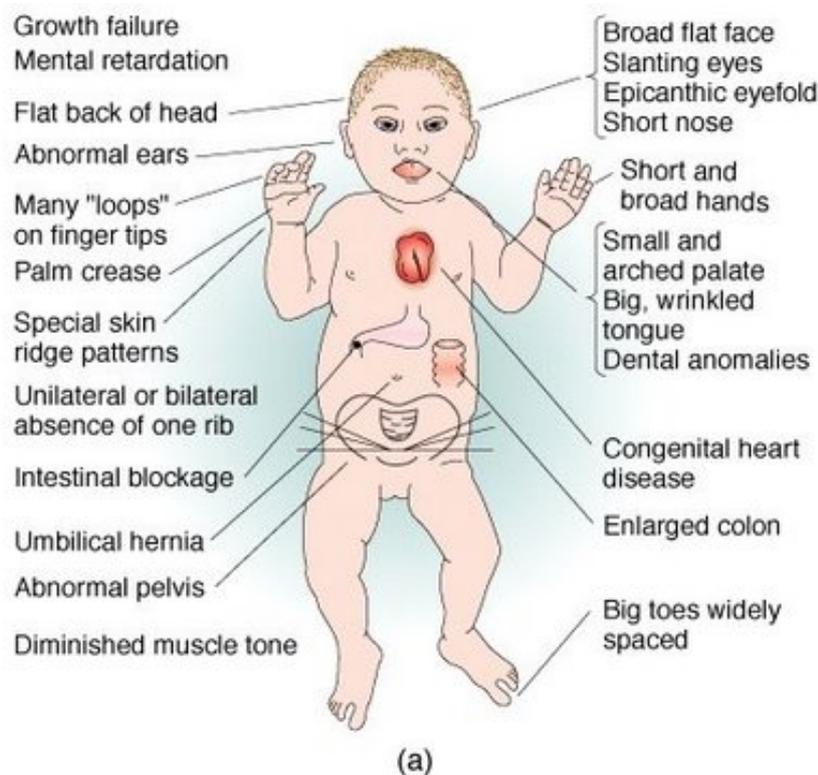
The CP types can be divided into four different categories. 'Spastic CP' is a type where the movement is stiff and unbalanced mostly in the legs, arms or back. The elasticity changes and the muscle growth is disturbed. Spastic CP is 50-75% of all the CP disabilities. 'Athetoid CP' is a form of CP which can affect the whole body. Most of the people who have this have slow uncontrollable body movements and low muscle tones. It makes walking and sitting straight difficult. This type is 10-20% of all cases. 'Ataxic CP' is characterized by bad coordination, balance and depth perception. This CP type is 5-10% of all. 'Mixed CP' is the combination of all the types listed above. The muscles are both high and low tone. Some muscles are too stiff and some muscles too loose, which creates unwanted movements. (Nichcy 2012.)

3.2 Down syndrome

Down syndrome is the most common disability caused by chromosome damage. It is usually caused by extra sets of chromosomes, which means that normally people have 46 chromosomes, but people with Down syndrome have 47. Statistical analysis tells that giving birth to a child with Down syndrome increases with age. 45-year old mothers run a 4% risk of having a child with Down syndrome, compared to the mother of 25 years old who only has 0.05%. (Viitapohja 2010.)

People with Down syndrome have abnormal appearance. The head is usually smaller, the palpebral fissure in the eyes is directed upwards and the corners of

the eyes have wrinkles. The ears are smaller as well as the mouth and throat. The muscles are loose and they have quite dry skin. (Viitapohja 2010.)



GRAPH 1. The symptoms of a Down syndrome (adapted from Doctor Tipster 2012)

3.3 Autism

An autistic child has major difficulties in communication and social interactions. Autism is a permanent feature and the reasons are usually unknown and presumably different from different children. Most different genetic factors might affect getting autism. Also different infections and poisons in the nature during the mother's pregnancy may cause to have a baby with autism. It is more common

for boys to get it than girls and children whose father is over 40. (Oy Duodecim, Autismi 2012.)

Autism occurs before the age of three. A child or an adult with autism has difficulties to understand other people's feelings and thoughts from the looks and actions. This is why a child with autism may avoid eye contact and his/her nonverbal interaction has major lacks. The child is unable to react normally to joy, or show his/her interests in different things. The spoken skills may develop slowly or they may never learn to speak. (Oy Duodecim, Autismi 2012.)

The symptoms of autism vary a lot from child to child. When growing up many autistic children are able to establish relationships with other people and their behavior problems get less. Some autistic children are very talented in some areas, such as mathematics, music or art. (Oy Duodecim, Autismi 2012.)

3.4 Visually impaired people

Visually impaired people can be blind or visually impaired. A visually impaired person is defined as a person whose visual acuity is less than 0,3 with the better eye after trying to fix it with eye glasses. A person is blind when the visual acuity is less than 0.05 or the view diameter is less than 20 degrees. A person is not classified as visually impaired person if the sight can be fixed with eye glasses or if one of the eyes has normal vision. (Näkövammaisuuden keskusliitto 2013.)

3.5 People with reduced mobility

According to the disability register there are people with reduced mobility in every fourth of disabled people who are in a special care district. Reduced mobility is a significant part of additional symptoms with disabled people.

Different types of reduced mobility are listed as followed: brain damage under the age of 2 (CP- disability), later obtained brain damage, muscle illnesses, arthritis, hemophilia (progressing brain disease) and others, for example spinal cord tumors and infections. Even if the first two examples resemble each other a lot they should not be mixed together. Each of these types will get different treatments. The most important type that causes reduced mobility is structural abnormality. (Kaski et al. 2012, 132.)

4 TRAVELLING WITH A DISABILITY

When travelling with a disabled person or with a disability there are lots of things to take into consideration. To make the trip perfect certain facts need to be checked from the destination. These environmental things are physical, psychological and social. Facilitating accessibility makes the travelling easier for everyone, but for some, it is an absolute must. Usually disabled people need to have an assistant with them on a trip. The trip needs to be well prepared in advance to avoid problems. It is good to find out how the accessibility issues are in the chosen destination. These things can be: parking lots, entrances, hygiene and accommodation issues, dining rooms, activities and living rooms. (Suomi kaikille 2012.)

4.1 Accessibility

Disabled people are not the only ones who need accessibility. The reasons are not always related to physical condition. There are people who do not move as well as other people, for example, elderly people or people with pushchairs. They all have special access needs and it can make the holiday very difficult. For these people travelling can be a challenge from the beginning to the end when finding the information on accessible services to flights. It takes lots of time and can be expensive. (European Commission, Accessible tourism 2013.)

There is evidence that it increases visitor numbers when making the facilities more accessible, giving the information to disabled people and understanding their needs as tourists. Improving the accessibility for tourists makes the facility more

high quality and increases the enjoyment. (European Commission, Accessible tourism 2013.)

4.2 Tips for travelling

The condition of the disabled person and the supply of the holiday provider will affect what kind of trip is chosen. It depends on how comfortable the traveler can get in different types of trips. When booking the trip, make sure that the tour operator is fully aware of the person's condition.

Like for everyone, insurance is an important thing when travelling and in this case it is even more important that it covers all the needs. When planning the trip, always check beforehand what the destination offers from guidebooks or calling. Some of the airlines may not have accessibility so make sure the chosen airline has this opportunity. If the person is under a medication, make sure the medicine policy is under control. (Crown 2012.)

In 2008 a regulation was made where EU airlines were not allowed to refuse to take bookings from a person with reduced mobility or disabled people. The airlines must also provide some free services. These services are, for example, carrying a wheelchair and guide dogs. The staff at the airport should be trained to handle disabled people or people with reduced mobility. (Crown 2012.)

4.3 Activities for disabled people

There are several ways for disabled people to enjoy their holiday with a little help. Here are few examples of outdoor activities: Horse riding is a valuable experience

both physically and mentally. Through this they improve their balance, body and co- ordination. Fishing is a popular activity also among disabled people. It increases concentration skills, is a social event and gives a feeling of achievement. Cycling has the same benefits for everyone. It gives physical and mental wellbeing and for disabled people it is a good way for independent mobility. (Outdoor sport for disabled people 2012.)

There are still many more activities in the world for disabled people and new are coming all the time. The activities listed above are only the most common for disabled people. Even water skiing is getting more popular. (Outdoor sport for disabled people 2012.)

5 ORGANIZING THE EVENT

The idea of doing a practice-based thesis was very clear in the beginning for all the organizers of the event. There were lots of discussions what kind of event or trip would be organized and to whom. The idea of organizing an event for disabled people sounded interesting and challenging enough. This idea was developed into action and the next chapter tells what was done before the event.

5.1 Planning the event

The whole thesis process started in October 2012 with the thesis proposals. After that the brainstorming together with Riia Finnilä and Ida Termonen started. When deciding that the event would be organized for disabled people, the potential commissioner had to be found. After a few contacts, Kokkolan Hoitokoti agreed to be the commissioner and the real planning could start.

The idea of an event or a small trip was clear but there were still a few problems. The residents of Kokkolan Hoitokoti should pay their own costs so the trip would get too expensive. That had to be forgotten. The commissioner asked for something new what they had not done earlier. After asking what had been done it sounded like there was nothing they had not done already. Then the idea of a Mexican party came. Everyone could join and it could be organized in the premises of Kokkolan Hoitokoti.

Mexico as a theme is quite well known everywhere so it is easy for the residents to understand the idea. First the program and food had to be decided and the organizers ended up serving tradition Mexican food, burritos. The program was

a bit harder part to decide. Piñata was in mind from the beginning but it was not enough so hand crafts came along. Good Latin music needed to be played so dancing could be done too if somebody would want to.

The preparation for the event started quite early. The handicraft models, piñatas and posters were made a few weeks before the event. For the food part the prices from a shop needed to be checked and a list of all the ingredients that would be needed, made.

A lot of time was spent on thinking and doing the preparations. The pre- tasks took more time than was calculated but a good thing is that everything was started early enough. There were enough tasks for everyone who organized the event and lots of different thoughts shared together.

5.2 Risk management of the event

Organizing events or festivals always have their own risks. There are many things to take into consideration when organizing an event for disabled people. Time has been used a lot when thinking about how to minimize the risks. This is the first time for the organizers to organize anything for disabled people so risk managing is one of the most important things in this project. The next part is about the risks there are with the project and how to minimize them.

Administration- A lot of contact by e-mail, phone and visiting Kokkolan Hoitokoti was done. All the arrangements were agreed very closely with the commissioner. Any permits or licenses were not needed from the police for this event.

Marketing- Marketing was not done a lot because it was only for the residents in Kokkolan Hoitokoti and not a public event. Posters of the event were hung on the walls in Kokkolan Hoitokoti so the residents knew they were having an event.

Health and safety- This part is probably the most important one. The nurses of the residents participated in the event so that decreased the safety risks a lot. Of course the organizers studied a lot about disabilities before the event but since this is completely new for the organizers it is very difficult to be prepared completely. There was a risk with the food because some of the residents are allergic to some ingredients. There are few who cannot eat solid food so that needed to be taken into consideration as well. (Allen, O'Toole, Harris & McDonnel 2011, 545.)

6 ¡ME GUSTA LA FIESTA! – THE EVENT DAY

The event day was held on 6 March 2013 in the premises of Kokkolan Hoitokoti. The residents were supposed to return home around 14 o'clock from work so the party could begin. The organizers had a lot to do before the party and the next chapter will tell more about the preparations. The chapters below are in the order as they happened in the event.

6.1 Preparations

The day before the event the organizers went to get decorations from Tex Mex Restaurant Pedrina's. It is a Mexican restaurant in Kokkola and they promised that all the decorations can be borrowed from there. There were Stetsons, table cloths, music, piñatas as decorations and lots of other smaller things.

On the event day the organizers went to prepare the event around 9am. There were lots to do for everyone. The food needed to be chopped and cooked and the decoration of the room. First the organizers divided the work and planned who would do what in the event. There was enough time to do everything before the residents arrived back from work.

6.2 Handicrafts

The event started with handicrafts. There were two things to do: the flag of Mexico and a cactus which could stand. The idea was to have something easy without cutting. The organizers had done the preparations before so there was gluing and decorations left. All the residents got the hand crafts with them when the event ended. The residents got help and guidance with everything if they needed. Some of the residents had enough time to do more than just one each. It seemed to be very suitable for everyone and almost everyone could glue and decorate with just a little help.



GRAPH 2. The handicrafts table (permission given by Kristiina Huhtala 5 April 2013)

6.3 The piñata

Piñata is a tradition in Mexican parties. It is usually made into the form of an animal using paper, balloon, glue and decorations. There is no “right” way to do it and imagination can be used very much when doing a piñata. It is stuffed with candies and treats so when it is broken the candy will come out of the piñata.

The main idea with the piñata is to get it broken. There are many ways to do it but usually the person who tries to break it is blind- folded and he/she tries to break it with a stick, for example with a baseball bat. The two piñatas used in the event for Kokkolan Hoitokoti were made of balloon, newspaper, glue and different decorations. The method to get it broken was the same as said earlier, except the resident’s eyes were not blind- folded. Under the chapter there are pictures of the piñatas and one of the residents trying to break it.



GRAPH 3. Piñatas (permission given by Kristiina Huhtala 5 April 2013)



GRAPH 4. A resident hitting the piñata (permission given by Kristiina Huhtala 5 April 2013)

6.4 The food

When thinking about suitable Mexican food it was quite fast decided that the food was going to be chicken burritos. They are soft and everyone can eat them. The chicken had to be chopped into very small pieces as well as the other ingredients. In the morning all this was done and everything was ready to serve in bowls. It was easier that the residents sat down and the nurses of Kokkolan Hoitokoti and the organizers filled their burritos. There were two burritos stored for each

resident but not all had both. They seemed to like the food very much and some said it was the best part of the event.

Overall the event went very well and no major mistakes happened. The residents seemed happy and satisfied with the program. All the preparations were done in time and the flow of the program was good. Almost everyone could join the activities. The process taught planning and organizing everything without any bigger need of help from the outsiders. Compared to the previous knowledge of planning events and especially planning an event for disabled people, everything went very well.

7 THE RESULTS OF THE QUESTIONNAIRE

After the event four staff members were interviewed about the success of the event. There were six questions with free comments and the last part was free comments generally. The idea was that the staff members would think of the answers also from the residents' point of view. The organizers asked the questions and filled the questionnaire paper. Below this chapter is the summary of the answers. The measurement scale used in the questionnaire was: 1 as extremely good, 2 as good, 3 as satisfactory, 4 as bad and 5 as very bad.

The first question was about the overall success of the event. All the interviewees rated the event success as 'extremely good'. They stated that the event was versatile and functioning, when taking into consideration the residents' capability to function. In their opinion there was not much need for guidance and the event was well planned.

The second question was about the success of the different parts of the event. The parts were divided as follows: handcrafts, dining, piñata and decorations. Open comments about these areas were that much had been made with little resources. It was important that the venue was dashing. According to the staff members the residents were enjoying the event. Facial expressions and comments of the residents were observed during the event. Good comments about the food were heard many times. One of the residents said that the food was 'good', just like pizza. All the four staff members said that the handicrafts and decoration part was 'extremely good'. One said that the piñata part was 'good' and one said that dining was 'good'. One of the staff members said that the organizers should have had more information about the residents.

The measurement scale used when evaluating the duration of the event is 'good', 'too long' or 'too short'. All of the interviewees thought that the duration of the event was 'good'. They stated that there could have been more programme. The parts were well connected and the parts did not last too long, since the residents do not like waiting.

Then there was a question about the overall atmosphere. Out of the four respondents three said that it was 'extremely good'. One stated that it was 'good'. According to the interviewees the music was 'good', the colors were nice and the happy feeling was catching to the residents. It felt like a party immediately when entering the room. The organizers seemed confident.

The fifth question was about how the organizers could communicate and be with the residents. Three out of four told that communication was working 'extremely good' and one told that it was 'bad'. The residents were treated as anybody. The organizers were communicating well with residents with different communication skills. They were eager to serve but did not know how to act with the residents.

The sixth question was concerning if they got something from the event. All the answers were positive. The event was a nice change to their everyday life. The theme was described as unique. They had had other country theme parties before. They told that they rarely have similar events because they do not have time to organize events like this. Food was a good and new thing compared to the previous parties.

Finally there was possibility to give free comments about the event. They said that it was nice to have the party and in the future they are hoping to have more events like this. In overall the staff and residents of Kokkolan Hoitokoti seemed satisfied during and after the event.

8 CONCLUSIONS

The main purpose of the thesis was to organize a successful event for a special group. It was very unanimous to organize the event for disabled people. We called a few other places before Kokkolan Hoitokoti but we did not get any reply from them. It happened quite fast that Kokkolan Hoitokoti agreed to have us organize the event for them.

We planned the event so that as many people could join as possible. A trip somewhere would have been too difficult for some residents so we decided to have the event where they live. Kristiina Huhtala gave good information on what we could do with them and what kinds of activities they are capable to do. We chose to have something easy that everyone can do, such as hand crafts and piñata.

The event was held in Kokkolan Hoitokoti on 6 March 2013. Everyone seemed to enjoy their time in the Mexican party which showed us that we did a good job. When I think afterwards what we could have done differently, I cannot think of anything. The knowledge we had before starting this project was so little that this was the best we could do. According to the questionnaire results, the staff of Kokkolan Hoitokoti was pleased that we organized the event. Most of them said it is nice that someone else comes to organize events because they do not have time. The whole process has been challenging and time consuming but I am glad we did it. It taught a lot about different people with disabilities, which we do not learn from school. Everything was made in time and we made a schedule and kept to it.

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3. Oliko tapahtuman kesto Liian lyhyt? Liian pitkä? Sopiva?

4. Millainen oli yleinen tunnelma? (1= erittäin hyvä, 5= erittäin huono) 1 2 3 4 5**Perustelut:** _____

5. Kuinka hyvin järjestäjät osasivat toimia ja kommunikoida asukkaiden kanssa? (1= erittäin hyvin, 5=erittäin huonosti) 1 2 3 4 5**Perustelut:** _____

6. Voisitko arvioida tapahtuman antia?

7. Vapaat kommentit

Kiitos osallistumisesta!

PROJECT PLAN

TASK	TIME	DIVISION OF WORK
Starting thesis/ thesis proposal	October 2012	Individual
Contacting possible commissioners	November 2012	Together
Preliminary agreement with Kokkolan Hoitokoti	November 2012	Together
Planning the event	12 December 2012	Together
Making project plan	22 January 2013	Together
Meeting with commissioner <ul style="list-style-type: none"> - Thesis contract - Planning the event 	30 January 2013	Together
Implementation plan return	January 2013	Individual
Planning the event	16 January 2013	Together
Planning the event	7 February 2013	Together
Meeting with commissioner	11 February 2013	Together
Planning the event	12 February 2013	Together
Making questionnaire	12 February 2013	Together
Checking prices for supply	15 February 2013	Together
Interim report return	21 February 2013	Individual
Preparing the event in Kokkolan Hoitokoti	25 February 2013	Together
Interim report seminar	4 March 2013	All individually
Event day	6 March 2013	Together
Finishing the thesis	March-April 2013	Individual
Final thesis	11 April 2013	Individual
Thesis presentation	May 2013 week 18	Together
Corrections to thesis	May 2013- June 2013	Individual
Graduation	18 June 2013	Together

¡ME GUSTA LA FIESTA!



Opiskelemme Centria Ammattikorkeakoulussa matkailua ja järjestämme Kokkolan Hoitokodin asukkaille Meksiko temajuhlat. Toteutamme juhlat osana opinnäytetyötämme. Tapahtuma järjestetään keskiviikkona 6.3.2013 kello 14 alkaen.

Piñata

Askartelua



Tex Mex ruokaa

Musiikkia

