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INNOVATIVE GOOD PRACTICE IN ACCESSIBLE TOURISM

ZOLTÁN RAFFAY – TIBOR GONDA

ABSTRACT

The majority of people take barrier-free life for granted. In fact, it is estimated that 10 to 16% of the world's population is affected by some form of disability, either permanently or intermittently. In developed countries, accessibility is also receiving increasing attention in the organisation of tourism supply, partly out of humanitarian considerations and partly in recognition of the significant business potential. In the most general terms, accessible tourism is tourism that is equally accessible to all, including people with disabilities, people with temporary disabilities, older people, people with young children and multi-generational families. Accordingly, the main areas of analysis of equal access are the same as the main areas of the supply side of tourism, namely: accommodation services; hospitality; tourist attractions; transport; communication. The authors have collected national good practice in the framework of an international Erasmus+ cooperation and a questionnaire survey was carried out to reach the target group of accessible tourism. The present study is primarily a comparative analysis of good practices, but also touches on the tourism habits of people with disabilities in some issues.

Keywords: accessibility, barrier-free tourism, disabled people

JEL: Z3

SAŽETAK

Većina ljudi život bez prepreka uzima zdravo za gotovo. U stvari, procjenjuje se da je 10 do 16% svjetske populacije pogođeno nekim oblikom invaliditeta, bilo trajno ili povremeno. U razvijenim zemljama pristupačnosti se takođe posvećuje sve veća pažnja u organizaciji turističke ponude, dijelom iz humanitarnih razloga, a dijelom uvažavajući značajan poslovni potencijal. U najopštijem smislu, pristupačni turizam je turizam koji je podjednako dostupan svima, uključujući osobe sa invaliditetom, osobe sa privremenim invaliditetom, starije osobe, osobe sa malom decom i višegeneracijske porodice. Shodno tome, glavne oblasti analize jednakog pristupa su iste kao i glavne oblasti ponude u turizmu, a to su: usluge smještaja; gostoprimstvo; Turističke atrakcije; transport; komunikacija. Autori su prikupili nacionalnu dobru praksu u okviru međunarodne Erasmus+ saradnje i sprovedeno je anketno istraživanje kako bi se dosegla ciljna grupa pristupačnog turizma. Ova studija je prvenstveno komparativna analiza dobrih praksi, ali se u nekim pitanjima dotiče i turističkih navika osoba sa invaliditetom.

JEL: Z3

Introduction

Most people take living without barriers for granted. In fact, some estimates suggest that around 10% of the European population is affected by a disability. In developed countries, accessibility is also receiving increasing attention in the organisation of tourism offers, partly out of humanitarian considerations and partly in recognition of the significant business potential. In the most general terms, accessible tourism is tourism that is equally accessible to all, including people with permanent or temporary disabilities, older people, people with young children and multi-generational families. Accordingly, the main areas of analysis of equal access are the same as the main areas of the supply side of tourism: accommodation; hospitality; tourist attractions; transport; and communication. Of these, it is perhaps the accessibility of attractions that is most addressed in the literature, probably in the context of the fact that a significant proportion of attractions are state-owned public institutions (CSESZNÁK ET AL. 2009, KÁLDY 2010). The very definition of the target group for accessible tourism is problematic. In many cases, the public does not even include in the target group those who, due to their life situation, are members of the target group for a shorter or longer period of time, only: for example, pregnant women, people with temporary disabilities recovering from surgery, or the elderly. The proportion of the latter in the overall population is steadily increasing, and for them many forms of accessibility are an essential need. Many of us therefore live with a permanent or temporary disability which can be a barrier to their lives and a barrier to their journeys. In fact, "Accessible tourism is a continuous effort to make all destinations, tourism products and services accessible to all people, regardless of their physical limitations, disabilities or age, and whether they are private or public tourist sites" (ACCESSIBLE TOURISM).

Accessibility is no longer an issue at the level of declarations, but the reality is different. This is confirmed by the results of research carried out in the framework of the Peer Act international project. When we want to explore the relationship between people with disabilities and tourism, we must always bear in mind that different disabled visitors have different specific needs. For them, however, accessibility is essential, as in many cases ignoring their specific needs can make it impossible for them to participate actively in tourism. In Hungary, the tourism opportunities, habits and needs of people with disabilities show significant differences in some aspects compared to the general population.

1. Literature review

Defining disability is not an easy task, as it takes many forms. "We can include not only people with limited mobility, visual and hearing impairments, intellectual disabilities, but also those with other conditions that have a long-term impact on their quality of life, such as allergies" (ZSARNÓCZKY 2018:39). The WHO estimates that one in six people on earth has a disability and the proportion is steadily increasing (WHO 2011). The Convention on the Rights of Persons with Disabilities, adopted by the United Nations in 2006 and proclaimed in Hungary, obliges States Parties to ensure access for persons with disabilities to sport, recreation and tourism facilities and services (Act No. XCII of 2007). We can be affected by this issue at any time – think of our advancing age (but an accident can also make someone permanently disabled at any time). Special needs occur in older age for everyone, but there are also many other life situations that can give rise to special needs: e.g. people undergoing rehabilitation after an accident, families with young children (DARCY – DICKSON 2009).

The United Nations World Tourism Organization (UNTWO) is committed to promoting accessible tourism. In this spirit, it dedicated World Tourism Day 2016 to this theme. The organisation has issued a number of recommendations and a handbook on the issue (UNWTO 2016). Accessibility has been a major effort throughout human history, but only became a widely recognised social issue in the second half of the 20th century. It is now widely accepted that everyone, despite a disability, should be able to enjoy the pleasures of travel as much as anyone else, "since the enjoyment of the fullness of life is a right for all (VÉGH 2005:31). The European Parliament's resolution of 29 October 2015 on the Union's priorities for the future and the 2015-2015 European Agenda for European Tourism stresses: the importance of developing sustainable, responsible and accessible tourism; the principle of "tourism for all"; and that full accessibility and affordability of tourism are key to the sustainability of the sector. It recommends that Member States develop a Europe-wide, uniform and transparent labelling scheme for accessible supply and make accessibility a criterion for support in the context of economic support programmes for the tourism sector.

At the level of regulation, Hungary is not lagging behind other EU countries. According to Act XXVI of 1998, persons with disabilities have the right to an accessible, perceptible and safe built environment. They must be able to visit cultural, educational and sports facilities and to use transport systems and means of transport safely. The new National Disability Programme (2015-2025) adopted in 2015 noted that service providers have not yet recognised the tourism opportunities for people with disabilities. It is therefore important to update existing tourism demand surveys and disseminate them within the tourism profession, as well as to train and sensitise service providers and staff. The programme also stresses the importance of the principle of universal design: the aim is to encourage the operation of tourism packages for people with disabilities, with a complex accessibility objective. It emphasises the development of accessible websites and accessible e-services.

According to (Hungarian Central Statistical Office) HCSO 2011 census data, there were 595,187 people with disabilities in Hungary. The breakdown by type of disability is shown in Figure 1. In our opinion, the population concerned by accessible tourism may be much larger, as it can be assumed that an elderly person in good health does not consider himself or herself as disabled, but already requires access to accessible facilities when using tourism services.

Figure 1



Source: edited by the authors, using www.ksh.hu/nepszamlalas/tablak_fogyatekossag

As tourism has become a social phenomenon, it has also become an important factor in shaping quality of life (GONDA ET AL. 2019). Fortunately, it is nowadays accepted that facilitating travel for people with disabilities and ensuring the necessary physical conditions is not only a human, ethical, moral and legal obligation, but also an important economic issue. At present, this represents an untapped niche in the tourism market, although there have been many positive counter-examples in the recent past (BUHALIS ET AL. 2012). However, this untapped market segment should not be seen as a homogeneous group, as they have different specific needs for services depending on the type and extent of their disability. There are barriers that can affect all travellers and barriers that are insurmountable problems for certain narrow segments (SHAW – COLES 2004). The existence of different disabilities leads to different and specific needs, which can be addressed with specific ideas and solutions. The needs of blind and hard of hearing (deaf) people and creative solutions for accessibility designed to meet their needs are presented by Zajadacz (ZAJADACZ 2015, ZAJADACZ-LUBARSKA 2020).

Each tourist destination is at a different level in implementing accessibility. Some develop special offers for people with disabilities, others present accessibility as a distinctive feature – seeing its market potential. Unfortunately, there are still places that do not address this issue at all. The major European countries in the international tourist trade are clearly placing great emphasis on this issue. Thus, the efforts made by Spain (VILA et al. 2015) and Italy (AGOVINO ET AL. 2017) in the field of accessibility in tourism deserve to be highlighted. Among former socialist countries, Poland pays a lot of attention to research on the topic (ZAJADACZ 2014, 2019), and it is also clear that there is a growing interest among Hungarian researchers in research on accessible tourism. In our personal experience, the situation is much better in Germany where correct solutions for equal accessibility in all areas of life (including transport, of particular importance for tourism) can be found. The implementation of accessible tourism is not the same as physical accessibility, the experience of an accessible destination is much more than that: it is the implementation of the principles of independence, equality and human dignity in the tourist experience. Experiencing the spirit of a place, exploring a geographical space is as important for people with disabilities as it is for anyone else.

It is generally accepted that the experience of travelling and holidaying enhances subjective feelings of happiness (CSAPÓ ET AL. 2018). This is particularly true for people with disabilities, for whom tourism often offers the opportunity to escape from the hardships of everyday life. In many cases, travel is a holiday for them, and the experience helps them to make contacts and integrate more easily into society (GÁLNÉ KUCSÁK 2008).

Several empirical studies in Hungary have shown that people with disabilities face significant problems when travelling and that their disability hinders them in realising their travel plans. This is why many of them choose the option of "no travel" (CSAPÓ – GONDA 2019, CSAPÓ ET AL. 2019). Around half of people with reduced mobility had a disability that prevented them from carrying out a tourism programme, and 75% of people with visual impairments (MOTIVÁCIÓ ALAPÍTVÁNY ÉS A REVITA ALAPÍTVÁNY KUTATÓMŰHELYE 2009). Providing a high standard of service to disabled visitors requires empathy and attention from those involved in the tourism industry.

2. Methodology

The authors were experts in the implementation of the European Peer Counselor Training in Accessible Tourism – Peer-AcT Erasmus project. The project designers felt that it was essential to get the views of people with disabilities in order to shape attitudes, identify concrete improvements and launch practical actions. The project therefore included two surveys: an online questionnaire

survey of people with disabilities to find out about their travel practices and their personal experiences of accessibility when travelling. The survey involved 272 questionnaires completed in Hungary, which were compared with a small number of surveys (N 22 to31) in 4 other countries participating in the project. The second survey was a collection of local good practices. The latter is the subject of our current study.

The project partnership included 5 countries: two organisations from Germany, and one from Croatia, Spain, Italy and Hungary. The partner organisations were tasked with collecting good practices on accessible tourism and training for people with disabilities from their respective countries. The 29 good practices identified by the partners were evaluated at an international project meeting and 23 were selected by consensus and presented here. Prior to the survey, we defined what we consider to be good practices in tourism. Based on this, we formulated the following expectations for good practices: "Good practice" means a method or activity that includes ideas and procedures that facilitate the development of a given business or organisation, in our case the provision of accessible tourism services, the development of high-quality service practices. Accordingly, a good practice should be 1) successful; 2 innovative; 3) applicable in other areas; 4) sustainable; and 5) a positive example to others.

3. Research findings

The project partners have gathered good practices from their countries on how to involve people with disabilities more intensively in tourism or enable them to participate in tourism at all. Involving people with disabilities more intensively in tourism is not only, or even not primarily, a financial issue (although there are undoubtedly financial benefits to be gained from attracting a new segment of the tourism industry, especially if the additional demand generated by the accompanying persons is included), but also a human and ethical issue. Some of the projects focused specifically on specific people with disabilities, others on the general accessibility of the tourism sector, making urban spaces, parks, hiking trails, public buildings and tourist service facilities accessible to people with disabilities, with the aim of ensuring that disabled visitors feel exactly the same status as their able-bodied fellows not impaired in any way in their mobility, vision, etc. The breakdown of good practices by partner country was: Croatia 3 practices; Germany 5 practices; Hungary5 practices; Italy 6 practices; and Spain 4 practices.

Among the partner countries, there are some where the facilitation of the living conditions of people with disabilities, including the provision of services to enable them to travel, has a long history, going back to several decades (typically Germany, Italy and Spain), and others where society and the tourism sector are only just beginning to recognise the importance of the issue (Croatia, Hungary). More than one practice can be considered as a pioneering one in its own country, such as the Accessible Tourism Day in Orfű, Hungary or the initiative of Platja d'Aro-Girona-Catalunya in Spain to sensitise tourism sector workers to welcome guests with autism and autism spectrum disorder (ASD), but we could also mention the provision of sporting opportunities for people with disabilities, such as the initiative of SportABILI Alba Onlus A.S.D. in Italy or the archery club Club Arquers Salt in Spain. The Italian partners reported on a number of museum projects and initiatives, whereas the German good practices included the involvement of museums in developing tourism opportunities for people with disabilities.

The good practices included public organisations, municipalities, sports clubs, NGOs and tourism service providers, so there seems to be an attention paid to the problem by society and the economy. There were also some best practice projects where the actors themselves were people with disabilities, such as the two promoters of a mobile ramp initiative in downtown Zagreb, but in many cases the practices were implemented with the involvement of people with disabilities. Some good practices focused specifically on a particular disability (e.g. solutions for blind and partially sighted

people to enable independent transport in buildings, such as the initiative of a partner in Croatia for accommodation and other tourist facilities: designation of prominent walkways slightly raised from the floor, installation of strips on walls to facilitate transport, larger numbers and Braille on hotel room doors), others enabled or facilitated access to tourism for all disability groups. The most common practice, working with the broadest partnership, was the good practice of the Deutsches Seminar für Tourismus in Germany, which sought to extend the certification and trademark system linked to accessibility to organisations involved in tourism, businesses associated with tourism (travel businesses and travel-related establishments, accommodation, catering, information services, travel agencies, recreational services, parks and public spaces, zoos, museums and galleries, religious buildings, theatres and cinemas, event venues, public institutions).

A significant proportion of projects are supported by donations, public subsidies and grants, but there are also examples of entrepreneurial activity to cover as much of the costs as possible. The themes covered by the good practices are presented in Table 1.

Table 1: Grouping of the good practices collected by country and their relevance to the thematic areas (a good practice can relate to several themes)

Categories of best practices	HU	CR O	ES P	GE	IT
Best practices, no.	5	3	4	5	6
1. Event/innovative projects	1	1	1		2
2. Making buildings physically accessible	1				1
3. Making public spaces physically accessible	1	1	2		3
4. Tourism destinations	2	1		2	2
5. Mobility, community / private transportation				1	
6. Service chains / counselling, databases, information (pl. wheelmap.org)	2		1	3	
7. Marketing				2	1

Source: edited by the authors

The main objective of the Peer Act project was to develop a methodology and curricula for peer training so as to enable people with disabilities to help their fellow citizens to organise and run their tourism activities. In this context, a specific analysis of good practices in this type of training was carried out. A breakdown of these and their links to the different types of training are in Table 2.

Table 2: Number of training good practices within all good practices and their fit to each type of training (one good practice can fit several types of training)

Categories of best practices (trainings)	HU	CR O	ES P	GE	IT
Number of trainings within all best practices	3	0	1	2	2
1. Peer Counselling (peer assistants)	1			2	2
2. Inclusive trainings in adult education				2	1
3. Training and learning in the area of accessible tourism			1		2
4. Inclusive E-Learning tools	1				
5. Others					1

Source: edited by the authors

The good practices identified by the Peer Act partners were:

Certification scheme, trademark, labelling

The use of rating systems and trademarks in tourism is not new, but it is far less common in the disability tourism sector than in the accommodation or even hospitality sector. A trademark is both a guarantee of quality service for the consumer and an excellent marketing tool and advertisement for the service provider. This is the case of the "Travel for All" initiative in Thuringia, Germany, or the People First Association in Hungary, which works in pairs (one person without and one person with a disability) to visit the catering and tourist facilities of a city and then affix a sticker demonstrating the accessibility of the facility, with a special indication of the existence of a fully accessible toilet. (If the place is not yet fully accessible but could be, the People First Association will also help to obtain the necessary equipment.)

Databases

In cooperation with, but also independently of, rating and trademark schemes, many good practices include the creation, maintenance, operation and availability of databases to facilitate travel decisions for people with disabilities of all kinds and their accompanying persons. Good practices on databases were reported by two German, one Hungarian and one Spanish partner.

Physical accessibility

One of the most obvious solutions is that in many places there are physical barriers to accessing (e.g. wheelchair access) or using (e.g. blind or partially sighted persons) tourist facilities. One good practice from Zagreb would make it easier for wheelchair users to access restaurants and other tourist facilities by means of light and easily movable mobile ramps.

Sports facilities for people with disabilities

Accessibility is essential to ensure that people with disabilities do not feel excluded and in need of support but feel fully integrated into society. Club Arquers Salt, a decades-old archery club in Spain, has an innovative project that enables disabled and even blind people to enjoy this beautiful sport.

Sensitisation, awareness-raising

As several partners in Italy put it very well, the aim is for society to see people with disabilities not as people who need help, but as a valuable resource, as people who are on an equal social footing with people without disabilities. The training of human resources, which is extremely important in the hospitality sector, is the subject of several exercises: the attitude, knowledge and skills of the people who come into direct contact with the guest are extremely important and can make the journey of people with disabilities pleasant and memorable, or even ruin it with an inappropriate reaction or an inability to deal with certain situations.

Providing employment opportunities for people with disabilities

For people with disabilities to see themselves (and for society to see them) as equally useful members of society, one of the most important things is to create suitable jobs and working conditions. Perhaps the most interesting initiative in this respect is Citadela in Croatia, in cooperation with the Association of Children and Youth Disabilities "Zvono", which trains people with acquired disabilities in handicrafts (weaving, pottery), thereby greatly increasing their chances in the labour market; it also runs a herbal plant production and drying facility, an innovative design

workshop for textiles, but also provides training in rural development and organic farming, and renewable energy.

Education, training

Having the right skills and qualifications is essential for employment. Training can take the form of on-the-job training, such as the cooperation in Croatia mentioned above, or formalised links with educational institutions such as universities. A good example of the latter is the Institut für Inklusive Bildung gemeinnützige GmbH (Institute for Inclusive Training Plc.) in Germany, referring to inclusive education in its name, and which cooperates with a university, the Christian-Albrechts-Universität in Kiel. Under the motto "Not without us about us", their training courses provide education specialists with practical advice on, for example, the design of living environments for people with disabilities, depending on the type of disability.

Peer counselling

Also known as peer support, this is the involvement of people with disabilities in supporting their peers. This is particularly important when someone is not disabled from birth but has acquired a disability after an accident or illness. Experience has shown that people in this situation are more likely to accept help from others who themselves have similar problems, so that the role of the "ferryman", who guides the disabled person from the world of the able-bodied to the world of the disabled, is crucial during a particularly challenging period of transition. In the project of the People First Association Pécs Mozgássérült Emberek Önálló Élet Egyesülete (People First Association Pécs Self-contained Life Association of Disabled People), people with disabilities who have been living with disabilities for a longer period of time help their recently disabled peers (using a Swedish model) to adapt to the changed life, supporting them in their rehabilitation and (re)integration into society. In contrast to non-disabled experts, the "ferryman" is also more credible and acceptable to people who are often still struggling with the trauma of having become disabled, of their own life situation.

4. Recommendations for future research

The research highlighted in the article was limited to five European countries, and although they are diverse are regards their size, population and their experiences in accessible tourism, the finding may not be generalisable to the pan-European or global tourism market. Therefore, the scope of the research should be extended in both space and timer: the involvement of other countries in similar surveys, and the repeat of the survey in the respective project countries could lead to more information that the tourism sector could apply in making all of their services more accessible to all, including people with disabilities.

5. Summary

In addition to social, humanitarian and solidarity issues, the increased involvement of people with disabilities in the tourism sector also represents a major economic and business opportunity: people with disabilities make up about one tenth of the European population (and, partly due to the ageing of the continent's population, it is an increasing proportion). Better serving the tourism needs of these people and their companions represents a major market opportunity for tourism service providers.

In some countries this opportunity has been recognised for decades and people with disabilities can enjoy most tourism services in almost the same quality as their able-bodied counterparts, while in others it is only recently that the scientific and professional community is beginning to address the

issue. Following a brief review of the literature on the issue, this paper analyses best practices in the inclusion of people with disabilities in tourism in five countries (Hungary, Germany, Italy, Spain, Croatia and Croatia) participating in the Erasmus programme "European Peer Counsellor Training in Accessible Tourism – Peer-AcT", a European initiative. The good practices are hosted by industry, public and civil society organisations; some of them involve investments in equipment and capital, others only require sensitisation, education and attitude development of the people involved in order to ensure that people with disabilities have a full experience during their travel. The best solution is peer consulting: for people with disabilities, especially if the disability is the result of a recent trauma, more authentic and acceptable is a support person who has been living with the same problem for a longer period of time.

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