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D1.1.1 ASSESSMENT REPORT

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ADRINCLUSIVE Project

WP1 DEVELOPMENT OF AN INTEGRATED FRAMEWORK FOR CREATING AN INCLUSIVE AND RECOGNIZABLE TOURISTIC MODEL

D1.1.1 ASSESSMENT REPORT

Inclusive tourism for travellers with dementia and Alzheimer's disease: a strategic approach for sustainable and meaningful experiences



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Methodological note

This deliverable (D 1.1.1) presents the knowledge acquired by ADRINCLUSIVE project partners through literature review, sharing of internal practices and processes, and also through a survey administered after a preliminary stakeholder mapping activity, categorising respondents into two main categories: caregivers and tourism professionals.

The mapping activity aimed primarily to gather as many local stakeholder contacts as possible within the Italy-Croatia cross-border area, to open opportunities for cooperation in future phases of the ADRINCLUSIVE project. For initial engagement, information was collected regarding stakeholders' experiences in managing individuals with dementia and Alzheimer's and organising inclusive vacations. This information serves two main purposes:

1. To provide all project partners with foundational knowledge on inclusive vacations and the management of individuals with dementia.
2. To identify differences in the perception of the needs of people with dementia during vacations from the perspectives of caregivers and tourism professionals interested in the ADRINCLUSIVE project.

With the context of this mapping activity established, we can now define the data collection methods used for our survey.

RomagnaTech, in collaboration with FMA and AFAM, created two online structured questionnaires: one for caregivers and the other for tourism professionals. The questionnaire structure was based on the *“Attitudes to Dementia World Alzheimer Report 2024 Survey”* by Alzheimer's Disease International, with questions modified to align with the vision of ADRINCLUSIVE. Given the sensitivity of the topic, the questionnaire ensured respondents total anonymity.

The questionnaires were administered in Italian and Croatian languages to facilitate dissemination in the two partner countries. Responses were then translated into English, aggregated, and analysed.

During the preparatory phase, it was decided that the sampling of respondents obtained by contacting the organisations listed during the first stakeholders' mapping would aim not at achieving statistical representation but at outreaching a number of organisation aligned with the project's objectives to be involved in future activities.

The qualitative data obtained, regarding the needs, procedures and best practices signalled by stakeholders in our survey, have been analysed and then presented in this deliverable.



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Part 1: Introduction

1.1 A growing need for inclusive tourism for dementia and Alzheimer's patients

Dementia is a form of cognitive decline disease that significantly impairs individuals' abilities to manage their daily lives and activities (Ames et al., 2014). These diseases, including dementia, often suffer from the stigma of being perceived as a natural part of the ageing process. As a result, they are frequently not treated as diseases, leading to a lack of proper care and attention. Additionally, cognitive decline diseases develop over an extended period and progress through various stages. This gradual progression makes it challenging to create a single, comprehensive description that accurately reflects the diverse experiences of those affected (Page et al., 2024).

The World Health Organization has highlighted the growing concern regarding cognitive decline diseases, projecting a significant increase in the number of people affected. In 2021, approximately 55 million people were living with these conditions. This number is expected to rise to 78 million by 2030 and further escalate to 139 million by 2050 (World Health Organization 2021a and 2023 in Page et al., 2024).

Given this alarming trend, there is an urgent need to promote inclusive tourism for individuals with cognitive decline. Inclusive tourism offers an excellent opportunity to strengthen social bonds and enhance the quality of life for both individuals with dementia and their caregivers. The positive impact of inclusive tourism on these populations will be explored in detail in Part 3, Paragraph 1.

Another vital component in addressing the needs of individuals with dementia is the development and implementation of inclusive policies and environments. Formative lessons, both for caregivers and tourism professionals, are essential in dispelling myths and promoting empathy and support for individuals with cognitive decline diseases and their families. These educational efforts can help ensure that caregivers are equipped with the necessary skills and knowledge to provide effective care, while tourism professionals can create more accommodating and understanding environments. For example, creating dementia-friendly communities involves training staff in public-facing roles, such as in shops and public transport, to recognize and assist individuals with cognitive impairments. By making our societies more inclusive and supportive, we can significantly enhance the quality of life for individuals with dementia and reduce the burden on their caregivers.



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1.2 Dementia and Alzheimer's disease: strategic considerations for travel planning

The information provided in these paragraphs is the result of the analysis of data gathered through the survey conducted during activity T1.1.

Travel planning for individuals with Dementia and Alzheimer's (D&A) requires meticulous attention to their unique needs to ensure a safe and comfortable journey.

One of the primary considerations is the accessibility of accommodation. Ground floor accessibility minimises the need for navigation through stairs or elevators, reducing potential confusion and physical strain. Furthermore, accommodations should feature wandering prevention systems for safety.

Additionally, the environment of the accommodation plays a significant role. A peaceful setting helps mitigate anxiety and agitation, common in individuals with D&A. Furthermore, proximity to desired activities allows for engagement without the stress of long travels, contributing to a more enjoyable experience.

Consequently, staff at these accommodations must be familiar with the care needs of people with D&A. Trained staff who possess strong interpersonal skills can greatly enhance the experience, providing care, comfort, and reassurance. Specifically, they should be adept at handling challenges and fostering a supportive environment.

Similarly, transportation also requires careful planning. Vehicle accessibility, including wheelchair ramps and elevators, ensures that individuals with mobility issues can travel comfortably. Predictable schedules and routes help reduce anxiety by providing a sense of routine and familiarity. Additionally, inside the vehicle, comfortable seating and temperature control are essential.

Moreover, medical preparedness is critical. Availability of necessary medical equipment and staff familiar with D&A care can prevent and manage health-related issues during travel. Finally, refreshment points and rest areas provide much-needed breaks, ensuring the journey is not exhausting.

In summary, successful travel planning for individuals with D&A hinges on creating an environment that prioritises safety, comfort, and familiarity. By addressing these key areas, caregivers can facilitate enjoyable and stress-free travel experiences for their loved ones.

1.3 Defining inclusive and sustainable tourism in the context of dementia/Alzheimer's care

The lack of support and dedicated specialist care services forces many people with dementia to live in complete dependence on their families. Caring for a family member with dementia has practical, economic, emotional, and psychological impacts. Dementia is a progressive disease, therefore organisational skills, abilities, understanding, and autonomy are gradually lost, making the caregiving



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context increasingly challenging over time and demanding constant attention to all aspects of the disease from the caregiver.

For this reason, the normality of a person with Alzheimer's mainly consists of the denial of many activities that previously constituted their daily life: having a social life, independently managing their money, driving, going to work, shopping, dining out and engaging in sports. For a person diagnosed with the disease many doors close for their safety or due to shame, but primarily because outside the home environment caring for a family member involves too many uncertainties that the family cannot handle alone.

It is scientifically proven that socialisation slows the progression of the disease, stimulates the brain's remaining capacities and helps the caregiver share the burden and worries of caregiving.

The previous reasons make it clear how distant the prospect of organising a vacation with a loved one suffering from Alzheimer's is. There is a need for a change in mentality towards disability and above all, to create conditions so that, despite the illness, the person can maintain the right to live a life full of relationships, passions, habits and affections.

It is in this paradigm shift that the ADRINCLUSIVE project fits, guaranteeing the right and offering the possibility for people with Alzheimer's and their families to live this moment to regenerate in a context that is as safe, comfortable, welcoming, and stimulating as possible.

1.4 Challenges and barriers to overcome

Planning a family vacation when one of its members lives with Alzheimer's disease brings specific needs. While this can be seen as a barrier, on the other hand, being able to provide an inclusive experience that meets the needs of people affected by this disease is a challenge that can bring numerous benefits.

When talking about Alzheimer's, barriers are mostly not physical but internal to the person, represented by the caregiver's fears and anxieties, such as:

- Living in fear of not being able to manage unexpected reactions of their loved one in public places
- Worry that their loved one might behave inappropriately or make embarrassing comments that may shame the caregiver
- Fear of not being understood in a new place where they need to interact with people who do not know their loved one
- Anxiety about not having everything under control, that their nearest and dearest might get lost or that they might not manage their physiological needs in a different environment (e.g., finding the bathroom)



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There are also physical barriers to consider:

- Distance from attractions to the hotel and generally long walking distances
- In the hotel, the step between the room and the bathroom can be a problem

The most insurmountable barrier is the fear of not making it. From analysing barriers and the experience of those who have engaged in this adventure, we deduce that the challenges are:

- Experiencing group activities with new people, even if they are in similar situations
- Engaging in this week as a growth process in their relationship with their family member living with Alzheimer's
- Being involved in activities different from the usual ones
- Understanding that sometimes the barriers are only within oneself

As a matter of fact, the respondents to our survey highlighted the similar challenges and barriers. The main challenges addressed while travelling with individuals with D&A are multifaceted and require thoughtful consideration to ensure a safe and enjoyable experience for both travellers and caregivers. First, managing symptoms such as apathy, poor attention span, and tiredness is crucial, as these can reduce interest in activities and increase fatigue. Moreover, it is necessary to balance engaging yet not overwhelming activities to avoid both frustration and/or boredom. Furthermore, physical impairments call for accommodations. As an example, hearing and vision impairments add complexity, calling for clear communication and sensory-rich experiences that are not overwhelming. Architectural barriers to accessibility is the most known issue in this area. A broad known issue has to do with architectural barriers. It gets worse in unfamiliar locations, increasing challenges and highlighting the need for accessibility to accommodations, facilities and diverse, flexible activities that allow for spontaneity. Barriers can manifest because of social constraints, such as the lack of support from family and healthcare providers. For this reason, it's necessary underscoring the importance of educating and involving stakeholders in travel planning to alleviate misunderstandings and ensure consistent support throughout the journey.

Concerning education, societal prejudices and misconceptions about D&A can lead to exclusion, emphasising the need for inclusive spaces and providing safe, peaceful transportation options to reduce anxiety and promote a comfortable travel environment.

Similarly, based on responses from tourism professionals such as hotel hosts, travelling with individuals affected by D&A presents significant challenges across various fronts, encompassing safety concerns, logistical complexities, and the emotional strain on caregivers. Ensuring safety during travel involves preemptive measures like wearing identification and planning straightforward routes and activities to



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minimise the risk of disorientation or separation. The logistical hurdles include selecting destinations and accommodations that are dementia-friendly, equipped with necessary medical supplies, and accessible to healthcare services. Disruption of familiar routines in unfamiliar environments can exacerbate stress for both caregivers and travellers, emphasising the importance of maintaining familiarity through routine and personal items. Moreover, managing caregiver fatigue and stress necessitates planning for regular breaks and considering additional support options at the destination. These challenges underscore the need for comprehensive planning, understanding of participants' needs, and organisational support to facilitate safe and fulfilling travel experiences for individuals with D&A and their caregivers.



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Part 2: Our approach to plan the perfect dementia-friendly vacation

2.1 Choosing the right destination: the strategic approach

Choosing the right destination for vacations with D&A people starts with locating a comfortable and enjoyable destination. Here the caregivers' highlighted crucial factors based on their experiences and preferences. Firstly, locations near the Adriatic Sea or mountain villages below 1000m are preferred (like Northern Italy, Austria or other smaller villages like Calizzano, or the ones located in Istra and Split-Dalmatia regions of Croatia), offering flat walks and serene environments conducive to relaxation. Coastal towns like Cesenatico, Senigallia, Poreč or the Istrian region are specifically mentioned for their accessible beaches and amenities tailored for people with disabilities. The presence of wheelchair-accessible facilities and tranquil surroundings, such as adjacent pine forests or countryside settings, is essential for providing a peaceful atmosphere. Moreover, destinations that facilitate convivial activities, like artistic visits, nature trails, or yoga sessions, cater to both the needs of individuals with D&A and their families. Overall, choosing destinations that prioritise accessibility, serene environments, and diverse activity options ensures a positive and inclusive travel experience for all involved.

If the caregivers focus on activities and environmental features, tourism professionals emphasise safety and security. In the survey, they valued the importance for a destination to feature ramps and grab bars, while keeping in mind availability of health facilities. These factors are more relevant for tourist professionals, as they seem to perceive the practical needs of their guests and acknowledge the importance of adequate infrastructure.

2.2 Sustainable travelling

Sustainable travel options for travellers with dementia or Alzheimer's align well with the unique needs of these individuals and their caregivers. Typically, these travellers opt for group travel using vans and buses, which are more sustainable than individual car travel. Group transportation is more eco-friendly because it consolidates multiple travellers into a single vehicle, reducing the overall number of vehicles on the road. This consolidation leads to lower fuel consumption per person and decreases the emission of greenhouse gases, contributing to a reduction in the traveller's carbon footprint.

Additionally, the specific requirements of travellers with dementia often lead them to choose nearby destinations, ensuring shorter journeys that further reduce fuel consumption and pollution. Shorter trips not only conserve energy but also limit wear and tear on infrastructure and decrease traffic congestion, all of which have positive environmental impacts.



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Furthermore, choosing accommodations that offer a range of nearby services can significantly enhance the travel experience while maintaining an eco-friendly approach. For instance, staying at a place that is close to the beach, has its own restaurant, and is near museums and parks minimises the need for additional travel. This proximity reduces the environmental impact of the trip and adds convenience and enjoyment for travellers and their caregivers. By focusing on these aspects, it is possible to create a fulfilling and sustainable travel experience for individuals with dementia or Alzheimer's.

2.3 Selection of dementia-friendly accommodations

On the one hand, when selecting an appropriate destination for individuals with D&A, caregivers emphasised several critical factors based on our survey findings. Foremost among these considerations is the accessibility of accommodations, particularly ensuring ground floor accessibility to facilitate ease of movement. Specialized features catering to the specific needs of individuals with D&A, such as anti-wandering systems, were also highlighted as essential for ensuring safety and security during the stay. Additionally, familiarity with the care needs of individuals with D&A emerged as crucial, underscoring the importance of staff trained in managing and understanding these needs. A peaceful and quiet environment was frequently cited as beneficial for minimising stress and promoting relaxation. Proximity to desired activities was another significant factor, enabling engagement in familiar and enjoyable pursuits. Finally, the interpersonal skills of staff members with individuals with D&A were noted as pivotal in providing compassionate and effective care throughout the travel experience. These insights emphasise the multifaceted considerations that caregivers prioritise when choosing destinations conducive to the well-being and enjoyment of individuals with D&A.

On the other hand, tourism professionals emphasise key factors for a safe and enriching experience. Ground floor accessibility is crucial, along with specialised features like anti-wandering systems. Understanding D&A care needs and ensuring availability of medical equipment are essential. Creating a calm environment and staff with strong relationship skills also play vital roles in enhancing travel comfort and support. These considerations ensure destinations cater to the specific requirements of travellers with D&A, promoting a positive and secure travel experience.

When selecting accommodations, it's also crucial to look for establishments certified for their green practices, aligning with the broader goal of sustainable travel. However, the priority must always be on finding accommodations that cater to the unique necessities of people with dementia, particularly in terms of safety and accessibility features. While green certifications are important, the comfort and security of the travellers come first.



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2.4 Packing essentials

When dealing with luggage for a trip with people with dementia, it is useful to consider various precautions, some aimed at caregivers and others at family members. It is important at this stage for caregivers and family members to communicate with each other and reach the necessary agreements.

Common mistakes often occur:

- Packing too much: It often happens that users bring an excessive amount of clothes and objects from home. This happens because family members are anxious that their dear might lack something. In reality, this causes more inconvenience than benefits, not only due to the weight or volume of the luggage but also because having too many things in the suitcase tends to create confusion and disorder in the room. Objects are more easily lost, and it is more likely that the user will handle them inappropriately, for example, continuously folding them, placing them in unsuitable locations, or soiling them by mistake.

- Leaving the elderly person without personal effects: Often, people with dementia are attached to certain personal items they consider essential. The most traditional example is a wallet that the elderly person always wants to have with them even if it is empty, or a wristwatch that they always wear even if they can no longer read the time. These objects have a certain personal and psychological significance for the person, and being deprived of them easily leads to agitation, repetitive behaviours, and difficulty maintaining attention. It is therefore advisable that the person brings some personal effects they feel they need.

- Packing potentially dangerous products: At home, the elderly person surely uses a range of products, some of which may be dangerous, such as alcohol-based perfumes, lighters, or scissors. Sometimes, these objects end up in the travel luggage. Basically, this does not pose a problem since the person is used to using them; however, being in a different context with new people could alter their ability to use these objects autonomously. For instance, it might happen that a person uses an excessive amount of hairspray every day or injures themselves while trying to cut their nails even when it is not necessary.

It is therefore very important that family members and workers discuss and agree on what to pack before the trip. Some precautions include: bringing a small backpack for necessary beach items (towel, water bottle, 2 swimsuits); always bringing a hat/cap for sun protection; not packing too many clothes; choosing clothes suitable for the season (sometimes families pack clothes that are too "heavy" fearing that the elderly person might get cold); bringing absorbent underwear if the person uses them.

Similarly, it is important for the welfare operators to also work on what to bring for the trip. It is advisable for workers to handle some necessary items directly. They should bring everything needed for



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group activities (stationery, board games, books, etc.), personal hygiene items (soap, shampoo, sunscreen, etc.), and especially all necessary medical supplies. Some of these are particularly important. For example, it is recommended that welfare operators bring bed pads and place them on the mattresses, even for those who are not incontinent, because if a mattress gets soiled, it poses a problem for the hotel. Similarly, we recommend that welfare operators have disposable gloves, sponges, disinfectant wipes, and first aid items (band-aids, gauze, hydrogen peroxide) on hand.

Additionally, it is advised to bring clothespins for hanging clothes and adhesive handles to use on bathroom tiles.

Finally, it is essential for the person to have their necessary medications for the entire trip, and these should be managed by the welfare operators. Therefore, we recommend that family members prepare a bag with the medications and written instructions on how to administer them, and then hand them over to the welfare operators.



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Part 3: Inclusive activities

3.1 Understanding the importance of meaningful activities

When organising tourist activities for people with dementia, it is crucial to manage the timing and related activities thoughtfully. These must be designed considering not only the cognitive or mental state of the user but also their psychological and social aspects and the environmental conditions in which the activities take place (Tierney, L., & Beattie, E., 2020). For instance, scheduling activities at inappropriate times of the day or in unfavourable weather conditions (e.g., excessive heat) can lead to more negative than positive effects.

As a starting point, it is important to plan "meaningful" activities that hold personal and psychological significance for the participants. On this topic, Perugia et. al (2020) defined a model called ENGAGE-DEM, which formalised the variables that assess the level of engagement of people with dementia, opening the gates to future research for the development of tools and activities that could further benefit the final users. Nonetheless, for the moment it is important to focus on a person-centred approach (Nicholson, L. 2017) when defining activities. This can only be achieved by considering several fundamental factors: age, education level, previous occupation, motor limitations, family history, the presence of traumatic experiences, etc. It quickly becomes evident that a good activity plan is based on a deep understanding of the participants and their reactions to certain topics. For example, proposing a family-themed activity based on life stories might be good, but if among the participants there is someone who has tragically lost their children and suffers from loneliness, this activity could lead to mood disturbances and negative social behaviours.

Another crucial aspect to consider is that activities must be "challenging," meaning they should not be too simple or childish. When working with people with dementia, it is important for them to feel the need to engage in an activity. This promotes user involvement in the activity while simultaneously stimulating the person's remaining abilities. However, care must be taken to ensure that the challenging activity has a "high probability of success." It is essential that participants can complete the activity and achieve the intended goal; otherwise, the activity may become frustrating, and the person may feel devalued.

Moreover, it is important that the activities involve areas or topics with which the participants have had direct experience. This not only stimulates memory and language but also facilitates involvement in the activity. In this sense, it is useful to form working groups where participants are homogeneous, meaning they share common characteristics such as coming from a specific area or having a similar education level. For example, when proposing a reminiscence activity related to the seasons, actions involving



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threshing or grain processing can be suggested to participants from rural areas and farming families, but not to those from urban areas who have always worked in offices.

Additionally, it is essential to consider the environmental conditions in which the user is located. Certain environmental conditions are not suitable for organising activities. For example, times close to meals or the hottest hours of the day are not suitable for activities. Similarly, overly crowded or noisy contexts are unsuitable.

The planning and execution of meaningful activities are very important during tourist stays for people with dementia, as they allow the person to occupy their time in a pleasant and constructive manner. In fact, it is disadvantageous for a person with dementia to experience too much “downtime” since it is precisely during these moments that the person tends to exhibit behavioural disturbances, become disoriented, and interact inappropriately with others.

3.2 Examples of dementia/Alzheimer’s-friendly activities

In this paragraph, we will present some examples of meaningful activities that can be conducted during tourist stays for people with dementia:

- **Sending postcards:** Buying, writing, and sending postcards has a strong emotional and social significance for older adults. This activity stimulates the individual’s self-determination, as they choose the postcard based on their tastes and emotional reactions. It also provides cognitive stimulation since selecting the message and writing it requires a certain cognitive effort.
- **Visiting museums or cultural sites:** Visiting places of cultural interest is an activity closely related to travel and vacation themes, and it is very enjoyable. When visiting a museum or other site, the person not only repeats an activity they used to do when they were more autonomous, but their curiosity is also stimulated. Additionally, the theme of the museum might engage the user on a personal and psychological level, producing positive emotions. However, it is important that the museum visit does not take too long (a maximum of one hour) and that the guides or companions interact appropriately with the elderly, both physically and verbally, to maintain a certain level of curiosity.
- **Music therapy:** Music is usually associated with celebrations and leisure time, inducing positive and pleasant emotional states. While a person with dementia may not be able to attend concerts or other large musical events, planning activities that include music and dancing often brings benefits. Moreover, music stimulates the person's memory and perceptual abilities.
- **Card or board games:** Board games are usually associated with leisure time and socialising. Playing cards on the beach is a typical vacation activity and is usually very appreciated by the elderly. Board



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games, besides being fun, stimulate interaction among participants, promote a positive social climate, and stimulate residual cognitive abilities.

The results from the survey confirm and expand on the elements mentioned above.

As a matter of fact, the caregivers and the tourism professionals signalled that the best activities for people with dementia during holidays include a blend of socialisation, cognitive stimulation, and light physical movement. In the first place, engaging in afternoon entertainment and multidimensional stimulation in an enriched environment helps maintain mental acuity. In second place, structured activities designed with variety and appropriate difficulty levels cater to individual needs. In third place, socialisation through small group interactions, guided nature walks, visits to culturally interesting places, and gentle exercises such as traditional dance and tango therapy are particularly beneficial. Moreover, cognitive reactivation activities, music therapy, and light leisure activities also play a significant role. In the same fashion, manual tasks and sensory activities further enriches the experience. Physical activities like swimming, dancing, garden walks, and relaxing by the sea or in the hills, combined with recreational pursuits, offer both relaxation and moments of joy.

Finally, it's always important to grant a supportive environment with reference points and assistance ensures comfort and safety.

3.3 A personalised activity schedule

Planning every moment of the vacation, according to the data gathered from our survey and the direct experience of the partners, considering individual needs right from the travel stage is crucial to provide peace of mind to the family members and avoid moments of confusion that could lead to tension and irrational reactions.

Travelling by bus together to the vacation spot is recommended.

Once arrived, it's important to familiarise oneself with the room and common areas of the hotel and get to know hotel staff; the relationship with them will be very important for the success of the vacation.

A weekly activity plan, for example, could include free activities on the beach during the morning and stimulating activities in the afternoon, preferably different each day such as art therapy, music therapy, dance or light gymnastics.

If transportation within the vacation spot can be arranged, afternoon activities may also consist of visits to museums, parks, or attending on-site events.



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3.4 Good practices for managing challenging behaviours

From the analysis of the data gathered with the survey, we can assess that to care for individuals with dementia during holidays involves creating a supportive and well-structured environment that caters to their unique needs. It's essential to have a support network to alleviate the constant vigilance required from caregivers. Understanding and interpreting the normal yet challenging behaviours associated with dementia can help manage difficult moments effectively. Calmly guiding the person to a different environment and using familiar activities, like singing known songs, can provide reassurance and relaxation. Patience and familiarity with the individual's rhythms are crucial, avoiding long and tiring activities.

Involvement in stimulating activities with regular rest breaks, accompanied walks, and gymnastics can enhance their well-being. Frequent reminders, such as signs and staff trained to reassure and orient individuals, help those who may feel lost. Creating a precise and adaptable program with multidisciplinary input ensures activities are suitable for the group.

Training for staff is paramount; they must understand the disease, be adept in verbal and non-verbal communication, and know how to listen to and address the needs of people with dementia. The accommodation should be safe and adapted, preventing wandering and ensuring the person feels secure. Understanding the causes behind behavioural changes and cognitive decline is critical to providing effective care. By addressing these needs, the holiday experience can be both enjoyable and safe for individuals with dementia.

One respondent from the tourism professionals answered:

“The key is to educate yourself about their needs and behaviours, adapt the environment to reduce potential triggers for stress or confusion, and provide clear and supportive communication messages as a dementia-friendly destination. It is important to plan activities in advance with flexibility to adapt to the current needs of the person with dementia, ensuring safety and emotional support throughout the stay in the destination.”

Nonetheless, there are several scenarios that can be stressful for D&A people, and are clearly presented in the next paragraph.

Various situations can trigger inappropriate, difficult-to-manage behaviours. Among the possible causes:

- Boredom or lack of interest in an activity
- Fatigue
- Frustration at feeling inadequate or unable to complete a certain activity

To promptly manage these, caregivers should follow these tips:



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- Do not feel guilty for these behaviours but try to react objectively but casually
- Stay calm
- Interrupt the activity if it is not appreciated
- Approach the person experiencing a difficult moment gently without reprimanding them
- Accommodate them and then distract them by shifting attention to something that can generate a sense of well-being.



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Part 4: Best Practices for a smooth and enjoyable experience

Best practice n. 1 - Dog therapy

During the last two editions of the Vacation in Cesenatico dedicated to people with Alzheimer's, Maratona Alzheimer Foundation offered their vacationers an afternoon of Pet Therapy with trained dogs from a local association that agreed to our collaboration proposal.

About ten dogs and their handlers accompanied their guests at Parco di Levante in Cesenatico. Together with them, the elderly walked for a long time through the park, holding them on a leash (even those who usually did not take a single step), played with them, and interacted in some way.

The trainers facilitated the dogs' performances of jumps and acrobatics and enabled contact with people, ensuring that those who wished could hold, pet, and in some way care for their preferred dog.

Everyone was overwhelmed by the joy and tenderness that dogs emanate, which also brings out the gentler side of even the gruffest characters. Interaction between humans and animals, if well managed, can bring calm, relax the mind, move the body, and thus distract from all that triggers negative reactions in people with Alzheimer's. Because inevitably, a special and unique bond is formed making this time together "unforgettable" for everyone, at least for a moment!

Best practice n. 2 - The story of Elena and Franco

Elena and Franco: for some years now, it has been just the two of them; their mother passed away, and Elena's older brother died in a car accident. Elena lives in Canton Ticino. Her father, Franco, is a distinguished, affable, and sociable gentleman. He has Alzheimer's disease and lives in Salsomaggiore with his caregiver Fatima, who has always accompanied him to Alzheimer's Café meetings, a very good experience for him.

Elena bears a heavy burden in her heart: not being able to be closer to her father, having to leave him in Fatima's care because the distance and family and work commitments do not allow her to do more (she has a teenage daughter and is separated from her husband).

The vacation was an opportunity to spend a few days together in a protected and carefree context: the activities done together brought them closer; the highlight was the afternoon spent with the group enjoying a concert by a wonderful and friendly band: they had fun and danced. Great tenderness is evident from the photos taken that day where they dance together to the rhythm of the music: that was the first and last time Elena danced with her father. Elena was very hesitant about participating in the vacation, thinking she couldn't handle the caregiving burden, but she was convinced by the association's



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psychologist, and now that Franco is in a care facility and they rarely see each other, she has a beautiful memory of that moment.

Best practice n. 3 - Dance therapy

During a vacation for people with dementia, it is advisable to also consider activities that can be carried out at the hotel, especially if the group shows signs of fatigue or reluctance to move around further. In this context, AFAM has experimented with dance therapy sessions, using the Hobart method. The Hobart method is an educational practice where movement creates non-verbal communication within the group and involves gestures, dance steps, and music. It helps keep participants active, stimulates their creativity, and improves their self-image. This activity can be performed either in an indoor room or outdoors, for instance, in a garden or park.

Elderly participants were seated in a circle in a flat garden while an expert therapist led the group from the centre of the circle. The only tool used was a computer playing audio tracks. Participants were involved in creating gestures and dance steps in turns, both in pairs and individually, and the session concluded with a group dance inside the circle.

Best practice n. 4 - Bowling tournament

Every year during the Unforgettable Vacation implemented by AFAM, a beach bowls (“*bocce*”) tournament is organised on the beach to engage the elderly during the cooler hours. The game of bowls holds a significant place in the memories of elderly people as a leisure activity. To allow everyone to play, participants are grouped into pairs forming teams. The pairs play against each other without any eliminations. The tournament is non-competitive, aiming to let participants play as many times as possible. Caregivers can also join the game, especially with participants who might have more difficulties.

Organising an activity like bocce on the beach is important as it fills a few hours of the vacation with a meaningful activity. For elderly people with dementia, who may lose track of time or tend to be restless and busy themselves, spending one or two hours on the beach without any sort of engagement can lead to agitation and the onset of behavioural issues. Not everyone is content to simply relax under a beach umbrella. Organising tournaments with classic games (bowls, cards, marbles, etc.) is a good strategy to stimulate the remaining abilities of the elderly, foster their social interaction within the group, promote movement and moderate physical activity, and keep them engaged in something enjoyable.



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Best practice n. 5 - Supporting the elderly in deprived areas

In 2020-2021, Healthy City implemented two European social funds projects to help elderly individuals in deprived areas maintain mental health during the pandemic. The projects focused on:

- Virtual Connection: Establishing online platforms for interaction.
- Group and Individual Introductions: Fostering social connection and community.
- Individual Interviews: Understanding individual fears, challenges, and motivations.
- Memory Cards and Mental Exercise: Providing tools for cognitive stimulation.
- Quizzes: Addressing anxieties about new experiences.
- Mental Health Focus: Engaging exercises to address feelings of mental deterioration.
- Memory Exercises: Comparing brain training to physical exercise.
- Impact of Thoughts on Feelings and Physical Health: Understanding the mind-body connection.

Understanding the connection between thoughts, emotions, and physical health was another key component. Through conversations and exercises, we helped users realise how their mental state could influence their overall well-being.

The projects successfully engaged diverse elderly participants through virtual meetings and personalised conversations. By focusing on fears, mental stimulation, and interaction, the projects aimed to improve the quality of life for elderly individuals during the pandemic. The holistic approach addressed both cognitive and emotional needs, creating a supportive and mentally enriching environment.

Best practice n. 6 - Improving the quality of life of people with dementia in Umag (Croatia)

The City of Umag implemented the "Dementia aCROsLO" cross-border project in 2018, co-financed by the INTERREG V-A Slovenia-Croatia 2014-2020 program, to enhance the quality of life for individuals with dementia in the region. The project successfully trained 336 caregivers, equipping them with additional competencies for working with dementia patients and facilitating a shift from medical to psychosocial care approaches. It also introduced the "Home Help" service in the Umag area, providing free assistance to 70 users and optimising home help methods in Koper. Additionally, the project fostered collaboration by establishing cross-border groups to connect stakeholders and monitor the care system for dementia patients. It actively engaged relatives and the general public through educational materials, lectures, and counselling, aiming to raise awareness and provide support for those affected by dementia. This collaborative effort between Croatia and Slovenia addressed common challenges in dementia care, ultimately striving to unify services, increase awareness, and promote inclusivity for individuals with dementia.



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Best practice n. 7 - cooperation outside of the traditional caregiving sector

Engaging people with dementia in social activities is crucial for their well-being. One of the effective ways to enhance their social engagement is through cooperation with institutions outside of the traditional caregiving sector, such as theatres. A great example of this practice is the "Ctk Alzheimer Café," inaugurated in June 2022 in Lecce by the Koreja Theater Workshops Association. This café serves as a place where people with Alzheimer's, their families, and caregivers can gather informally for relaxation, interaction, and socialisation. By creating such inclusive spaces, theatres and similar institutions can play a pivotal role in enhancing the quality of life for individuals with dementia.

Firstly, it's important to create multifunctional spaces that cater to various activities. These spaces should be designed for workshops, recreational, and physical activities, and should be equipped with comfortable and accessible furniture such as chairs, tables, benches, and shading structures. The areas should feature permeable flooring to facilitate easy movement, ecological lighting for visual comfort, and a sound system that meets acoustic well-being standards. Additionally, incorporating green therapy into these spaces can greatly benefit individuals with dementia. Developing garden areas with seating and pathways can encourage relaxation and sensory engagement, with elements like lemon groves enhancing the therapeutic environment. Furthermore, providing clear signage throughout the space helps individuals orient themselves, promoting independence and reducing confusion.

For people with dementia and their families, offering a variety of activities can foster engagement and improve well-being. Manual workshops, led by educators and social health workers, can include crafting, painting, or simple DIY projects. Outdoor walks and targeted motor activities, such as safe walking routes and dance sessions, can improve physical health and provide enjoyment. Gentle exercise sessions, led by physiotherapists, can also be tailored to the participants' capabilities. In addition, pet therapy is another valuable activity, offering soothing and joyful interaction with animals. Cognitive activities such as card games, reading, photography, and theater can stimulate the mind and creativity. Additionally, music therapy can evoke memories and improve mood, making it a powerful tool for emotional well-being.

Family members should also be involved in these activities. Encouraging them to join in the activities directed at their loved ones fosters a sense of togetherness and shared experience. Informational and training meetings on topics like guided listening, nutrition, and caregiving techniques can provide valuable knowledge and support. Moreover, support groups can facilitate group discussions, exchanges



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of experiences, and emotional support among caregivers, while yoga and relaxation classes offer opportunities for caregivers to participate in activities that promote their own well-being.

By collaborating with entities like theatres, we can create enriched environments that go beyond basic caregiving. These collaborations introduce cultural and recreational dimensions to the lives of people with dementia, significantly enhancing their social engagement and overall well-being. The success of projects like the "Ctk Alzheimer Café" underscores the potential of such partnerships. Institutions outside the caregiving sector can offer unique resources and perspectives that, when combined with traditional caregiving approaches, lead to a holistic and more fulfilling care experience for people with dementia.



Part 5: The future of inclusive tourism for dementia patients

5.1 Emerging trends in dementia related research/Alzheimer's-friendly travel experiences

As Rahman, M. M., et. al (2022) explain, due to the ageing population, there is growing acknowledgment that our understanding of frailty and dementia is insufficient, especially regarding the variability in their diagnosis, progression, molecular foundations, and treatment. On the other hand, other studies like Aranda et al.'s (2021), shift the perspective, stating that dementia incidence is decreasing yet the advances in population health are uneven. Hence, the authors' call for affordable, accessible, and effective healthcare services and long-term care services for all segments of population advocating for health equity which should be driven by policy makers. Research is also focussing its effort on technology as a mean of support for people with dementia, Astell et al. (2019) in their paper summarise the existing knowledge, up to 2019, about the dementia related usage of technologies, such as: Diagnosis, Assessment and Monitoring; Maintenance of Function; Leisure and Activities; Caregiving and Management; and other future possible applications like nanotechnology for drug delivery, or new tools for data collection.

Within this complexity, however, some aspects and key points remain stable. In recent years, numerous psychosocial approaches to caring for people with dementia have emerged, focusing not on the neurological or physiological components of the disease but on the psychological and social aspects of the individual. These approaches fall into broad categories of interventions whose effectiveness is now well validated. One of these is social inclusion.

Simplifying, social inclusion refers to the possibility of the fragile individual to live satisfactorily within their community and maintain a role at a social level. In fact, when working towards social inclusion, the goal is to counteract the social isolation of the person and the loss of their identity. People with dementia who are placed in an inclusive context maintain their autonomy longer, perceive greater psychological well-being, exhibit less cognitive decline, and are more easily helped in case of need. An inclusive environment is not only beneficial to the fragile person but also to their caregivers, who can more easily receive psychosocial support and professional advice and can maintain a sense of identity as active members of their community, not just as the unfortunate person who has to take care of a sick relative.

Within the social inclusion approach, there are numerous strategies and initiatives targeting different recipients: raising awareness among the general population, implementing structural interventions that ensure accessibility, working within schools from an intergenerational perspective, in the public transport sector, etc. This broad range of actions also includes tourism, considered a common aspect of



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our community life.

In the last five years the topic of tourism linked to dementia seems to have gained some interest in the academic community. Researchers are tackling different aspects around this issue, such as “Tourism as a dementia treatment based on positive psychology” where the authors discuss a study made by a cross-disciplinary team of tourism and dementia experts to provide insight into the potential benefits of tourism for individuals with dementia (Wen et al., 2022). Moreover, Page et al. (2023) proposes pathways that facilitate the transition of tourism business to become dementia-friendly with a focus on the promotion of local events and nature-based experiences that would appeal to a wide audience. Once again, the theme of technology sparks interest, particularly in relation to travel and tourism (Asghar et al., 2020). The authors present their research results, which show that people with dementia wish to travel independently. Assistive technology appears to support this desire by improving users' confidence and self-esteem.

5.2 Building a more inclusive tourism industry

We do not have precise information on the number of people with special needs for inclusive and accessible vacations. However, according to Istat data, 5% of the population in Italy has some form of disability (motor, visual, auditory, cognitive) with 2 million of them being over 65 years old. In 2022, 27% of the EU population over 16 years had some form of disability. According to Eurostat estimates, this percentage corresponds to 101 million people, or one in four adults in the EU.

If we consider how many people might need accessibility for greater comfort, such as those over 65 who may have walking, vision, or hearing difficulties, and who travel with at least one companion, the number is certainly larger and is expected to increase in the coming years. All these people are consumers, moreover, with greater purchasing power than the average: those over 65 are characterised by: a higher annual per capita consumption, averaging 157,000 euros (compared to 125 for those under 35); a higher average income, 20,000 euros (compared to 16,000 for those under 35); greater per capita real wealth, 232,000 euros (vs 110,000); higher financial solidity with 1 in 10 elderly people in debt (compared to almost 1 in 3 among those under 40) and resilience to economic cycles with the only average annual income surpassing pre-crisis levels. The demand generated directly by those over 65 in Italy is significant: the total expenditure of this population segment is about 200 billion euros, almost a fifth of the entire amount of resident household consumption. It is estimated that by 2030 this share will be about 25% of the total and 30% by 2050.



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In the Republic of Croatia there are 657,791 people with disabilities, of which 369,242 are male (56.1%) and 288,549 are female (43.9%) (Table 1), thus persons with disabilities make up 17% of the total population of Croatia. The largest number of persons with disabilities, 313,197 (47.6%), are in the age group 65+. The largest number of persons with disabilities reside in the City of Zagreb and the Split-Dalmatia County. In these two counties live 29.4% of the total number of persons with disabilities. However, considering the percentage of persons with disabilities in the total population of the county, it is found that the highest share is in the Šibenik-Knin County, with the highest prevalence in the Krapina-Zagorje County in the age group 65+.

Healthy elderly people represent an attractive consumer segment for businesses, especially for the tourism sector. Elderly people living with some form of disability also have the right to travel and enjoy the same experiences, representing a target of potential new tourists, a truly new market segment.

Today, the response to accessible tourism requests is random. It varies according to the commitment of individual tourism businesses in a given area and is often limited to compliance with regulations on architectural barriers. Currently, there is a lack of consistent and reliable information on accessibility and services, as well as inadequate training of staff in providing information, at reception desks, and in delivering services to tourists with special needs.

Beyond the economic aspect and business opportunities, there is a need to foster global attention to the needs of all people, regardless of their disabilities, promoting inclusion and acceptance of diversity. For tourism operators, this could be an opportunity to improve their tourism offer, developing projects capable of revolutionising the concept of accessibility to encompass the idea of humans at the centre of space with a design that is beautiful, pleasant, and suitable for everyone.

Accessible tourism must be able to look beyond the number of people with physical, intellectual, or temporary disabilities to include all those who have specific needs during their vacations, which are often not visible. The entire tourism supply chain of the destination must do its part to make vacations an experience that can be enjoyed in the best possible way by everyone.

Among the 17 UN Goals for World Sustainable Development, number 11 is particularly dedicated to Sustainable Cities and Communities – Making cities and human settlements inclusive, safe, resilient, and sustainable. And a vacation spot can certainly be considered such.

5.3 Economic sustainability strategies

The definition of sustainable tourism is given by UNEP and UNWTO as, “*Tourism that takes full account of its current and future economic, social and environmental impacts, addressing the needs of visitors,*



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the industry, the environment and host communities". However, it is a definition that lacks practical meaning. Therefore, it seems crucial to identify some strategies that enhance sustainability in tourism, as it is the basis to ensure healthy and inclusive environments. Indeed, it is not possible to talk about the inclusivity of people with dementia without thinking in an intersectional way. These strategies can be viewed from the policy-maker perspective, the tourist or the owner of services in the tourism industry.

From an economical perspective, inclusive tourism can help overcome the overcrowding problem that has been observed in touristic destinations in the Adriatic coast of Croatia and Italy, among other destinations. Indeed, for a long time the main purpose was to increase tourism in terms of numbers, without a focus on quality. In order to achieve a sustainable touristic industry, it is necessary to shift the focus from quantity to quality, as overcrowding is negatively impacting local communities, leading to socio-environmental issues.

Diversifying the offer by introducing alternative tourism services not only will lead to include targets that are now neglected, but it will also reduce seasonality where tourism flows are usually concentrated in crowded coastal areas during peak summer months. As the inclusive holidays will be planned in periods where there are less touristic flows and the temperatures are mild, they can be used as a strategy to help operators to overcome the huge revenue losses suffered during low season, given also by the inefficient use of infrastructures and capabilities. Another important issue linked with seasonality is the instability of employment: during low season, a lot of workers are sent home to cut on expenses and face the decrease in revenues. This leads to an industry that relies on poorly skilled, usually coming from vulnerable backgrounds, employees. One of the main objectives of inclusive tourism is to train personnel in order to build a human capital capable of dealing with people with dementia. Investment in skill building, together with deseasonalization, will allow to balance off the costs deriving from low season and inefficient use of infrastructures, while making the labour market more stable and competent.

Sustainability can also be declined, from an environmental point of view, as a series of strategies that make the trip and the stay more eco-friendly. Using in an efficient way the natural resources can significantly improve the long-term economic sustainability of the industry. Being aware of the waste generation and management can have a huge impact on the system sustainability in a long-term perspective: in particular, the three Rs strategy (reduce, reuse, recycle) should be kept in mind by both the tourists and the industry. The reduction of losses automatically increases the productivity and the economic margin of the operators while decreasing pressures on natural and urban ecosystems. Another important aspect that should be taken into consideration is transportation: in fact, in order to reach the coastal destination, a common transportation can be used with the aim of reducing emissions. By organising some activities to discover the surroundings, awareness can be raised over the local



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environment, and at the same time it can be used as an opportunity to include people with dementia together with their caregivers in activities that usually would be difficult to be carried out.

Creating and maintaining sustainable and healthy systems means also taking into consideration the local residents, culture and economy. Indeed, the key to achieve a sustainable tourism industry lies in the capability of planning and putting into place an approach that takes into account the unique features of the local territory. Therefore, a good strategy can be enhancing the consumption of locally-made products, and, more in general, raising awareness on the importance of respecting the local territory features in order to fully enjoy the trip.

It is obvious that, in order to be prepared to welcome people with dementia, tourist operators must make investments to ensure not only accessibility, but also the security of the infrastructures. Indeed, as previously emerged from the survey undertaken by caregivers, one of the major challenges faced when dealing with people with dementia is night wandering. This requires employees prepared to support the caregivers at any time needed, but also adequate accommodation. From a business competitiveness view, with the growing importance of the accessible tourism market, facilitating travel for people with disabilities represents an exceptional opportunity. Therefore, to remain competitive, even though a lot of investments are required, tourist operators should be incentivized by the economical benefits demonstrated to be given in the long run.



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