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Summary of the Intellectual Output 1

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Premise

The aim of the IO1 is to model the various aspects which characterize travels of families with children with behavioral disorders/disturbances.

An emotional and behavioral disorder/disturbance is an emotional disability characterized by the inability to build or maintain satisfactory interpersonal relationships with other people.

The main result of this IO is the implementationof a descriptive model for Fair Traveling that represents the main features of travels of families with children with behavioral disorders/disturbances,their typical behaviors, their objective and subjective issues, the possible solutions (with the underlying theoretic references as well as best practices, constraints, and barriers).

The IO1 activities

The activities carried out within the IO1 were:

1. Desk research, aimed to collect theoretical references as well as best practices, constraints, and barriers related to the mobility of people affected by behavioral disorders/disturbances.

2. Fair traveling model that includes:

- Travel issues corresponding to the different types of children disorders/disturbances;
- Needs of families with children affected by behavioral disorders/disturbances when they travel;
- Educational supports that can facilitate the travels of these families.

3. Model discussion involving in each participating countries a panel of parents and educators.

Desk research

Literature research and desk research are different modality to investigate a topic. Literature research focuses on acquiring theoretical knowledge about a concept or topic, whereas desk research is used to gather facts and existing research data that help to answer specific research questions.

Accordingly, partner performed the desk research in their countries collecting various available online and offline sources (such as scientific literature, reports, statistics, recommendations) checking for their reliability.

The result of the desk research is a collection of theoretical references as well as best practices, constraints, and barriers related to the mobility of people affected by behavioral disturbs.

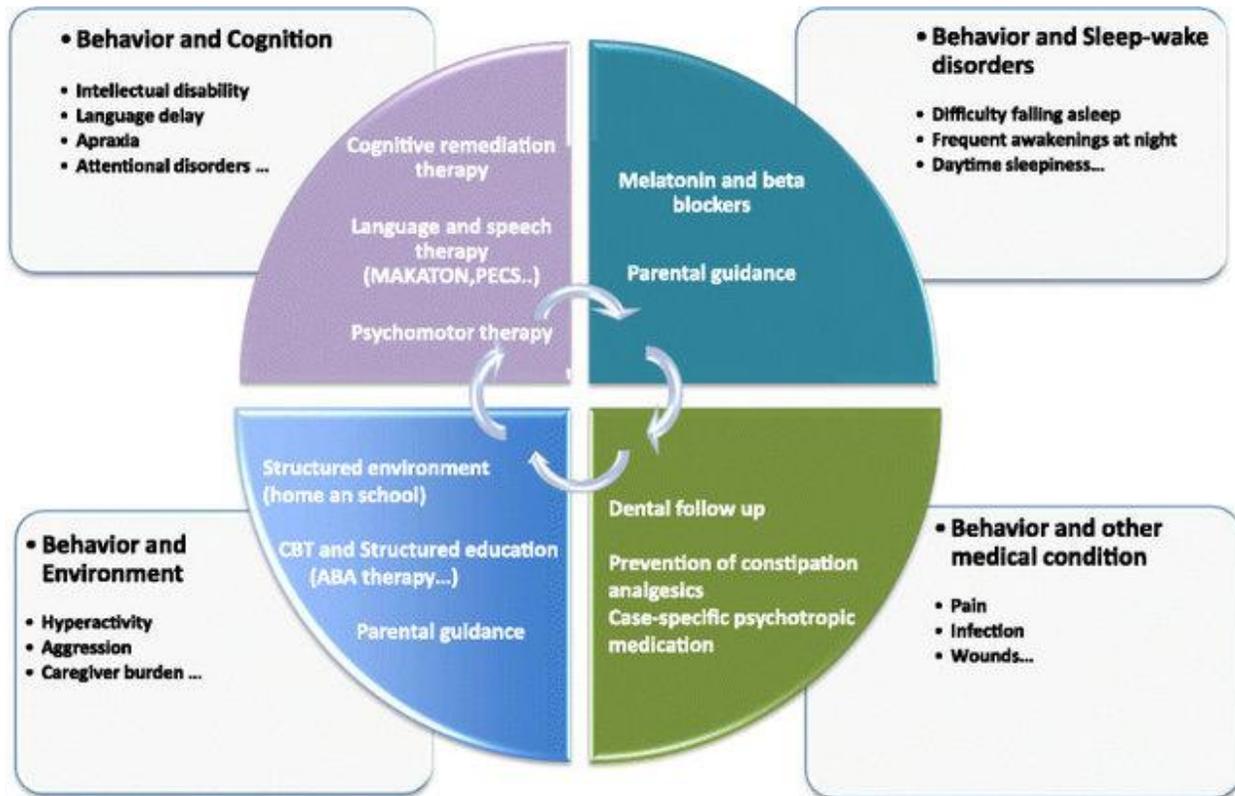The Figure 1 shows the scope of behavioral disorders/disturbances.

Figure 1. Behavioral disorders/disturbances (source: Poisson et al., 2015)

In their research, partners focus on following key questions:

1. What are the main traveling issues? Indeed, the changes in routine, unpredictability, crowds, new noises and sights can all make the experience difficult for people on the spectrum and their families.

2. What are the policies of subjects involved in traveling services?

3. What are the public and volunteers' support?

Each partner realized a report illustrating:

1. Issues in traveling for families with children affected by behavioral disturbs, reporting the studies, investigations, etc. that have been realized in their countries in the last 10 years.

2. Regulations available to support the travel needs of these families;

3. Recommendation and advice available for these families;

4. Good practices, illustrating initiatives that have been realized to sustain these families;

5. Needs, identifying the primary and secondary needs for these families;

6. Stakeholders, identifying the key stakeholders and their role in supporting these families.

Fair traveling model

On the basis of the desk research results, the fair traveling model for families with children with behavioral disorders/disturbances has been developed, identifying its most important dimensions, needs, and issues these families can experience in traveling.

The model also refers to motivational, cognitive, situational, and dispositional factors that determine the interaction among subjects involved in traveling activities.

The primary components of the model are (Figure 1):

- Transportation
- Accommodation
- Restaurants
- Leisure
- Public services

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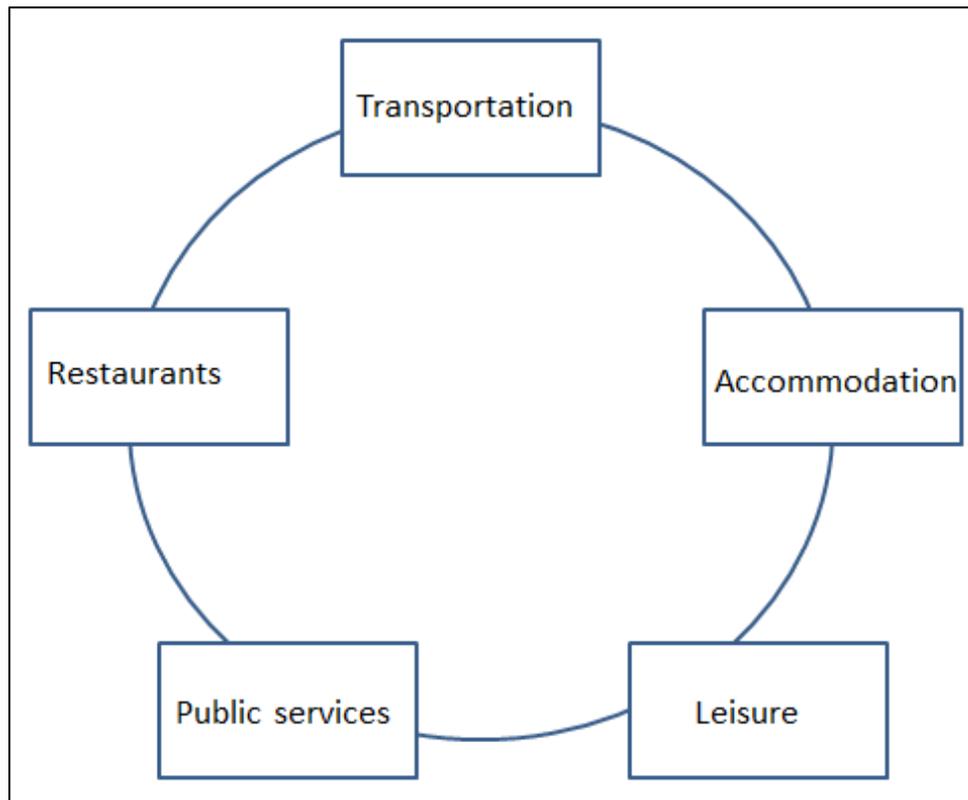Nr. 2019-1-LV01-KA204-060427

Figure 1. Traveling components (own source)

The key traveling relationships of families are with:

- Residents
- Other travelers
- Public services
  - Health-care services
  - Social services
- Traveling service providers
  - Travel agencies
  - Tour operators

- o Online accommodation bookings

- o Online flight bookings

- o Online public transportation bookings

- o Online private transportation bookings

- o Online leisure bookings

Note that families can take advantage of new technologies to access to services.

The relational issues include communication difficulties with:

- Residents: exclusion, due to the distrust and ignorance of the problems of people with ASD

- Other travelers: exclusion, due to the distrust and ignorance of the problems of people with ASD

- Public services: lack of supportive policies and/or specific services

- Traveling service providers: lack of interest to create specific services

The main traveling impact/issues for families with children with ASD are:

- changes in routine

- tackling unexpected events

- Finding the appropriate accommodation structures

- Manage the children behavior

- Interacting with normal people

- crowd

- new noises and sights

Planning travel is an action that encompasses all the travel components and can be affected by traveling relationships. When a family plans travel should define a strategy to minimize the primary impacts/issues that can occur.

To achieve this goal, it is important to define travel in all its aspects. On this purpose, can be useful the following travel descriptors:

- trip origins
- trip destinations
- distance
- travel time
- travel duration
- trip purpose
- mode for trip
- number of persons

Model discussion

Partners presented and discussed the model in their country with a panel formed of four parents (two females and two males) and three educators.

Partners analyze the results and refine the model.

Research findings

Partner research showed that traveling with kids with behavioral disorder/disturbances presents many difficulties and issues.

Behavioral disorders may include:

- attention deficit hyperactivity disorder (ADHD)
- oppositional defiant disorder (ODD)
- autism spectrum disorder (ASD)
- anxiety disorder.
- depression.
- bipolar disorder.
- learning disorders.
- conduct disorders.

T has been found that it's difficult to predict kids' behavior when they are traveling, but the excitement and new environment can cause some of them to have meltdowns. In the case of kids with behavioral disturbs, tantrum and uncontrolled outbursts of anger and frustration are typical.

The National Dissemination Center for Children with Disabilities (www.NICHCY.org) (1996) lists 11 essential skills that are a prerequisite for traveling independently. Those skills are that the individual can:

- Cross streets safely with and without traffic signals
- Board the correct bus or subway (airplane or train)
- Recognize and disembark at the correct destination
- Make decisions
- Initiate actions
- Recognize the need for assistance and request help from an appropriate source
- Follow directions
- Recognize and avoid dangerous situations and obstacles
- Maintain appropriate behavior

- Handle unexpected situations, (e.g. re-routed buses/subways, getting lost etc.)
- Deal appropriately with strangers

Here following the most popular suggestions when traveling with kids:

- Take it Slow and Leave Plenty of Time.
- Don't Overpack.
- Pre-Book Everything You Can.
- Explain the Trip.
- Pay Extra for Good Gear.
- Ask for Child Discounts.
- Accept Things Will Go Wrong.

Inclusive education

According to the Directional Committee of DGCS (General Directorate for Developmental Cooperation), inclusive education:

> […] is a process aimed at guaranteeing the right to education for all, independently from diversities, disabilities or psychophysical, socioeconomic and cultural disadvantages. The final aim of inclusive education is not limited to school inclusion, but it is the social inclusion of any person, the promotion of every person's whole development and of the society at large. On this basis, it is important to enhance interventions focused on individuals' and groups' life projects, so that the life project is developed at school as well as in the social context. (Directorate General for Development Cooperation, 2015).

Here following the key stakeholders and their role in supporting families of children with behavioral disorders/disturbances:

- Governmental institutions, developing policies, organizing services, funding projects of private nonprofit organizations.
- Educational institution, training social educators and social volunteers, spreading the awareness on social issues.
- Research institutions, investigating on the various aspects related to people with special needs (diagnoses, rehabilitation and socialization practices, integrating knowledge, experimenting new therapies and services.
- NGOs, supporting families with interventions of volunteers, increasing the integration climate.
- Policy makers, proposing and discussing regulations to support the governmental action as well as the activity of the educational institutions.
- Social services, organizing interventions, fostering social inclusion programs.
- Local inhabitants, actively contributing to social integration.

Conclusion

Each partner performed an analysis of the critical points for families with children affected by behavioral disturbances when they are traveling.

The desk research showed that, in the partner countries, there are the same issues for these families. They are:

- Changes in routine

- Tackling unexpected events

- Finding the appropriate accommodation structures

- Manage the children behavior

In particular, emerged that no policies exist to support the need of these families in their travels.

However, NGSs create lists of accommodation structures, restaurant, and leisure structures which get services to children with behavioral disturbances.

Finally, partners realized the "fair traveling model" that represents needs, issues, barriers that occur to families with children with ASD as well as the strategies to mitigate them.

This model is the result of the desk research and interviews carried out by partners and encompasses principles underlying good practice that should form the conceptual basis for policies. It also includes educational actions that are needed to sustain families as well as to stimulate awareness and inclusion from "normal" people.

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