

# Family holidays with autistic children: An exploratory study of parents' emotion work due to service delivery failure

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## ABSTRACT

There is growing recognition that autistic children face significant emotional challenges during a family holiday. Interviews with parents of autistic children in the UK and Ireland were undertaken to explore parents' perceptions of the role of emotions in service delivery failure. Inductive latent analysis found four types of service delivery gap, each associated with uncertainty about who is responsible for managing emotions: this is termed 'emotion work' when undertaken by parents and 'emotional labour' when it is performed by staff. The findings suggest that there is a need for a more complete understanding of the use of emotions in recovery after instances of service delivery failure, particularly with regard to distinguishing between the concepts of emotion work and emotional labour. An important implication is that tourism businesses may need to adapt their service provision through staff training and development schemes that recognise the importance of emotions in supporting autistic children.

## 1. Introduction

The need to make tourism more accessible and inclusive has gained increased global significance both in tourism research (e.g., Halpern et al., 2025) and among practitioners in the public and private sectors, as interventions at a policy and operational level seek to ensure barriers to access and participation are mitigated wherever possible. Tourism has been comparatively slow as a subject area to embrace this accessible research focus, compared to cognate areas such as leisure research, where a long-standing conceptual and theoretically derived literature has examined barriers to leisure for families (e.g., Crawford & Godbey, 1987; Godbey et al., 2010). Tourism researchers have begun to respond by exploring new avenues focusing on under-represented groups, particularly those with disabilities. These studies have mostly examined barriers to access, with the aim of raising awareness of the need to provide greater agency and empowerment to these groups and their carers. The result has been an expansion of interdisciplinary research that has crossed many boundaries in tourism research, including human well-being, psychology, management, marketing, information communication technologies, and health. Indeed, in any given year, around 40% of the population in European countries do not participate in

tourism, either because they are constrained or because they simply choose not to participate (Diekmann & Haukeland, 2024). One such area that has attracted attention is neurodiversity, which highlights the way in which people with different or atypical mental or neurological functions have different needs: one of the most significant of these differences is autism. The expectation that service failures are particularly likely to be experienced by autistic children and their families may be one of the most important barriers to accessibility for parents of those children. Indeed, Autism Travel (2026) notes that 78% of parents with autistic children are hesitant about going away on a family holiday. Such perceived barriers tend to coalesce around three core concerns: the physical design of the built environment, the digital design of online services, and the design of systems and processes that include service delivery (ONS, 2021), although these barriers may manifest in complex and nuanced ways in the case of autism.

This study recognises that autistic children face significant emotional challenges during a family holiday. It focuses on parents' perception of the 'emotion work' they undertake in relation to the 'emotional labour' performed by staff, as they meet within such service delivery encounters. The aim of this paper is, therefore, to move the discussion forwards by identifying different types of service delivery failure in this context

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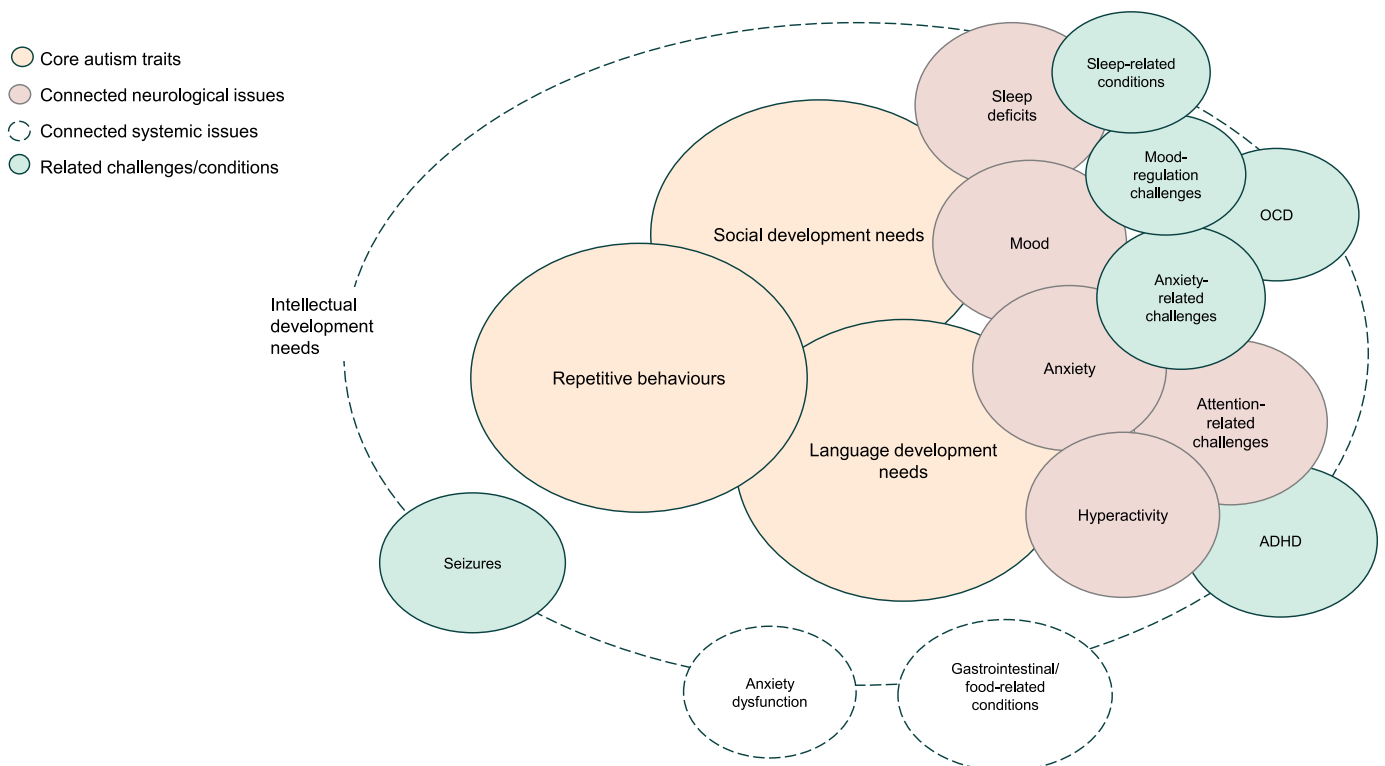
and exploring how they may best be resolved. Underpinning this rationale for the study is a recognition that models of service gaps are predicated on rationality, and a recognition that tourist decision-making and experiences occur within a setting where service gaps can be identified using positivist measurement tools that survey the totality of a service experience.

These gaps can then be rationally addressed to enhance the service. Likewise, service recovery research (i.e., [Liu et al., 2024](#)) demonstrates that new dimensions of consumer experience are difficult to evaluate using rational measures alone. For example, emotions are an increasingly important element of service experiences. However, emotional responses to service provision, especially when it fails, are not well understood, particularly in the context of family holidays with autistic children. Moreover, such service failures are not easily remedied using standardised recovery mechanisms for groups with accessibility needs. This is underpinned by calls for a re-theorisation of tourist decision-making models ([McCabe et al., 2016](#)) to recognise the duality which exists in consumer behaviour by combining an element of the rationality on which gap analysis is based with a focus on non-rational experiential influences, such as emotions, social factors, and other less tangible elements. As [McCabe et al. \(2016, p. 11\)](#) put it, “two major theoretical problems are associated with the conventional approaches to tourist decision-making; rationality and the focus on input–output variables rather than cognitive processes. These two problems constrain knowledge development on tourism decision-making”. Therefore, dual-system theory posits that different choice strategies exist that may not easily be captured through quantitative measurement of the visitor experience. This is because such measures fail to recognise this duality, as they solely focus on a range of input and output variables to measure expectancy versus experience. However, prior to examining the detailed focus of the study, it is appropriate to briefly outline what autism is, and to explain the relationship between tourism and autism.

### 1.1. Autism

The study of autism has a long history of academic inquiry, dating back to the early twentieth century and emerging from the disciplines of medicine and health ([Evans, 2013](#)). As of 2026, Google Scholar lists approximately 2.5 million items indexed under the term ‘autism’, demonstrating the subject's significance in global research and for practitioners across a diverse range of disciplines, from health and social science through to the humanities. This substantial body of literature is largely dominated by a focus on the kinds of support autistic children receive and on the services in place to enable families to cope with the challenges of autism during childhood development, including difficulties around diagnosis. In addition, autism in adulthood and its accommodation in everyday life has attracted increasing attention in recent years, given the prevalence of autism, its often invisible nature, and its potential to impact the well-being of those affected.

Although some recent studies have defined neurodivergence, and in particular autism, as a psychological disorder ([Zheng et al., 2023](#)) or a mental disorder ([Jiang et al., 2025](#)), current research using the social model of disability ([American Psychiatric Association, 2022](#)) adopts strengths-based terminology in respect of autistic people. This paper therefore defines autism as a neurodivergent condition. [Fig. 1](#) provides an overview of its core traits and associated neurological issues (such as sleep deficits), as well as the systemic issues associated with autism, such as gastrointestinal (GI) disorders. Other conditions related to autism, such as attention deficit hyperactivity disorder (ADHD) and obsessive-compulsive disorder (OCD), are also shown in [Fig. 1](#). Autism is not an illness, a disease, or a medical condition (United Kingdom [National Health Service, 2019](#)); it simply means that a person's brain works in an atypical way throughout their life. Much has been written about autism and how the educational needs of autistic children can be better met (e.g., [Goodall, 2018](#)). Less is known, however, about the leisure activities and experiences of autistic children (a rare exception being [Stacey et al., 2019](#)), particularly about their experiences when spending



**Fig. 1.** Autism's core traits and associated comorbidity.

Source: Adapted by the authors from [Rodríguez and Escalona \(2018\)](#); Jepson et al. (2022)

significant time away from home and school, for example, during family holidays.

## 1.2. Autism, families, and tourism

Families with autistic children represent a significant tourism market. The World Health Organization estimates that over 75 million people (about 1% of the world's population) are autistic (World Health Organization, 2023). In the UK, it is estimated that around one in 100 children have been diagnosed with autism by a medical practitioner (British Medical Association, 2024). This amounts to a population of approximately 700,000 children. In the UK, 36% of all holiday trips involved children in 2024; this amounted to 9.5 million trips, worth £2.4 billion in total (VisitEngland, 2026), a figure which could potentially increase if the barriers experienced by parents of autistic children were better understood and addressed. It is important to recognise that there are also many people who for a variety of reasons do not have a formal diagnosis. Despite the large number of families with autistic children and their significant spending potential, there remains a considerable pent-up demand for suitable holidays. Service gaps may arise resulting from insufficient knowledge, skills, or organisational commitment on the part of providers. In order to meet these families' needs, specific adaptations may be required in service delivery for families with autistic children within a hospitality context. These adaptations have been outlined by the National Autism Society & Visit England, 2018, and relate to barriers such as the following: sensory overload (i.e., managing lighting, sound, and crowds); routine disruption (i.e., providing advance information about the experience and what to expect); and social anxieties, as people with autism may be four times as likely to suffer anxiety in visitor settings. The emotional and personal-development benefits of visiting as a tourist (or leisure visitor; see Walton, 2019) may offset these challenges. Even so, when the overload becomes too great it can lead to the child having a meltdown – an involuntary response characterised by a temporary loss of emotional control. To an outsider this may resemble a tantrum and include behaviours such as weeping or screaming. Avoiding triggers is key to maintaining emotional stability throughout the holiday, and is usually the parents' responsibility. In extreme situations, a child may shut down; this means that they withdraw from the situation and seem to have frozen, appearing exhausted and unable to move. In these cases, the child may need to be in a quiet space to self-regulate. Parents will also typically be called upon to provide emotional support when meltdowns occur, a role discussed later in this paper as 'emotion work'. This notion contrasts with 'emotional labour', which is carried out by service staff.

As Zhao et al. (2023) suggest, the risk of meltdowns is a significant factor in why families with autistic children often struggle with taking holidays. This is often evidenced by the tendency for such families to seek safer options, such as a domestic holiday or visiting relatives. Indeed, stepwise behaviour may help all members of the family develop confidence and familiarity with travel. As Conde et al. (2026) observed, natural environments are among the preferred activities of autistic children on holiday, helping to mitigate some of the sensory overload issues associated with indoor attractions. Disappointingly, the National Autistic Society in the UK only identifies 28 visitor attractions out of around 6500 in the UK with specialist provision for autistic children, illustrating the challenge for parents seeking a more inclusive visitor experience for children with autism.

These issues assume a greater degree of complexity when recognising that as a service business, with complex value chains involving multiple service providers, offering an autism-friendly experience may be challenging. This is because at any 'touchpoint' in the chain, service shortfalls may lead to overall service failure, undermining the family's expectations and thereby creating a negative tourist experience, even if other components of that experience were excellent. Meanwhile, the service quality expectations of travellers with disabilities are rising, due in part to greater digital engagement among consumers (Park et al.,

2024) and the accompanying legislative changes in many countries that aim to guarantee such groups greater access to the visitor economy. Meeting these higher expectations requires seamless delivery and service excellence to accommodate these diverse tourist needs, which have only recently come to be recognised.

## 1.3. Research focus

The focus of this paper is to explore parents' perceptions of service delivery failure involving their autistic children's holiday experiences and the impact of these upon the emotion work parents undertake to try to achieve emotional stability within the family. The study also highlights the potential for further recognition of emotional labour to enhance service provision in the context of holiday experiences for autistic children, building on the research by Koc (2019). This paper therefore indicates a potential increase in emotion work that may be required of parents to support their autistic child while on holiday, consuming a greater amount of potential parental leisure time. The following section reviews the literature relevant to holidaymaking by families with autistic children, in particular where it deals with service delivery failure and the roles of emotions, emotion work, and emotional labour.

## 2. Literature review

### 2.1. Critical perspectives on tourism, holidaymaking, and autism

Holidays can be particularly complex and challenging for autistic children and their families. Autism is classified by the American Psychiatric Association (2022) under the category of complex neurodevelopmental disorders, which are characterised by social and communication impairments and/or repetitive or stereotypical behaviours. Within the growing literature on autism and tourism, which has been the subject of several reviews, the field can be divided into two interconnected domains: (a) autistic adults as travellers, and (b) tourism and the needs of families with autistic children. Depending on their autistic attributes, specific challenges for autistic children when going on holiday could include difficulties such as navigating crowded and noisy transit spaces, experiencing higher levels of social anxiety due to limited capacity for communication and social interaction, adapting to change (e.g., delays or changes to a journey), coping with hypersensitivity (e.g., sensory seeking or avoidance, and dealing with new stimuli or overstimulation), sleeping in a new environment (e.g., if the room does not have weighted blankets or blackout blinds), repetitive behaviours or 'stimming' and other travellers' reactions to this, and fulfilling dietary requirements (e.g., allergies, avoidant-restrictive food intake disorder) (Keski-Rahkonen & Ruusunen, 2023).

Autism and tourism remains an emerging area in tourism research. Conde et al. (2023) identifies just 11 papers in this field, a figure that has since grown with the addition of a number of more recent papers. However, a critical assessment of the studies reviewed by Conde et al. (2023) reveals an overwhelming social focus on the lived experience of families and the challenges associated with taking holidays. While Schaaf et al.'s (2011) study was the first paper in the field to establish many of the principles regarding holidays for autistic children discussed above, other studies have reinforced these findings, such as Hamed (2013), which focused on adults. One of the deeper studies, by Sedgley et al. (2017), examined many of the touchpoints from a mother's perspective, as well as the challenge of destination and accommodation selection. Subsequent studies have continued to add incrementally to this knowledge and built on earlier findings, largely taking the form of replicative studies or commentaries. For example, Kim et al. (2018) reinforced the need for family support, while Cerdan Chiscano (2021) noted three critical points of conflict: communication, airport access and service provision, and service training. Other studies, such as Freund et al. (2019), focused on the anxiety experienced by families with

autistic children on holiday, arguing for sector guidelines (ironically, these had already been produced: [National Autism Society & Visit England, 2018](#)). Such guidelines also feature as a dominant element of [Andersson and Tuuri's \(2020\)](#) study arguing for the need to provide trip-planning support for families to help them create autism-friendly holidays. [Sak et al. \(2020\)](#) also examine destination selection issues. Interestingly, [Conde et al. \(2023\)](#) describe several theoretically based papers, one of which, by [Petroman and Vaduva \(2012\)](#), advocates niche activities. They also refer to [Fazil et al.'s \(2022\)](#) paper which focuses on the internal psychological contradictions for families in deciding whether to take a holiday. These trade-offs were between the developmental benefits for the child versus the emotional energy required to navigate barriers to achieving a high-quality holiday experience. This contradiction was exemplified by [Neo and Flaherty \(2019\)](#), which examined many of the challenges of international air travel for autistic children and their carers. Lastly, [Kohl and Barnett's \(2020\)](#) review of the extant literature on autism and tourism noted the lack of official guidelines to assist travellers with autistic children, and [Chen et al. \(2025\)](#) reviewed the situation within Indonesia.

Subsequent studies such as [Mauro et al. \(2026\)](#) have reinforced families' pursuit of autonomy in taking trips and how human-centred AI trip planning may help adults with autism, and potentially also families with autistic children. Similarly, improved website design for autistic people may assist with more inclusive family-oriented trip planning ([Dattolo et al., 2016](#)). [Conde et al. \(2023\)](#) observed the limited sample size of most research studies as well as the dominance of qualitative studies in the field. Perhaps the more critical dimension here is the limited theoretical debate on how to understand the lived experience of families with autistic children within the context of holidaymaking. Many of the published studies to date have reached a saturation point and simply reiterate well-known findings. At this juncture, new perspectives are needed to move the research agenda away from knowledge gathering and studies that reinforce well-known truisms and towards new domains. One area that offers potential for this is the concept of emotion.

Studies suggest that holidaymaking with autistic children can impose a significant emotional burden on the parents ([Freund et al., 2019](#)). This has been widely accepted within the literature both on health ([Gray, 1994](#)), with its focus on parental well-being, and on leisure ([Benson, 2010](#)). One notable issue is that parents may even be so emotionally exhausted after the holiday that they feel they need another one for themselves ([Stadler et al., 2021](#)), a feature that has been recognised in the wider leisure literature on autism carers (see [Menezes & D'Mello, 2021](#)). As this paper suggests, parents' efforts to manage their autistic child's emotions are often mislabelled as 'emotional labour'. Indeed, the term 'emotional labour' is derived from theories of work, describing the mechanism whereby employees are required to manage their own emotions to ensure that customers have the emotional experience that is necessary for them to consume the service satisfactorily. This paper argues that the emotional input of parents in their efforts to manage a child's emotions is better theorised as 'emotion work'. The notion of emotion work is derived from the sub-discipline of family sociology, in which it is understood to be fundamentally different to emotional labour, involving different actors, processes, and implications. The premise of this paper is that, from the parents' perspective, both emotion work and emotional labour come into play in a family holidaymaking context when service delivery failure occurs.

## 2.2. Service delivery failure

To gain a better understanding of the importance of the distinction between emotional labour and emotion work and its implications for tourism management, this study is theoretically framed by the following concepts: service gaps ([Parasuraman et al., 1988](#)), service failure ([Grönroos, 1984](#)), co-created experiences ([Koc, 2019](#)), and service-dominant logic ([Vargo & Lusch, 2004](#)). Service failure occurs

when a service provider does not succeed in meeting a given customer's expectations ([Grönroos, 1984](#)), even if these expectations may be unrealistic. This is known as a service gap. If the customer draws this to the service provider's attention, the service provider can attempt to remediate the service failure. Several 'service recovery' methods are available to the service provider, including monetary compensation, apologies, or refunds. If the service failure remains unrecovered, however, this can have a number of negative consequences for the service provider, including lower repurchase intention and fewer word-of-mouth recommendations ([Ladhari, 2009](#)).

In a tourism context, service gaps are more likely than in other industries. They can also be more damaging, because tourism experiences tend to be heavily co-created ([Koc, 2019](#)) and are highly subjective, and so may vary from person to person. The notion of co-creation is based on service-dominant logic ([Vargo & Lusch, 2004](#)), which argues that value creation is not simply based on exchange (of a good or service rendered at a monetary cost). Rather, it requires the integration of productive resources – such as time, effort, and expertise – that are committed to the service exchange for the benefit of the other party. As such, service providers cannot create value themselves: value creation can only be achieved through a process of co-creation along with the customer ([Sthapit et al., 2023](#)). When service delivery failure occurs, the resources each party commits to the exchange are wasted.

Many researchers have proposed frameworks for the identification and measurement of service gaps as a means through which supply and demand might be better aligned in a service setting. Of these, probably the best known is the 'SERVQUAL' model created by [Parasuraman et al. \(1988\)](#), which identifies where service delivery failures are likely to happen and measures their magnitude. Research into service delivery failure in the tourism sector has previously focused mainly on well-served populations. Some studies have been undertaken on under-served populations such as people with dementia ([Page & Connell, 2024](#)), blind and partially sighted people ([Rickly et al., 2022](#)), people with physical disabilities ([Kim & Lehto, 2012](#); [Lee et al., 2021](#)), and LGBT communities ([Ro & Khan, 2022](#)).

A literature search conducted for this study found only one paper that used the keywords 'service failure', 'parent', and 'neurodiv.' ([Cerdan-Chiscano, 2024](#)). Studies focusing on non-tourism areas of service delivery with regard to autism have, however, examined the ongoing need for parental support with autistic children ([Fong et al., 2023](#)). This further reinforces the importance of understanding where such gaps exist and the importance of research using different lenses to better understand emotions, emotional labour, and emotion work.

## 2.3. Emotions, emotional labour, and emotion work

Emotions are crucial to tourism experiences. The human brain interprets and constructs emotions by integrating sensory information from the body with information from the environment and from previous experiences. Of the studies so far published on holidaymaking by families with autistic children, few have identified a strong emotional dimension to such experiences ([Freund et al., 2019](#)). Their focus has tended to be on the emotional challenges autistic children may face when going away on holiday. Few, in contrast, have focused on the role adopted by parents as they attempt to manage the heightened emotions of their autistic child or children ([Sedgley et al., 2017](#)).

Emotions are shaped by feeling rules, which [Hochschild \(1983, p. 59\)](#) defines as, "rules or [social] norms according to which feelings may be judged appropriate to accompanying events". Feeling rules thus help individuals assess what to feel; when, where, and how long to feel; and how strong an emotion can be during a social exchange. They become most apparent when we experience a conflict between "what I do feel" and "what I should feel" ([Hochschild, 1983, p. 60](#)), and have been well researched in workplace, family, and educational contexts. For example, a flight attendant has to abide by feeling rules that dictate that they must always appear feel happy and calm. In addition, attendants obey display

rules required by their employers, which demand they show a smiling and welcoming demeanour to passengers, even if they are feeling tired, stressed, or upset (Hochschild, 1979). Adherence to feeling rules is therefore essential to maintaining social order; they provide clear expectations around emotional expression. Feeling rules can, however, be expected to be different in a holiday context, where new stimuli and challenges for autistic children arise, such as crowds, noise, unfamiliar sleeping arrangements, or hypersensitivity. It then becomes crucial to manage the child's emotions. This responsibility falls on the parents, who must regulate their own emotions along with those of their children. Research on the challenges this brings for parents is, however, limited.

Previous studies have focused mainly on the stressors involved (e.g., Dempsey et al., 2021; Hamed, 2013). Some make brief reference to emotion management (e.g., Freund et al., 2019; Sedgley et al., 2017), but none has fully recognised either the distinction between emotion work and emotional labour or how these may be triggered by service delivery gaps. The tourism literature has tended to focus instead on emotional labour. Lee and Madera (2019) present an extensive systematic review of this body of work. The major distinction drawn between emotional labour and emotion work is that the former is performed by employees, usually in a service setting, while the latter is performed primarily by family members. Emotional labour is defined as the “act of trying to change in degree or quality any emotion or feeling” (Hochschild, 1979, p. 561), and the “management of feeling to create a publicly observable facial and bodily display; emotional labour is sold for a wage and therefore has *exchange value*” (Hochschild, 1983, p. 7, emphasis in original). It requires the individual to manage their own feelings and expressions according to the feeling rules of a job, and is thus associated with employees regulating their emotions when interacting with customers, co-workers, and managers (Busoi et al., 2022; Xu et al., 2020).

At a theoretical level, emotional labour has been found to involve either surface acting or deep acting. Employees engage in surface acting by suppressing their negative emotions and displaying the expected positive expressions for customers, co-workers, or managers, resulting in an emotional dissonance between what employees feel and what they display. When employees engage in deep acting, they alter their feelings to evoke genuine positive emotions for customers, co-workers, or managers (Hochschild, 1983). When engaging in either type of acting, employees manage their emotions and perform emotional labour, not only to comply with the expected feeling rules discussed above, but also with certain standards and display rules set by their organisation (Wijeratne et al., 2014). It is argued that employees in the hospitality and tourism sector are required to remain friendly and enthusiastic during their entire workday and thus face high demands in terms of emotional labour; yet they rarely receive extensive training to deal with its impacts (Pizam, 2004). This has significance for parents, as will be highlighted below, as surface and deep acting may also occur in emotion work, when managing one's emotions may become central to the family service encounter.

Koc (2019) notes that the field of service delivery failure and recovery would benefit greatly from integration of the concept of emotional labour into its thinking. Therein lies an opportunity for a service encounter that is initially a negative one to be transformed into one which becomes positive, memorable, and potentially a highlight of the holiday. Further research supports this contention: for example, Luo et al. (2019) found that emotional labour through deep acting can positively influence service recovery interactions.

The distinction between the concepts of emotion work and emotional labour has been debated yet still lacks clarity (Tarantul & Berkovich, 2025). The distinction is important, however, because it could provide a new way of understanding the gaps in service delivery. While it has been argued that emotional labour is performed strictly in the workplace context, emotion work is understood to consist of any efforts made to regulate the emotional climate within family relationships. Hochschild

(1983, p. 7, emphasis in original) highlights that emotion work refers to “the same acts [as emotional labour] done in a private context where they have *use value*”, rather than exchange value, as is the case with emotional labour. This includes, *inter alia*, relationships within the family (Hochschild, 1979). It may involve inducing emotions in others by managing one's own emotions, for example by putting on a brave face when a child is distressed; or managing the emotions of others, for example by attempting to soothe the child and calm them down (Kwok & Kwok, 2020). Both are again shaped by feeling rules that define societal expectations about what and how to feel in such situations, but they involve different actors, processes, and implications (Fig. 2).

While housework and childcare have long been identified as work that must be done for the family to function, emotion work is often overlooked (Dean et al., 2022; Wharton, 2009). Curran et al. (2015) found, however, that the greater the investment of time and energy in emotion work, the better the quality of family relationships. Emotion work in families with autistic children has nevertheless recently begun to attract more attention. A particular focus has been the additional stress that parents of autistic children tend to experience (Fletcher et al., 2012). Kwok and Kwok (2020) note that the amount of emotion work undertaken by parents of autistic children tends to be much higher than in neurotypical families. This could be because autistic children have greater sensitivity to certain environmental stimuli (such as crowds or noise), may lack confidence, and so require more emotional bolstering. Alternatively, it could result from a lack of awareness in society about conditions such as autism, and the consequential insufficiency of support for autistic children and their families. It is also possible that it could be a combination of the two.

Ryan's (2010) work focuses on the experiences of mothers of children with learning difficulties in public spaces. The study highlights how the reactions of other people, as well as the mother's interpretation and response to these reactions, creates emotion work. An autistic child's emotional outburst or meltdown can lead to feelings of embarrassment and shame for parents, largely because “children's behaviour in public spaces directly reflects on the perceived competence of their parent” (Ryan, 2010, p. 869). Autism, however, is a hidden disability and parents therefore “often appear to be incompetent parents, rather than as parents of children with particular social and communication disorders” (Ryan, 2010, p. 869). This creates another emotional layer for parents of autistic children to manage, additional to that required of parents of neurotypical children.

In summary, this review has identified two critical gaps in tourism research that this study seeks to address. First, research into service delivery failure in the tourism sector that acknowledges the interaction between emotion work and emotional labour has not yet been undertaken and so such intersections remain a promising focus for further study, particularly for under-served populations such as neurodivergent ones. Second, while previous studies have investigated the role adopted by parents as they attempt to manage the heightened emotions of their autistic child during a family holiday experience (Sedgley et al., 2017), there is a lacuna of research on the role of service delivery failures on this.

### 3. Methods

Designing research studies to understand vulnerable groups often requires a dyadic research design, in which parent–child experiences of holidays can be captured to understand the duality and intersections of their experiences, including the points of tension. Yet a degree of bricolage is also needed when working with vulnerable groups, as access to the person concerned may be denied or they may not have the mental capacity to engage fully in interviews. Bricolage is therefore required where a pragmatic perspective is required to reconstruct a particular phenomenon (Denzin, 1994, pp. 15–30). As an approach to data collection, this enables the researcher to pivot and be resourceful, creative, and flexible, and focus on the research problem as circumstances

|                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Emotion Work</b> <ul style="list-style-type: none"> <li>Managing one's own emotions in order to establish and maintain relationship goals, e.g. parenting</li> <li>No fixed emotional expectations ('feeling rules' – Hochschild, 1983)</li> <li>Examples include remaining calm, positive outlook, getting excited, being strict</li> <li>No financial reward</li> <li>Use value</li> <li>No training</li> </ul> | <b>Emotional Labour</b> <ul style="list-style-type: none"> <li>Managing one's own emotions to achieve effective service delivery, e.g. tour leaders</li> <li>Emotional expectations established and explicitly stated in handbooks, training, etc. ('display rules' – Hochschild, 1983)</li> <li>Examples include remaining calm, positive outlook, getting excited, being strict</li> <li>Financial reward</li> <li>Exchange value</li> <li>Training sometimes provided</li> </ul> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Fig. 2.** Emotion work and emotional labour (Authors, 2026).

change. In this study, the initial research design was for an exploratory study of service gaps using a dyadic research method whereby a parent and the autistic child would be interviewed at the same time and in the same space. However, none of the respondents were willing to permit the children to be involved, and so only the parents' perspective could be gathered. This is a limitation of the study, but as best practice in conducting ethical research requires, no respondent should be pressured to participate in a research study. A dyadic perspective was hence not

possible, even though this would have significantly enriched the findings.

### 3.1. Data collection

Semi-structured interviews were deemed most appropriate for this study. In total, 20 interviews (with 19 respondents from the UK and one from Ireland) were conducted with parents of autistic children.

**Table 1**  
Interview participants.

| Family-member pseudonym | Number and age (s) of autistic child(ren) | How does autism impact your child?                                                                                                                                                                  | Married/divorced/single parent/cohabiting | Home location (UK region) e.g., South West, London, Wales | Most recent holiday destination (domestic or international) |
|-------------------------|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------|
| Maya                    | 1 (11)                                    | ADHD, epilepsy, sensory processing difficulties, dietary issues                                                                                                                                     | Cohabiting, mother and partner            | South West                                                | International (Portugal)                                    |
| Charlotte               | 1 (6)                                     | Dietary issues (colours/textures of food), sensory processing, maintaining social relationships, anxiety                                                                                            | Married                                   | East Midlands                                             | International (Disneyland, Paris)                           |
| Joanna                  | 1 (15)                                    | Spatial awareness, learning and development needs/special educational needs                                                                                                                         | Cohabiting, mother and father             | South Wales                                               | Domestic (Haven, Wales)                                     |
| Emily                   | 2 (5 & 7)                                 | Dietary issues (Avoidant Restrictive Food Intake Disorder, ARFID), sensory processing, emotional intelligence, developmental needs, anxiety                                                         | Married                                   | North London                                              | Domestic (Camber Sands, East Sussex)                        |
| Kathy                   | 1 (8)                                     | Severely autistic, echolalic child                                                                                                                                                                  | Married                                   | East Anglia                                               | Domestic (Dorset)                                           |
| Erin                    | 1 (4)                                     | Communication/development needs, dietary needs (plain food only)                                                                                                                                    | Married                                   | Northern Ireland                                          | Domestic (Portrush)                                         |
| Anna                    | 1 (8)                                     | Dietary needs (no wet food), socialisation difficulties                                                                                                                                             | Married                                   | North East                                                | International (France)                                      |
| Morag                   | 1 (11)                                    | ARFID, sensory avoidance (noise), night-time incontinence                                                                                                                                           | Married                                   | South East                                                | International (Malta)                                       |
| Gwen                    | 1 (14)                                    | Communication (angry or loud outbursts), anxiety with crowds/noise                                                                                                                                  | Married                                   | North West                                                | Domestic (Cornwall)                                         |
| Isla                    | 1 (6)                                     | Developmental delay, ADHD, and dyspraxia                                                                                                                                                            | Cohabiting, mother and father             | West Midlands                                             | Domestic (East Anglia)                                      |
| Fiona                   | 2 (6 & 5)                                 | Self-stimulatory – sensory seeking, anxiety with crowds/noise                                                                                                                                       | Cohabiting, mother and father             | Scotland                                                  | Domestic (Scotland)                                         |
| Bronwen                 | 1 (12)                                    | Sensory processing disorder, dietary issues, anger management/aggression, generalised social anxiety disorder                                                                                       | Married                                   | County Limerick, Ireland                                  | International (Rhodes, GR)                                  |
| Hannah                  | 1 (4)                                     | Dietary issues, communication development issues, anxiety with crowds/noise                                                                                                                         | Married                                   | South London                                              | Planning a family holiday                                   |
| Peter                   | 2 (7 & 4)                                 | Anxiety, easily worried, sensory avoidance (noise), sensory processing disorder                                                                                                                     | Married                                   | South West                                                | Domestic (Cornwall)                                         |
| Megan                   | 1 (12)                                    | Social developmental needs, emotional outbursts without self-regulation                                                                                                                             | Divorced                                  | East Anglia                                               | USA (Florida)                                               |
| Grace                   | 1 (9)                                     | Learning and development needs, dyspraxia, sensory processing disorder, minimal verbal communication, high anxiety levels                                                                           | Divorced, cohabiting with new partner     | West Midlands                                             | Domestic (Wales)                                            |
| Claire                  | 1 (5)                                     | Unable to stand unaided for long periods, sleep disorder, anxiety, easily fatigued, uses a walker, learning development needs/delayed speech                                                        | Married                                   | North London                                              | International (France)                                      |
| Dilys                   | 1 (6)                                     | Sensory processing disorder (noise/crowded places anxiety), developmental needs (limited understanding of safety/danger), dietary needs (plain food only)                                           | Cohabiting, mother and father             | East Midlands                                             | Domestic (south coast)                                      |
| Laila                   | 1 (11)                                    | Sensory processing disorder (noise avoidance and sensory seeking, e.g., lifts in hotels), developmental needs (limited understanding of safety/danger), sleep disorder, dietary needs (puréed food) | Married                                   | Yorkshire                                                 | International (Spain)                                       |
| Fatima                  | 1 (11)                                    | Sensory processing disorder (noise/sounds), developmental needs (speech and understanding language, Makaton used in family), anxiety, dietary needs (plain food)                                    | Divorced, cohabiting with new partner     | East Midlands                                             | Domestic (Norfolk)                                          |

Source: Authors, 2026

Interview participants needed to meet two criteria: first, that participants must have been on at least one overnight family holiday in the last two years or be currently planning one; and second, that their family included at least one autistic child between the ages of four and 16 at the time of interview.

As Table 1 illustrates, participants displayed considerable variability in their family characteristics, including the number of autistic children in the family and their age(s), how autism impacts the child(ren), the parents' marital status, the family's home location, and whether the holiday had been (or would be) taken in the UK or abroad. The third column in Table 1 illustrates the wide range of attributes and comorbidities that had an impact on the children in this study. This is significant, as it demonstrates the non-generalisable nature and complexity of autism.

Interviewees were recruited through social media groups; all were resident in the UK or Ireland and self-selecting. The researchers acknowledge that the positionality of the participants may not always be clear from their responses. Every effort was nevertheless made to maintain an awareness of the existence and possible consequences of positionality throughout the study. As seen in Table 1, the role of gender bias is also acknowledged in this study, as interviewees were predominantly mothers, despite attempts by the researchers to recruit a more balanced representation of fathers. In this study it was the case that mothers were more frequent users of the social media groups, accepted invitations for interviews more quickly and were more motivated to give their views to researchers. The researchers were careful to recognise their own positionality: none of the authors identify as autistic, but two are fathers of sons who have been diagnosed autistic, and they have personal, lived experience of holidaymaking with their families. Ethical clearance was obtained from the university at which the lead author is based. Pseudonyms are used in all quotes below to ensure anonymity.

Participants were asked open-ended questions about their autistic children and family holiday experiences. These covered subjects including: the reactions of other holidaymakers (e.g., to the behaviour of autistic children); whether the tourism sector recognised their family's needs; how they supported their autistic child or children in making friends; and their accommodation while on holiday and whether it was 'as described'. The same set of open questions was asked of each participant, in broadly the same order, but a set of prompts was available to be employed at strategic moments to encourage participants to respond in greater length and depth. While no specific questions were asked regarding emotion work and emotional labour during the interviews, these were developed as latent constructs during the inductive-qualitative analysis (see the analysis section) which relate to the service delivery gaps asked about in the interviews and embodied in the data.

All interviews were conducted on Microsoft Teams between April and October 2022. To ensure a good measure of consistency, all interviews were led by the same researcher and attended by at least one of the other three. The resulting interviews had an average length of 59 min, amounting to 1193 min of video and audio recordings in total.

### 3.2. Data analysis

The interview data was analysed using a grounded theory approach (Corbin & Strauss, 1990; Strauss & Corbin, 1998), a method selected for its efficacy in identifying latent constructs that facilitate an improved theoretical understanding of a phenomenon. This methodology is particularly justified in tourism research, where existing models may be limited or conflicting and the inherent complexity of tourism experiences demands a more flexible, discovery-oriented analytical process (Matteucci & Gnoth, 2017). By focusing on these latent structures, researchers gain deeper insights into the underlying drivers and perceptions shaping tourism behaviours and patterns – contributions essential for advancing the discipline. Ultimately, as highlighted by McKercher (2026), Corbin and Strauss' latent analysis complements the inductive approach by enabling a rigorous exploration of implicit meanings,

thereby supporting the development of robust, data-driven insights. The inductive approach in the present study began with data familiarisation, which consisted of three of the four researchers reading the interview transcripts and watching the video recordings (Fig. 3).

Following this, a stepwise coding strategy was adopted, consisting of, first, open coding, then axial coding, then selective coding (Table 2). The final stage was then to develop and synthesise underpinning themes by means of latent analysis.

The researchers independently developed open codes (Step 1: Open Coding) for the interview transcripts. They made notes and met regularly to discuss code duplication and reduction. Subsequently, a process of making connections between codes and categories took place (Step 2: Axial Coding). Six axial codes were agreed: family relationships; autism attributes in the holiday environment; holiday experiences (neuro-typical/autistic); other people's perceptions of autistic children; service delivery gaps; and support for autistic children. During the axial coding phase, the researchers continued to meet on a weekly basis to consider the appropriateness of the axial coding system that was being developed.

The third coding phase (Step 3: Selective Coding) involved the re-analysis and re-coding of all open and axial codes within the context of: (1) family; (2) holidaymaking; and (3) the tourism sector. This enabled three underpinning themes to be developed, which were identified as: (1) service delivery failure and increased emotion work of parents (as a result of knowledge, process, people, and communication gaps, which will be further discussed in Section 4); (2) service delivery failure and increased emotion work of parents (dealing with the reactions of other holidaymakers to the behaviour of an autistic child); and (3) service delivery failure, emotion work, and emotional labour.

In the final writing-up stage, care was taken to ensure that themes and subthemes were cross-referenced with the literature, carefully defined, and illustrated with verbatim quotes from the participants. Decrop's (2004) criteria for trustworthiness (credibility, transferability, dependability, and confirmability) were applied throughout all stages of data collection and analysis.

## 4. Findings and discussion

Four types of service delivery gap were identified through the coding process and will be used to illustrate parents' perceptions of the complexities of managing not only their own emotions, but also those of their autistic child as well as other holidaymakers.

- **Knowledge gaps** occur when members of staff do not have the necessary knowledge or skills to handle customer inquiries or provide effective service.
- **Process gaps** occur when there are inefficiencies or flaws in the delivery process.
- **People gaps** happen when staff are not motivated, well-trained, or empowered to deliver excellent customer service.
- **Communication gaps** concern a mismatch between what is communicated to the customer and what is actually delivered.

The rest of this section sets out the findings of the inductive-qualitative analysis, beginning in subsection 4.1 with an exploration of the incidence of service delivery gaps and the consequences of such for parents' emotion work. Subsection 4.2 considers parents' additional emotion work in dealing with the reactions of other holidaymakers to their autistic child's behaviour in such situations. Subsection 4.3 then analyses parents' perceptions of the emotional-support role of tourism staff and proposes that an insufficient use of emotional labour could be viewed as a further service delivery gap.

### 4.1. Types of service delivery failure and increased emotion work of parents

Parents perceived a wide range of service delivery gaps depending on

## Qualitative inductive latent approach

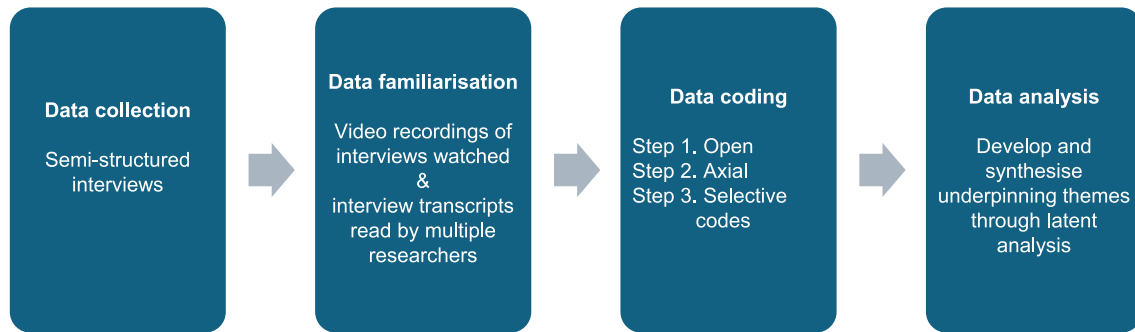


Fig. 3. Research process  
Following: Strauss & Corbin, 1998; Corbin & Strauss, 1990.

their autistic child's specific needs. For example, Charlotte's son only eats certain foods. The service provider failed to anticipate the needs of the family as a whole (service delivery *knowledge gap*), and this had an emotional impact which was very stressful for them.

If we had to look around for a restaurant where, and this was one of the problems we had at Disney. My daughter is pizza, pasta-based, [my son] is very much chips and burgers-based, and there wasn't a single restaurant in Disney that sold both [...] It was "either, or!" So, if they sold pizza or pasta, they didn't sell chips and burgers [...] My daughter won't eat chips, either, you know, so it's like trying to find somewhere that suits everyone and that for us is our worst nightmare. So, yeah, it's kind of finding that balance, I think, with food provision, because obviously that's an essential part of daily life, you've got to eat and, you know, it can be so stressful. (Charlotte)

For both Gwen and Emily, particular challenges arose with their family's accommodation. Gwen described an incident in which she had asked the accommodation provider for photographs of the room before booking. However, when the family arrived at the accommodation, the room was not as described. This represents both a *communication gap* – a mismatch between what was communicated and what was delivered – and a *knowledge gap*, in which an employee had failed to account for an autistic child's difficulty in adapting to change. This was a disaster for her autistic daughter, who was unable to cope with the change, and also had a significant emotional effect on Gwen.

She did send me a few photos because I asked for photographs of the bedrooms so that [my daughter] could choose her bedroom before we went because we'd never been to Blackpool before so it was all so new and she sent me a photograph of one room and it was a Dr Seuss-themed caravan and [my daughter] loves Dr Seuss, so it was a thin one and I think two bed, so [my daughter] chose that room, she was happy to sleep in it on her own, she was so excited and we got there and they'd changed it to football. You can imagine, can't you? Yeah, so yeah it was horrendous. And it was just little bits, and I did feedback, I said "look, you cannot with an autistic family tell them they are getting this and give them something completely different." (Gwen)

Emily, on the other hand, found herself in a room that was completely unsuitable, as it had no door locks. Her autistic son tends to run away, and she was worried he might end up running off into the woods by himself. Although staff members did eventually solve the problem, Emily had to deal with the fear and worry. In Emily's case, there was a *knowledge gap*, as employees failed to comprehend the importance of locks as a safety measure for an autistic child, and a *people gap*, as there was a lack of well-trained staff who were empowered to deliver excellent service.

We stayed at a place in Shorefield, and it was all lovely and it was all in like the country and there was these woods nearby and we're like, "oh my God, there's no lock on the door" [...] like not that it, that he could reach it. And I'm oh my God, can you imagine if he gets out here? So, we had to ask them to come and put a lock on the door and they were like, "we can't because of fire." So, we're, like, "we need a lock on the door!" So, in the end they put one on and they said they'd take it off when we leave. But it was just a nightmare. (Emily)

For Megan, it was a situation at the airport that she struggled with. She was particularly upset that staff catered only for physical disabilities. This reveals both a *process gap* in inclusive customer support, and a *knowledge gap* (a lack of awareness and understanding) regarding neurodivergent people and those with other invisible disabilities. This combination of gaps meant that in the end it was down to Megan to deal with the issue, which she found "quite difficult" and emotionally challenging.

One of the things that she found quite stressing was seeing the suitcases on the little baggage trollies, like outside on the runway. She was just like [...] we used to have a red suitcase, so, of course, it stuck out like a sore thumb: "that's our suitcase and it's going on that plane that's going to France." "Well, someone else has got a red suitcase." "Oh, but that's our suitcase and that's going on that plane to America." "No, no, no, that's not our red suitcase" [...] and, in fact, it was quite difficult. I had to take her away from the window, you know, but those kind of things, I think, from the airport would be really helpful, or the airline. But there doesn't seem to be any way of actually telling them, you know, that you're autistic, because they're only interested in wheelchairs. (Megan)

Fatima's son struggles with queuing and loud noises, which can be particularly challenging on holiday and when visiting attractions. She remembered a day at Legoland with her son during which she was not made aware that she could have booked a fast-track pass if she had done so in advance. This example demonstrates a *knowledge gap*, a *process gap*, and a *people gap*. As a result, her son became dysregulated and had several meltdowns throughout the day. It is not a happy, positive holiday memory for her.

He also doesn't like queues and loud noises, and you know standing still and kind of, you know [...] So when we went to Legoland for example that was, that was a really big time for [my son]. It was the first time we'd ever stayed away from home and standing in the queue, the loud noises, the people and all of these kind of things set him off. I wasn't aware you could get a fast-track pass for him and then realised that other people had got them when we were there and now we've booked this holiday and we can't get that and you know [...] Two days of [my son] being in a meltdown, I mean I could show you pictures [...] It just, it wasn't a nice experience at all. (Fatima)

**Table 2**  
Coding and analysis.

| Step 1 - Open codes                                                                                                                                                                                                                                                                                                                                                                                                                                | Step 2 - Axial codes                           | Step 3 - Selective codes | Underpinning themes                                                                                                                  |                                                                                                                                                                |                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| Challenging behaviour<br>Coping with loss<br>Feel guilty<br>Parental responsibilities<br>Sibling relationships                                                                                                                                                                                                                                                                                                                                     | Family relationships                           | Family context           | Service delivery failure<br>- And increased emotion work of parents (as a result of knowledge, process, people, communication gaps). | Service delivery failure<br>- And increased emotion work of parents (dealing with the reactions of other holiday makers to the behaviour of an autistic child) | Service delivery failure<br>- Emotion work and emotional labour |
| Calm environment<br>Don't fit in<br>Noise<br>Safety<br>Safety literature<br>Specialist needs<br>Conflict                                                                                                                                                                                                                                                                                                                                           | Autism attributes in the holiday environment   | Holidaymaking context    |                                                                                                                                      |                                                                                                                                                                |                                                                 |
| Benefits of holidays<br>Financial cost of holidays<br>Not the same holiday experience as neurotypicals                                                                                                                                                                                                                                                                                                                                             | Holiday experiences (neurotypical/ autistic)   |                          |                                                                                                                                      |                                                                                                                                                                |                                                                 |
| Bad parent, children misbehaving<br>Limited awareness of autism<br>Autism awareness positive                                                                                                                                                                                                                                                                                                                                                       | Other peoples perceptions of autistic children |                          |                                                                                                                                      |                                                                                                                                                                |                                                                 |
| Staff not trained<br>Lack of awareness from staff<br>Only physical disabilities considered<br>Queues, noise, too many people and no fast track tickets available<br>Food unsuitable<br>Room not as described (e.g. no locks, no black out curtains)<br>No information available in advance (e.g. airport)<br>cannot use the kids club<br>Sunflower-lanyards not recognised<br>play park/ playground not suitable<br>no quiet spaces or quiet times | Service delivery gaps                          | Tourism sector context   |                                                                                                                                      |                                                                                                                                                                |                                                                 |
| Autism friendly<br>Discrimination or lack of equity<br>Good examples of tourism sector support<br>Human rights<br>Lack of flexibility to take holidays (schools)<br>Lack of support from Government<br>Lack of support from tourism sector<br>Accommodation<br>Tourism sector<br>Travel or transport (barriers)<br>Learning experience<br>Off-peak holidays<br>Under-represented                                                                   | Support for autistic children                  |                          |                                                                                                                                      |                                                                                                                                                                |                                                                 |

Source: Authors, 2026

Fatima did go on, however, to talk about a positive example: a staff member had used Makaton (a language programme that uses symbols, signs, and speech to enable people to communicate) to talk with her son. However, when staff members do not understand the importance of this type of communication (*knowledge* and *people gap*), she becomes very upset and has to suppress her negative emotions in order to conform to societal feeling rules and avoid confrontation (Hochschild, 1983). This results in an emotional dissonance between what she feels and what she displays.

Sometimes I'll use Makaton with [my son], so you know I think there was one person at Center Parcs that actually did use it and that was kind of a shock to me. Because that's another thing. I think people should be taught, just in general across the board. Makaton and sign language should be taught just in general for disabled people, from school age I believe. You should be taught it alongside English, so it's not a barrier to communication. It is nice, you know, when people [...] They'll see me signing and will use that signing because that's something I use when he is in a complete meltdown to kind of help him calm down. But you know, some people will not entertain any of that kind of idea and they will kind of like whisper to other staff members, and [...] it sets me off – I want to have an argument with people. (Fatima)

The first type of emotion work therefore arises for parents when they experience service delivery gaps (*knowledge, process, people, or communication gaps*) during their family holiday, which have an emotional impact either upon the child or the parent, or indeed both. Depending on

their autistic child's attributes and specific challenges, the nature of these experiences is different for every parent. The impact of these experiences on parents' emotions is, however, heightened in the holiday context and requires parents to manage both their child's emotions and their own.

#### 4.2. Service delivery failure and increased emotion work of parents when dealing with the reactions of other holidaymakers

A further consequence of service delivery incidents is that parents often need to deal with the reactions of other holidaymakers to their autistic child's behaviour in such challenging situations. This could involve the child stimming (i.e., exhibiting stereotypical behaviours such as hand flapping or sensory seeking or avoidance) or having a meltdown. One topic that arose frequently was the extent to which, in order to avoid 'making a scene', parents must suppress their own emotional responses to those giving them condemning looks, muttering, displaying disapproving body language, or even chiding the child. This may exacerbate the situation, requiring an even greater amount of emotion work on the part of the parents. One parent expressed this as follows: "it can be quite embarrassing because of other people's reactions. I've had to bite my tongue on a few occasions" (Peter). At least a certain amount of surface acting (Hochschild, 1983) is thus required from parents of autistic children in these situations.

Parents must also frequently regulate their child's behaviour to try to appease disapproving onlookers, even when they do not consider this necessary themselves. According to Kwok and Kwok (2020), both the

frequency and intensity of emotion management are much higher for parents of autistic children even in less challenging circumstances than these. The added stress such parents experience because of their child's challenging behaviour, and the limited acceptance and support they receive from others, are also well researched (Fletcher et al., 2012; Kwok & Kwok, 2020). When the complex holiday environment and issues with noise, queues, and other stimuli are added to these challenges, emotion work can become even more frequent and intense. Emily discussed this issue in the context of her son not being able to use the soft play area in a busy restaurant (*process gap*), and the effort it took to suppress her own emotions when facing negative reactions from others. For Emily, this involved several complex layers of emotion work: managing her own emotions, managing the autistic child's emotions, as well as managing other holidaymakers' emotions. This provides new insights into the deeper emotional understanding of her child and the amount of deep acting she had to undertake. Neurotypical people and tourism providers would not be aware of these additional emotional layers, making any surface or deep acting to support the autistic child much more difficult.

And then we went to Fun Leisure, didn't we, when we went camping. We went to try and go into a restaurant. They had this big soft play in the middle of the stairs, the stairs went round, there's a soft play going up through the middle, and we couldn't let him go in there because there's too many exits out of the soft play. And so we were waiting to go for a meal, and people behind us going "oh, some people's children don't know how to behave" and you're just standing there like, you want the ground to swallow you up but you're trying to calm him down and you just get all these comments and people just come over and just walk over him when he's on the floor, all sorts of things [...] because they don't understand. (Emily)

For Morag, the problem came down to a lack of understanding both from staff and from other holidaymakers. She had to suppress her emotions when, while queuing at airport security, her son got upset when his teddy had to be swabbed for drugs. This experience involved dealing not only with airport security staff, who had limited understanding that this was a difficult situation for the autistic child (representing a *knowledge gap*), but also another passenger's comment and the sense of being judged. Morag felt she had no choice but to engage in emotion work at the time in order to avoid more emotion work later on. Parents of autistic children frequently have to anticipate their child's emotional outbursts and defuse such situations through deep acting, managing both their own and their child's emotions before the situation becomes more challenging.

They wanted to swab the teddy for drugs because he wouldn't go through the scanner, and he was getting quite upset, but he was nowhere near what I would call a full-blown meltdown. I didn't hear it, luckily, but my husband overheard this passenger in the queue saying, "I'd give him a good slap if that was my son." Yeah, it made me very cross, and I was glad I hadn't heard that. [...] I wish I could have said to her, "Well actually had we slapped him you'd have seen a full-on meltdown and you wouldn't want to witness that", but it's that sort of attitude isn't it, and you think, "don't judge me, you have no idea what it's like." (Morag)

These findings therefore confirm Kwok and Kwok's (2020) argument that stigma and lack of understanding of autism add to the complexity for parents when managing the emotions of all involved. An autistic child's meltdown in a public space can also lead to feelings of shame and embarrassment for parents, as they are perceived as incompetent (Ryan, 2010). This was the case in both of the above examples, and is more pronounced in the holidaymaking context.

Joanna recalled a situation in which her autistic son was on a playground slide during their last family holiday and an incident with another child occurred. With no staff member supervising or available to provide help (representing a *process gap*), she had to manage not only her own emotions but also those of another holidaymaker.

And he was behind a little girl, and he didn't push her, I saw him. I watched him, and the little girl came down and she came down, she must have been about five and she came down funny and her father came over to me and he says, "your son's just pushed my little girl." I said "no, he didn't." [He said] "Yes he did; I saw him!" and I said "well, okay, I apologise, he has got autism." And he blatantly said to me, "don't blame your child's behaviour on his health." I went "pardon?" and he went "don't you use that as an excuse", and instantly, red rag to a bull, I'm thinking no you don't say that. Do you honestly think I'm going to go round telling everybody my son's got a disability just to get away with things? I don't think so, you know? As much as I don't mind saying he is disabled, or saying he's autistic, I shouldn't have to. (Joanna)

Joanna tried to evoke more positive emotions in the other holidaymaker and defuse the situation through offering them a chance to show more empathy towards her autistic child. However, they still displayed insufficient understanding. She then had to suppress her anger and negative emotions to avoid the situation escalating. This kind of scenario poses an additional emotional challenge for parents in their efforts to abide by societal feeling rules, and results in an emotional dissonance between what they feel and what they display (Hochschild, 1983).

Joanna's experience further highlights the gap in understanding autism between parents of autistic children and parents of neurotypical children, and the former group's capacity to perform deep acting to support the autistic child. It is apparent that she was expected to follow the feeling rules of the situation: to feel guilty and apologise. These feeling rules are representative of society's expectations, and their observance is necessary in order to conform to the social order (Hochschild, 1983). The way she reported this, in an emotive stream of consciousness, illustrates how distressing the episode was for her. The intense and complex holiday environment exacerbates these challenges for parents, meaning that the holiday fails to provide a relaxing and enjoyable experience for them. The findings suggest that navigating these complex holiday situations often becomes the parents' sole responsibility.

#### 4.3. Service delivery failure, emotion work, and emotional labour

The literature review found no studies that explicitly examined the differences between emotion work and emotional labour in the service delivery failure context. One of this study's novel contributions is to propose that insufficient emotional labour on the part of tourism service staff can increase the amount of emotion work parents of autistic children need to undertake. This suggests, therefore, that parents' perceptions of tourism staff not providing sufficient emotional labour support may represent another service delivery gap.

Bronwen and Isla felt they were solely responsible for managing all aspects of their holiday experience, including everybody's emotions, with minimal support from tourism providers.

The [Sunflower] Lanyard, yeah. And the problem was like Dublin airport, as over in the UK as well at the moment, has been experiencing just crazy problems with flight cancellations. We decided not to check in any luggage just to avoid all that. I got the [Sunflower] Lanyard, we applied for the sensory room, we applied for assistance, fast-track, everything we could get, we applied. And on the day, it was a disaster. It was too busy, I'm actually so surprised he didn't have a meltdown, because I nearly had a meltdown myself, it was so stressful. (Bronwen)

I'm the one who normally tries to deal with [my son] if he's having a meltdown or something like that or trying to include him in something. So, yeah, I've never had anyone, like any staff or anything like that, come up to me and try to help me or anything like that. (Isla)

These are both instances of *communication gaps*. The Sunflower Lanyard mentioned by Bronwen is used widely in the UK and Ireland as a

recognised symbol for autistic people and others with hidden disabilities. The intention of the scheme is for staff to recognise the lanyards and take special care with those customers, including building trust and empathy. This would therefore be expected to include rendering emotional labour (Mei, 2023). Indeed, some studies have recognised this underlying relationship between emotion work and emotional labour (e.g. Leighton, 2012). It should be noted that while Bronwen and Isla did not specifically use the term ‘emotional labour’ in their interviews, Bronwen found that the practical assistance she received was insufficient to prevent her child becoming emotionally stressed, while Isla stated that she would have welcomed help from a member of staff when instances of service delivery failure occurred. Both these quotations therefore implicitly recognise the importance of emotional labour. Furthermore, some parents mentioned examples in which employees had made a positive difference, helping them to avoid an emotional outburst by their child or a ‘scene’ with other holidaymakers, or indeed to lessen the emotional burden for the parent themselves.

Anna reported having to get her autistic son out of the swimming pool so that an aqua aerobics class could take place. She described a positive example of hotel staff helping with the situation and providing a kind word that really made a difference, showing how both feeling rules in general, and the display rules set by the organisation (Hochschild, 1983) can impact how employees approach emotional situations, and the amount of surface and deep acting they are required to perform. Nevertheless, she still had to manage her autistic child’s emotions, take into consideration other holidaymakers and their reactions, and manage her own emotions triggered by the situation.

Everyone had to get out of the pool because they wanted to do an aqua aerobic session in there, and [my son] didn’t listen anyway, he wasn’t going to listen to anyone: he’s in the water. And I have to admit, I was a bit, “I’m not getting him out of the pool, there is no way I am getting him out of that pool, it’s just not worth it.” So that was one incident which the hotel staff actually were really good and they were really, “Oh God, we’re really sorry, we didn’t realise, [we can] absolutely work around it.” But yes, everyone else was, “oh my God what’s that child doing in the pool, it’s disgusting”, you know, and I think that affected his sister more than me [...] I’m quite thick skinned, shall we say when it comes to that, I’m very lucky. (Anna)

This incident, representing a *people gap*, demonstrates the distinction between Anna’s perception of the presence of emotional labour, in this case empathy being shown by the staff member, and her own emotion work. This reduced the amount of emotion work she was required to perform herself, although she still had to deal with the responses of other pool users, thereby illustrating why emotional labour and emotion work are terms that should not be used synonymously.

Regarding support from staff, parents would like more understanding and discretion when dealing with challenging situations. For Claire, it was a challenge to manage her own emotions despite staff helping the family at border control with a degree of empathy and understanding. What she had hoped for, however, was that staff members would help to ease the emotional burden of the situation.

We got to border control when we came back from Paris and there was a massive queue, and we’d had a long day, and [my partner] said, “I think he’s just had enough,” and he was just like, “Look my son’s disabled, is there a priority queue?” (...) and this lady was like, “Well what’s wrong with him, what disability has he got? Let me go and speak to my supervisor,” and obviously all those things make me absolutely (...) that’s all my uncomfortable buttons being pushed, I’m absolutely mortified, I’m just like, “let’s just get in the queue, I don’t care, we don’t need to go anywhere else,” and then you kind of get ushered, so I think it’s also the discretion as well, like discretion and being discreet, you know? It’s like I don’t want special treatment and I don’t want anybody else to be aware of that. But I also need that discretion sometimes, to be like, “guys, why don’t you just take a step

this way and come this way and we’ll look after you”, kind of thing. (Claire)

This incident, representing a *people gap*, highlights how Claire had to suppress uncomfortable emotions. She felt uncertain about whose responsibility it was to manage the emotional dimensions of the situation, and whether in this case it lay with the supervisor, Claire herself, or a combination of the two.

## 5. Conclusions

### 5.1. Theoretical implications

Previous research on service delivery failure in the context of holidaymaking by families with autistic children has not sufficiently addressed the role of emotion work. This research has identified: (1) different types of service delivery failure (knowledge, process, people, and communication gaps) and the increased emotion work parents have to perform as a result of this; (2) service delivery failure and increased emotion work for parents when it comes to dealing with the reactions of other holidaymakers to the behaviour of an autistic child; and (3) a potential inter-connection between emotion work and emotional labour in the context of service delivery failure in tourism. The inductive approach applied here was used to build theory highlighting the need to understand the interaction between emotion work and emotional labour in holiday service delivery to autistic children. Subject to future empirical validation, this study offers a stepping stone to a greater understanding of these inter-related and inseparable phenomena. As such, this paper is an initial response to Koc’s (2019) call to integrate the concept of emotional labour into the field of service delivery failure. It draws on a latent analysis of parents’ perceptions of emotion work and service gaps to acknowledge the role of emotional labour in these. This paper therefore points to a novel way of understanding service delivery gaps and the role of parents’ emotion work within the context of family holidaymaking with autistic children.

Furthermore, previous studies have been concerned almost exclusively with neurotypical populations, overlooking the large and growing number of neurodivergent customers now participating in tourism. This paper responds by presenting a novel exploration of the main issues related to service delivery failure in this context, shedding new light on the emotional impact of such failures upon parents of autistic children. It identifies four different types of service delivery gap: knowledge gaps, process gaps, people gaps, and communication gaps. An inductive-qualitative analysis was used to identify where and when these different gaps arise within the highly complex context of family holidaymaking.

The study also highlights the role of parents and the heightened amount of emotion work they may need to perform when perceived service delivery failures occur. Previous research into emotion work has primarily taken place in educational settings (Tarantula & Berkovich, 2025) and the home environment (Fielding-Singh & Cooper, 2024). Developing the concept further by extending it into a tourism setting is thus novel and offers a different perspective from the existing studies on tourism and autism.

Parents’ emotion work includes regulating emotions such as anger, frustration, anxiety, unease, and embarrassment. This is also required when service delivery failures result in other holidaymakers responding negatively to an incident, and when members of staff within the tourism system are perceived by parents as failing to provide sufficient and timely emotional labour. The findings further demonstrate that the emotion work of parents of autistic children is shaped by ‘feeling rules’ (Hochschild, 1983), which often differ from those that apply to neurotypical people and which must be followed to conform to the social order.

From a theoretical perspective, this study thus begins to move thinking on neurodivergence and tourism towards the deeper level of

theorisation achieved in the broader autism research literature within the social and health sciences. This paper applies thinking from autism research to the wider services management literature, which has its psychological foundations in theories of consumer behaviour. To date, the largely quantitative nature of reported findings and the near saturation of existing thinking on tourism and autism suggest that this subject is ripe for further qualitative approaches, such as that presented in this paper.

## 5.2. Management implications

This study identifies that there is an ambiguous space that lacks clear boundaries between where parents' emotion work should end and where the emotional labour of tourism staff should begin when service delivery gaps occur. While theoretical development remains a key driver of academic research journal articles, achieving impactful outcomes from research studies such as this is also key to building a knowledge base that can support change in terms of autism and tourism. This study's focus on service quality – which is highly valued by many tourism businesses – provides a key hook to help promote change in organisational behaviour to better accommodate more diverse tourism audiences. In the case of public or charitable bodies operating tourism businesses, extending their reach to broader visitor groups is often a part of their mission, so this work may find a receptive audience among them. In addition, building a connection with autistic children in the selection of destination and visitor experiences may well have a strong appeal for tourism organisations, as these children will become the tourists of tomorrow if suitable tourism offerings are available.

Interestingly, for groups of schoolchildren, many visitor attractions provide dedicated educational staff who work with the group leader to offer support. In the case of some special groups, such as people living with dementia, prebooked visits or tailored programmes are designed to attract these under-represented groups using experience design models (e.g., creating memory boxes, artefact handling, or self-guided trails). While these developments are starting to permeate many tourism providers' thinking, they often require proof-of-concept road testing by providers as well as advisory groups from the target audience to co-design the experience. However, a broader application of this concept to children with autism seems to be lagging behind. This presents an opportunity for co-design and co-production through collaborations between parents and tourism businesses to better design autism-friendly experiences. To ease the emotional load on parents, this study has identified the following specific management implications (Fig. 4).

First, with regard to knowledge gaps, it is important to raise awareness and provide staff with basic knowledge, drawing on practices from organisations that have pioneered programmes for other under-represented groups. This should apply to all staff, not just those on the front line or those ambassadors who are already passionate about the issue. Some professional groups have created sector-wide resources to support management and board-level commitment to accessibility, making a powerful case for change (Klug et al., 2017), and organisations like the [National Autism Society & Visit England, 2018](#) have produced accessible guides. There are further emerging examples in the tourism sector, with some organisations beginning to provide neurodiversity training for their staff (e.g., Emirates), although this is still in its infancy. The development of an autism code of practice for the tourism sector would be an important step, provided it is actionable and concise. Such a code could include specific display rules that staff would be expected to follow when supporting families with autistic children, which is one of the most effective means of instilling a culture of care and emotional support.

Second, staff must be able to apply their awareness and training in practical contexts. This should include processes such as identifying neurodivergent customers at the earliest possible stage, for example, by looking for any identification symbols, such as the popular 'Sunflower Lanyard' (used in the UK and Ireland as recognition of the wearer having

hidden disabilities such as autism), or knowing what an autism identification card looks like. Staff should also be trained in how best to approach such individuals, along with their parents or carers, to offer any help or advice that may be required.

Third, with regard to people gaps, staff members must be empowered to apply discretion with sensitivity. This means being given the freedom to act in a discreet manner that does not cause embarrassment or attract unwanted attention to family members. Employees should be made to feel empowered to apply discretion to bend the rules if necessary. Developing a clear set of display rules, for example, could help empower airport staff to apply discretion when inviting families with autistic children to wait in a quiet area rather than stand in a queue. Similarly, restaurant staff should be permitted to allow certain menu variations when serving autistic guests.

Fourth, in relation to communication, it is important to use a variety of methods to ensure that families know what to expect in terms of service delivery at every interactive touchpoint in the family holiday journey. This helps ensure that families with autistic children receive the quality of service they require and expect, including additional practical and emotional support. To achieve this, post-holiday feedback should be actively sought, evaluated, and responded to accordingly. This means that the emotional support needed from a tourism management perspective can be carefully co-created and planned collaboratively with families.

## 5.3. Limitations and future research

A limitation of this study is that it was not possible to capture the voices of children directly. While it is acknowledged that their voices should be heard, and all respondents were invited and encouraged to be interviewed as a family, none of the interviewees had their children with them during the interviews. When asked about this, the most common reply was that they felt that they would not be able to focus on the interview if their children were present and had therefore chosen a time when their children were not at home. This observation speaks volumes about the difficulties involved in managing families with autistic children as well as the difficulties of conducting research in a dyadic format.

This study did not include staff members' first-hand experiences of delivering emotional labour. Further studies should address this gap by investigating why the absence of employees' emotional labour may trigger parents' emotion work. They should also explore staff members' experiences of service gaps in this context, as well as the physical, cognitive, and emotional labour they perform. Further theoretical underpinnings of the complex processes, practices, and interconnectedness of physical, cognitive, and emotion work and emotional labour could thereby be developed. Future knowledge contributions in these areas could provide a catalyst for a deeper understanding of recovery from service delivery failure for autistic tourists.

It should also be acknowledged that this study focused solely on families with autistic children. Future research could explore these challenges in the context of autistic adults and families with children with other neurodivergent conditions. Research into family dynamics and gender roles – including autistic children with neurotypical siblings, autistic parents with autistic children, or neurotypical children with autistic parents – would also contribute to creating a more inclusive picture.

Lastly, one often-overlooked direction for further development is Bitner et al.'s (2008) concept of service blueprinting, a mapping process that displays the entire service delivery process and recognises its key components: the customer's journey, internal operations (i.e., people, processes, and infrastructure), and the overall systems which exist (or do not exist) to enhance the visitor experience. As a model, it provides a framework upon which further theoretical advances could be built in order to understand how complex service systems can be better designed for specific users. In challenging contexts such as autism and tourism, combining the theoretical literature on autistic children's and their



**Fig. 4.** Best practice in staff training for emotional labour to support families with autistic children on holiday (Authors, 2026).

parents' encounters in time and space with the services delivered can help to advance our understanding of how these encounters are perceived. Through examining the psychological perception and cognition of such encounters and identifying how to mitigate negative ones, service design can substantially benefit from this blueprinting process. This approach could include deeper theoretical research on the sensory encounters of autistic children (i.e., sight, sound, smell, taste, and touch) (Zomerdijsk & Voss, 2010) to develop a more relaxing 'sense of place' that enhances tourist experiences (Gao et al., 2022). Collaborations between researchers and tourism organisations at several visitor sites would help to advance knowledge and put these theoretical developments to practical use. Through employing robust methodologies, these practices could be adopted more widely to achieve transformative change in visitor provision for autistic children (and adults) and those travelling with them.

#### Research impact statement

This study provides a new lens for understanding and addressing service delivery failure for families with autistic children in the tourism industry. By examining four specific service delivery gaps – knowledge, process, people, and communication gaps – the research uncovers the significant emotion work imposed on parents of autistic children when service fails. It begins to move thinking on neurodivergence and tourism nearer towards the deeper theorisation that the large-scale autism research literature within social and health science fields has achieved.

The paper makes a key contribution by distinguishing between the emotion work of parents and the emotional labour of staff, offering a path to systemic change by suggesting that responsibility for the emotional load encountered due to service delivery failure should shift from families to the tourism system.

The study's management implications provide suggestions for

creating a more inclusive and supportive environment through:

- Developing neurodiversity training and an industry-wide neurodiversity code of practice.
- Empowering staff to use discretion and bend rules to accommodate families.
- Improving communication and feedback loops to proactively manage emotional support.

#### CRediT authorship contribution statement

**Allan Jepson:** Writing – review & editing, Writing – original draft, Methodology, Investigation, Formal analysis, Data curation, Conceptualization. **Raphaella Stadler:** Writing – review & editing, Writing – original draft, Formal analysis, Data curation. **Brian Garrod:** Writing – review & editing, Writing – original draft, Investigation, Formal analysis, Data curation, Conceptualization. **Stephen Page:** Writing – review & editing, Validation.

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