

Exploring the suitability of Egypt as a heritage tourism destination for tourists with dementia: Community awareness

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Abstract:

Cultural heritage tourism for dementia helps heritage sites and the local community culturally, socially and economically. This economic potential, in turn, is a significant motivator for local communities to cherish and conserve heritage. However, the development potential and good influence of cultural tourism are not taken for granted. Good management is critical to accomplishing cultural tourism objectives while minimizing potential dangers. To survive, any archeological site must be cared for, preserved, and maintained. In many parts of the world, particularly developing countries, maintaining cultural heritage and devoting resources for this purpose is considered as a luxury and hence not a priority, and leveraging tourism to produce revenue could be a solution to this funding gap. When a site is closed to the public and visitors, it tends to degrade more. A facility that generates no money is less likely to obtain funds for maintenance, preservation, and conservation efforts. Furthermore, because closed facilities are frequently abandoned, they are more susceptible to looting. Perhaps more importantly, as a result of this desertion, the local community may forget the value and significance of the location. As a result, boosting knowledge of dementia's tourism at heritage sites has a significant positive impact.

Keywords: heritage sites, dementia tourism, heritage tourism, local communities, awareness.

Introduction

Tourism not only provides a source of revenue for heritage sites, but it may also be used to justify the preservation of a site in the first place, in order to maintain it appealing to tourists. When a site is closed to the public and visitors, it is more likely to degrade. A facility that generates no money is less likely to obtain funds for maintenance, preservation, and conservation efforts. Additionally, because closed sites are frequently abandoned, they are more susceptible to be robbed. Perhaps more importantly, as a result of this abandonment, the local population may forget the value and significance of the site (Vafadari, 2008). Also, In the 2018 Alzheimer's Disease Facts and Figures

special report [1] – hereafter “the Report” explaining how the new guidelines in 2012 for measuring dementia differ from the old 1984 guidelines. In 1984, diagnostic criteria was based on a doctor’s clinical judgment of the cause of symptoms relying on reports from the individual, family members and friends, results of cognitive tests and general neurological assessments. The revised first guideline keep the same steps for diagnosis as before, but now add a requirement for a biomarker test. A biomarker is a biological factor that can be used to detect the presence of any disease. For Alzheimer’s disease (AD), the largest category of those classed with dementia. However, if one uses a behavioral definition of dementia symptoms instead of a biological one, this negative conclusion is no longer applicable. For as the Report acknowledges, there are now many studies that show that exercise does have a positive effect on overall cognitive function and the rate of cognitive decline. The Report states that non-pharmacologic interventions are “beneficial” to people with AD. The defining characteristic of dementia is that it is a cognitive disease that interferes with the activities of daily living. If a person’s activities of daily living can continue and improve, and in this way benefits are provided, then interventions can be said to exist, even if the brain pathology is unaltered (Brent, 2019). Taking into account the conditions of patients with dementia, it is possible to practice all activities, including heritage tourism, for tourists with dementia.

Exploring novel methods to help people with dementia is essential and both medical practitioners and social scientists could each contribute to the development of these methods, as both academics and practitioners are keen to identify solutions to aging-related issues. Travelling offers one possible way to improve well-being (Wen et al, 2022).

Tourism’s potential is not limited to generating money for the preservation and conservation of archaeological sites. The economic value of a heritage site can also create a context conducive to local cultural education. For example, as part of a visitor attraction policy, presentations and interpretation of the site are often prepared, and books, maps, guides and brochures are published. These same resources can also be used to educate local people. Remove the economic potential of a cultural site and these kinds of educational tools, or the funding to create them, would not exist for local communities. Furthermore, if regional or national policymakers perceive the economic value of cultural sites, they are more likely to invest in their conservation and preservation, as well as their presentation

and interpretation. This change in attitude towards cultural heritage and resource management comes about once the potential economic value is understood. Sustainable cultural tourism can also play an important role in economic development. There is an increasing awareness of the importance of culture and its role in development agendas and strategies. Tourism is the main component in creating economic benefits out of culture. Studies have shown that tourism has a direct role in alleviating poverty in developing countries (Ashley et al. 2001).

However, dementia does not only have negative outcomes for those who are diagnosed with it but also for their caregivers. It is estimated that about 73% of people with dementia are living at home and are cared for by a family member. In 57% of the cases, retired spouses function as primary caregivers (Wimo, Winblad, & Jönsson, 2007). So, In the case of cultural tourism, the issue is to “exploit wisely” the heritage for tourist use. In the variety of issues, methods, recommendations, and caveats generated by such discussion, two themes emerge as particularly productive for practical policy developments: the compatibility between the development of tourism industry and the preservation of the heritage “out of the market”: a) the compatibility between the development of tourism industry and the preservation of the heritage “out of the market”; b) the existing and potential synergies and tensions between the “global” tourism system and the “local” socio-economic development (Russo and van der Borg, 2002) .

The United Nations World Tourism Organization (2018) provides both narrow and broad definitions for cultural tourism. Narrowly defined, cultural tourism refers to tourism activities individuals engage in for specific cultural motivations, such as amusement park, performing arts or cultural travels, carnivals or ancient ruins. In broad terms, cultural tourism refers to any tourism-related activity motivated by the human need for diversity, new knowledge and experiences, an activity that enriches the individual’s appreciation and understanding of cultures (Hui-Chen, 2018). Both the available tourist services and the attractiveness of the destination positively affect the prospects for tourism; this showed that the economic and social interests of tourism are not in conflict but can be mutually beneficial. At present, there are two key perspectives in the research regarding tourism projects. First, studies focusing on the customer perception of destinations have been conducted to assess the factors influencing tourist perceptions. Factor analysis was employed to verify the impact of tourists’ perceived state in different aspects of their travel behavior by building structural

equations, using GIS and other methods to analyze the rational development planning of resources to prepare a culturally important historical town for creating dementia-friendly Tourist destinations. Second, studies of the factors influencing tourist behavior and their subjective perceptions demonstrated that positive views of local culture by tourists had a positive impact on tourism behavior. A thorough understanding of what motivates tourists to select their destinations could help in offering targeted products and services. As a result, tourists will have more positive experiences and fewer negative feelings, which in turn makes them more likely to ignore negative information. With the advent of the “two micro” life era in the world, microblogs and WeChat (similar to Facebook and Twitter) have become popular means by which many people obtain information regarding tourist destinations. Based on the rise and development of the internet, the social network relationship between decision makers cannot be ignored when looking for solutions to complex problems. Therefore, to construct a weighted directed network considering the trust relationship between decision makers to improve the evaluation of potential projects in tourism (Zhou et al, 2022).F16

heritage attractions increase local value-added through expanding tourist’s expenditures (entrance fees, tours, local transport and merchandising), diversification of the tourism experience beyond wildlife, sun, sea and sand, tourism product differentiation, as well as spreading tourism geographically beyond the hotel and the beach. It is argued that about 70% of earnings from tourism sector emanates from heritage tourism. Besides, heritage sites play a major role in reflecting cultural heritage and they assist in ensuring that people continue to be aware of their cultural identities, history and traditions (Kisusi, 2014).

Literature review

Dementia tourism and Heritage Tourism

The 2018 Alzheimer’s Report uses the almost universal definition of dementia: “The characteristic symptoms of dementia are difficulties with memory, language, problem-solving and other cognitive skills that affect a person’s ability to perform everyday activities.” This is inherently a behavioral identification criterion for dementia. It is the performance of everyday activities that is important, not whether one has brain pathologies. The new guidelines that the Report endorses by requiring that there be a biological market in addition to a

doctor's clinical judgement can be questioned, as it is not central to what dementia inherently involves.

Dementia is a syndrome that may be caused by a number of different diseases the most prevalent of which is Alzheimer's disease. An accurate estimate of the prevalence of Alzheimer's dementia is difficult to determine as it is often difficult to identify the precise dementia subtype. However, it is generally accepted that Alzheimer's is responsible for around two thirds of all dementia diagnoses (World Health Organization, 2017) Also, according to the UNESCO definition, cultural tourism means travel concerned with experiencing cultural environments, including landscapes, the visual and performing arts, and special (local) lifestyles, values, traditions, events as well as other ways of creative and inter-cultural exchange processes (UNESCO, 2003). Cultural tourism is not merely associated with visiting monuments and sites, which is the traditional view of cultural tourism, it also includes consuming the way of life in different destinations. In other words, cultural tourism is not just about consuming cultural products of the past; it also deals with contemporary ways of life and the culture of people (Mousavi et al, 2016).

The interactions in, and value of, the largely neglected visitor economy concept within dementia studies is important as businesses and organizations that manage and promote place-based experiences and activities can enrich the lives of people with dementia, and their families and carers. This is relevant not only to visitors to a locale, but also to local residents, who also use and benefit from visitor economy businesses and services (Connell and Page, 2021).

According to Smith and Taylor (2006), culture can be understood as:

- General process of intellectual, spiritual and aesthetic development;
- a particular lifestyle, a certain typology of individuals, a period or a group;
- Practice of an intellectual but mainly artistic activity.

Regarding the conceptualization of cultural tourism, it is mandatory to underline the differences that exist between this type of tourism and the heritage tourism that is actually a typology of cultural tourism. Smith (2003) assigns to the heritage tourism the purpose of interpreting and representing the past. Timothy and Boyd (2003, p.2) consider the heritage consists in "elements of the past that society wishes to keep" Cultural tourism can be defined as a subset of tourism concerned with country or region's culture and its customs. Indeed, it generally focuses on communities who have unique customs, unique form or art or different social practices. It includes tourism in urban areas, particularly historic or large cities and their cultural facilities such as museums and theatres. Other scholars like Richards (1996:24) defined cultural heritage tourism as "travelling to

experience the places, artifacts, and activities that automatically represent the stories and people of the past and present. The term is also used by Lwoga (2011) to refer to visits to cultural heritage assets such as archeological sites, museums, places, historical buildings, famous buildings, ruins, arts, sculpture, crafts, galleries, festivals, events, music and dance, folk arts, theatre, ethnic cultures/communities, churches, cathedrals/mosques and other things to represent people's culture. Mckertcher and du Cross (2002), use the term cultural tourism to connote the movements of persons essentially for cultural motivations such as performing arts and cultural tours, travel to festivals and other cultural events, visits to sites and monuments, travel to study folk-role or art and pilgrimages(Kisusi, 2014).

Sustainable development raises awareness about heritage protection for natural and cultural identities among indigenous nations. Sustainable development is connected to the compatibility between environmental protection and economic growth, aiming to minimize negative impact and product economic benefits (Nocca, 2017). The planning and management of sustainable efforts not only increase economic development, but also enhance the connection between the goals of regional conservation and local communities (Xu et al., 2018).

Classification of Cultural Heritage tourism Cultural heritage tourism is widely classified as natural or artificial; movable or immovable, tangible or intangible, on surface or underwater heritage assets. Tangible culture including things like buildings, monuments, landscapes, books, works of art, and artifacts, while intangible attributes (such as folklore, traditions, language, and knowledge). Natural heritage include culturally significant landscapes, and biodiversity of a group or society that are inherited from past generations, maintained in the present and bestowed for the benefit of future generations, while artificial (man-made) heritages assets (such as buildings, monuments, and ruins(Kisusi, 2014).

Cooper et al. (2008), consider manmade attractions as products of history and culture. Movable and immovable heritage resources found on land surface or underwater, aged one hundred (100) years and more, or those that due to their significance and according to Government laws and regulations on cultural heritage, have been identified and declared national monuments by the Minister responsible for cultural heritage resources .

According to the different types of heritage, it is possible to diversify the tourism programs offered to tourists with dementia and also raise awareness by explaining its importance to the tourist destination as well as to the local community and heritage sites.

There are many studies that have discussed tourists with dementia, for example:

- A study entitled: Dementia-friendly communities: challenges and strategies for achieving stakeholder involvement, by Innes et al, (2016).
- A study entitled: Developing a dementia-friendly Christchurch: Perspectives of people with dementia, by Smith et al, (2016), and there are many others.

Awareness of dementia friendly Heritage Tourism

Many neurologists have traditionally believed that dementia is a disease. This opinion is based on the following reasons: (1) Brain disease is the cause of cognitive impairment. (2) Therefore, this cognitive impairment is replaced by disease, becoming dementia, which is also considered a mental illness. On the basis that senile plaques and/or neurofibrillary tangles or other factors cause apoptosis of neurons but do not directly cause dementia. Dementia is the result or consequence of the loss of nerve cells. It has been concluded that dementia is not a disease. However, it occurs not only in Parkinson's disease, Alzheimer's disease, Huntington's disease and Pick's disease, but also in any other neurodegenerative disease, for example, ataxia. Spin cerebellar, or vascular disease. For example, Binswanger's disease, as part of the aging process, as it should. Dementia is being redefined as the differential manifestation of deterioration of brain function over time as part of aging due to cell death in the brain caused by any neurodegenerative disease such as Alzheimer's. Its prominent symptoms are language disorders (Peng, 2003).

In order to: (a) raise awareness of the importance of protecting the region's cultural resources; (b) support local culture and traditional cultural values in light of the potential for rapid social change brought about by tourism; (c) encourage a positive attitude toward and interpretation of the cross-cultural encounters that will result from increased tourism; and (d) notify local business owners, employers, and prospective employees of opportunities for investment or employment in tourism-related industries, businesses, and services, public awareness campaigns should be conducted for the general public. In addition to utilizing the media extensively, these public awareness campaigns should give interested public groups the chance to attend training sessions (Kisusi, 2014).

According to Kamel (2019) Launching several awareness campaigns after a heritage site or historic building is a matter of conclusion rather than acting after the damage has occurred. Policy makers and key actors must be taken into account in awareness programs and through different methods and tools, such as round table discussions, press conferences and meetings with experts in Tourism and Antiquities, to discuss policies and procedures that ensure the protection of heritage sites. Concerned authorities must educate students in public and private

schools about cultural heritage and its importance. As well as designing the curriculum to include topics related to heritage and tourism, such as tourism awareness, cultural heritage and heritage protection. Besides the traditional subjects already taught in schools, heritage and tourism can be taught through formal education curricula or via informal methods, such as gamified learning, which has been described in several recent literatures as an effective modern tool to increase student motivation and guide them through designing meaningful games. And game mechanics in non-gaming contexts. Likewise, schools can organize a cultural heritage open day every semester as a new way to raise students' awareness and create a heritage exhibition containing products and handicrafts manufactured by local artisans; He also urged students to participate in preparing for this day. Training courses must also be provided to college students in universities, especially tourism and hotel colleges and institutes, to participate with relevant authorities as better intellectuals in awareness campaigns. sound and light shows; In addition to heritage festivals that reflect the local rituals, customs and traditions of the local area, in addition to disseminating effective messages through media channels about the importance of heritage preservation for the tourism industry.

Study hypotheses

According to the theoretical review we concluded the following hypotheses:

-There is a community awareness of heritage tourism for tourists with dementia in Egypt.

-There is a **suitability of heritage sites in Egypt for tourists with dementia**

METHODOLOGY OF RESEARCH

Study method

The study depended on the quantitative method. The quantitative method is a scientific method that explains social phenomena through numerical data using a set of statistical methods. The quantitative method is used in measuring social phenomena to evaluate, describe, and analyze them, in addition to making predictions about this phenomenon (Muijs, 2004; Cheia, 2010).

The measurement instrument and sample technique

Study variables were measured based on previous studies to ensure data validity. The questionnaire consisted of two parts:

Part one: Sample profile: This part concerned with the demographic data of the sample, it consisted of 5 questions about age, gender, educational level, Occupation, years of experience.

Sample profile

Table (1): The response percentage

No. of distributed	No. of received	No. of valid	The response percentage
500	336	320	67.2%

The questionnaire was designed and Accordingly, the questionnaire was distributed on a random sample consisting of 500 survey forms were distributed to employees of tourism agencies class A in Egypt, and 336 questionnaires were received, of which 320 were valid, representing a response rate of about 67.2%. The questionnaire was distributed in the governorates of Cairo and El-menofia There are category A tourism companies There are travel agencies in several major cities in Menoufia Governorate. For example, in Shibin El Kom there are many travel agencies of all categories. Among the category A agencies, I mention Seif Travel Agency, which has six other branches inside Egypt as well as in Cairo, which represent a random sample of travel agencies for tourist destination in Egypt. Hence, this response rate is considered acceptable.

Table (2) shows that the numbers of males and females in tourism agencies are close in numerical terms, as the percentage of males reached 152, representing 47.5%, while females were 168, representing 52.5% of the total valid sample that was received. This percentage shows that there is no dominant gender in the Egyptian labor market in relation to for tourism agencies. Regarding age, the majority of employees were under 35 years old, 80.0%, and 11.9% were between 35 and 45 years old. Then the percentage of those between the ages of 46 and 55 years reached 6.9%. While the oldest, 1.2%, are over 55 years of age, and this clearly. As for education, the majority of employees hold a bachelor's degree at 90.0%, followed by a graduate High School at 6.9%. On the other hand, the percentage of those holding other qualifications was about 3.1%.As for the Occupation, General manager have been reached 3.1% , Executive manager have been reached 11.9%, Marketing manager have been reached 9.4%, Tour operator have been reached 34.4% while Others around 41.2%. As for years of experience in the field of work, the percentage of those with less than 5 years of experience was about 1.9%, and those whose experience ranged from five to ten years was 76.9%, while those whose experience ranged from 11 to 20 years was 14.4%, and finally, with more than 20 years of experience, it was 6.9%.

Table (2): Sample profile (N=320)

No.	Items	Freq.	%
1	Gender	Male	152 47.5
		Female	168 52.5
2	Age	35 years and less	256 80.0
		35- 45 years	38 11.9

		46- 55 years	22	6.9
		More than 55 years	4	1.2
3	Education	Bachelor	288	90.0
		High School	22	6.9
		Others	10	3.1
5	Occupation	General manager	10	3.1
		Executive manager	38	11.9
		Marketing manager	30	9.4
		Tour operator	110	34.4
		Others	132	41.2
6	Experience	less than 5 years	6	1.9
		5-10 years	246	76.9
		11-20 years	46	14.4
		More than 20 years	22	6.9

Part two: **The suitability of heritage sites in Egypt for tourists with dementia**

Part three: measuring the awareness of Egyptian community about dementia tourism in heritage sites, this part is presented in 6 items adopted from (Kumar, et al. 2019). such as :Social environmental affect positively the dementia tourists, Medical services for tourists with dementia, qualified and specialized hospital and Medical teams in Heritage place, an emotional teams that provide advice and training to address health and sensitive issue, Tourism programs help support dementia tourist social integration, awareness of local people about dealing with tourists with dementia).

Pilot study and Data analyses

The pilot study is an experimental study that is conducted to address a set of issues before starting the main study. The most important of these issues is testing the efficiency of the study tool and developing it in the case of building a new scale or testing an existing scale (Johanson and Brooks, 2010).

Although the pilot study contributes to improving the quality and efficiency of the main study, it is not related to hypotheses tests. Therefore, the pilot study is conducted on a limited sample of 30 or more (In, 2017).

The following statistical tests were used to process the data statistically using the statistical programme "SPSS V.22":

1. The Cronbach's alpha coefficient was used to evaluate the reliability of the questionnaire.
2. The mean, standard deviation, and percentages of frequencies were used to characterise the sample's properties. Note that, as indicated in Table chapter four, the sample's response to the research constructs is calculated using the weighted mean.

3. The Mann-Whitney test was used to determine how respondents' attitudes towards the study variables varied according to their gender. When there were two groups, the test was used to compare samples in relation to the study variables.

4. The Kruskal-Wallis test was used to compare respondents according to their age, education, occupation, and level of experience with the research variables.

Validity and Reliability

To ensure the validity of the study instrument, the questionnaire was presented to academics in tourism studies to find out its validity. Their opinions were largely in agreement with the questionnaire items. The reliability of the questionnaire was calculated by using the Cronbach’s alpha coefficient. Taber (2018) stated that the Cronbach's alpha is a statistical test commonly used to prove that the scales created to measure study variables are reliable and appropriate to their purpose. The results concluded that the Cronbach’s alpha coefficient for all variables was higher than 0.7, as shown in Table (3). Taber (2018) mentioned that the Cronbach’s alpha coefficient is acceptable if its value 0.7 and higher.

Table (3): Cronbach’s alpha for study variable

	The suitability of tourist and heritage sites in Egypt for dementia patients.	11	0.816
	The availability of medical services in Egyptian tourist destinations for dementia patients.	6	0.776

These results indicate good internal consistency and reliability of the questionnaire used in the study, so the questionnaire was distributed without any modifications

Sample profile

Results of the suitability of tourist and heritage sites in Egypt for dementia patients

Table No. (4) Shows the descriptive statistical data of the respondents’ attitudes towards the suitability of tourist and heritage sites in Egypt for dementia patients. This part was measured by 11 items.

Table (4): Descriptive statistics for the suitability of heritage sites in Egypt for tourists with dementia

Items	Frequencies						Mean	SD
	Freq.	1	2	3	4	5		
1	Freq.	-	2	28	116	174	4.44	0.679

	Heritage place and museums have signs at contact points such as (entrances, exits and toilets) to reduce stress for tourists with dementia?	%	-	0.6	8.8	36.2	54.4		
2	Signs clear in bold and at eye level	Freq.	-	-	44	126	150	4.33	0.706
		%	-	-	13.8	39.4	46.9		
3	Sound clips, projections and security barriers are design to decreased confusion of people with dementia	Freq.	2	18	58	140	102	4.01	0.885
		%	0.6	5.6	18.1	43.8	31.9		
4	The level of infrastructure help tourists with dementia in heritage places	Freq.	-	26	92	138	64	3.75	0.867
		%	-	8.1	28.8	43.1	20		
5	Heritage recreational activities encourage dementia tourist to undertake trip	Freq.	-	20	114	124	62	3.71	0.848
		%	-	6.2	35.6	38.8	19.4		
6	There are places for dementia tourists who might be feeling anxious or confused	Freq.	2	62	90	126	40	3.44	0.961
		%	0.6	19.4	28.1	39.4	12.5		
7	Entrance will-lit and make as much use of natural light as possible	Freq.	-	6	26	176	112	4.23	0.674
		%	-	1.9	8.1	55	35		
8	There is avoiding using areas with bright light or deep shadows	Freq.	-	-	36	172	112	4.24	0.638
		%	-	-	11.2	53.8	35		
9	In museums there are plain or molted surfaces	Freq.	-	2	28	154	136	4.33	0.658
		%	-	0.6	8.8	48.1	42.5		
10		Freq.	-	2	14	170	134	4.36	0.598

	There is a seating area where people are waiting	%	-	0.6	4.4	53.1	41.9		
11	The construction of building is suitable for dementia tourist	Freq.	2	48	110	90	70	3.56	1.012
		%	0.6	15	34.4	28.1	21.9		
The overall mean								4.03	0.467

According to table (4) indicated that 54.4 % strongly agreed that Heritage place and museums have signs at contact points such as (entrances, exits and toilets) to reduce stress for tourists with dementia and 36.2% agreed to this, but 8.8% of the sample were neutral in their responses. On the other side, the results found that 0.6% of the respondents did not agree with that. In addition, 0% of the sample strongly disagreed with that. Accordingly, the results indicated that about 90.6% of the study samples accepted the statement, while about 0.6% of the sample did not agree. The mean value was 4.44 (SD =0.679) which is located in the agreeing level. This means that the majority of the study sample agrees with this statement. The results in a table (4) indicated that 12.5 % strongly agreed that there are places for dementia tourists who might be feeling anxious or confused and 39.4% agreed to this, but 28.1% of the sample were neutral in their responses. On the other side, the results found that 19.4% of the respondents did not agree with that. In addition, 0.6% of the sample strongly disagreed with that. Accordingly, the results indicated that about 51.9% of the study samples accepted the statement, while about 20% of the sample did not. The mean value was 3.44 (SD =0.961) which is located in the agreeing level. This means that the majority of the study sample agrees with this statement.

As shown in Table (4), the **overall mean** was 4.03. From the above it is clear that the study hypothesis (**there is a suitability of heritage sites in Egypt for tourists with dementia**) is accepted, as the results from the field study prove that Egypt, as a tourist destination, is capable of receiving tourists with dementia in heritage sites, this also means that **there is an awareness in of heritage sites about appropriate elements for tourists with dementia** and Egypt is able to meet the needs of this type of tourists and to deal with them.

Results of the measuring the awareness of Egyptian community about dementia tourism in heritage sites

Table No. (5) Shows the descriptive statistical data of the respondents' responses about the awareness of Egyptian community about dementia tourism in heritage sites. This part was measured by 6 items.

Table (5): Descriptive statistics for the awareness of Egyptian community about dementia tourism in heritage sites

Items		Frequencies					Mean	SD	
		Freq.	1	2	3	4			5
1	Social environmental affect positively the dementia tourists	Freq.	-	4	18	216	82	4.18	0.577
		%	-	1.2	5.6	67.5	25.6		
2	There is Medical services for tourists with dementia	Freq.	2	8	52	168	90	4.05	0.774
		%	0.6	2.5	16.2	52.5	28.1		
3	There is qualified and specialized hospital and Medical teams in Heritage place	Freq.	-	46	58	174	42	3.66	0.881
		%	-	14.4	18.1	54.4	13.1		
4	There is an emotional teams that provide advice and training to address health and sensitive issue for tourists with dementia	Freq.	4	124	86	76	30	3.01	1.026
		%	1.2	38.8	26.9	23.8	9.4		
5	Tourism programs help support dementia tourist social integration	Freq.	-	4	34	226	56	4.04	0.575
		%	-	1.2	10.6	70.6	17.5		
6	There is awareness of local people about dealing with tourists with dementia	Freq.	8	24	44	192	52	3.80	0.887
		%	2.5	7.5	13.8	60	16.2		
The overall mean							3.79	0.497	

The results in a table (5) indicated that 25.6 % strongly agreed that Social environmental affect positively the dementia tourists and 67.5% agreed to this, but 5.6% of the sample were neutral in their responses. On the other side, the results found that 1.2% of the respondents did not agree with that. In addition, 0% of the sample strongly disagreed with that. Accordingly, the results indicated that about 93.1% of the study samples accepted the statement, while about 1.2% of the sample did not. The mean value was 4.18 (SD =0.577) which is located in the agreeing level. This means that the most of the study sample agrees with this statement.

As shown in Table (5), the respondents agreed that there is an emotional teams that provide advice and training to address health and sensitive issue for tourists with dementia. 9.4% of them are strongly agreed about that and 23.8% agree. Contrary, the respondents don't agree about the same phrase by 38.8%. The mean

value of this phrase was 3.01 (SD= 1.026) which is located in the dis-agreeing level. This emphasized the acceptance of the statement.

As shown in Table (5), the overall mean was 3.79. From the above it is clear that the study hypothesis (there is a awareness of Egyptian community about dementia tourism in heritage sites) is acceptable, as the results from the field study prove that Egypt, as a tourist destination, is capable of receiving tourists with dementia, also Increasing in awareness of heritage tourism of in Egypt for tourists with dementia as it is able to meet the needs of this type of tourists and how to deal with them.

It is clear from the previous tables that the possibility of raise awareness of society for tourists with dementia is good, as our results show highlight that age-friendly communities should provide services and infrastructure to promote health in tourists with dementia that are important for PwD living in the community and their carers. In practice, this implies that beyond specific programmes for people directly affected by dementia, promoting public awareness to reduce stigma and stress the importance of social participation and inclusion of PwD and their families is essential and should form part of a community action plan for a more collaborative community, These results are consistent with a previous study of: Ziebuhr et al . Living Well with Dementia: Feeling Empowered through Interaction with Their Social Environment (2023).

Conclusion

This study aimed to present and define the procedures or standards required to identify means used to promote public awareness on the existing cultural heritage assets and increasing awareness of heritage tourism for tourists with dementia and its requirements. To assess the effectiveness of the public awareness creation strategies on available heritage assets. Also To examine environment suitable to support public awareness.

The results also showed that Egyptian destination is able to receive tourists with dementia as mentioned above, after amending some of the standards required to properly establish this type of tourism. The results showed that the Egyptian local community has a good and increasing awareness of this type of tourism, through the application of some measures such as encouraging and introducing the local community to dementia tourism in heritage places.

RECOMMENDATIONS

The results showed the strengths and weaknesses within Egypt as a tourist destination for tourists with dementia and the awareness of heritage tourism for tourists with dementia and its requirements

The questionnaire in Egyptian destination for dementia tourists in heritage places, includes one main point in Egypt: Dementia awareness of dementia tourists in Egypt and assessment to the destination and medical services with dementia in Egypt.

A. Recommendations for tourism agencies

- 1- The study recommends that managers of tourism agencies in Egypt adopt new policies and practices and take the necessary measures to Increase awareness of heritage tourism for tourists with dementia
- 2- Tourism entities must involve the local community in their tourism projects by providing them with job opportunities, as well as working to increase awareness of the importance of tourism, especially tourists with dementia.
- 3- Tourism companies must train tour guides to deal specifically with dementia patients, such as training them to provide first aid and provide psychological support in cases of necessity.
- 4- Tourism companies and bodies must overcome the difficulties and prepare to face the challenges facing designing a heritage tourism program for tourists with dementia.
- 5- Tourism companies must promote heritage programs that are friendly to dementia patients
- 6- Tourism companies must adopt training programs to qualify their employees with the correct skills and behaviors and make them aware of the importance of bringing this type of tourism to the Egyptian tourist destination.

B. Recommendations for Ministry of Tourism and Antiquities and related ministries

- 1- The Ministry of Tourism and Antiquities must establish a special section or department for different types of tourism, especially for tourists who must be treated in a special way, such as tourists with dementia.
- 2- The Ministry of Tourism and Antiquities must cooperate with the Ministry of Health to operate hospitals, allocate psychological teams to deal with this type of tourism, and establish hospitals specialized in such diseases near heritage tourist places to serve the community and tourism, especially such types of tourism, as Egypt's natural conditions help to Attracting tourists with special needs. It is possible to easily combine medical and heritage tourism due to the elements that Egypt is famous for, such as the moderate climate, the presence of therapeutic springs, healing sand, and others, which help in treating some diseases.
- 3- The Ministry of Tourism and Antiquities must cooperate with the Ministry of Investment to issue laws for tourism companies that regulate this type of tourism,

such as reducing taxes and the necessary legislation to assist tourism agencies in designing and organizing this type of tourism.

4- The necessity of cooperation between the Ministry of Tourism and Antiquities and other ministries in establishing training programs for employees and tourist guides working in heritage archaeological areas to implement these programs correctly.

5- The Ministry of Tourism and Antiquities must educate travel agencies and airline companies about the necessity of adopting policies that maintain the safety of tourists with dementia, and provide support and promotion for them in international exhibitions, conferences, and forums.

6- The Ministry of Tourism and Antiquities should adopt a program to accredit travel agencies and hotels that design heritage tourism programs for Alzheimer's patients and receive them with the aim of attracting and encouraging tourism agencies to practice this type of tourism programs.

7 - Cooperation between the Ministry of Tourism and the Ministry of Housing and Construction and the establishment of cooperation and organization protocols between the relevant bodies to create accommodations that suit the needs of this type of tourism or oblige hotels with a high ranking in terms of quality to meet the accommodation requirements for tourists with dementia.

8 - Cooperation between the Ministry of Tourism and the Ministry of Information and Advertising and the Ministry of Culture to promote and raise awareness for tourists with dementia

9- In addition to all of the above, the criteria mentioned in both Table (4) and Table (5) must be applied.

C. General recommendation

1- The necessity of establishing partnerships between the private sector, the governmental sector and all stakeholders in the tourism sector to cooperate in implementing policies

Limitations and further research

This study, like any study, has a set of limitations. The most prominent of these limitations is that the field study relied on distributing questionnaires to some workers in Category (A) tourist agencies in Egypt. As there are many tourism agencies and companies in Egypt, which requires a long time, great effort, and high cost. To overcome this limitation, the questionnaire was not used on all of these agencies, but rather it was conducted on a random sample in some of the places where these tourist agencies are located to save effort and money. The

researcher used the simple random sampling method to describe the research community and reach the required results.

Local awareness of dementia tourism is crucial to the benefits of this tourism type, whether to heritage sites or local communities, since dementia tourism is not one of the currently known types of tourism, and if it exists, it is not under the same name, but under other names. Therefore, the researcher decided to identify some of the steps required to increase local awareness of dementia tourism, as it is possible in the future for researchers to expand the study of this topic, such as designing different types of programs to suit the needs and requirements of tourists with dementia, especially in heritage places.

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استكشاف ملاءمة مصر كوجهة سياحية تراثية للسياح الذين يعانون من الخرف: وعي المجتمع

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الملخص

تتمتع سياحة التراث الثقافي لمرضى الخرف بفوائد ثقافية واقتصادية. لديها القدرة على تحويل التراث إلى سلعة مربحة. وتمثل هذه الإمكانيات الاقتصادية بدورها دافعاً رئيسياً لتشجيع المجتمعات المحلية على تقدير التراث والحفاظ عليه. ومع ذلك، فإن الوعد بالتنمية والأثر الإيجابي للسياحة الثقافية بعيد كل البعد عن كونه أمراً مفروغاً منه. الإدارة الجيدة هي المفتاح لتحقيق أهداف السياحة الثقافية وتجنب المخاطر المحتملة. لكي يبقى أي موقع أثري على قيد الحياة، فإنه يحتاج إلى رعاية وصون في أجزاء كثيرة من العالم، وخاصة البلدان النامية، يُنظر إلى الحفاظ على التراث الثقافي وتخصيص الموارد لهذا الغرض على أنه ترف وبالتالي ليس أولوية، ويمكن أن يكون استخدام السياحة لتوليد الإيرادات حلاً لهذا النقص في التمويل. لا توفر السياحة التراثية للخرف وسيلة لكسب المال للمواقع التراثية فحسب، بل يمكن أن تكون أيضاً سبباً للحفاظ على الموقع في المقام الأول، من أجل الحفاظ على جاذبيته للزوار. عندما يكون الموقع مغلقاً أمام الجمهور والزوار، فإنه يميل أكثر إلى التدهور. الموقع الذي لا يدر أي إيرادات يكون أيضاً أقل عرضة لتلقي التمويل لأعمال الصيانة والحفظ، بالإضافة إلى ذلك، نظراً لأن المواقع المغلقة غالباً ما يتم هجرها، فهي أكثر عرضة للنهب. وربما بنفس القدر من الأهمية، نتيجة لهذا الهجر قد ينسى المجتمع المحلي قيمة وأهمية المكان ولذا فإن زيادة الوعي بسياحة الخرف (الزهايمر) في الأماكن التراثية له تأثير بالغ بالإيجاب.