

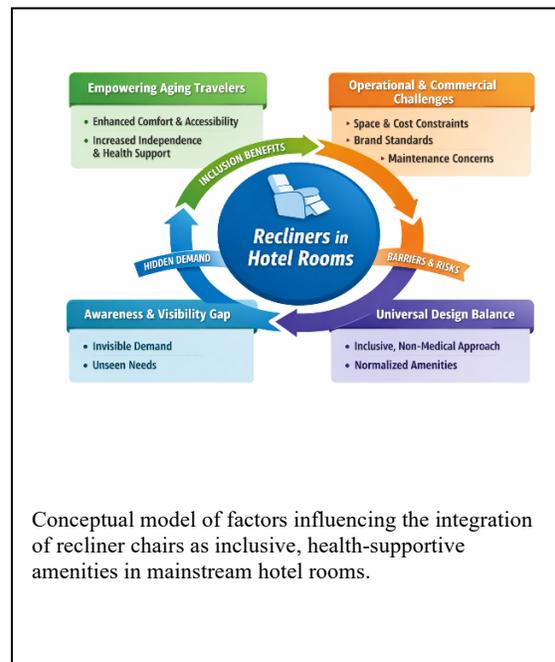
# Healthy Inclusive Environments and Healing Architecture

**Hotel Managers' Perspectives on Recliner Chairs and Age-Inclusive Travel.** Nease, B., Vera Laime, M., Schein, C., Donelle, L., Khoo, C. *Gerontechnology* 25(s)

**Background** Many older adults worldwide are living with chronic conditions such as chronic obstructive pulmonary disease, heart failure, sleep apnea, and gastroesophageal reflux, and as a result have difficulty sleeping in a fully reclined position. Many rely on recliner chairs to manage sleep-related symptoms [1], [2]. These needs can make travel challenging or discourage hotel stays altogether. Accessibility efforts in the hospitality industry have largely focused on mobility-related features such as wheelchair access and accessible bathrooms [3], [4]. **Purpose** This study explores hotel managers' perceptions of integrating recliner chairs into non-medical hotel rooms to support inclusive travel. **Methodology** A descriptive qualitative design was used to examine hotel managers' experiences with health-related needs, awareness of reclined sleeping requirements, and operational, commercial, and design considerations. Interviews were audio-recorded, transcribed verbatim, and thematically analyzed. **Results** Participants included hotel managers from the United States (n = 8) and Australia (n = 7) representing boutique, extended-stay, mid-scale, and luxury properties. Four themes were identified. Theme 1, *Empowering Aging Travelers*, reflected how recliner availability enabled continued travel and longer stays, as illustrated by the statements, "A lot of guests stay here for the simple fact that we have recliners," and "Guests will pay more for space and extra things they need." Theme 2, *Awareness and Visibility Gap*, described participants' limited awareness of reclined sleeping needs. The statement "People who need recliners probably aren't staying with us," is illustrative of the limited contemplation of demand. Theme 3, *Operational and Commercial Challenges*, captured tensions between guest comfort and practical constraints, with participants describing recliners as "good for guests, but heavy, easy to break, and hard to manage." Theme 4, *Universal Design Balance*, emphasized the importance of aesthetics and normalization, as participants expressed support for recliners "as long as they look like normal furniture and not clinical". **Discussion** Within a universal design framework, recliner chairs may function as a mainstream hospitality feature rather than a niche accommodation. While essential for some older adults' ability to travel, recliners also benefit travelers with temporary or ongoing capacity limitations such as injury and pregnancy. Framing recliners as lifestyle amenities may support more inclusive hospitality environments. Positioning recliners as normalized amenities rather than medical accommodations may offer a practical pathway toward more inclusive hospitality environments. By examining how design decisions influence who is accommodated, this study contributes to gerontechnology research focused on healthy architecture, inclusive environments, and aging-related participation in work, leisure, and social life.

## References

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**Email:** enease@email.sc.edu