HEALTHY LIFESTYLE AND TOURISM

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Abstract: A “healthy lifestyle” is a trend based on changing values and standard of living, which reflects itself in holiday and tourism as well. It is responsible for proliferation of health spas, fitness centres, gyms, massage centres, and health resorts. They form one of the “New Age of Tourism” sectors – the “wellness tourism” and these new forms or themes of tourism are of great influence for the further development of this sector. Since the 1980s, Western society has witnessed a marked trend among sections of the population toward more active, experientially oriented outdoor leisure activities in response to increasingly sedentary work patterns, which may also be regarded as a response to problems of urbanism and contemporary lifestyles. The “new tourist” is more demanding and at the same time taking more responsibility. The continued growth of health awareness in industrial society, the significance of image to identity, and the continued aging of society all point to the expansion of health-oriented tourism well into the twenty-first century. All the above indicates that health tourism will become even more important in the future.

Keywords: healthy lifestyle, tourism, sport tourism, wellness, medical tourism

Introduction

A “healthy lifestyle” is a trend based on changing values and standard of living, which reflects itself in holiday and tourism as well. It is responsible for proliferation of health spas, fitness centres, gyms, massage centres, health resorts …, which form one of the “New Age of Tourism” sectors – the “wellness tourism”.

Historically, the term ‘Healthy Lifestyle’ has been attracting interest from various fields, ranging from the more traditional health-care sector to the multi-faceted hospitality and tourism sector. A lifestyle is labelled as ‘healthy’ or ‘health oriented’ if it looks at and deals effectively with health-related elements and activities, such as participation in sports, control of daily diet, containment of stress levels and positive use of leisure time. This means, in simple terms, that
lifestyle is a person's way of life and includes the work, home and leisure environment. As people's lives are dominated by busy and often stressful lifestyles, the demand for healthy options and the growth of health consciousness have increased considerably, not only in people's daily experience but also during their leisure and holiday time (Novelli et al. 2006: 1141).

HEALTHY LIFESTYLE TOURISM (HLT)

In this context, HLT is seen as a means to revitalise the earlier concept of Spa tourism into an activity-based portfolio of opportunities catering for different needs and reconciling the relationship between the urban, the coastal and the rural economy where a growing demand for health-related activities is supported by an industry neither homogeneous nor organised. In the case of East Sussex, there is in fact a gap in the regional market for a consolidated approach in the supply of a niche tourism product identified as ‘HLT’, which can be addressed by combining the variety of local resources available, the diversity of existing SMEs and the uniqueness of their location (Novelli et al. 2006: 1144).

For many farmers, rural tourism has been an alternative to their declining traditional activities as it provides new forms of employment opportunities. However, many rural communities have to compete with the increasing number of regions that try to enter the tourism market, making the identification of a unique portfolio of activities the only way forward. In relation to this, the HLT includes indoor and outdoor activities, the consumption of local, organic and traditional produce and the use of local family run accommodation. Food and drink play an important part in tourism, with their role only recently acknowledged in the UK by a recent survey of tourist perceptions of the UK food industry, where ‘two-thirds of Britons said that food and drink influenced their holiday choice”. Food and drink can characterise a region and so contribute towards the creation of a regional identity. Nowadays, many rural barns have been converted into accommodation, restaurants, health, sporting or other leisure purposes reinforcing the potential of a HLT portfolio (Novelli et al. 2006: 1144).

Where the link between leisure and health has been established, there is an interest in investigating individuals’ healthy living habits, the effects on their travel behaviour and how it could be targeted. In order to promote businesses within the HLT segment, it is important that
SMEs directly and indirectly involved in tourism work together providing the desired services and products. People become increasingly conscious of their health and wish to have access to exercise facilities, outdoor activities and healthy and appetising food from the region, containing fresh ingredients with a known provenance.

The formation of the HLTC is routed in the desire to create a more viable set of tourism opportunities, which would enable local SMEs to utilise their resources and maximise sustainability (Novelli et al. 2006: 1146). Sharing of ideas through brainstorming session, knowledge transfer through expertise and resources exchange between local businesses, education/research institutions and local authorities was thought to be the best way to guarantee a sound progress of any innovative initiative. Pioneering research was fed back into the group, to promote learning within the cluster, to enable members to gain understanding of the cluster formation process and of the way innovative tourism products and services could be developed and managed. The long-term view was to increase profitability and to enhance the physical, economic and social regeneration of the region through the HLT concept (Fig.1).

The HLTC responds to the needs of the following segments: individuals interested in healthy living-related components, such as self-image, diet and exercise, as part of one's personal preferences and individuals in need of a healthy lifestyle as part of a post-trauma routine or doctor's recommendation. In order to satisfy the needs of the above individuals, it is important to provide an adequate leisure environment. Satisfaction can be achieved by providing a selection of accommodation, exercise facilities, appetising healthy cuisine and other well-being related activities, which might be simply identified in an environment where relaxation of mind and body would be easy to achieve. The HLT supply chain is based on the provision of products and services in line with the HLT characteristics.

The HLTC responds to market needs in the sphere of health-related tailored experiences, which are to be found in an activity-based development approach to tourism, rather than in a destination approach. The ‘customer’ is able in this way to ‘pick and choose’ what best reflects his/her profile and needs. In relation to this, the necessity of diversifying the portfolio of activities in East Sussex became an evident objective in order to build synergies between the rural, urban and coastal environment, encouraging social inclusion and identification of best practices under the HLT banner.
The implications of the HLTC formation are routed in the agglomeration economies facilitating knowledge transfer, increased business synergies and complementary products/services. There were cases of SMEs operating in a couple of miles radius from each other, being unaware of their co-presence on the territory. The workshops organised offered opportunities for brainstorming, share of perceptions, opinions and
ideas, and skills enhancement (i.e. customer services practice), which provided a set of objectives to further develop the cluster activity.

Synergies were created in those cases where certain services were offered and others were required. For example, SMEs offering accommodation facilities formed alliances with those supplying recreational opportunities and a small organic farmer looking to market his products to local B&Bs, but never managed to due to his lack of knowledge about the locality, was able to start distributing his product to other cluster members. Commercial collaboration became one of the most obvious outputs of the alliances facilitated by the cluster, as well as voluntary arrangement of business referrals and joint marketing under the banner of HLT (Novelli et al. 2006: 1145).

**CURRENT TRENDS IN HLT**

In discussing fresh trends or general societal changes, new forms or themes of tourism are also of great influence for the further development of this sector (Jonckers et al. 2005):

a) Tourism and sustainability:
   - a seismic shift in people’s awareness of the environmental impact of mass tourism;
   - a new social awareness-interest in authentic, small and local holiday experiences;
   - the new tourist (would eat in a local restaurant, would use local guides, would look for the true story behind the destination);
   - more do-it-yourself travellers (more demanding and at the same time taking responsibility);

b) Tourism and accessibility: almost 40 million people in Europe are handicapped and they are tourists too; from a commercial point of view alone these consumers are not to be neglected;

c) Tourism and rural and cultural heritage: there is a clear and growing market for non-traditional tourist destinations;

d) Tourism and peace: tourism is associated with tolerance, cultural exchange, learning to know each other, creative of welfare and friendship;

e) Tourism and sports; this goes far beyond the Olympic Games, as it is a rapidly growing segment for individual and group tourism;
f) Tourism and health:
   - a healthy lifestyle and promoting a healthy diet among customers will become a priority for travel companies;
   - holiday companies will work more closely with the medical professionals;
   - travellers will be better educated about holiday health risks in general;

g) Tourism and technology:
   - broadband will revolutionise communication culture and boost e-commerce; it will directly affect how we take holidays;
   - mobile phones will be our personal holiday organisers;
   - artificial intelligent agents in our computers will act as personal holiday tour operators;
   - virtual holidays will become a reality.

SPORT TOURISM AND HLT

Since the 1980s, Western society has witnessed a marked trend among sections of the population toward more active, experientially oriented outdoor leisure activities in response to increasingly sedentary work patterns, which may also be regarded as a response to problems of urbanism and contemporary lifestyles. Indeed, the present resurgence of public interest in adventure, health, and sport parallels the attention given to the physical, moral, and spiritual “damage” of urban living at the turn of twenty-first century in North America, Europe, and Australia, and the resultant growth in national parks, sport, and physical education as formal recreational activities and spaces. In the contemporary travel setting, escape from a mundane, alienating urban environment has been long recognized as a major motivating force in tourism, while the physical activity possible through health or sport tourism provides the outlet for potential personal reward. In addition, the desire for a healthy lifestyle, which is a significant intrinsic reward of travel, is a component of tourism behaviour and products that has become increasingly important in recent years. Finally, one can note the role of fashion and the significance of body image as an influence on individual motivations to attend beauty clinics and spas (Hall 2003: 275).

The continued growth of health awareness in industrial society, the significance of image to identity, and the continued aging of society all point to the expansion of health-oriented tourism well into the
twenty-first century. The traditional spa resorts areas of Europe, North America, and Australia will likely maintain their appeal, often with augmented product offerings, some of which may be more closely related to traditional forms of sports tourism such as skiing. Spa tourism lies at the core of the foundation of modern mass tourism. Relatively dormant for much of the past century, spa and health tourism is now poised to reclaim its position at the core of the tourist experience and as one of the most important drivers in determining travel patterns.

MEDICAL TOURISM AND HLT

Medical tourism (also called medical travel, health tourism or global healthcare) is a term initially coined by travel agencies and the mass media to describe the rapidly-growing practice of travelling across international borders to obtain health care. Medical tourism describes the act of people making health choices and accessing health treatments across borders. Medical tourism is a term involving people who travel to a different place to receive treatment for a disease, ailment, or condition, and who are seeking lower cost of care, higher quality of care, better access to care, or different care than they could receive at home. It is undertaken by people who are sick. Chronically ill, very old people are seeking other segments of health tourism (Keck 2013):

- Active and passive accessibility (movement, vision, hearing)
- Physical security (emergency, Ambient Assistant Living, etc.)
- Diagnosis and Treatment (Disease Specific).

According to the Medical tourism Association “Medical Tourism is where people who live in one country travel to another country to receive medical, dental and surgical care while at the same time receiving equal to or greater care than they would have in their own country, and are traveling for medical care because of affordability, better access to care or a higher level of quality of care.”

There are two “worlds” of health tourism that can be distinguished: people feeling healthy, who have no disturbing physical limitations in activities of daily living; and chronically ill, and very old people, who encounter physical limitations in ADLs. For chronically ill patients all health touristic categories can be of interest.

Wellness tourism involves people who travel to a different place to proactively pursue activities that maintain or enhance their personal health and well-being, and who are seeking unique, authentic, or
location-based experiences that are not available at home. It is undertaken by people who are healthy.

People feeling healthy are mainly interested in:

- Well-being (Wellness)
- Aesthetics (cosmetics, etc.)
- Healthy lifestyle (diet, exercise, relaxation)
- Preventive examination (check-up)

Tourism system is the framework that identifies tourism as being made up of a number of components, often taken to include the tourist (The Tourism Observatory for Health, Wellness and Spa 2015), the tourist generating region, the transit route region, the tourist destination and the tourism industry (Figure 2).

There are many motivators and factors in health tourism growth. The growth of health food, gyms and the investment in leisure facilities proves that consumers are looking for more than relaxation during a break or holiday; this is unsurprising when time is so precious claims that “the spa market is one of the fastest growing leisure sectors, where societal trends and aspirations find instant reflection in the developments on both the demand and supply sides.

The market is very fragmented, each segment catering for different customer needs, which continuously change in line with social and lifestyle changes”. The fact is that “today a social revolution has occurred and health [and spa] tourism now covers a wide spectrum of people with diverse interests from pure medical consumers to tourism consumers” (Rami 2011: 157).

The development of health tourism and spas has concentrated on two different market segments. The first market consists of those who visit spas for their health alone; the second segment incorporates those seeking other more varied kinds of tourism, looking for well-being, beauty, and recreation. (Rami 2011: 157).
Figure 2: Global health tourism services grid
Medical and wellness tourism providers are (Voigt 2015):

*Medhotels* are among the main medical and wellness tourism provider, which supply a collaboration between a private clinic and an accommodation provider to cater to medical and wellness tourists, who are mainly interested in diagnostics. Their consumers are medical tourists with impermanent health problems (e.g., insomnia, burnout, tension headaches), who do not have chronic illnesses. Medhotels are more firmly subscribed to the biomedical health paradigm (mainstream health professionals, high-tech oriented, and no comprehensive lifestyle change program).

*Medical Spas*. Their focus is on beauty and anti-aging services, sometimes weight loss. Medical spa beauty treatments are less invasive than cosmetic surgery, but more invasive than in beauty spas (e.g. botox, microdermabrasion). They require expensive medical equipment and technology. To ensure health and safety of customers, clients are supposed to be supervised by physicians. Lifestyle services, like nutrition counselling and exercise training can be offered, however, the focus is still predominantly on (re)gaining beauty and eternal youth.

*Health clusters – traditional European spas*. They are intended for people with health problems. Spa therapy is at least partially covered by public health insurance and supervised by orthodox health personnel. They provide integrated offering of mainstream medicine, CAM (complementary and alternative medicine) and lifestyle interventions. Both medical and wellness tourists are targeted.

*Wellspitals«*. Strongly focus on CAM and lifestyle intervention, but also mainstream medicine (psychology, neurology, etc.). They cater
to medical tourists with chronic disease and/or rehabilitation of people with psychiatric conditions and addictions (e.g. alcoholism, anorexia). Often, the aim is not to cure, but to improve general quality of life. Sometimes wellness programs for wellness tourists and accompanying travel partners are offered in addition.

*Therapeutic lifestyle retreats.* They are similar to »wellspitals«, but their sole focus is on CAM and lifestyle intervention. They mainly cater to medical tourists who are chronically or even terminally ill. Sometimes wellness programs for wellness tourists and accompanying travel partners are offered additionally.

**Conclusion**

An ageing population implies a growing demand for goods and services catering to the elderly, who seek to remain fit and active. The demand has increased for healthier foods and for better access to a variety of physical activities as a way of combating growing anxiety problems and depression — as well as growing waist lines.

There is an increasing interest in Eastern medicine and health-related activities such as yoga, meditation and herbal remedies. Growth in this area may be most closely linked to affluence because they will remain an alternative to the staunchly supported public health service, of western societies. At present, women make up a significant majority of ‘health’ consumers, but we anticipate a steady growth in participation by males in the market. Disparities between the self-reporting of conditions and the actual treatment of conditions suggest a demand for non-medically prescribed remedies or treatments, particularly in areas of the greatest discrepancies between condition and treatment, for example, heart and circulation problems, as well as alcohol and drug problems. An increasing use of beauty aids, combined with continued growth in disposable income, suggests a bright future for cosmetic treatments and for those searching for the fountain of youth. All the above indicates that health tourism will become even more important in the future.

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