

Healthy-living Behavior Status and Motivational Characteristics of Foreign Tourists to Visit Wellness Facilities in Bangkok

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Abstract

The purpose of this research is to examine the characteristics of a healthy-living market segment and its motivational behavior to wellness facilities in Bangkok, Thailand. Both qualitative and quantitative techniques are presented. This study was explored by nine interviews and 164 survey questionnaires at eight hotels and resorts, 16 day spas and one wellness center in Bangkok from February to April in 2009.

This research observes that foreign tourists ‘often’ followed healthy-living habits in safety and ‘sometimes’ in exercise and diet respectively. It also maintains that recreation, relaxation, enhancement of quality of life, and social activities are the top four motivation issues when visiting wellness facilities. The Spearman’s correlation results revealed that there were relationships between healthy-living behavior statuses with regard to diet, smoking status, and safety and motivational behavior to visit wellness facilities in Bangkok. Finally, recommendations are presented to support the development and marketing of hospitality and tourism products and services for foreign travelers who have a healthy-living oriented lifestyle.

Keywords: foreign tourists, wellness tourism, healthy-living behavior status, motivational behavior

1. Introduction

Over the past six decades, tourism has experienced continued growth and diversification to become one of the largest and fastest growing economic sectors in the world. Over time, more and more destinations have opened up and invested in tourism development, turning modern tourism into a key driver for socio-economic progress ^[1]. As society advances, travel patterns have also shifted. Tourists are able to improve their quality of life through a variety of touring experiences at various vacation destination of interest ^[2]. Moreover, due to the recently emerging community health issues, such as obesity, goods and services targeted boosting personal health have become popular. In the tourism sector, merchandise catering to individuals’ health

has been particularly quick to develop in the last decade. For example, healthcare tourism has emerged in the tourist market place as lucrative in the years to come. It is defined as the attempt on the part of a tourist facility (e.g. hotel) or destination (e.g. Baden, Switzerland) to attract tourists by deliberately promoting health-care services and facilities in addition to regular tourists’ amenities ^[3]. Similarly, wellness tourism, a term that is defined as people traveling from their place of residence for health reasons, has gained increasing popularity.

In the magazine ‘Thai Spas’^[4], Sommers stated that Thai spa industry has gone from strength to strength with the appearance of all types of spas catering for a wide range of markets, both the local and international tourists. According to an

Intelligent Spas study ^[5], approximately 3.6 million visits were made to Thai spas during the 12 month period between July 2003 and June 2004, an increase of 43% compared the previous year. As more international travelers who visit Thailand are engaging in healthcare tourism, hospitality and tourism officials in Thailand need to be aware of the healthy-living segment's specific travel needs and wants.

An individual's diet, exercise, sexual behavior, self-image, and other healthy-living are part of one's personal values and personality. It is widely regarded that these central personal values and personality affect a person's motivation. In other words, it is natural to perceive that one's travel motivation is inclusion of one's personal values and personality ^[6]. There has been no attempt to explore the characteristics of a healthy-living market segment and its motivational characteristics in Bangkok, Thailand. Hence, the objectives of this research are as follows. 'To identify the motivational characteristics of foreign tourists visiting Bangkok, Thailand.' and 'To study the relationship between foreign tourist's healthy-living behavioral patterns and motivational behavior in relation to wellness facilities in Bangkok, Thailand.'

2. Review Literature

According to Ritter ^[7], the term 'wellness' was coined during the 1950s in the US by those in health sciences and medical sociology. They merged words 'well-being' and 'fitness' to create 'wellness'. This term has been described as an individual, multi-faceted, interdisciplinary expression for the human need for health and well-being. Puczak and Bachvarov ^[8] stated that wellness is supposed to create harmony in mental, physical, spiritual, and biological health in general; it has stronger ties with changing lifestyle or doing something healthy than with curing a particular disease, or ailment. Muller and Lanz-Kaufmann ^[9] stated that wellness can be defined as the balanced

state of body, spirit and mind.

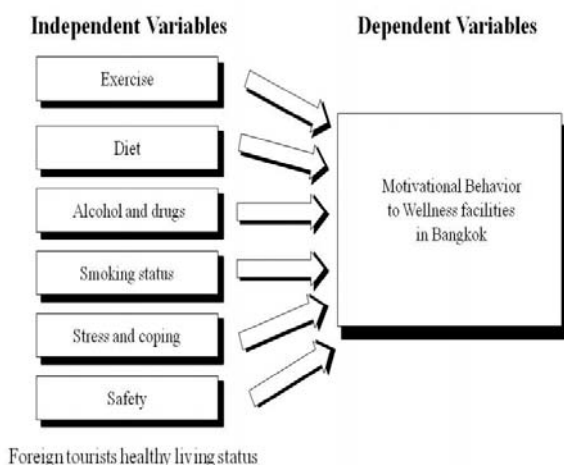
Muller and Lanz-Kaufmann ^[9] suggested that wellness tourism is the sum of all the relationships and phenomena resulting from a journey and residence by people whose main motive is to preserve or promote their health. Mugomba and Caballero ^[10] pointed out that health care tourism encompasses both wellness tourism and medical tourism and is thus on the top tier, while medical tourism and wellness tourism are both on the second tier. Likewise, wellness tourism is a sub-sector of health care tourism, although unlike medical tourism, wellness tourism doesn't include elective surgery. Wellness tourism deals with healthy people who care about health and fitness and focus on more preventive activities during journey. However it is often hard to divide the categories of health care tourism, medical tourism and wellness tourism, because it is easy for destinations of healthcare, medical, and wellness tourism to provide similar healthy services such as massage, yoga practice, spa and healthy foods.

Chen, Prebensen, and Huan ^[11] illustrated a new investigative theme pertaining to travel motivation to wellness destinations. In this study, both qualitative and quantitative techniques were presented. In wellness resorts in Taiwan, 506 visitors completed a survey instrument. The qualitative method assisted the researchers in finding specific attributes attracting the travelers, while the quantitative method assisted method profiles the importance ranking of motivations under investigation. The study found that relaxation, pursuing multiple activities, recreation, and enjoying nature are the top four motivations. Among these motivations, 'relaxation' is the primary motivator.

According to Hallab ^[12], there were relationships between an individual's healthy-living orientation and their travel behavior correlated in most cases and that healthy-living standards did vary among different socio-demographic groups.

In sum, a review of previous research suggests that there was a mutual interaction between individuals' healthy-living habits and their travel behaviors with respect to selected travel motivations. Based on the findings of past research, this study proposes the below hypothetical model (see Figure. 1).

Figure 1. Conceptual Framework



3. Research Methodology

Both qualitative and quantitative techniques were employed to collect needed information. Nine in-depth interviews were conducted with managers of hotels and resorts, day spas, and wellness center, promoting the theme of wellness living and travel in Bangkok.

The qualitative method assisted the researcher in finding specific attributes luring tourists to wellness facilities in Bangkok, while the quantitative methods profiled the individual's healthy-living behavioral characteristics under investigation. A total of 164 questionnaires was distributed to the target respondents at various wellness facilities available in Bangkok, such as day spas, wellness centers and hotels and resorts offering wellness programs.

3.1 Questionnaires

The questionnaire was written in English, and contained five sections. The first section explored the respondents'

purpose of travel, the second section measured foreign tourists' healthy-living behavioral patterns. The second section asked to indicate level of agreement towards healthy-living behavioral characteristics, where 5 – *always*, 4 – *often*, 3 – *sometimes*, 2 – *rarely*, 1- *never*. The third section evaluated motivational behavior, Scales 5 - *very important*, 4 - *fairly important*, 3 – *neither or nor important*, 2 – *not important* and 1 – *not important at all*, reveals the foreign tourists' motivational behavior.

3.2 Hypotheses

In this study, foreign tourists' healthy-behavior statuses comprising of exercise, diet, alcohol and drugs, smoking status, stress and coping and safety are the independent variables. Motivational behavior to visit wellness facilities is the dependent variable.

3.3 Procedure

The researcher personally visited wellness facilities located at Sukhumvit, Silom, and Siam areas frequented by foreign tourists in Bangkok. With approval of managers or receptionists, the researcher left from 15 to 20 questionnaires at each wellness facility and then requested managers let foreign tourists respond to the questionnaires after their wellness treatment. After 13 to 15 days, the researcher revisited the wellness facilities to collect the filled questionnaires.

The researcher initially planned to distribute approximately 400 questionnaires, but after failing to get adequate initial response, the distribution of questionnaires had to be increased to 600. As a result, 604 questionnaires were distributed from February 2009 to April 2009; however, only 164 completed questionnaires were collected (Return rate: 27%). The researcher estimated this low rate of return to be, because of niche research field, disapproval in distributing questionnaires from wellness facilities, political turmoil in Bangkok and economic recession in the region.

3.4 Reliability

For the reliability test, the researcher used the Cronbach's Coefficient Alpha scale to test the reliability of the sample questionnaire. Items were 6 individual's healthy living statuses such as 'exercise (0.876)', 'diet (0.748)', 'alcohol and drugs (0.886)', 'smoking status (0.821)', 'stress and coping (0.751)', and 'safety (0.665)' and motivational behaviors (0.821). Result was in the 0.847 range in between six individual's healthy living status and one motivational behavior, reliability result was considered to be 'good'.

3.5 Method of Analysis

Inferential Statistics was used for confirmatory Data Analysis to investigate hypotheses measuring Spearman's Correlation.

4. Discussion of findings

4.1 Foreign tourists' healthy-living behavior status

From descriptive statistics, this research determined five top healthy-living behaviors of foreign tourists visiting in Bangkok. They are: (1) foreign tourists often wear seat belts (mean = 4.05) (2) foreign tourists don't drink and drive (mean = 3.82) (3) foreign tourists eat a substantial amount of fruit and vegetables as part of regular diet (mean = 3.78) (4) foreign tourists prefer low-fat dairy product (mean = 3.48) (5) foreign tourists exercise to get energy to do the things they want to do (mean = 3.37). Particularly, the study indicates that respondents strongly followed healthy-living behaviors patterns in safety. Foreign tourists think safety is a priority in Bangkok, Thailand (See Table 1).

Table 1. Descriptive Statistics of respondents' healthy-living behavioral patterns

Healthy living status	Mean	Std. ¹
Exercise		
I go aerobic/strength type exercise 3-4 times a week (Walking, running, jogging, bicycling, swimming, team sports, yoga)	3.21	0.995
I exercise to get energy to do the things I want to do	3.37	0.991
Exercise	3.29	0.995
Diet		
I take limited amount of meat	2.94	1.139
I prefer low-fat dairy products	3.48	1.19
I like low-fat desserts	3.18	1.075
I emphasize low-fat cooking methods	3.3	1.148
I use whole grain products	3.02	0.997
A substantial amount of fruit and vegetables is part of my regular diet	3.78	1.045
I do not go for fast food	3.25	0.968
I consume less amount of salty foods	3.06	1.089
Diet	3.25	1.111
Alcohol and drugs		
I take standard one to two drinks per 24 hours	2.6	1.149
I abstain from drugs or medications that affect one's mood or help one to relax or sleep	2.46	1.458
Alcohol and drugs	2.53	1.313
Smoking status		
I do not smoke	3.15	1.731
I avoid passive smoking (away from smokers)	3.21	1.363
Smoking status	3.18	1.556
Stress and coping		
I seldom feel stress	3.15	0.853
I cope with stress very well	3.16	0.942
Stress and coping	3.16	0.897
Safety		
I always wear seat belts	4.05	1.0008
I don't drink and drive	3.82	1.433
Safety	3.93	1.242

Std.¹ = Std. Deviation

4.2 Motivational behavior

Table 2 shows the descriptive statistic of motivational behavior of respondents.

'Recreation' had the highest mean score of 4.12 followed by 'relaxation' with the second highest mean score of 4.05. It is not surprising that general wellness products and services were provided for experience of recreation and relaxation of the body and mind.

Table 2: Descriptive Statistics of respondents' motivational behavior

Travel motivational factors	Mean	Std. ¹	Ranking
<u>Recreation</u> (Be refreshed in body or mind)	4.12	0.766	1
<u>Relaxation</u> (Tranquility enjoyment and body pampering)	4.05	0.864	2
<u>Enhancement of quality of life</u>	3.94	0.796	3
<u>Social activity</u> (Be socialized with other people)	3.89	0.791	4
<u>Curiosity</u> (Finding thrills and excitement)	3.79	0.842	5
<u>Experiencing nature</u> (Traveling through places rich in nature-made attractions)	3.66	0.949	6
<u>Physical therapy</u> (Be cleaned or treated physically)	3.58	0.966	7
<u>Health consciousness</u> (Seek health-care services)	3.56	1.046	8
<u>Mental therapy</u>	3.56	0.967	9
<u>Affordable activity</u> (Shopping with emphasis on health products)	3.55	0.974	10
<u>Pursuing multi-activities</u> (Learning new things)	3.55	0.998	11
<u>Effortless activity</u> (Do nothing at all)	3.45	0.922	12
<u>Meditation</u>	3.2	1.12	13
Mean of Total factors	3.68		

Std.¹ = Std. Deviation

'Enhancement of quality of life' was the third highest mean score of 3.94. Interestingly, 'social activity' showed the fourth highest mean score of 3.89. It was an interesting result, because Weiermair and Steinhauser^[13] described wellness tourists as more independent people compared to typical tourists. Though wellness facilities need privacy and private space for individual customers, it could be beneficial to build in social space such as restaurants

and lounges for customers to socialize.

'Curiosity' was the fifth strongest motivation in international tourists. As for this factor, wellness tourists seem curious to have more experiences and the new things that are available in Bangkok.

'Meditation' was the weakest motivation in this research. 'Meditation' was the lowest mean score of 3.2. As mental therapy was also low ranking, mental factors seem to be a weak attraction for these tourists. However, the researcher found out that many of research fields (hotel and resorts, day spa and wellness center) didn't have yoga or meditation programs and so this may be natural result. This suggests that it may be profitable for wellness establishments in Bangkok to explore interesting meditation programs to cater for the niche market.

Compared to results of previous study, Chen, Prebension, and Huan^[11] found that 'relaxation', 'pursuing multiple activities', 'recreation', and 'enjoying nature' are top four motivations. In terms of the ranks of importance, 'relaxation' is the leading indicators in the previous study.

4.3 Relationship between foreign tourist's healthy-living behavioral status and motivational behaviors

A closer examination of the results shows a significant correlation between healthy-living status in diet and motivation. The correlation coefficient was weak but positive ($r_s = .324$, $p < .01$), and means that foreign tourists who have a healthy lifestyle in terms of diet are more likely to go to wellness facilities in Bangkok. In other words, healthy food oriented people who limit their consumption of meat, use fresh dairy products, prefer low-fat food, avoid fast and salty foods are likely to have a positive motivation to go to wellness facilities such as spas and wellness centers.

Smoking status affects motivational behavior ($r_s = .286$, $p < .01$). The correlation coefficient was very weak but positive. It means that foreign tourists who follow the

healthy lifestyle in aspect of smoking status are likely to have motivation to visit to wellness facilities in Bangkok, Thailand.

It was also revealed that safety consciousness affects motivation ($r_s = .234$, $p < .01$). It means that there is weak correlation between healthy lifestyle in safety and motivational behavior. Therefore, services and products related to safety are likely to satisfy foreign tourists' motivation. In other words, the safety values of tourists such as wearing seat belts and avoiding drinking and driving tend to be attracted to the features of strict regulations in wellness destinations.

Lastly, healthy-behavior in exercise has very weak effect on foreign travelers' motivation ($r_s = .197$, $p < .05$). Correlation coefficient between exercise and motivational behavior is very weak but positive.

Healthy-living behavior patterns in 'alcohol and drugs' and 'stress and coping' didn't affect foreign tourists' motivational behavior. These two attributes were also observed to be the lowest healthy-living patterns which foreign tourists follow.

5. Conclusion and Recommendations

This research revealed the individual healthy lifestyles of foreign tourists and their motivational behavior in Bangkok, Thailand. According to the results of this study, foreign tourists followed the healthy-living patterns in 'safety', 'exercise', 'diet', 'smoking status', and 'stress and coping' and they had motivational behavior in 'recreation', 'relaxation', 'enhancement of quality of life', and 'social activity'. This study also examined the correlation between healthy lifestyle and motivational behavior. Among the healthy-living patterns, 'diet', 'smoking status', 'safety', and 'exercise' have influence on the motivational behavior of foreign tourists who visit wellness facilities in Bangkok, Thailand.

These study results suggest that managers of wellness facilities could build

the service strategies for foreign tourists. In addition, such findings enhance the understanding of the growing number of travelers who prefer those destinations that offer the opportunities to practice their healthy-living lifestyles.

Most importantly, marketers and managers should continue trying to know what customers want and need. Through several interviews and visits to wellness facilities in Bangkok, the researcher felt that most managers and staff in wellness facilities thought that wellness facilities must provide customers with individual space to protect their privacy and individual activities. However, this research revealed, one of the motivational behavior of foreign tourists involved a desire for socialization. Without communication, it is impossible to know what customers really want. Therefore, the first recommendation for marketers and managers is to communicate with customers.

Marketers and managers could build marketing strategies and develop detailed services based on the findings of this study. For example, 'recreation' and 'relaxation' were the two key motivations among foreign tourists in Bangkok. So wellness business should develop those programs which could enlarge the consumers' experience of recreation and relaxation of the body, mind and spirit.

Moreover, marketers and managers need to provide services according to individual lifestyle. For example, those individuals who follow an exercise regime and a healthy diet composed of fresh fruit and vegetables, low-fat products and fresh fruit juices could possibly show interest in this area and consider taking a trip to health spas, wellness seminars, developing healthy habits and bath in warm spring and mineral waters.

Managers could consider promotion and advertisement of their wellness facilities through as like no smoking free restaurants or cafés, health food restaurants, wellness seminars, and workshops presenting topics related to healthy cooking or antismoking

campaigns. Since these channels are related to healthy-living lifestyle of people, promotion through these channels could attract more foreign tourists.

Lastly, this research makes a suggestion for tour operators associated with the wellness industry. This research revealed that healthy-living 'safety' habits affect the motivational behavior of foreign tourists who maintain a safety-oriented lifestyle. These individuals would be attracted by features in Bangkok; hygiene and cleanliness of facilities or services, beaches for swimming if umbrellas were provided for sun protection, restaurants with an emphasis on light cuisine, and the destination's air, water and soil quality. Therefore, the tour operator should keep in mind the selection of mode of transportation, accommodation, food and beverage, cleanliness and hygiene, and strict regulations for safety that are required to satisfy international guests at their destinations.

6. Limitations of the study

One potential limitation of this study is that it does not consider the cultural differences in terms of nationality. During the interviews in various wellness facilities, every manager stated that there were cultural differences in motivation. For the healthy-living guidelines are formulated by the United States Department of Agriculture and other US health authorities, possible measuring differences in healthy-living may exist between foreign tourists. Further research could be conducted to investigate the correlation between healthy lifestyle and motivational behavior in respect to cultural differences.

While the sampling for this study is fairly representative of international tourists, the small sample size could be another limitation in this research. If further research is undertaken, larger sample size with more reliability would be desirable.

Lastly, further research could be carried out on different healthy-living habits

and motivations. In other words, the limited number of variables in this study may not be sufficient to explain the general individual healthy-living habits and their correlation with motivational behavior. To fully understand the common travel behavior better, further research conducted on wider range of variables is necessary.

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