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Health and Wellness Tourism in India

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Abstract : The intent of this paper is to perceive how factors such as Social Wellness, Emotional Wellness, Ayurvedha Treatment and Travel Motivation influence Customer Satisfaction of clientele in Chennai's Health and Wellness Tourism sector. The paper uses multivariate statistical techniques to decipher the motive behind the utility of Health and Wellness Tourism. The results of the SEM show a very strong relationship between the dependent and independent variables. The independent variables are Social Wellness, Emotional Wellness, Ayurveda Treatment. The dependent variables are Customer Satisfaction and Travel Motivation. This paper tries finding the relationship of tourism with wellbeing. New research is emerging on the relationships between tourism and subjective well-being .With this trend in other countries we researchers studied the aspect of wellbeing in our Indian conditions.

Keywords : Social Wellness, Emotional Wellness, Ayurveda Treatment, Travel Motivation, Customer Satisfaction.

1. INTRODUCTION

Travel and tourism is quite a substantial commercial industry in India. It is believed that the tourism division contributes to the nation's Gross Domestic Product (GDP) that develops at a rate of 7.8 percent yearly in the period 2013 – 2023. The Indian tourism sector has been prospering in the late years because of the enhanced travel facilities to and from the nation. The improving lodging facility for the tourist destinations has contributed to improve the Foreign Tourist Arrivals (FTA). Indian's travel and tourism industry is set to develop by around 73% in 2014. This year the contribution of tourism to the country's economy is expected to increase from 5.1% to 8.2% . The reasons behind this increase are expansion in the local travel, development of minimal cost airports and redesigning of air terminal base. Wellness tourism has developed in numerous nations, particularly in Asia. The development of wellness tourism is being accelerated with hike of healthcare costs in advanced countries and lack of proper health care facilities in the developing countries (Galloway, 2008).

- Health and Wellness tourism confers to around 6% (524.4 million) of all domestic and international travel.
- The tourists who try to maintain wellness while voyaging (optional reason wellbeing explorers) shows 87% of wellness tourism travel and 86% of consumption.

- Wellness travel is anticipated to develop by more than 9% every year by 2017.
- Health tourism provide 11.7 million direct employment opportunities, imparting \$1.3 trillion of worldwide monetary benefits (1.8% of worldwide GDP in 2012).

2. REVIEW OF LITERATURE

The researcher attempted to discover likenesses in American and European understanding of wellbeing (**Muller and Kaufmann 2000**). They advocated that wellness is a condition where there is concordance of body, psyche and soul. Self duty, physical wellness, excellence care, sound nourishment, unwinding, contemplation, mental movement, training, ecological affectability, social contacts, and others are characterized as essential components which contribute towards the general wellbeing and health. The wellbeing and health tourism is a subset of restorative tourism. The researcher has proposed that the expression “Restorative Wellness” can be utilized to by one means or another coordinate the ideas of Health and Wellness – therapeutically administered program intended to roll out particular improvements to way of life which can accomplish the ideal wellbeing(**Verband 2008**),.

This research was based on the Jan Montague (1994) on Whole Person Wellness Model.

3. PROPOSED RESEARCH MODEL

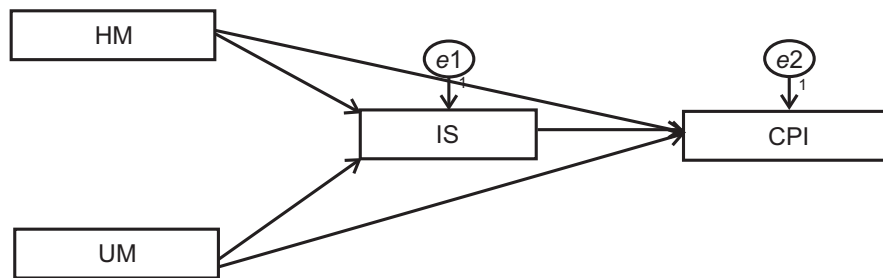


Figure 1: Shows the proposed research model

Emotional Wellness

The researcher has characterized emotional wellness as one’s level of sorrow, nervousness, prosperity, self control, and idealism (**Renger et al. 2000**). From a proactive perspective, emotional wellness mirrors one’s capacity to experience fulfillment and interest, happiness in life, and having the capacity to anticipate the future with a positive view. This characterization has been accepted by the travelers.

H1: The emotional wellness dimension positively influences the customer satisfaction

Social Wellness

Social wellness envelops the degree and nature of connections with others, the group, and nature. It incorporates the degree to which a man works towards supporting the group and environment in ordinary activities including volunteer work effort (Commission on Social Determinants of Health, 2008). The Coexisting with others are being agreeable and willing to express one’s emotions, needs, and feelings; strong, satisfying connections closeness; and the cooperation with the social environment and the commitment to one’s group are incorporated into the definition of social wellness⁴.

H2: The social wellness dimension positively influences the customer fulfillment

Travel Motivation

The research has expressed that destination decision has been a vital viewpoint in tourism literature (**Papatheodorou 2006**),. There are different variables affecting the travel choices, a few of which are society, travel inspirations, accounts and past experiences (Ankomah, Crompton and Baker, 1996). The state that tourism is liable to an accumulation of impacts and elements that decide its relative conveyance (**Cooper and Hall 2008**), . Travel motivation shape a necessary piece of travel behavior and have been generally examined and connected in tourism marketing strategies.

H3: The travel motivation dimension positively influences the customer satisfaction

Ayurveda Treatment

The increased consumption of traditional medicines and medical plants in most of the developing nations is considered as the remedial specialists for the support of good wellbeing that has been generally observed (UNESCO (1996). Medicinal plants will be plants containing inborn dynamic ingredients used to cure ailment or to relieve pain **Okigbo, R N(2008)**. Ayurvedic treatment is gaining popularity because of the reduced prices they are offered at compared to the medicines currently being consumed for individual well being (**Lucy and Edgar1999**).

H4: The Ayurveda Treatment dimension positively influences customer satisfaction

Customer Satisfaction

The researcher has explored the perspective of tourists about Ayurvedic wellbeing tourism in Kerala (**Bindu 2009**). She also explored the level of satisfaction voyagers have with wellbeing tourism administrations and offices in the place. Utilizing component examination the researcher recognized destination scenery, medicinal services and ayurvedic products were the reasons why travelers are inclined to Kerala. According to her study the factors which influenced in improving satisfaction level of voyagers are reserving techniques, advancement and awareness creation, environment and prerequisite of Ayurvedic Resorts.

4. METHOD

Quantitative Research

The samples were selected using Simple random sampling from the list provided by tour operator offices in Chennai. The data were also collected from individuals as well. To collect from individuals a cloud application known survey monkey was used.

Data

The Cronbach's alpha (reliability coefficient) value for the rating scale was obtained using the SPSS package (21), and the survey was found to be 0.905 and 0.946 respectively. For each construct the Cronbach's alpha (reliability coefficient) values for Social Wellness are 0.774, Emotional Wellness is 0.748, Ayurveda Treatment is 0.798, Travel Motivation is 0.826, and Customer Satisfaction is 0.978. An alpha value above 0.7 indicates good reliability.

The table no.1 is shows the descriptive statistics of the variables used in the study. The variables have been spread which is shown in skewness and standard deviation.

Table 1
Descriptive Statistics of the variables

<i>Demographic Variables</i>	<i>Mean</i>	<i>Standard Deviation</i>	<i>Skewness</i>	<i>Kurtosis</i>
Social Wellness	14.0836	3.25614	-.680	1.106
Emotional Wellness	9.1855	2.53698	-.080	-.235
Ayurveda Treatment	13.0655	3.17772	-.515	-.513
Travel Motivation	27.9127	4.16446	-.284	.052
Customer Satisfaction	13.8073	3.28944	-.550	.841

Table 2
Confirmatory Factor Analysis

	<i>Constructs</i>		<i>Estimate</i>	<i>S.E.</i>	<i>C.R.</i>	<i>P</i>
SW 1	←	SW	1			
SW 2	←	SW	.852	.050	16.951	***
SW 3	←	SW	.384	.055	7.017	***
SW 4	←	SW	.211	.063	3.344	***
EW 1	←	EW				
EW 2	←	EW	1.151	.650	1.770	.077
AT 1	←	AT				
AT2	←	AT	1.163	.374	3.111	.002
AT 3	←	AT	2.020	.577	3.499	***
AT 4	←	AT	3.503	.979	3.578	***
TM 1	←	TM				
TM 2	←	TM	.841	.111	7.599	***
TM 3	←	TM	.425	.093	4.582	***
TM 4	←	TM	.690	.123	5.610	***
TM 5	←	TM	.920	.106	8.712	***
TM 6	←	TM	.230	.082	2.799	.005
TM 7	←	TM	.851	.123	6.932	***
TM 8	←	TM	.407	.118	3.437	***
CS 1	←	CS				
CS 2	←	CS	1.220	.097	12.618	***
CS 3	←	CS	.588	.065	9.074	***
CS 4	←	CS	.411	.073	5.657	***

Table 2 showing CFA

The data has been analysed in AMOS 21. The variables taken are confirmed using the Confirmatory Factor Analysis. The CFA helps the researcher to understand whether the variables represent the constructs and the construct is measured through these variables. CFA is one of the multivariate analysis. CFA is used by the researcher, to decide, whether to continue the research or reject the preconceived model which is created on the basis of the theory, CFA is a test to confirm the measurement theory which the researcher is going to research. In the proposed model of study, it is assumed that there are no cross loadings.

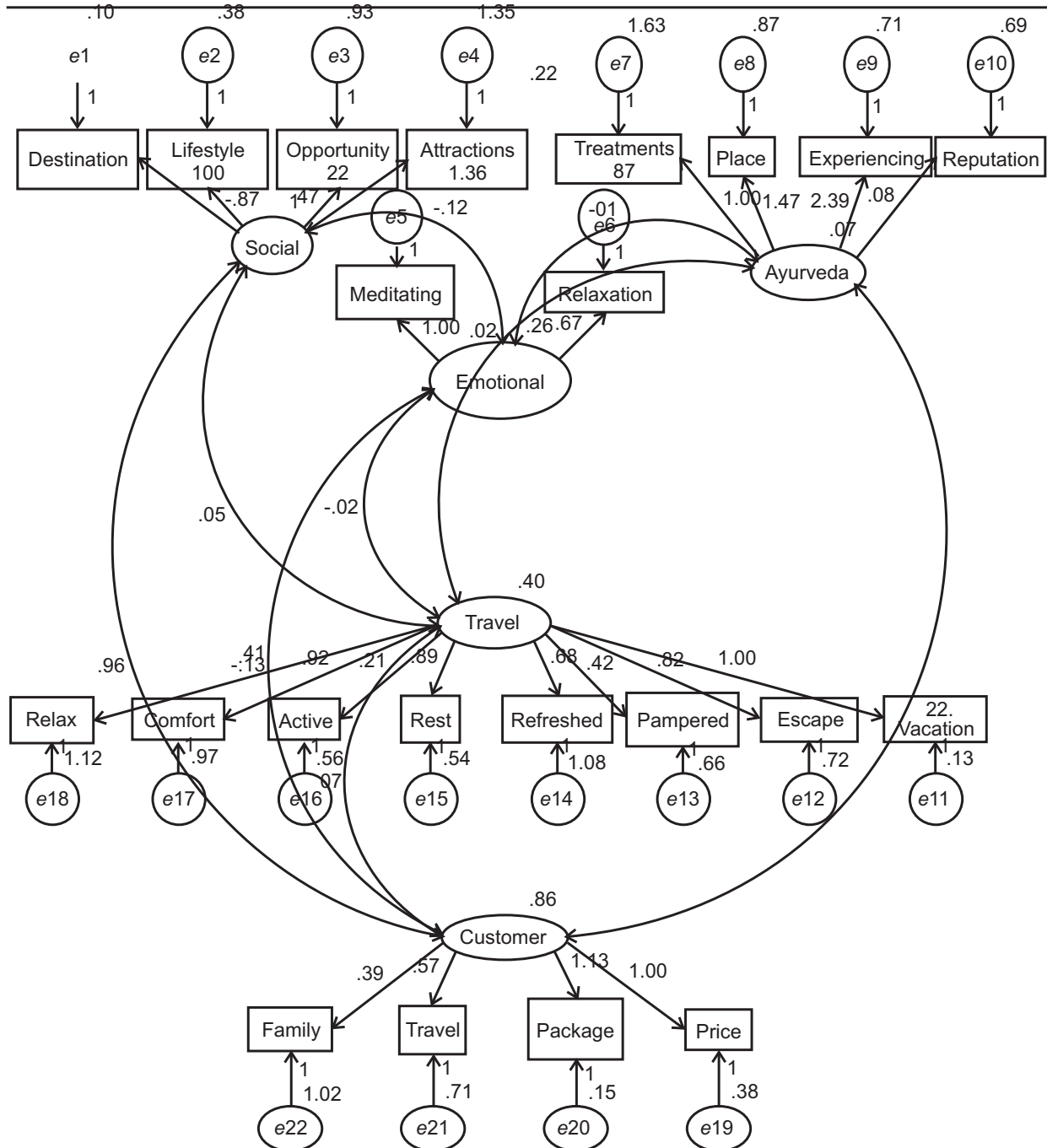


Figure 2: Confirmatory Factor Analysis

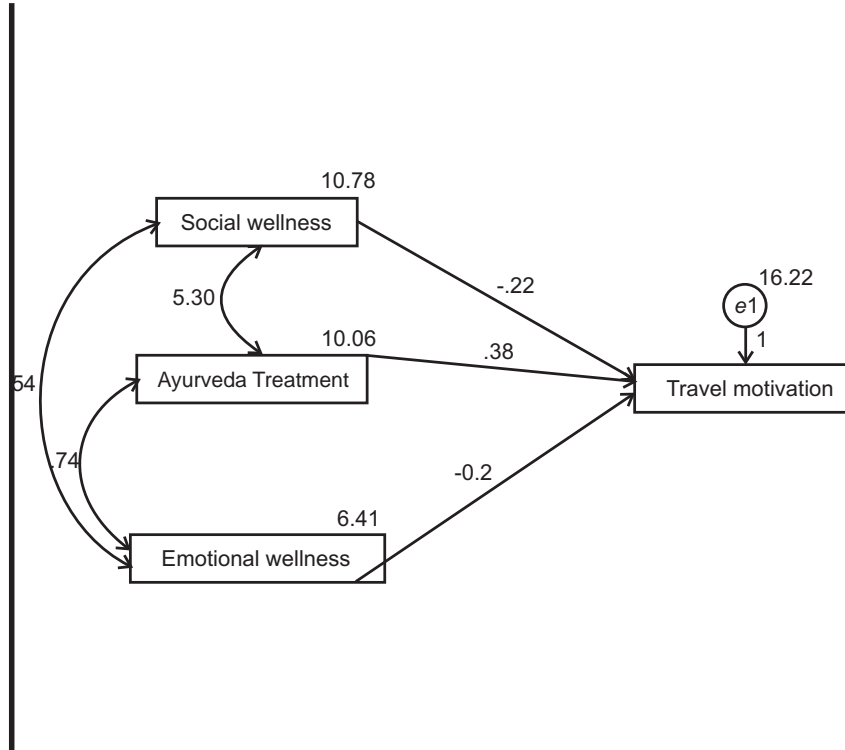


Figure 3: Regression Model without Mediating Factor Customer Satisfaction

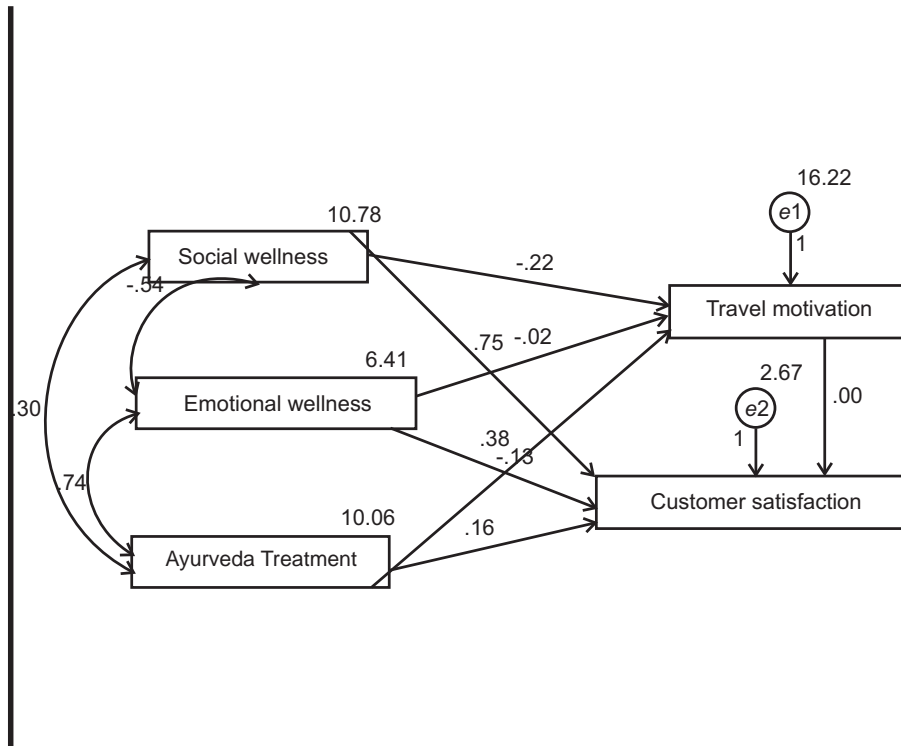


Figure 4: Regression Model of the Structural Equation Model with Mediating Factor

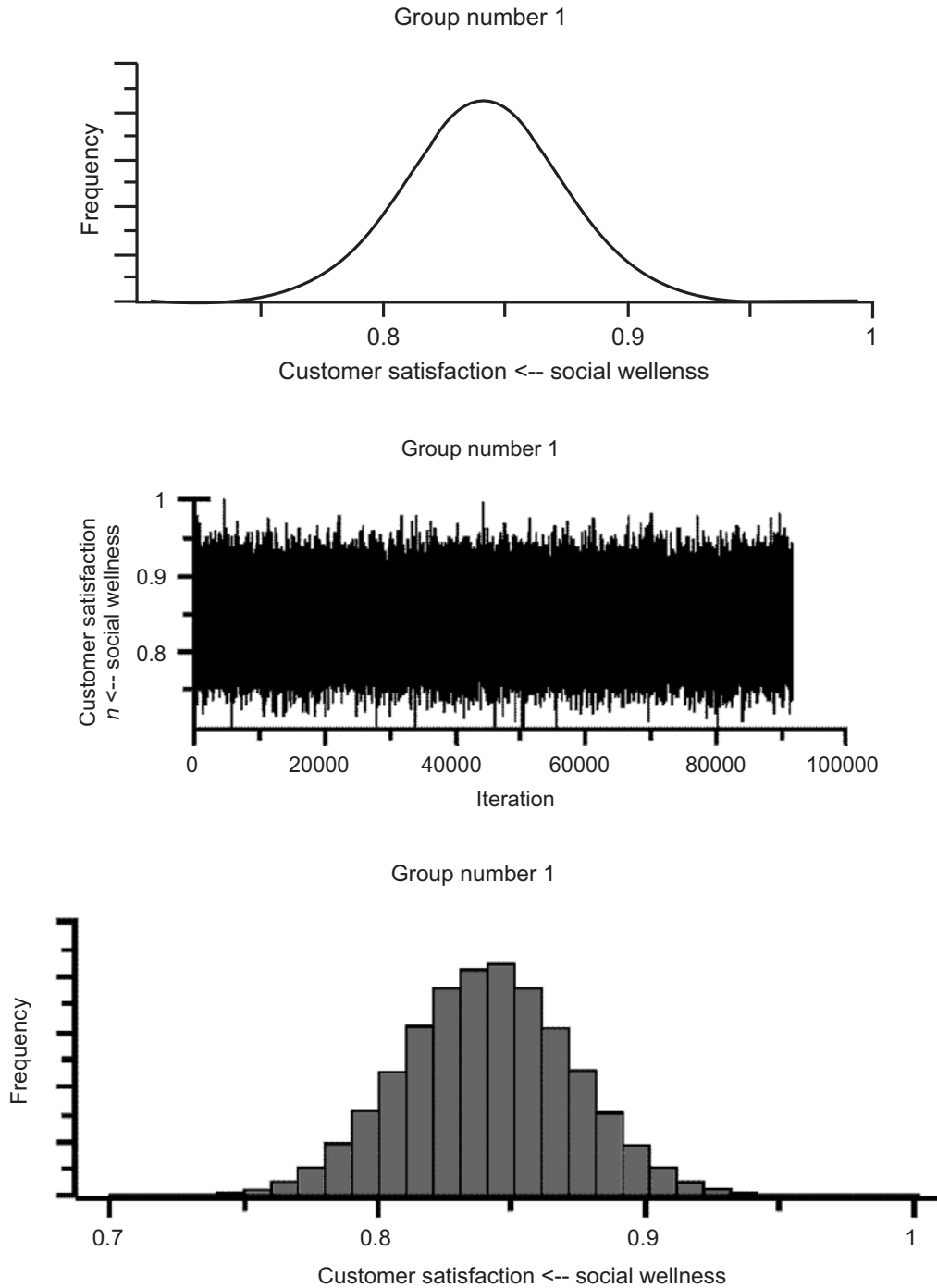


Figure : 5, 6, 7 Posterior Diagnostic Plots of Regression Model

Structural Equation Model

To test the conceptual model, a confirmatory factor analysis(CFA) using structural equation modeling (SEM) is done after identifying potential model that best explains the data in terms of theory and model fit. Every test of model invariance begins with a global test of the equality of covariance structure across groups.

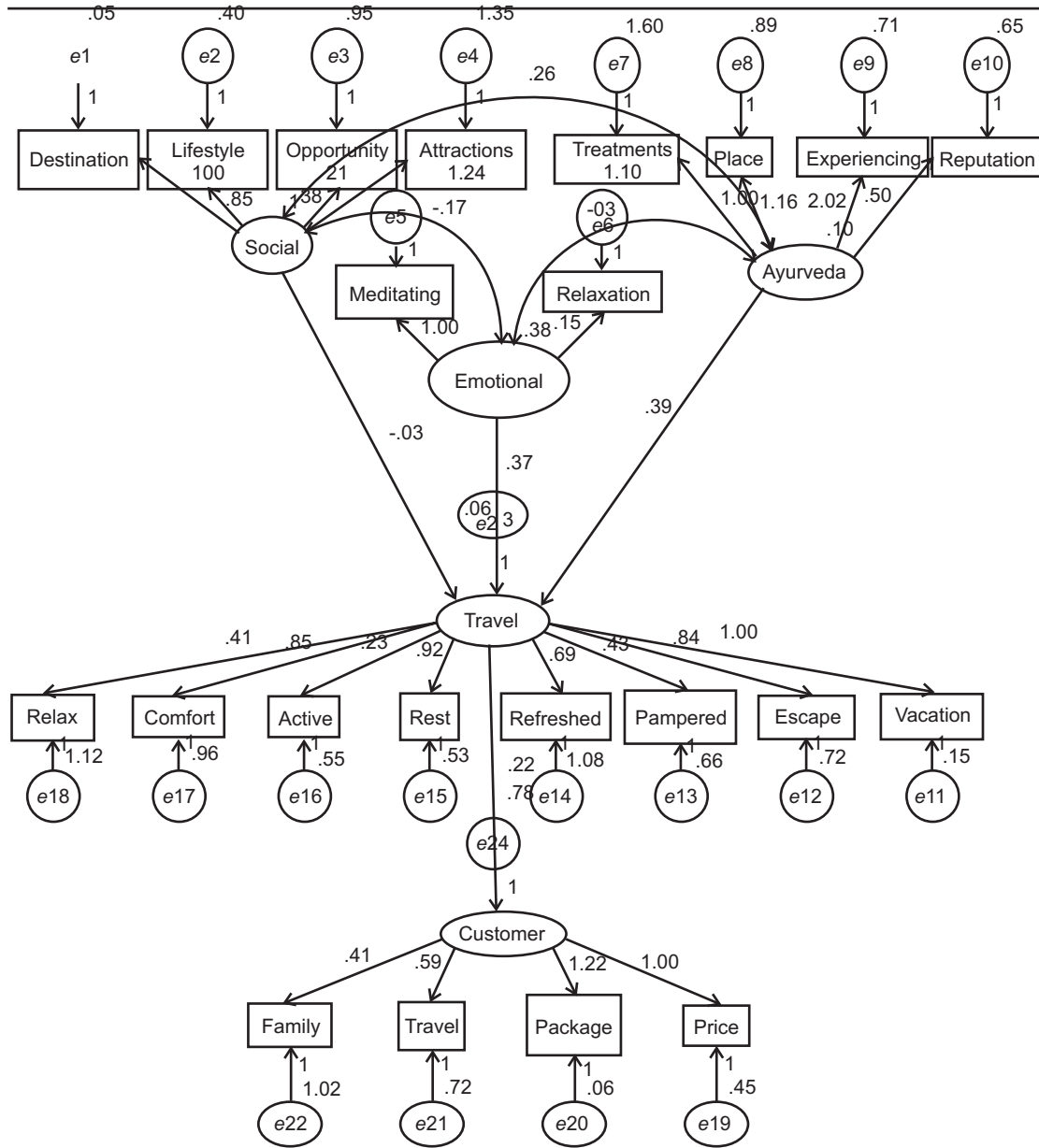


Figure 8: Showing the SEM for the proposed research model

Table 3
Showing the SEM values of significance

Path	Estimate	S.E.	C.R.	P	Result
TM ← SW	-.223	.087	2.565	.010	Significant
TM ← AT	.376	.090	4.174	***	Significant
TM ← EW	-.019	.097	.199	.002	Significant
CS ← SW	.755	.035	21.410	***	Significant
CS ← AT	.163	.037	4.465	***	Significant
CS ← EW	-.125	.040	-3.167	.002	Significant

Evaluation Of Model Fit

Several well-known goodness-of-fit indices are used to evaluate the model fit a few of which are listed below:

The standardized root mean square error residual – (SRMR).

The root mean square error of approximation – (RMSEA).

The Tucker–Lewis Index – (TLI).

The normal fit index – (NFI).

The unadjusted goodness-of-fit indices – (GFI).

The comparative fit index – (CFI).

The chi-square χ^2

Goodness-of-fit (GOF) indices provide concrete rules that help us to standardize cutoff values that support us to evaluate the data – model fit. **The researcher** recommends the use of combinations of GOF indices to obtain a robust evaluation of model fit. The criterion values that serve as a benchmark for a model to be considered a good fit are CFI > 0.90, TLI > 0.90, RMSEA < 0.08, and SRMR < 0.08 for assessing fit in structural equation modeling. Moreover, some researchers^{36,37} believe that these cutoff values are too rigorous. The results by **a researcher** has limited the general ability of this cut – off values due to the levels of misspecification experienced in pragmatic situations. Thus Multiple fit indices should be used to assess goodness of fit like the χ^2 and the χ^2 / df is Normed Chi-square. Normed Chi square value is 2.195. Any value between 2.195 and 5 is acceptable. *Hair et al, (2010)* states that Goodness of fit index (e.g., GFI, CFI, NFI, TLI) and one badness of fit index (e.g., RMSEA, RMSR) are evaluated to generally accept the model fit. In general, a “good enough” or “rough guideline” approach is used then the cutoff values of absolute fit indices and incremental fit indices (such as CFI, GFI, NFI, and TLI), should be above 0.90 (0.90 benchmark) and for fit indices based on residual matrix (such as RMSEA and SRMR), values below 0.08 are usually considered adequate. Analysis was done using AMOS.

Chi square is the statistical measure in SEM that helps quantify the differences between the covariance matrices. When GOF measure is used, the comparison is between observed and predicted covariance matrix of the constructs.

From the results it can be seen that RMSEA fit statistics for the model was 0.076, which lets us conclude the model can be considered fit.

Summary Of Goodness Of Fit Statistics And Other Values Corresponding To The Health And Wellness Tourism Mediated Structural Equation Model.

5. DISCUSSION

The constructs in the model (social wellness, emotional wellness, ayurveda treatment and travel motivation) are concluded to be significant and impact customer satisfaction. The social wellness is a critical factor (0.755) in determining the customer satisfaction. It is perceived by the vast majority that for the longevity of life, general satisfaction plays a vital role for relaxation which can be achieved by devoting time for wellness, sport, and different health exercises. Financial specialists are observing this trend and are attempting to correlate wellness and work rate efficiency.

India is a hub for alternative medicines such as – Ayurveda, Yoga Unanai, Homeopathy, Siddha, and Acupuncture. India has established herbals and other possible treatments. India is improving in the Integrated pharmaceutical industry.

The inclusion of packages that help in rejuvenation and re-energization is a necessity in treatment vacations.

Table 4
The Goodness of Fit Statistics for SEM Model

<i>S. No</i>	<i>Measures of fit</i>	<i>Output of Research Model</i>	<i>Acceptable Level for good fit</i>
1.	Chi-square (χ^2) at p 0.05	2169.009	Significant
2.	Degree of freedom (<i>d. f</i>)	202	
3.	Normed χ^2	2.195	< 2 good: 2–5 acceptable
4.	Comparative fit index (CFI)	.393	>0.90
5.	Bentler – Bonett Index or Normed Fit Index (NFI)	.375	>0.90
6.	Root mean squared error of approximation (RMSEA)	0.058	<0.08
7.	Non Centrality Parameter (NCP)	2120.356	–
8.	Non Centrality Parameter, Lower boundary (NCPLO 90)	.328	–
9.	Parsimony adjusted NFI (PNFI)	.343	–
10.	Parsimony adjusted CFI (PCFI)	0.795	–
11.	Minimum value of Discrepancy	0.865	–
12.	Lower Limit of FMIN (LO 90)	1821.056	–
13.	Upper limit of FMIN (HI90)	2120.356	–
14.	Browne–Cudeck Criterion (BCC)	2280.356	–
15.	ECVI	8.288	–
16.	LO90	7.756	–
17.	HI90	8.848	–
18.	MECVI	8.322	–
19.	HOELTER.05	65	<= 75
20.	HOELTER.01	205	At least 200

6. CONCLUSIONS

The findings indicated that Health and Wellness tourism is indeed a very suitable tourism in Chennai considering the climate, geography, and infrastructure. The current findings show that there are emerging younger group less than 30 years are health conscious.

The Health and Wellness market also evolved among professionals who perceive it as de stress. This study suggests that marketing strategies for Health and Wellness tourism in Chennai should focus on the individual tourist health related needs and wants. As relaxation and pampering are the significant motivational factors for Health and Wellness tourists the Health and Wellness providers should position their centers based on the relaxation attributes that may stimulate a relaxing mood throughout their Health and Wellness experiences – the atmosphere/environment, lay out and decoration, the trained staff members, and Health and Wellness treatments.

The necessity to detect effective ways to espouse and measure wellness as a means to prevent illness and help target populations in staying healthy and improving their level of wellness is driven by booming health costs. The social wellness, travel motivation and ayurveda treatment inventory illustrated in the study have provided cogent reliability and validity. The study requires the use of more qualitative assessments to apprehend

the depth of wellness and its measures. This in depth comprehension will help in analyzing what assists people to stay well. The measurement tools used in the study considers the dynamic nature of wellness, allows socio-cultural aspects to be part of measurement considerations. The factors examined under the wellness dimensions qualify for the nuances of lifestyle, cultural differences, differing communities, levels of education and more. To provide more reliability, many existing tools are revised. Evaluation studies are essential to determine which measurement tool is most effective. The study of factors that make population well is becoming necessary due to increase of health care costs and prevalence of lifestyle diseases in people. A crucial step in generating policies that help communities to define what wellness is. This definition helps determine the factors that make up a healthy individual who is supported by communities and aid society as a whole. To raise India from mediocre population health profile, public health policies should be improved. The study also shows that emotional wellness and positive psychology is important in reducing stress and having better health. The examination of well being dimensions from a socio cultural perspective is necessary according to the study.

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