# TABLE OF CONTENTS

004 :: FOREWORD

007 :: SECTION I: INTRODUCTION

008 :: 1. SPA AND WELLNESS TOURISM AND POSITIVE PSYCHOLOGY

030 :: 2. HEALTH, SOCIABILITY, POLITICS AND CULTURE: SPAS IN HISTORY, SPAS AND HISTORY

041 :: 3. A GEOGRAPHICAL AND REGIONAL ANALYSIS

059 :: SECTION II: CASE STUDIES

060 :: 4. TOWN OR COUNTRY? BRITISH SPAS AND THE URBAN/RURAL INTERFACE

076 :: 5. SARATOGA SPRINGS: FROM GENTEEL SPA TO DISNEYFIED FAMILY RESORT

087 :: 6. FROM THE MAJESTIC TO THE MUNDANE: DEMOCRACY, SOPHISTICATION AND HISTORY AMONG THE MINERAL SPAS OF AUSTRALIA

111 :: 7. HEALTH SPA TOURISM IN THE CZECH AND SLOVAK REPUBLIC

128 :: 8. TOURISM, WELLNESS, AND FEELING GOOD: REVIEWING AND STUDYING ASIAN SPA EXPERIENCES

147 :: 9. FANTASY, AUTHENTICITY, AND THE SPA TOURISM EXPERIENCE

165 :: SECTION III: CONCLUSION

166 :: 10. JOINING TOGETHER AND SHAPING THE FUTURE OF THE GLOBAL SPA AND WELLNESS INDUSTRY
RELAX MORE DEEPLY
WITH THE FULL TEXT OF THESE TITLES

USE DISCOUNT CODE SPA20 TO GET 20% OFF THESE ROUTLEDGE TOURISM TITLES

ROUTLEDGE TOURISM
Visit Routledge Tourism to browse our full collection of resources on tourism, hospitality, and events.

›› CLICK HERE
FOREWORD

HOW TO USE THIS BOOK

As more serious study is devoted to different aspects of the global spa industry, it’s becoming clear that the spa is much more than a pleasant, temporary escape from our workaday lives. Indeed, the spa is a rich repository of historical, cultural, and behavioral information that is at once unique to its specific location and shared by other spas around the world.

We created Health and Wellness Tourism: A Focus on the Global Spa Industry to delve further into the definition of what constitutes a spa, and showcase different perspectives on the history and evolution of spa tourism. This topic is one that should hold interest for many readers, from scholars of the subject to more casual spa-goers, and will shine light on our understanding of health and wellness across geographical borders and throughout history.

In organizing this collection of excerpts—curated from six of our top titles in this subject area—our goal was to first provide you with an overview of the issues at stake in the scholarship being done on the global spa industry, and then to take a more focused look at specific examples of spas and their roles in different eras and regions (among them the UK, the US, and Asia). The case studies we’ve included should give you a sense of the way in which the study of a spa transcends itself and ultimately opens up questions relating to socio-economics, national identity, psychology, and much more.

We encourage you to sit back and relax while reading Health and Wellness Tourism and create your own spa experience, whether you’re at home, in your office, or soaking your feet in a remote, tropical locale. And if that’s not enough, remember that you can always relax even further with the full text of any of the books excerpted here.

SECTION I - INTRODUCTION

The three chapters that make up the introduction to Health and Wellness Tourism spotlight the ways in which the study of the global spa industry opens up when examined through different perspectives, and also opens up further avenues of study.

In our first chapter, Philip Pearce, Sebastian Filep, and Glenn Ross endeavor to apply insights from positive psychology to the study of spa tourism. Looking specifically at issues of motivation and well-being, the authors attempt a relatively new course of study by looking at this subject through a perspective informed by medical science. Our second chapter, written by John K. Walton, complements this first one by
considering spas from a historical point of view, and illustrates how the evolving notion of the spa throughout history raises questions dealing with issues such as colonization, class issues, and economic systems, among other things.

Chapter three, an excerpt from *Health, Tourism and Hospitality*, serves as a good transition into the case studies that follow in Section II, and provides an overview of the defining characteristics of different spas around the world. This virtual tour of the global spa industry demonstrates the importance of geographical considerations when looking at the global spa experience, and gives readers a glimpse into the more practical aspects of the spa phenomenon.

**SECTION II - CASE STUDIES**

In this series of case studies, we take a look at examples of spas in regions spanning almost every continent.

In chapter four, Peter Borsay draws a parallel between the ambiguous role of the spa in Great Britain and the country’s own uncertainty about whether its identity is more town or country during the 19th century. Chapter five takes us to Victorian-era spa town Saratoga Springs, and identifies what elements of it were kept in Disney’s nostalgia-themed resort of the same name. In so doing, author Gary Cross gives us an idea of how a modern U.S. resort compares to the spas of a more genteel time.

Chapters six and seven both take on questions of national identity and difference. Richard White does so in chapter six by examining the tension between tourists’ desire to experience national cultures while being at a spa, a location he characterizes as “distinguished...by an elite cosmopolitanism”. Two former Soviet states take the lead in chapter seven, in which Halina Kotikova and Eva Schwartzhoffova examine the role spas play in the burgeoning medical tourism industry that has developed in the Czech and Slovak Republics in the post-Communist era.

The final two case studies in this section focus on making sense of the benefits of spa tourism. Jenny Panchal harkens back to the introduction of *Health and Wellness Tourism* by taking up the lens of positive psychology. Unlike the earlier chapter, however, chapter eight seeks to apply positive psychology to Asian spas specifically in order to determine whether spa activities can be beneficial to the wellness of tourists. And in chapter nine, Jennifer Laing, Cornelia Voigt, and Warwick Frost explore the seemingly-contradictory elements of fantasy and authenticity so prevalent in the spa experience to answer similar questions.
SECTION III - CONCLUSION

Our conclusion casts a brief look back into the recent past, looking specifically at the establishment of the Global Spa and Wellness Summit in 2007. From there, chapter authors Melanie Smith and Laszlo Puczko turn their gaze forward to speculate on what the future looks like for the global spa industry.

In compiling these excerpts, we made an effort to retain the citation method used in the original work.
SECTION

INTRODUCTION
CHAPTER 1

SPA AND WELLNESS TOURISM AND POSITIVE PSYCHOLOGY
There are contested origins and definitional dilemmas in considering both the topic of spa tourism and the concept of wellness. For the term spa, the most common origin is traced to the widespread extension of the name of the Belgian town Spa (Smith, 2009b). This destination still provides a notable example of the use of waters and bathing for health and pleasure. It emerged as a location of significance in the fourteenth century (Altman, 2000). The Romans provided the original name for the town undoubtedly due to its abundant watery attractions since in Latin the noun *espa* means fountain and the verb *spargere* means to bubble forth. The healing qualities of water were well known to ancient civilisations, especially the Romans, so both linguistically and in terms of the way the resource was used, spas are firmly rooted in early European history (van Tubergen and van der Linden, 2002). Nevertheless, the practice of taking the waters or bathing for a combination of health and leisure purposes is undoubtedly not restricted to Europe but extends globally. Asian traditions of communal bathing in mineral springs and spas are also historic and ongoing. In China, India, Korea and Japan in particular, there is a long history of bathing for relaxation and cleanliness (Erfurt-Cooper and Cooper, 2009).

Forty-nine different kinds of contemporary spa types are listed by Erfurt-Cooper (2009). A small sample of these reveals some redundancy of terms and the resourceful efforts of marketers to identify special offerings. The terms include day spas, club spas, family spas, fertility spas (possibly these precede the family spas), hot spring spas, ecospas, mineral springs spas, hotel spas, wellness spas, holistic spas and seaside spas.

The diversity of types of spas is almost matched by the array of definitions concerning wellness. Some indication of the difficulty inherent in constructing an adequate account of wellness may be obtained by considering its nearest common antonym, that of sickness. It is useful to consider the comparisons between the two states.

German researchers reject the commonly cited origins of wellness as outlined in the work of the North American research Herbert Dunn since they claim that Europeans widely used the term before its transatlantic use (Dunn, 1961; Erfurt-Cooper and Cooper, 2009). Nevertheless, some agreement about wellness does seem to exist across continents with key principles of wellness being that it is subjective and perceptual, multidimensional and underpinned by models of balance or compensation (Smith and Puczko, 2009: 54–57). The wheel of wellness which Smith and Puczko derive from their overview of other studies specifies emotional, spiritual, intellectual, social, physical and vocational wellness components. It is suggested that studies of wellness, and that includes wellness tourism, should be oriented towards explaining the positive components of human existence rather than simply the absence of the negative. Wellness then may be explained by some of the same dimensions as applied to sickness but it is not the simple absence of the latter.
Wellness tourism must consider both experiential elements and incorporate the travel and experiential product components of a burgeoning industry sector in any full definition of the term. Bushell and Sheldon (2009) offer the following:

Wellness tourism is a holistic mode of travel that integrates a quest for physical health, beauty or longevity, and/or a heightening of consciousness or spiritual awareness, and a connection with community, nature or the divine mystery. It encompasses a range of tourism experiences in destinations with wellness products, appropriate infrastructures, facilities, and natural and wellness resources. (2009: 11)

While this definition is long and inclusive, there are some troubling elements in this approach. As Winchester (1998) reports in discussing the history of the Oxford English Dictionary:

Defining words (terms) properly is a fine and peculiar craft. There are rules—a word must first be defined according to the class of things to which it belongs and then differentiated from other members of that class. There must be no words in the definition that are more complicated or less likely to be known than the words being defined. (1998: 134)

Bushell and Sheldon’s efforts do not seem to indicate a very tightly defined class of experiences and emotional states. A second troubling concern is that the definition uses other terms within the defining sentences which are themselves not clear. Three terms in particular might be singled out for attention: holistic travel, heightening of spiritual awareness and the divine mystery. Finally, their approach does not consider the issue of participant awareness; that is, do travellers have to know they are involved in something called wellness tourism which exists on several levels or is wellness tourism simply an imposed, etic label describing what tourists are already doing?

Other definitions emphasise more psychological components. Myers, Sweeney and Witmer (2005) suggest an all-embracing approach where wellness tourism is a way of life which is directed to well-being in mind, body and spirit, and its consequences assist people to live within their natural and social context. Erfurt-Cooper and Cooper cite a definition from the University of Berne which states that wellness tourism is the “sum of all the relationships and phenomena resulting from a journey and residence by people whose main motivation is to preserve or promote their health” (2009: 8).
The implication of these definitional concerns can be specified as follows. Firstly it is unfair to castigate any research team for their efforts since definitions always have to be viewed within a structure of the purpose and approach of the authors. The present interests make the authors lean towards a motivationally-based definition since the expressed aim of this chapter is to consider in some detail the driving psychological forces generating wellness and spa tourism. Indeed, it can be suggested that in new areas of research, and wellness tourism is not yet full of classical studies, it is desirable that researchers spell out exactly what range of human needs, products and services they are considering. In this way a cumulative and integrative understanding of the phenomenon can be built through a combination of refining definitions and providing evidence of visitor and managerial activity.

In this chapter, two topics will be explored—motivation and the experiential components of well-being. These two concerns offer the possibility of forging new insights into spa and wellness tourism which are defined here as the broad array of services and experiences people purposefully seek while travelling to foster all forms of their health and happiness.

MOTIVATION

It was the work of those studying “dynamic psychology” that first popularised the study of motives and began constructing extensive lists of needs [Boring, 1950: 692]. Dynamic psychology, to the extent that it continues in alternate forms and under other labels, was and is an attempt to predict people’s behaviour from a core understanding of human nature. Dynamic psychology has antecedents in hedonism, and the work of Freud represents just one branch of its multiple approaches to capture the roots of purposeful behaviour. The contributions of Henry Murray and Kurt Lewin are of the greatest interest in assessing the continuing contribution of the early psychology researchers.

The importance of Lewin and Murray in this account of dynamic psychology lies in their focus on the socio-cultural needs of individuals. While motivation has been recognised for some time as the sum of biological and cultural forces which drive behaviour (cf. Boring, 1950), the task of inventing a language and definitions of socio-cultural needs has been the hardest part of the formulation. Compared to the basic biological drivers of food, drink, sex, physical shelter and safety, socio-cultural needs must admit international variability and interpretation.

In motivational theories, biological needs are sometimes also referred to as instincts
since very specific physical reactions and localised parts of the old brain are implicated in the operation of these forces (Greenfield, 2000). While McDougall and others happily used the term *instincts* to try to describe the nonbiological forces shaping behaviour, it became apparent that this concept was too mechanistic to allow for the subtlety of social and cultural forces. In Murray’s system, the term *need* was employed and in Lewin’s work the term *tension* was used. The concept of need is the one which has survived best. A need, Murray suggested, is characterised by its effect, not by the particular movements which may accompany it. Needs are directional because they aim at effects or outcomes. The achievement of the effect abates or diminishes the power of the need, at least temporarily. As an example, the need to affiliate with others is directional because it pushes individuals to seek the company of others and socialise. The need, then, is not to go to a party or have a drink or meals with others but it is the goal (effect or outcome) which, in this instance, is being with others which dispels the urgency of the need. Expressed in this way, needs should be reserved for the smaller class of driving socio-cultural forces which can be realised in multiple ways.

Murray in particular was content to describe many socio-cultural needs but other psychologists tried to be more succinct. It is important to reflect that much of this psychological inquiry was directed at understanding the way personality was shaped and those analysts and clinically minded researchers were often intent on describing unusual features of individual functioning. It is, though, worth recording some of these itemised needs since it is against this background of a smorgasbord of socio-cultural drivers that the work of Maslow and later humanistic psychologists foreshadowing positive psychology interests can be understood. Table 7.1 provides some of these identified needs.

Many tourist motivation studies borrow and reuse one of the major uni-dimensional needs such as anxiety or arousal. As demonstrated in Table 7.1, there are plenty of seemingly interesting needs to consider. Given the lengthy compilations of needs illustrated, it is perhaps easier to appreciate why Maslow constructed a hierarchy of needs as he examined the lives and personalities of successful people (Maslow, 1954). The questions Maslow faced in dealing with human motivation were more acute than many of his predecessors who were seeking to trace the origins of particular kinds of dysfunctional human frailties. Maslow was interested in the development trajectories of successful citizens and required an integrative approach to organise the needs he detected in his interviews and assessments. It was from this basis that he developed a fluid hierarchy of needs. It was not a fixed step-ladder of accumulating and achieving goals as some have imagined (Rowan, 1998) but an
TABLE 7.1 A SAMPLE OF NEEDS IDENTIFIED IN PSYCHOLOGY WRITING AND RESEARCH

<table>
<thead>
<tr>
<th>Theoretical Approach</th>
<th>Theorist/Researcher</th>
<th>Motives or needs emphasised</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychoanalytic theory</td>
<td>Sigmund Freud</td>
<td>sex; aggression; emphasis on unconscious needs</td>
</tr>
<tr>
<td>Psychoanalytic approach</td>
<td>Carl Jung</td>
<td>arousal; creativity and self-actualisation (development and growth)</td>
</tr>
<tr>
<td>Modified psychoanalytic</td>
<td>Alfred Adler</td>
<td>competence; mastery to overcome incompetence</td>
</tr>
<tr>
<td>Modified psychoanalytic</td>
<td>Harry Stack Sullivan</td>
<td>acceptance, love</td>
</tr>
<tr>
<td>Modified psychoanalytic</td>
<td>Karen Horney</td>
<td>control anxiety; acceptance, love and security</td>
</tr>
<tr>
<td>Learning theory</td>
<td>Clark Hull</td>
<td>tension reduction and management</td>
</tr>
<tr>
<td>Trait theory</td>
<td>Gordon Allport</td>
<td>repealing intrinsically satisfying behaviours</td>
</tr>
<tr>
<td>Social learning theory</td>
<td>Albert Bandura</td>
<td>self-efficacy or personal mastery</td>
</tr>
<tr>
<td>Social approaches</td>
<td>David McClelland, John Atkinson</td>
<td>achievement</td>
</tr>
<tr>
<td>Humanistic</td>
<td>Carl Rogers</td>
<td>self-development</td>
</tr>
<tr>
<td>Humanistic</td>
<td>Abraham Maslow</td>
<td>hierarchy of needs, from physiological needs to safety needs to love and relationship needs to self-esteem to self-actualisation</td>
</tr>
<tr>
<td>Cognitive approaches</td>
<td>David Berlyne</td>
<td>curiosity; mental stimulation</td>
</tr>
<tr>
<td>Ethogenic (social and philosophical)</td>
<td>Rom Harre</td>
<td>respect and avoid contempt of others</td>
</tr>
<tr>
<td>Sociological theory</td>
<td>Stanley Cohen, Laurie Taylor</td>
<td>escape; excitement and meaning</td>
</tr>
<tr>
<td>Personal construct theory</td>
<td>George Kelly</td>
<td>predict and explain the world; control</td>
</tr>
<tr>
<td>Humanistic approach</td>
<td>Mikhail Csikszentmihalyi</td>
<td>peak experiences</td>
</tr>
</tbody>
</table>

...attempt at the layering of key needs as patterns of development in successful lives. Most importantly, the lower level needs do not disappear from the individual’s frame of motivational influences as some bowdlerised textbook versions seem to suggest, but instead remain a continuing force on which other patterns of needs are built and constructed.

In making the transfer between motivations as studied in psychology and motivation as applied to tourist behaviour, there are some issues for scholars to consider. Initially it is important to remember that the institution of tourism, like leisure, is one of those mixed public–private sector social constructions which permits individuals some freedom to choose how to spend their time and money. It thus becomes a likely venue for the expression of well-being and an embodied performative opportunity to enhance one’s sense of life satisfaction. Participating in tourism can be started at...
almost any age and, equally, discontinued at any point in the life cycle. The experience of being a tourist tends for most people to be discontinuous with intervening periods of work, study or other leisure pursuits. Additionally, in most instances the experiences from one holiday period to the next tend to vary, particularly if there is a change of venue, companions and style of travel. The influence of close relationships in particular can be a powerful moderator of individual motivation in tourism experiences.

A further defining characteristic of tourist motivation is that it needs to be cast within a framework of considering preferred future states for individuals. More specifically, many tourists aim to extend and embellish their worlds through the tourism experience rather than simply return their existence to a previous steady state. The implications of these characteristics of tourism are important for the study of tourist motivation. The episodic, dynamic, relationship-dependent, future-oriented and varied experiences imply that there is likely to be a complex pattern of learning about being a tourist and what satisfies the individual. Tourism experiences and the motivations which drive them are perhaps more like a series of separate affairs rather than a stable and continuous relationship. Further, the career trajectories in tourism may be more complicated than those in leisure where the concepts of specialisation and consumer involvement have been useful explanatory devices. Whereas tourists may become specialised in their travel interests and preferences, there is also the obvious perspective that different locations provide an array of new experiences and prompt a multilateral expansion of interests and needs. Loyalty or intention to revisit a style of tourism may be transferred to similar but novel opportunities rather than closely linked to exactly the same provider or destination.

A consideration of these distinctive tourism features requires the articulation of a special set of conceptual requirements for the development of a motivational approach to tourism. Seven key requirements for a good conceptual scheme or theory of tourist motivation have been outlined in previous work [Pearce, 1993]. These requirements integrate the discussion about the distinctive characteristics of tourism and the legacy of psychology inquiry concerning motivation and its role in shaping personality. The seven requirements are presented in Table 7.2. They are supplemented by an eighth requirement drawn from a consideration of the role of positive psychology.

Assessments of the existing tourist motivation conceptual schemes indicate that the approaches differ in terms of satisfying the criteria set out in Table 7.2 [Hsu and Huang, 2008; Pearce, 1993]. The principal schemes to be considered include the
psycho-centric–allocentric dimensional approach of Plog, the travel career pattern work of Pearce and colleagues, the arousal-based approaches identified with the work of Iso-Ahola and Mannell, contemporary versions of the push–pull approach typified by the studies of Uysal and colleagues, and the expectancy value approaches which has been claimed recently as an additional way to view tourist motivation (Correia and Moital, 2009). Each approach has certain strengths but arguably all require fine tuning and further development to meet all the criteria identified. In a previous detailed assessment of these schemes according to seven of the eight criteria outlined in Table 7.1, it was noted that the travel career ladder approach had some advantages in terms of fulfilling more of the criteria specified than other approaches (Goeldner and Ritchie, 2002; Pearce, 1993). In particular, it offered

### TABLE 7.2 REQUIREMENTS FOR A CONCEPTUAL SCHEME TO UNDERSTAND TOURIST MOTIVATION

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>It functions as a theory</td>
<td>The motivation theory must integrate existing tourist needs that have been described in previous studies. It should organise the known needs and provide a new orientation for future research.</td>
</tr>
<tr>
<td>It appeals to different users</td>
<td>The motivation theory must appeal to several different groups, including specialist researchers investigating tourist behaviour and market researchers designing survey questions.</td>
</tr>
<tr>
<td>It is easy to communicate</td>
<td>In order to appeal to researchers, market survey workers and even tourists, the motivation theory should be easy to explain. A perspective which is limited to one country or one class of customers is likely to be of little international appeal.</td>
</tr>
<tr>
<td>It suggests ways to measure motivation</td>
<td>Some theories in social science, while they make sense and can be communicated readily, fail to influence other researchers because they offer no guidelines or suggestions as to how they can be measured or tested with data. The motivation theory must be amenable to practical study, and its ideas capable of being translated into questions and responses for assessment purposes.</td>
</tr>
<tr>
<td>It allows for many motives</td>
<td>The motivation theory must accommodate the view that travellers seek to satisfy several needs at once, rather than having just one goal, such as “to escape”. It is likely that one or two motives may be dominant in an individual’s desire to visit a specific location, but ideally the theory should be a multi-motive one, providing a pattern or tapestry of motives rather than focus on one need.</td>
</tr>
<tr>
<td>It is dynamic</td>
<td>Both individuals and societies change over time, and the motivation theory must have enough subtlety to monitor changes in groups and individuals. As with the issue of multiple motives, the need is for a theoretical formulation which accommodates an overall pattern of motives, rather than a single-issue approach.</td>
</tr>
<tr>
<td>It accounts for intrinsic and extrinsic motivation</td>
<td>The motivation theory should be able to detect that travellers are sometimes motivated by intrinsic, self-directed, self-satisfying needs, while at other times they respond to the opinions of friends, relatives and work colleagues.</td>
</tr>
<tr>
<td>It permits a future-oriented view of human striving</td>
<td>The motivation theory should incorporate items permitting the assessment of expanding or enhanced human potential and character strengths.</td>
</tr>
</tbody>
</table>
promise as better meeting the dynamic, multi-motive and intrinsic components of a
good tourist-motivation theory.

Since that assessment, the travel career pattern approach has been formulated as an
improved version of the travel career ladder approach (Pearce, Morrison and
Rutledge 1998). This extension prompted by the limitations noted by Ryan (1998) and
others has seen the earlier simple ladder approach rejected in favour of an emphasis
on patterning (Filep and Greenacre, 2007; Bowen and Clarke, 2009). Importantly the
new eighth criteria identified in Table 7.1 for a good tourist motivation theory is that
of having a clearer future oriented approach and suggests motivation schemes
should incorporate a breadth of items sensitive to the strivings of people for a better
life. This criterion is consistent with a positive psychology emphasis and the travel
career pattern model fits this requirement. The basis for this assertion lies in the
view that by emphasising a very wide range of motives drawn from an emic and then
a structured etic approach to drawing together all the relevant motivational needs,
the travel career pattern material effectively encompasses the kinds of humanistic
and positive psychology striving towards both eudaimonic and hedonic well-being.
This coverage of the range of social and cultural motives thus permits researchers
using the full fourteen motives of the travel career pattern approach [and the
underlying items which constitute these factors] to explore the important issues of
change, development and human growth over time.

The development and consideration of the travel career concept is chosen in this
chapter to further the understanding of motivation in relation to spa and wellness
tourism. There are several reasons for this choice. The approach does receive an
adequate rating according to the key criteria for a tourist-motivation theory even
though commentators have tended to suggest it is promising rather than complete
(Filep and Greenacre, 2007; Hsu and Huang, 2008; Ryan, 1998). Additionally, it is the
approach among those discussed which is most influenced by and matches the
positive psychology emphases.

SPA AND WELLNESS TOURISM MOTIVATION

Several kinds of evidence are permissible in determining the patterns of spa and
wellness tourism motivations. Some of this material is collected without any explicit
recognition that the assembled data can contribute to a patterned interpretation.
Additionally, this section will report some data collected specifically with the purpose
of showing how the reasons for attending spas and participating in wellness tourism
might be blended into a full consideration of travellers’ careers and motives.
Since there is an explicit decision in this section to attempt to use the travel career patterns approach in framing the motivation for spa and wellness tourism, it is necessary to outline the core methods and patterns which have been employed and established in this framework. A very long list of motives and needs was considered in the construction of the travel career patterns. Some of these needs were derived from intensive qualitative research with a small number of travellers varying in travel experience while many needs were extracted from previous studies and the psychology literature on motivation. Setting aside synonyms and idiosyncratic responses, seventy-four motives were then subjected to principal component analysis after appropriate checks on the adequacy of the sample size. Fourteen factors were identified in a survey of over 900 Western (mostly Australian and United Kingdom) travellers. A repeat of the quantitative component of the work was undertaken with over 700 Asian travellers (Korean respondents) and the details of these studies reported in Pearce (2005) as well as in Pearce and Lee (2005). The fourteen resultant motives which were corroborated across the two samples were, in order of importance, novelty, escape/relax, relationship strengthening, autonomy, seeking nature, self-development through involvement with hosts or the site, stimulation, self-development of a personal kind, relationship security [enjoying being with similar others], self-actualisation [getting a new life perspective], isolation, nostalgia, romance and recognition [prestige of travelling]. The key feature of the travel career pattern approach was then to use the levels of travel experience reported by the respondents to formulate a three-part model which described the relationships between these fourteen motives and the amount of travelling which the respondents had undertaken.

The varied importance of the motives suggested that a pattern could be imposed on the data such that for all travellers there was a core layer of motives which were very important. These motives were to escape and relax, to experience novelty and to build relationships. These motives were relatively unaffected by how much travelling the participants had experienced. There were also motives which could be distributed into a middle and outer layer of importance. For those who had travelled the most, the middle layer of motives was more important than the outer layer, whereas for those who had travelled little, all the remaining motives tended to be seen as important. There was also a link between the travel motives and the stage of the travellers’ life cycle but here there were some Asian and Western cultural differences. For Western travellers, later stages of the life cycle also tended to be linked to more travel experience but this was not a consistent finding for the predominantly Korean travellers in the Asian sample. Younger Koreans had often
travelled more than older Koreans, so the links between travel experience and later stages of the life cycle were not strong. This discrepancy is readily explained since the availability of travel as a discretionary leisure pursuit is a more recent phenomenon in Korean society (Kim et al., 1996). Indeed, most of the variability in the Korean data was better explained simply by the amount of travelling rather than by the age and life-cycle stage of the respondents. Overall, the motive structures were broadly consistent both for Asian and the Western travellers. The two large-scale studies confirmed the notion that individuals tend to have a travel career with their holiday experience together with the stage people are at in their life cycle building a different pattern of importance for their travel motives. A succinct representation of these ideas is presented in Figure 7.1.

The highest loading item(s) for the factors are in brackets and the direction of the arrows indicates changing emphases with increasing traveller experience. The critical questions for the present analysis is ‘Where do the motives for wellness and spa tourism fit into this pattern?’ Three kinds of information can help address this issue. The first material to be considered derives from a set of studies seeking to identify special defining characteristics of different types of tourism. Next, a detailed analysis will be provided of a recent research effort to explore the motivations of spa

---

**Figure 7.1**

The core structure of the travel career patterns (TCP) approach
goers from Hong Kong. This work will be supplemented by preliminary results exploring motivations and directly applying the travel career pattern material from respondents in India, Thailand and the Philippines.

In seeking insights into travel motivation, several kinds of data and information sources can be used. Some material can be sought in an indirect fashion and the motivation of travellers inferred from their reported post-travel experiences and activities. A more direct approach is to ask tourists either prior to visiting a destination or at the destination why they have travelled to that location and more specifically what they are seeking out of their holiday experiences. There are good reasons for linking these two sources of information into a tapestry of motivational appraisal. The direct-questioning approach may be thorough but it does inherently set up a social situation with demand characteristics and social desirability values.

A well-designed questionnaire and assurances of respondent anonymity may limit these effects but potentially they still exist. The value of appraising motives with another pathway is a potentially useful check on these limitations. It is important, though, not to overstate the limitations of questionnaire and survey material since to do so can trap researchers into assumptions that there is a “false consciousness” in their respondents’ views. That is, it is dangerous for authors to suggest that while the data they have collected show a certain pattern of results, it really means something else because the tourists surveyed were unwilling to express their honest views. This kind of thinking undercuts the value of research efforts since it is based very heavily on untestable researcher assumptions. A better pathway for the checking of motivational perspectives is to use alternate qualitative and interpretive materials rather than rely on researcher reinterpretations.

Morrison et al. (1996) and Moscardo et al. (1996) provide some detailed empirical work on travellers’ activities implicitly linked to motivations for different types of holidays. Both studies re-analysed large-scale secondary data with over 12,000 cases drawn from the Pleasure Travel Market survey studies conducted by the Longwoods organisation for Tourism Canada. The appeal of selecting these studies for the present interest lies in identifying the comparative experiential views of different types of tourism. Both studies compared tourists’ responses to different types of holidays and noted how activity participation varied according to the type of trip. In the Morrison et al. study, the trip types were cruises, beach resorts, casino resorts, ski resorts and summer country resorts, whereas the research conducted by Moscardo et al. considered the additional choices of theme-park holidays, urban city resorts, touring holidays and outdoor vacations. The Moscardo et al. study used a multidimensional scaling approach to provide figures illustrating the patterns of
perceived similarity of the experiences. In both studies, cruise, summer and beach tourism were seen as the most relaxing while cruise tourism also scored highly on being romantic, fun, adventurous and exciting. Casino-based resort holidays were seen as less relaxing and adventurous than other types of holidays but were rated highly for excitement. Ski holidays were seen as exciting and adventurous and, possibly surprisingly, educational. Theme-park holidays were among the most exciting but also expensive, less romantic and less relaxing than their counterparts.

In addition to providing these descriptions of the holiday types, both studies also considered the frequency of a set of activities which broadly fall into the spa and wellness considerations. Items for closer inspection under this rubric include the travellers’ responses to the use of saunas, hot tubs, fitness clubs and gyms as well as participation in aerobics, walking and swimming. For both studies there were variations in the participation rates for these activities in the different types of resorts. The use of hot tubs and saunas, for example, was greatest in the ski resorts whereas fitness centres were used more on cruises. Aerobics participation was also highest in the cruise context but was an infrequent activity in other settings. Summer and outdoor resorts had the highest level of swimming in freshwater and ocean settings but casinos had high levels of use of gyms as did beach resorts [Morrison et al., 1996: 22; Moscardo et al., 1996: 61].

Two key points can be outlined in relation to this kind of data. By working “backwards” from activities to the needs driving those activities, much in the manner suggested by Murray in defining a need, it can be suggested that there are coherent patterns of needs for different types of holidays. Further, many of the descriptions provided of the holiday types reinforce the patterns of needs such as escape, relaxation, novelty, stimulation and excitement which have been previously described in the motivational research. This, in itself, is an indirect confirmation of the travel career pattern approach which emphasises tourist motivation as a multi-motive tapestry of combined driving forces. A second point to link these studies with the central interest here in motivation is that motivational studies of spa and wellness tourism can clearly be developed at different scales. The data reported in the Moscardo et al. and the Morrison et al. studies are North American and are very broad. Additionally, they only consider a limited set of health and wellness activities. As suggested earlier, research efforts need to be pursued in different contexts and with clearly specified types of spa and wellness products to build an understanding of motivation. The following studies explicitly direct attention to Asian research focussed specifically on actual spas and wellness tourism facilities.
One direct consideration of the motivational underpinnings of spa and wellness tourism lies in the work of Mak, Wong and Chang (2009). The researchers studied over 300 residents of Hong Kong and asked them to respond to twenty-one items describing their motives for visiting spas. Mak and colleagues argued that spa and wellness properties have become an important part of Asian tourism and they cite the expansion of such facilities in Thailand, China, Japan and Korea as being of particular interest and appeal to the travellers from Hong Kong. A dominant context for the study was the hotel spa experience (cf. Erfurt-Cooper and Cooper, 2009) since over 50% of the convenience sample studied had experienced this kind of spa operation. It is perhaps noteworthy in interpreting the findings that hotel spas are generally luxurious and a part of the high-quality services offered to guests rather than being facilities which are distinctive attractions in themselves. In some senses hotel spas are akin to day spas, which had been visited by 37% of the sample, since day spas too are often a convenient part of a broader travel schedule. By way of contrast, mineral springs spas, which had been visited by 35% of the sample, can be seen more as a focussed choice of a holiday experience. Overall, 34% of the total sample had visited spas once, 53% had visited spas between two and five times and only 12% had more than five spa experiences. From these figures it would be appropriate to suggest that the sample had a relatively low level of previous visit experience. Over three quarters of the sample studied by Mak and colleagues were women, and while this is not atypical of the distribution of hotel and day-spa goers in general, and might be assumed to reflect distinctive gender needs, the researchers found limited differences between males and females in the motives for visiting.

The core findings of the study were presented in three ways. The means of the individual motives were provided and a factor analysis was conducted of all twenty-one items resulting in five factors. It is important to stress that this study was not designed according to the travel career patterns (TCP) approach but it will be argued that the results are highly congruent with the model. Mak and colleagues report that the two most important factors are relaxation and relief and escape. These two factors have the highest grand means—for relaxation the grand mean is 3.67 and for escape it is 3.45 on the 5-point scale where 5 is the highest value. The next motive identified from the twenty-one items is self-reward and indulgence with a grand mean of 3.32. There is some interesting variability of item means for this factor which warrants further attention.

The key items, the loading on the factor and their mean for importance are as follows: Indulgence in luxurious experience (0.77), mean 3.22; desire to be seen as fashionable (0.68), mean 2.47; pamper oneself (0.66), mean 3.82; reward oneself for
working hard (0.55), mean 3.78. It is noteworthy here that the status issue, expressed in this item as the desire to be fashionable, has the lowest mean score for the respondents. Correia and Moital (2009) argue that prestige motivation is a neglected and pivotal topic in tourist motivation studies, and Mak et al. themselves cite Schutte and Ciarlante’s (1998) reworked model of Maslow’s hierarchy to claim that status and admiration are the pinnacle motives in Asian consumer experience. The evidence collected in this study is directly contradictory to these assertions. The respondents have recorded the importance of the desire to be fashionable as the lowest for this factor and indeed it has the lowest mean score for all twenty-one items. These data are a precise illustration of the point made earlier in this section about researchers having to deal with discrepant data and the caution that a false consciousness should not be invoked lightly. That is, it might be suggested that respondents are concealing their true status-oriented needs and in public not admitting to their desire for recognition and respect. More simply, it may be the case that some tourist activities because they are now common and widely available have little status value.

Interestingly, both for the Western tourist sample and the Korean sample in the travel career pattern work, recognition and status are rated as the least important of the fourteen motives (Pearce, 2005: 61, 72). A distinct possibility exists that researchers have assumed that status issues operating within a culture are necessarily applied to tourism experiences which may be much more intrinsically motivated than is often appreciated. This interpretation of the intrinsic value of health and wellness experiences as an intrinsic motivational need linked to the travel career pattern approach may apply to both Asian and Western travellers.

The remaining factors identified by Mak et al. are health and beauty needs and relationship needs as expressed in a friendship and kinship factor. Both have grand means substantially below the relaxation and escape motives with the health and beauty motive grouping (3.15) being somewhat more important than the friendship factor (2.86). Neither is as important as the self-reward and indulgence set of items (3.32). If these motives were to be classified according to the structure of the TCP approach as portrayed in Figure 7.1, then escape and relax would be core items, and both the self-reward and indulgence factor and the health and beauty factor would fit into a mid-layer set of motives. The friendship factor for the spa experience would lie in an outer layer set of motives. The Mak et al. study did not sort the motive structures according to previous experience, but an implication for the data can be drawn by its restructuring into the TCP model. Such an activity permits further testable hypotheses for spa motivation research. According to the TCP approach, with mounting experience the emphasis on the mid-layer motives should increase with
both the self-reward and indulgence factor and the healthy and beauty factor gaining in importance with more spa experiences. The reward and indulgence factor should gain the most because it is more of an intrinsic motive as opposed to the somewhat more externally oriented beauty factor. By way of contrast, the friendship factor will decline in importance whereas there is a predicted stability in the importance of the escape and relaxation items. It is perhaps possible for future researchers to grapple with these possibilities. An important recommendation here would be that researchers should be encouraged to use the full range of motivational factors in the travel career patterns approach rather than a limited or restricted range of motives.

A second application of the TCP approach to studies in wellness tourism lies in considering the findings concerning motivation in the recently completed doctoral level work of Voigt (2010). Using both an intensive qualitative phase of research and then a larger sample of respondents in a quantitative phase, Voigt explored the benefits expressed by three kinds of wellness tourists. The groups studied were beauty wellness tourists, resort lifestyle visitors and spiritual wellness seekers. Based on the qualitative findings, a generic underlying theme of transforming the self was identified. This result emphasising the self-distinguished Voigt’s interviews from the more outward looking and socially conscious wellness tourists idealised in the work of Hall and Brown (2006).

The quantitative results from Voigt’s work were built on forty-six items organised around six benefit factors of transcendence, physical health and appearance, escape and relaxation, important others and novelty, re-establish self-esteem and indulgence. The larger sample in the quantitative study did not respond in quite the same way as the more intensively interviewed respondents. The results indicated a key role for the escape and relaxation set of benefits. The grouping of outcomes represented by the term transcendence [to contemplate what is important to me and to gain a sense of renewal] had the second highest grand mean of all the benefit factors. Voigt reports some close links to the findings of Pearce and Lee (2005) and the TCP, especially in terms of the primary role of escape and the lower importance levels of the other benefits, but points out that the intrinsic and extrinsic levels appear to be working a little differently in her study. She highlights the perspective that transcendence, an intrinsic benefit analogous to the middle-level-order self-development label used in the TCP factors, appears to be distinctive and especially important part of the pattern in wellness holidays. It can be suggested that for wellness holidays transcendence is equivalent to the defining benefits for casinos (excitement) and cruise ship holidays (romance) reported by Moscardo et al. and Morrison et al.
A recently completed study by Panchal and Pearce (forthcoming) pursued the application of the travel career pattern approach to spa and wellness tourism motivation for respondents in India, Thailand and the Philippines. Nearly 300 domestic and international tourists were surveyed with approximately even numbers of visitors in each country contributing to the findings. Filipino (80%) and Indian (68%) residents made up a larger part of the sample in their respective countries, but in Thailand 90% of the sample were international visitors. The dominant treatments experienced were body massage either taken solely or combined with facial scrubs, body wraps, body scrubs and local traditional health treatments and therapies. The genders were balanced in the sample and there was some variability in age (with most being under 50 years old). The professional status of the respondents varied widely.

The core approach used in the Panchal and Pearce study was to obtain information on a structured questionnaire on seventy-one motive items including all items from the previous travel career pattern studies and two additional items directly assessing “maintaining my current health condition and improving my current health condition”. The means for importance of these items for all the respondents were obtained and the results were again assessed using principal component analysis. The crucial question under examination in this study was: Where do the motive items for health fit within the travel career pattern model? The answer to this question is that not only are both the health items rated in highly similar ways but also the level of importance assigned to the health items locates them in the moderately important motives framework when travellers have little or only modest travel experience and in the outer layer of motives when travellers are more frequent holiday takers. This result conforms to previous travel career pattern research and again witnesses the tendency for less experienced travellers. Additionally and importantly, the way in which Indian, Filipino and Thai respondents rated travel motivation items was markedly similar to the Western and Korean patterns already described.

These recent studies in travel motivation conducted with relevance to or specially focussed on spa and wellness tourism form a beginning for studies in this area. The travel career pattern approach was demonstrated to have value both as an organiser for existing work and as planning tool for the design of studies. In this sense it can be seen as functioning as a ‘true theory’ of motivation as required in Table 7.2. It can also be suggested that the future use of the conceptual scheme can be justified since it can generate predictions for travellers with different levels of travel experience. It will necessarily be the case that studies in other Asian settings as well as Europe, North America and beyond will deal with different contexts and types of spa and wellness tourism and this core product style consideration will need to be addressed.
sensitively when comparisons with existing studies are made. Nevertheless the approach adopted in this chapter which is consistent with the purposive striving of individuals towards positive goals opens the way to deal systematically with the statement by Bushell for spa and wellness tourism “Questions of tourist motivation need more research” (Bushell, 2009: 36).

MIND-BODY LINKS AND SPA/WELLNESS TOURISM

Until quite recently two separate lines of inquiry have considered the effects of spa and wellness tourism. These contributions consist of the efforts of social science researchers in tourism and the studies have tended to describe the products, locations and growth of the spa and wellness sector. The work of these scholars has been informed largely by their backgrounds in geography, sociology, economics, marketing and business studies. There is, though, the possibility of providing further insights into this field from a somewhat separate approach. The additional line of inquiry is medical science, sometimes with a strong physiological emphasis and at other times linked to more clinical forms of positive psychological inquiry. There are well-established publication outlets reporting the work of medical scientists and related researchers, particularly in terms of stress reduction and better health deriving from travel experiences (Sonmez and Apostolopoulos, 2009). A succinct review of this work and a suggested positive psychology interpretation of some of the underlying mind–body links may usefully point the way to new research studies in tourism and wellness research.

Anecdotes and striking examples of the positive effects of travel on health and well-being have been noted for some time. In Victorian England, the almost blind traveller James Holman became the world’s most celebrated holiday taker. Holman is now an obscure figure in the history of travel but in his age he became a unique celebrity and his accounts of his journeys strongly influenced Charles Darwin, Joseph Conrad and Charles Dickens. For the present purposes, the remarkable feature of Holman’s life was that he was persistently strong and healthy when travelling, even in extreme conditions, but repeatedly became unwell, emaciated and melancholic when sedentary and at home. The queen’s physician, England’s most important medical figure, was moved to write a clear prescription for Holman’s health: “a continual change of scene and climate, together with unrestrained exercise of his mental and physical powers prolonged for a period of at least three years” (Roberts, 2006: 307).

The connection between holiday taking and human well-being now extends beyond the notable stories about individuals and several pockets of research have developed.
Some of the findings in these studies can be viewed as surprising since together they offer a rather more positive view of the physiological and psychological benefits of travel than might be expected from everyday cynical observers. The suspicion that travel and holiday taking might be only marginally beneficial to its participants perhaps derives from the view that any benefits of holiday taking have a rapid “fade-out” effect. In short, this view suggests that despite the joys of the holiday, after a few days back at work the benefits are swamped by the mountains of work now to be completed combined with the stress of everyday life. Westman and Eden (1997), Westman and Etzion (2001) and Etzion (2003), all of whom studied the relationship between job burnout and the value of holidays, did find that there was a fade-out effect but positive perceptions of work and reduced stress levels lasted for at least three weeks.

The benefits in tourism and holiday taking are arguably somewhat more powerful and durable than these specific studies suggest. It is important to remember that holiday experiences have both an anticipatory and a reflective phase. That is, holidays may have a positive function in that people reduce stress by looking forward to them as well as reflecting on them. Some solid evidence that a consistent pattern of holiday taking confers or is at least associated with physiological benefits comes from a number of longitudinal or panel data studies reported in the medical literature. In the data tracking the social habits and behaviours of over 5,000 United States citizens collected in the Framingham Heart Study, it was demonstrated over a twenty-year period that women who took two or more vacations a year suffered significantly less from forms of cardiovascular disease (specifically, myocardial infarctions) than those taking few and infrequent vacations (Eaker, Pinsker and Castelli, 1992). In a similar kind of study over a nine-year period, more than 12,000 middle-aged men were assessed on a battery of physical, psychological and behavioural measures. Gump and Matthews (2000) report that compared with those who did not take vacations, the regular holiday takers were 31% less likely to die of cardiovascular disease. As all researchers and analysts will be quick to realise, these kinds of cohort studies show relationships and links and do not necessarily indicate a causal pathway. For those who are taking regular holidays there may be other powerful determining variables linking the health–holiday relationships. For example, it may be that those who take holidays have better quality relationships which in themselves are well known as major stress reducers [Argyle 1999], and on holidays they have time to enjoy those good relationships. More simply it might be that the ability to save the kind of money required to purchase holidays is a healthy joint cooperative family exercise which itself frees the participants from stress.
Another set of studies closely tied to the present interests in spa and wellness tourism and conducted in Austria helps build the case that it is the vacation experience which plays a key role. In these studies pre- and post-holiday physiological and psychological measures of health and well-being were assessed. In studies typical of this genre, Strauss-Blasche, Ekmekcioglu and Marktl (2002, 2003), and Strauss-Blasche et al. (2004) assessed participants who enjoyed a three-week spa therapy holiday at an Austrian resort. The holiday included specialised spa treatments, mud baths, and simply time to relax. Various measures of serum cholesterol were taken and strong benefits were found for the reduction of these unwanted high levels, particularly for the men, who reported high demands at work. In the 2004 study, mood and quality sleep were reported as improved for up to four weeks after the spa experiences. The researchers suggested from their data that the health benefits of holidays, both psychological and physiological, were greater when holiday takers were getting good sleep, socializing in a warm climate and having enough time to attend to their needs and focus on their well-being (Strauss-Blasche et al., 2005).

These studies, while not definitive, tend to suggest that there are substantial health benefits of certain types of holidays. Additionally, the spa and health resort holidays studied in this research provide some of the clearest evidence for this relationship.

A closer examination of what is actually happening to people in their spa and health resort experiences leads to some interesting explanations connecting fundamental mind–body issues in psychological and philosophical inquiry.

Dann and Nordstrand (2009) provide a compelling account that a multisensory approach to tourism promotion should enhance the appeal of a variety of destinations including spa and wellness tourism destinations. Within this sensory framework, one modality can be highlighted in spa and wellness tourism—the sense of touch. The importance of touch, sometimes combined with the sense of smell, is an important component in health tourism settings. It is relevant to all those practices involving massage (person-to-person touch) as well as bathing and water treatments (substance-to-person touch). Nevertheless, interpreting the meaning of touch is not a straightforward process.

As Argyle (1975) and Argyle and Henderson (1985) have noted, touch is a significant communication tool in relationships with strongly prescribed social and cultural rules as to who can touch whom. In many countries and cultures it is only medical personnel and nursing professionals who are permitted to touch strangers and then only in certain ways and within set frames (cf. Goffman, 1974). Massage therapies often involve prolonged touching of others and exist within these kinds of defined

1:: SPA AND WELLNESS TOURISM AND POSITIVE PSYCHOLOGY
frames, but the lexicon of interpreting touch allows for some diverse interpretations. Touch, for example, can be unpredictable, ticklish, cold, warm, soothing, relaxing, sensual and even erotic, but above all it has to be interpreted as appropriate and comfortable by the holidaymaker.

A small sample of studies from the varied research fields which have considered the therapeutic and psychological value of touch suggest it has a special power in affecting well-being. Murray (1908) drew links among the sensations of being tickled, responding to an itch, feeling pressure and experiencing pain. The sensations arising from being tickled are usually responses to a light form of touch, but social context and the sense of the unexpected may modify the sensation. In behavioural terms, the response is a rapid and active attempt to avoid the behaviour while psychologically it is often linked to fun and laughter and may derive from an evolutionary need to respond to dangerous tactical stimulation in the form of insect threats or preconscious awareness of danger.

Pressure, by way of contrast, and particularly as found in massage treatments, has established medical and psychological benefits particularly in terms of blood circulation, lymph gland functioning and efficient muscular function (Bright, 2002: 162–163; Clark, 1986: 209). Pressure-based touch is also viewed as having social benefits, particularly in connecting the sense of dependency and intimacy between participants in both commercial and caring settings (Clark, 1986; Verghese, 2009). As Gergen (1997) and Verghese (2009) have argued, in exploring intimacy there is a strong learning and interpretive component here and arguably touch produces mindfulness, since to be touched by others is not a routine process. The experience of bathing in waters of different temperatures and chemical compositions is also an inherently novel activity, and whether or not it is pleasant involves combinations of cognitive and affective interpretations of bodily sensations. A common element in the psychology of spa and wellness tourism, then, is that actions or activities are effectively performed on the human body and the participant has to assess the meaning and value of these contacts. The recourse to the concept of mindfulness provides an important clue to the explanations of the positive effects of spa and wellness tourism.

A brief diversion to report one of the key studies which resulted in the formulation of the mindfulness concept is relevant to the explanations of how bodily sensations and cognitive appraisals are linked. Langer (2009) reports that she and colleagues conducted a study where they immersed a group of older men in a staged environment which was set up to simulate a period in their lives twenty years ago. The props were impressive. The respondents in the experimental condition lived for a
week in the time period of two decades earlier and all conversations were held in the present tense. The programs on television, including the news, the comedies and even the baseball games, were replicated. The retrofit of an old monastery complete with appropriate furniture and food choices enabled the researchers to have complete control of the cues in the setting. A control group of men matched in age and health status with those in the experimental condition were also a part of the study, but this group reminisced about the past rather than lived it as if it were the present. Langer’s results indicated that the fully immersed group living in the present tense showed some marked physical changes. These included improvements in height, weight, posture, manual dexterity, and grip strength. Observers who did not know which men were in which condition assessed the experimental group as looking younger and fitter. Additionally, the men showed levels of independence in looking after themselves that surprised their relatives and caretakers. Langer and colleagues concluded that if you truly pay attention to the possibilities in the situation including focussing on your potential improvements in health, then there is a mental influence on bodily well-being. Mind and body meet here through the active mental process of considering and thinking directly about the embodied experiences.

Clearly, there is a close parallel between Langer’s experiment and its explanation through the cognitive process of mindfulness/possibility and the spa and wellness experiences. Langer writes:

Pursuing possibility regarding our health may result in the desired end, but in addition pursuing the psychology of possibility is itself empowering. It feels good to have a personal mission, it contributes more to a positive outlook in general and it works against the idea that the rest of us [our bodies] are soon to . . . fall apart. (2009: 16–17)

It seems appropriate to follow Langer’s advice not just at a personal level but at a scientific level as well and explore more fully the possibilities of using mindfulness as a key explanation of the health benefits of spa and wellness tourism. It is suggested here that it is how people think about and react to the somewhat novel sensory (especially tactile) spa and treatment experiences and the way they view these procedures which provide the possibilities for a healthier life. Studies measuring mindfulness and listening to the verbal explanations tourists provide about their spa/health treatments experiences as well as eliciting travellers’ views of their own health would all seem to be important further factors to explore in this sector of tourism.
The title of this chapter refers to the historical understanding of the word ‘spa’ in the English language, borrowed from the eponymous small town in what is now Belgium, and denoting a mineral spring at which seekers after improved health gather to ‘take the waters’, internally or externally, while enjoying leisure, entertainment and sociability. This needs to be said because the idea of the ‘spa’ (like that of the ‘resort’) now presents linguistic problems in the English-speaking world. The accelerating appropriation of the label ‘spa’ by free-standing resort hotels or leisure complexes to denote the provision of health, beauty, exercise and pampering services, with no connection to a mineral spring, has made it necessary to draw attention to the older usage, especially when writing about the past. Such usage may be linked to aspects of past practice, especially the version of hydrotherapy discussed by Alastair Durie in its Scottish context, which did not depend on local mineral sources; but its adoption has been purely opportunistic and present-minded, although it now has a de facto history of its own which will need to be explored by historians of the immediate past. It has also made its own contribution to the revival of many mineral springs resorts from the late twentieth century, especially where they have diversified their appeal by adopting the new ‘spa therapies’ and extended recreational bathing facilities (not least for children) alongside their more traditional offerings. But the recent changes in the usage of the word ‘spa’ in advertising, public relations and journalism amount almost to the privatization of the concept, which is now applied almost exclusively in current parlance to individual businesses or hotel chains rather than to localities, communities or municipalities. The word ‘resort’ is beginning to follow the same path, as it comes to be applied to private, exclusive places reserved for wealthy customers of gated establishments, rather than to towns, villages and public amenities which are open to all (even though the latter may contain locations and services which charge separately for admission). It is as if (for example) the designation ‘Mondariz Balneario’ were commercialized as a ‘brand’ so exclusively and to such an extent that it could refer only to the business itself, and not to the municipality of the same name in which it is located. Spas, historically, have been founded on local natural features, and even when in private, commercial hands have usually been seen as symbols of local identity, distinctiveness and pride.

QUESTIONS OF TIME AND SPACE

It seems appropriate to reflect on the historical significance of the ‘spa’ not only in its basic guise as mineral springs resort but also as providing a cultural foundation (in terms of a transferable model of sociability and the pursuit of well-being) for the early development of the coastal or sea-bathing resort; constituting the economic
SECTION I :: INTRODUCTION

2 :: HEALTH, SOCIABILITY, POLITICS AND CULTURE
SPAS IN HISTORY, SPAS AND HISTORY

basis for settlements of all sizes, from the ‘industrial colony’ [a concept to which we shall return] to the full-blown city; as a centre for cultural contact and political discussion [from the local and provincial to the international]; presenting itself as an outpost of urbancy—and industriousness on the part of its employees—in the countryside; as a nucleus of economic activity which might serve as a nursery for skills; acting as an ambassador of the civilising process and a counterweight to emigration; and constituting an embodiment of affirmative identities and regional as well as local pride. It will also be important to discuss some of the ways in which the histories of mineral springs, and of the cultural and therapeutic uses of their waters, might be developed and extended.

Most extra-European historical research on spas has dealt with European settlers and administrators in colonial or post-colonial societies, although there may be legitimate questions here about how far we can stretch the notion of the ‘post-colonial’, especially with regard to the appropriation of an imagined representation of Saratoga Springs by Disney [see chapter 5 of this book]. Moreover, there is now a substantial literature on the development of spa resorts in the US from the late eighteenth century onwards, and not only at Saratoga Springs. Other British or predominantly British ‘white settler’ colonies have also contained sites for negotiation between metropolitan, colonial and (in many cases) indigenous identities. In New Zealand the case of Rotorua, where there were nineteenth-century histories of tribal conflict over who should benefit from the district’s hot springs and other geothermal attractions, is particularly interesting, not least because the mineral springs were ‘taken over’ by New Zealand’s pioneering Department of Tourist and Health Resorts soon after its creation in 1901, and placed under the control of the Anglo-German specialist Dr A.S. Wohlmann, who had worked at Bath’s Royal Mineral Water Hospital before moving to New Zealand. In the Canadian Rockies, the site that became known as Radium Hot Springs was used by Native Canadians before it was taken into private ownership in 1890 and taken over by the Canadian Government in the early twentieth century. In both countries, government intervention in the management of what were perceived as national assets (in relation to health and symbolic capital) seems to have gone even further than the state regulatory regimes that became common in many European nations at this time, potentially constituting a key theme in the comparative history of spas. The plentiful supply of mineral spring resorts in South Africa, some of which date back to the eighteenth century, indicates that there is ample scope for research in this setting as well, as work on the distinctive history of the country’s beach resorts at last begins to gather momentum. Dimensions of ‘race’ and ethnicity are ever-present in these settings. Work on India and Sri Lanka, on the

3 La Temporada en Mondariz, June 23, 1901, June 5, 1904.
other hand, has mainly focused on the climatic ‘hill station’ as a distinctive colonial (and post-colonial) social and architectural environment, showing strong affinities with English spa resorts, which have been noticed by historians; and already in 1854 a survey of ‘the mineral waters of India’ was in print, published in Calcutta and presumably aimed mainly at imperial expatriates.7

THE COLONIAL SPA

It is likely that every colonial power developed its own version of a health resort policy, in varying degrees of tension and cooperation between local custom, private initiative and the state. This would apply to the former Spanish colonies in the Americas, for example: the (often decaying) heritage of provincial mineral springs resorts in Cuba, with origins going back in some cases to the eighteenth century, suggests a potentially rich field for research, which will probably be replicated across much of Latin America.8 In Argentina, meanwhile, the development of spa resorts from the later nineteenth century looked ostensibly to imagined British models rather than to ‘inherited’ Spanish ones, through the cultural influence of ‘informal empire’, especially through the British-owned railway companies which promoted this (and other) models of tourism for health and relaxation; but some of the spas in question had originally been frequented by indigenous peoples, long before the arrival of western medicine, and (as in Argentine coastal resorts) spa culture and practice was also inflected through the usages and expectations brought by migrants from elsewhere in Europe, especially Spain, Switzerland and Italy. Here as in many European settings, health and leisure resorts were transnational in their cultures of consumption and in the influences that were brought to bear on their development.9

BEYOND THE EUROPEAN PARADIGM

But this important set of themes is only one dimension of the global history of mineral spring resorts, much of which remains unwritten. We are dealing with phenomena that occur in every continent and most countries, in widely varying social, political and cultural contexts, from the medieval origins of the distinctive Japanese onsen hot springs and their associated inns, to a wide variety of Mongolian health resorts whose origins are currently ascribed to the socialist period, and whose offerings extend from hydrotherapy and mud baths with massage to sand baths accompanied by the ingestion of camel’s milk. The ‘socialist spa’ is, indeed, an interesting potential research category.10 Tensions have arisen at times in Mongolia, in ways that have their counterparts elsewhere, due to the failure of visitors from...
metropolitan Ulan Bator to respect local traditions and taboos. In Latin America Brazil’s Caldas Novas, which traces its origin back to the eighteenth century but grew formally as a planned spa resort after 1910, claims to be the largest hot springs resort in the world, although its resident population of 69,320 at the 2010 census is significantly less than that of England’s Bath. But Caldas Novas has developed rapidly since the mid-1960s and has a thriving cheap accommodation sector, lively night life and huge numbers of visitors, especially during Carnival. It may well have a viable claim to being the world’s most popular specialised spa resort. But it is clearly many other things in addition. The limited visibility from Europe of such an obviously important mineral springs resort is a reminder of the need to pursue a better global understanding of this cross-cultural phenomenon.12

Across the globe we face a dauntingly wide-ranging and diverse geographical distribution of often under-documented spa resorts, especially those which cater only for local markets in (to us) remote locations. The hot springs of western Uganda, for example, include Kitagata, frequented by up to 200 local people on some days but absent even from most local maps, and Rwagimba, ‘where people, cows, sheep and goats go for healing’, a four-hour trek through thorny scrub from the nearest vehicle track, but a site which is nevertheless undergoing incipient and rudimentary commercialization at the behest of the local (and unofficial) ’King’.13 These are settings in which historical documentation is particularly scattered and random, if it exists at all, and in which oral tradition and testimony might become very important to the recovery of [especially] popular histories, as is the case for many themes in African history. But Dr A.B. Granville, touring early Victorian provincial England in search of mineral springs, found several similar-sounding places, used by local people, devoid of what had already become the conventional amenities expected by comfortably-off health-seekers, and without benefit of chemical analysis of their waters. Here again, even in the ‘first industrial society’ and early railway age, earlier popular usages and practices are almost impossible to recover, although from time to time they become visible when observed and commented on.14 But the key point is that mineral springs are to be found all over the globe, at different stages of development (from ‘discovery’ to over-development and decline, following—at least partially and in outline—the stages envisaged by the seductive but simplistic ‘tourist are a lifecycle’ model advanced by Richard Butler), with their cumulative importance diluted by the scattered nature of the phenomena, the large number of places whose external visibility is limited by their focus on local or regional demand, and the skewed geographical distribution of research.15

---

11 Singh, ed., Domestic Tourism in Asia, Chap.5.
IDENTITIES AND ECONOMIES

We also encounter problems of specialism and of place identity. Mineral springs may dominate local economies, but their influence may also become diluted by other activities going on around them, whether part of a complex tourist economy or entailing entirely different patterns of provision and employment. Banff, in the Canadian Rockies, is one case in point: the settlement’s foundation myth [a very widespread component of spa histories which would benefit from systematic analysis] focuses on the discovery of hot springs by workers on the Canadian Pacific Railway; but its subsequent development owed much more to scenic tourism and the exploitation of representations of Native Canadian culture through the promotion of ‘Indian days’. At Wulai, in Taiwan, the preferred recent activities of visitors to one of the oldest-established of Taiwanese destination resorts have included not only use of the hot springs but also observation of and interaction with ‘indigenous’ culture, and taking a cable car to a nearby theme park. Many established spa resort economies became diversified, even during the nineteenth century, through the growth of local industries, together with administration and retailing (for a surrounding catchment area as well as for local residents and visitors), residential retirement, and (later) commuter functions. Such changes occurred from an early stage in England’s Bath, Leamington Spa, Cheltenham, Tunbridge Wells [where London commuters were already becoming important from the 1920s] and Harrogate, or at the Hotwells of Clifton [Bristol]. Under such circumstances the role of the mineral springs in the evolving ‘brand’ might become symbolic, marginal, token or even exiguous.

Meanwhile, at least in England, coastal resorts often became adept at finding local mineral springs, usually chalybeate, to add to their medical menu. When is a spa not a spa, or rather, more than ‘just’ a spa; and when does it ‘cease’ to be one, whether or not the wells dry up? This kind of problem has a long pedigree, at least in British historiography, as demonstrated (for example) by some of Peter Borsay’s writings about early modern urban leisure, and the debates they have stimulated.

We should also consider the related question of how and to what extent mineral springs resorts may, or should, be differentiated from other kinds of ‘leisure town’. What is distinctive generically about the ‘spa town’ or ‘spa resort’, as compared with (for example) the coastal resort, the hill station or other health resort offering clean air and relaxation, or the resort whose stock in trade is scenery, with or without attendant associations with literature or art? Were there, in social terms, identifiable spa resort hierarchies and indeed clienteles [over and above sufferers from the conditions associated with particular sources]? Posing this question should remind us that questions of social class, as well as questions of status, hierarchy, and what Harold

---

16 Mason, ‘The construction of Banff’.
17 Singh, ed., Domestic Tourism in Asia, 205.
Perkin usefully defined as ‘social tone’, may have been out of fashion for some time, but remain central to the understanding of industrial societies, even when at leisure. This applies especially when we bear in mind that the servicing of leisure requires labour forces of its own, as demonstrated by R.S. Neale’s splendid Marxist analysis of the development of the English ‘spa town’ of Bath. Were there distinctive forms of ‘spa entertainment’, over and above the standard musical and dramatic fare, and sociable amusements, of polite society? Such claims have been made for coastal resorts, especially in England; and the same questions might be asked about spa architecture, with similar coastal parallels. We have already seen that these categories of ‘leisure town’ are not mutually exclusive, and the transition of England’s Scarborough in the eighteenth century from coastal spa resort [with a mineral spring of very dubious quality] to pioneer sea-bathing centre, is an instructive example of this classificatory problem. Individual spa resorts have been, perhaps, more likely to attract a specific kind of clientele, given the importance of developing a reputation for the treatment of specific kinds of condition as part of the construction of identities and markets. Coastal resorts were able to aim at broader markets, as they were more hospitable to children and offered generically rather than specifically salubrious environments, except where local climates and other characteristics were deemed appropriate to the alleviation or cure of specific diseases, especially tuberculosis. Unlike the coastal or scenic resort, or the hill station and other essentially climatic therapeutic locations, the spa also tended to focus the attention of its visitors, and their sociability, on the pump rooms and baths, and on promenades, parks and assembly rooms in the immediate vicinity. Over and above this concentration of the institutions of sociability, the spa was particularly focused on medical therapies which targeted specific conditions or clusters of ailments. This concentration on the medical gaze became diluted overtime, especially in the more fashionable centres. But, together with the [closely related] frequent involvement of the state in registering and monitoring spa medical directors in many European settings, it helps to explain the particular focus of spa historiography on medical practice and debates. Indeed, a distinguishing feature of spa history has perhaps been its capacity to attract both medical and social historians, each drawn by an overlapping proliferation of attractively problematic source material.

**HEALTH, FASHION, LEISURE AND PLEASURE**

This is not to suggest that all spas were dominated by valetudinarians and seekers after cures for specific ailments. In the more dynamic and successful resorts, fashionable society followed in the footsteps of ailing, wealthy relatives, and the sociable amenities of music, dancing, even poetry and intellectual conversation...
were sustained around the pump room. Spas also became associated with casino gambling, from the relatively innocuous petits chevaux up to and including roulette (but certainly not at Mondariz Balneario, which took ostentatious pride in its high moral tone);\(^{26}\) although fashionable seaside resorts (Ostend, San Sebastián, Deauville, Biarritz, Estoril…) also offered roulette, baccarat and other attractively perilous gambling options in luxurious settings whenever the current legislative regime allowed.\(^{27}\) Casino gambling was often regarded as essential to the prosperity of a resort, as became apparent through the reactions when its availability came under legal challenge.\(^{28}\) Even so, the widespread combination of an aspiration to physical and moral health which was compromised by the daily social interaction of the resort, together with the opportunities for plot development afforded by a relatively closed community, may help to explain why spas seem to have been particularly attractive to novelists, perhaps most dramatically in Dostoyevsky’s *The Gambler*, which turned his experiences in several European countries, at Baden-Baden, Homburg, Spa and Saxon-les-Bains, to necessary account. Here is a theme, which may merit further investigation, although it was closed off in Germany by a nationwide ban on casino gambling which came into force in 1872.\(^{29}\) Even without this added frisson, it may be possible to elevate the ‘spa novel’ to the same status as the ‘Grand Hotel novel’, with which there would be a good deal of overlap, as a literary sub-genre of (especially) the nineteenth and early twentieth century.\(^{30}\) Moreover, the spa was not always a more closed, elitist environment than other destinations for health and leisure tourism. By the later eighteenth century Jane Austen’s Bath, for example, as featured in *Northanger Abbey* and *Persuasion*, attracted a picaresque social mix of the aristocratic, the wealthy, the aspiring and the fraudulent, the latter categories being encouraged by the importance of display as well as lineage or connections in laying claim to status, and by the resort’s status as marriage market. Despite the absence of casino gambling, already unthinkable in Britain, this also made it a magnet not only for fortune-hunters but also for those novelists who wanted to explore questions of social mobility, conflict and morality on a broader canvas.\(^{31}\) In less open societies, the non-monetary barriers to entry were easier to police; but in English spas the official Master of Ceremonies tended to have a particularly high profile in regulating ‘the Company’.\(^{32}\) These are, of course, overwhelmingly European observations, and Japanese, Mongolian or Brazilian historical perspectives will certainly turn out to be very different, as might analyses of the nature and development of spas in socialist societies, in Eastern Europe and elsewhere.

Whatever qualifications we might make, it seems likely that the mineral water spa was unique among health and pleasure resort types in the degree of focus on
particular sets of social institutions, regulated by rules and conventions as well as by the various filters of the market, and concentrated around a particular focus of attention, the ‘healing’ waters. The contrast with most kinds of coastal resort, with their expanses of open if not always unregulated beach, their association with freedom from everyday constraints, and their position as [in Rob Shields’ book title] ‘places on the margin’, was arresting, even when that apparent marginality or liminality was compromised by a coastal resort’s status (formal or informal) as summer capital, and its consequent assimilation into a more relaxed version of the metropolis.33 Even the prescribed walks and rides through manicured countryside which were part of the curative program of the spa were probably much more custom-bound and conventionalized than most excursions at the seaside. Most spas, too, remained mere villages: only in England, which was an exceptional case in Europe, did several of the well-known ones become substantial towns, and even here, rural attributes and aesthetics remained important, despite the role of all but the smallest and most isolated of spa resorts as outposts or beacons of urbanity in country settings.34 With a few exceptions, such as Wiesbaden, Baden-Baden, Aix-les-Bains or Vichy, European spas were likely to be small or even very small places where intimacy was only restrained by the formalities of rank and protocol.35 Coastal resorts were much more likely to develop into complex urban centres servicing a variety of visiting publics, whose needs had to be disciplined and reconciled if the organism was to function healthily, although many of the smaller ones similarly retained rural attributes and an informal, bucolic atmosphere. Where spas catered for the poor, they were increasingly likely to arrive and receive treatment under charitable auspices, as at Mondariz Balneario, and were always kept apart from the private paying guests, even when they were funded by the German social insurance system, as at Bad Ems.36

ECONOMIC AND ENVIRONMENTAL HISTORY

These are speculative suggestions. It is worth reiterating that they are based overwhelmingly on western experience, and that the uses of mineral springs for health and leisure are apparently ubiquitous, limited only by geology. We should also consider the links between the development of spas and more conventional historical themes, not least those associated with national and urban governance and public health. In this context Douglas Mackaman has highlighted the conflicts between state promotion and private enterprise in the development of villes d’eaux in nineteenth-century France.37 In terms of economic history, the spa industry has been neglected, whether in terms of mineral water bottling, distribution, advertising, sale

---

34 Walton, ‘British Spa Resorts: An Exceptional Case in Europe’?
and consumption (despite Sylvia McIntyre’s pioneering study of the English trade in bottled mineral water in the eighteenth century, and recent work on similar themes by, for example, David Hussey), or in terms of the provision of accommodation and services. The marketing and sale of bottled water, especially table waters, whether regionally, nationally or internationally, has been of central importance to many spa economies across Europe, as examples from Buxton and Malvern to Spa, Vichy, Evian, Vittel and Mondariz indicate very clearly, and here, at least, is an aspect of the ‘spa industry’ whose product, volume, distribution and markets are open to the conventional classificatory modes of analysis associated with economic history, although serious business histories remain thin on the ground.38

Even when their markets and visitor catchment areas were international, however, European spa resorts of the eighteenth and nineteenth century (and after) were often located in isolated rural areas with (for many purposes) their own local supply networks. The ‘hydros’ discussed by Alastair Durie, a specific cultural variant which became particularly identified with Scotland, might occupy similarly remote locations.39 These might be supplemented by seasonal branches of national or international fashion shops, or by musicians, singers and other performers—including chefs, for we must not neglect gastronomy even where human organisms were at their most delicate and vulnerable—who followed their audiences. But from the perspective of industrial or business history spa resorts might also usefully (if counter-intuitively) be compared with the early rural factories or mines, not least in terms of their labour supply and discipline, in which trade unions were unlikely to be able to flourish, although deference might bring its rewards. In a sense, they might be considered as ‘industrial colonies’ for a particular incarnation of the tourist industry, and as generators of new kinds of rural employment within and beyond the hotels and bottling plants, promoting new working practices and opening out new resources and opportunities.40 This would in turn draw attention to a neglected aspect of tourism history, its labour forces and labour relations, an important theme which cries out for further research.41 Moreover, they might also be compared with the ‘total institutions’ of Erving Goffman, isolated and cut off from everyday life, developing their own internal conventions and value systems (as well as supplying many of their own needs, as in the case of lunatic asylums in Victorian Britain), and perhaps even generating the covert subversion of apparently closed systems even as they seemed to impose conformity.42

From these perspectives transport systems and innovations are of great importance in providing and limiting accessibility, filtering out undesirables and limiting destabilizing growth in some cases, broadening and stimulating access and demand

---


39 Durie, *Water is Best*.


while destabilizing established patterns and expectations in others, and helping to raise, implicitly, the question of whether and for what purposes success is best defined by diversification and growth. Improved transport access, especially in volume, may form part of a process of accelerated growth on a novel scale, which may destabilize established relationships and destroy environmental attributes. The histories of spa resorts, indeed, are capable of making important contributions to the understanding of the relationships between tourism and environmental history. Some of the most successful spas in the medium and long term attained and sustained a steady state of comfortable, profitable, predictable, self-renewing size and turnover, which might embrace innovation and attentive concern for what the competition was doing without pursuing the potentially disruptive and destructive chimera of endless growth and environmentally damaging sprawl. The example of Mondariz Balneario over the first third of the twentieth century might be thought to illustrate such an alternative, offering a challenge to the inflexible assumptions which underlie the Butler model of the ‘resort product cycle’, which does not really allow for intermediate resting places along what it presents as the inevitable road to over-development, stagnation or decline and reinvention.

Beyond all this lie the political and diplomatic connections, which really ought to make the study of spas and other elite health resorts academically respectable in terms of dominant expectations in the historical profession: the international gatherings, diplomatic and other incidents and scandals; the peace treaty negotiations based in Grand Hotels; the telegrams, assassinations, threats to and preservation of dynasties, the courtesans, the spies. Taking this too far, on the other hand, leads us into an area identified more with romantic speculation and historical fiction than with international relations, and which can seem so exotic as to border on the frivolous; but it also brings the spare sort into (so far) almost undeveloped contact with the realms of diplomacy and war, which are still the most conventionally ‘mainstream’ themes in academic history. Elite spa resorts, at least, like their beach resort equivalents, draw attention to the international, indeed transnational, nature of much spa history. How can we develop such dimensions of the history of mineral spring resorts, while encouraging both the fine-grained local studies and the interpretative bird’s-eye global surveys which we need, taking responsibility, without apology, for the idiosyncrasies, extravagances and eccentricities of our theme, and even turning them to positive account?
CHAPTER 3

A GEOGRAPHICAL AND REGIONAL ANALYSIS
SECTION I :: INTRODUCTION

3 :: A GEOGRAPHICAL AND REGIONAL ANALYSIS

Earth is a beautiful green-and-blue jewel hung upon the tapestry of eternity. However long we stay here to drink the pure water and breathe the life-giving air, eternity is more truly our home.

(Chopra, 1993: 315)

It is useful to consider the geography as well as the history of health and wellness tourism, especially when developing regional initiatives based on indigenous resources (e.g. Alpine wellness, Nordic well-being). There are also social and cultural traditions which tend to be rooted in geographical locations as much as historical traditions.

TABLE 3.1 REGIONAL DIFFERENCES AND TRENDS IN EUROPE

<table>
<thead>
<tr>
<th>Region(s)/countries</th>
<th>Typical focus</th>
<th>Typical products/services</th>
</tr>
</thead>
</table>
| Western Europe (Austria, Belgium, France, Germany, Luxembourg, Netherlands, Northern France, Switzerland, UK) | • beauty  
• weight loss  
• lifestyle improvements (e.g. mental well-being, stress relief)  
• leisure and recreation  
• private clinics specializing in certain treatments | • day/beauty spas  
• spa and wellness hotels  
• thermal leisure spas  
• holistic activities (e.g. yoga, meditation)  
• vinotherapy  
• occupational wellness  
• alpine wellness  
• selfness and mindness  
• balneotherapy |
| Northern Europe (Scandinavia, Baltic States) | • physical recreation  
• leisure and relaxation  
• lifestyle improvements (e.g. diet, exercise, fresh air) | • Nordic well-being  
• saunas  
• outdoor recreation (e.g. Nordic walking)  
• cold therapies (e.g. cryotherapy, ice swimming)  
• hot geysers (Iceland)  
• thermal, medical and seaside spas (Estonia, Latvia, Lithuania) |
| Central and Eastern Europe (Bosnia, Bulgaria, Croatia, Czech Republic, Hungary, Moldova, Poland, Romania, Russia, Serbia, Slovakia, Slovenia) | • curative rather than preventative health care  
• therapy and rehabilitation for the body  
• medical tourism  
• water-based leisure | • medical and thermal baths  
• spa hotels  
• caves  
• aquaparks  
• wellness hotels |
| Southern Europe (Cyprus, Greece, Italy, Malta, Portugal, Southern France, Spain, Turkey) | • physical recuperation and relaxation  
• sea-water-based wellness  
• lifestyle elements (e.g. climate, healthy cuisine, pace of life)  
• medical tourism | • thalassotherapy  
• traditional thermal and medical spas  
• holistic retreats (often run by non-locals)  
• religious and spiritual tourism (e.g. Lourdes, Fatima, Santiago de Compostela) |

Source: adapted from Smith and Puczko, 2010
3 :: A GEOGRAPHICAL AND REGIONAL ANALYSIS

EUROPE

According to ESPA (2013) in Europe there are more than 1,200 spas and health resorts, which are medically respected health [thermal] centres. Although regional divisions can be made in Europe, it is important to note that these are not definitive or clear-cut. There are many similarities between Western and Northern countries, for example those which do not have much of a thermal bath tradition [e.g. UK, Netherlands, Scandinavia]. The Baltic States, Central and Eastern Europe and Russia have much in common in terms of their traditions of medical thermal tourism, sanatoria and rehabilitation. Croatia and Bulgaria have coastal tourism in common with many Southern European countries, as well as thermal traditions [e.g. similar to Italy or Portugal]. Nevertheless, some regional trends can be identified and distinctions can be made between some of the traditions, resources, attitudes and activities in different regions of Europe. A summary is provided in Table 3.1.

WESTERN EUROPE

Austria has a highly developed wellness tourism industry with large numbers of high-quality thermal baths and wellness hotels (around 892 in 2009) and about 12 per cent of all tourists take health-oriented holidays, so Austria is the European leader in this segment [ABA, 2011]. Austria shares many characteristics with other Alpine countries as it uses its climate, fresh air, mountains and lakes as an inherent part of the wellness tourism product. Other German-speaking countries like Germany and Switzerland are also very advanced in terms of their development of high-quality thermal resorts, spas and baths. The emphasis is more on wellness tourism than medical tourism, but the tradition of kur and the concept of medical wellness are also widespread. The German health insurance system still supports some treatments in medical spas which is a fundamental element of domestic health tourism. On the other hand, Austrian and German wellness hotels and spas are now reaching saturation point and there is a need to limit the number of new developments or to diversify existing products.

Switzerland and several cities [e.g. Berlin Health Care City] and regions [e.g. Bavaria] in Germany have established themselves as key destinations for medical tourists looking for high-quality [and expensive] surgical interventions, especially from Russian-speaking countries and Arabic countries. Switzerland has also become known as a country to perform euthanasia.
Thalassotherapy (or marine medical tourism) has a long history in Western Europe, especially in resorts on the Atlantic Ocean. It is especially popular in France. SpaFinder predicted a revival of interest in thalassotherapy in 2006. The II International Thalasso Congress in 2008 organised by the European Spas Association encouraged tourism players in seaside spas and resorts to start providing thalassotherapy again and to highlight the various ways in which it can be applied. Still, the revival or the spread of thalassotherapy is still to come.

Vinotherapy also has its roots in Europe, especially in France.

Holistic tourism is growing quickly in Western Europe, especially in the UK and the Netherlands. This includes yoga and meditation retreats and workshops, trade shows (e.g. two–three-day body–mind–spirit or yoga shows), and holistic festivals and events.

Occupational or corporate wellness (or health) programmes incorporating some travel component are to become more and more widespread, especially in the mid- to top-management benefit packages at financial and business hubs, such as London.

CENTRAL AND EASTERN EUROPE

Some governments (e.g. Hungary, Czech Republic, Slovakia and Slovenia) have invested large sums in the development and upgrade of traditional medical resorts. Russia has been investing in the upgrade and modernisation of its medical tourism facilities (especially in and around Sochi, the host of the Winter Olympics in 2014). Several countries, especially Hungary and Poland, have become popular destinations for dental tourists. In Hungary special European Union and government co-funded schemes (approximately 15 million euros) were available for the improvement of dental technology and communication.

Through social and health policy the governments in CEE are still providing large subsidies for medical treatments and trips in the form of social tourism and prescribed therapeutic cure trips.

Poland enjoys a long history of health tourism and destinations have been attracting health tourists since the thirteenth century. Visitors can find thermal waters, salt caves, medical muds and even oxygen bars in Poland. Most countries on the Balkan Peninsula (i.e. Slovenia, Croatia, Serbia, Romania, Macedonia, Bosnia and Herzegovina, and Bulgaria) have natural healing resources, such as thermal water springs, healing climates or caves, and the price levels are relatively cheap. Wellness facilities are also growing in popularity.
Despite the relatively large numbers of thermal spas in Central and Eastern Europe and Russia, the emphasis has traditionally been and is still mainly on curative medical thermal tourism.

**NORDIC AND SCANDINAVIAN COUNTRIES**

In much of Northern Europe, because of the lack of natural healing assets and traditions, people do not tend to know about or believe in the beneficial impacts of medical waters (the Baltic States and Russia are exceptions). This results in health and wellness tourism being based on relaxation and mainly includes fitness services, massages, [fun] baths with hot water and saunas. In Nordic countries, the sauna often represents an integral part of everyday life (especially in Finland) rather than being a luxury that is associated with wellness programmes (there are three forms of saunas: smoke, wood and electricity heated). It is well known that Nordic people have a generally healthy attitude to life, and many of the fitness activities which are part of everyday life (e.g. Nordic walking) have now been exported to wellness centres and spas all over the world. Nordic Well (2007) describes how:

> The cold North is home to many traditions that are warming and soothing. Underpinning them are the ideas that relaxation and cleansing are every person’s right, and that relaxation therapies can contribute to a better society. These traditions – some of them, a thousand years old – include sauna, water therapies, massage and herbal treatments.

They also describe how design is modern, simple, clean, airy, light, calm, uncluttered, in harmony with nature, inviting, functional and inclusive, as well as being combined with three influences: a Zen-like belief in the power of nature; a tradition of linking design to the well-being of all people; and a skill for choosing appropriate technology [e.g. the Serena Water Amusement Park in Korpilamp [Espoo, Finland] combines these factors, since it was carved into the rocks, so guests can enjoy the pools, the slides as well as the sauna areas – all within the hill overlooking the ski slopes on the other side of the valley].

Julie Lindahl, a wellness expert, social entrepreneur and author of several books, including *On My Swedish Island: Discovering the Secrets of Scandinavian Well-being*, was the first to use the term ‘Nordic well-being’, which focuses on five lifestyle areas: design, food, gardens and herbs, outdoor life and relaxation. She advocates fitness and nature meditation; gathering and preparing food from nature; detoxing and relaxation.
techniques including sauna, herbal baths and massage; and a quiet opportunity to write, paint or do needlework in an inspirational natural environment. Since then, the term has been used by groups of Nordic academics and researchers. It is generally agreed that Nordic well-being is typically oriented towards nature and outdoor recreation combined with healthy gastronomy and cleanliness of air, landscape and water (Tuohino, 2008). Northern seas are usually too cold to be used extensively in health tourism, although the concept of Lake Wellness is being developed in Finland (Kangas and Tuohino, 2008). Remedios (2008: 285) describes Scandinavian spas as being based around the sauna and ‘the vacillation between hot and cold experiences’.

There are several hotels in Nordic countries and regions which offer a treatment known as cryotherapy, which means natural treatment of human skin with extremely cold air (−80 up to −110 degrees centigrade or less) with numerous benefits to cell production, pain killing, treatment of injuries and inflammatory diseases and improving general health. By contrast, people in Iceland recognise the benefits of hydrotherapy in hot water. The average Reykjaviker goes to a thermal pool about 15 times a year (Nordic Well, 2007). One of the ultimate Nordic spa experiences is the Blue Lagoon or the Fontana of Iceland. Erfurt-Cooper and Cooper (2009) also describe the unique possibility of bathing in thermal springs in Greenland in the middle of the wilderness with icebergs floating in the sea nearby or the fascination of cruise ship visitors in Antarctica with bathing in the volcanic hot springs.

The Baltic countries (Estonia, Latvia and Lithuania) all have a long tradition of health and wellness tourism which is closer to that of Central and Eastern Europe and Russia than to Scandinavia. There are many traditional thermal baths, rehabilitation centres and sanatoria, many of which are located on the Baltic sea coast (e.g. Pärnu in Estonia and Ju-rmala in Latvia). These were and still are used for healing as well as leisure, with an increasing number of Russian and Russian-speaking guests visiting the resorts but also buying properties in the towns. Estonia also attracts many Finnish and Norwegian tourists, although the numbers have declined slightly in recent years. Apparently, no other country has as many spa hotels per capita than Estonia at more than 40 and still growing. The Estonian SPA Association implemented a quality system for medical spa hotels in 2008 which was extended to wellness spas and centres in 2012 (Estonian spas, 2011).

Latvia’s natural cosmetics ranges (e.g. Madara) are becoming world famous, and like the other Baltic States, green and ecotourism are an inherent part of the tourism product. ‘Pirts’ or Latvian wood saunas can be accessed almost everywhere. Unlike Finnish saunas which are dry, water is used to create steam. They are heated to 100°C ideally and the body is usually thrashed with branches of broom (Olte, 2013).
According to the IMTJ (2013) Latvia is becoming famous for its cancer treatments and has established its own health tourism organisation which will focus mainly on marketing, regulation and developing health tourism packages. The organisation includes a wide spectrum of health tourism entrepreneurs, ranging from surgical, medical rehabilitation, resort rehabilitation, health restoration, spa and wellness, to the organic cosmetic industry and higher medical education institutions. Latvian health tourism is mainly promoted in Northern Europe, Russia and Israel. Jūrmala City Council is working with the Latvian Resorts Association to develop a health tourism strategy until 2020 and helped to establish the Latvian Wellness Tourism Cluster. The aim is to increase the number of medical, wellness and spa tourists to Latvia and develop the local health tourism industry. Latvia is already seeing an increase in the number of medical and wellness tourists due to competitive prices and high service quality.

Lithuania has a relatively rich wellness culture. According to the Lithuanian Association of Hotels and Resorts research from 2011 quoted by Hood (2013) 26 per cent of tourists stayed in a spa resort or old sanatorium. The National Spa Association was founded in 2007 and has more than 20 members. The spa culture is medically orientated and 95 per cent of spa visitors have therapeutic experiences or come to prevent or treat illnesses. The country has numerous famous mineral waters and therapeutic mud baths and treatments. The southern town of Druskininkai is thought to be the spa capital of Lithuania with its many spa and wellness venues. Foreign tourists come mainly from Russia, Poland, Germany, Belarus and Latvia. A feasibility study of a proposed medical tourism cluster was prepared in 2012 and is expected to be implemented.

SOUTHERN EUROPE

There are also a number of traditional historic spas in Southern Europe. Erfurt-Cooper and Cooper (2009) discuss the importance of hot springs in the Mediterranean region. Italy has one of the longest recorded histories of usage, as does Greece. Spain and Portugal also have numerous mineral-medicinal thermal sources, but the therapeutic qualities of the waters in Portugal were not recognised until the eighteenth century. Gustavo (2009) counted 37 Portuguese thermal centres, and many of the spas are being regenerated, diversifying into wellness as opposed to medical tourism, or are developing parallel facilities for medical and wellness tourism (Gustavo, 2009). The same is true of Italian spas (Ferrari, 2009).
Some modern spas also exist, especially in mountain resorts which are used by skiers [e.g. in Andorra]. In addition to historic and thermal spas, the lifestyle and diet in the Mediterranean is one of the healthiest in the world. The existence of a good climate and the seaside has benefited residents and tourists for centuries. Thalassotherapy is offered throughout the region, for example in Greece, Spain, France and Italy. Islands like Cyprus and Malta are increasingly positioning themselves as medical tourism destinations, capitalising on their English language skills as well as their high-quality clinics. Wellness hotels in the region are proliferating extensively and there are few countries which do not have a large number of spa and wellness hotels. One of the very first longevity centres in Europe was established in the Algarve (Portugal).

Although some parts of Turkey are technically in Asia, many visitors consider the country [especially the seaside] to be an extension of Southern Europe. Turkey is located on top of a major geothermal belt, therefore it is among the top seven countries in the world for quality and quantity of thermal springs with over 1,000, with temperatures ranging from 20°C to 110°C. Most are in the Aegean regions and because of their proximity to popular tourism destinations such as Izmir, Pamukkale and Marmaris, public transport is easy. Many of Turkey’s historical places developed because of their springs like the ancient city of Hieropolis which was built upon the rich mineral springs of Pamukkale, and the ancient Lydian city of Kaunos, whose people took baths in the rich mineral mud of Lake Koycegiz. In Kangal Hot Springs the carbon-dioxide rich water is the home to small fish that actually bite the infected skin off the guests sitting in the water. These so-called Turkish carp are now being used increasingly in spas all over the world. Turkey with the sound support from the Turkish government has been developing its medical tourism facilities and offers in a rather fast pace with over 30 JCI-accredited hospitals by 2013.

Many yoga and holistic centres are located in Southern Europe (for example, Skyros and Yoga Plus in Greece, and Cortijo Romero in Spain). This is largely because the landscapes and climate are so attractive to visitors and course tutors alike. Although such centres could technically be located anywhere, many of the lifestyle practitioners who choose to re-locate [especially from the UK] go to Spain or Greece. Turkey is becoming increasingly popular with yoga centres and retreats being located there (e.g. Huzur Vadisi).

The province around Granada in Spain has Arabic baths, the remains of thermal baths dating from the Roman period, water cisterns, fountains, natural swimming pools and irrigation channels, all of which are evidence of the great importance that
3 :: A GEOGRAPHICAL AND REGIONAL ANALYSIS

The typical atmosphere of traditional hammams has been re-created, which in the Andalusian period were the centres of social life. Visitors alternate between pools with waters at different temperatures. The baths include a Warm Room, with a pool at a temperature of approximately 36°C, a Cold Room, in which the water is at 16°C, and a Massage Room. They are beautifully decorated with mosaics, arches with fine lattice work, and exotic scents, music and warm light help to create atmosphere.

There have also been some new developments in the Canary Islands and in the Balearics. The Canary Islands have an all-year-round climate which is ideal for certain medical conditions and healing. Islas Canarias Wellness Delight (2013) state that the Canary Islands are healthy by nature because of the climate, sunshine, sea, natural beauty and the most prestigious mineral-medicinal waters in Spain, calling the environment ‘A spa in the open air’. They promote several spa hotels and resorts, including those offering thalassotherapy.

MIDDLE EAST AND NORTH AFRICA

In terms of natural resources in the Middle East and North Africa, there is mainly desert and sea, although as far back as 3000 BC people with eye problems could make a pilgrimage to Tell Brak (Syria) hoping that deities would perform miracles. Some wellness hotels offer products and services that are unique to the region, such as the Desert Sand-Herb Rasoul Scrub offered in Dubai. The Gulf countries and cities (such as Dubai, Doha or Muscat) have some of the most spectacular and luxurious spas facilities built in the last few years (e.g. spas in the Jumeirah chain). Hammams are indigenous to the region and consist of a process of sweating, exfoliation and cleansing of the skin, and massage administered by therapists. Special hammam hotels exist in countries like Morocco. Thalassotherapy is also offered in several hotels in Morocco and Tunisia, as well as Egypt and the United Arab Emirates. Indeed, large numbers of high-quality spa hotels are being developed in the region, especially in the United Arab Emirates, or Oman where the distinctive local architectural features are particularly stunning. However, it is perhaps the Dead Sea which attracts the majority of wellness tourists to the region. The Dead Sea is sometimes described as the world’s largest ‘natural spa’.

One spa in northern Israel (Ada Barak’s beauty spa) is becoming famous for its snake massage. California and Florida king snakes, corn snakes and milk snakes (all non-venomous) are used for the massage and sometimes as many as six at once. The size of the snake determines the kind of massage. Large ones are said to alleviate deep
muscle tensions whereas small ones create a ‘fluttering’ effect. Physical contact with snakes is thought to be stress-relieving, once guests get over their initial horror! This snake massage is included with a further nine ‘weird spa treatments’ around the world as shown below.

**TOP TEN WEIRD SPA TREATMENTS AROUND THE WORLD**

1. Snake massage in Israel
2. Cryotherapy in Finland [Haikko spa in Porvoo, Finland has a super-cold chamber of −110°C]
3. Beer bathing in the Czech Republic [dark beer is mixed with mineral water at the Chodovar Brewery in Chodová Planá and is said to have medicinal effects]
4. Orgasm Hotel, Sweden [Venusgarden is a ‘love hotel’ in Scania owned by an orgasm coach. All rooms come equipped with sex toys and erotic pictures, plus a copy of the owner’s best-selling book, *Orgasming More*]
5. Chocolate facial, Pennsylvania [Hershey’s hotel and spa offers an edible facial treatment]
6. Sake Spa, Japan [The Hakone Kowakien Yunessun hot springs amusement park and spa resort has pools for bathing in sake, green tea, wine and coffee – and occasionally even ramen noodle soup!]
7. Solitary retreat, Egypt [Sinai desert retreat where visitors trek across the desert, sleep under the stars, wash with a Bedouin herbal treatment and spend a few days alone in self-reflection]
8. Sound Bath, California [The Integratron is described as ‘an acoustically perfect tabernacle and energy machine sited on a powerful geomagnetic vortex in the magical Mojave desert’. Visitors can have ‘sound baths’, relaxing yet energising 30-minute sonic sessions which are said to align with their chakras or energy centres]
9. Fire cupping, Beijing [Cupping is an extreme massage technique involving suction. Fire cupping is similar, but with added flames]
10. Waterfall massage, Canada [the Willow Stream Spa at the Fairmont Hotel in Banff Springs has three indoor waterfalls used for reviving tired muscles after a day’s skiing in the Rockies]

(Dixon, 2012)
Increasingly, the Middle East is gaining a reputation for medical tourism, especially in the United Arab Emirates (e.g. Dubai) and Jordan, which for years positioned itself as the ‘mecca’ of medical tourism in the Middle East. Dubai has also become a hub for medical services, since over 120 medical facilities and 3,700 health-care professionals have chosen the Dubai Healthcare City. Foreign medical/health-care (tourism) brands, such the Cleveland Clinic in Abu Dhabi have also become established in the region. Jordan was recognised by the World Bank as the leading regional destination for health care, and the fifth medical tourism destination worldwide in 2010 (Stefano, 2010). Most Jordanian health-care facilities are accredited by both domestic and international organisations. Dental tourism is one of the fastest growing sectors within medical tourism in Jordan (Al-Hammouri, 2010). The spa business in Jordan is currently growing at 12 to 15 per cent per year, with 11 per cent of room nights at the Dead Sea currently derived from spa and wellness visits. That market is expected to grow 10 per cent per year over the next ten years (USAID, 2009). Other countries like Iran are also boasting excellent doctors, high-quality facilities and cheap health care. However, Iran also has potential for thermal spa development.

Yoga holidays are offered almost anywhere in the world, but increasingly in the Middle East and North Africa (e.g. in Dahab on the Red Sea, Egypt). Doing yoga in a desert setting, for example, can add to the spiritual experience. Sometimes yoga holidays are combined with belly dancing (e.g. in Hammamet, Tunisia). One yoga holiday in Morocco includes a Jimi Hendrix experience in Essouira or trekking with Bedouins in Egypt (Yoga Travel, 2007). Spiritual tourism does not tend to be combined with religious tourism in the Middle East, even though it is a major centre for pilgrimage tourism (with all Muslims being expected to complete the Haj to Mecca in Saudi Arabia). Spiritual and religious tourism are also common in Israel, but usually for different/separate religious groups rather than secular spiritualists. However, recently there has been a growth of spiritual or holistic festivals which appeal to younger residents and tourists.

AFRICA

Although luxury spas exist in Africa, this is largely in South Africa and on some of the islands, for example in the Seychelles or Mauritius. South Africa is the leading destination in Africa for spa tourism and use is made of the mountains and sea as well as the bush. Increasing use is also being made of the thermal springs. The South African Tourist Board (2008) describes how the African spa has taken on a whole new meaning from the European concept, as nature is almost always used in products and
treatments, as well as centuries of indigenous and tribal traditions of healing. South Africa has developed a number of luxury safari or bush spas which are located near to national parks where visitors can go on safari. Some spas or wellness centres also specialise in vinotherapy or wine therapy. Many of the spas offer global and especially Asian treatments, but a few specialise in African traditions, such as African wood massage and African raindrop treatment. The African Day Spa has become almost a brand name (e.g. for product ranges) and the Bush Spa is a common phenomenon, where tourists stay in a lodge in the African bush, experiencing natural and herbal treatments, often combined with safaris. The spa at Cape Grace in South Africa uses healing techniques and traditional remedies of the region’s native San and Khoi tribes, who used massage, indigenous plants and the spices introduced by the Indian Ocean traders en route from Asia to Europe. The South African Tourist Board also promotes the Spiritual South where guests can participate in ‘wholistic’ tourism, such as: animal or eco-therapies like ‘Mingling with Meerkats’, ‘Horse-labyrinth’ or eco-psychology. Medical tourism is also a big industry in South Africa, especially cosmetic surgery.

Kenya offers opportunities to combine safaris and spas, as well as centres like Wildfitness, where visitors can get fitter using natural habitats (e.g. sprinting in sand dunes, swimming in creeks, jogging through jungles).

Increasingly, Kenya is also offering medical tourism, for example, cardiology, dentistry, dermatology, endoscopic, general and spinal surgery, obstetrics and gynaecology. The Kenyan government also supports herbal practice and has registered and licensed herbalists to practise in public and private hospitals. Medical tourists tend to come from Uganda, Tanzania, Rwanda, Burundi and the Democratic Republic of Congo (DRC), among others (Softkenya.com, 2013). In South Africa, medical tourists besides the plastic or dental surgery can enjoy wine, bush, wilderness or train safaris.

ASIA

Spa and wellness are gaining unprecedented growth and popularity across Asia. SpaFinder (2013) stated that in 2011 Asia-Pacific had the largest number of spas and hotels under development of any region in the world, with 77 per cent of that regional hotel expansion earmarked for China and India (56 per cent and 21 per cent, respectively). Luxury spas and spa hotels are being built throughout the region with some of the world’s best being located in places like Bali, Phuket, Langkawi and the Maldives. New and well-established brands such as the Oberoi, the Peninsula, Shangri-La or the Lux Island Resorts all invested significant sums in the development
and improvement of their spa and wellness services. Even some of the less visited destinations such as Laos, Cambodia or Vietnam have an emergent spa industry. China and South Korea have just been discovering the medical tourism opportunities on their healing traditions (Traditional Chinese and Traditional Korean Medicine, respectively). Some of the former Soviet Union countries, for example Kyrgyzstan, offer traditional, natural asset-based healing services, such as treatments in salt mines.

Most of the Asian spas, even if they are located in chain hotels, include local signature treatments which can be very special and luxurious (e.g. Balinese coffee-peeling ritual).

In Japan, onsen (ritual bathing establishments that can be individual facilities or as part of a ryokan, i.e. inn) are representative of tradition and heritage. Japan is very rich in hot thermal and volcanic waters and visiting an onsen is a must for almost any visitor (in Jigokudani Monkey Park, snow monkeys are sitting in the hot spring!). Japan is one of the biggest spa-going nations in the world, it has the largest number of spas in Asia currently and is the number one country in Asia in terms of spa revenue (Demetriou, 2008). In South Korea, which is rich in thermal springs, a very special facility and tradition was developed known as the jimjilbang. In these bathing complexes guests can not only bathe, have a massage but also can rest and sleep as long as they wish (in a common resting room).

Asia remains the key medical tourism region in the world with India, Thailand and Singapore in particular attracting growing numbers of tourists because of cheap prices as well as good service and extensive expertise. According to some reports, Thailand holds a 38 per cent stake in the world’s medical tourism market, the largest of any country in the world (GSS, 2011). Bangkok is the homeland of probably the most globally acclaimed hospital treating over 400,000 international patients every year. The Bumrungrad International Hospital has over 30 speciality centres, hotel and suite accommodation and even a small shopping arcade. Malaysia is also growing fast as a medical tourism destination (Mun and Musa, 2013). The South Korean government together with leading industry representatives (e.g. LG and SAMSUNG) have been working hard to develop the medical tourism supply in the country (having several centres in Seoul, Daejeon or Jeju), partially building on the large Korean population in the West Coast of the USA.

In Asia, the traditional health approaches and techniques (e.g. Thai massage, Chinese medicine, yoga, Ayurveda) have become globally exportable. However, for many tourists, especially holistic or spiritual tourists, an authentic experience can only really be gained in the country of origin. Thai massage is available everywhere in Thailand, but visitors can also learn the technique in massage schools which offer
special training programmes. The path-making facilities providing integrative health solutions to guests, such as the Chiva Som International Health Resort and Destination Spa (Hua Hin) or the Kamalaya Wellness Sanctuary, Luxury Detox Resort and Holistic Spa (in Koh Samui), are also in Thailand.

It is possible to experience yoga and meditation in numerous ashrams and retreats throughout India. Ayurvedic treatments are on offer throughout India, but most especially in Kerala where the practice originates. India has a long history of spiritual tourism and the Ministry of Tourism (2011) has invested in the development of infrastructure for spiritual destinations such as Leh-Ladakh in Jammu and Kashmir, Chitrakoot in Madhya Pradesh, Haridwar-Rishikesh and Puducherry.

The Philippines government has been promoting health tourism since the early 2000s, which includes spas, wellness, leisure and, more recently, medical tourism. The Philippines is rich in natural springs, famous for Hilot massage, as well as being known as the healing centre of the Far East because of its herbal and non-traditional medicine, pranic and reiki healing, hypnosis, acupuncture, faith healing, massage, herbal medicine, reflexology and so-called psychic surgery.

AUSTRALASIA AND THE SOUTH PACIFIC

Australia has much in common with many other Western developed countries, for example the UK and the USA as well as much of Europe. The emphasis is mainly on wellness tourism and day spas, and holistic retreats also play an important role. Voigt et al. (2010) show that medical tourism is not yet developed in any kind of organised way, but that the number of spas has grown significantly in the last ten years (by 129 per cent) and the most popular kinds of wellness facilities are beauty spas (including water-based treatments such as the Peninsula Hot Springs in Melbourne), lifestyle resorts (including fitness, nutrition, counselling, weight and stress management), and spiritual retreats (including meditation, yoga, Tai Chi or reiki, for example). Some spas are exploring opportunities to source and include products that are indigenous to the area, for example Hepburn Springs and Daylesford Naturals products, which is located in the most visited spa region in Australia. This can include raw products used in treatments that are sourced in the local area, or those that have been or are currently being used by Australia’s indigenous Aboriginal communities. For example, the spa menu at the Daintree Eco Lodge and Spa in Queensland has been collated out of respect and with approval of the local tribal Kuku Yalanji Elders and aims to integrate the wisdom of ancient cultures, medicines, spirituality and healing. Australia also has a growing number of holistic retreats, especially around Byron Bay.
New Zealand is a destination where spa services are based on the assets of the natural environment making bathing in natural hot springs a key attraction. The Polynesian Spa in Rotorua is perhaps the best known, as it combines a geothermal, cultural and health and spa experience. Another is Hell's Gate Wai Ora Spa, which is home to New Zealand’s most active geothermal field, including a large variety of volcanic features including exploding waters, steaming fumaroles, pools of boiling mud, the only accessible mud volcano and the largest hot waterfall in the Southern Hemisphere. Within this active geothermal reserve is the Wai Ora Spa and Wellness Centre, where visitors can experience the unique geothermal muds and sulphurous geothermal waters in a traditionally Maori-themed environment. Maori have been bathing in the geothermal muds and sulphurous waters for over 700 years for healing. The mud can be used to enhance the skin and sulphurous spas with hot water falls are used for relaxation. The traditional Wai Ora massage is also offered, which is based on the concepts of Miri Miri, the traditional Maori massage regime that has been practiced for hundreds of years (New Zealand Tourism, 2007).

Several hotels in the South Pacific already have spa facilities which are combined with other packages (e.g. beach tourism, business tourism, honeymoons and weddings). Fiji in particular has several spa and wellness hotels. Fox (2012) reports that spa and wellness tourism have been one of the key growth segments in this region recently with many world class spas being developed.

AMERICAS AND THE CARIBBEAN

In the USA and Canada there are large numbers of day-spas catering for mainly urban dwellers who are looking for relaxation, pampering and stress relief. However, the number of destination, resort and hotel or speciality spas (e.g. wine spas) is growing. Canada’s spa health and wellness tourism sector is relatively young by global standards, given that most spa facilities are just over a decade old. In the USA and Canada, the concept of ‘therapeutic recreation’ is well established. It is defined by the Canadian Therapeutic Recreation Association [2007] as:

A profession which recognizes leisure, recreation and play as integral components of quality of life. Service is provided to individuals who have physical, mental, social or emotional limitations which impact their ability to engage in meaningful leisure experiences. Therapeutic Recreation is directed toward functional interventions, leisure education and participation opportunities. These processes support the goal of assisting the individual to maximize the independence in
leisure, optimal health and the highest possible quality of life. Spa
vacations are ideal for people who are living with lifelong disabilities
or debilitating conditions.

Apart from the abundant supply of resort and hotel spas, and well-established
destinations spas (e.g. Golden Door) there are several new services emerging in the
North American market. MediSpas, health villages or ‘health care plazas’ have been
developed recently, along with the wellness services in strip malls (e.g. Massage
Envy). Medical services in the USA are popular for affluent patients from Central and
South America, and intra-USA medical travel is also on the rise.

Several South American cities (Medellin, Colombia or Santa Cruz, Ecuador) or
destinations (e.g. Venezuela, Argentina or Brazil) have entered in the international
medical tourism market, targeting primarily North American patients.

Many indigenous traditions are derived from the Americas and are being exported to
spas all over the world. One of the best known is Lomi Lomi massage from Hawaii,
which is usually offered as a two-hour treatment in European spas and is a gentle
wave-like or rocking technique. Native American Indian rituals are also used
increasingly in holistic and spiritual retreat centres. These are now quite globalised,
but in the USA, Canada and Mexico, some more ‘authentic’ experiences can be found
in holistic or spiritual retreats. ‘Sweat Lodges’ [Native Indian ceremonial saunas] are
becoming more popular in spas and retreat centres. In Mexico, Temazcals are similar,
and they are also offered in other Central and South American retreats and spas.
Goldsmith (2008) gives numerous examples of how indigenous American traditions are
being used in spas and retreat centres. In countries like Peru, the consultation of local
Shamans can be offered to visitors, for example a ceremony involving drinking
shamanic medicine which is said to expand consciousness [Sylge, 2007].

In South America there is a long tradition of baños, which are similar to historic baths
or spas in Europe. Erfurt-Cooper and Cooper [2009] describe how Brazil, Argentina,
Uruguay, Peru and Chile (and Cuba) have numerous thermal spring areas which are
used for health, wellness or leisure tourism. Plastic surgery and other forms of
cosmetic tourism are extremely popular in Central and South America, especially in
Argentina, Columbia, Brazil and Bolivia. Apparently, Brazil has 4,500 licensed cosmetic
surgeons, the highest per capita in the world [Discover Medical Tourism, 2011]. Certain
forms of dance that are indigenous to Central or South America are frequently offered
as core products, such as salsa dancing in Cuba or capoeira in Brazil [an Afro-Brazilian
dance-like martial art, first practised by African slaves in the sixteenth century during
SECTION I :: INTRODUCTION

3 :: A GEOGRAPHICAL AND REGIONAL ANALYSIS

Portuguese colonial rule). Although there is a growth in the number of spas, these countries are tending to focus more on medical tourism at present.

One interesting trend in Central and South America is the development of adventure spas. By definition, an adventure spa offers spa treatments, healthy gourmet food and an abundance of outdoor activity. Guests typically want to combine adventurous, outdoors activities by day (e.g. rock climbing, kayaking, hiking, biking) with pampering spa services and luxury treatments by night (Pascarella, 2008). Central and South America have the perfect landscapes for adventure spas, from the wildlife-rich jungles, to the rugged mountain chains, to the numerous hot springs, beaches, lakes and rivers. There is also a keen emphasis on ecospas which aim to preserve and protect these natural resources.

The Caribbean Spa and Wellness Association was established in 2006 and provides help, guidelines and coordination for those interested in health tourism development. There is a focus on wellness and spas rather than medical tourism, although Cuba is an exception (its developed medical services are popular among patients from Central America). One of the mottos of the Caribbean Spa and Wellness Association (2013) is ‘there are lots of spas in the Caribbean, but not enough of the Caribbean in our spas’. The group is therefore aiming to create a single brand which builds on the natural attributes of the region, which they already describe as ‘the world’s largest spa and wellness centre’. Much of this concept is based on the beautiful and relaxing environment such as beaches, mountains and rainforests, as well as the chilled out atmosphere. Treatments make use of local ingredients, such as coconut, tropical fruit, ginger, bamboo, aloe vera, coffee, allspice, sea salt and sugar cane.
## 3 :: A GEOGRAPHICAL AND REGIONAL ANALYSIS

<table>
<thead>
<tr>
<th>Main Sending Markets</th>
<th>Prominent Approach to Health Tourism</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Domestic</td>
<td>International</td>
</tr>
<tr>
<td><strong>Europe</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Northern Europe</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Western Europe</td>
<td>✓✓✓✓</td>
<td>✓</td>
</tr>
<tr>
<td>Central and Eastern Europe</td>
<td>✓✓✓✓</td>
<td>✓</td>
</tr>
<tr>
<td>Southern Europe</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Americas</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>North</td>
<td>✓✓✓✓</td>
<td>✓</td>
</tr>
<tr>
<td>Central</td>
<td>✓✓✓✓</td>
<td>✓</td>
</tr>
<tr>
<td>South</td>
<td>✓✓✓✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Africa</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Asia</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Middle East</td>
<td>✓✓✓✓</td>
<td>✓</td>
</tr>
<tr>
<td>South-East</td>
<td>✓✓✓✓</td>
<td>✓</td>
</tr>
<tr>
<td>Far East</td>
<td>✓✓✓✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Australia, New Zealand and South Pacific</strong></td>
<td>✓✓✓✓</td>
<td>✓</td>
</tr>
</tbody>
</table>
CHAPTER 4
TOWN OR COUNTRY?
BRITISH SPAS AND THE URBAN/RURAL INTERFACE
In 1766, Thomas Benge Burr, the early historian of Tunbridge Wells, whose waters were first discovered by fashionable society in the early seventeenth century, declared the place had ‘now become a populous and flourishing village’. Elsewhere, however, he describes how Tunbridge ‘consists of four little villages, Mount-Ephraim, Mount-Pleasant, Mount-Sion and the Wells; which all united together, form a considerable town’. What exactly was Tunbridge’s geographical status? Was it urbs or rus? Burr only adds to the confusion by at another point describing how:

at a little distance, it bears the appearance of a town in the midst of woods, and conveys to the imagination the soothing idea of a rural romantic retirement, while it actually affords all the conveniences of a city life.1

The ambivalence in this account lies at the heart of the British spa’s identity and appeal to visitors and tourists. Indeed, in some respects, the indeterminate and fluid identity of spas stands as a symbol of the dilemma facing British culture (including tourism) from at least the seventeenth century - a predicament that was only accentuated as urbanization gathered pace - as to whether to look to town or country as its spiritual heartland.

1. SPAS AND URBANITY
The case for spas as towns is a powerful one. Urban historians and geographers have little problem in accommodating spas. Peter Clark and Paul Slack, for example, include them - along with dockyard and industrial towns - among the ‘new towns’ of England in ca. 1700; Emrys Jones argues that in the eighteenth century the ‘glory’ that was the ‘capital city’ London was ‘barely reflected in provincial towns except for those which, like spas, shared royal patronage’, and Colin and Rose Bell conclude that ‘the story of holiday towns is very much a continuation of the story of what we now call spas’.2 In support of the ‘new town’ hypothesis can be cited cases of spas that grew from nothing, or next to nothing, to become substantial and indubitably urban settlements, such as Tunbridge Wells, Great Malvern, Leamington Spa and Llandrindod Wells.3 Also highlighted might be the examples of pre-existing small towns that under the influence of their waters expanded to become major concentrations of population, such as Bath (which grew from around 2000-3000 inhabitants in 1700 to over 35,000 by 1811 and 44,000 by 1851) and Cheltenham (which grew from under 2000 people in the late seventeenth century to over 8000 by 1811 and 35,000 by 1851).4

But it is not simply a question of numbers and growth rates. Far more important, in the case of the spas, than quantitative measures of urbanity were qualitative ones; a point hinted at by Burr in his reference to ‘all the conveniences of a city life’. Spas were of course visited for their therapeutic qualities, and this remained a key attraction. But they soon developed into something much more than a health facility. Already by the early eighteenth century Defoe could describe Bath as:

the resort of the sound, rather than the sick; the bathing is made more a sport and diversion, than a physical prescription for health; and the town is taken up in raffling, gaming, visiting, and in a word, all sorts of gallantry and levity.6

One of the reasons that spas grew so rapidly from the late seventeenth century was that they were not only centres of medicinal treatment but were also at the forefront of the provision and development of a new culture of fashionable leisure and tourism that acquired a powerful hold on the minds of the elite and those who aspired to join them. At the heart of this culture were the linked concepts of civility, sociability and politeness. Civility, as Anna Bryson has argued, was an ideal that evolved in the Renaissance and became embedded within the social code of the English elite during the early modern period, and was seen as closely associated with city living, and in particular with the influence of London.6 The British Enlightenment built on this foundation, accentuating the importance of sociability and adding – as historians such as Paul Langford, Lawrence Klein, John Brewer, Roy Porter and Philip Carter have shown – the new concept of politeness.7 This created an ideology of manners and behaviour that came to dominate the cultural landscape of the elite and upper middle class in eighteenth-century Britain, and which was seen as inherently urban since it could be cultivated most effectively in the open and gregarious ambience of the town. London remained the most influential urban centre for developing and disseminating the new ideals, but during the eighteenth century Edinburgh, Dublin and provincial urban centres came to play an increasingly important part. What was critical was that locations seeking to inculcate the newly refined values, and benefit financially from this, should acquire a series of highly public arenas in which visitors could gather in numbers, learn about the latest fashions, mix and converse freely, exhibit their minds, manners and accoutrements, and engage in intensive socializing. With their baths, pump rooms, theatres, assembly rooms, coffee houses, shops, pleasure gardens and walks, spas were particularly well equipped to meet this demand.8

Some spas acquired a master of ceremonies whose job it was to facilitate the social ritual that controlled the daily lives of the visitors, and ensure that they observed and

---


absorbed the polite norms of the town. At Bath and Tunbridge Wells, this office was
occupied, for over half a century, by Richard ‘Beau’ Nash. His biographer, Oliver
Goldsmith, credits him with introducing a regime of politeness and sociability that
spread from Bath and Tunbridge Wells to London, and from thence to the country as
a whole, emphasizing the role of the town in general, and the spa in particular as a
civilizing agent:

He was the first who diffused a desire of society and an easiness
of address among a whole people, who were formerly censured
by foreigners for a reservedness of behaviour and an awkward
timidity in their first approaches. He first taught a familiar
intercourse among strangers at Bath and Tunbridge, which still
subsists among them. That ease and open access first acquired
there, our gentry brought back to the metropolis, and thus the
whole kingdom by degrees became more refined by lessons
originally derived from him.9

It is also clear from Goldsmith’s account that Nash saw this civilizing process in
specifically anti-rural terms, using pointed satire to outlaw country clothing in the
assembly rooms.10

The spa’s role in promulgating an urban culture was not simply confined to patterns
of behaviour. The physical stage on which the visitors performed constituted some of
the most advanced and sophisticated forms of specifically urban architecture of the
period. This went not only for the specialist entertainment buildings, such as the
assembly rooms, but also the residential accommodation. Multi-unit residential
buildings - such as terraces, squares and crescents - specifically tailored to urban
needs and the requirement for high-status ‘sociable’ architecture, were features of
many spas. Bath pioneered the development of the ‘palatial’ square, the crescent,
and new approaches to urban planning.11 Moreover, the impressive buildings
constructed soon became a tourist feature in their own right. The guidebooks to Bath
endlessly trumpeted the quality of its buildings12, and visitors in their diaries and
correspondence confirmed the impression that its architecture was one of the spa’s
major attractions. In 1766, the Cornish vicar John Penrose could describe Wiltshire’s
assembly room (designed by John Wood and opened in 1730), as ‘the finest room I
ever saw’ and recall how:

we walked together over the Grand Parade [built as part of the
multi-dwelling Parades project by John Wood in the 1740s],

---

11 J. Summerson, ‘John Wood and the English Town-Planning Tradition’, in
Heavenly Mansions and Other Essays on Architecture, ed. J. Summerson (London:
Cresset Press, 1949), 87-110.
12 For example, The New Bath Guide (Bath: R. Cruttwell, [1772]), 40; The Improved Bath
Guide (Bath: Wood and Co., [1812]), 12;
P. Egan, Walks through Bath (Bath: Meyler and Son, 1819), 48, 50.
reckoned one of the noblest Walks in Europe, being about 190 yards long, and 20 broad, and raised on Arches above the common Level 18 feet [...] The Buildings are truly magnificent: so that I could not help thinking of the Disciples admiring Question to Christ concerning the Temple, "What Stones and Buildings are here?"

In a similar vein the French tourist François de La Rochefoucauld in 1785 declared Bath: certainly the pleasantest town in England; even, as some think, in Europe. It is built all of freestone, commonly available here, though what is less common is the general nobility and elegance of all the houses and the number of delightful squares one sees.13

2. SPAS AND RURALITY

Spas oozed urbanity. They were the places to which the fashionable gentleman, his wife and eligible daughters could migrate each season to discover the latest cultural trends, find excitement and sociability, and escape the isolation, boredom and backwardness of the countryside. And yet, as Burr’s opening comments suggest, most spas were deeply embedded in the countryside. Many must have grown out of the holy wells and springs scattered throughout the countryside whose supernatual and catholic history was quietly suppressed - or at least relegated to the subconscious - when they were re-discovered as spas whose waters were claimed to possess scientifically verifiable therapeutic ingredients.14 We may now be sceptical about the science behind these claims, but there is no denying that the waters, which lay at the heart of the spa’s identity and function, were a natural and not a man-made phenomenon, and that most springs were situated, at least originally, in highly rural locations. Phyllis Hembry lists 152 ‘English places with spas 1560-1815’, and the vast majority of these are in open country, hamlets, villages or small towns. Even the 17 ‘London spas’ are largely situated on what was then its periphery and treated as summer rural retreats. In 1710, the German tourist Zacharias von Uffenbach described Hampstead as:

the nearest medicinal spring to London, and it is such an agreeable spot that not only do many people take the waters there but several have built handsome houses for themselves, where they remain for the whole summer, while many drive out from London on Mondays, Thursdays and Saturdays and divert themselves there.15

---


A not untypical example of the smaller rural provincial spa is Astrop. Situated deep in the Northamptonshire countryside it appears to have been ‘discovered’ in the mid-seventeenth century. For the following one and a half centuries, it served fashionable society, accruing over time a range of facilities. When Celia Fiennes visited in about 1694 it ‘was much frequented by the Gentry [...] there is a fine Gravell Walke that is between 2 high cutt hedges where is a Roome for the Musick and a Roome for the Company besides the Private walkes’. In 1740, Thomas Short found in addition to a fine tea room, the second or dancing room, a kitchen and a shop. These facilities sustained a seasonal regime that included, alongside taking the waters, regular assemblies, public breakfasts and card playing - not so very dissimilar to the urbane routine at Bath, if on a different scale. Yet, significantly, there appears to have been no on-site residential accommodation, and visitors seeking somewhere to stay had to find lodgings in nearby King’s Sutton, itself only a village. From about 1800 the whole enterprise went into sharp decline, and Astrop very largely disappeared, retreating into obscurity as the surrounding countryside and vegetation recaptured the space. The fact that a number of spas went on to develop into towns should not obscure their country origins or the fact that most did not make this transition from the rural to the urban.

The reality that most spas remained small and located in the countryside raises the intriguing question to what extent they were discovered and developed where they were not in spite of but because of their rural location. There are of course physical constraints on where springs appear, but they are distributed relatively widely. Polite towns and seaside resorts were to prove remarkably adept at ‘finding’ an adjacent spring which could be dressed up as a spa, to provide a fashionable accessory. Significantly many of these urban springs, like those in London, were located in the rural periphery of the town; provincial examples include the Vigo Well in a field which was a short walk from Northampton, and the ‘spaw’ at Durham which (according to Celia Fiennes) lay a mile from the town, while the two wells at Canterbury were located outside the city gates, the spa at Bishopton was situated on the edge of Stratford-upon-Avon, that at Wick just outside the parish of Brighton, and that at Gumphreston just beyond Tenby. At Cheltenham, though later development obscured this, the earliest spring was situated at Bayshill, which was some way from the old town but connected to it from 1739 by a tree-lined walk planted by the spa’s promoter Henry Skillicorne. Though at Bath the major springs were locked in the heart of the medieval city, during the eighteenth century new wells were discovered and developed on the periphery and in nearby villages, such as the Bagatelle, and the spas at Lyncomb, Bathford, Box and Holt.
The Hotwells at Bristol occupied a position to the west of the city, part of the developing elegant Georgian village-suburb of Clifton. Located in dramatic scenery on the edge of the Avon Gorge, the romantic and semi-rural situation of the Hotwells was one of its greatest assets. In 1794, it was reported that:

> the downs are near to the Wells, lofty and spacious, covered with verdure all the year [...] they are enlivened by the most agreeable prospects on every side, and the resort of the company who daily take the air here in carriages and on horses [...] Between Rowham and Hotwell-house, rise on each side of the river a magnificent range of rocks, which are not more remarkable for their height, than for their being equally so on both sides of the river.21

Many spas were established not just in the countryside but amidst hilly and mountainous scenery, and in what at the time would have been considered remote places; for example, Buxton and Matlock in the Peak District, Cheltenham beneath Cleeve Hill and the Cotswold escarpment, Great Malvern under the Malvern Hills, Church Stretton under the Long Mynd and the mid-Wales spas of Llanwrtyd, Llangammarch, Builth and Llandrindod deep in the wilderness of the Cambrian mountains. Accessibility to such places was a major problem. ‘It is very difficult to find the ways here’, Celia Fiennes observed on her journey to Buxton, ‘for you see only tops of hills and so many roads by reason of the best ways up and down that its impossible for Coach or Waggon to pass some of them’.22 Even the steep descent into Bath was a dangerous affair.23 The semi-rural, rural and sometimes downright wild location of most spas, and the willingness to put up with the difficulties in getting to them, reinforces the overwhelming impression that promoters and visitors saw rus not as an accidental by-product but a necessary feature of the places they visited.

The rural character of spas was reinforced by the pattern of their physical development, which was often what may be termed dispersed or de-centred. At Tunbridge Wells, the ‘centre’ was in theory the spring itself, with the attached formal walks, souvenir shops and leisure facilities in the area that became known as the Pantiles. However, as Burr’s description makes clear, the early development of the spa was multi-centred, with various only loosely connected ‘satellite’ settlements or ‘villages’ providing the bulk of the lodgings. From about 1740 there was little further expansion until the nineteenth century, and in particular the development of the Calverley Estate from about 1830. Since this lay well to the north of the Pantiles, it simply had the effect of creating yet another centre for the spa, especially since it had a market hall which by the 1840s had been transformed into a town hall.24

---


22 Journeys of Celia Fiennes, 103.


Leamington the original village of Leamington Priors lay to the south of the River Leam, and the early development of the spa took place here, before the building of the ‘new town’ to the north and the new Pump Room (opened 1814) shifted the orientation of the town.25 Spas founded on green-field or village sites were highly fluid spaces, where it was difficult for a formal centre or core to emerge. But even established towns were subject to the pressures of de-centring. Cheltenham was a small but historic Gloucestershire town. The status of its traditional core around the High Street was constantly threatened during the years of its rapid expansion in the early nineteenth century by the discovery and development of new springs on its edge, such as Montpellier and Pittville, where, in the words of Gwen Hart, the ‘two chief speculative landowners at this time were aiming not merely at building individual houses, but at laying out the new areas of the town in such a way that each would be an attractive whole’.26 Joseph Pitt’s scheme was envisaged on a grand scale, the 100 acre estate to contain several miles of walks and rides, with at least 500 houses, a church and spectacular pump room, all self-consciously perceived as ‘rivalling its parent Cheltenham both in extent and importance’.27 Bath was a medieval city with a long history, strong corporation and well developed sense of civic consciousness; moreover, the major springs were clustered at its centre, securely housed within the city walls. Up until the 1750s, development was largely confined to intra-mural sites or those located immediately on its edge (such as Queen Square and the Parades), and the corporation seems to have actively discouraged expansion further afield. But during the later eighteenth century it was no longer possible to contain growth and the city spread far beyond its medieval boundaries, creating not only large new zones of residential development, but facilities that rivalled and overtook those in the old city. To the north, for example, emerged the shopping mall of Milsom Street and the upper assembly rooms adjacent to the Circus, and to the east Sydney Gardens at the end of Pulteney Street.28 During the nineteenth century, suburbanization meant that towns often experienced centrifugal as opposed to centripetal patterns of growth, but in the case of the spas it was accompanied by a tendency to de-centring that was present from their origins and to a degree challenged their urban identity.

One factor which strengthened the spas’ rural credentials was the extent of and value attached to green space within their boundaries. Defoe describes how at Epsom time tended to accentuate rather than reduce this tendency:

It is to be observ’d [...] that for shady walks, and innumerable trees planted before the houses, Epsome differs much from it self, that is to say, as it was twenty or thirty years ago; for then

---

26 Hart, History of Cheltenham, 173
those trees that were planted, were generally young, and not grown; and now not only the trees then young, are grown large and fair, but thousands are planted since: so that the town, at a distance, looks like a great wood full of houses, scatter’d every where, all over it.\textsuperscript{29}

In Tunbridge Wells, Bishop’s Down or the Common, 249 acres of rolling downs on which building was prohibited, formed the core of the settlement determining its physical pattern of development, with construction work strung out around its edges. Reserved for walking, riding and sport (including horse racing and cricket), it was said in 1832 that ‘this beautiful Common has been aptly described as being of the same importance to Tunbridge Wells as the sea is to Hastings or Brighton’.\textsuperscript{30} The green space that lies below the Royal Crescent at Bath is part of a long green finger (which incorporates Barton Fields, and the Lower, Middle and High Commons) that runs into the heart of the Georgian town. Barton Fields is described in a plan of 1809 as ‘never to be built on’ and the commons were finally protected from building development by a decision of the council in the 1820s. From 1830 much of the space was remodelled into a formal park and arboretum, dubbed Royal Victoria Park after a visit by the young Princess Victoria. Victoria Park was a forerunner of the public parks movement that later swept across British cities\textsuperscript{31}, and over time Bath developed a remarkably extensive suite of walks, pleasure gardens and public parks, which punctuated the hard space of its built environment with the soft space of ‘nature’.\textsuperscript{32}

In Georgian and Victorian Bath the River Avon was only used to a limited extent as a planning element in the spa, perhaps because its navigability meant it was still a working space. However, in Leamington Spa the River Leam was un-navigable and therefore essentially ornamental. Winding through the middle of the spa, it came to divide the old and new towns, its banks accommodating the impressive Pump Rooms, and creating a green corridor, parts of which were later converted into formal parks. It is possible that because of the risk of flooding, the area adjacent to the River Leam was considered unsuitable to build on, but it is also likely that a strategic decision was made that the future success of the spa depended upon the provision of accessible and suitably landscaped green space. From early on the owner of the land (comprising woodland and low-lying meadow) adjacent to the Leam, and east of the Pump Rooms, spared it from development, and in about 1834 leased it to a tenant to lay out and open as public gardens. In 1840 Newbold Wood Walks, as they were known, were described as:

\begin{quote}
Occupying a very beautiful situation between the upper and lower portions of the town [...] open to subscribers only. They present a
\end{quote

\textsuperscript{29} Defoe, \textit{Tour}, vol. 1, 162.
\textsuperscript{30} Quoted in Chalklin, \textit{Royal Tunbridge Wells}, 44; Cunningham, \textit{Historical Atlas of Tunbridge Wells}, various maps.
very pleasing aspect from the diversity of landscape scenery, with the structures that environ it on all sides. The liberality of Edward Willes Esq., the proprietor of these grounds, cannot be sufficiently appreciated, for allowing such valuable property to be laid out for the pleasure of the residents of Leamington.

By this time, trustees had been appointed to manage the gardens, though they were superseded by a new management body in 1846, as it was decided to introduce further improvements and honour a medical man and key figure in Leamington’s development by re-naming the facility Jephson Gardens. The long-term future and integrity of the Leam corridor were secured in the late nineteenth and early twentieth century by the far-sighted borough engineer and surveyor (1882-1917), William Louis de Normanville. He undertook extensive water engineering, bridge building and landscaping to protect the river corridor to the west and south of the Pump Room, with the opening of Victoria Park in 1899, and the laying out of the York Promenade and Mill Gardens.33

The tendency for spas to cultivate green space within their boundaries was matched by their role as a base to explore the natural world on their periphery. Precisely because spas were often located in remote, hilly and sometimes mountainous districts, what we would now describe as ‘areas of outstanding natural beauty’, there was huge potential for their role as tourist centres. It was a function that grew over time as the recreational appeal of the countryside and the natural world itself increased.34 Already when John Wood compiled his guide to and history of Bath in the 1740s, a phase was set aside in the daily routine for less regulated activities, among which was included ‘taking the Air and Exercise; some on Horseback, some in Coaches’ on Claverton Down, and walking ‘in the Meadows round about the City’.35 Over time the sections in the guidebooks devoted to rides and walks outside the city, and to descriptions of the ‘environs’ and its natural and historic features, expanded considerably. The Original Bath Guide of 1840 opens its substantial section on ‘Rides in the vicinity of Bath’ with a clarion call to leave the city and explore the countryside outside:

Bath is nearly surrounded by hills of towering height: but so sudden are the breaks, and so diversified the prospect they command, that on every side new and picturesque beauties present themselves. The access to those hills is now rendered as safe and easy for carriages, as for the equestrian; and when the summits are attained, the purity of the air, and the extensive views which are presented to the sight, are at once exhilarating and enchanting.


35 Wood, Description of Bath, 439.
Significantly the same section in the guide 36 years later is headed ‘Walks and Drives’, as visitors were encouraged to take to their feet. During the nineteenth century in particular it is clear that the rural space around spas is being re-mapped to meet the varying recreational needs of visitors, with a network of walks and rides described and delineated - a process which was as much a psychological as physical one, as neutral landscape features were invested with cultural meaning. Guidebooks and visual representations were among the key tools in doing this. ‘The first walk of an hour or so which well-advised strangers will be sent’, reported Black’s Guide to South Wales (1896) of Llandrindod Wells, ‘is that to Cefyn Llys, where the river runs through a deep green hollow well called the ’Quiet Valley’, and beyond rises a bold height crowned by an ancient stronghold’. How far this was simply a process of mapping - and the development of tourist-friendly Ordnance Survey maps helped considerably in this exercise - and to what extent there was direct intervention in accessing, safeguarding and shaping the extra-urban landscape is a moot point. Was there protected public access to the ‘Quiet Valley’ and were its scenic features in some ways being maintained? One route perambulators might follow involved crossing the River Ithon over ‘the Shaky Bridge, one of the local lions, which is verily a fearsome one to nervous souls, and hardly needs the notice that not more than three persons should be on it at once’. The presence of a ‘notice’ suggests some intervention, but had the bridge been deliberately constructed for recreational tourists and in a manner which added to the excitement of the excursion?

Stiles, kissing gates, bridges, signposts, benches and such like were all forms of physical intervention to be commonly found. But matters could go beyond this. As we have seen, various measures were taken to protect common land from building development at Bath and Tunbridge, and in the case of the latter the manor and estate on which the Commons were located employed a steward and bailiff whose responsibilities included the care of the open space. The emergence of the commons preservation movement, the formation of the Commons Preservation Society in 1866, and their success in obtaining protective legislation for certain sites, especially in the vicinity of London, paved the way for a more widespread and robust process of intervention. Among the earliest beneficiaries of this were the Malverns, a chain of hills that rise dramatically above the flood plain of the River Severn and straddled the Worcestershire-Herefordshire border. In 1884, a special Act of Parliament was obtained to protect the hills from development that might threaten their viability as a natural resource. A key part of the Act was the establishment of an organization, the Malvern Hills Conservators, whose duty it was to enforce the terms of the legislation and manage the conflicting interests not only of landowners and
commoners, but also - and this quite explicitly - the general public. Among the principal groups pressing for the Act were the tradesmen and businessmen of Great Malvern, the spa - whose population grew from under 1000 to over 16,000 inhabitants during the course of the nineteenth century - that nestled directly under the highest point on the hills, the Worcestershire Beacon. By the latter decades of the century, it was becoming clear that as important to the visitors as the waters, and probably more so, was the access the spa provided to the hills and the surrounding countryside. The spa’s guidebooks fill increasingly with accounts of the environs. Charles Grindrod’s Malvern (1904) devotes much of its text to extensive descriptions of the views from the hills, and to ‘short excursions’ on the hills or in their immediate vicinity, including Worcestershire Beacon which could be accessed by carriage, pony, donkey chair, or on foot.

The records of the Malvern Hill Conservators show that they took their responsibilities, as defined under the act, remarkably seriously. They met regularly to oversee the general welfare of the hills and address specific problems that arose. Perhaps most importantly, rangers were appointed to patrol the hills on a day-to-day basis, and carry out maintenance work. The result was that the Malverns became intensively policed and managed; and in a manner that placed as much if not more emphasis upon recreational and aesthetic imperatives, as on agricultural and commercial ones. Early on a kiosk was erected on the Worcestershire Beacon, ‘particularly that closets and urinals should be provided for public conveiency and decency’. This of course had a practical aspect to it, but it was also about conforming to Victorian sensibilities, and in turn about a way of consuming the landscape, in which the moral, political and the aesthetic dimensions were woven seamlessly together. In line with this agenda, strenuous efforts were made to maintain the ordered and decorous appearance of the hills and prevent their disfigurement. Damage to the turf, the dumping of building materials and rubbish, and unseemly agricultural practices which might offend walkers were regularly reported and challenged. In 1885, the Chief Ranger, Alexander King, informed the Conservators that:

a man named Green is living in a very unsightly hut which he has erected near the Wych - He often keeps a great quantity of pigs and all round the front of his dwelling he has erected temporary pig’s-cots & runs, which have increased from time to time [...] This great nuisance must be very obnoxious to visitors who have to pass near it to get from the Wych on to the Beacon.
Conservation measures were taken to protect wild flowers and plant grass seeds and trees. The presence of disorderly human types, such as gypsies and miscreant youths, was a constant bugbear. In 1908, King reported that:

after being there some time a gang of boy trippers placed a ginger beer bottle on the hill and commenced throwing stones at it. I immediately stopped them and told them they must not throw stones on the hills and I should take their names &c. if they did so.

King recommended the erection of a notice board proscribing stone throwing:

I fear a great number of people do not know that they are breaking the Bye laws by stone throwing &c. The notice board could be taken in at nights or it might be used as a target for stones.

In the years leading up to the First World War two issues, both of which emphasize the recreational-aesthetic function of the hills, begin to loom larger and larger in the Conservators’ policies and actions. The first was the practical matter of providing and maintaining footpaths and benches. Hence, for example, in summer 1912 King employed a man for three weeks ‘to assist Bourne in repairing the Malvern Manor footpaths [...]. The repairs were started at the bottom of the Green Valley and the greater portion of the paths are now in order’. At a meeting in October of the following year King reported the erection of 12 benches on various paths, the ‘havoc’ wreaked on the footpaths by the storm at the beginning of the week, and the need ‘for the Conservators to have a large barrow with two wheels for a horse to draw, as a man will never be able to wheel all the gravel required to keep these paths in repair’. Footpaths and seats were the hills’ circulatory system, not only providing visitors with safe and convenient access, and resting and viewing points, but also - in a more general sense - mapping out the landscape for tourists. The second major issue facing the Conservators was the growing problem of quarrying, as demand rose in the later Victorian and Edwardian periods for road building. The quarries were regularly reported as a risk to ramblers and measures taken to fence off dangerous spaces. In 1890, King reported that ‘at Eacock’s quarry I find that the footpath has been seriously encroached upon and undermined by the quarrymen and I know that a gentleman from the Wells has fallen into the quarry in consequence’. Three years later the ranger found the same quarry still in a ‘dangerous condition [...] As I was passing there last night a young foal was precipitated into the quarry, it was walking upon the outer edge of the path when the ground gave way under it’.

---

47 MHC, Committee (1886-1889), 24 June 1889; Assistant Ranger’s Report Book (1905-1911), 9 July 1906.
48 MHC, Minutes in Committee (1910-1919), 16 February 1910 and 12 February 1912.
49 MHC, Ranger’s Report Book (1905-1911), 13 July 1908.
50 MHC, Ranger’s Report Book (1911-1916), 8 July 1912.
51 Ibid., 13 October 1913.
52 See, for example, MHC, Committee (1886-1889, 1889-1909), 20 August 1888, 11 October 1899, 13 February and 8 May 1901.
53 MHC, Ranger’s Report Book (1887-1891, 1891-1896), 7 May 1890, 10 May 1893.
However, probably more important than safety issues over the longer term was the sense of physical and aesthetic damage quarrying was doing to the appearance of the hills. By 1909, the level of concern had reached the point where the Conservators established a special committee to address the ‘quarrying and disfigurement of the hills’, whose report noted that Mr Whinnery, the Secretary of the Board of Agriculture, had visited and ‘inspected the quarries and saw the terrible depredations in progress and was of the opinion that immediate action should be taken to prevent these disfigurements’. As it turned out a new Act of Parliament introduced in 1909 did little to tackle the problem, largely because of opposition from local landowners and quarry owners. For the Conservators, and the residents and tradesmen of Malvern, quarrying continued to constitute a major and growing blot on their immediate landscape, and a serious threat to what had become the spa’s most important recreational and tourist asset. A long battle ensued to curtail industrial activity on the hills, but by the 1920s the forces representing leisure and tourism were winning the day, with new legislation and policies to restrict and eventually reverse the impact of quarrying on the Malverns.

3. TOWN OR COUNTRY?

We might at this stage return to our original question; were spas town or country? The evidence developed in the latter part of this paper would seem to suggest *rus* rather than *urbs*. From their origins, but even more so over time, spas were tourist centres geared to accessing the rural experience. This article has not set out to address specifically the question of why there should be a demand for rural tourism, but three factors are critical. First, there was the general growth in tourism exemplified by the development of the Grand Tour and at a domestic level the British tour. The rise of the spa, a regular element in the tourist itinerary, was intimately associated with the broader emergence of recreational travel as a pastime among the elite and upper middle class. Second, there was the changing aesthetic of tourism. Early travel diarists and writers appear to have focused their gaze on towns, stately homes and their formal gardens. The countryside was largely a space to be traversed as quickly as possible, and its wilder landscapes, such as moorlands, heaths and mountains, were seen as an obstacle to rather than object of travel. In the 1720s, Defoe described Bagshot Heath in Surrey as a ‘vast tract of land, some of it within seventeen or eighteen miles of the capital city; which is not only poor, but even quite sterile, given up to barrenness, horrid and frightful to look on’, while he discovers on the top of a ‘mountain’ adjacent to Chatsworth House in Derbyshire:
SECTION II :: CASE STUDIES

4 :: TOWN OR COUNTRY?
BRITISH SPAS AND THE URBAN/RURAL INTERFACE

a vast extended moor or waste, which, for fifteen or sixteen miles together due north, presents you with neither hedge, house or tree, but a waste and houling wilderness, over which when strangers travel, they are obliged to take guides, or it would be next to impossible not to lose their way.57

These negative attitudes change with a growing interest during the course of the eighteenth century in uncultivated nature reflected in the radical changes in landscape gardening, and movements like the Picturesque and Romanticism. Easy access to nature became an increasingly appealing feature of spas.58 Third, there were the transformative effects of large-scale industrialization and urbanization on cultural attitudes. Over the longer term, the majority of people ceased to work or live on the land, and the countryside became for them a recreational rather than productive resource.59 By the later nineteenth century, it is arguable that spas were as, if not more, important as a base from which to explore the countryside than as a site for the delivery of health care.

Yet, we should not forget the case made at the beginning of this article in favour of the urbanity of spas. In the eighteenth century belief in the civilizing effects of towns, and the polite culture that they sustained, was a powerful one. In the nineteenth century, though that argument was challenged by the perceived debilitating effects of large-scale urban growth, it should not be assumed that the Enlightenment conviction as to the positive virtues of urban living, particularly if it could be divorced from industrialization, was simply discarded. It was perfectly possible to extol the virtues of both urban and rural lifestyles. We must also remember that those in pursuit of nature were increasingly townspeople, and that their sanitized and sentimentalized view of the countryside, however much it might reject the town, is better seen as another branch of urban culture than as something rooted in the ‘real’ rural environment. As urbanites they were also used to the conveniences of urban living - shops and well-stocked markets, fine inns and hotels, good communications, piped water supplies and effective sewage systems, a wide range of sophisticated leisure facilities, good company and so on. The spa, sitting at the border of town and country, constituted the ideal compromise, offering the best of both worlds. There was the convenience and civility of the town without the degradation of industrialization; the innocence and beauty of the countryside without the muck, uncouthness and claustrophobic parochialism of agrarian society. The St James Chronicle of 1790 summed up the advantages of the spa when it claimed ‘every watering place is a kind of urbs in rure’.60 In other words, in the case of spas, it is not so much a matter of town or country as town and country. If this sentiment had a

---

57 Defoe, Tour, vol. 1, 143; vol. 2, 176.
60 St James’s Chronicle, 28-31 August 1790. I am indebted to Peter Clark for this reference.
physical analogue it would be the crescent that came to be the hallmark building type of Bath, and was exported to so many other spas and seaside resorts. On the one hand, it was the very embodiment of urbane living, with its application of an architectural language forged in the urban worlds of classical Greece and Rome, and its multi-unit structure fashioned to cultivate sociability; on the other hand, it was a form of architecture designed to create a view of nature, such as that obtained from the first of its type, the Royal Crescent at Bath. In such circumstances it is not surprising that Rowland Mainwaring should write of the Somerset spa’s architecture in 1838:

In short, the taste and beauty of its domestic and public edifices, their commanding and elevated situations (the Crescents, particularly), exhibit a combination of architectural symmetry and grandeur, which [aided by the effect of the surrounding scenery] presents such an [sic] harmonious blending of the beauties of nature and art, as no other city in Great Britain can rival.61

---

61 R. Mainwaring, Annals of Bath, from the Year 1800 to the Passing of the New Municipal Act (Bath: Meyler and Son, 1838), xxvi.
SECTION II :: CASE STUDIES

5 :: SARATOGA SPRINGS:
FROM GENTEEL SPA TO DISNEYFIED FAMILY RESORT

From the 1810s until the 1920s, Saratoga Springs was the quintessential rural mineral springs resort in “upstate New York.” Equidistant from New York City, Boston, and Quebec, it served an elite with sufficient time and money to travel and reside in a small town that had no other purpose but tourism. Thanks to the easy steamboat route up the Hudson River and railway service (as early as 1833) westward on to Saratoga Springs, this resort particularly attracted New Yorkers, but it drew also merchants and even planters (along with their slaves) from the South (at least, until the bitter sectional divisions of the 1850s and the Civil War). Like similar resort towns in Virginia and, of course, across Europe, Saratoga Springs promised the wondrous benefits of its many mineral springs, resulting from an underground fault that allowed the mixing of minerals and CO2 with streams of water that pushed to the surface. However, soon it became a venue of elite socializing and later of horse racing, gambling, and shopping. While Saratoga Springs is remembered as a site of genteel leisure and physical and psychological restoration, like many other settings of genteel exclusivity, during the course of the nineteenth century, it morphed into a fast-paced hyper-commercialized summer resort that attracted mixed-class crowds. It lost its status and customers in the 1920s and especially 1930s to dispersed car-accessible sites and to the decline of genteel crowd-gathering, leading to the closure and razing of its giant hotels in the late 1940s. The town, however, retained the aura of Victorian gentility so much so that it experienced a partial renaissance in the 1960s and 1970s, and in 2007 became the theme of the latest Walt Disney World resorts built near Orlando, Florida.

This chapter will briefly trace the development and significance of Victorian Saratoga Springs and then consider what aspects of that tradition survived in the original setting and were “restored” in a Disneyfied remake.

VICTORIAN SARATOGA SPRINGS

In 1783, Philip Schuyler cut a path from his Hudson River house to High Rock Spring in what now is Saratoga Springs. Writings of Valentine Seaman and Dr Benjamin Waterhouse on the benefits of the mineral waters of the area were well known by 1803 when Gideon Putnam used profit from timber taken from High Rock Springs to buy land and build a three-story tavern and hotel (Union Hall) near adjacent Congress Springs. He also laid out the village of Saratoga Springs extending from Congress toward High Rock Spring in 1808 along Broadway Street, and sold lots for additional hotels (which became the United States in 1823 and the Pavilion in 1819). Though killed in a construction accident in 1812 building a second hotel, Congress Hall, Putnam set the stage for Saratoga Spring’s fame as a site of medicinal drinking water.
Key to the success of Saratoga was the branding of the water for distribution as far away as Europe, and to New York City’s first soda fountain in 1819. Four years later the owner of that soda fountain, John Clarke, arrived in Saratoga, invested heavily, and soon built a bottling plant at Congress Spring shipping up to 1200 bottles daily at its peak. He also enclosed his fountain in a Doric pavilion for free morning and evening servings to tourists. Clarke profited from being the major landlord in the surrounding land which soon was filled with hotels and other lodgings.

Although Saratoga Springs had no sublime or romantic scenery to recommend it (unlike Niagara Falls), it offered urbanites a rural setting and wholesome small-town aura without slums or industry. Broadway Street was unusually wide and by the 1830s faced with hotels bedecked with columned piazzas in the Greek revival and Gothic traditions, three of which accommodated 300 visitors each. During the 1859 season, about 40,000 tourists came to Saratoga, 35% staying at the Congress, United States, and Union Hall hotels. Hotels were partially wooden, and cheaply constructed compared to spa hotels in Europe, but hotel owners compensated with manicured lawns, ornate shrubbery, and flower beds surrounding structures in the tradition of the English pleasure gardens. This was the classic “middle landscape” noted by Leo Marx and John Stilgoe.

The site’s fame was enhanced by legends about the springs widely placed in travel literature. For a generation of aging veterans of eighteenth-century wars, Saratoga Springs was associated with nearby battle sites of the Revolutionary and Seven Years War, and the story of how a group of Indians in 1767 led Sir William Johnson to the springs resulting in the mysterious healing of his wounded leg. Of course, visits of George Washington, Alexander Hamilton, and Governor George Clinton to “High Rock” in 1783 were duly reported. From the 1840s to 1900, as part of the curious aura that came from association with native peoples, “Indian encampments” at Congress Park and along or near Broadway in “wigwams” appeared in the tourist season, where natives sold crafts, sewing baskets, and the like. Gideon Davison’s The Fashionable Tour: or, A Trip to the Springs, Niagara, Quebec, and Boston, in the Summer of 1821 and similar publications were just one of the earlier ways of publicizing Saratoga.

But Saratoga’s success went far beyond the waters and the genteel cluster of landscaped hotels. There were other sites that offered springs and even elegance (like nearby Ballston Spa with its prestigious Sans Souci Hotel built in 1804). As was true of so many other nineteenth-century resorts, the key to success was striking a balanced social tone. Clarke and other New Yorkers struggled with Puritan farmers...
originally from New England in the Saratoga area over temperance and other issues. This was resolved in 1819 with the separation of Saratoga Springs from the County, allowing for a tourist site without “outside” interference. Saratoga Springs bested Ballston Spa when authorities issued drink licenses to grocery stores and taverns; and the town allowed billiards, dancing, and private gambling after dinner in the hotels in the 1820s.7

But such dalliances with sin were balanced with the provision of public spaces to see and be seen: public rooms, parks, walks and squares, spring pavilions, and even cemeteries and churches (settings for famous preachers in the late nineteenth century). The Circular Railroad in Congress Park attracted genteel crowds for decades, and panoramas of Geneva and Amsterdam were featured in 1835 and 1849. By 1876, Broadway was illuminated with Chinese lanterns from trees, followed by one of the earliest installations of electric lights in 1879. Saratoga Springs was probably the first village purpose-built for entertainment in the United States, reaching a year-long population of 14,000 by 1880, the same as it was in 1970.8

The appearance of the famous and want-to-be famous was duly noted in local and New York newspapers and travel literature. Among summertime guests were Washington Irving (1832), James Fenimore Cooper (1825: he wrote Last of the Mohicans in 1826), and Joseph Bonaparte (also 1825). Stephen Douglas enjoyed a visit in the summer of 1860 before his famous Presidential campaign against Abe Lincoln. Tycoon W.H. Vanderbilt took up residence at the Moon Lake House on Lake Saratoga shortly after the Civil War, helping to make its dining room famous with foods like the potato chip. And it was near Saratoga that the cancer-stricken President Ulysses S. Grant in 1885 wrote his famous memories of his Civil War generalship.9

All this increased the crowd appeal of this little town. And, in contrast to exclusive sites like Newport, CT, Saratoga attracted a very diverse crowd in part because of the variety of lodgings including cheap side-street boarding houses. Like other successful resort towns, Saratoga Springs became a “brand” site identified with health and renewal, but progressively less dependent on the free spring waters.10

As befit the genteel script, the elite pecking order became visible in the procession of carriages from the grand hotels down Broadway to Saratoga Lake that took place every morning in the summer. These rituals became occasions for flirtation and courtship (idealized in sentimental novels like The Coquette and Charlotte Temple); and an unwritten code of dress and decorum prevailed.11

Again, as would happen elsewhere, the packaged pleasure site became more intense

---

8 Sterngass, First Resorts, 34-5.
10 Stone, Reminiscences of Saratoga and Ballston, 7.
11 Waller, Saratoga, 80; Chambers, Drinking the Waters, 156; Gassan, The Birth of American Tourism, 48-50; and Sterngass, First Resorts, 143.
and varied after the Civil War with the rise of horse racing. Ex-boxer, sometimes politician, and life-long gambler, John Morrissey, accelerated the shift from spa to the bet. Although locals organized racing (and gambling) for trotters as early as 1847, Morrissey managed a permanent track which opened in 1862, and in 1869 he constructed a high-end casino nearby, with soft-carpeted rooms for faro and roulette on the ground floor and private rooms upstairs for poker. Soon Saratoga replaced New Orleans as the American racing center.\textsuperscript{12} The original genteel pace inevitably gave way to the intensity of the races and evening gambling, even though a measure of propriety survived with the encouragement of respectable female attendance at the races (half price admission).\textsuperscript{13} This change coincided with the shift of ownership of major hotels from local to absentee New Yorkers, beginning in 1864 with the sale of Union Hall to A.T. Stewart, Manhattan developer of the Marble Palace department store. Of course, he promoted not only an enlarged hotel (now called the Grand Union), but a department store on the ground floor, promoting the values of urban modernity. This trend continued as Broadway hotels leased ground floors to retailers, creating Paris-style luxury shops. Consumption complemented the social stroll.

The springs changed too. While the promenade and market merged, Frederick Law Olmsted (the creator of New York’s Central Park) redesigned Congress Park in the 1870s, adding a miniature lake at the center and a small island for a bandstand. By 1880, all the springs in Saratoga charged admission fees to restrict access by \textit{hoi polloi} as well as to make profits. Other attractions, like the House of Pansa (1889), with claims to be a replica of a nobleman’s home burned in Pompeii, introduced a new element of spectacle similar to the dime museums and similar attractions that supplemented the sublimity of Niagara Falls or the seaside attractions of Coney Island.\textsuperscript{14}

Of course the celebrities came: plutocrat James Fisk and larger-than-life financier and gambler Diamond Jim Brady, but also entertainment celebrities: Lillian Russell, Victor Herbert, and Florenz Ziegfeld. Legendary actor and party pal of Cole Porter, Monty Woolley, spent years in Saratoga where his father owned the Grand Union Hotel. Both journalist Nellie Bly and professional scold Anthony Comstock condemned Saratoga as the New Sodom. This older form of tourism - long stays in big hotels - gradually declined in Saratoga as it did elsewhere (like the east end of Coney Island with its large elegant Oriental and Manhattan Beach hotels).\textsuperscript{15} Political pressures on gambling and horse race betting affected both venues, even though zoning and prohibitions of public gambling in Saratoga were evaded; and the outlawing of public betting on horse races of 1908 was repealed in 1934, allowing bookies to do business in stalls outside the track. The month of August remained the season of the horses into the 1930s. But the casinos and night clubs became

\textsuperscript{12}Sterngass, \textit{First Resorts}, 137.
\textsuperscript{13}Waller, \textit{Saratoga}, 132; Corbett, \textit{The Making of American Resorts}, 207; and Sterngass, \textit{First Resorts}, 152.
dominated by organized crime syndicates, and the crowd gradually more down market. The old hotels like the United States and the Grand Union lost clientele, and were razed in 1946 and 1952 respectively.\footnote{Waller, *Saratoga*, 235, 269.}

**WHAT SURVIVED**

All this might simply confirm what John Walton and I concluded from our *Playful Crowd* of 2005 – that American destination tourism in its distinct Victorian form declined early (relative to Europe), at the beginning of the twentieth century with the early adoption of the automobile, and would be revived in a new familial form only in the 1970s with the rise of jet travel and sites like Walt Disney World.\footnote{Cross and Walton, *The Playful Crowd*, ch. 7.} What complicates this simple conclusion is the partial survival and even revival of Saratoga Springs as a spa and racing center, especially from the 1960s, and the persistent appeal of the Saratoga image as witnessed by Disney’s imitative genteel resorts at Orlando. Let me very briefly share the first story before turning to Disney.

Despite the shift from the springs to the track, Saratoga area spring waters won wide markets and continued to do so long into the twentieth century. In 1883, 189 springs produced 46 million gallons of spring water, much of which was bottled by the Congress and Empire Spring Company, for a time the world’s largest. This led to a significant drop in the water table and disputes between spring owners over access. Finally, New York State purchased 122 of 163 springs and 1300 acres around them in 1909, even though the original springs at High Rock and Congress Park were exhausted.\footnote{Sterngass, *First Resorts*, 177.} This resulted in a rather unusual state promotion of mineral springs. Dr Simon Baruch (a long advocate of free municipal bath houses in New York and Chicago as well as a believer in mineral waters as cardiac therapy) hoped to make Saratoga Springs the equal of Wiesbaden and Baden-Baden, combining the curative effects of mineral water with luxurious accommodations, recreation, and entertainment. With the support of Governor Franklin Roosevelt, also a believer in mineral waters - and sufferer from polio - in 1929 Baruch’s son headed a commission to build a spa/park that opened in 1935. A classic New Deal project, Saratoga Springs Park featured rolling lawns through which curved the Geyser Brook, 11 miles of bridle paths winding through groves of trees, and three health pavilions (Washington, Lincoln, and Roosevelt), stately structures in Georgian and Williamsburg colonial architectural style. A central complex included the Hall of Springs and featured three circular yellow marble fountains spouting Geyser (digestive), Coesa (mild laxative), and Hathorn (vigorouse cathartic) waters, a laboratory for Baruch, and the Roosevelt Baths. Nearby is the Gideon Putnam hotel (state-owned but privately managed since 1935) with access...
to tennis courts, a swimming pool, and a “therapeutic golf course” (on the level, for heart patients). Even though nearly a third of visitors in the early 1960s claimed to be there for heart troubles, the curative claims of the spa were subtle. At the Roosevelt Baths, mineral baths, massages, facials, and a full-service salon today are offered, reflecting the widespread shift from the health claims of 50 years ago to beauty and relaxation. The Roosevelt Baths offers niche spa packages: Spring Renewal, Romantic Getaway, but also “Just for the Girls” with the full array of treatments, including seaweed wrap and Swedish Massages: “From effervescent mineral baths to rejuvenating body scrubs, with our spa vacation packages, you can experience the ultimate escape.”19 The site was further gentrified in 1966 with the state’s building of a Performing Arts Center that became the summer home of the Philadelphia orchestra and New York ballet.

Similarly the state came to the rescue of the Saratoga racetrack in the 1960s when Governor Nelson Rockefeller spent $3.5 million to improve facilities, sustaining a 24-day racing season in August and averting the threat of the New York Racing Association transferring the races to New York’s Aqueduct track. The completion of an interstate highway from New York City assured the town’s revival as a tourist site from the 1970s, complemented by the Saratoga Casino and Raceway (with video betting machines and a harness track).20

Portions of the old town center have been restored along Broadway, with boutiques, art galleries, and restaurants. Beekman Street (four blocks west of Broadway), once the center of a lower-class residential neighborhood, has become an art district, housing four galleries, a restaurant, a pub and teahouse, and a bistro. Visitors attracted by the genteel tradition are also drawn to Yaddo, a 400-acre writers’ and artists’ community, founded by Wall Street financier Spencer Trask and opened to artists in 1926. Sylvia Plath, Truman Capote, and David Sedaris have all been artists-in-residence.21

There have been few efforts to restore the Gilded Age hotels. In fact, the only surviving hotel from that era is the Adelphi, accommodating 70, in contrast with the 700 guests of the Victorian-era Grand Union. restored by a couple from Nebraska, who bought the derelict property in 1979, the Adelphi became a large bed and breakfast (open only in the summer), rather than a genteel hotel. There are no ballrooms or stately dining rooms; the guest rooms (enlarged) are decorated in diverse styles (French provincial, Greek Revival, and even Adirondack) conjuring up an unfocused image of late Victorian elegance. The owners even copied an early twentieth-century pool at a Long Island mansion from a magazine and, of course, the rooms provide wireless Internet and flat screen TV.

---

20 Walter, Saratoga, 337-43.
DISNEY WORLD: AN AESTHETICIZED RE-CREATION OF SARATOGA SPRINGS

Given the modern American tourist’s nostalgia for an imagined Saratoga, it is not surprising that Disney would choose Saratoga Springs as the concept of a themed resort at Walt Disney World in Orlando. This site, bigger than Manhattan, has expanded since the 1970s far beyond the original child-focused amusement park in Anaheim, California, reproduced in Orlando as the Magic Kingdom in 1971. Early Disney planners realized that the “World” could become much more than the California park (confined by suburban sprawl); Disney’s Florida holdings could become a site of destination tourism [as was Saratoga], with extensive expansion. By the mid-1980s, the company adopted a strategy of themed resorts and hotels derived from adult fantasy themes of the genteel culture of the late nineteenth and early twentieth century interspersed between and surrounding multiple theme parks. The Grand Floridian Beach Resort (1986) was designed to evoke “memory” of the days of the gilded age when the rich discovered the south Florida beach. The Disney Yacht Club and Beach Club Resort adopted a New England theme of late-nineteenth century nautical elegance, with Newport-style cottages with white wicker arched verandas, pennants, and even a mini-water park built around a ship aground (with water slide), intended to evoke Nantucket Beach [but with sand from Arizona]. Other similarly themed resorts included the Old Key West Resort and the Wilderness Lodge and Villas, the latter inspired by the old hotels of Yellowstone and other national parks (with all the appropriate “Indian” themes including totem poles and teepees, and log cabin lodgings). These luxury resorts (that became part of a timeshare Disney Vacation Club scheme) were complemented by a string of moderate priced destinations beginning with the Caribbean Beach Resort in 1988, followed by Port Orleans and in 1997, Coronado Springs and Boardwalk, the later modeled after Atlantic City and Coney Island of the 1920s. These hotel/resorts were price-pointed to a middle or upper middle-class consumer in contrast to Disney’s string of inexpensive family hotels themed around music, movies, and sports and featuring gigantic icons (cartoon characters, guitars, and sports equipment). These were designed for young families, presumably with parents still willing to defer to children’s fantasies. But the leading trend was adult nostalgia for a genteel past. Eight of 17 Disney resorts today are nostalgia-themed.22

Saratoga Springs was somewhat of an afterthought, basically a remodeling of the 1996 Disney Institute, a curious failed project of long-time Disney CEO, Michael Eisner, that offered “exciting” short recreational education courses in animation, orchestra conducting, golf, gardening, and 60 other “if only,” activities that adults always wished they had learned when younger.23 Transformed from this original, Disney’s Saratoga Springs advertised itself thus: “From its colorful Victorian

5 :: SARATOGA SPRINGS: FROM GENTEEL SPA TO DISNEYFYIED FAMILY RESORT

architecture to the historic influence of horse racing, this idyllic lakeside community recaptures the heyday of upstate New York country retreats of the late 1800s. Rolling hills, fragrant gardens, gracious promenades and gurgling springs combine to relax, reconnect and rejuvenate the spirit. And, when the mood for a little excitement hits, the magical metropolis of Downtown Disney is right across the lake.24

But in fact Disney Saratoga Springs was a more conventional hotel/spa resort themed on sundry architectural and historical allusions to the spa town of 1890s New York State than a re-creation of Victorian gentility. The largest Disney Vacation Club resort to date, it is divided into five clusters of three-story buildings with 40 or more units, each associated by name with Saratoga (Springs, Grandstand, Congress Park, Carousel, and Paddock sections), 18 buildings in total. Separate is a section of 60 three-bedroom “homes” (2009) called the Treehouses. Associated with a “tradition” at Disney that “combines a dash of luxury and comfort with the nostalgic memories of a childhood fortress,” each unit is on pedestals 10 feet off the ground, blending in a “forest environment,” a curious addition with no ties to Saratoga.25 The central Carriage House, which includes check-in, restaurants, and the main pool, is adjacent to the Spa facilities. There are five pools scattered throughout the resort.26

All this fits the formula of other historically themed Disney resorts: a central lobby and restaurant/bar building, multiple pools with theme-appropriate decorations and water slide (a jaguar and pyramid at Coronado Springs, a lion’s head at the Caribbean Village, a sea serpent at Port Orleans), and a close cluster of themed lodgings, all with easy access to other Disney sites, especially the four amusement parks. There was no effort to re-create Broadway, Congress Park, the mineral springs, or giant hotels, much less the ambiance of Saratoga Springs with its small-town feel and genteel culture. Instead, bits of Saratoga Springs are pulled out of their original contexts and placed in the Disney schema. The Carriage House reception and restaurant building features paintings of horse races and the “winner’s circle,” together with a large bronze statue of a racing horse. The High Rock Spring is not a source of mineral water, but an artificial water display, “which cascades down rockwork, emptying into a clear freeform heated pool,” at the “On the Rocks” pool bar. Race silks of green and blue, and polka dots of red and pink, line the passage to the main bar. The central restaurant is the “Artist Palette” alluding to the artist retreat, the Yaddo, near Saratoga. Drawing pads and colored pencils are provided at all tables. Foods include “Empire State” (New York) specialties and even Saratoga Springs bottled water “known for its health properties.” Curiously, “peppermint pig” hard candy is provided to be shared at table for “good luck” (presumably a Saratoga tradition) and, of course, featured are potato chips (according to legend invented at

Saratoga Springs). Much of the copying of Saratoga Springs is in architectural elements - the fountain at Congress Park, wooden horses from the carousel at Congress Park, and, of course, the colors and fretwork of late Victorian Saratoga Springs houses, roof accents of stripes and diamonds (racing allusions), gingerbread trim, and arched openings recalling horse stalls. Not much appears to be based on buildings long torn down.27

Otherwise, the resort is a replica of the successful Disney family formula. Studios or multi-bedroomed “villas” offer many comforts of home (full kitchens, washers, and dryers). The three-bedroom Grand Villas accommodate 12 adults for family reunions. Hardly the child-absent resort of the nineteenth century, Disney Saratoga Springs offers a long list of activities for children. In addition to four pools, there are also two playgrounds, a high-tech game room, tennis and basketball courts, shuffleboard, and bike rentals. The Community Hall offers ping pong, football, arts and crafts, and a variety of board games. The mix provides opportunities for families to split into age-designated activities, conforming to the modern suburban style, in sharp contrast to the primarily adult activities and pleasures of the original - there is no horse racetrack or casino, no promenades, no ballrooms or elegant dining rooms, no genteel seeing and being seen.28

And the spa, while following genteel traditions of hydrotherapy, involves no mineral bathing, but rather the commonplace array of treatments: sauna, steam room, whirlpool, massages, facials, and “couples’ relaxation,” with the added Disney feature of spa treatments for 4- to 12-year-olds. There is no horse racing, but patrons can dine at the Turf Club Bar and Grill after golf.29

Considering all the ways that the Saratoga Springs Disney is not like the original, one might conclude that this and other nostalgia themes of Disney resorts are merely a bit of product differentiation, making Disney lodgings for week-long stays at Walt Disney World something other than the garden-variety Holiday Inn or Hilton. Disney’s Saratoga may also be an attempt to provide an all-inclusive Disney movie set experience, like Main Street USA in Magic Kingdom or the mini-worlds of miniatures of signature buildings and trappings of European and other countries in World Showcase at Epcot. The reader might even conclude that the superficiality of Disney’s version reflects ignorance of the past on the part of both designers and visitors, or even lack of historical interest.

This is not to claim that the site makes no “historical” appeal. A curious guide for mature visitors to Disney insists strongly that the ambience of Saratoga Springs and

---

other resorts must be appreciated and that this is possible, especially in the off season when pesky kids in shorts and t-shirts are not around to destroy the feeling. The predominance of the late Victorian theme in Disney resorts at least suggests that the era of genteel tourism and especially the mineral springs spa holds lasting appeal, despite the fact that it is hollowed out and the social and cultural experience of a concentration of America’s elite in a small upstate New York town is reduced to a pastiche of architectural accents. Still, this genteel world is long gone, as is the original culture of the health spa; and Disney knows it because Disney helped to create its successor, the family-focused theme park. Disney’s Saratoga Springs can be little more than an allusion to the past set in the familiar family formula lodging complex, while the mystique of the mineral springs is reduced at Disney as it is elsewhere to an array of beauty treatments.
CHAPTER 6
FROM THE MAJESTIC TO THE MUNDANE: DEMOCRACY, SOPHISTICATION AND HISTORY AMONG THE MINERAL SPAS OF AUSTRALIA
This is an attempt to survey the range of mineral spas in Australia and to ask whether it is appropriate to think in terms of national differences when it comes to the culture of the spa. Tourism itself operates within a transnational framework yet is - precisely because it is so often transnational - a significant factor in the construction of national identities. The international tourist usually sets out to collect and consume national cultures. At the same time, tourists attracted to the culture of the spa often seek a negation of nationality, spas being distinguished at least in reputation more by an elite cosmopolitanism than by national differences. So the spa is a useful case study to consider the interplay of national and cosmopolitan cultures.

In Australia the spa experience stretches from the Majestic to the mundane. At one end of the scale we find the Hydro Majestic, in the Blue Mountains 100 kilometres west of Sydney. It was opened in 1904 as an elite hydrotherapy establishment and its significance will be discussed later. At the other extreme we find some of the mineral and thermal springs in the Northern Territory, which are so minimalist they raise the question of what constitutes a spa. At Butterfly Springs, Lorella Springs and Mataranka - variously under the control of National Parks, Indigenous communities or private landowners - there are few facilities apart from pit toilets and primitive camping areas: are they enough to turn a mineral spring into a spa resort? Truck drivers doing the long haul across the top of Australia are, I am told, given to stopping for a can of beer and a soak in the warm mineral springs in an idyllic natural setting. There is an additional advantage: the thermal springs are some of the few places to swim in the Northern Territory without the threat of crocodiles.

The Hydro may or may not be majestic and Butterfly Springs is hardly mundane; but neither is typical of the spa experience in Australia. The most complete development of mineral springs as centres for health and social activity in Australia can be found in Victoria’s central highlands, the self-proclaimed ‘Spa Capital of Australia’, which boasts the continent’s largest concentration of mineral springs. The first wave of spa development was rapid, dating from the gold rushes of the 1850s. The district had only been opened up to the pastoral industry in the late 1830s and remained quite isolated. The first spring was recorded in 1836 by squatter Captain John Hepburn, when surveying his property, probably guided by local Aboriginal people. When gold was discovered in 1851, thousands of miners poured in to the rich diggings of Ballarat, Bendigo and the surrounding districts. Access to water was essential for the extraction process. As the numerous mineral springs in the district around Daylesford became known, attempts were made to protect and promote them from...
the 1860s; by the 1870s the town and in particular Hepburn Springs had a reputation as a spa resort. A branch railway to Daylesford was opened in 1880, almost entirely due to the spa: 50,000 passengers travelled the line in 1884 alone.3

Three features of this development are worth comment. First, there was always a ‘continental’ rather than a British tone to the spa culture of Daylesford: it was by no means simply a transplantation of British spa culture to the colonies. Second, the rapidity of its development meant there was no slow accretion of legend or folk medicine around the Australian spa: it was always self-consciously scientific. And third, there was always a sense of municipal democracy surrounding the spa - at least when they were most successful.

The spa culture around Daylesford was initiated by Swiss-Italian gold diggers, although Alexander and Paul Joske unsuccessfully sought a lease to bottle the Hepburn water in 1858.4 The Swiss-Italian community had established itself in the district early, and was strong enough for Pietro Lucini to set up his macaroni factory in Hepburn Springs in 1865.5 Michelle Bedolla ran the Spring Creek Hotel, later the Savoia. There in 1864, in the hotel’s ‘Italian Reading Library’ [a focus for Italian political debate and later the Hepburn Democratic Society], a group of citizens petitioned the government and formed a committee to protect the springs from mining activity. The names of the first committee reveal not only the dominance of the Swiss-Italians but their assimilation into the local community: Guscetti, Crippa, Lucini, Bedolla, Perini, Mantica, Pitcher, Hutton and Stephens; Francesco Rotanzi was honorary secretary.6 The Hepburn Spring Mineral Reserve was proclaimed in 1865 and protection for other local springs followed.7 They asked the government analyst to report on the water and set about promoting the district as a tourist resort.

Rather than growing around grand hotels, as was often the case in spa development, the Daylesford district was dominated by smaller scale guesthouses. Many had ‘continental’ connections. Two of the earliest were Lucini’s Roma Hotel (converting two rooms of his macaroni factory) and Fabrizio Crippa’s Parma House, both opened in 1864; Michele Bedolla opened Savoia House in 1870.8 Crippa later built the Mineral Springs Hotel alongside Parma House. The Borsa, Lanfranchi, Milesi, Perini, Rolleri, Tessero and Tognini families also provided accommodation, including many of the larger establishments among the twin towns’ 39 hotels and guesthouses by 1911.9 Nor was it just the Swiss-Italians: three guesthouses offered kosher meals before 1914.10 This sense of ‘continental’ tone was perhaps best expressed in some of the...
other guesthouse names: the Locarno, the Bellinzona [Figure 1], the Bergamo, the ‘Grande’, which acquired a continental ‘e’, and the establishment simply named ‘The Continental’, when, it would seem, the word ‘continental’ was only just beginning to shake off its negative connotations and acquire potentially positive ones in Britain.\(^{11}\)

The cosmopolitan influence extended to the spa infrastructure too, with the first bathhouse, opened in 1894, being designed by a Swiss architect, one L. Boldini.\(^{12}\)

So the first point to note - we will return to it - is that these spas were not a simple transplantation of the English spa. Furthermore, their cosmopolitanism became one of their attractions. It is revealing that by the end of the 1920s, though Italian names were somewhat less prominent among boarding-house keepers, the now 53 boarding-house names still included Mrs Turner’s ‘Swiss Cottage’, Miss Balmer’s ‘Lucerne’, Mrs Thompson’s ‘La Mascotte’ and Aubrey Christie’s ‘Belvedere House’ [though admittedly they were outnumbered by more prosaically British names].\(^{13}\) The local council advertised Hepburn Spring Park as ‘The Carlsbad of Australia’.\(^{14}\) The Australian colonies tended to be dominated by British migrants: they were proud of their loyalty to Empire and claimed the population was ‘99 percent British’. But the small-scale spa culture, like the small-scale bohemianism growing up around the Francophile restaurants and art scene of the 1890s,\(^{15}\) offered not only a refuge for a non-Anglo community but a cosmopolitan frisson for an Anglo one. Even in 1974 the European spa
was the reference point, with the Rotary Club boasting of the district’s ‘natural Spas surpassing the most famous Continental waters in volume and palatability’.16

The second feature worth noting about the development of spas in late-nineteenth century Australia is its scientific base. Spas of course have always had their medicinal purposes: there was nothing peculiar in Australia in that regard. Medical men were among the most active promoters of spas in Australia and the Australian spa took on something of the generalised imagery that promoted Australia as a healthy country. Especially with the treatment of tuberculosis, the development of the sanatorium in Australia as elsewhere paralleled the development of the spa. Tasmania as a whole sold itself to Anglo-Indians as the Sanatorium of the South.17

But the science behind the Australian spa was arguably more rigorous and less mixed up with quackery and folk tradition than elsewhere. Australia had always been something of a scientific laboratory from a European perspective, a child of science and the Enlightenment.18 Through the nineteenth century it was rigorously surveyed, poked, prodded and placed under the microscope, so when it came to the virtues of mineral waters it was taken for granted that some obeisance be made to scientific rigour. From the start, government chemists were sought out to provide authoritative scientific analysis. Hepburn himself had arranged for the Government Analyst to test his spring, for example, and ‘a very full analysis’ of the water, ‘nearly resembling that of Selters’, was given to the Victorian Institute in 1851.19 When Ballan water, the first Australian bottled Selters water, was marketed from 1867, its promoters also made much of the government chemical analysis, along with recommendations from doctors. At the same time, they went out of their way to reassure customers that drinking their water was ‘consistent with ordinary habitudes, with the business and pleasures of life’ and that in Europe:

> the so-called watering places are fashionable places of resort, and are frequented by thousands of pleasure-seekers who have little need of the waters as medicine, but when on the spot drink them merely as refreshment or on conventional grounds, because it is the mode.20

As the marketing of refreshing bottled drinks developed, it faced the same dilemma as spas: the health benefits could not be allowed to detract from the pleasures of the experience.
This privileging of science can perhaps most clearly be seen in the most enthusiastic scientific promoter of Australian spas, Ludwig Bruck. Bruck had migrated to Australia from Silesia as a young man in about 1873. He established himself as the colonies’ leading medical publisher, publishing the *Australasian Medical Gazette* from 1881 and five editions of the *Australasian Medical Directory and Hand-book* from 1883, as well as practising medicine himself and importing medical books, instruments and appliances. He also acted as gatekeeper to the medical profession, compiling a list of unregistered practitioners in 1886. Philippa Martyr argues his criteria were narrow, his list including a range of quite reputable therapists whose only crime was to dispute the still evolving standards of heroic (i.e. conventional, British-based) medicine; despite his claim of an influx of ‘medical practitioners of all nationalities’, it appears that over 90% of his list were of British or Australian background. Far from exposing quackery, Martyr concludes, Bruck exposed ‘the frailties of a nascent profession’.21

It comes as a surprise then that it should be Bruck who, in 1888, published his *Guide to the Health Resorts in Australia, Tasmania, and New Zealand*, and three years later produced a further listing to take account of the fact that ‘some valuable new springs have been discovered, and fresh analyses of some of the old ones have been made’.22 But Bruck’s initiative reinforced both the scientific and ‘continental’ character of Australian spa development. Most of the 225 resorts were recommended for their bracing climate or good sea-bathing, but nearly 33 were resorts known for their mineral springs, 20 in New Zealand, where Rotorua, Hanmer Plains, Te Aroha and Taupo had already been extensively developed, and 13 in the Australian colonies. The *Guide* included a detailed chemical analysis of each spring, along with ‘special indications’, temperature, resident medical practitioners, hotels, directions and local excursions, often with a comment on the magnificence of the scenery and their picturesque setting (‘picturesque’ being his favourite adjective). He also assessed the quality of the local amusements: walking, fishing, shooting, boating, bathing, etc. Where a resort was recommended for alcoholism, the distance to the nearest hotel was provided.23

Most of these springs were undeveloped. Mittagong was by 1891 the best-known spa resort in New South Wales, but its facilities consisted of no more than ‘a bricked well, fenced in and provided with a weatherboard shed and seat for the convenience of the public’.24 In remote North Queensland, Innis Hot Springs, which might be reached with a steamer to Cairns, then rail or coach to Herberton and then a weekly coach, offered among the sparse facilities being developed by the enterprising lessee, Henry Faasch,
'a large and secure paddock for horses'. Victoria was better served, with a hydrotherapeutic establishment conducted by M. La Moile opened at Malvern Hill, near Melbourne in 1861, though with little success. Clifton Springs, Victoria's only seaside mineral spring resort and a short steamer-ride from Melbourne, was popular from the 1870s, though more as simply another seaside resort. In 1887 the Clifton Hotel and Spa Company built a hotel with 'tastefully' landscaped grounds, 'rustic seats and swings', a tennis court, a pavilion and pump room and sea and hot mineral baths, which were 'said to have proved highly beneficial in cutaneous affections, gout, rheumatism and piles'. The pier provided 'an agreeable promenade'.

Bruck was keen to see these springs developed as medical facilities along the lines of 'the best-known spas in Europe'. He recognised that:

> however efficacious the waters may be, unless the arrangements for the comfort and entertainment of invalids are perfect, they will not attract visitors, not even if combined with a delicious climate, a fine situation, charming woods and picturesque hills, natural advantages such as most of our springs can boast of.

He enthusiastically and somewhat fancifully sketched what was necessary for these ‘perfect’ arrangements: ‘a well organized [sic] and thoroughly equipped sanatorium’ with the amenities of ‘a first-rate club in one of the larger cities’; ‘a large concert and ballroom, perhaps fitted up with a stage for theatrical performances by amateurs and others’; and ‘spacious and comfortable dining-rooms, billiard-rooms, smoking and reading rooms ... music and private drawing-rooms, and a large number of lofty bedrooms, affording the best accommodation for visitors’. The grounds should include flower-beds, walks, bowers, lawns for games, tennis courts and a pavilion ‘where an efficient band could perform ... to assist the cure by diverting the mind and enlivening the spirits’. The emphasis on scientific analysis, technology and equipment was a sign of modernity and sophistication, and of the modern spa’s distance from past superstition. Medical facilities should include ‘Russian and Turkish baths, sulphur, electric, and sea water baths with douches of every description, temperature and strength’, along with a Resident Medical Superintendent who might also recommend medical gymnastics and massage. Science and pleasure were impossibly entangled at the ideal spa.

The third feature to be noted of these Australian spas is their relatively democratic nature. Bruck recognised the necessity for a diversity of accommodation so that the
waters should be available to all: ‘good hotels, furnished rooms and houses, restaurants, and cafés [sic] to suit all classes, must also be available’.29 Australia was conspicuously egalitarian: that is not to say social class and class consciousness were not significant in Australia - indeed it can be argued that class mattered even more in a society where there was such social fluidity - but that the culture claimed to be relatively classless and democratic conventions prevailed.30 And so it seems that the social consciousness that surrounded the elite English spas, or that other more working-class culture that came to be associated with spas lower down the social scale, did not have the same purchase in Australia.

It was not that Australia did not contain a social elite, though whether it was large enough at the end of the nineteenth century to sustain the kind of spa Bruck dreamed of can be questioned. The real problem was that the local elite was not interested in what Australia could offer. Bruck argued for the development of Australian spas ‘so that the well-to-do Australians may not be compelled to go abroad in search of sanatoriums’31, but as long as the conspicuous consumption of overseas travel was one of the prime markers of social distinction in Australia, wealthy Australians would continue to patronise the famous European spas. They were or sought to be part of the cosmopolitan elite who moved effortlessly between Karlsbad, Baden Baden and Vichy, displaying conspicuous wealth and conspicuous leisure before an audience who, they imagined, mattered.

The democratic character of the Australian spas was sustained by so-called ‘colonial socialism’. They remained largely under municipal control and that meant access was generally free.32 This was not a matter of ensuring the poor could have access when they could not afford the more socially-exclusive pump rooms: the benefit of taking the waters was seen more as a democratic right and everyone was to have access. The Daylesford Herald Almanac put the democratic case forcefully in 1885. Hepburn Spring had already been a resort ‘for many years...not only of valetudinarians’, it said:

In those days the spring was free to all, but several attempts being made to enclose it, and thus monopolise the precious fluid, the municipal council took the matter in hand, and very properly adopted such regulations as would prevent the greed of some depriving the general public of a fair participation in the blessing.33

---

29 Ibid., 38.
31 Bruck, Mineral Springs, 39.
33 The Daylesford Herald Almanac and Guide Book to the Borough of Daylesford and Surrounding Districts (Daylesford: Herald, 1885), 24.
This democratic impulse can be seen to contrast with ideas of the spa that did not take hold in Australia. First, the timing of this spa development coincides with the appearance of new attitudes to nature conservation that, particularly in the new world, came to fruition in the form of national parks. Between 1872 and 1895, the United States, Australia, Canada and New Zealand established their first national parks: the first in Europe (in Sweden) would not appear until 1909. For the most part these first national parks entailed a particularly romantic response to the sublime, celebrating wonders of nature that often included hot springs. Yellowstone, Banff and Tongariro (the first national parks in the US, Canada and New Zealand respectively) all contained hot springs and their protection from unchecked commercial development was part of the inspiration for establishing the parks. And as we have seen, the first step to developing the Daylesford spas was to petition for protection. But the first national parks in Australia did not conform to the others in seeking to preserve sublime nature: rather their inspiration was a distinctly democratic desire to create large areas of untouched nature for ‘the people’, that is for popular recreation. In both Banff and Tongariro, the trustees set out to create their idea of a sophisticated European (Swiss) spa resort, with grand hotels targeting a high-end market. While in Australia governments were also protecting the sublime in nature, their concern was not primarily to stimulate elite tourism - neither in national parks nor in spas. Rather they were supposed to benefit ‘the people’ as a whole.

Similarly the democratic impulse can be seen in the exception that proves the rule: the Hydro Majestic, the closest thing in Australia to Bruck’s ideal, established by Mark Foy in 1904. It is worth noting that Foy’s background was again not British: his grandfather was a Frenchman who emigrated to Ireland and married an Irish wife, and his parents then migrated to Victoria where his father became a successful draper. The flamboyant Mark Foy and his brother took the business to Sydney where they established a department store in 1885: they would open their signature store in 1908, a grand emporium with Sydney’s first escalator. As buyer for the store, Mark Foy travelled extensively in Europe and decided to reproduce in Australia the kind of hydropathic spa resort he patronised in Baden Baden, Matlock Bath or Switzerland. In 1901, he bought a family hotel, the Belgravia, in the Blue Mountains village of Medlow and added and adapted adjoining properties as they became available, linking them with a long wide corridor. The result was the Medlow Bath Hydroopathic Establishment, ‘a Hydro on the continental system’ that meandered 1200 feet along the cliff-top and provided spectacular views over the Megalong Valley - and

---


thoughtfully provided a bar at each end. That concept was influenced by Smedley’s similar setting at Matlock Bath: Foy admitted to being ‘infatuated with the great establishment of Smedley’s’, which had opened in 1853. He also approached Smedley’s outfitters directly, requesting, for example, detailed pricing for furnishing one room (‘say Room no 268’) and a ‘sample outfit for one room packed and Ready for shipment’, with the promise that a possible order for up to 50 rooms might follow. For his ‘casino’ (for balls and concerts rather than gambling) he approached the builders of the Wayne Mineral Bath House and Hotel in Detroit for a pre-fabricated copy. He added a tiled Turkish bath with underfloor heating, an art gallery, a billiard room, a dark room for amateur photographers, a garage and pioneering electric lighting. All aimed at flamboyant theatrical effect. The hydropathic baths overlooked the valley under a balustraded walk and a roof-top lookout provided ‘a sun-bath for ladies under the open-air treatment’. A ‘flying fox’ or small cable car carried produce from his dairy farm and market garden in the valley. He poached Dr George Baur from the Shoeneck Facility on Lake Lucerne as his chief doctor, sending him ‘to Smedleys Hydro for 2 months to find out all about their treatment’ but also publicising Baur’s knowledge of ‘the latest scientific methods of treatment adopted in the best Swiss and German Hydropathic Institutions’. The Medlow Bath Hydropathic Establishment Bath Book, issued to patients, listed 83 treatments, from bowel kneading to mud baths, sand baths and mustard bastings.

Foy even successfully petitioned the New South Wales Railways to rename the village Medlow Bath in 1903, in time for the opening. There remains some question whether there ever was a mineral spring at Medlow but certainly locally available spring water soon dried up. Foy imported spa water from Baden Baden: the copper tanks it came in made it unpalatable so few clients were tempted to over-indulge. But the myth of a spring was more important than the reality. The Hydro relied more on its provision of all the latest medical treatments and the Blue Mountains’ general reputation for ‘such pure air as is wafted through hundreds of miles through the Eucalyptus trees of Australia’ than the actual presence of a mineral spring.

In the years leading up to the opening, Foy gave up his involvement in the running of the department store and devoted himself to what he called his ‘hobby’, along with continued international travel. He recognised the possibility - pointed out by all around him - that his ‘Smedleys at Medlow’ might be a ‘huge failure’, but argued ‘if it is to be a success it will be a grand success’. He said he was prepared to wear a loss of up to half his investment, estimates of which ranged from £12,000 to £65,000.
The splendid Hotel Carrington in nearby Katoomba seemed a success even without the hydropathic facilities he was offering. The Hydro’s prices were to be high, at least initially: £4 a week when standard charges at Daylesford were less than half that, from 25/- to 35/- a week in 1911.\(^{46}\) The thinking was that ‘people who want the treatment generally find a way to pay the price’, but that ‘we can always make it a cheaper place’ if the high prices turned patrons off.\(^{47}\)

Within two years, however, Foy acknowledged that he had missed the mark - despite one patron booking himself in for a year the day after the hotel opened.\(^{48}\) The demand for up-market luxurious spa treatments on the elite European model did not exist in Australia. Foy continued to offer hydropathic treatments until 1913, but from 1906 he adroitly remarketed the Hydro as simply a luxury hotel, down-playing the medicalised image, emphasising elegance and sophistication, and adding cigars, alcohol, clay-pigeon shooting and picnics to Jenolan Caves to the schedule.\(^{49}\) The ‘hydropathic’ was dropped and it was renamed the Hydro-Majestic. Its reputation was forged around celebrity and extravagance. Tommy Burns trained there for his world title fight with the African-American, Jack Johnson, in Sydney in 1908, and in the same year it was thrown open for the visit of the American Great White Fleet. It became known as an expensive, fashionable resort with Turkish-costumed staff, fancy dress balls and assorted high jinks.

The shift was apparent in a curious article by ‘a British Globe-Trotter’ that was being distributed by the hotel from 1908. With entertaining cartoons, it told of how the author set out for Medlow Bath to see the Australian bush, taking his swag, billy and gun and picturing ‘a humble little inn far away, the host sitting out on the verandah, in a cabbage-leaf hat’, with the ‘Bath’ perhaps a ‘dark pool among the woods, haunted by dusky aborigines, who laid down their boomerangs and their wallabys on the bank as they came to bathe’.\(^{50}\) Instead he found ‘Monte Carlo ... with a slice of the Louvre and the Tuileries thrown in’ and the article then provided a light-hearted description of the many amusements on offer. While it came to the hydropathy treatments, the tone became quite droll:

\[
\text{The result is that you immediately lose your rheumatism, gout, indigestion, spinal complaint, neurasthenia, perihepatitis, and housemaid’s knee, and come out ready to play forward in an international football match. At least, that is what I was given to understand.}\(^{51}\)
\]
He was more interested in the possibility of Peeping Toms at the sun baths, where (segregated) men and women ‘lie about very lightly clad’ on imported sand, and in the ‘heart disease that no hydro can cure’, stimulated by the women to be met at the amateur theatricals, dances and entertainments of the casino.  

But still the Hydro struggled. Foy leased it in 1911 to travel overseas but the lessee went bankrupt two years later. It was then leased to Foy’s main competitor, Joynton Smith, owner of two other grand hotels in the mountains, who seemed to run the Hydro simply to take the overflow from his other hotels (ensuring it did not compete). Then in 1922 half the hotel was destroyed in a bushfire and Foy put it up for auction. Failing to find a bidder, Foy returned to manage it himself, re-inventing it for a less exclusive clientele, halving his prices, and advertising to ‘just ordinary folk without the fad of dressing for dinner’. Healthy outdoor activity and structured evening entertainment became the norm and honeymooners a significant market. Foy floated the hotel as a public company in 1936, which provided funds for a Streamline Moderne wing and a new ‘ultra-modern’ Bellvue Lounge Bar that capitalised on the view. He continued as chairman of the board until his death in 1938.
6 :: FROM THE MAJESTIC TO THE MUNDANE: DEMOCRACY, SOPHISTICATION AND HISTORY AMONG THE MINERAL SPAS OF AUSTRALIA

1950. During the war it was requisitioned for use as a hospital for the US Army, who by then regarded it as ‘a nice middle class rather dowdy, rundown hotel’, though an officer in charge noted how often he came across young women from the nearby munitions factory coming out of rooms adjusting their skirts.

Over the same period, and in stark contrast to the Hydro, another spa was emerging in New South Wales: it too claimed to be ‘the Spa Capital of Australia’. The discovery and development of the Great Artesian Basin - the world’s largest fresh water artesian aquifer system, covering much of eastern Australia - was another example of the application of science, and it allowed the expansion of pastoralism and agriculture across great swathes of Australia that would have otherwise been too dry. Among the bores drilled was one at Moree, in north-western New South Wales, which in 1895 produced mineral-rich water at 40 degrees Celsius (Figure 3). A pool was constructed almost immediately from railway sleepers, and then in 1898 a commercial operation began and was gradually expanded, with the encouragement of the state government and the government tourist bureau. In 1913 the Moree Municipal Council built a more elaborate baths complex, with men’s and ladies medicinal baths along with an Olympic swimming pool, and promoted it extensively. By 1917 the Council’s letterhead contained the words ‘Bathe ye in the Curative Waters’.
of the Moree Artesian Bore Baths and ye shall be freed from all sufferings, and enjoy once again the beauties which nature has placed around thee’.  

It became a focal point for the white community and always operated as simply Moree’s version of a local town swimming pool, despite the town being promoted in the 1920s as ‘the Karlsbad of Australia’. A visitor in 1914 commented that ‘The bath is as popular with the Moree people as were those of ancient Rome to the dwellers in the Imperial City ... The trouble is that the bath is so seductive that bathers don’t like coming out’.

Again, as with Daylesford, the spa experience at Moree was casual and democratic - though the democracy did not extend to the large local Aboriginal population, who were informally excluded from the town itself and whose settlements at the edge of the town were under constant harassment between the wars. While Moree, though a wealthy pastoral district, was too far away from population centres to attract much tourism, it did gain some reputation as a destination spa, the railways even providing concession fares for those seeking treatment on medical advice. A sociological study in 1948 observed that while the ‘tourist population of several thousands’ had a life of their own organised ‘around regular visits to the artesian baths’, the baths were ‘not a feature of upper-class activities’ but were ‘a significant social institution for the lower class’. For the upper class they were simply ‘a municipal investment to attract tourists, aid commerce and promote town development’.

In 1953 the council controversially moved a resolution (later advised to be illegal) to formally exclude Indigenous people from the baths and other council facilities: according to the deputy mayor, ‘the preservation of the thermal baths for the exclusive use of white patrons is vital to this town’s prosperity’. In 1965 Moree - which was gaining a reputation as Australia’s ‘Little Rock’, holding out against state and federal government policies of de-segregation - became the focus of media attention. A ‘Freedom Ride’, composed largely of university students and Aboriginal activists, travelled through NSW drawing attention, with generally supportive media coverage, to country towns where Aborigines were barred from pubs and community facilities. At Moree they succeeded in having Aboriginal children admitted to the spa and pool complex, but once their bus had left town, other Aborigines were denied entry. When the bus returned to Moree to a sometimes violent confrontation with angry townspeople, the mayor agreed to put a rescission motion to council, which, after being deferred twice (so as not to be seen as being railroaded), was finally passed by a 6-1 vote three months later.

---

60 Moree Artesian Baths: the Karlsbad of Australia (Newcastle, NSW: Davies & Cannington, c.1925).
66 Though it was replaced with a ‘hygiene’ motion: Curthoys, Freedom Ride, 225, 235.
Between the wars spa culture in Australia was at its height. Daylesford’s first bathhouse opened with two baths in 1894, expanding to four in 1912: by the 1920s it was a large complex with 22 private baths. Demand rose from 2215 baths in 1913 to 7000 in 1924. Even the Great Depression, felt particularly severely in Australia, had limited impact on the spa holiday, with estimates of visitor numbers ranging from 60,000 to 80,000 a year (Figure 4). The 53 guesthouses of 1929 had only shrunk to 47 by 1941. By the end of the 1930s the standard claim was that Hepburn and Daylesford were ‘annually visited by over 100,000 holidaymakers’.

Spas generally make a claim to some kind of sophistication. Certainly Australian spas responded to an image of the sophisticated European spa where emperors and princes mingled in a cosmopolitan world of balls, diplomacy and intrigue. Both Hepburn Springs and Moree could imagine themselves as the Karlsbad of Australia. Foy attempted to create some sort of Australian equivalent to that ideal of the spa and failed. Neither the economics nor perhaps the democratic character of Australian society could sustain such an establishment. But nevertheless a kind of sophistication did attach to Australian spas - at least in the Daylesford district - and we should attempt to unpick, in the spirit of Bourdieu, the exact meanings of that sophistication: just what were the cultural distinctions it entailed? Daylesford-Hepburn Springs spas developed around a sense of sophistication, but it was in a lower key than that to which Foy aspired.
First, as we have seen, Daylesford acquired a certain cachet from its (albeit somewhat truncated) cosmopolitanism. Spa culture across Europe, at least in the grand spa tradition, had a reputation for sophistication that owed much to the cosmopolitanism of the aristocratic and bohemian circles it attracted. But how far down the social scale does that valorising of the cosmopolitan seep? In Britain, I suspect, not very far; on the European continent or in North America, possibly through to the middle class. In Australia it seems to have gone further so that being vaguely ‘continental’ was an attractive feature of the spa. No wonder then that a proposal to institute fox-hunting and grand balls (so visitors could imagine themselves in ‘a romantic country-side in old fashioned England’) did not get off the ground. Second, the low-key sophistication attached to the Australian spa, at least at its height, was not the sophistication of class, signalled by the possession of cultural and economic capital. The clue lies in the popularity of Daylesford as a honeymoon destination between the wars, particularly for lower middle and upper working-class couples. Daylesford, for honeymooners, offered the sophistication of the special occasion, a sophistication that ordinary people could perform when they had the money and sense of occasion. It was a sophistication available to everyone, or at least to a much broader cross section of society than might be found in spa resorts elsewhere.

There was no unanimously agreed definition of this second-rate kind of sophistication, as can be seen in a dispute that broke out when the Hepburn Progress Association gained permission to hold dances in the Pavilion. One resident objected that ‘the promiscuous dancing to which we object at the spring park tended to deprive our centre of tone and prestige’. But the dancing continued. The Palais, the purpose-built dance-hall that later accommodated those ‘promiscuous’ couples, did not stand for ‘tone’ or ‘prestige’, but for a certain continental glamour. While a modern art deco hotel replaced the old Mineral Springs Hotel in the 1930s, the common guesthouse was still the dominant form of accommodation. Democracy still ruled and it could parody the conventional idea of fashionable sophistication. Consider this report in the Melbourne Argus in 1933:

To be in the mode in Daylesford it is necessary, it seems, to carry a lemonade bottle or two, stoppered and dangling by a string tied round the bottle’s neck. The bottle should be tinted red made by successive deposits of iron from the mineral water. The deeper the shade of red the better the owner’s claim to be classed among the veteran spa-water drinkers.
Fred Johns, who happened to be also the compiler of Australia’s *Who’s Who*, went out of his way to emphasise the spa’s classlessness:

> The tinkling of dangling empty bottles was heard the live-long day along Hepburn Springs’ main thoroughfare and the various tracks to the springs. No one - not even wealthy Melburnians who were among the visitors - appeared to be too proud to carry a bottle to the springs, fill it, and take it home again.76

The down-market sophisticate represented by the honeymooner also proved to be the saviour of the Hydro Majestic hotel, which returned a profit only because Foy was able to re-market it to appeal to them. The Blue Mountains had long attracted the honeymoon market: one weekend rail service was known as the ‘honeymoon express’.77 The Hydro acquired a reputation in the 1930s that combined honeymoons with more risqué assignations and celebrity-spotting. Stories of decadent behaviour and of the illustrious guests who stayed there - some true, some myth - were important in creating the hotel’s aura and enabling its less illustrious or less decadent guests to enjoy a sense of sophistication at second hand.78 The names include Dames Nellie Melba and Clara Butt, Tommy Burns, Bertha Krupp (the munitions heiress), Arthur Conan Doyle and the Rajah of Pudukkottai, who courted his Australian bride, Molly Fink, there.79 Australia’s first prime minister, Edmund Barton, died there. More recently Russell Crowe was asked to remove his baseball cap in the dining room. Some of the embroidery around those names is more suspect: the view did not provide Conan Doyle with the inspiration for *The Lost World*, nor did Melba open her farewell tour there.80 The public was titillated by persistent stories about a bell that would ring early in the morning requiring guests to return to their own rooms and about its popularity with car thieves because the thefts were never reported.81

The spa in Australia survived the Depression and the Second World War: the serious decline came in the 1950s. For the Hydro, wartime requisitioning provided compensation that paid for refurbishment. In Daylesford the 47 guesthouses and hotels of 1941 had dropped to 32 in 1947, but two years later the number was back to 40, including the ‘Verona’ and the ‘Hepburn Chalet’. Then a seemingly inexorable decline set in: though the claim of 100,000 visitors annually continued to be made, unchanged, the number of establishments offering accommodation had dropped to

---


78 Brooks, *Hydro Majestic*, 68.


81 *Sydney Morning Herald*, Column 8, May 31, June 1, June 2, 2011.
28 by 1953 and 23 by 1967 - and these included a number of new motels. Most of the old guesthouses had closed.82

They had made an effort to meet the challenge of the post-war world and appear up-to-date. Daylesford had promoted its waters as radioactive between the wars but later dropped that claim to modernity.83 By 1967 the Hepburn Mineral Springs Hotel was offering ‘foam rubber mattresses’, the ‘latest in juke-boxes’ and Ten-Pin bowling with ‘the latest American “Savoy” machines’, and advertised itself as ‘The first Hotel in Australia to install “SAUNAMATIC” STEAM BATHS’.84 The Hydro Majestic made an unsuccessful attempt at revitalisation in the 1970s, with juke-boxes and pinball machines.85 Perhaps the most telling sign of the spa’s post-war decline was Moree’s 1962 centenary history, which contained only a passing reference to its once famous bore baths.86

The decline of the spa in the 1950s appears to have been a general phenomenon, at least through the west. The explanation for it lies not in any internal cyclical process, but in a range of exogenous social factors. There was less sense that the pleasures of a holiday needed some sort of superfluous excuse: an educational justification perhaps, or, in the case of the spa, a health regime to benefit the body. Instead, as can be seen in the rise of Butlins (from 1936) and Club Méditerranée (from 1950), pleasure alone became sufficient reason for a holiday. The new emphasis on family life gave new meaning to the family holiday, for which the sophistication of the spa resort was inappropriate. The dominance of heroic medicine meant that alternative therapies lost their legitimacy, and the victory over tuberculosis meant that establishments offering more generalised rest cures were no longer viable. And the rigidities of the guesthouse regime and spa rituals no longer suited a more private and more individualised way of living. Moreover in an era of mass car ownership – which became a reality in Australia in the 1950s - spa resorts that had focused on the ‘playful crowd’87 had less appeal than the car’s promise of escaping the crowd. The car also meant destinations such as Daylesford and Medlow Bath became mere day trips from Melbourne and Sydney respectively; fewer people stayed overnight and so the infrastructure underpinning the spa industry contracted. The car also promoted the rise of the beach holiday, again particularly pronounced in Australia.88

But in Australia there was another factor. A massive post-war immigration scheme was bringing large groups of non-British migrants into the country for the first time. Many of them, like other Australians, took their holidays at the beach, but the spas

---

82 These figures have been calculated from the ‘Where to Go’ in Victoria guides, with various sub-titles and publishers: e.g. Tourist Development Authority of Victoria, ‘Where to Go’ in Victoria: the Country Hotel, Guest House and Motel Guide (Melbourne: Tourist Development Authority of Victoria, 1967), 110-19; see also Wishart and Wishart, Spa Country, 45; Darwin, Gold’n Spa, 162. The guides’ changing subtitles themselves provide evidence of an interesting shift in taste, from ‘Hotel and Boarding House Guide’ in 1911 to ‘Hotel and Guesthouse’ to ‘Country Hotel, Guesthouse and Motel’ by 1967.
83 Wishart and Wishart, Spa Country, 35; Healesville and Yarra Glen Guardian, February 9, 1924, 4; Argus, July 26, 1926, 21; Daylesford and Hepburn Springs, Victoria, Australia (Melbourne: Betterment and Publicity Board, Victorian Railways, in conjunction with the Daylesford and Hepburn Springs Tourist Bureau and Publicity Committee, c1930); Argus, October 13, 1938, 11.
84 Tourist Development Authority of Victoria, ‘Where to Go’ in Victoria, 115.
85 Brooks, Hydro Majestic, 60.
also offered them an experience more reminiscent of home - and many also had more confidence in the therapeutic promises of the spa. And these new migrants were likely to be poorer southern Europeans rather than sophisticated and exotic bohemians from central Europe. The continental sophistication of the spas before the war had been theoretical: it could not cope with the reality of migrant bodies. The erstwhile cachet of the Australian spas had now lost its gloss. A sign of Daylesford turning its back on its continental heritage was the institution of an annual ‘Highland Gathering’, including pipe band championships, in 1952.89

Yet the decline was not permanent: as elsewhere in the western world, the spas revived. Local pressure in Daylesford had pushed for a government enquiry into mineral spas in Victoria in 1970, though its conclusions were hardly encouraging. Comparisons with Europe and Japan ‘would be invidious, as overseas spa resorts are entirely different in conception’, and Australian spas lacked the financial and institutional support available there.90 It found the Victorian spas to be ‘archaic, dilapidated, unhygienic and uncomplimentary to the environment’ and acknowledged that ‘Medical opinion in Australia does not generally subscribe to claims’ about the curative properties of mineral waters.91 The European spa remained the ideal. The committee conceded that, if a spa were to succeed, Daylesford was the logical place for it given its ‘fairly substantial facilities (even though out-dated)’, but as long as they remained wedded to a notion that a spa had to look modern, the future did not seem bright. The historic Hepburn Springs bathhouse was eventually renovated in 1985, and a swish new $12 million bath complex was added to it in 2008. However these local and state government initiatives were complementing rather than instigating a revival of fortune. The revival of the spa from the 1980s was an international phenomenon, reflecting the worldwide consumer shift to the body, the emergence of the ‘wellness industry’, post-Fordist shifts in the economy towards the provision of services, new forms of social distinction based around physical beauty and health, a new legitimacy and cultural status being given to alternative medicine, which had been rejected in the 1950s, and more costly and intensive uses of leisure time. Sophistication now consisted of the consumption of particular services and, in the words of the Australasian Spa Association journal, being ‘at the cutting edge of change in the global health care paradigm’.92


92 Kirien Withers (‘Spa Guru Down Under’), ‘Editorial’, Spa Australasia 26 (2006): 4. Consider how Portuguese railways promote travel to the spas of Luso and Curia by flattering their present-day clientele: they are ‘not just for old folks, the sick or those stuck in the past...These new habituês are more sophisticated and demand a wider range of services (hydro-gymnastics, beauty treatments, etc).’ http://www.cp.pt/cp/displayPage.do?vgnextoid=919ed90ed1e69010VgnVCM1000007b01a8c0RCRD&contentId=c34c5e6b1442310VgnVCM100000be01a8c0RCRD [accessed October 1, 2011].
SECTION II :: CASE STUDIES

6 :: FROM THE MAJESTIC TO THE MUNDANE:
DEMOCRACY, SOPHISTICATION AND HISTORY AMONG
THE MINERAL SPAS OF AUSTRALIA

historic, representing the spa culture of the past as an old-world elegance and a
sophistication born of long tradition.93 This was particularly pronounced in Australia,
where the spa’s revival coincided with the rise to prominence, especially in regional
economies, of cultural tourism (and especially history tourism), which had been
marginal before the 1970s.

One useful marker of the emergence of this historical consciousness is a brochure
promoting the Daylesford district published by the local Rotary Club. The first edition,
in 1974, focused on beauty spots and gold-mining, and had relatively little to say
about Hepburn Springs’ spa and almost nothing about its history:

The Mineral Baths complex, although sanctified by half a
century of eager use, is very much in popular demand. Plans
for extensive renovation and improvement are under frequent
discussion, and there is both the need and the demand for
much larger-scale facilities.94

The second edition, published just three years later, tripled the length of this entry
with an account of the spa’s history, mentioning Aboriginal use, Chinese gold miners,
the early bottling works and the ‘group of local businessmen’ (a very Rotary
interpretation) who established the Spring Park Committee.95 There had been some
mentions of the springs’ history in earlier promotional material. Even by 1929, an
Aboriginal past was being incorporated into the spa’s history:

The mineral waters of the spa Centre of Australia, Daylesford,
have the dignity of tradition. The springs at Hepburn were
regularly visited by Australian aborigines, who remained about
two weeks each year in the district.96

But for the most part, for most of the twentieth century, promotional brochures
would draw attention to ‘numerous up-to-the-minute shops and places of
amusement’ and ‘up-to-the-minute bathing facilities’ rather than any sense of
history.97 In stark contrast, by the end of the century history reigned supreme. The
major introductory articles in the main tourist publication, Around and About Spa
Country, were ‘Daylesford History and Culture’ and ‘Hepburn Springs History and
Culture’, both providing detailed historical background.98

In the later twentieth century many of the old guesthouses were re-opened and other
older buildings revamped as bed and breakfasts: their décor and advertising made

---

93 Beth J. Harpaz, ‘New Spas Look to
History for Inspiration’, USA Today, August
14, 2007; Sydney Morning Herald, August
94 Rotary Club of Daylesford, Getting to
Know Daylesford, 6.
95 Ibid. It also added more history
elsewhere and the third edition finally
added ‘tourism’ as one of the district’s
significant local industries.
96 Argus, November 22, 1929, 8; cf Victoria’s
Spas and Midland Resorts (Melbourne:
Victorian Railways Public Relations and
Betterment Board, 1955), 5.
97 Victorian Railways, Daylesford and
Hepburn Springs (Melbourne: Victorian
Railways, 1939, 1940).
98 Around and About Spa Country, Winter
2002.
the most of nostalgia and a sense of tradition. By 2002, tourist brochure advertisers included 'Historic Barwidgee', 'Heritage House', 'Old Hepburn Post Office', 'Central Springs Inn ... Classified by the National Trust', 'The Church [Circa 1878]', 'An authentic 1850s miner’s cottage', a '19th century Manse' and 'Musk Manor. A traditional Bed & Breakfast ... offering old fashioned hospitality ... Magnificently furnished with antiques'. Readers were invited to 'Step Back in Time' in a 'Rustic School House and Miner’s Cottage' and experience 'The splendour of an Edwardian Country House' at Bellinzona, while Mooltan re-appeared as a 'Gracious Edwardian Guest House'.

Websites also make the most of historical associations. Holyrood House for example promoted 'our lovingly restored country residence and historic garden' with, of course, 'traditional bed and breakfast' and Pendower House is 'A gorgeous 1880’s country house in a tranquil garden setting'. Some have gone further up-market. Crippa’s Mineral Springs Hotel was taken over by the Peppers resort chain to become Peppers Mineral Springs Retreat, 'a grand 1930’s guest house that has been transformed into a deluxe retreat with stylish art deco reception areas, leafy gardens and stunning courtyards': interestingly, 'guest house' has become more prestigious than 'hotel' as a label. The historic Bellinzona guest house, which burnt down in 2003, has had a similar makeover from the Grange chain to become an 'Edwardian conference & reception venue': 'Proudly situated in the heart of the pretty and historic village of Hepburn Springs, Grange Bellinzona welcomes you with its elegant heritage style'. The original bathhouse is now the Hepburn Spa Mineral Springs Bathhouse and Wellness Retreat, and not only promotes the heritage status of the buildings, but claims its own part in history: 'we believe we have created and helped shape the Australian Spa scene, with the origins of our business dating back to 1895'.

It was, of course, a history re-written to serve the interests of tourism. An Aboriginal origin was now consistently prominent, as suited some of the more ‘New Age’ aspects of the modern spa industry: a number of spa providers include indigenous-inspired products among their treatments, such as Peppers’ 'The Dreaming' which embraces 'traditional Aboriginal healing techniques'. Another narrative was provided by a Tourism Victoria publication, which welcomed visitors to the ‘Spa Capital of Australia’ by ‘offering a return to the grand old days of genteel afternoon teas, fine dining and stately homes’. Those grand old days are a tourist fantasy, but one that fits a more up-market sophistication, an image of luxury and a greater emphasis on pampering. A similar oddly anachronistic fantasy can be found at Peppers Mineral Springs Retreat,
where the management displays reproduction posters from the early days of the Hydro Majestic, advertising it as a Hydropathic Establishment.

But the most striking historical revisionism was the recognition of Daylesford’s Swiss-Italian heritage. While the spa’s cosmopolitanism was an important feature in its heyday between the wars, as we have seen, in the historically-focused tourism promotions of the 1970s and 1980s it barely rated a mention. In 1993 two of four stanzas of a ‘Tourism Promoting Song’ were historical, but without Swiss-Italians. But then, around the turn of the century, the history of the area was re-written as an essentially multicultural one. By then multiculturalism was chic. Ethnicity had been commodified for middle-class consumption. A ‘Swiss Italian Festa’ celebrating ‘the history, culture and lifestyle of Hepburn Springs’ was added to the district’s tourism calendar in 1993 and Italian food and music were promoted, mostly by some of the original families that had remained in the tourist trade. Parma House became ‘Villa Parma’, restored as exclusive self-contained accommodation celebrating its historic ethnic origin. When the 1930s Hepburn pool was heritage listed and named ‘Victoria’s favourite built place’ in 2004, much was made of its Swiss Italian builders. The new narrative culminated with an exhibition on ‘the Swiss and Italians of Hepburn’ at Melbourne’s Immigration Museum and the publication of the district’s best history, Clare Gervasoni’s Spa Country’s Swiss/Italian Story, in 2007.

The incorporation of multiculturalism into the district’s history has produced some interesting ironies. The Tinetti family’s farm, established during the gold rushes, was purchased by Carol White with a divorce settlement in 1990 and turned into a successful tourist attraction, ‘historic Lavendula Swiss Italian Farm’, which along with the lavender farm offers historical displays and tours of the heritage buildings. The proprietor’s extensive research into the history of the farm and the Swiss Italian settlers of the district, tracing their experiences through documentation and retracing their steps, almost suggests she has adopted their history as her own. Meanwhile down the road the Tinetti family established their own tourist attraction in 1999. Their willows had been used to produce Australia’s first cricket bats and the family now sells that ‘Aussie’ history at Cricket Willow, offering a bat factory, historic displays in a replica ‘old General Store’ and a ‘picturesque oval, complete with picket
fence’. So while the Anglo entrepreneur has embraced a multicultural history, the Swiss-Italian family has found an impeccably Anglo-Australian one.112

In later years the Hydro Majestic similarly turned to its history - both real and apocryphal - as its main attraction. As early as 1915 (just 10 years after opening) the Hydro claimed to be ‘already a historic landmark, and no stay in New South Wales can be said to be complete unless it has included a visit to this unique hostelry’.113 It became a tourist attraction in its own right and certainly by the 1950s, despite ongoing attempts to update it, derived much of its appeal from a nostalgia market, particularly return visits by those who had honeymooned there.114 A 1950s brochure included nostalgia, historic photos and the promise of a ‘return to the child-like gaiety of yesterday’ - ‘Oh, yes, life was gay in those naughty pre-war days’.115 But serious attempts to take the hotel ‘back to its former glory’ came in the 1990s, with its sale to the Mah family, who engaged the up-market Peppers Hotel Management and the Accor group to restore and promote it to a more exclusive up-market clientele, with nostalgic neo-Federation/art nouveau decorative schemes, a conscious selling of its past and revamped spa and fitness facilities.116 By then it was explicitly advertising a ‘nostalgic weekend’ in an ‘Edwardian Folly with a touch of Art Deco’.117 In 2008 the Mah family sold the hotel to ‘Hydro Majestic Hotel Pty Ltd’, a Malaysian based company which plans to use the Hydro Majestic brand for their other hotels in Asia: they closed it down for what is intended to be a comprehensive and lavish refurbishment for ‘a discerning market’. Their website claims ‘a vision and a spirit like that of Mark Foy’ which turns out to be ‘a 5+ Star Luxury Resort Hotel and Spa, at a premium rate with exclusive facilities’. History is again called to serve as an accompaniment to luxury: ‘A key improvement will be the luxurious, new, historically inspired interiors, which reference the past and fold into the present, expressing the glamour of Art Deco along with bold moments of now to create absolute luxury.’118 It remains to be seen whether Foy’s vision for an exclusive resort is more viable at the beginning of the twenty-first century than it had been a century earlier.

Other spas also made much of their history in the late twentieth century. Moree - its ‘exquisite Art Deco town centre provides a spectacular old-world ambience’ - even incorporated the Freedom Ride controversy into its history, adding a heart-warming if misleading gloss: ‘Following a public meeting, the community whole-heartedly supported the lifting of the colour ban’. It too now emphasises the cosmopolitanism of the experience, praising the:

---

113 Sydney Morning Herald, April 28, 1915, 10.
114 Brooks, Hydro Majestic, 59.
115 The Blue Mountains at Medlow Bath [Medlow Bath: Hydro Majestic, c1953].
116 Brooks, Hydro Majestic, 64.
117 The Hydro Majestic Hotel: Medlow Bath NSW Blue Mountains (c1990s), Mitchell Library ephemera.
social nature of the 'taking the waters' experience. People from all over the world sit and stand around talking and comparing notes about their lives and travels as they soak up the warmth and goodness of the artesian water.\(^{119}\)

In 2011 it underwent re-development that will still leave it as essentially a local government pool complex but with facilities allowing it to tap into the modern spa industry. The Caves House complex, established in 1901 around caves and the thermal pool at Yarrangobilly in the Snowy Mountains had acquired a 'History Walk' by 1992.\(^{120}\) Even modern privately developed spa resorts sell history. Emirates’ Wolgan Valley Resort & Spa (based on their Al Maha Resort and Spa) promotes its heritage setting, stresses the indigenous past and sells R M Williams Heritage collection souvenir leather goods.\(^{121}\) Peninsula Hot Springs near Melbourne, a resort built around underground geothermal water discovered in 1979 and opened with a 'Spa Dreaming Centre' in 2005, positions itself within a history of spas in Australia and internationally, connects to indigenous Australia and emphasises their cosmopolitanism, combining ‘other cultures’ bathing rituals’.\(^{122}\)

It becomes clear from the Australian experience of the spa that there was never a specific national spa tradition. Cosmopolitan European influences were always a feature and while a kind of democratic sophistication might have been associated with some of the more prominent spas in Australia, the rejection of an elite spa tradition was more a matter of economics than of national character. Indeed their cosmopolitanism became a selling pitch - as it often was with some of the best-known spas of Europe. In their most recent incarnation the creation of a historical consciousness drawing on both a multicultural history and a claim to an indigenous history is testament to the longevity and adaptability of the spa resort as a form of tourist attraction.


CHAPTER 7
HEALTH SPA TOURISM IN THE CZECH AND SLOVAK REPUBLICS
Tourism is an important part of the national economy for all European post-communist countries. Most of them actively support the development of tourism, which was deliberately constrained during the communist era. During this period, most of these states took very strict measures to limit not only outbound tourism, but also to some extent inbound tourism. These restrictions were not limited exclusively to visa restrictions, but also included other legislation limiting the opportunities for citizens to leave the country and unfavourable currency exchange rates for visitors to these countries. The Czech and Slovak Republics, as successor states to Czechoslovakia, are now trying to continue in the tradition of tourism which was interrupted during the state communist government period from 1949 to 1989.

The tourism industry is an important part of the national economy of both countries. The economic impact of the development of tourism is reflected in the revenue it brings to state and local budgets, the profits earned from currency exchange and the considerable number of jobs it creates. For this reason, both states make considerable effort to support the development of both traditional and modern forms of tourism. In both, the Czech and Slovak Republics, the spa industry ranks among the traditional forms of tourism which has undergone particularly dramatic developments during the twentieth century. Even today, the emphasis of spa tourism in both countries has been on spas as a component of medical care and thus spas have become a major component of medical tourism. The following chapter focusses on the development of spa tourism in both countries and especially in the period from the separation of the two countries in 1993 to the present.

WHAT IS THE DIFFERENCE BETWEEN MEDICAL AND HEALTH SPA TOURISM?

In the current literature, terms such as health tourism, medical tourism and spa tourism are used almost interchangeably [see Hall 2003, 2011; Connell 2006]. Tressider (2011: 268) defines medical tourism as ‘undertaking a medical intervention away from the home country, where the medical element is the central theme of activity’. The same author places health tourism along with medical tourism, and in the context of this segmentation, spa tourism clearly falls under the heading of health tourism. Similarly, Cook (2008) regards medical tourism as a subset of health tourism, while Smith and Puczkó (2009) divide health tourism into wellness tourism and medical tourism. According to their division, spa tourism sits somewhere on the border between wellness and medical tourism (see Chapter 6).

Spa tourism is defined by Smith and Puczkó (2009: 85) as ‘tourism which focused on the relaxation or healing of the body using mainly water-based treatments, such as,
mineral or thermal pools, steam rooms and saunas. Emphasis tends to be focused on curing, rehabilitating, or resting the body. This definition covers many types of spas. In the Czech and Slovak Republics, medical spas are more typical, these are facilities that offer traditional and complementary therapeutic and health protection treatments as well as other spa services and may also include health institutions. According to Horowitz and Rosensweig (2007), the main motives for participating in medical tourism (and we can consider these to be the same motives to apply to spa tourism) are low cost, avoid waiting lists, procedure not available in home country, tourism and vacations and privacy and confidentiality.

For the purposes of this chapter, we will take spa tourism to be a category of health tourism. At the same time, we must start from the fact that in both countries this phenomenon comes in two forms. The first clearly falls under the title of medical tourism as it falls under the competence of the Ministry of Health and is regulated by the modified Healthcare Act of 1960. The second expands the possibilities of spa tourism to include stays that are also motivated by health concerns, but are not directly associated with treatment or with health-care institutions.

THE DEVELOPMENT OF BALNEOLOGY IN THE CZECH AND SLOVAK REPUBLICS IN THE CONTEXT OF EUROPEAN SPAS

Spa culture in Europe has a long tradition with roots leading all the way back to Roman times. Spas and the development of spa culture are associated not only with medical advancement, but also with culture, natural sciences and technological development. Most European spas were founded and functioned mostly on the principles of hydrotherapy originally using baths and only later adopting drinking cures. While the origins of European spa culture stretches back to the ancient Greeks, spas achieved the pinnacle of their development in classical Rome. The tradition of spas in Central and Western Europe is significantly younger than that in southern Europe and the Mediterranean states.

European spas were originally of two types: (1) mineral springs spas including natural hot springs, which were thought to have healing properties, and cold water springs used for drinking and (2) thalassotherapy spas based upon hydrotherapy using sea water, seaweed, seaweed cosmetics and mineral bath sea salts (Tabbachi 2008). The history of balneology in the territory of today’s Czech Republic and Slovakia is closely related to the history of spas in Germany, Switzerland, Austria, Hungary and Poland. The latter three countries, like the Czech and Slovak Republics, are located on the territory of the former Austro-Hungarian Empire where the spa
SECTION II :: CASE STUDIES

7 :: HEALTH SPA TOURISM IN THE CZECH AND SLOVAK REPUBLICS

experienced its heyday in the nineteenth century. In the territory of today’s Czech lands, the most important spa has traditionally been Karlovy Vary (Karlsbad), which was supposedly founded in the fourteenth century by the Czech king Charles IV. In Slovakia, the most significant spa is Piešťany, which became notable for exploiting the therapeutic effects of mud. In the nineteenth century, spas in this area were visited by some of the best known personalities of the time such as Goethe, Chopin and Pushkin. At the time, spa towns were also important social centres with the taking of the spa waters and medical treatments being combined with gambling, sporting events, orchestras and chamber music for the leisured classes (Ellis 2008).

The social life at Czech and Slovak spas was vibrant even if gambling never became as widespread as in Germany (Křížek 2002). It is worth mentioning that the first golf course in the territory of the present-day Czech and Slovak Republics was established in Karlovy Vary in 1904, and the golf course in Marianské Lázně was opened by the King of Great Britain, Edward VII, a year later. In the year 1899, the race track in Karlovy Vary was opened. Spas also acquired their own characteristic and unique architectural and landscaping style. A typical architectural element of spas became the colonnade. Leading architects of the period contributed to spa design including such names as Fellner and Hellmer in Karlovy Vary, Wiedermann in Františkovy Lázně or Jurkovič in Luhačovice. This period also saw the construction of high-altitude sanatoria (Vyšné Ružbachy, Lúčky), which today are still referred to as ‘Swiss houses’ (Attl 2005b).

The spa tradition was maintained after the establishment of an independent Czechoslovakia in 1918. Despite the fact that the interwar period was marked by economic crisis, the travel industry, including spa tourism, nevertheless developed quite extensively. This period also saw the appearance of a new type of spa guest, the patient whose stay is paid for entirely by health insurance. Health insurance companies also began to build their own spa buildings. Understandably, the level of services for clients whose stays were paid for as they say ‘on the treasury’ was much more modest. Although there were not many such clients, a spa stay ceased to be a luxury reserved exclusively for the elite. Nonetheless, emphasis continued to be placed on the social aspects of spa stays.

This improvement in spa services in Czechoslovakia was interrupted by the Second World War and the communist takeover in 1948. The nationalisation of private property by the communist regime had dramatic effects on the spa sector. In this period, there was greater emphasis on the medical aspects of spa treatments and a suppression of their entertainment, cultural and social aspects. An entire system for
organizing and delivering spa services was created but with only very limited social facilities. Spa treatments for Czechoslovak citizens were fully funded by the state health services. This was made manifest by the insufficient investment made into spa infrastructure and especially into services. While the quality of health-care services improved, accommodation and meal services were considered to be of subordinate importance to medical aspects and the quality of these services suffered significantly. Patients were housed in multiple-occupancy rooms, usually with common bathrooms. Meals had the character of hospital food with a uniform diet assigned for each category of illness. House rules in spa accommodation were strictly enforced and their violation could be grounds for expulsion. Since the whole system of spa treatment was organised within the health-care system, it allowed for the maximum and optimal use of spa facilities. The patient had no practical influence over which spa they would be assigned. The patient’s doctor would make a diagnosis and then the patient would be assigned a particular date and location according to a list of approved diagnoses and the availability of free spaces. Therefore, there was no true seasonality to spa services, and guaranteed occupancy meant that there was no incentive for spa operators to improve the quality of their services.

Spas were visited mainly by Czechoslovak citizens and emphasis was placed on their therapeutic significance. Foreign visitors consisted primarily of guests from the Soviet Union and the German Democratic Republic, with a very small number coming from Western Europe and other countries. The medical character of spa care meant that, at that time, spa stays were focussed on direct therapeutic procedures (such as postoperative convalescence), on chronic diseases or on disease prevention, and always on the recommendation of a doctor.

THE SEPARATION OF CZECHOSLOVAKIA IN 1993 AND ITS REFLECTION IN THE DEVELOPMENT OF THE SPA INDUSTRY

The beginning of the 1990s was a pivotal moment in the development of Czech and Slovak society. The Velvet Revolution at the end 1989 was the beginning of a change in the structure of society and of a new stage of democratic governance in Czechoslovakia. Not long thereafter, in the year 1993, the division of Czechoslovakia into the Czech and Slovak Republics took place. While it should be noted this separation took place without the slightest conflict, it is clear that these events had a marked effect on the tourism industries in both countries. When considering statistical information related to spas in the Czech and Slovak republics, it is necessary to note that these data come from the statistics collected by the Ministries...
of Health in the two countries, and the methodology for reporting the number of clients using spas is not uniform throughout Europe and therefore does not allow valid comparisons of data across state borders but rather points to trends in the spa industry in the particular state. The number of visitors to Czech and Slovak Spas for 2006–2010 is indicated in Table 7.1.

### SPA TOURISM IN THE CZECH REPUBLIC AFTER 1993

Spas in the Czech Republic are grounded mainly on natural medicinal resources, and these consist mainly of mineral and thermal waters, peloids (hummus, peat and mud), natural gases and climates. The best known spas are those in Karlovy Vary and Mariánské Lázne. The significance of the spa as an institution is witnessed by the fact that the Western Bohemian spas, along with other Western European spas, are preparing a joint candidacy for entry on the United Nations Educational, Scientific and Cultural Organization (UNESCO) list of World Heritage sites.

The illnesses treated in Czech Spas are primarily diseases of the musculoskeletal system (52 per cent), followed by neurological disorders (18 per cent) and finally circulatory illnesses (12 per cent). Other diagnoses are occasionally represented. The number of patients in spas during the 1970s and 1980s hovered around 280,000 per year. The year 1991 was marked by a dramatic decrease in the number of patients, a drop of 21 per cent compared to the year 1990, and the year with the lowest number of clients in Czech spas was 1993 with only 171,000 clients (a decrease of 64 per cent from 1991 levels). Subsequent years saw a slow but steady increase in the number of patients, and the number of days of stay. This trend began to stagnate only in 2007. In 2010, Czech spas were visited by 376,000 clients, and the number of overnight stays had also grown from 3,900 in 1993 to 5,700 in 2010. The overall composition of the clientele has however changed significantly. The number of patients whose stays are paid for by insurance companies has decreased while the number of self-payers has

### TABLE 7.1 VISITORS TO CZECH AND SLOVAK SPAS FOR 2006-2010

<table>
<thead>
<tr>
<th>Year</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Czech</td>
<td>Slov</td>
<td>Czech</td>
<td>Slov</td>
<td>Czech</td>
<td>Slov</td>
</tr>
<tr>
<td>Number of visitors</td>
<td>327,078</td>
<td>253,260</td>
<td>346,556</td>
<td>276,164</td>
<td>383,414</td>
</tr>
<tr>
<td>Domestic quests</td>
<td>192,275</td>
<td>159,339</td>
<td>212,594</td>
<td>178,895</td>
<td>229,399</td>
</tr>
<tr>
<td>Foreigners</td>
<td>134,803</td>
<td>93,921</td>
<td>133,962</td>
<td>97,269</td>
<td>154,015</td>
</tr>
<tr>
<td>number of overnights</td>
<td>5,669,938</td>
<td>2,277,187</td>
<td>5,610,641</td>
<td>2,453,285</td>
<td>5,783,213</td>
</tr>
</tbody>
</table>

Sources: Derived from Czech Ministry of Regional Development and SACR-Slovak Tourist Board, 2011
increased. In 1993, self-payers from the Czech Republic made up less than 7 per cent of the clientele and self-payers from abroad only 17 per cent. In 2010, Czech self-payers made up 39 per cent and foreign self-payers 37 per cent of the total clientele. It follows that spas in the future will need to focus on these target groups of clients. The results of a 2008 survey [Mlejnková 2011] showed that a third of spa clients whose stays are currently paid for by their health insurance company would stop going if these stays ceased to be funded. While the average length of stay for an insurance-funded patient is 27 days, the average length of stay is 6 days for Czech self-payers and 13 days for foreign self-payers.

The composition of the foreign clientele at Czech spas is also interesting. Since the 1990s the majority of these were clients from Germany and Russia. Germans make up about half of the foreign guests and about 20 per cent come from Russia. Other foreign spa visitors often include guests from Ukraine, Israel and Austria. Slovaks make up only 1.4 per cent of foreign visitors. The Czech Republic has a total of 33 cities with the status of spa towns in 2010 and these had a total of 88 spa facilities with 26,000 beds. While spas are evenly distributed around the Czech Republic, the importance of individual spas as tourist attractions varies greatly. The most important are Karlovy Vary, Mariánské Lázne and Františkovy Lázně. In 2010, these accounted for 58 per cent of all Czech and 94 per cent of all foreign spa visitors. It follows that other spas have rather a regional character.

The characteristic features of spas in the Czech Republic can be described as

- The use of natural medicinal resources and the medical character of services coupled with highly skilled personnel among which doctors and nurses are the most essential component;
- The complex influence of individual components of the environment [the mutual interaction of natural cultural and aesthetic elements];
- The change in environment [which is considered to help in achieving the overall therapeutic effect of spa treatment];
- The dominance given to the curative function of treatment [healing, follow-up treatment and prevention];
- Long-term exposure. In the Czech Republic the minimal length of stay to achieve therapeutic effect is considered to be 21 days.

[Attl 2005a]
In the Czech Republic, we distinguish between three types of spa stays according to the means of payment. This system is based on the fact that all citizens are by law covered by health insurance. Mandatory health insurance is either deducted as a percentage of one’s income or covered by the state in the case of persons who are without income (such as children, students, pensioners or the unemployed).

Spa care covered by health insurance is divided into comprehensive and co-payment spa treatment. Comprehensive spa treatment builds on postoperative care or specialised outpatient care. It focusses on follow-up treatment, prevention of disabilities and invalidity or limiting the level of invalidity. It also covers occupational diseases and other types of health problems associated with particular professions. The patient is eligible for sick pay during the time they are at the spa. The full costs of the spa stay (including accommodation, full board and all prescribed treatments) are covered by the health insurance company. Up to 2007, this type of treatment was completely free of charge. Since 2007, however, clients must pay a symbolic co-payment of 60 CZK (about US$ 4) for each day of their stay. The length of stay can be 14, 21 or 28 days depending on the particular diagnosis and can be prolonged by 7 days on the recommendation of the spa doctor. This type of stay accounts for 90 per cent of all visits funded by insurance companies. Co-pay spa treatment is provided primarily to patients with chronic illnesses – and on an interval of once every 2 years unless otherwise recommended by an insurance company panel doctor. Accommodation and meals are paid by the client, who is not eligible for sick leave but must draw vacation days during their time in the spa.

In addition to these categories of spa treatment which are funded by health insurance, there also exists the category of so-called self-payers in which all expenses for the spa stay are paid by the client. In this case, the client does not need a medical referral and the length of stay is in no way limited.

Recent years have seen a marked increase in the number of domestic self-payers, the main reason for this is the expanded offering of therapy options, especially the offering of weekend relaxation and rehabilitation stays. Although in recent years there has not been a great increase in the amount of money coming from insurance companies, all spa enterprises have been trying to improve their services not only in the fields of accommodation and food services but also in the field of treatment. In this way, they hope to gain healthy clients for whom drinking medicinal waters, mud baths and massage are considered a normal way of spending their holiday.
Spa treatment is one form of follow-up care. The Czech Republic has a highly developed system of spa medicine. The conditions under which a patient can undergo spa treatment fully or partially paid by health insurance are set by the Ministry of Health in a list of official diagnoses. Spa treatment must be prescribed by an attending doctor (general practitioner or specialist) who sends a request to the patient’s insurance company. The request for spa treatment must be confirmed by a panel doctor who decides whether or not to cover spa treatment. Traditional Czech spa services are one of the major pillars of the travel and tourism industry in the Czech Republic. However, relative to comparable competitors abroad, Czech spa facilities still lag behind in development, particularly in the offering of quality accompanying programmes and services in spa towns. This deficiency is especially noticeable in smaller spas.

SPA TOURISM IN THE SLOVAK REPUBLIC AFTER 1993

Guests in Slovak spas are treated by means of climatic, balneological and combined climatic-balneological cures. Natural medicinal resources are to be found in the form of water (mineral, thermal and radon enriched), peliod (peat, humus and mud) and gases. These resources require that curative spas be located in particular locations. Most Slovak spas operate on the basis of natural resources such as waters with known curative properties which are used in balneotherapy or underground mineral waters for drinking. Currently, Slovakia has around 1,500 natural sources of mineral waters (springs, boreholes, wells). For spas, the most important are natural healing waters and natural mineral waters. Of these 1,500 sources, there are only 110 recognised healing water springs (Eliášová 2005). Currently, there are 25 Slovak spa towns with 31 spa enterprises. This number is slightly lower than it was in the past. Over the centuries, 52 spa places have ceased to exist entirely and some facilities are temporarily out of operation while waiting for reconstruction (Zálešáková 2008). The most recent Spa Act, in force since 2006, guarantees the protection of natural medicinal resources and natural curative spas. This law introduced a division between health-care facilities providing medicinal baths into natural curative spas and spa sanatoria. It also introduced a new system regulating the licensing and operation of these facilities. The uniqueness of each such facility in Slovakia is dependent on the particular mineral content of the medicinal waters available there. Among the best are Piešťany, Trenčianské Teplice, Rájecké Teplice and Sliač. Mountain and alpine climates are also a basis of therapy at seven Slovak spa locations. The High Tatra Mountains are the setting for several so-called climatic spas.
The separation of the Slovak and Czech spa industries effectively took place first in 1969, when the independent Slovak spa association ‘Slovenské kúpele a žriedla’ was established with its seat in Bratislava. This organisation continued to exist until 1993, when Czechoslovakia disintegrated and the independent Slovak Republic was founded. After the split of Czechoslovakia, providing sufficient spa care for all Slovaks became a problem. Nonetheless, Slovak spas were better equipped and had a greater capacity than those in the Czech Republic to provide postoperative rehabilitation. In the period between 1990–1993, there were 23 spa localities and 38 spa facilities with a total of 11,171 beds, and over 150,000 guests were treated every year (Eliášová 2009). There were 11 state-owned spas in operation which were progressively privatised. The privatisation of these spa enterprises between 1995–1997 ended central control and allowed the entry of private capital into the spa industry. Every spa which was transformed into a joint stock company gained a strategic investor (including foreign investment groups) with majority shares. Other shares were transferred to municipalities or cities where the spas were located, and still others went to the State Health Company. Since 1993, legislation and the conditions for obtaining public funding have changed several times, and this has greatly affected the business environment of the industry. Today, spas are no longer exclusively medical facilities designed solely to provide health care from public funds, but have become businesses with their own economic activities. As a result, spa treatment as a form of health care is forced to adapt itself to growing economic pressure which is expressed most noticeably in:

- a reduction in public spending on health care;
- reduced outlays for spa treatment on the part of insurance companies;
- attempts on the part of spas to find alternative sources of funding;
- acceptance of private patients;
- price regulation by the Ministry of Health.

For these reasons, the responsibility for dealing with the economic problems of the spa industry falls on the spa enterprises themselves. Spa service providers are mostly publicly traded companies or, in a few cases, facilities belonging to the Interior or Defence Ministries. Two spas are still under state ownership [Sloothermas Dudince and Kováčova]. From 1998 to 2004, public spending on spa treatments decreased, and by 2003 total public outlays had fallen to 50 per cent of the rates of 1997. From the year 2004, funding of spa treatments was transferred exclusively to health-insurance companies which had a dramatic adverse effect on the spa industry. For comparison, the total number of spa vouchers purchased in 2004 was only 30,000, which was only 42 per cent of the number in 2000. This decline in the
purchase of spa vouchers on the part of insurance companies has continued to the present, with insurers now allocating only 0.5–1.5 per cent of their budgets to spa treatments (Eliášová 2007).

In its 2006 health-care reform bill, Slovakia introduced co-payments for health care and implemented further restrictive measures reducing payments for spa treatments. Slovaks must now often co-pay for their treatment, but the level of these payments is limited by the state to prevent spas from making illegal profits. Since 2008, the state has divided the financing of spa treatments into three treatment categories and established payment limits for each of them.

The offering of Slovak spa operators represents a range of activities from which it is possible to create a service for everyone. All these services combine high-quality medical facilities with recognised natural medicinal resources in a typical spa environment. In setting their prices for spa procedures, insurance companies have not taken into account the increasing costs of such procedures, forcing spas to develop new profit-making activities. Now Slovak spa service providers are forced to deal not only with the fact that Slovakia, like the rest of the world, is going through an economic crisis but also with increasing competition coming primarily from modern waterparks, thermal baths and wellness hotels. Therefore, spa service providers focus on self-payers, both in the field of traditional medical-spa treatments and in wellness spa services. However, in some areas, the infrastructure of spa towns still lags behind. In the past few years, Slovak spas have invested massively into the renovation and development of their equipment and infrastructure. Many Slovak spas have International Organization for Standardization (ISO) certificates confirming the quality of their services, and the spa in Turčianské Teplice is the first Slovak spa to be awarded the European certificate of quality, Eurospea med (Zálešáková 2007). These certificates have an important positive impact on closing contracts with foreign health-insurance companies.

CLIENTS AND SERVICES

Currently, self-payers make up more than half of the clientele at Slovak spas. For this reason, most Slovak spas offer potential self-paying clients wellness procedures, the main enticements being medicinal thermal waters, mud treatments and experienced doctors and therapists. Some spas currently offer more than 50 procedures. In addition to these, facilities also offer so-called spa services, meaning baths or ‘health through water’. These procedures can make use of either thermal or ordinary water. Unlike water-based spas, wellness facilities are not dependent on the presence of a
natural water source and can be built anywhere. One result of the current recession is that the average length of a stay at Slovak spas has been decreasing. Since the mid-1980s, the average length of stay has reduced from 23 to 18 days. Wellness stays usually last 3–4 days and most often take place over an extended weekend with an average length of 3.2 days for foreign clients and 3.1 days for domestic clients (Budínská 2008).

The number of insurance-paid stays at spas in Slovakia according to the National Health Information Centre is around 35,000 per year. Every year the proportion of self-payers increases. The total number of beds is around 10,500, and every year there are approximately 3 million overnight stays registered. Foreign clients are also included in the annual statistics. The foreign portion of the total number of clients at Slovak spas is 35 per cent with most coming from other European Union (EU) states. Some spas have more than 50 per cent foreign visitors, and the total proportion of foreign guests increases every year. Their average duration of stay is 17 days as a result of their preference for traditional medicinal stays (Mušáková 2007). The most numerous group of foreign visitors is Germans, followed by Czechs, Poles and Austrians. Target markets also include the Netherlands and Russia, as well as Israel and Arab nations. The latter group has been quite important to Slovak spas as a substitute for last year’s drop in German and Czech visitors. Many spas have contracts with foreign health insurance companies which pay a portion of their clients’ fees.

WATERPARKS AND THERMAL SWIMMING POOLS

The integration of purely recreational use of water is the field in which Slovak spas differ most from those in the Czech Republic. While Czech spas have maintained their primarily medical character, Slovakia has become a paradise for thermal swimming pools and waterparks. Although the term spa is used to describe more than 80 businesses in Slovakia, not all of these really have a medical character. This category also includes waterparks and thermal swimming pools, which have a completely different offering of services and are oriented towards an entirely different type of clientele than health spas. The difference lies in the fact that natural medicinal spas make use of state-recognised and proven natural medicinal resources. Thermal swimming pools for the most part do not use waters with recognised curative properties. The difference in the offering is also evident in the composition of the clientele and in the average length of stay. At health spas proper, a majority of clients are accommodated directly in the spa while at waterparks they are typically 1-day visitors. Nonetheless, the total number of tourists coming to Slovakia is increasing
annually thanks to tourists who come to Slovakia specifically to visit these thermal swimming pools and waterparks, and these attractions are particularly popular among Czechs. Many of them have the advantage of being able to offer other tourist attractions in the same location. For example, skiing in the High Tatras can be combined with the largest Slovak waterpark, Tatralandia. Currently, there are 25 thermal swimming pools and eight waterparks in Slovakia. The boom in the construction of these facilities started approximately 7 years ago, primarily thanks to financial subsidies their owners received from EU funds. They are supplied with mineral water, which means they can be operated all year round. Although not officially recognised as medicinal, these waters nonetheless are regarded as having medicinal effects, and for many guests they are a cheaper alternative to the official medical spas.

ASSISTANCE FOR THE SPA INDUSTRY IN THE CZECH REPUBLIC AND SLOVAKIA

Spa tourism is a traditional and a highly promising form of tourism in both countries. This is reflected in the support given to spa tourism by both states. Starting in 2001, the Czech government implemented the ‘State Program for the Support of Tourism’, which was divided into four sub-programmes: (1) Support for Cities and Towns with the Status of Spa Towns; (2) Support for Owners of Spa Infrastructure; (3) Expanding Accommodation Capacity in the Category of Private Accommodation in Cities and Towns with the Status of Spa Towns; and (4) Spa Tourism supported the creation of new spa-tourism products. This programme continued until the year 2006 when it was replaced by travel and tourism projects financed through EU funds. At present, in the difficult economic conditions for spa operators, the acquisition of finances through EU funds and in the form of state aid is an opportunity for further development of their business activities. In both programming periods, 2004–2006 and 2007–2013 project implementation has continued for the support of the tourism industry, and as a result of spa tourism, in both states.

Since 2004 almost all Slovak spa enterprises have submitted projects for EU funding, but only a few of these projects have been successful. In 2010, the EU rewarded €6.5 million in financial support to five projects in three spa locations in Slovakia (Cernáková 2011). In addition to financial assistance for the development of the spa industry, the state also provides important assistance in marketing and promoting spa tourism. In the Czech Republic, the promotion of tourism, especially abroad, is the role of the Czech Tourist Authority – Czech Tourism. This agency invests considerable resources (both state and EU) to promote tourism in the Czech Republic. It manages specialised web sites as well as organises road shows, farm
trips and press trips with spa themes and participates in thematically organised trade fairs and exhibitions focussed on spas and spa tourism. The presentation of spas and spa tourism is a part of two projects financed by EU funds – one is focussed on propagating domestic tourism and the other on building awareness of the Czech Republic as a tourist destination abroad. The total support to be invested by the year 2015 is scheduled to be €77.5 million in the Czech Republic. Similarly, the Slovak Tourism Agency is currently implementing an EU-funded programme called Support for the Promotion of Slovakia as a Tourist Destination with the budget of €27.3 million (Cernáková 2011).

THE PROSPECTS FOR THE DEVELOPMENT OF SPA TOURISM IN THE CZECH REPUBLIC AND SLOVAKIA

Spa tourism in both the Czech and Slovak republics will be required to react to new situations. These changes relate to the demands of self-payers, who put increasing emphasis on the quality of services in relation to price, and to the apparent fact that the number of visitors whose stays are covered by health insurance will continue to fall.

We expect that in the Czech and Slovak republics the system of payment for spa treatment through health insurance will be maintained. In both countries, however, there is a similar trend to restrict public funding for spa treatment. This trend is caused by the widening deficit in the health-care systems of both countries. Spas have registered a long-term drop in the number of patients whose stays are paid for by insurance companies. The Czech Republic is currently going through a reform of its health-care system. Its goal is to limit outlays. The Ministry of Health is revising its list of diagnoses that call for spa treatment with the aim of removing some diagnoses entirely from the list and moving others from the list calling for comprehensive treatment to the list calling for co-pay treatment instead. These changes in the payment system for treatment are affecting the future orientation of spa enterprises. These enterprises will have to focus their offering on self-payers more than ever. The offering will have to be increasingly targeted on the specific health needs of the clients, and pressure from clients for better quality care and services will grow.

Trends that will continue due to these changes in the system of financing will include a shortening of the average length of stay and a change in the structure of the clientele in terms of their means of payment. A persistent question is whether it is best to continue to insist on a strictly medical character to spa stays. This insistence is very expensive because medicinal spas must meet a number of conditions...
specified by law. It turns out that clients often prefer a stay of a more recreational character, which they only compliment with some curative treatments at the spa. In this way, the competitiveness of hotels and other accommodation, which also offer balneological services without being part of a spa facility within the health-care system, is increasing.

There are however positive perspectives on the future of Czech and Slovak spas in the fact that ever younger guests are visiting spas and the number of families with children visiting spas is increasing. This raises the possibility that, in the future, the spa will become a place where people go to find culture or culinary experiences and where corporate guests will organise their conferences.

CONCLUSION

The purpose of this chapter was to illustrate the different paths taken by the two successor states of Czechoslovakia (the Czech and Slovak Republics) in developing their spa industries. Both of these countries have rich spa traditions which go back centuries. Before the communist era, spas in both countries were of world-class quality. However, after the separation of Czechoslovakia they have gone about achieving this goal in notably different ways. In recent years, public financing of spa services has been decreasing in both countries, which has had a negative impact on spa development. A comparison of statistical data points to differences not only in the structure of visitors from abroad, but also in the approach to further spa development as an important part of the tourism industry. The Czech Republic leans towards more traditional all-inclusive spa treatment [complete therapy] in the so-called ‘medical spa’ approach. In the Slovak Republic, many new thermal swimming pools and waterparks are being established. In addition to their medical function, these new Slovak spas serve as recreational and amusement centres for the general public.

The spa industry in both countries ranks among the sectors of their respective national economies, which are competitive on an international level. Its success also has a multiplier effect on the development of other tourism services and a resulting positive impact on the regions where spas are located. The potential of both countries lies primarily in improving existing services and offering new services. Both states consider spas to be a principal source of tourism. The authors believe that in spite of the problems described, Czech and Slovak spas will remain and become even more significant not only in the Central European, but also in the international context.
REFERENCES


Cernáková, T. (2011) ’Projekty financované z fondů EU’. E-mail [23 June 2011].

7 :: HEALTH SPA TOURISM IN THE CZECH AND SLOVAK REPUBLICS


CHAPTER 8

TOURISM, WELLNESS, AND FEELING GOOD:
REVIEWING AND STUDYING ASIAN SPA EXPERIENCES
8 :: TOURISM, WELLNESS, AND FEELING GOOD: REVIEWING AND STUDYING ASIAN SPA EXPERIENCES

THE ‘POSITIVE-TOURISM’ CONNECTION

Recent developments in assessing human well-being in general provide some new pathways for understanding the Asian spa experience. Much of this work is implicitly covered by the label positive psychology, which is recognised as a new field of study that focuses on human thriving. Following Seligman and Csikszentmihalyi (2000), Pearce (2007) defines positive psychology as a ‘scientific study of positive emotions, character strengths and positive institutions concerned with human happiness and well-being’ (p. 3). This definition suggests that positive psychology is not just about the individual, but also about communities, institutions, organisations and industries. It is therefore surprising that the relationship between tourism and human thriving remains under-researched (Smith and Kelly, 2006; Gilbert and Abdullah, 2002, 2003; Hunter-Jones and Blackburn, 2007).

The concept of wellness is an indispensable concept in the study of both tourism and positive psychology. Wellness is one of the facets of positive psychology that has received attention recently. Although the wellness-tourism interface has a long heritage (e.g. ancient pilgrimages, travels for health and wellness during the ancient Roman and Greek times), recent studies and the arguable pioneering literature on wellness tourism (for example the wellness issue of Tourism Recreation Research, 2006) tend to approach the topic as an exposition of an ostensibly brand new form of tourism. This chapter seeks to review and study spa tourism and interpret the scheme for spa-goers through the lens of positive psychology.

THE WELLNESS CONTEXT AND THE ASIAN SPA INDUSTRY

There is a consensus among thinkers in many disciplines and specialisms that a wellness industry exists (Smith and Puczko, 2009; Furrer, 2010; GSS Report, 2008, 2010; Pilzer, 2007). In contemporary society, ‘wellness’ can be viewed as a trite term that is widely used by the general public. While it is commonly used, wellness is also a slippery term that does not have a universal definition; it is a multifaceted concept and clarifying its meaning is a challenge. The complexities of the term and the concept of wellness reflect its history. Miller (2005), who has provided a comprehensive review of the evolution and development of wellness admits ‘the problem for the scholar that this malleability of the term wellness presents is that it is extremely difficult to define precisely what is meant by it, and therefore to adequately trace its origins’ (p. 98).

The term wellness has been used in different contexts and because definitions vary from one context to another, a single universal definition is problematic. In the
SECTION II :: CASE STUDIES

8 :: TOURISM, WELLNESS, AND FEELING GOOD: REVIEWING AND STUDYING ASIAN SPA EXPERIENCES

literature, however, the definitions of and discussions about wellness in disciplines such as medicine, psychology and economics (e.g. financial wellness) do have key commonalities. The dominant characteristics of wellness that are evident in the literature are:

1. **multidimensional and holistic** (Dunn, 1959; Finnicum and Zeiger, 1996; Myers et al., 2000; Murray and Miller, 2000, cited in Fain and Lewis, 2002; Puczko and Bachvarov, 2006; Smith and Kelly, 2006; Adams, 2003, cited in Smith and Kelly, 2006)


3. **simultaneously a state of being and a process** (Dunn, 1959; Finnicum and Zeiger, 1996; Travis, 1984, cited in Mueller and Kaufmann, 2001; Fain and Lewis, 2002)


5. **it is relative and subjective** (Travis, 1984, cited in Mueller and Kaufmann, 2001; Mueller and Kaufmann, 2001)

The use of the term wellness has become more widespread despite the consumers’ vague understanding of the word and the lack of a clearly delineated wellness industry in the fields of economics and business (GSS Report, 2010). Such an industry does, however, exist and is burgeoning (Smith and Puczko, 2009). The Stanford Research International (SRI) which was commissioned by the Global Spa Summit Committee to analyse the global wellness market, conservatively estimates that the current wellness industry represents a global market of nearly US$2 trillion (GSS Report, 2010). The SRI also reports that the rapid growth of the wellness industry is attributed to three key trends: (1) an increasingly older segment of unhealthy people; (2) failing medical systems; and (3) globalisation and connection.

Indeed, health and wellness are popular tourism products. The health–wellness–tourism interface represents a long standing relationship that dates back to ancient times. Owing to the Greek and Roman discovery of the healing qualities of water, people started travelling to mineral springs and seaside resorts to recuperate, relax and/or escape from the imperial metropolis (Iovine, 2005).

Thinkers in the specialism of tourism (e.g. Mueller and Kaufmann, 2001; Puczko and Bachvarov, 2006) had already argued, even prior to the GSS 2010 report, that although a wellness holiday may be located in an institution that provides a cure, it is important to draw the line between medical and wellness tourists. More specifically,
Mueller and Kaufmann (2001) differentiate the two types of tourists, especially those who go to hotel/resort-based wellness facilities. They say that wellness in these facilities should not be misclassified and should be clearly segmented as either normal cure guests (i.e. those for treatment or curing their illness/es) or health guests (i.e. those for illness prevention or current health maintenance). The demarcation between medical and wellness tourists has been made clear in the wellness industry cluster model where medical tourism (reactive) and wellness tourism (proactive) are located on the opposite sides of the continuum (Pilzer, 2007; Travis and Ryan, 2004; GSS Report, 2010).

The literature on health and wellness tourism provides two established categories: medical and spa tourism. Connell (2006) describes medical tourism as purposefully linked to direct medical intervention, and that its outcomes are expected to be extensive and long-term. Horowitz and Rosenweig (2007) also suggest that medical tourists must submit themselves for medical check-ups and may undergo health surgeries. More obtrusive aesthetic/cosmetic procedures include but are not limited to cosmetic surgery, cosmetic dentistry/extensive dental construction and body contouring. In more extreme cases, treatment of infertility and sex change operations are also performed. Although medical tourism in this context is acknowledged as being within the rubrics of wellness tourism, it is not a concentration of the present set of studies.

The health and relaxation component that spas offer to supplement the traditional holiday makes health and wellness tourism an area of rising popularity (Didascalou et al., 2007). Although this is a more recent observation, historical accounts on the origins of spa assert otherwise. While medical tourism is a more contemporary form of tourism, the earliest forms of spa tourism were also directly aimed at increased health and well-being (Connell, 2006). Although it was not termed spa tourism as such, the practice of visiting spas for healing was common by the seventeenth to the nineteenth centuries in many parts of Europe (Douglas, 2001; Kaspar, 1990; Laing and Weiler, 2008; Iovine, 2005; Henry, 2005). Spa tourism is a subtler subset of health and wellness tourism in terms of treatments and therapies.

The twenty-first century spas, according to the International Spa Association (ISPA, 2008), are places devoted to the enhancement of one’s overall being through professional services that promote mind, body and spirit renewal. The phenomenon is now diverse as almost any service provider with health-oriented services ‘can and does call itself a spa’ (Puczko and Bachvarov, 2006). Smith and Kelly (2006) describe spa tourism as:
tourism which focuses on the relaxation or healing of the body using water-based treatments, such as pools, steam rooms and saunas. Emphasis tends to be focused on relaxation and health and beauty treatments rather than the spiritual aspect of certain exercises such as yoga. Surroundings are usually sumptuous with pricing schemes to match.

Similarly, Hall (2003) defines spa tourism as:

a component of health tourism that relates to the provision of specific health facilities and destinations which traditionally include the provision of mineral waters which may also be used to refer to tourist resorts that integrate health facilities with accommodation.

Both definitions suggest that water is a significant element in spa tourism, especially in Europe – the home of spa.

While these definitions may be used in the European context, they cannot be used as a universal definition of spa tourism in Asian spas. The inclusion of the term ‘water’ in these definitions makes it appear that water is the main element used in spa treatments and therapies. Water and its natural sources such as mineral hot springs are also recognised to have therapeutic effects in Asia (e.g. Japan and Korea). Nonetheless, many other Asian spa practices are not just reliant on water. The use of nature-derived mineral and essential oils is a widespread Eastern practice (e.g. massages). Indeed, nature is an integral part of the Asian spa. The Asian spa phenomenon is more than just a massage or a scrub. Importantly, the daily rituals and ceremonies are all part of Asians’ way of life which are designed to restore the body and soul (Chapman, 2006). Chapman [2006] argues that the prime focus of most Asian spas is to return the body to a balanced state through ancient botanical recipes and time-honoured rituals. Apart from minerals and oils, herbs, spices, certain root crops (e.g. ginger) and parts of plants and trees are believed to have healing and/or soothing benefits hence used in traditional spa treatments.

Revered as the ‘home to the world’s richest and most diverse spa culture’ (Spa Wellness Council, 2008), the Asia Pacific is the world’s third largest spa market in terms of revenues (more than 24 per cent of the global spa revenues) and second largest market in terms of the number of spas. It employs more than 360,000 people. The 2007 Global Spa Economy contains the most complete and most recent data on Asia-Pacific's spa industry profile. Even without the Pacific region (i.e. Australia,
New Zealand and the small island states), the Asian spa industry is clearly a large scale phenomenon with an estimated combined revenue of about US$8,642 million in Japan, China and South Korea alone. Additionally, India and Thailand have a combined contribution estimated to US$778 million (GSS Report, 2008).

It can be observed that much of Asia’s age-old traditions which have been a way of life for many generations are now being shared with the rest of the world through their practice not only in Asian spas but also in Western societies’ spas (Spa Wellness Council, 2008). The Thai massage and the Japanese shiatsu massage, for example, are traditional healing methods that have gained popularity not only in Asia. Similarly, relaxation practices of Eastern origins such as yoga and meditation have also become well-liked worldwide (Mind, Body and Soul, 2009). Each country in Asia has its own spa heritage to offer (Spa Wellness Council, 2008; Chapman, 2006). Even if this was not the case, it can be said that Asian countries share their wealth of traditions and ancient practices with each other, if not the world. Cupping (suction through the skin), for example, is not just a Chinese tradition but it is also practiced in Arab countries (Mind, Body and Soul, 2009). Apart from treatments, the use of indigenous ingredients and materials are now being used in modern-day spas.

In the Indian sub-continent, Ayurveda is the oldest and still widely practised health and wellness system. India remains the leading destination for this type of healing (Kerala Ayurveda Tourism, 2009; Spitzer, 2009). Ayurvedic tourism is also marketed as part of the global growth in health tourism fuelled by widespread trends including ageing populations, high rates of stress and increased interest in health – most specifically amongst affluent individuals (Messerli and Oyama, 2004). The literature on Ayurvedic tourism describes the practice as a gentle system of holistic healing that is rooted in old traditions while evincing a modern and professionalised stance supported by scientific research (Spitzer, 2009). Sahoo (2006, cited in Spitzer, 2009) suggests that this type of tourism in India ‘attracts Westerners exploring the ancient art and science of the exotic other as well as citizens of Southeast Asia, West Asia, and members of the global South Asian diaspora of 20 million persons who reside in 70 countries’ [p. 139]. Apart from international tourists, domestic tourists visit popular Ayurvedic destinations such as the state of Kerala in South India. The treatments in Ayurveda are akin to those of spas’ (e.g. massage, facials) which promote relaxation and harmony of mind, body and spirit (Kerala Ayurveda Tourism, 2009). According to ISPA (2008), the Ayurvedic resorts can be classified as destination spas, while day-use Ayurveda centres are categorised as ‘other spas’.

In other parts of Asia, traditional/indigenous healing methods are also used in spas.
In the Philippines, for instance, ‘hilot’ is an ancient massage technique that is now in spa menus in the country. Alave (2008) notes that its benefits are comparable to the Chinese acupuncture, aromatherapy and even Western medicine. Apart from ‘hilot’, some spas in the Philippines also include ‘dagdagay’ (an indigenous tribal foot massage using bamboo sticks) and the use of the seven-herb concoction (known as ‘pito-pito’) in bath treatments (Sanctuario Spa, 2009). Also in many parts of Asia, traditional Chinese treatments are common; acupuncture and body smoking are being offered in spas (The Spa Village, 2008) and are also used in Western societies (Mind, Body and Soul, 2009). The products used in Asian spa treatments and therapies may also be indigenous. In spas in the Cordillera region in the Philippines, for instance, local produce such as rice, coffee and strawberries are used as scrubs (North Haven Spa, 2007). In traditional Malay treatments, turmeric, piper betel and pandanus leaves are widely used (The Spa Village, 2008).

The experiences that are being offered in Asian spas are a fusion of indigenous or traditional practices based on ancient Eastern philosophies and sold in modern-day settings. Although unique in this context, Asian spa experiences are less studied, especially those of tourists. In this chapter, flow and the perceived benefits of spa experiences are measured in tourists’ spa experiences.

**POSITIVE-TOURISM LINKAGE 1: FLOW AND THE TOURIST EXPERIENCE**

Flow, as an optimal psychological state, denotes special times when things seem to come together for the individual in a particular setting; it is often associated with high levels of performance and a very positive experience (Jackson and Eklund, 2004). The concept of flow was introduced by Csikszentmihalyi (1975) who defines it as ‘an optimal experience that stems from people’s perceptions of challenges and skills in given situations’ (Ellis et al., 1994, p. 337). Flow occurs when the individual is completely engrossed in a challenging activity that does not necessarily provoke too much stress. The experience per se is highly rewarding, hence flow is a satisfying state (Filep, 2008).

The flow construct is applicable to tourist experiences (Filep, 2008). Beardsley’s (1982) concept of aesthetic experience states that a person’s object focus, felt freedom (time transformation) and detached affect (the loss of self-consciousness) are used to characterise flow, enabling tourist experience to be appraised the way flow is measured. Likewise, active discovery (challenge-skills balance and sense of control) and wholeness (the clear goals and unambiguous feedback) typify flow (Filep, 2008). The phenomenology of tourists’ experience posits that tourist experience
range from the search for mere pleasures to the quest for a spiritual self (Cohen, 1996). The five modes of tourist experience, although described individually, are suggested to be in a virtual continuum from a recreational (hedonic) to an existential mode (eudaimonic). The studies of wellness tourism implicitly or explicitly discuss these modes of tourist experience; many of them focus on the existential mode (Pernecky and Johnston, 2006; Smith and Kelly, 2006; Steiner and Reisinger, 2006; Devereux and Carnegie, 2006; Lehto et al., 2006).

Cohen (1996) suggests that the recreational mode is characterised by enjoyment because the activity provides tourists with a general sense of well-being as well as a sense of idle pleasure. This mode is also depicted by tourists that thrive on pseudo-events, but are distantly related to and derived from the religious voyage. In the diversionary mode, tourists also thrive on pseudo-events, but the experience is not seen as meaningful. The experiential and experimental modes, however, involve the search for authenticity and for an alternative spiritual centre respectively. In the latter mode, the tourist is unsure of their real desires and needs, thus the quest may potentially become a way of life. Finally, the existential mode is where the tourist could be: (a) realistic idealist [one who accepts the social and cultural shortcomings even in the most ideal place]; (b) starry-eyed idealist [one who sees perfection in anything but denies the realities of life]; or (c) critical idealist [one who is attached to the ideal, but rejects the reality found at it].

It is possible to link Cohen’s modes of experiences with the flow concept and the present interest in spa and wellness tourism. It can be suggested that flow may be optimised when tourists are predominantly in the recreational and diversionary modes, that is, when pleasure characteristics of the experiences predominate. These concepts of flow and experience modes help inform the present study linking spa-going and positive psychology.

MEASURING FLOW IN TOURIST EXPERIENCES

Literature on positive psychology uniformly suggests that the flow concept is an optimal physical state which is connected with high achievement and positive experiences. For this study, the Event Experience Scale (also known as the Flow State Scale or FSS-2) was used. The FSS-2 was designed to assess flow in physical activity settings. Jackson and Eklund (2004) emphasise that the term physical activity is used as an inclusive term. That is, the model is appropriate to use in a variety of physical activity settings. Such setting, they argue, was kept in mind when devising the items and instructions for answering the questionnaire. A qualitative database of athletes’
descriptions of being in flow was used when developing the original items for the scales (Jackson and Eklund, 2004). Research has been conducted with the FSS-2 in sports and exercise. Its developers, however, noted a considerable interest in understanding flow across various settings (e.g. business, gifted education, music and yoga) and in relation to a range of psychological constructs (e.g. personality type, intrinsic motivation, self-esteem and anxiety). Parallels can be drawn from such interest with Csikszentmihalyi’s (1975) works on flow, which included data from different settings such as music, dance, sports and surgery. This suggests that the use of flow scales for assessing experience across various settings needs further empirical studies.

The rationale behind the employment of the FSS-2 in this study lies in the ways in which it can be used in assessing flow. One of the uses of the scale is as an immediate post-event assessment flow. The other is to measure a person’s particular peak experience. The questionnaire is a 5-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The participants were asked to indicate their extent of agreement with each flow item in relation to other completed spa experiences. One of the requirements in administering this questionnaire was to conduct it as close as possible to the completion of the activity being assessed to promote clear recall. More specifically, its developers recommended that responses be collected within one hour of completion of the activity. By doing so, there is an increased likelihood to obtain a more accurate assessment of the state of flow while minimising intrusion on the participants.

The FSS-2 was used in this study in its original form for two main reasons. The first reason lies in the evident linkages between spa experiences and flow experiences. The use of this scale is therefore aimed at measuring and understanding the applicability of the flow model in spa experiences, and to identify the extent of flow that tourists experience in relation to their spa experiences. The second reason the FSS-2 was used lies in fulfilling one of the many directions of the interdisciplinary means of understanding optimal experiences, as implicitly predicted by the developers of the flow scales. Because the scales were originally designed for activities in a physical setting, measuring flow in passive activity setting wherein the experience receiver (i.e. the tourist) rather than the provider (i.e. the spa therapist) of the spa treatment is examined was deemed to provide a different perspective. This also gives the opportunity to compare FSS-2-related data (from an active physical setting) with the current study conducted in a passive (non-active) physical setting.
SECTION II :: CASE STUDIES

8 :: TOURISM, WELLNESS, AND FEELING GOOD:
REVIEWING AND STUDYING ASIAN SPA EXPERIENCES

THE RESPONDENT PROFILE

The use of the concept of flow in tourist-related experience such as spa-going activity bridges some gaps in the literature in terms of the meshing of tourism and positive psychology as interrelated fields of study. The findings presented in this chapter were extracted from an onsite survey of tourist spa goers between December 2008 and May 2009 in India, Thailand and the Philippines. The survey was designed to collect information on the tourists’ travel and spa-going motivations as well as previous travel and spa experience. Demographic information was also collected to profile spa-going tourists in Southeast Asia, most specifically in the three countries mentioned. At the outset of the survey, however, the respondents were asked about their thoughts and feelings regarding the spa treatment that they just received; this section of the survey essentially measures flow in tourists’ spa experiences.

A total of 336 questionnaires were collected, with 319 (92.6 per cent) classified as usable. The sample consisted of a slightly greater number of females (59.4 per cent) than males (40.6 per cent). Respondents in their twenties and thirties constituted about 66 per cent of the sample, with those in the age range of 21–30 making up nearly 43 per cent. In terms of occupation, about a quarter of the sample consisted of individuals who were in professional or technical employment. More than half of the sample comprised international tourists (54.9 per cent) to India, Thailand or the Philippines.

FLOW DIMENSIONS FROM SPA EXPERIENCES

The FSS-2 was based on Csikszentmihalyi’s (1990) nine elements of enjoyment, which Jackson (1996) refers to as the dimensions of flow. These elements and the mean scores \( \bar{x} \) on a 5-point scale (1 = strongly disagree to 5 = strongly agree) for the spa-going sample in this study are as follows:

1. **Challenge-skill balance** (there is a match between perceived skills and challenges, \( \bar{x} = 3.38 \))
2. **Action-awareness merging** (deep involvement leads to automaticity and spontaneity; there is no awareness of self as separate from the actions one is performing, \( \bar{x} = 3.42 \))
3. **Clear goals** (there is a strong sense of what one is going to do, \( \bar{x} = 3.64 \))
4. **Unambiguous feedback** (clear and immediate feedback that the person is doing his/her activity well and is succeeding in his/her goal, \( \bar{x} = 3.34 \))
5. **Concentration on task** (total concentration on the task at hand, \( \bar{x} = 3.30 \))
6. Sense of control (sense of exercising control without actively trying to be in control, \( \bar{x} = 3.36 \))

7. Loss of self-consciousness (concern for the self disappears and the person becomes one with the activity, \( \bar{x} = 3.53 \))

8. Time transformation (time disorientation or a loss of time awareness, \( \bar{x} = 3.51 \))

9. Autotelic experience (an intrinsically rewarding experience involving a sense of deep enjoyment, \( \bar{x} = 4.08 \))

The mean score for the overall flow state was 3.45. A slight variation across the scores for each of the nine flow dimensions was observed, which reveals the relative importance of the various dimensions to the spa experience. Overall, the moderate mean scores obtained in each dimension suggests some degree of endorsement for the spa activity as flow experience. Some ambiguity regarding the relevance of some of the items to the person’s spa experience do exist, but it is maintained that the scores yielded in this study indicate that tourist spa-goers are somewhat linked to the experience of flow.

### TABLE 5.1 THE FLOW EXPERIENCE - SPA ACTIVITY VS OTHER PHYSICAL ACTIVITIES

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Activity</th>
<th>Spa Experience</th>
<th>Individual activity*</th>
<th>Dance</th>
<th>Yoga</th>
<th>Exercise activity**</th>
<th>Sport activity#</th>
<th>Team sport activity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>M</td>
</tr>
<tr>
<td>Flow</td>
<td>3.45</td>
<td>3.78</td>
<td>3.58</td>
<td>3.81</td>
<td>3.78</td>
<td>3.78</td>
<td>3.78</td>
<td>3.72</td>
</tr>
<tr>
<td>Challenge-skill balance</td>
<td>3.38</td>
<td>3.67</td>
<td>3.53</td>
<td>3.58</td>
<td>3.64</td>
<td>3.71</td>
<td>3.71</td>
<td>3.75</td>
</tr>
<tr>
<td>Clear goals</td>
<td>3.64</td>
<td>4.08</td>
<td>3.88</td>
<td>3.97</td>
<td>3.94</td>
<td>4.09</td>
<td>3.98</td>
<td></td>
</tr>
<tr>
<td>Unambiguous feedback</td>
<td>3.34</td>
<td>3.87</td>
<td>3.79</td>
<td>3.85</td>
<td>3.9</td>
<td>3.88</td>
<td>3.88</td>
<td>3.91</td>
</tr>
<tr>
<td>Concentration</td>
<td>3.3</td>
<td>3.7</td>
<td>3.84</td>
<td>3.54</td>
<td>3.62</td>
<td>3.73</td>
<td>3.73</td>
<td>3.75</td>
</tr>
<tr>
<td>Control</td>
<td>3.36</td>
<td>3.74</td>
<td>3.55</td>
<td>3.72</td>
<td>3.81</td>
<td>3.72</td>
<td>3.72</td>
<td>3.66</td>
</tr>
<tr>
<td>Loss of self-consciousness</td>
<td>3.53</td>
<td>4.02</td>
<td>3.15</td>
<td>4.17</td>
<td>4.08</td>
<td>3.92</td>
<td>3.92</td>
<td>3.59</td>
</tr>
<tr>
<td>Time transformation</td>
<td>3.51</td>
<td>3.38</td>
<td>3.52</td>
<td>3.88</td>
<td>3.56</td>
<td>3.36</td>
<td>3.36</td>
<td>3.46</td>
</tr>
<tr>
<td>Autotelic experience</td>
<td>4.08</td>
<td>4.02</td>
<td>3.85</td>
<td>4.27</td>
<td>4.11</td>
<td>3.95</td>
<td>3.95</td>
<td>3.73</td>
</tr>
</tbody>
</table>

**Notes**
- Some individual activities are sporting in nature, but many individual activities also include exercise, and creative and performing arts (including dance and music) activities.
- Activities labelled as exercise; non-competitive physical activities.
- Involves a diverse number of activities typically regarded as sport activities.
- Mean scores.
The results of this study were compared with the results from previous research by Jackson and Eklund (2004) where participants were involved in an active physical setting such as individual sporting activity, dance, yoga, exercise (focus on health/fitness) and team sport. It was discovered that the spa activity was the lowest on the overall flow score (see Table 5.1). Among the host of activities, yoga practitioners have the greatest propensity to experience flow. Yoga can be seen as reinforcing one’s ability to concentrate, to control memory and to limit awareness to specific goals (Csikszentmihalyi and Csikszentmihalyi, 1988). The evidently low mean scores in terms of action-awareness merging can be linked to the nature of the activity per se. The passive feature of the spa experience such as receiving a massage, for example, does not require much action or voluntary active movement compared to the other activities. This lack of action causes an imbalance in the dimension. This result was therefore anticipated even at the outset of the study.

Similarly, the low mean score in the loss of self-consciousness dimension can also be related to the common practices in spas as well as to the respondents’ culture. In most spa treatments, especially those that involve most parts of the body such as massages, wraps and scrubs, the customer is required to remove most, if not all pieces of clothing, and must only be covered by a towel or a similar sheet for proper treatment. While some tourists are already accustomed to such situations, there are many who find this practice uncomfortable and often embarrassing. In this case, one’s culture may have contributed to this result. It should be noted that most of the respondents live in Southeast Asian societies, which are understood to be more culturally conservative than their Western counterparts.

POSITIVE-TOURISM LINKAGE 2: PERCEIVED BENEFITS OF SPA EXPERIENCES

Additional results presented in this chapter are from a larger survey that collected tourists’ travel and spa-going motivations in their most recent travel to Southeast Asia and post-spa experiences. The online survey was conducted between September 2010 and February 2011. The sample profile was again dominated by females [69.4 per cent] and by individuals in their twenties and thirties [78 per cent]. About 54 per cent of the respondents had actually made plans to visit spas prior to travel.

LIMINALITY, THRESHOLDS AND THE BENEFITS OF SPA EXPERIENCES

Liminality and thresholds are conceptual schemes in tourist behaviour to which spa experiences can be linked. The liminality construct has been frequently adopted to understand the role and behaviour of a tourist (Pearce, 2005; Graburn, 1989; Ryan,
It is understood that liminality, which is entrenched in earlier works on thresholds and transition zones, helps define the nature of tourist encounters which are challenging and novel (Pearce, 2005). According to scholars, the three zones or phases in relation to liminality are: (1) the normal state, which refers to one’s regular life and experiences at home; (2) the liminoid state (a threshold phase), which refers to the state of transition and often abnormal; and (3) the post-liminoid state, which signifies the reversion back to normal life.

Clawson and Knetsch’s (1966) idea of the different phases of travel behaviour is also linked to this notion of liminality. They suggested that a pre-purchase/planning phase, travel to the destination, onsite experiences, travel back to origin and reflection make up the cycle of tourist behaviour. The constant transition of states between these phases helps define the varieties of the travellers’ experiences. In this study, the degree to which tourists benefit from spa experiences were explored and were found to be closely linked to the changing phases of tourist behaviour. Spa-going, like many other destination-based tourist activities, is a voluntary pursuit. It is therefore a valid assumption to say that tourists deemed a spa experience to be beneficial to an extent but the point at which this assessment can be made is important. The data provided an opportunity to link benefits to the tourists’ experiences during any particular trip.

A 7-point Likert scale was used to measure the positive impacts of the spa activity to the respondents’ trip. The set of 12 statements indicating potential positive contributions of the spa activity were based on Pearce and Lee’s (2005) travel career pattern (TCP) model which involves 14 motive factors such as novelty, escape/relax, relationships, autonomy, nature, personal development, self-actualisation, isolation, stimulation, recognition, nostalgia and romance. In addition, the statements were based on the different dimensions of wellness (physical, emotional, intellectual, social, spiritual and occupational). The respondents reported that the three most beneficial factors of spa-going while travelling involved:

- **Escape/relaxation**
  - a relaxing way to unwind and get away from the usual stress and demands of travelling ($\bar{x} = 6.16$); and

- **Novelty**
  - the chance to be pampered, which they did not often get at home ($\bar{x} = 6.11$); and,
  - an opportunity to try a new and different experience while travelling ($\bar{x} = 5.94$).

Similarly, the respondents were asked to indicate their agreement about post-spa benefits which involved a set of 12 items which were positive statements of potential
benefits of a spa experience. Following the previous approach, the statements were based on the TCP model and the multidimensionality of wellness. Overall, the respondents reported a high degree of relaxed feeling ($\bar{x} = 6.16$) and the ability to sleep better ($\bar{x} = 5.86$). They also reported a sense of youthfulness and energy ($\bar{x} = 5.69$), and of peacefulness and calmness ($\bar{x} = 5.63$).

These findings suggest that the benefits that tourists obtain from spa experiences are closely linked to the physical and psychological (emotional, intellectual) dimensions. Although travel can be relaxing for many, it also involves a degree of physical and mental stress for an individual. The liminoid zone, which usually encompasses the travel to and from the destination and the onsite experiences of a tourist, can be truly challenging. The physical dimensions of tourist behaviour and experience can be demanding. Driving, flying, waiting at airports, hyper and hypothermia, jet lag and changing climates are just some examples of the physical challenges to a traveller. Often connected to these physical constraints are mental barriers that a traveller may face such as lack of information, getting lost and other constraints.

It can therefore be argued that the while the changing phases of tourist behaviour can be truly stimulating, exciting, puzzling and perplexing at the same time, spa experiences can be very beneficial to a traveller. The benefits, although short-lived, contribute to the physical and psychological well-being of a traveller. The quick relief from physical and psychological stress is becoming more of a need. This is underpinned by Goldstein and Coyle Hospitality Group (2010) in their report of why consumers visit spas; they found that relaxation/stress management (89 per cent) was the key motivating factor for individuals who visit spas. This finding was supported by the current study.

On a more long term basis, however, there were reports of an improved social dimension for individuals. These reported benefits are characterised by a strengthened relationship between the tourist and their partner/family/friends which lasted up to a month after the spa experience. Although it is difficult to identify the other factors that may have contributed to an improved relationship as reported by the participants, it is maintained that the question was asked in a very specific fashion and was stated as ‘if you think your spa experience during the trip contributed to your well-being, approximately how long did the benefits last?’ Apart from a temporal scale that ranged from days to a year, the choices included ‘no benefit’ and ‘can’t remember’ options. A total of 58 respondents (42.3 per cent of the total sample) completed this section of the questionnaire and provided responses within the specific temporal scale (i.e. did not have ‘no benefit’ and ‘can’t remember’ responses).
The data showed that most of the respondents felt the benefits for each of the dimensions for about one month after the spa experience, with the total accounting for 32.6 per cent for the well-being dimensions. The longest lasting effects of the spa experience were felt by most respondents on the social dimension (6–12 months = 31.7 per cent). The results of Pearson’s chi-square showed a significant relationship between the dimensions of well-being and the duration by which the benefits of the spa experience were felt by the spa-going tourists ($x^2 (20) = 61.90, p < .05$). This result indicates that spa experiences can indeed contribute to one’s overall well-being for a certain period of time. For this data, the Cramer’s statistic is .113, which represents a small association between the dimensions and the duration of benefits as perceived by the respondents. This value, however, is significant ($p < .05$) which also indicates that the strength of the association is significant, confirming the chi-square results.

This finding is seen as an embodiment of the reflection phase of the tourist behaviour. In the context of responding to the questionnaire, the participants were compelled to recall their experience with their companions during that trip. Indeed, the memory that they had from the spa experience, whether it was because of the treatment or the company that they had, was arguably a positive experience to them which was worth remembering.

CONCLUSIONS AND IMPLICATIONS

This chapter suggests that spa-going is an experiential journey because spa-goers are enticed by new textures, aromas and sounds that are inherent in many spa treatments and products, particularly while travelling in Asia. Spa-goers also often expect that elements of their spa experience can extend to their everyday lives. In this study of tourist spa-goers’ flow experiences and the benefits that they have gained from such experiences, implications can be drawn in terms of the meshing of tourism and positive psychology.

The notion of the positive-tourism relationship provides an opportunity to further develop theoretical linkages between the specialisms. The integration of the flow concept, and specifically testing the FSS-2 in a passive tourist activity underpins the notion that tourism businesses, which make up one of the most global and people-oriented industries, are implicitly striving to be profitable by offering positive experiences.

Tourist well-being is core to the tourism-positive psychology relationship. The practical applications that this chapter offers lie in the cultivation of various ways of enhancing
tourist well-being. As participants reported a high degree of positive response about their spa experiences while travelling, it can be inferred that a spa experience per se can be a rewarding activity. This perceived benefit of spa experiences suggests that even though moderate to limited flow experiences have been reported in the study, the spa-going activity can be a source of experiences that are beneficial to tourists’ wellness. As the findings suggest, spa experiences are beneficial to different well-being dimensions. Overall, the results can be utilised not only to understand how tourists perceive spa experiences, but also to support tourist well-being through spa experiences.

REFERENCES


8 :: TOURISM, WELLNESS, AND FEELING GOOD: REVIEWING AND STUDYING ASIAN SPA EXPERIENCES


8 :: TOURISM, WELLNESS, AND FEELING GOOD: REVIEWING AND STUDYING ASIAN SPA EXPERIENCES


8 :: TOURISM, WELLNESS, AND FEELING GOOD: REVIEWING AND STUDYING ASIAN SPA EXPERIENCES


In a world of increasing connectivity and relentless schedules, holidays that calm the mind and soothe the soul are sought-after commodities. The growing popularity of spa tourism worldwide has led to the need to understand these experiences in greater depth, including the nature of their appeal and how they are marketed to tourists. Spa tourism remains under-researched in terms of its experiential value, despite its ubiquity in many, if not most destinations, and the premium paid for these experiences by growing numbers of tourists (Erfurt-Cooper and Cooper 2009). It has been noted that these experiences present ‘more choices than ever’ and can be eclectic and highly personal (Burt and Price 2003: vii). There are, however, common elements or features within spa tourism experiences, which warrant further exploration.

One of these hallmarks appears to be the blend of authentic and fantasy elements. While seemingly contradictory, they are often seen in tandem in the context of spa tourism experiences, with dreams or fantasies adding to or reinforcing feelings of authenticity, and high levels of authenticity, often connected to heritage, contributing to a sense of fantasy. The background to this paradox is postmodernist thinking about authenticity. Urry (1990, 2002) suggests that postmodern tourists have a predilection for playfulness, rather than seeking authentic tourist experiences. However, these ludic episodes and the search for novelty may incorporate authentic elements. Authenticity is not necessarily an objective construct, but something which is emergent (Cohen 1988) and can be linked to an individual’s sense of self; discovering who they really are and what they are made of (Reisinger and Steiner 2006; Wang 1999, 2000). Fantasy can also be understood as an element of ‘deep play’, where the tourist acts out narratives or imagines themselves in different roles (Gyimóthy and Mykletun 2004). In the spa tourism context, this might involve playing at being royalty or a pampered celebrity, where authentic elements add to the drama or heighten the sense of liminality, as the tourist ‘transitions from the ordinary to the extraordinary’ (Ryan 2010: 12).

**AUTHENTICITY AND THE SPA TOURISM EXPERIENCE**

Three forms of authenticity might be relevant in this context – intrinsic, existential and corporeal. Intrinsic authenticity suggests that there is one objective determination of ‘genuineness, actuality, accuracy, originality, or truth’ (Reisinger and Steiner 2006: 69), rather than multiple realities. Existential authenticity, by contrast, is determined by the visitor, who perceives an opportunity to be their true or authentic selves (Wang 1999, 2000). Corporeal authenticity refers to authenticity with respect to the senses – sight, smell, touch, taste and sound.
According to Reisinger and Steiner (2006), intrinsic authenticity is impossible to articulate, given the myriad of meanings or realities that can be attached to artefacts or events and the fact that there is no common ground amongst scholars in relation to this concept. Others argue that it is a personal construct, which is measured in the eye of the beholder (Bruner 1994; Cohen 1988). Thus, if the tourist believes something to be real, then it has intrinsic authenticity from their standpoint, even if others might argue that it has been staged for tourist consumption (Boorstin 1964) or is a fantasy. Intrinsic authenticity is potentially associated with spa tourism experiences built around traditional therapies, rituals and treatments, particularly those originating in or linked to the country of origin and its culture. Examples include Balinese or Thai massage, Indian Ayurvedic practices and the use of products based on Australian indigenous ingredients (Laing 2009). Intrinsic authenticity might then be the result of tangible cues, such as heritage features, interpretation and decor, and/or intangible elements, such as traditions or stories linked to the spa or the forms of treatments being provided. In some cases, the nexus is tenuous and the visitor is told that their spa tourism experience is inspired by traditional therapies. Authenticity might not be a matter of importance for some tourists, who simply desire some services, no matter how genuine they are and however loosely they are connected to the country in which the treatment is being sought.

While there appear to be a number of motivations for engaging in spa tourism, the overarching theme involves a desire for transforming the self (Voigt 2010; Voigt et al. 2011). This could be argued to constitute a form of existential authenticity, in that through engaging with wellness tourism, the visitor might feel a more authentic version of themselves (Wang 1999, 2000). This might be particularly the case where there is a spiritual overtone to the experience or alternatively some form of enhancement of the appearance or shape (Cook 2010). This sense of the authentic self might be linked to fantasy elements, making the tourist feel that this is a lifestyle which they aspire to and deserve, whatever the reality of their financial circumstances or social status.

Wang (1999, 2000) has developed a framework of ‘intra-personal existential authenticity’, which distinguishes between two aspects of this phenomenon, ‘bodily sources of authentic self’ and ‘self-making’ (Wang 2000: 67). The latter concerns the achievement of self-awareness and identity construction, through the tourist experience. A visit to a spa might give the tourist time to contemplate or meditate on who they really are. However, it is the bodily form of authenticity, which is particularly interesting in this context, given the appeal of spa treatments to the senses, especially the use of touch. Voigt (2010: 82) notes with respect to these bodily
feels that ‘intense relaxation or recuperation, excitement, fun, and sensation seeking, can become the source of feeling authentic’. This suggests that highly hedonic tourist experiences, rather than being merely self-indulgent or pleasurable, have a role to play in making people feel a more authentic version of themselves (Voigt 2010).

Existential authenticity can also be conceptualised as ‘inter-personal’ (Wang 1999, 2000). This occurs when a tourist’s interactions with other people, such as travel companions or people met along the way, engender a sense of authenticity. The visitor to the spa might feel freer and more who they really are, as a result of meeting with and interacting with the staff, including finding out more about their heritage and culture.

The third type of authenticity relevant in this context is corporeal authenticity involving the senses, which would include smells (i.e. essential oils, incense), sounds (i.e. music, the noises of nature such as wind, bird calls), sights (i.e. colours, natural surroundings) and touch, through treatments such as massages and facials. This may overlap with the concept of intra-personal existential authenticity discussed above, where it concerns bodily feelings. Spa tourism involves bodywork, which ‘is closely linked with pleasure and emotional intimacy’ (Twigg 2000: 391), and the sense of touch is an important component of this (Pearce et al. 2010). The tourist may find the experience less than satisfying or even inauthentic, if the therapist does not appear to be sufficiently engaged, either physically or emotionally, or the requisite tactile quality is absent. It might also affect the sense of fantasy that is being created, where tourists feel that they are not being treated with the requisite dignity or sense of worth that they equate with a pampering, luxurious experience. Authenticity might also be affected if the music doesn’t fit with the ambience or visual cues, or where the fragrances used jar with the culture on display. Visitors to a Balinese spa, for example, might expect to smell traditional fragrances like frangipani, jasmine or sandalwood or hear gamelan music, rather than rock or pop.

The spa tourism experience appears to be a useful context for exploring these various forms of authenticity. We next consider aspects of fantasy and heritage within spa tourism and how they interplay with elements of authenticity.

**FANTASY AND HERITAGE**

Aspirational or fantasy elements of the spa tourism experience may be linked to issues of authenticity. Some spas are designed around exotically beautiful landscapes
with names such as Mandalay or Shangri-La, redolent of myth and literary associations of escape. While these ludic experiences might involve the tourist playing at being royalty or a pampered celebrity, albeit for a brief period, this could be based, at least in part, on the authentic history of the spa as a magnet for the rich and famous. Royalty, including British kings and queens and Habsburg emperors, patronised the famous European spa towns (Corak and Ateljevic 2008), while their modern equivalents – pop stars, models, top sports-persons and actors – are photographed for glossy magazines and websites in luxury spa resorts such as Chiva Som or the Banyan Tree, Phuket in Thailand (Laing and Weiler 2008).

Tourism can be conceptualised in these cases as a form of performance, leading to the enactment of fantasies or ‘dreamwork’ (Light 2009). The tourist might feel a more authentic sense of self (Wang 1999, 2000) through this role play. Dann (1976: 22) notes that travel provides an environment for acting out psychic needs, and the playing of certain roles which cannot be fulfilled at home. Smith and Puczkó (2009: 71) refer to societal trends that encourage this, ‘where fantasy relationships can seem easier than real ones in a world where fragmentation of society and communities is becoming more common’.

Gyimóthy and Mykletun (2004: 865–6) see this fantasy element manifested in travellers such as Arctic trekkers, who ‘invent substitute worlds, supplement versions of reality, or inscribe themselves into the new identities’ in their case, the explorer or pioneer. This type of fantasy can form shared narratives within a community of travellers, as identified by Belk and Costa (1998: 220) with their focus on recreated mountain rendezvous: ‘Certain fantasies have the benefits of scripts and motifs’.

This chapter explores the nexus between fantasy and heritage in spa tourism through a comparative case study of three international beauty spas – the Gellért Baths in Budapest, Hungary; the Thermae Spa in Bath, United Kingdom; and the Polynesian Spa in Rotorua, New Zealand. Each exemplifies a different form of heritage – Secessionist/Art Nouveau (Gellért Baths), Georgian (Thermae Spa, Bath), and mock-Tudor heritage, Spanish mission/art deco and indigenous heritage (Rotorua). A qualitative approach was adopted in this study, given the exploratory stage of the research, and to enable these issues to be examined from an in-depth perspective (Jennings 2010). Data for the case studies was gathered from participant observation during site visits, and a thematic analysis of websites and promotional material generated by the three spas. This type of analysis groups data around a common theme; ‘capturing the phenomenon being studied’ (Denzin 1989: 75). The authors looked for text, images or offerings associated with themes of fantasy and authenticity.
A TYPOLOGY OF BEAUTY SPA EXPERIENCES

Each spa examined in this study has its own source of natural mineral water and offers water-based treatments. Each, however, provides a distinctive type of experience, using the typology identified by Voigt and Laing (2010). This typology, developed in an Australian context, groups beauty spa hotels or resorts into the following three types:

- **European or traditional European style spas.** There may be an ambience redolent of a sanatorium or medical facility, with white decor, or alternatively a luxurious setting reminiscent of the iconic spas of the nineteenth century, with columns or statues. Water-based treatments are standard, such as the Vichy shower, and European beauty products are commonly used, such as the Decléor and Thalgo brands from France.

- **Asian, where the spa theme is based on Asian healing techniques and philosophies.** These might include Traditional Chinese Medicine, Ayurveda from India, or the Japanese Reiki. These spas aim for a mystical and nurturing atmosphere, with furniture made of local stone and wood, particularly bamboo; statues and artefacts of deities such as Buddha; exotic plants; the heavy use of essential oils or incense; and traditional music.

- **Indigenous, where the spa theme is based on Indigenous cultural elements and healing philosophies.** This is epitomised by spas in Australia and New Zealand, where treatments draw upon Aboriginal and Māori cultural rituals and practices, including prayers, and knowledge of the healing properties of many local species of plants, such as lilly pilly and lemon myrtle (Australia) and acacia and manuka (New Zealand).

We would add a further type of beauty spa, which offers a fusion of the different experiences outlined above. Their offerings are not necessarily specific to a location or culture. Instead, they borrow what are perceived to be the best offerings from around the world or those that they perceive are in demand by their current and prospective clientele. Bodeker and Burford (2008: 426) refer to this as a `smorgasbord approach`. Occasionally, there are attempts to reconcile this diversity through `syncretism` – `the fusing of diverse or disparate philosophies and practices into an overarching framework that focuses on commonalities by referencing a unifying philosophy` (Bodeker and Burford 2008: 426).
CASE STUDIES

THE GELLÉRT BATHS, BUDAPEST, HUNGARY

Budapest is a World Heritage site, partly with reference to its spa (fürdő) culture. It can be argued that these spas are ‘part of the historic city fabric’ (Smith and Puczkó 2009: 173). Budapest was a centre for wellness in the time of the Roman Empire, when it was known as Aquincum, the capital city of the province of Lower Pannonia, although there is evidence that the Celts and Dacians also used these springs during the earlier Neolithic period (Erfurt-Cooper and Cooper 2009). The archaeological ruins of Aquincum were excavated in the nineteenth century, including the public thermal baths. The Ottoman occupation was also marked by the development of a number of Turkish baths in the sixteenth and seventeenth centuries (Erfurt-Cooper and Cooper 2009; Smith and Puczkó 2009), notably the Rác, Rudas and Király Baths.
The next heyday of spa development in Budapest occurred in the late nineteenth and early twentieth centuries, during the dual monarchy of the Austro-Hungarian Empire, and the Golden 1920s and 1930s, when Budapest was considered the Paris of the East. The Széchenyi Baths, with their neo-Baroque colonnades and statues and chess-playing patrons, were constructed just before the start of the First World War and are the largest spa complex in Europe. The other iconic spa from this era is the Gellért Hotel and Baths (Figure 14.1).

The Gellért Baths illustrate the European spa model. They were built in Secession style, which is related to Art Nouveau and characterised by natural motifs of flowers and plants, and curved lines. The Baths, which opened their doors to the public in 1927, nestle at the foot of Gellért Hill – a site with a history of healing practices going back to the thirteenth century, but also a locale for the Turkish bathing tradition of the Ottoman occupation. The baths were bombed during the Second World War, but were restored thereafter (Burt and Price 2003). Entering the foyer, one is struck by the brightly coloured mosaic floors, the fairytale quality of the stained glass and air of faded grandeur. The complex includes a hotel, with Turkish-like turrets; indoor and outdoor swimming pools with artificial waves in the latter; separate thermal baths for men and women; single-sex nude sunbathing areas; saunas; steam rooms; and treatment rooms. This emphasis on separating the sexes follows the Turkish model, rather than the more liberated mixed bathing that was popular in Georgian Bath and nineteenth-century German resorts such as Baden-Baden. The indoor pool is bedecked with Roman style marble columns and a domed roof, which Burt and Price (2003: 108) describe as ‘a sybaritic fantasy right out of a Fellini movie’.

The Baths are used for medical treatments based on water therapy, including physiotherapy, healing gymnastics, and inhalation [to help patients with respiratory problems]. Visitors can also avail themselves of a carbonic acid tub-bath or an underwater water-beam massage. These offerings are aligned with the idea of the spa as a medical-orientated facility (Voigt et al. 2010). A dental surgery is also available in the complex, leveraging off Hungary’s reputation as a centre of expertise for dental care, which attracts many medical tourists to Budapest for treatment (Smith and Puczkó 2009).

The fantasy element may be shattered for some tourists when they are asked to take their clothes off for massages, alongside total strangers, unless this is their cultural norm, such as in many European countries. In the latter case, this might add to the authenticity, as it conforms to what is expected from a European spa. The atmosphere created by the treatments at the Gellért is perfunctory rather than
exclusive or luxurious. Corporeal authenticity may also be absent for some visitors, when treatments are performed roughly or over-vigorously and/or without the expected soothing manner. This might be a cultural notion, as locals might feel that treatments that are administered too gently are not therapeutic enough. The spa offers some treatments that make an attempt at pampering the client, such as a Thai massage, which is not a traditional Hungarian offering. Thai massage is now available, which does not appear to correspond with the fanciful elegance of the Gellért’s architecture and the image of old Budapest it conjures up for the visitor. This attempt at a fusion of experiences might diminish the objective authenticity of the Gellért Baths or make visitors feel less than their true self by affecting their bodily feelings and thus notions or levels of intra-personal existential authenticity. It might lead to a confusing jumble of sensory experiences, which could weaken perceptions of corporeal authenticity.

THE THERMÆ SPA, BATH, UK

Like Budapest, Bath was settled by the Romans for its natural hot springs [when it was known as Aquae Sulis]. Both cities are World Heritage listed, replete with heritage assets across a number of different eras and popular tourist destinations. Tourists to Bath can visit the Roman Baths, which were not just a place for recreation but also a sacred site with a temple to Minerva, the goddess of health and wisdom. This site was previously used by the Celts for their water cults linked to the goddess Sul [Burt and Price 2003] and there are stories of the mythical Celtic King Bladud who was cured of leprosy by bathing in the springs [Erfurt-Cooper and Cooper 2009]. This Celtic past was acknowledged by the Romans, who juxtaposed Minerva’s name with Sulis, a derivative of Sul [Erfurt-Cooper and Cooper 2009]. The spa became a fashionable place for socialising in the eighteenth and nineteenth centuries, although the perceived health benefits of taking the waters was also a factor in their popularity (Smith and Puczkó 2009). The other major spa-related attraction in Bath dating from this period is the Pump Room, where today’s visitors are still able to try a glass of mineral water from the spring and dine in neoclassical splendour.

The Thermae Spa in Bath [Figure 14.2], while housed in a Georgian building and leveraging off the city’s Roman spa heritage, provides treatments from a broad range of cultures, including Asian healing techniques and philosophies and those more traditionally associated with the European spa. It is an example of a fusion of treatments, but also a fusion in the way they are delivered; juxtaposing the traditional Bath spa experience, described by Jane Austen in Northanger Abbey (1818) as a ritual of parading and being seen, with modern spa treatments, which take place behind

"
closed doors in private sanctuaries. Paradoxically, despite Austen’s association with Bath, she deeply disliked the city, as do many of her literary characters. Even the architecture is a synthesis of Georgian honey brick with a twenty-first century glass and steel facade designed by Sir Nicholas Grimshaw (Arfin and Lee 2008). There are two buildings – the New Royal Bath and the Cross Bath. The complex is the result of a partnership between the local council (Bath and North East Somerset) and a development company and was the recipient of funding from a lottery grant from the Millennium Commission.

The rooftop swimming pool within the multistorey New Royal Bath provides a view over the chimney pots and roofs of Bath, as well as a panorama of the surrounding hills. More modern facilities include multisex changing suites, with their own private cubicles, steam rooms infused with fragrances such as eucalyptus and lavender, showers simulating rainfall, complete with fibre optic lighting, and foot baths. Children under 16 years are not permitted in this spa complex. The Minerva Bath within the Thermae Spa is a tribute to its spiritual past. The Cross Bath is an oval-shaped thermal pool which is open to the elements. This facility is not open to children under 12, while youth between 12 and 16 years must be accompanied by an
adult on a ratio of 1 : 1. Its spring has been recognised as ‘an official sacred site’ according to the latest brochure produced by Thermae Spa, and thus also has spiritual and perhaps existentially authentic associations for visitors.

There is an eclectic selection of treatments on offer at the Thermae Spa. Many are linked to Asia, including Pantai Luar massages, based on techniques from eastern Asia and using limes, coconuts and warm oils; Japanese Reiki massage; and Indian head massages. There are also Moroccan body wraps using minerals pertaining to that country. The spa staged a Malaysian Spa Festival in 2009, where visitors were attended to by therapists from the Spa Village in Malaysia. Offerings were described as ‘authentic spa treatments’ in the festival brochure and included Malay traditional massages to stimulate energy points, and a Pandan and coconut hair mask, which ‘testifies to the rich culture of hair treatment in Malaysia’. This fusion approach might affect perceptions of objective authenticity, but perhaps also elements of corporeal or intra-personal existential authenticity, by not specialising in any one tradition and mixing so many cultural and multisensory elements, none of which are plausibly linked to the Roman spa tradition or the Georgian bathing heritage at Bath.

Other treatments have a more distinctly rural European association, such as Kraxen Stove therapy involving an Alpine hay chamber, where herbs are used to warm the back and shoulders, and the bath and foot massage using peat from the Salzburg region of Austria. In contrast, some beauty treatments, particularly the facials, are reminiscent of a high-end European spa, such as the Vichy showers with thermal water, body polishes and salt glows, and facials using the luxurious Pevonia range. These perhaps evoke greater perceptions of objective, corporeal and intra-personal existential authenticity amongst visitors, given the obvious connection with European heritage and the emphasis on pampering.

Other treatments are promoted using language and imagery that emphasises both authenticity and fantasy. The Cleopatra bath and foot massage will allow the guest to ‘follow in the footsteps of the famous Egyptian Queen’, while there are luxury facials made with ‘caviar and pearl extract’, a ‘tropical escape’ wrap and a ‘chocolate indulgence’ floatation. These treatments, with their emphasis on luxury and sensuality might evoke the bodily form of existential authenticity identified by Wang (1999, 2000), but also corporeal authenticity, as they fit with what might be expected from a high-end spa. Photographs of the spa on its website either show couples or single women, with no one else in sight, a far cry from the busy reality of a popular facility where there can be queues to enter. The image they aim to create is that of serenity and privacy within an intimate space; a luxury in this hectic and
connected world. This occurs within the treatment rooms, even if the public areas are more noisy and bustling, and might allow the visitor to discover their true self within such a tranquil setting. The age of the therapies is also emphasised in the brochure, which is a nod to objective authenticity. For example, massage treatments are introduced with the phrase ‘For thousands of years the ancient art of massage has been used to bring benefits to health and wellbeing’.

The heritage of Bath is alluded to with statements that the Thermae Spa is ‘in the heart of the World Heritage site’, but also that it is part of a tradition which harks back to the ancient past: ‘You can now bathe in Britain’s only naturally warm, mineral-rich waters, as the Celts and Romans did over 2,000 years ago’. The Cross Bath is described as ‘surrounded by centuries of history’. Thus, heritage is central to both perceptions of authenticity and fantasy at this site.

THE POLYNESIAN SPA, Rotorua, New Zealand

The Polynesian Spa in Rotorua, New Zealand (Figure 14.3) is a contemporary spa based on Māori heritage. The city of Rotorua is famous for its geysers, mud pools and mineral springs, and the smell of sulphur is heady and pervasive. It is also an interesting melding of European and Māori influences, with tourism contributing to a more affluent Māori populace compared to the rest of the country (Ryan and Crotts 1997). The Māori were attracted to the region for its geothermal resources, which they used domestically for cooking, heating, bathing and laundry as well as for medical reasons and as an element of sacred and cultural rituals, such as preparation for battle or for childbirth (Barrick 2007; Erfurt- Cooper and Cooper 2009; Pohatu et al. 2010). The spa is however named after their ancestors, the Polynesians, who are believed to have arrived in New Zealand around the thirteenth century (Hogg et al. 2002).

Commercial spa tourism in Rotorua became a reality in the nineteenth century as a result of the availability of tours through Thomas Cook and articles, poems and books extolling ‘the healing properties of the natural springs in the Rotorua area . . . establishing a mythology of New Zealand as a scenic wonderland’ (Corak and Ateljevic 2008: 132). Rotorua was planned as a European spa town; a recreation of Bath or Carlsbad in the colonies (Corak and Ateljevic 2008; Pike 2008). The Māori heritage was not always celebrated in connection with spa development. In an ironic twist, while the Māori were made to use different pools from the European settlers (Erfurt-Cooper and Cooper 2009), their indigenous heritage is now celebrated and bestows a level of objective authenticity upon the Rotoruan spas, which is marketable and a source of competitive advantage.
The Polynesian Spa has a family pool or spa, accessible to children, as well as cascade pools and private pools that are reserved for adults. There are 26 pools in total: seven are reserved for adults, including three Priest spa pools, named after a nineteenth-century Catholic priest who, according to the Spa website (www.polynesianspa.co.nz), was said to have used the spring water to help his arthritis. The site of the spa has been registered by the New Zealand Historic Places Trust as part of the Rotorua Government Gardens Historic Area.

The case study of the Polynesian Spa illustrates how the spa fantasy has changed over time. The nearby Rotorua Museum of Art and History was originally a bathhouse built in Tudor style by the New Zealand government for tourist purposes in 1908 (Erfurt-Cooper and Cooper 2009). It was known as the Great South Seas Spa with mud baths in the basement and pools in an Edwardian garden (Barrick 2007). The adjacent Blue Baths were built in the 1930s in Spanish mission style, a style reminiscent of and incorporating elements of Art Deco, when their mixed bathing was considered the height of modernity. At the time, New Zealand sought to position itself as ‘the premier spa of the British Empire’ [Eyewitness Guide 2008: 134] or the southern hemisphere [Pike 2008], using geothermally heated fresh water, rather than mineral springs. These days, the Blue Baths still incorporate bathing pools, but also house a museum and stage dinner shows, such as the nostalgic 1931: The Show,
complete with a jazz band. They are also a popular venue for weddings, corporate functions and conferences, with their glamorous architecture, potted palms and lido lounge. Like the Polynesian Spa, the Rotorua Museum of Art and History and the Blue Baths have been registered by the New Zealand Historic Places Trust.

In contrast to these two facilities, the Polynesian Spa combines an indigenous with a European theme, and local ingredients are incorporated into the spa offerings. Treatments include a body polish with Rotorua thermal mud or manuka honey, or scrubs using mango or coconut; which conjures up an image of tropical Polynesia and perhaps engenders bodily forms of authenticity linked to smell and touch. The treatments are carried out with care and attention on the part of the staff and may evoke corporeal or intra-personal existential authenticity when added to the indigenous ingredients and ambience within the treatment rooms. The visitor is made to feel special and nurtured. Alongside these experiences linked to New Zealand and its regional roots, one can partake in a Swedish massage or have a facial with US Priori products, famed for their use of the latest scientific research into anti-ageing. These fusion treatments jar with the indigenous theme of the Polynesian Spa facility. The natural environment is emphasised more in the modern spa, which features local trees and rocks and a scenic background of Lake Rotorua and the surrounding hills. These elements might evoke intra-personal existential or corporeal forms of authenticity with the connection to the visual and auditory senses and the sense of being immersed in an unspoilt landscape.

Figure 14.4
The Blue Baths in Rotorua, built in Spanish mission style (photo by Jennifer Laing)
SECTION II :: CASE STUDIES

9 :: FANTASY, AUTHENTICITY, AND THE SPA TOURISM EXPERIENCE

top ten thermal, medical and natural spas in recent years (Smith and Puczkó 2009); ranking number seven in 2011. Its blend of island fantasy and authenticity linked to its indigenous heritage and use of multisensory bodily treatments appears to play a large part in this success.

CONCLUSION

The growing popularity of spa tourism around the globe makes it imperative that we understand what is attracting tourists to these experiences and the nature and meaning of what is being experienced. This multicase study highlights three key findings, which advance our understanding of the spa tourism experience. First, it suggests that fantasy and authenticity are crucial ingredients and coexist or are facets of the same experience in many cases. They are linked to heritage in these case studies. For the Gellért and Thermae spas, fantasy is created by their royal and/or celebrity connections, grand or imposing architecture and/or air of luxury. In contrast, fantasy elements of the Polynesian Spa are more about finding a connection with Māori traditions of wellbeing and the image of a natural paradise that is associated with both New Zealand and Polynesia. Authenticity in all its guises is also evoked at these three spas through the existence and use of heritage across elements as diverse as architecture, the natural environment, cultural rituals, and traditions and philosophies.

Second, this study demonstrates that spa tourism can be a useful context in which to explore the nature and effect of different forms of authenticity, some of which, like corporeal authenticity, have not been recognised in the tourism literature to date. The application of Wang’s (1999, 2000) concept of intra-personal existential authenticity to this context, particularly vis-à-vis bodily feelings, is another contribution of this study to the growing literature on spa tourism. The finding that spa tourism experiences can evoke authenticity on a number of different levels suggests that these experiences are less shallow than they are popularly portrayed in the media or by some commentators.

This research could be extended by interviewing spa tourists about the different types of authenticity evoked by undergoing treatments and therapies, as well as exploring how these intersect with fantasy elements.

Third, it is acknowledged that the three spas use language in their promotional material that is evocative of both fantasy and authenticity. Most have some element of
fusion in their offerings to visitors, rather than relying on what is local or traditional to their city or region. This perhaps acknowledges the globalisation of the spa industry with an increasingly homogenised offering. However, jumping on this fusion bandwagon might negatively affect tourist perceptions of the authenticity of these experiences. Understanding the interplay of authenticity and fantasy as motivations behind spa tourism appears to have implications for the way spa products and experiences are designed and marketed and also influences the development of these resorts, including architecture, ambience and facilities. Further research is needed to explore these issues on a broader scale.

REFERENCES


9 :: FANTASY, AUTHENTICITY, AND THE SPA TOURISM EXPERIENCE


9 :: FANTASY, AUTHENTICITY, AND THE SPA TOURISM EXPERIENCE


SECTION

CONCLUSION
CHAPTER 10
JOINING TOGETHER AND SHAPING THE FUTURE OF THE GLOBAL SPA AND WELLNESS INDUSTRY
SECTION III: CONCLUSION

10 :: JOINING TOGETHER AND SHAPING THE FUTURE OF THE GLOBAL SPA AND WELLNESS INDUSTRY

BACKGROUND

A defining moment in the development of the modern spa industry was the launch of the Global Spa Summit (GSS) in 2007 and its subsequent name change to the Global Spa and Wellness Summit (GSWS) in 2012. Until that time there was no global entity – or gathering – for those interested in spa, wellness and tourism – but this Summit changed that.

The gathering that has become known as the GSWS was started by a group of ten industry visionaries who found themselves at a spa conference together in Singapore in 2005. Lamenting that there was no gathering for senior executives and no gathering for a global focus on spa and wellness, they decided that it would be a worthwhile effort to start one. This group used, in part, the very successful format of the World Economic Forum as a model to develop its own conference. When it came to funding the first event, entrepreneur Pete Ellis, Chairman and CEO of SpaFinder Wellness, stepped up to declare that he would take the risk and front the money for the first gathering. They organised themselves with Peter as CEO and Chairman of the board and the others from the initial group of ten becoming board members. While the initial vision was simply to create a once-a-year global event, in time the success of the GSWS allowed it to consider branching out into other areas of contribution.

It was decided to hold the first Summit in New York in May 2007. The idea from the beginning was for the Summit to tackle issues that could be better accomplished together than by any one individual person or company. The motto of ‘Joining Together. Shaping the Future’ was adopted. Everyone who attended was asked to 'take off their competitive hat' and contribute ideas on how to make progress for the industry in general.

THE LANDMARK ‘GLOBAL SPA ECONOMY REPORT’

One of the first orders of business that became obvious at this first gathering was to engage a respected research firm to take on the daunting task of looking at the entire spa market globally and estimating figures that could give a solid picture of what the industry looked like. SRI International (founded as Stanford Research Institute) was engaged to take on the challenge. They were asked to define the industry and give us figures that could help stakeholders understand the market. The resulting report delivered that – and more. It became a landmark study that suggested a very broad definition for the term spa. Having taken an inclusive approach, their definition allowed for other categories and segmentation by type, cultural traditions and such,
underneath this broader definition: ‘Establishments that promote wellness through the provision of therapeutic and other professional services aimed at renewing the body, mind and spirit.’ The report estimated the number of spas in different countries as well as their annual revenues and estimated numbers of people employed. It also identified core spa industries, spa enabled industries as well as associated industries and attached revenue figures to each. This spa industry cluster became known as the ‘Global Spa Economy’. This is the chart that was published in 2008 that became the first global picture of the spa economy worldwide.

<table>
<thead>
<tr>
<th>Core industries</th>
<th>Enabled industries</th>
<th>Associated industries</th>
</tr>
</thead>
<tbody>
<tr>
<td>$60.31</td>
<td>$194.35</td>
<td>$1,099.68</td>
</tr>
</tbody>
</table>

**GSS SUMMITS**

In 2009 the Summit was held in Switzerland including a student competition titled ‘The Spa of the Future’. This Summit proved to be a useful framework for subsequent Summits as all would be held in different parts of the world, include pre- and post-Summit excursion options as well as student competitions. The GSS started becoming known by various governments showing interest in hosting a future...
Summit in their country. The 2010 Summit location was decided based on an invitation by the government of Turkey. That year’s Summit theme, ‘Bridges Worth Building’, put a spotlight on the value of reaching out to other industries, countries and businesses to strengthen the spa industry. This Summit attracted the largest delegation to date with 40 different countries represented.

‘SPAS AND THE GLOBAL WELLNESS MARKET: SYNERGIES AND OPPORTUNITIES’ – RESEARCH REPORT

The research presented that year was once again conducted by SRI International. It sought to examine the spa industry in light of the burgeoning arena of wellness that was increasingly being discussed around the world. The research report quickly became known as the definitive work that traced the term wellness from its early roots – the first study to do so. The following chart explains what SRI International introduced as the Wellness Industry Cluster.
10 :: JOINING TOGETHER AND SHAPING THE FUTURE OF THE GLOBAL SPA AND WELLNESS INDUSTRY

The Summit was held for the first time in Asia in 2011 with the theme of ‘Engage the Change: The Customer. The Money. The Future.’ It explored new ways to engage with consumers, enter new markets and embrace new technologies. The world’s first online portal dedicated to the medical evidence that exists for spa and wellness therapies, Spaevidence.com, was unveiled. Dr Ken Pelletier, Dr Daniel Friedland and Dr Marc Cohen, Nader Vasseghi and his company, SelfOptima, designed a portal that made it possible for a lay person to easily find the actual medical studies that supported – and in some cases didn’t support – many of the spa and wellness therapies on spa menus around the world.

In addition, a landmark research report exploring the differences between wellness tourism and medical tourism and where spas fit was also presented.

‘WELLNESS TOURISM AND MEDICAL TOURISM: WHERE DO SPAS FIT?’ – RESEARCH REPORT
SECTION III: CONCLUSION

10 :: JOINING TOGETHER AND SHAPING THE FUTURE OF THE GLOBAL SPA AND WELLNESS INDUSTRY

This first rigorous exploration of wellness tourism and medical tourism as two distinct concepts and markets was presented in this study. It included information from the results of a survey of consumers and industry professionals, case studies from 12 countries around the world, and recommendations for governments and businesses. The research report was a joint effort between four parties: Katherine Johnston, a senior economist who had worked on the previous SRI International reports, Susie Ellis, President of SpaFinder, Inc., László Puczkó, managing director and head of the tourism section at Xellum Ltd, and Melanie Smith (PhD) a lecturer, researcher and consultant from Corvinus University of Budapest. Dr Puczkó and Dr Smith were authors of the book Health and Wellness Tourism (the first edition of the current book). The diagram in Figure 22.3 presented a visual way to look at various entities in this market spectrum of spa, health, wellness and medical establishments.

As a result of its own research and the increasing emphasis on wellness in the industry and marketplace, the Summit board decided to modify the name of the Summit. As a result, the GSS was renamed the Global Spa and Wellness Summit (GSWS) at the beginning of 2012.

The Summit that year was held for the first time in collaboration with another organisation, the Aspen Institute. The event’s theme was ‘Innovation through Imagination’.

‘SPA MANAGEMENT WORKFORCE AND EDUCATION: ADDRESSING MARKET GAPS’ – RESEARCH REPORT

That year’s research addressed an issue that delegates had been saying was one of their top challenges year after year – a shortage of well-trained management and staff. The industry’s robust growth year after year had necessitated a look at possible solutions. The research was once again conducted by SRI International.

Not only did the report examine reasons behind a worldwide lack of qualified management; it also provided some very useful recommendations to close the talent gap. The diagram in Figure 22.4 shows the three key stakeholders identified and summarises suggested interactions.
The 2013 Global Spa and Wellness Summit took place in New Delhi, India, under the theme ‘A Defining Moment’. This Summit, for the first time, dedicated its first day to a Global Wellness Tourism Congress as well as speciality forums that made it possible for groups with specific interests to gather and discuss topics uniquely of interest to them. These forums have expert leaders who shape their own agenda. The idea is to give various interest groups a chance to look more closely at what they might be able to accomplish together that would not be easily accomplished individually. Forums on the agenda for 2013 included: Ancient Healing Traditions Forum, a Global Destination Spa Forum, a Global Corporate Responsibility Forum, a Global HydroThermal Forum, a Global Spa Education Forum and a Global Spa Retail Forum.

In addition the 2013 gathering hosted, for the first time, a Global Wellness Tourism Congress that brought together thought leaders, government officials as well as private entities to collaborate on a definitive direction for wellness tourism. In addition SRI produced a global wellness tourism economy study that sought to define the wellness tourism cluster and industry segments; identify the size of the various markets; look at the share of the overall tourism industry that wellness tourism plays; explore the economic impacts of wellness tourism including multiplier impacts and job-creation impacts; as well as project future growth of the global wellness tourism market.
SECTION III: CONCLUSION

10 :: JOINING TOGETHER AND SHAPING THE FUTURE OF THE GLOBAL SPA AND WELLNESS INDUSTRY

FINAL THOUGHTS AND FUTURE VISION

From its debut in 2007 the Global Spa and Wellness Summit has been a tireless contributor to the growth of the modern spa and wellness industry. Over time it has more formally developed its mission statement and objectives as follows: the Global Spa and Wellness Summit endeavours to live up to its mission as an international organisation that brings together leaders and visionaries to positively impact and shape the future of the global spa and wellness industries.

OBJECTIVES:

- to establish a forum for dialogue among global industry leaders
- to create community by fostering friendly relationships among stakeholders
- to inspire a spirit of collaboration to solve shared problems
- to facilitate healthy growth for the industry and its individual businesses
- to initiate and support quality research
- to encourage innovation
- to cultivate leaders for tomorrow.

Along the way some principles have emerged as key contributors to its broadening reach and impact.

Transparency and accessibility have been two key developments. While the Summit is invitation-only so that it attracts top executives who want to meet with peers, it was soon decided that the speeches, presentations, panel discussions and especially its research was simply too valuable to limit its access. Thus over time it was decided that with the support of sponsors everything would be made available to everyone – for free.

The GSWS website, www.globalspaandwellnesssummit.org, has become a popular hub of information designed to make myriad resources available that help strengthen the industry. These resources include: a comprehensive list of and links to all the research commissioned by the Summit; links to various spa and wellness research conducted by others around the world; a listing of spa and wellness associations globally; a listing of spa management education programs around the world; a list of spa and wellness publications for both consumers as well as trade; and an aggregation of country specific briefing papers written each year by delegates attending the Summit that give a grass-roots look at the industry in their country that year.
On the drawing board are additional website sections that will include an aggregation of standards and practices documents from various organisations and countries around the world; the development of a section on metrics that will eventually be useable for benchmarking; as well as a section dedicated to the various philanthropic endeavours in which spas and wellness establishments are engaged.

Involvement in social media is continual and ongoing and includes a blog, regular posts on Twitter and Facebook as well as a private Facebook group for use by alumni with likely additions in the future. In 2012 the GSWS launched a weekly newsletter called the GSWS Weekender. Its purpose was to reach more people than just delegates who participate in the Summit.

The amount of energy and support behind the Global Spa and Wellness Summit since its inception has been tremendous. It is likely, therefore, that its growth and influence will continue. In addition new opportunities are anticipated that will help it carry out its commitment to ‘Joining Together. Shaping the Future.’