

Youngsters' Opinions on Health, Health Tourism and Balneotherapy Tourism

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Abstract

The way in which health is managed by demand agents needs to be thoroughly analysed, all the more so as this phenomenon represents an increasingly stronger stake for many audiences; the profound understanding of health, and the consequences of its management gradually leads to the branching of the concept, its physical, moral and social implications being intertwined with a vast area of aspects of life.

The results of this study reflect how health is understood and managed by young people, but also their reporting to health tourism, with an emphasis on the consumption of balneotherapy tourism products; therefore, a quantitative marketing research was carried out on a sample of 129 people, aged 18-24, between December 2015 and May 2016, to determine how health is perceived and understood, and the opinions of young people regarding its treatment in balneotherapy destinations in Romania.

Keywords: Health, Health Marketing, Health Tourism, Balneotherapy Tourism

Motivation and contributions

Firstly, the importance of the study is motivated by the growing attention regarding health, on behalf of the scientific community and of the entire modern society. Opinions

towards this concept are valuable for the marketing specialist, as it has large implications in constructing relevant and suitable products both in medical and tourism fields. Health and, implicitly, balneotherapy tourism represent, in Romania's case, key types of tourism in the tourism development. Thus, investigating consumers' opinions on health, health tourism and balneotherapy tourism can constitute important levers in creating new products and in enhancing actual ones.

The main contributions of the study indicate the knowledge of youngsters' opinions towards consumer behaviour regarding medical and tourism products and services. Based on the results, the marketing specialist can gather information for creating tailored products for young people, in light of the importance of health prophylactic actions, that are, nowadays, deemed very important.

Introduction

The process of maintaining and/or restoring health is a strong desideratum, the importance of which is becoming more and more acknowledged at the collective level; its importance transcends the field of medicine, health management also involving specialists in economy, tourism, psychology, spirituality, and so on. Their collaboration is required in a multidisciplinary framework that reflects projects that need to be organised and coordinated according to a planned system. Following a broad analysis of the issues faced by society, and its current potential, health management must pursue unitary, accurate objectives in line with the development of groups of individuals. In line with the development of how health is perceived and treated, the tourism marketing specialist must align its strategies with the dynamics and complexity of this phenomenon, to create products that better meet the ever increasing needs of health of consumers.

Conceptual Framework

A profound understanding of the concept of health can be achieved through a cross-sectional analysis of what this concept has formally meant over time. The definition given by the World Health Organisation in 1948 describes health as "a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity". In 1984, the same organisation extends the area of influence of health, emphasising the idea of "a positive concept emphasising social and personal resources, as well as physical capacities". For a more accurate understanding of the health phenomenon, it is necessary to report the influence of all the techniques and practices within it on the opinions and beliefs of consumers of such services. The state of health has thus been correlated over time with many aspects of human existence, influencing and being influenced by both minor and major events in the outer and inner lives, like a construction whose stability is reflected by that of each component. Hence, the influence of personal health on consumer behaviour, including tourist behaviour, has been particularly emphasised in the literature (Laesser, 2011, quoted in Smith and Pukczo, 2009, p. 9).

Awareness of the influence of various external and internal factors on health status and the contribution of health to wellbeing led, along with changes in beliefs and behaviours, along

with country-specific regulations, to the growing importance of health tourism. In fact, since tourism involves “an increase in living standards and a desire to improve the quality of life” (Encyclopedia of Tourism, 2000, p. 274), the development of health tourism becomes a logical consequence. Determined by Carrera and Bridges (2006) as the “action to travel in order to maintain, improve or recover the wellbeing of the mind and body”, health tourism, as described by Goeldner (1989), has the following as main features: “being away from home”, “health is the main reason of travel”, and “the travel is made in a pleasant setting” (Goeldner, 1989, quoted in Hall, 2013). In the literature, Laesser (2011) identified the main factors determining the evolution of health tourism, namely, changes in the demographic structure, lifestyle and existence of an active, mature population, the need to reduce the stress of employees, a switch of the medical paradigm towards prevention and alternative practices, the increased interaction between public health and health psychology, and the transition from mass to personalised tourism (Laesser, 2011, quoted in Hall, 2013).

Methodological Framework

The starting point of this study is the delimitation of the general concept of health in terms of demand, in the sense that its content and importance are known and understood by the target audience; according to this, it is necessary to know and understand the behaviour of the consumer of health services and services related to health tourism. Thus, a quantitative marketing research was conducted on a sample of 129 people, aged 18-24, between December 2015 and May 2016, to determine how health is perceived and understood, and the opinions of young people regarding its treatment in balneotherapy destinations in Romania. The perspective from which health treatment is addressed refers to the consideration of all its forms (treatment, prophylaxis and relaxation), where the curative means refer to both traditional, and complementary and alternative medicine.

The main objectives of the health study in general are the determination of opinion on health determinants, the determination of health care preferences, the identification of medical service selection criteria, and the identification of the frequency of health services consumption in Romania. Among the objectives aiming health tourism, emphasising the aspect of balneotherapy tourism, we can list: knowing the compatibility between choosing a holiday and treating a disease, determining the reasons for visiting balneotherapy destinations, and knowing the main benefits and counter-benefits of balneotherapy destinations. 82.9% of the respondents were female, and 17.1% male, with 44.2% coming from Bucharest, 27.9% from Muntenia, 15.5% from Moldova, 6.2% from Dobrogea, and 6.2% from Oltenia. Regarding the income of the respondents, 67.4% have an income lower than 1,000 lei, 28.7% an income between 1,000 and 2,000 lei, while 3.9% have an income between 2,000 and 3,000 lei.

Research Results

The first step in delimiting the behaviour of the healthcare consumer consisted in determining the frequency of use of the main health services, namely asking for a medical report to be performed, and requesting the services of a physician. Thus, the majority of the respondents (38.8%) request a medical report to be performed when they detect minor

irregularities in their state of health, while 25.6% do this preventively annually, and 20.2% if they detect major irregularities to their state of health. Instances where medical reports are required preventively, at 6 months, at the express request of the physician or never are less significant, with percentages of 8.5%, 4.7%, and 2.3%, respectively. The situation in which a visit to the doctor – preventive, annual, considered optimal, is best represented from the perspective of the respondents (31.8%), being followed by situations in which they feel ill: which significantly affects their personal and professional activities (24.8%) or less significantly (24%). The preventive visit, every six months, is taken into consideration by the respondents in a proportion of 18.6%; the situation in which this is requested by another person/institution (e.g., enrollment in a faculty/job), considered by 0.8% of the respondents, may indicate, on the one hand, the lack of institutional rigor or, on the other hand, giving less importance; both situations, however, call for the attention of specialists in order to create a formal framework for monitoring and improving health, by taking into account the current behaviour of the targeted segments.

For the construction of health-based products according to the current requirements and behaviour of the targeted segments, one of the objectives of the research was to identify the means by which respondents choose to manage their health status, namely through traditional, and complementary and alternative medicine. Thus, by correlating the categories of illnesses with the contracted condition (mild, moderate or severe), it can be noticed that none of the cases presented are selected by more than 15% of the respondents (Table 1). Most respondents (14.2%) would resort to traditional medicine for diseases of the respiratory system, in the case of a severe form, followed by endocrine, nutrition and metabolic diseases, in moderate forms (14%). It is worth noting that in the case of blood, nervous system and genitourinary system diseases, the percentage of cases where respondents would resort to traditional medicine for a mild form is superior to the moderate and severe forms. For mental and behavioural disorders, circulatory, respiratory and digestive diseases, however, the percentage of cases where traditional medicine for severe forms is used is superior to the other two situations (mild and moderate forms).

Table 1 - Categories of diseases for which respondents would use traditional medicine
% of total column

<i>Disease category/form</i>	Mild	Moderate	Severe
Blood diseases	10.7	4.3	5.7
Endocrine, nutrition and metabolic diseases	5.4	14.0	10.6
Mental and behavioural disorders	7.7	7.0	9.9
Diseases of the nervous system	9.2	3.8	7.8
Diseases of the eye	7.7	11.5	5.0
Diseases of the ear	7.9	8.8	7.8
Diseases of the circulatory system	8.4	8.1	9.9
Diseases of the respiratory system	10.9	6.1	14.2
Diseases of the digestive system	7.4	9.7	9.9
Diseases of the skin	8.9	10.4	7.8
Diseases of the osteoarticular system	6.8	9.9	4.3
Diseases of the genitourinary system	8.9	6.3	7.1

Source: statistical survey conducted by the authors

Taking into consideration some relevant criteria for the general performance of the medical act, the analysis of medical services (state and private) posed interest for the purpose of the research. Therefore, the state medical services are more reliable in the opinion of the respondents, in terms of the prices charged (24.5%) – Table 2, the experience of physicians (20.7%), and accessibility (18%), with a significant difference from the private medical services. On the other hand, private medical services are more reliable in terms of the equipment used (23.8%), the reputation of the clinics (21.8%) – also with a significant difference from state medical services – and the reputation of the physicians (15.1%). Thus, the criteria taken into account can be considered, in terms of the scores obtained, characteristic for some types of medical services, which can be used for each level (macro, meso, micro) within the product strategy as differentiation attributes.

Table 2 - Types of healthcare services that give more confidence to respondents, from the perspective of the criteria considered

<i>Criteria/Types of services</i>	<i>% of total column</i>	
	State medical services	Private medical services
The knowledge of physicians	15.4	13.6
The experience of physicians	20.7	9.0
The reputation of physicians	13.5	15.1
The reputation of clinics	5.5	21.8
Accessibility	18.0	11.4
Equipment used	2.4	23.8
Prices	24.5	5.3

Source: Statistical Survey Conducted by the Authors

Regarding the selection criteria used for each medical service considered, in the case of state medical services, the most important for the respondents is the experience of the physicians (with an average of 9.10) – Table 3, the reputation of physicians (8.88), and equipment used (8.29). The same criteria obtained the highest scores for private medical services as well (equipment used – 8.82, the experience of physicians – 8.81, the reputation of physicians – 8.75). It should be noted that, except for online recommendations (with a score of 4.44 for state health services, and 4.81 for private medical services), and habit (with a score of 5.73 for state health services, and 5.43 for private medical services), all the listed criteria recorded scores higher than 7, indicating a complex purchasing decision-making process with the aggregation of many important factors.

Table 3 - Selection criteria for medical services

media=1..10

<i>Criteria/Types of services</i>	State medical services	Private medical services
Recommendations from family or friends	7.87	8.06
Recommendations from the online environment	4.44	4.81
The knowledge of physicians	8.62	8.20
The experience of physicians	9.10	8.81
The reputation of physicians	8.88	8.75
The reputation of clinics	7.93	8.62
Accessibility	7.47	7.59
Equipment used	8.29	8.82
Prices	7.81	7.42
Habit	5.73	5.43

Source: Statistical Survey Conducted by the Authors

Regarding complementary and alternative medicine, another side studied in the research, psychotherapy (23.6%), leech therapy (23%), and energy therapy (10.6%) represent the best known practices, followed by insect therapy (8.2%), phytotherapy (7.9%), apitherapy (7.5%), and mineral therapy (6.2%). Less well-known are the natural factor therapy (4.2%), diet therapy (5.7%), and Reiki therapy (3.1%). It is also noted that in the case of recovery, the highest confidence is given to psychotherapy (17.2%) – Table 4, followed by mineral therapy and apitherapy (12.3%), in the case of treatment – to leech therapy (17.7%), psychotherapy (15%) and energy therapy (14.2%), and in the case of prophylaxis, to psychotherapy (18.4%), apitherapy (15.4%), and mineral therapy and natural factors therapy (11%). Interestingly, from the perspective of respondents, the combination of the above practices (with the exception of psychotherapy in the case of treatment) with traditional medicine practices does not add to their confidence. Paying more attention to the treatment situation, it is noted that the respondents, in the case of prophylaxis (compared to the other two situations), trusts more psychotherapy (18.4%), apitherapy (15.4%), natural factors therapy (11%), and phytotherapy

(9.6%). Leech therapy (17.7%), energy therapy (14.2%), diet therapy (10.6%), and the Reiki therapy (8%) gain, in the case of treatment, a higher confidence compared to the other two situations, while insect therapy (7.4%) displays a higher degree of confidence in the case of recovery.

Table 4 - The degree of confidence in complementary and alternative medicine, in the case of treatment

% of total column

<i>Type of therapy/ Situation of treatment</i>	Recovery		Treatment		Prophylaxis	
	<i>Independent</i>	<i>Combined with traditional medicine</i>	<i>Independent</i>	<i>Combined with traditional medicine</i>	<i>Independent</i>	<i>Combined with traditional medicine</i>
Phytotherapy	9.0	13.1	7.1	6.5	9.6	8.3
Apitherapy	12.3	8.5	8.0	9.9	15.4	11.6
Mineral therapy	12.3	10.1	11.5	7.8	11.0	10.7
Insect therapy	7.4	8.5	3.5	9.1	0.7	10.7
Leech therapy	11.5	9.5	17.7	9.9	9.6	9.1
Natural factors therapy	4.1	9.5	4.4	9.9	11.0	9.1
Diet therapy	9.0	8.0	10.6	8.2	9.6	8.3
Reiki therapy	5.7	5.5	8.0	9.9	5.9	9.9
Energy therapy	11.5	10.6	14.2	11.2	8.8	10.7
Psychotherapy	17.2	16.6	15.0	17.7	18.4	11.6

Source: statistical survey conducted by the authors

In the case of mild forms of disease, respondents would use complementary and alternative medicine to the greatest extent in the case of skin diseases (14.4%) – Table 5, respiratory system diseases (11.2), and digestive system diseases (11%). For moderate forms of disease, respondents would use the type of studied medicine to the greatest extent in the case of diseases of the digestive system (13.7%), respiratory system (12.1%) and endocrine, nutrition and metabolism diseases (10.2%). In the case of severe forms, diseases compatible with complementary and alternative medicine are mental and behavioural disorders (20%), endocrine, nutrition and metabolism diseases, and blood diseases (13.3%).

Table 5 - Categories of diseases for which respondents would use complementary and alternative medicine

<i>Disease category/form</i>	<i>% of total column</i>		
	Mild	Moderate	Severe
Blood diseases	7.6	4.4	13.3
Endocrine, nutrition and metabolic diseases	9.4	10.2	13.3
Mental and behavioural disorders	6.5	3.2	20.0
Diseases of the nervous system	7.0	5.7	6.7
Diseases of the eye	7.6	8.3	6.7
Diseases of the ear	7.3	8.6	9.3
Diseases of the circulatory system	6.3	9.8	2.7
Diseases of the respiratory system	11.2	12.1	5.3
Diseases of the digestive system	11.0	13.7	2.7
Diseases of the skin	14.4	7.9	9.3
Diseases of the osteoarticular system	5.5	8.6	5.3
Diseases of the genitourinary system	6.3	7.6	5.3

Source: statistical survey conducted by the authors

Of the factors considered to be taken into account in the health analysis, the research results show that all were selected to a great and very great extent (Table 6). Factors considered by the majority of respondents to influence their health are diet (66.7%), mental comfort (51.2%), and sport (47.3%). Therefore, it is important for all health-based products targeting the youth segment to take into account these three main areas, by contributing to the health and by conceptual and practical relevance.

Table 6 - Contribution of factors considered to health from the perspective of the respondents

	<i>% of total row</i>				
	<i>To a very small extent</i>	<i>To a small extent</i>	<i>Neutral</i>	<i>To a great extent</i>	<i>To a very great extent</i>
Diet	0.8	-	-	32.6	66.7
Respiration	-	7.8	19.4	51.2	21.7
Sport	-	0.8	5.4	46.5	47.3
Mental comfort	-	-	4.7	44.2	51.2
Environmental factors	-	-	11.8	55.1	33.1
Technology	-	6.2	40.3	43.4	10.1
Responsibility	-	3.1	21.1	56.3	19.5
Rhythm of life	-	0.8	2.4	58.3	38.6

Source: statistical survey conducted by the authors

Furthermore, we wanted to identify the opinion of young people on the compatibility between tourism and health; 82.2% of respondents considered this link to a great and very great extent (Table 7), and therefore the relevance of health tourism; also 76.7% of them considered the need for this phenomenon. However, only 50.4% have approved the attractiveness of combining tourism with health aspects, and 21.7% have determined that it exists to a small extent.

Table 7 - Respondents' opinion on health tourism

	<i>% of total row</i>				
	<i>To a very small extent</i>	<i>To a small extent</i>	<i>Neutral</i>	<i>To a great extent</i>	<i>To a very great extent</i>
Compatibility of tourism with health issues	1.6	2.3	14.0	53.5	28.7
The attractiveness of combining tourism with health issues	-	21.7	27.9	37.2	13.2
The need to combine tourism with health issues	1.6	7.0	14.7	58.1	18.6

Source: statistical survey conducted by the authors

Of the destinations for health tourism, special attention is paid in this study to the balneotherapy destinations. It is important to note that 54.3% of the respondents have visited a balneotherapy destination until now (of which, 2.3% – for recovery, 5.4% – for treatment, 12.4% – for prophylaxis, 34.1% – for other activities). 38.8% of the young people interviewed have never visited a balneotherapy destination, but intend to do so, while only 7% have never visited or intend to visit a balneotherapy destination.

Thereafter, we studied the confidence in the effectiveness of therapeutic factors in various situations, such as recovery following a disease, treatment, secondary and primary prophylaxis. Hence, all the listed cases recorded significant scores for “to a great extent” and “to a very great extent”, indicating a higher level of confidence. Of these, however, situations where the therapeutic factors are efficient in terms of recovery and treatment have recorded higher scores than those recorded for prophylaxis; 86% of the respondents confirm, to a great and a very great extent, their effectiveness in terms of recovery and 76.8% in treatment (Table 8).

Table 8 - The extent to which respondents believe in the effectiveness of the therapeutic factors

	<i>% of total row</i>				
	<i>To a very small extent</i>	<i>To a small extent</i>	<i>Neutral</i>	<i>To a great extent</i>	<i>To a very great extent</i>
For recovery from a disease	-	5.4	8.5	73.6	12.4
For treatment	-	7.8	15.5	65.9	10.9
For secondary prophylaxis	-	9.3	26.4	57.4	7.0
For primary prophylaxis	-	7.8	23.3	60.5	8.5

Source: statistical survey conducted by the authors

It is also important to study the confidence in the efficiency of wellness factors such as yoga and meditation, sports and fitness, beautification and socialisation. It is interesting to note that the respondents have a high and very high level of confidence of 96.9% in the efficiency of yoga and meditation activities. All other factors considered also have registered significant scores in terms of young people’s confidence in their therapeutic value. The respondents have a high to a very high level of confidence in socialising as a curative value (60.5%), sports and fitness (49.6%), and beautification activities (32.6%).

Also important were situations in which respondents would use therapy with natural factors in balneotherapy destinations. Most (45.7%) would use it, in the case of recovery, 18.6% – to achieve a state of wellbeing, 13.2 – out of curiosity, 10.1% – to treat a serious illness, and 4.7% do not know or would not use it.

In order to enrich the balneotherapy tourism product with attributes according to the requirements of the targeted segments, we wanted to identify those elements compatible with the activities related to the therapeutic factors, which would complement the tourist experience in the balneotherapy destinations. Therefore, according to the answers provided, the possibility of spending a holiday in a balneotherapy destination is increased if there are additional elements, as they would contribute to the choice of balneotherapy destination to a great and very great extent, as follows: 83.7% – the possibility of visiting tourist attractions (Table 9), 79.8% – adventure activities, 76.8% – in the case of recreational possibilities, 70.6% – practicing sport.

Table 9 - The possibility of spending a holiday in a balneotherapy destination, if there are some given conditions

	<i>% of total row</i>				
	<i>To a very small extent</i>	<i>To a small extent</i>	<i>Neutral</i>	<i>To a great extent</i>	<i>To a very great extent</i>
Existence of recreational possibilities	-	7.0	16.3	62.8	14.0
Existence of sports opportunities	1.6	3.9	24.0	53.5	17.1
Existence of adventure possibilities	0.8	3.9	15.5	55.8	24.0
Existence of possibilities to visit cultural touristic objectives	-	5.4	10.9	65.1	18.6
Existence of other possibilities	17.6	5.9	17.6	23.5	35.3

Source: statistical survey conducted by the authors

The complexity of tourist possibilities in balneotherapy destinations, as far as young people are concerned, is also confirmed by the wide range of needs that can be met, according to the respondents. Thus, recreation and leisure activities are considered to be characteristic of balneotherapy destinations (excluding health-based activities) by 35.2% of the respondents, while 28.9% of them selected relaxation. Sports-related needs, materialised in sports activities (mentioned above as a relevant source of elements for the balneotherapy tourism product for the studied segment) are considered possibly to be satisfied by only 14.3% of the respondents. Less well represented, however, are the needs of knowledge (9.2%), adventure (8.6%) and business (3.8%). The latter are needs that respondents would like to satisfy during holidays, but predominantly in another type of destination, adventure registering 22.8 %, knowledge 19.9%, and businesses 19.7% (Table 10). The needs that young people would satisfy in a balneotherapy destination are mostly rest (32.9%) and relaxation (30.8%) – these obtaining significantly lower scores for other types of destinations. Improvement of health-related experience can be achieved, according to respondents, by extending the following components: natural (34.9%), cultural (21%), ecotourism (19.9%). Less well represented (for the studied segment) as correlated with the health experience are the following components: rural (10%), historical (8.2%) and religious (6%).

Table 10 - Satisfying needs as a priority, in a balneotherapy destination compared to another type of destination

	<i>% of total column</i>	
	In a balneotherapy destination	In another type of destination
Relaxation	30.8	11.4
Rest	32.9	8.9
Adventure	6.6	22.8
Sport	11.8	17.3
Business	2.1	19.7
Knowledge	15.9	19.9

Source: Statistical Survey conducted by the Authors

Regarding the activities that can be practiced in balneotherapy destinations in Romania, it is interesting to note that 33.6% of respondents consider to a very small extent, to a small extent and neutral extent the practicing of activities characteristic of balneotherapy destinations, those related to balneotherapy (Table 11). Also, there is not a large difference in the proportion of people who consider, to a great extent and to a very great extent, that they can practice relaxation (74.7%), balneotherapy (66.4%), wellness (55.4%), sport (48.5%), adventure (45.7%) activities, which indicates, however, the existence of a complex product, according to the respondents. Nevertheless, faced with choosing a holiday in a balneotherapy destination, respondents selected it to a very great extent for treatment (52.3%), followed by prophylaxis (41.6%), relaxation (35.2%), sport (24.2%), and adventure (20.6%).

Table 11 - The extent to which certain activities can be practiced in balneotherapy destinations in Romania

	<i>% of total row</i>				
	<i>To a very small extent</i>	<i>To a small extent</i>	<i>Neutral</i>	<i>To a great extent</i>	<i>To a very great extent</i>
Regarding balneotherapy	2.7	9.1	21.8	49.1	17.3
Regarding wellness	2.9	11.7	30.1	37.9	17.5
Regarding relaxation	2.7	3.6	18.9	48.6	26.1
Regarding sports	2.9	7.8	40.8	32.0	16.5
Regarding adventure	4.8	8.6	41.0	39.0	6.7

Source: Statistical Survey conducted by the Authors

Further, respondents were asked to iterate, as far as they know, the most important benefits and counter-benefits. Although the level of responses was low, among the most important benefits of balneotherapy destinations are health improvement and treatment conditions/facilities, and the most common counter-benefits among young people are, according to the results, related to the state of degradation of the destinations, the lack of

capitalisation and modern facilities, and the lack of appropriate conditions. The image of balneotherapy destinations, as conveyed by respondents, strengthens these beliefs, as they are more traditional than contemporary (with an average of 2.44, calculated on a scale of 1 to 5), more degraded than modern (2.15), more boring than entertaining (2.45), more simple than complex (2.59), more monochrome than colourful (2.67), more obsolete than up to date (2.46), but with more emphasis on health than sickness (3.08). In addition, in relation to supranational structures, respondents consider that the atmosphere in Romanian balneotherapy destinations differs, to a great extent, by 44.4%, from the atmosphere in the Balkan Peninsula destinations, and, by 54%, from those in Europe. Thus, outlining the personality of balneotherapy destinations for the segment studied, it is necessary for the marketing specialist to correlate these results with the conditions in which the targeted consumers could spend a holiday in a balneotherapy destination amid the general opinion on the management of health in general.

Regarding the market segments for which the balneotherapy products are built, 62.8% of the interviewed respondents believe, to a small and very small extent, that they address healthy young people (while only 2.3% associate them to a very great extent to healthy young people) – Table 12; in fact, maintaining health (through prophylactic activities) did not represent one of the most often listed benefits for balneotherapy destinations, according to the respondents. However, their opinions are mostly directed towards the effectiveness of the therapeutic factors in the case of primary and secondary prophylaxis. Among the activities that should be practiced to meet the needs of healthy young people, respondents mentioned sports, adventure, knowledge and entertainment activities.

An unfavourable score is also registered in the case of balneotherapy products for healthy adults, selected by only 31.1% of respondents, where cultural, sports and wellness activities would direct the product to their advantage. For adults with health problems (to whom balneotherapy products are addressed in a proportion of 81.9% to a great and very great extent), respondents mainly mentioned cultural/knowledge, rest and relaxation, walks and wellness activities. The most favourable representation occurs with products addressed to elderly people with health problems, a situation with which 63% of respondents agree to a very great extent, a significantly reduced score for the elderly with no health problems (20.2%). For elderly people in general, respondents consider that accessibility, recreation, cultural and religious activities would complement the balneotherapy product.

Table 12 - Addressing tourism products from balneotherapy destinations to different consumer segments

	<i>% of total row</i>				
	<i>To a very small extent</i>	<i>To a small extent</i>	<i>Neutral</i>	<i>To a great extent</i>	<i>To a very great extent</i>
Healthy young people	38.8	24.0	19.4	15.5	2.3
Adults with health problems	0.8	5.5	11.8	54.3	27.6
Healthy adults	13.2	23.3	32.6	23.3	7.8
Elderly people with health problems	-	-	3.1	33.9	63.0
Healthy elderly people	1.6	5.4	10.1	62.8	20.2

Source: Statistical Survey Conducted By The Authors

The main solutions offered by the respondents for the revitalisation of the balneotherapy destinations include the bringing to European standards, the harmonisation of decisions, the improvement of infrastructure, the involvement of local communities, the modernisation of destinations, and the capitalisation of resources.

Limitations

Due to the complexity and dynamics of the concept of health management, and, implicitly, of health tourism, its exhaustive definition becomes difficult. Therefore, multidisciplinary research from the supply side is needed, including studies in medicine, tourism, economy, psychology, etc., to substantiate the necessary research framework in terms of demand. These have to be carried out periodically, due to the multitude of factors that influence the way medicine is practiced, understood, used, and promoted.

Also, the complexity of health requires a comparative analysis between tourist destinations where it occupies a primary or secondary place. Future studies should aim to follow the same logic of research, but applied to other relevant consumer segments, such as healthy adults or adults with health problems, and healthy elderly persons or elderly persons with health problems.

Conclusions

Starting from the research results, specialists can use significant benchmarking for defining young people’s opinions on health and health tourism to substantiate product-building strategies, or manage an education process on the importance of health on the long term. Health management should be seen as a common effort, starting from identifying the need (to maintain or recover health), and carefully following all the stages of satisfaction (visit to the physician, prescription of medicines, procuring them, recommendation of a balneotherapy program, etc.).

In order to streamline this value chain, which may involve different interests and objectives (in areas such as medicine, tourism, balneology, psychology, marketing,

management, etc.), it is necessary to implement a planned system, leading, by maximising the effects of collaboration between value chain links, to the meeting of the needs of consumers in optimum conditions. Establishing and coordinating a rigorous, unitary and coherent collaboration framework in which the positions of specialists in all relevant areas are harmonised in a unitary representation tailored to the needs of each segment is the first step in building products (based on health, health tourism products, or balneotherapy products) to bring real added value.

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