

POSITIONING THE OFFER OF FOUR STARS HOTEL FROM FELIX SPA BETWEEN BALNEO AND WELLNESS TOURISM

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Abstract: *Introduction/Objectives: In Romania, around consistent thermal water sources were developed centers / resorts profile SPA, spas named. Balneology is regarded as a branch of medicine dealing with disorders using mineral water. Completing the offer of hotels climatic spa resorts, in response to worldwide trends, it was done with wellness services. In this study we intend to investigate to what extent a four star hotel in the largest spa in the country, has an offer wellness not only name but also as content and consumer perception. Materials & Methods: The research methods used were: analysis of secondary data, research direct investigation based on a questionnaire applied among customers. Data were statistically analyzed primary and deepened. Results: The first two and last hypotheses were validated. The third hypothesis was validated in demand limit imposed by the observation unit. Hypotheses are: H1: Offer wellness services unit studied is one incomplete H2: Customer is not the specific Wellness Hotel H3: Consumer preference is for hotel guests climatic services, especially. H4: The hotel's current customers are satisfied with the quality of the services they received (a hypothesis based on the high percentage of customers who have been accommodated at this hotel). In conclusion, the results reflect a partial understanding of the concept of wellness by the hotel management and an openness of consumers for wellness services.*

Keywords: *balneotourism; wellness tourism; hotel; Băile Felix; Romania*

JEL Classification: *L83; D12; M31*

1. Conceptual delimitations

Wellness tourism is seen as a subcategory of health tourism and refers to people who travel and spend a stay with primary concern health care in the sense of preventing illness, maintaining or improving health.

However, there is a demarcation between wellness tourism and cure tourism, the positioning of wellness in relation to other health care services in the tourism industry, being explicitly presented by Mueller and Kaufmann (2000, p. 8) (Figure 1). As subcategories of health tourism we mention: medical tourism, cure tourism, wellness and spa tourism. Connell (2006) highlights the differences in the essence between medical tourism (which may require surgical intervention) and wellness and spa tourism.

Balneology is considered as a branch of medicine that treats diseases by using mineral water. Balneology is used when there is a medical problem, as a treatment or as a prevention. Balneo-tourism involves the use of balneological and therapeutic procedures (Georgiev & Vasileva, 2010) for tourists.

It is appreciated that between balneo-tourism and spa there is a major sense of correspondence, balneo-tourism including medical procedures that require the use of natural mineral water. The International SPA Association (2004) gives a broader meaning to the concept of spa, including services that reinvigorate mind, body and spirit (in Georgiev & Vasileva, 2010). The next step was the transition from balneotherapy to spa and then to wellness.

Wray et al. (2010) mentions that the term wellness tourism has traditionally been linked to the term spa and more recent forms of wellness tourism include: new-age tourism, yoga tourism, pilgrimage, holistic tourism. Romao et al. (2017) says: "Wellness tourists tend to combine different activities, including a variety of spa services based on water properties or therapies, along with physical exercise, hiking or cultural and educational activities".

The term wellness is widely used in European tourism, being considered an element of competitiveness. This idea has made hotels or hotel complexes specialize in wellness or complement their wellness offer. Wellness has been differently understood and applied by tour operators, combining and often confusion with spa services in many situations. The reason for this is that there is no standard definition of wellness but only a lot of interpretations. First of all, between wellness and wellness tourism there is a fundamental difference. The concept of wellness with all the associated philosophy was launched by American doctor Halbert Dunn in 1959. He defined wellness as the special state of health that includes the sense of well-being that sees man as body, spirit and mind, and dependent on its environment (in Mueller & Kaufmann, 2000). Travis (in Mueller & Kaufmann, 2000) sees wellness degrees as there are degrees of disease. Without reviewing all approaches and interpretations, we choose Ardell's interpretation (in Mueller & Kaufmann, 2000, p.6) that wellness is a state of health that involves the harmony of body, mind and spirit with self-responsibility, with care for physical beauty, a healthy diet, relaxation, meditation, mental activity / education, environmental sensitivity / social contacts. Two other terms are used together, namely: wellness and well-being, the first referring to the state of health while the second concerns all aspects of life (McMahon, Williams & Tapsell, 2010). Often, these terms are used with the same meaning as the poor translation in different languages (Smith & Puczko, 2009).

There is a close link between tourism and wellness, and its beneficial physical and mental effects are intensively studied (Chen & Petrick, 2013). The positive effects of travel experience on well-being and perceived health have been highlighted by numerous empirical studies, as Chen and Petrick's research (2013) shows.

Understanding the concept of wellness differs from a hotel structure to another and from one country to another. In Romania, most hotels have a wellness center (and spa sometimes) or wellness services that are strictly limited to infrastructure and maintenance programs and virtually no part of nutrition, relaxation, socialization, etc. Also, wellness services are often seen as an extension of balneoclimate treatment. In general, wellness services are associated with the presentation of a unit / destination offering to increase its attractiveness (Rodrigues, Kastenholz & Rodrigues, 2010).

Wright State University (in Konu, Touhino & Koumpplu, 2010) presents a wellness system that includes: physical, mental, spiritual, career, social life, family and financial component. An imbalance results if a component is underdeveloped or neglected.

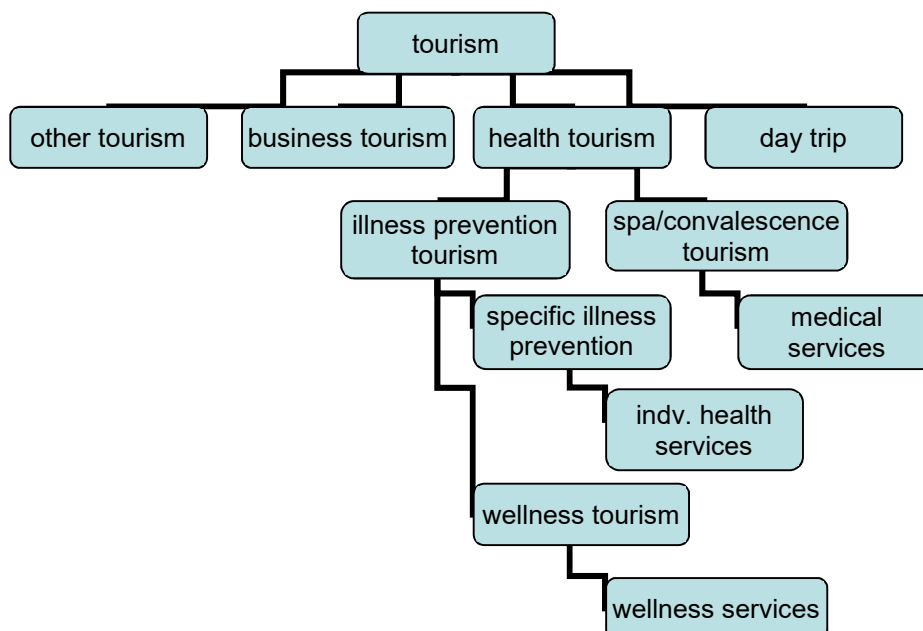


Figure 1: Subordination of wellness services within the tourist offer
 Source: Mueller & Kaufmann, 2010, p.8

Pesonen, Laukkanen & Komppula (2011) present the most common associations with wellness services, namely association with luxury (Konu et al., 2010) and expensive services (Smith & Puczko, 2009). Consequently, customer segments wellness services are seen as being composed of: people with high income older persons, motivated by the desire for relaxation and escape (Smith & Puczko, 2009). However, in many cases, linking the concept of wellness tourism to the elderly is done through the health problems most faced (Joppe, 2010). It is considered that wellness tourism prevents, relieves or treats certain diseases. In this case, any elderly person can be found in the target market. In some countries, wellness has become a label for added value added to services and as a way of positioning hotels on the luxury market (Gelbman in Pesonen, Laukkanen & Komppula, 2011). There is no strict list of facilities and wellness services that a hotel that claims to offer wellness, but we will make a summary of some empirical studies among the wellness hotels. Thus, Mueller and Kaufmann (2010, p. 12) analyze the wellness facilities and services offered in the offer of 3-5 star hotels (Table 1), which is completed by dividing the hotels into four categories: software hotels, hardware hotels, 'fake wellness hotels' and 'traditional medical cure institutions'.

2. Presentation of the Hotel¹ in Baile Felix

In Romania, around the consistent sources of thermal waters have developed centers / resorts with balneological profile, spa resorts.

Completing the balneological offer of the hotels in the spa resorts was made as a response to the influences from the traditional tourism pools in the world.

Baile Felix is a balneoclimatic resort situated in Sânmartin commune in Bihor County, Romania. Felix Bath is at approx. 10 km south of the city of Oradea and is now considered to be the largest spa resort in the country, according to its capacity of accommodation and second place, after the Black Sea coast, regarding the permanent regime and the number of accommodation places. The facilities in this resort allow for the successful treatment of rheumatism and neurological, gynaecological diseases, and medical facilities have facilities for electrotherapy, hydrotherapy, aerosols, massages, paraffin wraps and other balneal treatments. Băile Felix resort also allows for relaxing tourism.

Through the network of hotels and other structures, Baile Felix offers approx. 7200 accommodation places. Since 1995 it has been operating in the S.C. Tourism Felix S.A., which has made massive investments in tourism infrastructure in recent years. The main attractions revolve around the thermal water, with swimming pools, treatment and recovery centers, SPA centers, 5 star hotels and 2 star hotels.

3. Purpose, objectives and hypotheses of research

The purpose of the research is to identify the type of offer, the profile and the consumer preferences of the tourists within the Hotel in view of the positioning on the wellness tourism market.

The research is quantitative, cross-sectional, aiming to collect and compare information on the wellness tourism market in the hotel in Baile Felix. The research method was the questionnaire-based survey with operator application. The research period was November 25, 2015 - January 11, 2016 and targeted tourists at the Băile Felix Hotel. A total of 101 questionnaires were applied, of which 100 were validated. The tool was a questionnaire with 17 questions: 10 closed questions with one permissible answer, 3 with several possible answers, and 2 with the 5-level Likert scale. There were two open questions in the questionnaire.

The assumptions of the research are:

H1: The wellness offer of the studied unit is incomplete

H2: The hotel's clientele is not wellness-specific

H3: The hotel's customer preference is for balneological services, above all

H4: The hotel's current customers are satisfied with the quality of the services they received (a hypothesis based on the high percentage of customers who have been accommodated at this hotel)

¹ It is a four star hotel in Baile Felix. We did not use his name to hurt his public image. We will refer it in this paper as *Hotel*

4. Analyze data and interpret the results

H1: The wellness offer of the studied unit is one incomplete former and 2 open questions.

In general terms, wellness tourism is made by people concerned with maintaining or improving health and who, during their travel and stay, use services that help them in this direction. The sensitive aspect of the problem is that wellness refers to physical and mental health and spiritual balance. As a result, the services that make up the wellness offer should reach all these dimensions: physical, mental and spiritual. Because there is not necessarily a list of services and facilities that a wellness hotel has to offer, we have gone into testing the hypothesis from a study of several units that have a wellness offer (Table 1).

Table 1: Comparative analysis of wellness facilities and services offered by the hotel analyzed

Wellness facilities and services (Source: Mueller and Kaufmann, 2010, p.12)	Wellness facilities and services at Hotel
Wellness facilities provided by hotel groups	Wellness facilities provided by hotel groups
1. Sauna 2. Solarium 3. Sport fitness 4. Steam bath 5. Swimming pool 6. Whirlpool 7. Medical center	1. Sauna 2. Solarium 3. Sport fitness 4.- 5. Swimming pool 6. Wellness Whirlpool 7. Medical center
Wellness services provided by hotel groups	Wellness facilities provided by hotel groups
1. Healthy nutrition 2. Supervised sport 3. Massage 4. Culture 5. Relaxation Other services	1. - 2. Individual and group kinetotherapy and hydrokinetotherapy 3. Massage 4. - 5. Relaxation procedures with thermomineral water Other services
-	Walkway with river stones Geriatrics and gerontology (prevention and treatment of aging) Facial Treatments Gerovital

Source: processed on the basis Mueller & Kaufmann, 2010, p.12

After Wellness Tourism Worldwide (2011), the most popular wellness tourism services are:

- Beauty treatment (89% of respondents said they are very popular and popular)
- Sports and fitness services (89%)
- Spas for rest and recreation (85%)
- Spas and wellness spas (83%).

The hotel analyzed was spa treatment, having a tradition in this area. The analysis of the services and wellness facilities that the hotel has revealed shows a good service coverage, with two essential categories being missing: the differentiated menu and the cultural component (entertainment, animation, socialization).

We confirm H1 that the hotel analyzed does not have a complete wellness offer. We mention that an offer complete does not require the existence of all possible wellness services but services of all main categories that reach the three components: physical, mental and spiritual. At the analyzed hotel, the physical component is predominant and spiritual component is missing.

H2: The hotel's clientele is not wellness-specific

As the analysis of the sample of customers shows, most customers have previously been accommodated in this hotel. Of the 57 respondents who said they had been staying at this hotel 56.14% were multiple times, 22.81% were 2 - 3 times and 21.05% were only once. We can assume that they are the customers of the spa services the hotel offered in the past.

In formulating this hypothesis, we started from the classic profile of the wellness services consumer (Chen & Petrick, 2013), which has the following characteristics: female gender, average age (45-60), over-average income. We add university undergraduate studies.

For the studied sample, we checked the predominant (female) segment: how many women are aged 45-60, over-average income (over 2000 lei).

According to the analysis of the data gathered, most of the tourists (88%) from the Hotel are from Romania, in a very small proportion we find tourists from other countries like Israel, Germany, and Italy. Within the analyzed sample, 59% of the respondents are female and 41% are male. The sample was one of availability, but the share of women steadily exceeds the percentage of men among the hotel's clientele. Of the total of 100 people included in the sample, 47% are employees, 22% entrepreneurs, 16% retirees, 6% farmers, 3% students / 3% households and 3% unemployed.

Regarding the last graduate school of the interviewed persons, approx. half of the sample are college graduates (54%), followed by those who graduated from a postgraduate school (15,00%), high school (14%), respectively those who graduated from post-secondary school by 7% and the general school with a percentage of 6%, and with the lowest percentage, 4% are those who graduated from vocational school. Regarding the average monthly income of tourists at the Hotel we can see that most (23%) fall into the income category of 1,050 lei - 2,000 lei. With a very close percentage, 22% are in the category 2,000 lei - 3,000 lei and over 5,000 lei. Very close are those in the category 3.000 lei - 5.000 lei with a percentage of 21%. The lowest percentage (7%) is represented by the average monthly income category below 1.050 lei.

According to the data collected, the majority of the sample are those aged 50-64 years (38%), followed by those aged 34-49 (36%) and those aged 20 - 34 years

(14%). A lower percentage (9%) were retirees and young people (3%). Consequently, we do not validate the H2 hypothesis.

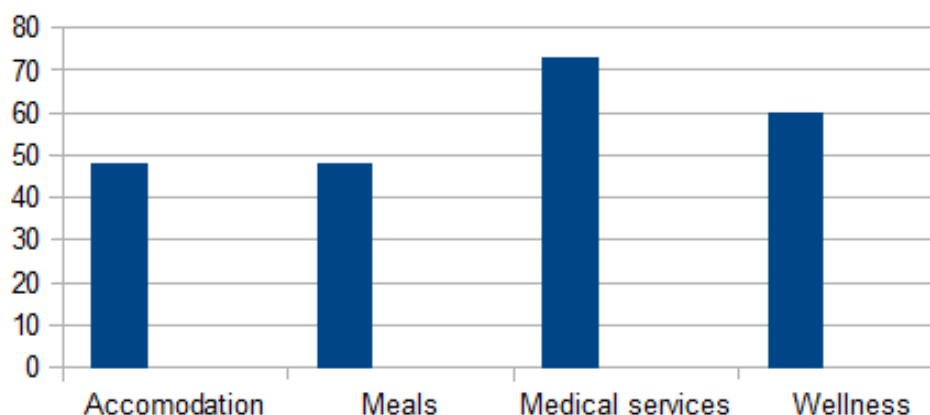


Figure 2: Preferred services by surveyed persons

Source: made by the authors

Structure of the predominant clientele: women (59%) of which 67.79% have university and postgraduate studies, 32.2% are aged 35-64 years and 67.79% have higher than average earnings. With an age difference, we invalidate H2, and we say the hotel's clientele is wellness-specific.

H3: The hotel's customer preference is for balneological services, above all

From the data presented above, we can see that 57% of the respondents have already been accommodated at the hotel, and the remaining 43% have not been accommodated at this hotel. Of the total of 100 people in the sample, most of them 45% have chosen this hotel on the recommendation of their friends, 32% on the Internet 14% through a travel agency, 5% on a booking website, and 4% have chosen this hotel from other sources. According to the above data, the most preferred (purchased) services were: medical services followed by wellness services, accommodation and meals. This situation shows us that, of hotel guests only consume wellness and medical services without being accommodated at the hotel (Figure 2). The hierarchy of wellness services according to the frequency of choice by the clients (Figure 3) shows that the first places are occupied by: the use of the wellness pool, the use of the indoor pool, relaxation baths with thermal water etc.

Question # 15 investigates what other services the tourists would prefer to find at the hotel, a key question for showing consumer preferences. This was an open question. The results show that tourists would also like to find other services at the hotel, such as a large-area laser procedure, entertainment services and hot and cold water pools.

The main services chosen are medical and wellness, even by customers staying in other accommodation facilities or coming from the proximity. The main wellness services chosen by the tourists are: indoor swimming pool, wellness pool, relaxation baths with thermal water, therapeutic massage, thermal water relaxation showers, river walkway, and fitness services. The less-chosen wellness services are relaxing

massages, cosmetic treatments, anti-cellulite massages and toning massages. The client's preference is for balneological medical services (among those that exist) as well as for entertainment services (which do not exist), so we can only validate the hypothesis H3, only partially.

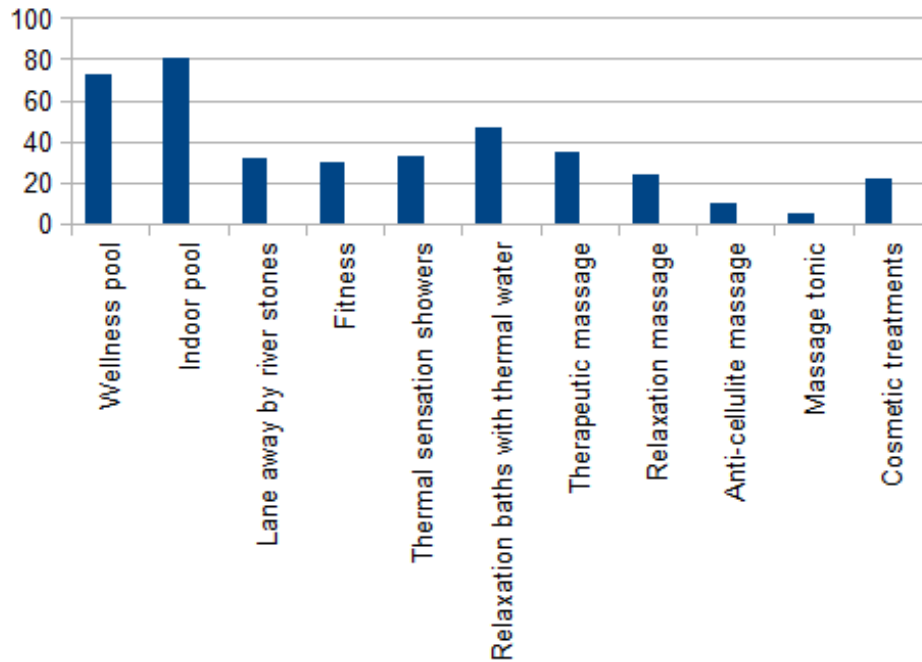


Figure 3: Preferred wellness services by those surveyed

Source: made by the authors

H4: The hotel's current customers are happy with the quality of the services they received

Regarding the degree of satisfaction with selected wellness services, the average is 4.78 on a 5-step scale. Ratings on quality attributes are presented in Table 2.

Given 1 to 5 values 1- Very dissatisfied, 2-Dissatisfied, 3-Indifferent 4 - Satisfied, 5-Very satisfied after sampling, Result that out of the total of 100 people surveyed, the average score is 4.78.

Question 13 was an open one and called for the establishment of an association of wellness services with one word. The most common responses were "relaxation, health, very good, professionalism."

We can observe that the extent to which the people surveyed were satisfied with the wellness services offered by the hotel are in all cases between satisfied and very satisfied. Consequently, we validate the H4 hypothesis. This hotel, chosen as a subject of study, is designed as a modern spa, relaxation and conference center, reopened in early 2007 after extensive renovations, modernization and expansion. Renowned for its therapy programs, the Wellness & SPA center and treatment of the hotel ideally use the healing properties of the water, thus continuing the millenary tradition of baths with thermal water. The hotel has a capacity for accommodation in

110 double rooms (of which 3 rooms for disabled persons), 80 single rooms and 20 suites. Each room is equipped with balcony, minibar, telephone, cable TV, internet connection, safe, air conditioning, hairdryer and bathrobe. It is the only hotel in Romania to which the certificate was granted EUROPESPA - med, showing that the European Spas Association standards (ESPA) on general therapy infrastructure, hygiene and safety of tourists.

Table 2: Evaluation of wellness services at the hotel

Answer options	Absolute Frequencies					
	The material basis	Attitude of the staff	Duration of procedures	Ambiance	Waiting time	Quality of supplies
1 Very dissatisfied	-	-	-	-	-	-
2 Dissatisfied	-	-	-	-	-	-
3 Neutral	1	4	4	-	-	3
4 Satisfied	14	18	18	16	14	26
5 Very satisfied	85	78	78	84	86	71
Medium	4.84	4.74	4.74	4.84	4.86	4.68

Source: made by the authors

5. Conclusions and limits of research

The research shows that the wellness offer of Băile Felix, although it has a complex offer, does not have a complete clue in the wellness vision. His offer is completely lacking in the spiritual component but also in the social component, which is also mentioned by current clients. The second hypothesis was invalidated, namely, it was found that the current customer service profile of the analyzed hotel is one of a wellness consumer. It is generally believed that a wellness consumer needs to have over-average income, generally speaking women, 45-60 years age and people with higher education.

As regards the third hypothesis on consumer preferences, it was found that they really preferred the specific balneological offer. However, they mentioned that they would like other services, services that best fit wellness offer, respectively entertainment and socialization. As far as consumer satisfaction with the services received is concerned, they are satisfied. In fact, a high percentage of customers have already used the services of this hotel in the past.

The problem of the wellness offer could be solved through a standardization of these services, thus ensuring all the mandatory components of body, mind and spirit. Even if the present customers are pretty satisfied per globally, they need services for improve their spiritual and intellectual parts of their life. By definition, wellness tourism should do that so the wellness offer of the hotels have to be diversified and completed.

A limit of this study is given by the small sample of consumers interviewed and by the fact that a single hotel was chosen.

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