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Determinants of expenditures on wellness services:
The case of Gran Canaria

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Abstract

Regions specialising in tourism or interested in developing tourism should focus their marketing efforts on the tourism demand segments that generate greater revenue. This research analyses wellness tourist demand and identifies the determinants of expenditure during a stay in a wellness destination. To that end, European tourists visiting wellness centres on the Spanish island of Gran Canaria were interviewed. The results reveal that the principal determinants of expenditure on wellness services are the characteristics of the trip, behaviour as international travellers and some sociodemographic attributes of the tourists.

Key words: tourism, tourist destination, tourist demand, wellness tourism, tourist expenditure.

JEL Codes: L83, M10, M20, M30

Introduction

The tourism and travel sector has become one of the most important economic activities and has enjoyed one of the highest growth rates in the world economy (e.g., WORLD TOURISM ORGANIZATION, 2009). International travel can be grouped into five basic categories according to the principal motivations (WORLD TOURISM ORGANIZATION, 2001): leisure, recreation and holidays, business and professional, health, religious and pilgrimage, and visits to family and friends. Each of those motivations generates a significant tourist demand comprising travellers who visit destinations with tourism offers that meet their requirements. Thus, a tourism destination may develop and market one or more tourism products in order to satisfy better the different motives for the trips, one of those motives being health and wellness tourism.
In its broadest conception, health tourism is one of the oldest motives for tourism and experienced great popularity in Ancient Greece and the Roman Empire due to the interest that those civilisations displayed in well-being and the possibility of enjoying the spas and baths of the time (LECKA, 2003; SMITH and NELLY, 2006; CONNELL, 2006). Nowadays, the recent growth in the demand for wellness services and treatments has led to the proliferation of health and wellness destinations, spas, thalassotherapy centres, spiritual pilgrimage venues, and other components of the wellness offer (SMITH and NELLY, 2006).

Wellness tourism is considered a category of health tourism (e.g., MUELLER and KAUFMANN, 2001) that can be defined as the sum of all the relationships and phenomena that occur as a result of individuals travelling from their usual place of residence to tourism destinations with the aim of promoting, stabilising and, in some cases, even restoring their physical, mental and/or social well-being by means of the consumption of services that favour health (KASPAR, 1996). In that respect, MUELLER and KAUFFMANN (2001) highlight, on the one hand, that the motivation for wellness tourism is the maintenance or promotion of health and, on the other, that the accommodation chosen for the stay in the destination must specialise in wellness, such as a hotel with a spa or wellness centre on, or near, the premises, and/or with an offer of wellness treatments. In general, destinations that specialise in wellness tourism are characterised by offering not only wellness centres such as spas or thalassotherapy centres but also natural and cultural conditions that favour relaxation, such as a mild climate, fresh air, clean water and
sand, volcanic lava, landscape, certain plant species, nature in general, religion, and the possibility of meditation (KAPCZYNSKI and SZROMEK, 2007).

According to MUELLER and KAUFMANN (2001), it is particularly necessary to generate information about the wellness vacation demand and the preferences of tourists who travel for wellness motives. This would help those tourist destinations interested in developing and marketing health and wellness tourism to design their wellness offer successfully. That type of information would also facilitate the adaptation of the wellness facilities and services currently offered by the destinations and tourism enterprises interested in this form of tourism. However, no empirical research designed to describe and analyse the health and wellness tourism demand was found in the literature. Therefore, the first objective of this work refers to the description of the tourists who visit wellness centres on Gran Canaria, one of the islands forming the Spanish archipelago of the Canary Islands.

In addition, the study of the determinants of expenditure on wellness services during the stay in the destination would be of great interest for the design of marketing strategies that permit the destination to attract “quality tourists” with a high expenditure on this component of the leisure offer (e.g., NICOLAU and MÁS, 2005). It would also contribute to the improvement of the destination’s competitiveness, understood as “its ability to increase tourism expenditure, to increasingly attract visitors while providing them with satisfying, memorable experiences, and to do so in a profitable way, while enhancing the well-being of destination residents and preserving the natural capital of the destination for future generations” (RITCHIE and CROUCH, 2003:2). Moreover, it could increase the
economic profitability and social benefits of the investments in the development of infrastructures and facilities linked to the wellness tourism product, which sometimes entail the consumption of certain scarce natural resources as well as possible environmental degradation. Therefore, the second objective of this research is to identify the determinants of expenditure on wellness services during the stay in the destination.

An exploratory empirical research was carried out in order to achieve those two objectives. The work first describes the sociodemographic attributes of visitors to the wellness centres on Gran Canaria, the principal characteristics of the trip to the island, traveller behaviour for wellness motives and the expenditure on wellness services during the stay in the destination. That is followed by an evaluation of the influence that those characteristics exercise on the probability of higher tourist expenditure on wellness services during the stay in the destination.

Individual tourist expenditure on wellness services

Research on tourists’ expenditure during their travels is of great interest to those in charge of the destinations and tourism firms interested in improving or maximising tourism revenues. However, most research on tourist expenditure has focused on tourism demand as a whole rather than on individual tourist expenditure (e.g., DWYER and FORSYTH, 2008; LAESSER and CROUCH, 2006). That macroeconomic approach does not permit the identification of the tourists with the highest expenditure during their travels.
Moreover, the few empirical works that have been designed to describe individual expenditure have not always understood it in the same way. In general, empirical works have measured the total expenditure by a tourist during one trip, which includes expenditure on transport, accommodation, food and beverages, and other leisure services (e.g., LAESSER and CROUCH, 2006; NICOLAU and MÁS, 2005; MOK and IVerson, 2000; PÉREZ and SAMPOL, 2000). However, few studies have been interested in the expenditure on certain components of the destination’s tourism offer, such as local food products (e.g., SKURAS et al., 2006) or park fees (MmoPELWA et al., 2007), and only during the stay in the destination (e.g., MEHMETOGLU, 2007; VAUGHAN et al., 2000).

This study of wellness tourist expenditure aims to contribute to the emergent field of research on tourist expenditure by products, such as rural and nature tourism (e.g., FREDMAN, 2008; KASTENHOLZ, 2005; Felsenstein and FLEISCHER, 2003; LEONES et al., 1998), nautical tourism (e.g., LEE, 2001), visits to National Parks (e.g., WHITE and STYNES, 2008; DOWNWARD and LUMSDON, 2004; SPOTTS and MAHONEY, 1991), and historic site and festival tourism (e.g., TAYLOR et al., 1993; THRANE, 2002; LONG and PERDUE, 1990). This work evaluates, in an exploratory fashion, the possible effects that the sociodemographic characteristics, behaviour as a wellness tourist and certain characteristics of the trip may have on expenditure on wellness services.

Sociodemographic characteristics. Most works that study the determinants of tourist expenditure refer to sociodemographic characteristics as possible factors that explain the differences in tourist expenditure (e.g., MEHMETOGLU, 2007;
LAESSER and CROUCH, 2006; SKURAS et al., 2006; NICOLAU and MÁS, 2005; MMOPELWA et al., 2007). The most studied characteristics include: geographical origin, gender, age, marital status, having children, educational level and occupation, which are also the variables selected in this research.

Various authors have offered empirical evidence suggesting that the geographical origin of the visitors is a determinant that favours tourist expenditure, in that the greater the physical distance between the place of residence and the destination, the higher the transport costs seem to be (e.g., LEONES et al., 1998; LEE, 2001). Other authors propose that, given the fixed cost of the transport, the greater distance to the destination also favours a longer stay and higher expenditure in the destination (e.g., SILBERMAN, 1985; NICOLAU and MÁS, 2005).

The gender of the tourist has received scant attention in the literature as a possible determinant of tourist expenditure (e.g., THRANE, 2002). However, the literature on wellness indicates that females have traditionally displayed greater concern for health, beauty and mind although a growing interest among males has also been noticed (e.g., MUELLER and KAUFMANN, 2001). Therefore, it seems logical to propose that women spend more on wellness services and treatments.

Unlike gender, the age of the tourist is one of the determinants of tourist expenditure most cited in the literature although there is no consensus on its possible impact (e.g., NICOLAU and MÁS, 2005). In general, it seems that the young and the middle-aged especially value the possibility of tourism and allocate part of their budgets to tourist expenditure, while that expenditure decreases in advanced
years. Similarly, the wellness literature suggests a stronger demand for wellness treatments among young and middle-aged individuals (e.g., MUELLER and KAUFMANN, 2001).

With regard to marital status, it is considered that married couples and opposite sex couples could exhibit a higher tourist expenditure (e.g., CAI, 1998). The principal argument for that association refers to the different purchasing behaviour of men and women in that, when they travel together, they may incur higher expenditure than two members of the same sex travelling together. That argument is not valid in this research since it measures the expenditure on wellness services by each individual and not by family, couples or friends travelling together. However, partnered individuals might also exhibit higher individual tourism expenditure because a couple may consider leisure and consumption options that perhaps they would not have considered as single travellers. Moreover, the relationship with a partner may increase interest in wellness services and treatments that may be positive to their relationship as a couple. Therefore, it is opportune to evaluate, in an exploratory fashion, whether partnered individuals have higher individual expenditure on wellness services. In addition, individuals with children usually exhibit higher tourist expenditure (e.g., AGARWAL and YOCHUM, 1999) and may also exhibit a greater need to consume wellness services and treatments as a consequence of having less time available for personal attention (MUELLER and KAUFMANN, 2001).

The empirical literature also suggests a positive relationship between the tourist’s income and his/her expenditure on tourism products (e.g., NICOLAU and MÂS,
2005; THRANE, 2002; LEE, 2001), although it is not conclusive in the case of occupation (e.g., PÉREZ and SAMPOL, 2000) or that of educational level (e.g., NICOLAU and MÁS, 2005) as determinants of tourist expenditure. However, it seems logical to propose that tourists with higher incomes and educational levels display greater expenditure on wellness services.

The review of the literature in the previous paragraphs permits the following hypotheses to be put forward:

H1. Daily expenditure on wellness services is higher when the tourist takes a long-distance trip.

H2. Daily expenditure on wellness services is higher among women than men.

H3. Daily expenditure on wellness services is higher when the tourist is young or middle-aged.

H4. Daily expenditure on wellness services is higher when the tourist is married or living with a partner.

H5. Daily expenditure on wellness services is higher when the tourist has children.

H6. Daily expenditure on wellness services is higher when the tourist has a higher educational level.

H7. Daily expenditure on wellness services is higher when the tourist has an occupation that offers a high income.

Characteristics of the trip to Gran Canaria. Some empirical works have provided results that indicate that the length of the stay in the destination is one of the principal determinants of tourist expenditure. In his research on the expenditure of the Swiss on their international travels, LAESSER (2004) observed that twice as long
a stay in the destination involves an increase of only 45.9% in the total tourist expenditure per person. That percentage rises to 62.9% in the case of international visitors to Australia (LAESSER and CROUCH, 2006). Similarly, in his study of nature tourism in Northern Norway, MEHMETOGLU (2007) concludes that tourists who stay longer in the destination are more likely to be considered “light spenders” in terms of expenditure per day in the destination. The main argument to justify those results refers to longer stay tourists having less urgency to enjoy the leisure offer in the destination and, therefore, distribute their budget for tourist expenditure over a longer holiday (e.g., LAESSER and CROUCH, 2006; THRANE, 2002).

The literature also suggests that the principal motive for the trip may be a determinant of tourist expenditure. The few empirical works to analyse that relationship have found no significant differences in tourist expenditure depending on the purpose of the trip (e.g., CAI et al., 2001; THRANE, 2002), although some authors have found lower relative expenditure on some tourism products such as sun, sand and sea (e.g., LAESSER and CROUCH, 2006). However, the main purpose of the trip may have a positive influence on spending on certain concepts of expenditure or on tourist services that may be more required, depending on the motive for the trip (e.g., LAESSER and CROUCH, 2006). In that respect, it seems logical to propose that tourists who travel for wellness motives spends more on wellness services and treatments than those who travel for other motives, such as sun, sand and sea, golf, rural, cultural or business tourism.

Moreover, the factors that influence the choice of destination may also affect tourist expenditure (e.g., THRANE, 2002; LAESSER and CROUCH, 2006). More
specifically, THRANE (2002) is one of the few authors to directly analyse the
association between tourist expenditure and interest in certain tourist attractions
and concludes that tourists who display more interest in music spend more during a
music festival. Following that line of argument, it could be proposed that
expenditure on wellness services is higher among tourists who consider the offer of
spas and wellness centres important when choosing the destination for their
holidays.

In light of all the above, the following hypotheses can be made:

H8. Daily expenditure on wellness services is lower when the stay in the destination
is longer.

H9. Daily expenditure on wellness services is greater when the principal motive for
the trip is related to wellness tourism.

H10. Daily expenditure on wellness services is greater when the tourist considers
the offer of wellness centres important when choosing the destination.

Behaviour as a wellness tourist. Another criterion that may be used as an
alternative to the sociodemographic characteristics of the tourist or his/her
behaviour on a single trip to segment tourist demand is the general travel
behaviour of the tourist. Thus, MUELLER and KAUFMANN (2001) indicate that
wellness behaviour on a single trip depends on conditions such as the time
available, climatic conditions, the companions or physical and mental state of the
tourist at the time of the trip. Therefore, those authors recommend the analysis of
the general behaviour as a wellness tourist in any attempt to segment the wellness
tourism demand. However, no empirical works were found that have considered this criterion in the study of tourist expenditure.

This work analyses, in an exploratory fashion, the effect that the frequency of wellness-motivated international trips has on expenditure on wellness services. Tourists who regularly travel for wellness motives give a higher evaluation of the wellness resources and services offered by destinations and therefore it may seem reasonable to think that they probably spend more on wellness services during their stay in a destination. Moreover, their experience of wellness-motivated international travel suggests a greater knowledge of the different wellness treatments, which, in turn, facilitates the decision to purchase wellness services. Thus, the following hypothesis is proposed:

H11: Daily expenditure on wellness services is higher when the tourist regularly travels internationally for wellness motives.

Research design and methodology

Tourism on Gran Canaria

Covering an area of 1,560.10 km² and with a population of 807,049, Gran Canaria is one of the seven islands comprising the Canary Islands, a Spanish archipelago in the Atlantic Ocean. In 2008, the island received 2,685,267 foreign tourists, who stayed in its 144,954 tourist beds (CANARIAN GOVERNMENT DEPARTMENT OF TOURISM, 2009). Practically all the visitors were from Europe, in particular Germany (27.9%), the United Kingdom (22.4%) and Central and Northern Europe, where the principal countries of origin are Norway (9.0%), Sweden (7.7%), Holland (6.4%), Denmark (4.7%), Finland (4.5%), Ireland (4.1%), Switzerland (3.1%), Belgium (2.5%), Austria
(1.5%) and Italy (0.8%). Other nationalities comprised 5.4% of the foreign visitors to the island.

The climate of Gran Canaria is characterised by being spring-like all year round. The average winter shade temperatures range from 18.6°C in March to 24.6°C in October and November. Those favourable climatic conditions, together with the attractiveness of its beaches and coastline lead almost 80% of Gran Canaria’s tourists to mention sun, sand and sea tourism as the main motive for their visit. The island also boasts tourist attractions and an important business offer linked to other tourism products, such as rural tourism, golf or wellness; therefore, the island’s government and tourism sector have set the objective of increasing the number of visitors with motives other than sun, sand and sea. In that context, wellness tourism has been chosen as a tourism product around which the tourist demand can diversify. By the end of the 19th Century, British health tourists were already being drawn to Gran Canaria by its climate, the quality of its underground waters and its other natural resources. Apart from the favourable natural conditions, the island has also developed a significant offer of spa and wellness centres and hotels that offer wellness services.

Research approach and survey
The research method chosen for this work was the survey and the type of questionnaire used was the “face-to-face” personal interview, which was conducted on visitors to the 15 wellness centres that form part of the “Gran Canaria Spa&Wellness” association. That association comprises tourism entrepreneurs providing wellness facilities and services and its objective is to
market the island’s wellness offer in the principal tourist origin markets of Europe in coordination with the Tourism Office, which is the organisation responsible for marketing Gran Canaria as a tourism destination.

The design of the questionnaire on the basis of previous works and expert opinions reinforces the validity of content and validates the measurement instrument used in this research (BABBIE, 1995; HAMBRICK, 1981). The process of designing the questionnaire began by preparing a list of possible determinants of tourist expenditure on wellness services, based on a review of the existing literature (e.g., MEHMETOGLU, 2007; MMOPELWA et al., 2007; LAESSER and CROUCH, 2006; NICOLAU and MÁS, 2005). The few academic and professional publications on wellness tourism were also taken into consideration (e.g., MUELLER and KAUFMANN, 2001; GARCÍA-ALTÉS, 2005; SMITH and KELLY, 2006; KAPCZYNSKI and SZROMEK, 2008). Then, a focus group was organised, in which six experts, who were representatives of the “Gran Canaria Spa&Wellness” association, participated with the aim of analysing the concept of wellness tourism, describing the profile of wellness tourists and, in particular, identifying the characteristics of the tourist and the trip that could affect the level of expenditure on wellness services. The conclusions of that meeting were considered in the preparation of the second draft of the questionnaire.

In order to perfect the second draft of the questionnaire for wellness centre customers and reduce its length, and to design the fieldwork in the wellness centres, a specific questionnaire for the managers of the 15 wellness centres in the association was drawn up. The responses of all those association members not only
permitted the questionnaire to be reduced by eliminating the items that were
given the lowest rating by those experts, but also provided an estimation of the
capacity and average occupancy of each wellness centre and knowledge of some
characteristics of their customers. The new version of the wellness centre
customer questionnaire was prepared taking the results of a pretest on 20 visitors
to wellness centres into consideration.

The final version of the questionnaire comprised three clearly differentiated
sections. The first section contained open and closed questions to identify the
sociodemographic and classification characteristics of the respondents: place of
origin, gender, age, marital status, having children, level of education, and present
job status. The second section asked about the following characteristics of the trip
to Gran Canaria: the length of stay in the destination, the principal motive for the
trip, the importance of wellness centres in the choice of destination, and the
approximate expenditure on wellness services during the stay on the island. The
third and final section asked about the frequency with which the tourist makes
international trips for wellness purposes.

Data collection and sample selection
A team of 18 interviewers conducted the surveys in the island’s 15 wellness centres
in October and November 2007. Two interviewers, who between them spoke at
least Spanish, English and German, were assigned to each centre. A total of 989
wellness centre users completed the questionnaire correctly and the sample error
was 3.1% for a reliability level of 95%.
Each wellness centre was represented in the total number of completed questionnaire, in accordance with criteria such as the maximum daily capacity of each centre and the average daily number of customers visiting each centre during October and November of the previous two years. Furthermore, in order to guarantee randomness in the selection of customers, as a general guideline, each pair of interviewers interviewed each and every customer of a wellness centre as they exited the centre after receiving wellness services. Interviews were conducted every day of the week in order to avoid any possible related bias. When the data gathering stage had ended, the variables were codified and the data contained in each valid questionnaire were tabulated. The data were recorded directly in the editor of the SPSS program for Windows, the statistical package used in the analyses.

Results

Sociodemographic characteristics of the customers of the wellness centers

This section presents the results of the descriptive analysis of the sociodemographic characteristics of the tourists participating in this research; thus, the general characteristics of the demand for wellness on Gran Canaria are described (see Table 1). The tourists living on other islands in the Canarian Archipelago represented 19.37% of the 989 tourists who visited wellness centres while those from the rest of Spain constituted 16.5% and the remaining 64.13% comprised residents of other European countries. More specifically, the most represented nationalities of the foreign tourists were those of the two large tourist origin markets in Europe: Germany (38.99%) and the United Kingdom (27.52%). The remaining 33.49% came from various countries, particularly from Holland,
Switzerland, Ireland, Belgium, Austria and France. The distance from Mainland Spain and Continental Europe to the Canary Islands means that the cost of air transport is much higher than for residents of the other Canary Islands. Therefore, in later analyses, the spending behaviour of residents of other Canary Islands will be compared with that of other Spanish and European visitors.

INSERT TABLE 1

With regard to the gender of the respondents, women represented 53.7% of the customers and men 46.3%. However, women represent only 33.64% of the visitors to the island (CANARIAN GOVERNMENT DEPARTMENT OF TOURISM, 2009), which leads to the conclusion that female tourists make more use of the wellness and spa centres than male tourists. The average age of visitors to the wellness centres was 42 years. An analysis of the age groups revealed that almost 40% of the customers were younger than 36 years old (39.87%). The percentage was similar (41.59%) in the case of the market segment comprising tourists of between 36 and 55 years old. The oldest customers represented the remaining 18.54%, with the over-65s making up 6.02% of the tourists who make use of wellness facilities and services.

In the case of marital status, 72.39% of the customers of spa and wellness centres on Gran Canaria were married (55.74%) or living with their partners (16.65%). Unmarried individuals not living with a partner comprised the next largest group (20.91%), followed by the divorced or separated (4.77%) and widows/widowers (1.93%). Moreover, 64.35% of the respondents have at least one child, which could
significantly influence their behaviour as tourists. The high presence of that market segment suggests the importance of offering complementary activities for children.

The educational levels stated by the respondents indicate that the wellness centre demand has higher or intermediate levels of education. More specifically, it is notable that half of the respondents have finished higher university degree courses while 31.10% have completed intermediate studies and 16.77% elementary studies. Only 1.63% of wellness tourists have no completed official studies. The professional and labour situations permit the potential income and tourism expenditure to be estimated. The results obtained in this study reveal that the most common situation is one of a non-managerial employee of a firm, which is the case of 35.79% of the respondents. However, the high presence of managerial employees (18.10%) and, especially, of entrepreneurs and self-employed individuals (22.49%) should be highlighted. Those two segments of tourist demand represent 40.59% of the total wellness demand. The significant presence of pensioners and retirees deserves mention since they represent 9.3% of wellness customers.

Characteristics of the trip and frequency of wellness-motivated trips

The customers of wellness centres spend an average of almost 8 nights on the island and their principal motive for the trip was the possibility of enjoying sun and beach: 58.82% of the surveyed tourists. However, that percentage is lower than the 80% obtained for all the tourists that visit the island (CANARIAN GOVERNMENT DEPARTMENT OF TOURISM, 2009). Those results suggest a greater diversification of the wellness centre demand than of the island’s total tourist demand according to the principal motive for the trip. The second most important motive for visiting the
island refers to wellness tourism and the possibility of enjoying wellness and spa centres: 24.59%. That is followed by professional and business tourism (6.31%), attending a conference, seminar or similar event (1.42%) and visiting family members (2.19%). However, health tourism linked to surgery or the treatment of an illness was the least important motive among visitors to the wellness centres on Gran Canaria: 0.77%. The other motives (rural, cultural, nautical, cruise, golf and sport tourism, and special events) were mentioned by less than 1.2% of the surveyed tourists.

Moreover, the results obtained in this research suggest that the availability of wellness-related leisure tourism is an attractive complement to a visit to the island for any other primary purpose. More specifically, 42.7% of the interviewees indicated the medium or high importance of the possibility of enjoying wellness centres at the time of choosing the destination for their holidays.

The current low level of knowledge about the profile of wellness tourists has led some authors to recommend the analysis of the general behaviour of the traveller for wellness motives rather than that of behaviour on a single trip (e.g., MUELLER and KAUFMANN, 2001). With regard to international travel for wellness purposes, 62.92% of the interviewees had never travelled for that reason. That high percentage supports the recentness of the idea of holidays for wellness purposes although all predictions point to a significant increase in wellness-motivated international travel in coming years (e.g., WORLD TOURISM ORGANIZATION, 2009).

An explanatory model of expenditure on wellness services
The tourists spent a daily average of 29.39 euros on wellness services during their stay on the island. According to figures published by the CANARIAN GOVERNMENT DEPARTMENT OF TOURISM (2009), that amount is slightly lower than the mean daily expenditure of the total tourists who visit Gran Canaria (38.72 euros). Thus, if we add the other expenditure in the destination (e.g., transport, food, and other leisure services) to that spent on wellness services, it is highly probable that the total daily expenditure in the destination by the customers of the island’s wellness centres is greater than the average expenditure of all visitors to Gran Canaria.

In line with previous empirical studies (e.g., KOZAK et al., 2008; JANG et al., 2004), an ordinary least squares (OLS) regression analysis was conducted in order to evaluate the hypotheses proposed in this work regarding possible determinants of expenditure on wellness services. According to NICOLAU and MÁS (2005), the majority of the studies on holiday expenses are based on the classical regression methodology, which seems to be appropriate when the dependent variable is quantitative and the number of null observations (nil tourist expenditure) is not large. The use of truncated regression models on the sub-sample resulting from the elimination of nil values would be an alternative whenever the number of nil values is large and the size of the sample does not allow the gathering of a wide range of possible values. However, in this study, the dependent variable referred to the amount of euros spent on wellness services per day; the tourists were interviewed as they exited a wellness centre after receiving wellness services, which minimises the number of tourists who reported zero; and a total of 989 wellness centre users participated in this research.
Specifically, the OLS regression analysis was conducted by using the log value of the wellness expenditure per tourist per day with a view to achieving a better fit of the model (e.g., JANG et al., 2004). The independent variables included in the model referred to the 11 possible determinants of daily wellness expenditure reflected in the hypotheses proposed in this work. Age ($X_3=$ number of years) and stay in the destination ($X_8=$ number of nights) are quantitative variables. Geographical origin ($X_1$) was split into two different dummies in order to identify possible different structural behaviours based on the geographical origin: “tourists from European countries” ($1=$ yes, $0=$ no) and “tourists from Spain” ($1=$ yes, $0=$ no); the base case (zero for both dummies) is represented by tourists from the Canary Islands. Gender ($X_2$) was measured as $1$ if male, and $0$ if female. Similarly, having children ($X_5$) had two different values ($1=$ one or more children, $0=$ childless); tourists were not asked about the specific number of children.

The other independent variables included in the model were recodified based on the theoretical foundation of the hypotheses. Marital status ($X_4$) achieved two different values: $1=$ married or living with partner, and $0=$ other situations; this option was chosen because of the theoretical interest of an analysis of possible differences in the daily wellness expenditure of tourists with partners and that of the tourists in other situations ($H_4$). Educational level ($X_6$, where $1=$ higher education, $0=$ intermediate education or lower) and occupation ($X_7$, where $1=$ businessperson or self-employed, $0=$ other job situations) were selected as proxies of income. As stated in $H_6$ and $H_7$, daily expenditure on wellness services is expected to be higher when the tourist has a higher education level and his/her occupation offers a high income. With regard to the principal motive for the trip
(X9), a dummy variable was used with value of 1 if the motive is wellness tourism, and 0 otherwise. Importance of wellness centres in the choice of destination (X10) was measured with value of 1 if it is moderately or very important, and 0 in the case of unimportant or moderately unimportant. Finally, frequency of international trips for wellness (X11) was measured with two values: 1= some frequency, 0= never.

Table 1 displays the values of the mean and standard deviation obtained for the daily wellness spending of each group of tourists identified in the 9 qualitative independent variables. The correlation analysis between the different independent variables generated correlations values below 0.333 and no significant association was found (BACHAUS et al., 2000).

The results of the OLS regression analysis are shown in Table 2. The model diagnostics could be considered adequate since the model F value was 11.195 at an observed significance level (p< 0.01). Moreover, the adjusted \( R^2 \) achieved a value of 0.318, suggesting that the independent variables explained about 32% of the observed variance of the daily wellness expenditure. Specifically, seven of the 11 independent variables in the model affected the dependent variable.

INSERT TABLE 2

With regard to the sociodemographic characteristics, only three of the seven possible determinants of daily expenditure on wellness were significant: geographical origin, age and having children. As can be seen in Table 2, the
standardised regression coefficients indicate that “geographical origin - tourists from European countries”, “age” and “having children” are significantly and positively associated with “daily expenditure on wellness”. As expected, the average daily spending on wellness services is significantly higher if the geographical origin of the tourist is a long distance from the destination and if the tourist has children. However, the daily expenditure on wellness significantly increases with the age, while the wellness literature suggests a stronger demand for wellness treatments among young and middle-aged individuals. Beta values also suggest that “geographical origin - tourists from European countries” has a stronger association with “daily expenditure on wellness services” in comparison with “age” and “having children”. Additionally, “gender”, “marital status”, “educational level” and “occupation” have no significant influence on “daily expenditure on wellness”. Therefore, hypotheses H1 and H5 are not rejected by the results while H2, H3, H4, H6 and H7 are not supported.

The three characteristics of the trip to Gran Canaria that were evaluated as possible determinants of “daily expenditure on wellness” were significant. As Table 2 shows, Beta values also suggest a strong association. More specifically, expenditure on wellness services increases when the tourist considers the presence of wellness centres important and the principal purpose of the trip is to practice wellness tourism. With regard to “stay in the destination”, measured as the number of nights in the destination, the findings suggest the content of H8, to the extent that “stay in the destination” had a significant negative association with “daily expenditure on wellness services”, meaning that the lower the stay in the
destination, the higher is the daily expenditure on wellness. Thus, hypotheses H8, H9 and H10 are not rejected.

The frequency of international trips for wellness motives is another variable that enables significant differences in wellness spending to be identified. More specifically, tourists that have previously taken trips for wellness purposes spend significantly more money on wellness services per day in comparison with those who have never travelled abroad for wellness motives. The Beta value suggests a strong positive association (see Table 2). Therefore, exploratory hypothesis H11 is not rejected.

Conclusions
One of the main trends in tourism is the appearance and rapid spread of new motives, such as wellness tourism, to take international trips. This work argues that it is necessary to know the characteristics of that new demand so that regions interested in tourism development can successfully design the tourism offer associated with those new tourism products. The first objective of this research was to describe the tourists who visit the wellness centres on Gran Canaria, an important Spanish sun and beach destination that has committed to the diversification of its tourism offer by developing the wellness tourism product.

In that regard, one pioneering academic and professional contribution of this work is that it provides empirical evidence about the wellness tourism demand. In particular, it describes the sociodemographic profile of the tourist, the characteristics of his/her trip to Gran Canaria and the frequency of his/her
international trips for wellness purposes. Moreover, it shows that such tourists
display a high level of spending on wellness services during their stay, which may
increase their total expenditure in the destination to above the average of the
island’s visitors as a whole.

The second objective of this study was to identify the tourist characteristics that
contribute to an explanation of the higher expenditure on wellness services during
the stay in the destination. That objective has its theoretical basis in the literature
on the tourism competitiveness of a region and in the importance of the
maximisation of tourism revenues by tourist regions or by regions interested in
developing tourism. In that respect, the destination’s marketing policy and strategy
should focus not only on capturing and satisfying the market segments that are
most attractive in terms of and tourist spending during the stay in the destination
but also on promoting sustainable development.

The main academic contribution of this study refers to the generation, for the first
time in the literature, of an explanatory model of tourist spending on wellness
services during the stay in the destination. Moreover, the results also reveal the
importance of analysing traveller behaviour in general as a principal criterion to
identify the tourists with greatest spending potential during their stay in the
destination. Also important are the characteristics of the trip, such as the length of
the stay in the destination, the principal motive of the visit and the importance
that the tourist attaches to each component of the leisure offer. Thus, while the
sociodemographic characteristics of the tourists are the most used, they are not
sufficient to give an understanding of spending in the destination.
With regard to the professional implications, the results of the work suggest that the managers of the destination and the wellness centres should direct their marketing and communication strategies toward the market segment comprising tourists who regularly take trips for wellness reasons. They should also concentrate their marketing efforts on capturing tourists who visit the destination for wellness motives and who consider the offer of wellness centres important when choosing the destination for their holidays. With a view to reaching these market segments, direct promotions and communications actions (e.g., specific sales promotions and advertising campaigns) aimed at customers of wellness centres could be implemented in major origin markets. These actions could be extended to the members of sports clubs and associations, and any other organisation that might be interested in promoting health and wellbeing amongst their members, including those against some types of disease. Additionally, it would be valuable to work with intermediaries specialising in wellness tourism, including tour operators, travel agencies and on-line intermediaries selling wellness travel.

Moreover, a shorter stay and a longer distance between the place of residence and the destination also contribute to explaining higher expenditure in the destination, possibly because the fixed cost of travelling to the destination leads the tourist to increase his/her spending efforts in order to obtain the greatest benefit from the high fixed cost of transport services. However, tourists who incur lower transport costs and stay a longer time in the destination distribute their spending over the entire holiday and, therefore, their daily spending decreases. For that reason, it would be interesting to design promotions for short stays and trips although that
might entail greater risk in terms of maintaining the same level of occupancy in the
destination’s accommodation establishments. In any case, what is important is the
maximisation of revenues and margins rather than of the number of tourists.

On the other hand, the sociodemographic characteristics, such as gender, marital
status, educational level and occupation, do not explain expenditure on wellness
services. However, the literature on tourist spending emphasises those variables as
possible determinants of spending and, moreover, they constitute criteria for
tourism demand segmentation that are quite frequently used by the heads of
tourist destinations and the marketing managers of tourism firms. The results
obtained in this research confirm that geographical origin, age, and having children
are the only sociodemographic characteristics that may explain spending on
wellness services.

Therefore, another professional implication refers to the appropriateness of
designing promotions and communications actions aimed specifically at tourists
coming from major international markets, particularly those who are middle-aged
or senior citizens and those with children. Wellness packages could be further
designed to better satisfy the needs of those market segments. For example, a
complementary leisure offer for children could be offered to parents interested in
health and wellbeing, who would then be able to take advantage of the wellness
services while the children are entertained in a safe environment; moreover,
innovative wellness activities for parents and children to enjoy together could be
developed. With regard to age, special packages of wellness treatments and
services could be offered based on the most common ailments and health problems among the elderly.

With the aim of improving the explanatory model generated in this work, it is recommendable that future research analyses other possible determinants of tourist spending, such as the type of accommodation and how the trip was organised. It would also be interesting to design new studies of wellness expenditure by nationality in order to analyse possible cultural differences that may help explain the higher expenditure on wellness. Moreover, a more detailed analysis could identify the wellness treatments and services with greater potential demand and on which spending could be increased. Finally, similar empirical studies could be designed and applied to other regions and tourist destinations as well as to tourism products other than wellness tourism, such as health tourism, sun, sand and sea tourism, cultural tourism, rural tourism, golf tourism, sports tourism or business and events tourism.

References


World Tourism Organization, Madrid.
Table 1. Characteristics of the tourists and the daily expenditure on wellness

<table>
<thead>
<tr>
<th></th>
<th>% of total</th>
<th>Daily expenditure on wellness</th>
<th>Mean</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total respondents</td>
<td>100%</td>
<td>29.39</td>
<td>29.39</td>
<td>39.24</td>
</tr>
<tr>
<td>X1. Geographical origin</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tourists from European countries</td>
<td>58.16%</td>
<td>42.54</td>
<td>49.79</td>
<td></td>
</tr>
<tr>
<td>Tourists from the rest of Spain</td>
<td>22.47%</td>
<td>28.73</td>
<td>41.21</td>
<td></td>
</tr>
<tr>
<td>(Tourists from the Canary Islands) (a)</td>
<td>19.37%</td>
<td>24.73</td>
<td>34.24</td>
<td></td>
</tr>
<tr>
<td>X2. Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1= Male</td>
<td>46.3%</td>
<td>28.83</td>
<td>42.49</td>
<td></td>
</tr>
<tr>
<td>0= Female</td>
<td>53.7%</td>
<td>29.86</td>
<td>36.46</td>
<td></td>
</tr>
<tr>
<td>X3. Age (b)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>X4. Marital status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1= Married or living with partner</td>
<td>72.39%</td>
<td>29.61</td>
<td>42.30</td>
<td></td>
</tr>
<tr>
<td>0= Other situations</td>
<td>27.61%</td>
<td>28.76</td>
<td>28.50</td>
<td></td>
</tr>
<tr>
<td>X5. Having children</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1= Yes</td>
<td>64.35%</td>
<td>37.85</td>
<td>56.32</td>
<td></td>
</tr>
<tr>
<td>0= No</td>
<td>35.65%</td>
<td>25.26</td>
<td>26.57</td>
<td></td>
</tr>
<tr>
<td>X6. Educational level</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1= University graduate</td>
<td>50.51%</td>
<td>29.93</td>
<td>39.00</td>
<td></td>
</tr>
<tr>
<td>0= Lower and intermediate education</td>
<td>49.49%</td>
<td>28.93</td>
<td>39.52</td>
<td></td>
</tr>
<tr>
<td>X7. Occupation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
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<tr>
<td>--------------------------------</td>
<td>-------</td>
<td>-------</td>
<td>-------</td>
<td></td>
</tr>
<tr>
<td>1= Businessperson / self-employed</td>
<td>22.49%</td>
<td>31.96</td>
<td>33.12</td>
<td></td>
</tr>
<tr>
<td>0= Other work situations</td>
<td>77.51%</td>
<td>28.61</td>
<td>40.92</td>
<td></td>
</tr>
</tbody>
</table>

X8. Stay in the destination

X9. Principal motive for the trip

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1= Wellness tourism</td>
<td>24.59%</td>
<td>44.69</td>
<td>51.94</td>
</tr>
<tr>
<td>0= Other motives</td>
<td>75.41%</td>
<td>23.54</td>
<td>31.65</td>
</tr>
</tbody>
</table>

X10. Importance of wellness centres

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1= Moderately or very important</td>
<td>42.70%</td>
<td>31.60</td>
<td>28.67</td>
</tr>
<tr>
<td>0= Unimportant or moderately unimportant</td>
<td>57.30%</td>
<td>27.74</td>
<td>45.57</td>
</tr>
</tbody>
</table>

X11. Frequency of wellness trips

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1= Regularly</td>
<td>37.08%</td>
<td>33.64</td>
<td>42.60</td>
</tr>
<tr>
<td>0= Never</td>
<td>62.92%</td>
<td>25.61</td>
<td>36.50</td>
</tr>
</tbody>
</table>

* Parenthesis refers to a variable used as a reference group.

* The variable is quantitative.
Table 2. Results of the ordinary least squares regression analysis of the determinants of daily expenditure on wellness services

<table>
<thead>
<tr>
<th></th>
<th>B</th>
<th>Beta</th>
<th>t-values</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constant</td>
<td>1.641</td>
<td>2.807***</td>
<td></td>
</tr>
<tr>
<td><strong>Sociodemographic characteristics:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>X1. Geographical origin</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tourists from European countries</td>
<td>0.454</td>
<td>0.234</td>
<td>2.587***</td>
</tr>
<tr>
<td>Tourists from the rest of Spain</td>
<td>0.184</td>
<td>0.085</td>
<td>1.008</td>
</tr>
<tr>
<td>(Tourists from the Canary Islands)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>X2. Gender</td>
<td>0.008</td>
<td>0.004</td>
<td>0.083</td>
</tr>
<tr>
<td>X3. Age</td>
<td>0.011</td>
<td>0.159</td>
<td>2.829***</td>
</tr>
<tr>
<td>X4. Marital status</td>
<td>0.180</td>
<td>0.083</td>
<td>1.546</td>
</tr>
<tr>
<td>X5. Having children</td>
<td>0.206</td>
<td>0.106</td>
<td>1.924**</td>
</tr>
<tr>
<td>X6. Educational level</td>
<td>0.256</td>
<td>0.024</td>
<td>0.466</td>
</tr>
<tr>
<td>X7. Occupation</td>
<td>0.037</td>
<td>0.017</td>
<td>0.321</td>
</tr>
<tr>
<td><strong>Characteristics of the trip:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>X8. Stay in the destination</td>
<td>-0.064</td>
<td>-0.317</td>
<td>-5.214***</td>
</tr>
<tr>
<td>X9. Principal motive for the trip</td>
<td>0.335</td>
<td>0.160</td>
<td>2.904***</td>
</tr>
<tr>
<td>X10. Importance of wellness centres</td>
<td>0.472</td>
<td>0.252</td>
<td>4.476***</td>
</tr>
<tr>
<td><strong>Behaviour as a wellness tourist</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>X11. Frequency of wellness trips</td>
<td>0.469</td>
<td>0.255</td>
<td>4.339***</td>
</tr>
</tbody>
</table>

**F value = 11.195***

\[ R^2 = 0.350 \quad \text{Adjusted } R^2 = 0.318 \]

* significant at 0.10 level  ** significant at 0.05 level  *** significant at 0.01 level

*a Parenthesis refers to a variable used as a reference group.