



The determinants of intention to visit wellness tourism destination of young tourists

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Abstract

Young tourists are considered the fast-growing and highly important group of tourists in today's tourism business. This paper examined the factors influencing the intention of the young generation to travel for outbound wellness tourism. Research design was the quantitative method with structural equation modeling. A total of 425 respondents completed a questionnaire survey developed from past literature. The results showed that perceived expertise, health consciousness, and perceived benefit had a positive effect on the intention to visit while perceived risk showed a negative effect. In addition, the study found that health consciousness and Electronic word-of-mouth (EWOM) had a positive effect on perceived benefits. As crucial roles of health consciousness, perceived expertise and perceived benefits to influence the wellness tourists, the wellness tourism service providers should apply marketing strategies via social media and other channels to ensure the awareness and the adoption of wellness tourism activities. Directions for future research included the expansion of the scope of wellness tourism and exploration of a variety of wellness tourism activities, and additionally, comparison among various generations of tourists can be further investigated.

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Introduction

The tourism industry is one of the most important service industries that contributes to the Gross Domestic Product (GDP) of a country. The World Tourism Organization (2021) reported the crucial role of the tourism industry to economic development, especially in developing countries, and further highlighted the

increasing growth of health and wellness tourism sectors. Middleton (2015) defined tourism as an individual's activity visiting a destination outside the usual environment for leisure. In 2017, tourism contributed approximately 10.4 percent to the global GDP, which was 4.6 percent higher than the previous year, due to higher tourism spending. In 2018, the global tourism sector had 3.9 percent growth (World Travel & Tourism Council, 2019). The GDP contributed by the tourism industry is generated by businesses that deal directly with tourists, such as airlines, transportation services, accommodation services, and travel agents (World Travel & Tourism Council, 2018). According to DBS Group Research

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(2017), tourism accounted for 6.1 percent of Thai GDP in 2010 and increased to 9.2 percent in 2016, which indicated that tourism is the key engine for Thailand's economy. The World Tourism Organization (2021) indicated the number of international tourists grew from 32.9 in 2016 to 39.9 million tourists in 2019.

Additional research in this area can fill the gap to understand the intention of Generation Y towards the Thai outbound wellness tourism. Han, Kiatkawsin, Koo, and Kim (2020) highlighted the rising trend for wellness tourism, especially in the younger generation, including Generation Y.

Based on Han et al., (2020), Jeong and Shin (2020), Muslim, Harun, Ismael, and Othman (2020), tourism behaviors of Generation Y tourists are different from Generation X and the expectations and aims of travel and tourism of Generation Y tourists can be related to unique individual experiences, destination engagement, life-building experiences, meaningful and happy lifestyles as well as recreation and wellness experiences.

From the marketing perspective, since the current trend of wellness tourism has become more popular among tourists, this study is useful for tour operators or service providers who are looking for an opportunity to design a service package for Thai people. The objective of this study was identifying the factors affecting the intention to use outbound wellness tourism.

Literature Review

Perceived Expertise

Spake and Megehee (2010) defined perceived expertise as a customer's evaluation of a service provider competencies. Han et al. (2020) noted that expertise of wellness tourism service providers is the key to attract the wellness tourists. Best (1994) defined it as the product-related experience, and it is usually measured by past experiences. Moreover, De Vos, Forrier, De Heijden and De Cuyper (2017) defined expertise as the competency to perform high-quality work specific task. Lim and Chung (2014) referred to it as a perceived ability to deliver trustworthiness and expertise to the consumer, and it can be influenced by the credibility of word-of-mouth. Therefore, from all these previous studies, it leads to the hypothesis that expertise of health and wellness service provider affect the consumer's intention to use the service. Therefore,

H1: Perceived expertise has a positive effect on intention to visit.

Health Consciousness

Divine and Lepisto (2005) referred to health consciousness as an individual's behavior in consuming food and doing physical activities, for example, consuming healthy food and exercising. Dutta-Bergman (2004) defined health consciousness as health-related activities by measuring the level of consciousness in four actions, namely, exercising, healthy eating, gambling, and alcohol consumption. Huang (2014) found that the crucial factor in choosing a food product was health consciousness. Hao and Chenyue (2021) suggested that environmental and health consciousness influenced the consumption intention. In addition, consumer behavior changed when their health consciousness preference was changed according to the changes in their life. If the consumer is willing to pay or willing to change their consumption, it can be indicated that they perceived some benefit. Therefore,

H2: Health consciousness has a positive effect on intention to visit.

H3: Health consciousness has a positive effect on perceived benefit.

Perceived Benefit

Huang, Dai, and Xu (2020) stated the importance of perceived benefit in the field of tourism, based on the health belief model, that perceived benefit is the predecessor of tourism behavior. Tingchi Liu, Brock, Cheng, Chu, and Tseng (2013) defined perceived benefit as the engagement behavior in a specific action associated with a positive outcome, which can be sequence-based, time-based, and quantity based incentives. Sedighi et al. (2017) stated that perceived benefit is the individual benefit which can be distinguished into intrinsic and extrinsic benefits, where intrinsic benefit refers to internal benefit and extrinsic benefit refers to tangible or intangible benefits. Moreover, Jeng (2013) defined perceived benefit as the outcome that provides value, and it involves consumer's information search to guide the purchasing decision to reduce uncertainty. The hypothesis can be formalized as follows:

H4: Perceived benefit has a positive effect on intention to visit.

Perceived Risk

Caber, González-Rodríguez, Albayrak and Simonetti (2020) highlighted the issue about perceived risk, sometimes called risk perception, as one of the growing

concerns for tourists for the current global tourism environment.

Tanadi, Samadi, and Gharleghi (2015) defined perceived risk as the concept of the consideration or uncertainty of buying a product or service. It is an important factor that has some influence on the consumer purchasing decision or intention to purchase. If the uncertainty is high, more information is needed and the purchasing decision tends to be more complex (Ashoer & Said, 2016). However, in terms of tourism research, perceived risk can be defined as tourist attitude toward the potential of risk perception, which influences the evaluation of the destination (Sönmez & Graefe, 1998). Campbell and Goodstein (2001) considered perceived risk as congruity on evaluation. Munoz-Leiva, Climent-Climent, and Liebana-Cabanillas (2017) confirmed that perceived risk has a negative effect on the intention to use. Therefore,

H5: Perceived risk has a negative effect on intention to visit.

Electronic Word of Mouth (EWOM)

Zhou, Yan, Yan, and Shen (2020) stated that EWOM has become one of the most important tools to affect tourism activities and tourism behaviors, especially for the new generations. Jalilvand, Ebrahimi, and Samiei (2012) defined EWOM as an online customer review providing information about a product or service. According to Kitapci, Akdogan, and Dortyol (2014), EWOM can be either positive or negative and plays an important role in creating a perception that affects the consumer intention to use or the consumer's selection. Moreover, Gvili and Levy (2016) defined EWOM as the perspective suggestion toward a product or service across different digital channels. Presuming that the individual who consumes the message from EWOM perceives the benefit, thus, the hypothesis is to find the relationship between EWOM, intention to use, and perceived benefit as the following.

H6: Electronic Word of Mouth has a positive effect on perceived benefits.

Intention to Visit

Nysveen, Pedersen, and Thorbjørnsen (2005) defined intention to use as the individual's specific behavioral intention, while Celuch, Walz, Saxby, and Ehlen (2011) determined the intention to use as perceived usefulness and perceive ease of use, where trust is also one of the factors that affect the intention to use (Kim & Kang,

2012). Furthermore, Sheikh, Yezheng, Islam, Hameed, and Ullha Khan (2019) mentioned that the intention to use is the behavioral intention associated with adoption of online media.

The intention is also linked to the judgment on what customers think they will buy (Blackwell, Miniard, & Engel 2001). The empirical research supported that the service quality and purchase intention are linked (Bitner, 1990; Boulding, Kalra, Staelin, & Zeithaml 1993). Also, consumer perceived value can be one of the important predictors of the pre-decision and post-decision processes in purchasing intention (Kwun & Oh, 2004). Therefore, Lin and Chen (2009) concluded that the factors that lead to higher purchase intention are both service quality and consumer value. Figure 1 shows the proposed model of the study.

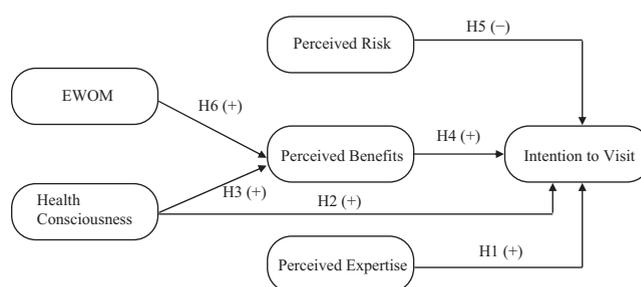


Figure 1 Proposed model

Methodology

This empirical study examined outbound wellness tourism in Thailand. The scope of the target population in this study focused on Generation Y Thai men and women who were born between 1976–1999 (Awachayee, 2018), or had the current age of 20–43 as of 2019. The sampling size of this study was 425. The respondents were the groups of individuals who had the awareness and the basic understanding of wellness tourism. The measurement scales and research instruments were developed from past literature (such as Celuch et al., 2011 and De Vos et al., 2017). The questionnaire was given out to the respondents via an online channel by using google survey as the platform. The study utilized the convenient sampling method. As the data were collected online, there was no specific demographic area or a specific time of the day to collect the data. To obtain the two sets of data from the people who had traveled abroad and the ones who has not, a screening question was used in the questionnaire. For the model testing, structural equation modeling was used to analyze the relationship of the proposed model.

The reliability test with Cronbach’s alpha indicated the acceptable values, since all the alpha values were greater than .7. The Cronbach’s alpha was in the range of .817–.899 as shown in Table 1.

Results

The data were collected from 425 respondents via an online platform. The summary of demographic information of the respondents can be provided as

follows. One hundred and sixty-four (164) respondents or 38.6 percent were male and 261 or 61.4 percent were female. Most of the respondent were in the age range of 25–36 years old. The total number of respondents in this age group was 310 or 72.9 percent. 69 respondents or 16.2 percent were below 25 years old and 46 respondents or 10.8 percent were in the age range of 36–43 years old. The majority of the respondents, 300 respondents or 70.6 percent, were bachelor’s degree graduates, and 113 or 26.6 percent were master’s degree graduates. To test the validity of data, the two important types of validity,

Table 1 Item loading on related factors

Items/Factors	Standardized loading	AVE	Composite Reliability	Cronbach’s alpha
EWOM		.554	.816	.821
I frequently gather information from the online travel review to help me decided to choose the right destination to visit and the right service to be used.	.785			
When gathering the information of the review from other travelers, I become more confident to use the service.	.763			
Electronic word-of-mouth has a positive impact on the desire or intention to travel.	.749			
I think that eWOM has high credibility and makes it easier for me to make a decision.	.713			
I usually have an intention to use the service relying on eWOM because it helps to reduce the uncertainty involved.	.709			
Perceived risk		.563	.775	.864
When traveling to another country, I have little knowledge about the destination that I am going to visit.	.774			
I think that language is one of the obstacles when travelling abroad.	.713			
When I am not certain about the unknown destination, I prefer not to visit.	.775			
Intention to visit		.595	.874	.899
I predict I would visit another country for wellness tourism service without hesitation.	.704			
I plan to seek for travel advice for the wellness tourism.	.801			
I think that wellness tourism is a good experience for me.	.804			
Perceived benefits		.679	.817	.845
I think that wellness tourism helps improve my health and wellbeing.	.808			
I think that what I get from wellness tourism makes me decide to travel.	.862			
I think that wellness tourism contributes to the better quality of living.	.801			
Perceived expertise		.628	.801	.817
I use the service of wellness tourism providers because I trust in the professionalism of service providers.	.791			
When I travel, I usually use the service of the professional tour operator.	.793			
Health Consciousness		.646	.859	.845
I think that I am very conscious about my health.	.840			
I usually do wellness activities such as spa, treatment, or hot spring to improve my health and wellbeing.	.829			
I am always active to improve my health quality.	.739			

Note: EWOM = electronic word of mouth; Perb = perceived benefit; Perr = perceived risk; Pere = perceived expertise; Health = health consciousness, Intention = intention to visit.

which are convergent and discriminant validity, were tested to ensure that the data were suitable for the structural equation modeling. Average Variance Extracted (AVE) values were more than .5, meeting the criteria for convergent validity. Furthermore, to ensure that each construct was statistically different from the other, discriminant validity was met with criteria in that the squared root of AVE values were higher than the squared correlation. All constructs were shown to meet the criteria. It is important also that the fit indices of the measurement model were above the basic requirement for the good model fit. With the following fit indices, the model was appropriately usable with CFI = .950, RMSEA = .064, NFI = .923, IFI = .950, and NNFI = .938. Additionally, Table 1 indicates the key item loadings, Average Variance Extracted (AVE), composite reliability and Cronbach’s alpha.

From Table 2 below, the values in bold and italic represent the squared roots of AVEs of the constructs, which were higher than the correlations of the constructs, indicating the acceptable discriminant validity.

After the model testing, the structural model and the coefficients were presented in Figure 2 below.

The results showed that perceived expertise had the greatest influence on intention to revisit, followed by perceived benefits and health consciousness while perceived risk showed no significant influence on intention to visit. To investigate the determinants of perceived benefits, the findings demonstrated that EWOM provided the highest effect, followed by health consciousness. The summary of hypothesis testing is shown in Table 3.

Discussion and Conclusion

Referring to the model analysis, all the relationships showed significant effects according to the hypotheses, except for the effect of perceived risk on the intention. First is to discuss about H1: Perceived expertise has a positive effect on intention to visit. The previous studies (Lim & Chung, 2014; Markowska; 2018) stated that perceived expertise affects the credibility and credibility affects purchase intentions. Likewise, the result of this study supports the statement from the previous studies. The next important factor is the perceived benefit. Both H2 (Health consciousness has a positive effect on intention to visit) and H3 (Health consciousness has a positive effect on perceived benefits) were supported by the past research (Huang, 2014; Krystallis, Fotopoulos, & Zotos, 2006; Schifferstein & Oude Ophuis, 1998). From the previous study, health consciousness people intend to

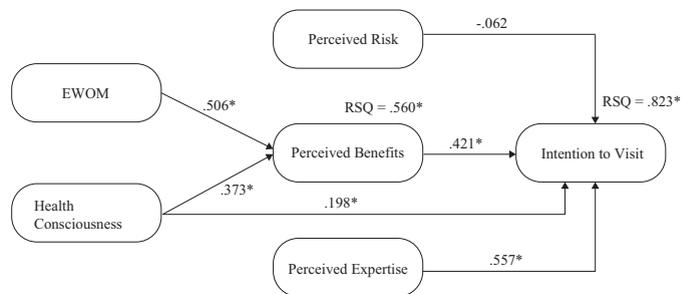


Figure 2 The structural model and coefficients
Note: *indicated significant level at 95%; RSQ = R-squared.

Table 2 Measures for discriminant validity

Items	Ewom	Perr	Intention	Perb	Pere	Health
Ewom	.744					
Perr	.112	.750				
Intention	.299	.340	.771			
Perb	.321	.367	.622	.824		
Pere	.272	.176	.515	.395	.792	
Health	.235	.624	.531	.524	.401	.804

Table 3 Summary of hypothesis testing

Hypothesis	Finding
H1: Perceived expertise has a positive effect on intention to visit	Supported
H2: Health consciousness has a positive effect on intention to visit	Supported
H3: Health consciousness has a positive effect on perceived benefits	Supported
H4: Perceived benefit has a positive effect on intention to visit	Supported
H5: Perceived risk has a negative effect on intention to visit	Not supported
H6: EWOM has a positive effect on perceived benefits	Supported

purchase healthy food product, and they tend to visit health specialist more often than those who are not. Since wellness tourism is related to health, it can be assumed that health consciousness is positively related to the intention. Next, for H4: Perceived benefit has a positive effect on intention to visit, this study proved the hypothesis that perceived benefit has a positive impact on the intention. Furthermore, this study supports the statement of the previous studies (Brugarolas & Rivera, 2005; Shepherd, Magnusson, & Sjoden, 2005) that stated perceived benefit is one of the factors that provide an incentive for the customer in making the decision to purchase. So, in this study, perceived benefit provides an incentive for the customer and intention to visit and travel for wellness tourism. A further hypothesis is H5: Perceived risk has a negative effect on intention to visit. Perceived risk had no significant influence on intention to visit. This is different from the past research studies (Campbell & Goodstein, 2001; Munoz-Leiva et al. 2017). In addition, past research investigated the relationship in different contexts, and the current study contributed to finding for the test of this relationship in the context of wellness tourism. However, the findings from this study represented the perspectives of wellness tourism, which may represent a different context from the past studies. Next, is H6: EWOM has a positive effect on perceived benefits. To summarize the relation of EWOM, EWOM has a positive relation with perceived benefit, and perceived benefit has a positive relation with intention to visit. This was confirmed with the past research (Doh & Kwang, 2009; Hennig-Thurau, Gwinner, Walsh, & Gremler, 2004; Lee et al., 2006). This research achieved the objective of identifying the factors affecting the intention to use outbound wellness tourism. With the increasing importance for health consciousness of the wellness tourists and perceived expertise of the wellness service providers, as well as the perceived benefits of outbound wellness tourism services, this study clarified the supporting and influential factors to support the development of wellness tourism.

Recommendation

From the analysis of the variables that have an impact on the intention to visit, the recommendations are as follows. First of all, health consciousness should be importantly promoted as one of the main selling points of wellness tourism. Secondly, the wellness service providers should provide a strong sense of expertise by adding the awards or certifications in the advertisements

or social media to communicate directly to the wellness tourists. As perceived expertise has the most impact to the intention among others variables, the marketing recommendation is the wellness service provider has to reflect professionalism and expertise toward the customers. Promoting the brand of wellness tourism providers, the marketing communication, the staff, the service, the atmosphere, and the operation altogether can also provide the sense of expertise. Therefore, to attract potential customers, marketing communication is the most important tool. The service provider has to create the communicating message or the content that conveys the sense of expertise. A few limitations of the current study should be mentioned as follows. Firstly, it was a cross-sectional study with limited time for data collection and the findings may not be effective to use to explain the long-term phenomena of the relationships of all the factors in this study. Secondly, the findings represented only wellness tourism and may not be appropriate to use to explain all other characteristics of health tourism. Thirdly, the year range of generation Y in the current study was based on the work of Awaehayee (2018) while in other studies the year range may be slightly different. However, the generalization of the findings is still applicable to explain the characteristics of wellness tourists.

For future research, the researchers can also include similar methodology to wellness tourists in different generations, such as generation X and baby boomers. Additionally, the researchers may apply comparisons among different groups of tourists, providing the insights on the effects and relationship among the factors (e.g. health consciousness and perceived risk and intention to visit).

Conflict of Interest

There is no conflict of interest.

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