



**WELLNESS TOURISM AND THE COMPONENTS OF ITS OFFER
SYSTEM: A HOLISTIC PERSPECTIVE**

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Wellness tourism and the components of its offer system: a holistic perspective

1. Introduction

According to the *Global Wellness Summit*¹ (2020) and *Global Wellness Institute*² (2020) the demand for wellness tourism represents one of the fastest-growing market segments, worldwide (Csirmaz and Pető, 2015). The GWI reports that in 2017 wellness tourism reached a global turnover of 639.4 billion US Dollars.³ The same publication states that the annual growth rate of this sector was double that of general tourism (3.2%), and holding steady at 7.8% in the five-year period 2012-2017. The Institute had forecast a future turnover of 919.4 billion US Dollars, but, for the short term at least, the COVID-19 pandemic has halted this growth trend.

Aside from the current negative economic reality for the tourism sector, the recent literature has identified wellness tourism, on a global scale, as a rapidly growing market⁴ (Kazakov and Oyner, 2020; Pyke et al., 2016; Voigt and Pforr, 2014; Koncul, 2012). Moreover, scholars hypothesize that the pandemic will positively influence consumer behavior in favor of wellness tourism in the medium term (Wen et al., 2020).

As regards studies on wellness tourism and the changing demand, the evolution of tourists' need for wellness has brought about an evolution and expansion of the concept, compared to the traditional perspective. In fact, tourists who are seeking well-being and quality of life (Sirgy, 2019) are also looking for destinations that will satisfy their need for wellness in various and diverse arenas, from the physical to the psychic and from the spiritual to the cultural. The paradigm of this sector's whole vision has changed. It has evolved from a narrow perspective based on physical health and well-being to a broad vision of holistic health.

This holistic approach within the tourism sector has led to a broader range of services and experiences that make up the value propositions that can positively contribute to people's well-being. Sectors that were not traditionally associated with wellness tourism are now tapped into; examples include areas such as culture and art (Fancourt and Finn, 2019), nature (Ohe et al., 2017), sports (Smith and Kelly, 2006), the spiritual realm (Jiang et al., 2018), and enogastronomy (Colombini, 2015).

In the wake of this trend, more and more studies are focusing on a holistic view of wellness (Dilette et al., 2020; GWI, 2020; Romeo et al., 2018; Pyke et al., 2016), pointing to the development of tourism that is increasingly oriented towards wellness (Kazakov and Oyner, 2020; Stará and Peterson, 2017).

Nevertheless, despite scholars' shift in this direction, there are no studies in the extant literature on wellness tourism that exhaustively and systematically identify the components of the offer systems required to satisfy the demand for wellness that is ever more diversified and holistic (Kim et al., 2017; Lim et al., 2016; Hritz et al., 2014; Damijanić and Šergo, 2013; Kelly, 2012; Konu, 2010; Chen et al., 2008) and that seeks integrated wellness products (GWI, 2020; 2018). The present study endeavors to fill this gap by analyzing the literature and applying a holistic lens to define, in a systematic way, the main components of wellness tourism's value proposals. Our findings may provide useful insights for enterprises and territories in the tourism industry. Policy makers, Destination Management Organizations (DMOs), and tourism enterprises must adopt a multidimensional vision of their system of touristic offers in order to identify which components they will use to plan, design, and deliver value through innovative and integrated wellness tourism products.

¹ GWS

² GWI

³ In the GWI (2020) report, the wellness tourism data refers to 2017.

⁴ According to the GWI (2018), wellness tourism has grown more than general tourism in all six of the macro-zones identified: North America, Europe, Asia and the Pacific, South America and the Caribbean, the Middle East and North Africa, and sub-Saharan Africa. For additional information, see (GWI, 2018; 2020).

2. Background of the wellness tourism study

Wellness tourism can only be defined from a wide angle view (Adams, 2003)⁵ that takes into account people's lifestyle as it is connected to various social and individual dimensions (Dunn, 1959). A number of scholars concur (e.g. Bushell and Sheldon, 2009; Smith, 2007; Steiner and Reisinger, 2006; Mueller and Kaufmann, 2001), and they emphasize the multidimensionality of an individual's wellness, a condition founded on balance and spirituality that combines physical and mental health with social and environmental elements. Other studies (Corbin et al., 2001; Hales, 1997) also associate wellness with multidimensional facets of a person; these are identified in six dimensions: physical, emotional, spiritual, intellectual, social, and environmental. Smith and Puczkó (2014, p. 208) also link wellness tourism to specific contexts, comparing it to a journey that involves one of the following lifestyle dimensions: health of body, mind, and spirit; mind and spirit; self-sufficiency; physical strength; aesthetics; healthy nutrition; relaxation; meditation; mental activity; education; environmental awareness; and sensitivity to social relationships.

The growing acceptance of this multidimensional approach to wellness has been tied to a change in the popular conception of health and wellness (Medina Muñoz and Medina Muñoz, 2013), the stressful nature of modern society (Frow and Payne, 2009), the prospects of social tourism (Diekmann and McCabe, 2016; Morgan et al., 2015; McCabe et al., 2010), the relationship between co-creation and well-being (Dekhili and Hallem, 2020), and to the well-being of workers through tourism experience (Lee et al., 2018). As the conceptual paradigm of wellness tourism is gradually being modified, the concept is evolving from a traditional view of health (Kamassi et al., 2020; Heung and Kucukusta, 2013; Smith and Puczkó, 2008) to a holistic wellness orientation (Kazakov and Oyner, 2020; Dilette et al., 2020; GWI, 2018; Stará and Peterson, 2017; Pyke et al., 2016; Smith and Kelly, 2006).

The main body of literature on wellness tourism has focused on three different dimensions (Hartwell et al., 2018): on health and well-being tourism destinations, on the impact of tourism on tourists' health and well-being, and its impact on destination communities' health and well-being. If we set aside those studies that analyze the impact of wellness tourism on destination communities (Wang et al., 2020; Uysal et al., 2016), we find two principal types of study.

First, are the studies on the demand side (Kim et al., 2017; Lim et al., 2016; Hritz et al., 2014; Damijanić and Šergo, 2013; Kelly, 2012; Konu, 2010; Chen et al., 2008) that show how tourists are seeking out holistic wellness propositions that encompass multiple types of services/experiences relating to wellness. In their study, Konu et al. (2010) identify six different clusters of wellness tourists that are drawn to a mix of activities in different realms such as sports, spirituality, wellness, and culture. They are categorized as: Sport and nature people interested in technology, Home appreciating travelers, Family- and health-oriented sport and nature people, Culture appreciating self-developers, Material wellbeing appreciators, and Indifferent about traveling and social issues. Damijanić and Šergo (2013) highlight the push and pull factors for wellness tourists; they show the statistically significant relationship between reasons for travel and income on the one hand, and between gender and education level on the other. The authors underscore how wellness tourists are especially attracted to wellness destinations that are known for their natural and cultural resources. Lim et al. (2016) point to the factors that both draw tourists to a specific destination for the first time and make them return again; these include, among others, the local flora and fauna as well as popular local attractions. Lee et al. (2019) identify a series of wellness activities and choices that hotels should offer to a particular tourist segment such as Millennials; these include intellectual wellness opportunities (group games and reading options, educational seminars on healthy lifestyle choices, music, etc.), spiritual wellness, natural medicine, and nutritional and dietary options. Within this same category related to studying demand, there are studies that focus on destination characteristics (Voigt and Pforr, 2014) and tourism businesses (Thal and Hudson, 2019) that give rise to wellness tourism offerings but which, in our opinion, still adopt a too-narrow holistic view of wellness.

⁵ Adams (2003) refers to four main principles of wellness: 1) Wellness is multi-dimensional; 2) Wellness research and practice should be oriented towards identifying causes of wellness rather than causes of illness; 3) Wellness is about balance; 4) Wellness is relative, subjective or perceptual.

In order to meet the diversified and integrated wellness needs of tourism demand, a broad holistic approach is necessary. It has to be reflected in wellness destinations' capacity to produce *wellness value propositions*⁶ that take into consideration a variety of components making up the wellness offering (Page et al., 2017; Hjalager and Flagestad, 2012) and that follow a systemic and experiential managerial logic, one especially well-suited to the tourism context (Pencarelli and Forlani, 2018).

Even in holistic wellness tourism, the ultimate goal is to satisfy tourists' growing demand for hedonic (low-level) and eudaimonic⁷ (higher level) (Lee and Jeong, 2020; Rahmani et al., 2018) experience-products and transformation-products (Mackenzie and Raymond 2020; Pung et al., 2020; Pencarelli and Forlani, 2018; Hartwell et al., 2018; Kim et al., 2015a; Pearce, 2009; Lean, 2009). In fact, according to the experience economy model proposed by Pine and Gilmore (2000), the 'experience' needs to be considered something more than a category of attributes to enrich and differentiate traditional products (raw materials, goods, and services). In their model, experience is, above all, a new and different offer category. When tourists travel for pleasure, there is always the more or less conscious quest for an experience. For tourism destinations, therefore, it is important to put the wellness experience requirement at the center of their managerial actions in order to provide their clientele with economic proposals that go beyond the simple mix of goods and services and that are geared more purposefully and consciously toward offering experiences designed to entertain, engage emotionally, and transform tourists, thus improving the customer's well-being.

An attempt at a multidimensional interpretation of wellness tourism can be found in several studies that associate this phenomenon with various typologies of touristic experiences (Kazakov and Oyner, 2020; Huang et al., 2019; Hwang and Lee, 2019; Damijanić, 2019; Gao et al., 2018; Sharma and Nayak, 2018; GWI, 2018; McCabe and Johnson, 2013; Smith and Puczkó, 2008; Smith and Kelly, 2006). We hold that in a holistic view, wellness is understood as the active or passive safeguarding of people's state of health (and prevention or mediation of illness). It is an essential condition of individuals whose health, cultural, spiritual, nutritional, athletic, and environmental needs are met – in line with the current world demand trends (Angus and Westbrooks, 2020; GWS, 2020; GWI, 2020). A holistic concept of wellness tourism would include additional, non-traditional categories of services and experiences.

While articles on these themes have proliferated, the contributions have offered incomplete perspectives on wellness tourism, especially with regard to the holistic needs that have emerged from demand studies. Some components have been added to broaden the traditional concept of medical and healthcare tourism, but a truly holistic perspective has yet to be put forth.

In conclusion, the present article aims to bring together the various views on wellness tourism by suggesting the adoption of a holistic lens, in an effort to overcome the current fragmentation of the literature. Our literature review and analysis offers an exhaustive overview of the academic debate surrounding wellness tourism; however this body of literature remains fragmented as it is still lacking a systemic "reading" of the wellness tourism phenomenon. From the analysis, the present article identifies all of the possible components of an offer system that aims to propose integrated wellness-driven touristic products.

3. Methodology

To conduct a rigorous analysis of wellness tourism literature, the following four-phase research structure (Denyer and Tranfield, 2009) was adopted:

- 1) research design;
- 2) study selection;
- 3) article analysis (coding process);

⁶ A *wellness value proposition* defines the wellness value offer, designed for and with the tourist, as an experiential value co-created with its consumers in order to generate a differential benefit compared to other offers competing for the same chosen target.

⁷ As maintained by several scholars (Lee and Jeong, 2020; Filep and Deery, 2010), tourist experiences and transformations must incorporate both hedonistic aspects, of momentary pleasure, and eudaimonic aspects, related to self-realization, personal expressiveness and growth, and life goals.

4) interpretation and reporting.

During the first phase, the research objective was defined: to provide an overview of the main studies on wellness tourism from a holistic and systemic perspective and answer the research question: *Which tourism sectors form the basis upon which holistic wellness tourism products are created and offered?*

In the second phase, Scopus was the database used to find publications containing the keywords “wellness tourism” or “well-being tourism” in the title, limiting the search to articles, books, and book chapters published in the last twenty years (2000 – present).⁸ This yielded a first set of 156 articles which were then analyzed qualitatively⁹, through their Abstract. For both the supply and the demand side (columns 4 and 5, respectively, in Table 1), the following variables were considered: service/experience or touristic activity and resources which pertain to physical, mental, social, emotional, nutritional, spiritual, and environmental aspects.

In this preliminary selection step, we excluded articles dealing with wellness and well-being tourism vis-à-vis the stakeholders (resident community, categories of service/experience providers and entrepreneurs) and those did not identify specific activities, resources, and services/experiences. This resulted in 61 articles that met our criteria for selection and that we then analyzed through a process of open coding, carried out manually (Saldaña, 2015).

The authors of the present study proceeded to use this open, manual qualitative coding process to inductively evaluate the contents of each article. The objective was to identify wellness activities and resources, according to their prevalence.¹⁰

The decision was made to focus on the most salient points presented (Guest et al., 2012) in the articles, rather than simply choose certain parts of the text, a priori. In line with Madden (2010), adopting this analytical method does not pose a limitation on the research but adds value to the overall methodology.

Both authors, separately, began the third phase of the study the coding process, by extracting the prevailing codes from the set of articles selected, to arrive at their own list of initial codes¹¹ (MacQueen et al, 1998).

Subsequently, they compared these initial codes and found an interpretive convergence in fifty-three articles. Given such a good percentage of codes convergence, both authors proceeded with the next codification phase together, on the one hand to analyze the eight articles where there was no convergence and on the other hand to cover a wider array of concepts.

As a consequence of this joint analysis 85 codes were identified, as determined by the touristic service/experience or touristic activity and resources utilized for proposing the wellness service or experience.¹²

In the final phase of interpretation and reporting, the codes were tied to specific offer systems, through a process of homogeneous grouping (Lincoln and Guba, 1985). Through the iterative and reflexive processes of constant comparison of codes, the authors worked together to construct the main themes and identify ten different components of wellness tourism. These are listed in column 1 of Table 1; the codes themselves are shown in column 2, and their descriptions are given in column 3; each component is associated to the analyzed article(s) of reference for both supply and demand in columns 3 and 4, respectively. The codes found in each article are given in quotation marks in the descriptive part of each wellness component described in section 4, below.

⁸ This time period was determined based on the evolution of the extant literature on this topic (Hartwell et al., 2018).

⁹ Given that *wellness tourism* can be both an ambiguous concept and a confusing term (derived from the abundance of literature and differences in the terminology adopted by different countries to describe the enterprises working in the wellness sector (Hartwell et al., 2018)), we hold that only a qualitative analysis of the literature will allow our research objective to be achieved.

¹⁰ Activities and resources were identified according to prevalence or, in other words, the main activity or resource identified, in the article being analyzed, as a source of wellness for the tourist.

¹¹ The question followed by authors (Emerson et al., 2011) in the manual coding process is: *In this article, what are the prevalent touristic offer components that are considered a source of wellness for the tourist?*

¹² More than one code could be identified in the same article.

4. The components of the wellness tourism offer system

The authors of the present work believe that a holistic perspective is needed to meet the demand for wellness products/experiences in the tourism sector. This has meant including some offer systems that have not traditionally been considered part of wellness tourism. In order to discern which ones should be part of a so-called broader wellness system, the authors followed the methodology described to identify and classify the ten main components of the offer system, summarized in the table below.

Please insert Table 1 near here

We now provide a more detailed description of the wellness activities that make up each component of wellness tourism offer systems, along with codes relevant to the articles analyzed and cited in the table¹³.

Hot Springs

This is a broad term used for establishments that provide access to “mineral and thermal waters” (Rodrigues et al., 2019; Aluculusei and Nistoreanu, 2016) and related wellness services. For the sake of simplicity, the GWI (2018) has identified two main classification categories: *wellness* “hot springs establishments/hotel” (Chen et al., 2013) (that *also* offer spa services and treatments) and *traditional* hot springs establishments (that offer *only* hot springs treatments). Historically, “thermal springs/centre/complex/” establishments (Migliaccio, 2018; Costa et al. 2015; Rocha and Brandao, 2014; Smith and Puczkó, 2008; Gustavo, 2008) aimed to improve tourists’ experience of a “health preservation bath” (Pan et al., 2019) through their enjoyment of thermal baths with specific therapeutic characteristics. Today, significant changes have been brought to this sector in terms of types of services being offered in the broader perspective of holistic well-being (Pan et al., 2019; Rocha and Brandao, 2014). On the demand side, the findings of recent studies (Han et al., 2020; Hashim et al., 2019; Luo et al., 2018; Chen et al., 2013) can serve as a basis for updating the offer system of hot springs establishments that still have business models too narrowly focused on healthcare and medical services.

Spas

Spa centers¹⁴ offer options for the care and enhancement of a person’s physical and mental health, catering to his/her desire to “be well”.¹⁵ Among the publications analyzed on both the supply and the demand side, the high number of articles on Spas is clear evidence of the fundamental role these establishments play in the wellness sector, worldwide (According to Mueller and Kaufmann (2001), the minimum requirements for a Spa should include a swimming pool, sauna, whirlpool or steam bath, facilities for physical fitness, relaxation, mental activity, and healthy nutrition; there should also be at least one wellness professional (doctor, physiotherapist, wellness trainer or sports instructor) present to provide individual care and advice. The increase in world demand for these amenities has led to a significant diversification of the offer. In some cases, these services are associated with “hotels-spa” (Lehto and Lehto, 2019; Chen et al., 2015; Medina-Muñoz and Medina-Muñoz, 2013; Kucerová et al., 2010; Mueller and Kaufmann, 2010), with centers dedicated to “spas” (Luo et al., 2018) or “spa tourism” (Kazakov and Oyner, 2020; Han et al., 2020; Rawat, 2017; Hudson et al., 2017); they may also be found in a “spa destination” (Hashim et al., 2019; Han et al., 2018; Milicevic et al., 2013), and are targeted to a particular clientele (e.g. “luxury spa”; Kelly, 2010).

Care of Body and Mind

¹³ The codes are shown in quotation marks and the relative articles in brackets.

¹⁴ For a detailed analysis of spas, see Erfurt-Cooper and Cooper (2009).

¹⁵ What differentiates spa centers from hot springs is the fact that spas can be built anywhere, regardless of whether or not there is a source of therapeutic waters.

This component is often tied to that of Spas, but it can be proposed as a stand-alone offer by hotels or centers specializing in wellness services. These may include (“sauna and beauty service” (PlzÁková and Crespo, 2019)), “fitness” (PlzÁková and Crespo 2019; Damijanić, 2019; Luo et al., 2018), “cosmetics” (Hjalager and Konu, 2011), “massages” (physical therapy and osteopathy) (Dillette et al., 2020), “rhythmic movement therapy (RMT)” (Pykh and Pykh, 2014). This component may also include “gyms” (Rawat, 2017), physical activity and coaching by a personal trainer, and intellectual wellness activities (e.g. group-based games and reading options.).

Medical Tourism

“Medical tourism” (PlzÁková and Crespo, 2019; Pan et al., 2019; DeMicco, 2017; Smith and Puczkó, 2008) is a “healthy” component (Goodarzi et al., 2016, Yang et al., 2015) tied to public and private healthcare services that directly influence the psycho-physical state of a person. This component is subdivided into three subcategories (Smith and Puczkó, 2008): *medical surgical* (involving some type of operation/surgical procedure, e.g. for “tourists with cancer and other chronic diseases” (Wang et al., 2020)), *medical therapeutic* (similar to surgical, but the therapy is repeated over time and requires a longer stay, e.g. nursing services for the elderly “aged nursing” (Pan et al., 2019)), and *medical wellness* (services provided by specialized medical personnel but the aim is not to cure specific pathologies (e.g. “babymoon destination” (Gabor and Oltean, 2019), “healthcare and wellness tourism” (Ordabayeva and Yessimzhanova, 2016), or “Ayurveda” (Shalini, 2017)).

Natural Environment

Among the non-traditional components of wellness tourism, “nature” (Latif et al., 2019; Kim et al., 2015; Lee et al., 2014; Heung and Kucukusta, 2013; Kucukusta and Heung, 2012) and the “environment” (PlzÁková and Crespo, 2019; Loehr et al., 2020) can play an essential role in satisfying the needs expressed by wellness demand (Huang and Xu, 2018; Kim et al., 2015b). In this category some scholars refer to “rural” (Kazakov and Oyner, 2020; Romão et al., 2018; Hjalager et al., 2016) or “therapeutic landscapes” (Huang and Xu, 2018), given that rural destinations can combine general well-being services with touristic resources already present and generate “social value” (Loehr et al., 2020). Also included are destinations that offer “coastal areas” (Page et al. (2017), “lakes” (Konu et al., 2010), “adventure tourism/ecotourism” (Lötter and Welthagen, 2020; Hunt and Harbor, 2019), and an “arboretum” (Lim et al., 2016).

Spirituality

The offer of “spiritual” experiences is also recognized as a significant component of wellness tourism (Saxena et al., 2020; Buzinde, 2020; Kazakov and Oyner, 2020; Nicolaidis and Grobler, 2017; Norman and Pokorny, 2017; Heung and Kucukusta, 2013; Smith and Puczkó, 2008). In this category, the predominant offers focus on the search for spirituality (Buzinde, 2020), in the sense of finding a way to spend one’s free time exploring mystical and religious experiences. In contemporary society, which is undergoing an ever more pronounced “spiritual revolution”, there are growing numbers of tourists (Sharma and Nayak, 2018), looking for spiritual experiences via different meditative paths such as “Yoga” (Dillette et al., 2020; Telej and Gamble, 2019; Sharma and Nayak, 2018; Lehto et al., 2006), or “New Age” (Smith and Puczkó, 2008).

Culture

This is one of the emerging components of the sector, as evidenced by the recent studies highlighting the links between wellness tourism and culture. This category mainly refers to a destination’s cultural intangible heritage: “China wellness culture” (Huang and Xu, 2014; Heung and Kucukusta, 2013), “Longevity in Chinese culture” (Huang and Xu, 2018), “local culture” (Latif et al., 2019; Kucukusta and Heung, 2012), and “local way of life” (Maneenetr et al., 2014).

Enogastronomy

Enogastronomic experiences are becoming a more and more significant component of wellness tourism products in the realm of food and beverages enterprises. This category specifically refers to “food quality and/or food service fresh and local” (Dillette et al., 2020), “nutritional foods” (Luo et al.,

2018), “healthy food” (Rawat, 2017), “indigenous food” (Mnguni and Giampiccoli; 2015), as well as structured “dietary” programs geared towards healthier lifestyles (Damijanić, 2019).

Sports

This offer includes both indoor and outdoor “sports tourism” (Malyshev et al., 2016) activities designed to encourage the active participation of tourists. They range from “sports and recovery” (Pan et al., 2019), to “horse riding” (Sigurðardóttir, 2018), and “golf” (Kazakov and Oyner, 2020).

Events

Although this type of offer is still considered a marginal component of the current wellness tourism scenario, “festival and events” can positively contribute to tourists’ well-being (Hjalager and Flagestad, 2012) from a holistic perspective (e.g. “savonlinna opera festival” (Konu et al., 2010)).

5. Conclusion

Our research shows that the concept of wellness tourism can be most effectively expressed through a holistic and multidimensional approach to this phenomenon.

Multiple components of touristic value propositions can contribute in diverse ways and to varying degrees to the vacationer’s wellness experience. Our literature analysis has brought to light how wellness tourism, taken as a conceptual whole, consists of ten different components within the system of offers: hot springs (hot springs and wellness services), spas (different typologies of spa centers with relative services provided), medical tourism (medical surgical, therapeutic and wellness (Smith and Puczkó, 2008)), care of body and mind (services specializing in aesthetic treatments and massage or physical activity and/or therapy not provided in hot springs and spa facilities), enogastronomy (enogastronomic experiences with specific reference to the realm of typical local food and beverages and healthy food), sports (indoor and outdoor sports activities designed for the active participation of the tourist), nature and environment (natural resources that can be enjoyed for personal well-being), culture (fruition of cultural and artistic heritage in both tangible and intangible forms), spirituality (spiritual activities that include mystical and religious experiences), and events (specific events or entertainment activities for tourists). Within a wellness-driven tourist destination, the various actors and producers jointly design the experiential wellness offers. The value propositions may include one or more of those components which serve to meet the expectations and needs of tourists seeking wellness experiences (see Figure 1, below).

Our findings have important theoretical and practical implications for academics, managers and enterprises in the tourism industry.

From a theoretical point of view and in line with other studies (Pyke et al., 2016; Hartwell et al., 2012) we confirm how the concept of wellness destinations can guide development strategy by orienting local tourism products towards holistic wellness and, concurrently, improving the physical and mental health of both residents and tourists, within an experiential logic. A broader holistic vision of tourism wellness that considers all of the components of an offer enhances the touristic phenomenon by honing in on its primary vocation. In sum, the consumption of the vacation experience allows tourists to regenerate both physically and mentally, thus improving their overall health, in terms of general well-being and quality of life (Thal and Hudson, 2019; Luo et al., 2018).

Moreover, the present study has revealed that the extant literature, on the supply side, is still primarily focused on thematically specialized destinations that do not embrace a holistic approach to wellness. This is despite the fact that the extant literature on the demand side of wellness tourism has underscored how tourists are looking for touristic products that can satisfy multiple and varied needs, from a holistic and multidimensional perspective. In our opinion, the prospects for the growth of wellness tourism (Kazakov e Oyner 2020) leave little doubt as to the strategic importance, for destinations, of formulating value propositions that are both multifaceted and holistic. They would pave the way for territorial strategies to embrace the vision of wellness destinations, thereby enhancing the various actors, resources, and activities within a given area.

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3 From a theoretical and managerial point of view, DMOs should devise and implement strategies
4 for the touristic enhancement of destinations by positioning a plurality of actors, resources, and
5 activities (Elbe et al., 2018) under the umbrella wellness brand who are able to offer a range of
6 different wellness products (see Figure 1). The composition of the bundle that constitutes the value
7 proposition of wellness-driven destinations must be designed according to the resources available in a
8 specific destination, the type of demand that is prioritized, in terms of single or multiple wellness
9 needs, and the market trends.

10 Consequently, each individual product that is made possible by specific actors and specific
11 resources can activate those components of the offer that are best able to maximize the tourist's
12 customer value. In the case of single and specific needs, the product may include only one component,
13 while if the needs are multiple and holistic, the touristic product will have several components to offer.
14 In order to prioritize specific single wellness needs expressed by the demand (e.g. cardiac surgery or
15 yoga classes), the DMO's role will be to focus on promoting specific components/aspects of the offer
16 (e.g. specialized medical center or dedicated facilities for yoga training and practice, etc.). In the case
17 of multiple needs, the value offer is created by DMOs according to a systemic perspective within the
18 touristic destination (meta level), where individual tourism enterprises (micro level), each with its own
19 value chain, provide one of the components of the touristic product-experience that serves to meet the
20 various and ever-changing expectations of tourists. In both cases the DMOs must highlight both the
21 market positioning and the brand of the actors involved in the wellness destination. The ultimate goal
22 is to enhance both tourists' and territorial stakeholders' wellness, creating a positive influence on the
23 local population's lifestyle and stimulating entrepreneurship. In a similar vein, the study by Pyke et al.
24 (2016) underscores some of the positive implications of building wellness destinations, for private as
25 well as public entities. Private entrepreneurs are enthusiastic about the opportunity to offer their own
26 products among those making up the wellness offers, thus generating greater value for both clients and
27 enterprises. Moreover, policy makers are attracted by the chance to enhance the territory, making it a
28 platform that offers wellness products with high experiential value and that creates value for the
29 stakeholders. In sum, our findings have important practical implications for managers and enterprises
30 in the tourism industry. A holistic view of wellness tourism has implications for the strategic
31 marketing processes of both enterprises and destinations. The relative managers should segment
32 demand according to more innovative criteria than what has traditionally been adopted. Tourism
33 enterprises' and destinations' wellness value propositions for tourists should be wellness-driven and
34 go beyond the narrow criteria of medical and healthcare-related tourism. In order to satisfy the
35 growing demand for wellness/well-being, the creation of value propositions should involve the
36 participation of all the various actors and producers within the offer system at wellness destinations.
37 Consequently, the needs assessment process for potential tourists must take into account the ten
38 components of the offer system. This will allow DMOs and enterprise managers to better discern and
39 meet the primary and multifaceted needs of potential travelers. They must be aware that guests may
40 have, at different times, varying needs, priorities, and travel motivations when they consider and
41 choose the value propositions offered within the context of holistic wellness. In this sense, each
42 component may represent a single touristic offer targeted to specific market segments (e.g. thermal
43 baths in a hot springs establishment or a yoga course in India). Alternatively, it may be one of several
44 components within an integrated mix of tourism products (GWI, 2018).
45 According to GWI data (2018), the surge in wellness tourism has been driven by consumers who want
46 multidimensional wellness experiences and are thus looking for multiple wellness components¹⁶
47 during their stay. This underscores the strategic importance of developing more integrated approaches
48 to staging touristic wellness products (Page et al., 2017).
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54 *Please insert Figure 1 near here*

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57 Wellness destinations represent the 'stage' upon which the various wellness tourism products are
58 presented (Romão et al., 2018). Individual wellness components must be chosen and combined, or
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60 ¹⁶ According to the GWI report, this segment represents 80% of wellness tourists worldwide.

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3 offered singly, based on the expectations of the target segments of consumers to whom the wellness
4 value propositions are addressed. Figure 1, above, shows how DMOs and planners (macro level) can
5 adopt a holistic perspective when designing their value propositions to meet their consumers' demand.
6 Their task is twofold. They must ensure that all the wellness offer systems are capable of providing
7 touristic wellness value propositions that are in line with the new market requirements as seen through
8 the experience logic (Pine and Gilmore, 2000; Pencarelli and Forlani, 2018). They must also promote
9 inter-organizational collaboration and build networks (Baggio, 2011) to create wellness-driven tourism
10 packages. In the context of the wellness value system, the main challenge facing public and private
11 territorial players is coordinating and integrating their offers with those of other players. The ultimate
12 goal is to form a cohesive set of components that meet the definition and expectations of holistic
13 wellness and that are able to build a wellness value proposition.
14

15 Therefore, at the micro level, individual touristic enterprises are encouraged to network and
16 collaborate with other actors in the territory with a view to enriching the contents of their own specific
17 value proposition. Another suggested practice is directed at the managers of tour operator and
18 incoming travel agencies who should build integrated tourism packages that are wellness-driven and
19 holistic in concept.

20 Finally, we highlight a significant managerial challenge that affects policy makers, various
21 stakeholders, and the actors within the production system: that of utilizing a *single brand* strategy, i.e.,
22 an umbrella brand, to project a destination image capable of representing all of the territory's wellness
23 resources.

24 Future research avenues should be explored, on the demand side, to investigate consumer choices
25 of complementary wellness tourism products and, on the supply side, to analyze the distinctive
26 features of wellness destinations. We also believe that an important line of research should delve more
27 deeply into how wellness destinations will evolve, incorporating new and sustainable technologies
28 (Buhalis and Amaranggana, 2013) and the residents' satisfaction well-being (Fakfare and
29 Wattanacharoensil, 2020). The resulting 'smart' wellness destinations will be capable of achieving
30 high-tech potential, while creating social value and safeguarding the environmental ecosystem.

31 Despite its extreme concision, the present study fills a gap in the extant literature on wellness
32 tourism. A number of scholars have broadened the concept of wellness tourism beyond the traditional
33 view of the past and while new perspectives have been introduced, a truly holistic and integrated
34 interpretation of wellness tourism has not been proposed. In the present work we adopt an innovative
35 and more complete approach, offering a more robustly holistic interpretation of the concept of
36 wellness tourism. We hope that our attempt will provide useful impetus to DMOs and tourism
37 enterprises to renew their strategic vision and mission and commit to crafting new value propositions.
38 These must be aligned with the current world trend in the market, which has seen a greater growth in
39 demand for wellness tourism than for general tourism over the last decade, and which will, in all
40 likelihood, see further acceleration as a consequence of the COVID-19 pandemic.
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44 **Disclosure statement**

45 No potential conflict of interest was reported by the authors.
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Table 1: Components of the wellness tourism offer system

Main Components	Codes	Descriptions	Studies on supply	Studies on demand
Hot springs	Mineral and thermal waters; hot springs establishments/hotel; thermal springs/centre/complex; health preservation bath	This offer is tied to hot springs establishments that provide access to hot springs and wellness services.	Pan et al. (2019); Migliaccio (2018); Aluculesei and Nistoreanu (2016); Costa et al. (2015); Rocha and Brandao (2014); Chen et al. (2013); Gustavo (2008); Smith and Puczko (2008)	Rodrigues et al. (2019); Chen et al. (2013)
Spas	Hotels-spa; spas; spa tourism; spa destination; luxury spa	This offer is tied to spa centers that offer options for the care and enhancement of a person's physical and mental health, catering to his/her desire to "be well".	Kazakov and Oyner (2020); Lehto and Lehto (2019); Milicevic et al., (2013); Kelly (2010); Kucerová et al. (2010); Mueller and Kaufmann (2001)	Han et al. (2020); Hashim et al. (2019); Han et al. (2018); Luo et al. (2018); Rawat (2017); Hudson et al. (2017); Chen et al. (2015); Medina-Muñoz and Medina-Muñoz (2013);
Care of body and mind	Sauna and beauty service; fitness; cosmetics; massages; rhythmic movement therapy (RMT); gyms	This can be a stand-alone offer by hotels or centers specializing in aesthetic treatments and massage, or by gyms (services outside the purview of hot springs and spa facilities)	Hjalager and Konu (2011)	Plzákova and Crespo (2019); Damijanić (2019); Luo et al., (2018); Rawat (2017); Pykh and Pykh (2014)
Medical tourism	Medical tourism; healthy; tourists with cancer and other chronic diseases; aged nursing; babymoon destination; healthcare and wellness tourism	This offer is tied to public and private healthcare services that directly influence the psycho-physical state of a person (<i>medical surgical, therapeutic and wellness</i>)	Wang et al., (2020); Pan et al. (2019); Goodarzi et al. (2016); DeMicco (2017); Smith and Puczko (2008)	Plzákova and Crespo (2019); Gabor and Oltean (2019); Shalini (2017); Ordabayeva and Yessimzhanova (2016); Yang et al. (2015)
Natural environment	Nature; environment; rural; therapeutic landscapes; social value; coastal areas; lakes; adventure tourism/ecotourism; arboretum	This offer, proposed by territories, is tied to all aspects of nature and the environment that can be enjoyed for personal well-being	Kazakov and Oyner (2020); Loehr et al. (2020); Latif et al. (2019); Romão et al. (2018); Page et al. (2017); Hjalager et al. (2016); Heung and Kucukusta (2013); Kucukusta and Heung (2012); Konu et al. (2010)	Lötter and Welthagen (2020); Plzákova and Crespo (2019); Hunt and Harbor (2019); Huang and Xu (2018); Lim et al. (2016); Kim et al. (2015b); Lee et al. (2014)
Spirituality	Spiritual; spiritual revolution; yoga; new age	This offer aims to aid tourists in their search for spirituality through mystical and religious experiences or via other meditative paths	Saxena et al. (2020); Buzinde (2020); Kazakov and Oyner (2020); Norman and Pokorny (2017); Heung and Kucukusta (2013); Smith and Puczko (2008)	Dilette et al. (2020); Telej and Gamble (2019); Sharma and Nayak (2018); Nicolaides and Grobler (2017); Lehto et al. (2006)
Culture	China wellness culture; longevity in Chinese culture; local culture; local way of life	This offer refers to cultural and artistic heritage in both tangible and intangible forms	Latif et al. (2019); Heung and Kucukusta (2013); Kucukusta and Heung (2012)	Luo et al. (2018); Huang and Xu (2018; 2014); Maneenetr (2014);
Enogastronomy	Food quality and/or food service fresh and local; nutritional foods; healthy food; indigenous food; dietary	This offer is proposed by enterprises and territories, with specific reference to the realm of food and beverages	Dilette et al. (2020); Mnguni and Giampiccoli (2015)	Damijanic (2019); Rawat (2017)

Sports	Sports tourism; sports and recovery; horse riding; golf	This offer includes indoor and outdoor sports activities designed for the active participation of the tourist	Kazakov and Oyner (2020); Pan et al. (2019); Sigurðardóttir (2018); Malyshev et al. (2016)	/
Events	Festival and events; savonlinna opera festival	This offer includes specific events and significant activities that engage and entertain tourists	Hjalager and Flagestad (2012); Konu et al. (2010)	/

Source: our compilation

Tourism Review

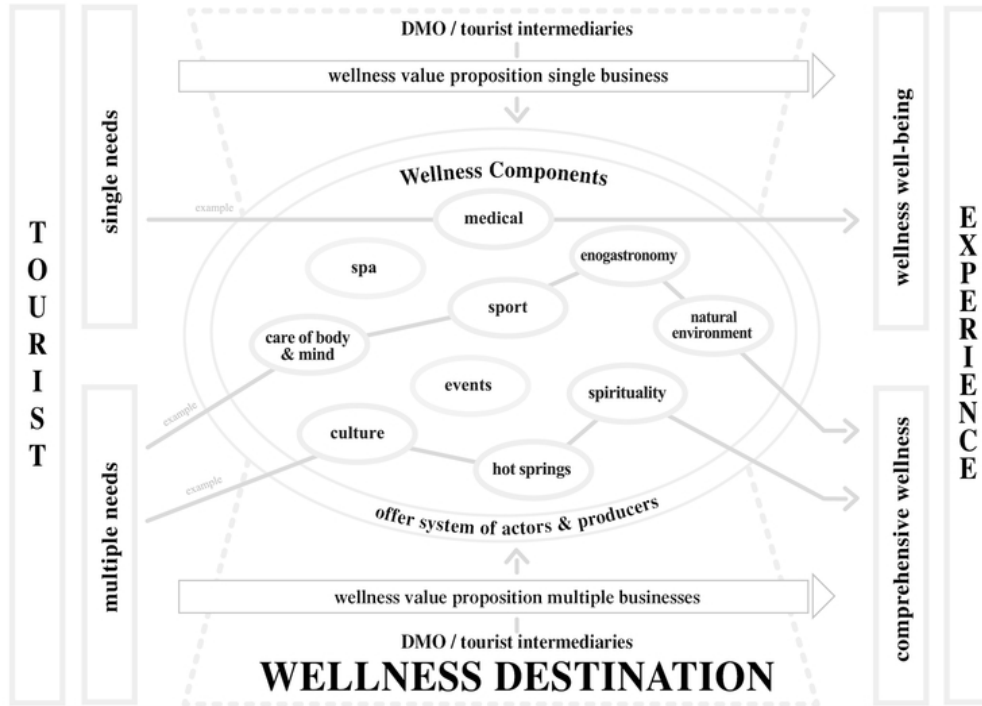


Figure 1: wellness tourists and the wellness tourism offer system

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