

Introduction

Melanie Kay Smith and László Puczkó

Health and travel? Travelling for health? Healthy travel? The arena of health-related tourism appears to be very dynamic. Medical tourism is forecast to enjoy exponential growth. Wellness tourism is forecast to grow at an exponential rate. We can read annual trend reports and forecasts which enlist destinations and services that are expected to represent a high rate of growth or popularity every year. Industry publications and press releases are shared almost daily indicating how exceptional this industry is. Professional books and journal articles show the interest of the academic community, too.

Still, we know relatively little about this rather complex form of travel. The definition and taxonomy of health tourism are topics which are often discussed both in academic and in industry circles. It is worth noting that the UN World Tourism Organization and the European Travel Commission will soon publish their first study on this topic, titled *Exploring Health Tourism*. The editors of the handbook were co-authors of that study and learned from numerous sources how diverse and rich this industry actually is. The study suggests definitions and descriptions which the editors of this volume used as a guide for their work. Most of the chapter authors also shared similar views regarding the structure and scope of health tourism (with a few exceptions, but such debates are to be expected and encouraged, especially with authors of this calibre).

This handbook represents an important addition to existing literature in the field of health, wellness, medical, spa, wellbeing and tourism as it brings together some of the most significant authors, researchers and practitioners in the field to share their latest thoughts and most recent cutting-edge work. It is recognised that there is now a growing body of literature in this fast-growing field and that books are emerging on sub-sectors of health tourism such as wellness tourism (e.g. Voigt and Pforr, 2013), medical tourism (e.g. Connell, 2011; Lunt, Horsfall and Hanefeld, 2015), as well as more comprehensive publications encompassing all of the sectors (e.g. Smith and Puczkó, 2013). There are also numerous industry reports providing research-based studies on spas and wellness and their relationships to tourism (Global Spa Summit, 2011).

The chapters in this handbook indicate some rather important and critical aspects of the relationship between health and tourism. The authors go beyond the traditional understanding of health tourism. Many apply a wider understanding of health, which is wellbeing. Chapters explore the more holistic relationship between wellbeing, health and travel and discuss the differences and similarities between health tourism and healthy travel.

There have been few comprehensive publications which bring together such a broad spectrum of theories and research about the relationships between tourism, wellbeing and health. There have already been several studies on tourism, wellbeing, health, happiness and quality of life (e.g. Corvo, 2010; Puczkó and Smith, 2010; Nawijn, 2011; Dolnicar, Yanamandram and Cliff, 2012; Filep, 2012; Uysal, Perdue and Sirgy, 2012). It has been suggested that individual trips can create greater pre-trip than post-trip happiness (Corvo, 2010; Narwijn, 2011), that vacationers' happiness does not increase long-term wellbeing (Nawijn, 2011) and that research should perhaps focus on tourism and 'authentic happiness' rather than SWB or subjective wellbeing (Filep, 2014). It is also interesting to note that Brajša-Žganec, Lipovčan and Poljanec-Borič's (2014) research showed that residents of destinations with a higher evaluated quality of tourist offer were happier and more satisfied with their lives in general. Some of the authors in this handbook take these debates further and elaborate on them.

Numerous academic and research-based studies have attempted to define and measure wellbeing and differentiate it from quality of life, life satisfaction, happiness and other indicators of a good life. Theofilou (2013) suggests that most recent studies have failed to make a clear distinction between quality of life and wellbeing. However, when indicators are developed for wellbeing research, health is one dimension that is always included (e.g. Gross National Happiness Index, 2010; Eurofound, 2013; Gallup, 2013; Halleröd and Seldén, 2013; OECD, 2013; Human Development Index, 2014; King, Reno and Novo, 2014; Villamagna and Giesecke, 2014).

Many recent studies emphasise the importance of environmental quality for human wellbeing (e.g. Knight and Rosa, 2011; New Economics Foundation, 2012). Previous studies also suggested that nature-based experiences can improve health and wellbeing (e.g. Kaplan and Kaplan, 1989; Ulrich et al., 1991; Kaplan, 1995; Louv, 2005, 2012; Bell and Ward Thompson, 2014; Tyrväinen et al., 2014). Research has suggested that people may be at risk of losing contact with nature and developing what Louv (2005, 2012) describes as '**nature deficit disorder**'. This involves an outdoor-to-indoor migration and intensive use of electronic media (Barton, 2012). Many authors in this handbook place considerable emphasis on the importance of natural landscapes as health- and wellbeing-enhancing environments in which to take holidays.

The major focus of the *Handbook* is not only on health tourism, but more the ways in which tourism can improve health and what forms of activities, experiences or environments can enhance wellbeing. There is therefore little debate about definitions of health tourism, which have been the starting point for many books in this field. It has been relatively well established that wellness tourism and medical tourism are sub-sectors of health tourism and that spa resorts, wellness hotels, retreats and hospitals are some of the contexts in which such forms of tourism take place (Smith and Puczkó, 2013). In some countries, the term 'wellness' has not always been appropriate to describe the main forms of health-related tourism that takes place there. For example, the Finnish have no word for 'wellness' and have been using the term 'wellbeing tourism' for more than ten years now, with the health-enhancing qualities of nature and landscape being a major focus (Konu, Tuhoiono and Björk, 2013). Van den Eynde and Fisher (2013) examined the Australian context where wellbeing tourism is also widely used. Indeed, forms of tourism which take place in natural landscapes do not fit easily into the conventional categories of health tourism (i.e. wellness and medical tourism). However, they are becoming increasingly important for human wellbeing in the light of debates about sustainability, nature deprivation and urban stress and speed.

Smith and Puczkó (2012) suggest that different forms of tourism are likely to have different impacts on wellbeing. For example, business trips may enhance work and productivity. Going

to conferences improves a sense of social wellbeing in addition to providing new professional contacts. Sun, sea and sand tourism is one of the most traditional and best-loved forms of tourism. Although there is a temptation for many tourists in this sector to engage in hedonistic activities like drinking and partying which can be detrimental to their health, there are also ample opportunities to rest offered by sun-bathing, increasing fitness through swimming and beach sports, the vitamin D benefits of the sun and social opportunities to meet others. Most tourists exaggerate their behaviour on holiday and eat, drink, party and socialise far more than at home. This can even be detrimental to health if done in excess, even though it creates a feeling of temporary wellbeing. There are debates within both psychological and tourism circles about 'hedonic' versus 'eudaimonic' paradigms of health and wellbeing (Hartwell, Hemingway, Fyall, Filimonau and Wall, 2012; McCabe and Johnson, 2012). The hedonic approach focuses on happiness and defines wellbeing in terms of pleasure attainment and the eudaimonic approach focuses on meaning and self-realisation. Voigt, Brown and Howat (2011) suggest that, in the context of wellness tourism, more hedonic wellbeing experiences might take place in a beauty spa whereas more eudaimonic experiences can be gained from spiritual retreats.

Certain forms of tourism are designed especially to improve health. In some cases, tourism is funded by governments or employers as a way of preserving or enhancing workers' health. The work of McCabe and Johnson (2012) analyses the ways in which social tourism impacts on the subjective wellbeing of participants. For example, this was the traditional function of seaside holidays for workers from industrial cities. Some trips have a primary focus on health, for example, going to medical spas or having surgery as part of medical tourism abroad. In Central and Eastern Europe and many former Soviet states, the governments fund health tourism, which mainly consists of spending several days or weeks in a medical spa or sanatorium with healing thermal waters and other therapies. Some companies may offer their employees incentive trips to spas or some form of 'occupational wellbeing'. This can include massage, personal training, nutrition, meditation and psychotherapy as well as medical assessments.

The industry still remains fragmented. There are the medical people and there are the wellness (or spa) people. The communication between the two 'sides' is developing rather slowly but it is improving. This handbook intends to build a bridge and support the communication and understanding among all those who work and research any aspect of health tourism.

Health tourism may seem to be a new form of tourism. The contrary is true. Health tourism is one of the oldest forms of tourism. Still, certain forms of health tourism have been changing and evolving, e.g. visiting retreats. Certain forms of health tourism (e.g. thermal tourism) are recently being (re)discovered in many areas of the world. This is the real reason why such health tourism forms seem to be new. They are new to a given market but can be rather traditional in other countries.

The general 'healtharisation' of the tourism and hospitality industries can lead to a wider spectrum of health and wellbeing improving services in the industry. This, however, will not make tourists staying in 'healthy' hotels health tourists, but rather health-conscious guests. The industry has not yet agreed on what a medical or wellness hotel can and should be or what a medical spa is.

We will see more diversification as well as likely standardisation running parallel. Researchers can provide a great contribution to support a better understanding of how tourism can contribute to visitors' as well as locals' wellbeing and how to incorporate wellbeing, health, wellness traditions, local assets and medical procedures into tourism products.

This handbook focuses on those forms of tourism and destinations which are especially designed to improve health (e.g. medical tourism, thermal baths, spas, holistic holidays and retreats) and those which can provide wellbeing-enhancing experiences under the right

conditions and with the right management (e.g. natural landscapes). It seems to be the case that there is a growing interest in identifying which kinds of environments, landscapes, activities and experiences can contribute to enhancing human health and wellbeing.

We are grateful to all of our authors for sharing their latest insights and research with us in this handbook. It has been a pleasure and an excellent learning experience working with you all!

References

- Barton, K. S. (2012) 'Colorado's millennial generation: Youth perceptions and experiences of nature', *Journal of Geography*, 111, 6.
- Bell, S. and Ward Thompson, C. (2014) 'Human engagement with forest environments: Implications for physical and mental health wellbeing', in Fenning, T. (ed.) *Challenges and Opportunities for the World's Forests in the 21st Century*, Dordrecht, The Netherlands: Springer, pp. 71–92.
- Brajša-Žganec, A., Lipovčan, L. K. and Poljanec-Borić, S. (2014) 'What is good for tourists should be good for residents too: The relationship between the quality of the touristic offer and subjective wellbeing of residents', *Tourism Analysis*, 19, 719–730.
- Connell, J. (2011) *Medical Tourism*, Wallingford, UK: CABI.
- Corvo, P. P. (2010) 'The pursuit of happiness and the globalised tourist', *Social Indicators Research*, 102, 95–97.
- Dolnicar, S., Yanamandram, V. and Cliff, K. (2012) 'The contribution of vacations to quality of life', *Annals of Tourism Research*, 39(1), 59–83.
- Eurofound (2013) *Third European Quality of Life Survey – Quality of Life in Europe: Subjective Wellbeing*, Luxembourg: Publications Office of the European Union.
- Filep, S. (2012) 'The positive psychology and tourism', in Uysal, M., Perdue, R. and Sirgy, M. J. (eds) *Handbook of Tourism and Quality-of-Life Research: Enhancing the Lives of Tourists and Residents of Host Communities*, Dordrecht, The Netherlands: Springer, pp. 31–50.
- (2014) 'Moving beyond subjective wellbeing: A tourism critique', *Journal of Hospitality and Tourism Research*, 38(2), 266–274.
- Gallup (2013) *State of Global Wellbeing*. Available online at: http://info.healthways.com/hs-fs/hub/162029/file-1634508606-pdf/WBI2013/Gallup-Healthways_State_of_Global_Wellbeing_vFINAL.pdf (accessed 8 October 2014).
- Global Spa Summit (2011) *Wellness Tourism and Medical Tourism: Where Do Spas Fit?*, New York: Global Spa Summit.
- Gross National Happiness Index (2010) Available online at: <http://www.grossnationalhappiness.com/survey-results/index> (accessed 23 October 2015).
- Halleröd, B. and Seldén, D. (2013) 'The multi-dimensional characteristics of wellbeing: How different aspects of wellbeing interact and do not interact with each other', *Social Indicators Research*, 113, 807–825.
- Hartwell, H., Hemingway, A., Fyall, A., Filimonau, V. and Wall, S. (2012) 'Tourism engaging with the public health agenda – can we promote 'wellville' as a destination of choice?', *Public Health*, 126(12), 1072–1074.
- Human Development Index (2014) *Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience*, New York: UNDP.
- Kaplan, R. and Kaplan, S. (1989) *The Experience of Nature. A Psychological Perspective*, Cambridge, UK: Cambridge University Press.
- Kaplan, S. (1995) 'The restorative benefits of nature: Towards an integrative framework', *Journal of Environmental Psychology*, 15, 169–182.
- King, M. F., Reno, V. F. and Novo, E. M. L. M. (2014) 'The concept, dimensions and methods of assessment of human wellbeing within a socioecological context: A literature review', *Social Indicators Research*, 116, 681–698.
- Knight, K. W. and Rosa, E. A. (2011) 'The environmental efficiency of wellbeing: A cross-national analysis', *Social Science Research*, 40, 931–949.
- Konu, H., Tuohino, A. and Björk, P. (2013) 'Wellbeing tourism in Finland', in Smith, M. K. and Puczkó, L. (eds) *Health, Tourism and Hospitality: Spas, Wellness and Medical Travel*, London: Routledge, pp. 345–349.

- Louv, R. (2005) *Last Child in the Woods: Saving Our Children from Nature Deficit Disorder*, Chapel Hill, NC: Algonquin Books.
- (2012) *The Nature Principle: Human Restoration and the End of Nature Deficit Disorder*, Chapel Hill, NC: Algonquin Books.
- Lunt, N., Horsfall, D. and Hanefeld, J. (2015) *Handbook on Medical Tourism and Patient Mobility*, Cheltenham, UK: Edward Elgar Publishing.
- McCabe, S. and Johnson, S. (2013) 'The happiness factor in tourism: Subjective well-being and social tourism', *Annals of Tourism Research*, 41, 42–65.
- Nawijn, J. (2011) 'Happiness through vacationing: Just a temporary boost or long-term benefits?', *Journal of Happiness Studies*, 12(4), 651–665.
- New Economics Foundation (2012) *Happy Planet Index*. Available online at: <http://www.happyplanetindex.org/assets/happy-planet-index-report.pdf> (accessed 20 October 2015).
- OECD (2013) *Better Life Index*. Available online at: <http://www.oecdbetterlifeindex.org> (accessed 21 September 2015).
- Puczkó, L. and Smith, M. K. (2010) 'Tourism-specific quality of life index: The Budapest model', in Budruk, M. and Philips, R. (eds) *Quality-of-Life Community Indicators for Parks, Recreation and Tourism Management*, Social Indicators Research Series 43, Dordrecht, The Netherlands: Springer, pp. 163–184.
- Smith, M. K. and Puczkó, L. (2012) 'An analysis of TQoL domains from the demand side', in Uysal, M., Perdue, R. R. and Sirgy, M. J. (eds) *Handbook of Tourism and Quality-of-Life (QOL) Research: The Missing Links*, Dordrecht, The Netherlands: Springer, pp. 263–277.
- (2013) *Health, Tourism and Hospitality: Spas, Wellness and Medical Travel*, London: Routledge.
- Theofilou, P. (2013) 'Quality of life: Definition and measurement', *Europe's Journal of Psychology*, 9(1), 150–162.
- Tyrväinen, L., Ojala, A., Korpela, K., Lanki, T., Tsunetsugu, Y. and Kagawa, T. (2014) 'The influence of urban green environments on stress relief measures: A field experiment', *Journal of Environmental Psychology*, 38, 1–9.
- Ulrich, R. S., Simons, R. F., Losito, B. D., Fiorito, E., Miles, M. A. and Zelson, M. (1991) 'Stress recovery during exposure to natural and urban environments', *Journal of Environmental Psychology*, 11, 201–230.
- Uysal, M., Perdue, R. and Sirgy, R. (2012) *Handbook of Tourism and Quality-of-Life Research: Enhancing the Lives of Tourists and Residents of Host Communities*, Dordrecht, The Netherlands: Springer.
- Van den Eynde, A. and Fisher, A. (2013) 'The social construction of travelling for wellbeing in Australia', in Smith, M. K. and Puczkó, L. (eds) *Health, Tourism and Hospitality: Spas, Wellness and Medical Travel*, London: Routledge, pp. 391–395.
- Villamagna, A. and Giesecke, C. (2014) 'Adapting human well-being frameworks for ecosystem service assessments across diverse landscapes', *Ecology and Society*, 19(1), 283–300.
- Voigt, C. and Pforr, C. (2013) *Wellness Tourism*, London: Routledge.
- Voigt, C., Brown, G. and Howat, G. (2011) 'Wellness tourists: In search of transformation', *Tourism Review*, 66(1/2), 16–30.



Taylor & Francis

Taylor & Francis Group

<http://taylorandfrancis.com>

Part I

History and trends

This first part focuses on the factors that have shaped the development of health tourism over time, as well as analysing some of the contemporary trends which continue to influence the sector. There has always been a multi-layered usage of health resources such as spas and thermal waters, with spiritual or religious, medical and social motivations variously influencing visitors. As noted by Warwick Frost and Jennifer Laing in Chapter 2, there are different cycles and trends over time, with hot springs or thermal waters sometimes being imbued with sacred meaning, yet at other times they have taken on a more hedonistic character. It is also evident that cultures influence and re-influence each other. Eastern cultures tended to have a strong culture of bathing in springs and these traditions were re-introduced by Arabs and Turks to Europe, for example. Spa resorts and other health tourism facilities are constantly being re-invented in response to changing political and market conditions.

Changing definitions of health also impact on the usage of resources. In Chapter 3, Melanie Kay Smith discusses the contested debates that are waged around definitions of health and healthy lifestyle. Although there is often consensus during certain periods of time, these can be short-lived and therefore create trends which require rather quick responses on the part of the industry. Historically, spa resorts often served a double (if seemingly contradictory) function of both health and hedonism. Today's societies are also grappling with the dilemma of whether to choose a healthy and hopefully long life or perhaps a happier, more hedonistic but shorter one! On the other hand, studies show that healthier people tend to be happier and that happier people are usually healthier.

The third chapter in this part, by Jennifer Laing and Warwick Frost (Chapter 4), shows how such trends are also influenced by fashionistas and famous people, including royalty but also mass media celebrities. The power of cultural icons to influence large swathes of societies should not be under-estimated. Tourists often wish to emulate celebrity lives and famous individuals can become major opinion leaders and destination champions.

Overall, health tourism is influenced by numerous factors, including politics, religion, cultural traditions, social trends, mass media and technology. These change significantly over time, but societies still come back to the same questions of how to live a long, healthy and happy life – and one which is often enhanced by tourism.



Taylor & Francis

Taylor & Francis Group

<http://taylorandfrancis.com>

History of spa tourism

Spirituality, rejuvenation and socialisation

Warwick Frost and Jennifer Laing

Introduction

Budapest is a city known for its spas, which take advantage of its numerous thermal springs. This spa heritage is conjured up for many by the glorious architectural exuberance of the neo-baroque Széchenyi Baths and the Secession-style Gellért Hotel and Baths, as well as Turkish examples such as the Rudás and Király baths, dating back to the time of the Ottoman occupation. Yet it has a far older story to tell, which reaches back to the Stone Age.

Within the limits of the modern city of Budapest are the archaeological remains of the Roman city of Aquincum, capital of the province of Lower Pannonia. They include examples of public and private baths, which are a common feature of Roman settlements throughout Europe. The Romans were not however the first to exploit this natural resource and ‘there is evidence that the Celts and Dacians also used these springs during the earlier Neolithic period’ (Laing, Voigt and Frost, 2014: 224). During the medieval period, the current site of the Gellért Hotel and Baths was chosen as the location for a hospital, leveraging off the perceived healing properties of the waters.

As we explore in this chapter, these places can be understood as a kind of *palimpsest* or layers of cultural heritage which we call *cultural landscapes* (Frost, Laing, Reeves and Wheeler, 2012; Hardesty, 2003), comprised of layers of settlements associated with the use of thermal water for a variety of purposes, including religious rites, medicinal treatments and social encounters.

In order to understand the current state of play of contemporary spa tourism, including the development and marketing of modern spa resorts (see Chapter 3), it is important to trace its historical roots. The presence of mineral springs or sources of geothermal water led to the establishment of towns and cities that now market themselves as spa or wellness centres, as well as their rejuvenation in different periods in history, often as the result of conquest or, in more recent times, due to trends that made it fashionable to seek out spa treatments and cures. Aside from Budapest, other notable examples around the world include Bath and Cheltenham in England, Karlovy Vary (Carlsbad) in the Czech Republic, Saratoga Springs in the USA and Daylesford/Hepburn Springs in Australia.

This chapter will examine the history of spa tourism, starting from ancient times, when many travelled to or settled in places boasting hot springs and baths, a number of which were based on former sacred sites. We then trace the rise of interest in ‘taking the waters’ at thermal or mineral

spas throughout the eighteenth and nineteenth centuries (Aron, 1999; Lempa, 2002). Beyond a Eurocentric view of spa history, we finish by exploring the role of spas or *onsen* in Japanese culture and the development of spa resorts in the New World, such as the USA, Australia and New Zealand. In doing so, we recognise that a single chapter can only provide an overview of the most important of these historical developments and that there are a number of gaps in the literature. Our conclusion thus contains recommendations for future research.

The appropriation of springs as sacred sites

The concept of a *water cult* stretches from prehistory into the early medieval period. Rivers, lakes and springs were seen as sacred and possessing magical powers. These were often the sites for religious ceremonies and offerings. Archaeologists now believe that many sword finds were the result of a long-running custom of sacrifice to the water gods – and that the story of Excalibur and the Lady of the Lake associated with the King Arthur myth is based on this practice. In Britain, the most famous of these ancient sites is the hot spring at Bath. In addition, other sacred places were associated with springs (Miles, 2005).

The Romans appropriated these sites for their own purposes. While turning them into bath houses, they still recognised their earlier religious significance and associated them with their own gods. Bath, for example, was called *Aquae Sulis*, meaning the ‘Waters of the God Sul’ (Miles, 2005). The Christians of the early medieval period followed the same logic. Initially, Pope Gregory ordered Augustine to destroy all pagan sites, but within a short space of time he realised that he risked alienating those he wished to convert. The policy was changed, so that sacred places were *appropriated* (Adams, 2013). Springs became holy wells, albeit still with magical healing properties. At Glastonbury, a sacred site dating way back into prehistory, a monastery was constructed, probably on the site of an ancient water shrine (Miles, 2005).

Throughout the medieval period, springs continued as sacred sites. For the common folk, they had magical healing properties and they were the sites for ongoing customs of ritual offerings such as ribbons. The main differences with earlier times were that most springs were now named for saints and their rituals incorporated those of Christianity. Even after the Reformation, the springs continued to be important to local people, albeit secularised, with local Protestant elites placing a greater emphasis on their *medicinal* rather than magical properties (Thomas, 1971).

The Romans and their legacy

Erfurt-Cooper and Cooper (2009) view the Romans as building on the traditions of using springs in the regions they conquered. Certainly, wherever they went, the Romans built bath houses which became an integral part of their culture. These were elaborate structures, with various rooms for bathing at different temperatures. Whilst having a religious element, they were widely used as a general meeting place and area for relaxation and informality.

With the decline of the Western Roman Empire, most of these baths fell into disuse. In some cases, all knowledge of these sites was lost and they have only been uncovered by accident. For example, in Braga (Portugal), the remains of a Roman bath house were discovered in 1977 when construction workers began excavating foundations for apartments (Figure 2.1). In some cases, there were surface ruins, such as Aquincum in Hungary, which was the subject of archaeological excavation in the nineteenth century. Alternatively, excavation might be prompted by a desire for loot. The Carballo bath house in Galicia was thus only rediscovered ‘by two farmers in search of treasure’ (Alonso-Alvarez, 2012: 18).



Figure 2.1 Archaeological remains of Roman baths at Braga, Portugal.

Source: J. Laing.

While the Western Empire declined, the Eastern Empire (Byzantium) flourished for centuries. It retained a strong culture of bathing in springs. Most importantly, through contact with adjoining cultures – particularly the Arabs and Turks – the appreciation of baths was passed on to them. When, in later centuries, the Arabs and Turks conquered parts of Europe, they reintroduced many of these customs and traditions. Accordingly, what looks today like influences simply coming from the East is in reality the result of complex processes of continual cross-fertilisation.

An intriguing example of confusion regarding this heritage comes from the town Girona in Catalonia, Spain. The Banys Àrabs (Arab Baths) (Figure 2.2) is a prominent heritage tourism site, though it is no longer a working bath house and was recently used as a backdrop for the television series *Game of Thrones*. Built in the twelfth century, its name identifies it as Arab. However, it is not, having been built by the local medieval nobility. In style and layout, it closely follows Roman design. This raises questions of whether it was based on Arab examples further south or on remaining Roman examples.

Across Europe, the remains of Roman spas existed through the medieval period. Some continued to operate, linking in with older traditions of magical springs. Others were mere ruins. It was not until the seventeenth century that a revival came. The water from springs began to be used as the basis for therapeutic treatments (*balneotherapy* or *balneology*), both for bathing in and for consuming, as part of a regime or *cure*. Royal support was also instrumental in setting the fashion for bathing, sometimes for political reasons. For example, Queen Elizabeth I ‘popularised public bathing in 1571 in Britain to discourage the British from travelling to Spa in Belgium’ (Smith and Puczkó, 2014: 31). The town of Spa was such a well-known resort at the time that its name was subsequently used as the nomenclature to describe all thermal resorts collectively (Smith and Puczkó, 2014; Walton, 2012). Elizabeth’s actions paved the way for the rise of what was to become the most fashionable spa town of its times – Bath.



Figure 2.2 The Banyes Àrabs (Arab Baths) in Girona.

Source: J. Laing.

Case study: Bath

Bath is inextricably linked with the novelist Jane Austen, despite the common perception that she disliked Bath for its shallow artificiality and the constant need to 'see and be seen'. Her characters certainly reinforce that view. For example, Austen's heroine Anne Elliot in *Persuasion* (1818) 'persisted in a very determined, though very silent, disinclination for Bath' (149) and refers to 'the white glare' (61) and 'the elegant stupidity of private parties' (189). Yet Jane herself wrote to her sister in 1799 that 'I am very happy at Bath' (quoted in Berger, 2013: 122). It was perhaps her family's permanent move to Bath that was the problem, forcing Austen to uproot herself from her beloved Hampshire countryside. She wrote almost nothing while she lived there (Berger, 2013), which contributed to the myth that Jane found Bath unsettling and brittle. Certainly Bath in Jane Austen's time was a whirl of social activity, encompassing balls, theatrical performances and concerts (Aron, 1999). Aside from the Roman Baths, there were visits to the Pump Room, to drink glasses of the mineral water, as well as the Assembly Rooms, a place for congregation and gossip, and a venue for music, card playing and dancing.

There are a number of reasons that have been advanced for Bath's reputation and fame as a spa destination in the eighteenth century. First, its waters were regarded as having medicinal properties and we can see that Austen's characters often come to Bath for that reason, rather than for socialising. Second, there was the presence of the gregarious Master of Ceremonies,

Beau Nash, who 'perhaps ensured that its frenzied gambling never became too scandalous' (Havinden, 1981: 207) and regulated social mobility and contact (Borsay, 2012; Walton, 2012). There was also the royal seal of approval, which started in 1702, when 'Queen Anne visited Bath, bringing the court, London society and a veneer of respectability with her' (Aron, 1999: 17). Third, the spa visit was a regular part of the itinerary of the Grand Tour (Borsay, 2012; Lempa, 2002) and Bath benefited from its proximity to London and 'the broader emergence of recreational travel as a pastime among the elite and upper middle class' (Borsay, 2012: 168). Fourth and perhaps foremost, was its backdrop of magnificent Regency architecture, notably the Circus (1754–1758) and the Royal Crescent (1767–1774) (Borsay, 2012; Havinden, 1981), the work of John Wood the elder and his son (John Wood the younger). The sight of these stylishly harmonious neo-classical facades is still jaw-dropping and linked with British spa heritage through its nods to Roman design, creating an image of Bath in the minds of visitors 'as a Roman city on English soil' (Haley, Snaith and Miller, 2005: 648).

The city declined as a spa resort after the Battle of Waterloo (Havinden, 1981), when visiting European spas once again became feasible. It briefly revived in the nineteenth century with the building of the Royal Baths, but was then superseded by various seaside towns in the late Victorian era (Smith and Puczkó, 2014), such as Bournemouth and Blackpool. Thankfully, despite the waning of the spas, plans to destroy the Georgian architectural heritage in the 1960s were met with protests, preserving the architectural fabric and the city is now designated as a World Heritage site (Haley et al., 2005). The closure of its municipal hot pools in 1978, due to fear of infection after a woman contracted legionnaires' disease, seemed to mark the end of Bath's grand spa reputation.



Figure 2.3 The Thermae Spa, Bath.

Source: J. Laing.

(continued)

(continued)

However these pools were eventually reopened under the brand of the *Thermae Spa* in 2006, with the help of money from the National Lottery (Laing et al., 2014).

Advertising collateral of the *Thermae Spa* acknowledges the spiritual history of its spring, which is described in one brochure we picked up as 'an official sacred site' and homage is paid to its Roman heritage in the naming of the Minerva Bath (Laing et al., 2014). The architecture incorporates Georgian elements, juxtaposed with glass and steel (Figure 2.3), in a fusion of old and new that is both sensitive to the past and boldly contemporary.

Europe

The eighteenth and nineteenth centuries were a golden age of spas in Europe. In nearly every country, tourist resorts grew up around springs and provided the template for later developments in specialised tourism urban landscapes. Indeed, spas set the pattern for towns built on providing leisure services for tourists attracted by nature (Borsay, 2012). While spas were attractive in general, demand ebbed and flowed and fashions and the possibilities for complementary activities and infrastructure changed over time. Consequently, many of these spa resorts were dynamic, reinventing themselves a number of times in response to changing market and political conditions (Alonso-Alvarez, 2012; Blackbourn, 2001; Brodie, 2012; Gordon, 2012).

What drove the fashion for spas has been the subject of some debate. Commonly, it is linked to changing attitudes to nature and science, associated with the more rational approach of the Age of Enlightenment. As a result there was a greater interest in the health properties of spas (Alonso-Alvarez, 2012; Aron, 1999). However, Blackbourn (2001), whilst acknowledging the new ideas of the Age of Enlightenment, argued that the eighteenth-century growth of continental spas was also driven by the fashions and needs of royal courts (Alonso-Alvarez, 2012) and by a more entrepreneurial attitude towards the commercial possibilities of leisure. Brodie (2012) and Lempa (2002) also highlight the growth of a middle class that was attracted to leisure pursuits, especially those that involved conspicuous consumption.

Paradoxically, while consuming spa water was promoted as the **antidote** to the problems of civilisation – nerves, stress, alcoholism and other addictions – spas were developed to provide the pleasures of that civilisation – dining, social events, gambling (Blackbourn, 2001; Walton, 2012). As Lempa (2002: 65) observes: 'A spa guest was thus pressed between dietetic prescriptions of tranquillity and rhythm, on the one hand and social incentives to find stimulation and excitement or, at least, to avoid boredom, on the other'. The fashion for royalty to holiday at spas led to a strong court culture and the idea of a season in which it was important for the elite of society to be present and to be seen. In time, a concept of *spa diplomacy* developed, in which informal and formal talks could occur in the relatively neutral space of the international spa resort.

By the nineteenth century, the market for European spas had broadened. Particularly in Germany, the *bourgeoisie* were keen to imitate the manners and customs of royalty and nobility. Accordingly, certain resorts developed to cater for this demand, whilst others struggled to retain the aura of exclusivity. Yet the presence of guests from a socially diverse background was part of its charm and provided novelty and an exotic ambience for guests, regardless of their class or ethnicity (Lempa, 2002). The development of cheap railway transport brought a flood of new customers, including large numbers of day trippers from nearby cities, with consequent criticisms that once high-class cultural enclaves were being ruined (Blackbourn, 2001).

A wide range of novelists found patronage and material in spa society. In surveying the fictional narratives of eighteenth- and nineteenth-century continental spas, Blackbourn (2001) identified a number of intriguing tropes. Spas created their own temporary societies in which social divisions were not as apparent, as the usual cues were missing or distorted. People dressed and behaved differently. Emperor Wilhelm I of Germany, for example, nearly always dressed in military uniform, except when he holidayed at the resort of Bad Ems. Introductions and assignments were less structured and formal. Consequently, spa fiction focused on the fears of such a society without the normal rules. Two types of characters regularly appeared. The first was a beautiful female, pretending to be upper class whilst trying to marry above her station. The second was the male confidence trickster, taking advantage of this social fluidity to pass himself off as aristocratic. Their targets were bored, naïve and resultantly vulnerable. Similarly, a study of eighteenth-century Scarborough identified a sexually permissive society with a high level of prostitution (Brodie, 2012).

The New World

As European settlers in the nineteenth century settled across the USA, Canada, Australia and New Zealand, they carried with them a cultural baggage that included the knowledge of trends in Europe. Paradoxically, they both appreciated and wanted to exploit nature. As their frontiers expanded, they came across a range of thermal and mineral springs. In many cases, these were already known to and used by the Indigenous people (Erfurt-Cooper and Cooper, 2009). Knowing how hot and mineral springs were valued in Europe, the settlers sought to enjoy and develop these as spa resorts. Whilst promoted as sophisticated, in contrast to Europe, the tourism that developed was broad-based and there were no royal spas. However, like their European counterparts, they served as socially sanctioned places for *courting*, giving men and women the opportunity to ‘meet, socialize, play and sometimes find mates’ (Aron, 1999: 26; see also Brodie, 2012). They also provided proximity to the hazards of gambling, with frequent games such as billiards or cards acting as a lure, particularly for young men (Aron, 1999).

In the USA, the two most well-known spa resorts developed in the early nineteenth century were Saratoga Springs (New York) and Hot Springs (Arkansas). Close to urban markets on the Atlantic seaboard, Saratoga Springs became arguably the pre-eminent American spa resort. Distinguished by grand hotels, it followed the European model in offering vacationers an array of gambling and social opportunities to complement the waters (Aron, 1999; Cross, 2012). Hence, many of the visitors were there ‘for pleasure or fashion’ (Aron, 1999: 23), rather than for recuperation. Saratoga had a miniature railroad, while another resort, Fauquier White Sulphur Springs in Virginia, staged yearly medieval festivals to keep visitors amused (Aron, 1999). Intriguingly, in 2007 Disney opened Saratoga Springs Resort in Florida, where ‘the predominance of the late Victorian theme . . . suggests that the era of genteel tourism and especially the mineral springs spa holds lasting appeal’ (Cross, 2012: 84).

The success of Saratoga Springs was partly due to a decision made in 1819 to separate its municipal government from the local conservative county. Further west, a different model was adopted for the Hot Springs in Arkansas. In 1832, a federal reserve was created to protect the springs. It was a federal initiative, for at that time Arkansas had not yet achieved statehood. Such an arrangement anticipated the federal declaration of Yellowstone National Park, in the territories of Montana and Wyoming in 1872 and the Hot Springs Reserve is often cited as an important milestone in the history of national parks and other protected natural areas (Frost and Hall, 2009).

Across the USA, other attempts were made to promote hot springs as tourist resorts. These met with mixed success, for often the springs were too distant from markets. Noteworthy

examples include Thermopolis in Wyoming, Hot Springs in New Mexico (which changed its name to Truth or Consequences in 1950 as part of a radio promotion) and Calistoga in California's Napa Valley (an invented name combining Saratoga and California, either arising from a marketing ploy or a malapropism, depending on which story one believes).

Across the border in Canada, the builders of the Canadian Pacific Railway discovered hot springs at Banff in the Rocky Mountains. Following the example of Arkansas Hot Springs and Yellowstone, the national government acted to protect them from inappropriate development, proclaiming a reserve in 1885 and an expanded national park in 1887 (Boyd and Butler, 2009; Frost and Hall, 2009). A grand hotel was built and 'the core of the park, the Banff townsite, represented tamed nature set within British aesthetic tradition and landscape design' (Frost and Hall, 2009: 33).

New Zealand, a geologically new land, was highly thermally active. By 1888, it had 20 spa resorts, whereas in contrast Australia – much larger, but much older – had only 13 (White, 2012). In 1874, former Premier William Fox called for the thermal springs at Rotorua to be protected, specifically citing the recent US legislation to establish Yellowstone. This was probably the first example in New Zealand or Australia of the intention to duplicate the American idea of national parks. However, unlike in the USA, the Indigenous Maori were recognised as retaining ownership. Reacting to the pressure/opportunities of tourism, the solution was to create a thermal reserve, surrounded by a planned township with blocks offered on 99-year leases (Frost and Laing, 2013). A variety of European architectural styles were appropriated, with the bathhouse known as the Great South Seas Spa (now the Rotorua Museum of Art and History) built in Tudor style in 1908 and the Blue Baths (Figure 2.4) built in the 1930s in Spanish mission style (Laing et al., 2014).

In Australia, the Victorian Gold Rushes revealed numerous mineral springs. As occurred elsewhere, the settlers were led to many of these by the Indigenous people. At Hepburn Springs, Swiss-Italian miners who stayed were instrumental in developing a spa resort (White, 2012). They ran small hotels and ancillary tourist services, whereas the colonial government



Figure 2.4 The Blue Baths in Rotorua, New Zealand.

Source: J. Laing.

proclaimed the springs a reserve in 1865 and opened a railway in 1880. The government also had a role in conducting official analyses of the mineral content, providing an authoritative stamp of approval (White, 2012).

Demand for spa holidays reached a peak in the period between the two World Wars. This was an intriguing period in Australia's history. Despite the Great Depression and pressure to increase agricultural production at all costs, there was a boom in nature-based tourism. This was manifest by large increases in bushwalking, camping, scenic roadways, national parks and wild-life zoos (Frost, 2004). Spas in rural settings complemented this trend. After the Second World War, a wider range of leisure options led to a decline in spa visitation, but this has increased again in the last few decades, with redevelopments such as the Hepburn Bathhouse and Spa in Hepburn Springs and Peninsula Hot Springs at Rye on the Mornington Peninsula.

Japan

Public use of hot spring baths (*onsen*) in Japan is said to date back to the Edo Period (seventeenth to eighteenth centuries) according to Hiwasaki (2006). However, evidence of bathing in hot thermal water goes back over 2,000 years, with the Yumine *onsen* said to be 1,800 years old (Guichard-Anguis, 2011) and these places were considered to be sacred; many were graced with 'shrines or dedicated monuments to the water gods' (Serbulea and Payyappallimana, 2012: 1371). Bathing was a form of purification and a ceremony and etiquette have been developed for visiting the *onsen* which is 'unique to Japan' (Laing and Weiler, 2008: 386). Many of these *onsen* have inns (*ryokan*) attached (Laing and Weiler, 2008) which encourage visitors to stay nearby and spend longer in the region.

Japan has the greatest number of hot springs in the world, located in 3,170 areas across the country (Serbulea and Payyappallimana, 2012). This ubiquity has provided the impetus for development of therapies such as *touji* (bath cures) or *onsen ryohou* for dealing with symptoms of ill health or disease (Serbulea and Payyappallimana, 2012). This use of thermal water for medicinal or healing purposes dates back to the sixteenth century (Serbulea and Payyappallimana, 2012). Their usage was later changed to an emphasis on play and relaxation, similar to the European story. There was a similar decline in patronage in the twentieth century, with steps taken in more recent times to boost interest in visiting the *onsen*, particularly amongst younger people (Laing and Weiler, 2008). While 'there have been several rural revitalisation initiatives through decentralisation and place branding that have resulted in the revival of onsens as part of the tourism industry, they have not substantially focused on their healing aspects' (Serbulea and Payyappallimana, 2012: 1367).

Conclusion

The phenomenon of bathing in mineral springs is a global one (Walton, 2012) and thus the history of spa tourism has a tremendous reach. We have only provided a brief overview of its evolution in this chapter and more work is needed to tease out its early evolution and growth, particularly the importance of the spiritual or religious dimension in this process.

Other areas that merit further study include the history of spas in the twentieth century, 'especially post-Second World War spa histories, engaging with wide-spread decline (and revival)' (Walton, 2012: 3). We have considered Bath and Hepburn Springs in this chapter, but there are other destinations that merit closer attention in both the Old and New Worlds.

We have briefly considered the Asian history of spa tourism in the context of the Japanese *onsen*, given its longevity and importance within Japanese culture, but there are many other

examples that could have been considered and are in need of further research. These include the Indian ayurvedic practices and spa tourism heritage in destinations such as Thailand, Bali and Malaysia. Other parts of the world that would benefit from research on their history of use of springs include Africa and the Middle East.

References

- Adams, M. (2013) *The King in the North: The Life and Times of Oswald of Northumbria*, London: Head of Zeus.
- Alonso-Alvarez, L. (2012) 'The value of water: The origins and expansion of thermal tourism in Spain, 1750–2010', *Journal of Tourism History*, 4(1), 15–34.
- Aron, C. (1999) *Working at Play: A History of Vacations in the United States*, New York: Oxford University Press.
- Austen, J. (1818) *Persuasion*, 1984 edition, Harmondsworth, UK: Penguin.
- Berger, R. (2013) 'Hang a right at the Abbey: Jane Austen and the imagined city', in Raw, L. and Dryden, R. G. (eds) *Global Jane Austen: Pleasure, Passion and Possessiveness in the Jane Austen Community*, London: Palgrave Macmillan, pp. 119–142.
- Blackbourn, D. (2001) "'Taking the waters": Meeting places of the fashionable world', in Geyer, M. H. and Paulmann, J. (eds), *The Mechanics of Internationalism: Culture, Society and Politics from the 1840s to the First World War*, Oxford, UK: Oxford University Press, pp. 435–457.
- Borsay, P. (2012) 'Town or country? British spas and the urban–rural interface', *Journal of Tourism History*, 4(1), 155–169.
- Boyd, S. W. and Butler, R. W. (2009) 'Tourism and the Canadian National Parks system: Protection, use and balance', in Frost, W. and Hall, C. M. (eds) *Tourism and National Parks: International Perspectives on Development, Histories and Change*, London: Routledge, pp. 102–113.
- Brodie, A. (2012) 'Scarborough in the 1730s – spa, sea and sex', *Journal of Tourism History*, 4(1), 125–153.
- Cross, G. (2012) 'Saratoga Springs: From genteel spa to Disneyfied family resort', *Journal of Tourism History*, 4(1), 75–84.
- Erfurt-Cooper, P. and Cooper, M. (2009) *Health and Wellness Tourism: Spas and Hot Springs*, Bristol, UK: Channel View.
- Frost, W. (2004) 'Australia unlimited? Environmental debate in the Age of Catastrophe, 1910–1939', *Environment and History*, 10(3), 285–303.
- Frost, W. and Hall, C. M. (2009) 'American invention to international concept: The spread and evolution of national parks', in Frost, W. and Hall, C. M. (eds) *Tourism and National Parks: International Perspectives on Development, Histories and Change*, London: Routledge, pp. 30–44.
- Frost, W. and Laing, J. (2013) 'From Yellowstone to Australia and New Zealand: National parks 2.0', *Global Environment*, 12, 62–79.
- Frost, W., Laing, J., Reeves, K. and Wheeler, F. (2012) 'A golden connection: Exploring the challenges of developing interpretation strategies for a Chinese heritage precinct on the Central Victorian Goldfields', *Historic Environment*, 24(1), 35–40.
- Gordon, B. (2012) 'Reinventions of a spa town: The unique case of Vichy', *Journal of Tourism History*, 4(1), 35–55.
- Guichard-Anguis, S. (2011) 'Walking through World Heritage forest in Japan: The Kumano pilgrimage', *Journal of Heritage Tourism*, 6(4), 285–295.
- Haley, A. J., Snaith, T. and Miller, G. (2005) 'The social impacts of tourism: A case study of Bath, UK', *Annals of Tourism Research*, 32(3), 647–668.
- Hardesty, D. L. (2003) 'Mining rushes and landscape learning in the modern world', in Rockman, M. and Steele, J. (eds) *Colonization of Unfamiliar Landscapes: The Archaeology of Adaptation*, London: Routledge, p. 81.
- Havinden, M. (1981) *The Somerset Landscape*, London: Hodder and Stoughton.
- Hiwasaki, L. (2006) 'Community-based tourism: A pathway to sustainability for Japan's protected areas', *Society and Natural Resources*, 19(8), 675–692.
- Laing, J. and Weiler, B. (2008) 'Mind, body and spirit: Health and wellness tourism in Asia', in Cochrane, J. (ed.) *Asian Tourism: Growth and Change*, Oxford, UK: Elsevier Publishing, pp. 379–389.
- Laing, J., Voigt, C. and Frost, W. (2014) 'Fantasy, authenticity and the spa tourism experience', in Voigt, C. and Pforr, C. (eds) *Wellness Tourism: A Destination Perspective*, London: Routledge, pp. 220–234.

- Lempa, H. (2002) 'The spa: Emotional economy and social classes in nineteenth-century Pyrmont', *Central European History*, 35(1), 37–73.
- Miles, D. (2005) *The Tribes of Britain*, London: Phoenix.
- Serbulea, M. and Payyappallimana, U. (2012) 'Onsen (hot springs) in Japan – transforming terrain into healing landscapes', *Health and Place*, 18, 1366–1373.
- Smith, M. and Puczkó, L. (2014) *Health, Tourism and Hospitality: Spas, Wellness and Medical Travel*, 2nd edn, London: Routledge.
- Thomas, K. (1971) *Religion and the Decline of Magic*, New York: Scribner.
- Walton, J. K. (2012) 'Health, sociability, politics and culture. Spas in history, spas and history: An overview', *Journal of Tourism History*, 4(1), 1–14.
- White, R. (2012) 'From the majestic to the mundane: Democracy, sophistication and history among the mineral spas of Australia', *Journal of Tourism History*, 4(1), 85–108.