



EUROPE  
CHAPTER | Travel and Tourism  
Research Association

---

**Health, Wellness and Tourism: healthy tourists, healthy business?  
Proceedings of the Travel and Tourism Research Association Europe 2010  
Annual Conference 1-3 September, Budapest, Hungary**



Puczko, L. (Ed) (2010).

Health, Wellness and Tourism: healthy tourists, healthy business?

Proceedings of the Travel and Tourism Research Association Europe 2010 Annual  
Conference

Dalama, Sweden: Travel and Tourism Research Association Europe.

ISBN: 978-91-633-4666-8

The **Travel and Tourism Research Association** ([www.ttra.com](http://www.ttra.com)) is an international network of travel and tourism research and marketing professionals from a wide variety of backgrounds. The Association provides a forum where you may benefit from meeting other people with similar interests. It was founded in 1970 in the USA. Since 1997, the European Chapter of the TTRA ([www.ttra-europe.org](http://www.ttra-europe.org)) has been active in extending its activities in Europe and beyond, especially with its annual conference ([www.ttra-europeconference.com](http://www.ttra-europeconference.com)).

---

## **ATTRIBUTES OF HEALTH AND WELLNESS TOURISM UNITS – AN IMPORTANCE-PERFORMANCE ANALYSIS**

### **Joana Alegria Quintela**

University of Aveiro / Dept. of Economics, Management and Industrial Engineering  
MA in Tourism Management and Development  
Campus Universitário de Santiago . 3810-193 Aveiro, Portugal  
[joana.quintela@gmail.com](mailto:joana.quintela@gmail.com)

### **Anabela Gomes Correia**

Polytechnic Institute of Setúbal / College of Business and Administration  
Campus do IPS, Estefanilha 2914-193 Setúbal, Portugal  
Center for Governance and Public Policy Research – University of Aveiro  
[acorreia@esce.pt](mailto:acorreia@esce.pt)

### **Jjoaquim Gonçalves Antunes**

Polytechnic Institute of Viseu / School of Technology  
Avenida Coronel José Maria Vale de Andrade  
Campus Politécnico . 3504 - 510 Viseu, Portugal  
[jantunes@dgest.estv.ipv.pt](mailto:jantunes@dgest.estv.ipv.pt)

### **Abstract**

The main objective of this study consists of identifying the attributes that please more and that are more emphasized by the users of five thermal units and a hotel with Spa situated in a Portuguese region. The empiric research consisted on the interpretation of surveys administrated to their users. The model of this study was based on Importance-Performance Analysis. Through the IPA analysis, we verified that all the attributes are concentrated on the area of the critical forces, in which the importance and performance attained high levels. Although, must still be emphasized that “Relation quality / price”, “Quality of complementary services” and “Geographic localization” are attributes that belong to the area risk/opportunity and are in its threshold, which means that Health and Wellness Tourism units managers should concentrate efforts to improve the performance of these attributes because they are very important to their users.

**Keywords:** Health, Wellness, Tourism, Attributes, Performance, Satisfaction.

### **Introduction**

The growth of Health and Wellness Tourism in Europe is clear and it is due to a number of social circumstances, such as the increase of the citizens and to the population oldness and its lifestyles.

On recognizing the increase of the number of people interested in having leisure times with quality, becomes evident and necessary that the supply should give special attention to this question, as an answer to the needs and wishes of consumers, as well as the fulfillment of their satisfaction levels. This perspective is seen as a determinant factor in what concerns to the competitiveness which allows the regional development of the inner regions of Portugal, where this kind of touristic offer can mainly be found.

---

The study investigates the performance of the main attributes in Health and Wellness units, located in Viseu, a region in the center of Portugal, well-known by its thermal and touristic potential.

The purpose of this study is employing the importance-performance analysis (IPA), a decision-making tool for service management, to assess the performance of the attributes of Health and Wellness units in Viseu region and analyze the importance those attributes have to their users.

The Importance-Performance Analysis (IPA) is a technique introduced into the field of marketing by Martilla and James (1977). Although this research method has been referred mainly in marketing literature it was initially applied in the automobile sector. But in a short time the application of this technique was applied to the health sector, banking (Ennew *et al.*, 1993), hotel industry (Martin, 1995), education and destination tourism (Hudson and Shephard, 1998).

This technique identifies strengths and weaknesses of brands, products and services by comparing the two criteria that consumers use in making a choice: the relative importance of attributes and consumers' evaluation of the offering in terms of those attributes.

Once the importance and performance of each attribute have been plotted, the resulting IP space is traditionally divided into four quadrants. The priorities for improving the attributes of the service are then inferred from the quadrant where each attribute (performance, importance point) is located.

Unlike SERVQUAL model created by Parasuraman, Zeithaml & Berry, (1994), which is best described as an absolute performance measure of consumer perceptions of service quality, the Importance-Performance paradigm also seeks to identify the underlying importance attributed by consumers to the various quality criteria being assessed (Sampson and Showalter 1999), constituting a tool for managerial decision making in services.

Several different approaches have been used to undertake Importance-Performance Analysis (IPA), aka quadrant analysis or gap analysis. Martilla and James (1977) originally suggested that the positioning of the grid lines is a matter of judgement, because the value of IPA is in determining relative, rather than absolute, levels of importance. In some applications, the point where the quadrant grid lines cross (the cross-point) is placed in the centre of the scale used.

Slack (1991) presented an IPA model that considered a relationship between importance and performance and theorized that target levels of performance for particular product attributes should be proportional to the importance of those attributes. In other words, importance is seen as viewed as a reflection of the relative value of the various quality attributes' to consumers. According to Barsky (1995), lower importance ratings are likely to play a lesser role in affecting overall perceptions, while higher importance ratings are likely to play a more critical role in determining customer satisfaction. IPA also helps to identify which attributes, or combinations of the attributes are more influential in repeat purchase behavior and which have less impact. The information is valuable for the development of marketing strategies in organizations (Ford *et al.*, 1991). This view is confirmed by Lovelock *et al.* (1998), who stated that importance-performance analysis is an especially useful.

The theoretical and practical issues relating to the variations in these components, while quadrant analysis of some sort appears to be the most common method of inferring priorities for service improvement in IPA, sometimes some type of gap analysis is also used.

### Methods

The methodology used in this study consists of the review of the literature and in the analysis of statistic data. The statistical analysis was conducted based on the quantitative data from the survey used for achieving the research objectives.

A modified IPA model was used for a sample of users of the five therms located in Viseu's region and a hotel with Spa facilities. These health and wellness units were selected to investigate the importance of service/product attributes for service providers' and users' evaluation of services.

A survey of users of health and wellness units was conducted for measuring and comparing the perception of these clients about health and wellness units attributes'. Empiric data were collected during a period of four months.

The survey was applied randomly to the users of the mentioned units that were asked to complete the questionnaire in person. In order to qualify for the sample, individuals had to be over the age of 18 years old.

Respondents were also asked to provide importance and performance scores, in two identical five-point Likert's scales, for the 15 service attributes identified for health and wellness units. The instrument was applied for measuring the key variables in the framework including the perception of service quality, overall satisfaction, and pride in the university. The health and wellness users were asked about their perceptions with a 5-point rating scale ranging from "Very Low" to "Very High" on 15 items in the questionnaire (Table 1).

**Table 1 – Difference between importance and performance means'.**

| 1   | Very Low | 5 | Very High | Non applicable | NA   |
|---|----------|---|-----------|----------------|------|
| SERVICE / PRODUCT ATTRIBUTES                                  |          |   |           |                |      |
| Quality of attendance   | 1        | 2 | 3         | 4              | 5 NA |
| Thermal waters' quality                                       | 1        | 2 | 3         | 4              | 5 NA |
| Quality of equipment and public areas                         | 1        | 2 | 3         | 4              | 5 NA |
| Confidence on the received service                            | 1        | 2 | 3         | 4              | 5 NA |
| Quality of the medical consultants                            | 1        | 2 | 3         | 4              | 5 NA |
| Quality of thermal application techniques                     | 1        | 2 | 3         | 4              | 5 NA |
| Variety of treatments   | 1        | 2 | 3         | 4              | 5 NA |
| Hygiene of the public areas                                   | 1        | 2 | 3         | 4              | 5 NA |
| Comfort of the public areas                                   | 1        | 2 | 3         | 4              | 5 NA |
| Quality of the complementary services (lodging and animation) | 1        | 2 | 3         | 4              | 5 NA |
| Technical competence of therapists                            | 1        | 2 | 3         | 4              | 5 NA |
| Efficiency and results of the treatments                      | 1        | 2 | 3         | 4              | 5 NA |
| Publicity   | 1        | 2 | 3         | 4              | 5 NA |
| Geographical location (transportation and accessibilities)    | 1        | 2 | 3         | 4              | 5 NA |

The survey was distributed to 400 users of those units, with a rate of answer in the percentage of 64,5%, making a total of 268 valid surveys.

### Results

The gap between importance and performance from both perspectives were also evaluated using the T-test criteria as shown in Table 2.

After the treatment of the obtained data through the survey that constitutes the main search instrument of our empiric study, we can interpret e discuss the results.

**Table 2 – Difference of means between the importance and performance levels.**

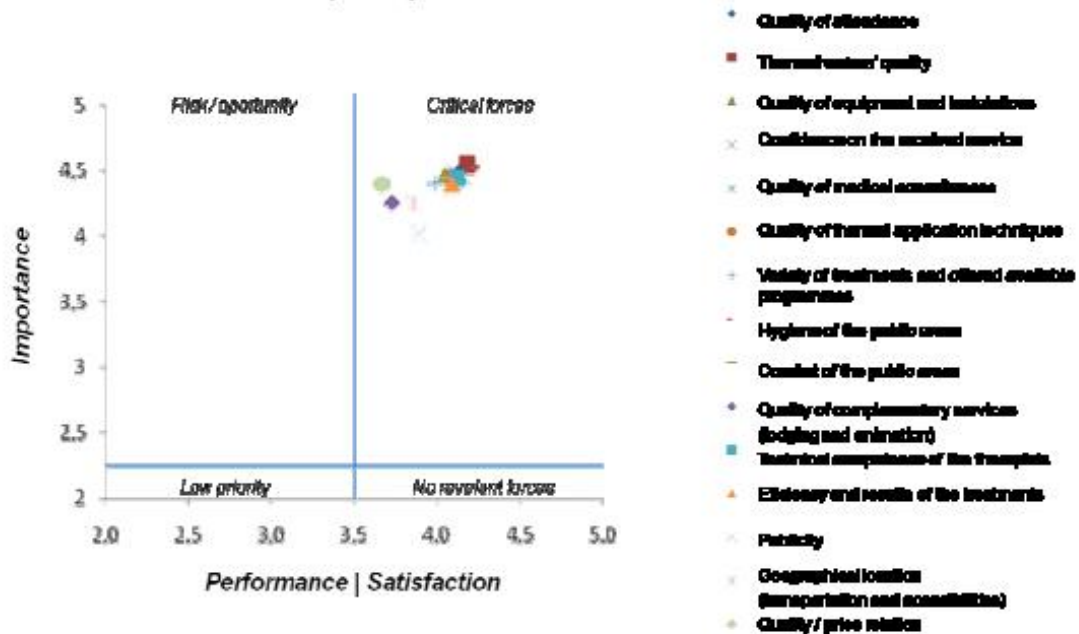
| <i>Attributes of the Health and Wellness Units</i> |  | <i>Mean</i>                     |                                  | <i>Difference Imp. – Perf.</i> | <i>Level of Significance (Sig. 2-tailed)</i> | <i>Test of the nule (H0) and alternative hypothesis (H1)</i>                               |
|--|--|---------------------------------|----------------------------------|--------------------------------|--|--|
|  |  | <i>Level of Importance Mean</i> | <i>Level of Performance Mean</i> |                                |  |  |
| <b>Pair 1</b>                                      | <i>Quality of attendance</i>   | 4,48                            | 4,13                             | - 0,35                         | 0,000  | Rejection of the H0 because the significance level is inferior to 0,05, prevailing the H1. |
| <b>Pair 2</b>                                      | <i>Thermal waters' quality</i>                                       | 4,54                            | 4,18                             | - 0,36                         | 0,000  |  |
| <b>Pair 3</b>                                      | <i>Quality of equipment and public areas</i>                         | 4,47                            | 4,05                             | - <b>0,42</b>                  | 0,000  |  |
| <b>Pair 4</b>                                      | <i>Confidence on the received service</i>                            | 4,47                            | 4,12                             | - 0,35                         | 0,000  |  |
| <b>Pair 5</b>                                      | <i>Quality of the medical consultants</i>                            | 4,44                            | 4,16                             | - 0,28                         | 0,000  |  |
| <b>Pair 6</b>                                      | <i>Quality of thermal application techniques</i>                     | 4,45                            | 4,08                             | - 0,37                         | 0,000  |  |
| <b>Pair 7</b>                                      | <i>Variety of treatments</i>   | 4,40                            | 3,99                             | - 0,41                         | 0,000  |  |
| <b>Pair 8</b>                                      | <i>Hygiene of the public areas</i>                                   | 4,52                            | 4,20                             | - 0,32                         | 0,000  |  |
| <b>Pair 9</b>                                      | <i>Comfort of the public areas</i>                                   | 4,44                            | 4,07                             | - 0,37                         | 0,000  |  |
| <b>Pair 10</b>                                     | <i>Quality of the complementary services (lodging and animation)</i> | 4,27                            | 3,74                             | - <b>0,53</b>                  | 0,000  |  |
| <b>Pair 11</b>                                     | <i>Technical competence of therapists</i>                            | 4,45                            | 4,12                             | - 0,33                         | 0,000  |  |
| <b>Par 12</b>                                      | <i>Efficiency and results of the treatments</i>                      | 4,39                            | 4,09                             | - 0,30                         | 0,000  |  |
| <b>Pair 13</b>                                     | <i>Publicity</i>   | 4,02                            | 3,88                             | - 0,14                         | 0,000  |  |
| <b>Pair 14</b>                                     | <i>Geographical location (transportation and accessibilities)</i>    | 4,25                            | 3,86                             | - 0,39                         | 0,000  |  |
| <b>Pair 15</b>                                     | <i>Quality / price relation</i>                                      | 4,40                            | 3,66                             | - <b>0,74</b>                  | 0,000  |  |

**Note:** Total of 15 variables. *T-test* bilateral with a significance level of 0,05; N=268.

*Gap* (Sat-Imp) difference between the users' satisfaction about the service and the importance given to each attribute.

Relatively to IPA analysis, we verify that the 15 attributes considered in the survey are all concentrated on the area of the critical forces (Figure 1), in which the importance and the performance attain high levels, calling the attention and motivating the Health and Wellness units managers' to profit the competitive advantage. This aspect strengthens what was previously said about the high level of satisfaction the users have in the conditions and services offered by those units.

From this analysis must still be emphasized that the "Relation quality / price", the "Quality of complementary services (lodging and leisure)" and the "Geographic localization (quality of transports and accessibilities)" are attributes that, in spite of being in a comfortable situation, belong to the area risk/opportunity and are in its threshold, which means that the managers of Health and Wellness Tourism units has to concentrate efforts to improve the performance of these attributes because they are important to the clients.



**Figure 1 – Importance-performance Analysis.**

In this sense, the IPA helps to verify that there's a high evaluation of all the considered attributes, alerting and incentive the managers of the health and wellness units to take a competitive advantage, because the attributes are classified with a high level of importance and performance.

---

### **Conclusions and Discussion**

In this study, the Importance-Performance attributes of a service quality of health and wellness units were examined among users. The key results were that users are satisfied with the attributes of the services and equipments of the units they visited.

However, regarding to the Importance attributes users feel some had lower mean data of some attributes (i.e. "Relation quality / price", "Quality of complementary services" and the "Geographic localization"). These findings may be concluded that health and wellness managers should give more attention to these attributes that influences the users satisfaction with the service received during their stay in those units. Moreover, we suggest that these service attributes would be improved.

This study also was focused on significant factors affecting respondents' satisfaction with a service quality in the visited health and wellness units.

The findings of this study could be applied to improve service quality, equipments and facilities in those private health and wellness, well-known for its touristic potential.

### **Research limitations/implications**

The main limitations of this study are that it was based on a single service industry and that convenience sampling was used. However, its methodology and results are valid for various industries in the service sector and provide a solid basis for future research.

The contribution and the value of this study consist in the fact that service managers can exploit the approach taken by this study to improve service management and attributes of health and wellness units. The managers have to keep considering the needs and wants of their users regarding their satisfaction levels and their loyalty, consequently.

Therefore, future research may be needed to examine these proposed variables. From the findings, solving service problems and improving quality of attributes and services of health and wellness units are an important task to use all of their potentialities.

### **References**

- Barsky, J.D. (1995). *World-Class Customer Satisfaction*, Chicago, IL: Irwin Publishing.
- Ennew, C. & Binks, M. R. (1999). Impact of Participative Service Relationships on Quality, Satisfaction and Retention: An Exploratory Study. *Journal of Business Research*, 46, 121-132.
- Ford, J. B., Joseph, M. & Joseph, B. (1991). Importance – performance analysis as a strategic tool for service marketers: the case of service quality perceptions of business students in New Zealand and the USA. *European Journal of Marketing*, 27(2), 59- 70.
- Hudson, S., Hudson, P. & Miller, G. A. (2004). The Measurement of Service Quality in the Tour Operating Sector: A Methodological Comparison. *Journal of Travel Research*, Vol. 42, February, 305-312.
- Lovelock, C., Vandermerwe, S. & Lewis, B. (1998). *Services Marketing. A European Perspective*. Prentice-Hall Europe.
- Martilla, J.A., James, J.C. (1977), "Importance-performance analysis". *Journal of Marketing*, January, 77-9.
-

- 
- Martin, D.W. (1995). An Importance-Performance Analysis of Service Providers', Perception of Quality Service in the Hotel Industry. *Journal of Hospitality and Leisure Marketing*, 3 (1), 5-17.
- Parasuraman, A., Zeithaml, V.A. & Berry, L. (1994). SERVQUAL: A Multiple-Item Scale for Measuring Consumer Perceptions of Service Quality. *Journal of Retailing*. 64:1, 12-40.
- Sampson, S. E. and Showalter, M. L. (1999). The Performance – Importance Response Function: Observation and Implications. *The Service Industries Journal*, Vol. 19(3), 1-25.
- Slack, N. (1991). The Importance-Performance Matrix as a Determinant of Improvement Priority, *International Journal of Operations & Pr*