

Article

Attribute Framework Validation for Wellness Tourism within the Context of Thailand

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Abstract: Background: Research on the theoretical integration of attributes of wellness tourism in the form of the physical, mental, spiritual, and environmental (PMSE) attribute framework and the effect of cultural differences on the framework validation has not been conducted before. Objectives: This study developed and validated the key underlying attributes of the wellness tourism experience framework within the Thailand context. Methods: From reviewing the related literature to identify potential sub attributes under the four dimensions of the PMSE framework, themes were developed using a theory- and prior research-driven method within different cultural contexts. The fitness of the PMSE attribute framework model within the context of Thailand wellness tourism was confirmed through a survey design with a quantitative approach from the generalities of the sample groups. The entire dataset was statistically tested with descriptive statistics and confirmatory factor analysis (CFA). Results and Conclusions: After adjustments, the four-factors with a 28-item model substantiated the data. The results validated that the mental experience dimension accounted for the most variance, with an indicator value of 0.99 in the framework, predicting the effective wellness tourism experience better than the other attributes. Experience design should involve the participation of all stakeholders in the wellness tourism system in terms of managerial contribution. Recommendations for the planning of wellness experiences concerning each four-factor will be investigated in future studies.

Keywords: confirmation factor analysis; PMSE experience framework; wellness tourism; wellness tourism attributes; wellness tourism experience



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1. Introduction

Wellness tourism has been rapidly growing recently in terms of tourism industry management. A steady growth rate of 7.8% in a five-year period (2012–2017) and an annual growth rate double that of general tourism (3.2%) were stated in a study by Csirmaz and Pető [1]. Wellness tourism represents one of the fastest-growing market segments worldwide, furthermore, in accordance with global tourism figures, 16% of annual revenue is now wellness driven [2–6]. However, the COVID-19 pandemic has delayed the growth trend from the forecast of the future turnover of USD 919.4 billion [3]. After the pandemic crisis or the COVID-19 affected in 2020, the rise of wellness research has been redefined from a disease prevention framework to preventive strategies in various perspectives from multi-industries including tourism [7]. The global wellness economy stood at USD 4.4 trillion in 2020 amid the chaos and disruptions caused by COVID-19, while global GDP declined by 2.8% [3].

The recent tourism literature research has also identified wellness tourism as a rapidly growing market on a global scale [8–12]. Nonetheless, the sociocultural changes after the pandemic, especially restrictions on travel, will greatly affect the international travel and tourism industry. Scholars have hypothesized that the pandemic will positively influence consumer behavior in favor of wellness tourism in the medium term [12]. For most countries, short-term growth will be dependent on the timing of vaccine development and mass deployment. The former potential market segment of wellness tourism, such as the aging population, has become an at-risk market segment [13].

A proliferation of tourism research has revealed a myriad of relationships between tourism and wellbeing concepts [14–17]. Adams (2003) [18] proposed five main principles of wellness as multidimensional, balanced, relative, subjective, and perceptual. Lounsbury and Hoopes [15] explained the strong relationship between tourism and wellbeing concerns as the linkage among vacation satisfaction, relaxation, escapism, food and accommodation, and educational attainment level. Hence, the paradigm of the wellness tourism sector has been changed from a narrow perspective based on physical health and wellbeing to a broad vision of holistic health.

As numerous studies have assumed that wellness tourism and overall wellness are synonymous, an exhaustive and systematic wellness attribute framework in which mechanisms provide support to a holistic wellness tourism experience design is required [19–21]. Despite the paradigm shifted towards more diverse directions of wellness tourism experiences, no available studies have filled this gap properly in different cultural contexts. Attribute models can be implied universally, but detailed studies of each country of origin must be performed, especially of destinations with wellness tourism growth potential.

For wellness tourism, in terms of cultural differences, besides the ideological differences, the use of concepts varies within different contexts and disciplines. Various forms of wellness tourism are gaining an enhanced role and enhancing the economic performance of wellness destinations. The countries with the most significant wellness supplies and tourist movement are in the first place in Europe, North America, and Southeast Asia [4]. The different cultural contexts, such as the enhancement of individualization, demographic transformations, changes in gender roles, spiritualization, and the appreciation of healthy lifestyles have created the social background of different demand for wellness services and products [1]. However, various countries that are potential wellness destinations are unable to fully exploit their hidden potential in the destination context apart from the appropriate attribute framework of the PMSE model. Regarding wellness data, there is no fixed wellness attribute framework to make wellness services competitive and trustworthy. For this reason, this study sought to introduce the importance of applying the cultural dimension for a more effective wellness attribute framework in the scope of national trends.

In the future, wellness tourism development planning will have to be conducted at the global scale, which is more dynamic and proactive for mutual benefits for all stakeholders. Thailand being synonymous with healthcare, organic food, good living, and environmentally friendly tourism has made the country a “Blue Zone for Longevity” [22,23]. The Tourism Authority of Thailand has been focusing on promoting wellness tourism such as antiaging and longevity treatments to potential visitors [24]. Policymakers, destination management organizations, and tourism enterprises must adopt a validated wellness attribute model to plan, design, and deliver an effective wellness tourism experience. Exploring this gap in the present study within the context of Thailand provided a better understanding of and useful insights into a wellness tourism attribute framework that would relate to better design of wellness tourism experiences in different cultural contexts.

2. Literature Review

2.1. Wellness Tourism

Wellness tourism can be described from a diverse perspective as a holistic concept that involves various social and individual dimensions [18,25]. Several tourism scholars have empathized the multidimensionality of an individual’s wellness, such as the balance

of life and spirituality wellbeing, that combines physical and mental health with social and environmental elements [21,26,27]. Moreover, some scholars have associated wellness with individual multidimensional facets in the following six dimensions: physical, emotional, spiritual, intellectual, social, and environmental [28,29]. Smith and Puczko [30] also linked wellness tourism to the following lifestyle dimensions and compared it with a journey that involves one of the following dimensions: health of body, mind and spirit, self-sufficiency, physical strength, esthetics, healthy nutrition, relaxation, meditation, mental activity, education, environmental awareness, and sensitivity to social relationships. The definition of wellness tourism as the active pursuit of activities, choices, and lifestyles that lead to a state of a holistic health is consistent with the World Health Organization's definition of health as a state of complete physical, mental, and social wellbeing [2,31].

The conceptual paradigm of wellness tourism is gradually diversified from the growing acceptance of the multidimensional approach to wellness as the popular conception of health and wellbeing [32], the prospects of social tourism, and the relationship between co-creation experience and wellbeing [33–35]. Therefore, the concept is expanding to a holistic wellness orientation [8,12,36–39]. Hartwell et al. [40] verified that the main body of the wellness tourism literature has focused on three dimensions: health and wellbeing tourism destinations, the influence of destination communities' health and wellbeing, and its impact of tourism on the health and wellbeing of tourists.

On the demand side, higher global consciousness on health and wellbeing has become a mega trend currently that consumers are more proactive and progressive about their health concern [2]. Traveling in search for wellbeing and quality health services has been in observation in medical tourism for a period of time [19,20]. Wellness tourism is a phenomenon to enhance personal wellbeing for those traveling to destinations that deliver services and experiences to rejuvenate the body, mind, and spirit of travelers. The wellness tourism market can be considered a niche encompassing individuals or groups to travel to specialized resorts and destinations with the purpose of physical and mental health maintenance [8]. Wellness tourism involves illness, surgical, or therapeutic treatment in the domain of biological research [14]. Several tourism scholars stated that hedonism and eudaimonia have become a momentum concept in the lifestyles of developed countries and proliferate in research streams as the imbalanced results of modern lifestyles and deterioration effects of tourists' health and eventually disease as the middle-class population rises [41,42].

Wellness travelers are those who seek ways to preserve or encourage their health and wellbeing by staying at least one night in a facility specifically designed to allow and improve physical, psychological, spiritual, and/or social wellbeing and can be considered "healthy" people [2,43]. However, the demographics of wellness-concerned people are changing, and it turns out that not just older people, but also younger generations are just as concerned about living healthily. Health preservation and promotion has become an important issue in many industries and is now turning to exert its influence on the tourism market [21,44].

A broad holistic approach for the integrated attribute wellness tourism is necessary. Various wellness components and tourism demand shifting create difficulties pertaining to suitable wellness offering. Wellness tourism experience design must reflect the right wellness value propositions [45–47]. The principal concepts of this study are how to achieve the integrated wellness tourism attribute model integrating the tourist demand and wellness tourism destination offers in distinct cultural contexts.

2.2. Wellness Destination Characteristics

The authors investigated how wellness travelers are attracted to wellness destination that are known for some specific qualities such as their natural and cultural resources. Previous studies point to the factors include local identities as well as local attractions while some identifies a series of wellness activities and choices of wellness services offering to some particular tourist segment such as Millennials; these include intellectual

wellness opportunities, spiritual wellness, natural medicine and nutritional and dietary options [20,48]. There are also studies that focus on destination characteristics [11] and tourism businesses [49] focusing on wellness tourism offering but somehow still adopt too-narrow holistic view of wellness.

A broad holistic approach is necessary for diversified and integrated wellness needs of tourism demand. The previous studies reflect the importance of wellness value propositions taking into consideration a variety of components marking up the wellness offering from different cultural context [46,47].

2.3. Thailand Wellness Tourism Characteristics

In the past decade, South-Eastern Asia wellness tourism is regarded to be one of the wellness touristic areas with the most successful and significant development potential. Considering the outstanding dynamic development, most of the countries in the Southeast Asian Countries possesses the resources and traditions that can be applied as wellness tourism attributes. Moreover, the advanced state of the touristic super culture has created the basis of qualified wellness facilities establishment.

Thailand is often regarded as one of the most attractive and pleasurable tourism destination in Asia [50]. Wellness tourism is undoubtedly a large pillar of inbound tourism in Thailand, contributing to Thailand's economy [51]. Thailand inbound wellness tourism and its products are believed to have a further development opportunity. To boost the growth of the wellness tourism industry as well as promoting Thailand as a leading wellness destination, The Tourism Authority of Thailand initiated many wellness campaigns such as "Find Your Fabulous" in 2013 along with branding the country as the "Spa Capital of Asia" [24]. Since the mid-200s, Thailand has become the wellness tourism destination, with the largest number of wellness spa facilities in Asia.

Wellness tourism in Thailand context, there are several types of wellness activities that tourists can choose to take part, for example, joining in sport/adventure, spa and beauty, spiritual/mind recovery and places providing healthy food [52,53]. Each activity has its own unique way of creating travel satisfaction and well-being.

2.4. Cultural Differences Impacts

The examination of cultural difference context has been widely studied in tourism research due to the growing of tourism industry with the globalization, thus, understanding cultural differences and unique characteristics has become an essential part in tourism studies.

Kluchkhon [54] initiated the theoretical writing on cultural pattern and value theory as an explanation of cross-cultural difference. National culture is "the essential core of culture consists of traditional ideas and especially their attached values" [54] (p. 6). Past studies proposed the models which allow measuring national cultural differences [55–58]. Hofstede conceptualized culture as "a collective programming of the mind which distinguishes one group from another" [59] (p. 25) and argued that an aspect of a culture could be measured relative to other cultures.

Culture patterns can be distinctively divided as collectivism and individualism and have been widely accepted as the tools to understand individual's behavioral characteristics. In collectivist culture, a person mutually bonded with a group. For individualist culture, an individual is mostly independent from others and only bonded with his immediate family [56,60]. Sivades et al. [61] asserted that most Asian countries rate high on collectivism, where people believe that any success is regarded to be highly associated with high collectivism contrary to the western culture. In this regard, culture is a critical concept as it influences both on individual's social behavior and on consumption behavior and integrating the cultural differences with a study can significantly contribute for both academicians and practitioner to understanding the consumer behavior [62,63].

Based on aforementioned discussion of wellness tourism unique characteristics and the cultural differences impact, this study of PMSE model in Thailand context has been proposed.

2.5. Wellness Tourism

Experience is a core economic offering of the tourism industry [64]. Tourism experience is somehow extremely dynamic, which has proved the importance of design and management of the whole tourism value chain system. Additionally, previous tourism scholars that appeared in the work of Quan and Wang [65] have divided tourism experience into two streams, namely, social science and marketing/management approaches. The traditional view of the realms of tourism experience could have also been categorized into two dimensions from passive to active participation [66]. Thus, tourism experience should include peak experience and other supporting experiences of individuals through any direct or indirect contact with a business [67]. Considerable research has been conducted to define, describe, and understand the nature of the tourism experience integration of research in psychology, economics, geography, marketing, and service management, and more recently, technologies and innovations offer dynamic contributions of tourism experience [68]. Tourism experience can also be defined as a co-creation paradigm that the tourism experience is a product of, but subjective internal psychological processes of the travelers and the objective external conditions provided by the supplier or providers of the experience. Wellness tourism experience somehow can be concluded to be extremely dynamic, which has proved the essence of the design and management of the whole tourism value proposition [69].

In the current research, an attempt at a multidimensional interpretation of wellness tourism experiences found with various typologies of touristic experiences is made [38,57,70–77]. Wellness tourism experience can be understood as the active or passive safeguarding of people's state of health, as an essential condition of individuals whose health, cultural, spiritual, nutritional, athletics, and environmental needs are integrated with the current world demand trends [4,5]. Thus, some scholars had different intervention models intended for counseling-oriented professions. Mueller and Kaufmann [78] (p.2) proposed the fundamental concept of wellness-related lifestyles developed from Dunn as "a state of health featuring the harmony of body, mind and spirit, with self-responsibility, physical fitness/beauty care, healthy nutrition/diet, relaxation/meditation, mental activity/education, and environmental sensitivity/social contracts as fundamental elements." Wellness tourism experiences can be broadly defined as physical activities that tourists undertake to improve their physical and psychological health and the environmental concern that appeared in the widely accepted PMSE wellness tourism experience framework: physical, mental, spiritual, and environmental. Nonetheless, previous research has suggested that there would be differences in the PMSE wellness tourism experience concept in terms of cultural diversification.

Hence, while increasing evidence supports the consideration of wellness tourism attributes within different culture contexts, the literature review offers an exhaustive overview of the wellness attributes that remain fragmented, while the PMSE model seems to be the most general and solid model from a holistic lens. The present research sought to validate the widely accepted PMSE model of wellness tourism experience and to identify the key underlying attributes within the Thailand context. The research question was set as follows:

RQ: What is the key underlying attribute framework of wellness tourism experience within the Thailand context?

Thus, the consensus on the effectiveness of the PMSE model as an appropriate general framework to represent wellness attributes in a holistic perspective is widely accepted, the results of the study, thus will give more complete information regarding the wellness tourism attribute framework within the context of Thailand.

3. Methods

This study adopted an interdisciplinary approach of quantitative method focused on the extensive review of the literature for building the theoretical framework of the current study. Numerous theories, including the tourism experience theories, wellness attributes,

and perceived tourism experience dimensions, were used as a theoretical foundation for this study. Researchers would prepare a comprehensive listing of wellness tourism attributes to build initial items.

3.1. Study Setting

This research took place in Thailand, the country where the potential growth of wellness tourism has been acknowledged by tourism scholars, industry experts, and even the nation government as wellness tourism has appeared in several nations' development policies, such as the 20-year National Strategy 2017–2037 and the BCG plan [79]. Thailand is one of the countries among the world potential wellness tourism destinations [2].

Item Generation

Multi-source approaches were utilized in this study to generate the initial pool of items. A multi-source approach allows the production of comprehensive assortment of information and a highly representative pool of items [80].

An intensive literature review has been conducted within three major area in the fields of wellness tourism to identify words, key phrases, or adjectives employed to describe the related attributes. The following previous works on wellness tourism, tourism experience and experiential marketing were also explored, as shown in Figure 1.



Figure 1. Scale development stage.

The studies of a linkage concept during scale development stage relates to the scale purification of this study as appeared in Section 3.2.

3.2. Scale Purification

After the final revision, the questionnaire consisting of 28 proposed items generated in the previous stage was utilized in this study, as in Appendix A.

3.3. Study Design and Approach

This study was designed to develop a valid and reliable model for the wellness attributes framework within the Thailand context. An initial exploratory study used a survey design to evaluate the PMSE wellness attribute framework validation within the Thailand context. The quantitative approach was chosen for this study. The authors began by reviewing the related literature to identify potential sub-attributes under the four dimensions of the PMSE wellness tourism experience framework. To confirm the wellness experience PMSE model, developing themes using the Theory-Driven and Prior-Research-Driven Method and then applying the code were performed in this study [81]. After developing an initial questionnaire for exploring socio-cultural impacts, the structure and content validity of the preliminary questionnaire were assessed by a panel of experts. In addition, an evaluation using the Index of Item-Objective Congruence was utilized to test the validity of the questionnaire.

After the questionnaire was modified, a pilot study was employed to further test the reliability of the developed scales using the convenience samples of a PhD student

group of the Technopreneurship and Innovation Management Program, Chulalongkorn University. A total of 30 questionnaires were collected and purified by using Cronbach's alpha and item-to-total correlation attests to assess the reliability item. The Cronbach's alpha reliability of the PMSE attribute framework validation instrument was found at a high of 0.79–0.86 from the computation of four major attributes reflecting good reliability. The initial purification of the questionnaire and the retained items were finally verified through testing on the sample of the main study to develop the standardized measurement and articulation of the PMSE attribute framework validation.

3.4. Data Sources and Collection Methods

For data-gathering purposes, the questionnaires were designed to include four parts of questions on the following: participant demographics, tourism behaviors, the importance or expectation level of wellness tourism experience dimensions, and the suggestions on Thailand wellness tourism. An online questionnaire was chosen to be the major tool due to the large sample size, their fast response rates, and cost effectiveness [82,83].

Because the questionnaires were planned to be collected from Thai travelers in Thailand context, additional procedures to translate the questionnaires by a professional translator to Thai were implemented including the following: (a) forward translation, (b) synthesis, and (c) back-translation to verify accuracy.

3.5. Sample Size and Sampling Methods

In the current research, the participants were Thai who were 18 years old up regarding the ethical consideration of research on human that agreed to participate in the research as non-purposive sampling. The sample group of Thai travelers are set to study generalities with the various of age range from over 18 to more than 65 years old. The age group are divided into over 18–25 (17.95%); 26–35 (16.78); 36–45 (31%), 46–55 (15.38%), 56–65 (14.69%) and over 65 (4.20%). The definition of the wellness tourism of this research was clarified at the beginning of the questionnaire (see Appendix A). The objectives of the research and the security of personal information were provided, and a consent question was designed for research participation. The Qualtrics online survey platform was administered from 11 November to 24 December 2020.

The sample size of this study was calculated based on Yamane's formula [84]. The 490 surveys were sent via social media platforms, such as Line and Facebook, using non purposive sampling techniques. The snowball technique was also applied to reach the high ratio of participation. All the subjects were requested to state whether they agreed to participate in this study as the screening question after the participants' information sheet (see Appendix A), which was purposely designed for this survey. Via the screening question, 444 panelists who responded "yes" to this question were eligible to complete the survey. Of these, 384 respondents completed the questionnaire as usable samples. Given that there were outliers or omitted answers, 384 subjects were utilized for the analysis, indicating a response rate of 90.6%, and the usable sample was 78.2% with a 21.8% missing rate. The LISREL program was utilized to conduct estimation testing, goodness-of-fit statistics, and the modification of the model. As a sample size of 150 or more is recommended for CFA, the sample sizes for this study ($n = 384$) were considered acceptable [85].

3.6. Methods of Data Analysis

Data analyses for retaining the attribute frameworks proceeded into a series of steps. Factor analysis is the main multiple factor analysis technique adopted to examine the attitudes of Thai travelers toward wellness tourism attributes, which focuses on the inter-relationships between many variables and the perceptions of Thai travelers, while the latter attempts to identify the Thailand wellness attribute framework. After collecting the data, CFA was chosen for dimension reduction (factor) and scale (reliability analysis).

The data set was utilized for conducting CFA to explore the attitudes of Thai travelers toward wellness tourism attributes under the four dimensions of physical, mental, spiritual,

and environmental attributes. The study empirically tests the proposed research model by investigating the most common wellness-related attributes model and seeks to understand the association between a set of attributes and specific cultural context, using the *LISREL* 9.30 program, a software package based on structural equation modeling (SEM) techniques. The SEM approach was used to assess the proposed casual model, and it allows the authors to use multiple indicators to measure constructs and account for measurement errors. Another important advantage is that the authors can evaluate causal relationships among multiple interested constructs simultaneously because the model is grounded in existing theoretical foundations and well-validated scales and because this research attempted to account for the observed covariance.

For the statistic strategy, the authors divided the data analysis into 3 parts as follows; part 1 Preliminary Data Analysis comprising 2 results namely, preliminary data analysis of sample group to study the generalities of the sample group and preliminary statistical analysis result of variables used in research derived from basic statistics to explain mean, standard deviation, coefficient of variation, skewness, and kurtosis; part 2 Measurement Model Validity analysis comprising 2 results namely correlation coefficient analysis result between variables in measurement model to understand the correlation of the sample group and consider the validity of the correlation matrix using Bartlett's test and Measurement model analysis result and; part 3 Measurement Model Goodness-of-Fit Analysis through second order confirmatory factor analysis. The data set was tested twice with CFA with different purposes, the first order confirmatory factor analysis aims to test whether all 28 indicators are statistically significant. The second order confirmatory factor analysis, thus, aims to indicate that all indicators commuted into four attributes have positive factor loadings and to identify which indicator among the four major attributes have the greatest factor loading.

3.7. Model Specification and Variable Description

The reliability test in this research demonstrated a coefficient of internal consistency of 0.947 with 28 items, which refers to an excellent consistency [86,87].

For the attitudes towards wellness tourism experience dimensions, this study employed previously validated multi-measurement items to overcome the disadvantage of single items [88]. The survey questionnaire in this study initially included 28 items under the four constructs of wellness tourism attributes, which were adapted from prior research to measure the overall wellness tourism experience.

Likert scales measure attitudes, opinions, or beliefs [89], which is in line with travelers' evaluation and expectations of wellness tourism attributes. This research applied the seven-scale, and the respondents were required to choose itemized rating scales from a minimum score of 1 to a maximum of 7. For levels of importance, 1 means that the rated attribute or procedure is strongly unimportant, while 7 means that the attribute is strongly important. Similarly, regarding the expectation measurement, 1 refers to strongly unexpected, whereas 7 means that an item is perceived to be strongly expected.

The suggestions of the participants from the open-ended responses were subsequently open coded identifying prominent themes and developed into categories following the methods discussed by Elliott and Timulak [90] and will be applied in future studies.

4. Findings and Discussion

A total of 384 responses were collected using an online survey platform from Thai travelers with an age of over 18 during November–December 2020 based on a non-purposive sampling technique. After collecting the data, the entire data set was tested for descriptive statistic by IBM SPSS version 22.0 and CFA by *LISREL* 9.30 to confirm the factor structure of the scale of Thailand wellness tourism context impacts on the PMSE framework model. The results of descriptive statistic display a consensus within the data acquired that all the four dimensions of the PMSE experience framework, namely, physical, mental, spiritual, and environmental, holistically served as a mechanism toward wellness tourism

experience (Table 1). The Kaiser–Meyer–Olkin (KMO) value is 0.795 also affirming the sampling adequacy.

Table 1. Mean, standard deviation, skewness, kurtosis and C.V. for CFA.

Indicators		Mean	S.D.	SK	KU	C.V. (%)
Physical experience (PE)						
1.	Food quality and or food service	6.53	0.71	−2.27	2.06	10.90
2.	Activities that require your physical participation as a guest	5.92	1.01	−1.33	2.72	17.12
3.	Wellness services that you can participate in passively	5.95	1.07	−1.57	2.49	17.98
4.	Detoxication programs to help your body densified from unhealthy toxins or substances you consume in your everyday life	5.56	1.30	−1.22	1.65	23.45
5.	Destination's visual arts	5.71	1.02	−1.01	2.12	17.92
6.	Reasonable price of wellness service	6.39	0.73	−1.03	0.63	11.41
7.	Wellness amenities, products, and souvenirs	5.66	1.21	−1.21	1.67	21.37
8.	Supply typology	5.57	1.08	−1.01	1.59	19.42
9.	Hygiene policy of the destination	6.33	0.83	−1.86	2.46	13.05
10.	Convenient logistics	6.26	0.89	−1.66	2.80	14.20
Mental experience (ME)						
11.	Feeling of life progress and/or positive change regarding wellness	6.00	0.99	−1.46	2.49	16.52
12.	New experiences leading you to escape, restore and refresh from your everyday life	6.19	0.94	−1.43	2.75	15.17
13.	Being empathized and cared for by the staff	6.21	0.89	−1.36	2.67	14.27
14.	Being a part of the destination community	5.58	1.09	−0.93	1.90	19.41
15.	Flowing stage of travel	5.58	1.08	−1.13	1.90	19.44
16.	To be part of A travel plan/wellness program	5.75	0.98	−1.06	2.18	17.10
17.	To learn new things form local	5.66	1.15	−1.10	1.37	20.31
Spiritual experience (SE)						
18.	Spirit/soul uplifted	5.58	1.17	−1.08	1.63	20.87
19.	Sharing your wellbeing travel experience with destination communities, stakeholders, and others	5.41	1.22	−1.11	1.69	22.48
20.	High level of engagement or interest in destinations activities or settings	5.70	1.04	−1.33	2.97	18.28
21.	Attributions of knowledge, memories, perceptions, emotions, and self-identify	5.87	1.02	−1.47	2.02	17.69
22.	To be able to recall experience anytime you like is an advantage	5.74	0.97	−0.94	1.58	16.87
Environmental experience (EE)						
23.	Wellness-related and knowledgeable staff and management	5.89	1.03	−1.18	1.73	17.55
24.	Environmental concern atmosphere of the destination	6.11	0.97	−1.71	3.58	15.92
25.	Wellbeing of the destinations	6.13	0.89	−1.20	2.20	14.54
26.	Place that is not too crowded	6.38	0.87	−2.14	3.12	13.71
27.	Authentic destination	5.84	1.06	−1.04	1.32	18.11
28.	Link between wellbeing and sustainable tourism	5.96	0.92	−1.16	2.24	15.36

In addition, CFA presented that after adjusting the model, the 4-factors with the 28-item model provided a good fit to the data with an index of $\chi^2/\text{df} = 1.12$ with p -value = 0.12; RMR = 0.037; RMSEA = 0.018; comparative fit index (CFI) = 1.00; goodness-of-

fit index (GFI) = 0.96; and AGFI = 0.92. Thus, the results confirm that the mental experience dimension accounted for the most variance with an indicator value of 0.99 in the framework predicting the effective wellness tourism experience than the other attributes. Spiritual and environmental experiences share the same indicator value of 0.87, while physical experience has the least indicator value of 0.78. Accordingly, the PMSE framework is a valid model for a wellness tourism experience design within the Thailand context. Recommendations for the planning of wellness experience will be investigated in future studies.

4.1. Sample Description

The majority (75.42%) of the participants were female and rated their health in a very good condition (51.75%). More than half of them (59.27%) had never taken wellness tourism experience in the past 24 months. Additionally, most of them preferred to self-organize their travel trips (86.34%) and preferred to travel alone (85.59%).

The participants were asked to select the wellness activities of their preference, and each could choose more than one activity. A total of 27.30% of the participants preferred natural sight-seeing activities. Only 4.77%, 4.10%, and 1.09% preferred sports-related, health and medical, and other activities, respectively. They were also required to select the destination they thought was Thailand wellness tourism destination, and they were allowed to select more than one destination. Chiang Mai gained the majority preference of 37.62%. The average spending per day for the participants on their trip is less than 3000 baht (38.29%), and the majority considered themselves as having good wellbeing (68.78%).

Most of the participants rated wellness tourism attributes from the PMSE model at the positive levels over the negative levels regarding to the Likert scale indication.

4.2. Basic Statistical Analysis

In terms of the four dimensions of the PMSE wellness tourism attribute framework, ten sub-attributes are related to physical experience, seven sub-attributes are related to mental experience, five attributes are related to spiritual experience, and six sub-attributes are related to environmental experience. Descriptive statistics for variables implied in this research includes mean, standard deviation, coefficient of variation, skewness, and kurtosis (Table 1).

For physical experience (PE), Food quality and/or Food service has the highest mean of 6.53, followed by Reasonable price of wellness service (6.39), which indicates that the attitude of the participants toward physical experience range from Agree to Strongly Agree. For mental experience (ME), Being empathized and cared for by the staff and New experiences leading you to escape, restore, and refresh from your everyday life have the highest mean of 6.21 and 6.19 respectively, indicating the attitude level of Agree. The sample group has Agree attitudes toward spiritual experience (SE) with the highest mean of 5.87 for Attributions of knowledge, memories, perceptions, emotions, and self-identify. For environment experience (EE), Place that is not too crowded has the highest mean of 6.38, followed by Wellbeing of the destinations (6.13), indicating the level of attitude as Agree.

4.3. Confirmation Factor Analysis

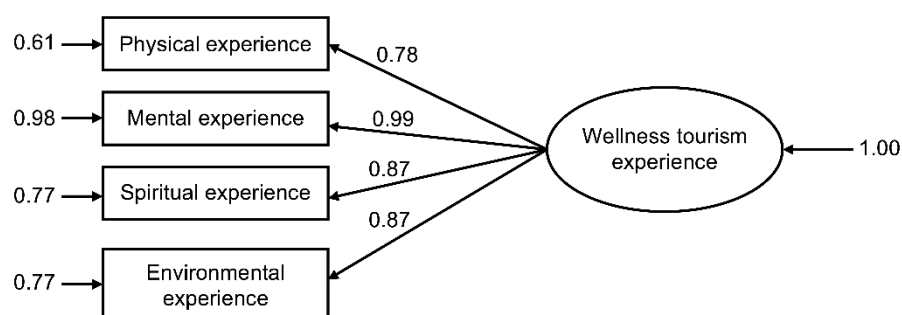
The resulting scales are presented in Table 2 along with goodness-of-fit indices. Consequently, a four-factor model with 28 items provided a model fit to the data. The Cronbach's alpha values for each dimensional scale also shows evidence of scale reliability. The reliability test in this research demonstrated that a coefficient of internal consistency is 0.947 with 28 items, which refers to an excellence consistency [91,92]. Overall, according to model fit evaluation recommendations, scales for all constructs were deemed acceptable in quality. The Barlett's Test of Sphericity shows the value of 791.729 (PE), 749.366 (ME), 512.286 (SE) and 512.296 (EE) with the *p*-Values of all factors are in general above 0.1 and the subgroup analysis are required in this study, thus, it is found that the data set is correlated and can be used in a factor analysis. Given that the Cronbach's alpha values of all indicators or dimensional scales exceed a recommended value of 0.60, the scales used in the study

are reliable [62]. In addition, when these scales were evaluated together in the overall measurement model discussed below, a satisfactory measurement model was exhibited (Figure 2).

Table 2. Confirmation factor analysis of PMSE attributes leading to wellness tourism experience.

Confirmation Factor Analysis of Each Variable		Beta	SE	t	R ²	p-Value	
PE	Physical experience	0.78	0.12	5.52 **	0.61	0.78147	–
ME	Mind experience	0.99	0.09	10.97 **	0.98	0.37350	–
SE	Spiritual experience	0.87	0.07	11.68 **	0.77	0.76279	–
EE	Environmental experience	0.87	0.09	10.96 **	0.77	0.60095	–
$\chi^2 = 221.89$, $df = 198$, $p = 0.11729$, CFI = 1.00, GFI = 0.96, AGFI = 0.92 RMSEA = 0.018, RMR = 0.037							

Note: ** $p < 0.01$; No report of SE and t according to constrained parameters.



Chi-square = 22.89, $df = 198$, P-value = 0.11729, RMSEA = 0.018

Figure 2. Confirmation factor analysis model result.

Items for each dimensional scale were subjected to scale refinement based on an evaluation of model fits [68], and several goodness-of-fit measures were used to assess the fit of models. The relative chi-square (chi-square/degrees of freedom); χ^2/df ratio, standardized root means square residual (standardized RMSR), GFI, adjusted goodness-of-fit index (AGFI), normed fit index (NFI), and CFI were also utilized as goodness-of-fit measures. Due to the sensitivity of the chi-square test to the sample size, the relative chi-square was employed (it should be three or less for an acceptable model) [43]. Standardized RMSR should not be greater than 0.10, and GFI, AGFI, NFI, and CFI should exceed 0.90 to be acceptable [67].

Table 3 represents the assessment of model fit based on the GFI (CFI > 0.95), standardized RMR (SRMR < 0.05), root-mean-square error of approximation (RMSEA < 0.08), and χ^2/df ratio (χ^2/df ratio < 5.00). The values of GFI and AGFI also range from zero to 1.00, with values larger than 0.90 indicating an acceptable fit and values greater than 0.85 indicating a good fit [43]. According to previous studies, a very good research model fit is defined as a p -value should be higher than 0.05, and chi-square/degree of freedom should be smaller than 3.00 [67,68].

Table 3. Model fit index of PMSE wellness attributes within the Thailand context.

Model	χ^2/df	p-Value	RMR	RMSEA	CFI	GFI	AGFI
	1.12	0.12	0.037	0.018	1.00	0.96	0.92

From Figure 2 and Tables 2 and 3, where the validity of wellness attributes leading to wellness tourism experience were tested, the model shows a goodness-of-fit with empirical data, given that the chi-square value of 221.89 is statistically different from zero at the 0.05 level of significance, the probability (p) value of 0.12 is at the degree of freedom of

198 and the relative chi-square (χ^2/df) value of 1.12 is less than 2. As for the adjusted goodness-of-fit index, the RMR value of 0.037 and the RMSEA value of 0.018 are both acceptable since they are less than 0.05. On account of the absolute fit index, the CFI value of 1.00, the GFI value of 0.96 and the AGFI value of 0.92 are all acceptable since they are greater than 0.90. Since all fit indices are in conformity with the criteria, the model is a good fit with empirical data.

Considering the accuracy of each variable of each wellness attribute leading to holistic wellness experience, the model fits with the empirical data. The statistic result of the study can be concluded as shown in Table 4.

Table 4. Confirmation factor analysis for wellness attributes leading to wellness tourism experience.

Variables		Loading Factors			Factors Score Coefficient	
		Beta	SE	t		
First confirmation factor analysis of each variable						
PE	Physical experience					
PE1	The food quality and/or food service is important to wellness tourism experience.	0.34	<-->	<-->	0.12	0.02
PE2	The activities that require your physical participation as a guest are important to the wellness tourism experience (yoga, hiking, etc.).	0.46	0.11	4.79 **	0.21	0.10
PE3	Wellness services that you can participate in passively, are important to the wellness tourism experience (e.g., spa treatment, beauty treatment).	0.42	0.10	4.99 **	0.18	0.03
PE4	The detoxication programs to help your body get densified from unhealthy toxins or substances you consume in your everyday life are important to wellness tourism experience.	0.38	0.13	4.31 **	0.14	0.07
PE5	The designation’s visual arts are important to the wellness tourism experience.	0.46	0.11	5.00 **	0.21	0.10
PE6	Reasonable price of wellness service is important to the wellness tourism experience.	0.53	0.08	5.41 **	0.28	0.17
PE7	Wellness amenities, products, and souvenirs are important to the wellness tourism experience.	0.55	0.15	5.13**	0.30	0.06
PE8	Supply typology (e.g., medical services) is important to the wellness tourism experience.	0.62	0.15	5.20 **	0.39	0.14
PE9	The hygiene policy of the destination is important to the wellness tourism experience.	0.51	0.09	5.33 **	0.26	0.23
PE10	Convenient logistics are important to the wellness tourism experience.	0.62	0.11	5.47 **	0.38	0.27
ME	Mental experience					
ME1	The feeling of life progress and/or positive change regarding wellness is important to the wellness tourism experience.	0.55	<-->	<-->	0.31	0.09
ME2	The new experiences leading you to escape, restore, and refresh from your everyday life are important to the wellness tourism experience.	0.60	0.06	9.69 **	0.36	0.10
ME3	Being empathized and cared for by the staff are important to the wellness tourism experience.	0.68	0.06	9.60 **	0.46	0.27
ME4	Being a part of the destination community (e.g., CBT—community based tourism) is important to the wellness tourism experience.	0.66	0.08	9.34 **	0.44	0.12

Table 4. Cont.

	Variables	Loading Factors			Factors Score Coefficient	
		Beta	SE	t	R ²	
ME5	The flowing stage of travel is important to the wellness tourism experience.	0.65	0.07	9.71 **	0.43	0.07
ME6	To be part of the travel plan/wellness program (e.g., personalized travel plan) is important to the wellness tourism experience.	0.63	0.07	9.32 **	0.39	0.14
ME7	To learn new things from locals (local wisdom) is important to the wellness tourism experience.	0.62	0.08	8.94 **	0.38	0.09
SE	Spiritual experience					
SE1	Spirit/soul uplifted is important to the wellness tourism experience.	0.67	<->	<->	0.44	0.17
SE2	Sharing your well-being travel experience with destination communities, stakeholders, and others is important to the wellness tourism experience.	0.72	0.08	10.80 **	0.51	0.28
SE3	The high level of engagement or interest in destination activities or setting is important to the wellness tourism experience.	0.60	0.07	9.24 **	0.36	0.08
SE4	The attributions of knowledge, memories, perceptions, emotions, and self-identity are important to the wellness tourism experience.	0.65	0.07	9.64 **	0.42	0.14
SE5	To be able to recall the experience anytime you like is an advantage and important to the wellness tourism experience.	0.62	0.07	9.18 **	0.38	0.20
EE	Environmental experience					
EE1	The wellness-related and knowledgeable staff and management are important to the wellness tourism experience.	0.62	<->	<->	0.39	0.25
EE2	The environmental concern atmosphere of the destination is important to the wellness tourism experience (e.g., green concept).	0.64	0.06	10.28 **	0.41	0.13
EE3	The well-being of the destinations (e.g., local products and food provided) is important to the wellness tourism experience.	0.62	0.06	8.98 **	0.38	0.12
EE4	The place that not too crowded is important to the wellness tourism experience.	0.56	0.05	8.08 **	0.32	0.25
EE5	The authentic destination is important to the wellness tourism experience. (e.g., communities with local wisdoms, Thainess).	0.66	0.07	8.97 **	0.44	0.21
EE6	The link between well-being and sustainable tourism is important to the wellness tourism experience.	0.64	0.06	9.17 **	0.42	0.21
The second: confirmation factor analysis (Commuted 28 items under four constructs)						
PE	Physical experience	0.78	0.12	5.52 **	0.61	-
ME	Mental experience	0.99	0.09	10.97 **	0.98	-
SE	Spiritual experience	0.87	0.07	11.68 **	0.77	-
EE	Environmental experience	0.87	0.09	10.96 **	0.77	-
$\chi^2 = 221.89$, $df = 198$, $p = 0.11729$, CFI = 1.00, GFI = 0.96, AGFI = 0.92 RMSEA = 0.018, RMR = 0.037						

Note: ** $p < 0.01$; <-> No reporting SE and t value according to constrained parameter.

As shown in Table 4, the first order confirmatory factor analysis result of wellness attributes leading to wellness tourism experience shows that all 28 indicators have positive factor loadings between 0.34 and 0.72 that are statistically significant at 0.01 level. Dimensionally speaking, PE1-PE10 are indicators of Physical Experience and have factor loadings between 0.34 and 0.62 and R^2 values between 0.12 and 0.39, while ME1-ME7 are indicators of Mental Experience and have factor loadings between 0.55 and 0.68 and R^2 values between 0.31 and 0.46, SE1-SE5 are indicators of Spiritual Experience and have factor loadings between 0.62 and 0.72 and R^2 values between 0.36 and 0.51, and EE1-EE6 are indicators of Environmental Experience and have factor loadings between 0.56 and 0.66 and R^2 values between 0.32 and 0.44.

The second order confirmatory factor analysis result of wellness attributes leading to wellness tourism experience also shows that all indicators have positive factor loadings between 0.78 and 0.99 that are statistically significant at 0.01 level. In descending order, indicators with the greatest factor loadings are Mental Experience at 0.99, Spiritual Experience and Environmental Experience, both at 0.87, and Physical Experience at 0.78, and their respective covariance values are 98, 61, 77 and 77.

The results of the present study validate that the PMSE framework offers not only conceptual fit but also a practical measurement framework for the further study of wellness tourism experience within the Thailand context. From the generalities of the sample group of Thai travelers with various age range from over 18 to over 65, the proper model can be considered as a mechanism for wellness destination managers to implement design concepts of the wellness tourism attribute framework for a better design of wellness tourism experience. The data suggest evidence that the PMSE wellness experience attribute model has structural consistencies as proposed. Nevertheless, it should be noted that the relationships of the individual experience dimensions with the plausible consequences of wellness tourism experience attributes may be difficult to predict because they may depend heavily on the salience of experience offerings in different cultural context.

In the case of the wellness tourism experiences within the Thailand context investigated in this study, the ME appeared to be a dominant determinant of the experiential outcomes. In contrast to expectations from the tourism literature, the four dimensions of experience attributes were not statistically significant separately because all seems to be working together as dynamism. Perhaps, these results could reflect a PMSE framework specific contingency in the Thailand context.

This study offers some insights for Thailand wellness tourism attribute framework validation for wellness tourism within the context of Thailand. The Contributions of the study can be divided into three parts, including theoretical, practical, and managerial. The potential theoretical contribution is the proven concept that PMSE framework can be applied as the fundamental attribute model for wellness tourism design. With different cultural context focus, each attribute will affect differently and must be fully validated. The results are also useful for practical contributions, including tourism organizations, Thailand Tourism Authority, and related businesses in drawing out policy implications to create attractive and interesting wellness tourism experience design to attract more wellness travelers within Thailand context. The focus on mental attributes will enhance the unique Thailand wellness tourism experience. Stakeholders should understand that mental attributes such as the feeling of life progress, the new experience leading to escapism, being empathized, and cared for, being a part of destination community, the flowing stage of travel plan and to learn new things from locals should be focused on Thailand wellness tourism experiences design to make the experience more attractive and unique. Finally, for managerial contributions, this study enhances the understanding of wellness tourism framework within the context of Thailand, especially the experience design for destination management. Essentially, the attributes of the country wellness tourism growth opportunities with several accredited natural environments combined with the culture, traditional way of life, local wisdom, and outstanding tourism infrastructure, including a

strong religious practice (such as Buddhism) and the characteristics of Thai locals who are kind and friendly with strong service minded.

5. Conclusions

As efforts continue to validate the wellness attribute framework within the Thailand context for a better way to design the experience of wellness tourism effect the wellness tourism value chain of Thailand, this research provides the fundamental model for the next phase. Such an understanding can inform the development of wellness tourism experience within the Thailand context in terms of protocols and management. The results of this study answer the research question of whether the PMSE experience framework is a holistic underlying attribute and may assist Thailand wellness tourism experience design, with the focus on the ME dimension. Further exploration is crucial to determine how a wellness tourism experience design can best be integrated into a wellness tourism development strategy of Thailand and whether the research process can be implied within another cultural context.

The scales used within the survey instrument were adapted from previous research conducted in English to Thai using a process of work between initial translation followed by dialog between the two to assure the proper contextual translation. Thereafter, the instrument was tested with the academic and industry experts (five people) using Cronbach's alpha reliability testing. Although a rigorous process was employed, it is possible that some of the terms were understood differently among Thai travelers, resulting in contextual differences. Second, a goal for the PMSE framework validation was to identify the underlying dimensions of wellness attributes under the Thailand context. The analysis did reveal that the four dimensions have great dynamic impact on wellness tourism experience; thus, the qualitative methods, such as a focus group setting of wellness travelers, can be applied to confirm an understanding. The proposed PMSE attribute framework validation within the Thailand context awaits further implementation across different consumption situations and staged experiences. It may be interesting to see whether data from the experiential wellness travel consumptions of Thai travelers can be applied to a wellness tourism experience design.

The consequences of the PMSE attributes framework validation that were included in this study may be further impacted to their causal sequences although further research should include testing the nomological validity of the experience dimension measurement. In doing so, strong theoretical reasoning and logical inferences must proceed to model specifications and data analyses. Such extended efforts will contribute to the theoretical development of the wellness tourism experience design concept, which is necessary for the PMSE framework to evolve into strong research tradition. A relationship of the PMSE framework and a wellness tourism experience design remains unsubstantiated in either the relevant tourism literature or this study. Research on this outcome structure of the PMSE framework validation and other consequences warrants valuable contributions to the tourism literature. Because the focus of the present research was to validate the PMSE attribute framework within the Thailand context, this study did not explicitly consider the antecedents of the measurement scale for the experience dimensions in the investigation. While challenging, the implementation of the PMSE framework will contribute to the effective management of wellness tourism because it will allow wellness tourism destination stakeholders to understand what variable influence tourists' perceptions of the destination.

In the strategic implementation, each attribute of the PMSE experience framework may be further elaborated into meaningful subdimensions. The first dimension to be tested within the Thailand context will be the ME dimension because it has been a key attribute that has been validated within this study. Future studies may develop the design process of wellness tourism experience starting from how the experience should be measured, perhaps in the four realm of experience economy. Another interesting avenue for future research would be to use mechanism, such as technology, to implement the PMSE attribute framework and to link them to a wellness tourism experience design more effectively.

Finally, this research has been conducted only to validate the PMSE attribute framework within the Thailand context, and additional conceptual clarification must be conducted regarding the relationship of experience economy concepts or even innovation diffusion concepts in which technology plays a critical role according to the current tourism trend and the new travel norm. How can authors integrate the attribute framework and measure them when in use of a wellness tourism experience design? This challenging question calls for additional research.

Author Contributions: Conceptualization, methodology, formal analysis, project administration, resources; N.K., Conceptualization, methodology, supervision, resources, and investigation; P.P., Conceptualization, and supervision; S.S. and A.S.A. All authors have read and agreed to the published version of the manuscript.

Funding: This research received no external funding.

Institutional Review Board Statement: This study adheres to a guidance research ethics provided by the Technopreneurship and Innovation Management Program, Graduate School, Chulalongkorn University, Bangkok, Thailand to avoid ethical issues that might arise during the research process. The study was also conducted in accordance with the Declaration of Helsinki, the Belmont report, CIOMS guidelines and the principle of the international conference on harmonization—Good Clinical practice (ICH-GCP) and approved by the Research Ethics Review Committee for Research Involving Human Subjects: The Second Allied Academic Group in Social Sciences, Humanities and Fine Applied Arts of Chulalongkorn University with COA 219/2564 on 10 September 2021).

Informed Consent Statement: The research ethics review committee at Chulalongkorn University, the Second Allied Academic Group in Social Sciences, Humanities, and Fine and Applied Arts, acted the study for research involving human subjects with COA 219/2564. The information sheet for research participants and informed consent form were used. The participants were also informed that their private information would be secured and that their private information would be secure and that they had the right to withdraw from the research project at any time.

Data Availability Statement: The data presented in this study are available from the authors upon request.

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Conflicts of Interest: The authors declare no conflict of interest.

Appendix A

Questionnaire

Information Sheet for Participant
TITLE OF RESEARCH PROJECT

Wellness Tourism Attributes Validation for Wellness Tourism Experience and Expectation in Thailand Context

Dear Participants,

We are inviting you to participate in a study led by Natnisha Kongtaveesawas from Technopreneurship and Innovation Management, the Graduate School, Chulalongkorn University, Thailand and Dr.Pattarawan Prasarnphanich from Sasin School of Management, Chulalongkorn University, Thailand. If you agree to take part, we would like to ask you some questions about your experience of wellness tourism attributes. The survey will take about 15 min to fill out. We would appreciate it if you could answer all the questions. Taking part is voluntary and you can withdraw from taking part to fill in this form at any time.

While wellness tourism has gained its popularity, the previous studies of attributes framework of wellness tourism (PMSE model) has proven its significant roles on perceived wellness tourism experience dimensions including expectations of travelers. However, research on such topics in the context of Thailand has not previously been conducted with respect to the growth rate wellness tourism of the country. In this study, we aim to define the underlying dimensions of the wellness tourism experience and the mechanisms by which a PMSE model of wellness tourism experience provided within the context of Thailand.

The information you provide will be recorded then be confidential used for academic purposes only. The data will be collected, stored, and will be disposed of in a secure manner. Participation of the interview will be strictly confidential and only the researcher, Natnisha Kongtaveesawas, to acknowledge the completed information which will remain the property of the Graduate School, Chulalongkorn University. Participants must be over 18 years of age.

This study adheres to the guidelines of the ethical review process of Technopreneurship and Innovation Management program, the Graduate School, Chulalongkorn University. The researchers would be pleased to discuss your participation or any query you may have at any time. Please contact me, Natnisha Kongtaveesawas E-Mail: natnisha.k16@gmail.com.

Sincerely,
Natnisha Kongtaveesawas
Dr. Pattarawan Prasarnphanich

Do you agree to participate in this study?

()	Yes	()	No
Questionnaire survey of Wellness Tourism Attributes Validation for Wellness Tourism Experience and Expectation in Thailand Context			
The survey has been divided into 4 parts.			
Part 1: Socio-demographic of the participants			
Part 2: Tourist behaviors			
Part 3: Opinion on wellness tourism attributes			
Part 4: Comments and suggestions			
Part 1: Demographic			
Please mark <input checked="" type="checkbox"/> in the brackets () matching the most with your information			
1.1 Gender			
() Male	() Female	() Others	
1.2 Age			
() >18–25 years	() 26–35 years		
() 36–45 years	() 46–55 years		
() 56–65 years	() > 65 years		
1.3 Marital status			
() Single	() Married		
() Others (specify)			
1.4 Educations			
() Below high school	() High school or equivalent		
() Diploma degree	() Bachelor's degree or equivalent		
() Master's degree	() Doctoral degree		
1.5 Occupations			
() Government Officer/ State Enterprise Employee			
() Corporate employees () Student			
() Self-employed () Retired			
() Management/Entrepreneur () Professional (Lawyer, Doctor, etc.)			
() Others (specify)			
1.6 Monthly income (THB)			
() 15,001 of lower	() 15,001–30,000		
() 30,001–50,000	() 50,001–100,000	() 100,001 or higher	
1.7 How do you describe your health condition?			
() Good	() Average		
() Below average	() Others (specify)		

Part 2: Tourist Behaviors in Wellness Tourism

Definition Key Terms: Wellness Tourism

Please mark \checkmark in the brackets () matching the most with your information

2.1 How many times have you taken/ experienced wellness tourism trip within the past 24 months?

☐ Never

 ☐ 1–3 times

 ☐ More than 3 times

2.2 How long do you normally take a travel trip?

☐ 1 – 2 nights

 ☐ 3–4 nights
☐ 5 – 6 nights

 ☐ 7 nights or more

2.3 Based on your recent trips, how did you organize your trip?

☐ Self-Organized

 ☐ Organized by tourist agency
☐ Organized by corporates

 ☐ Others (specify)

2.4 How do prefer to travel?

☐ Group tour
☐ Free Independent Traveler (FIT)
☐ Bleisure (Business with Pleasure)

2.5 Preference of wellness tourism activities (you can choose more than one answer)

☐ Leisure

 ☐ Cultural & Historical sightseeing
☐ Sports

 ☐ Adventure
☐ Wellness & Spa

 ☐ Religious & Spiritual retreat
☐ Health & Medical

 ☐ Natural sightseeing
☐ Others (specify)

2.6 Which of the following destinations will you consider as Thailand wellness tourism destination?

☐ Bangkok

 ☐ Phuket

 ☐ Chiang Mai
☐ Samui

 ☐ Others (specify)

2.7 How much do you spend per day (inclusively) for a wellness tourism trip? (THB)

☐ less than 3000
☐ 3001–5000
☐ 5001–7000
☐ 7001–10,000
☐ More than 10,000

2.8 Do you consider yourself as a wellbeing person (a person satisfied with his or her life in every aspect)?

☐ Yes

 ☐ No

 ☐ Uncertain
Part 3: Please consider your opinion towards wellness attributes leading to wellness tourism experience and expectation and rate your attitudinal score accordingly.

7 = Strongly agree

6 = Agree

5 = Slightly agree

4 = Uncertain

3 = Slightly disagree

2 = Disagree

1 = Strongly disagree

Questions	Degree of opinion						
	7	6	5	4	3	2	1
	Strongly Agree	Agree	Slightly Agree	Uncertain	Slightly Disagree	Disagree	Strongly Disagree
(1) The Physical Experience that contribute to the physical structure or makeup or a person.							
1. The food quality and/or food service is important to wellness tourism experience.							
2. The activities that require your physical participation as a guest is important to wellness tourism experience (e.g., yoga, hiking, etc.).							
3. Wellness services that you can participate in passively is important to wellness tourism experience (e.g., spa treatment, beauty treatment).							
4. The detoxication programs to help your body detoxified from unhealthy toxins or substances you consume in your everyday life is important to wellness tourism experience.							
5. The destination' s visual arts are important to wellness tourism experience.							
6. Reasonable price of wellness service is important to wellness tourism experience.							
7. Wellness amenities, products and souvenirs are important to wellness tourism experience.							
8. Supply typology (e.g., medical services) is important to wellness tourism experience.							
9. Hygiene policy of the destination is important to wellness tourism experience.							
10. Convenient logistics is important to wellness tourism experience.							
(2) The Mind Experience that contribute to travelers' awareness of the consciousness of self-thought of a person.							
11.The feeling of life progress and/or positive change with regards to wellness is important to wellness tourism experience.							
12.The new experiences leading you to escape, restore and refresh from your everyday life is important to wellness tourism experience.							
13. Being empathized and cared for by the staff is important to wellness tourism experience.							
14. Being a part of the destination community (e.g., CBT – community-based tourism) is important to wellness tourism experience.							
15. The flowing stage of travel is important to wellness tourism experience.							

Questions	Degree of opinion						
	7	6	5	4	3	2	1
	Strongly Agree	Agree	Slightly Agree	Uncertain	Slightly Disagree	Disagree	Strongly Disagree
16. To be part of the travel plan/ wellness program (e.g., Personalized travel plan) is important to wellness tourism experience.							
17. To learn new things from locals (local wisdom) is important to wellness tourism experience.							
(3) The Spiritual Experience that are non-physical in nature							
18. Spirit/ soul uplifted is important to wellness tourism experience.							
19. Sharing your wellbeing travel experience with destination communities, stakeholders and others is important to wellness tourism experience.							
20. The high level of engagement or interest in destinations activities or setting is important to wellness tourism experience.							
21. The attributions of knowledge, memories, perceptions, emotions, and self-identity are important to wellness tourism experience.							
22. To be able to recall the experience anytime you like is an advantage and important to wellness tourism experience.							
(4) The Environmental Experience relating to the wellness tourism destination ecosystem and wellness value chains							
23. The wellness-related and knowledgeable staff/ stakeholders is important to wellness tourism experience.							
24. The environmental concern atmosphere of the destination is important to wellness tourism experience (e.g., green concept).							
25. The wellbeing of the destinations (e.g., local products and food provided) is important to wellness tourism experience.							
26. The place that not too crowded is important to wellness tourism experience.							
27. The authentic destination is important to Wellness tourism experience (e.g., communities with local wisdoms, Thainess).							
28. The link between wellbeing and sustainable tourism is important to wellness tourism experience.							

Part 4: If you have any comments on Thailand wellness tourism experience, kindly indicate below.

.....

**** Thank you for your participation ****

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