

Article

# Proposal of Value for Customer of Spas: Expectations of Spa Patients and Tourist in Polish Spas

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**Abstract:** Literature on the trends of health tourism development has proven that it is becoming one of the most important tourism activities. With the growing popularity of this form of tourism, the structure of the needs of tourists and spa patients is simultaneously changing. This article presents the results of self-research carried out in Polish spa resorts based on a sample of 753 patients and spa tourists. The purpose of the research carried out was the development of a value proposition for the client of a spa enterprise as an element of a business model. At the same time, this paper points to the need to base spa activity on the values of sustainable development through key spa resources in the form of a therapeutic climate and natural raw materials applied in spa therapy. The key values for patients and spa tourists are the improvement of health with natural therapeutic resources, recreation in a place with a healing climate, achieving the effect of the treatment, the development of cultural activities, the possibility of taking care of a child during treatment, and the introduction of a psychologist and leisure animator. The mentioned features may become the basis for building a business model of spa enterprises to adapt the value propositions of a client in their business models to the needs demonstrated by the beneficiaries of these values. The problem raised in the article requires a simultaneous consideration of the principles of sustainable development in relation to the natural resources used in spa therapy.

**Keywords:** business model; proposal of value; spa enterprises; Poland

## 1. Introduction

Tourism grown in health resorts is one of the most popular forms of recreation in the modern world. In the last three decades, there has been a dynamic development of both spa tourism and other forms of health tourism, such as wellness and medical tourism. The changes in trends observed in the health tourism market in the 1990s indicate the strengthening of the role of modern methods in health tourism, while the popularity of traditional health services in spas is still significant. Literature identifies many such trends, e.g., the demand for a healthy lifestyle, the individual responsibility for health preservation in an increasingly wide context, a highly stressed lifestyle, and the development of the ills of civilization [1,2]. Along with these changes in trends, there has also been a dynamic increase in the financial significance of this sector. The Global Wellness Institute reports that the Global Wellness Economy has grown by 10.6% (from 2013 to 2017) to \$3.7 trillion, far outpacing the global GDP. In addition, wellness tourism grew at 14%, more than twice as fast as average tourism (6.9%), while the global spa market grew from \$94 billion in 2013 to \$99 billion in 2015, with 16,000 new spas and over 230,000 new employees [3].

In the last decade, an intensification of scientific activity in the scope of identifying new factors influencing the attraction of tourists to spa therapies has been noticeable. Some studies have shown a significant dependence of the choice of a particular form of spa therapy from a multiplicity of factors

including age, level of education, travel party size, spa experience, type of guest, length of stay, and expected benefits [4]. Other studies have shown a strong influence of the ambient atmosphere of the treatment area with the feelings of pleasure and relaxation [5].

The modern spa enterprises providing a wide range of spa services seek a form of value proposition for the client (patient, tourist, and potential recipient) that would help them acquire new market segments. An opportunity to find the optimal form of a value proposition could view spa products from the perspective of a business model. Attempts to create a business model of spa enterprises have already been undertaken by various authors, but, so far, they have not focused on the proposal of this value and the role of natural resources in this business [6].

The purpose of this paper is to present a value proposition for the client of a spa enterprise, as well as the location of the proposition in the business model. The basis for creating value propositions for spa tourists is the self-research that has been carried out in Polish spa resorts. At the same time, this paper is an attempt to indicate the elements of sustainable development of spa areas and their key resources in the form of the therapeutic climate and natural raw materials applied in spa therapy.

## 2. Business of Health Tourism

### 2.1. Spa Tourism Enterprise

In Poland, there are 45 spa resorts with varied climates and natural resources. They are mountain, lowland, seaside, thermal, and underground spa resorts with varied resources of therapeutic raw materials [7]. The occurring deposits of therapeutic raw materials include the following: Mineral waters, specific waters (e.g., thermal ones), mineral specific waters, therapeutic gases (carbon dioxide, hydrogen sulphide, oxygen, and ozone mixed with oxygen), and therapeutic peats (i.e., raw materials classified as peloids (therapeutic muds)). These resources have been designated as key materials for the conduction of spa therapy. However, spa therapy is based on the use of the natural conditions of spa resorts, which include the following:

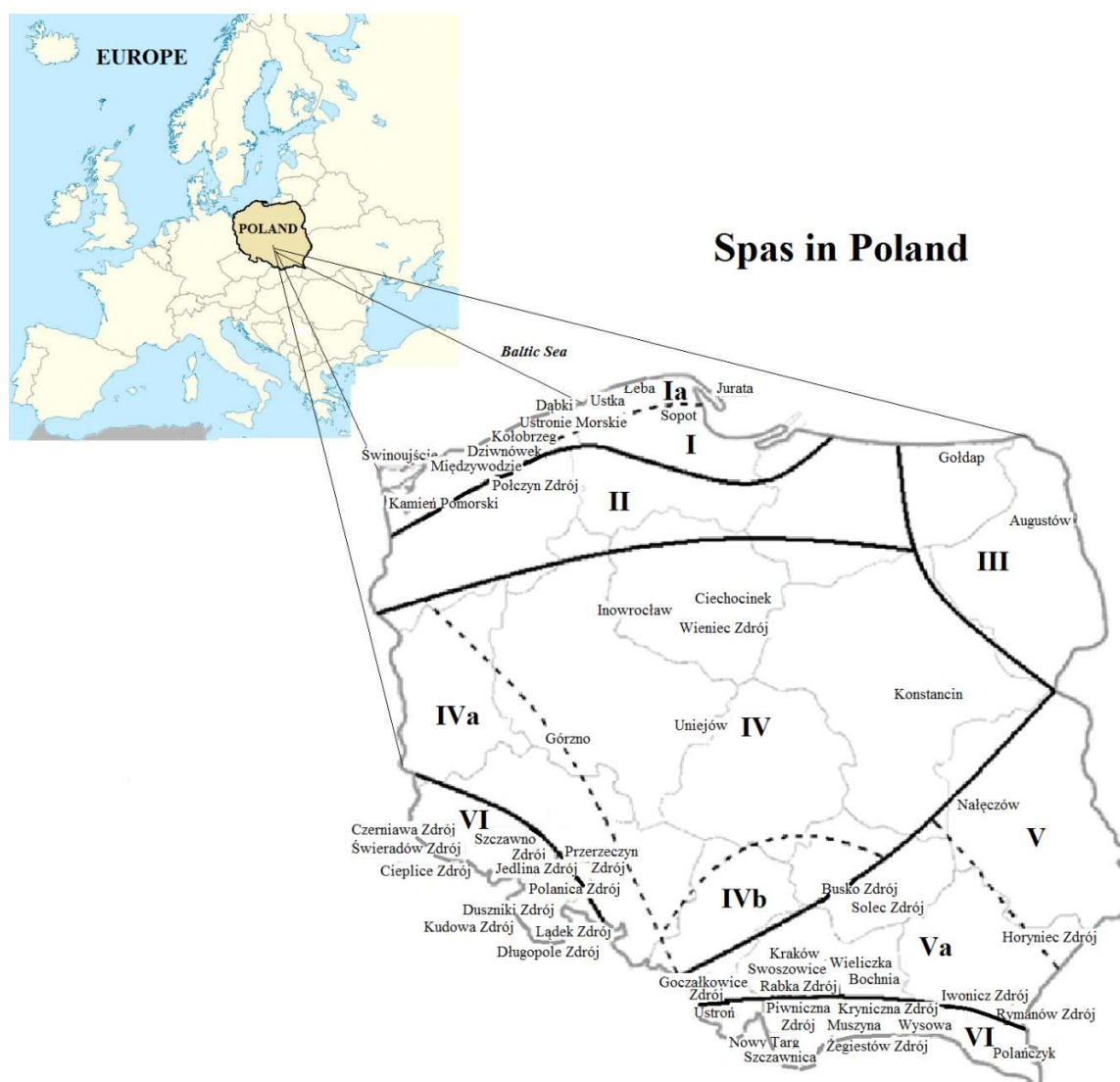
- The natural properties of therapeutic raw materials such as therapeutic waters, gases, and peloids (balneotherapy);
- The therapeutic properties of the climate (climate therapy), including thalassotherapy, subterrainerotherapy, and microclimate.

Specifically, due to the nature of spa therapy being conducted, apart from the natural therapeutic raw materials, climate is a very significant therapeutic property of these spa resorts. The way the climate affects the human body depends on several factors, including the relief and the type of flora, soil, hydrographic conditions, and land conversion. Ajrapetova et al. [8] raised this issue and pointed to the need to analyze the impact of various weather factors on patients with nonspecific respiratory diseases. They emphasized that climate therapy methods should be discussed with a particular emphasis on the physical factors affecting acclimatization and re-acclimatization, as well as on the prevention of meteopathic reactions [8].

This impact may be strong, moderate, or weak, depending on the conditions and their intensity. Bearing in mind the particular geographical location of Poland and, consequently, the moderate climate within this area, the level of stimulation that can be encountered in various regions of Poland is very diverse. This is due to the mixing of humid air masses from the Atlantic with dry air from the interior of the Eurasian continent [9]. This mixing is the reason for considerable fluctuations in the changing processes of seasons in consecutive years.

Climatologists have distinguished several bioclimatic zones in the territory of Poland (Figure 1) [10–12]. The strong stimulative character of the climate is attributed to zone I and, in particular, to towns located along the coastline (subzone Ia). The impact of this zone results from radiation stimuli (connected with insolation), as well as thermal, humid, mechanical (wind), and acoustic stimuli (i.e., the hum of sea waves). Though according to balneologists, spa therapy is characterized by a high efficiency [13], this does not

mean that the stimulative character within particular areas is static in specific periods of the calendar year. In zone I, the most beneficial influence of the climate can be observed from June until September.



**Figure 1.** Climatic zones of Poland. Commentary: The Roman numerals indicate the intensity of climatic impact from the strongest (I) to moderate (II), with (VI) being the weakest. Source: Self-study based on [11,12].

Zone II is the zone with a moderately stimulative climate character. The impact of the climate in this area is slightly weaker than in zone I, where a strong impact of the Baltic Sea has been recorded. In this area, the most beneficial influence of the climate can be observed from March until October.

A further reduction of impact of the climate on the human body can be observed in zones III, IV, and V. However, this impact is not identical in particular seasons; while the stimulative character increases in winter in zone III, it reaches its highest level in summer in zone V. This is the result of impact of thermal stimulus. In turn, a higher level of the stimulative character is observed in subzone IVb of zone IV due to a higher level of air pollution.

A significant diversification and a strong impact of the climate on the human body has been observed in mountainous and upland areas (zone VI). However, the efficiency of the climatotherapeutic treatments there is similar throughout the whole year.

The organized access to the above-mentioned therapeutic raw materials and the therapeutic impact of the climate are secured for the patients by specialized spa enterprises. These enterprises provide

spa services that are economic entities—the activity of which is closely related to the organization and provision of spa services, i.e., the organization and provision of a comprehensive spa product to patients and tourists in spa resorts. Due to the fact that a patient is also a tourist, spa enterprises can also be described as specialist medical institutions providing health tourism services in spa resorts.

Weaver and Lawton [14] indicated that tourism focused on health-related purposes includes visits at spa resorts, although the journey itself is often combined with leisure themes and the search for pleasure. Therefore, a more appropriate form of health tourism concerns the travel undertaken to obtain medical assistance. Health tourism has been explained in a slightly different way by Goodrich and Goodrich [15]. According to them, health tourism is an attempt at attracting tourists through tourist facilities or areas in order to provide them with non-standard services (i.e., health care and the provision of appropriate equipment). Others add that health tourism includes a composition of three elements: Staying outside the place of residence, health as the main motivation for arrival, and staying in leisure conditions [16]. According to Lanz-Kaufmann and Muller [17], health tourism is the sum of relations and phenomena resulting from the change of location and the stay of people undertaken to provide support, achieve balance, and restore physical, mental, and social comfort through the use of health services. However, they added that it focuses on people for whom the place of stay is neither the place of their permanent residence nor their place of work.

## 2.2. A Reference to Sustainable Development

Conducting socio-economic activities involving the use of natural conditions of spa resorts creates many opportunities for the abuse of the local natural environment (noise, over-tourism, the destruction and cluttering of valuable natural areas, and the excessive drainage of water sources). Therefore, a particularly important element of the social and economic activities being conducted is the undertaking of them in the context of the sustainable development of spa areas.

In its initial form, the concept of sustainable development is particularly concerned with issues related to ecology in many aspects of this social problem—especially in the shaping of the pro-ecological behavior of societies.

However, as time passed, sustainability has begun to concern the area related to enterprise management. The concern for sustainable development has helped in the initiation of a new way of thinking which is focused on a development that takes into account many elements affecting the growth of enterprises. This development sometimes contradicts the assumptions of the conventional, neoclassical economics of growth and development [18]. In the source literature, numerous definitions of this issue have been defined [19–21]. It was believed that sustainable development is characterized by three main features: sustainability, durability and self-sustaining development. Sustainability means the need to maintain the right proportions, development structures, and balance between development needs and the need to protect the environment. The durability feature requires the maintenance of the availability of environmental resources, and the self-sustainment of development draws attention to the interdependence of the economic, ecological, and social factors in stimulating long-term economic growth and to the role of the ecological conditions of this growth [22,23]. Kidd [24] believes that the concept of sustainable development is related to the sustainable impact of particular political, social, and scientific groups. This means that there is a close correlation between business sustainability and the sustainable management of relationships with internal and external clients. According to other authors, the basic aspect of sustainable development is that the expectations and ideas of enterprises related to the market and society affect the prevailing opinions on what can be done and what cannot be done when practicing sustainable business [25]. Grudzewski et al. [26] defined sustainable development as the ability of the enterprise to learn, adapt, develop, revitalize, reconstruct, and reorient itself on an ongoing basis. The purpose of these activities is to keep a durable and prominent market position by offering a non-standard value to purchasers now and in the future [27]. Sustainable business plays an increasingly important role in the responsible conduct of market competition that is based on 10 key principles with which the enterprise should comply. These are the following: The positive impact of

the enterprise, a positively perceived brand and reputation, ecological processes consistent with the planned environmental effect, the achievement of acceptable financial results, the implementation of multidimensional projects, the implementation of an efficient and effective competition strategy, the implementation of projects improving the functioning of the enterprise, the testing of efficient business scenarios, work and growth, and the search for and removal of gaps in the area of the sustainable development of the enterprise based on index analyses [27,28]. Based on the above conclusion, it can be stated that basing business models on assumptions of sustainable development has become an indispensable element of building competitive advantages. This also applies to companies operating in spas.

Solutions for this topic are already in the literature in relation to the specialization of spa treatments or raw materials. Examples of this are proposed changes in hygiene and safety. Valeriani and others have explicitly stated that the heterogeneity of spa waters and their uses may suggest an individualized approach to design and the carrying on of sustainable management through dedicated technical solutions and water safety plans [29–32].

### 2.3. Business Model and Proposal of Values for Customer

The concept of a business model as a management tool was developed in the second half of the 20th century, when Konczal [33] added a managerial value to business models, clearly suggesting that they should not be perceived only as scientific or natural science tools. Since then, many approaches to this concept have been published. They can be perceived as a synthetic description of the business nature [34] or a tool [35], describing the relationships between the components that lead to the development and capturing of value by organizations [36].

The most popular concept in this scope is the “CANVAS” model, containing nine linked and interacting elements [37]. Among them, we can distinguish: (1) The customers’ segment, being the axis of each business model; (2) the proposals of values for selected customers’ segments; (3) communication channels between the defined elements; (4) relationships with customers; (5) revenue streams; (6) key resources; (7) key activities; (8) key partners; and (9) cost structure, meaning all the costs related to the execution of the defined business model. These nine elements are together defined as the business model template. Other concepts list such elements of business models as client choice, capturing value, strategic control, and the scope of activities [38].

A key element of many approaches to business models is the value proposition for the client. Osterwalder and Pigneur [37] described it as a set of products and services that generate value for a specific client segment, as well as the reason why clients prefer the offer of a company over the offers of its competitors. They add that it is a value that solves clients’ problems or satisfies their needs.

The modern spa enterprises providing a wide range of spa services seek a form of value proposition for the client (patient, tourist, and potential recipient) that would help them acquire new market segments. An opportunity to find the optimal form of a value proposition could be to view the spa product from the perspective of a business model. Conversely, however, learning about the value for the client of this service sector helps create a new business model more adapted to the client’s requirements. Particularly significant may be the penetration of particular elements of the spa product structure and model components in the context of traditional and modern spa offers. The category of value for the client as one of the elements of the business model is a very capacious concept. Many researchers have related the concept of value for the client to M. Porter’s concept of the value chain [39], which is often the starting point for characterizing this element of the model. Kardas [40] referred to several convergent elements of the business model and the aforementioned concept. The value chain is a sequence of subsequent activities related to the manufacture of products (both products and services), consisting of five basic activities, which include: Internal logistics, operational activities, external logistics, marketing, and sales and service. There are also four auxiliary activities—company infrastructure, human resource management, technology development, and supply. This model also has three typical rules for configuring the value chain, i.e., the operator’s model (consisting of



focusing on one of the elements of the value chain, such as marketing or production), an integrator model (focused on actions in terms of development of the entire value chain, thus encompassing the entire manufacturing process and value capturing, by, for example, increasing the scale of production, its repeatability, and market acquisition), and the conductor model (covering coordination of activities resulting from cooperation with other enterprises forming the value chain through alliances and outsourcing) [41]. Attempts at configuring the value for the client in the spa sector were made by Kabalska and Kozarkiewicz [42], who began to consider the value for the client by considering the value chain of Porter [43–45] and then referred to his industrial modifications [46]. The value has also been considered from the perspective of partnership by adding the value of Johnston and Lawrence [47] and the value workshop of Stabell and Fjelsdstad [43].

The development of the value proposition for the spa client undertaken by the authors required a familiarization with the expectations reported by patients. However, this research has been extended by the analysis of the needs of people who, though they have never been in a spa resort, take such a possibility into account for the future. The purpose of this activity was to recognize the possibility of formulating an offer for additional market segments by identifying key values for the client of a spa enterprise. As a consequence, these activities are supposed to be used to build a competitive advantage by expanding the resources of a spa enterprise and seeking opportunities for new applications of these resources in accordance with the assumptions of the resource-based theory [48], in which core competencies play an important role [49] and have distinctive capabilities [50].

### 3. Materials and Methods

The formulation of the expectations of patients and potential patients required research in Polish spa resorts. The research was carried out in 2018 on a representative sample of 810 people. Due to the fact that the respondents were mainly people who have already completed spa therapy, this research required reaching these people in their everyday life conditions. The questionnaire contained 34 questions and was divided into three parts. The first and last parts included questions for all participants, while the second part contained two sets of questions—one for spa visitors and one for potential visitors. Answers that were given by the respondents in the first part decided what set of questions they received in the second part. This way, the conducted research allowed us to gather the opinions of spa visitors and to get to know the expectations of potential clients. Tourists who visited a spa in the last 10 years were asked about their experiences and needs. Potential clients, meanwhile, explained why they have not visited a spa so far, and what their expectations are. It should be noted that research has so far not been carried out in the field of value propositions for the clients of spa tourism.

The survey was made available on the internet on community portals related to spa resorts. This, of course, means a certain limitation of research to people using the computer and the internet, but, considering that the number of young people (up to 30 years old) participating in the research was almost as high as the number of middle-aged (30–65 years) and older people (over 65 years), this factor related to the limitation of the research to the internet network did not significantly affect the reliability of the obtained results.

After the initial selection of the collected questionnaires, 753 respondents were qualified for further analyses, of which 63.5% (478 people) were people who stayed in one of the 45 Polish spa resorts in the last 10 years. The second group of respondents consisted of 275 people who have never been to a spa resort but express their willingness to go to one and have particular expectations. Thus, the respondents were divided into two main groups—patients and spa tourists (P and ST) and potential patients (PSP).

Opinions from 478 patients were obtained, a number which exceeded the minimum random sample size estimated at 474 surveys (for the assumed level of maximum statistical error of the sample of  $\pm 4.5\%$ , and the confidence level  $p = 0.95$ ). In the case of potential patients, the maximum statistical error of the random sample is  $\pm 6\%$ , with the assumed significance level  $\alpha = 0.05$ .

The development of the data collected consisted in performing a statistical analysis of both one-dimensional (in the form of a classical or positional descriptive analysis) and two-dimensional (in the form of an analysis of the pairs of characteristics) characters, as well as in a multidimensional dimension, with the application of a correspondence analysis. A correspondence analysis allows for the bringing of a complex form of a multidimensional phenomenon to a two-dimensional plane analyzed from various perspectives. Taxonomic distances between points among mutual interdependencies indicate the interrelations of particular feature variants [51]. Thanks to this, it was possible to establish dependencies between quality variables.

In some cases, the level of significance of differences between the obtained average values was also studied. To compare two average values in the studied independent groups (ST and P vs. PSP) in the case of variables of normal distribution, the *t*-Student test was applied, first determining the uniformity of variations (with the use of Fisher–Snedecor test) [52]. To compare two groups with variations of distribution other than normal (and they were in the majority), the *U* test was used (Mann–Whitney) [53]. In the case of non-uniform variations of features characterized by normal distribution, the *C* test was used (Cochran–Cox) [54]. A comparative analysis of three and more independent groups of distribution other than normal was made with the use of an ANOVA test of Kruskal–Wallis. In the case of non-uniformity of variable variations of normal distribution, the tests were carried out with independent variations estimation. The significance of differences between structure indicators was verified with the chi-squared test. The presence of normality of distribution of the studied variables was verified with the Shapiro–Wilk test [55]. When verifying statistical hypotheses, the statistical tests were used, taking into account significance at the level of  $\alpha \leq 0.05$ . In the interdependence analysis, linear Pearson correlation coefficients ( $r_{xy}$ ), and a *t*-Student significance test for correlation coefficient were used [56].

#### 4. Results and Discussion

The studied sample consisted of 73.4% women and 26.6% men, thus reflecting the structure of patients observed in many other researches carried out in spa resorts [57]. A similar structure was observed in particular subgroups of the surveyed patients (77.3% women and 22.7% men) and potential patients (67.5% women and 32.5% men). Among those surveyed, only 1.4% visited foreign spa resorts, and 1.6% of them were respondents living outside of Poland. This is due to the specific nature of trips to spas in Poland, which are generally national in nature and are related to the participation of the National Health Fund, the dominant health insurer.

People visiting spa resorts were mostly under the care of a spa doctor (79%). Only every fifth respondent stayed in spa resorts without medical care (21%). A total of 61.2% of spa resort visitors came there with their insurer's referral.

The patients surveyed included mostly retirement and disability pensioners (36.6%) and white-collar workers (36.6%), while white-collar workers prevailed among potential patients (41.1%). Many respondents (54.0%) declared that they were studying and working at the same time. Most of the respondents had secondary education (58.0%) and higher education (34.4%).

The purpose of stay which prevailed among spa resort visitors was therapy (63.6%), but there were also people there mainly to relax (14.6%), take preventive treatment (8.3%), or take advantage of tourist attractions (7%). The correlation analysis confirmed, however, that the purpose of visits at spa resorts was correlated with the length of stay at spa resorts ( $r_s = 0.475$ ,  $p < 0.05$ ). People declaring a health-related purpose stayed at the spa for much longer than people declaring their arrival for recreational purposes.

A three-week stay at a spa resort (the standard length of spa therapy) was declared by 61.0% of the respondents. A total of 11.4% of patients arrived for two weeks, and 6.1% of respondents arrived for a week. Weekend trips to spa resorts were not very often chosen by patients (6.6%).

Three out of four respondents (75.3%) were staying in sanatoriums, spa hospitals, and preventoriums during their stay at the spa. Every fifth respondent (21.1%) stayed in another hotel

establishment (hotel, guesthouse, spa center). Only 1.6% of the respondents stayed there with friends and relatives.

The respondents were asked about the features guaranteeing a successful stay at a spa resort. Respondents could indicate the three most important features. The obtained results indicate that the two key factors influencing the evaluation of the stay of the patient are: Spa treatment quality (65.5%) and accommodation quality (63.3%), i.e., two basic elements of a spa product. These factors were indicated by two out of three respondents. Another important feature is the wide range of spa treatments, therefore offering an interesting differentiation compared to other resorts. This feature was indicated by 40.8% of the respondents. Every fourth respondent (26.8%) attributed a high importance to catering services and to the spa landscape (24.1%). In addition, the silence and peace that the patients can experience at a spa resort (17.3%) are valuable to them, as are a wide range of attractions of the local culture (12.9%).

The respondents were also asked what they value most during their stay at a spa resort. Two out of three respondents answered that they most valued maintaining or improving their health conditions using natural therapeutic raw materials (66%), i.e., the achievement of the primary purpose of their stay at a spa resort—an effective spa treatment. Having a rest in a place with a therapeutic climate was the second most popular response—it was selected by 38.7% of respondents. Every third respondent (29.8%) also pointed to elements related to spa recreation (i.e., better mood, relaxation, beauty, weight loss, improvement of fitness, and sports results). Every sixth respondent (17%) stressed the health, physical, and emotional security achieved through constant medical care. A similar group of people reported (15.9%) valuing the opportunities for entertainment and contact with other people at a spa resort. Only every eleventh respondent visiting spas indicated the possibility of practicing various forms of tourism as the key value (8.6%).

The preferences of patients in terms of the spa values most important to them were also surveyed. Every third respondent pointed to the climate of a spa resort (33.7%), and every fourth respondent pointed either to the natural resources present at a spa (24.7%) or to natural therapies (24.2%). Every tenth respondent appreciated peace and a slow lifestyle at a spa resort (9.0%).

The research also allowed us to identify the reasons for the non-usage of spa resorts until now by potential patients. A majority of them (63.4%) said that they have not visited a spa resort because they did not need treatment nor preventive healthcare. Almost every third respondent said there was no such occasion (29.6%). A total of 8.5% of respondents said that they have not visited a spa resort because it is a place for old and sick people. The same number of people stated that they did not find anything interesting for themselves in the offer of spa resorts. Another 8.5% of respondents do not take part in spa treatments due to a lack of sufficient free days of holiday leave. A total of 7% of respondents admitted that they cannot afford such a travel.

Every third respondent (32.4%) wanted to be treated as a guest, not as a patient, which suggests the desire to treat spa travels as leisure travels with a therapeutic goal—not as a continuation of hospital treatment.

Every fourth respondent (25.3%) suggested the introduction of smaller rooms (single and double) in sanatoriums and spa hospitals. The same number of respondents suggested a stronger development of cultural activities in spa resorts (24.7%).

The ideas of introducing transport which facilitates access to and return from a spa, as well as the care of a psychologist and leisure animator were also popular, receiving 15.0% and 12.2%, respectively. Many respondents support the idea of abolishing the obligation to charge patients who, for important reasons, must shorten their stay at a spa resort (18.1%), which unfortunately happens in the case of patients coming to a spa resort with a medical referral.

In the case of respondents who have been to a spa resort (P and ST) and those who have not been there yet (PSP), the opinion on the need to raise the accommodation standard was supported to the same extent ( $p = 0.908$ ). However, in the case of a higher standard of medical service and the need to be a “guest” and not a “patient,” the percentage of indications was different ( $p = 0.039$ ). A significantly



higher percentage of responses of potential patients who recognize the current state as necessary for improvement was visible. A similar situation occurred in the case of proposals to introduce single and double rooms. The greatest differences were observed in terms of entertainment. Potential patients more often expressed the need to develop cultural activities ( $\Delta = +20.4\%$ ,  $p = 0.007$ ) ( $\Delta$ —intergroup difference [%]) and to take care of a child during treatment ( $\Delta = +16.6\%$ ,  $p = 0.069$ ). Differences in terms of proposals concerning the introduction of care of psychologists and leisure animators were also observed ( $\Delta = +9.7\%$ ,  $p = 0.227$ ), as was the introduction of educational classes and lectures ( $\Delta = +8.9\%$ ,  $p = 0.287$ ); however, those differences were statistically irrelevant. Potential patients were also five times more likely to feel the necessity of introducing spiritual care during the treatment; however, this difference was also statistically irrelevant ( $p = 0.662$ ).

The differences show the weakness of spa resort offerings so far due to their non-adaptation to the expectations of potential recipients. Particularly, one can point here to the expectations of families and single mothers who would like to take advantage of treatments and rest at spa resorts while staying there with their child, as well as the expectations of people demonstrating some spiritual needs (retreat during a spa treatment and pilgrimage in the parishes of the spa resort or in surrounding areas). One of the unused segments of recipients was also people with conceptions of stereotypes that limited their tendency to want to spend time at a spa resort. This may be indicated by the need to boost spa resorts' cultural life, which often fades away in the autumn and winter period. A response to this need may be the services of a leisure animator or a psychologist at a sanatorium.

The occurrence of interactions between particular responses and the qualitative character of the majority of the surveyed features enabled the use of a multidimensional analytical tool in the form of a correspondence analysis. The obtained models are characterized by a high quality of comparisons, thanks to the high level of explanation of the response—the sum of the eigenvalue in the form of the percentage of explained information from both axes amounts to 90%.

The first statement (Figure 2) reveals the relationships that emerged between the purpose of the stay at a spa resort and the length of stay. At the point of intersection of both axes (0,0), the dominant groups of recipients can be noticed. These are therapeutic and preventive stays lasting from two weeks to over a month. It can also be observed that people coming to Polish spa resorts for beauty purposes spend four-to-six days there in general. However, holiday and tourist stays were often connected with a few day stay at a spa resort (a weekend or one week). Other forms of stay can also be identified, including meeting stays, which generally involved one day or a weekend.

The next statement concerns the age groups and ways of making decisions on a person's own arrival to a spa resort (Figure 3), which may be of great importance for marketing strategies. The analysis reveals that the personal choice of the place of stay at a spa resort was most often reported by middle-aged people (30–50 years), while, in the 50–70 age groups, the place of stay was usually selected by insurers. The situation is slightly different in the case of the youngest age group (up to 30 years of age), because there the choice of treatment was made both by family and friends as well as by the patient himself or herself.

The third statement (Figure 4) concerns the relationship between the purpose of stay and the expenses during the treatment. The analysis confirms that patients coming for spa treatment and to meet people spend the least amount of money during their stay. This is understandable, as these are usually stays paid by the insurer.

A preventive stay is most often connected with an expense in the amount of PLN 1500–2000 (\$430–570), and a tourist one is connected with an expense of PLN 1000–3000 (\$285–860). Leisure and beauty-related stays are connected with the highest but also the most diverse expenses. Some patients coming for leisure or to improve their beauty were spending more than PLN 1000 (\$285), and others were spending over PLN 3000 (\$860). Visits to relatives and arrivals for sports purposes were generally not involved with cost incurrence by the visitors.

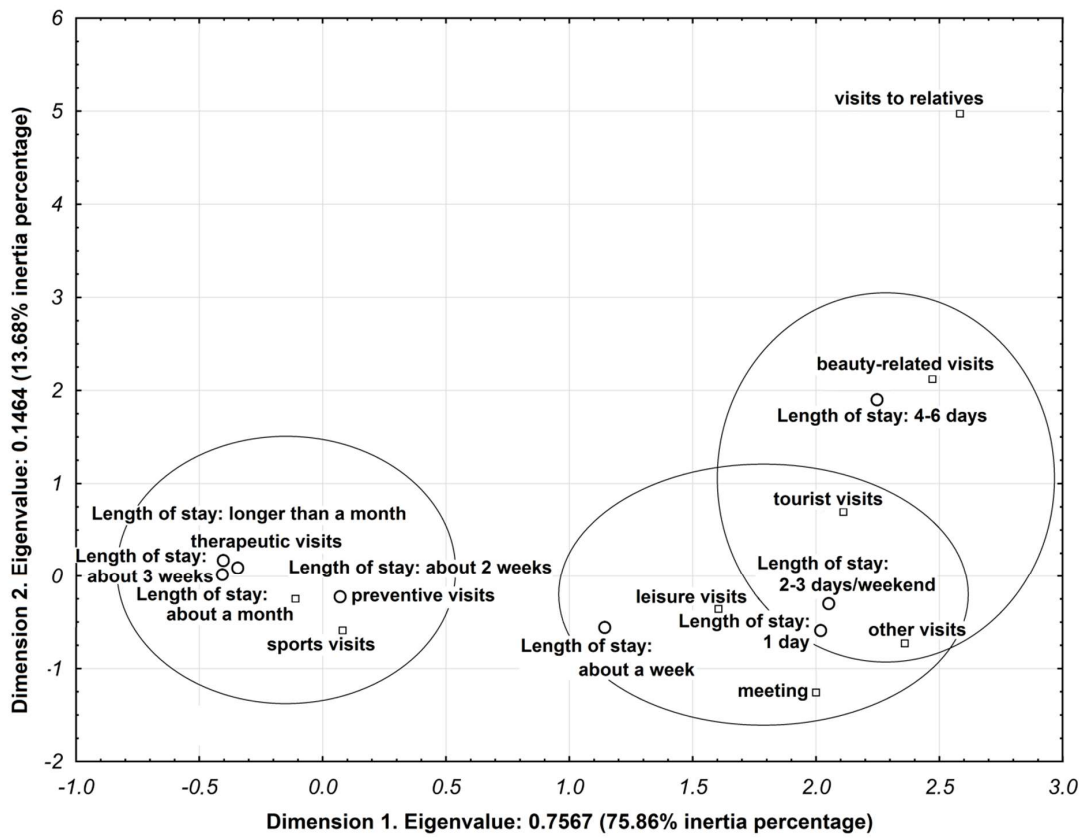


Figure 2. Correspondence analysis results—statement I. Source: Own work.

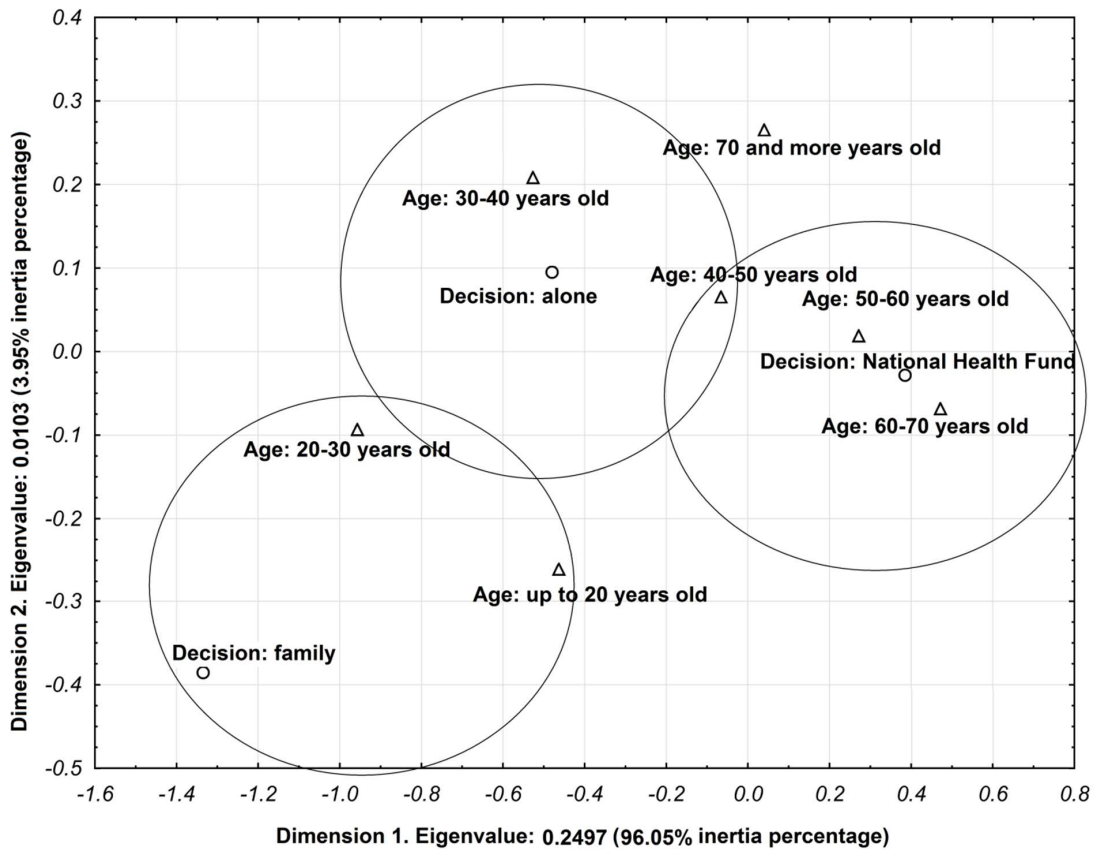


Figure 3. Correspondence analysis results—statement II. Source: Own work.

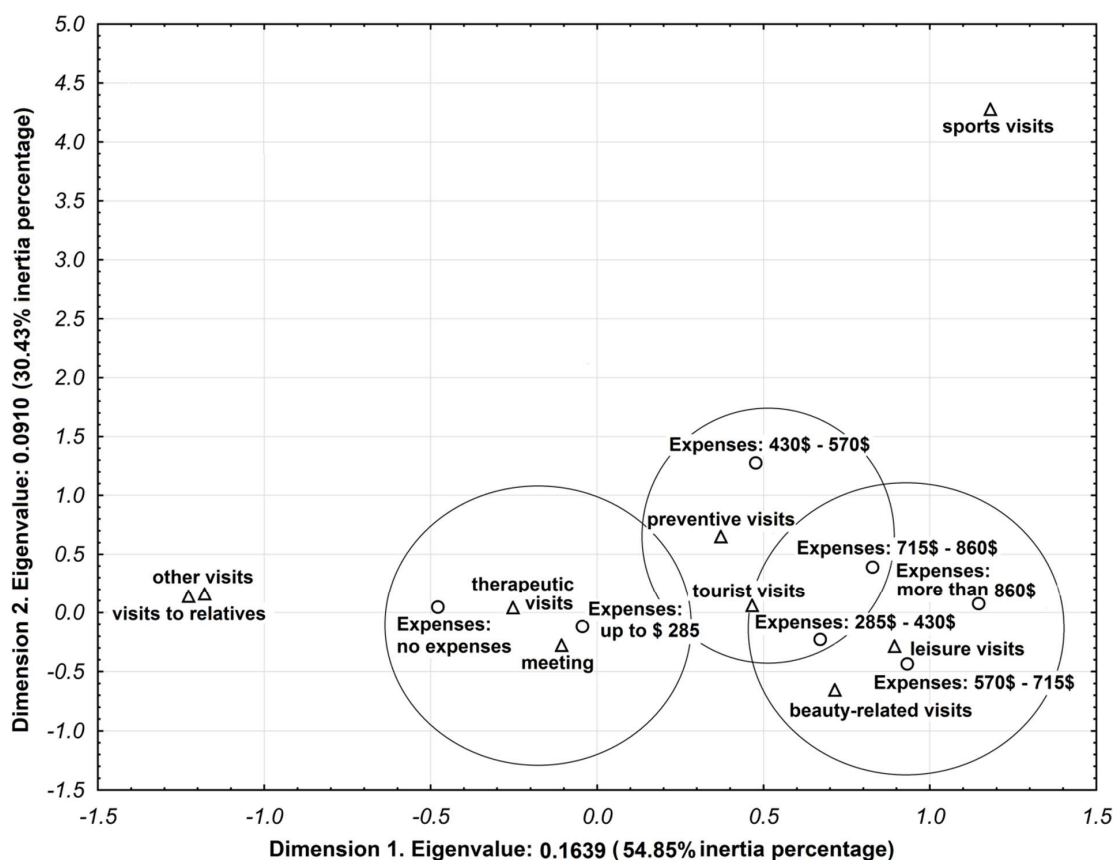


Figure 4. Correspondence analysis results—statement III. Source: Own work.

Relations between the purpose and length of stay, expenses, age of patients, sex, and marital status were observed. The dominant group of respondents was observed to be patients arriving to spa resorts for therapeutic and preventive purposes. The above listed types of stay are similar in many respects, which is why they are often considered together. The interdependencies observed in the presented statement confirm the relationship between therapeutic stays and 50+ age groups, the predominance of women, a duration of stay lasting approximately three weeks, and expenses of up to PLN 1000 (\$285). The marital status of the respondents is somewhat less explicit (since they are both widows and widowers, as well as married people)—as is the level of education—because there were people with different education in this group. The features that makes it possible to distinguish between therapeutic and preventive stays are the higher expenses paid during (PLN 1500–3000, or \$430–860) and the shorter duration of (up to approximately two weeks) the stay of people who came for preventive purposes.

Respondents coming for leisure or tourist purposes were mostly characterized by short stays at spa resorts (from one day to about one week) and expenses at the level of PLN 2000–2500 (\$570–715). Similar features could be seen in people arriving for the purpose of beauty improvement.

The youngest people (up to 20 years of age) and those of 30–40 years of age enjoy leisure, tourist, therapeutic, and preventive stays. It is worth noting that this group often includes unmarried persons (most often men), who spend from PLN 1000 to over PLN 3000 PLN (\$285–860) during their stay.

## 5. Conclusion

The component of the business model of a spa enterprise that has undergone the greatest changes in the last decade is the value proposition that the enterprise offers to its clients. It is no longer just a properly conducted treatment with accommodation and catering services like it was back in the 1990s.

It is worth noticing that, currently, the main values for spa resort clients are the effects of therapeutic and leisure treatment. The beneficial effects of relaxation services, such as stress relief, sense of beauty,

beauty improvement, weight loss, fitness, and sports performance, are also important. A significant value is also the patient's integration with other people (co-patients) with similar health, lifestyles, social situations, interests, or ways of spending free time. An important value indicated by the respondents is the ability to break away from the everyday life.

Summing up the obtained results, key values for the client of a spa enterprise can be formulated. They include (Figure 5):

- The improvement of health with natural therapeutic resources;
- recreation in a place with a healing climate;
- achieving the effect of the treatment (relaxation, beauty, improved beauty, weight loss, improvement of fitness, and sports results); and
- cognitive, cultural, and religious impressions obtained through various forms of tourism.

One should also remember the expectations of potential patients who, in the described research, expressed the need for:

- The development of cultural activities,
- the possibility of taking care of a child during treatment,
- the introduction of a psychologist and leisure animator,
- the introduction of classes and educational lectures, and
- the introduction of spiritual care during the treatment.

The obtained results have some limitations, as patients and tourists visiting only Polish spa resorts were subject to the survey. Therefore, it is not possible to generalize the obtained results for all spa enterprises; however, the results may show new trends which could be observed in particular countries.

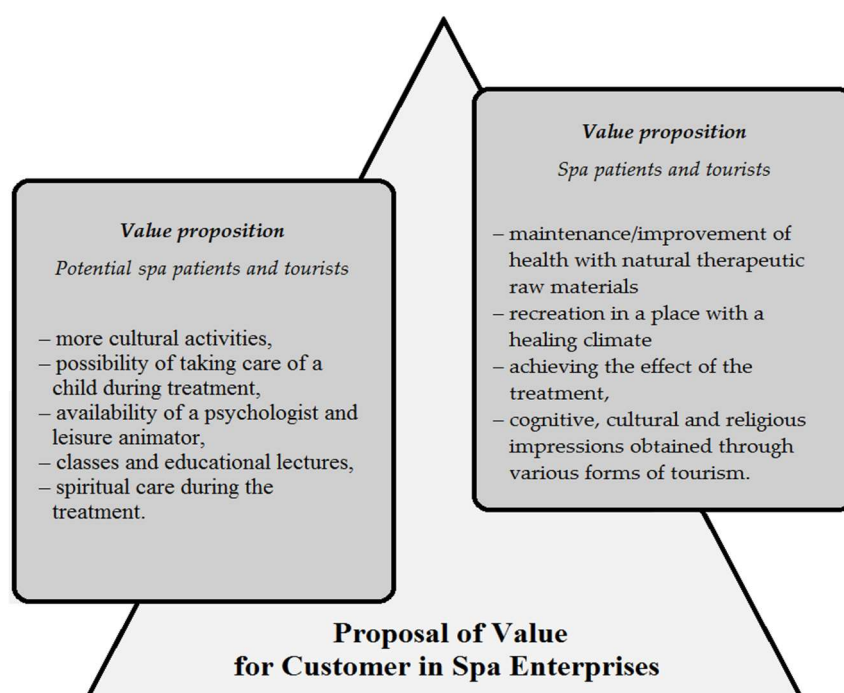


Figure 5. Proposal of value for spa patients and tourists. Source: Own work.

The obtained form of value proposition for a spa client can also be referred to as the atomic form of a tourist product and, especially, as the core of a tourist product. It is the proposition of value for the client that becomes an essential element, not only of the business model of a tourist enterprise, but of the offered tourist product. This allows the simultaneous entry of the whole form of the business model into the tourist product scheme [58].

It is worth noting that one of the most important elements of the obtained form of the value proposition for a spa client is the use of natural resources available to Polish spas, especially the impact of the climate and raw materials used in spa therapy. This element of the spa business model becomes one of the strategic factors determining both the competitive advantage by maintaining the principles of sustainable development and the financial success of the enterprise. It is the spa activity that is one of the best examples of opportunity to find a balance between achieving business and social goals through the sustainable development of spas. It should also be remembered that natural therapeutic resources are extremely important for modern generations, but they are also an exceptional deposit for future generations; as such, these generations should also be able to benefit from them to no less an extent.

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