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## IMPACT OF TOURIST SATISFACTION ON THEIR REVISIT'S: WITH SPECIAL REFERENCE TO WELLNESS TOURISM DESTINATION SITES IN SRI LANKA

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### Abstract

Wellness as a lifestyle mentions to special state of health incorporating the harmony of body, mind and spirit. The main objective of this study is to evaluate the impact of tourist's satisfaction on their revisit in the wellness tourism industry. To measure the satisfaction of wellness tourist Service quality was defined by Parasuraman, Zeithaml e Berry (1985) through the SERVQUAL scale with five dimensions: tangibility, reliability, responsiveness, assurance, and empathy. The evidence from this study suggests that majority of male travel to Sri Lanka for wellness tourism also majority of people were adult. Many respondents were with secondary education level and monthly income between US\$ 1500-2000 also expenditure per day were between US\$100-150. Majority respondenst were taken information about the destination through internet and many respodents were visit without kids. respondents were visit this destination manily between 5-10 times for th medical treetmentand and they were staying between four to six weeks in the destinations. According to survey can identify majority of people visit to Sri Lanka more than one time. Every respondent were satisfied with the wellness tourism services in Sri Lanka. Study found tourist satisfaction has direct positive and significant influence on their intention to revisit. According to the regression there is a significant relationship between satisfaction and the revisit. Correlation between satisfaction and the revisit is also greater than 0.5 which further supports the existence of significant relationship between satisfaction and revisit. Thus, there is a significant impact on revisit by satisfaction.

**Keywords:** Wellness Tourism, Tourism Destination, Service Quality, Satisfaction, Revisit Intentions

### 1. Introduction

Wellness Tourism has been considered as a fastest developing travel sector of international and domestic tourism. In modern world, especially people in the western countries tend to travel around the world for promoting their health and wellness. The factors such as high stress, fast pace of living, increasing health costs in their own countries, demographic changes, for searching the meaning in life and for maintaining a quality life have encouraged the most of



tourists for the health related wellness tourism. Therefore, the key purpose of wellness tourism is to improve health and well-being of the tourists through physical and spiritual events. According to the Wellness Tourism 2020 report, the most popular wellness tourism services are beauty treatments (89%), sport and fitness service (89%), leisure and recreational spas (85%) and spa and wellness resorts (83%) respectively. Above four services are considered as global products as they are available in almost all parts of the world. In addition to that some traditional and local products inherited in certain regions and countries such as Evidence based services (78%), Wellness rituals (65%), Yoga and meditation (60%) are also popular among worldwide tourists (Wellness Tourism 2020 report).

The wellness tourism is considered as an important strategic tourism product in the modern world. According to a new study presented at the introductory Global Wellness Tourism Congress (GWTC) wellness tourism is a proximately half-trillion dollar market, indicating 14% of total global tourism incomes (\$3.2trn) The wellness tourism is expected to rise on average 9.9% annually over the next five years, approximately double the rate of global tourism generally, getting \$678.5bn by 2017, or 16% of total tourism returns (Global Wellness Tourism Congress, 2013). This study also stated that over half the projected growth in wellness tourism in 2017 will come from the Asian, Latin American and Middle Eastern and North African markets. When considers the regions in the world, Asia is the dominant for attracting wellness tourists from all over the world. In South-East Asia, spirituality achieved the highest positions, the highest entire ranking among all the regions, furthermore medical treatments and services and alternative treatments methods were considered as important. In the Far East, spirituality and complementary and alternative methods were ranked as imperative resources. As a whole, despite the medical tourism related to treatments for ill-health, the region presents great specialization in spiritual and holistic tourism (Wellness Tourism 2020 report, 2011).

An approach suggested by USAID (USAID, 2008, page18) has considered wellness and medical tourism as subcategories of the health tourism. According to the figure 1.1, wellness tourism has been considered as a special type of tourism product and it is a subdivision of health tourism and illness prevention tourism. The medical tourism category is differed from wellness tourism and it is directly connected to the medical treatments and surgeries. The main motive of wellness tourist is to preserve or promote their health.

Customer satisfaction has always been an essential of any service operation because the long term success of the business depends on customers. Oliver (1997) has defined satisfaction as “the consumers’ overall cognitive or affective response to product use” and according to Chen and all et, (2016), “customer’s decision of whether a product/service provides a pleasurable level of consumption-related fulfilment.” Customer satisfaction provides six major competitive advantages, namely repeat buying (re-visiting), higher prices, brand loyalty, word of mouth, one stop shopping and new product innovation Sheth, (2001). Repeat purchase (re-visiting) and positive word-of-mouth helps to decreases business costs, higher customer satisfaction may lead to higher expenditure during a vacation, as satisfied customers are willing to pay higher prices.

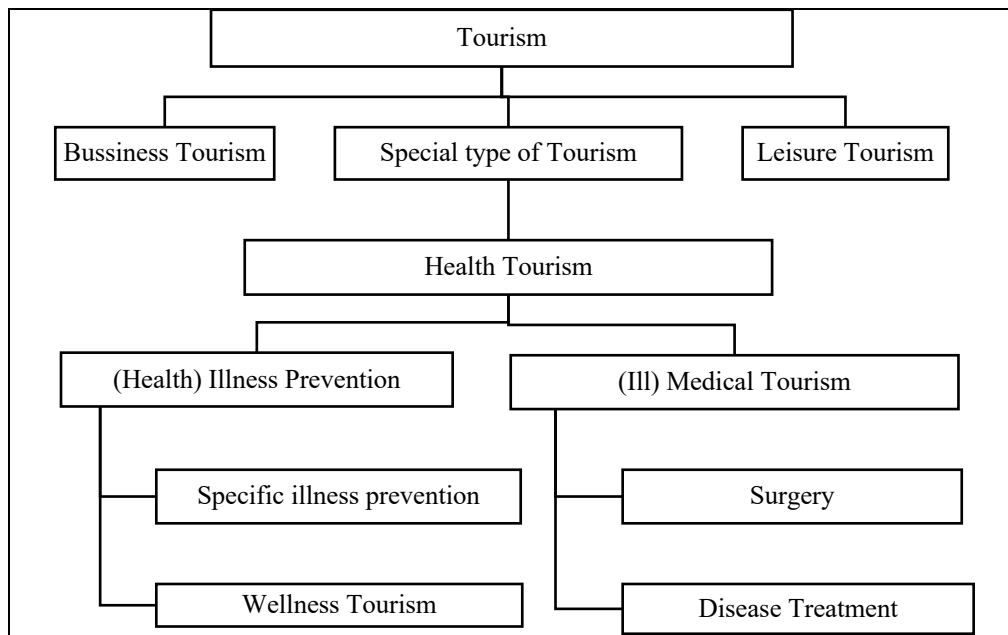


Figure 1: Typology of tourism in relation to health, medical and wellness tourism.  
Source : USAID, 2008, page 18

This study mainly focuses the tourist’s satisfaction and their revisit related to wellness tourism. According to McCabe & Johnson, (2013) health and wellness tourism has developed as a separate concept in the tourism sector and this concept has also been considered as an important substance in tourism research sector (McCabe & Johnson, (2013). Wellness tourism sector has become a popular concept in practice predominantly in the global tourism industry and as well as in Sri Lanka in the present time. The modern tourists all over the world have a trend to seek health related traditional, wellness and spa tourism services. According to some findings related to wellness tourism have proved that Asia has an expansive and leading market for wellness tourism. Therefore, Sri Lanka has to face the competition from other wellness tourist destinations in Asia. Sri Lanka needs to attract more tourists from international market in order to face this competition successfully. For this, international tourists have to be motivated to visit or revisit Sri Lanka and to recommend the country as a better wellness tourist destination in Asia. The international tourists can be motivated to revisit by satisfying them to their expected level. Therefore, it is important to understand the factors which influence tourists’ satisfaction and their intention to revisit repurchase or recommend destination to other tourists related to the wellness tourism sector in Sri Lanka.

Hence, the research question is; What are the major factors determining satisfaction on wellness tourism and does satisfaction has an impact on the revisit decision of the tourist?

The main objective of this study is to evaluate the factors affecting the satisfaction on wellness tourism and to evaluate the impact of tourist’s satisfaction on their revisit in the wellness tourism industry and the specific objectives are to; Evaluate factors affecting the satisfaction on wellness tourism, Examine the impact of satisfaction on the revisit decision in the wellness tourism industry and Provide policy and management strategies for future expansion and development in wellness tourism sector



## **2. Literature review**

### **2.1. Tourist satisfaction and revisit intention**

According to Vuuren et al. (2012) research found that Satisfaction is a customer's emotional response when evaluating the discrepancy between expectation regarding the service and the perception of actual performance and they mentioned that increased customer satisfaction may lead to increased customer loyalty, higher profitability, and increased market share (Ali & Mubarak, 2017). Sadeh (2012) Tourist satisfaction is caused by two dimensions: Firstly, it is related to the pre-expectation of the tourist before travel; secondly it referred to justification of the tourist on the delivered services after the travel based on the real experience. Hutchinson (2009) studied that when experiences compared to expectations result in feeling of gratification, the tourist is satisfied. However, when they result in feeling of displeasure, the tourist is dissatisfied. Coban, (2012) found that empirical evidences regarding tourists' satisfaction is a significant indicator of their intention to revisit and recommend the destination to other. From psychological and marketing perspectives, perceived value has been considered a central construct to understand how consumers' evaluation of using products and services influences customer satisfaction and loyalty (Ali & Mubarak, 2017).

Yoon (2010) supported that multiple dimensions of festival quality, including tangible and intangible aspects (e.g. informational service, program, souvenir, food, and facility), were significantly associated with perceived festival value. Particularly examining the distinctive role of functional and emotional values. Lee (2011) found that several festival quality had significant effects on functional and emotional values. Ma, Gao, Scott and Ding (2013) raise the need to incorporate a psychological perspective in the study of customers' emotional outcomes of a tourist experience that is often characterized by pleasure and indulgence.

### **2.2. Travel motivations and revisit intention**

The positive association between satisfaction and behavioral intention is well established in previous literature on service marketing and tourism. Hilal & Mubarak (2016) found that satisfaction was the strongest predictor for consumers' behavioral intention to repurchase and to recommend. Also, Petrick (2004) found a significant direct effect of satisfaction on behavioral intention on a cruise tour. According to Yoon (2009) revisit intention is one the fundamental issue for destination managers because repeat visitors could provide more revenue and minimize the costs. The concept of revisit intention comes from behavioral intention. Ahn (2002) found that when people have a stronger intention to engage in a behavior, they are more likely to perform the behavior. In the tourism and recreation sectors, this takes form of a repurchase of a tourism service or recreational service or a revisit of a destination or visitor attraction (Samsudeen & Kaldeen, 2020). Mat Som and Badarneh (2011) explain the significant relationship among tourist satisfaction, intention to return, and positive recommendation. Manhas and Ramjit, (2013) found that destination image and satisfaction were two important variables that influenced visitors' behavioral intention. Scrogin, Holfer, Bolye, and Milon (2010). An analysis on tourist motivation is important for destinations to understand leisure tourist destination choice ; it can also enhance destination image and its interplay with tourist satisfaction and loyalty .



### **2.3. Wellness tourism**

Carrera & Bridges, (2006) Health tourism is defined as “the organized travel outside one’s local environment for the maintenance, enhancement or restoration of an individual’s well-being in mind and body”. Smith & Puczko (2009) Depending on the use of core products and services offered, health tourism consists of two different types of tourism: medical tourism and wellness tourism. Medical tourism refers to the act of traveling to receive specialized medical treatments and care services for improving patients’ health.

Bushell & Sheldon (2009), wellness tourism is a holistic mode of travel that integrates a quest for physical health, beauty, or longevity, and/or a heightening of consciousness or spiritual awareness, and a connection with community, nature, or the divine mystery” Spivack (1998). Although spas have been historically developed as a destination for medical tourism, modern era spas have been more largely influenced by the wellbeing movement and aim to fulfill tourists’ needs for both medical and wellness tourism. There is a trend across various types of spas to explicitly address the aspect of well-being for physical and mental health either by specializing facilities and programs for wellness tourism or by adding a wellness component to the existing spa facilities for medical tourism.

## **3. Research methodology**

### **3.1. Research site**

The research method is presented in this part including sampling method, collecting primary and secondary data, data presenting and analyzing of results in a scientific method. The survey will be conducted in selected hotels and wellness centers in Negombo tourism destination in Gampaha district for determining the impact of satisfaction of tourists on their revisit. Primary Data come from the questioner, and secondary data from Central Bank (CBSL) Annual Reports, publish article and reports.

### **3.2. Sample**

The sample size is 107 participants who come to wellness centers in the hotels will select through random sampling method. Simple random sampling method going to use collect the questionnaires which can measure the general overall satisfaction of tourist regarding wellness tourism and their revisit intention. Descriptive statistics are presented as percentages and mean with standard deviation. Categorical variables are summarized using proportions and continuous variables using mean or median, whichever is applicable, with 95% confidence intervals.

### **3.3. Analytical tools**

The survey instrument was use in this study was a structured questionnaire. Only 25 impact indicators that were strongly related to the serious issues of Negombo beach were selected. A five point scale, (1 = strongly disagree; 2 = disagree; 3 =Neither agree nor disagreed ;4= agree; 5 = strongly agree) was used for respondents to rate these 25 items. These items will determine based on researcher studies of related references , Observing coastal environment of Negombo and interviews with tourist. Data analysis was conducted using the Statistical Package for Social Sciences (SPSS Version 24.0).

### 3.4. Hypotheses testing

The first three hypotheses of the current study are tested using multiple regression, while the last two hypotheses are tested using regression coefficients calculated by the Process macro attached to the SPSS.

H<sub>1</sub> : There is a significant impact between reliability and Satisfaction.

H<sub>2</sub> : There is a significant impact between empathy and Satisfaction.

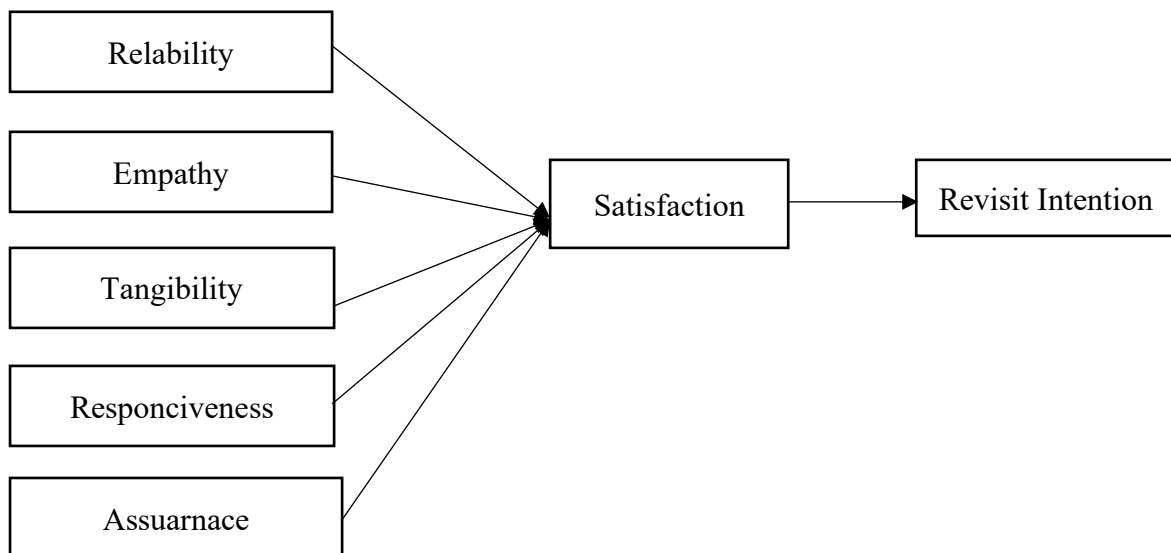
H<sub>3</sub> : There is a significant impact between tangibility and Satisfaction.

H<sub>4</sub> : There is a significant impact between responsiveness and Satisfaction.

H<sub>5</sub> : There is a significant impact between assurance and Satisfaction.

H<sub>6</sub> : There is a significant relationship between Satisfaction and the revisit

### 3.5. Conceptual model



## 4. Data analysis and discussion

### 4.1 Sample profile of the study

150 questionnaires were distributed to collect data, 117 were returned. From those, 10 questionnaires were incomplete. 107 questionnaires were used in the analysis.

### 4.2. Regression analysis

#### Tangibility and satisfaction

This relationship was measured using the following hypothesis,

H<sub>1</sub>: There is a significant relationship between satisfaction and tangibility

Here the independent variable (tangibility) considered were most significant aspect of Equipment in the hotel is modern and comfortable, The employees have neat appearance, The



hotel facilities are up- to –date, The brochures and pamphlets are visually presented and the hotel clean.

The table 4:1: below provides the model-fit results of the ‘Enter’ simple regression test using the above independent variable and satisfaction as the dependent variable. Model 1 shows a significant ( $p < 0.05$ ) F value. The  $R^2$  for this model is 0.627, which indicates that 61.6% of the variations in satisfaction are explained by the regression.

Table 4:1: Model Summary- Tangibility and satisfaction

Model	R	R Square	Adjusted R Square	Change Statistics			Durbin-Watson
				R Square Change	F Change	Sig. F Change	
Tangibility	.731 <sup>a</sup>	.627	.624	.627	124.894	.000	2.658

a. Predictors: (Constant), tangibility

b. Dependent Variable: satisfaction

Sources : Finding of Study

When conducting a regression analysis several assumptions must be met in order to generalize the findings to the population. The statistical analysis presented measures to suggest that these assumptions are being met in this regression model. To become regression model effective, multicollinearity should be absent. That implies there should be no strong relationship among the predictor variables. Number of options is provided in SPSS to test multicollinearity. It was decided to use variation inflation factor (VIF) value and tolerance statistics to test multicollinearity.

According to Bowerman & O’ Connell if VIF is greater than 1 then the regression may be biased and according to Mernard tolerance below 0.2 denotes a potential problem. The average VIF value and the lerance value of this model show that collinearity is not an issue for this model.

Another assumption is the independence of the residuals. As mentioned by Field (2009) for any two observations the residual terms should be uncorrelated. This assumption can be tested by using Durbin- Watson test. The normal standard is that if this value is close to 2 then the assumption has almost certainly been met. The Durbin- Watson statistic for this model is 2.258 which are greater than 2. A rule of thumb is that test statistic values in the range of 1.5 to 2.5 are relatively normal. Field (2009) suggests that values under 1 or more than 3 are a definite cause of concern. Hence the residuals of this model are independent. Table 4:2: below provides statistics relating to the independent variables of the Model given in table 4:2: It shows that independent variable making a contribution to the variation in satisfaction.

Table 4.2: Coefficients: The *b* value of this model is 8.865 which depicts a positive relationship between Tangibility and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model.

In summary, the data supports  $H_1$ . From the results of the statistical tests it is clear that tangibility is related to increased satisfaction.



Table 4.2: Coefficients – Tangibility and Satisfaction

Model 1	Unstandardized Coefficients		Standardized Coefficients	T	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
(Constant)	8.865	3.089		-2.232	.026		
Tangibility	.863	.074	.738	12.666	.000	1.000	1.000

a. Dependent variable: Satisfaction  
Sources: Finding of study

**Reliability and satisfaction**

This relationship was measured using the following hypothesis,

H2: There is a significant relationship between Satisfaction and Reliability

Here the independent variable (reliability) considered were the spa employee accurately verified the reservation requests, The time it took to check in or check out is not too long, The reservation system is easy to use (telephone and Internet reservation), Transport facilities are available, The employees provide error- free records.

The table 4.3: below provides the model-fit results of the ‘Enter’ simple regression test using the above independent variable and satisfaction as the dependent variable. Model 1 shows a significant ( $p < 0.05$ ) F value. The  $R^2$  for this model is 0.539, which indicates that 51.6% of the variations in satisfaction are explained by the regression.

Table 4.3: Model Summary- Reliability and satisfaction

Model	R	R Square	Adjusted R Square	Change Statistics			Durbin-Watson
				R Square Change	F Change	Sig. F Change	
1	.539 <sup>a</sup>	.669	.667	.669	142.431	.000	2.023

a. Predictors: (Constant), Reliability  
b. Dependent Variable: satisfaction

Table 4.4 below provides statistics relating to the independent variables of the Model given in table 4.3.4 It shows that independent variable making a contribution to the variation satisfaction.

Table 4.4: Coefficients – Reliability and satisfaction

Model 1	Unstandardized Coefficients		Standardized Coefficients	T	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
(Constant)							





	32.432	3.089		25.242	.000		
Reliability	.598						
		.031	.819	21896	.000	1.000	1.000

a. Dependent Variable: satisfaction

The *b* value of this model is 0.598 which depicts a positive relationship between the Reliability and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model.

In summary, the data supports H<sub>2</sub>. From the results of the statistical tests it is clear that Reliability is related to satisfaction.

### Responsiveness Studies and Satisfaction

This relationship was measured using the following hypothesis,

H<sub>3</sub>: There is a significant relationship between satisfaction and Responsiveness

Here the independent variable (Responsiveness) considered were the employees are courteous, employees gave us special attention, employees adopted Services to our requirement, staffs are willing to help guests.

The table 4:5 below provides the model-fit results of the ‘Enter’ simple regression test using the above independent variable and satisfaction as the dependent variable. Model 1 shows a significant ( $p < 0.05$ ) F value. The R<sup>2</sup> for this model is 0.541, which indicates that 64.1% of the variations in satisfaction are explained by the regression.

Table 4:5: Model Summary- Responsiveness and Satisfaction

Model	R	R Square	Adjusted R Square	Change Statistics			Durbin-Watson
				R Square Change	F Change	Sig. F Change	
1	.701 <sup>a</sup>	.541	.543	.568	122.114	.000	2.328

a. Predictors: (Constant), Responsiveness

b. Dependent Variable: satisfaction

Table 4:6: below provides statistics relating to the independent variables of the Model given in table 4.6. It shows that independent variable making a contribution to the variation in satisfaction.

Table 4: 6: Coefficients – Responsiveness and Satisfaction

Model 1	Unstandardized Coefficients		Standardized Coefficients	T	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
(Constant)							
Responsiveness	61.142	4.089		-3.442	.000		



	.654	.060	.743	15.666	.000	1.000	1.000
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a. Dependent Variable: Satisfaction

The *b* value of this model is 0.654 which depicts a positive relationship between the Responsiveness and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model.

In summary, the data supports H<sub>3</sub>. From the results of the statistical tests it is clear that Responsiveness is related to satisfaction.

### Empathy and Satisfaction

This relationship was measured using the following hypothesis,

H<sub>4</sub>: There is a significant relationship between satisfaction and empathy

Here the independent variable (empathy) considered were the employees quickly apologized when service mistakes are made, the employee listened carefully when you complain; Employees understand the customer’s requirements.

The table 4.7: below provides the model-fit results of the ‘Enter’ simple regression test using the above independent variable and satisfaction as the dependent variable. Model 1 shows a significant ( $p < 0.05$ ) F value. The R<sup>2</sup> for this model is 0.579, which indicates that 57.9% of the variations in satisfaction are explained by the regression.

Table 4.7: Model Summary- empathy and satisfaction

Model	R	R Square	Adjusted R Square	Change Statistics			Durbin-Watson
				R Square Change	F Change	Sig. F Change	
1	.781 <sup>a</sup>	.616	.614	.616	124.894	.000	2.258

a. Predictors: (Constant), empathy  
b. Dependent Variable: satisfaction

Table 4.8: below provides statistics relating to the independent variables of the Model given in table 4.8. It shows that independent variable making a contribution to the variation in satisfaction.

Table 4.8: Coefficients – empathy and satisfaction

Model 1	Unstandardized Coefficients		Standardized Coefficients	T	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
(Constant)	14.865	3.089		-3.232	.000		
Empathy	.732	.060	.718	13.654	.000	1.000	1.000

a. Dependent Variable: Satisfaction



The *b* value of this model is 0.732 which depicts a positive relationship between empathy and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model.

In summary, the data supports H 4 from the results of the statistical tests it is clear empathy is related to satisfaction.

**Assurances and satisfaction**

This relationship was measured using the following hypothesis,  
H5: There is a significant relationship between satisfaction and Assurances

Here the independent variable (Assurances) considered were The Staff in the hotel is polite, the staff imparted confidence to the guest, and the staffs are friendly.

The table 4.9: below provides the model-fit results of the ‘Enter’ simple regression test using the above independent variable and satisfaction as the dependent variable. Model 1 shows a significant ( $p < 0.05$ ) F value. The  $R^2$  for this model is 0.516, which indicates that 51.6% of the variations in satisfaction are explained by the regression.

Table 4.9: Model Summary- Assurances and Satisfaction

Model	R	R Square	Adjusted R Square	Change Statistics			Durbin-Watson
				R Square Change	F Change	Sig. F Change	
1	.815 <sup>a</sup>	.652	.649	.652	114.894	.000	1.991

a. Predictors: (Constant), Assurances

b. Dependent Variable: satisfaction

Table 4.10: below provides statistics relating to the independent variables of the Model given in table 4.10 it shows that independent variable making a contribution to the variation in satisfaction.

Table 4.10: Coefficients – Assurances and Satisfaction

Model 1	Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.	Collinearity Statistics	
	B	Std. Error				Tolerance	VIF
(Constant)	17.321	3.089		-12.222	.000		
Assurance	.712	.054	.719	19.432	.000	1.000	1.000

a. Dependent Variable: Satisfaction



The *b* value of this model is 0.712 which depicts a positive relationship between the Assurances and satisfaction .The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model.

In summary, the data supports  $H_1$ . From the results of the statistical tests it is clear assurances is related to satisfaction.

**Revisit and satisfaction**

This relationship was measured using the following hypothesis,  
H5: There is a significant relationship between satisfaction and revisit

Here the independent variable (revisit) considered were revisit this destination for special purposes The destination makes me feel relaxed in the body and mind, The destination guide gave me a very detailed tour, The costs associated with the destination are low, The destination has special attractions revisit this destination to get away from the summer/winter climate, The destination has unique gourmet and specially products

The table 4.11: below provides the model-fit results of the ‘Enter’ simple regression test using the above independent variable and satisfaction as the dependent variable. Model 1 shows a significant ( $p < 0.05$ ) F value. The  $R^2$  for this model is 0.516, which indicates that 51.6% of the variations in satisfaction are explained by the regression.

Table 4.11: Model Summary- Revisit and Satisfaction

Model	R	R Square	Adjusted R Square	Change Statistics			Durbin-Watson
				R Square Change	F Change	Sig. F Change	
1	.715 <sup>a</sup>	.516	.649	.652	114.894	.000	1.991

a. Predictors: (Constant), revisit

b. Dependent Variable: satisfaction

Table 4.12 below provides statistics relating to the independent variables of the Model given in table 4.12 it shows that independent variable making a contribution to the variation in satisfaction.

Table 4.12: Coefficients – Revisit and satisfaction

Model 1	Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.	Collinearity Statistics	
	B	Std. Error				Tolerance	VIF
(Constant)	18.321	2.089		-16.222	.000		
Revisit	.612	.056	.619	14.432	.000	1.000	1.000

a. Dependent Variable: Satisfaction



The  $b$  value of this model is -0.612 which depicts positive relationship between the revisit and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model.

In summary, the data supports  $H_1$ . From the results of the statistical tests it is clear revisit is related to satisfaction.

## 5. Conclusion

To accomplish, the findings of the study provide valuable insights regarding the significance of wellness sector in medical tourism. Sri Lanka in particular is in an advantageous position to avail the opportunities in wellness to project the medical tourism sector. The evidence from this study suggests that majority of male travel to Sri Lanka for wellness tourism also majority of people were adult. Industrial world people should have to work more than they can then they get unhealthy situation when they become adult mainly foe male population. Many respondents were with secondary education level and monthly income between US\$ 1500-2000 also expenditure per day were between US\$100-150. Majority respondenst were taken information about the destination through internet and many respodents were visit without kids.

Respondents were visit this destination manily between 5-10 times for the medical treatmentand and they were staying between four to six weeks in the destinations. According to survey can identify majority of people visit to Sri Lanka more than one time due to the satisfaction of the services from destination. Every respondent was satisfied with the wellness tourism services in Sri Lanka. They highest satisfaction from wellness tourism in the destination. Some of the respondents are planning to visit other destinations in Sri Lanka such as Kandy, Nuwaraeliya, Gall, Anurhadapura, Katharagama, Wilpatthuwa and etc. This is grateful opportunity to achieve more tourism demand for other sectors also.

Since all the dimensions have passed the Cronbach Alpha threshold (0.75), the measurement model was tested using SPSS analysis. According to the standardized regression weights between latent variables, which are; Tangibility, Empathy, Assurance, Reliability, Responsiveness, and observed variables, which were used to measure the said three latent variables. there was significant relationship between five dimension and Satisfaction. Also, significant relationship between satisfaction and revisit.

The  $b$  value of this model is 8.865 which depicts a positive relationship between Tangibility and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model. In summary, the data supports  $H_1$ . From the results of the statistical tests it is clear that tangibility is related to increased satisfaction.

The  $b$  value of this model is -0.598 which depicts an inverse relationship between the Reliability and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model. In summary, the data supports  $H_2$ . From the results of the statistical tests it is clear that Reliability is related to satisfaction.

The  $b$  value of this model is 0.654 which depicts a positive relationship between the Responsiveness and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model. In summary, the data supports  $H_3$ . From the results of the statistical tests it is clear that Responsiveness is related to satisfaction.

The  $b$  value of this model is 0.732 which depicts a positive relationship between empathy and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model. In summary, the data supports H 4 from the results of the statistical tests it is clear empathy is related to satisfaction.



The  $b$  value of this model is 0.712 which depicts a positive relationship between the Assurances and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model. In summary, the data supports  $H_1$ . From the results of the statistical tests it is clear Assurances is related to satisfaction.

The  $b$  value of this model is 0.612 which depicts a positive relationship between the revisit and satisfaction. The significance value of the predictor ( $p < 0.05$ ) suggests that the predictor significantly contribute to the model. In summary, the data supports  $H_1$ . From the results of the statistical tests it is clear revisit is related to satisfaction.

The destination has high quality wellness services for guest and destination has well prepared professional destination guide for tourist with friendly manner. The costs of things here are relatively low competing with other destination. “many guest emphases that”, This destination is worth visiting again” which is confirmed that tourist was satisfied with destination services. Also, destination with innovative and invigorating attraction also they revisit this destination because of the advertisement or recommendations same time tourist revisit this place because they want to experience the nature of destination.

## 6. Recommendations

Local government institutions and communities should concentrate on patient satisfaction to ensure the better service in regards to the wellness tourism and to strengthen the opportunities of wellness in medical tourism. It is essential to take steps to make sure the quality of wellness services in both national and international markets. The categorization requirements for medical wellness which were applied and developed based on the experiences of spa centers in several countries found in a survey of consumer satisfaction. It is obvious that quality is the most important necessity of tourism including health tourism.

Mainly country should have to introduce new wellness product for tourist as other wellness country adopt new product fatly. At airport terminals and airline lounges around the world, travelers can now find yoga classes, spas, quiet relaxation areas, nap pods, healthier foods, VR technology, and even therapy dogs. N-flight services on many airlines now include health-conscious cuisine, wellness programming, and sleep and relaxation products. Lufthansa provides its passengers with specially-designed sleep masks. Partnerships between the airline industry and wellness industries have led to expanded health and wellness offerings. Established wellness enterprises are expanding their markets and services to travel venues. Be Relax Spa has expanded its operations and offerings to nearly two dozen airports on three continents.

Consumers are increasingly viewing vacations as an opportunity to experience wellness in new ways, and tourism-related businesses from cruise lines to tour operators and event organizers are engineering diverse new wellness travel experiences. Cruise lines have not only brought sumptuous spas and workout spaces on board, but many are now showcasing other aspects of health and wellness including healthy food, relaxation, meditation, and wellness-themed excursions. A number of cruise lines are partnering with wellness industry experts and service providers to raise the quality and sophistication of their wellness offerings, or to create wellness-themed voyages.

The local government can provide an ideal platform and infrastructure facilities, policy and planning procedures to maximize the benefit of wellness for the local communities and to ensure the satisfaction level in regards to the treatment services offered. The integration of wellness centric medical tourism promotion activities with the local economy along with



public-private–local government partnerships can push the growth of medical tourism sector in a big way.

The results can be used as valuable information of the marketing strategies. These strategies could then be implemented to develop products for the specific travelling needs of the tourists. Factors that seem to be popular motivators, such as recreational. Activities and enriching and learning experiences, should also be focused on during the marketing process.

Special emphasis is placed on quality management. Top quality is vital as a response to international competition and rivals within the wellness market in order to satisfy high guest expectations. A minimum wellness infrastructure, the corresponding services and qualified staff are a prerequisite for comprehensive wellness quality, and desirable basic requirements include a swimming pool, sauna, whirlpool or steam bath, facilities for healthy nutrition, physical fitness, relaxation and mental activity as well as the presence of at least one wellness professional to provide individual care and advice.

Hotel owners can refer to the stranded model for business excellence for controlling quality-relevant processes. A long checklist with suggestions for wellness management, based on the nine model criteria, was specially adapted to wellness requirements. Having done the “homework” of implementing quality management instruments in the hotels, the hotel industry should then emphasize on reforming the existing marketing cooperation. A professional office should succeed in getting high quality standards held and only admit those hotels to the cooperation which meets the standards.

As well as following recommendation can implements, create a standard interpretation of wellness vacations in country, distinguish wellness vacations from cure stays and illness, See quality management as a key component in wellness tourism, Intensify training and further training at all levels, Establish themselves as a serious cooperation partner/interlocutor for health policy-makers, Make the most of tourism cooperation potential, Aim for cooperation between tourism and health policy-makers, Set up creative and experience-exchange groups, Consider and evaluate wellness vacations as a tool for promoting health, Make no financial claims on compulsory health insurance but seek support for the wellness idea from health insurance

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