



The good life

Health tourism and the British spas

Paul Simons is chairman of the British Spas Federation and vice-president of the European Spas Association. He is also marketing and fundraising director of the Bath Spa Project, a state-of-the-art Lottery-funded development mixing old and new elements, which is due to open in 2003. Here, he charts the original emergence and subsequent decline of Britain's spas, reports on their recent revival, and suggests that health tourism is a niche we will be hearing much more about over the coming years.

In February 2002, the English Tourism Council launched *Health Benefits*, a report setting out the findings of its research into the potential of the UK's health tourism market. Welcoming the report, Alan Britten, Chairman of the ETC, said:

'We are all working harder, living longer and as our basic needs are satisfied, creating more disposable income to spend on our own pleasure and leisure ... we recognise that good health is an ingredient of the good life.'

Health tourism is a huge market. UK residents take around 13.8 million spa trips per year and the market is estimated to be growing by 7.4 per cent annually. It has attractive ingredients for UK tourism, possibly the main one of which is that it is not weather-dependent. The individuals taking these holidays are

typically amongst the higher spenders. Health tourism plays to the short break, which is where this country can score most heavily against the longer foreign holiday. ETC research suggests that, properly promoted, this niche market could support 200 new health facilities in England, generating an estimated £650 million for our economy and 20,000 new jobs.'

It was rewarding that the ETC, who had been persuaded by the British Spas Federation to choose the health market as one of its key sectors for in-depth research, launched the initiative in Bath. This ancient city of Aquae Sulis has been the one UK destination chosen by the Millennium Commission to receive National Lottery funds not only to rebuild its spa but also to act as the catalyst and exemplar for the revival of the whole British spa industry.

The rise and fall of traditional spas

But why did British spas need reviving in the first place? What had happened to bring a once thriving national pastime to the point of extinction, whilst spas continued to thrive and develop in continental Europe? Let us take Bath as an example.

Bath is renowned for having the only hot thermal springs in the UK, and has a strong reputation as a centre for healing. In the first century AD, the Romans discovered a thriving Celtic-British settlement and a religious centre based around Bath's sacred springs. By medieval times, monks controlled the springs, and the springs were known for their medical functions and as a sacred shrine for pilgrims. By the sixteenth century, the baths were under the control of merchants, and private guesthouses were being built to cater for those seeking leisure as well as religious enlightenment.

Between 1730 and 1790, three men - the patron, the architect and the Master of Ceremonies - took control of Bath and rebuilt the entire city. In doing so, they created the largest and most unified eighteenth-century urban landscape in Europe, and what is recognised today as a World Heritage City by UNESCO, visited by over 3.6 million tourists each year. In his introduction to Granville's *Spas of England*, first published in 1841, Dr Geoffrey Martin offers the following account of the Bath triumverate.

'The strong but disciplined originality of their work was a perfect setting for the transformed society of the spa, matching it with an unsurpassed display of architectural elegance. The whole device was the urban equivalent of the great country house and its park, laid out to flatter transient but demanding residents. It had little enough to do with medical draughts and therapeutic bathing, but much to do with assimilating wealth and other disruptive forces in society, and with establishing canons of taste.'

The wars with France at the end of the eighteenth century inhibited foreign travel and saw new inland spas developed at Cheltenham and Leamington and a growth of seaside resorts boosted by King George III's popularisation of Brighton and Weymouth. The years 1800 to 1850 saw unprecedented growth in the inland spas, with over 50 new destinations developed and over 200 listed. This was immediately rivalled by the growth of seaside resorts. Between 1851 and 1914, by contrast, only eight new spas were opened.

The railway age created new access to the spas and the seaside, and with it came the traveller's handbook, in which commentary on the spas was not restricted to a medical treatise on the benefits of mineral waters but also included opinions on travel, topography and social issues. According to Dr Martin's commentary, 'the older spas may seem anachronisms in the twentieth-century world (but they form) a landmark in the development of that vital and deeply interesting institution, the holiday'.

After the First World War, Britain's spas lacked investment and Edwardian England stimulated the fashion for continental travel. By 1919, there were only 35 hydropathic centres in Britain and by 1948 only five, Bath, Buxton, Droitwich, Leamington and Woodhall, all of which were transferred to the National Health Service. In Bath's case, the Royal Mineral Water Hospital ceased to use the thermal springs in 1976, ending a 250-year period of operation, during which it had become known as the 'Hospital of the Nation'.

Hydrotherapy in natural mineral water did survive in the UK until 2000, when Buxton, the last working spa, was closed by the Area

Health Authority, thus consigning 2000 years of spa tradition to history. The one surviving natural mineral water facility is the Brine Bath in the BMI Private Hospital in Droitwich, which is still open to the public in the afternoons and at weekends. Whilst the spa has been central to health care in the UK for many centuries, a model for the National Health Service, a socio-economic driver in many communities, the origin of the 'holiday' concept, and the natural cross-over point for the health and leisure markets, the traditional spa destination had ceased to be a viable entity. Most facilities, housed in buildings often over a century old, were in a poor state and declined into oblivion between the 1950s and 1970s.

The British Spas Federation

The origins of the British Spas Federation stem from the First World War, when the number and type of visitors to the country's spas and resorts were severely restricted. Many were also requisitioned for the war wounded, catering for up to 75,000 casualties. The Federation, originally led by Fortescue Fox M.D. of Strathpeffer and F.J.C. Broome of Harrogate, was founded in 1916 to publish a guide to the Home Spas and to promote the merits of spa treatments. To counter criticism of spa treatments, a Committee for the Study of Medical Hydrology was established, and to this day the BSF maintains a Medical Advisory Committee.

After the Second World War, further challenges faced the Federation when the government decided not to recognise spa treatments as a statutory benefit. However, eight spas continued to provide around 300,000 treatments per annum under the NHS in the early 1960s, although the number was in decline and the surviving spa destinations, lacking investment and innovation, were planning to close down surviving facilities.

To reverse the decline, the British spas, usually located in good environments, which benefited from hotels, parks and gardens, galleries, theatres and music festivals, reinvented themselves as 'heritage destinations' during the 1970s and '80s, and the Federation concentrated on destination marketing. In 1990, the British Tourist Authority, recognising the potential of the spas to attract overseas visitors, published *Spas 2000*, a strategy that sought to bring about a new revival. Finally, in the first year of the National Lottery, a major grant was offered to the Bath Spa Project by the Millennium Commission.

The BSF still has 11 spa town members but has now opened its doors to the commercial sector as represented by the British Health Farm Federation, day and destination spas, clinics, colleges and therapists in the complementary sector. The BSF represents the UK on the European Spas Association and the European Parliament Advisory Committee on spas. It represents the health tourism sector on the ETC's Tourism Forum and sits on the Parliamentary Group for Complementary and Alternative Medicine. It is recognised as the leading industry body for the spa sector by DCMS and ISPA Europe, and is now driving the debate on industry standards for this rapidly growing sector.

Inward investment

It is most encouraging that the Bath Spa Project has created a tremendous impetus for further new spa development, even before it has opened. A number of the other spa towns are now looking to develop new facilities and attract inward investment.

Model of health tourism

Motivation



Source: Adapted from Spivak S, June 1999 *Journal of Vacation Marketing*, Vol 4 No 1 1998, pp 65-77 'Health spa development in the US: a burgeoning component of sport tourism'.

European health and fitness clubs

Germany	6,000
Italy	6,000
France	2,500
UK	2,500
Spain	2,500
Netherlands	1,500
Belgium	630

Source: Vdf/IHRSA/Mintel

- Buxton - has a major development opportunity for a new hotel, spa, visitor centre and Tourist Information Centre (TIC) in The Crescent, including a supply of the natural, thermal, mineral water. This will complement the work of the University of Derby, which has purchased the Royal Devonshire Hospital, and which will include a spa and hydrotherapy training school.
- Cheltenham Spa - spa conversion of historic city centre chapel and new health and fitness club in central shopping development.
- Droitwich Spa - proposals for a new brine spa, health and treatment centre in historic central park.
- Harrogate - an expansion of the Turkish Baths plus new treatment rooms and the redevelopment of The Royal Baths and TIC. Harrogate mineral water has recently been relaunched as a table water.
- Leamington Spa - Healthy Living Centre initiative, including promotion of local complementary therapists.
- Llandrindod Wells - opportunities to develop hydro-pool and treatment rooms at the Rock Park Spa Centre and associated hotel sites.
- Malvern - funding to restore the site of the natural springs and a commercial health and fitness spa proposal.
- Strathpeffer - re-opening of historic pump room with drinking facilities and museum plus scheme to reopen The Pavilion.

Associated with this activity, most spa towns are receiving significant resources, primarily from the Lottery funds, to renovate historic parks and gardens, repair historic buildings and townscapes, restore theatres, galleries and museums and build new ones. Healthy living initiatives are also ensuring that local communities are to benefit from the new-found emphasis on preventative health care.

A healthier outlook

By contrast, our continental counterparts have maintained a thriving spa economy within their health provision, and whilst recognising the inability of national health finances to sustain existing levels of spa 'cures', the industry in Europe has been able to manage a transition of some facilities into private and leisure-based operations. This has not always been easy and not all European countries are following the same route or timetable. Some are trying to keep a strong medical grip on the mechanism that triggers provision whilst others are developing two and three tier systems.

The one single advantage they have over the British markets is that their customers and communities have never lost their spa understanding, their 'spa culture'. Client perception of the value and therefore desire for the product exists, a market perception that needs to be recreated in the UK if we are to meet the targets of the English Tourism Council and fulfil the sector's potential.

However, within society, attitudes towards health have been changing. Health has moved away from being primarily based around avoidance and treatment of disease. Positive prevention is far better than awaiting the need for major intervention and we now hear of the complementary sector being integrated back into the NHS. So health issues are now seen in an entirely different context, one that is based around the ability to enjoy and control one's life:

- preventing illness;
- trying to reduce stress;
- controlling diet;
- widening interests;
- fulfilling potential;
- living more holistically and energetically;
- staying active for longer.

Health opportunities

UK resident interest (m)

	Actual	Potential	Growth
All tourism		41m	
Total health	18.9m	12m	11%
Total sports	17.7m	18.6m	5%
Health and fitness	1.2m	5m	316%

England domestic market (1999)

Trips (m)	Nights (m)	Spend (£m)
123	396.4	12,913
38.1	158.1	6,392
31.1	137.1	5,002
7	21	1,390

1990-1999 growth

Trips	Night	Spend
59%	27%	21%
NA	NA	NA
63%	86%	50%
NA	NA	NA

Source: ETC Demand Model 2000/UKTS1999

Over the last decade, the UK market has gone through a significant 'mind shift' in how it sees the balance between work and leisure, business and family, health and wellbeing. Never before has there been such pressure to enjoy one's free time, and so many different possible ways in which to spend it. We have seen the birth of 'lifestyle culture' and, in particular, a greater interest in - and understanding of - health issues across the general population (see figure opposite, top left).

The growth of health food, gyms and the investment in leisure facilities are all indicators that the consumer is looking for something more than relaxation during a break. Add to this the cost of our busy lives in terms of stress, and it is no surprise that there is an increasing desire on the part of the customer to spend time pampering and indulging themselves as an antidote to their hectic lives. In satisfying this demand, the latest data shows that there are already over 13,000 residential and 7,000 non-residential spa and sports facilities in the UK.

As has been shown, the health tourism market in the UK is not as mature as that in continental Europe, but has more in common with North America. This brings opportunities to the British market but also some issues of definition and the perception of what is on offer in a typical UK spa. For this reason, the ETC decided to adopt the following North American definition:

'Health tourism encompasses those products and services that are designed to promote and enable their customers to improve and maintain their health through a combination of leisure, recreation and educational activities in a location removed from the distractions of work and home.'

A healthy break may be seen as an opportunity to re-energise, a sporting activity, an indulgent relaxation, or simply a way to escape or explore alternative ways to achieve a sense of wellbeing.

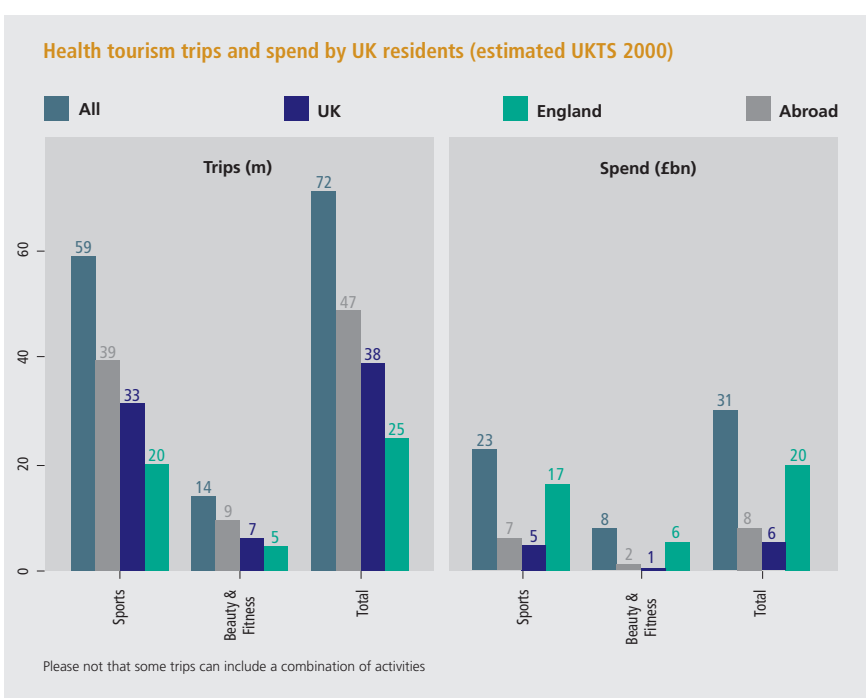
Although spa tourism in England - worth around £1.4 billion - is smaller than the sports sector, it is still at a relatively early stage of development. Each year, a total of 1.2 million UK customers, or 2.6

per cent of the adult population, take a spa break, accounting for 7 million trips and over 21 million nights. However, this sector has the potential to grow much further, to as much as double its current size, over the next few years.

- Three quarters of spa tourism spend goes abroad.
- Industry estimates put the UK's spa growth at 7 per cent p.a.
- Spas represent 22 per cent of health tourism spend but only 18 per cent of trips.
- Customers spend 66 per cent more per spa trip than average, and it is with these high spenders that the opportunity lies.
- The spa sector is broadening its appeal to be more mass market, and losing its exclusive image.
- 40 per cent of UK residents are likely to choose England as their destination choice, which could increase given greater product awareness.

The publication of *Health Benefits* has clearly outlined the size of the health market in England and its potential for growth. It defines the different motivations of those taking a health or fitness break, together with the types of products and facilities health tourists are looking for. It also draws comparisons between health, spa and fitness facilities in this country and those in continental Europe and the US. There is huge potential and the conclusions of this valuable work point to the opportunities that now present themselves to the accommodation providers, resorts and spa towns, local authorities and the RDAs and RTBs. The British Spa has found a new lease of life at the beginning of the twenty-first century and all indications are that it will be in demand for many decades to come.

The front image shows the open-air, rooftop thermal pool of the Bath Spa Project, designed by Sir Nicholas Grimshaw & Partners. All figures from *Health Benefits* are reprinted with the kind permission of the English Tourism Council



For further information on the British Spas Federation, membership and services, please contact British Spas Federation, Abbey Chambers, Abbey Churchyard, Bath, BA1 1LY (tel. 01225 722 291, e-mail: admin@britishspas.co.uk, website: www.britishspas.co.uk).

The author is grateful to the ETC for permission to refer extensively to its published work on health tourism throughout this article.

Copies of *Health Benefits* can be obtained from: ETC Fulfillment Centre, PO Box 22489, London W6 9FR (tel. 0870 606 7204), or via www.english tourism.org.uk. Please quote reference ETC 8294.

