

CHANGES OF TOURISTS' MOTIVATIONS AND PREFERENCES TOWARDS HEALTH TOURISM SERVICES. CASE STUDY: THE POTENTIAL TOURISM CLUSTER MOINEȘTI-TÂRGU OCNA-SLĂNIC MOLDOVA

George Găman¹

Babeș-Bolyai University, Cluj-Napoca, România

Abstract

In the context in which society is evolving at a high speed and lifestyle is becoming increasingly stressful, the tourist, respectively patient-tourist motivations and preferences meet changes also. In these conditions, health resorts are forced to fold on the actual situation and to adjust their tourist offer for meeting the customer's needs and for keeping, at least, the number of tourist arrivals. The actual paper tried to ensure if the motivations and preferences of Romanian modern patient-tourist correspond with the conclusions of global trend described in specialized literature, through survey amongst residents of Moinești municipality, Târgu Ocna and Slănic Moldova health resorts. According to the specialized literature, the modern tourist is well informed, he has a higher level of knowledge, he is looking for an active and sprinkled stay with unique and complex activities. The results highlighted several similarities and differences between specialized literature and the present study, showing that Romania's situation does not entirely correspond with the global trend.

Key words: tourist motivations, tourist preferences, health tourism, health resorts, Moinești, Târgu Ocna, Slănic Moldova

JEL Classification: Z39, Z32

Introduction

As generations succeed, human mentality is subject to low or radical changes determined by socio-economic, cultural and political factors.

As a result of this process of complex changes, the industrial society has been largely replaced by a network structure made up of components and subcomponents linked together through cooperation and interdependence relations. Even in tourism domain can be observed the manufacturer network's creation and the developing (the collaboration between public and private partners such airlines, tour-operators, hospitality groups, technical specialists that hold an important role in media-marketing campaign development) and customers (especially through social networks). Likewise, can be noticed the growing importance of events organization that have the capacity to mark places and times, as changing the structure of the value chain of tourism phenomenon. If the traditional chain represented a pyramid on top of which were the coordinators of tourist activity, tourism authorities and tour-operators, followed by tourism agencies, transport companies, accommodation and catering units, the new chain would unfold in a reticular way where the subordination relations are replaced by processes of interrelations (Richards 2011).

All the social changes (the old population will be the most numerous in west of Europe in 2020, the number of individual travelers is increasing, the number of planned trips is decreasing, the families with no children will be more numerous, the health care is increasing, the leisure for travelers from Western Europe is decreasing), technological (the degree and quality of information's transmission is increasing, the transport is faster and cheaper, the attention is centered on mapping services, unusual destinations appear like under water resorts), economic (the tourists are expecting more for less money, the demands for cheap and expensive offers are increasing, the vulnerability of financial markets is increasing also), ecological (the untouched destinations are increasingly rare and valuable, once with the climate change, new tourist areas are opening, the oil reserves are decreasing encouraging slow tourism, the traffic jams are growing) and political ones (political uncertainty is growing, the number of acts of terrorism is growing, the conflicts between cultures are increasing) that influence tourism phenomenon, also reflect on modern tourist's motivations and preferences (Gottlieb Duttweiler Institute 2006).

¹ gaman.george07@gmail.com

As argued in the literature, the modern tourist is different than the traditional one, therefore the offer of the health resorts have to comply with the tourist's requirements given that a vacation destination, as an experience product, is characterized by intangibility at the time of both purchase evaluation and consumption (Cai, Feng, Breiter & Deborah 2003).

Thus, the paper is aiming to find out if the motivations and preferences of Romanian modern patient-tourist are similar with those identified by previous research at international level, through a survey amongst residents of the potential health tourism cluster of Moinești, Târgu Ocna and Slănic Moldova. These settlements were taken into account due to geographic proximity and health tourism specialization.

Due to the fact that health tourism benefits by a large request (not only tourists, but visitors and residents) and, on the other side, Moinești municipality registers a tiny number of tourist arrivals, and Târgu Ocna, Slănic Moldova receives more visitors, a questionnaire was applied to its residents to reveal if they are familiar with health tourism concept, to outline their motivation for choosing a particular resort and their preferences regarding accommodation, catering, recreational and treatment services.

1. Literature review

A similar questionnaire which refers to tourist motivations represented by a five point scale from 1- totally disagree to 5- totally agree, owned several possible answers: learn about culture, learn urban design, learn about art, learn about music, have fun, relax, learn about cultural difference, escape from work pressure, experience unexpected, do what others have not done, have an adventure, having stories to share with my friends. Push motivations are related only with the emotional and internal desires such as self-actualization, rest, leisure or social interaction, and pull motivations are related with external and cognitive factors like landscape, climate, hospitality or facilities (Yoon & Uysal 2005).

The fact is that most of studies state that culture is one of the most important factors in tourism motivations (Funk & Bruun 2007). In addition to motivations, the decision to choose a destination depends on factors of consumption of tourism consumers: income, time, political rights, health, information and education, safety and security, family, work, location, gender, culture (Cooper, Hall & Michael 2008).

An interesting paper shows a study upon patient-tourist behaviour, where was realized a micro (focuses on socio-cultural and psychological factors that summarize the individual choices in bigger interest groups) and macro (derived from economics and demographics, aiming to identify the determinants and patterns of demand) analysis (Radu & Orzan 2013). The modern tourist is different by the fact that he desires to accumulate more information, to improvise the culture level, to visit more attractions in a shorter period of time and to meet more people with different mentalities, cultures and lifestyles (Bowen & Clarke 2009).

Likewise, the modern tourist is attracted by spectacular aspects, new and unforgettable experiences, unique, original phenomena. He desires an active and diversified stay throughout he can practice more tourism forms. In the same time, he pays more attention to it's security and health care, searching especially comfort and relaxation (Pirnar, Icoz & Icoz 2010).

Table 1: The transition from old tourist needs to new tourist needs

Old needs	New needs
I want to escape (environment change)	I want to discover new places and people
I want to go as far as I can	I want to go anywhere to learn
I want to have time of holyday	The holyday is life, the life is holyday
I want to relax	I want to live new experiences
I want to have fun	I want to dispose by emotions, extreme sensations and mental stimulations

Source: Ban (2005)

The modern tourist's characteristics are: adaptability, heterogeneity, spontaneity, unpredictability, independency, individuality. He doesn't travel only for experience gaining, but also for its sharing and transmission to other potential tourists (Like a Local, 2015). Besides the fact that modern tourists are more experienced regarding stay's self-planning, that a lot of destination's types exist, that they dispose by a higher quantity of information, they are the adepts of an active stay that is formed by numerous cultural, sport and festive activities (Decrop 2010). Regarding the type of tourism on which the actual study is relying, the patient-tourist prefers, in addition to therapeutic sessions, taking part in different activities for unifying an active day stay, because the modern

tourist uses to be an adventurous spirit and he prefers to live inedited experiences and to engage in various planned activities (Vellas & Becherel 1995).

In concordance with the old and new tourist needs, the concepts of "hard tourism" and "soft tourism" (future tourism) have appeared. Thereby, the group travel is replaced by the individual one, the focus process on the number of trips and "seen" attractions is covered by quality, impressions and new experiences, the confort is not necessary anymore, the distance between the staff and the customer doesn't exist anymore, the shopping desire is interchanged by gifts aquisition, the convenience and passivity is replaced by effort and activity (Ostrowski 1983).

All these preferences are based on different motivations that are specific to the new tourist generation: phisical (eco-food consumption, sport, treatment, confort, protection), interpersonal (the need for socialization), intelectual (the participation at different artistic, cultural events), prestige (the need of exterior appreciation), and spiritual ones (freedom, relaxation) (Mortimer & Mathews 1997). The new preferences and motivations of patient-tourist does not present essential differences from the general ones. Mainly, they aim to health recovery, but they choose health resorts not only for treatment, but also for recreation possibilities (Foisner, 2007).

Moreover, the patient-tourist wants to dispose by diversified activities, taking into account that the health stay presents the highest average of nights stay: different events participation, knowledge expansion possibilities, implication, visits. Having a poor health condition, the patient-tourist expects quality treatment and catering services. He desires to have at his disposal specialist personnel who will not only to imply in treatment design, but also on it's implementation (Pritikin 2014). The patient-tourist desires to dispose by "experiences, feelings, but not to be only an object of a tourist tour, a source of receipts" (Rotariu 2008, p. 14).

2. Methodology

In order to perform this study the survey method was used and it was based on questionnaire that aimed to highlight the familiarity level potential patient tourists regarding the concept of health tourism, their preferences and motivations, the level of confidence upon natural therapeutic factors, but also their expectations regarding the tourist offer that is provided by a health resort.

This survey covered 393 respondents, of which 189 are from Moinești, 102 are from Târgu Ocna and 102 belong to Slănic Moldova. Because certain preferences of respondents largely depended on their age, three age groups were established. The first one contained those interviewees aged up to 25 years (age from which they enter in the labor market, especially after university studies), the second one included those respondents aged between 26 and 64 (the period in which normally, a person can be found in labor market, 64 years representing the retirement age for men), and the third group covered the surveyed persons aged equal or greater than 65. The youngest questioned person was 17 years old, and the oldest one was 77 years old, both of them being from Moinești city.

In what concerns Moinești's situation, the survey covered 45 people aged between 15 and 25 years, 124 people from the second age group and 14 respondents who belonged to the third group. Regarding Târgu Ocna's situation, the results enumerated 15 surveyed persons aged between 17-25 years, 79 interviewees who belonged to the second age group and 7 people who belonged to the third one. The conducted survey in Slănic Moldova included 2 people aged up to 25 years old, 87 respondents who belonged to the second age group and 12 interviewees aged between 65 and 69 years.

Regarding the questionnaire's structure, the first question aimed to introduce the interviewed into the subject through highlighting his knowledge regarding health tourism. The second one proposed to dignify the degree of familiarity with this concept, holding health tourism characteristics as answer options. All of these must be chosen because all are correct.

The third interrogation propounded to verify, inside of studied area, the credibility of global trend with respect to trust loss of medicamentary treatment, according to World Health Organization. Moreover, it can be clarified if respondents choose to carry out a treatment in a health resort based on natural or anthropic factors. Here, there can also be highlighted the non-curative stays in a health resort.

The next question aimed to reveal the diversity level of natural therapeutic factors that patient-tourist, with or without the guidance of a specialist doctor, opted to treat the health problem. The following question targeted the identification of that element that underlies the choice of a health destination, but also the level of trust in medical recommendation. The sixth one proposed to highlight the purpose for which the interviewed person would choose or chose to have a stay in a health resort, whereas the actual trend provides stays especially for rest and recreation. The next question aimed to underline the interviewed preferences regarding tourist services from health resorts, except treatment ones. According to global trend, the patient tourist offers less confort attention,

but he is increasingly more concerned on catering services and additional activities which help him to achieve an active stay.

The eighth interrogation sought the justification for the choice of particular accommodation services. Thereby, it is verified if the comfort or the unit's position in territory towards tourist attractions represents a large interest for respondents. The ninth question centers its attention on catering services, checking, in case there is no limitation from the doctor, if local interviewee's preferences coincide with modern patient-tourist's ones, namely the interest in growing consumption of healthy food. The next interrogation aims to underline the diversity level and the type of additional activities that patient tourist could take part, and the successor one intends to highlight the stay's activity planning in a health resort, given that the specialized literature claims that the modern tourist doesn't plan his activities in advance.

3. Results and discussions

The answers from all three settlements' residents hold many common aspects, their preferences regarding health tourism being almost the same and, in the same time, different from the international literature's specifications.

3.1 The survey's results

As a first result from the questionnaires interpretation, it can be concluded that most of Moinești, Târgu Ocna and Slănic Moldova 's respondents are familiar with health tourism concept, more than three-quarter of each settlement's interviewed person offering an affirmative answer.

But the truthfulness of provided answers is highlighted at the second question, where a very small number of questioned residents chose the correct answer options that characterizes the health tourism. Therefore, the Moinești, Târgu Ocna and Slănic Moldova's residents do not have enough knowledge about health tourism, although they practiced it once or more times. Likewise, the superficiality in giving answers or the lack of honesty could be invocated.

As regards the third question (Figure 1), most of answers coincided with medicamentary treatment in an overwhelming manner, this aspect revealing the lack of interlocking with diminishing confidence in medicines global trend. The natural cure factors are not apprehended yet as certain key for cure diseases and this aspect is not going to change in a near future due to answers' proportion. Even from this phase the assumption which states that Romanian health resorts are not chosen for natural factors treatments is outlined.

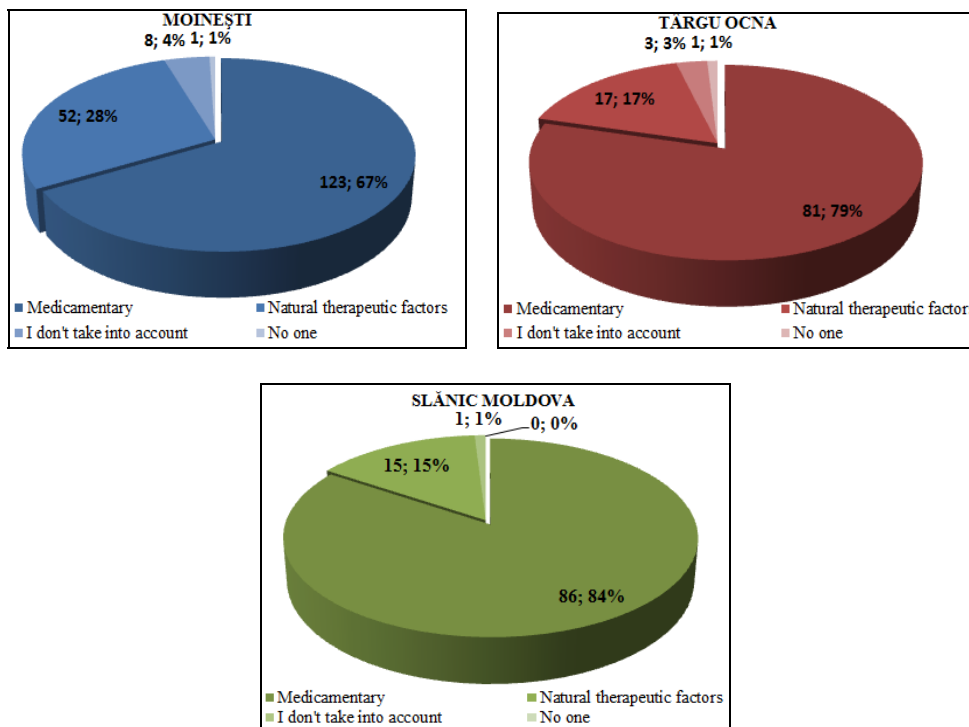


Figure 1: The level of confidence on the effectiveness of natural healing factors

Source: by author

Regarding the next question, the majority of respondents chose mineral water spring, followed by saline microclimate, as natural cure factors. These answers are justified by the fact that therapeutic water represents the most prevalent natural cure element in Romania, and by the existence of Târgu Ocna's saline. For example, climatotherapy is less used due to lack of services at national level, but also due to lack of confidence in the effectiveness of treatment. As for choke damp, there were utilized especially by Slănic Moldova's residents because this is the only resort that has this kind of therapeutic factor.

The fifth question (Figure 2) highlighted a negative aspect of Romanian health tourism. Many of patient tourists that had a stay in a health resort chose kin's recommendation in the first line, then the doctor's one. In a normal way, the confidence between a patient-tourist and a doctor should be absolute, because the diseases, the processes of treatments' applications and the therapeutic indications of natural cure factors and diversified and most of them are not known by tourists.

Noteworthy is that travel agencies are less reliable than unauthorized people concerning health tourism destinations. Certainly, the second explanation highlights the non-curative aim for which health resorts are chosen.

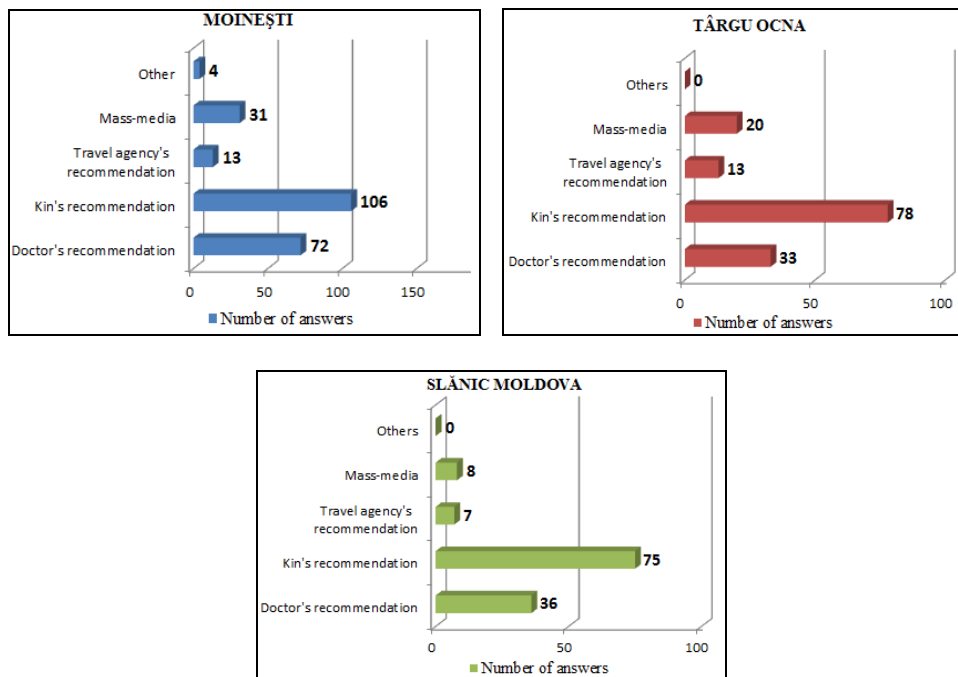


Figure 2: The influences on choosing a curative stay
 Source: by author

The next six questions highlight certain preferences of respondents which largely depended on their age. The discussed aspect of the previous question is clarified in the next one (Fig. no. 3), where most of interviewed people affirmed that they chose a stay in a health resort especially for rest, and not for treatment, due to lack of confidence on natural cure factors. As a result, they don't use to appeal to a doctor. Losing the main goal, offering treatments based on natural factors, the health resorts attracted tourists only for rest, relaxation, calmness atmosphere because there are visited especially by elder tourists. The few in number answers referring to recreation and new experiences strengthen the conviction that Romanian health resorts do not offer attractive and diversified services.

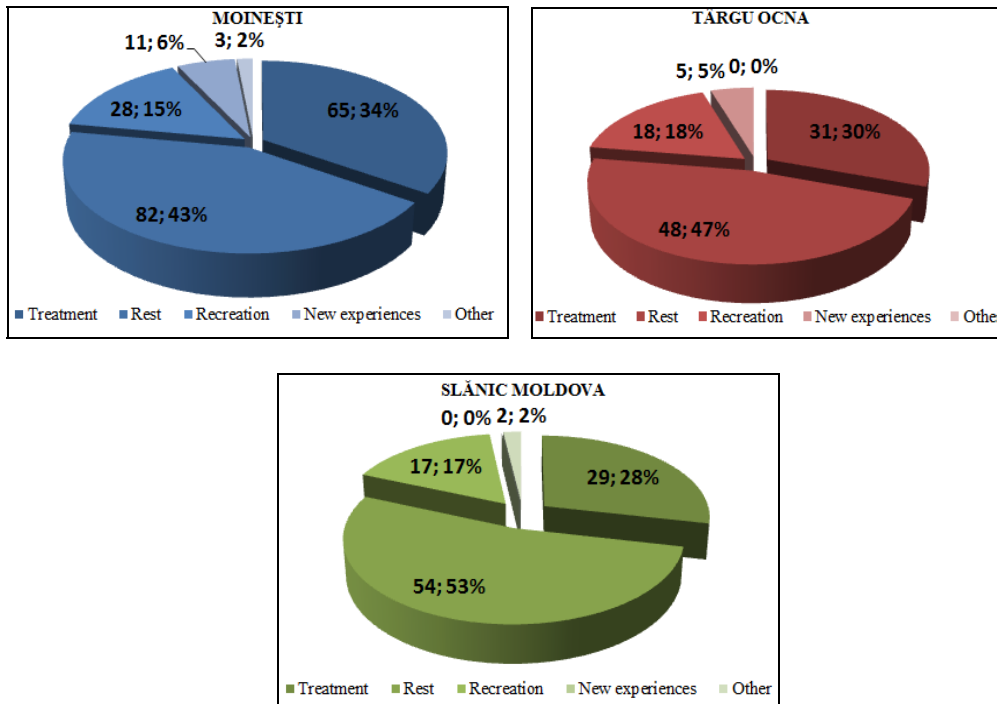


Figure 3: The purpose of choosing a stay in a health resort
Source: by author

Regarding the offered responses by age groups, the surveyed people from Moinești who are aged up to 25 years visit/would visit a health resort especially for treatment (42%) and for rest (36%). Conversely, the young respondents of Târgu Ocna prefer/would prefer a health resort mainly for rest (65%), the treatment and recreation goals being the least preferred (14%). The young interviewees of Slănic Moldova prefer the rest and recreation in equal measure.

Most of respondents who belong to the second age group chose to spend a holiday in a health resort for rest (Moinești - 48%, Târgu Ocna - 46%, Slănic Moldova - 49%), in descending order following treatment, then recreation.

The offered answers by elderly people are almost the same in Moinești and Slănic Moldova's case, where a share of 85%, respectively 75% prefer resting. Though, the surveyed people from Târgu Ocna choose/would choose a health resort especially for treatment (43%), followed by rest (29%).

The answers of seventh question (Figure 4) didn't prove to be surprising. If, overall, the patient-tourists aimed for rest, they would pay attention especially to accommodation services, because the comfort assurance is needed, aspect that does not correspond with global trend, according to specialized literature. However, in all three cases, from this point of view, the accommodation services are followed at a short distance by additional ones. The catering services are not situated at the top of respondents' preferences, aspect that do not correspond with global trend. Moreover it solidifies the argument stating that Romanian health resorts lost their meaning of existence.

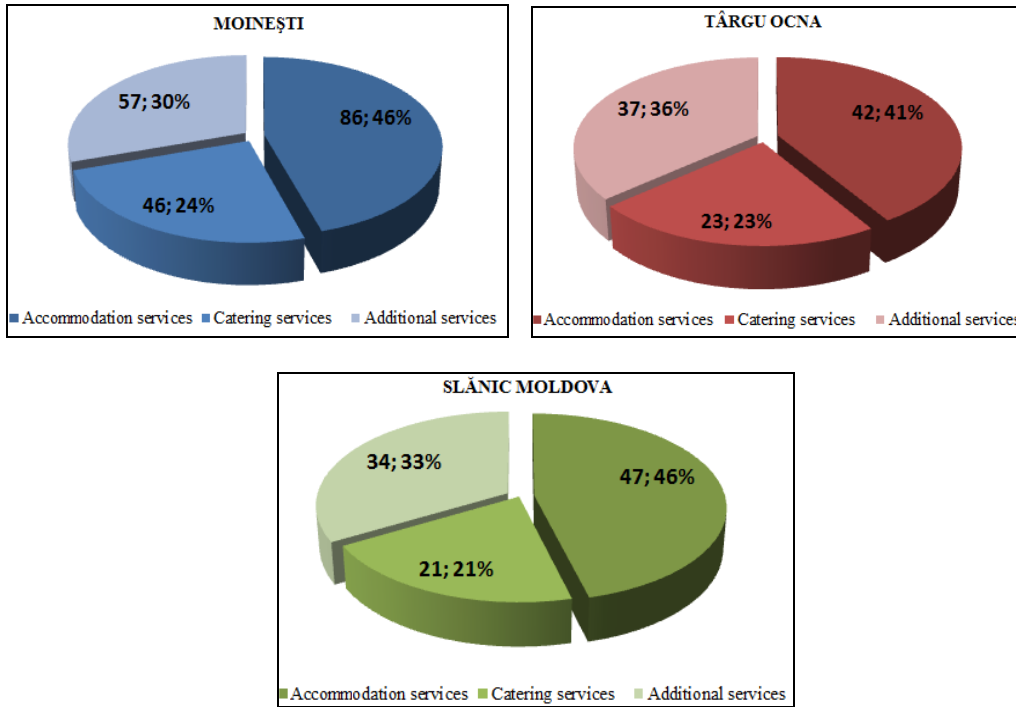


Figure 4: The favorite tourist services except treatment ones
Source: by author

Analyzing the responses given by age groups, during a health stay, beside treatment services, the young respondents from all settlements taken into study prefer/would prefer giving attention to additional activities, and at least, to accommodation ones. For those respondents who are situated in the average age group, the main importance is given to accommodation services (Moinești- 48%, Târgu Ocna- 46%, Slănic Moldova- 44%), in order of preferences, these being followed by additional services. In all three cases, the catering ones come last.

The accommodation services are the most important also for elderly surveyed people from Moinești (71%) and Slănic Moldova (67%), but the respondents from Târgu Ocna the additional activities prevail (57%), being followed by catering ones (29%). The answers registered on next question (Figure 5) merely reinforce the assumption that respondents prefer the comfort and the offered accommodation services. The price and the position towards main tourist attraction matter too little, the emerged results moving away from the idea of an active stay in all cases.

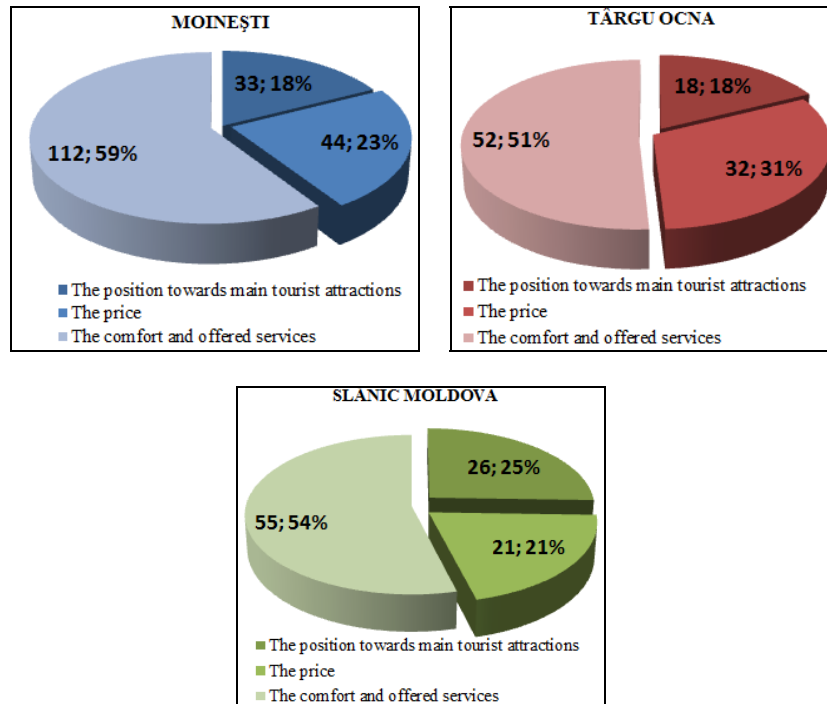


Figure 5: The factors that influence the selection of accommodation establishments

Source: by author

The situation of chosen responses by group age shows that the young interviewees from Moinești chose the accommodation services relying on comfort level (58%). The young respondents from Târgu Ocna prefer/would prefer those accommodation units where prices are acceptable (47%), meanwhile the surveyed people from Slănic Moldova chose these services if the level of comfort and prices are equally satisfying.

The respondents who belong to the average group age prefer/would prefer the comfort in order to select an accommodation unit in all cases (Moinești- 61%, Târgu Ocna- 56%, Slănic Moldova- 54%). The elderly surveyed people from Moinești and Slănic Moldova select/would select the level comfort (57%, respectively 58%), but those from Târgu Ocna give/would give a special attention to the prices of accommodation units (57%). The afferent answers of ninth question reflected that most of questioned residents prefer to consume the daily food menu during a stay in a health resort. The fact is that almost all respondents that had a stay in a health resort for treatment performing preferred the health food.

Thus, only those patient-tourists who spend a stay with curative tinge pay more attention to health food, because the treatment based on natural factors is closely related to nutrition. Conclusive is the fact that the reality given by answers did not flaunt to global trend, according to which patient-tourists are very careful with food consumption.

The situation of chosen responses by group age regarding nutritional consumption shows that the young interviewees from Moinești and Târgu Ocna prefer to have a usual menu through a health stay, meanwhile the young people from Slănic Moldova prefer both organic and resort's specific nutritional consumption.

The middle aged interviewees give attention to the daily menu in all three cases (Moinești- 52%, Târgu Ocna- 61%, Slănic Moldova- 49%), the organic one being a secondary choose. The elderly respondents also prefer the usual menu in Moinești and Târgu Ocna's case (71%, respectively 57%). In the meantime, those from Slănic Moldova prefer the organic one (50%). On the subject of unwound activities, except treatment ones, Moinești's respondents clarified that in a health stay, they prefer to rest, followed by walking and hiking as a way of leisure. The respondents of Târgu Ocna prefer the rest as well, followed by sport activities and visits to new places. Meanwhile, the Slănic Moldova interviewees opted for rest, hiking and sport activities.

In all cases, the respondents preferred the rest (non-active stay), followed by movement activities (walking and hiking /sport activities). Conversely, the scientific, creative and entertainment ones are not in respondents'

preferences, proving that Romanian health resorts suffer from lack of tourist supply diversity. Moreover, the preferences regarding certain recreational activities do not presuppose the existence of a well planned tourist base material (Figure 6).

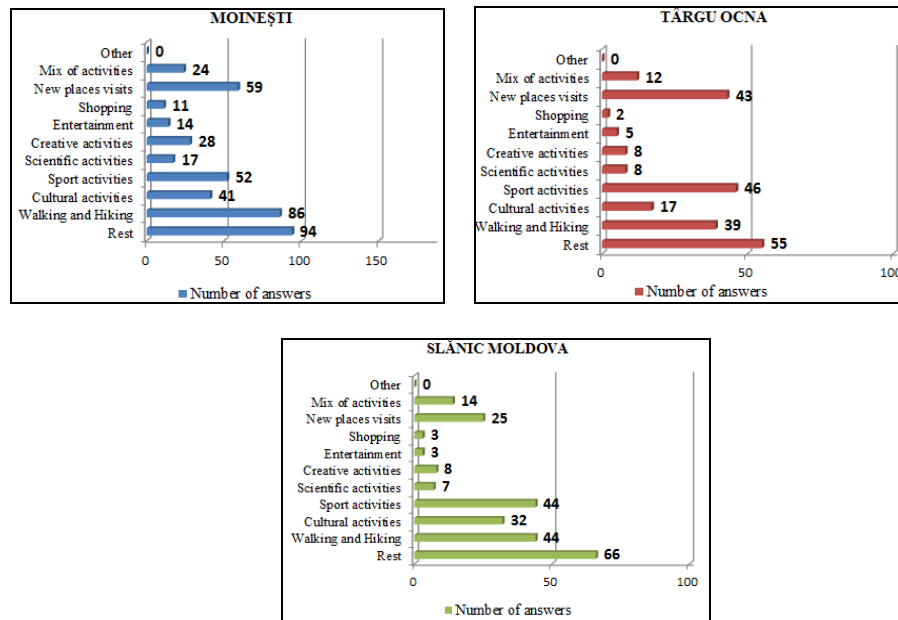


Figure 6: Additional activities required in a curative stay

Source: by author

According to the responses given by age groups, the young surveyed people from Moinești (71%) and Târgu Ocna (53%) prefer sport activities, but those from Slănic Moldova pay attention to both sport activities and rest ones. The respondents who are aged between 26 and 64 years chose almost the same answer options, excepting the interviewees from Slănic Moldova who prefer both rest and sport (61%). The elderly ones from Moinești opt for rest and sport (71%), from Târgu Ocna for sport activities (57%), but the respondents from Slănic Moldova chose the rest (50%).

The chosen answers of eleventh question (Figure 7) highlight the fact that interviewees do not prefer a default schedule during the stay, but to plan it on the spot, being the only preference which correlates with global trend. The reflected situation by lower figures confirms the assumption that Romanian health resorts are chosen especially for rest. Although this represent the single feature that corresponds with global trend, taking into account the previous answers' analysis, the desire to plan the activities on the spot is based on the comfort desire.

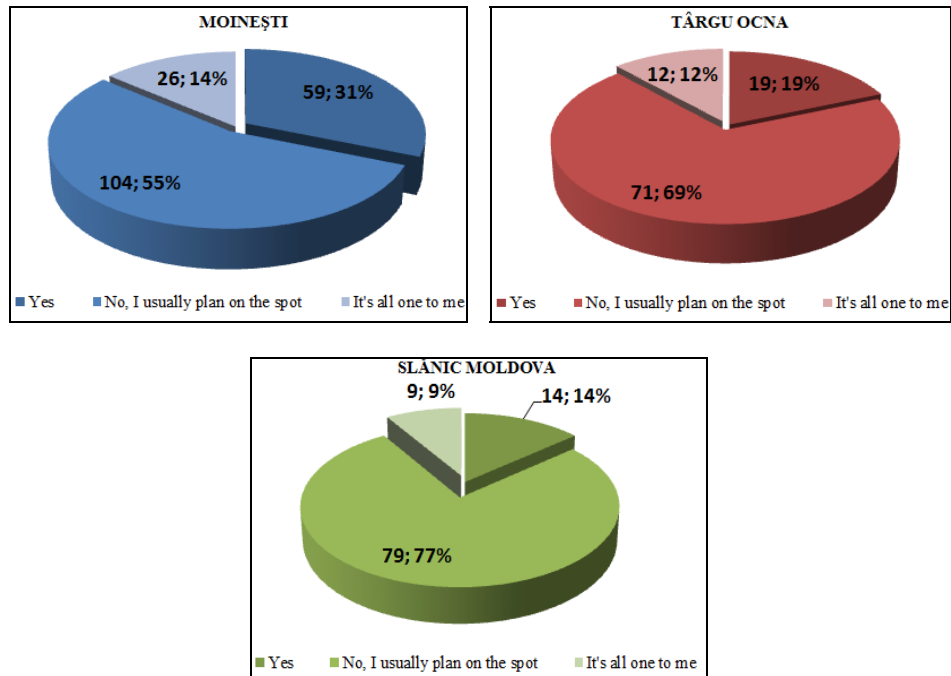


Figure 7: The patient-tourists preferences regarding on choosing a preset schedule in a stay

Source: by author

The respondents who are aged up to 25 years from Moinești (53%) and Târgu Ocna (93%) don't want to plan in advance their stay, while the situation in Slănic Moldova is balanced. The surveyed people who belong to middle age group do not prefer predetermined schedule in all cases (Moinești- 53%, Târgu Ocna- 67%, Slănic Moldova- 76%). The situation is similar and among respondents over 65 years.

3.2 Health tourist categories

Despite the inadequacies of the answers, according to the analysis of applied questionnaires there were identified three categories of (possible) patient-tourists in relation to their preferences and motivations: rest, treatment and recreation seekers.

The first category includes those respondents who chose a health resort especially for rest. They focus on accommodation services and its level of comfort and because they don't aim for treatment, they don't give attention to catering services, preferring a regular daily menu. The respondents included in this category don't want to respect a possibly schedule. The second category named treatment seekers is divided into two subcategories. The first one covers those respondents who choose a health resort more for health recover than health maintaining, because they advocate for high level of comfort with respect to accommodation, and for a healthy menu. Except the treatment, they are only for rest. Moreover they prefer an organized schedule, this being the ultimate proof of medical prescriptions compliance.

The second subcategory aims for treatment also, but according to their preferences, they choose a health resort especially for health maintaining. Like those mentioned above, the attention is centered on high level of comfort but they prefer to have a regular daily menu. Considering the additional activities, they choose those ones that involve minimal exertion, such as cultural activities and visiting new places.

The third category encloses people who aim to recreation. This kind of tourists are looking for a stay that is packed with additional activities such as hiking, new places visits, different sport practices. They don't heed for accommodation like others because they choose an accommodation unit according to the price and to the position towards tourist attractions. Likewise, regarding the catering services, they prefer to discover the specific food of health resort's zone.

3.3 Recommendations for Romanian health resorts

Regarding Romania's situation, the main role of a health resort stopped having well-defined traits because, in the context of survey's results, there are tourists who choose these destinations especially for rest. The lack of confidence on natural therapeutic factors decreased the number of tourists who visit a health resort for treatment proceedings, but in the same time, increased the number of those who need to rest, taking advantage of attractive landscape and less traffic and noise.

It is understood that tourists who chose a health resort for health recovery also need to rest, but the number of those who come only to rest is quite high. Moreover, these resorts became as well targets for tourists who want to enjoy recreation services.

Therefore, in order to increase the number of tourist arrivals, Romanian health resorts are forced to provide facilities and services that are capable to satisfy the preferences of all previously mentioned categories. Thus, it is stringent for a health resort to have accommodation units characterized by different comfort levels, catering units that can offer a diversified menu, but also healthy food and specific food of resort's zone, the existence of tourist operator that can provide to tourists the opportunity to participate in cultural, scientific, sport activities and to visit the surroundings.

Conclusions

Analyzing the questionnaires' results, it can be concluded that Romanian patient-tourist proves to be different than tourists with other nationalities. The single common point refers to the fact that they dislike planning in advance a stay's schedule.

Even if all of respondents belong to ex-health and health resorts, and a high percentage of them were in a patient-tourist's situation, they did not seem to be familiar with the characteristics of health tourism. Though they used natural therapeutic factors, the medicamentary treatment is by far the most reliable.

The utopia is the fact that respondents have greater confidence in kin's recommendation than in doctor's one. Moreover, the main aim for this kind of stay is resting, not treatment performing. That's why the respondents pay attention especially to accommodation services. Therefore, the patient-tourists have not yet renounced on the idea of comfort.

Even if the majority prefer resting, the side who chose sport and hiking activities should not be neglected. The respondents who chose the treatment as main aim for a health stay, preferred to benefit by healthy eating, because the treatment is closely related to nutrition. The interviewed residents who pleaded for additional services, followed not the comfort of accommodation units, but its position towards tourist attractions. Those who are not comfort adepts prefer additional activities as hiking, visits to new places, but they do not represent the majority. On the other side, the respondents who are looking for rest do not want to leave the usual lifestyle patterns.

Hence, the results showed that the preferences and motivations of respondents do not match with global trend's ones that are specified by specialized literature. The health resorts are chosen especially for rest because there is no confidence in the effectiveness of natural therapeutic factors.

Analyzing the responses given by age groups, it can be concluded that the young respondents do not choose a health resort for its specificity (treatment services), but for rest. They associate this type of resort with a quiet and noiselessly zone, a perfect place only for resting. However, the young surveyed people prefer to give attention to additional activities, but no to accommodation ones, as it emerged from answers of sixth question. The notion of rest differs among the young respondents, as they associate it with any other activity that does not involve intellectual and physical effort, excepting sports activities. This aspect was verified by using the eleventh question, where it emerged that they prefer additional activities which involves sport.

The issue that young population does not choose a health resort especially for treatment, is reinforced by the fact that the accommodation services are chosen relying on comfort level and prices. Moreover, the young people prefer to consume an usual menu. Likewise, they do not want to plan in advance their stay, the idea of following a medical prescription being completely eliminated.

Like young respondents, those belonging to the middle age group hold the same goal for a stay in a health resort. Treatment is the second most important, because they care about the accommodation services and its level of comfort. The idea of performing a treatment through a health stay is rebutted by the fact that they prefer a daily menu and they do not want to respect a schedule. Although they chose the rest as a goal for a health stay, they prefer activities that involve movement (walking / hiking, visiting new places).

The majority of elderly respondents prefer to rest in a health tourist stay, excepting those from Târgu Ocna, where the existence of a saline microclimate make them firstly think to treatment services. Moreover these respondents are the only ones who pay attention to cultural activities and not to comfortable ones. They prove to be the most active persons due to the fact that they chose accommodation services relying on prices and not on comfort.

References

- Ban, Olimpia (2005). Noile motivații de consum turistic. *Analele Științelor Economice*, Vol. 2005, Turism durabil.
- Bowen, D. and Clarke, J. (2009). *Contemporary Tourist Behaviour*. CABI, UK, ISBN-13: 978 1 84593 520 7.
- Cai, L.A., Feng, R. and Breiter, Deborah (2003). Tourist purchase decision involvement and information preferences. *Journal of Vacation Marketing*, Vol. 10, pp. 138-148.
- Cooper, C. and Hall, M. (2008). *Contemporary Tourism*, Elsevier, UK, ISBN: 978-0-7506-6350-2.
- Correia, Antonia, Kozak, M. and Ferradeira, J. (2013). From tourist motivations to tourist satisfaction, *International Journal of Culture, Tourism and Hospitality Research*, Vol. 7(4), pp. 411-424.
- Decrop, A. (2010). Contemporary tourist behaviour: yourself and others as tourists. *Annals of Tourism Research*, Vol. 37(2), pp. 568-569.
- Foisner, F. (2007). *Physician and patient at a health resort. Expectations and reality* [online], Available from: <http://www.ncbi.nlm.nih.gov/pubmed/17928947>, [Accessed 3/08/2016].
- Funk, D.C. and Bruun, T.J. (2007). The role of socio-psychological and culture-education motives in marketing international sport tourism: a cross-cultural perspective. *Tourism Management*, Vol. 28(3), pp. 806-819.
- Gottlieb Duttweiler Institute (2006). *Future of Leisure Travel- Trend Study*, Ed. Koni, Zurich.
- Like a Local (2015). What do modern day travelers and reality tv have in common [online], Available from: <http://www.likealocalguide.com/blog/the-post-tourist-what-do-modern-day-travelers-and-reality-tv-have-in-common>, [Accessed 3/08/2016].
- Mortimer, K. and Mathews, B.P. (1997). The Advertising of Services: Costumer Views. Normative Guidelines. *Academy of Marketing Conference*, Manchester.
- Ostrowski, S. (1983). 'Josta Krippendorfa wolańie o nowq swiatowq polityke turystycznq'. *Problemy Turystyki*, nr. 3.
- Pirnar, I., Icoz, O. and Icoz, O. (2010). The new tourist: impacts on the hospitality marketing strategies. EuroCHRIE Amsterdam 2010: Passion for Hospitality Excellence, 25-28 October 2010, Movenpick Hotel, Amsterdam.
- Pritikin (2014). Six Considerations for Choosing a Health Resort [online], Available from: <https://www.pritikin.com/6-choosing-health-resort#.VFyqZPmsUuI>, [Accessed 2/08/2016].
- Richards, G. (2011). Tourism, culture and cultural routes. *Khovanova-Rubicondo, K. (ed) Impact of European Cultural Routes on SMEs innovation and competitiveness*, Strasbourg: Council of Europe Publishing, pp. 21-39.
- Radu, Anamaria and Orzan, Gh. (2013). Conceptual Model of Consumer Satisfaction in Balneary Touristic Services. *Romanian Journal of Marketing*, pp. 76-86.
- Rotariu, I. (2008). *Dezvoltarea destinației turistice*. Alma Mater publisher, ISBN: 978-973-632-495-6, Sibiu.
- Vellas, F. and Becherel, L. (1995). *International Tourism*, MacMillan Press Ltd, ISBN 0333615239, London.
- Yoon, Y. and Uysal, M. (2005). 'An examination of the effects of motivation and satisfaction on destinations loyalty: a structural model', *Tourism Management*, Vol. 26(1), pp. 45-56.