

UNDERSTANDING WELLNESS TOURISM MOTIVATION IN INDIA: A CROSS-CULTURAL VALIDATION OF THE WELLNESS TOURISM MOTIVATION SCALE (WTMS)

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Abstract

Wellness tourism is a rapidly growing sector in the global travel industry, and India has emerged as a significant player in this market. This study aimed to validate the Wellness Tourism Motivation Scale (WTMS) in the Indian context, as understanding tourists' motivations for engaging in wellness travel is vital for both the industry and destination marketing. The WTMS is a well-established instrument used to assess tourists' motivations for participating in wellness-related activities during their trips. A total of 634 Indian wellness tourists were surveyed in top five wellness destinations within India. The sample was distributed in two groups to conduct EFA and CFA. The findings indicate that the WTMS exhibits strong reliability and validity when applied to the Indian wellness tourism context. The scale's factor structure was consistent with previous research, identifying various motivation factors. This research contributes to the growing body of knowledge on wellness tourism in India, fostering its sustainable growth and global competitiveness. The implications are discussed in details.

Key words: Factors, India, Motivation, Scale Validation, Wellness Tourism

JEL Classification: Z32, Z39, L83

INTRODUCTION

Wellness tourism is a swiftly developing sector of the travel industry that focuses on promoting overall well-being and improving one's health through travel experiences. It encompasses a wide range of activities, services, and destinations designed to enhance physical, mental, and emotional wellness (Hartwell et al., 2018; Kongtaveesawas et al., 2022). Wellness tourism is often considered as a way to get rid of the stresses of everyday life then recharge, and prioritize self-care. In addition, domestic wellness tourists often spend 170% greater than the normal tourist (Kessler et al., 2020). The rapid expansion of wellness tourism increased at a rate of 6.5% annually between 2015 and 2017, which was more than two times as rapid as the total growth of tourism, which increased annually at a rate of 3.2% only according to Euromonitor statistics, (GWI, 2018). The Worldwide Wellness Institute (GWI) estimates that the worldwide market for wellness tourism was worth \$639 billion in 2018 (GWI, 2018). Research indicates that foreign wellness tourists spend 58% more than the usual international visitors, making wellness tourism a high-yield travel industry (Kessler et al., 2020). Global wellness tourism is expected to have a market value of US\$ 1592.6 billion by 2030, up from US\$ 808 billion in 2020 with a growth rate of 7.5% annually (Allied Market Research, 2021).

As per Smith & Kelly (2006), wellness tourism is widely promoted as a kind of vacation activity that satisfies all well-being categories and indicates a successful adjustment in lifestyle and behaviour. The travel industry's robust and developing wellness tourism sector has become well-known as a way to refresh the body, feed the mind, as well as soothe the

spirit. The motivation for wellness tourism varies from person to person, but it often revolves around the desire to prioritize self-care, improve overall well-being, and escape from the stresses of everyday life (Chen et al., 2008). Many people seek wellness tourism to unwind, de-stress, and relax in a tranquil environment. Additionally, wellness destinations often offer a break from the fast-paced, demanding routine of daily life (Težak Damijanić & Šergo, 2013). Furthermore, it is now more difficult to pinpoint the key reasons behind consumer decisions to take wellness vacations due to globalization, growth of the internet, and the rise of social media (Aleksijevits, 2019).

However, there is little research on Indian wellness tourists and their motivations for tourism; thus, more information is required because severe economic crisis, competitive daily life, and demanding lifestyle will boost competition for these high-yield visitors (Gössling et al., 2020; Goyal & Taneja, 2022). Hence, the objectives of this study are two-fold:

- (1) To perform cross cultural validation of wellness tourist motivation scale (WTMS) in India
- (2) To confirm the factor structure of the same using confirmatory factor analysis.

Therefore, this study attempted to pinpoint the elements that encourage travellers to choose wellness vacations in India. The idea of wellness tourism suggests a phenomenon that improves travellers' personal well-being in order to revitalize their bodies, mind, and soul (Goyal & Taneja, 2022). India offers a diverse range of wellness tourism destinations known for their natural beauty, traditional healing practices, and rejuvenating experiences (Halder, 2021). The study selected top five wellness tourist destinations: Rishikesh and Haridwar in Uttarakhand are renowned

for their spiritual and wellness experiences. Known as "God's Own Country," Kerala is famous for its Ayurvedic treatments and wellness resorts. Goa, with its beautiful beaches and relaxed atmosphere, has become a popular destination for wellness seekers. Dharamshala is known for being the residence of the Dalai Lama and offers Tibetan healing and meditation practices. McLeod Ganj is a center for Tibetan culture and spirituality. Varanasi, one of the oldest cities in the world, is a spiritual and wellness destination (BI Indian Bureau, 2023).

II. REVIEW OF LITERATURE

Wellness Tourism

Dunn (1959) combined the terms "fitness" and "well-being" to create the phrase "wellness." It has been described as a unique, multifaceted, multifaceted way for people to express their desire for well-being and wellness. Wellness tourism is highly individualized, and travellers choose experiences that line up with their specific wellness aims and interests. Whether it's relaxation, fitness, mindfulness, or holistic health, wellness tourism offers a dedicated opportunity to focus on well-being, recharge, and prioritize self-care (Smith & Kelly, 2006). According to Mueller and Lanz-Kaufmann (2001), it is "a combination of all relations and phenomena caused by journey and residence, where the primary motive of tourists is to accumulate or promote their health". In other words, it is a growing trend where individuals seek to improve their well-being by traveling to places that offer activities and services focused on physical, mental, and emotional health (Mueller & Kaufmann, 2001; Lee & Kim, 2015). Wellness tourism often comprises traveling to places that offer natural beauty, tranquillity, and a nurturing environment. These destinations can include spa resorts, yoga retreats, nature retreats, and eco-friendly wellness centers (Koncul, 2012).

This branch of tourism is driven by the growing interest in self-care, personal development, and a desire for a healthier lifestyle (Dryglas & Salamaga, 2018; Moreno-González et al., 2020). Moreover, it also includes vacationing at a spa, resort, or therapeutic retreat to improve well-being (Thal & Hudson, 2019). Spa retreats are a significant part of wellness tourism. They offer various spa treatments, massages, and relaxation therapies aimed at rejuvenating the body and reducing stress. Wellness tourism and leisure have historically been associated with spa and health facilities (Kulczycki & Luck, 2009). People of excellent health of all ages are drawn to the swiftly growing wellness sector, which emphasizes illness prevention as well as health maintenance (Suban, 2022). Therefore, achieving and maintaining excellent health and happiness, as well as improving one's quality of life, are the goals of wellness (Suban, 2022).

Wellness Tourism Motivation

Motivation is a complex psychological concept that drives human behavior and actions (Stanciu & Tichindelean, 2010). It is the internal or external provocation that prompts people to set and achieve goals, engage in activities, or pursue desires (Stanciu & Tichindelean, 2010). Similarly, it plays a vital role in shaping personal, professional, as well as social aspects of life (Uysal & Hagan, 1993). The motivations for wellness tourism have also been extensively researched, with the majority of researchers focusing on reasons pertaining to healing and health (Smith & Kelly 2006; Lim et al., 2016; Hashim et al., 2019). Wellness tourism refers to travel and leisure activities that are primarily motivated by the pursuit of maintaining or improving one's physical, mental, and emotional well-being (Hartwell et al., 2018). Researchers hypothesized that people travel for health reasons (Iso-Ahola, 1997). Travellers engage in wellness tourism to enhance their overall health and quality of life and several motivations drive people to choose wellness tourism as a means of relaxation, rejuvenation, and self-care; thus, travelling specifically to improve one's health has becoming quite trendy (Letho et al., 2006). Investigations into the motivation behind travel have identified a number of aspects of wellness, including an urge to pay attention to one's spiritual as well as physical needs by taking yoga lessons or focus on one's psychological as well as social needs by studying and experimenting with the concept of wellness (Letho et al., 2006; Chen et al., 2008; Aleksijevits, 2019).

Travellers may choose wellness tourism to address specific health concerns, such as weight management, chronic pain, or recovery from illness and wellness retreats often offer specialized programs and therapies to promote physical health (Mak et al., 2009). In a similar vein, various studies have focused on escapism, relaxation, and the drive to enhance psychological well-being (Puczkó & Bachvarov, 2006; Konu & Laukkanen, 2009; Mak et al., 2009). It states that people seek wellness tourism to escape the stresses of daily life and unwind in a tranquil environment. Spa retreats, yoga retreats, and meditation centers are popular destinations for those looking to reduce stress and find mental peace (Koh et al., 2010). Pearce and Lee (2005) observed that travellers often look for experiences that allow them to concurrently satisfy many motivational categories. The research by Chen et al. (2008) indicates that the motivation of wellness tourists has the same pattern; it is diverse, indicating that visitors have a variety of motivations for visiting.

Various scholars discovered various motivational factors for wellness tourism: Seven variables were identified by Konu and Laukkanen (2009) as motivators: nature, autonomy and stimulation, social status, healthy and physical exercise, relaxation and escape, solitude and nostalgia, and self-development. In the investigation of spa centers in Hong Kong, Mak et al. (2009) found that two

key motivators for tourists were "relaxation & relief" and "health and beauty." Additionally, Koh et al. (2010) used benefit segmentation technique, which makes use of motivational characteristics comparable to those employed in the previous research, to investigate hotel spas in Texas. As per the results, four motivation aspects were found to be important for wellness tourism: socialization, relaxation, health, and rejuvenation. Chen et al. (2013) found seven elements in a wellness tourism research of elderly tourists: mental learning, treatments for health promotion, exposure to distinctive tourism resources, a balanced diet, relaxation, complementary therapies, and social activities.

III. RESEARCH METHODOLOGY

Scale Measurement

Various studies have introduced numerous scales with a range of items and variables, among them, the works of Mak et al. (2009), Koh et al. (2010), Chen et al. (2013), and Lim et al. (2016) stand out. However, Kessler et al. (2020) introduced a recently developed standardized scale known as the WTMS scale and aimed to validate it in the Indian context to assess its prevalence. Given the scale's initial development in a different geographic context, there was a crucial need to validate its usage prevalence. The chosen scale was preferred over alternatives, considering them obsolete, and it represents the latest development in this field. The study used a quantitative approach and made use of over 600 respondents' responses. A WTMS-standardized scale with 28 statements was adopted. The measurement of scale was done using a 5-point Likert scale (5=strongly agree to 1=strongly disagree). In their study Kessler et al. (2020) used CAQDAS data from a 2019 industry survey and found seven motivational dimensions for wellness tourism: "Movement & Fitness", "Healthy Food & Diet", "Meditation & Mindfulness", "Rest & Relaxation", "Learning about Wellness", "Self Care", and "Nature & Disconnect." Scale items and variables are mentioned in Table 2. Additionally, some demographic questions were also

included in the questionnaire.

Data collection

Following the study by BI Indian Bureau (2023), data were collected from visitors to the top five wellness tourism destinations in India. For this study, a questionnaire was used as the data collection tool and was distributed in the form of a Google Form link through email. The purposive sampling technique was employed to ensure the appropriateness of the responses (Creswell, 2013). The online distribution of the questionnaire was chosen due to the large sample size, quick response rates, and affordability. Compared to conventional postal surveys, online surveys exhibit less sample bias (Dolnicar et al., 2009). The questionnaire was distributed to 800 respondents but a total of 676 responses were received and out of them 634 were found to be usable for data analysis.

IV RESULTS OF SCALE VALIDATION

SPSS and AMOS softwares were used to analyze the data. The 634-person sample was randomly divided into N1=317 (Sample 1) and N2=317 (Sample 2) subsamples of equal sample sizes. Because of the split, the first sample provided recommendations for selection of item and reduction of factors, while the second sample was used to validate data structures. By using this technique, confirmatory and exploratory analysis may be conducted without depending on a single sample. As a result, sample 1 was used for exploratory factor analysis in SPSS, while sample 2 was utilized for final confirmation (CFA) in AMOS. For every sample, the data in Table 1 is dispersed over many demographic parameters.

Demographic Profile

As previously stated, the study included 634 participants: 317 in sample 1 and 317 in sample 2. Table 1 depicts the demographic profile of participants by their gender, age, qualification, occupation, marital status, and monthly income.

Table 1: Demographic Profile of Respondents

Demographic Variables		Sample 1 (317)		Sample 2 (317)	
		Percentage	Frequency	Percentage	Frequency
Gender	Male	56.8	180	61	193
	Female	43.2	137	49	124
Age	Below 30	19.8	63	16.1	51
	31-40	32.2	102	42.3	134
	41-50	39.1	124	34.1	108
	Above 51	8.9	28	7.5	24
Qualification	High School	10.5	33	12.9	41
	Graduate	35.3	112	32.2	102
	Post Graduate	43.5	138	37.8	120
	Professional/Ph.D.	10.7	34	17.1	54
Occupation	Student	14.8	47	16.1	51
	Employed	33.4	106	28.1	89
	Self-Employed	30.3	96	37.2	118
	Not-Employed	21.4	68	18.6	59
Marital Status	Single	24.6	78	25.9	82
	Married	75.4	239	74.1	235
Monthly Income	Below 50k	20.2	64	23.0	73
	50k-1Lac	29.0	92	21.1	67
	1Lac-1.5Lacs	23.7	75	26.8	85
	1.5Lacs-2Lacs	17.7	56	19.0	60
	Above 2Lacs	9.4	30	10.1	32

(Source: Author's Calculations)

Descriptive Statistics and Data Normality

Firstly, descriptive statistics and the normality of the data were examined before further analysis. The mean value of all statements was found to be greater than the average of the scale and all the values range from 3.40 to 4.56. To meet the criteria of normality, Kurtosis and skewness values must be between -2 and

+2 (Hair et al., 2010). According to the results of the normality test shown in Table 2, all of the values in the current inquiry were found to be within the required limits. Table 2 describes the mean, standard deviation, and normality (skewness & kurtosis) of the variables.

Table 2: Descriptive Statistics and Normality

Sr. No.	Statements	Mean	SD	Skew	Kurt.
Movement & Fitness					
MF1	I travel to become more fit and toned	3.40	1.092	-.249	-1.122
MF2	I travel to look and feel better	3.61	.980	-.315	-.613
MF3	I travel to challenge myself physically	3.51	1.000	-.254	-.779
MF4	I travel to improve my fitness/movement practice	3.59	.923	-.371	-.566
Healthy Food & Diet					
HFD1	I travel to practice clean eating	3.41	.955	-.072	-.479
HFD2	I travel to achieve and/or maintain a healthy weight	3.52	1.044	-.292	-.518
HFD3	I travel to enjoy a variety of foods that fit my dietary needs	3.47	1.009	-.107	-.764
HFD4	I travel to experience cooking demonstrations and/or go home with healthy recipes	3.44	1.004	-.219	-.378
Meditation & Mindfulness					
MM1	I travel to find my inner self	4.44	.716	-1.059	.401
MM2	I travel to learn how to meditate	4.27	.750	-.773	.240
MM3	I travel to contemplate what is important to me	4.56	.682	-1.510	1.876

MM4	I travel to be at peace with myself	4.23	.744	-.653	-.104
Rest & Relaxation					
RR1	I travel to escape the demands of everyday life	4.12	.875	-1.384	.337
RR2	I travel to return to everyday life feeling rejuvenated	4.37	.797	-1.483	.616
RR3	I travel to find peace and quiet	3.61	1.054	-.561	-.293
RR4	I travel to give me time and space for reflection	4.55	.652	-1.754	.524
Learning about Wellness					
LW1	I travel to learn about nutrition to make better decisions	3.50	1.897	.214	-1.071
LW2	I travel to learn how to better manage stressful situations	3.64	1.931	.187	-1.222
LW3	I travel to learn general ways to improve my overall health	3.58	1.879	.188	-1.132
LW4	I travel to learn how to overcome specific health problems	3.42	1.884	.291	-1.136
Self-Care					
SC1	I travel to focus on my own needs	3.65	.641	-.038	-.203
SC2	I travel to help recover from a major negative life event	3.65	.696	-.222	-.076
SC3	I travel to get a better night sleep	3.62	.736	-.198	-.201
SC4	I travel to reduce my stress levels	3.60	.754	-.202	-.253
Nature & Disconnect					
ND1	I travel to experience activities outdoors	3.78	.869	1.556	.627
ND2	I travel to connect with nature	3.89	.906	1.631	.957
ND3	I travel to feel grounded in nature	3.66	.899	.901	1.665
ND4	I travel to totally disconnect from technology	3.47	1.026	1.263	1.985

Common Method Biasness

A "Harman's Single-Factor Test" was conducted to confirm common method bias (CMB) and the results reveal that the single extracted component explained only 12.646% of the variance, which is below the specified limit of 50%. Thus, there is no concern about common method biasness.

4.4 EXPLORATORY FACTORS ANALYSIS

It is necessary to do an exploratory factor analysis (EFA) in order to assess the unit-dimensionality of the scale. EFA is a dimension reduction technique that helps simplify complex data by identifying the common factors that contribute to the observed correlations or covariances among variables. Churchill (1979) asserts that factor analysis may be used to verify if the number of conceptualized dimensions can be experimentally validated. Factor analysis is deemed suitable when there is high factor loading (between 0.5 and 1.0) (Hair et al., 2010).

The "Principal Component Analysis (PCA) technique" was used to extract the factors of the scale in the present study. The method clarifies the overall variety of the information under investigation. Varimax rotation served as the "method of factor rotation" at the time. According to Hair et al. (2010), this is a common technique for comprehending a component's structure.

Table 3: KMO and Bartlett's Test

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.861
Bartlett's Test of Sphericity	Approx. Chi-Square	8304.881
	df	378
	Sig.	.000

The Kaiser–Meyer–Olkin (KMO) measure of sample adequacy is a metric for assessing whether factor analysis is acceptable. According to Table 3's findings, the study's sample size is sufficient, as shown by the KMO value of 0.861, and Barlett's test yields a p-value <.001, which suggests that the forming components of variables are substantially suitable. Once it was determined that KMO and Barlett's test requirements had been fulfilled, factor analysis was carried out.

Table 4: Results of Factors Analysis

Items	Communalities	Factor Loadings	% of Variance
MF1	.719	.833	12.646
MF2	.595	.755	
MF3	.664	.804	
MF4	.652	.790	
HFD1	.656	.798	11.646
HFD2	.767	.873	
HFD3	.787	.882	
HFD4	.758	.864	
MM1	.768	.872	10.347
MM2	.682	.822	
MM3	.567	.750	
MM4	.561	.743	
RR1	.757	.869	9.821
RR2	.535	.718	
RR3	.574	.746	
RR4	.548	.733	
LW1	.791	.875	9.374
LW2	.692	.813	
LW3	.684	.814	

LW4	.699	.831	8.241
SC1	.699	.830	
SC2	.756	.865	
SC3	.715	.837	
SC4	.668	.809	6.956
ND1	.851	.917	
ND2	.744	.854	
ND3	.679	.820	
ND4	.760	.870	

Note:-MF=Movement & Fitness, HFD=Healthy Food & Diet, MM=Meditation & Mindfulness, RR=Rest & Relaxation, LW=Learning about Wellness, SC=Self Care, and ND=Nature & Disconnect

After running an EFA, the factor rotation approach reveals factors with all elements meeting the requirements for communality and factor loading (i.e. higher than 0.5). The above table depicts the communality values and factor loadings for the study variables. The common variance, which falls between 0 and 1, is referred to as communality. Values nearer 1 suggest that a single item's variation is more fully explained by extracted components. The components, or the variables that combine to form a single factor, are represented by the components as determined by the rotational component matrix. It's also referred to as the loadings. Principal components analysis yields this as its primary result. It displays the correlations between each estimated component and the variables. Variables with factor loading greater than 0.5 are deemed appropriate. Thus, variables with factor loading values greater than 0.5 are taken into consideration in this research (Hair et al., 2010; Malhotra & Dash, 2011). To determine how motivated the tourists were to visit selected wellness tourist destinations, a total of 28 statements have been employed and all items with factor loadings greater than 0.5 have been considered for the scale. These statements are further broken down into seven parts. Each component has four statements that are related to it. These results are given in Table 4

4.5 Reliability Analysis

It is a statistical technique used to assess the consistency and stability of measurements or the degree to which a measurement tool produces consistent and dependable results over time or across different situations. It denotes the degree to which consistent results are attained from repeated tests (Hair et al., 2010). Cronbach's alpha is a widely used statistic that quantifies the degree to which items within a scale or questionnaire are correlated.

Table 5: Reliability of All the Factors

Sr. No.	Variables	Cronbach's Alpha
1.	Movement & Fitness	.812
2.	Healthy Food & Diet	.881
3.	Meditation & Mindfulness	.811
4.	Rest & Relaxation	.764
5.	Learning about Wellness	.862
6.	Self-Care	.856
7.	Nature & Disconnect	.889

The findings shown in Table 5 demonstrate strong internal consistency between each factor's items. The scale value of Cronbach's alpha is 0.841. According to Table 5's findings, all of the components' Cronbach's alpha values are higher than the minimal requirement of 0.6 (Bernstein & Nunnally, 1994). The Cronbach's alpha of the factors is: Movement & Fitness = .812, Healthy Food & Diet = .881, Meditation & Mindfulness = .811, Rest & Relaxation = .764, Learning about Wellness = .862, Self-Care = .856 and Nature & Disconnect = .889.

Confirmatory Factor Analysis

It is a statistical technique used in research to test and validate a pre-specified theoretical model of the relationships between observed variables and their underlying latent factors (Hair et al., 2010). EFA and CFA are comparable techniques. However, the purpose of EFA is just data exploration and information presentation on factors derived from the observed items or variables. In the case of EFA, every measurable variable is connected to every latent variable. On the other hand, confirmation of the quantity of factors and the items that correspond to them is obtained via the use of CFA (confirmatory factors analysis) (See Figure 1). Maximum likelihood factors, which quantify population characteristics using sample statistics, are the most often used CFA approach in the current research (Hair et al., 2010; Khan & Adil, 2013). other hand, confirmation of the quantity of factors and the items that correspond to them is obtained via the use of CFA (confirmatory factors analysis) (See Figure 1). Maximum likelihood factors, which quantify population characteristics using sample statistics, are the most often used CFA approach in the current research (Hair et al., 2010; Khan & Adil, 2013).

Measurement Model

In the current research, the "Model Fit Measures" plugin was used to analyze the Model Fit indices using AMOS (Gaskin & Lim, 2017). The analysis includes all required indices, along with thresholds and interpretations based on existing research. Table 6

provides the model fit index findings together with the threshold and explanation.

Table 6: Fit statistics of the model

Model Fit	Cut-off Criteria	Model Statistics	Remarks
CMIN		847.172	
DF		329	
CMIN/Df	≤ 3 (Hair et al., 2010)	2.57	Good
GFI	$\geq .8$ (Baumgartner & Homburg, 1995)	.914	Good
PGFI	$\geq .5$ (Wu, 2009)	.741	Excellent
CFI	$\geq .9$ (Hair et al., 2010)	.936	Good
TLI	$\geq .9$ (Byrne, 2011)	.926	Good
RMSEA	$\leq .08$ (Steiger, 1990)	.050	Excellent

The results of Table 4.6 show both the absolute and incremental fit indices. With CMIN (χ^2) = 847.172, CMIN/Df (χ^2/df) = $2.57 \leq 3$, $p < .01$, GFI = .914 > 0.8 , PGFI = 0.741 ≥ 0.5 , CFI = 0.936 > 0.9 , TLI = 0.926 > 0.90 , and RMSEA = 0.050 ≤ 0.08 all of the

requirements were met. These values indicate strong fit to data. As a consequence, the suggested research model is deemed fit. Comparable fit indices have been obtained by other studies (Breneman et al., 2005, Ye et al., 2011) using similar items.

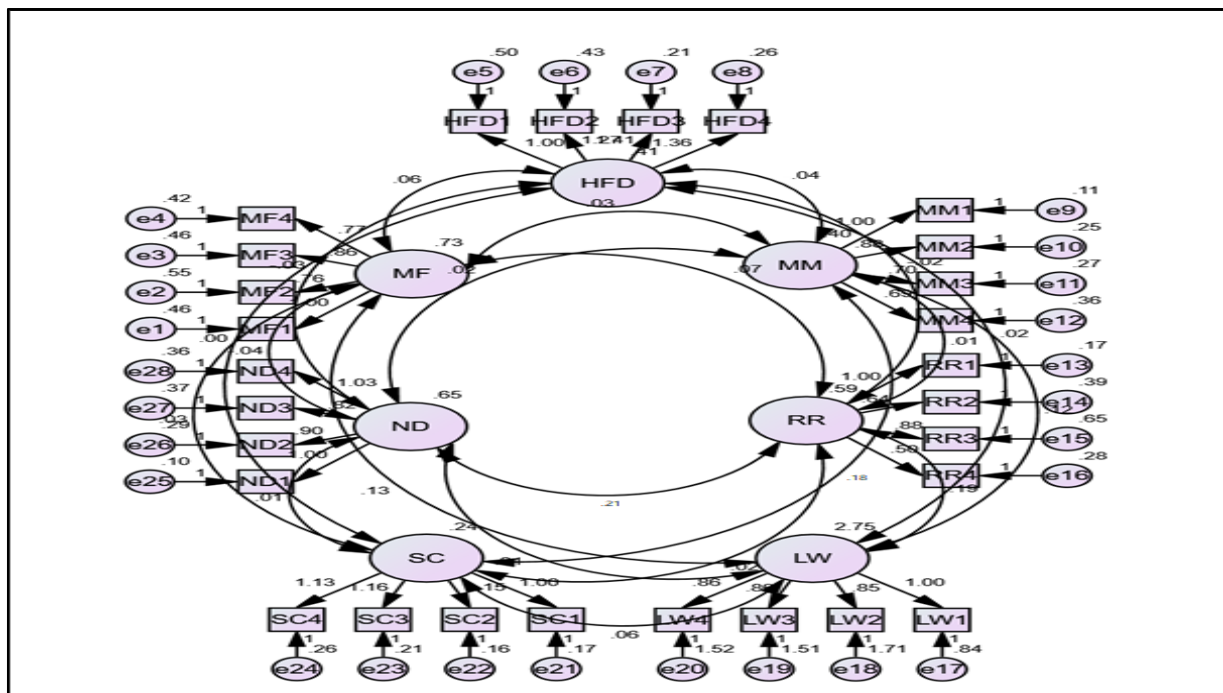


Figure 1: Confirmatory Factor Analysis

Validity Analysis

According to Zikmund (2003), "The ability of the measuring device to measure what is meant to be measured" is defined as validity. Validity analysis examines whether the inferences and conclusions drawn from the instrument are valid and meaningful. The second goal of CFA involves evaluating the scale's validity. According to Hair et al. (1998), an

instrument's appropriateness can't be determined by a single reliability.

The present research used the statistical tool package's "validity master" option to examine the constructs' validity. Following the execution of the validity master, Tables 6 and 7 provide the results of the validity analysis, together with the correlation and standardized regression weight values. The results of convergent and discriminant validity is discussed as below:

Convergent validity

It is established when the measurement item strongly correlates with other items that measure the same or a related construct. The convergent validity is evaluated using factor loadings, composite reliability, and the average variance extracted (AVE). All of the items have factor loadings that are more than 0.70 and above the acceptable criterion of 0.5 (Hair et al., 2010). For the majority of the components, the composite reliability is higher than the acceptable level of 0.7 (Hair et al., 2010), and the AVEs for all latent variables is higher than the 0.5 criterion (Fornell & Larcker, 1981). Table 6 depicts the results of convergent validity

Table 6: Convergent Validity Statistic of Variables

Items	Factor Loadings	CR	AVE	MSV	MaxR(H)
MF1	.781	0.856	0.600	0.013	0.868
MF2	.657				
MF3	.737				
MF4	.715				
HFD1	.669	0.913	0.726	0.013	0.920
HFD2	.778				
HFD3	.893				
HFD4	.863				
MM1	.889	0.910	0.718	0.012	0.920
MM2	.750				
MM3	.651				
MM4	.592				
RR1	.881	0.918	0.737	0.021	0.921
RR2	.622				
RR3	.641				
RR4	.589				
LW1	.875	0.863	0.612	0.024	0.877

LW2	.735	0.859	0.603	0.006	0.861
LW3	.756				
LW4	.756				
SC1	.769				
SC2	.818	0.894	0.679	0.024	0.920
SC3	.780				
SC4	.738				
ND1	.931				
ND2	.801	0.894	0.679	0.024	0.920
ND3	.739				
ND4	.813				

Table 6's validity statistics demonstrate the validity of each concept by revealing that all of the validity analysis's requirements are met. Movement & Fitness = .600, Healthy Food & Diet = .726, Meditation & Mindfulness = .718, Rest & Relaxation = .737, Learning about Wellness = .612, Self-Care = .603, and Nature & Disconnect = .679, all had AVE values more than the minimal criterion of 0.5. Furthermore, the composite reliability (CR) of all constructs—Movement & Fitness = .856, Healthy Food & Diet = .913, Meditation & Mindfulness = .910, Rest & Relaxation = .918, Learning about Wellness = .863, Self-Care = .859, and Nature & Disconnect = .894, is greater than the prescribed minimum of 0.70. Furthermore, all of the values of factor loading for the items were greater than the lowest permitted threshold, or 0.6, and all statements were found to be significant..

Discriminant validity

It is a second part of construct validity used to demonstrate that two different constructs measured by separate instruments are distinct from each other.

Table 7: Discriminant Validity Statistic of Variables

	MF	HFD	MM	RR	LW	SC	ND
MF	0.774						
HFD	0.116	0.852					
MM	0.356	0.087	0.847				
RR	0.101	0.142	0.214	0.859			
LW	0.190	0.218	0.110	0.146	0.782		
SC	0.279	0.114	0.115	0.252	0.278	0.777	
ND	0.364	0.065	0.248	0.205	0.155	0.324	0.824

Comparing the matching inter-construct squared correlation estimates and the AVE may be used to evaluate the discriminant validity, as proposed by Fornell and Larcker (1981). As depicted in Table 7, AVE values were discovered for each latent construct to be greater than the square of the inter-construct correlations. Good discriminant validity and desired

psychometric features are therefore reflected in the measurement model (Hair et al., 2010). According to the results depicted in table 7 condition of discriminant validity has been met, Movement & Fitness (0.600 > 0.7742), Healthy Food & Diet (0.726 > 0.8522), Meditation & Mindfulness (0.718 > 0.8472), Rest & Relaxation (0.737 > 0.8592), Learning about Wellness

(0.612 > 0.7822), Self-Care (0.603 > 0.7772), and Nature & Disconnect (0.679 > 0.8242). Thus, the seven-factor wellness tourism motivation scale was confirmed.

V DISCUSSION OF RESULTS

The study aimed to validate the WTMS (Kessler et al., 2020) in India and as per the results, the study confirms and validates the seven factors of wellness tourism motivation scale. There are several advantages to having a thorough grasp of the Indian wellness sector and how the WTMS is used. The findings of the present study provide the sector more advanced understanding. Businesses may be able to recover from the travel recession by using this information to make better strategic choices that are fruitful and well-informed. The dimensions of motivation behind wellness tourism and its advantages for travellers and service providers are explained below:

Movement & Fitness

The variable "movement and fitness" was investigated as a crucial factor and has been retained in the scale developed by Kessler et al. (2020), which has been validated by the current study in the Indian context. These are essential components of a healthy and active lifestyle. These terms encompass various physical activities, exercises, and practices that promote overall well-being and physical health (Stern, 2008). It is a constantly growing sector of the travel industry that focuses on promoting overall well-being, health, and personal development (Little, 2012). Movement and fitness are often integral components of wellness tourism, as many travellers seek destinations and experiences that allow them to maintain or improve their physical fitness while also enjoying leisure and relaxation (Johnson, 2017). Wellness tourists often choose destinations known for their natural beauty, serene environments, and outdoor recreational opportunities. The results are similar to existing studies that wellness tourism can foster social connections as well (Stănciulescu et al., 2015; Nićiforović & Stajić, 2021; Susanti & Wilyadewi, 2021). It explains that group fitness classes, wellness workshops, and shared outdoor activities allow travellers to meet like-minded individuals and create a sense of community.

Healthy Food & Diet

"Healthy Food & Diet" is also an important motivation factor of wellness tourism which was examined as a crucial factor and has been incorporated into the scale developed by Kessler et al. (2020). Additionally, this variable was validated in the Indian context in this study. Maintaining a healthy food and diet is essential for overall well-being (WHO, 2019). Wellness tourism with a focus on healthy food and diet is a rapidly growing niche within the travel industry

(Puczkó, 2010). Undoubtedly, travellers are increasingly seeking destinations and experiences that not only offer relaxation and natural beauty but also provide nutritious and wholesome culinary options to support their well-being and dietary preferences (Pagaldiviti & Dash, 2023). Therefore, travellers plan wellness travel with an emphasis on healthy food and diet. Moreover, they choose destinations that are known for their culinary offerings, including fresh, locally sourced ingredients. Farm-to-table destinations, regions famous for specific diets (e.g., Mediterranean, vegetarian, vegan), and culinary retreats are popular choices (Drescher et al., 2007). Wellness resorts, retreats, and hotels often offer menus with a strong emphasis on healthy and balanced eating (Pagaldiviti & Dash, 2023).

Meditation & Mindfulness

The other motivational factor is "Meditation and Mindfulness", which was examined as a vital dimension and has been incorporated into the scale developed by Kessler et al. (2020). This variable was validated in the Indian context in this study that promotes mental well-being, reduce stress, and enhance self-awareness. Wellness tourism with a focus on meditation and mindfulness offers travellers the opportunity to recharge, relax, and cultivate a sense of inner peace and mental well-being (Zollars et al., 2019). These experiences are designed to help individuals de-stress, achieve greater mindfulness, and deepen their spiritual or self-awareness practices (Lengyel, 2016). Many wellness destinations offer meditation retreats where participants can immerse themselves in guided meditation sessions, often led by experienced instructors or meditation gurus. These retreats may range from a weekend to several weeks (Lengyel, 2015). Wellness tourism often includes mindfulness workshops that teach participants various techniques to incorporate mindfulness into their daily lives (Malinowski, 2013; Smith & Puczkó, 2014). These workshops may cover mindful breathing, walking, eating, and more. Yoga retreats frequently incorporate meditation and mindfulness practices. So, participants can engage in daily yoga sessions that include meditation and relaxation techniques, fostering mental clarity and emotional balance (Budi Apsari, 2019; Dillette et al., 2021).

Rest & Relaxation

The variable "Rest and Relaxation" was investigated as a crucial factor and has been retained in the scale developed by Kessler et al. (2020), which has been validated by the current study in the Indian context. It is vital to mention that "Rest and relaxation" are essential for maintaining a healthy and balanced life (Tack & Sifrim, 2000) and it acts as a key motivation factor for wellness tourism. It provides travellers opportunities to unwind, de-stress, and rejuvenates in

peaceful and rejuvenating environments (Laing & Weiler, 2007). These wellness experiences focus on providing a tranquil and nurturing atmosphere, helping individuals recharge and escape the demands of their daily lives (Kelly, 2012; Quintela et al., 2016). For this purpose, wellness resorts are often dedicated to rest and relaxation, offering a range of spa treatments, wellness programs, and holistic services (Koncul, 2012). These may include massages, facials, hydrotherapy, and more. Wellness tourism often includes mindful wellness programs that incorporate meditation, mindfulness practices, and relaxation techniques to help participants unwind and find mental peace. Some wellness destinations encourage a digital detox, inviting guests to disconnect from their devices and focus on being present in the moment, which can be especially restful (Irma et al., 2021).

Learning about Wellness

The other motivational factor is “learning about wellness” which was included by Kessler et al. (2020) in WTMS and it is also validated in the current study in India. It is an on-going journey that involves gaining knowledge and understanding about various aspects of physical, mental, and emotional well-being (Allen et al., 2019). Wellness tourism with a focus on learning about wellness is an excellent way to expand your knowledge and skills in the areas of health, nutrition, fitness, mindfulness, and overall well-being (Goss, 2011). These wellness experiences provide travellers with educational opportunities to make informed choices about their health and lifestyle. Tourists choose destinations that offer wellness-focused educational programs and retreats. They look for wellness resorts, wellness centers, or retreats specifically designed for holistic learning and self-improvement (Yager, 2011). Holistic health programs often combine education with practical experiences. These programs might include instruction on herbal remedies, holistic nutrition, Ayurveda, or other traditional healing practices (He et al., 2023). Wellness tourism can include the exploration of mind-body practices and spiritual traditions, such as Reiki, Tai Chi, and Qi Gong, and practices rooted in traditional medicine systems like Traditional Chinese Medicine (TCM) (Luo et al., 2018; Allen et al., 2019).

Self-Care

The next dimension of wellness tourism motivational is “Self-care”, which was examined as a vital dimension and has been incorporated into the scale developed by Kessler et al. (2020). This variable was validated in the Indian context in this study. It is the practice of taking deliberate actions to maintain and improve your physical, mental, and emotional well-being. It involves making time for yourself to reduce stress, restore energy, and promote overall health (Lengyel, 2015; Zollars et al., 2019). Wellness tourism with a focus on self-care provides travellers with the

opportunity to prioritize their well-being, mental health, and personal growth (Puczkó, 2010). These experiences are designed to help individuals relax, reduce stress, and take time for self-reflection and self-improvement. Travellers always go to destinations that offer a serene and nurturing environment conducive to self-care. They look for peaceful retreats, wellness centers, or natural settings that provide a sense of calm and relaxation (Quintela et al., 2016). Holistic wellness programs often incorporate various therapies, from acupuncture and reflexology to energy healing and sound therapy, to promote relaxation and self-care (Težak Damijanić, 2019). When planning wellness travel for self-care, it's important to consider your specific needs, preferences, and wellness goals.

Nature & Disconnect

“Nature and Disconnect” is another vital element of wellness tourism, which was included by Kessler et al. (2020) in WTMS and it is also validated in the current study in India. Disconnecting from the fast-paced, digital world can provide a much-needed break from the stresses of modern life (Gelsthorpe, 2017; Beery et al., 2023). It is noticeable that wellness tourism focuses on reconnecting with nature and disconnecting from the hustle and bustle of daily life and offers travellers a chance to unwind, recharge, and rejuvenate in serene and natural surroundings (Steiner & Reisinger, 2006). These experiences prioritize being in touch with the environment and taking a break from digital devices and urban distractions. Thus, travellers always choose destinations that offer pristine and natural environments (Ismail, 2021). This may include remote natural reserves, national parks, eco-lodges, forest retreats, or coastal sanctuaries (Sibthorpe & Brymer, 2020). Additionally, camping or glamping (luxury camping) in nature offers a chance to unplug, enjoy the outdoors, and connect with the environment. It's an ideal way to disconnect from digital devices (Jiang & Balaji, 2022; Cai & McKenna, 2023). When planning wellness travel for nature and disconnection, it's important to consider specific interests and wellness goals (Little, 2012).

V IMPLICATIONS

The results of this study offer several practical as well as theoretical implications.

5.1. Practical Implications

This study offers several practical implications for various stakeholders, including wellness tourism providers, policymakers, researchers, and travellers. Firstly, wellness tourism providers can use the validated scale to better understand the specific preferences and needs of wellness tourists in India. This knowledge can be applied to customize and tailor wellness programs and services to match the

expectations and desires of their target customers. Secondly, the validated scale can be used as a tool for continuous quality improvement within the wellness tourism industry. Additionally, industry owners and service providers can use the insights gained from the scale to refine their offerings, enhance service quality, and address areas where improvement is needed. Thirdly, wellness tourism providers can use the results of the study to develop marketing strategies that highlight the elements that resonate most with wellness tourists in India. This can help providers effectively communicate their unique value propositions and differentiate themselves in a competitive market. Fourthly, government bodies and tourism boards can leverage the scale to promote wellness tourism in India. Study results can guide marketing efforts to attract wellness tourists and communicate the unique and culturally relevant aspects of wellness offerings in the country. Lastly, service providers can use the validated scale to monitor customer satisfaction and track changes over time because high satisfaction scores can lead to increased customer loyalty and repeat business, benefiting the bottom line.

5.2. Theoretical Implications

A study on wellness tourism scale validation in India has several theoretical implications that contribute to the academic understanding of wellness tourism and cross-cultural research. The study can be used for the advancement of a framework for cross-cultural validation of tourism-related scales. It can help researchers understand the complexities of adapting and validating scales in diverse cultural contexts. Furthermore, the validated scale can help researchers identify and categorize the dimensions that makeup wellness tourism experiences in India. This can lead to the growth of more comprehensive theories of tourism experiences, allowing for a deeper exploration of the underlying factors. Additionally, the scale can be used to explore the motivations and behaviors of wellness tourists in India. Researchers can examine how cultural and regional factors shape the decision-making processes of tourists seeking wellness experiences. Moreover, the results can contribute to the development of models that integrate cultural and regional influences into wellness and health frameworks. These models can help researchers better understand how wellness tourism contributes to overall well-being in specific cultural settings.

VI. LIMITATIONS AND SCOPE FOR FUTURE RESEARCH

Apart from several implications, there are some drawbacks in the present study. This research focused on how important it is to comprehend Indian tourists' motivations for wellness tourism. However, understanding the reasons behind international travellers' interest in wellness tourism is another strategy that might be used in further studies. Second, even though the authors tried to include a varied range of respondents, the results are still based on convenience sampling, thus further verification using independent and random samples may be necessary. Thirdly, since India is a diverse nation, more extensive and diverse samples dispersed around the country should be used in future studies to investigate the wellness tourism motivation scale. Furthermore, it is advised that this scale be evaluated in other regions of the nation (other tourist sites). Moreover, the wellness tourism industry is dynamic, and the factors that influence wellness tourism experiences may change over time. A scale validated in India may need to be periodically updated to reflect evolving trends and preferences.

VII. CONCLUSION

In the pursuit of understanding the complex and dynamic field of wellness tourism, this study undertook the task of validating a wellness tourism motivation scale within the unique cultural and regional context of India. The process involved rigorous research methods and adaptation of existing scales to capture the diverse facets of wellness tourism motivations in India. The scale validation process revealed that the expectations and perceptions of wellness tourists in India are influenced by a rich tapestry of physical, psychological, cultural, spiritual, and environmental factors. This study has several important implications. For the academic community, it contributes to the evolving field of wellness tourism research by providing a methodological framework for cross-cultural scale validation. For wellness tourism providers and policymakers, this study offers valuable insights into the preferences, expectations, and areas of importance to wellness tourists in India. Moreover, this study represents a significant step forward in the field of wellness tourism research, offering a validated scale that accommodates the cultural diversity and richness of India.

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