

Special interest tourism and niche tourism



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Introduction to Special Interest Tourism/Niche Tourism

Special Interest Tourism/ Niche Tourism is defined as the provision of customised leisure and recreational experience, experiences driven by the specific expressed interests of individuals; a special interest tourist chooses to engage with a service or product that satisfies particular interests or needs, so special interest tourism is undertaken for a distinct and specific reason.

This essay will be focusing in three sectors of the niche tourism, Gastronomy, Volunteer and Medical Tourism.

Gastronomy Tourism

According to Callanan. M & Thomas. S (2011) “ food is one of the essential elements of the tourist experience”.

Gastronomy is becoming an important attribute in the development of niche travel; many tourist main interest for travelling is gastronomy according to Kivela. J & Jonh. C (2006) gastronomy is often referred to exclusively as the art of cooking and good eating, however Kivela. J & Jonh. C (2006) states that that is just part of it flowing with, someone that is seriously interested in gastronomy is often involved in tasting, preparing experiencing, experimenting, researching, discovering, understanding and writing about food. The word gastronomy is derived from Greek gastro meaning “ Stomach, and gnomos, knowledge or law”. According to Home and away rentals (2006) the top five gastronomic break destinations are the following: France, Belgium, Florida, Portugal and Italy.

However tourist behaviour is changing over the years they are requesting more than sun, sea, beach, they want to experience something new and take part in other activities, such as gastronomy tourism as any individual could experience that in any day, anytime of the year and anywhere as they do not need to rely on anything to take part in gastronomy tourism. Kivela. J & Jonh. C (2006) believes that “ travel in order to search for, and enjoy prepared food and drink and a unique and memorable gastronomic experience”. When travelling to a destination dining out is very especial and attractive as these become transposed into experiences that are often are very personal and no one will be able to take that from you.

According to Cohen (1984) phenomenological categorization of tourist's lifestyles, following Kivela. J & Jonh. C (2006) follows- offer a phenomenological model of culinary tourism experiences. The model of tourism and gastronomy lifestyles depicts tourist attitudes and preferences for food according to four categorizations-recreational, existential, diversionary and experimental gastronomy tourists. However there are three types of gastronomic tourist, the experimental gastronomy tourist-these tourists symbolise the lifestyle through food, usually trendy, they will actively seek the destinations luxury restaurants and cafes that serve innovative menus and provide equally chic service, they keep up with up to date trendy and fashionable foods, latest growths, ingredients and recipes. Following with recreational gastronomy tourists are the more conservative type- they appreciate and actively seek while on holidays the familiarity of the home foods. And the diversionary gastronomy tourists are the kind of tourist that want to escape from the mundanity of everyday life that includes day to day

shopping and preparing food for the family, according to Poon (“ Gastronomy is a form of a new tourism”.

According to International Culinary Tourism Association –

-Almost 100 per cent of tourist dines out when travelling, and each dining opportunity is a chance to get familiar with local food which if the restaurants satisfy them, they will return and pass it on (word of mouth)

-Dining is consistently one of the top three favourite tourist activities

-Gastronomy art and wine tasting is the only art from that affects all five human senses-sight, sound, smell, taste and touch which is a unique experience

-there is a high positive correlation between tourist who are interested in gastronomy and those interested in museums, shows, shopping etc

-interest in cuisine when travelling is not reserved to a particular age, sex, or ethnic group

-unlike other niche products, gastronomy is available year-round, any time of the and in any weather.

Volunteer Tourism

According to Wearing. S (2001) volunteer tourism is- its roots “

volunteerism” which implies that individuals offer their services to change aspect of society for the better/ to take part in goodwill activities and undertake new experiences in their life.

There are many organisations that provide volunteer programs for individuals. The type of organizations that generally fall in the volunteer category of experiences often provide international support and sponsorship for the implementation or research projects and community development.

Volunteer tourism is rapidly growing in the travel niche market, fuelled by many different types of tourist with different ages and ethics, interests searching for more sense and personal experience in their holiday. However now days there are multiple of options available for individuals to take part in, it all depends on the amount of time the individual wants to do it for it varies from one week to one year and what type of voluntary work they want to undertake as there is a variety to choose from.

More and more people are turning to volunteer abroad in order to give back to our planet and help those people in need. The increasing global demand for volunteering is met by a growing number of volunteer service organisations. Most of them are non-profit oriented, but the amount of commercial providers is highly increasing.

According to Mintel (2011) 10% of all the UKs outbound travel expenditure, and 1% of outbound trips, is from the gap year market, with 200, 000 people undertaking projects each year- spending an average of £4, 800- the volunteerism sector is worth about £960 million annually.

Medical Tourism

Medical Tourism is the process of individuals travelling abroad to receive superior medical, dental and cosmetic care by highly skilled surgeons at some of the most modern and state of the art medical facilities in the world,
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however medical tourism is not a new concept according to Health Base (2006) medical tourism has been practised by wealthy Europeans and Asians for decades when they would travel within their continent.

According to IMTJ (2009) the UK is the sixth most visited destination by international tourist for medical tourism.

However different types of tourist take part in medical tourism for different reasons such as, some are attracted to the cost savings, some for dental or cosmetic treatment. Others access new treatments which are not available at home; others still gain access to a better quality of care.

According to Discover Medical Tourism (2008) the below are the most popular destinations-

-Argentina -Mexico

-Brazil -Panama

-Costa Rica -Philippines

-India -South Africa

-Hungary -Thailand

-Malaysia -Singapore

According to Healism (2011) more than 500, 000 Americans travelled abroad to receive medical and dental work in 2006. Every year millions of patients from around the globe travel to top medical tourism destinations in order to receive five-star treatment at convenient prices. Healism (2011) predicts

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that by 2012, medical tourism will grow to be \$100 billion business with more than 780, 000, 000 patients travelling abroad to receive care from foreign doctors, dentist and hospitals.

Appeal and Motivation of Customers

Smith. M& Puczko. L (2009) states that Medical tourist can be any age but are most likely to be older or retired people from western developed countries where prices for medical treatment are very high and waiting lists are long such as USA and Britain. Smith. M& Puczko. L (2009) estimated that in the UK in 2004 over 4 1, 000 individuals were expecting to experience a waiting time of 6 months or more to have various surgeries, in the USA medical insurance is particularly very expensive so many residents are uninsured or under-insured, therefore cannot afford medical treatments. The motivation of individuals undertaking medical tourism vary according to what kind of treatment they are having or is needed, some may travel for illness or wellness within the context of medical tourism. Many of medical tourism patients come from the UK and USA; the average client ages is 45-65 and are usually single.

However when it comes to individuals motivations for taking part in volunteering Volun Tourism (2009) believes that the following are the seven top motivations-

-Altruism -Professional Development

-Travel and Adventure -Right time and place

-Personal Growth -The individuals program itself

-Cultural Exchange and Learning

Gastronomy tourism in the UK is estimated to be worth \$8billion a year as the market is increasing as years go by, according to Culinary Tourism (2011) gastronomy consumer's tend to be couples that have above-average income, are usually professionals and are aged 30-50. According to the International Culinary Tourism Association on average, food travellers spend around \$1, 200 per trip, with one-third (36% or \$425) of their travel budget going towards food related-activities.

Economic Impacts

The benefits of Niche tourism economic impacts is that it could provide employment opportunities for the locals that are unemployed, it could generate foreign exchange, is also an increase of income, the more the market grows the more income that it will bring. It can be developed with local products and resources it also diverse the economy, it also spreads development, they are the positive impacts of economic, however the economic issues- it can develop excess demand, it could increase vulnerability to economic and political changes, according to Douglas. N et al (2001) the economic impact for the niche market is increasing number of visitors as that can lead to the trap of " profitless volume", this can affect an individual business in various ways, for example incurring the expense of putting on a new bus and an additional driver to cater for only the marginal increase in visitor numbers, it can also affect whole areas by requiring massive new capital investment for basic infrastructure beyond the return, or infrastructure increase that create changes in patterns of normal life.

Cultural Impacts

There are cultural issues such as authenticity and the careful retention of a distinctive local character and sense of place are increasingly becoming critical to success in cultural tourism, visitors are far more discerning and widely travelled and concerned about the growing “ sameness” of many destinations or how they could have been.

Most cultural and traditions activities in many destinations are losing authenticity as they get practice constantly and it becomes an activity that they undertake constantly as they could get tips from tourist, so the locals start thinking more about tips and tourist and start losing the authenticity, for example in the amazon in Ecuador indigenous individuals have their own traditions tribe dances, and as the amazon gets plenty of tourists throughout the year, indigenous start doing the tribe dance for money and not because is a tradition and they enjoy it, there for the tribe dance starts losing its authenticity.

Another cultural impact could be that in the urban side there are many more residents than the rural side, negative impact could be that as there are further job opportunities in the urban sides, individuals from the rural side start moving to the urban side the consequence is migration. For example according to Wall. G& Mathieson. A (2006) pacific islanders migrating to New Zealand since 1971.

Environmental Tourism

According to Douglas. N et al (2001) environmental tourism is based on natural resources and so has an impact on air, land, water, flora and fauna. It

is also acute seasonal peaks in demand create pressure on infrastructure, such as water supply, sewerage, systems, roads and community services, usually designed to cater for a much smaller population base.

However when it comes to medical tourism there are a number of negative impacts that consumers are not aware of such as Physical hazards for example high altitude, scuba diving, also air travel is utilized by hundreds of millions of people every year, has been considered safe, fast and is often used when people's health status requires rapid transportation however according to Irmgard. L (2001) cerebral venous thrombosis was described as a health risk to air travellers where five case reports were presented of patients in whom cerebral venous thrombosis was causatively linked with long distance travelling. There are many more health risks that consumers should be aware of before travelling, health risks such as Underwater diving, Temperature, Hypothermia, Hyperthermia, The sun- Queensland is reported to have the highest melanoma rate in the world Irmgard. L (2001), water, Earthquakes, Volcanoes, the 5230 m Sangay Volcano in Ecuador is the most active volcano in the Andes, Sangay is constantly erupting, is very unpredictable and tour guides refuse to climb the mountain some tourists however still proceed, although they should not. There are also many more health risks for example through large and poisonous animals, plants, jet lag, motion sickness, air pollution, water pollution, travel exposes the individual to a range of different types of experiences and challenges, one of which is the resistance to health threats from the natural environment, a recommendation for tourists will be to be aware of the above hazards that could happen when travelling. However according to Irmgard. L (2001)

tourist are not passive victims of the risks they are exposed to, they expose themselves actively by travelling to risky places or participating in risky activities.

Conclusion

The essay has looked at the types of modern tourist and three sectors in Niche tourism Gastronomy, Voluntary and Medical Tourism, it has also looked at the motivations that tourist have before travelling following with Economic, Cultural and Environmental issues in the niche tourism market.