

Health and Wellness Benefits of Travel Experiences: A Literature Review

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Chun-Chu Chen¹ and James F. Petrick²

Abstract

Tourism has been widely regarded as a mentally and physically healthy pursuit. Thus, recent studies in tourism have paid more attention to the benefits of travel experiences. However, most studies pertaining to the topic have been conducted in the fields of organizational behavior and health science. Therefore, this research attempts to provide a comprehensive review of the literature on the health and wellness benefits of travel. The results revealed that positive effects of travel experiences on perceived health and wellness have been demonstrated by multiple studies. These benefits have been found to gradually diminish after a vacation. It was also found that there is a lack of research demonstrating the positive effect of travel experiences on physical health. Based on these findings, directions for future research are addressed.

Keywords

benefits of travel, health benefits, wellness benefits, travel experiences

Taking vacations, defined as taking pleasure trips outside an individual's usual environment, is seen as an integral feature of human life for many people (Richards 1999). As observed by Hobson and Dietrich (1995), our society has assumed that "tourism is a mentally and physically healthy pursuit to follow in our leisure time" (p. 23). It has been found that taking vacations can contribute to subjective well-being because people have more opportunities to detach from their work environment, to experience new things, and to control what they want to do during vacations (Fritz and Sonnentag 2006; Sonnentag and Fritz 2007).

In the tourism literature, Neal, Sirgy, Uysal, and colleagues were among the first to provide a theoretical framework for travel benefits (Neal, Sirgy, and Uysal 1999; Neal, Uysal, and Sirgy 2007; Sirgy et al. 2011). Their scientific inquiry was primarily based on bottom-up spillover theory, which suggests that overall life satisfaction is influenced by evaluations of various life domains, such as personal health, work, leisure, and family, while the positive and negative affects accompanied by life events are assumed to have effects on how individuals evaluate various life domains (Neal, Sirgy, and Uysal 1999). Hence, positive travel experiences can contribute to an individual's health, family relationships, and overall wellness.

Thus, the objective of this research is to provide a comprehensive review of the literature pertaining to how travel experiences impact the emotional and physical health and wellness of individuals. This review is not limited to the tourism literature in that articles published in tourism journals only accounted for a small portion among all studies

pertaining to the topic of travel benefits. Before the review, the methodology of creating a comprehensive list of articles pertaining to the health and wellness benefits of travel will be provided. In the review, the theoretical underpinnings of travel benefits will first be discussed. The empirical findings relevant to travel benefits will be the next focus. Subsequently, a list of hypotheses concerning travel effects will be examined. Finally, based on the results of the literature review, directions for future research will be discussed.

Study Methods

The methodology for article search is shown in Figure 1. First, primary literature was obtained by searching 44 online databases including EBSCO, Ovid, ProQuest, Elsevier, and ISI. Databases were searched using a predetermined set of keywords, which were modified to reflect findings and ensure relevance to the research. The initial keywords were first identified by a panel of experts. After initial words were identified, a total of three graduate students generated abstracts that resulted from the search of each word. These abstracts were further analyzed to determine if additional keywords should be included in future searches.

¹Pennsylvania State University, University Park, PA, USA

²Texas A&M University, College Station, TX, USA

Corresponding Author:

James F. Petrick, Department of Recreation, Park and Tourism Sciences, Texas A&M University, TAMU 2261, College Station, TX 77843, USA.
Email: jpetrick@tamu.edu

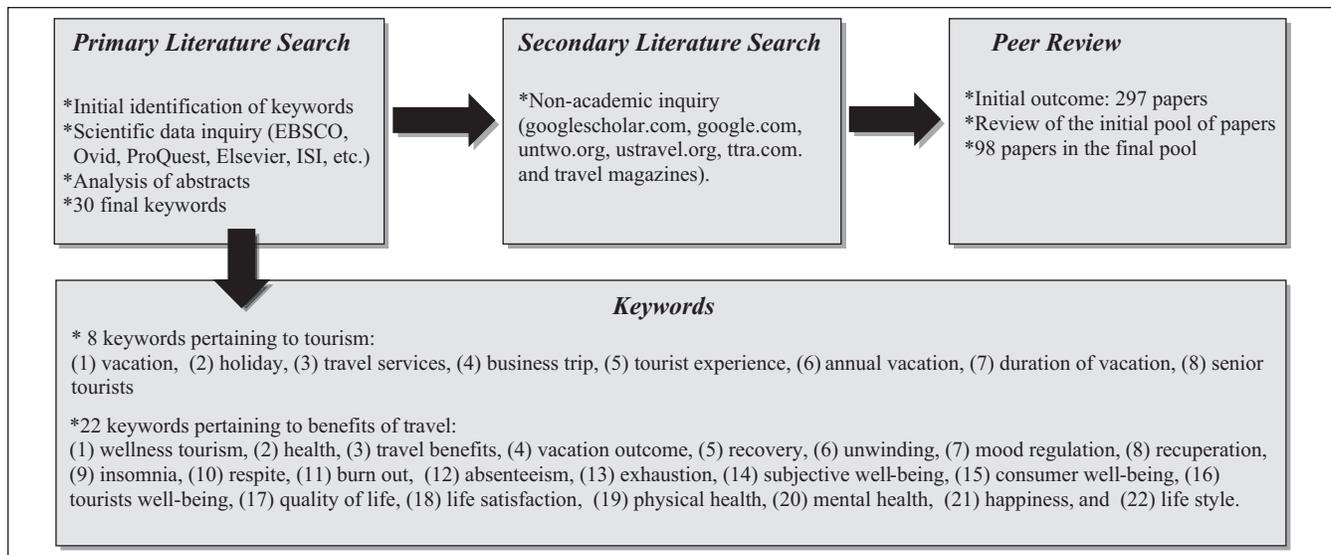


Figure 1. Methodology for article search.

The resultant list had a total of 30 keywords, including 8 keywords pertaining to tourism (vacation, holiday, travel services, business trip, tourist experience, annual vacation, duration of vacation, and senior tourists) and 22 keywords pertaining to the benefits of travel (wellness tourism, health, travel benefits, vacation outcome, recovery, unwinding, mood regulation, recuperation, insomnia, respite, burnout, absenteeism, exhaustion, subjective well-being, consumer well-being, tourist well-being, quality of life, life satisfaction, physical health, mental health, happiness, and lifestyle). Each database listed previously was searched using the combination of keywords (using only one tourism keyword and one benefit keyword each time).

A secondary literature search was subsequently carried out to obtain nonacademic publications such as consumer trade articles, travel association publications, and public and nonprofit organization information not available or overlooked in the primary literature search. The following websites were searched: www.googlescholar.com, ww.google.com, www.unwto.org, www.wto.org, www.ustravel.org, www.ttra.com, and various travel, leisure and family-focused magazines.

The primary and secondary literature searches initially yielded 297 journal articles, papers, and nonacademic resources. After review of all articles by three graduate students, and a reliability of sources check by two professors with expertise in this area, 98 resources were deemed relevant to this research and inclusive of usable empirical, theoretical, and practical information. The majority of resources found were fairly recent. Only 18 articles were published before 2000, while more than half of the articles (54 articles) were published after 2005. In terms of geographical representation, the majority of articles reviewed focused on

American studies and came from U.S. published journals. Several others pertained to Asian and European studies that were found in international or foreign journals.

Theoretical Underpinnings of Travel Benefits

Even though research on the topic of vacation benefits has accumulated a body of literature, only a few studies have explicitly specified their theoretical foundations. In tourism, a number of scholars (Neal, Sirgy, and Uysal 1999; Neal, Uysal, and Sirgy 2007; Sirgy et al. 2011) have examined the benefits of travel based on the above-mentioned bottom-up spillover theory. A series of studies have been conducted to empirically test the bottom-up spillover model in tourism. Neal, Sirgy, and Uysal (1999) were among the first to examine the effects of vacationing as a life event on individuals' life satisfaction. Their research indicated that life satisfaction was directly influenced by trip satisfaction, while their proposed mediating role of leisure life satisfaction was not significant. Neal, Uysal, and Sirgy (2007) further tested the hierarchy of satisfaction using a random sample of 2,000 adults residing in Southwest Virginia (Neal, Uysal, and Sirgy 2007). In this subsequent study (Neal, Uysal, and Sirgy 2007), direct and indirect effects of trip satisfaction were found. However, their studies (Neal, Sirgy, and Uysal 1999; Neal, Uysal, and Sirgy 2007) only examined the effects of vacationing on two life domains: leisure life and nonleisure life.

Sirgy et al. (2011) thus developed a scale to measure the positive and negative affects accompanied by taking a vacation couched within various life domains, including social life, family life, leisure life, cultural life, health and safety,

financial life, work life, love life, arts and culture, spiritual life, intellectual life, self, culinary life, and travel life. They also tested whether the positive and negative affects of vacation experiences on the 13 life domains influenced overall life satisfaction through satisfaction with the domains. They found that positive affects associated with taking a recent vacation had direct and indirect effects on overall life satisfaction.

As bottom-up spillover theory helps tourism scholars to understand whether trip satisfaction contributes to life satisfaction, Sirgy (2010) further proposed to apply goal theory to examine how individuals can benefit from taking vacations. Research on goal theory (Brunstein, Schultheiss, and Grässman 1998) has found that achieving accessible and personally meaningful goals is associated with subjective well-being. Based on this notion, Sirgy (2010) argued that individuals can benefit from taking vacations by selecting travel goals that have high levels of attainability and valence and by engaging in tourism activities that would help individuals to experience goal attainment. However, the applicability of goal theory in the context of tourism has not been empirically tested.

In the field of organizational behavior, a number of researchers have attempted to examine the effects of vacationing on potentially releasing stress related to work (Etzion 2003; Kühnel and Sonntag 2011; Westman and Eden 1997). Along this research line, the conservation of resources theory has been frequently specified as the theoretical foundation. According to Hobfoll (1989), the conservation of resources theory postulates that individuals strive to obtain and retain their external resources (such as financial assets) as well as internal sources (such as personal energies and positive mood). Since stress can lead to the depletion of internal resources, individuals should gain more internal resources in order to recover from stress (Hobfoll 1989).

Based on the notion of internal and external resources, Westman and her colleagues employed a series of studies to investigate the impact of vacation on burnout (Westman and Eden 1997; Westman and Etzion 2001, 2002; Westman, Etzion, and Gattenio 2008). Their results indicated that taking vacations decreases respondents' job stress and burnout. In a similar vein, Sonntag and Fritz (2007) demonstrated that vacation recovery experiences (such as psychological detachment from work, relaxation experience, challenging experience, and perceived control during vacation) can contribute to employees' mental and physical health by providing internal and external resources (Fritz and Sonntag 2006; Sonntag and Fritz 2007).

Empirical Findings of Travel Benefits

As a result of an extensive review of the literature, a total of 29 articles involving testing travel benefits were identified. As shown in Table 1, most studies were interested in whether taking a vacation can contribute to individuals' perceived

health and psychological well-being. With only a few exceptions (Milman 1998; Tarumi, Hagihara, and Morimoto 1998), the health and wellness benefits of travel were demonstrated across different samples (such as senior travelers, company employees, university faculty and staff members, individuals with disabilities, and patients and their carers) and different geographical locations.

Nearly half of the studies in Table 1 ($n = 14$) adopted pre-test-posttest designs. In these studies, researchers measured individuals' perceived health and psychological well-being before and after a vacation, and vacation effects were tested by comparing two measures of perceived health and wellness. In order to understand whether vacation effects diminish after a vacation, a number of studies employed at least one measure after individuals were back from their vacations (de Bloom et al. 2010; de Bloom et al. 2011; Etzion 2003; Kühnel and Sonntag 2011; Nawijn et al. 2010; Westman and Eden 1997). The results suggest that vacation effects last for about two to three weeks (de Bloom et al. 2010; de Bloom et al. 2011; Etzion 2003; Westman and Eden 1997), while under certain circumstances, vacation effects might persist for only a few days (de Bloom 2011; Nawijn et al. 2010).

Moreover, previous studies have examined whether vacation satisfaction and vacation experiences are associated with perceived psychological well-being after taking a vacation. As mentioned before, based on bottom-up spillover theory, a number of studies have tested and provided evidence that satisfaction with leisure travel services leads to an increase in overall life satisfaction (Lounsbury and Hoopes 1986; Neal, Sirgy, and Uysal 1999; Neal, Uysal, and Sirgy 2007; Sirgy et al. 2011).

This association between vacation experience and perceived wellness has been corroborated by other studies. For example, Neal, Uysal, and Sirgy (2007) and Sirgy et al. (2011) have demonstrated that positive trip reflections (such as perceived freedom of control, and challenging experiences) might contribute to overall life satisfaction. Likewise, it has been shown that vacation recovery experiences (such as psychological detachment from work, relaxation experience, challenging experience, and perceived control during vacation) might positively influence perceived wellness (Fritz and Sonntag 2006; Sonntag and Fritz 2007).

Regarding vacation outcomes, most studies have been interested in perceptions, such as perceived health and psychological well-being, while physiological measures have been adopted by only a couple of studies (Tarumi Hagihara, and Morimoto 1998; Toda et al. 2004). For example, Tarumi Hagihara, and Morimoto (1998) attempted to examine the association between work stress and frequency of vacationing among 551 male, white-collar workers. Their results indicated that frequency of vacationing had a negative effect on the psychological measures of stress, while the relationship between vacationing and the physiological measure of stress was not significant. Toda et al. (2004) used saliva samples from 40 women to test whether people can release stress

Table 1. A summary of studies on tourism benefits.

Author	Pretest– Posttest Design	Location	Respondent	Hypothesis ^a	Result ^b
Lounsbury and Hoopes (1986)	Yes	USA	128 employees	Vacation → Job performance and life satisfaction (↑) Vacation satisfaction → Life satisfaction (↑) Vacation satisfaction → Job performance (↑)	Yes Yes
Westman and Eden (1997)	Yes	Israel	76 clerks	Vacation → Burnout (↓) Fade-out → 3 weeks Duration of trip → Vacation effect (↑)	Yes No
Tarumi, Hagihara, and Morimoto (1998)	No	Japan	551 employees	Vacation → Perceived health (↑) Vacation → Physiological measures of health (↑)	Yes No
Milman (1998)	Yes	USA	124 senior travelers	Vacation activities → Psychological well-being (↑) Vacation experience → Psychological well-being (↑)	No No
Neal, Sirgy, and Uysal (1999)	No	USA	373 university employees	Vacation satisfaction → Life satisfaction (↑)	Yes
Gump and Matthews (2000)	No	USA	12388 men at high risk for heart disease	Vacation → Health risk (↓)	Yes
Westman and Etzion (2001)	Yes	Israel	87 employees	Vacation → Absenteeism and burnout (↓)	Yes
Westman and Etzion (2002)	Yes	Israel	57 business travelers	Vacation → Stress and burnout (↓)	Yes
Wei and Milman (2002)	No	USA	300 senior travelers	Vacation activity → Psychological well-being (↑)	Yes
Gilbert and Abdullah (2002)	Yes	UK	355 holiday takers & 249 non-holiday takers	Expectation about vacation → Life satisfaction (↑)	Yes
Strauss-Blasche, Ekmekcioglu, and Marktl (2002)	Yes	Austria	53 employees	Vacation → Perceived health (↑) Vacation → Psychological well-being (↑) Vacation → Recuperation (↑) Work load after vacation → Vacation effect (↓)	Yes Yes Yes Yes
Cleaver and Muller (2002)	No	Australia	356 senior travelers	Subjective age during vacation → Trip activities (↑) Subjective age during vacation → Subjective well-being (↑)	Yes Yes
Etzion (2003)	Yes	Israel	110 employees	Vacation → Burnout and job stress (↓) Fade-out → 3 weeks Duration of trip → Vacation effect (↑)	Yes No
Toda et al. (2004)	No	Japan	50 women	Vacation → Physiological measures of health (↑)	Yes
Gilbert and Abdullah (2004)	Yes	UK	355 holiday takers and 249 non-holiday takers	Vacation → Perceived health (↑) Vacation → Subjective well-being (↑)	Yes
Neal, Uysal, and Sirgy (2007)	No	USA	815 adult consumers of travel services	Vacation satisfaction and experience → Life satisfaction (↑) Duration of trip → Vacation effect (↑)	Yes Yes
Strauss-Blasche et al. (2005)	No	Austria	239 employees	Vacation → Exhaustion (↓) Vacation → Recuperation (↑)	Yes Yes
Fritz and Sonnentag (2006)	Yes	Germany	233 nonacademic university employees	Vacation and vacation experience → Perceived health (↑) Vacation and vacation experience → Burnout (↓) Vacation → Job performance (↑)	Yes Yes No
McConkey and McCullough (2006)	No	North Ireland	152 family carers for individuals with learning disability	Vacation → Subjective well-being (↑)	Yes
Pols and Kroon (2007)	No	Netherland	11 individuals with mental health problems	Vacation → Subjective well-being (↑)	Yes

(continued)

Table 1. (continued)

Author	Pretest– Posttest Design	Location	Respondent	Hypothesis ^a	Result ^b
Mactavish et al. (2007)	No	Canada	15 family carers for individuals with intellectual disability	Vacation → Subjective well-being (↑)	Yes
de Bloom et al. (2010)	Yes	Netherland	96 respondents	Vacation → Perceived health and subjective well-being (↑) Vacation → Stress (↓) Vacation → Sleep quality (↑) Fade out → 2 weeks	Yes Yes No
Nawijn et al. (2010)	No	Netherland	1530 Panelists	Vacation → Perceived health (↑) Fade-out → Vacation effect (↓)	Yes Yes
McCabe, Joldersma, and Chunxiao (2010)	Yes	UK	300 low income families	Vacation → Subjective well-being (↑)	Yes
de Bloom et al. (2011)	Yes	Netherland	176 employees	Vacation → Perceived health and subjective well-being (↑) Negative incidents → Perceived health and well-being (↓) Fade-out → 2 weeks	Yes Yes
de Bloom et al. (2011)	Yes	Netherland	93 employees	Vacation → Perceived health and subjective well-being (↑) Fade-out → 3 days	Yes
Kühnel and Sonnentag (2011)	No	Germany	131 German teachers	Vacation → Exhaustion (↓) Fade-out → 1 month	Yes
Sirgy et al. (2011)	No	South Africa	264 adults	Vacation satisfaction and experience → Life satisfaction (↑)	Yes
Dolnicar, Yanamandram, and Cliff (2012)	No	Australia	1,000 panelists	Vacation → Subjective well-being (↑)	Yes

a. ↑ denotes positive effect; ↓ denotes negative effect.

b. Yes denotes hypothesis was demonstrated, while No denotes hypothesis was not demonstrated.

on a three-day trip. Their results indicated that even a short trip could contribute to stress relief.

Hypotheses Testing

Based on previous findings pertaining to travel benefits, a total of eight hypotheses were further examined, including four hypotheses about the global effects of vacationing (it improves quality of life, improves health, reduces stress, and helps one stay active and live a healthy lifestyle) and four hypotheses about the effects of vacationing on different groups of people (general public, employees, seniors, and individuals who are mostly excluded from taking a vacation).

Hypothesis 1: Taking vacations improves feelings of one's quality of life and happiness.

As mentioned before, the positive effects of vacationing on perceived quality of life and happiness have been shown

by a number of studies (Cleaver and Muller 2002; Dolnicar, Yanamandram, and Cliff 2012; Gilbert and Abdullah 2004; Lounsbury and Hoopes 1986; Mactavish et al. 2007; McConkey and McCullough 2006; Neal, Sirgy, and Uysal 1999; Neal, Uysal, and Sirgy 2007; Pols and Kroon 2007; Sirgy et al. 2011; Strauss-Blasche, Ekmekcioglu, and Marktl 2000, 2002; Strauss-Blasche et al. 2004a, 2004b; Wei and Milman 2002). However, it has also been shown that perceived happiness might fluctuate before, during, and after a vacation (de Bloom et al. 2009; Nawijn 2011).

As shown in Figure 2, people on vacation might go through four stages, including anticipation, experience, beneficial, and fade-out. In the anticipation stage, it is believed that people might feel happier than usual before their vacation because they expect to have positive experiences (Gilbert and Abdullah 2002; Nawijn 2010). In the experience stage, perceived happiness might be further lifted by a number of factors during vacation, including positive trip reflection (Neal, Uysal, and Sirgy 2007; Sirgy et al. 2011), recovery experiences (Fritz and Sonnentag 2006; Sonnentag and Fritz

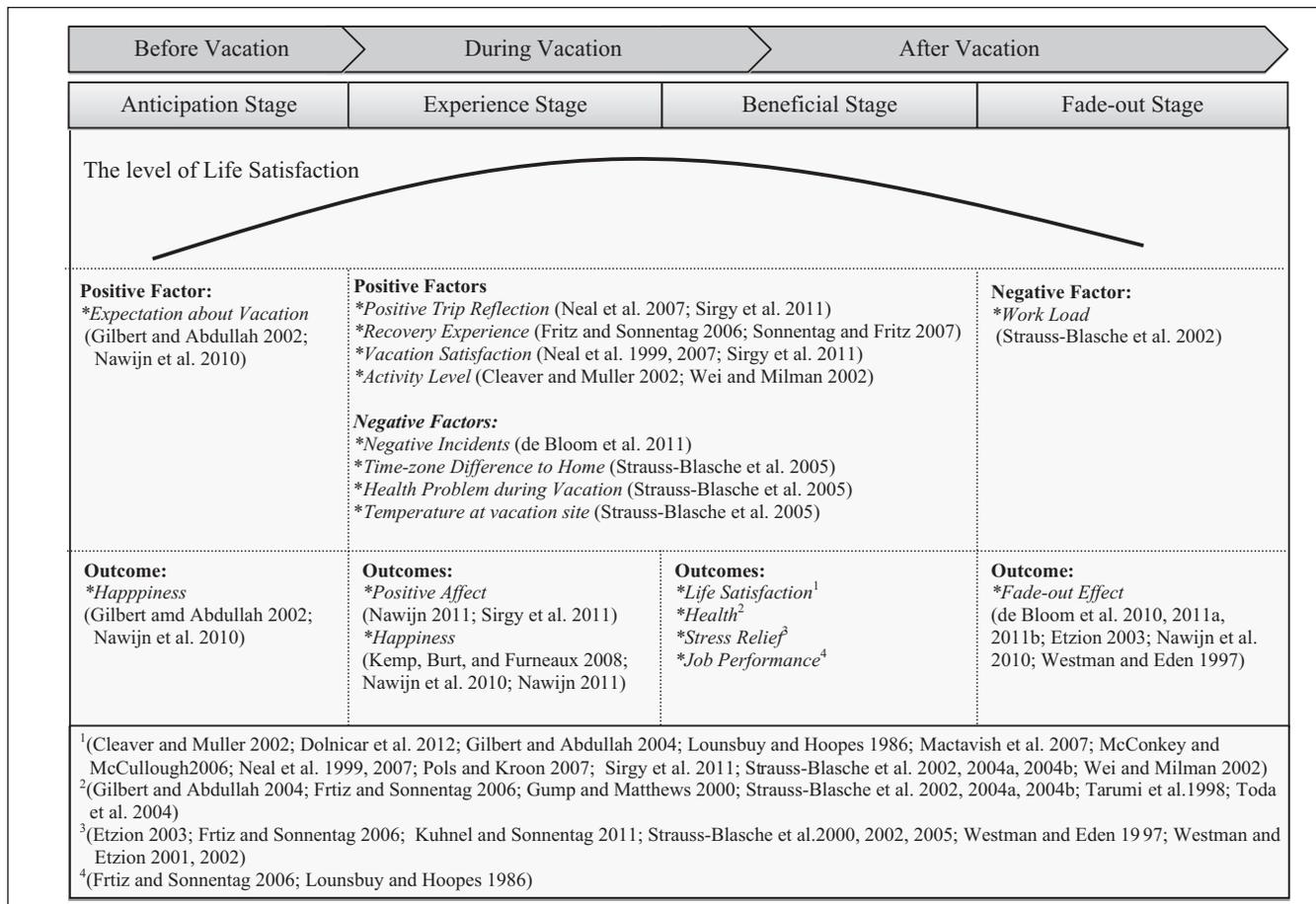


Figure 2. Factors influencing vacation outcomes.

2007), vacation satisfaction (Neal, Sirgy, and Uysal et al. 1999; Neal, Uysal, and Sirgy 2007; Sirgy et al. 2011), and activity level during vacation (Cleaver and Muller 2002; Wei and Milman 2002). However, it has also been demonstrated that perceived happiness might be negatively influenced by negative incidents during vacation (de Bloom et al. 2011) including: time-zone differences (Strauss-Blasche et al. 2005), health problems (Strauss-Blasche et al. 2005), and the temperature at the vacation site (Strauss-Blasche et al. 2005).

People also often feel happier after taking a vacation (Cleaver and Muller 2002; Dolnicar, Yanamandram, and Cliff 2012; Gilbert and Abdullah 2004; Lounsbury and Hoopes 1986; Mactavish et al. 2007; McConkey and McCullough 2006; Neal, Sirgy, and Uysal 1999; Neal, Uysal, and Sirgy 2007; Pols and Kroon 2007; Sirgy et al. 2011; Strauss-Blasche, Ekmekcioglu, and Marktl 2000, 2002; Strauss-Blasche et al. 2004a, 2004b; Wei and Milman 2002). However, in the fade-out stage, the positive effects of vacationing on perceived wellness might be gradually diminished by one's work load in the days and weeks after a vacation (Strauss-Blasche, Ekmekcioglu, and Marktl 2002). It has been found that vacation effects might last for only a few

days (de Bloom et al. 2011; Nawijn et al. 2010), two to three weeks (de Bloom et al. 2010; de Bloom et al. 2011; Etzion 2003; Westman and Eden 1997), or no more than one month (Kühnel and Sonnentag 2011).

Hypothesis 2: Taking vacations improves physical health.

It has been demonstrated that people often feel that they are healthier after a vacation (Gilbert and Abdullah 2004; Fritz and Sonnentag 2006; Gump and Matthews 2000; Strauss-Blasche, Ekmekcioglu, and Marktl 2000, 2002; Strauss-Blasche et al. 2004a, 2004b). Previous studies have primarily focused on perceived health as a vacation outcome, while physiological measures of health have been rarely adopted. Among a few exceptions, Gump and Matthews (2000) examined the association between frequency of vacationing and health risks among 12,388 men at high risk for heart disease in the United States. They found that individuals who traveled more frequently had fewer nonfatal cardiovascular events and lower risk factors for coronary heart disease. However, more evidence is needed in order to determine if vacations truly improve physical health.

Hypothesis 3: Taking vacations reduces stress.

This hypothesis has been supported by a number of studies (Etzion 2003; Fritz and Sonnentag 2006; Kühnel and Sonnentag 2011; Strauss-Blasche, Ekmekcioglu, and Marktl 2000, 2002; Strauss-Blasche et al. 2005; Westman and Eden 1997; Westman and Etzion 2001, 2002). Specifically, it has been demonstrated that taking a vacation can lead to decreases in work stress (de Bloom et al. 2010; Etzion 2003; Westman and Etzion 2002), burnout (Etzion 2003; Fritz and Sonnentag 2006; Westman and Eden 1997; Westman and Etzion 2001, 2002), exhaustion (Kühnel and Sonnentag 2011; Strauss-Blasche et al. 2005), and absenteeism (Westman and Etzion 2001). However, the positive effects of vacationing on stress relief might also gradually fade out because of one's work load after a vacation (Strauss-Blasche, Ekmekcioglu, and Marktl 2000). As mentioned before, vacation effects might be totally diminished within a few days (de Bloom et al. 2011; Nawijn et al. 2010) and they might last as long as one month (Kühnel and Sonnentag 2011).

Hypothesis 4: Taking vacations helps one stay active and live a healthy lifestyle.

To date there appears to be a lack of evidence to support this hypothesis. Instead, it has been shown that active people are more likely to go traveling and participate in more activities during vacation, resulting in higher life satisfaction (Cleaver and Muller 2002; Wei and Milman 2002). In other words, vacations might not lead to an active and healthy lifestyle, but people who live in an active and healthy lifestyle are more likely to travel more. Thus, research is needed in order to better understand if taking vacations helps one to stay active and live a healthy lifestyle.

Hypothesis 5: Some people suffer from vacation sickness.

Even though it has been found that people often feel happier, healthier, and more relaxed after a vacation, previous studies have suggested that not everyone benefits from taking vacations (Aronsson and Gustafsson 2005; Sillanpää 1991; Sillanpää and Koivusilta 1989; Van Heck and Vingerhoets 2007; Vingerhoets, Van Huijgevoort, and Van Heck 2002). For example, based on a representative sample of Swedish workers ($n = 2,536$), Aronsson and Gustafsson (2005) found that only 15 percent felt recuperated after a vacation. It has also been demonstrated that some people regularly suffer from headaches during vacation (Sillanpää 1991; Sillanpää and Koivusilta 1989). According to Vingerhoets, Van Huijgevoort, and Van Heck (2002), these people suffer from "leisure sickness," and feel particularly ill during weekends and vacations.

Hypothesis 6: Employees benefit from taking vacations.

Scholars in organizational behavior and applied psychology have paid extensive attention to employees' work-life balance. They have demonstrated that taking a vacation can lead to a decrease in work stress (de Bloom et al. 2010; Etzion 2003; Westman and Etzion 2002), burnout (Etzion 2003; Fritz and Sonnentag 2006; Westman and Eden 1997; Westman and Etzion 2001, 2002), exhaustion (Kühnel and Sonnentag 2011; Strauss-Blasche et al. 2005), and absenteeism (Westman and Etzion 2001) and lead to increases in recuperation (Strauss-Blasche, Ekmekcioglu, and Marktl 2002; Strauss-Blasche et al. 2005) and job performance (Fritz and Sonnentag 2006; Lounsbury and Hoopes 1986). In other words, the hypothesis that employees benefit from taking vacations is generally supported by previous studies. However, previous studies have also suggested that taking vacations only has short-term positive effects on employees (Etzion 2003; de Bloom et al. 2010; de Bloom et al. 2011; Westman and Eden 1997). Moreover, there is a lack evidence to demonstrate that vacation outcomes produce favorable financial results for business owners.

Hypothesis 7: Seniors benefit from taking vacations.

Senior travelers have also been the focus of several studies (Cleaver and Muller 2002; Milman 1998; Wei and Milman 2002). For example, Milman (1998) was among the first to examine the effect of vacationing on senior travelers' psychological well-being. His results showed that vacation experience and the levels of activity during vacation had no effect on perceived wellness after vacation. He attributed the nonsignificant effects to the small sample size ($n = 124$) and the homogenous nature of the sample (Milman 1998).

Wei and Milman's (2002) subsequent work (using a sample of 300) provided evidence that senior travelers who more actively participate in a variety of activities during a vacation might benefit from vacationing. Likewise, Cleaver and Muller (2002) examined the concept of subjective age among senior travelers. They found that senior travelers who perceived themselves as younger more actively participated in a variety of activities during vacation and likely benefited more from taking a vacation. Therefore, it has been somewhat supported that seniors benefit from taking vacations by participating in more activities during their vacations.

Hypothesis 8: Individuals who are mostly excluded from vacationing benefit from taking vacations.

It has been demonstrated that vacations have positive effects on those who are mostly excluded from vacationing, such as low-income families (McCabe, Joldersma, and Li 2010), patients (Gump and Matthews 2000; Pols and Kroon 2007), and individuals with a disability and their family caretakers (Mactavish et al. 2007; McConkey and McCullough 2006; Strauss-Blasche et al. 2004a). Specifically, McCabe,

Joldersma, and Li (2010) conducted a study in the United Kingdom to examine whether low-income families benefit from taking a rare vacation. Their results indicated that family members might benefit from vacationing in terms of gaining new experiences, being able to cope with difficult family situations, and having a chance to spend quality time together as a family. McCabe, Joldersma, and Li (2010) concluded that policy makers should consider providing financial support for low-income families to take regular vacations.

Individuals with health problems and/or disabilities have also drawn attention from scholars in health science. For example, Gump and Matthews (2000) examined the association between frequency of vacationing and health risks among 12,388 men at high risk for heart disease in the United States. They found that individuals who traveled more frequently had fewer nonfatal cardiovascular events and lower risk factors for coronary heart disease. Furthermore, based on their interviews with 11 individuals with mental health problems in the Netherlands, Pols and Kroon (2007) found that mental health patients might benefit from taking a vacation in terms of new perceptions of self-identity, skill development, and social relations. Likewise, it has been found that both individuals with disabilities (McConkey and McCullough 2006) and low-income families could benefit from taking a vacation.

Recommendations for Future Research

In summary, previous studies on the health and wellness benefits of travel experiences have shown that people often feel happier (Dolnicar, Yanamandram, and Cliff 2012; Neal, Uysal, and Sirgy 2007; Sirgy et al. 2011), healthier (Gilbert and Abdullah 2004; Fritz and Sonnentag 2006; Strauss-Blasche, Ekmekcioglu, and Marktl 2000), and more relaxed (Etzion 2003; Kühnel and Sonnentag 2011; Westman and Etzion 2002) after a pleasure trip. However, the positive effects of travel experiences have been found to gradually diminish in the days and weeks after a vacation (de Bloom et al. 2009; Nawijn et al. 2010; Strauss-Blasche, Ekmekcioglu, and Marktl 2002). Therefore, to date there appears to be lack of evidence to demonstrate the long-term effect of vacationing. There is also lack of research demonstrating the positive effect of travel experiences on physical health. It has further been found that not everyone benefits from taking vacations in that some people regularly suffer from sickness during weekends and vacations (Aronsson and Gustafsson 2005; Sillanpää 1991; Van Heck and Vingerhoets 2007). However, the psychological and social factors contributing to “vacation sickness” are still unknown.

Beyond the global effects of vacationing, previous studies have also examined the effects of vacationing on different groups of people, including (1) employees, (2) seniors, and (3) individuals who are mostly excluded from taking a vacation. Research on employees has found that taking a vacation can lead to a decrease in work stress, burnout, exhaustion,

and absenteeism (de Bloom et al. 2010; Etzion 2003; Kühnel and Sonnentag 2011; Westman and Etzion 2001). However, these effects have been also found to be short-term (Etzion 2003; de Bloom et al. 2010; Westman and Eden 1997). Moreover, there is lack of evidence to demonstrate that vacation outcomes improve employees’ health and further produce favorable financial results for business owners.

Regarding senior travelers, a few studies have revealed that senior travelers who perceived themselves as younger tended to more actively participate in a variety of activities during vacation and likely benefited more from taking a vacation (Cleaver and Muller 2002; Wei and Milman 2002). Conversely, no evidence has been found that taking vacations helps improve seniors’ health. However, a number of studies have demonstrated that vacations have positive effects on low-income families, patients, and individuals with a disability and their family caregivers (Gump and Matthews 2000; Mactavish et al. 2007; McCabe, Joldersma, and Li 2010).

Based on these findings, recommendations for future research on the health and wellness benefits of travel experiences are suggested. These recommendations include the best areas for immediate research as well as areas for near-future research.

Recommendations for Immediate Research

A total of four areas for immediate research are identified, including (1) travel benefits and persuasion, (2) the health benefits of travel, (3) vacation sickness, and (4) travel benefits for senior travelers.

Regarding the first area, previous findings have demonstrated that taking vacations help people to feel happier, healthier, and more relaxed. However, it remains unclear whether people are aware of the benefits of travel and how their awareness influences their travel behavior. Tourism scholars and practitioners have paid extant attention to travel motivations and purchase intentions related to tourist destinations or services (such as cruises, hotels, or resorts), but they have not extensively examined their perceptions of benefits. Therefore, it is of interest to examine why some people purchase more leisure travel services in general (i.e., spend more money during vacations, spend more time in tourist destinations, or go on a vacation more frequently) than others.

In particular, future research is recommended to investigate whether and how the amount of leisure travel services purchased by an individual is influenced by his or her perceived benefits of travel. This investigation should help to answer the question – whether the travel industry can encourage individuals to purchase more travel services by convincing them that taking vacations is beneficial.

Further, more research is needed to examine whether taking vacations helps people to “become healthier” not just “feel healthier.” Therefore, the health benefits of travel have

been specified as a second area for immediate research. Even though the positive effects of vacationing on perceived health have been demonstrated by a number of studies (Gilbert and Abdullah 2004; Fritz and Sonnentag 2006; Strauss-Blasche, Ekmekcioglu, and Marktl 2000, 2002; Strauss-Blasche et al. 2004a, 2004b), there is a lack of evidence to show that people actually become healthier after a vacation. Among a few exceptions, Tarumi, Hagihara, and Morimoto (1998) and Toda et al. (2004) have adopted physiological measures to assess the benefits of travel, while the focus in their research was “stress” rather than “health.” Therefore, more evidence is needed to demonstrate the association between leisure travel and health. Future research is recommended to examine the effect of vacationing on health, particularly with the use of physiological measures of health, such as blood pressure, serum cholesterol, body mass index, and salivary cortisol (Ferrie et al. 2002; Pruessner, Hellhammer, and Kirschbaum 1999)

Moreover, previous studies have found that some people regularly feel ill during weekends and vacations. Van Heck and Vingerhoets (2007) postulated that people suffering from vacation sickness are unable to detach themselves from their work and feel relaxed during vacations. However, it is recommended to further examine the psychological and social factors contributing to vacation sickness.

Finally, previous studies have shown that seniors might benefit from taking vacations by participating in more activities during vacation (Cleaver and Muller 2002; Milman 1998; Wei and Milman 2002). However, more studies are needed to examine how senior travelers can benefit from taking vacations, such as the effects of vacationing on improving subjective wellness and family relationships as well as on lowering mortality rates and risk factors associated with diseases.

Recommendations for Near-Future Research

A couple of areas for near-future research are also identified based on the comprehensive review of the literature. As compared to the areas for immediate research, the areas for near-future research are more time-consuming and expensive to conduct. These areas of study include the long-term health benefits of travel as well as the long-term benefits of travel for employees and their organizations.

Regarding the long-term health benefits of travel, Gump and Matthews (2000) conducted a longitudinal study to examine the association between frequency of vacationing and health risks among 12,388 men at high risk for heart disease. They found that individuals who traveled more frequently had fewer nonfatal cardiovascular events and lower risk factors for coronary heart disease. They argued that one potential role of leisure travel in improving health is that taking vacations can help people to relax. However, Gump and Matthews (2000) also found people with higher social economic status are generally healthier, while they also have

more money to travel. Thus, more research is needed to examine whether leisure travel can contribute to lowering mortality rates or risk factors for different diseases.

Further, it has been shown that taking vacations can help employees to reduce work stress and burnout (de Bloom et al. 2010; Etzion 2003; Fritz and Sonnentag 2006; Westman and Etzion 2002), resulting in decreases in absenteeism (Westman and Etzion 2001) and increases in job performance (Fritz and Sonnentag 2006; Lounsbury and Hoopes 1986). However, it has also been found that positive vacation outcomes often last for less than one month (Etzion 2003; de Bloom et al. 2010, 2011; Westman and Eden 1997). Therefore, future research is recommended to further examine whether and how employees can benefit from taking vacations. For example, it is of interest to study whether employees who travel more frequently have a more satisfactory life, are healthier, or have higher job performances than their coworkers who travel less frequently. This investigation should help business owners to decide the potential benefits that offering more vacation time could have on their employees.

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Author Biographies

Chun-Chu Chen is an Instructor in the Department of Recreation, Park & Tourism Management at the Pennsylvania State University. His research interests include travel benefits and tourism marketing.

James F. Petrick is a full professor, research fellow, and the chair of graduate studies in the Department of Recreation, Park & Tourism Sciences at Texas A&M University. His research interest focuses on exploring the applicability of marketing and psychology principles in the context of leisure/tourism services.