Website Marketing Communication in Health Tourism: 
A Content Analysis of Website Attributes of Thermal 
Tourism Facilities in Turkey*

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The aim of this exploratory study is to analyze the effectiveness of website communications regarding thermal tourism and to evaluate the website attributes of thermal tourism facilities in Turkey. In order to achieve this aim, seven main categories (contact information, general information, facility information, thermal/medical and wellness services information, surrounding area information, booking and external contracts information, and technical items) and 55 sub-items are identified. Then websites are analyzed with a content analysis method. One hundred and sixty four thermal facilities in Turkey could be listed and accepted as the population. Systematic sampling method was used with a sample size of 33 thermal facilities. After the frequency analysis, results showed that most of the thermal facilities do not have an efficient website management in Turkey. Although official websites are very critical tools for effective marketing communication, thermal facilities are utilizing only a small potential of their websites.

Keywords: website marketing communication, health tourism, thermal facilities, website attributes, content analysis

Introduction

Today, one of the main reasons that motive individuals for tourism is health. Through the centuries, for treating the diseases, people have utilized natural methods in which thermal springs have been most frequently used. From time immemorial, utilities of thermal springs are known for various diseases. Thermal tourism is a tourism type which takes place in locations with waters containing useful minerals that outcrop naturally at a certain temperature. Thermal tourism constitutes the main frame of health tourism in Turkey which is the 7th richest country in the world and the richest country in Europe in terms of thermal springs (Türkiye Sağlık Turizmi Derneği, 2017). Besides, many factors such as existing geographical position, transformations in health policies in which importance of health tourism is increasing, growing interest in the quality of health care services, lower health care prices and waiting time by comparison with the other countries turn Turkey into an attraction center of health tourism. In order to improve health tourism in Turkey, there are positive developments such as increasing the number of thermal facilities and their capacities by thermal cure centers

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and clinical hotels, and opening hospitals with big bed capacities. However, good marketing activities are crucial for attracting more domestic and foreign tourists.

In today’s world, as a result of the incredible development of information technologies, individuals can access all the desired information from various channels. These individuals are highly sophisticated and organizations should be very careful about their marketing communications with them. If their marketing communication is not as effective as it should be, there is no chance for informing and convincing target markets and it does not matter how perfect the organization services are. So countries, relevant institutions and organizations that aim to develop health tourism should use various channels to communicate the related activities. In accordance with this purpose, besides traditional channels, social media and official websites are vital for integrated marketing communications. This is the only possible way of retaining current customers and acquiring new customers in all industries including tourism industry.

Literature Review

Thermal Tourism

Health tourism is growing globally; because of the aging of the populations, changing lifestyles, and the growing range of products on the health tourism market (Lončarić, Bašan, & Jurković, 2013). Health tourism is a visit that is made by an individual from his/her own country to another country to receive protective, therapeutic, rehabilitative, and health-promoting services. Health tourism is an industry that allows health institutions to grow by utilizing the potential mobility of international patients. Health tourism includes the following different types such as thermal health tourism, medical tourism, elderly tourism, and disabled tourism ( Sağlık Bakanlığı, Sağlık Turizmi Koordinasyon Kurulu, 2017b).

In Turkey, The Prime Ministry State Planning Organization carries out planning and promotion activities related to health tourism. The Ministry of Culture and Tourism is a public institution that makes the rules, controls and guides the direct services of the tourism industry such as accommodation and travel. The Ministry of Health is responsible for the establishment of health institutions, the training and employment of health personnel, and the supervision of various public health services units. These two ministries need to work in coordination to provide high-quality and effective health services for tourists. Also, these works are included in the development and investment plans maintained by the State Planning Organization (Çiçek & Avderen, 2013).

At present, the main type of health tourism in Turkey is thermal tourism. However, thermal tourism in the world is a part of the wider tourism category called “wellness”. Today, wellness tourism, which is a sub-category of health tourism, is made up of different activities such as spa, massage, beauty/body care, consumption of healthy food, and physical exercises. The growth of the thermal industry can be seen as the most obvious response to a need for physical rest rooted in human nature in a changing and more complex global context. This idea is demonstrated by the Tourism Wellness Economy 2014 report, where thermal tourism is considered as a fundamental component of wellness tourism with a 41% of the total (Silvestri, Aquilani, & Ruggieri, 2017). Nowadays, health tourism facilities are being named as spa & wellness facility, health & wellness facility, spa, thermal facility, thermal cure center/hotel, rehabilitation center, health and beauty center, etc., and all these large numbers of terms are the results of the interest and demand for this area. The increase in demand for thermal facilities may be attributed to the developments in the thermal tourism industry which targets all age groups whether sick or healthy (Kültüre Turizm Bakanlığı, 2017b).
Thermal tourism is a health care service that is often accompanied by applications such as physical therapy rehabilitation, exercise, psychotherapy, diet under the physician supervision and program to provide a positive contribution to human health along with environmental and climate factors in the thermal waters region. According to General Directorate of Mineral Research and Exploration, there are about 1,500 natural thermal water sources in Turkey that range from 20ºC to 110ºC in temperature, ranging from 2 to 500 liters. When the temperature degrees and flows of the natural thermal water resources are considered, it can be seen that thermal health tourism capacity is high in sizes which exceeds 700,000 beds in Turkey (Sağlık Bakanlığı, Sağlık Turizmi Koordinasyon Kurulu, 2017a). Services offered to customers in thermal facilities can be classified into four categories as accommodation services, cure center (health & therapy) services, recreation (entertainment) services, and food & beverage services (Aylan, Arpacı, & Celiloğlu, 2016).

Thermal tourism aims at increasing the health of the individuals unlike other types of tourism. The basis of these activities is both an effort to achieve a healthy life and a physical and mental renewal of the individuals in their free time. It is possible for the thermal tourism facilities to meet the health and/or recreational needs of tourists (Kement & Batga, 2016). Thermal facilities have been established in places where the thermal spring water is located and some kinds of clinical services in treatment centers are being supplied. In this respect, thermal facilities differ from accommodation facilities. The characteristics that differentiate thermal facilities from other tourism facilities are listed below (Avcikut, Giritlioglu, & Sahin, 2011):

1. Average length of stay is longer than other types of facilities;
2. Thermal facilities comprise cure and therapy centers;
3. Elder, disabled and/or therapy purposed customers generally stay at thermal facilities;
4. Thermal facilities can only be built next to the thermal sources;
5. Demand for thermal facilities increases generally in winter and thermal facilities are giving service the whole year.

Although, Turkey has many advantageous features such as its geographical position, being a touristic country, its advanced technology and high-quality health services; in Turkey, only 10% of the thermal resources are being used for health tourism (Sağlık Bakanlığı, Sağlık Turizmi Koordinasyon Kurulu, 2017a). According to Akbulut (2010), the following factors are contributing to the inadequate usage of thermal resources in Turkey:

1. Geographical distribution of thermal sources;
2. Insufficient research on thermal sources;
3. Lack of evaluation on scientific studies;
4. Problems arising from the infrastructure and business activities;
5. Insufficient promotion;
6. Statistical insufficiency;
7. Prioritizing other tourism activities;
8. Lack of health personnel, equipment and hardware related to health.

Besides, despite the fact that Turkey has a very rich geothermal potential, therapeutic nature and thermal waters, Turkey has difficulties competing against European countries because of reasons like lack of quantity and quality of the facilities that provide cure park, cure center and accommodation facility integrity, non-establishment of thermal urban destinations at international standards and accredited thermal facilities. Ten million people visit Germany and Hungary, 8 million people visit Russia, 700,000 people visit France, 800,000 people visit Switzerland, 400,000 people visit Spain, and 12-13 million people visit only Beppu city in Japan...
for thermal tourism each year. For these reasons, it is aimed to increase Turkey’s market share and competitive force within the growing thermal tourism industry in the world (Kültür ve Turizm Bakanlığı, 2017b). Increasing the number of facilities that provide cure park, cure center and accommodation integrity at international standards will increase tourism revenue and number of tourists. Apart from the usage of thermal waters, yearlong facilities that have fitness, entertainment, recreation, and sports facilities should be established. It is also aimed to evaluate the modern health and recreational services and traditional Turkish spa and hammam (Turkish bath) cultures together in these facilities. Thus, creating a unique branding to Turkey on this field is being tried (Kültür ve Turizm Bakanlığı, 2017a).

One of the most important issues of thermal tourism is the scope and sustainability of promotional activities. Promotional activities made by thermal facilities are as important as promotional activities of public institutions. So, thermal facilities should create platforms that promote their services to their target markets. With the usage of the Internet, thermal hotels can promote their services to both domestic and international markets. In addition, the Internet is an important channel of distribution for consumers. Increasingly, consumers make their entire tourism product search and booking online. Therefore, they require flexible, individualized, accessible, interactive communication with tourism organizations, and this trend increases the importance of the content of thermal hotel websites (Avcikurt et al., 2011).

**Website Marketing Communication**

After the 1990s, direct marketing has become a more prominent tool in the marketing communication mix due to the technology that appeals customers personally and directly. There are now numerous opportunities to reach audiences with the Internet that is used to contact with the customers and the other shareholders (Fill & Jamieson, 2006). Internet which is available for 7 days 24 hours is one of the most active and critical communication tools with the enormous potential for marketing. Internet marketing offers various tools to attract customers and one of them is business website. All businesses aspire to have high web traffic on their official websites and to convert this high traffic to customers more importantly. This is the only possible way to fully and effectively utilize the potential of official websites (Madlenák, Madlenáková, Švadlenka, & Salava, 2015).

As a result of improved technologies, websites are one of the first information sources of today’s sophisticated customers who utilize and search for divergent website attributes based on their needs. Therefore, businesses have to create and manage websites that satisfy different customer needs in order to increase their success level. Companies can reap a greater harvest of websites when they better use interaction with customers. In order to enhance interactivity, website designs should be active, responsive, interactive, participatory, dynamic, and demonstrable. Also, utilitarian and hedonic dimensions of websites are equally and simultaneously critical in satisfying online customer needs. Websites should not only be designed to give information to convince customers for purchasing. Also, they should have tools to provide online experiential enjoyment with aspects such as interactivity and novelty (Huang, 2003).

The Internet enables tourists to receive the real-time updated and extensive information before their travel. So the Internet has an influential effect on tourists’ final choice of destination and facility. Therefore, information supply through destination websites and facility websites plays a substantial role in influencing tourists’ decisions and increasing actual arrivals (Kao, Louvieris, Powell-Perry, & Buhalıs, 2005). Wells, Valacich, and Hess (2011) stated that consumers can perceive a high-quality website as a signal of product quality. So businesses should develop high-quality commercial websites and get regular feedbacks on the
quality of their websites through consumer surveys. Website awards and recognition can provide external confirmation of website quality and further strengthen the credibility of websites. By the help of their websites, tourism facilities make a direct contact with their customers everywhere in the world and at any time and have a chance for better understanding customers’ needs with feedbacks (Law & Hsu, 2006).

Theoretical frameworks that evaluate website design and identify the key elements and principles of effective web design can be classified into two perspectives. In the first perspective, websites are seen as technology platforms to provide information to users and in the second perspective, websites are seen as channels to reach and serve consumers’ needs and wants (Persaud, Madill, & Rubaj, 2009). Park and Gretzel (2007) analyzed tourism-related website evaluation publications and they found out nine factors which are most commonly used as website success factors. These factors can be listed respectively as information quality, ease of use, security/privacy, responsiveness, customer service, interactivity, accessibility, navigation, and visual appearance. They also underlined the factors that are not considered in existing website evaluation research. For instance, they suggested cross-references to nearby attractions or events, suggested itineraries, featured products, recommendations, and technology integration to be considered in website evaluation studies. According to a research in tourism industry (Kao et al., 2005), information quality contributes to the website satisfaction more than system quality and the website satisfaction is positively correlated to the intention to reuse and recommendation of the website to other users.

Law and Hsu (2006) analyzed the perceptions of hotel website users on the importance of specific features on hotel websites. They found that reservations information is the most important hotel website dimension for online purchasers and facilities information, contact information, surrounding area information, and website management follow it respectively. In the same study, also online browsers’ perceptions are measured. For online browsers, facilities information is the most important website dimension; contact information, reservations information, surrounding area information, and website management follow it respectively.

Website quality factors influence customer beliefs and their behavioral intentions, so website quality is crucial for businesses. After a review of the literature, Hernández, Jiménez, and Martín (2009) found that website quality depends on factors such as system quality, information quality, service quality, delivery, speed, availability, reliability, attractiveness, content quality, navigation, appearance and multimedia, uniqueness, communication style, technical adequacy, product offerings, usability, perceived trust, navigation, responsiveness, security, privacy, accessibility, speed, information accuracy, interactivity, service quality, use of graphics and colors, ease of use, functionality, etc.. In fact, many of these factors can be classified under three main categories which are system quality, information quality, and service quality. Another classification is being made in two main categories as the content and the design of the website.

After a website content analysis, Lončarić et al. (2013) found that specialty hospitals for medical rehabilitation and health resorts in Croatia were not able to communicate well on their websites; since only the most basic institutions and services information were available and all other content elements are poorly represented. Moghavvemi, Ormond, Musa, Isa, Thirumoorthi, Mustapha, Kanapathy, and Chandy (2017) compared websites of hospitals promoting medical tourism services in Thailand, India, and Malaysia. They analyzed hospitals across five dimensions: hospital information and facilities, admission and medical services, interactive online services, external activities, and technical items. Results showed differences between the three countries but still they pointed to the need for hospital managers to improve their hospitals’ online presence and interactivity.
Methodology

Content analysis is “a research technique for the objective, systematic, and quantitative description of the manifest content of communication” (Zimmer & Golden, 1988, p. 269). Content analysis has both qualitative and quantitative types. If the researcher starts with identifying and quantifying certain words or content in text with the purpose of understanding the contextual use of them, this quantification is an attempt not to infer meaning, but rather, to explore usage. Analyzing the appearance of a particular word or content in textual material is referred to as manifest content analysis (Hsieh & Shannon, 2005).

In this quantitative study, manifest content analysis has been used, because this study focuses on counting the existence and frequency of specific words or content in the observed websites. To determine the content analysis categories of this study, we used other researches in the literature (Law & Hsu, 2006; Lončarić et al., 2013; Moghavvemi et al., 2017) and seven main categories are identified as contact information: general information, facility information, thermal/medical and wellness services information, surrounding area information, booking and external contracts information, and technical items. Because these categories include most of the items that existing and potential medical tourists tend to consider important as underlined in the literature by scholars. All the analyzed items under each category are represented in Table 1.

The aim of this exploratory study is to investigate the status of website communications regarding thermal tourism and to evaluate the website attributes of thermal tourism facilities in Turkey. In order to achieve this aim, a content analysis method has been applied. The application of content analysis has been common in tourism research and health studies especially in recent years (Lončarić et al., 2013).

Sample and Data Collection

Available thermal facilities in Turkey were collected from popular online tourism retailers\(^1\). After searching these websites, 164 thermal facilities in Turkey could be listed and we accepted this list as the population. Systematic sampling method was used; we selected every 5th thermal facility from the total list. As a result, the sample covered 33 thermal facilities and all of them have websites.

The analysis was performed between February 11, 2017 and February 28, 2017. By using the instrument, we observed the websites and coded all items as “existent” or “nonexistent” independently from each other. Then, after completing individual coding, we compared if there were any differences in those codes. This comparison showed that the percentage of agreement was 91.8% which means a high intercoder reliability which is a critical component of the content analysis. Although intercoder reliability does not ensure validity, when it is not present, the data cannot be considered valid (İnci, Sancar, & Bostancı, 2017). For the different codes, we checked websites together and discussed the differences to reach an agreement.

Analyses and Results

Websites of 33 thermal facilities in Turkey were assessed under seven main categories. Frequency analysis results are presented in Table 1, and then discussed in detail.

**Contact information.** The most commonly used contact information is telephone number (97.0%), followed by address (90.9%), e-mail address (81.8%), links to social networks (75.8%), and communication form (51.5%), respectively. Although some facilities added links to social networks, they were broken, so they are not counted as existent. Most commonly used social networks were Facebook, Twitter, and Youtube.

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Online survey (6.1%) and live support (6.1%) are very rare in the sample despite that these tools are very critical for improving customer satisfaction.

**General information.** Under this category, we tried to see how much the facility reflects its institutionalization for increasing customer trust. Results showed that most of the thermal facilities ignore this issue. Prevalence was as the following respectively: history of institution (36.4%), mission (24.2%), vision (21.2%), and information about owners or managers (9.1%).

Table 1

*Website Content Results*

<table>
<thead>
<tr>
<th>Item</th>
<th>f</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Address</td>
<td>30</td>
<td>90.9</td>
</tr>
<tr>
<td>2. Telephone number</td>
<td>32</td>
<td>97.0</td>
</tr>
<tr>
<td>3. E-mail address</td>
<td>27</td>
<td>81.8</td>
</tr>
<tr>
<td>4. Communication form</td>
<td>17</td>
<td>51.5</td>
</tr>
<tr>
<td>5. Online survey</td>
<td>2</td>
<td>6.1</td>
</tr>
<tr>
<td>6. Live support</td>
<td>2</td>
<td>6.1</td>
</tr>
<tr>
<td>7. Links to social networks (e.g., Twitter and Facebook)</td>
<td>25</td>
<td>75.8</td>
</tr>
<tr>
<td>General information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. History of institution</td>
<td>12</td>
<td>36.4</td>
</tr>
<tr>
<td>9. Information about owners or managers</td>
<td>3</td>
<td>9.1</td>
</tr>
<tr>
<td>10. Mission</td>
<td>8</td>
<td>24.2</td>
</tr>
<tr>
<td>11. Vision</td>
<td>7</td>
<td>21.2</td>
</tr>
<tr>
<td>Facility information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Information about board basis</td>
<td>19</td>
<td>57.6</td>
</tr>
<tr>
<td>13. General information about the facility</td>
<td>28</td>
<td>84.8</td>
</tr>
<tr>
<td>14. Room description</td>
<td>27</td>
<td>81.8</td>
</tr>
<tr>
<td>15. Facility photos</td>
<td>30</td>
<td>90.9</td>
</tr>
<tr>
<td>16. Facility videos</td>
<td>10</td>
<td>30.3</td>
</tr>
<tr>
<td>17. Room photos</td>
<td>31</td>
<td>93.9</td>
</tr>
<tr>
<td>18. Room videos</td>
<td>9</td>
<td>27.3</td>
</tr>
<tr>
<td>19. Information about food and drink services</td>
<td>23</td>
<td>69.7</td>
</tr>
<tr>
<td>20. Hotel location map</td>
<td>28</td>
<td>84.8</td>
</tr>
<tr>
<td>21. Customer comments</td>
<td>10</td>
<td>30.3</td>
</tr>
<tr>
<td>22. Information about transportation opportunities</td>
<td>8</td>
<td>24.2</td>
</tr>
<tr>
<td>Thermal/medical and wellness services information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Thermal/medical program information</td>
<td>19</td>
<td>57.6</td>
</tr>
<tr>
<td>24. Wellness program information</td>
<td>18</td>
<td>54.5</td>
</tr>
<tr>
<td>25. Price list of thermal/medical services</td>
<td>2</td>
<td>6.1</td>
</tr>
<tr>
<td>26. Price list of wellness services</td>
<td>5</td>
<td>15.2</td>
</tr>
<tr>
<td>27. Thermal/medical photos</td>
<td>26</td>
<td>78.8</td>
</tr>
<tr>
<td>28. Warnings about thermal/medical and wellness services usage</td>
<td>2</td>
<td>6.1</td>
</tr>
<tr>
<td>29. Wellness photos</td>
<td>29</td>
<td>87.9</td>
</tr>
<tr>
<td>30. Information about medical staff</td>
<td>6</td>
<td>18.2</td>
</tr>
<tr>
<td>31. Existence of attending physician</td>
<td>6</td>
<td>18.2</td>
</tr>
<tr>
<td>32. Existence of nurse</td>
<td>4</td>
<td>12.1</td>
</tr>
<tr>
<td>33. Existence of physiotherapist</td>
<td>2</td>
<td>6.1</td>
</tr>
<tr>
<td>34. Existence of laborant</td>
<td>2</td>
<td>6.1</td>
</tr>
<tr>
<td>35. Existence of electrotherapist</td>
<td>1</td>
<td>3.0</td>
</tr>
<tr>
<td>36. Existence of rehabilitation specialist</td>
<td>2</td>
<td>6.1</td>
</tr>
<tr>
<td>37. Existence of hydrotherapist</td>
<td>2</td>
<td>6.1</td>
</tr>
</tbody>
</table>
Facility information. Most common facility information on the observed websites were room photos (93.9%), facility photos (90.9%), hotel location map (84.8%), general information about the facility (84.8%), and room description (81.8%). Information about food and drink services (69.7%) and board basis (57.6%) had medium frequency. However, facility videos (30.3%), customer comments (30.3%), room videos (27.3%), and information about transportation opportunities (24.2%) were rare.

Thermal/medical and wellness services information. Although we focused on the thermal facilities (most of them also give wellness services), there was a shortage of information related to those services except wellness photos (87.9%) and thermal/medical photos (78.8%). A bit higher than half of the facilities presented thermal/medical (57.6%) and wellness program information (54.5%) and only a few of them announced their price list of thermal/medical services (6.1%) and wellness services (15.2%). Warnings about thermal/medical and wellness services usages are very critical, but just 6.1% of thermal facilities presented warnings on their websites. Likewise, information about medical staff (18.2%) was insufficient in most of the websites (existence of attending physician (18.2%), nurse (12.1%), physiotherapist (6.1%), laborant (6.1%), electrotherapist (3.0%), rehabilitation specialist (6.1%), and hydrotherapist (6.1%)). These results are surprising, because core competences of these facilities should depend on their thermal/medical and wellness services. In order to have a competitive advantage, they have to highlight these services.

Surrounding area information. The secondary intent of the thermal tourists may be visiting the surrounding area in which the thermal facility is located. However, less than half of the facilities considered providing information about the tourist attractions (42.4%) on their websites. General information about the destination (30.3%), surrounding photos (30.3%), transportation to destination (15.2%), information about weather condition (12.1%), and destination’s food and drink (9.1%) are even lesser.
**Booking and external contracts information.** Online reservation opportunity was provided by 60.6% of the analyzed facilities. Price information was found in 54.5% facilities while online payment opportunity was available in 42.4% of them. Time is a very important asset for today’s sophisticated customers. So, for the tourism facilities that are not able to provide online reservation and payment on their websites, there is a risk of missing customers who are not willing to search for the same facility from other sources. So at least, links to travel agencies should be available, but in the sample only 12.1% of thermal facilities provided this option for customers. Also, chance to make group reservation was very rare (6.1%). When the contracted health care providers were analyzed, it has been understood that very few facilities (3.0%) had this kind of contracts. Unfortunately, none of the thermal facilities had health insurance acceptance information on their websites.

**Technical items.** Proportion of thermal facilities’ websites with live (no broken) web links was 57.6% and this shows a high number of websites with broken links. Site map (24.2%) and site-wide search tool (6.1%) existences were low. These absences show that most of the websites are not user-friendly. Another important deficiency is about language options. Although it is impossible for a tourism facility to target only national tourists, only 48.5% of the thermal facilities had English language option on their websites. Even worse, non-English alternative language options were very rare (27.3%).

**Discussion and Conclusion**

This study analyzed the website usage of thermal facilities in Turkey, as a marketing communication tool. In total, 33 thermal facilities were selected by systematic sampling method and websites were evaluated on 55 items. According to the findings of the content analysis; 11 items (i.e., address, telephone number, e-mail address, links to social networks, general information about the facility, room description, facility photos, room photos, hotel location map, thermal/medical photos, and wellness photos) are common in the assessed websites. All the other 44 items are either rare or very rare.

Inside contact information, highest rates belong to telephone number and address information. History of institution (36.4%) is more frequent than mission, vision, and information about owners or managers under general information. Similarly, surrounding area information is inadequate in almost all the websites. These findings show similarity to the study of Lončarić et al. (2013).

Under facility information, facility and room photos appear in almost all the websites. So, it is clear that visuals play a significant role in website communications. Inside the booking and external contracts information, online reservation opportunity has the highest frequency (60.6%). This rate was 73.2% and 50% in the studies of Avcikurt et al. (2011) and Lončarić et al. (2013), respectively.

The rate of English language option availability is 48.5% in this study, while it was 49.3% in Avcikurt et al.’s (2011) study. Only 27.3% of the analyzed websites offer non-English language options in this study. If there is not an English language option on a website, also there is not an alternative language option (non-English). Çiçek and Avderen (2013) analyzed 47 thermal hotels from Central Anatolia Region and they found that only 36.2% of the hotels have informative brochures with alternative language options. All of these findings show that thermal facilities have problems in their marketing communications.

Under thermal/medical and wellness services information category, wellness photos (87.9%) and thermal/medical photos (78.8%) are the most frequent, respectively. Thermal/medical and wellness program information are existent in a bit more than half of the websites. However, price lists of thermal/medical and wellness services, warnings about using these services, and information about medical staff are rare. Çiçek and
Avderen (2013) researched the medical staff distributions in their study, and according to their findings, only 29.8% of the thermal hotels have attending physicians, 53.2% have nurses, 19.1% have physiotherapists, and 46.8% have masseurs and masseuses. If we evaluate these findings in terms of health tourism, it is quite obvious that most of the thermal facilities get out of date, because of ignoring the detailed health-based information in their websites. Moreover, according to the Republic of Turkey, Ministry of Health’s Regulation of Thermal (14th item):

In thermal and thalassotherapy facilities, employing attending physicians and medical staffs (with health education at a minimum high school level) is a must. Medical staffs must work as full time employees in these facilities. Attending physicians can work in more than one thermal and thalassotherapy facilities. (T. C. Başbakanlık Mevzuatu Gelişime ve Yayın Genel Müdürlüğü, 2001)

Certainly, it does not always mean that a thermal facility is not employing attending physicians and medical staffs, if such information does not exist on their websites. Nevertheless, providing more physicians and medical staff information on websites should be seen as a kind of corporate responsibility rather than a statutory obligation.

Although warnings about using thermal/medical and wellness services are very critical for patient safety (especially for pregnant women, cardiac patients, high blood pressure patients, asthma patients, etc.), such warnings exist in a few thermal facility websites. Regulation of Thermal (10th item) states that: “All treatment units must have flashing and/or audio alarm systems for emergency notification needs of alone patients under treatment” (T. C. Başbakanlık Mevzuatu Gelişime ve Yayın Genel Müdürlüğü, 2001), but we could not find any information on websites regarding this issue. In fact, respecting only related laws such as Regulation of Thermal and Health Practices Declaration is never sufficient for creating highly satisfied customers and safe services, so thermal facilities should go beyond the regulations for patient safety. For instance, tourists with infectious diseases should be considered and necessary medical screening should be made for both tourist/patient safety and the effectiveness of tourism. Also, providing full-time physicians will be very beneficial especially for emergent situations that are very probable in a health-based facility. Besides, individuals with chronic diseases, elder people, pregnant women, and children must be informed about the usage of thermal/medical and wellness services, this is a legal obligation also.

Another important issue is that none of the thermal facility website refers to health insurance acceptance information. Whereas Health Practices Declaration (Section: 2.4.4.J. Thermal Treatment, 3rd item) states that “People whose thermal treatment considered necessary (by a medical board report) can apply thermal facilities with Ministry of Health’s operating permission” (Sosyal Güvenlik Kurumu, 2013). Accordingly, Social Security Institution pays thermal treatment charges for patients who have a medical board report. This is a great opportunity for invigorating the domestic thermal tourism, so this issue should be underlined on the websites absolutely. Besides, if there is any this kind of opportunities for international tourists, also this opportunity should exist on the websites.

Avcikurt et al. (2011) analyzed thermal hotel websites in Turkey. According to their findings, nearly half of the thermal hotels in Turkey have websites; however, most of them are not well designed. In their sample, half of the thermal hotel websites do not have multi-language options. Most hotels do not have detailed reservation information. Hotel facilities information, including online shopping, frequent guest programs, and special services are not given in many hotel websites. As a result, they concluded that most of the thermal
hotels do not have efficient website management. When we compare Avcikurt et al.’s (2011) study with this study, we realize that quantity of websites has been increased in the past six years; in our sample, all of the thermal facilities have websites. However, there has not been a substantial change in quality of websites.

Baloglu and Pekcan (2006) analyzed the websites of 4- and 5-star hotels in Turkey in terms of site design characteristics (navigation, interactivity, and functionality) and site marketing practices. Their findings showed that the hotels are relatively performing well in navigation. However, their performances in interactivity, functionality, and marketing practices were questionable. So they concluded that the hotels in Turkey were focusing on the basic and simple features of the websites and they are not utilizing the full potential of their commercial websites. So our conclusion is similar to Avcikurt et al.’s (2011) and Baloglu and Pekcan’s (2006) studies. In Turkey, most of the thermal facilities do not have an efficient website management.

Increasing importance of health tourism for Turkey leads to changes in health politics. Natural thermal springs are the oldest treatment way, interest in natural methods is rising, thermal facilities target both patients and healthy people that create a huge target market, and all these factors foster interest in the thermal tourism industry. In this regard, one of the goals of Turkey’s 10th Development Plan is reaching 100,000 bed capacities in thermal tourism until the end of 2018 (Sağlık Bakanlığı, Sağlık Turizmi Koordinasyon Kurulu, 2017a).

Another important issue that makes Turkey a thermal attraction center is the possibleness of yearlong thermal cure activities in all regions. Because of the climate conditions, many European countries can provide thermal facility services for 100-120 days per year on the average while this number is 220-240 days per year in Turkey (Sağlık Bakanlığı, Sağlık Turizmi Koordinasyon Kurulu, 2017a).

According to the Association of Turkish Travel Agencies’ (TÜRSAB) report, more than 300,000 individuals have come to Turkey in 2013 for health tourism, and when operations in health centers are being added, this number reaches 480,000. In the same report, it has been announced that the total revenue from health tourism was 2.5 billion dollars in 2013. For the year of 2023, in the context of health tourism, the number of tourists is expected to be 2 million and revenue is 20-25 billion dollars (TÜRSAB, 2017). As these numbers emphasize that the importance of thermal tourism is increasing in Turkey, it is estimated that the findings of this study will be beneficial for the related organizations and industry.

Limitations

The most important limitations of this study arise from the methodology. First of all, after searching online tourism retailers such as Tatil Sepeti and Etstur2, 164 thermal facilities in Turkey could be listed and we accepted this list as the population. However, there may be additional thermal facilities that we could not reach. Besides, sample size of 33 thermal facilities is not adequate for making generalizations. Another limitation depends on six thermal facilities in the sample that have more than one official website. In such situations, we selected one website and analyzed it. Another limitation is about the availability of content; because of the dynamic nature of the Internet, websites in the sample can change at any moment. Also, quality and quantity of the content is not within the scope of this study. For example, although some websites have very few and poor-quality room photos or videos, we counted them as existent. Lastly, if something is not on the website, it does not always mean that the thermal facility is ignoring this issue. For example, although warnings about thermal/medical and wellness services usage do not exist in most of the websites, perhaps thermal facilities inform customers about this issue when they arrive there.

Future Research

In future studies, customer satisfaction ratings may be compared with the website attributes in order to explore if there is a relationship between the customer satisfaction and effective website management. Cross-cultural studies on thermal facilities’ website attributes may produce important findings by comparisons.

References


