

**Part III**  
**Quality of Life in Tourism and Its Impact**  
**on Tourists' Well-being**

## Chapter 12

# Seniors: Quality of Life and Travel/Tourism



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**Abstract** The senior segment in travel and tourism is increasing in both size and profitability. Travel/tourism scholars have done much research in relation to quality of life and senior tourists. Determining what aspects of travel impacts the well-being of seniors should be valuable to program coordinators of retirement communities and tourism officials. In addition, destination promoters and service providers should benefit by knowing which aspect of travel is most conducive to enriching the physical and emotional well-being of senior travelers. With this regard, this chapter is designed to review the literature relevant to senior tourist behaviors, measures of seniors' quality of life and its relation to tourism, and how participating in leisure while traveling may enhance their well-being. Another goal of the chapter is to suggest future research directions that can be useful for tourism providers and professional associations (as well as government agencies) that deal with seniors, travel, and tourism.

**Keywords** Senior Tourists · Tourism · Quality of Life (QOL)

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## 12.1 Introduction

The travel and tourism industry has long recognized the importance of the mature market. If the tourism industry is going to better serve this market, industry officials must understand and meet the needs and expectations of senior travelers, and this requires systematic study of this market (Carneiro et al. 2013; Kim et al. 2015). Tourism researchers have also long recognized the existing link between travel and quality of life (QOL) of individuals. In the scholarly leisure literature, much research has supported the notion that seniors' involvement in leisure activity contributes to their subjective well-being (e.g., Fernandez-Ballesteros et al. 2001). However, there is only limited research focusing on how senior tourists' travel experiences affect their well-being. A recent study by Kim et al. (2015) showed that involvement in travel activity has a positive influence on seniors' overall QOL. Determining what aspects of travel impacts the QOL of seniors should be valuable to program coordinators of retirement communities and tourism officials. In addition, destination promoters and service providers should benefit by knowing which aspect of travel is most conducive to enriching the physical and emotional well-being of senior travelers. Thus, goal of this chapter is twofold: (1) to review the literature relevant to senior tourists and how participating in leisure while traveling may enhance their well-being in and (2) suggest future research directions that can be useful for tourism providers and professional associations (as well as government agencies) that deal with seniors, travel, and tourism.

To achieve these goals, the current study reviewed articles in leisure and tourism journals concerning (1) senior tourists' quality of life, (2) measures of seniors' quality of life, (3) life domains of seniors and how tourism experiences may influence these life domains. We then summarized the findings of the studies.

## 12.2 Senior Tourists and Quality of Life (QOL)

There are a number of definitions that are used to explain and describe the nature of the aging population in the United States and beyond. In the context of travel and tourism research, this aging segment of the population is associated with many labels: "the elderly market," "the baby boomers," "the mature market," "the graying market," "the senior market," "the older market," "the golden agers," "post-retirement age groups," among others (Hsu et al. 2007; Lee and Tidswell 2005; Shoemaker 2000). Although these terms are used interchangeably, the trend seems to point to the more frequent use of the "senior market" or simply "seniors." As the size of this market is increasing and projected to increase significantly by 2050, the demand for more quality and quantity leisure programs in tourism is likely to grow by leaps and bounds (Kim et al. 2015). Given the rising number of seniors, most of whom have much discretionary time, it is not surprising that this segment has been of interest to tourism researchers (Heo et al. 2013; Kohlbacher and Chéron 2012;

Lehto et al. 2008). There is no question that this aging trend is a phenomenon that tourism scholars and officials should attend to. Staying active and meaningfully engaged in leisure activities seem essential to good health and well-being of seniors (Global Coalitaion on Aging 2013). There is much evidence in tourism that has firmly established the fact that travel is an important lifestyle activity that helps alleviate stress and increases physical and emotional well-being. For example, a recent study conducted by Global Coalitaion on Aging (2013) reveals that Americans both aspire to travel in their retirement and understand the critical role that travel plays in their personal well-being, both physical and mental. This effect seems to be most pronounced in the developed, much more so than in the developing countries. Furthermore, research has also shown that travel is viewed by tourists as important for good health and personal happiness (Smith and Puczko 2014). As such, there are a number of theories that have been used to explain how seniors' leisure activities during travel contribute to their personal well-being. These theories include activity theory and continuity theory.

Historically, the pioneering studies of Havighurst (1961) were the first to introduce *activity theory* proposing that an increase in time availability enables seniors to engage in leisure and non-leisure activities, which become a conduit for life satisfaction. Activity theory assumes that the way to achieve greater life satisfaction in older adulthood is through one's ability to maintain or increase involvement in social roles and leisure activities (e.g., Fernandez-Ballesteros et al. 2001). Activity theory was also used in response as a critique to disengagement theory, which argues that the disengagement from the daily routine of economic activity is a natural part of aging and is essential for inner fulfillment. (e.g., Ananian and Janke 2010). Even today, activity theory is the guiding force for much of the activity programming in senior centers, long-term care facilities, and retirement communities. The major tenet of this theory is to encourage seniors to stay as active as possible, and doing so should lead to more satisfying and fulfilling life. But, it is also acknowledged that some older adults or seniors may find the process of remaining active stressful rather than rewarding.

Another theory was also proposed around the same time of activity theory called *continuity theory* (Rowe and Kahn 1998). Continuity theory focuses on explaining how successful aging entails the use of health care, transportation, and leisure/recreation services to adapt to changes in aging. The authors (Rowe and Kahn 1998) have argued that successful aging is characterized by the ability of mature adults to avoid disease, maintain high physical and cognitive function, and continue engagement in life. In this regard, engagement refers to the constructive use of leisure time, a meaningful and rewarding way that contributes to personal well-being and successful aging. Nimrod (2008) tested patterns of continuity and change in leisure behavior of recently retired individuals. Four groups (reducers, concentrators, difusers and expanders) were identified and their leisure participation and life satisfaction were measured. The research finding showed that the expanders and the concentrators enjoyed a significantly higher life satisfaction than the other groups. This result support the activity and continuity theory.

Activity theory and continuity theories discussed above support the general premise that engagement and activity involvement are linked to health and well-being in later life. In the discipline of leisure studies, many studies have supported these theories by demonstrating that a retired senior's participation in an activity contributes to his or her subjective well-being (e.g., Fernandez-Ballesteros et al. 2001; Menec and Chipperfield 1997; Silverstein and Parker 2002). For instance, Heo et al. (2013) segmented the senior population into three groups based on patterns of serious leisure involvement and examined how these three groups differ in terms of life satisfaction and health. The results suggested that the level of involvement in serious leisure had a positive impact on life satisfaction and health. Another study conducted by Yin (2008) examined the lives of retired seniors in Hong Kong's Aldrich Bay by testing the impact of both perceived leisure constraints and leisure satisfaction on life satisfaction. The results showed that leisure satisfaction made a major and significant contribution to seniors' overall life satisfaction.

The scholarly tourism literature has examined the interrelationships among senior tourists' behavior (especially focusing on motivation for travel), socio-demographic characteristics, destination choice, travel constraints, and well-being (e.g., Burton et al. 2006; De Vos et al. 2013; Jang et al. 2009; Kim et al. 2015; Lee and Tideswell 2005). This line of research found that the most common travel motive for a senior involves relaxation (e.g., Chen and Wu 2009; Jang et al. 2009; Tung and Ritchie 2011), socialization (e.g., Jang et al. 2009; Wei and Milman 2002), ego-enhancement (e.g., Jang et al. 2009; Sangpikul 2008), novelty (Chen and Wu 2009), and health (e.g., Hsu et al. 2007; Sirakaya et al. 1996). These motivational factors can be characterized as "push factors." In contrast, "pull factors" include natural resources, historical sites, and facilities (e.g., Anderson and Langmeyer 1982; Wei and Milman 2002), as well as event attractiveness and cost (e.g., Sirakaya et al. 1996).

In terms of Maslow's hierarchy of needs, senior tourists' major motives tend to reflect higher-order needs (Csikszentmihalyi and LeFevre 1989; Maslow 1968). Cordes and Ibrahim (1999) have argued that seniors' travel motives should be viewed at a level higher than physiological needs; that is, travel needs reflect higher-order needs such as self-actualization needs, personal growth and development.

Only a few studies have focused on how seniors' travel experiences affect their well-being (e.g., Kim et al. 2015; Lee and Tideswell 2005; Milman 1998; Wei and Milman 2002). For example, Kim et al. (2015) examined the relationships between involvement in tourism activity, perceived value, and satisfaction with trip experience, leisure life satisfaction, overall QOL, and revisit intention among seniors. The study results suggested that the level of involvement of senior tourists positively influences their overall QOL and revisit intentions. A study conducted by Milman (1998) also identified the impact of travel experience on the subjective well-being of senior tourists. The results indicate that travel experience may increase the level of happiness after the trip.

### 12.3 Measures of Seniors' Quality of Life (QOL) and Its Relation to Tourism

Operationalizing overall QOL among seniors has received much attention (e.g., Diener et al. 1999; Stanley and Cheek 2003). In gerontology, overall QOL has been viewed as the subjective counterpart of a more public evaluation of “successful aging.” Gerontology scholars have used many instruments to capture subjective well-being among seniors. For example, the Life Satisfaction Rating (LSR) developed by Neugarten et al. (1961), has been widely used to measure seniors' overall life satisfaction (e.g., Hsu 2010; Meadow and Cooper 1990). Items such as “Compared to other people, my life is better than most of them” and “I would say I am satisfied with my way of life” are included in the LSR measure.

Alternatively, the Reflective Life Satisfaction (RLS) measure is equally popular (Wood et al. 1969). The measure involves the following items: “As I look back on my life, I am fairly well satisfied”; “I have gotten pretty much what I expected out of my life”; “When I think back over my life, I did not get most of the important things I wanted”; “I have gotten more of the breaks in life than most of the people I know”; “In spite of what people say, the lot of the average man is getting worse, not better”; “Most of the things I do are boring or monotonous”; “These are the better years of my life”; “The things I do are as interesting to me as they ever were”; and “I am just as happy as when I was younger.”

In addition, CASP-19 scale was designed to measure QOL and fulfillment of human needs in early old age. It involves four dimensions: control, autonomy, self-realization, and pleasure (Jivraj et al. 2014). Example items of the control dimension include: “My age prevents me from doing the things,” and “I feel that what happens to me is out of my control.” Examples of items reflecting the autonomy dimension include: “I feel that I can please myself in what I can do,” and “I can do the things that I want to do.” Items capturing the self-realization dimension include: “I feel that my life has meaning,” and “I look back on life with a sense of happiness.” Items capturing the pleasure dimension include: “I feel that the future looks good for me,” and “I enjoy the things that I do.”

Another popular measure of overall life satisfaction of seniors is the Satisfaction with Life Scale (SWLS) (Diener et al. 1985). SWLS includes items such as the following: “In most ways my life is close to my ideal”; “The conditions of my life are excellent and I am satisfied with my life”; “So far I have gotten the important things I want in life”; and “If I could live my life over, I would change almost nothing.” There is a voluminous literature involving SWLS which provided much evidence of the reliability and validity of this measure.

In tourism studies, overall life satisfaction has been typically measured using survey items such as: “I felt good about my life shortly after the trip”; “Overall, I felt happy upon my return from that trip”; and “I felt that I lead a meaningful and fulfilling life” (e.g., Neal et al. 1999; Sirgy et al. 2011).

## 12.4 Senior Tourists and Domain Satisfaction

To understand how tourism influences the quality of life of the seniors, it is important to identify the main life domains of seniors and how tourism experiences may influence these life domains. Farquhar (1995) attempted to identify salient life domains for seniors. The study revealed that family, social contact, activities, health, and material circumstances as important domains affecting overall QOL. Brown et al. (2004) highlighted the following life domains: relationships with others, autonomy, health, mobility, family relationships, emotional well-being, independence, and leisure. Managerially speaking, these areas of life should be emphasized in tourism program development and the marketing of these programs. Moreover, Ferrans and Powers (1992) measured seniors' QOL in terms of their satisfaction with a select set of life domains: relationships with family members, friendships, ability to meet nonfinancial family responsibilities, health, leisure time activities, and religious life. In later life, physical health is perceived by senior tourists as more important than they are in earlier life. Smith et al. (1999) conducted a meta-analysis of QOL instruments showing that "health status" is a prominent construct of aging research. In addition, a number of studies emphasized physical and mental health as predominant life domains for seniors (e.g., Janke et al. 2008; Paillard-Borg et al. 2009; Werngren-Elgstrom et al. 2006). Based on a comprehensive review of the leisure and gerontology literature, the most commonly used life domains and indicators seem to include family, social, emotional, leisure, and health life domain as major determinants of overall QOL (Brown et al. 2004; Kelly-Gillespie 2009; Ku et al. 2008). Of course, seniors' tourism experiences are most likely to influence these life domains.

*Family life* is usually viewed in terms of relationships between family members and relatives (Brown et al. 2004). Andrews and Withey (1976) provided substantial evidence indicating that satisfaction with family life is a substantial factor in life satisfaction. Seniors do consider their relationship with spouse and other family members as important aspects in family life and overall life satisfaction. Specifically, research has suggested that there is a significant association between family conflict and QOL (e.g., Ejechi 2012). Family conflict decreases satisfaction with family life and overall QOL (Amato 2005). Tourism serves to strengthen familial relationships when seniors travel with family members or when they travel to visit family (e.g., Mancini et al. 2012; Smith and Puczkó 2012). As such, tourism programs should be developed and marketed in a manner to enhance family well-being.

The quality of *social life* typically involves quality of relationships with friends, interaction with others, and general satisfaction with one's friends. In regards to tourism, people are more likely to form new friendships and meet new people if they go on, for instance, singles' holiday tours or if they take part in group tours with similarly-minded people. For example, Dann (2001) found that seniors, while exploring opportunities for new experiences during tourism excursions, are likely to foster a sense of purpose through new friendships or making romance with other

tourists of a similar age. As such, tourism programs should be developed and marketed in a manner to enhance social well-being.

The quality of *leisure life* of seniors is typically judged in terms of satisfaction with leisure life, available leisure time, and free time management. Seniors manage their free time by participating in various types of travel and leisure activities (McGuire et al. 1996). Much research have demonstrated that leisure and tourism are major elements of post-retirement life and do play a significant role in life satisfaction (e.g., Fernandez- Ballesteros et al. 2001; Kim et al. 2015; Nimrod 2008). For example, Kim et al. (2015) found that a senior's satisfaction with leisure life domain positively affects his/her overall life satisfaction. Mishra (1992) conducted a study to examine the relationship between leisure-life experience and QOL among seniors. The study results indicated that leisure-life experience has a positive influence on QOL. As such, tourism programs should be developed and marketed in a manner to enhance leisure well-being.

*Spiritual well-being* is conceived of as devotion to a deity or particular life philosophy (Sirgy 2002). It reflects fulfillment of spiritual needs as well as those activities related to their fulfillment. Teichmann et al. (2006) conducted a study that produced positive and significant correlations between spiritual well-being and subjective well-being. Moreover, the same study underscored a positive relationship between spiritual well-being and physical health and social relationships. As such, tourism programs should be developed and marketed in a manner to enhance spiritual well-being.

A study by Cummins (2005) reviewed the 32 QOL studies and classified 173 different terms into seven life domains. One of the findings showed that leisure and tourism activities are the significant predictor of satisfaction of *emotional well-being*, and 85% of the studies included emotional well-being in some form of satisfaction with activities related to leisure, spiritual life, and morale. Lee and Ishii-Kuntz (1987) emphasized the importance of emotional well-being of seniors. The authors tested the role of partners on emotional well-being of seniors by using a large sample (2872 seniors). The study underscored the notion that social interaction with friends has a strong effect on emotional well-being. As such, tourism programs should be developed and marketed in a manner to enhance emotional well-being.

*Health life* is one of the most important domains affecting life satisfaction among seniors. Several large-scale studies have provided evidence suggesting that satisfaction with health affects life satisfaction (e.g., Andrews and Withey 1976). Indeed, many QOL studies have linked health-related factors with seniors' QOL. In recent years, health and wellness tourism—including spas, clinics for medical procedures, and hiking—has rapidly grown (Sheldon and Bushell 2009; Smith and Puczko 2009). The study by Hobson and Dietrich (1995) found that tourism is an important factor in pursuing health life, thus improving the quality of life. In addition, much research among seniors have indicated that physical health conditions lead seniors to experience stress, which adversely affects their subjective well-being (e.g., Berg et al. 2006; Lachman et al. 2008; Pearlin and Skaff 1996). For example, a study conducted by Windle et al. (2010) has demonstrated the negative effect of poor



health on life satisfaction of seniors, and that this effect is moderated by resilience. As such, tourism programs should be developed and marketed in a manner to enhance health well-being.

In sum, based on the review of the literatures in tourism and gerontology, one can conclude that tourism experiences influence seniors' sense of well-being in family life, social life, leisure life, emotional life, and health life (e.g., Brown et al. 2004; Everard et al. 2000; Greenley et al. 1997; Ku et al. 2008; Kelly-Gillespie 2009). Moreover, we can safely conclude that senior tourists' overall QOL is mostly influenced directly or indirectly by evaluations of these salient life domains.

## 12.5 Conclusion and Future Research Directions

What can be inferred from the literature on seniors, their well-being, especially by partaking in leisure and tourism activities? First, regardless of the target group or segment, whether it is senior or general public, engaging in leisurely travel and tourism activities result in physiological and psychological benefits to participants. The central tenet implied in this assertion is that a leisure/tourism activity contributes significantly to the well-being of participants if it delivers not only functional benefits but also a range of other benefits related to both basic and growth needs (e.g., Bjork 2014; Chen and Petrick, 2013; Driver et al. 1991; Payne et al. 2010; Smith and Puczko 2014;). This assertion should be further tested using samples from a variety of countries, given that much of the research is Western based. Determining the extent to which travel impacts the quality of life of seniors could be valuable to program coordinators, policy makers of retirement communities and homes to legitimize and develop leisure activities. In addition, destination promoters and service providers would benefit by knowing which salient dimensions of the travel experience are most conducive to enrich the physical and emotional well well-being of senior travelers.

Second, the review of the extant literature reveals that the assumed link between the travel behavior of seniors and their well-being may vary from one type of activity to another and from one form of travel experience to another, each yielding different benefits and value. Thus, the types of activities and their role in creating value for seniors should be of a major concern to researchers. Researchers should closely examine how engaging in what type of activity may contribute to the well-being of seniors and under what situations and cultural contexts this contribution may show variation.

Third, there are also measurement issues related to the use of certain scales. Researchers have to identify life domains that are most pertinent to seniors in particular setting and select those instruments with the most pertinent life domains. Both subjective and objective measures should also be used; they should complement each other in the assessment of seniors' well-being (Bimonte and Faralla 2012). Doing so should capture QOL of seniors, as travelers, more effectively.

Further research is needed and issues that need to be addressed are as follows:

- determining the impact of pleasure travel on the quality of life of the aging population;
- determining the extent of travel as a part of the senior lifestyle;
- determining the impact of pre-retirement travel planning, including savings for travel on post-retirement adjustment and travel behavior;
- identifying and alleviating barriers to travel for senior travelers and non-travelers;
- identifying the expenditure behavior of senior travelers;
- determining the extent to which travel experiences can replace lost roles and create new roles for the senior traveler;
- determining if travel businesses are meeting the physical, social and psychological needs of the elderly; and
- segmenting the senior population and determining the impact of inter-generational programming, and providing opportunities for inter-generational travel.

In addition, it is important to do research exploring opportunities to create a mechanism by which individuals would also do additional savings throughout their active years of work for travel goals to make their desire for travel a reality. The senior traveler will be a significant part of the future travel and tourism market, and we need to base our research and services on *facts* related to the needs, desires, expectations, and attitudes of the senior travelers.

The research issues addressed above cannot be the responsibility of one agent but several, including providers of services and goods, government and regulatory agents, intermediaries (such as booking agents and transportation agents), lodging establishments, destination promoters, researchers, community developers, and the travel participants themselves. In this vein, providers of tourism goods and services have a major role as facilitators to influence the consumption setting of the older adults in which experiences are created and behavioral outcomes are influenced.

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