DESTINATION HEALING CAPACITY FOR INCLUSIVE TOURISM: AN ANALYTICAL FRAMEWORK FOR ACCESSIBLE TRAVEL THERAPY AND MEDICAL WELLNESS DESTINATIONS

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Abstract. *Based on the perspective of inclusive tourism, this article reviews existing literature on travel therapy and therapeutic tourism. In recent years, tourism research has primarily focused on issues such as psychological rehabilitation, loneliness relief, restoration based on natural environments, disease-related travel experiences, and spiritual healing. However existing research still lacks a destination-level explanation—that is, how to transform therapeutic resources into dignified and safe tourism experiences for vulnerable tourist groups. This article proposes a "Destination Healing Capacity" (DHC) framework based on an integrated review of literature on healing landscapes, restorative environments, travel therapy, inclusive tourism, accessible tourism, and disability rights. The framework refers to a destination's ability to transform environmental, cultural, medical, social and digital resources into inclusive, healing-oriented tourism experiences. This article points out that in the planning of medical and wellness tourism destinations, tourists with physical disabilities, the elderly, patients with chronic diseases, cancer survivors, and socially isolated groups should not be regarded as marginalized groups, but should be placed at the core. For emerging destinations such as Uzbekistan, integrating rehabilitation services, accessible accommodation, safe transportation, multilingual support, cultural participation, and ongoing post-trip follow-up into a complete service chain, which can make inclusive medical tourism an important strategic development path. This framework does not equate tourism with formal clinical treatment; instead, it positions tourism as a supportive environment that promotes well-being, maintains quality of life, and fosters inclusive social participation.*

Keywords: *travel therapy; inclusive tourism; accessible tourism; destination healing capacity; medical wellness tourism; sdg3*

1. Introduction

Moving beyond traditional leisure and consumption perspectives, contemporary tourism research is beginning to explore how travel promotes psychological relief, social reconnection, and physical recovery. The therapeutic landscape theory posits that health and well-being are influenced by medical institutions and physical surroundings, interpersonal relationships and symbolic meaning1. Research on healthy spaces further confirms that place-based practices can promote individual recovery and enhance place attachment.2. Environmental psychology research also shows that restorative natural environments help relieve stress and accelerate the recovery process.3.

However, therapeutic tourism research remains incomplete if it only focuses on emotional benefits and ignores issues of equity in accessibility for different tourist groups. The core concern of inclusive tourism goes beyond whether travel can have a therapeutic effect; it also includes

ensuring that all groups can access such experiences equally and with dignity. Inclusive tourism emphasizes the meaningful participation of marginalized groups9. Accessible tourism, on the other hand, emphasizes designing destinations throughout their entire lifecycle based on tourists' diverse accessibility needs.1013.

Such viewpoints carry vital implications for medical and healing-focused destinations. Travelers living with physical impairment, advanced age, chronic illness or persistent psychological distress demand restorative environments yet confront multiple access obstacles and safety hazards. Current scholarship falls short of an integrated destination framework linking healing environments, inclusive services, safety governance, accessibility standards and outcome assessment, forming a notable research gap.

To fill this gap, the concept of Destination Healing Capacity is advanced as an analytical tool for inclusive tourism research, explaining how destinations convert natural, cultural, medical, social and digital resources into secure, accessible healing experiences. It also delivers practical analytical guidance for emerging medical wellness destinations including Uzbekistan, where travelers with physical disabilities seek combined leisure, professional rehabilitation and supportive therapy to maintain quality of life.

2. Literature Review and Methodology

This study adopts integrative literature review covering four research clusters: therapeutic landscapes and restorative environments; travel therapy and healing tourism; inclusive & accessible tourism; disability rights in tourist participation. Its core objective is to construct a theoretically grounded analytical framework to guide future empirical research and destination planning.

All sampled articles are coded along five dimensions: research subjects, healing mechanisms, vulnerable populations, service implications and outcome indicators. Recurring healing pathways are grouped into eight thematic categories: environmental restoration, meaning-making, social bonding, spiritual engagement, physical activity, sensory stimulation, service provision and accessibility support. By cross-referencing tourists' wellness demands against destination operational criteria, the study summarizes systematic supporting conditions required for inclusive healing tourism implementation.

Empirical travel therapy findings confirm slow tourism creates independent healing value through immersive nature contact and relaxed itineraries to ease mental strain4. Research regarding depression treatment demonstrates travel enables positive meaning construction yet cannot substitute formal clinical intervention5. For breast cancer survivors, travel alleviates negative emotions and aids holistic rehabilitation across different disease stages6. Studies focusing on physically vulnerable populations suggest travel therapy outcomes stem from interactions between individual capability and environmental support 7. A network meta-analysis further provides indirect evidence that tourism-related natural and cultural interventions effectively reduce anxiety and depressive symptoms8.

3. Key Findings: From Individual Healing Experience to Destination Inclusive Support

Healing tourism research has evolved from simplistic claims of health benefits toward empirical analysis of how environmental shifts, natural exposure, cultural immersion, social

interaction and meaning-making drive psychological recovery. This paradigm shift facilitates measurable healing assessment rather than vague conceptual discussion.

While vulnerable tourist groups have attracted growing academic attention, relevant demands are rarely incorporated into systematic destination design frameworks. Existing studies explore cancer patients, depressive sufferers, seniors and socially isolated travelers58, yet seldom connect their needs with destination infrastructure including accessible transport, barrier-free lodging, interpretive services, onsite rehabilitation, emergency management, digital information and after-care follow-up. For travelers with physical disabilities, healing relies not merely on restorative scenery but also on full-spectrum inclusive setup: barrier-free transit and accommodation, transparent pre-arrival information, trained staff, assistive amenities, accessible cultural and wellness venues, emergency backup and companion-friendly arrangements, consistent with systematic destination-based accessible tourism theories10-13.

Destination governance remains an understudied field within healing tourism literature, with most prior work focusing solely on individual sentiment or consumption intention instead of systemic destination construction. Inclusive healing tourism requires coordinated governance featuring credible health services, transparent accessibility information, standardized risk management and continuous full-cycle visitor support. Accordingly, healing tourism ought to be defined as a complete inclusive service chain instead of a mere emotional consumption product.

4. Destination Healing Capacity: An Inclusive Tourism Framework

Destination Healing Capacity refers to a destination's capacity to transform environmental, cultural, medical, social and digital resources into secure, accessible and inclusive healing experiences, consisting of five interrelated dimensions detailed in Table 1 alongside corresponding research indicators.

Table 1 Destination Healing Capacity as an Inclusive Tourism Analytical Framework

Dimension	Core Inclusive Tourism Focus	Destination Requirements	Potential Measurement Indicators
Healing Environmental Quality	Enable visitors with varied physical, sensory, age and health limitations to benefit from restorative surroundings	Restorative landscapes, quiet zones, hygienic settings, natural wellness resources such as hot springs, low-intensity travel routes	Perceived restorativeness, environmental comfort, sensory suitability, route accessibility difficulty
Inclusive Accessibility	Centring physical disability and chronic illness requirements in original destination design	Barrier-free transportation, accessible hotels, assistive equipment, user-friendly official websites, professionally trained employees	Step-free access rate, accessible room availability, clarity of pre-travel information, staff competency
Safety & Risk Governance	Allow vulnerable visitors to travel with dignity without	On-site medical consultation, standardized	Perceived safety level, emergency preparedness, practitioner qualification,

	excessive health or mobility risks	emergency response, regulated rehabilitation procedures, insurance and medical referral systems	risk communication effectiveness
Meaningful Cultural Participation	Realise social and cultural inclusion beyond pure medical care	Accessible heritage interpretation, companion-oriented activities, inclusive slow tourism and pilgrimage routes	Cultural engagement quality, social connection level, perceived cultural meaning, sense of dignity
Outcome Evaluation & Post-trip Support	Ethically verify actual healing effects against exaggerated marketing claims	Pre-post travel assessment, satisfaction tracking, quality-of-life feedback, post-vacation wellness counselling	Perceived recovery, loneliness reduction, psychological resilience improvement, satisfaction, travel recommendation intention

The framework proves inclusive healing tourism depends on coordinated integration of accessibility, emotional restoration, cultural involvement, risk control and effect evaluation rather than simple addition of medical facilities. It can directly guide questionnaire development and stakeholder interview design for empirical research.

5. Discussion: Implications for Uzbekistan and Emerging Medical Wellness Destinations

This framework clearly defines the boundaries between tourism and clinical treatment: tourism can never replace formal medical treatment, surgery, or professional rehabilitation. Conversely, tourism provides a supportive environment that helps people relax, rebuild social connections, maintain quality of life, and engage in meaningful activities. When tourism is coordinated with professional medical programs, it can serve as a contextualized wellness supplement for people with disabilities, those with chronic illnesses, those experiencing psychological stress, and those recovering from treatment.

For emerging wellness destinations, inclusive development is a more sustainable source of competitiveness than simply competing on price. Strong destination competitiveness is built on accessible transportation, reliable rehabilitation services, inclusive accommodation, multilingual services, open and transparent digital information, staff training, emergency response plans, ethical advocacy, and ongoing post-trip care. Travelers with accessibility needs typically make travel decisions based on credible and detailed information and their overall perception of safety throughout the trip.

Such insights carry prominent practical value for Uzbekistan. Travelers with physical disabilities aiming to combine leisure with certified rehabilitation constitute a promising niche market for its medical tourism industry, which should be developed under inclusive tourism logic rather than narrow clinical market thinking. The UN Convention on the Rights of Persons whom with Disabilities, have equal opportunities to engage in cultural, recreational and leisure activities14.

Joint research commissioned by Uzbekistan's government and UN agencies also stresses expanded rights and social inclusion for disabled residents15. Uzbekistan can upgrade its medical wellness industry by integrating rehabilitation resources with accessible travel routes, barrier-free hotels, safe transport, inclusive heritage interpretation, multilingual medical consultation and companion-oriented services.

Future empirical research can operationalize this framework via mixed research methods. Questionnaires quantify perceived accessibility, safety, service quality, mental recovery, satisfaction and recommendation willingness. In-depth interviews targeting disabled travelers, rehabilitation patients, caregivers, medical practitioners, hotel administrators and destination authorities uncover hidden practical barriers undetectable via quantitative data. Pre-post longitudinal research further tracks dynamic changes in anxiety, loneliness, psychological resilience and life quality, distinguishing authentic wellness-supported tourism from overhyped healing-oriented marketing.

6. Conclusion

Future advancement of travel therapy and healing tourism can be embedded within the broader inclusive tourism research domain. Existing literature has yielded abundant evidence regarding mental recovery, meaning construction, nature-led rehabilitation and health benefits of disease-oriented travel. However, prior scholarship lacks an integrated destination-level framework linking healing mechanisms with accessibility design, disability inclusion, safety governance and healing outcome evaluation.

Destination Healing Capacity highlights destinations can foster health-enhancing environments only when healing resources are matched with barrier-free design, inclusive services, transparent information, qualified personnel, risk control and continuous after-service. For emerging destinations including Uzbekistan, this concept bridges medical wellness development with the legitimate demands of disabled tourists. Theoretically, the study shifts healing tourism research focus from individual subjective experience toward systematic inclusive destination development; practically, it delivers actionable guidelines for destination planning, questionnaire design, stakeholder investigation and future quantitative evaluation.

REFERENCES

1. Gesler, W. M. (1992). Therapeutic landscapes: Medical issues in light of the new cultural geography. Social Science & Medicine, 34(7), 735-746. https://doi.org/10.1016/0277-9536(92)90360-3
2. Bell, S. L., Foley, R., Houghton, F., Maddrell, A., & Williams, A. M. (2018). From therapeutic landscapes to healthy spaces, places and practices: A scoping review. Social Science & Medicine, 196, 123-130. https://doi.org/10.1016/j.socscimed.2017.11.035
3. Ulrich, R. S. (1984). View through a window may influence recovery from surgery. Science, 224(4647), 420-421. https://doi.org/10.1126/science.6143402
4. Chen, J., Cai, D., Becken, S., & Zhang, G. (2026). Slow travel, deep healing: Towards value-driven strategies for slow tourism. Annals of Tourism Research, 118, 104139. https://doi.org/10.1016/j.annals.2026.104139
5. Cui, R., Zhai, H., Wang, R., Hua, S., Zhang, J., & Li, S. (2025). Travel as adjunct therapy in major depressive disorder: Analyzing cases with positive outcomes by ZMET. Annals of

Tourism Research, 114, 103995. https://doi.org/10.1016/j.annals.2025.103995

6. Xiong, W., Huang, M., Leung, X. Y., & Li, Y. (2025). The healing impact of travel on the mental health of breast cancer patients. Tourism Management, 106, 104997. https://doi.org/10.1016/j.tourman.2024.104997
7. Hu, F., Wen, J., Zheng, D., Teo, S., & Wang, W. (2025). Travel therapy for vulnerable populations with health conditions: A competence-environmental press model framework illustrated with dementia. Journal of Hospitality and Tourism Management, 65, 101334. https://doi.org/10.1016/j.jhtm.2025.101334
8. Huang, M., Xiong, W., Okumus, B., Wen, J., & Fan, F. (2025). Indirect evidence of travel therapy for anxiety and depression: A network meta-analysis. Journal of Hospitality and Tourism Management, 65, 101360. https://doi.org/10.1016/j.jhtm.2025.101360
9. Scheyvens, R., & Biddulph, R. (2018). Inclusive tourism development. Tourism Geographies, 20(4), 589-609. https://doi.org/10.1080/14616688.2017.1381985
10. Gillovic, B., & McIntosh, A. (2020). Accessibility and inclusive tourism development: Current state and future agenda. Sustainability, 12(22), 9722. https://doi.org/10.3390/su12229722
11. Darcy, S., & Dickson, T. J. (2009). A whole-of-life approach to tourism: The case for accessible tourism experiences. Journal of Hospitality and Tourism Management, 16(1), 32-44. https://doi.org/10.1375/jhtm.16.1.32
12. McKercher, B., & Darcy, S. (2018). Re-conceptualizing barriers to travel by people with disabilities. Tourism Management Perspectives, 26, 59-66. https://doi.org/10.1016/j.tmp.2018.01.003
13. World Tourism Organization. (2016). Manual on accessible tourism for all: Principles, tools and best practices - Module I: Accessible tourism - definition and context. UNWTO. https://doi.org/10.18111/9789284418077
14. United Nations. (2006). Convention on the Rights of Persons with Disabilities. United Nations.
15. Government of the Republic of Uzbekistan, UNDP, UNESCO, UNFPA, UNICEF, & WHO. (2019). Situation Analysis on Children and Adults with Disabilities in Uzbekistan. UNICEF Uzbekistan.