

Tourism and Public Health: an Integrated Model for Sustainable Community Development. Case Study of Romania (Turda)

Camelia-Maria Kantor^A, Veronica Constantin^B, Vasile Surd^C

Received: February 2016 | Accepted: June 2016

DOI: 10.18421/TRZ20.02-02

Abstract

Communities suffering from bankrupt industries often struggle in meeting the health needs of their population. In Romania, the older population still remains attached to the traditional spa tourism to meet their needs of relaxation and health cure. This paper uses Turda Salt Mine, a recently modernized site in Romania located in an area widely recognized for industrial pollution prior to '89. An exploratory, qualitative heuristic methodology was used to identify possible emerging patterns in the way post-communist local governments have engaged with the local social capital in designing sustainable integrated tourism planning and development. Findings suggest that the local population is neglected in the distribution of economic and health benefits, while carrying the environmental costs of increasing tourist numbers visiting the facility. In addition, there seems to be an overall pessimist view of the relationship between the local community and state representatives in terms of civil engagement and genuine interest to achieve one of the major objectives of the European investment: serve the public domain. The authors propose a model of integrated development based on four pillars (Academic, Health, Business and, Social, Cultural and Natural Heritage) to enhance the well-being of the local communities where resources are available.

Key words: *tourism, public health, bankrupt industries, integrated planning, convergent and divergent strategy.*

^A Correspondent author: Department of Social Sciences, Claflin University, 400 Magnolia St., Orangeburg, SC 29115, USA, ckantor@claflin.edu

^B Agency for Regional Development Center, 12 Decebal Street, 510093, Alba Iulia, Romania, veronica.constantin7@yahoo.com

^C Centre on Research of Settlements and Urbanism, Babes-Bolyai University, Cluj-Napoca, Romania, vsurd@geografie.ubbcluj.ro

Introduction

Located in the south-eastern part of Central Europe, Romania is undergoing a dynamic period of development (WHO 2013). Since 1989, when Romania's heavy industry began its rapid decline, tourism has been playing a major part in stimulating a transitional economy. This newly emphasized role of tourism has caused many communities to turn to different forms of tourism as a quick reconversion strategy. Consequently, each individual place capitalized on its own available resources, from Dracula focused tourism, to cultural tourism, and even communist heritage tourism. Thus, tourism in Romania became "an important component of the process of identity-building" (Light 2001) for the international community, changing its initially local and regional focus towards a much broader, global audience.

Salt mine or cave therapy is a less known method of treating chronic respiratory diseases, dermatologic diseases, or health conditions caused by allergens. It is mostly known and used by Central and Eastern European, Russian, and some other Asian populations, but less encountered in the United States or Western Europe. Speleotherapy is low cost and has very little risk (Nica, Meila, and Macovei 2007). According to Horowitz (2010), salt mines mostly found in Central and Eastern Europe offer treatment for a number of diseases such as asthma, bronchitis and lung disease. The physical and mental benefits of the salt breathing rooms found in man-made salt caves have been also mentioned in literature (Lee-St. John 2008).

In Romania salt mine and cave tourism is incorporated into the spa tourism (World Tourism Organization 2007). The most recent (2010) and detailed description of the Romanian salt mines is given by Goldan, Danciu and Nistor. This is also one of the few papers presenting salt mines as both tourist and medical facilities, also mentioning their even distribution on the Romanian territory. In fact, their geographic location provides quick accessibility from any corner of the country on the principle of proximity. This observation is particularly important given the very limited accessibility of the northern regions of Romania to the Black Sea due to poor infrastructure which limits people's contact with the therapeutic saline environment. In addition, salt mines are also generally found in areas with a moderate continental climate and a relaxing bio-climate with a high number of days with thermal comfort, making them highly favorable for tourism (Goldan, Danciu and Nistor 2010). Exposure to this microclimate is widely recognized in this part of the world as beneficial and successful in improving the airways in people with occupational risk factors. Currently, there are eight major active salt mines open to public in Romania. Turda Salt Mine has the most global outreach (Fig. 1). The mine has benefited from the largest financial investment (5.8 million Euro approved by PHARE, Turda town hall, and Cluj County Council in 2005) for restructuring and modernizing a Romanian salt mine.

Many young Romanian couples prefer spending their holidays abroad, but the older population still remains attached to the traditional spa tourism. As stated by Erdeli et al. (2011), it was during communism that this type of tourism witnessed "the most flourishing period in Romania" by "incorporating social policies into its planning and development". At the time, the issue of high morbidity rates and the "human needs of relaxation and health cure" in Romania were tackled with spa treatments and salt therapies (in salt mines or on the littoral) made available through various public health and social programs. Today, a post-'89 decadent or poor quality spa tourism industry is still the only option for a significant segment of the older population if considering their available retirement calculated according to the low cumulative wages obtained during the past 70 years. The still high demand for spa tourism and its socio-economic implications is demonstrated by statistics: seven out of eight spa bed nights are paid for by

government subsidized vouchers every year in Romania (World Tourism Organization 2007). Even though Romania used to include therapeutic factors as one of the three major categories of resorts (Erdeli et al. 2011), more recent changes in legislation kept only the two other categories: tourism resorts of national or tourism resorts of local interest, which explains why in most public spas the infrastructure, facilities and medical assistance are in a very poor condition (Dinu, Zbucea and Cioaca 2010) despite still reaching the highest occupancy rate (53%) during operational periods (National Institute of Statistics).

Health policies are “more of an *art* than precise science, being vulnerable to social, political, economic, and environmental changes” (Tulchinsky and Varavikova, 2014). Central and Eastern European countries have been particularly impacted by post '89 changes at each of these levels, but failed to effectively promote public health as an effective way to generate economic and social development. Despite increasing allocations to health after European Union integration, public health is still considered as a “low political priority” (Tulchinsky and Varavikova, 2014) in many of these countries in transition where there is lack of a clear, integrated vision intended to increase both societal and governmental awareness of the role of disease prevention.

Despite being significantly hit by the post '89 political and economic changes, the social spa tourism in Romania continued to attract the internal clientele used to the traditional state vouchers and more inclined to pick close destinations for health prevention or treatment (Dinu, Zbucea and Cioaca 2010). Unfortunately, the environmental and economic aspects of public health, social spa tourism, and community social planning are treated as distinctly separate areas of activity today, whereas in the past they were mostly integrated. The desired “well-being” of the local community is not a primary objective of the Tourism Ministry's Master Plan for spa and medical tourism in Romania, the new target markets being represented by more trendy and financially desirable Western European and American communities. However, although marketing and planning have been significant in the past years to promote Romania's tourist potential, the registered increase in tourists' accommodation was only slightly higher in 2012 and 2013 as compared to the previous years for both Romanian and foreign tourists, the latter opting in most cases for 5, 4 or 3 star hotels (National Institute of Statistics, 2014) usually not available or present in small numbers in areas with valuable natural resources. This leads foreign visitors to practice transitional tourism in those locations, preferring to spend nights in closer, more cosmopolitan locations, which in turn hinders local economic development. The poor road and tourist infrastructure and uncompetitive prices still deter international travelers from visiting the country while demands for the traditionally subsidized treatment vouchers continue to exceed government's available seats. It is important to note here the difference between medical and wellness tourism as well as the mainly medical and curative aspect that health tourism has in Romania as compared to the international synergetic approach. Based on the existent reality, mine therapy (or speleotherapy) should fall under medical tourism in its traditional format where the goal is “to travel in order to improve one's health” (Bookman & Bookman 2007 In Stancioiu et al. 2013), whereas the rest of the spa tourism is seen as more of a balneotherapeutical experience for retirees that currently occupy about 80% of the spa resorts in Romania (Erdeli et al., 2011). Balneotherapy involves overall well-being, relaxation, but in Romania the population sees it as mostly rheumatic treatment. Falling under the general umbrella of spa tourism is a disservice to speleotherapy if one considers the overall expectations from a spa resort and what this could offer the client. Even though the International SPA Association defines spas as “places devoted to overall well-being through a variety of professional services that encourage the renewal of mind, body and spirit”, none of the primary types of spas (including medical spas) matches the services that could be

expected from visiting a salt mine. If considering that salt mines are primarily visited for treatment purposes (Oroian & Gheres, 2012), they should become an integrant part of public health programs with focus on preventive medicine. Therefore, this paper emphasizes the need for a synergistic approach to speleotherapy and for officially integrating it into both medical tourism and preventive public health sectors.

There are three levels of spatial planning in Romania: national, regional or county level, and local or urban level. The main roles of County Councils and local administrations in tourism are set out in Ordinance No. 58 of 1998, Article 20. In addition to other roles, the local administration is also expected to “Generating positive attitudes to tourism [...]” (Romania National Tourism Development Master Plan 2007-2026). Starting from the idea that any type of tourism should imply “a mixture of economic, political and socio-cultural dimensions” (Tulchinsky and Varavikova, 2014) this study comes as a response to the current limited research related to addressing domestic socio-economic and health discrepancies caused by bankrupt industries with the help of tourism. Serious underfunding of the healthcare system in Romania (WHO 2014) and lack of an operational multisectoral national policy, strategy or action plan that integrates tourism and health make a case for examining the value of alternative forms of healthcare readily available and cost effective. The paper starts from one of the guiding principles formulated by WHO Regional Office for Europe that encourages “*whole-of-society approach*” that ensures “active involvement of civil society, businesses and individuals” (WHO 2012).

Thus, the goal of the study was to explore how the state institutions’ economic, political, health and socio-cultural actions vis-à-vis of local tourism are present in the minds, behaviors, and individual lifestyles of residents and how these actions impact the relationship with each other. The goal would be achieved through several objectives such as: (1) to explore community relations with the local authorities; (2) to quantify local community’s perception of the level of competence found in the environmental management of areas adjacent to tourist sites and; (3) to examine the degree of utilization of local natural resources for enhancing community health.

Starting from the success registered by Turda Salt Mine in attracting both domestic and international visitors (Oroian and Gheres 2012), the authors used a case study of Turda, a town where the successful revitalization of the aforementioned local tourist attraction has been nationally and internationally recognized and utilized by the local authorities and policy makers as a means for countering the challenges posed by long periods of economic and environmental restructuring. The selection of this particular site was due to a number of reasons:

1. The Inferior Aries Basin area that includes the urban Turda and Campia Turzii and a number of rural settlements have been known as “industrial areas” or “dormitory towns” from the 19th century until the end of the communism in 1989, experiencing along with accelerated industrial development intense environmental pollution with statistically demonstrated negative effects on population health;
2. Area’s high risk for natural disasters and public health vulnerability because of the presence of at least seven contaminated sites;
3. Great potential for medical and cultural tourism (patrimony areas) and;
4. Economic disparities caused by failure of the secondary and tertiary sector to properly and successfully assimilate the population discharged due to industrial bankruptcy (Romanian National Institute of Statistics 2012).

Location Turda Salt Mine in Romania and the European Union



Figure 1. Site location map

Methods and Data

An exploratory, qualitative heuristic methodology was used to identify possible emerging common patterns in the way post-communist local governments have engaged with the local social capital in designing sustainable integrated tourism planning and development. This approach is a departure from the dominant quantitative-deductive (hypothesis-testing) studies in the field. Therefore, the research question is quite open and broad: What are people's views, perceptions, and feelings about the role played by Turda Salt Mine in community well-being?

Using cluster analysis, a heuristic technique that groups individuals according to their similarities, the authors investigated individual or family lifestyles expressed in frequency and purpose of visiting the local salt mine, perceived advantages and disadvantages of living in close vicinity to the site, degree of involvement in the planning process of the tourist site modernization and expansion, and interest in collaborating with local authorities in community planning and development activities.

The population of interest for this study is all adults residing in the Inferior Aries Basin urban and rural settlements. The study participants that were selected consisted of persons who resided for at least twenty years in close proximity (within one km radius from the entrance) to the old entrance to Turda Salt Mine. This entrance was selected against the new one because of the larger population density, easier access from the main road, and the official website guidelines and advice to utilize this particular entrance for "persons with neuro-motor impairments" suggesting some level of public health related planning. Also the participants had to have at least one family member working in the local industry before '89. The second variable was considered an important element in identifying prior exposure to industrial pollutants.

This study utilizes a conveniently selected sample size of twenty-five individuals residing on six adjacent streets and meeting the two above mentioned criteria. A semi-structured (open) interview was conducted via a cross-sectional study during the summer of 2014 that included nine questions related to frequency and purpose of visiting the local salt mine, perceived advantages and disadvantages of living in close vicinity to the site, degree of involvement in the planning process of the tourist site modernization and expansion, and interest in collaborating with local authorities in community planning and development actions, in addition to demographic questions and one optional final section left for additional suggestions/ comments where the participants could further express their concerns. The questions targeted the entire family, not just the interviewed individual who was considered as the representative of the household, the interview process sometimes becoming a dialogue. Non-verbal communication was also recorded during the interview via short side notes. The family size ranged from 1 to 4 members. The age of the study participants was in between 30 (the youngest) and 86 (the oldest). With one exception, all of them had at least a high school degree and fourteen had a college degree (56%).

In terms of illness history, the members in the sample could not be directly questioned on their health status because of the societal stigma that could have prevented them from participating in the interview. However, some inferences related to their health status could be drawn from respondents' answers to questions 6 and 7 ("What was the purpose of your visit to the salt mine?" and "What would determine you or your immediate family to visit it more often?").

The authors chose to protect the identity of respondents by using gender (F-female, M-male), age (in numbers) and educational attainment (a-academic education vs. na- non-academic education) instead of first names due to the small territorial area of interest being covered. In addi-

tion, certain personally identifiable words were also eliminated from the text. All notes were written at the time of the interview and translated from Romanian to English afterwards with much attention to keeping the integrity of the original.

A previous survey of 103 salt mine visitors conducted by Oroian and Gheres (2012) has already confirmed the low visitation rate of the local population (25%) as well as other socio-economic factors that support results from the present study. Results from this study were correlated with Oroian and Gheres (2012) findings and the Regional Development Concept (CON-TURDA 2014-2020), Turda City Hall's latest report, to develop an integrated model for community well-being based on convergent and divergent strategies.

Results and analysis

The study started with a preconception that the well-being of the local community represents the primary goal in the tourism and economic development plans for the area and that successful tourism development has enhanced, strengthened and promoted good community relations with local authorities, proper environmental management of the sites adjacent to tourist attractions, and increased interest in community health. The expectation was that thriving tourist development does not function in a vacuum, but provides the local governments and the national and international community with an opportunity for a synergistic integration of all sectors of society to promote not just economic, but also social, cultural, environmental, and most importantly public health improvement.

Community relations with local authorities

Overall, findings indicate that the local residents perceive the modernizing of the salt mine as a positive action. Words like “great potential for development”, “tourist city”, “the mine is good”, “it is good that they modernized it” were present in most discussions. There seems to be a clear agreement that Turda city might change from “an industrial to a tourist city” (female). The mine is seen as a way to change people’s perception of Turda as the “cement city”(male) into a more attractive and popular site. The locals relate the modernization of the mine and its current success to better road infrastructure and opportunities for small business development, especially for tourism hospitality and food industry.

On the negative side, people’s comments, their body language, and overall state-of-mind revealed an overall pessimist view of on the relationship between the local community and their leaders in terms of civil engagement and genuine interest to achieve one of the major objectives of the European investment: serve the public domain. Lack of trust, use of the salt mine by the local authorities as “just a means for political barter”, benefits only “a small minority”, and the word “suspicion” were repeated throughout most of our interviews. Two 65 and 50 year old college educated females described experiencing first-hand the futility of public hearing encounters:

“They used to call me with surveys about development, and I was honest with them, but the questions ended up being more of a political propaganda. So why should I answer anymore surveys? [...]” (F65a)

“[...] I am disgusted. I tell my students to stand for themselves and they ask me if I do and I say yes! [looking sad] I was tricked into attending a public meeting and it came out to be just propaganda. There is no advantage for those who live here. They are not serious

about these public forums. There are a lot of people who could offer some valuable feedback if they [the city representatives] listened. (F50a)

Interviewees' comments and observed non-verbal communication signal the precariousness of the local community-public authority relationship and cautions against simply believing that social inclusion has been actually planned and considered by decision-makers. The youngest (30 years old) female respondent commented on the fact that the salt mine initially had private investors, but then the City Hall became major shareholder simply because *"European funding was conditioned on business affiliation to the public domain"*. Her observation suggests that public interests prevailed only because this new umbrella suited economic interests.

Despite the generally pessimistic tone of discussion, 19 out of the 25 respondents admitted that they would have been interested in getting involved in the process of salt mine planning and development and that they would like to collaborate with the responsible local authorities in the future if given the opportunity. One respondent (M62a) even expressed interest *"in contributing to the planning of the entire area, not just the salt mine"*. Another interviewee (M44na) related public engagement to exercising public rights through voting: *"This is why I go to elections. If I vote I should make some decisions too"*. Despite stating her willingness to participate in future dialogue with the City, another respondent (F55na) also implied her distrust in the outcomes: *"Yes, but I do not think that my opinion would count for them"*.

However, there were some voices that did not seem to identify a particular need for local community's involvement in the administrative planning, design, and implementation of community projects in the area. One in particular (F53na) who has been living for 11 years abroad, found that there was no actual difference when comparing the West to the East: *"they never asked us anything about development. I do not expect here to be different."* Furthermore, an elderly (F86a) interviewee suggested that local poverty might be a major factor against community participation in the local planning process, the two functioning independently from each other instead of the latter alleviating the former:

"[...]if the people do not have the financial possibility it is not the fault of the municipality. [...]No, they cannot afford the mine anyway. I do not see today's Romania capable of offering any financial facilities to the locals. We are way too poor to afford it [the salt mine]."

Overall, despite the general agreement that the mine modernizing project has been a positive action and that (to a certain degree) it supports the needs of a small number of people from the local community who (legally or illegally) have decided to become subsistence entrepreneurs overnight, the interviewed cohort highly suggested a gap between the local administration's actions and citizen participation in area development.

Environmental management of areas adjacent to tourist sites

Proximity-distance to the salt mine entrance is a major factor in perceiving advantages versus disadvantages of site development. With the exception of an old couple living at the crossroad between a major street and a side street, all the respondents living on Tunel (6 people) and Salinelor (4 people), the two most circulated of the selected streets, mentioned noise, excessive parking in front of their gates, trash left behind and pollution as disadvantages of living in the area. One of the respondents living on Tunel Street provided a developed account in this regard:

“We, on this street, are the most affected. When they paved the street they did not care about our property. They built the walkway higher than the front yard; they heightened the street so much that some of the people’s yards (including mine) became a reservoir. Water flooded my cellar and my neighbor’s house cracked from too much water. I had to dug under the house foundation and put cement to stabilize it. And all of that at my own expense!” (M55a)

Similarly, a participant living in close proximity to the mine mentioned poor management of the infrastructure development and disregard of the local residents’ issues caused by it:

“When they built the parking lot I asked them to raise it because of the water. But they didn’t and water flooded my yard. I fixed it myself with cement. [...]When they took out the waste from the mine they left it behind [my building]. It was as big as my house. When it rained, the salt melted and went underground and affected my building.” (F68na)

Based on people’s account, law enforcement has requested the residents to clean the street themselves, especially during concert nights inside the mine, presenting fines as consequences of disobedience. When asked if anyone had to pay a fine, a respondent suggested that “fear” impeded everyone from disobeying: “[...] people are afraid and they come out and clean. They cannot afford to pay fines.” (M55a)

Community health

In terms of health, even though two of the male interviewees tried the salt mine treatment unsuccessfully in the past, there is a consensus among the residents that the mine is beneficial for the health of the population. Ten out of twenty-five individuals (or 40%) listed “need for treatment” or “benefic effects on my health” as reasons to visit the salt mine again. This belief that the salt mine therapy is working is supported by personal experience or the experience of others:

“My sister in law gets the full treatment every time she comes by and it had positive effects on her.” (M33na); “I go to the mine because health is more important than anything. I used to be sick all the time. [Now] I do not have any issues with my allergies/asthma. I used to go to Cluj for regular lung checkups and they asked me if I smoked. I said: no, I live in Turda. I rent to people from all over the country. A family came from Rosia Montana with a boy who had chronic bronchitis asthma and could not run because he coughed. Next year they called me and said that they would return. The boy was playing football.”(F68na).

Interestingly, considering that the old entrance is supposed to appeal to people with reduced mobility, several respondents living close to this entrance mentioned the need for easier access infrastructure. There were three proposals for a trolley or other means of transportation that would carry people through the tunnel in addition to some of the older respondents’ lack of interest in visiting the mine due to physical inability. It is worth mentioning here that the treatment room is located on the opposite side of the mine, much closer to the new entrance.

Most respondents felt that all the town residents, not just the ones living in close proximity to the salt mine, should be offered incentives to visit the mine for treatment given the history of high pollution of the area. Some recalled a period when the locals were offered free entrance, then access was limited to every Wednesday of the week, not the most successful

option as one respondent pointed out unless the target population included retirees and the unemployed: *“Who would go on Wednesday?!! I work during the week. I would like to go over the weekend.”* (M55a)

Today, the locals do not benefit from any special offers. Retirees are the only ones who, regardless of place of origin, benefit from reduced price. A local retiree made a reference to the fact that she considered herself privileged to have this price reduction that allowed her to pursue treatment, but that at the same time there were still people living nearby who could not afford it: *“I have neighbors who will retire soon and never visited the mine.”* (F70na)

Discussion

The challenges of the above described community are not unique in the world and definitely a pattern found in many other post-communist communities dealing with the de-industrialization lengthy process. This is just another case of tourism globalization, where the local population is the last to receive any economic benefits (if any), while carrying the environmental costs of increasing tourist numbers (Milne and Ateljevic 2010). The results of the case study were beneficial in understanding beyond mere numbers or percentages the challenges faced by local communities when major tourist infrastructure investments are planned with little to no regard to the possible local economic, social, health or environmental impacts.

Findings from this study support previous, quantitative research conducted by Oroian and Gheres (2012), namely:

- The Turda Salt Mine modernization is seen as a positive endeavor undertaken by the local authorities in both studies;
- Seeking treatment is the primary reason to visit the mine, closely followed by sightseeing, recreation and relaxation;
- Both studies found that a the price of tickets or subscription fees for treatment are perceived to be too high, becoming an impediment to visiting the Salt Mine;
- While Oroian and Gheres (2012) suggest a differentiated pricing during workdays, findings from the present study suggest that, except for retirees, the locals would not favor such approach;
- In Oroian and Gheres (2012) individuals with lower educational attainment (up to high school graduates) and lower incomes represented 81% of the surveyed population with 65% females. While the higher female percentage matches this study participants, the economic and educational profile are very different (56% of our interviewees had a college degree);
- While Oroian and Gheres (2012) found that 75% of respondents were from “another place” as compared to 25% locals, Dinu, Zbucea and Cioaca (2010) present data showing that only 3.5 % of Romanian spa visitors are foreigners who are generally not interested in this type of tourism. The most logical conclusion would be that “another place” means Romanians living in other counties and that more needs to be done to support the local population to gain better access to both the recreational and therapeutic services offered by the salt mine.

This study’s qualitative approach allowed a closer look into locals’ relationship with authorities and their expectations of the future tourist area development. Based on its findings, it seems that too much focus on attracting external funding has impeded local authorities

from developing more socially oriented local strategies. The authors' proposed direction is to encourage positive attitudes towards local planning and development actions among the local population. This can be achieved through the empowerment of the locals during the planning, development, implementation, and evaluation process and by offering a number of incentives that would address some of identified local issues. The 'local community' should become vital to the process of creating economic regeneration through the remedy of both social and health ills. Thus, this paper suggests that by capitalizing on local tourism to address not solely economic issues, but also domestic public health challenges, the local administration would be more successful in the implementation and evaluation processes of their projects. Tourism, seen as a "key element that can enable communities devastated by economic restructuring to regain and enhance their economic foothold in regional and national economies" (Milne and Ateljevic 2010) can act as a nexus between the local community and the government.

Supported by existent research and by the results of the case study presented above, the authors argue that economic development alone as a result of booming tourism development does not implicitly result in community well-being, but functions independently, only benefiting a small number of stakeholders not representative of the population. As in other cases (Scheyvens, 1999) the business model (if any) currently utilized in this selected community has served rather to alienate, than benefit local communities. Therefore, special attention should be given to the following categories: the socio-economically disadvantaged population who can barely afford any type of treatment and usually postpone medical visits; elderly population who is more open to this type of tourism; children who would benefit the most from preventive treatments, and; the locals directly impacted by tourism related changes due to their proximity to the site and who could become successful entrepreneurs if properly encouraged and supported. This paper proposes an integrated model intended to increase the impact of tourism on the well-being of the local communities starting from the following objective: To increase the well-being of the local population with the help of tourism within the most recent development objectives presented by Romania and the European Union.

The four pillars of an integrated local community development model

A model of integrated development would ensure consistency of local policies and better accessibility in identifying appropriate sources of funding for potential projects. The two selected documents to consider in developing a local strategy within a national and European context would be Europe 2020, document developed by the European Commission in 2010, and the National Strategy for Sustainable Development of Romania Horizons 2013-2020-2030. Europe 2020 growth strategy in particular aims to eliminate shortcomings in the process of sustainable development and create favorable conditions for smart, sustainable and inclusive growth. Similarly, the National Strategy for Sustainable Development of Romania Horizons 2013-2020-2030 acknowledges several key challenges, among which Public health, Social inclusion, Conservation and Management of Natural Resources or cross-cutting policies such as Communication, Mobilizing actors and Multiplying Success.

Within this context, the authors propose an integrated local community development model based on 4 pillars:

1. **Academic** – stimulating the scientific environment and enhancement of applied research and innovation in finding accessible and timely solutions for local development;
2. **Health** – Improved access among the local population to health services , particularly preventive medicine;

3. **Business** – Encourage and support local business and entrepreneurship;
4. **Social, cultural, and natural heritage** – Socially inclusive growth, societal development and change of local mentalities through community participatory approaches and, utilization of locally available natural resources.

The four major categories listed in the proposed model overlap in their approaches, working collaboratively to address a common goal: enhancing the well-being of the local community, placed at the center of all activities. In order to positively engage the population, this interfused, four-dimensional process would provide each category with the tools needed to accomplish different major tasks. The paper proposes two models for local community development, one that uses divergent strategies and another one that incorporates convergent strategies for growth (Figure 2 and 3).

The success of these models is largely conditioned by the local government's involvement and genuine interest in identifying, testing, and refining principles and practices that relate to promoting and sustaining locally-owned and -led development. Local problems can be resolved in an enduring manner if the local government acts as a mediator by strengthening the relationship between these four networks of local development actors in order to promote the mobilization of and access to local resources for all socio-economic strata.

Once the tourist sites have been modernized, revitalized with the help of external funding, the next phase should consist of a shift in the hubs of influence, where the aforementioned local resource networks together with additional local entities can identify challenges, mobilize resources, and overcome problems without depending on external sources of funding and support.



Figure 2. Local community development and increased tourist attractivity through divergent strategies

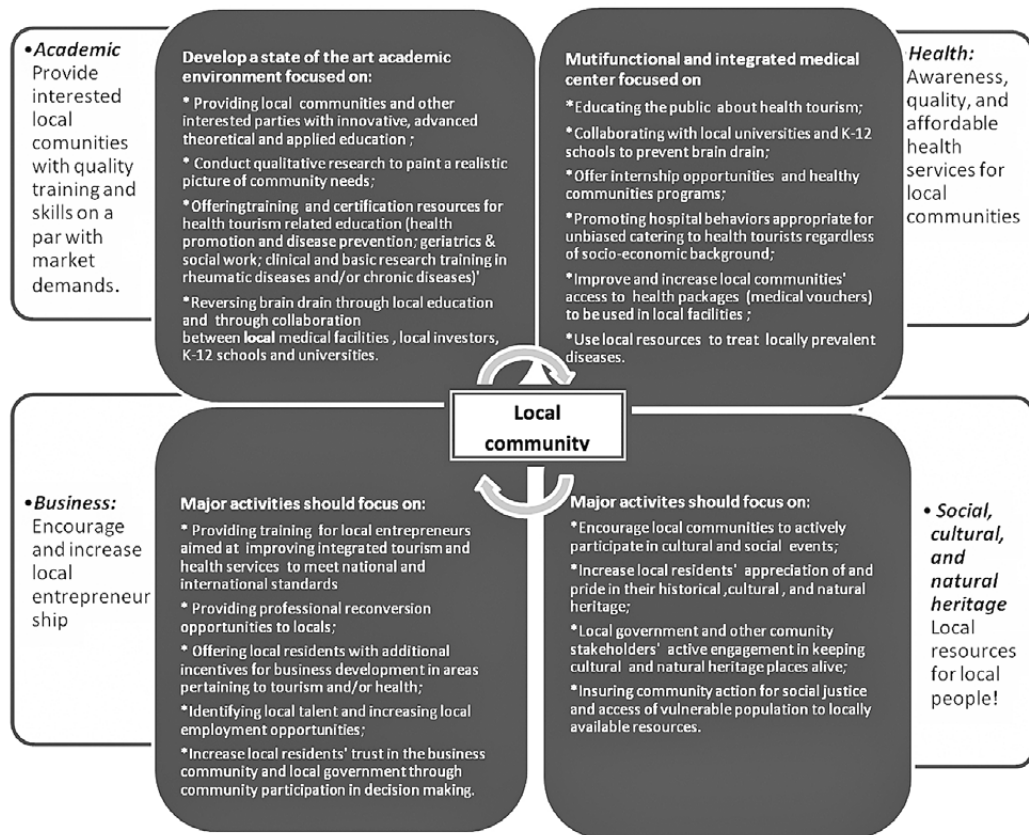


Figure 3. Local community development and increased tourist attractivity through convergent strategies

Interestingly, CON-TURDA 2014-2020 made available online by the Turda City Hall lists tourism as one of the major development pillars for the North-West Region of Romania. The CON-TURDA strategic plan mentions the need for a cultural, recreational and educational component as well as for a better economic strategy and environmental protection. It acknowledges and describes in detail the high number of natural and cultural resources located in the area, stating that it is the economic sector that received the highest share of investment in the past years. While the report provides only a brief overview of its tourist capacity (mainly related to tourist accommodation and marketing), it mentions several important elements also listed by the sample population selected for this research, such as a need to increase the importance of domestic tourism, to adjust pricing based on the type of service needed, to diversify the tourist offer of the area, to encourage local businesses, to improve the management of local waste and to continue to rehabilitate road infrastructure. It even proposes creation of Info Centers where the local population could gain access to information, training and gain support in the development of community initiatives.

Unfortunately, a closer look into the proposed integrated projects to be accomplished in the near future reveals plans that continue to disregard the needs of the local, aging community to benefit from the tourism development. The actual plans steer away from the initially proposed objectives that would have followed the overall development strategy for the North-West Region. There is no mention of community health programs (despite prior notes on the

precariousness of the local social and health providers) or about any incentives to be offered to the locals to encourage entrepreneurship, civic engagement, and/or to use locally available sites for improving health.

The findings in both qualitative interviews and official reports suggest limited convergence across sectors as well as evidence of policy divergence in the mechanisms created for proposed strategy implementation. Pressure for convergence seems to be weak. Therefore, the manner in which policy arena interacts with community voices to influence and implement appropriate policy design are critical in the application of both convergent and divergent proposed models.

Conclusion

In conclusion, there is a clear need for a more integrated approach for tourism development in areas still recovering from industrial decay, where the well-being of the local communities should be sustained and enhanced through genuine partnerships. The paper emphasizes the role of the social capital in economic restructuring and the importance of creating sustainable, long-term alliances between public (educational institutions, hospitals, City Hall, social security services) and private entities (businesses, local leadership) to allow for more local control of available natural resources, local expansion of nationally and globally competitive tourist products through encouraged local entrepreneurship, and overcoming the distrust in the local governance. To address these gaps the authors proposed a fused Education, Health, Business, and Social, cultural and natural heritage approach that should be undertaken by the local governments to bring together the different actors from each separate category. The paper brings back to life the formerly integrated environmental and economic aspects of public health, social spa tourism, and community social planning. It makes a strong case for local action, but acknowledges that global forces will still remain vital in keeping up with a globally integrated economy. The approach though is that too much focus on global actors might lead to increased local distress, while excessive dependence on external funding can lead to problems in the long-run.

References

- Bosic, G. and Vatca, A.M. 2013. Aspects of Development and Territorial Potential in Turda - Câmpia Turzii Urban Agglomeration Romania. *Journal of Settlements and Spatial Planning*, 4, 1 (2013) 59-68. Retrieved from <http://geografie.ubbcluj.ro>
- Dinu, M., Zbucea, A., & Cioacă, A. 2011. Health Care Tourism in Romania: Main Features and Trends. *Journal of Tourism Challenges and Trends*, 4(2).
- Erdeli, G., Dincă, A. I., Gheorghilaș, A., and Surugiu, C. 2011. Romanian spa tourism: a communist paradigm in a post-communist era. *Human Geographies, Journal of Studies and Research in Human Geography*, 5(2), 41-56.
- European Commission, Europe 2020. COMMUNICATION FROM THE COMMISSION EUROPE 2020 A strategy for smart, sustainable and inclusive growth, Brussels, 3.3.2010 COM(2010) 2020 final. Retrieved from http://ec.europa.eu/europe2020/index_en.htm
- Goldan, T., Danciu, C., and Nistor, C. 2010. Touristic and Medical Facilities in Romanian Salt Mine Cavities. *Research Journal of Agricultural Science*, 42 (3), 579-586. Retrieved from file:///C:/Users/cami/Downloads/434.pdf.

- Hartwell, H., Hemingway, A., Fyall, A., Filimonau, and V., Wall, S. 2012. Short communication Tourism engaging with the public health agenda: Can we promote 'well-ville' as a destination of choice? *Public Health*. Retrieved from <http://dx.doi.org/10.1016/j.puhe.2012.08.013>
- Horowitz, S. 2010. Salt Cave Therapy: Rediscovering the Benefits of an Old Preservative. *Alternative & Complementary Therapies*, 16, 3, 158-162.
- Lee-St. John, J. 2008. Saline Solutions, *Time*, 171, 14, 54-55.
- Light, D. 2001. 'Facing the future': tourism and identity-building in post-socialist Romania. *Political Geography*, 20(8), 1053-1074.
- Milne, S. and Ateljevic, I. 2001. Tourism, economic development and the global-local nexus: Theory embracing complexity. *Tourism Geographies: An International Journal of Tourism Space, Place and Environment*, 3:4, 369-393, DOI: 10.1080/146166800110070478.
- National Sustainable Development Strategy Romania 2013-2020-2030, Government of Romania and the United Nations Development Program. Retrieved from http://www.un.org/esa/dsd/dsd_aofw_ni/ni_pdfs/NationalReports/romania/Romania.pdf.
- Nica, A.S., Meila, A.M., and Macovei, L. 2007. Speleotherapy. *Romanian Journal of Rheumatology*, 16, 4, 269-273.
- Oroian, M. and Gheres, M. 2012. The opportunity to develop the social programs at Turda Salt Mine, Romania- A social tourism tool. Project Europe 2030 Challenges and Opportunities, A report to the European Council by the Reflection Group on the Future of the EU 2030, May 2010, Romanian National Institute of Statistics (2012 and 2014). Retrieved from <http://www.ajofmcj.ro/> and <http://www.insse.ro>.
- Regional Development Concept 2014-2020 (CON-TURDA). Turda City Hall, August 2013. <http://www.primariaturda.ro/>
- Scheyvens, R. 1999. Ecotourism and the empowerment of local communities. Case Study. *Tourism Management*, 20(1999), 245-249. Retrieved from <http://ckwri.tamuk.edu>.
- Stăncioiu, A.-F., Băltescu, C.-A., Botoș, A., and Pârgaru, I. 2013. Aspecte conceptuale privind marketingul turismului balnear în România [Conceptual aspects related to marketing spa tourism in Romania]. *Economie teoretică și aplicată*, XX, 2 (579), 124-137.
- Tulchinsky, T. H. and Varavikova, E. A. 2014. *The new public health: an introduction for the 21st century*. Academic Press.
- World Health Organization Regional Office for Europe 2014. Action Plan for implementation of the European Strategy for the Prevention and Control of Noncommunicable Diseases 2012-2016. Retrieved from <http://www.euro.who.int>.
- World Health Organization 2014. NCD Country Profile 2014, Romania. Retrieved from <http://www.who.int>.
- World Health Organization 2013. Country Cooperation Strategy at a glance ROMANIA, 2011 Updated May 2013. Retrieved from <http://www.who.int>.
- World Health Organization Office for Europe, European Environment and Health Information System 2007. Prevalence of asthma and allergies in children, Fact sheet No 3.1., May 2007, Code : RPG3_Air_E1. Retrieved from <http://www.euro.who.int>.
- World Tourism Organization, Romania National Tourism Development Master Plan 2007-2026. Retrieved from <http://www.unibuc.ro>.