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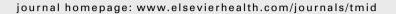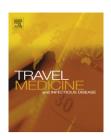
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REVIEW

The health impact of tourism on local and indigenous populations in resource-poor countries

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Summary   In the vast Travel Health literature there is still a considerable dearth on tourism's impact on local communities. This review attempts to remedy the situation. Its focus is on potential health impacts on populations living at tourist destinations outside the industrialised world. To facilitate a better understanding of how health is linked to tourism today, a brief overview of the historical and theoretical evolution of tourism is presented. Ecotourism is given special attention as it is perceived as a version of the industry that is more benign on environment and people. After discussing Indigenous Tourism, a variety of potential health implications is outlined. These follow a previously suggested classification of indirect and direct impacts, with the indirect impacts being based on economic, environmental, socio-cultural and, more recently, political impacts, and the direct impacts originating from imme-diate encounters between tourism and people. Finally, the urgent need for more research is highlighted, and some solutions to minimize health impact are suggested.
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Introduction

On 26 October 1958, the world of travel changed. The American airline PanAm launched the first commercial transatlantic route from New York to London, with 111 passengers on board a Boeing 707. Although British BOAC had introduced the world's first commercial jet service in May 1952 from London to Johannesburg (with numerous stop-overs), PanAm had opened the market for long-haul flights. After World War II, peace and stability triggered an era of rebuilding, and a drive to accumulate material wealth. A booming economy, and new found prosperity based on hard work, lead to more disposable funds, and increased leisure time allowed the addition of travel to the desired house-car-appliances package. With the possibility of long-distance travel, for many, the usual holiday desti-nations changed from the closest seaside resort to foreign countries and continents. Mass tourism was born, and in 2006, over 850 million international arrivals were recorded.[1] Over the decades, cultural and natural attrac-tions in developing countries were added to the tourism product. This created a demand for adventure tourism and cultural tourism to ever more exotic places, culmi-nating in visits to locations marketed as 'unspoilt', people

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as 'untouched' (before anyone else got there), and off the — literally — beaten track.

The relentless search for new places usually starts with a few genuinely interested and experienced visitors causing little impact who then create a 'word-of-mouth' publicity and growing curiosity. Following are people who are less experienced, perhaps less interested and considerate, and who sometimes exaggerate their experience by including some imagined heroism.[2] They make a place 'too developed and touristy' for the first visitors who rather move on to the next new place, adding yet another site to the must-see-catalogue.[3] As Wheeler[4] noted, 'voracious wolf in lamb's clothing, the sensitive traveller is the real perpetrator of the global spread of tourism and in this capacity must take responsibility for some of tourism's adverse impacts' (p. 105). Parallel to this development arose concerns about impacts of tourism, categorized into economic, environmental and socio-cultural. Little attention was paid to health impacts, particularly on local communities in rural and remote destinations in developing countries, many of them indigenous people.

Although travel is as old as humanity itself, tourism does not have a very long tradition of scholarship and research. The emergence of academic tourism literature can be placed in the early 1970s. However, since then the body of knowledge has grown tremendously, not only from the perspectives of other established disciplines, such as psychology, sociology, anthropology, economics, geography, environmental sciences, political sciences and many more[5] (see Fig. 1, and note the absence of health), but also within tourism as an independent academic discipline. Tourism's health impacts have attracted less attention[6] with the first papers appearing only in the late 1990s.[7—9]

This review aims to provide a brief historical and theoretical tourism background to allow the reader to place health concerns in the appropriate context. The tourism literature is now so extraordinarily numerous, complex, comprehensive and multi-faceted, that no attempt to provide a summary can be satisfactory. Therefore, for the purpose of this paper, selected topics and trends are introduced. Very readable older and recent collections are recommended for those seeking more detail.[10—13] Then, the current literature will be examined as it relates to tourism's potential health impacts on destination communities in resource-poor areas of the world. Finally, current views on ways to monitor impacts and curb negative implications will be presented, including the need for much more research.

The evolution of tourism paradigms and their subsequent concerns

Considered by many as the 'father of tourism academia', Jafar Jafari[14] classified the tourism literature into four distinctive 'platforms' which are not only useful for appreciating different perspectives on tourism, but also allow an understanding of the historical evolution of paradigm shifts over the last decades. His framework will be used here to summarize very briefly the different views on tourism, and to explain how and when concerns for health issues developed.

Advocacy platform

Tourism in the 1950s and 1960s focussed on economic aspects. Free-market capitalism shaped the industry as a business opportunity where benefits increased proportionally with increased tourism arrivals. Marketing was driven by quantity, and mass tourism was the answer to achieve the goals. For many, this was the easiest way to earn foreign exchange, and in many developing countries, this view still prevails, if not among the people then with governments. Early examination of this kind of tourism focussed on socio-economic aspects,[15] justified by tourism's revival of traditions, customs and arts, and, hence, preserving natural, historical and architectural attractions.

Cautionary platform

After years of perceived abundance, critical voices started to question the value of consumption without consideration of others, leading to a general shift in world views toward the end of the 1960s and early 1970s. In terms of tourism development, negative impacts on and undesirable costs to environment, economy and people through too much and unregulated tourism became the focus of the academic literature. Less research-based, overwhelming observational and anecdotal evidence supported the criticism. One of the classic works of the time is Doxey's index of tourist irritation (Irridex),[16] outlining the progression of local people's perception of visitors from euphoria, to apathy, annoyance and antagonism, a framework still in use today.[17] Reflecting the spirit of the time, it is interesting to note that this was also the era of the first UN Conference on Human Environment in 1972 in Stockholm and, of course, the years leading up to the WHO/UNICEF Primary Health Care Conference in Alma-Ata in 1978 which marked a turning point in the approach to world health.

Adaptancy platform

The late 1970s and early 1980s saw a continuation of critical examinations of tourism. Most of the classic impact literature can be found here,[13,18,19] including Butler's Tourist Area Cycle of Evolution.[20] Yet, due to the complexity, and methodological difficulties,[21] still very little is research-based. However, at the same time, the search was on for alternative forms of tourism with presumably less negative impacts, that would respond to the needs of host communities and protect the natural and socio-cultural environment, but still allow tourists to have a rewarding travel experience. Alternative tourism forms, in contrast to 'out-of-control', 'irresponsible' mass tourism, were given more than 25 distinguishing identifiers,[22,23] including 'green', 'sustainable', 'soft', 'controlled', 'responsible', 'cultural', 'ethnic' and many more but above all 'eco' (from 'ecological') with its particular focus on nature-based tourism destinations. Because of the popularity of the term 'ecotourism', this form will be introduced shortly. Alternative tourism was supposed to be beneficial for communities and environment, yet, it also was clear that it could not accommodate the sheer number of current tourist populations.