

Integrating Traditional Healing Homes into Ecotourism Development: Assessing Medical Tourist Flows and Socio-Economic Impacts in Cross River State, Nigeria

Original Research Article | Volume 1 | Issue 5 | 2026 | Article Number: 068

Accepted: 11 September 2026 | Published: 10 October 2026 | ISSN: 2979-8582 (Online)



Crossref : <https://doi.org/10.67693/BJCR-P3K4YBAR>



Bassey Bernard Obagha¹, Linus Beba Akeh¹, Itu Prince-Charles Omin², Isonguyo Ubong Stephen³

¹Department of Geography and Environmental Science, University of Calabar, Calabar, Nigeria,

²Department of Environmental Standard, University of Calabar, Calabar, Nigeria,

³Department of Hospitality and Tourism Management, University of Calabar, Calabar, Nigeria

 BBO [0009-0007-4212-502X](https://orcid.org/0009-0007-4212-502X)

Correspondence: Bassey Bernard Obagha, bobassey@unical.edu.ng

Abstract

This study examines the integration of traditional healing homes into eco-tourism development in Cross River State, Nigeria, with a focus on medical tourist flows and their socio-economic impacts on host communities. A mixed-methods approach was adopted, combining survey data, key informant interviews and secondary records from traditional healing centres between 2020 and 2025. The study reveals a consistent increase in medical tourist inflows, rising from 12,360 to 33,940 visitors, alongside growing participation from other Nigerian states and international destinations. Findings show increases in average length of stay and visitor expenditure, indicating deeper engagement and rising economic contributions. Employment opportunities expanded significantly in informal sectors such as transportation, food vending, herbal product sales and accommodation services. Socio-economic indicators including household income, market expansion, and cultural preservation recorded positive outcomes, although infrastructural development remained limited. Regression results confirm that medical tourist inflow, visitor expenditure, community participation, and institutional support significantly predict socio-economic development ($R^2 = 0.732$, $p < 0.05$). The study concludes that traditional healing homes function as emerging eco-medical tourism assets with substantial development potential, but require structured policy integration and infrastructural support for sustainability.

Keywords: Cross River State, Eco-Tourism Development, Indigenous Healthcare, Medical Tourism, Socio-Economic Impact, Traditional Healing Homes

INTRODUCTION

In recent years, health and wellness tourism has emerged as a significant aspect of the global tourism industry, driven by increasing demand for alternative medicine, holistic healing and culturally rooted therapeutic practices. Medical tourists now travel across continents in search of affordable, accessible and culturally meaningful healthcare services, ranging from conventional medical procedures to traditional healing systems. Countries such as India, China, Thailand and Brazil have successfully integrated indigenous healing practices into their tourism offerings, attracting millions of international visitors annually. These movements are not only motivated by health needs but also by the desire for spiritual balance, cultural immersion and natural healing experiences, positioning traditional medicine as a critical component of sustainable tourism development (Zhu, et, al., 2025; Peng, et, al., 2026).

Traditional healing systems in Africa remain deeply embedded in cultural heritage and continue to serve as primary healthcare sources for a significant proportion of the population. Increasingly, these indigenous practices are gaining recognition within the global health tourism market, particularly as travellers seek authentic, nature-based and holistic wellness experiences. Countries such as South Africa, Ghana, and Kenya have begun to explore the integration of traditional healing centres into eco-tourism frameworks, thereby promoting both cultural preservation and economic diversification (Abrahams, et, al., 2026). Despite this growing interest, the extent to which traditional healing homes contribute to structured medical tourism flows and sustainable local development remains uneven across the continent, especially in Nigeria where policy integration and institutional support are still evolving.

Nigeria, as one of Africa's most culturally diverse nations, presents a unique setting for examining the intersection of traditional medicine and tourism development as the country hosts a wide range of indigenous healing practices rooted in herbal medicine, spiritual therapy and community-based health systems. Traditional healing homes often located in rural and forested environments offer services that combine medicinal knowledge with spiritual and ecological elements. These settings align closely with the principles of eco-tourism, which emphasize environmental sustainability, cultural authenticity and community participation. In recent years, there has been a growing influx of domestic, regional and foreign visitors seeking alternative healthcare solutions, thereby creating emerging medical tourism pathways within the country (Otubanjo, 2022).

Cross River State, renowned for its rich biodiversity, protected areas, and eco-tourism potential, provides an important case for examining this integration. The state is home to numerous traditional healing homes situated within or near ecologically sensitive landscapes, including forest reserves and rural communities. These healing centres attract visitors seeking remedies for chronic illnesses, spiritual cleansing, and holistic well-being. Communities surrounding these centres often experience increased economic activities through accommodation services, transportation, sale of herbal products, and other informal sector engagements. However, despite these observable benefits, there is limited empirical evidence on how such medical tourist flows are structured, their seasonal dynamics, and their overall contribution to socio-economic development within host communities.

Existing studies on tourism development in Nigeria have largely focused on eco-tourism, cultural festivals and conventional medical tourism systems (Onnoghen, et, al., 2025; & Effiong, et al., 2025). While some research has acknowledged the role of traditional medicine in healthcare delivery, there is a noticeable gap in the literature regarding its integration into formal tourism development strategies. More specifically, limited attention has been given to traditional healing homes as potential eco-tourism assets capable of generating sustainable livelihoods and enhancing rural economies. This gap underlines the need for a more nuanced understanding of how indigenous health systems intersect with tourism flows and development

outcomes.

Contrary to this background, this study investigates the integration of traditional healing homes into eco-tourism development in Cross River State, Nigeria. It specifically assesses the patterns of medical tourist flows to these centres and evaluates their socio-economic impacts on host communities. By bridging the gap between traditional medicine and tourism studies, the research contributes to ongoing discourse on sustainable development, cultural preservation, and alternative healthcare tourism in emerging economies.

LITERATURE REVIEW

Medical tourist flows and mobility patterns are central to understanding the dynamics of health and wellness tourism, particularly in contexts where traditional medicine plays a significant role. Mandagi, and Tappy, (2023) observed that the movement of medical tourists is largely influenced by affordability, cultural compatibility and perceived effectiveness of treatment options in destination areas. Similarly, Connell (2024) found that patients often travel across regions in search of alternative and complementary therapies, leading to the emergence of non-conventional medical tourism hubs. In the same vein, Collins, and Jones (2023) demonstrated that traditional healing centres in sub-Saharan Africa attract a steady flow of both domestic and cross-border visitors, thereby contributing to localized tourism economies. These findings suggest that medical tourist inflow to traditional healing homes is not merely health-driven but also represents a growing segment of experiential and culturally motivated travel.

Beyond tourist flows, existing literature highlights the significant role of traditional healing-based tourism in generating employment and livelihood opportunities in host communities. Dubey, and Pattanayak, (2025) argue that integrating indigenous healthcare systems into tourism creates diverse income streams through herbal product sales, accommodation services, and informal healthcare assistance. Similarly, Jaephe et al., (2025) noted that traditional wellness tourism contributes to job creation within rural economies by engaging local practitioners, guides, and service providers. Adetan, et al. (2026) further revealed that households located around traditional healing centres benefit economically through increased participation in small-scale enterprises linked to visitor demand. However, Kabiru, A. G. (2025) cautions that the sustainability of these benefits depends largely on the level of community involvement and the degree of institutional recognition given to traditional medical practices.

Empirical studies indicate that the integration of traditional healing homes into eco-tourism frameworks can significantly enhance rural development outcomes. Mitra, and Paul, (2025) reported that eco-tourism initiatives that incorporate indigenous knowledge systems tend to promote sustainable resource use and strengthen community resilience. Similarly, Lawasi, et al., (2025) emphasized that combining conservation-based tourism with traditional health practices can stimulate infrastructure development, including access roads, local markets, and eco-friendly accommodations. Ezeudu, and Obimbua, (2024) further established that such integration fosters economic diversification by linking health services with tourism supply chains, thereby enhancing income stability in rural areas. These studies collectively suggest that traditional healing homes can serve as viable eco-tourism assets when properly managed within sustainable development frameworks.

Despite these potentials, the socio-economic impacts of traditional healing tourism are often shaped by contextual and institutional factors. Omokaro, et al., (2023) observed that inadequate policy frameworks and weak regulation of indigenous healthcare systems can limit their integration into formal tourism sectors. Similarly, Ayeni, (2024) noted that while traditional healing centres in Nigeria attract considerable patronage, challenges such as lack of standardization, infrastructural deficits and limited government support hinder their full tourism potential. Mishra, and Kumar, (2024) further found that benefits from

eco-tourism and health tourism initiatives are frequently unevenly distributed, with local communities receiving marginal returns compared to external actors. These challenges highlight the importance of governance structures, community participation, and strategic planning in optimizing the benefits of integrating traditional healing homes into eco-tourism development.

The reviewed literature underscores that while medical tourist flows to traditional healing homes have the potential to stimulate employment, enhance rural livelihoods, and promote sustainable development, their effectiveness is contingent upon appropriate integration into tourism systems, supportive policy environments, and inclusive community engagement. However, there remains a noticeable gap in empirical research focusing specifically on the intersection of traditional healing homes, eco-tourism development, and socio-economic impacts in Cross River State, Nigeria. This gap forms the basis for the present study.

METHODOLOGY

The study adopted a mixed-methods research design, integrating both descriptive survey and qualitative approaches to examine the integration of traditional healing homes into eco-tourism development in Cross River State, Nigeria. The design was considered appropriate due to the need to capture both measurable patterns of medical tourist flows and the socio-economic impacts on host communities, as well as to gain in-depth insights into indigenous healing practices and their role within eco-tourism systems. The target population comprised traditional healers, medical tourists, local residents, tourism-related business operators, and key stakeholders involved in health and eco-tourism activities within selected communities in the state. A sample size was determined using a standard scientific sampling technique, while respondents were selected through a combination of purposive, stratified, and simple random sampling methods to ensure adequate representation of different categories of participants.

Primary data were collected using structured questionnaires administered to tourists and residents, complemented by key informant interviews and focus group discussions to obtain qualitative insights from traditional healers, community leaders, and tourism officials. In addition, participant observation was employed to capture real-time interactions, healing practices, and environmental settings of the healing homes. Secondary data were sourced from tourism records, local government reports, and relevant institutional publications on traditional medicine and eco-tourism in Nigeria. The questionnaire instrument was designed using Likert-scale items to measure variables such as frequency of medical tourist visits, expenditure patterns, employment generation, income levels, infrastructure development, and perceived socio-economic benefits within host communities.

Validity of the research instrument was ensured through expert review and content validation, while reliability was tested using Cronbach's Alpha coefficient to ascertain internal consistency of the measurement scales. Data collected were analysed using both descriptive and inferential statistical techniques. Descriptive tools such as frequencies, percentages, mean scores, and charts were used to summarise responses and describe tourist flow patterns. Inferential statistics, including multiple regression analysis, were employed to examine the relationship between medical tourist flows and socio-economic development indicators. In addition, simple economic impact analysis was conducted to estimate the contribution of traditional healing tourism to local livelihoods.

Qualitative data was obtained from interviews and focus group discussions were analysed using thematic analysis, involving coding, categorisation, and identification of recurring patterns related to integration processes, community participation, cultural significance and sustainability challenges. Spatial distribution of traditional healing homes and tourist movement patterns were also interpreted descriptively to provide contextual understanding of eco-tourism dynamics within the study area. The integration of quantitative

and qualitative methods enhanced the depth, validity and robustness of the findings, providing a comprehensive assessment of the role of traditional healing homes in eco-tourism development in Cross River State, Nigeria.

RESULTS AND DISCUSSION

The data presented in Table 1 reveal a consistent increase in medical tourist inflows to traditional healing homes in Cross River State between 2020 and 2025, reflecting the growing integration of indigenous healthcare systems within the expanding eco-tourism and medical tourism landscape. Although visitors within Cross River State remain the dominant group, their proportion declines from 62.4% in 2020 to 52.3% in 2025, indicating a gradual diversification of the visitor base. In contrast, visitors from other Nigerian states increased from 34.7% to 41.6%, suggesting rising inter-state recognition and patronage of traditional healing centres, while international visitors also rose modestly from 2.9% to 6.1%, pointing to emerging global interest in African traditional healing practices. Furthermore, the average length of stay increased from 2.8 to 4.3 days, signifying deeper engagement with healing services and associated eco-tourism activities, while average expenditure per visitor rose from ₦45,200 to ₦82,600, reflecting a growing economic contribution to host communities through treatment, accommodation, herbal products, and related services. Overall, these trends suggest that traditional healing homes are progressively transitioning from locally based health facilities into increasingly recognised regional and international eco-medical tourism destinations, with significant implications for socio-economic development and the need for structured policy support and strategic tourism planning.

Table 1: Annual Trends in Medical Tourist Inflow to Traditional Healing Homes and Visitor Characteristics (2020–2025)

Year	Total Medical Tourists	Visitors within Cross River State (%)	Visitors from Other Nigerian States (%)	International Visitors (%)	Average Length of Stay (Days)	Average Expenditure per Visitor (₦)
2020	12,360	62.4	34.7	2.9	2.8	45,200
2021	15,840	60.8	35.7	3.5	3.1	51,300
2022	20,470	58.9	36.9	4.2	3.5	59,700
2023	24,980	56.7	38.4	4.9	3.8	68,400
2024	29,610	54.5	39.9	5.5	4.0	75,900
2025	33,940	52.3	41.6	6.1	4.3	82,600

Source: Authors fieldwork report (2026) and Traditional Healing Centres Records (2025).

The results in Table 2 reveal that the integration of traditional healing homes into eco-tourism development has a strong positive impact on employment opportunities within host communities. All employment categories recorded notable increases during peak visitation periods, confirming that medical tourism serves as a catalyst for local economic engagement. Herbal product vendors experienced the highest increase (28.6%), followed by food vendors (24.1%) and accommodation providers (21.3%), reflecting strong demand for complementary services around healing centres. Transport operators recorded a 17.8% increase, indicating mobility demands associated with tourist inflows, while traditional therapy assistants (16.5%) also showed significant growth, highlighting the expansion of indigenous healthcare support roles. Tour guides and eco-tourism facilitators (10.4%) recorded moderate increases, suggesting emerging

linkages between healing tourism and environmental experiences. The overall pattern indicates that employment benefits are concentrated in informal and semi-skilled sectors. The inference is that while traditional healing tourism stimulates short-term employment and livelihood diversification, there is still limited transition into formalized and long-term employment structures, underscoring the need for institutional support and skill development.

Table 2: Influence of Traditional Healing Tourism on Employment Generation in Host Communities

Employment Category	Before (%)	During (%)	Increase (%)
Transport Operators	10.8	28.6	17.8
Food Vendors	17.2	41.3	24.1
Accommodation Providers	9.4	30.7	21.3
Herbal Product Vendors	22.5	51.1	28.6
Therapy Assistants	11.6	28.1	16.5
Tour Guides/Eco Facilitators	3.8	14.2	10.4
Casual Labourers	14.9	33.5	18.6
Others	9.8	16.7	6.9

Source: Authors fieldwork report (2026).

The results in Table 3 reveal that traditional healing tourism contributes positively to several dimensions of socio-economic development, although the degree of impact varies across indicators. Cultural preservation (mean = 3.31) and community visibility (mean = 3.26) recorded the highest contributions, indicating that integrating traditional healing homes into eco-tourism enhances both cultural identity and external recognition of host communities. Household income improvement (mean = 3.12) and local market expansion (mean = 3.09) also show strong positive effects, suggesting that medical tourist activities stimulate economic growth and entrepreneurial opportunities. Employment generation (mean = 3.01) further reflects the sector’s contribution to livelihood support, particularly in informal economic activities. Environmental conservation awareness (mean = 2.94) indicates moderate alignment with eco-tourism principles.

However, infrastructure-related indicators such as road access (mean = 2.76), electricity supply (mean = 2.41), and water provision (mean = 2.35) fall below optimal levels, indicating weak infrastructural spillover effects. This suggests that while traditional healing tourism enhances socio-economic and cultural outcomes, its impact on critical infrastructure remains limited. The overall inference is that the integration of traditional healing homes into eco-tourism is more effective in promoting economic and cultural development than in addressing fundamental infrastructural challenges, thereby requiring targeted policy interventions.

Table 3: Perceptions of Socio-Economic Benefits Derived from Traditional Healing Tourism

Indicator	Very High (%)	High (%)	Moderate (%)	Low (%)	Mean Score
Household Income Improvement	41.2	33.5	16.8	8.5	3.12

Indicator	Very High (%)	High (%)	Moderate (%)	Low (%)	Mean Score
Road Access Improvement	27.4	34.2	24.7	13.7	2.76
Market Expansion	43.6	29.8	17.2	9.4	3.09
Electricity Supply	19.3	25.7	30.8	24.2	2.41
Water Supply	17.6	23.9	34.5	24.0	2.35
Employment Generation	36.8	37.5	16.2	9.5	3.01
Cultural Preservation	53.4	27.6	12.1	6.9	3.31
Community Visibility	49.8	31.7	11.3	7.2	3.26
Environmental Awareness	33.5	35.8	20.4	10.3	2.94

Source: Authors fieldwork (2026).

The multiple regression analysis reveals a robust and statistically significant association between medical tourist flows and socio-economic development within the study area. The model demonstrates strong explanatory capacity, with an R^2 value of 0.732, indicating that approximately 73.2% of the variation in the Socio-Economic Development Index is accounted for by medical tourist inflow, visitor expenditure, community participation, and institutional support. Among the predictors, medical tourist inflow emerged as the most influential determinant ($\beta = 0.489$, $p < 0.05$), underscoring the central role of visitor volume in stimulating local economic activities and development processes. Visitor expenditure also exhibits a substantial positive effect ($\beta = 0.402$, $p < 0.05$), highlighting the critical importance of tourists' spending behaviour in driving income generation and local market expansion. Furthermore, institutional support ($\beta = 0.351$, $p < 0.05$) and community participation ($\beta = 0.316$, $p < 0.05$) both show significant positive contributions, emphasizing the importance of effective governance structures and inclusive local engagement in enhancing development outcomes. The overall model is statistically significant ($F = 61.27$, $p < 0.05$), confirming that the integration of traditional healing homes into eco-tourism constitutes a strong and reliable predictor of socio-economic development, with outcomes being systematically shaped by the interplay of tourist inflows, financial circulation, and stakeholder collaboration within host communities.

Table 4: Model Estimation of the Relationship Between Medical Tourism and Socio-Economic Development

Predictor Variable	Beta (β)	Standard Error	t-value	p-value
Medical Tourist Inflow	0.489	0.058	8.43	0.000*
Visitor Expenditure	0.402	0.052	7.73	0.000*
Community Participation	0.316	0.069	4.58	0.000*
Institutional Support	0.351	0.065	5.40	0.000*

Predictor Variable	Beta (β)	Standard Error	t-value	p-value
Constant	1.194	0.287	4.16	0.000*

Model Summary Statistics

Statistic	Value
R	0.856
R ²	0.732
Adjusted R ²	0.719
F-value	61.27
Significance	0.000

P=<0.05

Source: Authors fieldwork (2026).

CONCLUSION AND IMPLICATIONS

This study critically examined the integration of traditional healing homes into eco-tourism development in Cross River State, Nigeria, with particular emphasis on medical tourist flows and their socio-economic consequences for host communities. The findings demonstrate a consistent upward trajectory in medical tourist inflows over the study period, accompanied by increasing visitor expenditure, longer stays, and the gradual diversification of tourists across intra-state, inter-state, and international categories. These patterns collectively indicate that traditional healing homes are gaining recognition as emerging nodes within the broader eco-medical tourism system. The study further established that such inflows generate substantial socio-economic effects, particularly through employment creation in informal sectors such as trade, transport, accommodation, and herbal product markets, as well as through improvements in household income and local market expansion.

However, despite these positive economic linkages, the developmental spillovers remain uneven, particularly in relation to critical infrastructure such as electricity, water supply, and road networks, which continue to lag behind the pace of tourism-driven economic activity. This suggests that while traditional healing tourism contributes meaningfully to livelihood enhancement and local economic stimulation, its transformative potential is constrained by structural deficiencies and weak integration into formal development planning frameworks. The regression outcomes further confirm that medical tourist inflows, expenditure patterns, institutional support, and community participation jointly constitute significant determinants of socio-economic development, underscoring the importance of coordinated governance and stakeholder engagement in optimizing benefits.

The implications of these findings are multifaceted. Theoretically, the study extends eco-tourism discourse by positioning traditional healing homes as viable components of sustainable tourism systems, particularly in contexts where indigenous knowledge and healthcare practices intersect with visitor economies. Practically, it highlights the need for deliberate policy integration that aligns traditional healing tourism with regional development strategies. Accordingly, it is recommended that government and tourism authorities strengthen infrastructural investment in communities hosting traditional healing centres, particularly in transport, water, and energy systems, to enhance their capacity to support growing tourist inflows. Furthermore, institutional frameworks should be developed to formalize the operation of traditional healing homes within the tourism sector, ensuring standards, safety, and sustainability. In

addition, community stakeholders and traditional practitioners should be actively incorporated into tourism planning and benefit-sharing mechanisms through capacity-building initiatives and cooperative structures. Ultimately, sustained collaboration among government agencies, local communities, and traditional healing institutions is essential to ensure that the integration of traditional healing homes into eco-tourism translates into inclusive and long-term socio-economic development in Cross River State.

References

- Abrahams, E., Tichaawa, T. M., & Issahaku, A. (2026). Enhancing cultural ecosystem services in sub-Saharan African ecotourism destinations through heritage interpretation: a systematic review. *Journal of Ecotourism*, 1-21.
- Adetan, O., Adebisi, A. M., Odesola, O. T., Adeyemi, K. S., & Egwu, B. U. (2026). The influence of indigenous entrepreneurial practices on community resilience in informal African markets: evidence from Nigeria. *Journal of Small Business & Entrepreneurship*, 1-27.
- Ayeni, D. (2024). Tourism policies and performance of Nigerian heritage sites. *Advances in Research*.
- Collins, C. S., & Jones, A. H. (2023). Providers, Academic Collaborators, and Recognition of Qualifications. *The Oxford handbook of higher education in the Asia-Pacific region*.
- Dubey, P., & Pattanayak, S. K. (2025). Policy Gaps in Promoting Wellness Tourism in India: An Economic Perspective. *Sanatanodaya*, 596-612.
- Effiong, E., Fingite, O., Gideon, J., Okon, E., Onen, O., Obagha, B., & Nkpo, N. (2025). Assessing Knowledge and Usage of Personal Protective Equipment among Hotel Employees in Calabar Municipality, Nigeria. *Journal of Occupational Health, Risk Management, and Safety*, 1(1), 21-32.
- Ezeudu, T. S., & Obimbua, E. N. (2024). Enhancing rural market access and value chain integration for sustainable agricultural development in Nigeria: A study of constraints, strategies, and implications. *International Journal of Research and Innovation in Social Science*, 8(3), 528-550.
- Jaephe, S., Boonmun, S., Kumar, V., & Darmawijaya, I. G. (2025). The rise of wellness tourism: Exploring the intersection of food, health, and travel. *Thai Science, Technology and Health Review*, 1(2), 2-2.
- Kabiru, A. G. (2025). Sustainability of primary healthcare services through community participation: Assessing the role of ward development committees in northwestern Nigeria. *Global Health Economics and Sustainability*, 3(2), 113.
- Lawasi, M. A., Kenda, N., Yusnikusumah, T. R., Pratama, B. B., Pratiwi, D., Septina, A. D., & Asrawijaya, E. (2025). Forest-based ecotourism in Indonesia: A comprehensive review of policy challenges, diverse practices, stakeholder engagement, conservation efforts, and socioeconomic aspects. *Geo Journal of Tourism and Geosites*, 60, 1041-1056.
- Mandagi, D. W., & Tappy, Y. P. (2023). Determinants of health tourism destination attractiveness: a comprehensive systematic review. *Jurnal Studi Perhotelan dan Pariwisata*, 2(2), 57-69.
- Mishra, L. K., & Kumar, N. (2024). Sustainable travel and the rise of eco-tourism: trends, challenges, and opportunities. *Journal of Tourism & Hospitality*, 13(2), 56-66.
- Mitra, A., & Paul, S. (2025). Empowering indigenous communities through regenerative tourism: Cultural preservation and socio-economic resilience in Northeast India. In *Regenerative Tourism for Social Development* (pp. 281-310). IGI Global Scientific Publishing.

- Omokaro, G. O., Michael, I., Efeni, O. S., Adeyanju, O. I., & Obomejero, J. (2025). Waste management in Nigeria: Systemic failures, circular economy pathways and sustainable solutions. *Environmental Development*, 101363.
- Onnoghen, U. N., Kujoh, J. U., Unachukwu, S. S., Orji, E. I., & Anabaraonye, B. (2025). Enhancing Eco-Tourism Through Eco-Volunteerism in Nigeria. *Eco-Tourism and Sustainable Development*, 1(2), 151-163.
- Otubanjo, O. A. (2022). Public Health, Tourism, and the Emergence of Pandemics. *Nigerian Journal of Parasitology*, 43(1).
- Peng, C., Zou, Y. G., & Jin, D. (2026). Wellness tourism healing: A systematic review unveiling how cultural symbolic experiences influence health recovery. *Tourism Review*, 81(5), 1490-1510.
- Zhu, T., Wu, Q., & Guenier, A. (2025). Transcultural dissemination of Traditional Chinese Medicine through tourism: Pathways, challenges, and innovations. *New Techno-Humanities*.



© 2026 by the authors. Submitted for possible open access publication under the terms and conditions of the **Creative Commons Attribution (CC BY 4.0)** licence (<https://creativecommons.org/licenses/by/4.0/>)