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IMPACT OF TOURISM DEVELOPMENT (TD) ON NON-MATERIAL WELL-BEING (NMWB) OF RESIDENTS OF CHITTORGARH, RAJASTHAN

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	Abstract
Article Info: Received: <i>30-04-2019</i>	This study is undertaken to understand the impact of perceived tourism development on non-material well-beings
Accepted: 04-05-2019	(NMWB) naming Community Well-Being, Health and Safety Well-Being, and Emotional Well-Being of residents of Chittorgarh district of Rajasthan (India). Present study has
	adopted the quantitative approach. Interpretation was done on the basis of sample of 200. Exploratory factor analysis was done to identify the factor and the suitability of the scale for the study
Keywords: Tourism Non-material well-being Community Quality of Life	area. To find the impact of perceived tourism development on non-material well-being Regression analysis was applied. Finding of the study reflects that, tourism has a significant positive impact on the non-material well-being (community well being, emotional well being and health and safety well being) of resident of Chittorgarh (Rajasthan).

1. INTRODUCTION

Tourism is considered as an outcome of human behaviour which is also an expression of his behaviour (Kim, 2002). It is a set of different thoughts, ideologies or ideas for being a tourist Przeclawski, 1986, and when these ideas and ideologies are put in practice that shows the behaviour of individual in touristic role (Przeclawski, 1986). According to the World Tourism Organization (2009), tourism is one of the world's fastest growing industries and is one of the global engines of development. Tourism as an industry is an important economic activity and it also involves different groups of the community (Fariborz Aref, 2011). Apart of economic benefits it is also "a way to bring people together and to broadening people's

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cultural horizons" (Angeloni, 2015). When tourism has multiple effects on residents, then it's important to have significant and sustainable planning of tourism in the area (Jurowski, 1994) so that its negative impact can be reduced and its positive impact can be increased. Many researchers have accepted that for the sustainable tourism development participation of the local in tourism is must. And to make people feel positive about the tourism, it is important to understand how tourism is impacting their living standards.

Rajasthan is one of the popular tourist destinations in India. It is popular for its culture, heritage and history of his royal kingdoms. The tourism agencies in the state are working hard to boost the tourism in Rajasthan. From last many years, policy makers in the state are focusing on making tourism industry a "people industry" (Rajasthan Unit Policy, 2015).

Therefore, the purpose of the present research is to understand the impact of tourism development on the lives of residents of district Chittorgarh (Rajasthan). The impact on lives of locals can be understood through measuring tourism impact on well-being of locals (Erik Lundberg, 2014). The present study will find out the perceived tourism development impact on the emotional, health and safety and community well- being of locals of Chittorgarh. Well being is mostly understood as a happiness of individual (Elena Konovalov, 2016) and happiness differ from person to person. Well being is normally defined as state of being healthy and happy. Prescott-Allen (2003) defined well-being as "a condition in which all members of society are able to determine and meet their needs and have a large range of choices and opportunities to fulfill their potential".

To understand how heritage tourism in study area is impacting the non-material wellbeing (NMWB) of residents. The specific objectives of the study are:

- 1. Does tourism development has any impact on the emotional well-being of locals?
- 2. Does tourism development has any impact on the community well-being of locals?
- 3. Does tourism development has impact on health and safety well-being of locals?

2. LITERATURE REVIEW

Zeithaml (1988) has explained perceived value as "consumer overall assessment of the utility of the product on the basis of the perception what is received and what is give. In tourism perceived value can be examined form two different prospective (Woo, Kim & UysaL, 2015). First is tourist perception for their trip experience and second one is residents perception for tourism development (Woo, Kim & UysaL, 2015). The present study is focused on the understanding the perception of resident for tourism development. Addition to



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that the study will understand the impact of perceived tourism development on non-material well-being (NMWB)

The theory of utilitarian movement defined well-being as subjective indicators and highlighted that well-being of individuals is a very important part of individual behaviour and also important for public policy (Haq & Zia, 2008). Well-being is "an individual's optimistic assessment of their lives including contentment, positive emotion, engagement and purpose". Pyke et al (2016). In the year 1948 World health organization (WHO) has found that health is not just an absence disease but it is a state of well-being and after that study well-being become a focus of attention of policy makers and researchers.

Different author has defined the concept of well being differently. Moore & Keyes (2003) has considered well-being as a "cognitive functioning, behavioral functioning, physical health and mental health". He also stated that cognitive function mean positive thoughts. Schimmack (2008) has defined well-being as a "realization which can be measured with cognitive and affective measures. And he examined the difference and similarities and between affective and cognitive measure with four components (angry, sad, afraid and happy).

Alatartseva & Barysheva (2015) has distinguished between social well-being and individual well-being. Alatartseva & Barysheva (2015) have viewed the concept of well-being in two different prospects first as the inner situation of individual and second is quality of life. He further discussed that the two approaches of studying well-being as objective and subjective approach. Objective well-being is third and fourth concept and understood by defining the term quality of life and well-being and subjective is the first and second concept. And it is conceptualizing the internal subjective experience of each individual. Apart of subjective and objective approach of well-being, it is also divided as material and non material well being (Woo, Kim & Uysal, 2015).

John Hicks (cited by Meier, 1991) has states that the well-being is related to the situation of life. He also stated that well-being is mostly studied through economic prospective but it is just one part of well-being according to him it could be applied to other field like sociology, as psychology, political science and anthropology. The study also recognizes that every individual is different so there well-being of individual should not be understood in a traditional way but with their particular cultural atmosphere and context. Cummins, (1996) in his study has discussed seven domains (well-being) which measures the individual satisfaction with their life. The seven domains are emotional well-being, material well-being, community well-being, intimacy, health, productivity, safety. Kim (2002) has



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studied the tourism impact on quality of life of residents. She has considered four domains of life (Material well-being, Emotional well-being, Community well-being, Safety and health well-being) which can be affected by tourism.

Looking at the previous literature it is clear that satisfaction with well-being leads to satisfaction of life and it also important for the policy formation. Previously study has been taken to know the impact of tourism on the quality of life through well-being (Kim, 2002; Aref, 2011; Woo, Kim & Uysal, 2015). As John R. Hicks, cited by Meier (1991) mentioned most of researcher has studies the economic aspect of wellbeing, which is not enough to understand the overall well-being. Considering the importance of tourism and well-being present study will understand the impact of perceived tourism development on the non-material well-being of residents of study area. On the basis of previous literature the hypothesis of the study are:

H₁: Perceived Tourism Development has significant impact on Emotion Well- Being of Residents.

H₂: Perceived Tourism Development has significant impact on Health and Safety Well-Being of Residents.

H₃: Perceived Tourism Development has significant impact on Community Well- Being of Residents.

3. METHODOLOGY

3.1.Study Area and Respondents

This study is conducted in the district of Chittorgarh Rajasthan (India), the state rank 10th in Domestic tourist arrival and 6th rank in International tourist arrival in the year of 2017 (India State Ranking Survey, 2017). The District Chittorgarh has received 452,508 domestic and international tourists in year 2017 (Rajasthan Progress Report, 2017-2018). The district is famous for heritage sites like Chittorgarh Fort, Rani Padmini's Palace, Vijay Stambh, Kirti Stambh, Fateh Prakash Palace, Temples of Baroli – Rawatbhata, Bhainsrorgarh Fort and many more.

Statistical package for Social Science (version 23.0) is used to analyze the data. The respondents included in the present study are above the age of 18 years from the district of Chittorgarh (Rajasthan). The sampling technique use for the study is judgment based sampling. Only 200 responses were analyses and considered for interpretation out of 230



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responses, 30 questionnaires were rejected because of semi field and invalid responses. Table 1, provides the demographic profile of the respondents

Age	Gender	Marital Status	Education
18-37:37.5% (75)	Male: 65% (130)	Single 14% (28)	Below 12 th : 10% (20)
28-57: 40.5% (81)	Female: 35% (70)	Married: 85.5% (171)	Below Graduation:22% (44)
58 above: 22% (44)		Divorced: 0.5 % (1)	Graduated: 38% (76)
			Post Graduate: 24% (48)
			Higher education: 6% (12)
Work Profile	Tourism Related	Year of stay	
Job 68% (136)	Job	Less than 10 years	
Part time job 12% (24)	Yes: 43% (86)	22% (44)	
Business 13% (26)	No: 57% (114)	10-20 years 13% (26)	
Profession 7% (14)		More than 20 years 65%	
		(130)	

Table 1: Demographic Profile of the Respondent

3.2.Measure

All items of the scale are measured on five point Likert scale from strongly agree to strongly disagree. The instrument was divided into three sections; Part A has five questions to measures perceived tourism development in the area. Part B with 21 items is focused to measure emotional, community and health and safety well-being of the residents. The items for tourism development are adopted from (Woo, Kim & Uysal, 2015; Williams & Soutar, 2009) and for the each dimension of well-being, sub dimension are measured on five point likert scale. Items for the dimension of well-being are adopted from (Kim, 2002; Cummins, 1996; Andrews & Withey, 1976). However the construct was modified and refined as per the need of the present study and based on review of literature.

A conceptual framework was prepared for the better understanding of the study based on dependent and independent variables. Tourism development is independent variable and well-being is dependent variables.

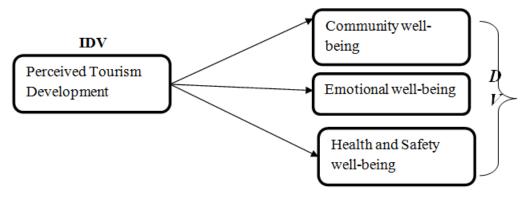


Figure 1: Conceptual Framework



4. **RESULTS**

4.1.Exploratory Factor Analysis (EFA)

Before identifying impact of tourism development on well-being of residents of Chittorgarh, Exploratory factor analysis was run and reliability and validity of instrument was checked. As the data for the present study was not normally distributed, exploratory factor analysis with promax rotation and principle axis factoring was found appropriate to understand the construct. EFA, Kaiser-Meyer-Olkin (KMO) test to check the sample adequacy and Bartlett's test of sphericity was run separately for each dimension.

4.2.Emotional well-being (EWB)

For the dimension of emotional well being, Kaiser-Meyer-Olkin (KMO) test of sample adequacy resulted (.704) which signifies that the data is appropriate to run factor analysis and Bartlett's test of sphericity (p < 0.001) both the test fulfill the criteria for factor analysis. EFA resulted in two factors leisure and spiritual with eigen value greater than 1. One item form leisure well being is removed due to low communality. The two factors of Emotional Well-Being (EWB) explained 58 % of variance. All the items in the dimension of emotional wellbeing have communality more than 0.6. Cronbach's alpha for the dimension emotional wellbeing resulted in 0.711 as suggested by Santos (1999), reliability benchmark value of 0.70 and above was used in the study.

Items	Factor 1	Factor 2	Cronbach's	Variance
			alpha	Explained
Leisure well-being				
I am satisfied with leisure activity in my community	.642			58 %
I am satisfied with Spare time and leisure activity in my life	.701			
My leisure activity has increased due to tourism	.683		.711	
I am satisfied with the influx of tourist from all over the world in our community	.633			
Spiritual well-being				
I am particularly happy with the way we preserve culture in my community		.666		
I am Satisfied with my cultural life		.718		
I am very satisfied with the availabilities of religious services in my community.		.641		
I am satisfied with tha availability of religious services in community		.732		

Table 2: Factor Loading and Cronbach's alpha



4.3.Community well-being (CWB)

For the dimension of Community well being, Kaiser-Meyer-Olkin (KMO) test of sample adequacy resulted (.712) which signifies that the data are appropriate to run factor analysis and Bartlett's test of sphericity (p < 0.001) both the test fulfill the criteria for factor analysis . EFA resulted in one with eigen value greater than 1. The factors of community Well- Being explained 62 % of variance. All the items in the dimension of community well-being have communality more than 0.6. Cronbach's alpha for the dimension emotional well-being resulted in .743 as suggested by Santos (1999), reliability benchmark value of 0.70 and above was used in the study.

Table 3: Factor Loading and	Cronbach's alpha
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Items	Factor	Cronbach's	
	loading	alpha	Variance
			Explained
I am satisfied with environmental condition of my comm	nunity .735		
(air, water, land)			
I am satisfied with the services i get in my community	.621	.743	62 %
I am satisfied with the facilities i get in my community	.666		
I am happy with the kind of people life in my community	.647		
I am satisfied with my life in this community	.721		
I am satisfied with the kind of tourist visit to our communit	y .688		

4.4.Health and Safety well-being (HSWB)

For the dimension of Health and Safety well being, Kaiser-Meyer-Olkin (KMO) test of sample adequacy resulted (.727) which signifies that the data are appropriate to run factor analysis and Bartlett's test of sphericity (p < 0.001) both the test fulfill the criteria for factor analysis . EFA resulted in two with eigen value greater than 1. The two factors of Health and Sefety Well- Being explained 57 % of variance. All the items in the dimension of community well-being have communality more than 0.6. Cronbach's alpha for the dimension emotional well-being resulted in 0.730 as suggested by Santos (1999), reliability benchmark value of 0.70 and above was used in the study.

Table 4: Factor Loading and Cronbach's alpha

Items	Factor 1	Factor 2	CA	Variance Explained
Health well-being				
Due to tourism air quality has degraded	.722			
Due to tourism water quality has degraded	.651			
I am not satisfied with health services in my community	.663		.730	57 %
Tourism has increased the sanitation issues in area	.712			
Safety well-being				
Accident rate in community has increased		.609		
Crime rate in community has increased		.611	1	
Crime rate against women has increased		.632	1	



4.5.Perceived Tourism Development

For the dimension of Tourism development, Kaiser-Meyer-Olkin (KMO) test of sample adequacy resulted (.726) which signifies that the data are appropriate to run factor analysis and Bartlett's test of sphericity (p < 0.001) both the test fulfill the criteria for factor analysis. EFA resulted in one with eigen value greater than 1. The factors of Perceived Tourism Development explained 53 % of variance. All the items in the dimension of community wellbeing have communality more than 0.6. Cronbach's alpha for the dimension emotional wellbeing resulted in .718 as suggested by Santos (1999), reliability benchmark value of 0.70 and above was used in the study.

Items	Factor	Cronbach's	Variance
		alpha	explained
Overall, tourism development is of importance to economic well-being	.764		
in your community			
Tourism development is a good cause	.687	718	53 %
Tourism is worthy of strategic importance in tourism planning	.667		
Tourism helps increase cohesion in our community	.709		
Tourism development generates a sense of pride in our community	.626		

4.6.Correlation between Perceived Tourism Development and Non-Material Well-Being

Before testing the hypothesis correlation between the dimensions was checked. Table 6 reflects the correlation between different non-material well-being and also correlation between perceived tourism development and different non-material well being (NMWB). Emotional well-being has strong positive correlation with perceived tourism development (R=.546), on the other hand emotional well-being has moderate relation with community wellbeing (R=.464) and health and safety well being (R=.428). Observing community well being has a moderate relation with perceived tourism development (R=.443) and strong relation with health and safety well-being (R=.593). And for health and safety well-being there is a strong relationship with perceived tourism development (R=.481).

	EWB	CWB	H&SWB	PTD
EWB	1			
CWB	.464	1		
H&SWB	.428	.593	1	
PTD	.546	.443	481	1

 Table 6: Correlation between well-being

4.7. Hypothesis Testing

H1: Perceived Tourism Development has significant impact on Emotion Well- Being of Residents.



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H2: Perceived Tourism Development has significant impact on Health and Safety Well-Being of Residents.

H3: Perceived Tourism Development has significant impact on Community Well- Being of Residents.

Regression analysis was performed to understand the impact of perceived tourism development on non-material well-being of resident's. As the present study have one independent variable (Perceived tourism development), and three dependent variable of wellbeings (emotional well-being, health and safety well-being and community well-being). So, separate regression analysis was performed on the dependent variables R square, R, Adjusted R square and significance values are reported in Table 7. Significance value (.023) for emotional well being is less than 0.05, it signifies that perceived tourism development has impact on emotional well being of resident's of Chittorgarh. R square value for emotional well being is .336 which signifies that 33.6% of the variance in emotional well-being is explained by the perceived tourism development. For the dimension of health and safety wellbeing significance value (.003) reflects that there is an impact of perceived tourism development on health and safety well-being of residents. R square value of health and safety well being (.291) signified that 29.1 % of variance in health and safety well-being is explained by the perceived tourism development. The third variable is community well-being with significant value (.031) which is less than 0.05, so by accepting alternative hypothesis, it can be said that perceived tourism development has impact on community well-being of residents. R square value reflects that, 22.6 % of variance in community well- being is explained by perceived tourism development.

Perceived TD – Non Material Well- being	R	\mathbf{R}^2	Sig
Perceived TD - EWB	.546	.336	.023
Perceived TD - H&SWB	481	.291	.003
Perceived TD - CWB	.443	.226	.031

Table 7: Regression Result

Hypothesis test summary is provided in table 8, which reflects that all the three hypothesis of the can be accepted. And it can be said that there is a significant impact of perceived tourism development of the health & safety well-being, Community Well-being and Emotional Well being of the residents of Chittorgarh.



HYPOTHESIS	PATH	SIG. VALUE	RESULT
H1	PTD- EWB	.023	Supported
H2	PTD- H&SWB	.003	Supported
Н3	PTD-CWB	.031	Supported

Table 8: Hypothesis Test Summary

5. CONCLUSION

The purpose of the present research was to understand the how residents perceive the tourism development in their area, and it's relation with non-material well-being of residents. The finding of this study provides a significant contribution to the existing literature of well-being and tourism development by providing the better understanding of impact of tourism on the non- material well-being of residents.

The relationship among the well-beings in the present study is grounded on the horizontal spillover theory (Techatassanasoontorn and Tanvisuth, 2008), that life domains are related to each other, dissatisfaction with one life domain can lead to dissatisfaction to other domain (Techatassanasoontorn and Tanvisuth, 2008). The previous study done in the field of tourism development revolves around the economic gain and employment (McGehee and Andereck, 2004; Jurowski et al., 1997).

The result of regression analysis indicates that, there is an impact of perceived tourism development on non material well-being of residents of study area. The result of present study is similar to the study done by Woo et al (2015). It is evident from R square value that there is an impact of tourism development on the emotional well-being, community well-being and health and safety well-being. It signifies that well-being of locals gets affected by tourism development, and it should be taken in consideration while making any planning or policy regarding tourism in the area. The correlation value between the perceived tourism development and health and safety well-being is negative. It explains that with increase of tourism development in area health and safety issues will also increase. Proper actions need to be taken to reduce the tourism negative impact on air, water and safety of locals. On the other hand tourism development has positive contribution in the emotional well-being and community well-being will also increase.



6. LIMITATION

This study has some limitation, as the present study is limited to one district of Rajasthan. Other limitation of this study is that it is limited to the non- material well-being only which includes Emotional Well-being, Health and Safety Well-being and Community well-bring, to cover the complete quality of life of community material well- being is also need to be studied.

7. FUTURE SCOPE

Future study can be done taking different areas and comparing the well-being with the level of development of tourism in that area. As the present study is limited to the non-material well-being further study can be done including material-well being to understand the impact of tourism on overall quality of life. Further study can be extended to know the support of community for tourism development.

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