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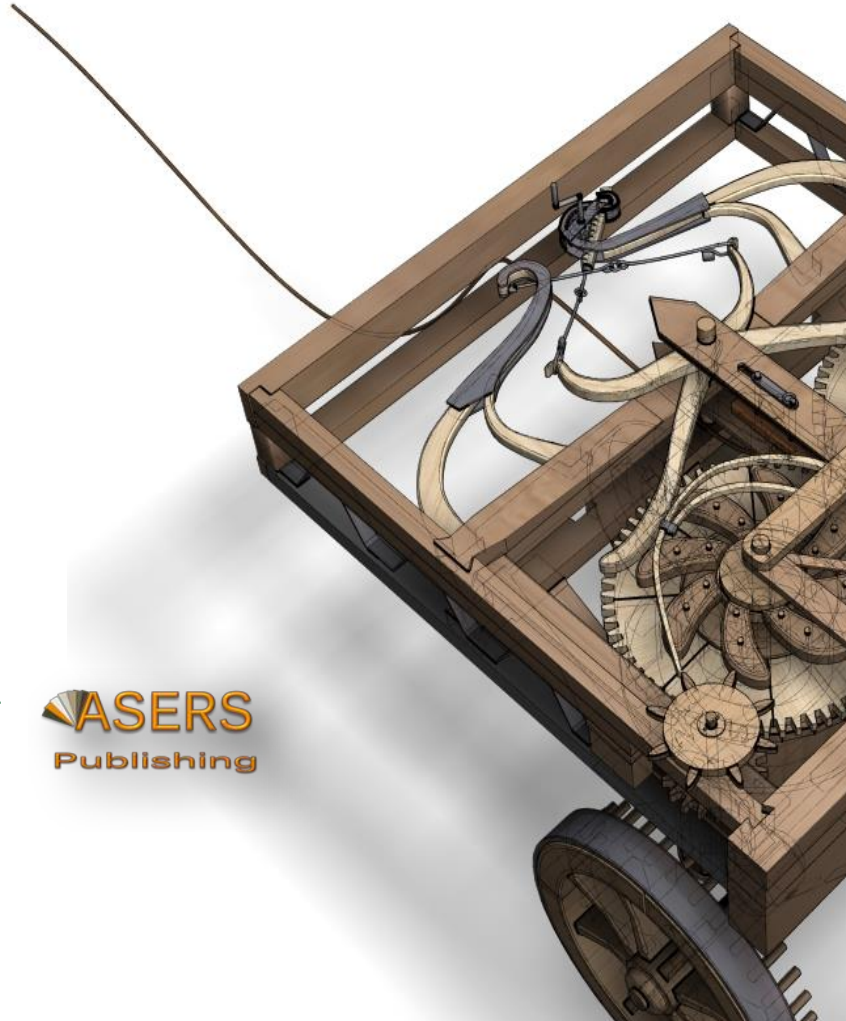


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Winter Issues 2023

Journal of Environmental Management and Tourism

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Functional Conflicts in Tourist Coastal Resort Cities with Special Spa Status in Poland. The Stakeholder Approach

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Abstract: This study aims to identify and analyse the potential conflicts of tourism, resort and residents' functions based on coastal resort cities of the highest importance in Poland (Sopot, Ustka, Kołobrzeg, Świnoujście). Coastal health resorts are specific urban units where tourist and resort functions provided under high environmental restrictions dominate the primary urban function typically focused on social and resident matters. Coastal resort cities attract tourists heavily. Hence, such cities must deal with varied stakeholder expectations. This may lead to conflicts in sustainable urban development.

The analysis considers the stakeholder perspective regarding the occurrence of various conflicts. Different research methods have been used, including case studies and stakeholder analysis based on the salience model and classifying stakeholders into homogenous groups with the attributes assigned.

The diverse and often divergent needs of stakeholders in coastal cities require a specific approach to developing such urban units, including stakeholder relationship management. A method used for the resort stakeholder analysis is based on classical stakeholder classification proposed by Mitchel, Agle and Wood (1997).

The nature of functions performed in resort cities naturally lead to internal and developmental conflicts. However, based on an assessment of attributes assigned their evaluation across key stakeholder groups, the study results show that these conflicts occurred dormant in studied cities.

The research methods used, an approach taken, and results achieved can be successfully used by decision-makers responsible for urban development to identify and manage potential conflicts deriving from diversified expectations of urban stakeholders or conflicting urban functions.

The article is of an international character and might be used to various aspects of city management, as it combines stakeholder management approach with urban development and potential function conflicts.

Keywords: sustainable urban development; stakeholder analysis; coastal resort city; special spa status; urban functions; conflict management.

JEL Classification: M21; Q01; Q56; I18; Z32; R11.

Introduction

Coastal resorts are an attractive mass tourism destination, especially in the summer season. The realisation of socially desirable resort functions may entail functional conflicts resulting from divergent expectations of different resort city stakeholders. The article focuses on the stakeholders' conflicts from the permeation of urban functions with tourist ones. It finds and discusses various aspects of the potential function conflicts in coastal resort cities and addresses those issues concerning Poland's four key coastal resort cities. Understanding potential conflicts in cities with unique functions, such as resorts, tourism, and port, will allow deepening knowledge of the functioning of complex urban organisms.

The article provides a detailed review of studies on urban functions and tourism urbanisation concepts regarding sea resorts, including wellness, and well-being concepts and stakeholders conflict management.

Poland is a member of the EU and one of many countries with well-developed health resorts. Therefore, with its specific spa cities, Poland can be a point of reference for other countries. Health resort cities, through their care for the environment, set development trends for other cities. At the same time, such a strong development of the spa function and the implementation of environmental protection priorities force potential conflicts that may escalate during the intense development of the city.

The structure of the paper is, therefore, as follows. Section 1 outlines the current literature review on resorts and health services. In section 2, the Research approach is described. Also, the group of cities is presented as they form the fundament for our research. Section 3 shows the results of the study. Section 4 includes discussion based on the study's results and literature review.

1. Literature Review

1.1. Specialization of Resort Cities

The desire for health-promoting services has dominated the noticeable increase in interest in health tourism. This is particularly the case in EU countries, while outside the EU, trends include beauty treatments, affirmation, and healthy lifestyles (Altınay and Kozak, 2021; Tomić and Košić, 2020; De la Hoz-Correa et al. 2018; Dryglas and Salamaga, 2018; Aydin and Karamehmet, 2017; Dimitrovski and Todorović, 2015; Manaf et al. 2015; Gustavo, 2010). The specialisation of resort cities is particularly related to health services broadly. Medical tourism is their healthcare and travel both coincide (Hira and Kaur 2023), but medical refers more to health drivers. However, Büyüközkan *et al.* (2021) also include rehabilitation as part of health tourism. Medical (a.k.a. health) tourism differs from wellness (a.k.a. wellbeing) tourism in terms of the use of natural healing resources (Dryglas and Salamanga 2018), while wellness (in combination with wellbeing and fitness) does not necessarily offer such resources (Voigt 2014).

Wellness tourism deals with the overall well-being of the body, and mind, and is about maintaining health through special treatment by healthcare institutions (Dimitrovski and Todorović 2015; Csirmaz and Pető 2015). Well-being tourism is a form of wellness but focuses more on emotional issues.

A particular type of resort presents coastal resort towns (cities). Coastal destinations as parts of the resort and spa industry, and the rediscovery of natural well-being attributes of sea, sand, and sun are being repackaged within the wellness paradigm (Page *et al.* 2017). Page *et al.* (2017) also notices that coastal resorts with natural attributes attract an ageing population. In specific cases, they also can attract younger tourists by offering a range of entertainment.

Although destination as an object of analysis has experienced a decline due to different internal and external factors influencing the place (Chapman and Light 2016), resorts might experience similar problems resulting from the blending of tourist and urban functions and the diffusion of conflicts on this background. In coastal resorts, 'tourism as urbanisation' might be the key development factor (Clavé and Wilson 2016). Unfortunately, there are only 18 papers related to the subject that is registered in the Scopus database for the period 2014-2022 in the area of social sciences, economics and management (keywords search: ('coastal' AND 'city') AND ('resort' OR 'spa')).

1.2 Resort Cities' Conflicts

Conflicts in tourist cities are not a new subject (Sagan 2000). There are evident examples of tourism impact studies and conflicts between tourism development and coastal towns. Examples of such impacts include real estate prices, social conflicts, overburdening local infrastructure, or even overloading with tourists on cruise ships. Tourism creates employment, influences urban development, and generates higher revenues for economic

actors. According to sustainable development, tourism revenues can be perceived from economic, social, and environmental perspectives (Postma and Schmuecker 2017).

Postma and Schuecker (2017) indicates the expectations of different stakeholders towards tourism, where residents seek a quality of life, consumers seek a quality of experience, and service providers (tourist suppliers, providers, tourism brokers) seek quality and opportunities. The mechanism of conflict between key stakeholders is related to social exchange theory, *i.e.*, the belief of tourism's positive or negative impacts. However, there is a lack of comprehensive research on seaside resorts, which presents Table 1.

Table 1. Scopus documents on resort stakeholders' conflicts published 2014-2022 in the English language (15.04.2023)

Key words search	No of documents
'resort' AND ('stakeholder' OR 'stakeholders' OR 'conflicts')	338
'resort' AND 'conflicts'	285
'resort' AND 'stakeholder'	245
'coastal' AND 'resort'	134
'seaside' AND 'resort'	102
('coastal resorts' OR 'health resorts' OR 'seaside resorts' OR 'seaside health resorts' OR 'coastal health resorts' OR 'resort city' OR 'resort city' AND ('stakeholder' OR 'stakeholders' OR 'conflicts'))	23
('coastal' AND 'city') AND ('resort' OR 'spa').	18
('coastal' AND 'resort') AND ('stakeholder' OR 'stakeholders')	9
('coastal' AND 'resort') AND 'conflicts'	7
('coastal' AND 'spa') AND 'stakeholder'	6

Source: Own elaborations based on Scopus.

Only 6 Scopus papers dated 2014-2022 (in social sciences, economics, and management) address conflicts in the context of tourists and residents (keywords search: ('spa cities' OR 'resorts' OR 'health resorts') AND ('conflicts' AND 'residents' AND 'tourists') – Table 1.

1.3 Over - Tourism as a Specific Emanation of Conflict in Tourist Cities

Direct and indirect annoyance to residents due to an increase of tourists in cities, referred to as 'over-tourism' (Nunes *et al.* 2021), can lead to conflicts between tourists, tourism suppliers and residents (Postma and Schmuecker 2017), and can lead to 'tourism fatigue' by urban residents (Nunes *et al.* 2021). The main source of the conflict is the overuse of the infrastructure developed mainly or partly for local residents (Freya and Briviba 2021).

Over-tourism is a significant problem for coastal tourist cities. This issue appears in the literature, for example, in terms of sustainable tourism development (Insch 2020) and the involvement of technology and smart city to address over-tourism (Pasquinelli and Trunfio 2020). Over-tourism can be continuous but can also result from hosting a specific event, such as the Olympic Games (Schnitzer *et al.* 2021). The problem is so widespread that despite the competition between cities, cooperation is clear to deal with the discharge of over-tourism (Sibrijns and Vanneste 2021). The most frequently cited examples of over-tourism in Europe are Barcelona and Venice, but the issue was an important topic of municipal elections in Amsterdam and Barcelona in 2018 (Koens *et al.* 2018).

1.4 Summary of the Literature Research

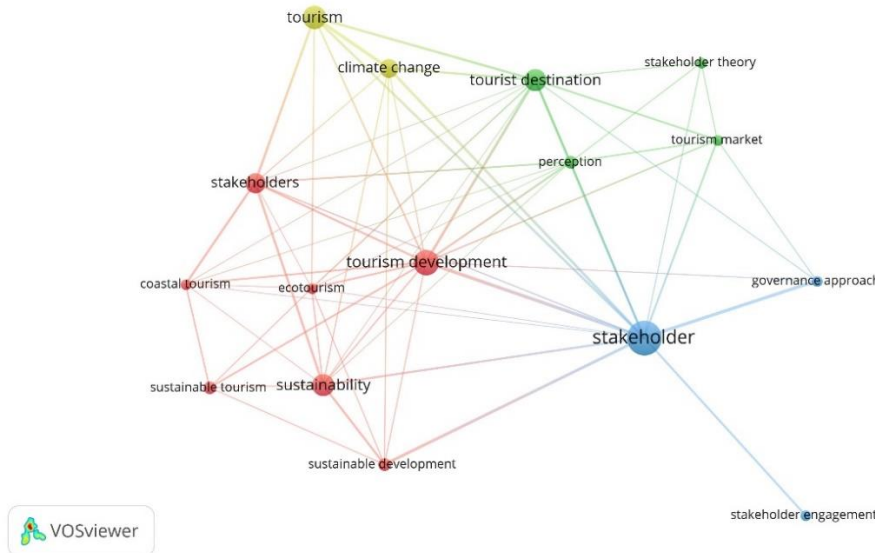
The literature review reveals a gap in research on urban function conflicts in the context of the city's key stakeholders. There is even less research about resort cities, although the conflict of functions is particularly evident from the perspective of residents' and tourists' expectations.

In conclusion, literature has a research gap covering conflict issues in coastal resort towns. The phenomenon of over-tourism, which is gaining in scale, is the cause of increasing inconveniences resulting from tourism development, including health tourism. In the latter context, the specialisation of resort towns is a source

of more exposure of natural assets to the impact of tourism flows. Although tourism, as a rule, is synonymous with local development, the knowledge of adverse effects should allow for finding mitigating actions.

The validity of the study assumptions was based on bibliometric data analysis of the co-occurrence of words connotated with 'tourism' context leads using the Scopus database and VOSviewer (full-counting Scopus documents dated 2014-2022 in social sciences, economics, and management).

Figure 1. The Network Visualization of Literacy Topic Area based on 'resort' AND 'stakeholder' in Scopus



Source: Own elaborations.

The analysis of keywords repetition in 116 documents having the words: 'resort' and 'stakeholder' resulted in the three keyword clusters.

2. Materials and Method

2.1. Research Design

The thesis is that in coastal resort cities, the resort and tourism functions are in mutual conflict. Therefore, the research question is whether the resort and tourism functions' conflicts also affect coastal resort cities operating under specific provisions of the legal framework?

Table 2. Research scheme

Phase	Step	Tool	Outcome
Framing designing and	1. Framing the problem	Literature review	Thesis Research question
	2. Building theory	Literature review software	Research gap identification
	3. Describing the methods		Description
Preparing, collecting	4. Conducting a case study	Case study analysis	Selection of case studies Data collection
Analyzing and concluding	5. Stakeholders identification and categorization	Stakeholders map and salience model based on simulated responses	Stakeholder salience model
	6. Defining conflict areas	Research report based on different methods	Finished manuscript
	7. Answering research question	Research report, paper template	

Source: Own elaborations.

To achieve the research aim, the paper explores the stakeholders and areas of conflict and analyses the resort and tourism functions of coastal resort cities in Poland. The analysis was conducted from stakeholders'

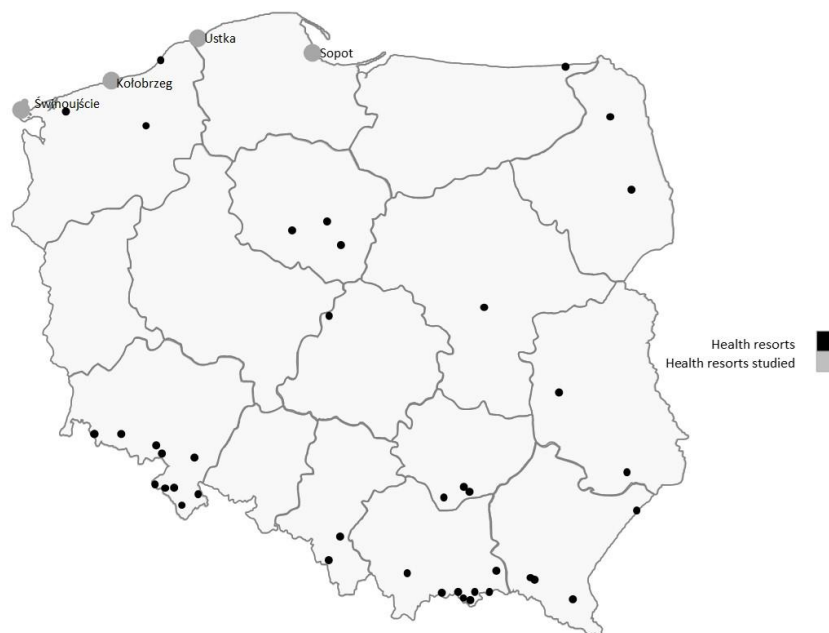
perspectives on mutual conflicts. Different research methods have been used to answer that question, including case study analysis and a form of the resort stakeholder analysis elaborated for this research. Different research methods deal to answer the research question, including literature review, case study analysis, and a form of the resort stakeholder analysis elaborated for this research. The case study method allows for the formulation of the background as it forms a type of intensive research (Swanborn 2010) and enables designing specific research questions to provide a range of evidence (Gilham 2000). The analysis is embedded in a real context (Yin 2012) and a timeframe relevant to a city-specific environment. A case study analysis is recommended when the actors' behaviours cannot be controlled (Yin 1994). The research wants to take a holistic view and explore social processes in rich and complex detail (Lindgreen *et al.* 2021). A method of stakeholder analysis is based on the classical stakeholders' classification proposed by Mitchel, Agle and Wood (1997).

2.2. Health Resort Cities in Poland

The health resorts in Poland are regulated by relatively restrictive legislation (Act, 2005). The legal conditioning of health resorts in Poland is considered more stringent than in most EU countries. It is also specific that domestic tourists, and beneficiaries of spa and resort services dominate in Poland. Under the Act (2005), resorts in Poland are an integral part of the health care system. They are implemented using natural resources and unique facilities such as pump rooms, graduation towers, parks, arranged sections of the seacoast, spa pools or underground mining pits. In addition, there are specific requirements that must be met jointly to apply for the status of a health resort (Act, 2005), such as possession of natural healing resources, residence in a climate with medicinal properties, a medicinal plant, fulfilment of restrictive environmental protection requirements, control of appropriate technical infrastructure (in the field of water and sewage management, energy and public transport).

Health resorts are an essential and integral part of the Polish healthcare system (Szromek and Romaniuk 2014). The specific status and relationships between the various stakeholders in Poland's health resorts result from historical conditions and systemic transformations (Węclawowicz-Bilska and Wdowiarz-Bilska 2019).

Figure 2. Spatial location of health resorts in Poland



Source: Own elaborations based on Wiktorowicz (2020).

In 2020, there were 45 statutory health resorts in Poland, 32 of which operated spa sanatoria for adult patients (Wieczorek and Wiktorowicz, 2020), where the conditions and standard of treatment were guaranteed by the state (Węclawowicz-Bilska and Wdowiarz-Bilska, 2019). Most spas have parks, and half have graduation towers or kinesitherapy. Among resort services, treatment of rheumatoid diseases (42 health resorts), orthopaedical and traumatic diseases (36 units) dominate. Less than half of the resorts offer services for treating nervous system disorders, cardiology, and the upper respiratory tract. In contrast, oncological diseases can be treated in two units and eye diseases in one (Wieczorek and Wiktorowicz, 2020). In 2022, based on the Resorts register, there are already 47 health resorts in Poland, including lowland health resorts (17), foothill health resorts

(15), mountain health resorts (9) and seaside health resorts (6). Within the group of seaside health resorts, 4 towns have significant spa and tourist potential and have strongly developed urban functions (Sopot, Kołobrzeg, Świnoujście and Ustka).

2.3. Study Sites Description

Four major coastal resort towns in Poland were included in the study: Świnoujście, Kołobrzeg, Ustka, and Sopot. The remaining two seaside resorts were excluded from the study due to failure to meet the assumptions, *i.e.*, the Dębki health resort is a village, and Kamień Pomorski is located on the Kamień Lagoon and not on the high seas. Primary data on each of the towns is provided in Table 3. All the towns obtained formal spa status 20 or more years ago.

Table 3. Key data of the researched resorts

Resort	The year of obtaining statutory rights	Historic resort heritage	Population 2020	Resort area in zone A*	Health resort treatment facilities in 2020
Świnoujście	1967	19th century	40,948	161.99 ha	3
Kołobrzeg	1967	19th century	46,198	627.05 ha (A1+A2)	4
Ustka	1988	20th century, pre-war period	15,199	171.45 ha	2
Sopot	1999	20th century, post-war period	35,286	143 ha (A1+A2)	3

* Zone A - a separated area of the health resort commune, in which there are healing devices and regulations in the field of spatial development.

Source: Own elaborations based on Statistics Poland and resort cities' statutes of: Kołobrzeg, Sopot, Świnoujście, Ustka.

Spa cities are not only tradition, unique architecture and special spa zones. These cities have a tourist base, attracting not only tourists, but also wealthy inhabitants. The analysed spa cities show significant differences in city budget revenues which are of a higher level than the average city in Poland.

Table 4. Changes in population density and budgetary income of resorts' towns per capita

	Population density in 2002 and 2020 [inhabitants / km ²]			Budget income per capita in 2005 - 2020 [PLN, EUR*, current prices]		
	2002	2020	Change	2005	2020	Change
Świnoujście	213	203	-5%	3 426 (770)	14 753 (3315)	331%
Kołobrzeg	1 818	1 800	-1%	2 279 (512)	6 131 (1378)	169%
Ustka	1 615	1 492	-8%	2 317 (521)	6 931 (1558)	199%
Sopot	2 392	2 042	-15%	4 143 (931)	10 642 (2392)	157%

Source: Own elaborations based on Statistics Poland. Exchange as of 2.11.2021: nbp.pl, the average euro exchange rate in 2020

The data presented in the table show that all coastal resort cities experience the unfavourable phenomenon of negative migration, with a substantial simultaneous increase in incomes. Each examined city has a slightly different environmental potential, determining its resort functions. Table 5 presents the analysed resorts according to the natural resources, treatment directions and infrastructure as of 2020.

Table 5. Resort infrastructure and natural resources in the researched resorts in 2020

Resort	Natural resources	Treatment	Health resort treatment functions and infrastructure
Świnoujście	saline-mud-climatic	orthopedic-trauma, rheumatology, cardiology, and hypertension, upper and lower respiratory tract, obesity, endocrine disorders, nervous system diseases, osteoporosis, skin diseases, female diseases	Graduation towers, spa parks, a section of the seacoast, healing, and rehabilitation spa pools
Kołobrzeg	mud-climatic	orthopedic-trauma, rheumatology, cardiology and hypertension, upper, and lower respiratory tract, diabetes, obesity,	Graduation towers, spa parks, kinesiotherapy paths, a section of the seacoast arranged in a

Resort	Natural resources	Treatment	Health resort treatment functions and infrastructure
		endocrine, nervous system diseases, osteoporosis, skin diseases	section, healing, and rehabilitation spa pools
Ustka	hydrotherapy - saline, mud and climatic	orthopedic and traumatic, rheumatological, cardiological and hypertension, upper, and lower respiratory tract, endocrine diseases, diseases of the nervous system,	Graduation towers, spa parks, kinesiotherapy paths, seaside promenade
Sopot	Brine and climate	orthopedic and trauma, rheumatology, cardiology and hypertension, lower respiratory tract diseases, nervous system diseases, osteoporosis	Spa pump rooms, a decorated section of the seacoast, healing and rehabilitation spa pools

Source: own elaborations based on Wiktorowicz (2020).

The analysed cities have extensive healing resources. In addition, these cities have a well-developed resort infrastructure, which was already successively developed in the centrally controlled economy system until 1989. A more detailed analysis of the resources forming the basis for developing the resort functions of the cities presents Table 6.

Table 6. Classification of healing natural resources in coastal resorts in Poland (data for 2020)

Resort	Brines	Spa mud	Jodine	Minerals	Other resources
Świnoujście	deposits of therapeutic waters	peloid deposits	yes	no	climate
Kołobrzeg	underground therapeutic waters	yes	yes	therapeutic peat peloid	climate
Ustka	3.43% sodium chloride brine iodine hypothermic	yes	yes	healing peat deposits - peloid	climate
Sopot	4.2% sodium chloride water (brine), iodine water.	yes	yes	no	climate

Source: own elaborations based on resort cities' statutes of: Kołobrzeg, Sopot, Świnoujście, Ustka.

Maintaining the health resort status requires communes to protect natural resort resources. At the same time, having the status of a health resort is associated with certain restrictions on running a business and bans on building certain facilities. For example, it is forbidden to build industrial plants or facilities in a resort area whose activities may significantly negatively affect the area's natural values. In each studied resort city, strategic documents pay attention to the development of resort functions (City Strategy: Sopot, Świnoujście, Ustka, Kołobrzeg). Also, other planning documents, such as the Spatial Masterplan, note the concept of the resort city development. Moreover, the communes had to pass different resolutions to adopt the health resort statute (Health resort statute: Sopot, Ustka, Świnoujście, Kołobrzeg).

Historical resort traditions, dating back to the 19th century of the examined cities, are much older than their obtained spa status. The most significant infrastructure is presented in Kołobrzeg among the all analysed health resort cities. The most urbanised health resort is Sopot, being also a part of one of the largest metropolitan areas in Poland. Apart from being a health resort, each of the examined cities is also an attractive place for the development of summer mass tourism, which may cause stakeholders conflicts and may negatively influence residents. High tourist attractiveness results from the seaside location and other attributes, such as hotel base and spatial and architectural layout of cities. Therefore, the main challenge of sustainable urban development in the face of diverse stakeholder needs is to mitigate the conflict of functions.

On the one hand, these cities developed without a burdensome industrial sector. On the other hand, the development challenge is the short tourist season over the cool, off-summer Baltic Sea. In recent years, in Polish coastal cities, there is a moderate-intensity pre-season of the influx of tourists, beginning in May. During the tourist season, the number of visitors significantly exceeds the number of residents. Therefore, a significant part of the economic base of cities relies on servicing external demand.

Focusing on tourist traffic during the two months of the short but intense tourist season is a reasonable strategy for entrepreneurs. The revenues cover the operational costs for the remaining months of the year. Therefore, the local authorities do not influence tourist traffic during the season. Then the tourist function dominates the primary function of cities, and inhabitants experience tourist nuisance particularly acutely.

The highest increase in accommodation places is noticeable in Kołobrzeg, where the spa function is the most developed. A constant upward trend in the arrival of tourists is clear in the examined cities. The covid-19 pandemic significantly limited the influx. The presented data indicate that the spa function does not significantly inhibit the development of the tourist function.

2.4. Framework for Conflict Analysis

In the Polish regulatory framework of health resorts, the critical issue is the protection of natural resources along with the climatic conditions of the areas granted under health resort status. Locally, the regulations apply to a health resort commune and result from the act on commune self-government, according to which the status of a resort commune may relate to the whole commune or its part. Resort cities must fulfil specific special development standards.

According to the act, the resort city divides into three zones. The spa infrastructure is in zone A, an area of special protection. Zones B and C are the buffer zone for zone A. Establishing industrial plants and activities harmful to the natural environment are excluded in all zones. At the same time, these cities should have proper proportions of green areas.

Table 7. Investment restrictions and requirements in resort zones in Poland

Zone A restrictions	Zone B restrictions	Zone C restrictions
1. industrial plants 2. single-family and multi-family residential buildings 3. detached garages 4. commercial facilities with a usable area of more than 400 m ² 5. petrol stations and distribution points for petroleum products 6. landfills for solid and liquid waste 7. organizing mass events	1. industrial plants 2. petrol station, less than 500 m from the border of zone A of the health resort protection 3. landfills for solid and liquid waste	industrial plants
Zone A requirements	Zone B requirements	Zone C requirements
The percentage of green areas should be no less than 65%. There may be guesthouses, restaurants or cafes, betting, spa treatment and spa treatment equipment.	The percentage of green areas should be no less than 50%. There may be service and tourist facilities, including hotels, recreational, sports and communal, and housing.	The percentage of biologically active areas should be not less than 45%.

Source: Own elaborations based on Act (2005).

Apart from delineating specific protection zones, the city applying for the health resort status indicates and confirms its natural healing resources and determines the proposed directions of spa activities based on an inventory of the relevant tourist and resort infrastructure (Act, 2005). Conflicts of urban, tourist and spa functions may result in different expectations of residents, local entrepreneurs, local authorities, tourists, and bathers.

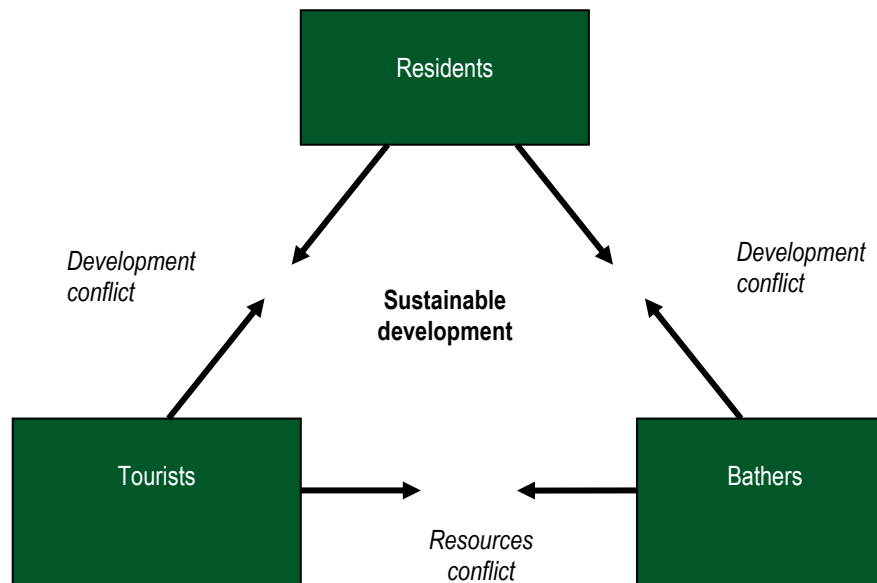
Cities are systems that function continuously in conflict situations. Principal conflict areas are property rights, access to resources, and development concepts (Fig. 3). Resort cities are especially prone to conflict.

Environmental protection in the resorts and the rigors in the development of zone A intensify conflicts over resources, especially land, which can be more intensively used for economic activities unrelated to resort activities. Resort infrastructure exists in resort cities, often found in the city centre, which excludes other types of development for divergent functions, e.g., industrial development. The resort function also influences the priority scope of transport organisation in the city because the pollution of the environment by vehicles and noise must meet low standards in terms of decibel levels. The heat supply system must be modern for the air quality to be remarkably high.

Environmental protection standards are not as crucial for the tourist function as for the resort function, which focuses on a greater intensity of city exploitation. At the same time, the spa function, similarly to the tourist function, aims to serve the external demand, i.e., patients or tourists who differ in the purpose of their stay, intensifying the development conflict. In selected coastal resort cities, the resort and tourist functions are parallel and overlap. Stakeholders often use the same hotel base and similar attractions. A characteristic feature of

coastal resort towns is the fact that there are coastal belts with beaches in their areas, which are under the supervision of the maritime administration.

Figure 3. Conflicts triangle of the resort city



Source: Own study based on Fitzgerald and Leigh (2002).

At the same time, they play the role of spa facilities with iodotherapy and thalassotherapy. Still, their development is also subject to the control of the maritime state administration. Therefore, seaside resort cities are areas of strict regulation for the spa and state administration in health resorts and the coastal areas.

3. Results

3.1 Resorts Stakeholders' Analysis Method

Verifying the conflict triangle with regards to a coastal resort city, stakeholder analysis and categorisation were performed. Its goal was to figure out the interactions between the various categories of stakeholders and to understand attitudes and relationships across the full spectrum of stakeholders. A comprehensive stakeholder approach allowed us to understand the background of conflicts.

Based on general principles in the stakeholder management process, the first step of the research is to identify and categorise stakeholders (Zamojska and Susmarski 2017). Assigning attributes to each stakeholder (Mitchell, Agle and Wood 1997) and classification into homogenous groups allows to decide the attitude towards the project (inhere: the resort cities).

Understanding stakeholders' relations and their impact on health resort activity and medical tourism is crucial for making-decision processes (Peric *et al.* 2014). Stakeholder management is a communication tool and helps to manage conflicting stakeholders' interests in diverse types of projects (Pedrini and Ferri 2019). For example, Boerner and Jobst (2011) studied stakeholders' interests in German public theatres.

3.2 Resort Stakeholders' Selection and Identification Process

A better understanding of functional conflicts demands identifying, understanding, and analysing all the key resort stakeholders and their attributes. In general, stakeholders are any entities, individuals, groups, or institutions influencing or influenced by the activities of institutions (Eslerod *et al.* 2015; Mitchell *et al.* 1997) or projects (Aapaoja and Haapasalo 2014). In literature, stakeholders' approaches usually reflect in terms of companies or projects.

Regarding health resorts in Poland, a more proper approach would be the project approach. Setting up the resort zone has its start date and schedule and can be evaluated as an infrastructure project backed by cost-benefit analysis. Resorts can be recognised as infrastructure projects, characterised by complex interactions between stakeholders whose different interests are a source of conflicts (Zamojska and Susmarski 2017).

Local context and strong interdependencies between diverse stakeholders are essential in local growth. Kamassi *et al.* (2020) assume even that the development of medical tourism depends heavily on the

stakeholders' relations. That is why stakeholders should be included as the main part of the decision-making process in resort projects. However, not much research on the stakeholders of resort projects has been published (Al Maamari 2020).

Table 8. Seaside health resorts stakeholders' identification and aggregation into groups

Stakeholders group	Example stakeholders
Local and State Authorities	health minister, governor (voivodeship leader), local government bodies, decision-making public institutions, public entities performing municipal tasks
Bathers	patients entitled to benefits free of charge, beneficiaries, fee-paying patients
Business	hotels and lodging providers, property developers, travel services operators, industrial enterprises
Environment	ecologists, natural environment, NGOs, local community
Financiers	health minister, marshal's office, municipality
Opinion Leaders and Media	NGOs, municipality, local media, professional and sectoral organisations
Residents	retiree residents, local labour market, working residents, schoolchildren and students, prospective residents
Resort Staff	the chief physician of the health resort, referral physicians, resort personnel
Tourists	domestic tourists, foreign tourists

Source: Own elaborations.

Table 9. Stakeholders groups exemplary attitudes to coastal resorts

Stakeholders group	Exemplary attitudes towards resorts
Local and State Authorities	health resorts, as an element of health care in Poland (Paszowska, 2017) should develop
Bathers	interest in year-round access to resorts
Business	perception as a barrier to the development of certain types of entrepreneurial activity due to environmental limitations and the lack of areas intended directly for investment activities
Environment	less noise and environmental pollution
Financiers	financial support from central and local authorities through grants
Opinion Leaders and Media	positive attitude towards resorts
Residents	diversified attitude: positive resulting from the feeling of an increase in wealth in connection with, for example, an increase in real estate prices and easier access to treatment and rehabilitation services, a good situation on the labour market in specific specializations, good quality environment (Wiktorowicz, 2020) negative ones resulting from: higher costs of living related to the tourist character of the city, restrictions on running a business, nuisance resulting from tourism
Resort Staff	interest in maintaining and creating jobs
Tourists	high attractiveness of the coastal health resort as a tourist destination

Source: Own elaborations.

Kamassi *et al.* (2020), based on the study, indicate eight key stakeholders in medical tourism, namely, medical tourists, healthcare providers, government agencies, facilitators, accreditation and credentialing bodies, healthcare marketers, insurance providers, and infrastructure and facilities. In the specific circumstances of a given country, the list of key stakeholders may differ and include, for example, resort staff, labour unions, investors, financial institutions, insurance, or social security (Kulkajonplun *et al.* 2016). Among stakeholders, also think tanks, sectors of NGOs, and Academics may be mentioned (Álvarez *et al.* 2011). Referring to medical tourists using foreign resorts can be divided into poor and wealthy. Manaf *et al.* (2015) and Kamassi *et al.* (2020) underline the quality as a critical driver of the medical tourism supply side, which depends on three dimensions represented by stakeholders, namely, medical staff, administration, and support services staff and providers.

Stakeholders play a crucial role in medical tourism because they may contribute to the industry's growth. It is worth noting that a literature review leads to the conclusion that the object of the stakeholders' study is the tourism industry connected with health resorts.

The identification of stakeholders included theoretical considerations and was based on the Act (2005) and the analysis of strategic and planning documents of the studied coastal resorts. The stakeholders were then aggregated into homogeneous groups, as shown in Table 8.

Using the desk research method, examples of stakeholder attitudes towards seaside resorts have been assigned to stakeholder groups (Table 9).

3.3 Resort Stakeholders' Attitudes Based on the Saliency Model

The basis for impact studies on a resort project is stakeholder attributes, understood as characteristics that significantly affect the project (Doloi, 2012). The stakeholder salience model was constructed using three attributes (power, urgency, and legitimacy) proposed by Mitchell, Agle and Wood (1997).

Power to influence the project can be exercised by voting rights (by owners, decision-makers), economic influence (as an investor, client, contractor, or business partner) or political impact (as public administration, non-government organisation) or legal impact (potentially all stakeholders). Urgency can be understood as time-dependent stakeholder expectations of the resort project, where stakeholder expectations require immediate response or action. Legitimacy can be perceived as a claim based upon the legal title, contract, legal right, moral right or interest in the costs and benefits generated by the resort.

In further proceedings, primary attributes have been expanded to include another, referred to as attitude, to propose a strategy for acting on stakeholders. Stakeholder's multidimensional attitudes toward the resort project may consist of various aspects, e.g., emotional (state of mind, negative attitude toward life), behavioural (personal or culture-related preferences), and receptivity (willingness to engage, response to the needs of the activity, openness to change, project progress, emerging issues during project implementation).

The process was conducted using an original software instrument for measuring stakeholder influence on the infrastructure projects carried through by a municipality. It was described in Section 3.1. Then stakeholder group attributes were calculated based on stakeholders' predicted responses. The table shows the average simulated values of all four attributes stakeholders perceive within the identified groups. The simulated distribution of stakeholder attribute values was indicated on a five-point Likert scale (1-5), where 3 means the neutral response.

Table 10. Mean values of simulated responses across stakeholder groups and categories

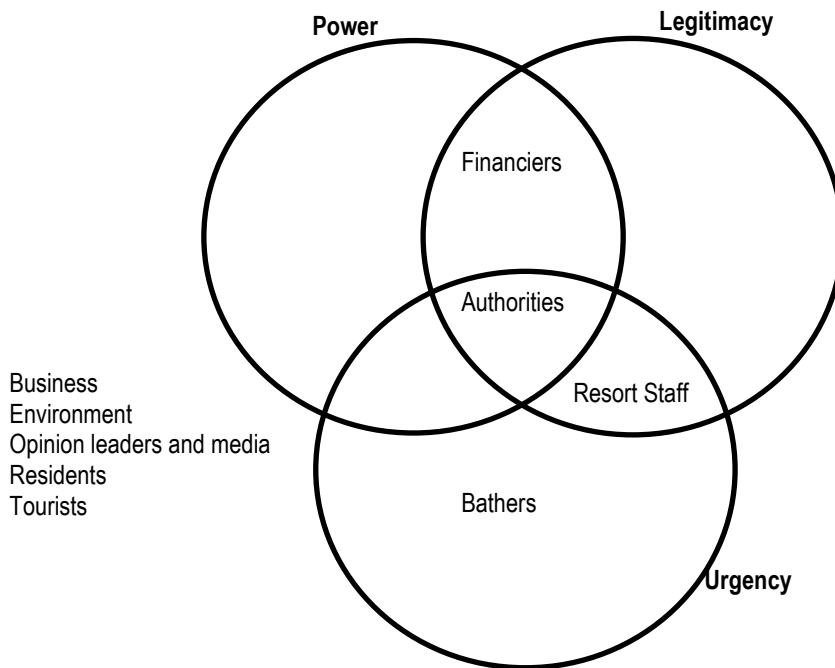
Stakeholders' group	Attitude	Power	Urgency	Legitimacy
Local and State Authorities	3,6	4,4	3,8	5,0
Bathers	5,0	1,0	5,0	2,0
Business	1,8	1,2	2,0	2,0
Environment	4,5	2,0	3,3	2,5
Financiers	4,3	4,3	3,3	5,0
Opinion Leaders and Media	4,0	2,5	3,3	3,0
Residents	2,8	1,6	2,6	1,8
Resort Staff	5,0	2,7	5,0	4,0
Tourists	2,0	1,0	2,0	1,0

Source: Own elaborations.

The salience model shows the picture of stakeholder attributes in three overlapping circles based on previously performed tests of means. The function used in the model (Measuring Stakeholder Influence, 2017) determined whether a particular attribute was statistically significant or not ($. < 05$). Based on the attributes assigned, it was possible to decide on the category of stakeholders and expected reactions. Based on Mitchell, every stakeholder group has one or two attributes assigned and can be classified into one of the categories (Mitchell *et al.* 1997; Wagner Mainardes *et al.* 2012): dormant, dominant, dangerous, definitive, discretionary, dependent, demanding, or non-stakeholder.

The categories classification of stakeholder groups based on the simulation results for each attribute is shown in Figure 4.

Figure 4. Coastal resorts stakeholder groups salience model



Source: Own elaborations.

As a result of the attributional classification of stakeholder groups based on the results of simulations conducted for each attribute, the group of stakeholders described as ‘definitive’ (owning all three attributes) were only ‘Authorities’. These groups are of the highest priority and demand immediate attention. ‘Financiers’ have been assigned to a ‘dominant’ stakeholder group (owning power and legitimacy attributes), and they expect and receive much attention. The group of ‘dependent’ stakeholders included ‘Resort staff’. ‘Bathers’ were among the ‘demanding’ stakeholders, which means that although urgency is the most crucial attribute, they must be monitored regarding their potential. They depend on other groups for their claims to be considered. Non-stakeholder describes groups that neither hold the influence nor are influenced: ‘Business’, ‘Residents’, ‘Environment’, ‘Opinion Leaders and Media’ and ‘Tourists’.

Table 11. Stakeholders group characteristics and stakeholders’ potential management strategy in the coastal resorts

Stakeholders’ group	Category	Attitude	Potential for cooperation	Strategy
Local and State Authorities	Definitive	Supportive	high	Engage
Bathers	Demanding	Insignificant	low	Monitor
Business	Non-Stakeholder	Non-supportive	low	No action
Environment	Non-Stakeholder	Insignificant	low	No action
Financiers	Dominant	Supportive	high	Engage
Opinion Leaders and Media	Non-Stakeholder	Insignificant	low	No action
Residents	Non-Stakeholder	Neutral	low	No action
Resort Staff	Dependent	Supportive	high	Engage
Tourists	Non-Stakeholder	Non-supportive	low	No action

Source: Own elaborations.

Stakeholders’ group’s classification by categories, types, attributes, and potential for cooperation enables the proposed communication strategies to be specified. The function first classifies stakeholder groups, which determine their attitude (attitude) and considering the potential for collaboration, it suggests a communication strategy for every stakeholder group (Measuring Stakeholder Influence 2017).

The classification determined stakeholders’ groups using the following attributes: supportive, non-supportive, mixed, neutral, and insignificant. Based on responses counted as the average of simulated values perceived by stakeholders, the ‘high’ or ‘low’ determines the potential of a particular stakeholder to collaborate.

The phrases 'engage' and 'monitor' provide general guidelines for dealing with stakeholders actively or passively.

One of the limitations of the salience model is not including the level of the attribute assigned. Also, it is impossible to prioritise the groups of stakeholders assigned to one category (here: non-stakeholder).

4. Discussion and Conclusions

4.1 The Stakeholder Analysis in the Context of Function Conflicts

City attractiveness derives from residents' and visitors' demand, while urban attractiveness for residents is the primary attribute. Clavé and Wilson (2016) cite studies introducing the intertwining and close interdependence of two functions toward the urban orientation of the place resulting from the touristic model. However, in health resorts, such cities may experience excessive development of tourist functions resulting in tourist traffic and boundaries in city planning (Haçia 2016). Haçia (2016) also underlines the negative impact of such tourism on urban attractiveness for residents (e.g., soaring prices, and seasonality).

Resort cities are prone to a potential conflict of functions arising from stakeholders' needs, where the resort and tourist functions dominate over the urban function. It can also lead to a development conflict. The health and tourist functions aim to serve external demand. The resort function relates to the creation of health services for patients. The development of health services is related to the city's spatial development, which also affects the residents.

Table 12. Conflict areas - stakeholders groups and scope identification

Stakeholders groups	Conflict scope
Tourists – Residents	Nuisance resulting from tourism and air pollution
Bathers – Tourists	Nuisance resulting from tourism and air pollution
Residents – Bathers	Access to spa facilities
Residents – Local and state authorities	the quality of life of the residents
Business – Local and state authorities	Business restrictions due to regulatory resort framework
Business – Resort staff	Business restrictions due to regulatory resort framework
Local and state authorities – Bathers	No data
Business – Bathers	No data
Environment – Business	Environmental restrictions for business

Source: Own elaborations.

A good understanding of stakeholders' values in the cost-benefit and impact evaluation is a prerequisite to justify efforts to gain and keep resort status in Poland. In Poland, due to the strong connection to natural resources and municipal affiliation, the analysis of stakeholders in the health and resort industry needs to address broader knowledge and stakeholder divisions and concepts. Due to the specific municipal cooperation, health resort patients (bathers, guests, or tourists) are not the primary critical drivers of resort development and success, as is confirmed in many other countries (Kamassi, 2020).

However, one of the limitations of the stakeholders' relations analysis is that it does not explain the origins and the processes of relations (Al Maamari, 2020). Also, there is not enough knowledge about how different stakeholders perceive the impact of the project (Al Maamari, 2020). The literature analysis and own research on conflict screening in relative projects show a potential conflict of functions in resort cities due to the diversified characteristics of the key stakeholders: residents and tourists. The functions of cities are related to the key stakeholders.

No intense conflicts arose from the stakeholder impact study based on the salience model, in which individual-named stakeholders were assigned a point-based assessment of the significance of the attributes, such as power, urgency and legitimacy. In assessing the importance of the attributes, low values were rewritten for the key stakeholders of the conflict, residents and tourists; therefore, these stakeholders were not identified as key in the stakeholder management strategy.

Assigning low values results from the specific regulatory conditions for the operation of health resorts in Poland. Thus, the strength of the attributes of individual stakeholders results in more from the regulations than from the actual situation. Therefore, if the city is a health resort, the impact on the inhabitants is low. Hence, the role of these stakeholders in the conflict is small, which does not mean that this situation will remain unchanged. The voice of residents performed by their representatives in city councils was important before applying for the status of a health resort. Therefore, it can be expected that residents may change from dormant to active stakeholders in the case of increasing conflicts of functions.

4.2 Drivers to Reconcile for Conflicting Functions

The organisational model of a resort city resulting from the Act considers restrictions in the field of environmental protection, *i.e.*, air pollution and noise levels. Obtaining the status of a health resort is complicated but also requires natural healing resources. Despite the restrictions, in practice, the stringent environmental standards for spas are exceeded, for example, in terms of noise and air pollution. However, this does not result in the loss of the health resort status, which means that the public sector does not sufficiently enforce the regulations. Thanks to this, both the urban, resort and tourist functions can coexist in coastal cities with success.

Strict adherence to resort standards in terms of low noise and high air quality would lead to a worsening of conflicts in the city, as it would result in the necessity to reconstruct the city's transport system (mobility), *i.e.*, limit the city's accessibility to individual transport, costly reconstruction of the city's heat supply system and a decrease in income from tourism. The inhabitants overlook the lost profits resulting from developing zone A as a spa. Political factors also decide about keeping the spa function. Increasing the intensity of development for zone A and resigning from the spa function is currently not attractive for local authorities because seaside resort towns develop quickly compared to other cities in Poland. Moreover, the propaganda elimination of the spa zone would be politically unpopular for local authorities, contrary to the ecological vision of coastal resort cities. On the other hand, strict enforcement of health resort standards for environmental protection would escalate the frozen conflict. Hence, the importance the authorities who promote the resort city model do not want revolutionary changes.

Research shows that coastal cities try to combine the functioning of a health resort with a tourist function, minimising the occurrence of conflicts.

According to all strategic documents, the cities show the will to develop the spa function. Despite the expectations of entrepreneurs about the relaxation of the spa regime and the development of entrepreneurship, the spa function in the analysed cities is kept due to the expectations of residents and local and central authorities.

Conclusions

Urbanisation processes and the combination of diverse urban functions are accompanied by functional conflicts involving stakeholders. Conflicts are revealed in many areas and contexts such as urban fleet coordination (Martí *et al.* 2023), urban mobility (Mastora *et al.* 2023), land use, urban and rural development imbalances (Chen *et al.* 2023; Wang *et al.* 2023), natural resources protection.

However, natural resources can dominantly determine the development and competitiveness of nature-based tourism, so a good understanding of stakeholders and their potentially divergent interests is key in decision-making processes (Spoladore and Pessot, 2023). It is important for local authorities to implement a scheme for efficient conflict management in coastal resort cities as tourism has become part of a new global lifestyle (Romao, *et al.* 2018). Growing demand for extended health services accelerated by technological development (*i.e.*, Booking.com, Airbnb) results in conflicts between different city users.

The first stage is mapping the existing conflicts related to local specificity. If well implemented, the growing demand for health services related to, *e.g.*, the ageing population and lifestyle - so-called medical or health tourism have an enormous potential for development, deciding the economic development of the resort city. The growth of the silver economy, including health services, makes cities with natural healing resources (resorts) an essential infrastructure in the overall healing services system.

Credit Authorship Contribution Statement

Marcin Wołek: Conceptualization, Investigation, Methodology, Formal analysis, Writing – original draft, Supervision, Validation, Writing – review and editing, Visualization.

Joanna Próchniak: Conceptualization, Investigation, Methodology, Project administration, Software, Formal analysis, Writing – original draft, Data curation, Validation, Writing – review and editing, Visualization.

Jarosław Kempa: Conceptualization, Investigation, Formal analysis, Writing – original draft, Supervision, Writing – review and editing, Visualization.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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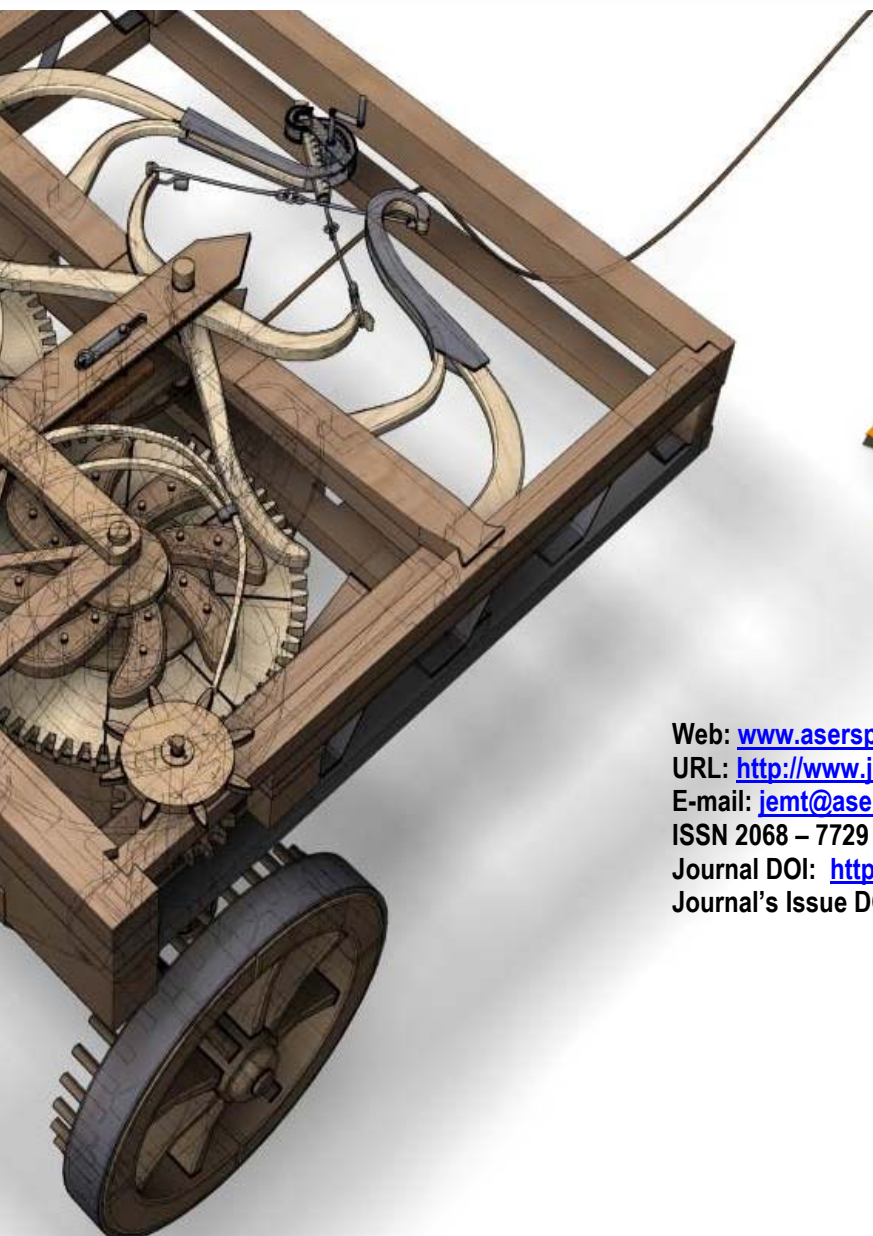
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