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TOURISM SPAAS THE MAIN TYPE OF HEALTHY TOURISM IN POLAND

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Spa tourism is a specific kind of tourism. It derives from health spa functions and a way of its financing. In Poland it is a developing branch that is financed by numerous public units: NFZ, ZUS, KRUS, PFRON. On the territory of Poland there is a significant number of spas having rich natural resources with healing properties that are limited in their activity. This article shows law regulations of spa tourism in Poland.

Key words: health, healthy tourism, tourism spa, spas.

Pro-health activities gather a lot of interests of public opinion. Touring in order to improve one's well-being plays central role in this process. Health is expensive but also health is a condition of economic growth. Health also depends on the standard of living. Health has got a political meaning, first of all its protection because health is one of the main determinants as about quality of life, but also has an influence on social order, and constitutes an absolute value deciding about biological existence of population.

In the constitution of WHO there is an official definition of health, whealth is a state of physical well-being, psychological and social health is not only a lack of sickness or disability» [26]. Beneficial activity of tourism can be observed in all its dimensions indicated in WHO.

Health is an individual dimension, is a key factor conditioning suitable quality of life, possibility of executing of tasks and playing roles, functioning of individuals and families [17]. Undertaking different activities to improve the level of health is getting more and more essential. One of these activities is healthy tourism. Healthy tourism differs from other kinds of tourism because its aim is improvement of health condition.

Health tourism is understood differently. From one side as a part of tourism spa, from the other as this kind of tourism which is useful for our health, but then when we are not sick. From the third side, as a kind of tourism including all forms of tourism strictly connected with health [5].

It is possible to indicate different forms of tourism with leitmotif "health". We can list the following ones:

- tourism spa including rehabilitation, treatment of long lasting diseases, treatment in spa like places,
- healthy tourism consists of travelling connected with treatment in many fields of medicine,

Table 1

- healthy tourism includes previously planned treatment abroad,
- wellness tourism includes specialized broad base which is aimed at achieving comfort,
 - convalescent leave it is a leave connected with separate health benefits [6].

The main motives of touring within health tourism:

- recuperation after diseases and injuries,
- ambition to decrease negative results of stress.
- countering addictions,
- increase rate of the elderly in the highly developed societies causes demand for the professional medical services connected with treatment, maintenance and rehabilitation of the elderly,
- decision of improvement of health due to specialized advances and operations while in relax in an environment not resembling hospital conditions using the difference of price for offering services on the world market,
 - wealthy people use more and more diversified and alternative medicine,
 - wealthy people in the middle-age are bored with traditional tourist offer [29].

Stays in spa like places without doubts belong to traditional forms of healthy tourism. These forms of tourism develop in the areas having nature values and landscape where curative properties and favourable bioclimate conditions were discovered. Mineral and thermal waters, curative peats (bilberry), silts, argils, and curative properties of climate are decisive as about the development of healing process [12].

Deciding factors of healthy tourism*

Economic factors	Socio-psychological factors	Supply factors
general economic	free time	Political conditions of health
income factors (real income,	demographic factors	tourism, (for example: regulations
savings)	geographical factors	of law and its functions)
pricing factors	industrial determinants	transport conditions
	urbanization factors	tourist infrastructure
	cultural factors	tour-health operators
	incentive factors, (for example:	conditions like "Consumers -
	rest, relax, improvement of	Purchasers"
	health)	factors such as: "enterprise"
	non-economic factors (for	(for example: tour operators
	example: raise of health	taking part in tourist supply)
	awareness, fashion)	factors such as "state" (for
		example: the range of state
		interference in an economic
		growth)

^{*}Source: A. Hadzik, J. Kantyka, A. R. Szromek: Wybrane czynniki rozwoju zdrowotnej turystyki wellness w statutowych uzdrowiskach w Polsce. Turystyka i Rekreacja- Studia i Prace. 2010. − № 7. − S.129.

Tourism spa is a kind of healthy tourism what reasonably justifies its partly financing by National Health Fund, (NFZ). In Poland, Social Insurance Institution, (ZUS) launches a programme of therapeutic rehabilitation in the scope of prevention of pension that takes place in spa. State Fund for the Rehabilitation of Disabled Persons, (PFRON) and Agricultural Social Insurance Fund, (KRUS) are concerned with financing spa. It is also possible to indicate other factors of the development of healthy tourism. They are shown in the table 1 below.

Demand on the market of tourism spa depends first of all on the wealth of society, ways of treatment and rest, availability of medical and tourist services, and depends on the fashion of meeting the needs of this kind [14].

The product of tourism spa is very specific. The following features are connected with the product:

- consumption of spa product is always non-refillable, even if one's is using an identical product in the same place and time,
- a variety of spa product coincides with the fact that supplying of services is one-off both for the producer and the customer,
- purchasing of the spa product is often based on imagination, not only about the product itself, but also on the temporary whereabouts,
 - spa product is impermanent,
 - spa product can not be stored,
 - complementarity,
 - product spa sublinesubstitutabilty,
 - simultaneity of provision and consumption,
 - purchase means temporary right of its usage in a particular place and time,
- features of product spa are shaped in a direct contract between a provider and a customer [15].

Spa treatment is a continuation of hospital treatment or outpatient treatment which is aimed at rehabilitation, the treatment of long lasting diseases and prophylaxis using among others natural treatment resources.

As it was mentioned before spa treatment in Poland is financed by National Health Fund. In accordance with the bill from the 27th August 2004 concerning health services financed from public funds spa treatment or rehabilitation in Poland, are entitled to beneficiary on the basis of a medical diagnosis issued by a doctor of health insurance. This medical diagnosis must be confirmed by a voivodeship branch of National Health Fund, suitable for the benefit provider competent with respect to the place of residence. If it is impossible to establish sb's place of permanent residence, it must be the voivodeship branch of National Health Fund suitable for the headquarter of benefit provider that issued this medical diagnosis.

This medical diagnosis recorded in a branch of National Health Fund, is being checked by a medical expert employed in National Health Fund, in the field of balneoclimatology, and medicine of physical sciences or medical rehabilitation who judges its purposefulness and indicates kind and place of spa treatment. If he states contraindications or a lack of indications to medical treatment, then a letter of referral will not be confirmed. Validity of confirmed letter of referral to spa treatment is 18 months of issue date.

Beneficiary covers costs of travel to spa treatment or rehabilitation, as well as costs of coming back home. Beneficiary is also obliged to pay partly for food and accommodation at convalescent home. Suitable entity is obliged to finance services of medical establishment thanks to the public funds to the amount determined in the contract of the voivodship branch of National Health Fund, together with the convalescent home the difference of costs of food and an accommodation of the insured patient. Moreover, National Health Fund, does not cover:

- costs of stay of the patient's caretaker,
- additional costs in the place of convalescent home, for example: charges of air conditioning,
- costs of treatment by nature and rehabilitation not connected with underlying pathology that is a direct reason of the doctor's referral to spa treatment [20].

Children and teenagers till 18, if they are learning till 26, considerably disabled children – without age limit, but also children obliged to family annuities do not cover charges for costs of food and accommodation in the health resort, in the convalescent home for children and in general [1]. Caretakers must cover all costs for their stay. Children going to an elementary school or middle school are sent to spa treatment all year round, teenagers from the secondary school are sent to spa treatment in free time from school.

While qualifying a patient to the health establishment, the doctor estimates:

- health condition of a patient,
- possibility of spa treatment by means of using properties of natural primary commodities.
 - medical history conditioning spa treatment or spa rehabilitation,
- patient's ability to self-service, unrestricted mobility, a patient's ability to self-service or freedom of locomotion in the wheelchair [3].

Contraindications to spa treatment or spa rehabilitation are the following ones:

- sickness, when spa treatment or spa rehabilitation by means of using properties of natural primary commodities may cause deterioration of sickness,
 - an infectious disease in a sharp stage.
 - pregnancy and confinement,
 - an incurable disease [3].

Benefits guaranteed in Poland include:

- hospital treatment for children aged 3 to 18 years old,
- spa treatment in a convalescent home for children aged 7 to 18 years old,
- spa treatment in a convalescent home for children aged 3 to 6 years old being supervised by adults,
 - spa treatment in hospital for adults,
 - spa treatment in a convalescent home for adults,
 - spa rehabilitation in health resort for adults,
 - spa rehabilitation in a convalescent home for adults.
 - ambulatory treatment for adults and children [4].

Stay in hospital lasts 21 days and is free of charge. A person being employed receives in this time a sick-leave. Stay for a child lasts 27 days. Stay in a convalescent home lasts 21 days. Child's stay is free of charge while stay of an adult is partly paid. This stay for a

person being employed is included in a leave. Stay in a spa hospital during a rehabilitation lasts 28 days, is partly paid and lasts during a sick-leave. Stay in a convalescent home during a rehabilitation lasts 28 days, is partly paid and takes place during a leave. An ambulatory treatment for adults and children lasts from 6 to 18 days [27].

Since 1996, Social Insurance Institution runs a programme of rehabilitation in the range of pension insurance. Rehabilitation is run in medical centres cooperating with Social Insurance Institution, and is based on diagnosis, treatment, rehabilitation and psychological procedures, and widespread educational health. This programme is aimed at restoring an ability to work for persons that are threatened with long-lasting disability to work and simultaneously prognosticate regaining these abilities after recovery. While implementation of a programme the most important is sending an insured person to a medical centre because the sooner rehabilitation starts, the better results can be achieved. The programme of rehabilitation in the range of pension insurance is addressed to insured persons:

- threatened with complete or partial incapacity to work,
- entitled to sickness benefit or an accident benefit.
- collecting temporary pension on the basis of disability to work simultaneously prognosticating regaining ability to work after recovery.

The legal basis of referral of an insured person or a pensioner to a medical centre, is a medical statement, on the state of health concerning rehabilitation issued by a medical expert of Social Insurance Institution. An application to conduct rehabilitation in the range of pension insurance can be issued by each doctor responsible for treatment, and the person who applied for this treatment submits this application in a competent branch of Social Insurance Institution, competent with respect to the place of residence.

If a medical expert of Social Insurance Institution issues a statement of necessity of conducting rehabilitation in the range of pension insurance, the person interested in it receives a notification of sending to a medical centre. Full cost of rehabilitation taking into account the costs of treatment, accommodation and food covers Social Insurance Institution. Costs of travel to the medical centre from the place of residence, and return, are refunded by Social Insurance Institution, to the amount of the cheapest ticket of public transport.

Full rehabilitation includes setting forth a programme directed to treatment of an illness being a reason of sending for rehabilitation. The programme takes into account:

- different forms of physical rehabilitation, for example, physiothraphy, individual and in a group, exercises in water, physiotherapy medical treatments in the range of thermal treatment, cryotherapy, hydrotherapy, treatment by electromagnetic field using extremely high and low frequency, acouatical treatment, laser treatment, traditional massage and vibration massage,
- psychological rehabilitation among others psycho-education and relaxation sessions.
- health education directed on transferring information in the range of: rules of healthy eating, knowledge of fear factors in illnesses of civilization, basic knowledge about a process of an illness taking into account a profile of an illness, knowledge of dangers for health in the place of work, basic information about the rights and obligations of an

employer and an employee, giving instructions about rehabilitation in domestic conditions after rehabilitation.

Rehabilitation in a medicl centre should last 24 days, however the time of treatment may be extended or shortened by a senior registrar of the medical centre after prior getting the permission of Social Insurance Institution, in the case of:

- positive diagnosis as about regaining ability to work in an extended time of rehabilitation,
 - earlier regaining ability to work,
 - appearing other reasons speaking on behalf of assigned to examination [28].

The next entity financing spa services is KRUS that according to its statutory duty ensures farmers entitled to benefits using health rehabilitation. It is organized in form of 21-day stays, run in its own centres, or in Centres of Rehabilitation of Farmers KRUS or other plants of the healing rehabilitation with which health insurance-fund cooperates. Every year the healing rehabilitation is used by 14.5 thousand persons, by means of KRUS. Since 1993, Agricultural Social Insurance runs during summer holidays rehabilitation stays for farmers' children. Rehabilitation in KRUS is aimed at preventing of disability or its limitation to the level making possible for the insured further performance of work in the agricultural farm. As about persons who lost their ability to work – regaining their ability to work if possible, thanks to the treatment and rehabilitation. From the healing rehabilitation one's can use it not often than once a year [7].

The main reason why a lot of communes in Poland are interested in achieving a status of spa, is collecting special fee from each person staying in this spa more than one day. This fee is a direct income to the budget of the commune. Moreover, the status of spa is connected with whipping up the tourists' interests with the particular spa. It is also connected with brand identification and brand equity of this spa [30]. There are many functions of spa: healing, rehabilitation, prophylactic and tourist.

Spas can be classified according to healing factors:

- climatical.
- spa (healing waters),
- bilberry,

and according to hypsometry can be divided for:

- seaside (located no more than 3 kilometres from the shore, and using specific properties of the marine climate and the healing power of seawater),
- lowland (located on the territory with an average absolute altitude up to 200 m above sea level).
- alpine (located on the territory with an average absolute altitude over 800 m above sea level) [2].

Spas in Poland operate on the basis of the bill from the 25th July 2005 about therapeutics spa, spas, protective areas of spa and commune spas.

Healing spa in Poland is run by means of using healing devices, such as:

- pump room,
- graduation tower,
- parks.
- walking paths,

- well maintained sections of the seashore,
- healing and rehabilitation spa swimming pool,
- underground coal mine workings [2].

To therapeutic works can be included:

- · spa hospitals,
- convalescent homes,
- spa hospitals for children and convalescent homes for children,
- spa clinics,
- nature-healing plants,
- hospitals and convalescent homes located in the underground coal mine workings [10].

Community spa and a community having status of protective spa area undertakes own tasks connected with maintenance of spa healing functions, particularly in the scope of:

- land use, taking into account needs of healing spa, protection of natural healing resources, constructions and other forbidden activities in certain zones of protective area,
- protection of natural resources or protective spa area, and meeting requirements in the range of limits of air pollution, noise level, sewage disposal to waters or to the ground, economy of waste, emission of electromagnetic field described in separate bills,
- creating conditions to functioning plants and devices of healing spa and development of municipal infrastructure in order to meet the needs of persons staying in the commune for healing purposes,
- creating and improvement of municipal and technical infrastructure designed for spa or protective spa areas, connected meeting certain conditions (for example, it has a suitable technical infrastructure in the range of water and sewage management, energetics in the range of collective transport, waste disposal) [8].

Spas in Poland according to voivodeships are shown in the table 2.

In the development of spas in Poland we can indicate some obstacles which impede regional growth. These obstacles have influence on becoming a proprietary spa in Europe. The following obstacles can be listed:

- law barriers referring to exacting laws of the bill of spa. That is: exacting laws requiring too large green area in the spa zones, an issue of facilities having an influence on an environment,
- ban on car park and shopping centres with a large sales area, complicated rules of preparing contracts to National Health Fund, and the like,
- economic barriers such as, low investment expenditures for spa healing, bad financial standing of companies of state treasury,
- infrastructural barriers fatal communicating access to Polish health resorts, low standard of spa and municipal infrastructure, and the like,
- socio-political barriers a lack of homogenous policy in the range of prophylaxis of health.
- badly oriented distribution of referrals to convalescent homes, a low level of availability to spa healing for a considerate part of society, a slow process of privatization of spa places, negative stereotypes concerning spa healing [18].

It causes that for treatment purposes arrives to Poland up to 3 % of tourists. The highest

number comes from Germany. However, only 1 % from Eastern Europe [11].

Table 2 Spas in Poland according to voivodeships (Source: Private study)

Voivodeship	Number of spas	Health resorts
Lower Silesian Voivodeship	11	Cieplice Śląskie - Zdrój
•		Czerniawa - Zdrój
		Długopole - Zdrój
		Duszniki - Zdrój
		Jedlina - Zdrój
		Kudowa - Zdrój
		Lądek - Zdrój
		Polanica - Zdrój
		Przerzeczyn - Zdrój
		Szczawno - Zdrój
		Świeradów - Zdrój
Kuyavian-Pomeranian	3	Ciechocinek
Voivodeship		Inowrocław
volvodesnip		Wieniec - Zdrój
Lublin Voivodoshin	2	Krasnobród
Lublin Voivodeship	2	
T / 1/ 37 ' 1 1 '	1	Nałęczów
Łódź Voivodeship	1	Uniejów
Lesser Poland	10	Krynica - Zdrój
Voivodeship		Muszyna - Zdrój
		Piwniczna - Zdrój
		Rabka - Zdrój
		Swoszowice (Kraków)
		Szczawnica
		Wapienne
		Wieliczka
		Wysowa - Zdrój
		Żegiestów - Zdrój
Masovian Voivodeship	1	Konstancin - Jeziorna
Podkarpackie Voivodeship	4	Horyniec - Zdrój
		Iwonicz - Zdrój
		Polańczyk
		Rymanów - Zdrój
Podlaskie Voivodeship	2	Augustów
-		Supraśl
Pomeranian Voivodeship	2	Sopot
,		Ustka
Silesian Voivodeship	2	Goczałkowice - Zdrój
		Ustroń
Świętokrzyskie Voivodeship	2	Busko - Zdrój
Z World for to to desirip		Solec - Zdrój
Warmian-Masurian	1	Goldap
Voivodeship	1	Goldup
West Pomeranian	5	Dąbki
)	1 7
Voivodeship		Kamień Pomorski
		Kołobrzeg
		Połczyn - Zdrój
	1	Świnoujście

Due to this to the most important tasks connected with the development of health in spas in Poland can be included:

- supporting the development of spa infrastructure, tourism, recreational and sport infrastructure,
 - creating a brand recognition of Polish spa tourism,
 - improvement in quality of services for customers,
 - training for workers employed in spa and commune spa,
 - the development and support of promotional activities [9].

Spa tourism is important because all the offered services are effective, cheap, without negative side effects. Demand for all these services connected with an increase of health awareness, aging of society and increasing wellness of the society will be growing in the next years. Spa services are the best form of prophylaxis and health promotion and exert a considerable influence on the condition of health of the society.

LIST OF REFERENCES

- 1. Ustawa z dnia 27 sierpnia 2004 r. o świadczeniach opieki zdrowotnej finansowanych ze środków publicznych (Dz. U. 2008, nr 164, poz. 1027).
- 2. Ustawa z dnia 28 lipca 2005 r. o lecznictwie uzdrowiskowym, uzdrowiskach i obszarach ochrony uzdrowiskowej oraz o gminach uzdrowiskowych (Dz. U. 2012, poz. 651).
- 3. Rozporządzenie Ministra Zdrowia z dnia 5 stycznia 2012 r. w sprawie sposobu kierowania i kwalifikowania pacjentów do zakładów lecznictwa uzdrowiskowego (Dz. U. 2012, poz. 14).
- 4. Rozporządzenie Ministra Zdrowia z dnia 28 sierpnia 2009 r. w sprawie świadczeń gwarantowanych z zakresu lecznictwa uzdrowiskowego (Dz. U. 2009, nr 139, poz. 1136).
- 5. *Białk-Wolf A.*: Zdrowotna funkcja współczesnej turystyki. W: Turystyka zdrowotna. Pod red. M. Boruszczaka, WSTiH, Gdańsk 2010, s. 17-18.
- 6. Białk-Wolf A.: Zdrowotna funkcja współczesnej turystyki. W: Turystyka zdrowotna. Pod red. M. Boruszczaka, WSTiH, Gdańsk 2010, s. 17-18.
- 7. Bojar-Fijałkowski T.: Prawo uzdrowiskowe w Polsce stan i perspektywy. W: Turvstyka zdrowotna i uzdrowiskowa. Pod red. M. Boruszczaka, WSTiH, Gdańsk 2011, s. 222.
- 8. *Boruszczak M., J. Golba, A. Hadzik*: Ewolucja i stan obecny uzdrowisk w Polsce. W: Turystyka zdrowotna. Pod red. M. Boruszczaka, WSTiH, Gdańsk 2010, s. 257-259.
- 9. *Hadzik, J. Kantyka, A. R. Szromek*: Wybrane czynniki rozwoju zdrowotnej turystyki wellness w statutowych uzdrowiskach w Polsce. Turystyka i Rekreacja- Studia i Prace nr 7, 2010.
- 10. *Iwańska M.*: Możliwość wykorzystania partnerstwa międzysektorowego w rozwoju turystyki uzdrowiskowej w Polsce. W: Turystyka uzdrowiskowa. Stan i perspektywy. Pod red. M. Boruszczaka, WSTiH, Gdańsk 2009, s. 62.
- 11. Koniusz M., R. Węglarz: Kierunki zmian w polskich uzdrowiskach. W: Turystyka uzdrowiskowa. Stan i perspektywy. Pod red. M. Boruszczaka, WSTiH, Gdańsk 2009, s. 39.
- 12. *Lęcka I.*: Nowe trendy w turystyce zdrowotnej. Prace i Studia Geograficzne 2003 tom 32, s. 175.
- 13. *Lęcka I.*: Nowe trendy w turystyce zdrowotnej. Prace i Studia Geograficzne 2003 tom 32.
 - 14. Lewandowska A.: turystyka zdrowotna. US, Szczecin 2007, s. 32

- 15. Lewandowska A.: turystyka zdrowotna. US, Szczecin 2007, s. 44-45
- 16. Lewandowska A.: turystyka zdrowotna. US, Szczecin 2007.
- 17. *Magnuszewska-Otulak G.*: Ochrona zdrowia w polityce społecznej, W: Polityka społeczna, pod red. G. Firlit-Fesnak i M. Szylko-Skoczny, PWN, Warszawa 2007, s. 201.
- 18. Marketingowa strategia Polski w sektorze turystyki na lata 2012-2020. POT, 2012, s. 34.
- 19. Polityka społeczna, pod red. G. Firlit-Fesnak i M. Szylko-Skoczny, PWN, Warszawa 2007.
- 20. Świadczenia opieki zdrowotnej finansowane ze środków publicznych. Vademecum 2012. NFZ. Warszawa 2012. s. 64 i nast.
- 21. Świadczenia opieki zdrowotnej finansowane ze środków publicznych. Vademecum 2012, NFZ, Warszawa 2012.
- 22. Turystyka uzdrowiskowa. Stan i perspektywy. Pod red. M. Boruszczaka, WSTiH, Gdańsk 2009.
- 23. Turystyka zdrowotna i uzdrowiskowa. Pod red. M. Boruszczaka, WSTiH, Gdańsk 2011.
 - 24. Turystyka zdrowotna. Pod red. M. Boruszczaka, WSTiH, Gdańsk 2010.
- 25. *Mochow A. A.*: Sočetanie častnych i publičnych interesow pri prawowom regulirowanii medicinskoj dejateľ nosti, Yuridichesky Center Press, Saint Petersburg 2003.
- 26. *Mochow A.*: Sočetanie častnych i publičnych interesow pri prawowom regulirowanii medicinskoj dejatel`nosti, Yuridichesky Center Press, Saint Petersburg 2003, s. 57.
 - 27. www.zus.pl
 - 28. www.krus.gov.pl
 - 29. http://www.equilibrium-ht.com/news/pdf/PiB 09 Kordasiewicz.pdf
 - 30. http://www.sojeccy.pl/slownik

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САНАТОРНИЙ ТУРИЗМ ЯК ОСНОВНИЙ ВИД ОЗДОРОВЧОГО ТУРИЗМУ В ПОЛЬШІ

Аркадіуш Пшибилка

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Санаторний туризм є особливим видом туризму. Це обумовлено його оздоровчими функціями, що передбачені в санаторіях, а також способом їхнього фінансування. У Польщі ця галузь розвивається, її фінансують численні публічні суб'єкти (організації): Національний фонд охорони здоров'я, соціальне страхування, Сільськогосподарський фонд соціального страхування, Державний фонд реабілітації інвалідів. На території країни діє велика кількість курортів з багатими натуральними лікувальними умовами. Однак санаторії зіштовхуються з деякими обмеженнями у своїй діяльності. У статті описано процес регулювання оздоровчого (санаторного) туризму в Польщі.

Ключові слова: здоров'я, оздоровчий туризм, санаторії, санаторний туризм.

САНАТОРНЫЙ ТУРИЗМ КАК ОСНОВНОЙ ВИД ОЗДОРОВИТЕЛЬНОГО ТУРИЗМА В ПОЛЬШЕ

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Санаторный туризм является особым видом туризма. Это обусловлено его оздоровительными функциями, выполняемыми в санаториях, а также способом их финансирования. В Польше эта отрасль развивается, ее финансируют многочисленные публичные субъекты (организации): Национальный фонд здравоохранения, социальное страхование, Сельскохозяйственный фонд социального страхования, Государственный фонд реабилитации инвалидов. На территории страны имеется большое количество курортов с богатыми натуральными лечебными условиями. Однако санатории сталкиваются с некоторыми ограничениями в своей деятельности. В статье описан процесс регулирования оздоровительного (санаторного) туризма в Польше.

Ключевые слова: здоровье, оздоровительный туризм, санатории, санаторный туризм.