Indigenous Therapeutic Tourism: Challenges, Emerging Trends, and Sustainability

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Abstract: A healthy, harmonious, proactive, and contented life is not just desirable; it is a fundamental human aspiration in our increasingly threatened contemporary world. This social research, applied to tourism, centres on the indigenous peoples of Aldeia Fulkaxó in the state of Sergipe, Brazil, conducted between 2022 and 2023. The main aim of this study is to investigate the healing ceremonies and rituals practised by this indigenous community, which represent a complex, systemic, and transdisciplinary phenomenon. The research seeks to recognise and evaluate the integrative and complementary aspects of the health practices of these indigenous peoples and their impact on governance. The methodology used is exploratory and entails a review of the current state of knowledge in this field from 2003 to 2023. Additionally, qualitative research methods are employed, including audiovisual ethnography and field diaries. This approach uncovers the challenges and opportunities presented by indigenous phytotherapeutic processes as ethnocultural attractions for tourists. We witness their annual retreats offered to both national and international groups. Initial findings suggest an increasing demand for tourist experiences that fully immerse individuals in nature and the indigenous way of life, with a particular focus on therapeutic benefits. Moreover, this study accentuates the socio-cultural emergence of therapeutic tourism as an innovative offering in the domain of health and well-being, specifically addressing concerns such as anxiety, stress, and depression.

Keywords: Therapeutic Tourism, Indigenous Communities, Health Tourism, Well-being.

1. Introduction

The historical expressions of humanity's pursuit of healthy habits and customs are as ancient as the ancestral practices of indigenous peoples. In the context of tourism, these expressions are linked to the idea of travelling through time and space in pursuit of an enhanced quality of life. In these times of social and cultural transition, both locally and globally, especially in the aftermath of the Covid-19 pandemic, which enforced worldwide quarantine measures, there has been a noticeable increase in the demand for tourism experiences in open spaces and amidst nature. Within this context of solidarity and participation, the overarching goal of this study is to analyse the therapeutic activities conducted in Aldeia Fulkaxó, which can contribute to promoting community-based tourism for sustainable tourism development within Aldeia Fulkaxó.

The origins of these tourism practices can be traced back to Brazilian thermal springs (as well as in Europe) and the inception of Health Tourism, among other related segments such as Rural and Ecotourism. According to the Ministry of Tourism, in its specific publication on health and well-being, "it can be said that the 19th century witnessed significant developments in therapies involving water, particularly thermal treatments" (Brazil, 2010a).

Contemporary society grapples with the dilemmas of its systemic complexity and the breakdown of its way of life. This is evident in the resurgence of tourism scenarios where the pursuit of improved health is rooted in overall well-being and a return to a connection with primordial nature. This dynamic reflects conditions mutatis mutandis, as observed in experiences where urban populations seek interaction with nature. People are seeking a form of tourism that occurs in rural areas but doesn't necessarily fall into the category of rural tourism or any specific type of ecotourism (Brazil, 2010b).

The purpose of these individuals and groups is to reconnect with their ancestral heritage and roots, aiming for more "The aim of these individuals and groups is to reconnect with their ancestral heritage and roots, seeking more beneficial outcomes in their tourism experiences, as defined by Alcântara, Grimm, and Sampaio in 2018. This involves forging a stronger connection with elements such as unpolluted air, clean water, toxin-free food, and fertile lands within healthy environments. These elements serve as ethnocultural attractions presented in ceremonial retreats and healing rituals conducted by Brazilian indigenous communities, signifying the
emergence of a new ethos. This situation demands attention from governance stakeholders, whether public or private entities, to ensure the sustainability of tourism initiatives in indigenous territories, quilombola communities, riverine areas, and other native spaces inhabited by indigenous peoples (Feil & Schreiber, 2017).

These cultural aspects of Brazilian indigenous ethnicities, as they transform into ethnocultural attractions, play a significant role in tourism phenomena associated with health and well-being. In contrast to urban life, the practical wisdom offered in rituals, through the utilization of herbal medicinal plants, provides a distinct experience from traditional sun-and-beach tourism (Brazil, 2015). This pursuit of therapeutic tourism activities arises from the fast-paced nature of city life, coupled with the increased prevalence of Information and Communication Technologies (ICT) in both individual and collective life.

These interconnected factors have resulted in a phenomenon known as "silent resignation" in Brazil and globally (BBC, 2023). The repercussions of this socio-emotional transition in the work sphere are particularly felt in urban habits and customs, with the World Health Organization (WHO) noting a significant increase of up to 25% in diagnoses of anxiety, stress, and depression during the first year of the pandemic. In this context, tourism, as a transdisciplinary phenomenon, can be examined through various analytical categories, segments, or modalities. Among rural, cultural, and health tourism, this study aims to acknowledge an innovation: Therapeutic Tourism. This emergent form of tourism is characterized by a still-developing body of literature in Brazil and other countries, as indicated by preliminary results from exploratory bibliometrics. A search for scientific publications related to "therapeutic tourism" on the CAPES platform, Periodicals from 2003 to 2023, only yielded one article that linked both terms (Monsores, Lopes, Bezerra & Silva, 2016).

The longing for a tourism setting amidst nature in a specific region with its distinct cultural identity, as seen in the case of indigenous ethnicities, has progressed in the last decade in Brazil. It has transcended being a local and isolated occurrence in the Amazon region in the north of the country. The unique experiences offered by these ethnic communities, deeply rooted in the cosmology of their medicinal plants, in ancestral therapeutic ceremonies, have become a sought-after demand, shaping itineraries in local and regional tourism facilities (indigenous communities).

The culture of innovation in Therapeutic Tourism encompasses "healing" rituals, natural landscapes, organic food, and its value lies in the enhancement of mental health conditions, contributing to emotional well-being among the tourists visiting the Aldeia.

In this context, Brazil has been implementing new public policies in support of traditional medicine and herbal therapies. The Brazilian Unified Health System (SUS) has gradually adopted their implementation in public health facilities since its legal regulation in 2006. This recognition aligns with publications by the World Health Organization (WHO) recognizing practices like Chinese Acupuncture and Indian Ayurveda, among others (Brazil, 2015).

These tourism activities conducted in indigenous communities offer integrative and complementary practices (ICP) applied in therapeutic processes carried out in spiritual retreats with herbal medicinal plants, considered sacred and healing, abundant in the country’s vegetation. The coastal and hinterland natives of Aldeia Fulkaxó engage tourists in their cosmological dimension, their way of life, by opening their healing rituals and sharing their ethos as an ethnocultural tourist attraction."

2. Literature Review

The provision of Integrative and Complementary Health Practices (ICHP) as a collective service or product forms a fundamental premise of Community-Based Tourism (CBT) (Brazil, 2009). CBT typically involves a temporal and spatial shift from urban environments to rural areas. While the segment of Rural Tourism or even Ecotourism and Experiential Tourism may conceptually align with the phenomena observed in indigenous communities, closer scrutiny reveals that these segments do not entirely encapsulate the experiences witnessed in these tourism expressions. In this context, the common factor is that all these segments unfold in rural spaces. However, the principal focus of therapeutic tourism is on health and well-being. Therefore, this study opts for Health Tourism (HT) as a starting point. The rationale behind this selection is its closer alignment with the therapeutic perspective found in the cosmology of indigenous peoples, especially concerning herbal medicinal plants. The research is rooted in the field of Health and Well-Being, representing the foundational point in the discourse of both the indigenous community and the tourists engaging in expeditions into the forest, as explicitly acknowledged in online publications extolling the health benefits of spending time in the socio-cultural spaces of Aldeia Fulkaxó.
Nonetheless, the experiences of individuals and groups in nature are sometimes perceived, as reported by the indigenous population of Aldeia Fulkaxó, as a space-time for leisure and quality of life, which has tangible effects on overall health (mental, emotional, physical, and energetic). Some participants on social media platforms such as Instagram and Facebook express their pursuit of “harmony between mental and physical health and emotional well-being.” Therefore, the rural aspect is a component, but not the sole aspect, just as ecology or the experience in healing retreats. In reality, ceremonies conducted by indigenous peoples regularly take place in urban spaces, and the experience does not exclusively occur in nature or solely focus on ecological aspects (Souza & Klein, 2019).

In Brazil, particularly in the states of Acre, Rondônia, and Amazonas, where indigenous ethnicities predominantly inhabit the Amazon rainforest, Health Tourism, emphasizing ICHP rooted in indigenous traditional medicine, has been ongoing for at least fifty years (Henriques, 2023; Proença and Panosso-Neto, 2022; Costa Oliveira, 2017; Shanon, 2003). However, before 2003, neither Tourism nor Health were regulated by law in Brazil. Health as a segment began to emerge in 2010 with its initial guidebook. Indigenous ancestral knowledge, as part of ICHP, was integrated into the Brazilian Unified Health System (SUS) only in 2006 (Brazil, 2015).

It’s important to note that these activities have gained recent prominence, widely promoted on social media platforms today. They are conducted through ceremonies involving Ayahuasca (in the Northern Region) and Jurema (in the Northeastern Region). These ceremonies feature prominently fermented herbal teas based on local and regional medicinal plants, including internationally recognized ceremonies available on platforms like YouTube, Instagram, and Facebook. A simple search on social media using keywords like “ayahuasca” and “jurema,” combined with terms like “ceremony” or “spiritual retreat,” yields hundreds of results (https://encurtador.com.br/ewK05).

Indigenous peoples from the coastal, forested, and hinterland areas of Sergipe in Northeast Brazil notably use regional herbal medicinal plants, jurema and velandinho, and possess practical wisdom rooted in their cosmology. These tourism activities, not yet categorized or segmented due to the ongoing research in these territories, are prominently highlighted on digital media platforms primarily in common agendas. These include discussions around the “Temporal Framework” (Brasil, 2007), a bill concerning the demarcation of indigenous lands and its potential impact on indigenous communities. Additionally, these activities intersect with positive actions for ethnic rights, such as the creation of the Ministry of Indigenous Peoples in 2023, announced by President Lula at the UN Climate Change Conference (COP27). There are also concerns regarding the potential cultural appropriation of these ICHP by the Western population and pharmaceutical interests, driven purely by profit motives, which could potentially alter the indigenous ethos through subtle manipulations for instrumental interests.

In the state of Sergipe, Brazil, as depicted in Figure 1, numerous territories occupied by quilombolas (descendants of escaped slaves), riverine communities, and indigenous peoples showcase multiculturalism expressed in their practices, customs, visual arts (songs, dances, and paintings), as well as medicinal, dietary, and agricultural practices.

![Figure 1: Location of Aldeia Fulkaxó, (Brazil/SE).](https://example.com/figure1.png)

Source: Own elaboration.

One such indigenous community situated ten kilometers away from the town of Pacatuba in rural areas is Aldeia Fulkaxó, led by Chief "Tchydjo-Uê" - Mr. Humberto Cruz. Tchydjo-Uê is esteemed as a healer and conducts
shamanic rituals across various Brazilian states, Europe, Russia, and North America. Together with his brother, the "official" shaman Soyré - Mr. Ademir Cruz, they perform ceremonies utilizing "forest medicines," particularly Jurema and Velandinho, native medicinal plants from the Northeastern region. They have recently integrated the use of Ayahuasca, a fermented tea from the Amazonian tradition, employed for managing stress and depression, as well as Rapé, a powdered mixture of tobacco and ash obtained from the burning of tsuno tree bark. Rapé is insufflated into the nostrils using wooden or animal bone instruments known as Tipi or Curipi and is employed for alleviating muscle and bone pain, clearing nasal congestion, and slowing down thinking. Tobacco, prevalent in indigenous cultures worldwide, is used in various forms to release energies. In this relatively newly established village with a history of fourteen years in Sergipe's geographical landscape, there is an ongoing territorial dispute, and the community is actively engaging in legal procedures to reclaim their territory.

The primary ethnic and cultural influences for this community are drawn from the Fulni-ô people in the state of Pernambuco, the Kariri from the state of Alagoas, and the Xocó, who have a more notable presence in the state of Sergipe - thereby resulting in the name "Aldeia FUL.KA.XÓ." Aldeia Fulkaxó regularly hosts both Brazilian and foreign tourist groups, who spend periods ranging from seven to twenty-one days, participating in healing rituals and ceremonial practices. All visitors seek therapeutic treatment using herbal medicinal plants within the context of ancestral healing rituals, as per the Fulkaxó cosmology.

However, Aldeia Fulkaxó has limited transportation, accommodation, food resources, and lacks a dedicated digital presence or visitation schedule, unlike indigenous villages in the Brazilian Amazon. The weakness in promoting this northeastern Brazilian health and well-being tourism destination lies in the absence of self-management by the indigenous people in organizing the administration of their ethnocultural attractions. The visitation process is primarily arranged and facilitated by non-indigenous individuals, often through exchange agreements with these ceremony organizers and facilitators. At most, these non-indigenous individuals or groups promote expeditions, ceremonies, rituals, and retreats on social media platforms. Despite this, Aldeia Fulkaxó hosts groups for spiritual and energetic work aimed at enhancing the health and well-being of tourists, even in its rudimentary and natural state. This study underscores that these activities are considered ethnocultural attractions with a touristic purpose since the experiences developed in the Aldeia are recognized as Integrative and Complementary Health Practices (ICHP) by the Brazilian Unified Health System (SUS). These practices are rooted in indigenous cosmology, which forms part of Brazil's intangible cultural heritage (Velthem, Kukawka & Joanny, 2017).

Considering the numerous possibilities in academic knowledge and ethical research practices, there are innovations across various realms of human understanding that can be envisioned. Globally, new studies are being proposed to analyze, map, diagnose, identify, verify, and measure both intangible and material aspects related to tourism destination management. The objective is to contribute to the development of local and regional communities by connecting diverse landscapes and tourism routes.

As expressed by Scótolo and Panosso-Netto (2015), "contemplating local development means envisioning the transformation of the current condition of a locality, making it improved, better, and enriched." In this context, the challenge lies in establishing a digital platform, a website, with active participation from young indigenous individuals. Such a platform could bolster and empower these Brazilian indigenous peoples in Pacatuba, Sergipe, who presently lack infrastructure support and technical assistance from the Brazilian government. Having been dispossessed of their lands in the mid-19th century, they have yet to regain ownership due to the absence of land titles, impeding access to public support.

3. **Methodology**

The phenomenology of perception, as described by Ponty in 1999, serves as the guiding framework for approaching Therapeutic Tourism as a complex and systemic phenomenon within contemporary society. While the research is interdisciplinary, a characteristic of applied social sciences, presents various opportunities for providing support and technical aid to communities. In the context of post-normality, sciences have developed tools for conducting anthropological analyses that appreciate the ethnocultural knowledge of indigenous peoples, evident in traditional sources (Rodrigues & Barbieri, 2008) and Ethnoecology (Toledo & Barreira-Bassols, 2009).

The study adopts an anthropological approach, beginning with the Health Tourism segment (Brazil, 2010) to construct an investigative framework based on participant observation, following Cardoso de Oliveira's method in 2000. Through interpretation, the study identifies Therapeutic Tourism as a new form centred on indigenous
herbal practices, attracting tourists on expeditions to Aldeia Fulkaxó. This phenomenon has recently surged post-COVID-19 but has roots in the Amazon (Brazilian, Peruvian, Bolivian) since the 19th century, according to some authors (Henriques, 2023; Proença and Panosso-Neto, 2022; Costa Oliveira, 2017; Shanon, 2003).

The proposed research design follows a path that begins with an approach based on the phenomenology of perception (Ponty, 1999) concerning how we perceive the research universe, Aldeia Fulkaxó, the study's protagonists, the indigenous population, and our research subject—their ethnocultural attractions from a sustainability perspective. This also includes the motivations of their tourists. Fieldwork involves participant observation, wherein the researcher is in direct contact and experiences indigenous life during their retreats, ceremonies, rituals, and herbal therapeutic processes (ICHP).

Alongside this journey, typical anthropological instruments for collecting qualitative data were employed, such as audiovisual ethnography, non-directive interviews, and field diaries. These methods allowed for an empathetic interpretation closer to the native reality. This native reality encompasses indigenous practices—the key informants of the phenomenological study. Quantitatively, bibliometrics were conducted, including an exploratory study of the state of the art using the term "turismo" (tourism) combined with "terapêutico" (therapeutic) in the CAPES Periodicals Portal, which contains 45,000 open-access national and international periodical publications, various databases that compile academic and scientific works, as well as patents, theses, dissertations, and other types of materials, covering all fields of knowledge since 2011.

The bibliometric tool used was ProKnow-C (Knowledge Development Process Constructivist) as depicted in Figure 2. This tool considered the frequency and thematic relevance of keywords in article abstracts. Articles were included after an initial dynamic reading and review of their abstracts to support critical reflection without delving into author dilemmas. The exploratory research began with the expression “turismo terapêutico,” which yielded 52 articles and 1 review in CAPES’ bibliographic portfolio. Surprisingly, the first article described therapeutic tourism as “a sanitary phenomenon” (Monsores et al., 2016). Subsequently, a more focused bibliometric search was conducted using the term “turismo + terapêutico,” resulting in only 6 articles, of which 5 were peer-reviewed. The reference with peer review was chosen, yielding 5 publications with the highest interrelationship between keywords. Unexpectedly, these five publications represented the same source—Monsores et al., 2016, in five different iterations.

![Figure 2: Research Design: Macro-Steps of ProKnow-C.](source: Ensslin et al., 2010a)

4. Results and discussion

The kind of study presented here is justified in proposing applied social research in tourism centred on practices and services in Therapeutic Tourism. This emerging community reality in Aldeia Fulkaxó concerns the health and well-being of non-indigenous populations. However, there are structural limitations in the complete applicability of these practices to contemporary tourism, which is predominantly digital. This challenge was informally expressed by their leader, Humberto Cruz, during a public meeting held in the village in June 2022, where the researcher participated as an invited anthropologist, essentially considered a 'relative' of the indigenous people. This arose as an active request from their community, seeking the necessary support and technical assistance to cease depending on external actions imposed on the natives' territory.
The manner in which these Integrative and Complementary Health Practices (ICHP) are structured as expeditions, and their ethical and aesthetic principles, align with Ethnoecology (Toledo & Barreira-Bassols, 2009) and Sustainability (Feil & Schreiber, 2009). This is an outcome of the intricacy of the subjects within the study territory and their systemic outlook, deeply rooted in cosmology and ancestral knowledge. This indigenous community engages in tourism focusing on the holistic health of individuals and groups, encompassing mental, emotional, physical, and spiritual well-being through their ceremonial experiences. This demand is growing, reflecting the post-pandemic (COVID-19) scenario and the acceleration of urbanisation, highlighting the need for more comprehensive studies in these areas.

However, the term 'Therapeutic Tourism' is still in its early stages in Sergipe and the northeastern coastal region of Brazil. Within this context, there is a growing demand for local development with sustainability—specifically, the creation of associated services that are economically viable, socially equitable, and environmentally sustainable (Burgos & Mertens, 2015).

Based on initial findings, it appears that other remaining and indigenous communities within and beyond Brazil are encountering similar challenges: the digital self-management of the Therapeutic Tourism process. This is either due to a reluctance to embrace technology in their way of life or a lack of openness to scientific work with medium- and long-term outcomes in these communities. Therefore, the promotion of creating ethnocultural brochures, local itineraries, and catalogues in collaboration with these traditional communities should be encouraged within the framework of Community-Based Tourism (CBT).

5. Conclusions

Acknowledging a tourism destination as accessible implies that everyone, irrespective of their physical condition, can access the available offerings, including products, services, and infrastructure, without encountering barriers, as tourism is a right for all.

The study has unveiled that Therapeutic Tourism is an emerging and escalating trend within the phytotherapeutic practices of indigenous communities, focusing on the holistic health of individuals and groups, encompassing mental, emotional, physical, and spiritual aspects. This trend has become even more pronounced in the post-COVID-19 world, reflecting a pursuit of well-being amidst an accelerated urban lifestyle. These practices are complex and involve a systemic approach, aligning with Ethnoecology and sustainability principles.

However, there are structural challenges regarding the full implementation of these practices in the contemporary context, which is increasingly digital. Indigenous communities encounter difficulties in self-managing the digital aspects of the Therapeutic Tourism process, either due to reluctance in integrating technology into their way of life or a lack of openness to long-term scientific endeavours. This emphasises the need for technical support and assistance for these communities to fully develop their ethnocultural tourist attractions and derive economic benefits while preserving the authenticity of their practices.

Preliminary results also suggest that other remaining and indigenous communities, both in Brazil and other parts of the world, may face similar challenges regarding digital management of Therapeutic Tourism. Therefore, collaboration in creating promotional materials, local itineraries, and catalogues, in partnership with these communities, should be encouraged as part of the principles of Community-Based Tourism (CBT).

Ultimately, this study highlights the importance of transdisciplinary and anthropological approaches to understanding and supporting emerging tourism practices in traditional communities. It contributes to local development with sustainability and respect for the cultural authenticity of these communities. Furthermore, it underscores the need for dialogue and collaboration among researchers, indigenous communities, and government authorities to promote equitable development and the well-being of all involved.

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