Therapeutic Servicescapes and Market-Mediated Performances of Emotional Suffering

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We introduce the concept of therapeutic servicescapes, defined as consumption settings where emplaced, market-mediated performances compensate for sociocultural dilemmas. Our focus is on the localization of emotions that are emplaced in specific sociospatial features and collectively reproduced through ritualized consumer performances. This ethnographic study of religious pilgrimage consumption reveals that the therapeutic servicescape comprises three features: evocative spaces, ideological homogeneity, and restorative emotion scripts. These servicescape features catalyze the consumer rituals of therapeutic relations, therapeutic release, and therapeutic renewal. Our theorization of therapeutic servicescapes offers three contributions. First, we reveal how emotions are socially and geographically orchestrated and transformed in marketplace settings. Second, we demonstrate how therapeutic ritual performances reproduce emplaced, market-mediated emotion and compensate for embodied emotional restrictions. Third, we demonstrate how the negotiation of emotional ordering guides the therapeutic dialogue between religion and the marketplace.

Keywords: servicescapes, consumer emotion, therapeutic consumption, pilgrimage

Consumer researchers have explored how market-mediated performances can provide relief from sociocultural dilemmas. Consumers turn to the marketplace to address the alienation inherent in post-industrial, corporate capitalism (Belk and Costa 1998; Canniford and Shankar 2013; Celsi, Rose, and Leigh 1993; Goulding et al. 2009; Scott, Cayla, and Cova 2017), to escape from oppressive urbanization (Arnould and Price 1993; Arnould, Price, and Tierney 1998; Belk and Costa 1998; Canniford and Shankar 2013), and to seek spiritual revitalization (Crockett and Davis 2016; Moisio and Beruchashvili 2010; O’Guinn and Belk 1989; Sherry and Kozinets 2007). Implicit in much of this research is that a diverse range of marketplace contexts can play a compensatory function by orchestrating performances that consumers find therapeutic (Lears 1983). The Oxford English Dictionary defines therapeutic as “having a good effect on the body or mind; contributing to a sense of well-being.”

In this article, we introduce the concept of therapeutic servicescapes, defined as consumption settings where emplaced, market-mediated performances compensate for sociocultural dilemmas. Our focus is on the localization of emotions that are emplaced in specific sociospatial features and collectively reproduced through ritualized consumer performances. Prior work recognizes that servicescapes can orchestrate ritualized performances of consumer emotion, such as pleasure and happiness (Goulding et al. 2009; O’Guinn and Belk 1989) or fear (Arnould and Price 1993;
Emotions emerge through sociospatial encounters (Conradson 2005; Davidson, Bondi, and Smith 2012; Davidson and Milligan 2004), but existing accounts do not fully explain how consumer emotions are socially and geographically orchestrated. Indeed, Moisio and Beruchashvili (2010, 872) call for research to better explore how “marketplace arrangements cultivate emotions.”

We focus on a therapeutic servicescape that orchestrates performances of emotional suffering. The privileging of emotional suffering is particularly therapeutic (Illouz 2007) and compensates for the emotion deficit that is prevalent in Western consumer culture (Furedi 2004). It is thus ideally matched with our intention of building understanding of the localized nature of consumer emotion. Our central goal is to theorize how emplaced, market-mediated performances of emotional suffering become therapeutic. We are guided by the following research questions: What are the sociospatial features of a therapeutic servicescape? What therapeutic consumer rituals are catalyzed by these servicescape features? Our analysis draws on the concepts of therapeutic landscapes (Gesler 2003) and emotion scripts (Turner and Stets 2006), which enable us to uncover the sociospatial nature of emotion.

We theorize that the therapeutic servicescape comprises three features: evocative spaces, ideological homogeneity, and restorative emotion scripts. These servicescape features catalyze the consumer rituals of therapeutic relations, therapeutic release, and therapeutic renewal. Our theorization of therapeutic servicescapes offers three contributions. First, we reveal how emotions are socially and geographically orchestrated and transformed in marketplace settings. Second, we demonstrate how therapeutic ritual performances of emotional suffering become therapeutic. The privileging of emotional ordering guides the therapeutic dialogue between religion and the marketplace.

Our article is structured as follows. We begin with a theoretical review detailing how servicescapes that respond to sociocultural dilemmas become therapeutic. We then demonstrate how an emotional geography perspective is helpful in theorizing emplaced consumer emotion. The details of a three-year ethnographic study of Lourdes pilgrimage are presented, before we proceed to discuss the therapeutic servicescape features and how these catalyze therapeutic consumer rituals. We conclude by discussing our theoretical contributions.

THEORETICAL FOUNDATIONS
Introducing Therapeutic Servicescapes

Servicescapes have been defined as the physical built surroundings within consumption settings that influence the nature and quality of social interaction (Bitner 1992). Sherry (1998) suggests that contemporary servicescapes encompass natural and cultural/built environments and physical and ethereal qualities. In this article, we introduce the concept of therapeutic servicescapes, where localized sociospatial features orchestrate market-mediated performances that compensate for sociocultural dilemmas. This perspective builds on the idea that therapeutic consumption compensates for the generalized anxieties associated with fluid life settings (Bauman 2007). Therapeutic consumption can be traced to the historical upheaval of the late nineteenth century, when consumption began to be viewed as a viable means of escape and compensation for fragmented, troubled selves and spiritual voids (Lears 1983). For Lears (1983), the drivers of therapeutic consumption included an interdependent market economy characterized by bureaucratic corporations that threatened personal autonomy, rising urbanization and technological progress, and a more liberal religious landscape that undermined ethical and moral standards. Lears (1983, 12) referred to “abundance therapy” to suggest that consumption unleashed consumers toward fuller lives, intense experiences, and the aspiration of self-realization. However, this abundance therapy merely accelerated the development of consumer culture, promoted a new set of social controls, and ultimately reinforced rationalization.

We suggest that the drivers of therapeutic consumption identified by Lears (1983) remain relevant to contemporary sociocultural dilemmas. Although the therapeutic quality is not necessarily the theoretical core of servicescape studies, analysis nevertheless reveals their compensatory function in sustaining the status quo through commercially mediated therapeutic performances. We discuss the sociocultural dilemmas in turn but recognize that servicescapes are not mutually exclusive to one dilemma.

First, servicescapes can offer a source of reenergization to compensate for the alienation inherent in post-industrial, corporate capitalism (Belk and Costa 1998; Canniford and Shankar 2013; Celsi et al. 1993; Goulding et al. 2009; Scott et al. 2017). In providing a platform for pleasure, play, and physicality, these servicescapes offer a cathartic quality that resolves workplace tensions and affords a more fulfilling work-life balance. However, these regenerative and restorative escapes remain temporary alternatives to corporate life and, in this sense, they are “hidden” and “clandestine” acts of subversion (Scott et al. 2017, 19) that do little to disrupt the dominant social system. Indeed, their containment ultimately reaffirms the mundanity of corporate life (Goulding et al. 2009).

Second, various studies reveal that consumers are drawn to servicescapes that offer relief from urban malaise through interaction with the natural environment (Arnould and Price 1993; Arnould et al. 1998; Belk and Costa 1998; Canniford and Shankar 2013). For example, Arnould et al. (1998, 415) discuss the healing power of the wilderness.
servicescape propelled by a narrative of restoration that reaches “below the surface of culture and civilization.” These servicespaces offer a sense of renewal that enables consumers to return to urban life refreshed and rejuvenated.

Third, servicescapes can offer spiritual revitalization in the face of a consumer culture where conventional religious institutions no longer hold unquestioned authority and prominence (Crockett and Davis 2016; O’Guinn and Belk 1989; Sherry and Kozinets 2007). Such servicescapes manage tensions between religious ideology and consumerism (Crockett and Davis 2016) and are embraced by consumers who face judgment and ridicule for their religious beliefs (O’Guinn and Belk 1989), or who are frustrated with traditional religious institutions (Sherry and Kozinets 2007). Another pertinent example of spiritual revitalization is found in Moisio and Beruchashvili’s (2010) investigation of support groups when they propose a spiritual-therapeutic model of consumer well-being. Such servicescapes encompass empathetic support from like-minded others that would otherwise be absent from existing social networks.

These studies suggest that servicescapes can orchestrate intense consumer emotion. Some servicescapes orchestrate the ritualized performance of festive emotions, such as pleasure and happiness (Belk and Costa 1998; Goulding et al. 2009; O’Guinn and Belk 1989). However, the profiling of emotional suffering remains rare, with prior servicescape work geared more toward settings that facilitate emotional distance from everyday worries and tensions (Arnould and Price 1993; Belk and Costa 1998; Canniford and Shankar 2013; Celsi et al. 1993; Goulding et al. 2009; O’Guinn and Belk 1989; Scott et al. 2017). Some of these consumption settings involve fear and anxiety that are orchestrated as enriching through a sense of personal achievement (Arnould and Price 1993; Canniford and Shankar 2013; Celsi et al. 1993; Tumbat and Belk 2011). Although these servicescapes enable emotional suffering, servicescapes where emotional suffering is central to performance rituals have been neglected. We address this oversight because the privileging of emotional suffering is particularly therapeutic (Illouz 2007) and compensates for the emotion deficit that is characteristic of Western consumer culture (Furedi 2004). To enable our theorizing of the therapeutic servicescape, we turn to emotional geographies literature, which offers a useful framework for understanding the emplaced, sociospatial articulation of emotion.

Theorizing Emplaced Consumer Emotion

From an emotional geography perspective, emotion is not an interiorized subjective mental state but emerges through sociospatial interaction (Davidson et al. 2012). Davidson and Milligan’s (2004, 524) discussion of an “emotio-spatial hermeneutic” highlights the circular nature of the link between people and places: “emotions are understandable—‘sensible’—only in the context of particular places. Likewise, place must be felt to make sense.” From this perspective, emotion should be approached as a “relational, connective medium” (Bondi 2005, 433) or “a form of connective tissue” (Davidson and Milligan 2004, 524) that situates the individual within social geographies of place. Consequently, emotions are characterized by a dynamism that means they are more readily emplaced in some settings than others.

We draw on emotional geography literature to build knowledge of how emotions are localized to therapeutic sociospatial settings. Prior consumer research shows that emplaced, market-mediated consumer performances can be emotionally charged (Arnould and Price 1993; Celsi et al. 1993; Goulding et al. 2009; Scott et al. 2017). However, the way in which these consumer performances are tied to emotional geographies has not been fully addressed. Enabled by the concepts of therapeutic landscapes and emotion scripts, we explain how consumer emotions are geographically and socially situated in order to more fully appreciate the therapeutic elements in prior studies.

Therapeutic landscapes are useful in highlighting the restorative outcomes stemming from self-landscape interaction (Gesler 2003). Therapeutic landscapes were originally understood as “landscapes associated with treatment or healing” (Gesler 1992, 735–36) but later extended to encompass landscapes that promote well-being (Williams 2002). This extension of meaning suggests that people can be attracted to therapeutic landscapes to seek resolution or ease of problems. Therapeutic landscapes integrate a person’s physical, mental, spiritual, emotional, and social states, with four types of environment: natural, built, symbolic, and social (Gesler 2003). We follow Conradson’s (2005) conceptualization to acknowledge that landscapes do not have intrinsically therapeutic properties. Therapeutic outcomes do not arise simply by a consumer being in a particular place but require active consumer participation. Conradson’s (2005) perspective is helpful because it draws attention to how therapeutic landscapes can rework broader sociocultural dilemmas encountered in other landscapes. Prior research on therapeutic landscapes does not tend to focus on commercial settings; however, we find the therapeutic landscapes literature is helpful in theorizing how market-mediated emotions are socially and geographically cultivated.

Emotion scripts align with dramaturgical theories of emotion that dictate what emotions should be experienced and expressed in social contexts (Turner and Stets 2006). A sociocultural perspective on consumer emotion can generate new insights for consumer cultural studies (Gopaldas 2014), yet scholars have been slow to take up this opportunity. Emotion scripts are discussed by Fredman (2004, 14) in terms of “local emotion grammars,” reinforcing the...
emplaced nature of emotion. Various theorizations have elaborated on the different types of emotion scripts, particularly Hochschild’s (1983) feeling rules, which refer to private emotion systems that guide the appropriate duration and intensity of feelings in social contexts. Within Westernized culture, happiness and contentment are embraced in contrast to other emotional states, which may be regarded with suspicion (Furedi 2004). “Rule reminders” from others often serve to highlight emotional deviations (Hochschild 1983, 58). Since deviation from emotion scripts can lead to negative emotions (Turner and Stets 2006), consumers’ emotional displays are often self-conscious and deliberately driven by perceived judgment from others (Hung and Mukhopadhyay 2012). As a result, consumers may suppress their emotions from fear of being judged as “foolish” or “inauthentic” (Gopaldas 2014, 1007). In such situations, consumers engage in emotion-work strategies to resolve the conflict between feeling rules and their actual emotional states (Hochschild 1983; Turner and Stets 2006). For example, Tumbat and Belk (2013) highlight the suppression of emotions such as fear, anxiety, and homesickness as an important performative competency enacted by climbers. Hochschild (1983) suggests that feeling rules vary across social groups. From a gendered perspective, feeling rules for men may dictate greater restraints in terms of expressing emotions (Fredman 2004; Hochschild 1983). Indeed, men increasingly turn to compensatory consumption practices in response to anxieties surrounding threatened masculine identities (Holt and Thompson 2004) and any nonconventional performances of masculinity can create stigmatization and the questioning of cultural legitimacy (Coskuner-Balli and Thompson 2013). For example, Belk and Costa (1998) outline that masculine identity embraces hedonistic emotions yet suppresses tears.

The suppression of tears aligns with a “verbal overshadowing” (Illoz 2008, 245) that prioritizes linguistic disclosure over nonverbal therapeutic release. Various studies have revealed nonverbal aspects of therapeutic consumption, such as the biosocial pleasures of clubbers (Goulding et al. 2009), the phatic communion among surfers and skydivers (Canniford and Shankar 2013; Celsi et al. 1993), the sensory communion with nature (Arnould and Price 1993; Canniford and Shankar 2013), and the ritualized performance of pain (Scott et al. 2017). However, in these studies, nonverbal therapeutic release is associated with escapism from emotional suffering. In contrast, research on the confrontation of emotional suffering through therapeutic communities prioritizes the verbal, and reveals that the sharing of emotional stories within both face-to-face and web-based support groups is a conduit toward improved well-being (Moisio and Beruchashvili 2010; Tian et al. 2014). Communicating emotional stories can help to generate change, solve problems, and cope with adversity (Frank 2013; Illoz 2003; Wong and King 2008). However, issues of emotional suffering cannot be fully captured or represented through spoken language. As Harrison (2007, 593) explains, “pain, loss, and affliction trend toward the erosion and depletion of the capacity for speech and communication, toward the unravelling of our words and sentences into stutters and inchoate cries.” As yet, crying has not been considered within prior theorizations of market-mediated performances.

Crying can manifest for many different reasons, ranging from physiological tears (e.g., reaction to allergies) to manipulative tears (e.g., getting one’s own way) to emotional tears, which express particular moods evoked by significant life experiences (Vingerhoets 2013). Crying is associated with nourishment, sustenance, vitality, and renewal (Lutz 1999) and has valuable adaptive and reflective functions by providing “time out” to enable confrontation of suffering (Bonanno, Goorin, and Coifman 2008). As Kottler (1996, 17) suggests, crying represents “those times when you are most moved, when you are most alive, in the sense that your head and your heart, your very spirit, are all synchronized in a single effort to communicate what is going on inside you.” Crying can be fully understood only if considered within the broader sociospatial context in which it occurs (Vingerhoets 2013). We suggest that servicescapes that orchestrate ritualized crying can be therapeutic. The conceptual tools of therapeutic landscapes and emotion scripts enable us to place the sociospatial cultivation of emotion at the center of our analysis. In doing so, we provide a detailed discussion of the emotional geographies of the therapeutic servicescape.

**RESEARCH METHODS**

**Context: Lourdes Pilgrimage**

Our context to theorize therapeutic servicescapes is the religious pilgrimage site of Lourdes. Pilgrimage centers on the movement between two distinct poles: familiar and other (Morinis 1992). The former refers to the known, human, imperfect, and mundane world, and the latter to the mysterious, divine, ideal, and miraculous world. This movement enables pilgrims to resolve the oppositions between the “imperfection” of their lived experience and the “ideal” that they seek (Morinis 1992, 26). Traditional understandings of pilgrimage align with the idea of the “journey of the suffering body” (seeking miraculous cures to physical illness), while more recent understandings of pilgrimage privilege “the journey of the suffering soul” (seeking relief from emotional suffering) (Eade 2013, xvii).

Located in the French Pyrenees and inhabited by only 16,000 people, Lourdes is annually subpopulated by approximately six million pilgrims. The narrative of Lourdes stems from a series of apparitions in 1858 between 14-year-old Bernadette Soubirous and a woman who was
authenticated by the Catholic Church in 1862 as Our Lady, the Mother of Jesus Christ. Lourdes is the third largest Catholic pilgrimage site in the world, and boasts one of the largest religious landscapes. This religious landscape encompasses 52 hectares of churches, basilicas, and spiritual centers.

Religious and marketplace structures have been subject to Durkheim’s dichotomy, with the former relating to the sacred and the latter to the profane (Belk, Wallendorf, and Sherry 1989). Pilgrimage thus is traditionally believed to possess a sacred authenticity, which should be unspoiled by consumerism (Conradson 2007; Crockett and Davis 2016; Husemann et al. 2016). However, Reader (2014, 14) believes the dichotomy between pilgrimage and marketplace is fallacy. This is evident in O’Guinn and Belk’s (1989) work on Heritage Village, where religious centers of worship coexist with the shopping mall. Similarly, Lourdes offers consumers a bustling consumptionscape including 208 hotels, over 100 restaurants, 220 souvenir shops, and numerous tourist organizations offering trips around the Pyrenees (Fargues 2011).

We are by no means pioneers in the contextual area of Lourdes, with the site investigated across disciplines—for example, anthropology (Turner and Turner 1978), geography (Gesler 1992, 2003), theology (Laurentin 1994), and tourism (Eade 1992). Lourdes’ alignment with the Mother of Jesus Christ has led to it being perceived as feminine and nurturing, and often described as the “emotional side of Catholicism” (Dahlberg 2013, 35). However, scholars have often overlooked emotions in Lourdes. For example, Dahlberg (2013) emphasizes the suffering body, failing to acknowledge emotional suffering at Lourdes. Turner and Turner (1978) prioritize the structure and social antistructure dichotomy over emotion. Gesler’s (1992, 2003) exploration of the therapeutic landscape of Lourdes is the most closely aligned with this study, but our work is distinct in three key ways. First, Gesler (1992, 2003) predominantly focuses on therapeutic environmental properties, while we extend this perspective by exploring how emotions are collectively reproduced through therapeutic consumer rituals. Second, he neglects how the therapeutic landscape of Lourdes relates to a “broader web” (Conradson 2005, 338), whereas we examine the broader sociospatial contexts in which the therapeutic servicescape exists. Third, prior work on therapeutic landscapes overlooks nonverbal activities and practices (McCormack 2003). Our discussion of therapeutic ritual embodiment acknowledges the extra-discursive performances of emotional suffering orchestrated by therapeutic servicescapes.

Data Collection

This ethnographic study was carried out over a three-year period by the first author. In keeping with standard ethnographic practice, a “diversified toolkit” (Sherry 1998, 4) of methods was employed. Figure 1 offers an illustrative timeline of the research journey, drawing on the hermeneutic spiral (Gummesson 1991; Thompson, Pollio, and Locander 1994) and the hermeneutical access stages offered by Stenbacka (2001, 554).

As a practicing Catholic, the first author possessed the preunderstanding and tacit knowledge of religious terms and rituals (McAlexander et al. 2014). This preunderstanding enabled sociohistoric knowledge of the context and links to useful “gatekeepers” (McCracken 1988)—for example, a Lourdes historian, and a local priest who permitted initial access to the research site. An initial scoping field trip was undertaken that enabled access to the organization and access to core teams through networking with key gatekeepers, such as the Head of English chaplaincy, representatives from voluntary associations, and shop vendors. These network links were strengthened during further fieldwork at Lourdes, becoming the catalyst for access to informants. Fieldwork was based on participant observation (Brewer 2000), which incorporated volunteering with pilgrimage groups. The three-week field trip in 2011 was conducted through a French onsite volunteering association and involved answering pilgrims’ questions and providing directions around the sanctuary. The researcher spoke to 774 people, with some conversations lasting only a few minutes and others continuing up to 90 minutes.

Fieldwork was also undertaken with a Scottish pilgrimage group in July 2012 that involved supporting sick pilgrims. This was particularly useful, as the researcher traveled with the group and was involved in all their activities throughout the weeklong pilgrimage. Other field work was organized independently during which the researcher spent time within the sanctuary and the surrounding town. These trips were scheduled to coincide with key religious festivals and peak times at Lourdes. At all times the researcher was overt regarding her role, and informed consent was provided by all respondents included in field notes and visuals. Fieldwork resulted in over 200 pages of double-spaced field notes, approximately 3,000 visuals, and many informal, serendipitous interviews with pilgrims. When permission was granted, these serendipitous discussions were audio-recorded, transcribed verbatim, and included within field notes.

To enable access to person, in-depth interviews—lasting from 30 minutes to four hours—were conducted with 23 respondents. As a means of tracing the pilgrimage journey more fully, some respondents were interviewed multiple times. The sample included males and females, ranging in age from 17 to 93. Some respondents were first-time pilgrims to Lourdes, while others were recurrent. Twenty-one of the respondents were Catholics, one was Christian from the Episcopalian denomination, and one viewed herself as spiritual (table 1 outlines respondent details). All interviews were transcribed verbatim, tallying over 1,000
double-spaced pages of transcription. Pseudonyms are used to protect respondent identities. Interview content centered on understanding the therapeutic aspect of Lourdes. During interviews the emerging theme of emotional suffering became apparent, prompting more detailed probing throughout the remaining phases of research and analysis.

Data Analysis

As illustrated by figure 1, the analysis approach utilized a hermeneutic and iterative logic (Stenbacka 2001; Thompson 1997), with data analyzed through the movement back and forth between the context, data (emic), and theory (etic), enabling holistic access to phenomenon. Interpretation was validated during a final weeklong reflective field trip to Lourdes and through member checks with key respondents (Wallendorf and Belk 1989). Much like the varied background of McAlexander et al.’s (2014, 863) research team, the second author, as a non-Catholic, “enriched the overall dialogue and the co-constitution of interpretation.” Both authors regularly met throughout the study, including between each field trip, to discuss data collected, emerging themes, and potential theoretical positioning.
FINDINGS

The substantive contribution of this article is the development of the concept of the therapeutic servicescape through the theorization of emplaced, market-mediated performances of emotional suffering. We illustrate that emotion is emplaced within the sociospatial features of therapeutic servicescapes. The three servicescape features are evocative spaces, ideological homogeneity, and restorative emotion scripts. These features catalyze three therapeutic consumer rituals. Just as psychotherapy is composed of (1) relating intimately with a trusted healing agent and social group, (2) releasing emotional suffering, and (3) generating positive emotional reserves (Frank and Frank 1993), consumer rituals within therapeutic servicescapes are composed of therapeutic relations, therapeutic release, and therapeutic renewal. Figure 2 serves as the framework for the presentation of our findings.

Therapeutic Servicescape Features

Similar to Gesler’s (2003) conceptualization of therapeutic landscapes and Sherry’s (1998) conceptualization of servicescapes, we demonstrate that a therapeutic servicescape comprises multiple sociospatial features: evocative spaces, ideological homogeneity, and restorative emotion scripts. These features reveal that emotions are geographically and socially orchestrated. We discuss these features separately, but it is the holistic interaction between them that constitutes the therapeutic servicescape.

Evocative Spaces. Evocative spaces in Lourdes encompass natural, built, and symbolic environments and are defined by their capacity to bring powerful archetypes, memories, visions, and their attendant feelings to mind. The pilgrimage site comprises churches, basilicas, and spiritual centers (see figure 3) that coalesce upon the narrative of Lourdes. Religion is the most important aspect of culture in terms of the cultivation of emotion, particularly through the use of symbols (Campbell 2005). Lourdes is founded on five symbols: 1) the rock, 2) the water, 3) the light, 4) the crowds, and 5) the sick. Table 2 provides further detail on how these symbols fit with the overarching narrative of Lourdes. The examples of therapeutic rituals reveal that the narrative of the apparitions continues to inform contemporary Lourdes pilgrimage. These rituals are discussed at appropriate points throughout the remainder of the findings.

Together, these symbols add a thematic coherence to the servicescape, as each is rooted in the apparitions of 1858. Theming in the Lourdes servicescape is consistent with Bryman’s (2004) discussion of Disneyization, as the strong Lourdes narrative distinguishes it from a place that would otherwise be homogeneous and unremarkable. Pilgrims certainly view Lourdes as unique, and field notes are littered with the French word particuliére, which translates to “special” or “distinctive,” and illustrates the localized

<table>
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<tr>
<th>Name</th>
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significance of the pilgrimage site. Theming provides the servicescape with meaning that transcends the natural and built environments (Bryman 2004). James alludes to this evocative quality of Lourdes:

The place is unique, and last year I was asked to make a short presentation to the youth group and I said to them it was indefinable, untouchable, unquantifiable. You cannot really express in words what Lourdes is about; it is just a sense you get . . . Unless you go and see, touch, feel, and experience, you cannot relate to it.

James captures the affective power of Lourdes, drawing attention to its sensory qualities that cannot be verbally communicated. For Thrift (2008, 222), the transmission of affect is a function of space to the point that “space and affect are often coincident.” Affect precedes cognition, is a precursor to emotion, and manifests on a somatic register through atmospheres (McCormack 2003; Thrift 2008). The relational flow between the spatial features of Lourdes and visiting pilgrims engenders a distinctive emotional emplacement. Hill, Canniford, and Mol (2014, 388) suggest that atmospheres can “take hold” of consumers’ bodies and, throughout our findings, we reveal that the symbolism of Lourdes creates an atmosphere that orchestrates emotional and embodied responses that compensate for emotional restrictions.

Drawing on Illouz (2003, 152), we suggest that the Lourdes narrative has created an “industry of healing” that
constitutes “an ongoing source of capital.” The annual running of the sanctuary is financed through the donations of pilgrims. It is part of the standard script for pilgrims to leave donations when partaking in the therapeutic rituals; for example, donations are left for candles, for visiting the baths, and during religious services. Yasmina, our only non-Christian respondent, referred to this aspect of Lourdes as a “money-making machine.” While Yasmina points to the commodification of emotion, other respondents’ receptiveness to the Lourdes narrative means that they welcome monetary sacrifice as a means of communicating with the sacred (Belk et al. 1989). The “industry of healing” at Lourdes extends to the marketplace, where 220 souvenir shops offer pious and kitsch products, ranging from the holy rosary bead (a Catholic prayer tool) to luminous, sparkling religious memorabilia. Thus, the sanctuary has transformed the local economy from a derelict, rural town to the second largest tourist destination in France (Fargues 2011).

Ideological Homogeneity. Ideological homogeneity refers to the like-minded beliefs that provide a sense of safety and security through the convention of tolerance and acceptance of the behaviors, emotions, and beliefs of others. Kelly outlines the rarity of this ideological homogeneity:

I found that quite moving, the fact that there were so many people from all different places coming with a common purpose. I think the first time I realized the scale of that would have been the torchlight procession. I just thought that was really, really powerful and it makes you feel safe because there’s nowhere else like Lourdes where you know that everybody is there for the same reason. That was the one thing that really struck me the first time I went.

The procession discussed by Kelly is an evening candlelit procession that involves pilgrims walking, singing, and praying together around the sanctuary. Often attracting up to several thousand participants, each of whom carries a candle, this ritual is one of greatest expressions of the symbol of light at Lourdes (Fargues 2011). Sharing in this ritual with such a large number of other pilgrims facilitates a sense of ontological security. Ontological security is anchored in constitutive rules (Phipps and Ozanne 2017), and, in Lourdes, pilgrims reinforce Catholicism as a common frame of reference through their performance of religious rituals. Similar to support groups (Moisio and Beruchashvili 2010), participation in the procession enables Kelly to encounter a social network of like-minded individuals, which projects a sense of safety. Many respondents express appreciation that the ideological homogeneity of Lourdes is such that they do not have to explain or justify their faith. This acceptance runs counter to respondents’ experiences in their home environments, where practicing Catholicism results in them being socially labeled and ridiculed, as Anne describes:

We can talk about everything under the sun—you are on the bus and you are hearing people talk about very inappropriate things to do with their sex life or whatever—but when it comes to the things of God and spiritual life, we just clam up. It is as if we don’t have the vocabulary to talk about it and then you go to Lourdes, and there is acceptability about it. We may not be able to articulate it very well, but there is a feeling of wanting to, and a sense that it is okay to, talk about these kinds of religious experiences we have, that we
### TABLE 2
THE SYMBOLS OF LOURDES (BASED ON HTTPS://WWW.LOURDES-FRANCE.ORG/)

<table>
<thead>
<tr>
<th>Symbol</th>
<th>Link to Lourdes narrative</th>
<th>Photo</th>
<th>Examples of therapeutic rituals</th>
</tr>
</thead>
<tbody>
<tr>
<td>The rock</td>
<td>The Grotto of Massabielle upon which Our Lady is believed to have appeared during the 1858 apparitions. Touching the rock symbolizes “the embrace of God, solid as a rock.”</td>
<td><img src="https://example.com/image1" alt="Image" /></td>
<td>Pilgrims walk through and touch the rock.</td>
</tr>
<tr>
<td>The water</td>
<td>Water flows at the grotto from the River Gave. This water source was discovered by Bernadette during an apparition when she was directed to consume muddy and dirty water that gradually became clear. For Catholics, this is symbolic of the sinful state of the human condition that is cleansed through prayer and penance. Plastic bottles are sold for transporting Lourdes water home (see image).</td>
<td><img src="https://example.com/image2" alt="Image" /></td>
<td>The baths involve immersion in Lourdes water.</td>
</tr>
<tr>
<td>The light</td>
<td>Light stems from the 700–800 tonnes of candles burned annually at Lourdes. During one of the apparitions Bernadette was holding a burning candle which Our Lady asked her to leave in the grotto. Candles provide Catholics a tangible way to symbolize their hope in Jesus as the light of the world.</td>
<td><img src="https://example.com/image3" alt="Image" /></td>
<td>During the evening torchlight procession, pilgrims each carry a candle while walking and praying together.</td>
</tr>
<tr>
<td>The crowds</td>
<td>During the apparitions people traveled from the surrounding countryside to the pilgrimage site. Since the official recognition of the apparitions by the Catholic Church in 1862, local and international pilgrimages have become increasingly popular.</td>
<td><img src="https://example.com/image4" alt="Image" /></td>
<td>Different nationalities congregate for religious fellowship in religious services and processions.</td>
</tr>
</tbody>
</table>
Anne’s comments highlight the stark contrast in the social features of Lourdes and respondents’ home environments in Scotland. Anne highlights that topics once deemed taboo for public discussion, such as sexual relationships, have become normative conversations within her home environment. Conversely, religious conversation and expression have been silenced within the public domain, which is significant for our respondents given its centrality to their sense of self. Vernacular terms such as “Crazy Catholic” refer to extremely devout Christians who evangelically attempt to spread their faith, and are used disdainfully to mock staunch religiosity. Fear of this judgment means respondents feel silenced in the open practice and discussion of their religion, resulting in their religious identity being “backgrounded” (Weinberger 2015) in their home lives. For example, Lisa feels inhibited from openly practicing her faith, even in those places of supposed religious homogeneity such as Catholic school: “I feel like I’m allowed to be a Catholic in Lourdes. I went to a Catholic school, and even in Catholic school, I would get picked on for going to Mass [religious service].” At the time of the interviews, the silencing of religious conversations in the respondents’ home environments was heightened due to significant media coverage on the resignation of the Cardinal, leader of the Catholic Church in Scotland, following allegations of inappropriate sexual conduct toward junior and student priests. The localized nature of the scandal further undermined the credibility of the Catholic Church, which was already tarnished following years of international exposure concerning sexual abuse. However, despite these undesirable cultural conditions, respondents do not abandon their Catholic identity. Although many respondents acknowledge “struggling” with their faith within this context, much like Arsel and Thompson’s (2011) strategy of symbolic demarcation, they distinguish their own beliefs from institutional “shortcomings.” For example, Danielle comments, “I have my faith and that has nothing to do with how corrupt the church is, it has to do with what I believe and what I am.” This strategy insulates and distances respondents from the broader undesirable cultural meanings.

In Lourdes, where symbols of Catholicism dominate and there is greater homogeneity in religious beliefs, religious conversations are legitimized. This alternative social context reinforces the sense of safety associated with Lourdes. The legitimization of religious conversations, however, often raises complex and challenging issues and can reveal alternatives in the interpretation of religious dogma. For example, during the July 2012 field trip, a homosexual couple traveled with the pilgrimage group. Some viewed the couple’s relationship as “against the church,” while for others it was “beautiful,” “a sign of the times,” and “progressive” (field notes). Our findings suggest that these alternative interpretations are not problematic; rather, respondents welcome the opportunity to discuss and debate their beliefs within a safe environment. Drawing on Canniford and Shankar (2013, 1065), pilgrims employ a strategy of “ideological masking” to silence the betrayals and contradictions that risk undermining the narrative of ideological homogeneity.

**Restorative Emotion Scripts.** Restorative emotion scripts enable emotional release that promotes well-being. The majority of respondents live in Scotland, where the social order is “undeemonstrative,” requiring a “stiff upper

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**TABLE 2** *(continued)*

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<tr>
<td>The sick</td>
<td>The first miracle of Lourdes occurred during an apparition when a woman’s dislocated arm was healed when submerged in the Lourdes water. Eighty thousand sick and disabled people visit Lourdes each year in search of healing. Sick pilgrims are transported around Lourdes in specially designed wheelchairs called voitures (see image).</td>
<td>[Photo of Lourdes]</td>
<td>The Anointing of the Sick is a religious service when sick pilgrims receive a blessing.</td>
</tr>
</tbody>
</table>
 Respondents regard their home environments as being “emotionally straitjacketed”; you “don’t show emotion,” especially not in public and, for some, not even in private. James shares that “typically, where I’m from people are very introverted and don’t like to show their emotions, but Lourdes brings it out and that is really quite profound.” These comments are reminiscent of Craig’s (2004) assessment of the dominance of logic over emotion within the Scottish culture and a national character that is fearful of drawing attention to oneself. The performance of sentiments (Gopaldas 2014) is largely absent within respondents’ hometowns. This is why the Lourdes therapeutic servicescape is viewed as a “profound” opportunity to release emotional suffering, as Miriam articulates:

A lot of times in normal life, if you’re upset you don’t talk about it. In Lourdes it’s okay just to cry your heart out, and that’s okay. People get that, and don’t judge you, and just are there to support you and give you a hug . . . everybody just hugs each other, has a wee [little] cry on their shoulder; that’s it. And then once everybody’s done that, that’s okay; nobody judges it. And then everybody goes back to the pub and has a drink. So it’s a totally safe space to do it and nobody will think “Oh, for God’s sake” or try to make you happy.

The social support provided by other pilgrims coupled with the legitimization of emotional outpourings suggest that the feeling rules regarding emotional displays in Lourdes are contrary to those in respondents’ home environments. Feeling rules can be identified through the reactions of other people (Hochschild 1983) and, as noted by Miriam, emotional displays at home are often approached as a problem that needs to be solved as others “try to make you happy.” These “rule reminders” (Hochschild 1983, 58) are absent in Lourdes and, instead, responses to emotional outpourings elicit comfort, as other people do not try to stop emotional display but instead simply provide a shoulder to cry on. Matthew recalls being on the receiving end of his friend’s emotional unburdening:

I was in one of the cafés with my friend. We were chatting normally and then she went really quiet. I asked, “You all right?” and she replied “no, I’m not,” and she was crying her heart out and she was telling me everything she was going through. I put my hand around her and she was just like “I’ve never told anyone any of this; I’ve never felt like this before.” So, I think Lourdes in general is good for us, in as much as I think a lot of the time you don’t have an opportunity when you’re at home to lay all your feelings out and it’s almost like it’s a safe breakdown, a safe space to do that.

Many shared Matthew’s sentiment that Lourdes is a “safe place” to break down, with Lisa explaining “in Lourdes I’m safe, emotionally safe, and I don’t feel like that back home.” The repetition of the word “safe” by several of our respondents points to the cathartic nature of restorative emotion scripts. The social support and lack of judgment, coupled with the evocative spaces discussed earlier, provide a platform that is conducive to the “performance of suffering selves” (Illouz 2003, 80). Matthew’s example highlights that these emotion scripts extend beyond the sanctuary and are equally applicable in the marketplace. Lourdes becomes a place where emotion scripts encourage the expression and exposure of trauma and its associated emotions. Similar to previous work, seemingly negative emotional states are orchestrated in ways that produce enriching emotional outcomes (Arnould and Price 1993). As Matthew points out, therapeutic servicescapes are “good for us” and can facilitate well-being. From this perspective, the expression of suffering is seen as virtuous and leads to personal growth and self-development (Illouz 2003).

Further, the Lourdes emotion scripts associated with masculinity are particularly restorative. Garry volunteers with a pilgrimage trust taking disabled, sick, and disadvantaged children to Lourdes, which often leads to intense emotions:

When I was in the youth group with [pilgrimage trust group], they always do a kind of ceremony on the last night and there isn’t a single person who doesn’t cry at it. I mean, I think it’s because people are emotional about leaving the kids; people are emotional because it’s getting to the end of the week, and they know they aren’t going to see people for months at a time. Other folk are just reflecting on everything, and you cry and it’s totally okay. And you’ll get guys who are right tough, hard guys, who would never dream of crying, and then they are standing there bubbling, like blubbing away, and you’re standing there with your arm round them. It’s not like you will stand in the pub later and be “Oh, you were crying, haha,” it’s just totally you put your arm around them, then it’s done.

Many of our male respondents are of the view that the outpouring of emotion within daily life is a “sign of weakness” that contravenes feeling rules and may lead to social ridicule. In Lourdes, as noted by Garry, emotions are released without fear of judgment. Removal from their home environment allows male respondents to challenge habituated gender dispositions (Thompson and Ustüner 2015), transcending the crisis of masculinity they may otherwise experience (Holt and Thompson 2004).

The focus thus far has been on the features of the therapeutic servicescape—evocative spaces, ideological homogeneity, and restorative emotion scripts. These features are not inherently therapeutic but are reproduced through the performance of three therapeutic consumer rituals.

Therapeutic Consumer Rituals

Therapeutic consumer rituals are scripted performances that are orchestrated by the sociospatial servicescape...
features. The three consumer rituals evident within the therapeutic servicescape are therapeutic relations, therapeutic release, and therapeutic renewal. We discuss each of these rituals in turn, but recognize that they are interrelated as depicted in figure 2. Table 3 encompasses examples from our data demonstrating the consumer rituals beyond those discussed in the text below. While other scholars of Lourdes have dismissed the commerciality of the town as separate and even detrimental to the therapeutic and religious sanctuary (Eade 1992; Gesler 2003), we reveal that the commercial marketplace is as much a part of the therapeutic servicescape as the religious sanctuary.

Therapeutic Relations. Therapeutic relations are defined as relating intimately with trusted fellow consumers. As noted previously, respondents face various social conditions within their hometowns that compel them to silence their Catholic identity. These social conditions undermine relationships; recall, for example, Anne’s comments surrounding perceptions of the “Crazy Catholic.” The therapeutic servicescape plays an important role in compensating for these social deficits. Respondents shared that the experience would not have been “as moving,” “as wonderful,” “as supportive,” or “as fun” without the sense of camaraderie afforded by therapeutic relations. Danielle recalls the unknowns of her first trip to Lourdes:

I did not know what to expect from the group, but it was very central to having a good time and getting the most out of it. I did not realize just how much I would get from it—you know, just sort of being open to these new friendships and these new connections. It was a very, very welcoming atmosphere; they are all there to do the same work and to have a good time, so it is a very positive group where people are welcome. I knew I was going to work and help other people, but I didn’t realize that people would help me. They helped me with my confidence, my happiness, reassured me of my faith. I did not realize it would be quite as powerful.

Danielle’s “new friendships” and “new connections” are “powerful” in developing therapeutic relations. Danielle traveled to Lourdes to care for sick pilgrims but benefits herself through newfound confidence, happiness, and reassurance in her faith. Her words demonstrate the reciprocity evident in these relationships. Although Danielle’s confidence issues are very different from the physical disabilities experienced by those she is caring for, the indiscriminate nature of suffering as a “general narrative of identity” means that the distance between sufferer and non-sufferer is minimized (Illouz 2003, 102). This highlights the interchangeable roles within the healing relationship as pilgrims like Danielle fluctuate between sufferer and healing agent (Frank and Frank 1993). In this sense, Lourdes can be regarded as what Illouz (2003) would term a “therapeutic spectacle,” as pilgrims do not hide from other people’s suffering, but seek out these vicarious experiences in the process of constituting their own well-being.

Such reciprocity highlights the significance of others to the ritualized performances of emotional suffering. Sometimes this takes the form of embodied support; for example, recall the earlier comments from Miriam and Garry indicating that the restorative emotion scripts at Lourdes involve embodied support through hugging. This support extends to strangers, with examples provided by Christine and Veronica (table 3) about the physical support offered to others by volunteers. This embodied support is similar to Illouz’s (2003) discussion of the ethic of care. This form of support reinforces how tender and nonsexual aspects of touch can come to the fore when removed from standard social conventions (Goulding et al. 2009).

Another manifestation of this ethic of care is found through respondents’ compassion for others, which often moves them to tears. These sentimental tears act as reminders of the significance of the suffering to which others are exposed (Vingerhoets 2013). Sentimental tears are particularly discussed in relation to the therapeutic ritual of the Anointing of the Sick, a religious service when sick pilgrims receive a blessing as a means of promoting emotional and physical healing. As Matthew describes, “it’s a very emotional mass for them [the sick] and you can see it, it’s palpable. There’s hardly a dry eye in the place; you are often sobbing.” Although Matthew is not sick himself, the service is emotionally heightened because of his empathy for others. He recalls such empathy upon witnessing the reaction of a sick pilgrim, explaining her emotion as being “so strong, you could feel it.” Matthew’s words draw attention to the “kinetic empathy” (Thrift 2008, 237) that flows between pilgrims. Thrift (2008) explains that this form of empathy is driven by an affective contagion that highlights the porous nature of the self-other divide and individuals’ automatic and subconscious tendency to imitate others. Many respondents describe this service as a “greet [cry]-fest,” and Anne suggests, “being overly emotional, being in company feeds that; there is nothing like four of you or more together having a good greet [cry] at something.” Moisio and Beruchashvili (2010, 863) reveal how emotional storytelling in support groups can be comforting and cathartic and induce “a collective ‘coming out’” through the reciprocal sharing of experiences. Our research uncovers a similar sense of contagion, but the focus is on collective tears rather than collective talk. The shared experiences of tears are powerful signs of intimacy that connect people at a “primal level” (Kottler 1996, 21). The therapeutic servicescape thus reinforces the relational nature of emotion, with collective tears cementing therapeutic relations and strengthening social bonds.

The ethic of care at Lourdes is not bound to the sanctuary but extends to informal socializing. As illustrated by Brendan (see table 3), the marketplace affords pilgrims the
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<td>Therapeutic relations</td>
<td>Relating intimately with trusted fellow consumers.</td>
<td>“The experiences were far more moving because I was part of a group. It was a community that was experiencing all the prayer; it was a community that all walked together through the torchlight procession” (Kelly). “Whilst working in the baths I must have cuddled a million people because they were so emotional, they just needed to grab on to somebody” (Christine). “My niece’s friend was there as a sick pilgrim. In fact, the doctors did not know how she was still alive; she was just skin and bone. She was desperate to do the High Stations [a prayer ritual]. There is no way on earth she could have because of the steep hill, but one of the youths took her on his back and took her right up and back down; he would set her down when they stopped and hold her steady while she prayed” (Veronica). “I’m thinking this summer, Cath, Mary, Ashley, Paddy, Nula, and Mhairi are all coming. And this is the third time with them, and I will take a day out with them and we’ll socialize and have a drink, and I’ll write to them during the year, and we have bonded. We are like a little family, and Lourdes has done that. My life is richer because they are here, and their lives are richer because of me, and they are not just acquaintances, and that is one of the things that can happen in Lourdes—genuine time with each other” (Brendan). “Last year we were in the café having a drink and one of the sick pilgrims who we were caring for, Nina, said, ‘I don’t want to go home; I don’t have any family at home,’ which was heartbreaking to hear. And when you hear that, you kind of realize how much, just spending 10 minutes with a sick pilgrim, it’s a really big deal to them—it’s huge, it’s this big thing” (Matthew). “It gave me the opportunity to sit and chat to people especially at night in the pubs or over dinner. I felt it brought emotions out that you kind of lock away, that you don’t want people to know. It definitely helped me with my grief. It was five years since my mum died, so it wasn’t like it had just happened. I don’t know what it was, but I finally started talking about it and I’m much better now” (Lilly). “There was a volunteer, Alice, I didn’t know her very well, but she’d been talking to a young woman who had cancer. As she was walking up the road she got really upset because a family member was also dealing with the same illness, and it all hit home to her, the reality of it. Alice explained, ‘I’ve just not been thinking about it, but here it all comes to the surface.’ I just stopped, gave her a big hug, and let her cry it out in the middle of the street with the shops, the traffic, and people all buzzing around us, and in Lourdes that’s okay; it’s normal” (Miriam). “In the hotel today, Sarah talked to me about her marriage. Her husband has been offered a job that would mean moving country which she does not want to do. She has spent her time at Lourdes reflecting on what this means for their future and was upset as she believes this could be the end of her marriage (Field note, July 2012).</td>
<td></td>
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<tr>
<td>Therapeutic release</td>
<td>The exposure of emotional suffering.</td>
<td>“I like going down where the candles are lit. A couple of years ago I was there and all I could think about was my grandpa. He’d died what, five-and-a-half years before that? And I thought I was fine with it. But I really wasn’t; he was all I could think of and I just cried my heart out. I could not stop” (Matthew). “It was at the sacrament of the sick and during the ceremony one of the priests came right up to me and he was like ‘Are you Jacob?’ and I said ‘Yeah’ and he said, ‘Well, I’ve been sent over to bless you’ and after that I was a total wreck. I never classed myself as sick or anything and I’m not sick, but the fear that I could be sick again was present at that point [referring to being in remission from skin cancer]. I don’t think I realized I was worried about that until that blessing. It was unexpected but completely what I needed and I was just an emotional wreck after it but in a good way, you know?” (Jacob).</td>
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For Illouz (2003, 13), the demands of modernity are linked to social suffering that respondents may otherwise experience. Questions of suffering are not adequately addressed within contemporary consumer culture (Illouz 2003). This reinforces the significance of the therapeutic servicescape where social support facilitates performances of emotional suffering.

Therapeutic Release. Therapeutic release refers to the exposure of emotional suffering. Unlike other religious-themed servicescapes where emotional displays are rare (Crockett and Davis 2016), the dramaturgic structure of Lourdes rituals orchestrates an emotional reaction. Confession is a Christian ritual that involves disclosing transgressions to a priest and receiving absolution from sin and guilt. Drawing on his experiences as a priest, Brendan suggests that confession at Lourdes can be an emotionally healing ritual: “We get bruises as we go through life—we have our dents, we have our hurts, we have our emotional bruises, and all of those things. And I think people come to Lourdes and we become more aware of that, and it is in confession this happens. Confession, it’s a run-of-the-mill experience at home, but here [at Lourdes] there can be something very special about it. . . . It’s a kind of healing process.” Emotional unburdening through confession can be explained through its sociospatial features. First, confessions at Lourdes are distinguished from other “run-of-the-mill” confessions because they move from “formally scripted and unvarying” dialogue to a “casual”

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<td>Restorative benefits and improved emotional well-being through the generation of positive emotional reserves.</td>
<td>“I went to Lourdes shattered because a friend of mine had really hurt me badly; it had been a bit of a nightmare and I was so tired in a way that I have never been before. I was actually exhausted and so I certainly went out looking for rest, and honestly my intention was as basic as falling into the arms of Our Lady. That was all I wanted. It was incredibly healing and an incredible rest for me. I never come back from Lourdes empty-handed; there is always something and I certainly got the rest that I looked for” (Anne).</td>
<td>“I went to the baths this morning, it was beautiful and allowed me to go on afterwards” (Danielle).</td>
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opportunity for “genuine time with each other.” Anne explains further:

It can be very frustrating at home—you’ve got things to attend to, somebody comes to the door and they just need a wee chat, and you feel like you cannot give them much time. That is a tension in me; it just frustrates me. Whereas in Lourdes I find those special moments . . . Especially in the cafés and restaurants, you get a lot of those special moments when you can actually just sit down with Jean or whoever and say, “Okay, what is happening?” And there is a lot of banter, but then you cut through some of the banter and you get to the heart of why their son is no longer talking to them and why they are estranged from their families, how they are afraid that this ulcer is going to kill them, whatever it is, and that is a privileged moment.

Therapeutic relations at Lourdes compensate for the social suffering that respondents may otherwise experience. For Illouz (2003, 13), the demands of modernity are linked with a failed sense of self and “real social suffering” in the form of loneliness, stress, and the domination of individualization. Evidence of the fragility of interpersonal relationships is found in Anne’s comments about the difficulty of finding time for friendship and Matthew’s discussion (see table 3) of the sick pilgrim who had no family.

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TABLE 3 (CONTINUED)

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(Rook 1985, 253) script. Second, Catholic confession tends to be heard via a closed curtain or grate within a confessional box that has separate sections for the priest and the confessor. In contrast, the Lourdes confessional setting has a different material configuration, as described in this June/July 2011 field note:

I entered confession and was astonished that there was no separation between myself and the priest, rather the confessional was like a simple meeting room. There was a small circular table and two chairs. On the table lay a crucifix, the priest’s prayer book and a box of tissues. At home you list your sins, pray with the priest, and receive absolution, it’s all over in around ten minutes. However, today I was somewhat taken aback when the priest spent close to an hour chatting to me. I found myself telling him about my grief. I got so upset. I kept apologizing but the priest said to me “it’s okay, we all need a good cry from time to time and you’ll feel better for it.” I do feel better. I never realized it but I must have been bottling up my grief and now I’ve shared it I feel a thousand times better.

Moisio and Beruchashvili (2010) reveal that social features are central in facilitating emotional unburdening during confession. We find both social and spatial features orchestrate this therapeutic ritual. As noted earlier, emotion scripts that are accepting of displays of distress point to the idea of a “safe breakdown.” The spatial layout of the confessional reinforces this perspective, and although the materiality is rather mundane, it is nonetheless significant to the therapeutic release. The lack of partition creates a setting conducive to un Rushed conversation, while the addition of a box of tissues signals that crying is acceptable. Indeed, we suggest that these features of the confession actively engineer emotion. This is where the therapeutic potential comes to the fore, and the field note demonstrates that such emotional release is cathartic and brings welcome emotion shifts. The field note also reveals that these ritualized performances can uncover parts of the self that are otherwise unacknowledged. Other therapeutic rituals have a similar emotional outcome; table 3, for example, includes accounts of suppressed grief and fear of illness relapse. These examples relate to experiences and feelings that pilgrims do not usually vocalize. Within such contexts, tears are as central to therapeutic release as spoken language.

The grotto is another key setting for therapeutic release and is regarded as “awe-inspiring” because of its significance to the narrative of the apparitions. Walking through the grotto and touching the rock is a standard part of the pilgrimage script, as described in this Easter 2012 field note written there:

Pilgrims queue (sometimes for 40 minutes to an hour in the peak summer months) outside the Grotto to access what is viewed in Lourdes etymology as the most sacred part of the Sanctuary. In the interior part of the Grotto tonight as I watch pilgrims conduct the ritualistic walk through, emotionally at times pleadingly laying their hands on the rock, I realize that the interior cave at Lourdes is the biggest worry stone in the world. The surface of the rock, now smooth, represents the collective sharing of worry, pain, trials, and troubles since the apparitions of 1858 with the murmur of sobs, praying, and pleading palpable.

This field note captures the multisensory and embodied nature of this ritual, particularly in terms of sound and touch. Given the crowds at Lourdes, the need for discipline and control is inevitable (Bryman 2004). This ritual is overseen by volunteers whose scripted interactions with pilgrims reprimand transgression from the decorum of silence. As a result, the murmurs of sobs and pleas are particularly noticeable. This extra-discursive aspect of the grotto is reminiscent of Harrison’s (2007) suggestion that suffering unravels language. Scott et al. (2017, 18) similarly reveal that physical pain can manifest in “shrieking and shouting,” but while they focus on self-erasure, we centralize the anxieties of daily life. The grotto ritual is reminiscent of Sherry and Kozinets’ (2007, 132) discussion of the cathartic benefits of “deep inscription” as pilgrims transfer their worries to the surface of the rock. We illuminate the role of touch in this ritual. In continuing the historic practice that stems from the apparitions, pilgrims’ tactile explorations of the surface of the rock are core to this ritual and in keeping with its nonrepresentational quality. Given their belief that the grotto is contaminated with sacredness (Belk et al. 1989), this ritual offers pilgrims a route to their divine.

Therapeutic release at Lourdes occurs not only during the religious rituals but also during social time in the marketplace. Andrea, a doctor who has volunteered for many years, believes “the social side of Lourdes to have just as many healing properties as the religious sanctuary itself, for people will often talk through their worries and problems in these spaces, in the cafés, the bars, the restaurants, even the hotel” (field note extract documenting a recorded conversation, July 2012). The commercial marketplace affords many opportunities for social interaction, and field notes are filled with examples of the sharing of confidences. Table 3, for instance, includes examples of illness, grief, and relationship troubles. The sharing of confidences in Lourdes is a therapeutic activity because of the restorative emotion scripts that catalyze emotional unburdening. Confidences shared relate to uncontrollable life experiences and, as this June 2010 field note attests, even topics that are particularly sensitive are not off-limits:

I met Carol for a beer. She spoke a lot about her daughter’s recent suicide and how she has discovered the reason behind it. She found out that her daughter was raped. She was upset and I was going to change the subject but she said “it helps” to talk to someone.

Through accessing an alternative emotional geography where sociospatial features are conducive to a “safe
breakdown,” our respondents share their hurts and anxieties. The main purpose of exposing suffering is to facilitate closure (Illouz 2003). While Carol is still grieving the loss of her daughter, she appreciates the emotional benefits from speaking to others in Lourdes, reinforcing how emotion shifts accompany therapeutic release.

Therapeutic Renewal. Therapeutic renewal is defined as restorative benefits and improved emotional well-being through the generation of positive emotional reserves. Lisa shared the renewing quality offered by Lourdes in addressing her mental health illness: “you put your heart and soul into it, but you get everything back. I come back from that week able to deal with things easier.” Lisa’s words illustrate how Lourdes can placate the emotional challenges she faces in daily life. This recharging comes through participation in the religious rituals associated with the Sanctuary. For example, Anne describes her first experience of the baths:

I walked out of the baths and my friend came bounding towards me and said, “How did you get on?” I must have only been about 16—it was my first trip to Lourdes with the youth group—and I said, “It was good” and she gave me a hug and then I cried. I cried so hard; I don’t think I have ever cried so hard in my life . . . I cried in a way that I have never cried before or since; it was a real cleansing cry and I remember that very vividly . . . it was like water washing over me simply, but the water was actually coming from inside me and it was a deeply cleansing thing.

As mentioned earlier, water is one of the five symbols of Lourdes (see table 2). The symbolism of water stems from the Christian ritual of baptism, which is believed to be a “rebirth” from “old identities and lives” (Strang 2006, 92). Unlike the spectacularization of water rituals in other religious servicescapes (Crockett and Davis 2016), the Lourdes bath ritual is private and only witnessed by two volunteers who submerge pilgrims in a small concrete tub of cold Lourdes water. The sensory shock that comes with such immersion intensifies the emotion associated with this embodied ritual. The “deeply cleansing” nature of Anne’s tears is suggestive of the sense of renewal that accompanies the baths due to her belief in Lourdes water possessing spiritual and ethereal energy. Lutz (1999, 23) suggests that tears can “wash away” emotional suffering, and Anne’s link between physical immersion in the bath and the emotional expression of tears reinforces how this therapeutic ritual is regarded as nourishing and sustaining. Similar to Strang (2006, 98), who finds that water rituals “give access to the distant past as well as the future,” ritual bathing at Lourdes both reflects the continuity of historic practice from the time of the apparitions and signifies regeneration and therapeutic renewal.

Despite its renewing qualities, the intensity of the sanctuary rituals is described as “wrecking” in that it can become emotionally overwhelming. As shared by Christine, “the emotion and the belief, it was so draining.” On these occasions the marketplace is an important source of therapeutic renewal through the provision of “light-hearted relief,” as Matthew puts it:

A lot of it is really quite intense emotionally and spiritually; it’s all really intense. And I think part of the thing about going out into the town—we pass the shops to go back to our hotel—and I think it can be good inasmuch as it can kind of give you some light-hearted relief. It can help. As good as I think the intense experience is, I think having that all the time, like, purely for a week, would drive you crazy. I think you would just be a wreck.

Matthew points to the unsustainable nature of “intense” emotion. The sharp contrast between the emotional norms at Lourdes and those in respondents’ home environments means that they are unaccustomed to continual heightened emotion. Thus, while pilgrims welcome the therapeutic release and renewal associated with restorative emotion scripts, they also need to manage these processes so that they do not become overpowering.

The marketplace at Lourdes affords many opportunities for renewal, from sightseeing tours around the local area to entertainment within the bars and restaurants. Many shared their enjoyment of the resounding sounds of “laughter” and the sense of “excitement” offered by the bars and cafés with the “unholy bits, singsongs in the cafes, the company, the craic [chat], just the fun of it” being what Marie remembers most from her first visit to Lourdes. Field notes capture these “singsongs” with renditions of Oasis’s “Roll with It” and REM’s “Shiny Happy People” interspersed with hymns such as “Ave Maria” and “Shine Jesus Shine” (see figures 4 and 5). The uplifting emotions generated through informal socializing offer restorative benefits by building positive emotional reserves that become a “coping arsenal” (Fredrickson and Joiner 2002, 175) when pilgrims reenter the intensity of the sanctuary rituals:

Veronica: It is good taking a day away from the intensity of Lourdes Sanctuary [discussing a day trip].

James: Yeah, it is good to move out, a brief time away from Lourdes just to let your emotions settle down a bit.

Veronica: When you are socializing at night in all the cafés, you feel that same sense, the whole feeling of renewing yourself. It [the sanctuary] can feel emotionally, spiritually, and sometimes even physically intense so you feel you are ready to start again the next morning.

Phillip: For years now I have set a treasure hunt for my pilgrimage groups. I set them tasks to go out into the shops in Lourdes and find me the kitsch objects; you know the sparkling Our Lady statues and that? The shops are great fun; for me they are relaxing, and small tasks like my annual treasure hunt, it helps you break free from the intense emotions you experience. You can temporarily switch off and that helps you to get back into it again.
Pilgrims’ movement between the sanctuary and the marketplace is reminiscent of Morinis’s (1992) poles of “familiar” and “other.” The sanctuary is regarded as “other” because of the inexplicable nature of the Sacred, while the marketplace is regarded as “familiar” because of the ubiquitous presence of consumer culture. The movement between the sanctuary and the marketplace thus becomes an intentional emotion management strategy that enables pilgrims to balance emotional suffering and informal sociality. Much like Fredrickson and Joiner’s (2002)
broaden-and-build theory, the data above highlights how informal sociality broadens mind-sets and builds a “sense of renewal” and resilience ahead of movement back to emotional suffering. Many respondents marry together paradoxical terms, such as “fungrimage” (fun and pilgrimage combined) and “holiday with Our Lady,” to reflect the range of emotions experienced during the pilgrimage and the movement between happiness and suffering. We do not wish to imply that there is a simple dichotomy of “sanctuary equals tears” and “marketplace equals laughter.” Rather, the marketplace can be a platform for emotional suffering and at the same time a source of renewal when such emotion becomes overwhelming.

DISCUSSION

The substantive contribution of this article is the theorizing of therapeutic servicescapes where localized sociospatial features orchestrate market-mediated performances that compensate for sociocultural dilemmas. The therapeutic servicescape comprises three features: evocative spaces, ideological homogeneity, and restorative emotion scripts. These servicescape features catalyze the consumer rituals of therapeutic relations, therapeutic release, and therapeutic renewal. Our research offers contributions in three key areas. First, we reveal how emotions are socially and geographically orchestrated and transformed in marketplace settings. Second, we demonstrate how therapeutic ritual performances reproduce emplaced, market-mediated emotions and compensate for embodied emotional restrictions. Third, we demonstrate how the negotiation of emotional ordering guides the therapeutic dialogue between religion and the marketplace. We elaborate on these contributions below.

Localized Market-Mediated Emotion

Although it has been recognized that emotion should be central to consumer cultural studies (Gopaldas 2014), the localized production and reproduction of emotion scripts within sociospatial contexts is neglected. Consistent with the understanding that emotion is not a self-contained individual experience (Davidson et al. 2012), our first contribution demonstrates how emotions are socially and geographically orchestrated in marketplace settings. This answers Moisio and Beruchashvili’s (2010) call for research to explore how “marketplace arrangements cultivate emotions.” Our analysis has revealed that emotions are embedded in (1) socially situated emotion scripts and (2) material features that encompass narratives about the symbolic importance of place.

We have drawn on an emotional geography perspective to explore the relational quality of emotion that situates people within social geographies of place (Bondi 2005; Davidson and Milligan 2004). In doing so, we highlight that places are not inherently emotional, but rather emotions emerge in places through the collective reproduction of ritualized consumer performances. These performances are anchored in emotion scripts that guide localized understandings about acceptable and appropriate emotional display (Fredman 2004; Hochschild 1983; Turner and Stets 2006). Our emotional geography perspective builds on prior consumer research that has considered material geographies. Canniford and Shankar’s (2013, 1057) highlight the importance of material geographies in preserving cultural scripts of nature. In particular, they reveal that surfers employ practices of localism in response to social tensions. Through the territorialization of particular geographic locations, surfers enforce consensus and purge contradictions that may otherwise betray the romantic cultural scripts of nature. Localism practices include “skills, styles, interaction rituals, coastal knowledge, and, as a last resort, physical violence” (1062). Our perspective provides a useful complement by demonstrating how localism also extends to emotional geographies. Canniford and Shankar’s (2013) data implies that surfing is a scripted performance that can be healing and therapeutic, but equally can be hostile and intolerant. An appreciation of the emotion scripts associated with particular locations may help to explain how this therapeutic quality is enabled. Our perspective is helpful in demonstrating that emotions are characterized by a dynamism that means they are more readily emplaced in some sociospatial settings than others.

Our analysis illustrates that emotions are not only enabled by sociospatial features but also transformed by them. From this perspective, dynamic interaction with particular places can change a person’s subjectivity and promote well-being through emotional revitalization. This perspective aligns with Lears’ (1983) compensatory thesis, and we suggest that status quo is sustained through placating therapeutic rituals that make the anxieties of life more tolerable. This restorative aspect of therapeutic place can be fully understood only through reference to the broader context (Conradson 2005). A comparison between the sociospatial features of the therapeutic servicescape and the sociospatial features of other contexts that consumers inhabit thus brings the compensatory nature of the servicescape to the center of our analysis. Our research explores how localized market-mediated emotions counterbalance for sociospatial settings characterized by undesirable cultural conditions, emotional deficits, and social suffering. Prior research does not give significant attention to the sociospatial comparison. For example, in their study of river rafting, Arnould and Price (1993, 24) point to the restorative power of nature for consumers who benefit from “getting away from it all.” However, we are simply told that “it all” ranges from Nintendo to job-related stress.” It is outside the scope of their study to discuss in any depth what kind of sociospatial settings their respondents encounter beyond the wilderness servicescape. In demonstrating how
the localized meaning of therapeutic geographies is shaped by broader sociospatial settings, we are better able to appreciate their restorative significance.

Therapeutic Ritual Embodiment

Our focus upon therapeutic rituals that centralize emotional suffering deepens our understanding of ritualized embodiment, and prioritizes issues of affect and emotion that are not addressed in detail in prior studies. Scott et al. (2017) suggest that the ritualization of pain facilitates self-renewal through a regained consciousness of physicality and the opportunity for bodily expression that does not otherwise have an outlet. Our work provides a useful complement as we consider ritualized performances that compensate for embodied emotional restrictions. Although the pain of Tough Mudder catalyzes emotional suffering, this is accompanied by self-erasure as participants “forget everything” and escape the stresses and monotony of daily responsibilities (Scott et al. 2017). Embodied performances of escapism have also been linked to sports, clubbing, and other leisure pursuits (Arnould and Price 1993; Belk and Costa 1998; Canniford and Shankar 2013; Celsi et al. 1993; Goulding et al. 2009; Kozinets 2002; Scott et al. 2017). While some of these servicescapes enable intense emotions, such as the confrontation of mortality in skydiving (Celsi et al. 1993), servicescapes that directly centralize emotional suffering are less understood.

Our analysis has uncovered various embodied rituals that are therapeutic, such as bathing in Lourdes water and the visceral response to touching the grotto. In prioritizing a sociospatial perspective, we have demonstrated how rituals take on an embodied significance that is specific to the pilgrimage site. This perspective is helpful because it brings issues of affect and emotion to the center of our analysis and demonstrates their role in therapeutic servicescapes. While emotions are representable through language, affect precedes discursive meaning (McCormack 2003). Prior work on consumer embodiment illustrates that affect moves into the realm of consciousness through linguistic metaphors (Joy and Sherry 2003). Our emphasis on performance highlights nonrepresentational aspects of embodied therapeutic rituals and indicates that it would be a mistake to limit analysis to representable and linguistic processes. Rather, affect is translated into performance through “emotional expression and embodied practice” (Foley 2011, 471). Our focus on emotional suffering is particularly apt for uncovering the dynamics between affect and emotion because “[s]uffering is language destroying” (Harrison 2007, 593). We have shown that the precognitive dimension of therapeutic rituals is orchestrated by sociospatial features that create an atmosphere conducive to emotion shifts.

Extra-discursive aspects of embodied rituals have been revealed in prior studies, such as the intensity of pain (Scott et al. 2017), the biosocial pleasures of clubbers (Goulding et al. 2009), the somatic quality of skydiving (Celsi et al. 1993), and the phatic communion among surfers and skydivers (Canniford and Shankar 2013; Celsi et al. 1993). However, in these studies, nonverbal therapeutic release is associated with escapism from emotional suffering. In contrast, research on the confrontation of emotional suffering prioritizes the verbal in line with Illouz’s (2008, 245) “verbal overshadowing.” Our focus on ritualized crying directly complements prior study of support groups, particularly Moisio and Beruchashvili’s (2010) discussion of how Weight Watchers meetings are appropriate venues for emotional venting, which becomes normalized within a nonjudgmental and empathetic social group. Much like sociology work that has privileged the healing properties associated with voicing stories of suffering (Frank 2013; Furedi 2004; Illouz 2003), Moisio and Beruchashvili’s (2010) focus is on the cathartic benefits of emotional storytelling and emotional talk. However, the social cultivation of ritualized crying within the marketplace is beyond the conceptual focus of their article. Following our theorizing, we can further illuminate Moisio and Beruchashvili’s (2010) findings and suggest that successful therapeutic release also catalyzes embodied expressions of emotional suffering. This ritualized crying plays an important role in compensating for emotional scripts that deter crying in other contexts. While not dismissing the therapeutic release associated with verbal processes, tears often articulate the messiness of emotions more effectively than spoken language. Ritualized crying also enlists non-verbal communicative responses from others, which manifest through supportive hugs and empathetic tears. This embodied support is rooted in “collections of affective bodies and spaces” (Hill et al. 2014, 388) through which “kinetic empathy” flows (Thrift 2008, 237). These extra-discursive aspects of therapeutic rituals reinforce the performative embodiment of well-being in marketplace settings.

Therapeutic Interdependence of the Marketplace and Religion

Our analysis of the therapeutic servicescape is a useful platform for unpacking the therapeutic interdependence between marketplace and religious settings. Our perspective aligns with consumer research studies that define the relationship between religion and marketplace to be one of entwinement and inseparability (McAlexander et al. 2014; Moufahim 2013). However, these studies do not prioritize spatiality. Studies that do adopt a spatial perspective tend to depict the market and religion as opposing forces. For example, Conradson’s (2007, 46) investigation of Christian monasteries concludes that there is value in considering how the commercial economy “impinges” upon therapeutic contexts. The choice of language around impingement is
suggestive that the commercial marketplace is somehow external to therapeutic settings and may diminish or erode associated therapeutic benefits. A similar discourse is found within consumer research on pilgrimage. Scott and Maclaren (2013, 206) conclude that “the dissonant tone of commerce infects many pilgrimage experiences.” Husemann et al. (2016, 3365) illustrate how the commercial environment “disenchant[s]” the pilgrimage, while Crockett and Davis (2016) discuss the deemphasis of consumer culture at the Holy Land Experience. Similarly, Sherry and Kozinets (2007) link therapeutic and spiritual performances with temporary escape from market logic. The prioritization of the sacred-secular dichotomy overshadows the therapeutic properties of the marketplace. The adoption of this dialectical lens results in a romanticized view of pilgrimage that is no longer consistent with contemporary consumer culture. We refute the notion that the commercial marketplace “impinges” upon, “infects,” or “disenchant[s]” the pilgrimage servicescape, and our analysis of Lourdes pilgrimage helps to extend our understanding of how therapeutic performances can be meditated within religious contexts.

From a social economies perspective, Haddorff (2000) suggests an economic interdependence of religious and marketplace institutions. Similarly, in our study we find evidence of an “industry of healing” (Illouz 2003, 152) in both the sanctuary and the marketplace. In the sanctuary this is evident through the donations for therapeutic rituals, while in the marketplace this manifests in commercial and tourism activity. We build on Haddorff (2000) and suggest that the market and religion are not only economically but also therapeutically interdependent. Haddorff (2000) emphasizes that the negotiation of moral ordering guides the economic dialogue between religion and the market. We show that the negotiation of emotional ordering guides the therapeutic dialogue between religion and the market. Therapeutic interdependence stems from the back-and-forth movement between the sanctuary and the marketplace, which becomes an intentional emotion management strategy. In recognizing the multiple meanings and constructions of space within the therapeutic servicescape, we are able to unpack the ways that consumers create routes to well-being. Prior studies often collapse meanings and constructions of space into one level. For example, in O’Guinn and Belk’s (1989, 237) study on Heritage Village, religion and the commercial marketplace have become interpenetrated to the extent that they are “forged into a single ethos.” The utopian atmosphere of Heritage Village is such that consumers detach from their daily anxieties and are expected to embrace an ethos of happiness. In contrast, in the case of the Lourdes therapeutic servicescape, emotions are not bound to a single ethos; rather, consumers fluctuate between happiness and suffering. We demonstrate the role of space in orchestrating these different emotions. Drawing on Morinis (1992), the sanctuary is perceived as “other” due to its ethereal and divine qualities. The intensity of localized emotions in the sanctuary pushes consumers to the marketplace for respite and the generation of positive emotional reserves. The marketplace is “familiar” due to its human and mundane qualities. However, the familiarity of the commercial marketplace is disrupted within the therapeutic servicescape, where sociospatial features are discrepant from consumers’ habitual environments. The commercial marketplace, therefore, has the dual role of enabling emotional release but also renewing consumers when emotions become overwhelming. In short, the dialogical relationship between religion and marketplace within the therapeutic servicescape orchestrates emotional ordering and consumer well-being.

**FUTURE DIRECTIONS**

We believe that our theorization of a therapeutic servicescape is broadly applicable to a range of consumption settings. We encourage future research to engage with the entire theorization of therapeutic servicescapes (figure 2) but also recognize that some studies may relate more with specific subordinate concepts (e.g., evocative spaces, therapeutic renewal). The world’s markets are full of various types of therapeutic servicescapes and, although different from our context, their consumer value is nonetheless explained by our theorization. For example, we have referred to the therapeutic potential stemming from the sociospatial dimensions of festivals (Sherry and Kozinets 2007), fitness events (Scott et al. 2017), support groups (Moisio and Beruchashvili 2010; Tian et al. 2014), and consumer interaction with nature (Arnould and Price 1993; Canniford and Shankar 2013). Other examples that may encompass the therapeutic servicescape features and consumer rituals include consumer conventions such as Comic-Con (a convention that celebrates comics and related art forms), BronyCon (convention for male fans of the My Little Pony franchise), and Goth festivals. These contexts provide the opportunity for like-minded consumers to come together in a specialized, judgment-free environment where they can interact and express their identities, free from the stigma that they may otherwise encounter in their daily lives. What distinguishes our article from these other contexts is our focus on emotional suffering. Given the significant cultural differences surrounding crying in public settings (Vingerhoets 2013), future research could consider how consumers from different cultural backgrounds experience the therapeutic servicescape. For example, how do consumers from more open and tolerant emotion cultures experience therapeutic servicescapes? We also encourage future research to consider further forms of localized emotion such as anger. For example, how does the consideration of displays of anger transform
our conceptualization of the sociospatial dynamics that unfold in therapeutic servicescapes?

Future research should also consider the interdependence between religion and the marketplace in other pilgrimage settings. Coningham (2016) suggests that pilgrimage is the fastest-growing motivation for travel. In particular, he profiles South Asia, where various pilgrimage circuits that aim to increase religious tourism are under development. For example, recent development plans have focused on the pilgrimage site of Lumbini, the birthplace of Lord Buddha, to accommodate increasing numbers of pilgrims. Consumer researchers could explore the dialogue between religion and the marketplace within these South Asian contexts, and in what ways new commercial developments do (or do not) enhance sacred space.

DATA COLLECTION INFORMATION

The first author conducted all the in-person fieldwork from 2010 until 2013. Data collection took place in both the sanctuary of Lourdes and in Scotland, UK. Data were discussed and analyzed by both authors on a monthly basis using the first author’s researcher diary, field notes, visuals, and interview transcripts. The final ethnography was jointly authored.

REFERENCES


