



Connecting with prospective medical tourists online: A cross-sectional analysis of private hospital websites promoting medical tourism in India, Malaysia and Thailand



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HIGHLIGHTS

- Websites of private hospitals promoting medical tourism in India, Malaysia and Thailand is examined.
- The content and format of 51 hospitals across five dimensions analyzed.
- Results provide pointers for hospital managers to improve their online presence.

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ABSTRACT

Websites of private hospitals promoting medical tourism are important marketing channels for showcasing and promoting destinations' medical facilities and their array of staff expertise, services, treatments and equipment to domestic and foreign patient-consumers alike. This study examines the websites of private hospitals promoting medical tourism in three competing Asian countries (India, Malaysia and Thailand) in order to look at how these hospitals present themselves online and seek to appeal to the perceived needs of (prospective) medical tourists. The content and format of 51 hospitals are analyzed across five dimensions: hospital information and facilities, admission and medical services, interactive online services, external activities, and technical items. Results show differences between Indian, Malaysian and Thai hospital websites, pointing to the need for hospital managers to improve their hospitals' online presence and interactivity.

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1. Introduction

Medical tourism has attracted significant attention in recent years owing to the growing number of people from upper-income countries travelling to lower- and middle-income countries for healthcare (Behrmann & Smith, 2010; Keckley, 2008). The internet, widely appreciated as an increasingly important source of health and healthcare information, has played a significant role in the

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development of the medical tourism industry (Hohm & Snyder, 2015; Huang & Chang, 2012; Lunt, Hardey, & Mannion, 2010; Maifredi et al., 2010). Patients in the United States, for example, use the Internet not only to gather general health information (Von Knoop et al., 2003) but also to identify the specific types of medical services available in hospitals at home and abroad (Grigoroudis, Litos, Moustakis, Politis, & Tsironis, 2008; Taylor, Gombeski, & Dillon, 2005). As such, the Medical Tourism Association (2009) found that 49% of the American medical tourists it surveyed learned about medical tourism via the internet and 73% sought specific information online about care abroad prior to going abroad. Such web use attests to the growing active participation of users/consumers, better informed than ever before, in caring for their own health and that of their families.

While studies suggest that high-quality online information is

important to attract medical tourists (Kim & Fesenmaier, 2008; Loda, 2011; Mason & Wright, 2011), existing research on online medical tourism information has focused mainly on medical travel facilitators' websites. Because medical tourism practices are largely hospital-centric, however, the websites of private hospitals promoting medical tourism are also significant marketing channels for showcasing and promoting destinations' medical facilities and their array of staff expertise, services, treatments and equipment to both domestic and foreign patient-consumers (Mason & Wright, 2011; Turner, 2011; Woo & Schwartz, 2014). Private hospital websites which lack relevant information and customer appeal may negatively affect medical tourists' decision-making when it comes not only to selecting an individual hospital but also to selecting the destination country (Everard & Galletta, 2005; Gallant, Irizarry, & Kreps, 2006; Lindgaard, Fernandes, Dudek, & Brown, 2006; Lowry, Vance, Moody, Beckman, & Read, 2008). However, no comprehensive study has yet been done on the content and format of private hospital websites promoting medical tourism.

This study therefore aims to analyze the websites of private hospitals promoting medical tourism in order to examine how such hospitals present themselves online and seek to appeal to the perceived needs of (prospective) medical tourists. To do this, we have studied the information and interactivity offered by private hospital websites from three of the world's most popular medical tourism destination countries today – India, Malaysia and Thailand – across five dimensions: 1) hospital information and facilities, 2) admission and medical services, 3) interactive on-line services, 4) external activities and 5) technical items (Maifredi et al., 2010). Each dimension was derived from and evaluated based upon indicators identified in the literature on medical tourism and healthcare provision reviewed in the next section and then operationalized using the methods presented in the section that follows. Our findings indicate a gap between the information needs of (prospective) medical tourists and that which is currently available on the websites of private hospitals promoting medical tourism. In our discussion and conclusion, we present ways in which medical tourism industry players can improve their online presence and suggest future directions for study.

Before we examine the Indian, Malaysian and Thai hospital websites, let us first provide brief vignettes of each of the countries' experiences with medical tourism and some of the main characteristics shaping its promotion:

- **India** - The Indian government officially recognized the economic potential of medical tourism in 2002 and sought to develop and promote India as a world-class 'global health destination' with low-cost and highly-specialized expertise (Medhekar, 2014). The main sources of medical tourists are Bangladesh, the Middle East, the UK, the US, Canada and African and other developing countries (Medhekar, 2014). Promotional efforts to appeal to these markets exist at the hospital (chain) level (Penney, Snyder, Crooks, & Johnston, 2011) and at the state and municipal levels (e.g., the cities of Chennai and Bangalore (Solomon, 2011) and the states of Goa, Kerala and Maharashtra (Turner, 2007; Qadeer & Reddy, 2010, p. 72). However, to date, no national booster organization exists to promote medical tourism. Following on critiques by the Federation of Indian Chambers of Commerce and Industry about the lack of standardized promotion of medical tourism, the National Tourism Authority set up a Medical and Wellness Tourism Promotion Board in 2016 to bring together government representatives from the Ministries of Tourism and Health as well as hospitals, hoteliers, medical experts and medical travel facilitators (IMTJ., 2015b). It will provide financial assistance to hospitals and medical travel facilitators (MTFs) to improve their marketing prowess and (customer)

service standards and to promote themselves and India as a medical tourism destination to prospective consumers and other businesses (Indian Ministry of Tourism, 2014).

- **Malaysia** - The Malaysian government began to promote medical tourism in 1998 in the wake of the Asian Financial Crisis in order to diversify its healthcare and tourism sectors. Since then, governmental and private sector actors have not only sought to attract neighboring Indonesians – characterized by sustained, high volumes yet low per patient expenditure – but also higher-spending medical tourists from further afield (e.g., rapidly-developing South and Southeast Asian countries, oil-rich Middle Eastern countries and high-income Anglophone countries) (Ormond, Wong, & Chan, 2014). In addition to relaxing once strict national regulations on medical advertising in order to facilitate marketing by the many private-sector MTFs working both on- and off-line in and outside of Malaysia, the government-initiated, corporatized Malaysia Healthcare Travel Council (MHTC), which replaced the National Committee for the Promotion of Medical and Health Tourism in 2009, promotes the Malaysian hospitals and clinics that it vets and endorses for medical tourism through a dedicated website (<http://www.medicaltourism.com.my>). As of 2013, there were 72 endorsed hospitals and clinics in the country, more than double the number of endorsed facilities in 2009 (MHTC., 2013). An array of government subsidies and fiscal incentives available for MHTC-endorsed 'medical tourism' facilities in order to bring these facilities' staff, facilities and equipment to a 'world-class' level so as to appeal to medical tourists (Ormond, 2013). These specially-designated facilities – dominated by large multinational hospital chains, like KPJ and Pantai – comprise a range of private and corporatized hospitals and clinics mostly concentrated in Kuala Lumpur (Selangor), Penang, Malacca and Johor. However, even before the national government recognized the economic potential of medical tourism, individual hospitals and hospital chains were already actively promoting themselves as medical tourism destinations, and some Malaysian state governments are also involved (Ormond, 2013). Of the 881,000 foreign patients seeking treatment in Malaysia in 2013, more than half were Indonesian, followed by smaller numbers of Japanese, Europeans, Indians, Chinese, Americans, Australians, Singaporeans and Koreans (<http://corporate.tourism.gov.my/Malaysia>, 2014; MHTC., 2015).
- **Thailand** - Medical tourism to Thailand started in the early 1990s and began to grow in the mid-2000s after the September 11 events in 2001 and the 2004 tsunami (Cohen, 2008). Hosting a recorded 1.8 million foreign patients in 2013 (Bloomberg, 2014; but see Ormond & Sulianti, 2014; for a critique of recording practices), 65% of these were from the Asia-Pacific region, Japan and Malaysia, with the rest hailing from the UK, Germany, Cohen (2008) Scandinavia, the US and the Middle East (Tourist Authority of Thailand, 2013). Medical tourism is largely concentrated in Bangkok, Phuket and Chiang Mai, with one hospital – Bumrungrad International Hospital – accounting for nearly a quarter of all medical tourists to the country (Connell, 2013). In addition to public and private hospitals and clinics promoting their services, MTFs, the Tourism Authority of Thailand, the Ministry of Public Health, the Provincial Health Authority and the Export Promotion Board are also key players in marketing the sector. However, Rerkrujipimol and Assenov (2011) found that the marketing of Thailand's private-sector health services was poor in comparison with other significant medical tourism destinations like Singapore, India and Malaysia. Part of this is due to the fact that, unlike India and Malaysia, where English is commonly used in and outside of the hospital setting, the dominance of the Thai language makes it such that Thai hospitals and clinics must create promotional materials in

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