

Research Article



A Study on Quality Issues in Medical Tourism with Reference to Chennai City.

Prof. S. Sujatha*¹, Prof. R. Subhashini²

¹Assistant Professor (O.G), SRM School of Management, SRM University, Kattangulathur, Tamilnadu, India.

²Lecturer, SRM Hotel Management, SRM University, Kattangulathur, Tamilnadu, India.

*Corresponding author's E-mail: sonasujatha@gmail.com

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ABSTRACT

Tourism makes a tremendous participation to the improvement of social and political understanding, because it is need for all parties involved in healthcare to become familiar with medical tourism. Indian medical tourism industry is presently at an emerging stage and has an enormous potential for future growth and development. To attract foreign patients, healthcare providers may consider leveraging on both business and clinical considerations medical services in India especially Chennai provide services at affordable price as low as 10% of those in the United States. This study attempts to identify various challenges faced by medical tourism in Chennai and to analyze the quality services provided for foreign patients by medical tourism. Survey was carried out on 72 foreign patients in Chennai. The study results provide strong support for the hypothesis that there is positive association between the indicators of the medical tourism growth and quality services provided.

Keywords: foreign patients, medical tourism, quality services and growth, health insurance, quality standards

INTRODUCTION

Tourism is well known term, meant to explore new areas, enjoy leisure time at peace. However since few years a new term as “medical tourism or medical travel, is the act of travelling to other countries to obtain medical, dental and surgical care at ease and with affordability of travelers choice”. The term was initially coined by travel agencies and the media as catch at all phrase to describe a rapidly growing industry, where people travel to other countries to receive medical care.

The capital of the Indian state of Tamil Nadu has been deckled Indian's health capital, as it nets in 48% of health tourists from abroad and 37-41 of domestic health tourists. With people from across the country and abroad preferring to get treated in the hospitals in Chennai. The city is increasingly becoming a hub of medical tourism according to a study by confederation of India industries (CII). Chennai attract about 40% of the country's medical tourist. As of 2013 the city received up to 200 foreign patients every day. Foreigners, especially those from developing and under developed countries such as Nigeria, Kenya, Burundi, Congo, Bangladesh, omen and Iraq, come to the city for advanced medical care. About 150 Maldivian patients arrive at the city every day. For medical treatment which resulted in Maldivian Airlines launching a thrice-a-war direct flight from Maldives to Chennai most leading hospitals which receives a study stream of patients from other states of India and abroad everyday have separate wings for international patients, Sri Ramachandra medical centre receives up to 100 overseas patients a month. Fortis malar hospital receives 15 to 20% foreign patients a month. Madras medical mission receives 14% foreign medical tourists every month mainly from east African nations. Sankara Nethralaya receives nearly 500 overseas patients a

month; MIOT hospital receives nearly 300 foreign patients every month.

Most medical tourists choose Chennai because of the low costs of health care here rather than the world class treatment and facilities, with some procedures offered at just one-fifth of the price in the UK, often including airfare and accommodation during recovery. The city is well connected to other Indian and global destinations, making it a relatively convenient option for Europeans seeking to combine medical care with a holiday. However, getting around the city can be a hassle, with chaotic traffic and high humidity the norm. Industry driven Chennai doesn't hold as much tourist appeal as some of India's more famous visitor spots. However, with the globes second-longest seashore, there are plenty of close-by beaches on which to convalesce, as well as western-style malls and cinemas in which to seek entertainment.

Quality and Standard of Care

Chennai as a large number of hospitals with international high standard. It has also has hospitals minimal acceptable high standard of care minus the ambience for extremely cost conscious patients who are in need urgent medical care but with limited financial resources.

Popularity and Recognition of Medical Tourism Designation

Chennai is known as healthcare hospital of India and is a popular designation for medical tourist for many years for foreign parties in India are treated at Chennai.

Accessibility

Chennai is accessible from almost any part of the world with good air travel network. All major airlines fly into Chennai and has modern international airport.



Affordability

Chennai is well known medical tourists destination with lowest rates anywhere in the world with highest level of care.

Objectives of the Study

- To identify various challenges faced by medical tourism in Chennai.
- To analyze the quality services provided for foreign patients by medical tourism.

Review of Literature

Health care in Chennai is provided by both government run and private hospitals Chennai attracts about 45% of health tourist from abroad arriving in the country and 30 to 40% of domestic health tourists.

Bies and Zancharia (2007) exposed the benefits, opportunities, costs, risks perceived through their study on outsourcing medical tourism like it is less expensive, no waiting is needed. Quick service, reduced stress, good infrastructural chain of hospitals with medical standard and medical treatment combined with vacation, comparing the benefits. The perceived opportunities like provision of services by sub contractors, elective surgery possibility, procedure not covered by insurance, employees wishing to save money for their employees' treatment, reduction in insurance. Premiums were found as the outcome of their study.

Methodology

Table 1: Demographic Profile of Respondents

Demographic Factors	Labels	n=72	100%
1. Age	a. 18-25 years	20	27.8
	b. 26-33 years	14	19.4
	c. 34-41 years	18	25.0
	d. 42-49 years	10	13.9
	e. 50-57 years	10	13.9
2. Gender	a. Male	42	58.3
	b. Female	30	41.7
3. Marital status	a. Single	22	30.6
	b. Married	28	38.9
	c. Separated/Divorced	14	19.4
	d. Widowed	8	11.1
4. Occupation	a. Civil servant	28	38.9
	b. Self-employed	18	25.0
	c. Others	26	36.1
5. Income status	a. Below \$500	38	52.8
	b. \$500-\$1000	16	22.2
	c. Above \$1000	18	25.0
6. Purpose of visit	a. Studies	24	33.3
	b. Business	22	30.6
	c. Others	26	36.1

Source: Field Data

The methodology used in the study is descriptive, analytical and inferential.

The sampling unit is Chennai and the size of chosen sample for the study is 72 foreign patients. Both primary as well as secondary data has been utilized for the study.

Primary data was collected through questionnaires interactions with the hospital nurses.

The instrument utilized for data collection is questionnaire. The secondary data has been collected through internet, books, and journals. The tools used for the study are ANOVA, Regression, Coefficient and Chi-square.

The demographic profile of the respondents above shows most of them (27.8%) are in the age category of 18-25 years and are males (58.3%).

Moreover, they are married (38.9%) and found within the civil servant category of occupation (38.9%). In addition, in terms of income status, (52.8%) earn below \$500 and they do visit Chennai for the purpose of business.

Table 2: Model Summary of factors affecting tourism on duration of stay in hospital

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.497 ^a	.247	.151	.57859

The Regression coefficient 'R' = 0.497 or 49.7% which means that correlation between dependent variable and independent variables is negative.

The coefficient of determination 'R²' = 0.247 or 24.7% indicating that 24.7% of variation in dependent variable is explained by independent variables.

The regression model is invalid because the coefficient of determination 'R²' is less than 60%.

The F-test value of 2.580 is significant because the significance level is .017. This is less than 0.05. This also implies that the correlation between dependent variable and independent variables is statistical significant.

Hence, null hypotheses will be accepted and alternative hypotheses will be rejected that factors affecting tourism are negatively associated with duration of stay in hospital.

Table 3 shows responses relating the changes that need to be made in quality of services provided. It is observed that airline ticketing is the area which requires most changes.

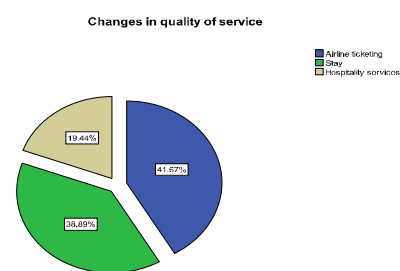
This recorded 41.7% of the responses, and is followed by stay (38.9%).

Lastly, hospitality services had the least responses of 19.4%. These are key factors which need to be considered in service quality and their absence creates challenges to the industry. Thus, high financial investments are required to boost tourism.

Table 3: Changes to be made in quality of services

		Frequency	Percent
Valid	Airline ticketing	30	41.7
	Stay	28	38.9
	Hospitality Services	14	19.4
	Total	72	100

Source: Field Data

**Table 4:** Results of Chi-square test of attraction of medical tourism packages vs. duration of stay in hotel

Hypotheses	Chi-Square Value	df	Asymp. Sig. (2-sided)	Results
Airline ticketing vs. duration of stay in hotel	8.486 ^a	8	.387	Supported
Comfortable stay vs. duration of stay in hotel	10.300 ^a	8	.245	Supported
Low cost treatment vs. duration of stay in hotel	22.946 ^a	8	.003	Supported
Travel vs. duration of stay in hotel	17.556 ^a	8	.025	Supported

From the table, the results of Chi-square tests for all the hypotheses are in significant level. The chi-square values are greater than 0.05 significant levels. Therefore, the null hypotheses are rejected and alternative hypotheses are accepted at 5% significant level.

The results depict a positive association between attraction of medical tourism packages and duration of stay in hotel.

CONCLUSION

There are several ways the tourism industry may take better care of this problem. The main initiative is required from the tourism ministry of the country, since it is the regulatory authority. More stringent norms for tourist satisfaction, providing easy access of relevant information to the tourists, about rates, tariffs, certified places of accommodation and modes of travel are required to prevent the tourist being duped. A tourist's satisfaction is of the utmost importance, because a displeased tourist leaves a bad impression about a whole nation.

Managerial Implications

The tourism industry can become one of the main sources of income for several countries, especially developing nations, which have a huge potential for tourism. Ironically, it is also one of the prominent service sectors which see a gross violation of corporate ethical conduct. Simply because a foreigner to a country is not aware of the system of operations, as well prevalent cultures, the local population tends to exploit that ignorance to their benefit. They without a conscience act upon ways to manipulate the trust which the ignorant tourist places upon them. One of the several issues in the ethical issues of the tourism industry is the non-disclosure of information to the tourist. The information provided to the tourist before they avail the service is many a time misguided and fine print, well, you could call it a bit too fine! A lot of relevant information is left out, leaving the consumer tourist confused. The exchange and return

policy on products, the fares of commercial vehicles, the added expenses of a trip, you name it, the tourist has been exploited.

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