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THE USE OF DIGITAL COMMUNICATION CHANNELS IN HEALTH TOURISM IN TURKEY

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Abstract

Aim: In recent years, the digital communication for health tourism has gained undeniable importance in Turkey and all over the world. In tourism sector, the correct and effective use of digital tools that emerged with the advancement of technology both provides benefits for institutions and plays an effective role in the preferences and decisions of consumers. In this study, it was aimed to examine the corporate websites and social media accounts of 10 private hospitals operating in the region of Konya in Turkey, and to reach both domestic and international health tourists. Content analysis was conducted to evaluate whether the hospitals use social media tools effectively. In this context, general information about the hospital, applications, trust, general risks were gathered, as well as financial information and visuals on the website. Regarding social media accounts, the most shared contents on Instagram, retweeted on Twitter and liked on Facebook accounts were included. According to the results of the

analysis, it was determined that digital communication channels were used to share information; however, their interaction with consumers was inadequate.

Keywords: Digital Communication, Health Communication, Health Tourism

INTRODUCTION

Technological developments, which are increasing day by day, affect the tourism sector as well as all other sectors. Proper use of digital tools with the developing technology provides significant benefits to tourism businesses. In addition, communication also is an important factor in health tourism. With the development of communication technologies, the fact that people can easily access all kinds of information plays an important role in attracting and increasing the interest in therapy-oriented travels (Aydın, 2012). Additionally, communication technologies are needed to reach tourists, build trust and receive their feedback (Öksüz and Altıntaş, 2017). According to previous research, health tourists' criteria for choosing health services include the quality of the service, affordability, the success of health professionals, and geographical proximity (Aksoy and Yılmaz, 2019). In addition, the limited, restricted or prohibited access to medical products or services in their own country have also led individuals to travel abroad for health tourism (Howze, 2007).

With digitalization, the concept of consumer has transformed into digital consumer in recent years. Development of new technological tools have led individuals to become more active by communicating directly with businesses (Happ and Ivancso-Horvath, 2018). According to Guttentag (2010), digital environments have an impact on the rapid change of developments in the field of tourism around the world, as well as consumers sharing their experiences with each other (Guttentag, 2010). Studies have proved that customers who use social media are more effective and successful than their competitors (Dülğaroğlu, 2021). In recent years, consumers have been seen to search for a specific product on social media tools such as Facebook, Twitter, and Instagram. People gather information about products more easily and exchange views by sharing their experiences through using these social media platforms (Kapan, 2019). It is possible to reach digital consumers, and to determine their consumption factors by understanding their demands with the internet and social media tools. Therefore, it is possible for countries and businesses to

display a credible image (Kapan, 2019). Globalization has had an impact on consumer behaviors, as well as allowing people to search for desired products to purchase services. In this direction, the fact that health tourists receive all type of information from the digital environment before purchasing service emphasizes the importance of digital communication in health tourism. In this context, corporate websites of certain hospitals and social media accounts such as Instagram, Twitter and Facebook were examined in the research.

2. RESEARCH METHODOLOGY

2.1. Health Tourism and Digitalization

Tourism, which has become an important source of income in the globalizing world, is constantly changing due to many factors such as human needs and developing technological opportunities (Edinsel and Adıgüzel, 2014). While tourism came to the fore in the world in the 1970s, it started to attract attention in our country after the 1980s (Çiçek and Adveren, 2013). With the increase in the world population and improvements in living standards, people prefer countries that provide more cost-effective and qualified health services for their treatment when they are faced with a disease, which has led to the emergence of health tourism (Kantar and Erdoğan, 2014). Health tourism is basically defined as individuals traveling from their place of residence to another in order to receive preventive, therapeutic and health-promoting services (Öksüz and Altıntaş, 2017). According to another definition, it is expressed as “touristic activities of individuals focused on coping with stress and relaxation” (Bennett et al., 2004). In fact, it may be concluded that health tourism dates back many years. In the Ancient Greek Empire, while people were traveling to Mediterranean countries to meet thermal water treatments, Europeans preferred the Nile after the 18th century, and in the 21st century, people preferred low-cost places with less waiting time (Çiçek and Adveren, 2013). In this respect, problems such as the high cost of health care in their home country, the long waiting period and low number of people with insurance have caused people to travel another place in order to receive health care (Kırıcı, 2020). The increase in the cost of health services, especially in developed countries, has caused people to seek destinations outside where they can receive better services at a lower cost (Younis et al., 2019). The most preferred countries in health tourism include the USA, India, Singapore, Cuba, Costa Rica, Thailand, Colombia, Malaysia, Mexico and South Korea (Aksoy and Yılmaz, 2019).

Tourists receiving services in health tourism are not only people who have lost their health (Uygun, 2018). Health tourism in general is grouped in categories as wellness tourism, health services tourism and medical tourism (Iordoche, Ciochina and Roxana, 2013). In addition to medical tourism for the purpose of receiving medical treatment, health tourism also includes thermal tourism for accessing natural resources, geriatric tourism for individuals with chronic diseases in elderly care centers, and disabled tourism (Yardan et al. 2014). Medical tourism: Henderson (2004) describes medical tourism as where the primary goal is the pursuit of better health and treatment. It includes health screening, hospitalization and surgical operations (Cook, 2008). Thermal health tourism: It includes all rehabilitative health services such as physical therapy, rehabilitation, exercise, psychotherapy, diet, etc., under the supervision of physicians, together with environmental and climatic factors that have a positive effect on human health such as thermal waters regions (www.shgmturizmdb.saglik.gov.tr). The main purpose in thermal health tourism is to restore body and spiritual vitality through using natural water resources in different ways (Bayer, 1992). Geriatric tourism: “Travels for the protection of the health of the elderly, the prevention of diseases that may develop, and their diagnosis and treatment” (Muğla Governorship Competitiveness Analysis Report, 2010). Disabled Tourism: It can be explained as providing independent and equal participation by offering universally designed tourism products, services and environments to people who need interaction such as freedom of movement, vision, hearing and cognitive dimensions of access (Ankaya and Aslan, 2020).

The target audience in health tourism is people with impaired health and people who want to protect their health and maintain a healthy state. In this case, the people in question are not only those who have lost their health, but also those who want to protect and improve their health, as well as being in need to meet their holiday needs, and getting advantage of recreational activities in their spare time (Tütüncü et al., 2011). In this respect, a health tourist is a person who acts primarily for treatment purposes and purchases various goods and services offered within the scope of health tourism by requesting products and services containing holiday elements (Muğla Governorship Competitiveness Analysis Report). It is possible to explain that health tourism is a holistic service that includes both treatment and vacation elements, as well as purchasing health services at the place they travel to. The aim of health tourism is to get people away from the

stressful city life, get a more peaceful and better quality health service, treat their diseases, and create a source of income for the country by reviving tourism (Kapan, 2019).

The reasons why countries are preferred in terms of Health Tourism are given below (www.shgmturizmdb.saglik.gov.tr):

- Countries whose main income is tourism: such as Thailand, Singapore, Costa Rica and the Greek part of Cyprus.
- Due to geographical and political location: such as Iran, Jordan, Brazil and Malaysia.
- Due to the quality of health services and the advantage of technological equipment: such as the USA, Germany and South Korea.
- Due to its policies towards tourism and health tourism: such as Spain Senior Tourism, Hungary Thermal Tourism and India Medical Tourism.
- Due to the inflow of foreign capital and the advantage of doctors trained abroad: such as India, Jordan, Malaysia, Malta and Brazil.
- Countries with multiple advantages: such as Turkey, Israel and Malaysia.

The countries of which people travel to Turkey to receive health services are considered in 5 groups. These are as follows (T.R. Ministry of Health General Directorate of Treatment Services, 2011, p.13):

1. Countries with a large Turkish population (such as Germany, France and the Netherlands),
2. Countries that have issues due to insufficient infrastructure and physicians (such as Balkan Countries, Turkic Republics in Central Asia).
3. Countries where health services are expensive and demanded services are not covered by insurance (such as America, Germany and England),
4. Countries with long queue times to receive the service (such as Canada, the UK and the Netherlands),
5. Countries that send a certain number of free patients within the framework of bilateral agreements (such as Afghanistan, Yemen and Sudan)

Table 1. Characteristics of Health Service Categories and Beneficiaries in Health Tourism

	Health Promotion Services	Treatment Services	Rehabilitation Services
Service Beneficiaries	*Middle and high income group *Healthy individuals *All age groups	*Middle and high income group *Middle and older age group *Able to travel as healthy group *Group with variable health risk	*High income group *Special needs *Low to moderate health risk *Elder *Substance addiction
Capacity Requirements of the Service	*Good level basic health service delivery *Increased expectations for hospital services	*Expert physician *Various needs from interventions to supportive treatments	*High level of technology *Expert physician *Primary health services *Therapeutic rather than medical treatment
Service time	*It varies according to the service received or the person receiving the service.	*Predictable *Follow-up may be required *Shorter	*Longer *Variable

Source: Özsarı and Karatana, 2013

The reasons why people prefer health tourism include dissatisfaction with local health services, high cost of health services, inability to reach the service on time, insufficient health insurance coverage, improved health care quality in developing countries, patients' intention to integrate health services with touristic activities together (Connell, 2006). However, social, financial, cultural and religious differences between countries are among some of the obstacles to health tourism. Patients' level of satisfaction and language differences, differences in technologies and materials are also among the most important factors to be taken into consideration (Özsarı and Karatana, 2013). It has been observed that one of the most important needs of health tourists is the perception of trust. For health tourists who receive treatment far from their families and friends, there are various aspects that play a major role in their preferences such as reliability of the health care professionals, facilities of the rooms they stay in, technological infrastructure of the hospital, and the opinions and evaluations of the previous service recipients (Öksüz and Altıntaş, 2017). According to Manaf (2015), although the cost is

very important, it is thought that quality is the first place for hospital preferences of health tourists, and individuals' perception affects the quality of the service provided as well as factors such as communication with health workers, transportation and accommodation (Aksoy and Yılmaz, 2019). Finally, the concept of health tourist is related to health tourism. Tourists are those who stay away from their homes for a period of 24 hours or longer. Those who travel for less than 24 hours are called visitors (Lee and Spisto, 2007). Therefore, people who travel to other regions for at least 24 hours due to health problems are considered health tourists (Trauer, 2006). With today's digital developments, it is necessary to evaluate health tourism in this context.

As in all areas, the field of health is closely affected by the continuous changes and developments in technology (Uysal and Ulusinan, 2020). In fact, the internet is considered an important source of information in terms of health services (Toygar, 2018). With digital health services, individuals and health professionals are able to meet quickly regardless of place and time (Özen, 2021). Therefore, with the spread of digital health applications, individuals' expectations increase as well as speed, sustainability and efficiency (Uysal and Ulusinan, 2020). Due to computer literacy, which has become widespread today, changes in the field of e-Health are followed rapidly. These changes accelerate decision making, improve communication between physicians and patients, and increase productivity. Therefore, e-Health services should not only be considered a technological development, but within a more broad context (Toygar, 2018). Mobile devices, which are a big part of our daily life, also play an important role in the follow-up of health data. These mobile devices make important contributions to lifestyle changes and increase the level of health information while decreasing health costs (Kopmaz and Arslanoğlu, 2018). It is necessary not to think of those who benefit from mobile health services as just patients. In this regard, it is also possible to include many stakeholders such as healthy people, patients' relatives, health professionals, pharmacies, hospitals, social security institutions (Tezcan, 2016).

3. METHOD

3.1. Purpose of the Research

Today, the importance of health tourism is increasing all over the world. Rapidly advancing technological changes and transformations also affect health tourism. With the advancement of

technology, the effective use of digital tools in terms of health tourism will provide great benefits for both health institutions and patients. In this study, it was aimed to examine the corporate websites and social media accounts of 10 private hospitals located in Konya province, Turkey in order to reach both domestic and international health tourists.

3.2. Population and Sample of the Research

The research universe consisted of all private hospitals (10 hospitals) in Konya: Farabi Hospital, Medova Hospital, Private Metropolitan Hospital, Medicana Hospital, Private Akademi Hospitals, Private Anıt Hospital, Private Konya Hospital, Dünyagöz Hospital, Konyagöz Hospital, Private Türkiye Kızılay Derneği Ticaret Borsası Hospital. Three of these hospitals are chain hospitals, and the others are located only in Konya. In the study, the entire universe was reached and no sampling was performed.

3.3. Collection and Evaluation of Research Data

Data collection was carried out over the Internet. The websites of the designated hospitals were accessed one by one. The data were tabulated on the computer. Interpretations were performed over these tables. In addition, names of the were not included in the tables, lettering (A, B, C, D, E, F, G, H, K, L) was used to represent the hospitals.

3.4. Data Analysis

In this study, corporate websites of private hospitals located in Konya were examined using content analysis method. In content analysis, similar data are brought together within the framework of certain concepts and themes, organized and interpreted through ensuring comprehensibility (Yıldırım & Şimşek, 2013, p.259). In the research, a content analysis was conducted to determine whether participants use Instagram, Facebook and Twitter accounts effectively since 2018, which is the common date for all hospitals. The analysis of corporate websites was based on the method used by Mason and Wright (2011). In this method, websites are analyzed in terms of applications, trust, risk, payment and financial information, and general information. Subheadings were created by the researcher in the light of the common information provided on the websites of the hospitals. While examining social media accounts, the accounts were accessed by clicking on the social media links on the websites in order to prevent errors due to username similarity. The information on the corporate website includes general information about the hospital, applications, trust, general risks, financial requirements, and visuals.

3.5. Limitation and Assumption of the Research

The research is limited only to private hospitals in Konya. Within the scope of the research, it is assumed that all private hospitals will be willing to attract health tourists to the hospital.

4. FINDINGS

Findings for the corporate website and social media accounts of hospitals were included in the research findings.

4.1. Findings Regarding Corporate Websites

The information on the corporate website includes general information about the hospital, applications, trust, general risks, financial requirements, and visuals.

Table 1. General Information

Information	Number of hospitals
Vision and mission	10
About us	10
Corporate identity	3
Corporate news	6
Institutional publications	1
Activity reports	1
Accreditation	1
Received Awards	2
English Website	6

The Table 1 indicates that there are about us and vision-mission tabs on the websites of all hospitals, and that the majority share corporate news. In addition, it was determined that 6 hospitals had English version of their websites, and two were found to have inadequate content.

Table 2. Information on Applications

Information	Number of hospitals
E-appointment/ E- result	9
High quality services	9
Medical technologies	6
Directions	2
Contact - suggestion/complaint form	9
Health guide	3
Social media accounts	9
Introduction of physicians	9
Information about health tourism contents	3
Services for international patients	3
Ask the expert a question	5
Remote examination	1

According to Table 2, when the information about the applications on the corporate websites was examined, it was seen that the quality of the services and technological infrastructure of the hospital were introduced, emphasizing the promotion of the physicians. In addition, a suggestion-complaint form was included under the name of the communication form from the patients and their relatives, which is considered to be an indication of the importance attached to feedback of patients and their relatives about the hospital. It was seen that the information about the “Ask a question to the expert” button and the contents of health tourism had started to become widespread.

Table 3. Safety-Related Information

Information	Number of hospitals
Information about PDPL	9
Visitor and companion policy	5
Patient rights policy	9
Frequently Asked Questions	2

As seen in Table 3, it was seen that the rights of the patients and confidentiality of information were attached importance through including the PDPL, visitor and companion policy, and patient rights policy. It was observed that two of the hospitals included frequently asked questions. It is considered that this information may influence patients' decision to choose the hospital.

Table 4. General Risks

Information	Number of hospitals
Adverse/difficult situations	-
Legal applications	-

As seen in Table 4, the fact that no information was provided on the general risks and where to apply in case of any adverse situations was considered an inadequacy.

Table 5. Financial Information

Information	Number of hospitals
Contracted institutions	9
Collaborations	2
Sponsorships	2
Information about payments	-
International insurance options	7

As seen in Table 5, there are mainly contracted institutions and international insurance options on the websites of the hospitals. It is considered that this situation is effective in patients' preference for the hospital. Collaborations and sponsorships are included only in two corporate hospitals.

Table 6. Images on Websites

Information	Number of hospitals
The exterior of the hospital	9
Hospital facility/logo	9
Maps	9
Staff photos	4
Post recovery	8
Inside the hospital	9
Medical devices	6

As given in Table 6, the visuals on the corporate websites are the most common visuals, showing the hospital's exterior and contents, its logo, and location on the maps. In addition, the

images of the surgical patients after recovery, the staff and the memorial of the medical devices in the hospital are considered to be important details for the image of the hospital.

4.2. Findings Regarding Social Media Accounts

The most shared content on Instagram accounts, the most retweeted content on Twitter accounts, and the most liked content on Facebook accounts were included.

Table 7. The Most Shared Contents on the Instagram Accounts of Hospitals

Hospital name	Information about diseases	Physician introduction	Scientific meetings etc.	Special day messages	Tips for a healthy life	Post recovery	Information for international patients	Hospital promotion, campaigns, etc.
A	572	65	192	443	217	9	0	313
B	354	27	349	337	120	75	0	66
C	290	12	14	164	78	2	1	74
D	456	1	164	311	351	20	1	167
E	458	55	104	389	121	14	3	199
F	161	15	9	75	13	12	0	32
G	82	23	36	158	14	15	2	70
H	128	7	11	80	25	8	0	25
K	191	26	25	138	42	11	0	53
L	49	21	6	84	98	3	0	34
Total	2741	252	910	2179	1079	169	7	1033

In table 7, it was seen that information about diseases, special day messages, suggestions for a healthy life, promotion of the hospital and campaigns were the most prominent content. Physician presentation and images of post-recovery patients are frequently included on websites, while Instagram accounts include different type of content. It was determined that the information provided for international patients included only two foreign insurance companies, which was considered inadequate regarding health tourism. The content descriptions of the categories are as follows: Information about diseases, symptoms and treatments in the category of disease information; information on physicians who have recently started seeing patients and fields of expertise of current

physicians in physician promotions; scientific meetings and events organized by hospitals in the category of scientific meetings; physicians participating in TV programs; special days such as Mother's Day, Doctor's Day, World Autism Awareness Day in the special day messages category, nutritional recommendations or ways to prevent all kinds of diseases in the category of recommendations for a healthy life; images of the post-operative condition of surgical patients in the post-healing category; foreign insurance options for international patients, information about the medical devices in the hospital, the treatments and the campaigns in the hospital promotion and campaign category.

Table 8. Contents Retweeted Most on Twitter Accounts

Hospital Name	Account opening date	Number of retweets
A	2014	Special day messages (3) Physician introduction (2) Scientific meetings (1)
B	2011	Special day messages (2) Scientific meetings (6) Information about diseases (2)
D	2010	Special day messages (15) Activity (5) Illness (5)
E	2013	Special day messages (1) Tips for a healthy life (1)
H	2010	Special day messages (3) Tips for a healthy life (2) Information about diseases (3)
K	2015	Special day messages (1) Hospital promotion campaign (2) Tips for a healthy life (2)

As given in table 8, when the Twitter accounts of the hospitals were examined, it was remarkable that the tweets shared were similar to the Instagram and Facebook content; however, the number of likes were quite a few. In this case, it may be concluded that the audience use Twitter more rarely compared to Instagram and Facebook, or that no actions are taken to increase the number of followers of the Twitter accounts. It is also among the important results that four hospitals do not have Twitter accounts.

Table 9. The Most Liked Contents on Facebook Accounts of Hospitals

Hospital Name	Account opening date	Number of likes
A	2013	Physician introduction (434) Hospital introduction (405) Information about diseases (243)
B	2011	Special day messages (128) Hospital introduction (161) Physician introduction(133)
C	2010	Physician introduction (61) Hospital introduction (356) Information about diseases (669)
D	2010	Tips for healthy living (301) Special day messages (339) Information about diseases (706)
E	2010	Physician introduction (63) After recovery (81) Hospital introduction (41)
F	2012	Physician introduction (404) Special day messages (93) Hospital introduction (144)
G	2013	Special day messages (1) Hospital introduction (8) Information about diseases (2)
H	2010	Special day messages (121) Hospital introduction (146) Information about diseases (117)
K	2014	Physician introduction (707) Hospital introduction (788) Information about diseases (314)
L	2020	Tips for healthy living (103) Hospital introduction (499) Information about diseases (25)

When Facebook accounts of hospitals were examined, they seem to be categorized similarly to Instagram contents. It was determined that the posts with the highest number of likes also included similar content. Those received the highest appreciation were special day messages, information about diseases, and promotion of physicians and hospitals. Therefore, it may be concluded that these categories attract the attention of the audience the most.

5. DISCUSSION

When the studies in the literature are examined, it is seen that similar results are obtained. In the study conducted by Ercan (2020), social media tools are shown as the largest source of data in obtaining information about visitors in smart tourism applications (Ercan, 2020). In this study, corporate websites and social media accounts of 10 private hospitals operating in Konya were examined. The hospital and physician promotion and high quality services are carefully provided, and the fact that no information is provided within the framework of general risks suggests that it prevents patients from adopting a good perception toward the hospitals.

In a study conducted by Öksüz and Altıntaş (2017), the websites of health institutions that have JCI accreditation in Istanbul were examined and results indicating inadequate information in the general risks section supports our study (Öksüz and Altıntaş, 2017). The common date of opening of social media accounts was 2018. Considering that the content shared on Instagram not focusing on health tourism or international patients, and that even institutional hospitals providing limited information in this regard, hospitals are required to improve their credibility.

Similar content was shared on Facebook accounts, and the fact that certain posts receiving no reaction from the audience, and others being highly appreciated suggest that the hospitals cannot use their Facebook accounts effectively. The number of retweets was examined since it was considered possible to reach large audiences through retweets. When Twitter accounts were examined, the fact that the number of retweets being negligible despite sharing a similar content with Instagram and Facebook may be interpreted as the low number of consumers using Twitter or the lack of action to increase the number of followers. In this direction, it was determined that hospitals used their social media accounts to provide information and to make announcements which did not interact with consumers. In terms of health tourism, it was seen that the tools were solely used for domestic health tourism, and the promotions shared for foreign patients were inadequate. It is considered that hospitals should recruit social media experts in their corporate marketing departments in order to reach to and interact with larger audience in the digital environment within the scope of health tourism. It can be suggested for those who already work in cooperation with social media experts to increase the number experts and focus on social media to improve these actions.

In a similar study conducted by İnce and Doğantan (2020), it was concluded that hotel businesses should provide necessary training on internet and information technologies to their personnel in order to be more effective in the digital environment. In addition, it was found that individuals with digital skills should be preferred in personnel recruitment, which would benefit the business, and the budget for these interventions should be prioritized and attached importance (İnce and Doğantan, 2020). Similar results were found in the study conducted by Göde, Yorulmaz and Aydoğdu (2021). In this study, the websites of the agencies that are entitled to obtain a health tourism authorization certificate were examined. Accordingly, the websites of 113 agencies were reached. As a result of the research, it was seen that the agencies do not use their websites effectively and efficiently in terms of health tourism (Göde, Yorulmaz and Aydoğdu 2021).

In the study of Güler (2021), the websites of private hospitals operating in the health sector were examined in terms of their content in the field of human resources. It is seen that 83% of the private hospitals included in the study attach an application link in the human resources section on their websites, and 67% explain their human resources policy and values. It has been determined that only 33% of private hospitals provide information on wages and benefits, career management, performance management, training and development activities (Güler, 2021).

6. CONCLUSION AND SUGGESTIONS

Today, with the development of communication technologies, the necessity of using digital communication channels, which is one of the most important tools in the spread of health tourism, emerges. In this research, a content analysis was conducted to determine whether the private hospitals operating in Konya use their corporate websites and social media tools such as Instagram, Facebook, Twitter effectively in terms of health tourism. As a result of the research, it has been seen that only two corporate hospitals provide content related to both domestic and international health tourism. When the promotions and corporate news of the hospitals are taken into account, it has been observed that the content is generally focused on satisfaction of domestic patients. In this direction, it is concluded that hospitals tend towards domestic health tourism compared to international health tourism. When the contents of the social media accounts have been examined, it has been determined that the shared contents have been

included in the same categories. It is seen that similar information is provided on social media accounts and corporate websites. Generally, special day messages, information about diseases and suggestions for a healthy life have been highly promoted. It has been concluded that hospitals suggest that these issues attract the most attention. In addition, this situation reveals that the content of hospitals is up-to-date. In this direction, hospitals are considered to create a hospital image which attaches importance to the interactions of patients. As a result, it has been seen that hospitals fail to interact with the consumer audience while using digital communication channels. In addition, they use digital communication channels mostly for making announcements and providing information.

Recommendations regarding the results are as follows:

- Marketing activities that will stimulate foreign health tourism in Konya should be planned. Corporate marketing departments should employ foreign language-speaking personnel and actively use social media and websites.
- It should be aimed to improve the concept of health tourism throughout the country, the Ministry of Health and the Ministry of Culture and Tourism should reveal the positive aspects of Turkey, especially in terms of medical and thermal tourism, and select target countries. After the target countries are selected, advertisement promotions tailored to each country's own language should be organized and presented to the target countries with governmental support.
- Special practices and campaigns should be developed for Turkish people living abroad to receive health services in their own countries. In this way, their experiences will contribute to support the marketing and promotions for target countries.
- Congresses should be organized by the Ministry of Tourism for the promotion of international health tourism.
- A sufficient number of foreign language-speaking personnel should be available in the areas where all kinds of activities are provided for health tourists that include holiday elements.
- The field of health tourism should be included in curriculum in the Health and Tourism Faculties of universities and qualified professionals should be trained.

- Certificate programs should be developed in order to ensure that students willing to take part in the fields of activity related to health tourism, yet received education in a different field in undergraduate or associate degree, can work in these fields.
- International insurance options should be increased in order to encourage and facilitate people to receive health services from Turkey.
- In order to create an element of trust, all service details provided in the digital environment should be shared with the consumer audience in all transparency.

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