

# THE EVALUATION OF MEDICAL TOURISM PERSPECTIVE OF HEALTH MANAGEMENT AND TOURISM MANAGEMENT STUDENTS<sup>5</sup>

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**ABSTRACT:** Health tourism which has been popular around the world for the last 10-15 years, is just becoming popular in Turkey. As this study shows health tourism is an alternative tourism source for Turkey which will help Turkey gain another income. This method, also called the Ishikawa diagram is firstly used by Kaoru Ishikawa, a professor in Tokyo University, in 1953. Another name used for this method is cause-effect diagram since it tries to figure out the reasons and results of a problem systematically (Gürbüz and Çakmak, 2012:73, Argüden and Unanoğlu, 2009: 39).

This study aims to determine the main opportunities and problems health tourism faces with the fishbone method. The universe of the study consists of the 210 last grade students of Suleyman Demirel University Health Management Department and Tourism Management Department. The fishbone diagram drawn in the Adobe Illustrator program is distributed to 30 students at a time. The study is done 7 times so that brain storming can be done more effectively. As a result of this study one can see that in order to solve the problems the participants have defined both the public and private sector have to work really hard. It is easily seen from this study that by the development of health tourism, the tourism season in Turkey will get longer and this will help increase the tourism income overall.

**Anahtar Kelimeler:** Medical Tourism, Healthcare, Ishikawa diagram.

## SAĞLIK YÖNETİMİ VE TURİZM İŞLETMECİLİĞİ ÖĞRENCİLERİNİN MEDİKAL TURİZME BAKIŞ AÇILARININ DEĞERLENDİRİLMESİ

**ÖZET:** Son 10-15 yıl da dünya da popüler olan sağlık turizmi, Türkiye’de de popüler olmaya başlamıştır. Bu çalışma, Türkiye’ye ek gelir sağlayan, alternative turizm kaynağı olan medikal turizmi ele alacaktır.

Bu çalışma İshikawa diyagramı kullanılarak medical turizmin Türkiye’de oluşan fırsatları ve tehditleri ortaya çıkarmayı amaçlamaktadır. İshikawa diyagramı, ilk kez 1953’te Tokyo Üniversitesi’nde Kaoru İshikawa tarafından kullanılmıştır. Bu metod, bir konu ile ilgili mevcut problemlerin sonuçlarını ve sebeplerini sistematik bir şekilde ortaya çıkarmaktadır. Medikal turizmde ortaya çıkan fırsatları ve sorunları balık kılıcı yöntemiyle ortaya çıkararak belirlemeyi amaçlamaktadır. Araştırmanın evrenini Süleyman Demirel Üniversitesi Sağlık Yönetimi Bölümü ve Turizm İşletmeciliği Bölümü 210 son

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sınıf öğrencisi oluşturmaktadır. Adobe Illustrator programında çizilmiş balık kılçığı diyagramı bir seferde 30 öğrenciye dağıtılmıştır. Bu yöntem beyin fırtınası ile daha etkili yapılmaktadır. Çalışma öğrencilere 7 kez uygulanmıştır. Sağlık turizminin geliştirilmesi ile, Türkiye'de turizm sezonu süresinin uzaması ve turizm gelirlerinin artırmaya yardımcı olacağı bu çalışmadan görülmektedir.

**Anahtar Kelimeler:** Medikal Turizm, İshikava Diyagramı, Sağlık Hizmeti.

## GİRİŞ

Medical tourism which has become a niche market in Turkey and all through the world, is a very attractive field in the tourism sector. Medical tourism known as health tourism have many definitions. For example Connell (2006) uses only the concept of medical tourism for it. Smith and Pucsko (2009) define it as getting first quality service with third World prices. Kumar (2009) on the other hand says that it is an act of travelling to get medical health care services. Similarly Van Sliepen (1992) and Suad İmran (1995) also uses the word 'travelling' when defining medical tourism. For example Van Sliepen defines it as traveling for the purpose of getting treatment in a suitable time on the condition to stay somewhere except home, where as Suad İmran (1995) defines it as going to a different country whether because of a physician's advice or on his own will to get health care service for a limited time (Harahsheh, S.S., 2002). As a result medical tourism can be defined as the travelling of the patients to get health care service away from their own country because of their own will or as an advice of a physician.

Kim and et al (2011) points out that there should be 4 main factors such as nature, information, artificial and expenses in order for the medical tourism to develop. Thermal and spa wellness tourism, tourism for the elder and the disabled and medical tourism are the three main headings that are gathered under the concept of health tourism (Aydın an et al, 2011).

The most known area for medical tourism in the world is the Asian continent. The Asian continent consisting of Thailand, India, Singapore, South Korea and Malaysia serves 1,3 million medical tourists per a year. The medical tourism movement in Thailand starts in the 1970's with gender transition operations and lead to plastic surgery. In nowadays India is accepted as the center of medical tourism. It has renewed it's technology, adapted western medical methods and has emphasized low costs and fast recovery in their advertisements to be the global center of medical tourism (Connel, 2006). India is most known for heart surgery, whereas Thailand for kidney transplantation, Tunisia and Morocco for eye health, Poland and Hungary are for dental health. The costs in these countries are known to be cheaper than West European countries more then % 40-70 approximately. For example a dental prosthesis costs 4,000 Euros in France whereas 3,000 Euros in North Africa. Similarly a lifting operation costs approximately 6,000 Euros in France and 4,000 Euros in Tunisia or Morocco. Once again a dental operation in France costs approximately 1,500 Euros in France and 600 euros in Hungary (Çetinkaya, 2010).

The main reason why India, Thailand, Malaysia, Singapore and Germany are the leader countries for medical tourism is actually not because they are much better in

infrastructure and have more qualified health personnel; it is because that both the public and the private sector in these countries work together in forming strategies and health policy (Yılmaz,2010). Turkey has developed itself in medical tourism sector and have started serving many tourists. For example as BAKA (2011;16) reports many tourists prefer Turkey for many branches like plastic surgery, hair transplant, eye surgery, open-heart surgery, cancer treatments, in vitro fertilization, dental surgery, physical therapy rehabilitation and orthopedics for low costs and high quality and technology standards.

There are many factors that affect the development of medical tourism. The main factors that affect the development of medical tourism can be listed as below:

- The price differences in between the countries,
- The difference in exchange rates,
- The transferring of health service to public sector,
- Some health services like dental surgeries and plastic surgeries are not included in health insurance of some countries,
- The increase in cosmetic surgery,
- The long waiting lists to get a surgery in West countries,
- The laws of some countries that don't allow abortion and gender exchange surgeries,
- The travelling agencies that allow lower prices to these kinds of tourists.

In rich western countries especially in USA, the transferring of health sector to the private sector increased the costs of health services and affected the transformation of marketing in health services. Also with the travelling agencies stepping in and arranging much cheaper tours for the purpose of medical tourism has increased the potential for medical tourism. As a matter of fact the travelling industry in USA has foreseen this important opportunity and organized tours including plane tickets, the hotel and the surgery costs with a saving of 80% compared to the costs in USA. A heart surgery for example in New York costs 250,000 \$ whereas 50,000 \$ in India New Delhi (Newman, 2006).

According to Bies and Zachari (2007) there are 3 control criterions in determining the benefits of medical tourism. These are defined as medical, economical and social. The medical benefit consists of the severity of diseases, the quality of the health services and the insurance of the patients. The income matters when evaluating the economical benefit. A person with a high income has more expectations than a person with a low income. The psychological factors, the waiting time and stress are important in evaluating the social benefits. Medical tourism can be a way of relief for those who think of this as a some kind of a holiday.

The main factor against medical tourism is the process of persuading the potential visitors that the quality of the medical treatment they are offering is the same as back in their own country. The Europeans have serious suspicions on the hygiene conditions during and after surgery especially in India (Connel, 2006). Along with this according to Chanda (2001)

other main problems are the accreditation problems, the tough competition, the restrictions imposed by the foreign health organizations, the restrictions on the capacity and the difficulty in going in and out the countries. Bies and Zachari (2007) point out that encouraging medical tourism includes some political and medical risks. The medical risks might contain low service quality or unexpected expenses; whereas the political risks cover international relations. For example if an Eastern country loses its superiority in health services against India, then this might also ruin the political relations between the two countries. Another risk is loosing of prestige in health sector in the international arena along with the increase in medical tourism in western countries. There is also a risk concerning the migration of physicians to another country other than USA. If medical tourism develops in other countries then most of the physicians will prefer to work in those countries.

There are 3 main points that should be discussed for the medical tourism to develop. The first is the quality of health services, the second is the cost and the easy access to the health services and the last one is the status of the local health services with the start of medical tourism (Bies and Zacharia, 2007). If one puts emphasis on the factors that develop medical tourism; then one will be able to compete with those countries that are good in medical tourism and lots of benefit will be gained on cost advantage and financial well-being of the country.

## 1. METHODOLOGY

Health tourism which has been popular around the world for the last 10-15 years, is just becoming popular in Turkey. As this study shows health tourism is an alternative tourism source for Turkey which will help Turkey gain another income. Along with this new health politics will develop, new treatment methods will be found and the quality of the health services given will be more qualified.

This study, which aims to define the opportunities and problems of health tourism in Turkey, has been done with the participation of 210 students of Suleyman Demirel University Health Management and Tourism Management Departments.

In this study fishbone diagram, a method that is used to find out the reasons that affect a main problem is applied. This method, also called the Ishikawa diagram is firstly used by Kaoru Ishikawa, a professor in Tokyo University, in 1953.

The participants of this study stated that there are 8 possible opportunities of health tourism in Turkey. In another words we can say that the participants described 8 main bones under the heading of opportunities. These are:

- The positive effects of globalization,
- The health tourism is considered to be an alternative tourism,
- The positive effects of health tourism to Turkish public policy,
- The development of health tourism institutions,

- The positive effects to the economy,
- The positive effects to the environment,
- The increase in the variety of the methods of treatment,
- Turkey becoming popular in health tourism.

The first main bone which states that an opportunity of health tourism is the positive effects of globalization. Under this main bone the participants stated some sub bones like health tourism increasing the globalization rate, developing new markets, effecting development, forming an environment that is open to change and affecting reengineering positively.

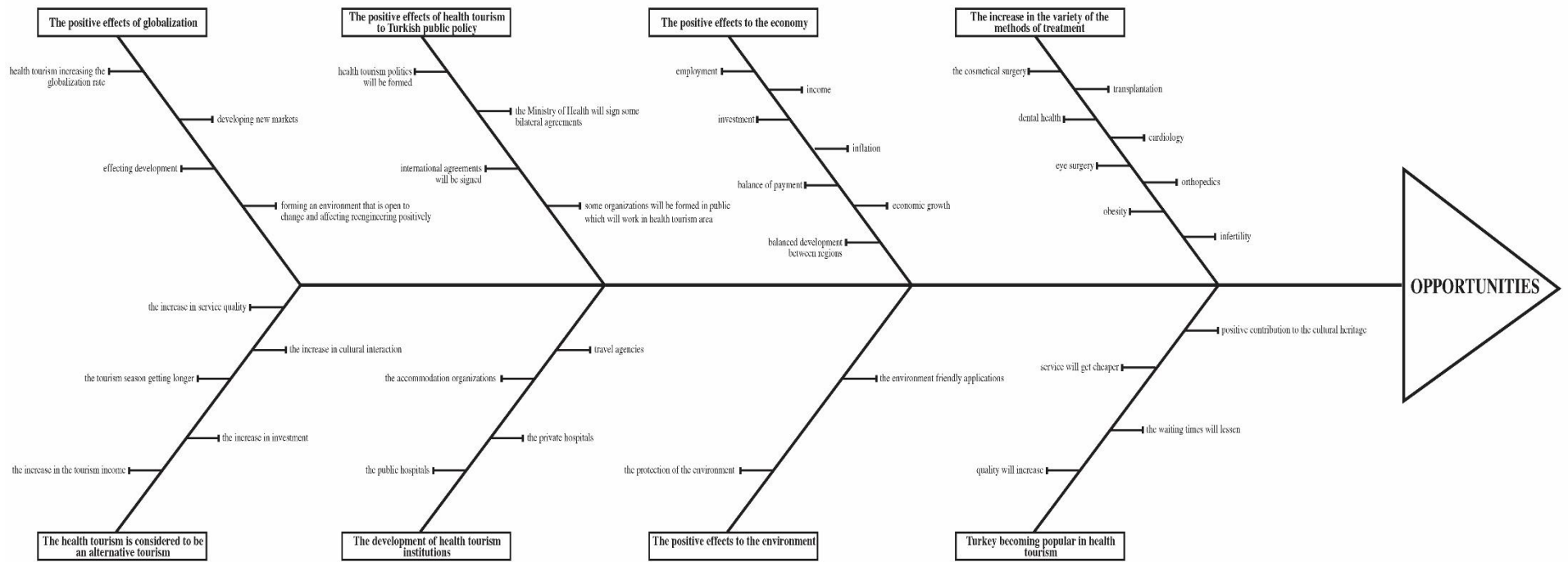


Figure 1.

As seen in Figure 1, the participants have said that it is an opportunity that health tourism is evaluated as an alternative tourism. Under this main bone 5 sub bones have formed. These are: the increase in the tourism income, the increase in investment, the tourism season getting longer, the increase in cultural interaction and increase in service quality.

According to the results the participants have said that along with the development in health tourism the public policy will also be affected positively. The participants have claimed that health tourism politics will be formed, the Ministry of Health will sign some bilateral agreements, international agreements will be signed as well as some organizations will be formed in public which will work in health tourism area.

Another main bone that is found out at as part of this study is the development of the organizations that work in the health tourism sector. In this statement the participants actually mean that the public hospitals, the private hospitals, the accommodation organizations and travel agencies will have to develop as health tourism sector develops.

Economy will also get affected positively with the development of health tourism. The sub bones of this main bone are the positive effects it will have on employment, income, investment, inflation, balance of payment, economic growth and balanced development between regions.

As a result of the fishbone diagram it is seen that the participants think that health tourism will also affect the environment positively. It is found out that the development of health tourism will increase the protection of the environment as well as the environment friendly applications and.

Another important finding of this study is that the participants think that health tourism will increase the variety and the development of the treatment methods. The cosmetical surgery, transplantation, dental health, cardiology, eye surgery, orthopedics, obesity, infertility are the main areas that the participants think that will develop firstly.

As seen in Figure 1 the participants claim that it is an opportunity for Turkey to become popular in health tourism. Along with this the participants think that quality will increase, the waiting times will lessen, service will get cheaper, private service will be given to everyone and this will also give positive contribution to the cultural heritage.

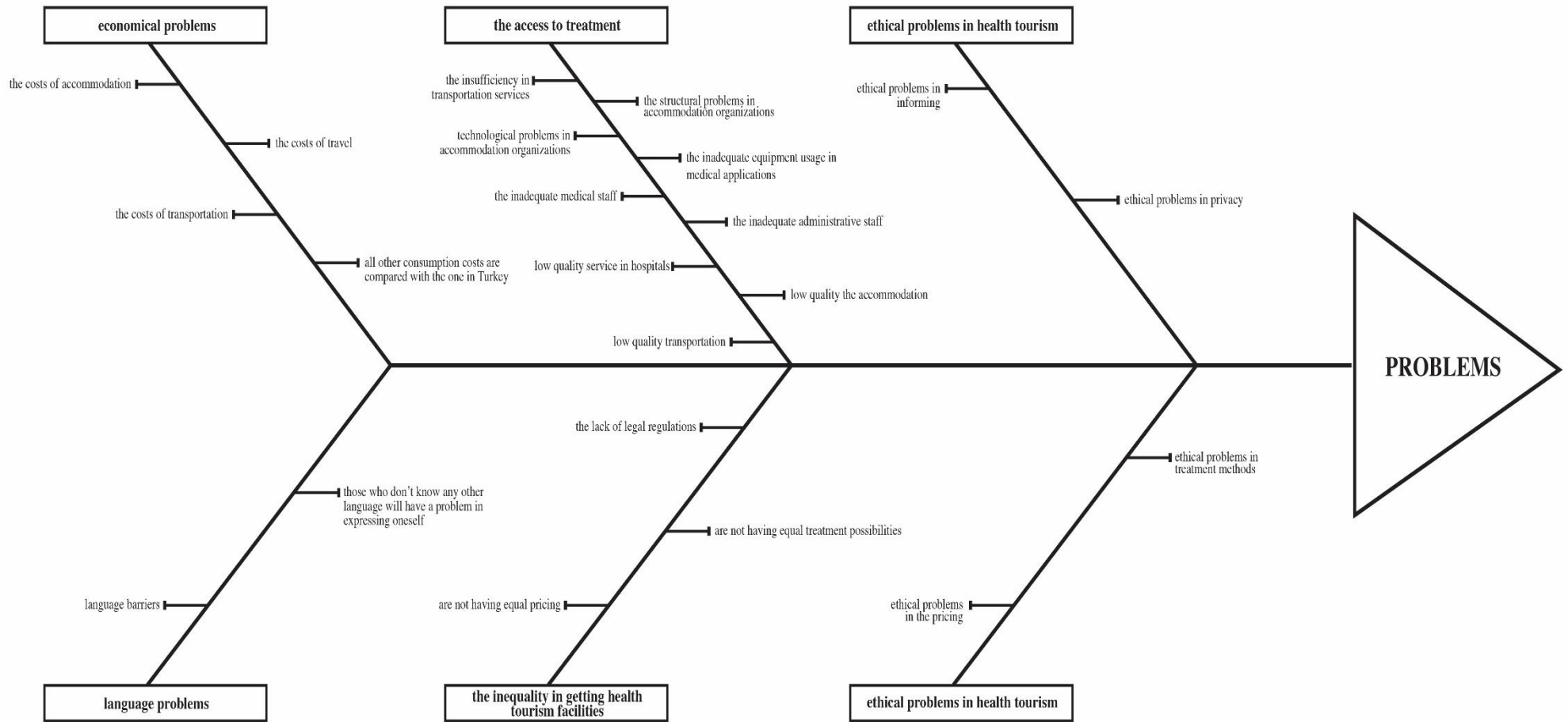


Figure 2



The Figure 2 shows the main problems that the participants think that health tourism in Turkey faces. These problems are economical problems, language problems, the access to treatment, service quality and standards, the inequality in getting health tourism facilities and ethical problems in health tourism.

It is found that under the bone of the economical problems lie mainly costs. The participants claim that the potential patients decide to travel on the conditions when the costs are cheaper than their own home country. It is detected that the costs of accommodation, travel, transportation and all other consumption costs are compared with the one in Turkey.

Another main problem that has been pointed out by the participants is the language problem. The participants express that in order to develop health tourism in Turkey the language barrier should be solved. Those who don't know any other language will have a problem in expressing oneself thus will be a major problem when travelling within health tourism

The participants stated that access to treatment would be a main problem. The insufficiency in transportation services, the structural and technological problems in accommodation organizations are main problems under this bone. The inadequate equipment usage in medical applications, the inadequate medical staff and administrative staff, low quality service in hospitals, the accommodation, and transportation are seen as the main sub bones under the service quality and standard bone.

One other important result of this study is that the participants stated that there are inequalities in between the health tourism opportunities. The sub bones of this problem are not having equal pricing, equal treatment possibilities and the lack of legal regulations.

As seen in Figure 2 the participants also pointed out some ethical problems. There seems to be ethical problems in informing and privacy of the patients as well as the pricing and treatment methods.

## **RESULTS**

This study, which aims to define the opportunities and problems of health tourism in Turkey, has been done with the participation of 210 students of Suleyman Demirel University Health Management and Tourism Management Departments. As a result of this study one can see that in order to solve the problems the participants have defined both the public and private sector have to work really hard. It is easily seen from this study that by the development of health tourism, the tourism season in Turkey will get longer and this will help increase the tourism income overall. Thus more attention should be payed to health tourism and also the investments to health tourism should be supported. Turkey should use it's geographical location, climatical circumstances, hospitals, medical personnel more effectively

and should be transformed to a health tourism destination. This way the income that comes from this alternative tourism will help raise the GNP and Turkey will develop fastly.

There are many factors that affect health tourism regions. As a result of this study one could say that Turkey will get competitive advantage in health tourism, patient satisfaction will rise, quality will increase, international relations will develop, the tourism income will rise and economical welfare will be affected positively. Addition to these environment friendly applications will increase, the methods of treatment will vary and the tourism season will get longer.

The main threat to health tourism is the inadequate service quality and standards. In order to raise these both the public and the private sector have a big role. Other sub bones of the main threats are not having enough equipment, the low number of specialist physicians, the low number and the low quality of accommodation options and also low service quality given in hospitals in Turkey.

The tourists that come to Turkey wants to use both the existing touristic opportunities and the potential treatment methods. But in order to increase the number of tourists one has to look for other options then sea-sun-sand trio. In this sense health tourism in Turkey is a good way of alternative tourism. As Bies and Zacharia (2007) pointed out there are 3 main factors that needs to be kept in mind for the health tourism to develop. The first one is to increase the quality of health services, the second is to increase the access to health services and decrease the costs and the last one is the existing conditions of local health services when health tourism rises. Along with this study the results show deep relations with these three factors. For example the increasement of health services quality as the participants pointed out matches with what Bies and Zacharia (2007) said. One can see that those countries who are leaders in health tourism marketing are good in giving health service care and using modern technological health equipments. The access to health services is a sign of standards and quality, which is the second factor to develop health tourism. Thus in order to develop health tourism access to health services should increase, high performance should be ensured with low costs. For the third factor to be implemented, first of all the existing health services should be qualified. If one location is good for some or all health services then this location will automatically host other tourists from other countries. Some medical tourists prefer another country because of the lower costs than in their own country. The results of this study also match with this fact. For example an MR in overseas can cost up to 250 Euro, whereas 50 Euro in Turkey.

Another main problem that is found as a result of this study is the lack of foreign language in between the medical staff. Most of the physicians and nurses can't speak a second language other than Turkish. Those hospitals who address health tourism should be aware of this reality and should employ staff according to these qualifications.

Health tourism which has been popular around the world for the last 10-15 years, is just becoming popular in Turkey. As this study shows health tourism is an alternative tourism

source for Turkey which will help Turkey gain another income. Along with this new health politics will develop, new treatment methods will be found and the quality of the health services given will be more qualified.

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