



Evaluation of Satisfaction Levels of Somalian Patients Coming to Turkey for Medical Tourism*

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Abstract

Aim: In this study, the satisfaction levels of Somali patients who came to Turkey for medical tourism were evaluated.

Methods: In this cross-sectional descriptive study, a questionnaire was used to collect data. The population of study consists of private and public hospitals operating in Istanbul and Ankara, which Somali patients prefer for medical tourism. In line with the data received from the Ministry of Health, the number of samples to be included in the study was determined as 337 to obtain 80% power at $\alpha=0.05$ level from a total of 2742 patients coming from Somalia for medical tourism in 2019. The questionnaires were administered face-to-face by the researcher between July 20, 2021,

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and May 20, 2022, in hospitals operating in Istanbul and Ankara, which are the most preferred hospitals for Somali patients.

Results: As a result of the study, It was determined that the majority of Somali patients who preferred Turkey mostly for IVF, urology and orthopedics treatments did not have health insurance and used intermediary organizations for their travels. The top three reasons with the highest satisfaction average are "Cheaper travel costs than other countries", "Cheaper doctor and fees/taxes" and "Feeling unsafe during treatment", while the reasons with the highest dissatisfaction average are "World-class doctors, nurses and medical staff", "High-tech medical equipment" and "Visually appealing physical facilities".

Conclusion: It was determined that the patients were satisfied with the service they received, would choose Turkey again for their treatment and would recommend it to others.

Keywords: Health tourism, medical tourism, satisfaction somalia patients, medical tourism in Turkey

INTRODUCTION

Medical tourism is a booming industry. Nowadays, people are in search of both to regain their health and to travel under favorable conditions and to have different vacation experiences. Medical tourism includes various travel activities to protect health, improve health or find solutions to health problems (Heung et al., 2010). Among the reasons that lead to medical tourism are dissatisfaction with the health services offered in their own countries or lack of service, the desire to access full, quality and fast health services, the desire to receive services from improved health technologies, the desire to receive health services at a cheaper price, the desire to get away from spatial problems, and the desire to take a vacation while receiving health services (Crooks et al., 2015). In 2019, the medical tourism market was valued at USD 104.68 billion and is estimated to be worth USD 273.72 billion by 2027 (Sanjivan Gill, 2020). This rate is important for developing Türkiye, where tourism revenues are 3.1% of GDP (TÜROFED, 2019). Futurologists predict that the medical tourism industry will be a promising sector and believe that it will be the highest value-added service sector through cross-industry convergence during the Fourth Industrial Revolution (Seo and Park, 2018). In this context, many governments around the world are keen to invest in and develop the medical tourism industry.

Medical tourism, which is included in the strategic plans of many countries, also has an important place in Turkey. The Turkish government has made significant progress in developing

medical tourism. With the Health Transformation Program, it has expanded the way for health tourism and tourism health (Turkish Health Foundation Report, 2010). The International Health Services Anomin Company (IHSAC), as a related organization of the Ministry of Health, started operations in 2019 to promote the services offered in Turkey in the field of international health services, to support and coordinate the activities of the public and private sectors for medical tourism, and to make recommendations to the Ministry on policies and strategies regarding international health services, service delivery standards and accreditation criteria (Ministry of Health IHSAC).

The cost of healthcare in Turkey is significantly lower than in developed economies in the US and Europe. Although healthcare businesses seem like a service sector, the devices and machines to perform the service affect the sector cost (Saraç, 2024). In addition to relatively low costs, the use of qualified doctors and advanced technology, Turkey ranks sixth in the world with 41 JCI accredited health institutions (United Arab Emirates 217, Saudi Arabia 108, Brazil 75, Thailand 62, India 5) and has an important place in medical tourism preference due to its easy access to Turkey, many spas, cultural, historical, and natural beauties (Bahar and Akyürek, 2022; JCI, 2024). In terms of medical tourism, Turkey is most preferred in the fields of gynecology, internal medicine, ophthalmology, medical biochemistry, general surgery, dentistry, orthopedics and traumatology, infectious diseases, and ear-nose-throat. In 2024, a total of 1.506.442 people came to Turkey to receive health care services and the revenue generated from these visits amounted to USD 3.022.957 thousand (Ministry of Health IHSAC). Turkey strives to be the best medical tourism destination in the world in medical tourism. According to the 2020-2021 ranking of the Medical Tourism Index, which evaluates the attractiveness of countries as medical tourism destinations, the top 10 countries for medical tourism in the world are Canada, Singapore, Japan, Spain, England, Dubai, Costa Rica, Israel, Abu Dhabi, and India. Turkey ranks 30th among 46 countries (Medical Tourism Index 2020-2021).

Medical tourism has many benefits for countries. Many developing countries associate medical care with tourism and try to further develop their economies (Iordache et al., 2013). Medical tourism contributes to economic diversification and increased profitability of the country by providing foreign exchange inflows, increasing employment of local people, improving the skills of local staff, encouraging investment in health services, improving the quality of medical and related services, and contributing to improving the national health of the country (Vovk et al.,

2021). For this reason, many countries are trying to develop medical tourism, transfer investments to this sector and attract foreign health tourists. Although Turkey has many advantages in terms of medical tourism, it is not at the desired level. Countries that come to Turkey for medical tourism are countries that have mostly Turkish population in their countries, whose health services are expensive, whose health insurance does not cover health services, who wait a long time for access to health services, who are Muslim, and who have bilateral agreements in the field of health (Tengilimoğlu, 2021). Somalia includes many reasons among the countries mentioned above and the reasons that lead to medical tourism. However according to Ministry of Health IHSAC data, 756,926 patients received health services in our country within the scope of health tourism and tourist health in 2019. According to the data received from the Ministry of Health, a total of 2,742 people came from Somalia for medical tourism in 2019 and 0.4% of the total medical tourists in Türkiye are Somali patients (Ministry of Health IHSAC). With this study, it was aimed to examine the satisfaction levels of Somali patients receiving services within the scope of medical tourism in Turkey regarding various dimensions of the service they received.

In addition, it was tried to determine the reasons for choosing Turkey for medical tourism, recommending Turkey to others, and coming back if needed. When the destination studies conducted for medical tourism to Turkey were examined, there were no studies conducted for Somali national patients. In this respect, this study is the first study in the literature. This study is important in terms of increasing destinations from Somalia to Turkey and discovering new country markets similar to Somalia by determining the reasons why Somali patients choose Turkey for medical tourism.

1. RESEARCH METHODOLOGY

The study was designed as cross-sectional and descriptive.

1.1. Working Group

Somali patients mostly prefer health institutions operating in the field of medical tourism in Istanbul and Ankara provinces in Turkey. Therefore, the population of study consists of private and public hospitals operating in Istanbul and Ankara, which Somali patients prefer for medical tourism. The power of the study is expressed as $1-\beta$ (β = probability of type II error) and in general, studies should have 80% power (Cohen, 1998; Bankır 2011). In line with the data received from the Ministry of Health, the number of samples to be included in the study was determined as 337

to obtain 80% power at $\alpha=0.05$ level from a total of 2742 patients coming from Somalia for medical tourism in 2019. In the study, convenience sampling method was used to determine the sample. In this context, the study was carried out in a total of 8 hospitals, including 4 private hospitals operating in Istanbul, 3 private and 1 state hospital operating in Ankara, which are mostly preferred by Somali patients.

1.2. Data Collection Tool and Collection of Data

A questionnaire was used as a data collection tool in the study. Since the questionnaires in the literature did not fully cover the purpose of the study, a new questionnaire created by the researcher was used in the study. In order to create the survey questions, both the studies conducted to determine the reasons for preference and satisfaction in medical tourism were examined and interviews were conducted with Somali patients on this subject. The questionnaire consists of 34 questions in total. While 17 questions that make up the questionnaire are aimed at determining the demographic information and reasons for preference of the patients, 17 questions are aimed at determining their satisfaction with the service they have received. The survey is a 5-point Likert type and is rated between "Very Dissatisfied", "Not Satisfied", "Not Sure", "I am satisfied", "Very Satisfied".

A pilot study was conducted with 15 people to determine whether the questionnaire was understandable. After the questions were understood by everyone, the questionnaires were applied face-to-face by the researcher between July 20, 2021, and May 20, 2022, to the participants who voluntarily wanted to participate in the study.

1.3. Ethical Aspects of the Study

Ethical Approval dated 14.06.2021 and numbered 08 was obtained from the Ethics Committee of a Ankara Yildirim Beyazit University to conduct the study. Before starting the study, the purpose of the study was explained to the participants and their verbal consent was obtained for voluntary participation in the study.

1.4. Data Analysis

Data were analyzed with IBM SPSS version 22 (IBM, Armonk, New York) statistical package program. Number, percentage, mean and standard deviation values were used to analyze descriptive data. The conformity of continuous variables (age, income) to normal distribution was analyzed graphically and by Shapiro-Wilk test. The result of the Reliability analysis conducted in

the study was $\alpha=0.806$. According to this result, the survey questions were found to be highly reliable.

2. ANALYSIS

The mean age of the participants was 34.8 years, 54% were male, 46% had postgraduate degrees, and the mean monthly income was \$921.39 (Table 1).

Table 1: Participant Characteristics

		N	%
Gender	Female	154	46
	Male	183	54
Educational Status	Primary school	57	16,9
	High School	76	22,6
	Graduate	64	19
	Postgraduate degrees	155	46,1
	Total	337	100
Mean and Standard Deviation			
Age (year)	34,88 ±10,49		
Income (\$)	921,39 ± 662		

63.2% of the participants stated that they had been to Turkey for medical treatment before and that they were currently in Turkey for medical treatment mostly for IVF (12.5%), urology (12.3%) and orthopedics (11.7%). It was observed that 54.9% of the participants received health care services outside of Turkey and Somalia and 32.6% of the participants did not prefer these countries they had previously visited because of "Recurrent errors during service delivery", 16% because of "Long waiting time for service delivery" and 15.4% because of "High cost of health services". 58.5% of the participants stated that they did not have health insurance, 53.7% stated that they used intermediary organizations for medical tourism travel, 42.6% stated that they found intermediary organizations somewhat useful for medical tourism travel, and 34.1% stated that hospital accreditation was effective in medical tourism travel preferences (Table 2).

38% of the participants stated that they received information about hospitals in Turkey through "Recommendations from friends and relatives" and 46.9% of the participants stated that they preferred hospitals in Turkey because of "Easy accessibility", 17.2% because of "High technology", 14.5% because of "Internationally renowned physicians" and 11.6% because of "Affordable costs". 77.2% of the participants stated that they would prefer Turkey again for their treatment and 75.4% would recommend Turkey to others for medical tourism (Table 2).

Table 2: Medical Tourism Experiences of Participants

		n	%			n	%
Having Health Insurance	Yes	140	41.5	Reason for Coming to Turkey for Medical Tourism	In Vitro Fertilization	42	12.5
	No.	197	58.5		Urology orthopedics	41	12.3
Previously Coming to Turkey for Medical Treatment	Yes	213	63.2		Checkup	29	8.6
	No	124	36.8		Heart diseases	23	6.8
Status of Receiving Health Services Outside Türkiye and Somalia	Yes	185	54.9		Hair Transplant	21	6.2
	No	152	45.1		Allergy	19	5.6
Status of Using Intermediary Institutions in Travels	Yes	181	53.7		Kidney failure	15	4.5
	No	156	46.3		Gynecology	13	3.9
Thoughts on How Helpful the Brokerage Firm is	Extremely Helpful	48	26.52		Nose Aesthetics	13	3.9
	Beneficial	41	22.65		Cardiology	9	2.7
	Somewhat Helpful	77	42.54		Bladder Tumor	9	2.7
	not helpful	15	8.29		Eye diseases	9	2.7
How to Obtain Information About Hospitals in Turkey	Recommendation from friends and relatives	128	38		Teeth and Mouth	9	2.7
	TV and radio news / Internet	96	28.5		Leukemia	7	2.1
	Recommendation from a doctor in your country	64	19		Diabetes	6	1.8
	International Promotion Fairs	34	10.1		Ear Nose Throat	6	1.8
	Other*	15	4.5		Lung Disease	5	1.5
Reasons Why Participants Do Not Now Prefer the Country They Previously Visited for Medical Tourism	Recurrent errors when performing services	110	32.6		Cerebral palsy	5	1.5
	Long waiting hours for the service to be performed	54	16		Gastrology	4	1.2
	Other *	54	16		Tourism	4	1.2
	High cost of healthcare	52	15.4	Pediatry	4	1.2	
	Lack of Health Technologies and equipment	36	10.7	dementia	3	0.9	
	Concerns about the accuracy of diagnosis made by physicians	27	8	Prostate cancer	one	0.3	
	Mistreatment of staff	4	1.2				
Reasons to Choose Turkish Hospitals				The Situation of Preferring Turkey Again	Yes	260	77.2
	Easily accessible	158	46.9		No	77	22.9
	Having high technology	58	17.2	Status of Recommending Turkey for Medical Tourism	Yes	254	75.4
	Having famous physicians in the international arena	49	14.5		No	83	24.7
	Affordable costs	39	11.6	The Role of Hospital Accreditation in Medical Tourism	Yes	115	34.1
	High recognition	31	9.2		No	91	27
Other	2	0.6	Travel Preferences	I don't know about accreditation	131	38.9	

The highest three satisfaction rates of the participants were determined as 65% (n: 219) "Cheaper travel costs than other countries", 64.3% (n: 217) "Cheaper doctor and fees/taxes" and 61.7% (n: 208) "Feeling unsafe during treatment", respectively. The lowest three satisfaction rates of the participants were determined as 42% (n: 144) "Since English is widely used in Turkey, communication is not a barrier", 43% (n:145) "World-class doctors, nurses and medical staff" and "Less waiting time", respectively (Table 3).

Table 3: Frequency Information Regarding Service Satisfaction Questions

	Very Dissatisfied n (%)	Not Satisfied n (%)	Not Sure n (%)	I am satisfied n (%)	Very Satisfied n (%)
World-class doctors, nurses and medical staff	142 (42.1%)	32 (9.5%)	18 (5.3%)	112 (33.2%)	33 (9.8%)
High-tech medical equipment	123 (36.5%)	37 (11%)	21 (6.2%)	126 (37.4%)	30 (8.9%)
Visually appealing physical facilities	60 (17.8%)	78 (23.1%)	42 (12.5%)	112 (33.2%)	45 (13.4%)
Fast provision of requested services	48 (14.2%)	70 (2.8%)	49 (14.5%)	130 (38.6%)	40 (11.9%)
Quality service	25 (7.4%)	74 (22%)	53 (15.7%)	104 (30.9%)	81 (24%)
Less waiting time	17 (5%)	84 (24.9%)	91 (27%)	92 (27.3%)	53 (15.7%)
Quality of patient care	14 (4.2%)	43 (12.8%)	86 (25.5%)	117 (34.7%)	77 (22.8%)
Affordable cost of medical treatment	17 (5%)	36 (10.7%)	93 (27.6%)	156 (46.3%)	35 (10.4%)
Cheaper doctor and fees/taxes	24 (7.1%)	25 (7.4%)	71 (21.1%)	169 (50.1%)	48 (14.7%)
Cheaper travel costs than other countries	44 (13.1%)	45 (13.4%)	67 (19.9%)	103 (30.6%)	78 (23.1%)
Extras such as airport services and visa extension services	44 (13.1%)	45 (13.4%)	67 (19.9%)	103 (30.6%)	78 (23.1%)
Special prices for various medical treatment packages	37 (11%)	65 (19.3%)	39 (11.6%)	110 (32.6%)	86 (25.5%)
Religious and cultural affinity	51 (15.1%)	52 (15.7%)	33 (9.8%)	101 (30%)	100(29.7%)
Free/affordable post-treatment travel tours	51 (15.1%)	59 (17.5%)	48 (14.2%)	87 (25.8%)	92 (27.3%)
Since English is widely used in Turkey, communication is not a barrier	52 (15.4%)	82 (24.3%)	59 (17.5%)	95 (28.2%)	49 (14.5%)
Feeling unsafe during treatment	57 (16.9%)	45 (13.4%)	27 (8%)	143(42.4%)	65 (19.3%)

Note: To calculate highest and lowest satisfaction, the statements "I am satisfied" and "Very Satisfied" were summed. To calculate highest and lowest dissatisfaction, the statements "Very Dissatisfied" and "Not Satisfied" were summed.

The highest dissatisfaction rates of the participants were determined as 51.6% (n: 174) "World-class doctors, nurses and medical staff" 47.5% (n: 160) "High-tech medical equipment"

and 40.9% (n: 138) "Visually appealing physical facilities" respectively. The lowest three dissatisfaction rates of the participants were determined as 14% (n: 49) "Cheaper doctor and fees/taxes", 16% (n:53) "Affordable cost of medical treatment" and %17 (n:57) "Quality of patient care", respectively. (Table 3).

3. DISCUSSION

In the study, the satisfaction levels of Somali national patients who receive services within the scope of medical tourism in Turkey towards various dimensions of the service they receive, their reasons for choosing Turkey for medical tourism, their recommendation of Turkey to others and their status of coming again if needed were determined. As a result of the study, it was determined that the majority of Somali patients coming to Turkey for medical tourism were male (54.3%), had postgraduate education, average age was 35 years and average monthly income was \$921.39. In the studies conducted, it was seen that the patients benefiting from medical tourism in Turkey were mostly male, in the middle age group, with a high level of education (Kılınç, 2017; Balcı, 2019; Cemali ve Derin 2019; Aydın ve Demirel 2011). On the contrary, in the study conducted by Polat and Aydın (2021) it was seen that patients coming for medical tourism were generally female. In line with these findings, it can be said that male patients who have more freedom to travel than women, patients with higher education levels who can do more research and have a higher level of awareness than people with low education levels, and middle-aged patients prefer medical tourism more because middle-aged patients may have better travel opportunities. Accordingly, medical tourism marketing studies can be conducted for this target market.

It was determined that the majority of Somali patients (58.5%) who preferred Turkey for IVF (12.5%), urology (12.3%) and orthopedics (11.7%) treatments did not have health insurance and used an intermediary organization for their travels (53.7%). The clinical branches chosen by Somali patients for medical tourism in Turkey are similar to the clinical branches preferred for medical tourism in Turkey published by the Ministry of Health. Therefore, the Ministry of Health can further develop medical tourism in this respect (Ministry of Health IHSAC).

In the study conducted by Akdu (2014), it was determined that patients applied individually for medical travel (72%) and used intermediary organizations very little (6.3%), which was not similar to our study results. On the contrary, in the study conducted by Balcı (2019), similar to our study, it was observed that the majority of patients (31.1%) made their medical travels with an

intermediary organization. In our study, Somali patients generally found the intermediary organizations they used in medical tourism travel useful. Intermediary organizations that provide the integration of tourism and health sector play an important role in the destination decision of health tourists, during and after the destination (Bayrak, 2020). Therefore, there is a need for more intermediary organizations in Turkey that can attract patients from the medical tourism market in the international arena, both quantitatively and qualitatively.

In our study, it was determined that patients generally utilized the recommendations of their relatives (38%) and television, radio, and internet (28.5%) in choosing a hospital in Turkey. In studies conducted in the literature, similar to our study, it was determined that patients generally have information about hospitals through television, radio, internet, and recommendations of their relatives (Balci, 20019; Cemali, 2019). In line with these findings, it can be concluded that the recommendations of relatives and relatives as well as social media are important in the selection of destinations and hospitals in medical tourism. Therefore, if the patients who come for medical tourism leave the country satisfied, this may lead to more patients coming to the country.

Somali patients preferred hospitals in Turkey because they are easily accessible (46.9%), have high technology (17.2%), have international, famous physicians (14.5%) and affordable costs (11.6%). In a study by Aksoy and Süreyya (2019), similar to our study, the main reasons for patients to choose Turkey for medical tourism were trust in Turkish doctors and healthcare personnel (45.9%) and low treatment costs (40.32%). In another study, the reasons for choosing Turkey for medical tourism were the affordable prices (48.98%), the expertise of the medical staff (42.86%) and the ease of transportation (40.82%) (Demir 2020).

Gündüz et al. (2019) found in their study that physical proximity, visa facilities, low cost and accessibility factors are effective in choosing Turkey for medical tourism. These results are consistent with the results of the study. In addition, these results show that medical tourism in Turkey has the opportunity to reach European, Asian, Middle Eastern and African countries, especially by using the advantage of its geographical location.

In a study conducted by Akdu (2014), it was stated that factors such as cost and waiting time, similarity of belief, technological infrastructure, flight time, customer experience, tourism attractiveness, legal and ethical restrictions were important in choosing hospitals in Turkey. These results are consistent with the reasons for Somali patients' preference for "easy accessibility", "having high technology", "religious and cultural proximity" in our study. In the study conducted

by Aydın and Karamehmet (2017), it was determined that cost reduction and legal regulations were effective for medical tourism to choose Turkey. Another important finding of our study is that Somali patients who previously went to the country for medical tourism do not prefer it now because of recurring errors (32.6%), long waiting time (16%), high cost (15.4%), lack of equipment (10.7%) and concerns about the diagnosis made by physicians (8%). Turkey has the potential to address all the reasons for non-preference found in our study. Therefore, it can attract more patients from the medical tourism market by improving the preferred reasons.

Some of the Somali patients (38.9%) stated that they did not know what accreditation was, while others (34.1%) stated that hospital accreditation was effective in their medical tourism travel preferences. In their study, Forgione and Smith (2007) found that the economic situation of the country, political environment, and regulatory standards as well as hospital accreditation and related factors stand out among the factors affecting hospital choice for medical tourism. Accordingly, the results obtained by Smith and Forgione are similar to the results obtained in this study.

The top three reasons with the highest satisfaction average were "Cheaper travel costs than other countries", with rate of 65% "Cheaper doctor and fees/taxes" with rate of 64.3% and "Feeling unsafe during treatment", with rate of 61.7% . The reason with highest dissatisfaction rate was determined as "World-class doctors, nurses and medical staff" with rate of 51.6%, "High-tech medical equipment" with rate of 47.5% and "Visually appealing physical facilities" with rate of 40.9%. It is a remarkable finding that Somali patients prefer hospitals with high technology (47,5%) and internationally renowned physicians (51,6%), while their satisfaction rates with these two factors are lower. In line with these findings, it can be concluded that hospitals can make improvements both in the field of technology used and in the health personnel employed to ensure that they are preferred by more health tourists. Somali patients who came for medical treatment stated that they would prefer Turkey again for their treatment (77.2%) and would recommend it to others for medical tourism (75.4%). Similar to this study, Demir (2010) also found a significant and positive relationship between patient satisfaction and intention to receive services again. When the destination studies conducted for medical tourism in Turkey are examined, there are no studies conducted for Somali patients.

4. CONCLUSIONS

Globalization has affected the political, economic, and socio-cultural characteristics of countries all over the world since the 1970s. One of the important issues related to this transformation is the development of medical tourism. Although the concept of medical tourism is not a result of globalization, it has turned into a major service export all over the world. Some countries focus on medical tourism to gain a competitive advantage among other countries. Turkey has many advantages to be one of the top countries in medical tourism.

The rapprochement between Somalia and Turkey continues to develop in many fields such as health, economic, social, and military. Both Turkey and Somalia are among the patron members of the Organization of Islamic Cooperation. Somalia's embassy in Turkey provides ease of access for patients. While Somali patients previously preferred to go to countries such as India, Germany, and Malaysia for medical tourism, today they have started to prefer Turkey because of its religious, cultural, ease of travel, low cost, general quality of care and ease of access. In this study, it was tried to determine the satisfaction levels of Somali patients who receive services within the scope of medical tourism in Turkey towards various dimensions of the service they receive. In addition, it was tried to determine the reasons for choosing Turkey for medical tourism, recommending Turkey to others, and coming back if needed. The study aimed to increase destinations from Somalia to Turkey by determining the reasons why Somali patients choose Turkey for medical tourism and to discover new country markets similar to Somalia.

As a result of the study, it was determined that Somali patients were satisfied with the service they received and would recommend Turkey to others and would like to come again if needed. In the study, it was also determined that they preferred Turkey because of "Easy accessibility", "Having high technology", "Having internationally renowned physicians", "Affordable costs" and were mostly satisfied with "Cheaper travel costs than other countries", "Cheaper doctor and fees/taxes" and "Feeling unsafe during treatment". As a result of the findings of the study, the following recommendations were made to increase destinations from Somalia to Turkey and to explore new country markets similar to Somalia.

- It is a remarkable finding that Somali patients prefer hospitals with high technology and internationally renowned physicians, but their satisfaction rates with these two factors are lower. In order for hospitals to be preferred by more Somali health tourists, improvements can be made both in the field of technology used and in the health personnel employed.

- Especially since satisfied patients have an important place in terms of word-of-mouth marketing, improvement studies can be carried out on the factors that cause dissatisfaction of dissatisfied health tourists. In this way, it can ensure that patients coming for medical tourism leave satisfied and more health tourists come to the country. It can make it more attractive for Somali patients to prefer Turkey as a medical destination.

- The Ministry of Health can conduct inspections and develop incentives to ensure that intermediary organizations increase both quantitatively and qualitatively.

- Doctors and other health personnel can be trained on communication to increase the satisfaction of Somali patients.

- Turkey ranks 6th in the world in terms of the number of hospitals with JCI accreditation certificate and the highest number of accredited hospitals is in Istanbul and second in Ankara. However, this is not sufficient, and the number of accredited hospitals accepted by international organizations should be increased. Conducting accreditation studies by TÜSEB is an important opportunity for the development of the medical tourism market in Turkey.

There are no studies in the literature on the satisfaction of Somali patients regarding their destinations in other countries. According to the data of the Ministry of Trade, it is reported that patients coming to Turkey for medical tourism mostly come from Germany, the United Kingdom, Russia, Azerbaijan, Kazakhstan, Turkmenistan, Uzbekistan and Afghanistan (Ministry of Trade, 2024). However, the studies conducted have not focused on patients coming to our country from a specific country and/or region for medical tourism. The studies have mostly been conducted with patients coming from Europe, America and Arab countries (Akdu, 2014; Aksoy ve Süreyya, 2019; Aydın ve Demirel, 2017; Polat ve Aydın, 2021). Studies investigating the satisfaction of patients from African countries to our country with medical tourism are limited. Attracting patients for medical tourism from African countries such as Somalia, where bilateral cooperation is established on many issues, may increase our market share. In the studies to be conducted from now on, examining the satisfaction levels of patients coming for medical tourism and the reasons for choosing our country on a country basis may provide important evidence for the applications to be made for the target market.

In this respect, although this study is the first and important study in the literature, it has some limitations. This study is limited to Somali patients coming from Somalia for medical tourism in Turkey. In addition, the study is limited to private and public hospitals operating in Istanbul and

Ankara provinces, which are most preferred by Somali patients for medical tourism. Therefore, this study cannot be generalized both for all patients coming to Turkey for medical tourism and for all Somali patients.

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