MEDICAL TOURISM: INDIA AS A QUALITY HEALTHCARE DESTINATION

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ABSTRACT

Medical tourism is a fast growing multibillion-dollar industry around the world and it entails trade in services of two major industries i.e. medicine and tourism. India is currently promoting medical tourism aggressively. The present study presents an overview of medical tourism in India and presents a SWOT analysis. Medical tourism comprises a phenomenon where over five million patients a year are traveling across international borders to obtain various forms of health care. Most of these patients travel from developed countries to developing countries, seeking highly invasive medical treatments to less invasive and recreational medical procedures. By the year 2015, the medical tourism industry generated over $200 billion with over 50 countries making it a priority in trade for their country. With active government promotions, India has become one of the leading destinations for medical tourism. The study seeks to answer: Why do medical tourists seek treatment in India and what are the issues and challenges they face before coming to India as well as while in India?

Reasons for choosing India as destination is because of the high quality of the doctors and medical facilities in India and affordable cost of treatments along with availability of specific treatments that might not have been available in their home countries. Patients also researched the subject thoroughly before they came to India, primarily from the Internet, print media, television shows and friends. Most of them felt that they could get treatment because of their positive opinion on medical tourism, their ability to get treatment if they desired, and support from their families and loved ones.

Keywords: Medical tourism; Patients; Healthcare

INTRODUCTION

After the silicon rush India is now considered as the golden spot for treating patients mostly from the developed countries and Far East for ailments and procedures of relatively high cost and complexity. India is also aggressively promoting medical tourism in the current years and slowly now it is moving, into a new area of ‘medical outsourcing’, where subcontractors provide services to the overburdened medical care systems in western countries. India’s National Health Policy declares that treatment of foreign patients is legally an ‘export’ and deemed eligible for all fiscal incentives extended to export earnings. Government and private sector studies in India estimate that medical tourism could bring around $5 billion US dollar into the country by 2015.
The study aims to show why India is attracting medical tourists, is it really a secure destination and how India can promote and develop this particular activity in the coming years so as face competition given by other Asian and African options.

**OBJECTIVE**

This research on medical tourism provides information on what countries medical tourists most often come from and for what types of treatments and reasons. It also indicates what reasons are more or less important in a medical tourist’s decision to pursue medical tourism.

**RESEARCH QUESTIONS**

1. Who are interested in seeking medical treatment in India?
2. What type of treatment these medical tourists are looking for?
3. What are their reasons to pursue medical tourism in India?

**LITERATURE REVIEW**

Medical tourism happens when patients go to a different country for either urgent or elective medical procedures. This phenomenon is fast becoming a worldwide, multibillion-dollar industry. The reasons patients travel for treatment vary. Many medical tourists from the United States are seeking treatment at a quarter or sometimes even a 10th of the cost at home. From Canada, it is often people who are frustrated by long waiting times. From Great Britain, the patient can't wait for treatment by the National Health Service but also can't afford to see a physician in private practice. For others, becoming a medical tourist is a chance to combine a tropical vacation with elective or plastic surgery. And moreover patients are coming from poorer countries such as Bangladesh where treatment may not be available and going for surgery in European or western developed countries is expensive.

Medical tourism is a concept which is actually thousands of years old. In ancient Greece, pilgrims and patients came from all over the Mediterranean to the sanctuary of the healing god, Asculapius, at Epidaurus. In Roman Britain, patients took a dip in the waters at a shrine at Bath, a practice that continued for 2,000 years as it was believed that the waters had a healing property. From the 18th century wealthy Europeans travelled to spas from Germany to the Nile. In the 21st century, relatively low-cost jet travel has taken the industry beyond the wealthy and desperate. Countries that actively promote medical tourism include Cuba, Costa Rica, Hungary, India, Israel, Jordan, Lithuania, Malaysia and Thailand. Belgium, Poland and Singapore are now entering the field. South Africa specializes in medical safaris-visit the country for a safari, with a stopover for plastic surgery, a nose job and a chance to see lions and elephants.

**INDIAN TOURISM: AN OVERVIEW**

Tourism will expand greatly in future mainly due to the revolution that is taking place on both the demand and supply side. The changing population structure, improvement in living standard, more disposable income, fewer working hours and long leisure time, better educated people, ageing population and more curious youth in the developed as well as developing countries, all will fuel the tourism industry growth. The arrival of a large number of customers, better educated and more sophisticated, will compel the tourist industry to launch new products and brands and re-invents traditional markets. The established traditional destinations founded on sun-sea-sand products will have to re-engineer their products. They must diversify and improve the criteria for destinations and qualities of their traditional offers. Alongside beach tourism, the tourism sector will register a steady development of new products based on natural rural business, leisure and art and culture.

It is India’s vastness that challenges the imagination: the sub-continent, 3200km (2000 miles) from the mountainous vastness of the Himalayas in the north to the tropical lushness of Kerala in the south, is home to one sixth of the world’s population, a diverse culture and an intoxicatingly rich history. We have a wealth of archeological sites and historical monuments. Manpower costs in the Indian hotel
industry are one of the lowest in the world. This provides better margins for any industry which relies on man power.

**SWOT ANALYSIS**

**Strengths**

1. Quality Service at Affordable Cost
2. Vast supply of qualified doctors
3. Strong presence in advanced healthcare e.g. cardiovascular, organ transplants – high success rate in operations
4. International Reputation of hospitals and Doctors
5. Diversity of tourism destinations and experiences

**Weaknesses**

Lack of adequate infrastructure is the biggest problem that India faces. The aviation industry in India, for example, is inefficient and does not provide even the basic facilities at airports. The visitors are appalled by the poor sanitation in the public restrooms at the international airports. The road condition in India is very worse. The population has grown exponentially since 1947 but we still use the same rail system constructed by the British. No strong government support / initiative to promote medical tourism blow. Co-ordination among the various players in the industry like airline operators, hotels and hospitals is required. Customer Perception as an unhygienic country is required. No proper accreditation and regulation system for hospitals Lack of uniform pricing policies across hospitals

**Threats**

Political turbulence within India in Kashmir and Gujarat has also reduced tourist traffic. Not only are those fears of epidemics such as for malaria, cholera, dengue, plague etc. foremost in the mind of European and American patients. Aggressive strategies adopted by other countries like Australia, Singapore in promoting tourism are also not helping.

**Opportunities**

The demand for Indian healthcare services primarily comes from three types of consumers. The main consumer group is NRIs, Non-residential Indians as they have an additive advantage of visiting their families and relatives. The other group is from countries with underdeveloped facilities because they get a quality healthcare in India at affordable prices, which is way too expensive in developed countries. The third group is from developed countries because of their interest in saving money and low cost.

**COMPARISON: BETWEEN INDIA & OTHER COUNTRIES**

The comparative study of procedure charges of three countries like India, Thailand and Singapore as compared to charges in USA. These three countries are attracting more medical tourists in recent years because of their good infrastructure facilities and healthcare facilities. When we look at the charges for the procedures it is clearly evitable that in India the treatment cost is least as compared to Thailand and Singapore as well. For example heart bypass procedure charges in India is 10000$ while in Thailand and Singapore it is 11,000 and 18,000 $ respectively.

The comparative study of the dental procedure charges between USA and India. When looking at the table we can see that even in USA there is a huge difference in treatment charges amongst top end dentists and general dentists. The dental procedure charges in India are almost three to four times less when compared with the charges from USA. Especially the cosmetic procedures like tooth colored composite fillings or tooth whitening procedures the charges have a significant difference. The charges
vary from 100 $ to 350$ to 800$ in India, in a simple dental clinic in USA and in a high end dental clinic in USA respectively. The other very expensive procedure is tooth implants. Implants procedure will cost around 800$ in India while in USA it will cost around 3500$, which is almost four times as compared to India.

Advantages
Since labor is cheap as well as the cost of living, even with the low charge for treatments, private corporations are making large profits. Medical tourism is advantageous to not only the supplier, but also the clients. The relative affordability of medical tourism brings many clients facing prohibitive out-of-pocket expenses in their home country because either their insurance does not cover/pay the needed procedure or they are uninsured altogether.

Disadvantages
A lack of insurance portability discourages some prospective clients from obtaining treatment in developing countries Potential follow-up care is another drawback. If a complication arise after a patient returns home, immediate medical attention is difficult to obtain.

RESEARCH METHODOLOGY
Descriptive designs: It is a type of Non Experimental Quantitative Research design. It is often a preliminary to co relational research or to experimental studies. They also provide a knowledge base when a research problem needs to be refined, when hypotheses need to be formulated or data collection and analysis procedure needs to be designed. The motive behind the patient satisfaction survey in the medical tourism is to find out the issues or factors of dissatisfaction in terms of different services and medical care provided to the patient and to obtain appropriate feedbacks and suggestions from the patient or patient parties to improve services. A questionnaire was prepared keeping in mind all the points which the patient or their families faced during their visit to the other countries for the treatments.

Questionnaire was emailed to Total 44 patients out of which 30 reviews were received therefore sample of 30 patients was taken. All those feedback forms were put together into a tabular and graphical representation for better understanding. Given the limited time and resources available for this study the sample size and the number of responders is not as important as is the focus to target right kind of responders.

Methods of Data collection
Data collection was done by the “Convenience Sampling method” which is a Non probability sampling technique. This study has focused on gathering data through tailored questionnaires to understand the consumer preferences within the limiting schedule for data collection. Primary Data was obtained by semi structured questionnaire method sent through emails. Secondary Data was obtained from books, documents (for example, published statistics and annual reports), journals, business periodicals, documentary films and internet. This research uses data from both primary and secondary sources. The participants were chosen based on availability at the hospitals and willingness to respond to the researcher’s emails.

Data analysis & Findings
The maximum patients coming to India as medical tourists are middle aged people (33.3%) which are under the age of 40 – 50 years, while the young age patients i.e. 20 – 30 years are very less only 6.6%. The male patients were 73.3% and female patients were 23.6%. The maximum patients are coming here for the cardiac treatments (30%), while minimum patients have come for ENT treatments (only 6.6%).

Second most are for orthopedic treatments and orthopedic surgeries (26.6%). Dental treatments and other cosmetic treatments and surgeries have 13 – 13 % share overall and organ transplants have 10 %
share. It clearly shows that the cardiac treatment and services are the most availed treatment facilities like open heart surgeries & valve replacements etc. study revealed that the heart procedures like CABG costs almost one third of the cost as compared to developed countries.

As per data maximum number of patients are coming from foreign countries to avail treatment in India are NRIs (Non-residential Indians) who have families or relatives in India and this gives them additional advantage of meeting with their families or relatives. NRIs share in medical tourists is 43.33% (13 out of 30 samples). Respectable number of patients comes from USA and UK which is 20% and 18.6% respectively. While patients from Myanmar and South Africa come to India because of the better treatment facilities they get as compared to their countries.

Maximum numbers of patients (30%) have considered Singapore as medical tourism destination because infrastructure facilities and healthcare quality in Singapore is better than that in India. While least considered destination as Hungary (3.3%). Hong Kong, Malaysia and Thailand are also considered as a medical tourism destination because in these countries also they have better healthcare facilities and infrastructure facilities.

Under medical tourism most of the times, patients do not get complete insurance coverage by insurance companies because there are different laws and setups of the insurance companies in different countries. In India there is still a setback of health insurance. In recent years some of the health insurance companies have come up like MAX BUPA, etc.

Out of these 30 samples 16 out of 30 i.e. 53.3% had their full treatment covered under medical insurance. While 20% patients of them, did not have any health insurance coverage and 26.6% patients’ treatments were partially covered by health insurance and 14 out of 30 means 46% patients were accompanied by their families while 33% (10 out of 30) were accompanied by their friends. Only 20% patients came alone for the trip. According to the survey, the patients were satisfied with the services provided by the hospital. They found the medical professionals, paramedical and other staff to be caring in their approach. Also they are satisfied with the idea of medical tourism.

**SCOPE FOR IMPROVEMENT**

1. Healthcare infrastructure
2. Foreign exchange facilities within the premises
3. Provision of alternative form of therapies
4. Admission and discharge facilities
5. online registration facilities and pre-consultation facilities
6. Assistance in obtaining medical visa and legal assistance
7. Travel information desk assistance
8. Tie up with external travel agencies

**CONCLUSION**

It is observed from the survey that the patients coming for the medical treatment from other countries are quite satisfied with the services of our hospitals. It is also seen that still there is scope of improvement in infrastructure facilities. Hospitals are lagging behind in terms of foreign exchange facilities, online registration and pre consultation facilities, and follow up facilities. Admission and discharge procedures and insurance facilities, travel desks and travel agency tie ups.

There is also a need to develop supporting infrastructure such as transport services to facilitate tourism in India. The tourism, health, information and communication departments need to work in tandem for
efficient patient care. Also attaining the accreditation/standard to reassure the quality of treatments as well as emphasizing on the needs and demands of the existing target markets must be incorporated. As patients are the best ambassadors, it is important to take care of their needs and provide them with best possible care. Every satisfied customer brings thousand new customers.

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