

Formative Research on Medical Tourism in Thiruvananthapuram District*

Project No. 6098

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1. Background

Due to globalization and increasing demand for health services made developing countries like India which has good infrastructure and services as an attractive destination for low cost health services for the tourists from developed countries (Mochi P, Shetty N and Vohoniya D, 2013).

Patients from developed countries travel to India to avoid waiting time for medical procedures for common ailments (Gupta AS, 2008). Along with the modern medicine, India has become a destination in the world for alternative medicine such as Yoga (Trivedi, M, 2013).

There are also benefits for the visitors/ patients in terms of money and no waiting for the services. Many at times people get more choices for treatment. (Smitha et al. 2011)

To attract international clients for Medical Tourism, hospitals and clinics in India use variety of messages (Valorie et.al 2011).

In Europe, patients avail medical treatments either as a citizen of EU in other member state for reimbursement or pay out of pocket while accessing dental, cosmetic and elective surgeries. The outcomes depend on the settings and procedures (Lunta and Carrerab, 2010).

This is some extending true in India. Some of the European clients have insurance coverage and some pay on their own.

The cross border mobility for healthcare depends on availability, affordability, familiarity, quality and insurance coverage (Glinos et al. 2010)

There are frameworks to analyse the interrelated concepts and dimensions for cross-border mobility of patients (Legido-Quigley et al. 2012).

Medical Tourism now is better understood by its alternative terminology, 'transnational health care' (Mainila et al. 2012)

Table 1 Foreign Tourist Arrivals in India according to purpose of visit 2009-2013

| Year | FTAs(Numbers) | Medical Treatment(%) |
|------|---------------|----------------------|
| 2009 | 5167699 | 2.2 |
| 2010 | 5775692 | 2.7 |
| 2011 | 6309222 | 2.2 |
| 2012 | 6577745 | 2.6 |
| 2013 | 6967601 | 3.4 |

It has increased from 5 million to 7 million

Figure 1 FTAs (Numbers)

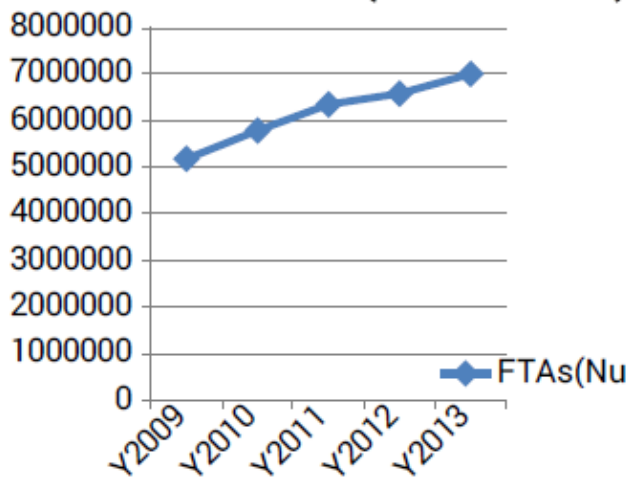
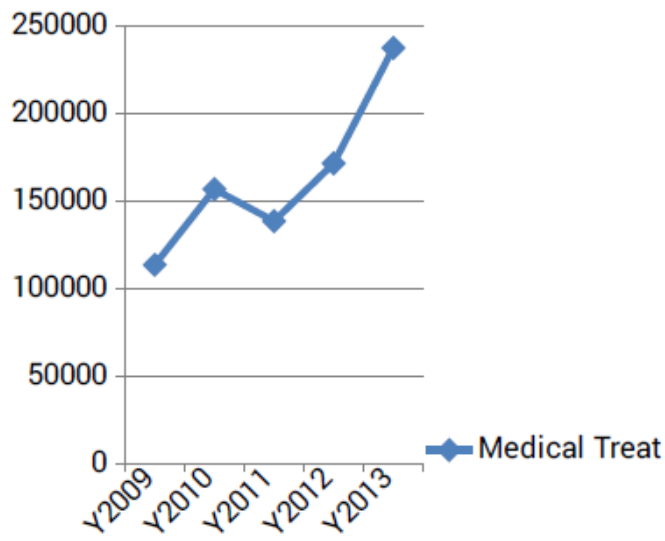


Figure 2 Medical Treatment (Numbers)



AMCHSS, Sree Chitra Tirunal Institute MST

Table 2 FTA according to purpose 2013

| Country of Natinality | FTAs(Numbers) | Medical Treatment(%) |
|-----------------------|---------------|----------------------|
| Canada | 255222 | .4 |
| USA | 1085309 | .3 |
| Argentina | 10325 | .4 |
| Brazil | 18551 | .2 |
| Mexico | 13074 | .1 |
| Other South America | 26486 | .6 |
| Austria | 36465 | .6 |
| Belgium | 38091 | .2 |
| Denmark | 30842 | .3 |
| Finland | 21212 | .2 |
| France | 248379 | .2 |
| Germany | 252003 | .4 |
| Greece | 7983 | .2 |
| Ireland | 27174 | .3 |
| Italy | 93951 | .2 |
| Netherlands | 69547 | .2 |
| Norway | 21462 | .4 |
| Portugal | 29612 | .4 |
| Spain | 62079 | .2 |
| Sweden | 48826 | .3 |
| Switzerland | 48821 | .7 |
| UK | 809444 | .3 |

Source: India Tourism Statistics 2013, http://tourism.gov.in/writereaddata/CMSPagePicture/file/marketresearch/publications/IndiaTourismStatistics2013_1.pdf accessed on 19/06/2015

| Country of Natinality | FTA (Numbers) | Medical Treatment (%) |
|-----------------------|---------------|-----------------------|
| Other West Europe | 9975 | .5 |
| Czech Rep | 10121 | .3 |
| Kazakhstan | 14680 | 4.3 |
| Poland | 23785 | .3 |
| Russian Fed | 259120 | 2.1 |
| Ukraine | 31826 | 1.8 |
| Other East Europe | 65551 | 7.8 |
| Egypt | 15062 | 1.1 |
| Kenya | 40484 | 9.2 |
| Mauritius | 27418 | 5.1 |
| Nigeria | 34522 | 42.4 |
| South Africa | 58023 | .9 |
| Sudan | 879 | 9.1 |
| Tanzania | 23345 | 18.5 |
| Other Africa | 67639 | 13.9 |

Source: India Tourism Statistics 2013, http://tourism.gov.in/writereaddata/CMSPagePicture/file/marketresearch/publications/IndiaTourismStatistics2013_1.pdf accessed on 19/06/2015

| Country of Nationality | FTA (Numbers) | Medical treatment (%) |
|------------------------|---------------|-----------------------|
| Bahrain | 10531 | 5.1 |
| Iraq | 41218 | 53.5 |
| Israel | 48737 | .2 |
| Oman | 62252 | 12.5 |
| Saudi Arabia | 42892 | 5.0 |
| Turkey | 25022 | .2 |
| UAE | 51513 | 8.0 |
| Yemen | 25019 | 13.3 |
| Other West Asia | 35929 | 3.1 |
| Afghanistan | 111370 | 45.3 |
| Iran | 30527 | .9 |
| Maldives | 45270 | 50.1 |
| Nepal | 113790 | 8.6 |
| Pakistan | 111794 | 2.6 |
| Bangladesh | 524923 | 6.8 |
| Sri Lanka | 262345 | 1.5 |
| Bhutan | 15016 | 4.6 |
| Indonesia | 33747 | .9 |
| Malaysia | 242649 | .6 |
| India | 24916 | .5 |
| Philippines | 42224 | .5 |
| Singapore | 143025 | .4 |

Source: India Tourism Statistics 2013, <http://tourism.gov.in/writereaddata/CMSPagePicture/file/marketresearch/publications/india-tourism-statistics-2013-1.pdf> accessed on 19/06/2015

| Country of Nationality | FTA (Numbers) | Medical Treatment (%) |
|--------------------------|---------------|-----------------------|
| China | 174712 | .1 |
| China(Taiwan) | 35491 | .1 |
| Japan | 220283 | 0 |
| Rep. Of Korea | 112619 | .1 |
| Other East Asia | 4200 | 9.8 |
| Australia | 218967 | .3 |
| New Zealand | 40801 | .3 |
| Other Australasia | 3806 | 13.7 |
| Not Classified elsewhere | 23333 | 1.0 |
| Grand Total | 6967601 | 3.4 |

Source: India Tourism Statistics 2013, <http://tourism.gov.in/writereaddata/CMSPagePicture/file/marketresearch/publications/india-tourism-statistics-2013-1.pdf> accessed on 19/06/2015

a. Foreign Tourist Arrivals in India

Foreign Tourists arrivals reduce from the month of April to September every year In terms of the ranks of foreign tourist visiting India, USA tops. UK is in 2nd Position, while Russia is in 5th, followed by Canada 6th, Germany 7th, and France 8th. (In terms of source of countries for FTAs in India during 2013).

Methodology

b. Objective

To understand the patterns of Medical Tourism in Thiruvananthapuram district

c. Participants

The service providers of Medical Tourism packages in Thiruvananthapuram District.

(The institutions providing such services in Trivandrum - Kovalam and Varkala.)

d. Sampling

A list of Ayurvedic Health resorts from Poovar, Kovalam and Varkala was generated from - Kerala tourism website, the hotelier association and location specific websites such as kovalam.com and other sources. In the final list there were 113 resorts first, a number between 1 and 10 was randomly picked up from random table.

Then 113 was divided by 25 = 5 (sample size) (approximately). The resort with the random number was first picked up from the first number, every fifth resort was included. The process continued until we reached the 25th resort.

2. Methodology

Number of persons interviewed was 24. Interviews were conducted among the administrators of Medical Tourism services in selected institutions.

a. Inclusion Criteria

The institutions providing Medical Tourism Packages

The respondent was briefed about the informed consent process before collecting the data.

Data was collected only from those who consented to participate

b. IEC clearance

Institute Ethics committee of Sree Chitra Tirunal Institute for Medical Sciences and Technology, given clearance to conduct the study.

Reference Number:

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c. Funding

This is funded by Sree Chitra Tirunal Institute for Medical Sciences and Technology under the Internal Research funding for the faculty members of the institute.

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University of Oxford

Table 3 Profile of the Ayurvedic Resorts

| Year of Establishment | Frequency |
|-----------------------|-----------|
| Before 2000 | 6 |
| 2000-2009 | 13 |
| Recent 2010–15 | 3 |
| Total | 22 |

Table 4 Specialties

| Specialties | Number | % |
|--|--------|----|
| Pachakarma | 8 | 36 |
| Rejuvenation Therapy | 10 | 45 |
| Massage | 6 | 27 |
| Orthopedics related/ Arthritis etc. | 5 | 23 |
| Skin | 6 | 27 |
| Neurological treatments including back pain etc. | 9 | 41 |
| Stress | 8 | 36 |
| Respiratory disorders | 8 | 36 |

| Specialties | Number | % |
|----------------|--------|-----|
| Blood Pressure | 1 | 4 |
| Obesity | 4 | 18 |
| Eye | 2 | 9 |
| Digestion | 1 | 4.5 |
| Gynecology | 1 | 4.5 |
| Dentistry | 1 | 4.5 |
| Anti-aging | 1 | 4.5 |
| Longevity | 1 | 4.5 |
| Infertility | 2 | 9 |

Table 5 Number of Rooms (5 to 22)

| Number of rooms | Frequency |
|-----------------|-----------|
| Below 30 | 10 |
| 30 and Above | 7 |
| Missing | 5 |
| Total | 22 |

Table 6 No of treatment rooms(2 to 16)

| Number of Treatment Rooms | Number (2 to 16) |
|---------------------------|------------------|
| Below 5 | 9 |
| 5 and Above | 9 |
| Missing | 4 |
| Total | 22 |

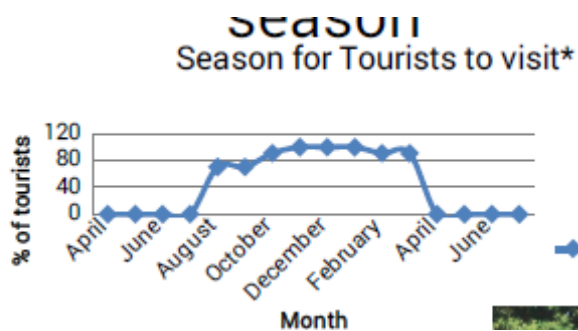
Table 7 Number of Doctors (N=22)

| No | Number |
|---------|--------|
| 1 | 8 |
| 2 | 7 |
| 3 | 3 |
| 5 | 2 |
| Missing | 2 |
| Total | 22 |

Table 8 Number of Therapists (N=22)

| Number | M | F |
|---------|----|----|
| 1 | 2 | 2 |
| 2 | 9 | 7 |
| 3 | 3 | 2 |
| 4 | 1 | 1 |
| 5 | 2 | 2 |
| 6 | - | 1 |
| 8 | - | 1 |
| 10 | 2 | 2 |
| 12 | - | 1 |
| 20 | 1 | 1 |
| Missing | 2 | 2 |
| Total | 22 | 22 |

Fig 3 Season and Off-season for tourists to visit



Season for Tourism August to October, October to March Off-Season April to July

*It is only a representation not the actual number

Table 9 duration of stay (N=22)

| Duration | No |
|--|----|
| For 1 Week | 7 |
| For 2 Weeks | 7 |
| More than 2 Weeks (multiples of 1 week) | 5 |
| Missing | 3 |
| Total | 22 |

Table 10 Countries from where the tourists are visiting (N=22)

| Country | Number | % |
|-------------------------|--------|------|
| Germany | 18 | 82 |
| Russia | 12 | 54.5 |
| UK | 10 | 45.5 |
| Switzerland | 8 | 36 |
| France | 7 | 32 |
| USA | 7 | 32 |
| Italy | 6 | 27 |
| Australia | 4 | 18 |
| Japan | 1 | 4.5 |
| Korea | 1 | 4.5 |
| Former Soviet Republics | 3 | 13.5 |

Table 11 Promotional Strategies (N=22)

| Medium | Number | % |
|----------------------------|--------|------|
| Promotional Agency/ Agents | 10 | 45.5 |
| Website/Online | 10 | 45.5 |
| Word of mouth | 5 | 23 |
| Direct marketing | 4 | 18 |
| Follow-up | 4 | 18 |
| Guide book | 1 | 4.5 |
| Email | 1 | 4.5 |

d. Specialties treated

- Treatment for Arthritis, Spinal Disorders, Back pain, Migraine, Paralysis, Respiratory, Infertility, obesity, Parkinson, Joint pains, skin diseases, neurological problems, Gynaecological problems, Infertility, Respiratory problems, CVD, stress, sports related problems, digestive disorders, Mental stress relief, Renal treatment, Stone etc. Gastroenterology, stomach, Lungs, Spine and neck, Rejuvenation, Body purification,

longevity, anti-aging, Massage, Eye treatments, Steam bath, cholesterol control, BP control, Facial treatments, Spa, Beauty treatments, Revitalize, Marma, diabetic, dentistry, Panchakarma, Poorvakarma, Paschatkarma

e. Cost and duration

In an average 20 USD per each treatment.

There are 34 types of treatments Packages varies from 3 days to 21 days

f. Problems faced by the industry

Sri Lanka emerging as a competitor – providing services at half of the prices Economic slowdown in Europe and Ebola affected the industry Strict visa regulation prevented the medical tourists from visiting India (High)Tax structure of the government affected the business Wellness centres undermined the ayurveda, by adversely affecting ayurvedic treatments European tussle on qualification and clinical trial for medicines affected the business

“The western nations have already taken over Yoga from India and not allowing Indian trainers to train in the resorts. “

“If the trend continues like this even Ayurveda will be administered by the westerners. “

The power politics in terms of standards and examinations in the western Universities affect the Ayurveda in long run.

3. Discussion and conclusion

Medical Tourism in Ayurveda is a growing industry.

The following problems faced by the resorts need attention: poor government support on creating good infrastructure, non-supportive policy for medical tourism, mixing up Ayurveda with wellness and massage. Many of the tourists are from European countries. The stringent examination in the University system does not allow the Ayurvedic physicians to go to Europe for training and practice.

This in turn affects the Ayurveda in India.

There are some resorts offer hands on training to western trained physicians and therapists at their clinics.

The seasonal nature of this industry affects the livelihood of the therapists and other peripheral workers during off seasons.

Mushrooming of massage centres, wellness clinics, and home stays affect the business during last couple of years.

In addition, Sri Lanka creates a tough competition in the industry needs to addressed.

The recent ban on alcohol had affected the centres as many of their ingredients contain alcohol.

The government limited the quantity of alcohol to be held by ayurvedic centres as per the new liquor policy.

This lead to the therapists and ayurvedic physicians regularly report at the local police station.

This discourages women workers to work in this industry.

In the recent months harassment by the police and excise departments are on the raise.

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