

A Study On Problems Faced By Medical Tourist In Chennai City

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Abstract - Medical tourism is growing the destinations which has peaceful living people without terrorism, action against human beings and have good foreign affairs policy. India is peaceful country which promotes social harmony among the citizen. India has diversified in nature on the basis of different kind of people and culture but they have social harmony and unity in the nation. So people from various countries prefer India as their tourist destination. But customer perception influences factors like advanced medical services, international standard quality services, cost effectiveness, minimum of legal proceedings, safety and security, and other services also. But in our country has safety and security issues, staffs other than doctors needs training for handling foreign patients etc. the present study is an attempt to know the challenges and problems faced by medical tourist in Chennai city. The present study is covers Chennai City Multi specialty hospitals as its universe. The sampling is confined as 50 medical tourists from other countries. The convenient sampling is used to select the respondents. Government officials of tourism sector take necessary initiatives to provide important services like insurance, banking services and transport services. These services influences medical tourist and furnish maximum level of satisfaction.

Key words: organ transplantation, medical tourism, cardiac care and so on.

I. INTRODUCTION

Tourism is the sector which contributes notable portion to economic growth. Tourism is classified based on the purpose they visit. Site seeing tourism, natural tourism, medical tourism, business tourism etc are the types of tourism. Medical tourism is earning maximum income. Medical tourism means people are visiting the destination to purpose of getting medical treatment. Medical tourism is an industry growing enormously due to advance medical science growth.

European and American countries has advanced medical facilities which offers quality services with high cost. Most of the patient does not affordable of high cost but they need treatment for their curable diseases. So they are searching quality treatments with affordable cost. Compare to other Asian countries, India provides quality services of advanced medical treatments with affordable cost. Heavy competition of medical services, Indian hospital provides advanced medical treatments through medical practitioners with high technical knowledge about surgical equipments. Medical tourism is growing the destinations which has peaceful living people without terrorism, action against human beings and have good foreign affairs policy. India is peaceful country which promotes social harmony among the citizen. India has diversified in nature on the basis of different kind of people and culture but they have social harmony and unity in the nation. So people from various countries prefer India as their tourist destination.

India is expected as ranked first in top three health care markets in Asian countries. In the financial 2017-18 health care sector is fourth largest employment creation in India. Our country also facilitates medical insurance facilities for foreign customers. International insurance companies also playing major role in medical tourism. Indian foreign policy also having provisions of accepting international insurance companies services which promotes medical tourism in India.

Nearly one billion people from America are visiting other countries for their medical treatments. Among the people most of them prefer India for their treatments. India is top second rank in medical tourist destination. Cost



effectiveness with advance medical facilities are provided by India.

Indian people did not aware of medical facilities and legal proceedings. Medical services related legal proceedings are liberal in India. Organ donation is done maximum number operations in our country compare to other countries. Most of illiterate and unaware people exploit due to this organ transplantation operations. Maximum number of organ transplantation is done illegally in India. This also one of challenges are faced by the government.

II. REVIEW OF LITERATURE

Vimitha and Shobana (2015) attempts to bring out the advanced facilities in Chennai, about multispecialty hospitals that are providing best treatments to abroad patients and the development procedures that are adopted. The current medical tourism in Chennai attracts most of the other country patients who become aware of many hospitals in Chennai through websites and Indian doctors who work abroad. Medical tourists choose Chennai because of low costs of health care with international high standard. It also has hospitals minimal acceptable high standard of care minus the ambience for extremely cost conscious patients who need urgent medical care but with limited financial resources^[1].

Sankar (2016) find the factors influencing the attractiveness of Chennai as a health tourism destination. The policy implications described are of particular relevance for policymakers and industry practitioners in other Southeast Asian countries with similar health systems where governments have expressed interest in facilitating the growth of the medical tourist industry^[1].

Dr. T. Joseph Rex and G. Udhayaraj (2018) accentuates the prospects of medical tourism as a "cost-effective" means of private medical care for patients needing surgical and other forms of specialized treatment. The research selects the study area as Chennai city, especially multispecialty hospital. There are eighty respondents were selected for the present study for convenient sampling technique. It is suggested Tamilnadu state Hospitals should tie up with more and more multinational insurance companies to minimize the insurance related problems like reimbursement. Hospitals should provide the state of the art infrastructure equipped with latest technology. Besides this, government should take initiative in putting proper civic infrastructure in place like airports, good roads etc. & proper law and order^[3].

Dr. T. Joseph Rex and G. Udhayaraj (2018) attempt to know patient perception about medical tourism. Tamilnadu is one of the states which provide advanced medical treatments. Medical tourism has some problems and challenges like good care from doctors and medical practitioners, infrastructure, safety measures, and staff behavior etc. The convenient sampling is used to adopt the respondents. The sampling size is confined as 50 respondents. Data were collected based well structured and scientifically designed questionnaire. Medical tourism is depends on prices of drug and medicines. The government officials take necessary initiatives to reduce prices of drugs and surgical medicines. It is helps to motivate the medical tourist to revisit to our country^[3].

Statement of the problem:

Medical tourism in India has cost advantages compare to other countries. Indian health care sector has growing enormously with the impact of technological developments. Indian Doctors were experts in doing difficult operations. Even though there are numerous advantages in Indian medical tourism but there are some challenges encounters and affects economic development. Medical tourism also contributes economic development of our nation. But customer perception influences factors like advanced medical services, international standard quality services, cost effectiveness, minimum of legal proceedings, safety and security, and other services also. But in our country has safety and security issues, staffs other than doctors needs training for handling foreign patients etc. the present study is an attempt to know the challenges and problems faced by medical tourist in Chennai city.

Objectives of the study

The following objective were framed to attain desired results of the study

- 1. To determines the problems and challenges faced medical tourist in Chennai city
- 2. To know the factors influencing satisfaction of medical tourist
- 3. To offer suitable suggestions to improve visits of medical tourist to our state.

III. RESEARCH METHODOLOGY

Research methodology is explaining how to conduct research and explain how to select sample size, sampling technique and so on. The present study is covers Chennai City Multi specialty hospitals as its universe. The sampling is confined as 50 medical tourists from other countries. The convenient sampling is used to select the respondents.

Limitations

1. Owing to the time and budget constraints the study is confined to Chennai city only.

2. The sample size was restricted to 50 medical tourist in Chennai city, for effective and intensive analysis.

Analysis and Discussion

S. No	Age of the respondents	No. of Respondents	Percent
1.	18-24 years	17	34.0
2.	25-30 years	12	24.0



3.	31-40 years	13	26.0
4.	41 - 50 years	4	8.0
5.	More than 50 years	4	8.0
	Total	50	100.0

The above table shows that maximum 34% of the respondents' belongs to the age group of 18-24 years. 24% of the respondents' belongs to the age group of 25-30 years.

26% of the respondents' belongs to the age group of 31-40 years. 8% of the respondents' belongs to the age group of 41-50 years. 8% of the respondents' belongs to the age group of more than 50 years.

It is understood that maximum 34% of the respondents' belongs to the age group of 18-24 years.

		k	Regression Tes	t		
			ANOVA ^a			
	Model	Sum of Squares	Df	Mean Square	F	Sig.
	Regression	39.842	1	39.842	.933	.339 ^b
1	Residual	2049.778	48	42.704		
	Total	2089.620	49			
a. Dej	oendent Variable: overall p	perception of problems of	f medical touri	sm		
b. Pre	dictors: (Constant), income	e				

Coefficients ^a							
Model		Unstandardized Coefficients		Standardized	t	Sig.	
				Coefficients			
		В	Std. Error	Beta			
1	(Constant)	44.841	1.880		23.852	.000	
1	income	643	.666	138	966	.339	
a. Dependent Variable: overall perception of problems of medical tourism							

Research Hypothesis

There is a significant relationship between income of the respondents and their overall perception about problems of medical tourism

Null Hypothesis

There is no significant relationship between income of the respondents and their overall perception about problems of medical tourism

Tools used

Regression test was used in the above tale

Findings

The above table shows that there is no significant relationship between income of the respondents and overall perception about problems of medical tourism. Hence the calculated value is greater than the table value. So that research hypothesis is rejected and null hypothesis is accepted

		T test			
	gender	Ν	Mean	Std. Deviation	Statistical inference
Cost effectiveness	Male	36	2.97	1.464	T = 8.874 .005>0.05 significant
	female	14	1.86	.949	
Training of staff nurses and other staff members	Male	36	2.69	1.489	T =.735 .395>0.05 Not
	female	14	3.07	1.685	significant
Doctors knowledge	Male	36	2.58	1.461	T =.907 .006>0.05 significant
	female	14	2.36	1.393	-



					. T = 646
Technological development	Male	36	3.00	1.454	.426>0.05
C I					Not
	female	14	2.07	1.385	significant
		_			. T = 818
Legal proceedings	Male	36	2.89	1.469	.030>0.05
	female	14	2.79	1.626	significant
					T = 5.339
C-f-t	Male	36	2.14	1.246	.235>0.05
Safety and security					Not
	female	14	2.93	1.639	Significant
		24	11.0000	0.05006	T = 1.877
Overall perception about challenges of medical	Male	36	44.2222	8.25006	.569>0.05
tourism	6 1	14	20.1420	7.02505	Not
	female	14	39.1429	7.02585	Significant

Research Hypothesis

There is a significant difference between gender of the respondents and their Overall perception about challenges of medical tourism

Null Hypothesis

There is no significant difference between gender of the respondents and their Overall perception about challenges of medical tourism

Tools used

Student 't' test was used in the above tale

Findings

The above table shows that there is no significant difference between gender of the respondents and their Overall perception about challenges of medical tourism. Hence the calculated value is greater than the table value. So that research hypothesis is rejected and null hypothesis is accepted.

IV. SUGGESTIONS

Medical tourism is generating revenue to the tourism sector. Government officials are taking necessary initiatives to facilitate medical tourism in terms of marketing campaign, registered dealers, authorized guides and other necessary services to the medical tourist.

Hospitals management are take initiatives to create website about special treatment facilities and explaining details about treatment like cardiac care, eye care, neuro surgery, general surgery, and so on. It helps to medical tourist came to know details and medical centre.

Government officials of tourism sector take necessary initiatives to provide important services like insurance, banking services and transport services. These services influences medical tourist and furnish maximum level of satisfaction.

Government officials are take initiatives to prevent illegal organ transplantation. It also shows out nation credibility and trustworthiness of legal proceedings.

V. CONCLUSION

Medical tourism in India has cost advantages compare to other countries. Indian health care sector has growing enormously with the impact of technological developments. Indian Doctors were experts in doing difficult operations. Even though there are numerous advantages in Indian medical tourism but there are some challenges encounters and affects economic development. Medical tourism also contributes economic development of our nation. But customer perception influences factors like advanced medical services, international standard quality services, cost effectiveness, minimum of legal proceedings, safety and security, and other services also.

Medical tourism is growing the destinations which has peaceful living people without terrorism, action against human beings and have good foreign affairs policy. India is peaceful country which promotes social harmony among the citizen. India has diversified in nature on the basis of different kind of people and culture but they have social harmony and unity in the nation. So people from various countries prefer India as their tourist destination.

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