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# SERVICE QUALITY OF MEDICAL TOURISM IN TAMILNADU 

Dr.S.Sangeetha ${ }^{1}$<br>Assistant Professor, Department of Economics, A.V.V.M Sri Pushpam College (Autonomous)<br>Poondi, Thanjavur, Tamilnadu, India.<br>ardan.gani92@gmail.com

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#### Abstract

The study undergone the Medical Tourist Satisfaction about the Medical Tourism Service Quality. This study combination of descriptive and Exploratory study. The primary data collected from 83 respondents who were undergone treatment patients from various country. The researcher collected the data via questionnaire and that was evaluated using correlation and multiple regression statistical analysis via SPSS IBM packages. The research results shows that the maximum number of medical tourist satisfaction about the medical tourism in Tamilnadu was satisfactory.


## INTRODUCTION

Medical Tourism is rapid developing industries and highly supports our Indian economy too. In this era, many number of people were extremely suffered from various enormous health issues. Globally, everyday new diseases were increasing and at the same time the medical treatments also more updated with hi-technology. Eventually, getting treatment from their home country is more cost in developed countries. Therefore, people moving on to some developing countries for cheaper medical treatment. Some people preferred some particular countries for traditional treatment which is like Ayurveda, acupuncture etc. Thus they prefer to the core destination to get treatment. Managing the medical tourism in the hospital were complex and it needs many skills and strategies. The 'Service Quality' is one of the most significant strategy, to retained the medical tourism and also to improve the industries. Thus it is necessary to study the service quality of Tourist Satisfaction in Tamilnadu. Moreover, many economist said that concentrate on International business should not only focused on good and also have to give importance to the services. Thus, the Medical Tourism is one of the international service oriented business and it plays significant part in the global market.

## LITERATURE REVIEW

Kandampully (2000) determined the study the use of medical tourism services and packaging. The researcher explore that the tourist needs their demand to fulfill and their main expectation is about the quality of services. The research outcome shows that the medical tourist packages were satisfied with needs and expectation.

Kumar et.al (2007) explored the Ayurvedic treatment impact on backwater tourism. The research results shows that there is significant relationship and high impact on the ayurvedic medical treatment center near to the back water spot to attract the tourist.

Babu and Jayabal (2004) thought that to understand the most extreme capability of wellbeing the travel industry in India urge the corporate clinics to co-ordinate with carriers, inns and railroads to get concession paces of movement and boarding and housing for clinical sightseers. Appropriations ought to be accommodated the procurement of land and other essential infrastructural offices to advance corporate emergency clinics in the places of interest

Nautiyal and Dogra (2005) distinguished that with elite medical care experts, nursing care and therapy cost right around one 6th of that in the created nations, India is seeing $30 \%$ development in clinical the travel industry each year. India is the most sought after objective for nations like Africa, South-East Asia, ,Mauritius, Center East, Tanzania, Yeme and Bangladeshn with 12 percent understanding inflow. Further, India had more specialities hospital in cardiology, neuro-medical procedure, and muscular health and eye with heavy medical procedure.

Ibrahim and Gill (2005) did a research with the targets of estimating the satisfaction and satisfaction of customers of the travel industry result of Barbados, and to recognize potential specialty advertises that could be utilized in the advancement of the destination" s situating technique. Four potential specialty markets are distinguished that can advise the advancement regarding the destination" s repositioning methodology: sporting, sports, culture and eco-the travel industry. The results outcomes showed that the medical tourist were highly satisfied with the atmosphere

## METHODOLOGY

This paper mainly comprises exploratory and descriptive study. The main research objective is to analysis the customer's satisfaction on Medical Tourism Service Quality in Tamilnadu. The researcher adopted purposive sampling techniques. The sample size was 83 respondents, the patients from abroad who are getting treatment in Tamilnadu. The researcher used structured questionnaire as a tool to collect the primary data. Further, the researcher reviewed Journals, articles, website to retrieve the secondary data.The collected data were validate via data screening test. The Correlation and Multiple Regression statistical tools were used to evaluate the data using SPSS IBM software.

## Objective

- To determine the relationship between the Medical Tourism Service Quality and Tourist Satisfaction.
- To measure the influence of Medical Tourism Service Quality and Tourist Satisfaction


## Research Variables

Dependent Variable : Tourist Satisfaction
Independent Variable : Medical Tourism Service Quality
SQ1 : I am confident with medical treatment given
SQ2 : I feel safe in the hospital
SQ3 : The hospital is well connected with tourist centre
SQ4 : The staffs are very kind
SQ5 : Timely Treatment were given
SQ6 : Patient Record are maintained properly
SQ7 : The hospitality is very comfortable
SQ8 : Maintained Hospital hygiene
SQ9 : Communication Facilities available is hospital
SQ10 : The treatment cost is very reasonable
SQ11 : Hospital arrange all the tour and facility
SQ12 : Updated Infrastructure facility (Technology)

## Hypothesis

Ho : There is no relationship between Medical Tourism Service Quality and Tourist Satisfaction

H1 : There is relationship between Medical Tourism Service Quality and Tourist Satisfaction

Ho : There is no influence between Medical Tourism Service Quality and Tourist Satisfaction

H1 : There is influence between Medical Tourism Service Quality and Tourist Satisfaction

## Results and Discussion

Table 1 Correlation

|  | TS | S1 | S2 | S3 | S4 | S5 | S6 | S7 | S8 | S9 | S 1 0 | $\begin{gathered} \text { S1 } \\ 1 \end{gathered}$ | S 1 2 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| TS | 1 |  |  |  |  |  |  |  |  |  |  |  |  |
| SQ1 | 0.435* | 1 |  |  |  |  |  |  |  |  |  |  |  |
| SQ2 | 0.742* | $\begin{array}{r} 0.76 \\ 9 * \end{array}$ | 1 |  |  |  |  |  |  |  |  |  |  |
| SQ3 | 0.813* * | $\begin{array}{r} 0.26 \\ 5 \end{array}$ | $\begin{array}{r} 0.73 \\ 4 \end{array}$ | 1 |  |  |  |  |  |  |  |  |  |
| SQ4 | 0.592 | $\begin{array}{r} 0.46 \\ 5 * \end{array}$ | $\begin{array}{r} 0.44 \\ 2 \end{array}$ |  | 1 |  |  |  |  |  |  |  |  |
| SQ5 | 0.762* * | $\begin{array}{r} 0.61 \\ 4 \end{array}$ | $\begin{array}{r} 0.65 \\ 9 \end{array}$ | $\begin{array}{r} 0.0 \\ 21 \end{array}$ | $\begin{array}{r} 0.7 \\ 12 \end{array}$ | 1 |  |  |  |  |  |  |  |
| SQ6 | 0.671* | $\begin{array}{r} 0.22 \\ 4 \end{array}$ | $\begin{array}{r} 0.71 \\ 2 \end{array}$ | $\begin{array}{r} 0.3 \\ 94 \end{array}$ | $\begin{array}{r} 0.6 \\ 77 \end{array}$ | $\begin{array}{r} \hline 0.9 \\ 15^{*} \\ * \end{array}$ | 1 |  |  |  |  |  |  |
| SQ7 | 0.590* | $\begin{array}{r} 0.73 \\ 1 \end{array}$ | $\begin{array}{r} 0.62 \\ 5^{*} \end{array}$ | $\begin{array}{r} 0.1 \\ 58 \end{array}$ | $\begin{array}{r} 0.5 \\ 93 \end{array}$ | $\begin{array}{r} 0.5 \\ 59 \end{array}$ | $\begin{array}{r} 0.5 \\ 95 \end{array}$ | 1 |  |  |  |  |  |
| SQ8 | $0.495 *$ $*$ | $\begin{array}{r} 0.39 \\ 5^{*} \end{array}$ | $\begin{array}{r} 0.43 \\ 8 \end{array}$ | $\begin{array}{r} 0.5 \\ 79^{*} \\ * \end{array}$ | $\begin{array}{r} 0.3 \\ 94 \end{array}$ | $\begin{gathered} 0.2 \\ 63^{*} \end{gathered}$ | $\begin{gathered} 0.4 \\ 26 \end{gathered}$ | $\begin{array}{r} 0 . \\ 23 \\ 5 \end{array}$ | 1 |  |  |  |  |
| SQ9 | 0.778* | $\begin{array}{r} 0.18 \\ 4 \end{array}$ | $\begin{array}{r} 0.44 \\ 2 \end{array}$ | $\begin{array}{r} 0.2 \\ 66 \end{array}$ | $\begin{gathered} 0.4 \\ 76^{*} \end{gathered}$ | $\begin{array}{r} 0.4 \\ 05 \end{array}$ | $\begin{array}{r} 0.4 \\ 14 \\ * * \end{array}$ | $\begin{array}{r} 0 . \\ 73 \\ 4 \end{array}$ | $\begin{array}{r} 0 . \\ 11 \\ 6 \end{array}$ | 1 |  |  |  |
| SQ10 | $0.840 *$ $*$ | $\begin{array}{r} 0.01 \\ 5 \end{array}$ | $\begin{array}{r} 0.02 \\ 1 \end{array}$ | $\begin{array}{r} 0.7 \\ 34 \end{array}$ | $\begin{array}{r} 0.4 \\ 82 \end{array}$ | $\begin{array}{r} 0.3 \\ 94 \end{array}$ | $\begin{array}{r} 0.8 \\ 83 \end{array}$ | $\begin{array}{r} \hline 0 . \\ 02 \\ 1 \end{array}$ | 0. 52 4 | $\begin{array}{r} 0 . \\ 19 \\ 5 \end{array}$ | 1 |  |  |
| SQ11 | 0.412* | $\begin{array}{r} 0.40 \\ 5 \end{array}$ | $\begin{array}{r} 0.17 \\ 6 \end{array}$ | $\begin{array}{r} 0.5 \\ 12 \end{array}$ | $\begin{gathered} 0.5 \\ 30 \end{gathered}$ | $\begin{gathered} 0.2 \\ 24^{*} \end{gathered}$ | $\begin{array}{r} 0.9 \\ 83 \end{array}$ | $\begin{gathered} 0 . \\ 70 \\ 3^{*} \\ * \end{gathered}$ | $\begin{array}{r} 0 . \\ 48 \\ 2 \end{array}$ | $\begin{gathered} 0 . \\ 61 \\ 0^{*} \end{gathered}$ | $\begin{array}{r} \hline 0 . \\ 3 \\ 3 \\ 3 \end{array}$ | 1 |  |
| SQ12 | $\begin{array}{r} 0.605^{*} \\ * \end{array}$ | $\begin{array}{r} 0.78 \\ 1 \end{array}$ | $\begin{array}{r} 0.54 \\ 3 \end{array}$ | $\begin{gathered} 0.4 \\ 91 \end{gathered}$ | $\begin{gathered} 0.8 \\ 83^{*} \end{gathered}$ | $\begin{array}{r} 0.1 \\ 98 \end{array}$ | $\begin{array}{r} 0.4 \\ 86 \end{array}$ | $\begin{array}{r} 0 . \\ 53 \\ 0 \end{array}$ | $\begin{array}{r} 0 . \\ 71 \\ 2^{*} \\ * \end{array}$ | $\begin{array}{r} 0 . \\ 44 \\ 2 \end{array}$ | $\begin{array}{r} \hline 0 . \\ 7 \\ 0 \\ 2 \end{array}$ | $\begin{gathered} \hline 0 . \\ 30 \\ 7 * \\ \hline \end{gathered}$ | 1 |

From the above correlation table 1 shows the relationship between Tourism Service Quality and Tourist Satisfaction. The output clearly indicates that there is strong relation with tourist satisfaction with Quality of service. The correlations results shows that the all the independent variables were positively significant with dependent variable which the P -Value is $<0.05$. The SQ10 was highly correlated with the Pearson value 0.840 .

## Multiple Regression

Table 2 Model Summary

| Model | R | R-Square | Adjusted R <br> Square | Standard Error of the <br> Estimate |
| :---: | :---: | :---: | :---: | :---: |
| 1 | 0.763 | 0.624 | 0.607 | 0.381 |

a. Predictors: (Constant), SQ1, SQ2, SQ3, SQ4, SQ5, SQ6, SQ7, SQ8, SQ9, SQ10, SQ11, SQ12

## b. Dependent Variable : TS

The above model summary table 2 , shows that the multiple correlation coefficient. R can be considered to be one measure the Medical Tourism Quality of the prediction dependent variable (Medical Tourist Satisfaction). A value of 0.763 , indicates a good level of prediction. The " $R$ Square" column represents the $R^{2}$ value, which is the proportion of variance in the dependent variable (MTSQ) that can be explained by the independent variable (Service Quality). $\mathrm{R}^{2}$ value is 0.624 that our independent variables explain $62.4 \%$ of the variability of the dependent variable (Tourist Satisfaction).

Table 3 ANOVA

| Model | Sum of <br> Squares | Df | Mean Square | F | Sig. |
| :--- | ---: | ---: | ---: | ---: | :--- |
| Regression | 33.512 | 8 | 4.106 | 68.719 | 0.000 |
| Residual | 15.536 | 168 | 0.056 |  |  |
| Total | 49.048 | 176 |  |  |  |

a. Predictors: (Constant), SQ1, SQ2, SQ3, SQ4, SQ5, SQ6, SQ7, SQ8, SQ9, SQ10, SQ11, SQ12
b. Dependent Variable : TS

The above table 3, shows that the independent variables statistically significantly predict the dependent variable, $F(8,168)=68.719, p<0.001$. its shows that the regression model is good fitted.

Table 4 Co-efficient

|  | UnStandardized <br> Coefficients |  | Standard <br> Coefficients | t | Sig |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Std.Error | B | Beta |  |  |
| Constant | 3.211 | 0.561 |  |  | 0.050 |
| SQ1 | 1.063 | 0.775 | 0.870 | 9.202 | 0.003 |
| SQ2 | 0.153 | 0.601 | 0.322 | 4.947 | 0.051 |
| SQ3 | 0.316 | 0.728 | 0.842 | 8.890 | 0.041 |
| SQ4 | 0.412 | 0.665 | 0.544 | 5.418 | 0.014 |
| SQ5 | 0.036 | 0.672 | 0.811 | 8.014 | 0.000 |
| SQ6 | 1.106 | 0.702 | 0.695 | 7.719 | 0.038 |
| SQ7 | 1.290 | 0.793 | 0.912 | 9.221 | 0.053 |
| SQ8 | 0.396 | 0.635 | 0.529 | 5.361 | 0.000 |
| SQ9 | 0.534 | 0.695 | 0.688 | 7.310 | 0.000 |
| SQ10 | 0.169 | 0.622 | 0.463 | 5.117 | 0.009 |
| SQ11 | 0.278 | 0.681 | 0.716 | 8.114 | 0.002 |
| SQ12 | 1.921 | 0.712 | 0.742 | 8.856 | 0.000 |

The above table 4, explains unstandardized coefficient indicates how much the dependent variable (TS) varies with an independent variables (Quality Services) when all other independent variables are held constant.
$\mathrm{TS}=3.211+(0.775) \mathrm{SQ} 1+(0.601) \mathrm{SQ} 2+(0.728) \mathrm{SQ} 3+(0.665) \mathrm{SQ} 4$ + (0.672) SQ5 + (0.702) SQ6 + (0.793) SQ7 + (0.635) SQ8 + SQ9 (0.695) + SQ10 (0.662) + SQ11 (0.681) + SQ12 (0.712)

The regression results indicates that all the SQ1, SQ2, SQ3, SQ4, SQ5, SQ6, SQ7, SQ8, SQ9, SQ10, SQ11 and SQ12 were significant with the PValue of $<0.05$. Hence the null hypothesis is rejected and the alternate hypothesis is accepted. The output clearly shows that all the independent predictors of Tourist Satisfaction were influence the dependent variable Medical Tourism Service Quality.

From the above table 4 co-efficient table, the beta value indicates the order of impact of the independent predictors. The predictors with highest Beta value is relatively high impact predictor. On examining the predictors from the research, it was clearly found that the SQ6 has highest impact among
all the variables with (0.793) beta value, followed by SQ1 (0.775), SQ2 (0.728), SQ12 (0.712), SQ5 (0.702), SQ9 (0.695), SQ11 (0.681), SQ4 (0.672), SQ3 ( 0.665 ), SQ10 $(0.662)$, SQ8 $(0,635)$ and SQ1 $(0.601)$ respectively.

## Conclusion

The study explored the Medical tourism quality service and tourist satisfaction. The correlation results shows that the all quality service had relationship with the Tourist Satisfaction in Medical tourism. The output reveals that the SQ10 has strong relationship with Tourist Satisfaction. Therefore it clearly shows that the Cost of treatment is satisfied by the tourist. Further, the regression results indicates the service quality and its influences in Tourist Satisfaction. The result output shows that the SQ7 has highest influencing impact over tourist satisfaction. The tourist were very comfortable with hospitality and that influence more on the Tourist Satisfaction. Thus, the overall results reveals that the Tamilnadu rendering very Quality service on Medical Tourism.

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