

# Medical Tourism: Establishing a Sustainable Medical Facility

by

Durgham Darwazeh

A thesis  
presented to the University of Waterloo  
in fulfillment of the  
thesis requirement for the degree of  
Master of Environmental Studies  
in  
Geography - Tourism Policy and Planning

Waterloo, Ontario, Canada, 2011

© Durgham Darwazeh 2011

### **Author's Declaration**

I hereby declare that I am the sole author of this thesis. This is a true copy of the thesis, including any required final revisions, as accepted by my examiners.

I understand that my thesis may be made electronically available to the public.

## **Abstract**

Imposing the principles of sustainable development on medical tourism is vital to maintaining the three pillars of a strong nation, namely, the environment, the economy, and the local community. The three research objectives of this thesis are: 1) to determine the primary factors that motivate foreign patients to travel abroad for medical services; 2) to define the role that stakeholders play for developing the medical tourism sector; and 3) to develop an implementable framework for establishing a sustainable medical facility. These objectives help lay the foundations for a medical tourism facility that would respond well to the future demands of international patients, and would remain competitive with other medical facilities in the global market while also improving local quality-of-life and remaining within ecological constraints. Therefore, this research adopts a case study methodology to examine a framework developed through the literature review to determine how it fits in reality. In addition, this research provides a starting point to define further the primary roles of the medical tourism network for developing the medical tourism sector.

## **Acknowledgements**

Of the many people who have been enormously helpful in the preparation of this thesis, I am especially thankful to Dr. Amelia Clarke for her help and supervision in guiding me through to its successful completion.

I would also like to warmly acknowledge Dr. Stephen Smith (Professor, Cross-Appointed to Environmental Studies) for his guidance and input throughout the process of this research, as well as Lori McConnell (Graduate Program Assistant) who went out of her way and provided me with details about thesis proposal requirements. This has helped me a lot for establishing my thesis properly.

A very special recognition needs to be given to the Organizations that allowed me for collecting data via interviews: the United States Agency for International Development, Jordan Tourism Board, Jordan Investment Board, Jordan Hospital, Al-Khalidi Medical Center, King Hussein Cancer Center, Specialty Hospital, Private Hospital Association, and the Directorate of Health and Environment. I would like to extend my sincere gratitude to the University of Waterloo for the use of their resources, such as online databases and library, without which the compilation of this thesis would have been extremely complicated.

In addition, a special thanks to my Father and all my friends for their consideration and motivation.

I dedicate this dissertation to my family for their unconditional love and support in every way possible throughout the process of this course, this dissertation and beyond.

# Contents

List of Figures: .....	viii
Glossary.....	ix
1 Chapter one: Introduction to Medical Tourism.....	1
1.1 Introduction.....	1
1.2 The Rise of Medical Tourism .....	2
1.3 Medical tourism factors .....	3
1.4 The Need for Sustainable Development in the Medical Tourism Sector.....	4
1.5 Research Goal and Objectives .....	6
2 Chapter Two: Literature review- Medical Tourism - .....	9
2.1 Introduction to Medical Tourism .....	9
2.1.1 The Definition of Medical Tourism .....	9
2.1.2 The Attributes of Medical Treatments and Health Treatments.....	9
2.1.3 The Medical Tourism Market .....	10
2.1.4 The Globalization of Medical Tourism.....	11
2.1.5 The Service Groups Marketing of Medical Tourism Sector .....	14
2.2 Medical Tourism Factors .....	16
2.3 Medical Tourism Stakeholders .....	21
2.4 Establishing a Sustainable Medical Facility .....	23
2.4.1 Medical Tourism Facility's Framework.....	30
3 Chapter Three: Methodology .....	38
3.1 Introduction.....	38
3.2 Case study .....	39
3.3 Data Collection .....	40
3.4 Data Analysis .....	41
3.5 Reliability and Validity.....	43
4 Chapter Four: Finding.....	44
4.1 Country Analysis.....	44
4.1.1 Political .....	44
4.1.2 Social Element .....	45
4.1.3 Economy .....	47
4.1.4 Sustainable development.....	49
4.1.5 Tourism.....	51
4.2 Medical Tourism.....	54
4.3 The Medical Tourism Network in Jordan .....	57

4.4	Introducing Medical Tourism Network’s Stakeholders .....	61
4.4.1	Non-governmental Organization/Non- Jordanian Organization .....	61
4.4.2	Government Organization:.....	64
4.4.3	Private Organization: .....	64
4.5	The Role of Medical Tourism Network’s Stakeholders.....	65
4.5.1	Facilitators.....	66
4.5.2	Guidance .....	67
4.5.3	Service Providers .....	68
4.5.4	Association representatives .....	70
4.6	The Characteristics of a Medical Tourism Facility .....	71
4.7	Developing a Medical Tourism Facility .....	77
4.7.1	Accreditation.....	78
4.7.2	Skilled physicians .....	78
4.7.3	Medical Technology .....	79
4.7.4	Tourism values .....	79
4.8	Challenges Facing Medical Tourism Sector in Jordan.....	80
4.8.1	Logistics.....	80
4.8.2	Collaboration.....	81
4.8.3	Social Behavior.....	82
4.8.4	Law .....	82
4.8.5	The Medical Capacity .....	83
4.8.6	Credible Resources .....	83
4.9	Recommendations .....	84
4.9.1	Accreditation.....	84
4.9.2	Medical Tourism Agency.....	84
4.9.3	Marketing Strategy.....	84
4.9.4	Promoting a Follow-up System for Patients .....	85
4.9.5	Governmental Participation .....	85
5	Chapter Five: Discussion .....	87
5.1	The Factors of Medical Tourism.....	87
5.1.1	Factors belong to the medical tourism destination.....	89
5.1.2	Factors Belonging to the Medical Tourism Facility.....	93
5.2	Medical Tourism Stakeholders .....	95
5.2.1	Evaluating the maturity level of the medical tourism network between Thailand and Jordan.....	97
5.3	Developing a Sustainable Medical Tourism Facility .....	102
5.3.1	Stage 1: Efficiency and Accountability.....	106

5.3.2	Stage 2: Build a Reputation .....	108
5.3.3	Stage 3: Innovation .....	109
5.3.4	Stage 4: Growth .....	110
6	Chapter Six: Conclusion .....	113
6.1	Recommendations .....	116
6.2	Future studies .....	119
	Bibliography .....	122
	Appendices .....	127

## List of Figures:

Figure 1: The Services Marketing Triangle of Medical Tourism Industry .....	16
Figure 2: External Factors .....	18
Figure 3: Internal Factors .....	19
Figure 4: The Medical Tourism Network in Thailand .....	23
Figure 5: Sustainable Value Framework .....	30
Figure 6: The Framework for Developing a Sustainable Medical Tourism Facility.....	31
Figure 7: Data Analysis Process.....	42
Figure 8: Medical Tourism Network's Stakeholders in Jordan .....	61
Figure 9: The Characteristics of a Medical Tourism Facility.....	77
Figure 10: The Medical Tourism Network in Thailand and Jordan .....	99
Figure 11: a Framework for Establishing a Medical Tourism Facility .....	106
Table 1: Ten Principles for Sustainable Tourism .....	5
Table 2: Medical Tourism Network's Interviewees.....	41
Table 3: Factors Belonging to the Medical Tourism Destination.....	88
Table 4: Factors Belonging to the Medical Facility .....	89
Table 5: TMTN VS JMTN .....	101
Table 6: How medical tourism projects or private medical facilities can be managed to protect the environment? .....	103
<u>Appendix A: Interview Questions .....</u>	<u>127</u>
<u>Appendix B: Ethics Approval of Research Questions.....</u>	<u>128</u>
<u>Appendix C: Email for Potential Interviewees.....</u>	<u>129</u>
<u>Appendix D: Email with Detail Information and Consent Form .....</u>	<u>130</u>
<u>Appendix E: Email Thanking Participants .....</u>	<u>132</u>



## Glossary

**Medical Tourism** There is no one definition for medical tourism. Thus, this study has reviewed several definitions that define medical tourism from scholar and practitioner perspectives. Lee and Spisto (2007) have defined medical tourism as a “travel activity that involves a medical procedure or activities that promote the well being of the tourist”. Jagyasi (2009, p.1) has defined medical tourism as a “set of activities in which a person travels often long distances or across the border, to avail medical services with direct or indirect engagement in leisure, business or other purposes”. Both definitions have almost similar perspectives on medical tourism, and both mention that any travel activity that incorporates medical services with tourism values can be utilized under the new model of tourism known as “medical tourism”. However, Bookman and Bookman (2007, p. 1) have defined medical tourism as “an economic activity that entails trade in services and represents the splicing of at least two sectors: medicine and tourism”. Bookman and Bookman’s definition has defined the overlapping circle between medical sector and tourism sector as a medical tourism sector. Therefore, this study adopted Bookman and Bookman’s definition for introducing the medical tourism sector and the services that are provided by a medical tourism facility for the purpose of attracting medical tourists from foreign markets.

**Medical and Healthcare treatments** can be grouped into two categories. The first category includes medical and health treatments that are administered by qualified practitioners or physicians such as vaccines, therapy massage, nutrition and complex surgery. The second category covers medical and healthcare treatments that are offered by health professionals who are registered and recognized by a local health institution as persons qualified to provide wellness services such as spas, acupuncture, aromatherapy, beauty care, facials, exercise and diet, herbal healing, homeopathy, massage, and yoga. This study focuses only on the area of medical tourism that includes medical procedures that require the services of a qualified physician: this may include anything from a simple procedure like the administration of a vaccine, therapy massage, and nutritional consultations, to a complex surgical

procedure such as open heart surgery. Wellness tourism, however, cannot be considered medical tourism because it does not involve a qualified physician (Doctor), and instead involves a licensed professional.

**Treatment of illness** includes those treatments and services that can be provided by health practitioners and physicians, and the services can vary from simple (vaccine, therapy massage, and nutrition) to complex (surgical procedures like open heart surgery).

**Enhancement procedures** these procedures require skilled physicians to operate successfully.

Enhancement procedure include: breast augmentation surgery, facelifts, liposuction, and cosmetic dental work.

**Reproduction** is a new medical activity that can be categorized under medical tourism. Reproduction procedures include fertilization and birth tourism.

**Alternative medicine** means “any healing practice that does not fall into the realm of conventional medicine”; it is also known as complementary medicine or integrative medicine, which includes various treatments such as acupuncture, anthroposophic medicine, ayurveda, chiropractic, herbalism, homeopathy, naturopathy, siddha medicine, and traditional medicine (Chinese, Mongolian, Tibetan) (Ernst, 1995, p. 244). Lee and Spisto (2007) argue that alternative medical services can be utilized under the term of healthcare and wellness tourism and cannot be determined as medical tourism activities, because alternative medical professionals do not need to be qualified as physicians in order to practice; medical services – such as surgeries – do require the services of a qualified physician. This study focuses on patients who are traveling abroad seeking adequate medical services that involve qualified physicians and licensed medical facilities offering medical treatments according to the international and local regulations for the protection of patients’ rights (malpractice, and privacy).

**Environmental responsibilities** means paying attention to the impact that medical tourism has on the surrounding environmental attractions. This means developing a medical tourism sector that adheres to the corresponding ecological regulations that ensure that employees dispose of medical waste according to strict regulations and policies for the protection of environmental attractions. Therefore, respecting the environment is vital for enhancing the triple bottom line (environment, social, and economic) which, in

turn, helps the medical facility be sustained for the next generation. To this end, medical tourism facilities have established a department for the purpose of raising awareness about sustainable practices among employees and local communities to reduce the negative impacts on the environmental attractions.

However, the impact of medical tourism on the environment can be grouped into two categories, internal impacts and external impacts. Internal impacts includes medical waste, raw materials, energy consumption, and water usage, while external impacts includes, transportation, medical incineration, and visitations. To address this, medical facilities have developed a program such as green hospital meant to raise awareness about sustainable practices via energy reduction, recycling, and the use of reusable items. Also, medical facilities organize and fund public campaigns and educational sessions to raise awareness about the benefits of recycling items and the reduction of the use of raw materials.

**Medical waste** is defined by the Medical Waste Tracking Act of 1988 as “any solid waste that is generated in the diagnosis, treatment, or immunization of human beings or animals, in research pertaining thereto, or in the production or testing of biological” (US Environmental Protection Agency, 2011).

Medical waste can be grouped into three various categories: infectious waste, hazardous waste, and radioactive waste. Infectious waste contains materials that can cause infections to humans, and can include blood, body parts, soaked bandages, discarded surgical gloves, cultures, stocks, or swabs to inoculate cultures. Hazardous waste can be described as waste that affects humans in non-infective ways, and can include sharp medical equipment, objects, glasses, chemicals, and needles. Radioactive waste can be generated from nuclear medical treatments that may be used for cancer treatments, and other medical equipment that use radioactive isotopes. However, according to the World Health Organization, 85% of medical facility waste is similar to that of the ordinary household or office space and can include: paper, plastic, liquids or any other materials that do not fit into the above three categories (Pruess & Rushbrook, 1999). Therefore, medical facilities are obligated to provide a proper management for the control of medical waste by educating employees about the best practices for disposing medical and general waste to protect the environment and the local residents from infections caused by pollution.

**Incineration**, According to the EPA more than 90% of medical waste is incinerated (US Environmental Protection Agency, 2011). Most of this waste, however, is incinerated without prior sorting. Incineration reduces medical waste up to 90%. This method of treating medical waste has both negative and positive impacts. According to the EPA 20% of medical waste is plastic that releases a significant amount of pollution into the air when it is converted into ash, and the ash is then dumped in landfills; on the other hand, the heat that is generated from burned material can be used to power boilers in the facility (US Environmental Protection Agency, 2011).

**Social Responsibility** is a new department that has been adopted by medical facilities to enhance their reputation among local communities. Usually, this department combines both environmental and social concerns, which means that the facility is obligated to offer its staff both direction and education for the purpose of implementing the best business practices for the elimination of the negative impacts on the environment. Later on, this project will make a greater effort to target the local community to spark it to participate in protecting the environment for benefit of the local residents. Corporate social responsibility can be described as the process of balancing corporate interests with social responsibility – i.e. generating profits for shareholders while, at the same time, positively impacting other stakeholders including members of the public sphere (Wood, 1991). The ultimate goal of social responsibility is to promote the public interests and incorporate them within the company's strategy for achieving growth and development (Wood, 1991).

Three approaches that implement corporate social responsibility are: community-based-development, philanthropy, and creating shareholder value.

**Community-based-development approach**, in this approach, to achieve their primary goal, medical facilities support the local community by various projects, enhancing their reputation as a facility that focuses on the triple bottom line: people, product, and planet. For example, King Hussein Cancer Center organizes public campaigns to educate the community about HIV/AIDS. Medical facilities develop a strong relationship with the community by establishing a network that enables the community to participate within the medical facility's strategy (Williams & Aguilera, 2008).

**Philanthropy approach** can be described as the process by which medical facilities offer monetary aid to local organizations and communities for development. This approach is not as recommended as the community-based-development approach because it does not enhance the skills of the community to achieve sustainability.

**Creating shareholder value** approach means incorporating a social value within the company's strategy in order to become more competitive in the market. A business needs a healthy educated workforce, resources and a government adept at competing effectively. This approach allows the company to focus on the employees by offering them education opportunities and adequate benefits. As a result, employees will be more motivated to enhance the competitiveness of the company, which will help the company provide monetary aid to community's organizations in the future (Hart & Milstein, 2003).

**Sustainable development**, according to the Brundtland Commission Report, sustainable development can be defined as "development that meets the needs of the present without compromising the ability of future generations to meet their own needs" (Brundtland & WCED, 1987, p. 43).

**Sustainable medical tourism facility** means a medical facility that provides social benefits, environmental benefits, and economic benefits while becoming more competitive in the market. This study has adopted the foundation of Hart and Milstein's framework (2003) for creating a sustainable value, and used it for establishing a sustainable medical facility that can be sustained for the next generation by implementing four primary objectives: 1) Building a strong foundation and addressing environmental considerations, 2) Improving community relations, 3) The expansion of offered services, and 4) Gaining patients from new markets.

# 1 Chapter one: Introduction to Medical Tourism

## 1.1 Introduction

Practitioners and scholars have described medical tourism as the future of health services, the ultimate out-sourcing, a new era, an international business, and a new phenomenon (Lee & Spisto, 2007; Marlowe & Sullivan, 2007; Nath, 2007; Horowitz & Rosensweig, 2007). Countries such as Jordan, Singapore, Israel, and India have adopted medical tourism as the main thrust behind community economic development (Medical Tourism Magazine, 2010). Every year, the United States imports medical services valued at \$1.5 million by American patients traveling abroad to developing countries to receive adequate medical treatments (Steiner, 2010). Similarly, Israel has developed its medical industry to remain competitive with other medical destinations in the global market (Steiner, 2010). Dubai has constructed a medical city that will be considered the largest medical village in the world in 2010, that will be prepared with high advanced medical technology, skilled doctors and decent capacity for hosting foreign patients (Bookman & Bookman, 2007). That said, Jordan, with the highest updated medical technology for treating cancers (Hazaimah, 2008), has finally become the most favorable medical destination for Middle Eastern patients (Hazaimah, 2008). India and South Africa have also entered the global medical tourism market by offering open-heart surgeries that cost 50% less than those being offered in the United States (Bookman & Bookman, 2007). Not surprisingly, American patients are starting to look at medical tourism as an affordable alternative to home-grown medical treatment. Mexico has also taken advantage of its proximity to the United States to offer cheap medical treatments with high quality services for American patients.

Increasingly, the North American market is being targeted by these developing countries looking to host American patients who are in search of adequate medical treatment with reasonable costs. India, which is targeting several markets in the Middle East and North America, is attempting to dominate the global medical tourism market by offering international patients intensive medical treatments including hip replacements, open heart surgery, laser eye surgery, and other advanced medical services (Connell,

2006). As a result of this, India has predicted that in 2012, revenues from the medical tourism sector will exceed \$2 billion, making it the best medical tourism destination in the global market in terms of advanced medical technology and skilled doctors (Connell, 2006).

Naturally, along with this increasing globalization of medical tourism services come some significant questions: what are the factors that play a primary role for motivating patients to travel abroad searching for adequate medical services? What are the roles of stakeholders to develop a medical tourism sector? And what are the main drivers for developing a sustainable medical tourism facility? Answering these questions is vital for the research to describe further the development of medical tourism.

## **1.2 The Rise of Medical Tourism**

Medical tourism burst onto the global scene in the days of classical Greece when Greek pilgrims used to travel from various places throughout the Mediterranean to a small territory in the Saronic Gulf called Epidauria (Gahlinger, 2008). This territory was known as the healing place, named after the Greek healing god; since then the Epidauria became the first medical tourism destination (Gahlinger, 2008). Currently, advanced technology allows people to travel abroad seeking adequate medical services at most advanced medical facilities that offer quality medical care at affordable costs. However, advanced communication and information technology help patients select the most appropriate medical destinations and facilities beyond the borders of their homeland.

With today's technologies, such as the Internet, mobiles (smartphones), ipads, the marketplace of medical tourism has become reachable for patients anywhere in the world. King (2009) describes the marketplace as a location where buyers and providers agree on a transaction to occur; medical tourism services can be reached by patients through alternative resources: through their own initiative and research of communication technologies (internet), or with the help of travel agencies which provide facilitators who select the most appropriate medical destinations. However, with today's technology, patients can learn about thousands of medical facilities and opportunities around the world, allowing them to make comparisons and choices based on the most efficient medical facilities that best suit their specific needs (King, 2009). Bookman and Bookman's (2007) study states that medical tourism emerged on the

global market by relying not only on the host country's resources, but by communicating and creating links with foreign organizations, such as insurance companies and other facilitators who foster collaborative efforts among various organizations; educational medical institutions that offer a variety of medical and health programs for people who are interested in becoming practitioners or physicians in the medical sector; and travel agencies that offer medical tourism trips and services for foreign patients to stage and promote medical tourism facilities throughout particular destinations. Stakeholders are actively associating the medical sector with tourism in order to promote the health sector within the global market because, as Hudson (2009) argues, tourism is one of the main reasons for globalization. Consequently, medicine and tourism are merged together to accelerate the development of this subsector of tourism called "medical tourism".

To date, little consideration has been given to the social and ecological impacts of a medical tourism facility. This Thesis offers a framework for establishing a sustainable medical tourism facility via: determining the primary factors that motivate foreign patients to travel abroad for medical services, and the primary roles that those medical tourism stakeholders play in developing a medical tourism sector by conducting interviews one on one with various stakeholders who are involved in the medical tourism network in Jordan. The aim of this network is to promote the medical tourism sector in Jordan as one entity, enhance the quality of medical care, enhance the competitiveness market, and expand the capacity of medical facilities in terms of beds, skilled physicians and technology. Also, this paper describes the maturity level of the medical tourism network and how it affects the development of the medical tourism sector.

### **1.3 Medical tourism factors**

A review of relevant literature exposes a framework that presents several medical tourism factors, the consideration of which can affect a patient's decision when choosing a medical destination and facility (Smith & Forgione, 2007). This thesis presents the various factors that attract foreign patients to travel to a foreign medical facility. Also, this thesis compares the factors that were determined by interviewees and Smith and Forgione's study (2007). The purpose of this comparison is to determine the other factors that



attract not only American patients but also foreign patients in general. In addition, this comparison helped this research to illustrate the characteristics of a medical tourism facility for hosting medical tourists. These characteristics include: accreditation, advanced medical technology, skilled physicians, social responsibility, accommodation, hotel themes, foreign patient affair, affiliation with external organizations, collaboration with tourism stakeholders, and environmental responsibility. Chapter four defines the characteristics of a medical tourism facility in more depth.

On the other hand, Dunn (2007) highlights the essential elements of creating a medical tourism destination that remains competitive in the global market; these elements are defined by the “PEST” test and include: political strength and stability, economic strength and stability, social behavior, and technological infrastructure and capability. Implementing these foundations soundly is vital to a country’s ability to establish a sustainable medical tourism facility. Chapter four defines Jordan’s foundations that helped to create a medical tourism destination. However, determining these factors will help lay the foundations for the establishment of a medical tourism network that will play a crucial role in fostering the gradual growth of the medical tourism sector which will, meanwhile, respect the three interconnecting circles of sustainable development: social, environmental and economic.

#### **1.4 The Need for Sustainable Development in the Medical Tourism Sector**

The Brundtland Commission Report defines sustainable development as “development that meets the needs of the present without compromising the ability of future generations to meet their own needs” (Brundtland & WCED, 1987, p. 43). This definition has faced criticism from a practical perspective in that it fails to provide a practical solution. Scholars such as G (Brundtland & WCED, 1987)arrod and Fyall (1998), Tyrrel and Johnston (2007), and Hart and Milstein (2003), argue in their literature reviews that many studies define the principles of sustainability without offering ways to put these principles into practice. Furthermore, Garrod and Fyall (1998) argue that defining sustainable development is not as important as defining a framework to achieve sustainable development. Tourism Concerns Worldwide Fund for Nature has developed a list of ten principles of sustainable tourism development (see Table 1).

According to Garrod and Fyall (1998), implementing a sustainable tourism development project requires that these principles be converted into practical methods that work toward sustainability.

**Table 1: Ten Principles for Sustainable Tourism**

<b>Tourism Concerns Worldwide Fund for Nature: ten principles for sustainable tourism:</b>	
1-	Using resources sustainably: the conservation and sustainable use of resources-natural, social, and cultural – is crucial and makes long term business sense.
2-	Reducing over-consumption and waste: reduction of over-consumption and waste avoids the costs of restoring long-term environmental damage and contributes to the quality of tourism.
3-	Integrating tourism into planning: tourism which is integrated into a national and local strategic planning framework and which undertakes environmental impact assessments increases the long term viability of tourism.
4-	Maintaining diversity: maintaining and promoting natural, social and cultural diversity is essential for long-term sustainability, and creates a resilient base for the industry.
5-	Supporting local economies: tourism that supports a wide range of local economic activities and which takes environmental costs and values into account both protects those economies and avoids environmental damage.
6-	Involving local communities: the full involvement of local communities in the tourism sector not only benefits them and the environment in general but also improves the quality of the tourism experience.
7-	Consulting stakeholders and the public: consultation between the tourism industry and local communities, organizations and institutions is essential if they are to work alongside each other and resolve potential conflicts of interest.
8-	Training staff: staff training which integrates sustainable tourism into work practices, along with recruitment of local personnel at all levels, improves the quality of the tourism product.
9-	Marketing tourism responsibly: marketing that provides tourism with full and responsible information increases respect for the natural, social and cultural environments of destination areas and enhances customer satisfaction.
10-	Undertaking research: on-going research and monitoring by the industry using effective data collection and analysis is essential to help solve problems and to bring benefits to destinations, the industry and consumers.

Source: (Garrod & Fyall, 1998, p. 202)

Hart and Milstein (2003) have created a theoretical framework to create a sustainable value that responds efficiently to the demands of the next generation. The framework is constructed for achieving four objectives toward sustainability by implementing four stages which are: 1) accountability and efficiency; 2) reputation; 3) innovation; 4) growth. In addition, the framework defines ways to integrate stakeholders into business processes. This level of engagement can generate work opportunities and benefits for local residents (Jamal & Getz, 1995). Moreover, the framework suggests that to achieve sustainability, links between stakeholders and producers should be actively opened to integrate their points of view on the overall production; otherwise, sustainability cannot be accomplished (Hart & Milstein, 2003). Providing a sustainable value for medical tourism is essential so that the industry remains competitive in the global market.

As will be explored later in this research, the thesis has used the foundation of Hart and Milstein's work (2003) to establish a sustainable medical facility framework that contains four crucial quadrants. The first quadrant represents the basic foundations of a medical tourism facility which include the medical regulations and standards of quality of care. The second quadrant represents inter-organizational relationships, and refers to a network that motivates stakeholders to collaborate with the medical facility for the purpose of achieving common goals. The third quadrant represents a medical facility that should expand its network to include educational institutions and international organizations to qualify its physicians and staff. The last quadrant represents the peak expansion of a medical tourism facility to include extensive services that go above and beyond the patients' expectations, which is mean offering postoperative services for foreign patients to ensure that the medical service has been delivered according to the patients' satisfactions. Chapter two defines further the framework for establishing a medical tourism facility to achieve four objective that help create sustainable values that can be maintained for the next generation. In the discussion chapter of this paper, certain modifications have been made on the framework based on the interviewee suggestions and recommendations. However, this research assigns the following goal and objectives to define further the development of medical tourism sector in terms of medical tourism network and medical facilities.

## 1.5 Research Goal and Objectives

The aim of this research paper is to develop and evaluate a framework for establishing a sustainable medical tourism facility. Meanwhile, three objectives are described and clarified throughout the study to help accomplish the research goals:

- Determine the primary factors that motivate patients to travel abroad for medical treatments.
- Define the role that stakeholders play in enhancing the medical tourism sector.
- Develop a framework for establishing a sustainable medical facility.

This thesis strives to offer a theoretical contribution to the body of literature already published by suggesting a framework that defines the essential foundations of the medical tourism facility and which, ultimately, pursues a sustainable ethic or value. Perhaps this ethic or value will help lay the foundations for a medical facility that responds efficiently to the future demands of international patients and remains

competitive with other medical facilities in the global market while improving the local quality of life and remaining within ecological constrain.

This research is important in order to have a further understanding of the development of medical tourism from three various perspectives, which are the drivers that force patients to look at medical tourism as a solution to resolve their financial status, health condition, or a medical vacation for visiting relatives and tourist attractions. Also, the medical tourism network is another perspective that plays a primary role for improving the medical tourism sector according to the above drivers. Establishing a medical tourism network will provide medical facilities with tools, consultations, and resources to improve the medical services and technology for attracting patients from foreign markets. Determining the roles of stakeholders within the medical tourism network will also help researchers utilize various methods to overcome certain challenges facing the development of the medical tourism sector, such as, malpractice, quality of care, post-operative service, and competitiveness. On the other hand, medical facilities should develop a framework that provides social and environmental benefits while attempting to achieve profitable goals. Therefore, this study is vital for determining the primary drivers that motivate a medical facility to adopt a framework for integrating the company's strategy with a sustainable value.

This research paper adopted Jordan's medical tourism network as a case study for the purpose of evaluating the development of a medical tourism sector for several reasons. First, Jordan is recognized by the World Bank as the best medical tourism destination in the Middle East region and the fifth on the worldwide scale. Second, Jordan has developed a medical tourism network to improve the medical tourism sector. And third, Jordan has five medical facilities accredited by the Joint Commission International for hosting foreign patients from the North American and European markets. For these reasons, Jordan will be a useful case study that will allow us to determine the factors that motivate patients, seeking adequate medical treatments from within a Middle Eastern cultural perspective, to travel abroad; it will also help determine the roles that medical tourism stakeholders play in developing a medical tourism sector.

Having said all this, Jordan is facing some challenges such as water shortages, a high unemployment rate, and a dearth of natural resources. However, examining the development of the medical tourism sector will be vital for the study to determine the efforts of the network for building a competitive medical tourism market while paying close attention to the environmental and social challenges facing Jordan.

## 2 Chapter Two: Literature review- Medical Tourism -

### 2.1 Introduction to Medical Tourism

This section addresses the various definitions of medical tourism, the attributes of medical treatments and health treatments, the medical tourism market, and the globalization of medical tourism. Reviewing these subjects is vital to have a better understanding of the development of medical tourism.

#### 2.1.1 The Definition of Medical Tourism

There is no specific definition that describes medical tourism (Lee & Spisto, 2007; Garcia-Altes, 2005).

Lee and Spisto (2007) have defined medical tourism in a simple context as a *“travel activity that involves a medical procedure or activities that promote the well being of the tourist”*. Medical industry practitioners have defined medical tourism as the act of travelling beyond a home country to receive a healthcare treatment that is either less expensive or more accessible (Kim, Leong, Heob, Anderson, & Gaitz, 2009). The most appropriate definition for medical tourism, illustrated by Bookman and Bookman’s (2007, p. 1) study, claims that it is *“an economic activity that entails trade in services and represents the splicing of at least two sectors: medicine and tourism”*. Jagyasi (2008) has defined the two terms “tourism” and “medical” individually in order to establish a suitable definition for medical tourism; he also reviews the concepts of tourism and medical treatments and concludes that combining the two definitions to understand the attributes of medical tourism is not enough because the medical tourism industry includes various activities and further procedures that play a primary role in creating medical services for international patients. In this sense, medical tourism can be defined as a *“set of activities in which a person travels often long distances or across the border, to avail medical services with direct or indirect engagement in leisure, business or other purposes”* (Jagyasi, 2009, p. 1).

#### 2.1.2 The Attributes of Medical Treatments and Health Treatments

In 2006, a report was released by Tourism Research and Marketing (TRAM), suggesting that combining the two terms “medical treatments” and “healthcare treatments” would create a new sector of the medical healthcare sector entitled “medical and healthcare tourism (Lee & Spisto, 2007).” TRAM’s report explains and places the components of medical and healthcare treatments into four categories:

treatment of illnesses, enhancement, wellness, and reproduction (Lee & Spisto, 2007). According to Lee and Spisto's study (2007), the treatment of illness represents a wide range of services that vary from a simple healthcare service that can be provided by local health professionals, such as vaccines, therapy treatments, and nutrition to a complex surgical procedure such as a heart transplant. Enhancement procedures represent procedures that are non-disease related, (unless some disease has caused a change in the formation of the human body). However, these kinds of procedures require the work and ability of a skilled and qualified physician who will, for example, conduct a cosmetic procedure such as, breast surgery, facelift, liposuction and cosmetic dental work (Lee & Spisto, 2007). Wellness falls under the heading "alternative healthcare services" such as, spas, acupuncture, aromatherapy, beauty care, facials, exercise and diet, herbal healing, homeopathy, massage, and yoga. These healthcare products are usually operated by professionals who are accredited by local or international organizations and health associations. However, these healthcare activities cannot be determined as medical tourism activities, because most of wellness procedures do not require skilled medical practitioners (Lee & Spisto, 2007).

Reproduction is a new area in medical tourism. Some patients are traveling offshore in search of fertilization procedures. According to Lee and Spisto's (2007) study, fertility procedures are illegal in some countries, prompting other countries, like Israel, to provide these surgeries for international patients at attractive costs (Steiner, 2009). Furthermore, birth tourism has been utilized under the category of reproduction tourism, which means that some mothers travel abroad to a foreign country for the purpose of achieving citizenship for their children. As a result, any medical treatments that require the services of trained and qualified practitioners or physicians, licensed facilities, transportation, cultural interaction, and accommodations should be underlined as a form of medical tourism (Lee & Spisto, 2007).

### **2.1.3 The Medical Tourism Market**

Now that we have explained the attributes of medical tourism, identifying the characteristics of the medical tourism market is also essential in order to gain a further understanding of the international market for medical tourism. Cateora and Graham (2005, p. 10), who make distinctions between local and international markets, argue that the international market can be viewed as "*business activities designed*

*to plan, price, promote, and direct the flow of an organization's goods and services to consumers in more than one country for profit.*" In this sense, it can be argued that operating under the medical tourism model, and offering services to patients who are from other countries, can contribute to the benefit of other industries, including those of tourism and travel. The globalization of medical tourism can be explained using Bookman and Bookman's (2007) study: i.e., as a reality that is evolving gradually thanks to the rapid growth of international trading in services such as tourism products, flight tickets, law consultations, etc. Furthermore, Hudson (2009) reviews the two concepts of marketing and international marketing to determine the major factors that drive the globalization of tourism products. Marketing can be described as *"the process of planning and executing the conception, pricing, promotion, and distribution of ideas, goods, and services to create exchanges that satisfy individual (customer) and organizational objectives"* (Hudson, 2009, p. 12). According to this idealistic description of the concept of marketing, medical products such as medical tourism packages, medical equipment and medical services can be promoted, transferred and distributed by certain bodies for a particular location with the express purpose of benefitting practitioners, facilitators, medical institutions and patients.

#### **2.1.4 The Globalization of Medical Tourism**

The wide expansion of the global market allows some international organizations to be established in order to prevent malpractice and raise awareness of best business practices that sustain incentive growth and respond directly to future demands. For example, the General Agreement on Trade in Services (GATS) was established in 1995 by the World Trade Organization and the Council for Trade in Services. The aim of this agreement is to create policies, standards, and regulations that encourage the development of international trade in services between countries. These foundations create a safe environment for global trade in services, allowing developing countries to benefit from their developed counterparts through the exchange of information, ideas and technology. Therefore, some developing countries such as Jordan, Singapore, and India have recruited skilled physicians who have obtained their degrees in the western world and returned to their home countries to practice their profession (Lambier, 2009). This is a general trend in healthcare and medical education by which developing countries provide physicians and



developed countries provide consultations and education in best medical practices. Thus, international patients seeking to travel to developing countries for medical services could be viewed as people seeking adequate medical procedures. However, medical tourism cannot enter the global market, and services cannot be traded safely, unless there is a global market environment that allows trust to be established between developing and developed countries (Bookman & Bookman, 2007).

Cateora and Graham (2005) have constructed a framework that demonstrates the environment of the global market. The framework contains three overlapping circles. The inner circle represents the controllable elements that impact a service provider decision (e.g., price, product, promotion, research, and channel of distribution). The second circle represents the internal local environment that has a direct impact on the foreign operation's decisions. These local environmental elements include the competitive structures of the local market, political and legal forces, and/or economic climates. The third circle represents the uncontrollable elements, namely, cultural forces that influence the life style of the local population (i.e. Jordanian citizens like to visit family and relatives on Friday), geography and infrastructure, structure of distribution, level of technology, competitive forces, and economic forces. These elements cannot be controlled by a service provider because they represent the external market in different countries where foreigners do not have the authority to change their policies, standards, or regulations. To overcome these uncontrollable elements, service providers must work with the requisitions and standards of the external market.

Horowitz and Rosensweig (2007) argue that certain countries, namely those which put confidentiality and privacy as a first priority for patients seeking sex changes, plastic surgery, or drug rehabilitation, offer attractive medical destinations for North American patients who are looking for privacy somewhere outside their home country. In the case of medical tourism, the international market often leads patients to travel abroad to a medical destination in order to receive a medical service for a lower price. Facilitators who work to promote a medical facility at a particular destination should understand the internal medical policies and standards, the international medical policies and standards, and the market policy and standards. Nath (2007) argues that the US market is a highly regulated industry that is full of rules,

standards and regulations. In this market, foreign tourism operators and facilitators looking to attract American patients should have an in-depth knowledge of up-to-date medical regulations in order to target the US market. The global medical tourism market (GMT) is a confluence of such factors as medical and healthcare development, information technology and local law, economics and politics. These factors can be considered as barriers for many medical destinations to reaching an external market such as the US, unless these medical destinations modify their medical regulations, standards, and policies to match those regulations existing in the US market. To this end, Jagyasi (2009) suggests that the international community should agree on an organization that is able to develop rigorous international policies and standards to motivate medical facilities around the world to become part of the global medical tourism market.

To adapt and better reflect large, global trends, the development of the medical tourism sector on a greater scale by medical and tourism stakeholders could incorporate more factors that play a primary role in enhancing the medical tourism market at a particular location for promoting extensive medical services (Garcia-Altes, 2005). Some of these factors include lifestyle changes. For example, the rapid growth of the earth's population is prompting the creation of new models of medical facilities and procedures including retirement communities, fitness centers and cosmetic surgeries. These new models of medical and healthcare facilities are being established by local or international investors according to the market demands. Also, what could further motivate patients to travel abroad is to experiment with new tourism models. Medical tourism offers incentive opportunities such as interacting with local culture, visiting historical sites, and visiting relatives and friends. These opportunities could be attractive for foreign patients that are interested to receive adequate medical treatments and visit some tourism attractions. The limitations of domestic medical services, the lack of medical insurance, the length of local waiting lists, and the high costs at home have forced patients to travel abroad in search of adequate medical treatments that offer a high quality of medical service at low costs. For instance, Malaysia has focused on developing the quality of its healthcare, realizing that to enter the global market requires fulfilling certain requirements. To that end the government has initiated a collaboration strategy to promote the medical

tourism sector in Malaysia as one piece (Garcia-Altes, 2005). Local health providers and government agencies cooperate together in order to provide excellent healthcare services for foreign patients. On the other hand, hotels have integrated with hospitals and medical facilities to provide incentive healthcare packages at attractive costs, which will play a crucial role in the marketing campaign that will reach new markets in North America and Eastern Europe.

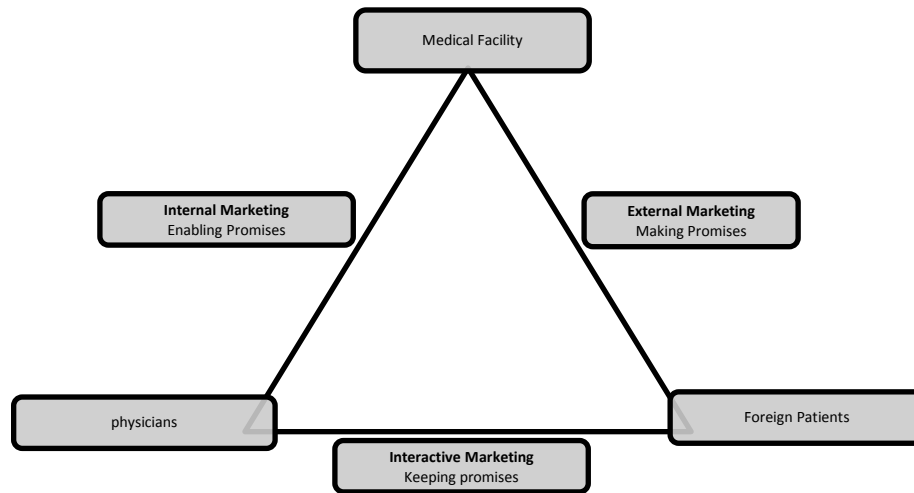
### 2.1.5 The Service Groups Marketing of Medical Tourism Sector

The service groups that market medical tourism must accomplish specific procedures in order to successfully deliver a medical tourism product to international patients. A medical tourism product can be defined as a medical service enhanced with tourism values for foreign patients and provided by licensed physicians and includes check-ups, health screenings, dental treatments, joint replacements, heart surgery, etc (Bookman & Bookman, 2007). However, delivering a medical tourism product to international patients relies on certain procedures and methods that can be effectively described in the “service marketing triangle” (Zeithaml & Bitner, 2000, p. 16) (see figure 1). The purpose of the triangle is to illustrate three interconnecting groups that work simultaneously to develop, promote and deliver services for the company, the customer, and the provider. Since medical tourism products fall under the services industry, the triangle form can be applied to the medical tourism sector to illustrate the three interconnecting groups that come together to stage a medical product in the global market. In the context of medical tourism, the triangle form represents three interconnected groups: medical facilities, physicians, and foreign patients. Between each group there are three different types of marketing: internal, interactive, and external marketing; all three types of marketing are important for creating and maintaining long-term relationships among one another (Zeithaml & Bitner, 2000).

The first type of marketing is external marketing, which represents how a medical facility makes promises based on what a patient is expecting and what else could satisfy a patient’s desire. The goal is to build long-term relationships with patients, and the payoff will be repeated visits to the same medical destination. The second form of marketing represents *keeping* promises – this type of marketing occurs in the “moment of truth” (Hudson, 2009), when the patient interacts directly with the medical facility and

the service at this instant will be produced by the medical facility and consumed by the patient. However, there is a cumulative amount of services provided by the medical facilities and each service adds a new experience that contributes to the patient's overall satisfaction; the payoff will be the desire to do business with the same medical facility. Ultimately, the last form of marketing is internal marketing that represents *enabling* promises. In this stage of the services marketing triangle, Hudson (2009, p. 16) mentions that "promises are easy to make, but unless providers are recruited, trained, provided with tools and appropriate internal systems, and rewarded for good services, the promises may not be kept." In this sense, the medical tourism sector should be built on solid foundations, on rigorous regulations, quality of care, professional licensing, technological capabilities, infrastructures, connection with international medical institutions, superstructures, and governmental involvement (Garcia-Altes, 2005). Garcia-Altes (2005) argues that achieving these elements is important for providing foreign patients with responsible medical treatments; this means that medical treatments should be subjected to certain laws and standards that eliminate malpractices and protect the patient's rights. By being careful and by paying attention to these basic foundations, practitioners and their facilities will build reliable bridges toward sustainable growth by securing and ensuring repeat-visits and referrals and through the cultivation of a world-wide reputation (Garcia-Altes, 2005).

**Figure 1: The Services Marketing Triangle of the Medical Tourism Industry**



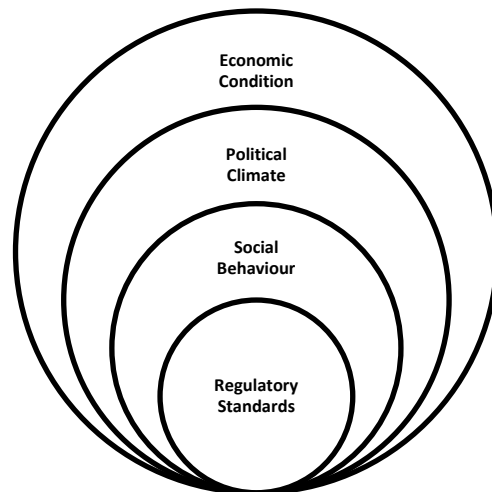
Source: (Zeithaml & Bitner, 2000, p. 16)

## 2.2 Medical Tourism Factors

As this paper explores the factors that play a crucial role in the appearance of the medical tourism sector in the global market, there are several factors (internal and external) that force patients to pursue medical tourism as an alternative medical treatment. For example, American patients are willing to travel offshore to receive medical services that suit their health budgets (Smith & Forgione, 2007). In response to this, several American hospitals participating with the US Senate have established a committee that is obligated to conduct a survey to identify the factors driving American patients to seek medical treatments abroad (US Senate, 2006). These factors were applied in Palvia's work (2007) in two stages. The impact of each factor cannot solely be responsible individually for affecting a patient's decision. Furthermore, these factors (internal and external) impact the patient's decision simultaneously for selecting the most appropriate medical facility. Hence, these factors are categorized into two stages: choice of an international country location, and choice of an international medical facility (Smith & Forgione, 2007). The first stage includes external factors (see figure 2), represents economic conditions, political climate, social behavior and regulatory standards. The economic stability of, both the medical facility and the host country are attractive for American patients (Blesch, 2007).

Dubai, for instance, is capitalizing on its own economy by constructing a healthcare city that is ready to respond to the rapid growth in numbers of international patients (Dubai-Healthcare-City, 2010). The city's medical assets and updated technologies are heavily advertised (visit, <http://www.dhcc.ae/>). In terms of political culture, most patients are only attracted to regions where safety is a high priority in the host country, and where the political system is protected from corruption and violence (Smith & Forgione, 2007). In terms of social behavior, the local residents' perceptions about tourism in general and medical tourism in specific play a primary role for attracting foreign patients. According to Smith and Forgione (2007), foreign patients like to travel to destinations where they can feel welcomed by the local community and travel around the countries without limitations. In terms of regulatory standards, American patients often care about the regulations and laws of the host country (Smith & Forgione, 2007). For example, the US healthcare system provides protection for American patients through its Health Insurance Portability and Accountability Act of 1996 (HIPAA). Therefore, American patients traveling abroad are looking for a similar protection of privacy concerns, something that will provide assurances of confidentiality regarding their medical documents, reports and procedures. In addition, American patients feel more secure with doctors who are covered by insurance companies preventing malpractice. The main purpose of the insurance company is to "cover doctors and other professionals for liability claims arising from the treatment of patients" (Insurance Information Institute, 2007). By law, each physician in the United States is forced to have insurance coverage for liability and malpractice (Insurance Information Institute, 2007).

**Figure 2: External Factors**



Source: (Smith and Forgione, 2007, p. 22)

Internal factors are the second stage in Palvia's work (2007), which represents four factors affecting a patient's choice of an international medical facility. These factors are identified as costs, accreditation, quality of care, and physician training (see figure 3). The first factor is cost. According to some statistics (Insurance Information Institute, 2007), the number of uninsured Americans in healthcare exceeded 46 million in 2005, which means that Americans who are not covered by a health insurance plan will pay a significant amount of money to be medically treated, while insured Americans have access to medical facilities with low fees. However, despite this rapid growth in uninsured American patients, The World Bank has outlined that the medical industry in the United States is excessively expensive and higher than in any other country in the world. For example, the manager of Bumrungrad Hospital in Thailand has estimated charges of medical services in his/her country as costing as little as one-tenth of American fees (Tasker, 2000). The lower costs to medical services in developing countries are cited in Smith and Forgione's study as due, in part, to lower labour costs, lower pharmaceutical costs, and no malpractice insurance costs.

The second and third factors in Palvia's work are hospital accreditation and quality of care. Likely the first thing that comes to an American patient's mind is the qualifications or reputation of the hospital. Most American patients are more attracted to hospitals that work with similar standards in the quality of care to the ones in the United States. In many cases, hospitals in developing countries are equipped with

advanced technology and trained practitioners that exceed western standards and expectations. The World Bank has conducted a study that clearly shows that healthcare quality in developing countries is “above the minimum acceptable standards in industrial countries” (Matto & Rathindran, 2005). An international health organization such as the Joint Commission of Accreditation for Healthcare Organizations (JCAHO) was established to evaluate and accredit healthcare facilities and organizations in order to improve the safety and quality medical services around the globe (Joint Commission International, 2007).

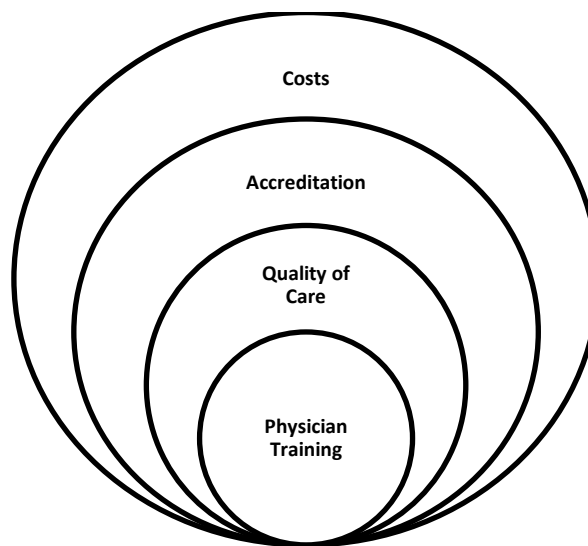
Palvia’s last factor is physician training. A hospital without properly trained practitioners will not be as attractive as a medical facility with skilled physicians for North American patients. Consequently, developing countries provide incentive work opportunities within the medical industry given that they attract international doctors, some of whom are trained in western hospitals. Now, international medical facilities offer complex surgeries that compete with other facilities in terms of costs and quality (Marlow & Sullivan, 2007). Despite this, however, hospitals around the globe are attempting to enhance the communication technologies between medical facilities in order to connect all trained physicians within one network. This plan will help patients in their selection of whom they deem to be the most appropriate physician to preside over their surgery (Smith & Forgione, 2007, p. 27).

Adding to the above factors, Reisman (2010), in his study “Health Tourism”, argues that despite the cost and quality of services, there are several factors that motivate individuals to travel abroad seeking medical services. These factors can be categorized into age, gender, race, and income. A study was conducted by Deloitte (2008) that surveyed 3000 Americans between the ages of 18-75 in 2008 and strived to determine how many people are able to take a risk and consider an elective procedure abroad; the study shows that 51.1 per cent of young Americans were willing to travel abroad for medical services, while 29 per cent of over-62s Americans were interested in receiving medical services from abroad. In terms of gender, 44.5 per cent of the males would travel abroad for medical services while 33.3 per cent of the females would do so. Regarding race, the study shows that 56.8 per cent of Asians and 51.1 percent of Hispanics thought that traveling abroad for medical services is feasible, while Caucasian Americans seem to be more conservative than other races with 37.8 per cent saying they would try it. Because many



Asians and Hispanics living in North America view medical tourism as a great opportunity to visit relatives and friends back home they were, to a larger extent, more open to traveling abroad. On the issue of income, another study was published by International Medical Travel Journal (2008). The study shows that income can be a primary factor motivating Americans to travel abroad for medical treatments. About 30 per cent of the Americans who stated that crossing a border for medical services is a decent option, had an annual income of US\$150,000 or more, while 23.7 per cent of Americans who make US\$90,000 and less were not interested in crossing the border for medical services (International Medical Travel Journal , 2008). Such factors (age, gender, race, and income), of course, can impact the patient before he or she takes the first step to cross the border for medical services. Furthering this, Smith and Forgione (2007) determined the factors that impact a patient’s choice of medical destination and medical facility (see figure 3).

**Figure 3: Internal Factors**



Source: (Smith and Forgione, 2007, p. 22)

Outlining the major factors that force American patients to travel abroad for adequate medical services is important for determining in which areas medical tourism has grown. Hospitals and practitioners are tracking the evolution of medical tourism and how this new economic force is impacting the medical industry in the United States. According to 2008 statistics (Medical Tourism Magazine,

2010), the US exported over 750,000 patients. For this reason, North America has been recognized as an attractive market for developing countries like India, South Africa, and Singapore, which are developing their own medical tourism sectors. As developing countries are increasingly involved in the global market of services, each country should implement the basic foundations of a medical tourism sector (economic stability, social stability, and political stability) in order to improve its ability to host even more foreign patients (Hudson, 2009). Therefore, this paper attempts to define all the major factors that motivate foreign patients to seek medical tourism as an alternative medical treatment. Outlining the major factors will help to identify the role of medical tourism stakeholders for developing the medical tourism sector according to these factors that help to make medical tourism more appealing for foreign patients as an alternative medical service.

### **2.3 Medical Tourism Stakeholders**

Medical tourism stakeholders can be identified as serving multi-purposes such as the promotion of medical services through the use of tourism facilities. By combining the medical and tourism sectors and highlighting the area of overlap between the two sectors, a clearer image of the medical tourism sector will be recognized, making it easier for stakeholders to identify a medical tourism network for improving the medical tourism sector. The definition of medical tourism network may vary from one country to another. Therefore, having a single definition of network is becoming trickier (Lambier, 2009). In 2009, a meeting was organized by the Medical Tourism Association (MTA) to discuss the development of medical tourism in developing countries such as Jordan, Turkey, Mexico and Costa Rica. They all agree that the development of a medical and healthcare tourism network (MHC) is vital for increasing the growth of medical tourism in the most efficient way (Lambier, 2009). The medical tourism network contains four stages of evolution: pre-network stage, the start-up stage, expansion stage and mature stage (Lambier, 2009). The pre-network stage represents all stakeholders such as hospitals, hotels, and facilitators, but no collaborative efforts have taken place at this stage. The start-up stage represents

cooperative efforts among medical and tourism stakeholders for the purpose of achieving mutual benefits. The expansion stage represents insurance companies, medical tourism operators, educational institutions, and government bodies which participated in the overall medical tourism network and which can be called a medical tourism network (Lambier, 2009).and finally, in the mature stage, medical tourism stakeholder collaborate among each other on a regular basis.

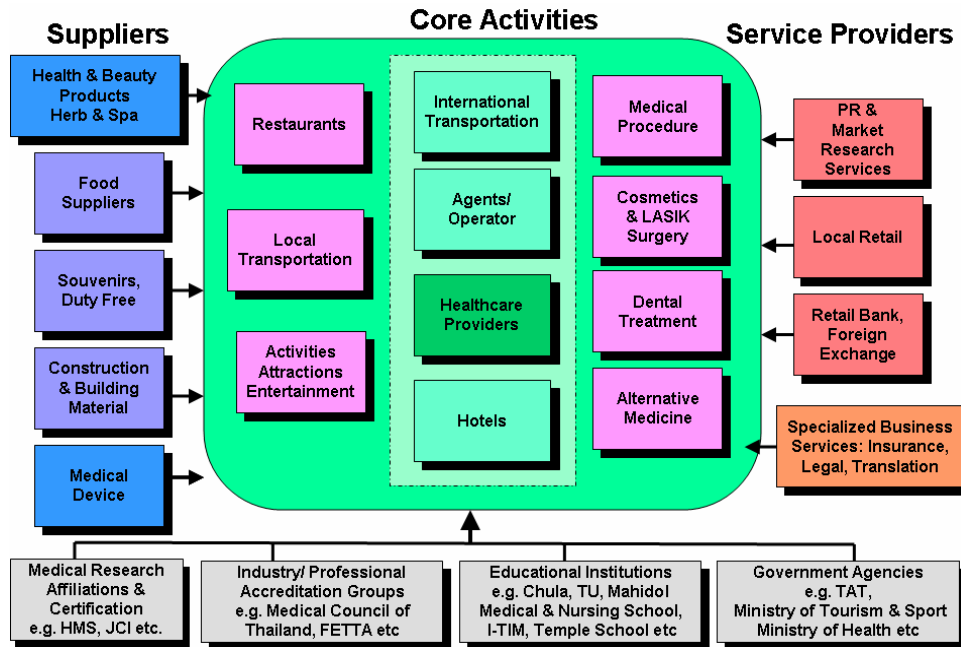
For instance, Thailand has identified its medical tourism stakeholders by developing a medical tourism network that is based on four elements: suppliers, core activities, service providers and support players. Figure 4 represents the medical and tourism stakeholders, which can be seen in the core activities square. The network among medical tourism stakeholders has been expanded to include the support players like the Medical Research Affiliations and Certification, which help private hospitals obtain accreditation by international organizations such as the Joint Commission International (JCI). Industry Professional Accreditation Groups can help local doctors meet the minimum American and British standards and gain the relative accreditation. Educational Institutions are considered important players when it comes to providing the medical and tourism industry with a capable labor force. Ultimately, the last group of players within this network is that of the Government Agencies, which includes the ministries of Tourism and Health. In this vein, the government of Thailand has opened fifteen offices abroad to invite international patients to travel to Thailand for the purposes of receiving medical services while visiting their families, tourism attractions, shopping centers, or attending cultural events. In 2004, Thailand was aiming to be known as the “Medical Hub of Asia”. Currently, this Asian country is ranked as one of the best medical tourism destinations at the local and international level (Rabindra, 2006).

Some researchers, however, realize that the network among medical tourism stakeholders faces some challenges (Harryono, Huang, Miyazawa, & Sethaput, 2006). First of all, having insurance companies play a part within the medical tourism network will increase the cost of medical services for patients, because private hospitals will be obligated to buy insurance to cover potential malpractice issues. Second, in the network there is no a specific organization that directs medical facilities for improving their medical services in order to target medical tourism market. Therefore, private medical facilities have their

own market campaign for promoting their medical services without putting into the consideration how they are going to handle the operation of medical tourism businesses. Therefore, private medical facilities should have direct participations with the medical tourism network for collaborating with other stakeholders such as medical institutions, tourism agencies, facilitators to conduct medical tourism services more professionally.

Also, including environmental organizations within the medical tourism network (MTN) is crucial for private hospitals to convert from being profit-focused organizations to sustainability-focused organizations. Hart and Milstein (2003) have proposed a framework for achieving a sustainable value, meaning a value that provides environmental, social, and economic outcomes. The next section will provide an overview of sustainable development, and the need for implementing sustainability principals to overcome future challenges facing the medical tourism sector.

**Figure 4: The Medical Tourism Network in Thailand**



Source: (Harryono, Huang, Miyazawa, & Sethaput, 2006)

## 2.4 Establishing a Sustainable Medical Facility

Bookman and Bookman (2007), and Dunn (2007), have outlined the importance of implementing a solid foundation for the medical tourism sector to have the ability to host foreign patients. To this end, some

developing countries have already initiated plans to develop their medical institutions and facilities in order to provide local residents with adequate health services in the long-term and respond to the future demands of international patients. However, for medical tourism projects to be considered as a community development projects, they should provide community engagement, quality of life for local residents, environmental protection, cultural experiences, and resolve social issues such as poverty, access to health, education and so on (Bookman & Bookman, 2007).

Bookman and Bookman's study (2007) outlines the benefits of medical tourism for developing countries. Medical tourism should not only enhance the everyday life of a local community but should also provide economic stimulation for the local economy by creating work opportunities, accessible health services, and entrepreneurial opportunities. Globally, international healthcare expenditures exceed \$56 billion per year, making the medical tourism sector one of the major industries in the world (Bookman & Bookman, 2007, p. 170). In contrast, more than half the world lives on less than \$2 a day (Bookman and Bookman, 2007, p. 170). Therefore, it follows that medical tourism, through its positive effects on economies and communities should provide significant benefits to the host countries. According to Bookman and Bookman (2007), improvement in healthcare at a particular destination relies on its economic development and economic development relies on the basic foundations of the host country. Medical tourism, in turn, can improve and expand the public health system, by providing rooms and capacity for members of the public who need medical treatments; by providing access to treatment involving highly advanced medical technology that increases the quality of health services for local communities; and by attracting and providing skilled physicians to perform complex surgeries for local patients. A successful medical tourism strategy is one that provides results in increasing the quality of life for local residents (Bookman and Bookman, 2007).

To enhance the health and living conditions of local residents, medical tourism facilities should provide skilled doctors to treat the local community. In some cases, local residents cannot afford to be treated in private hospitals; therefore, the government should cooperate with the private sector to give patients opportunities to be treated by skilled doctors through subsidized programs (Bookman &

Bookman, 2007). Another positive way to engage the local community within the medical tourism sector is to survey local residents to determine what type of medical tourism or general tourism activities are necessary and sustainable.

McCool and Lime (2001) have conducted research to determine the definition of sustainable tourism. They developed a survey that aimed to answer three questions: 1) How should the tourism industry be sustained? 2) What is sustainable tourism? And, 3) What should tourism sustain? The survey targeted three groups: land management agencies, tourism organizations, and local residents who may benefit from tourism development. As a result, the survey identified the three most important things that the tourism industry should sustain: quality of life for local residents, cultural attractions, and environmental assets. McCool and Lime (2001) suggest that future research should focus on providing more engagement opportunities for local residents to determine what they think tourism should sustain. Some tourism projects put environmental assets as a first priority to be sustained, which might raise some issues such as concerns over delayed construction; other tourism projects designate economic growth as a main thrust toward sustainability, which may also produce concerns over such issues as environmental pollution.

McCool and Lime (2001) determined that a tourism project's benefits should be determined by local businesses, local organizations and local residents. Bookman and Bookman (2007) suggest that the medical tourism sector should be viewed from the local community perspective, otherwise the benefits of this sector will merely serve select groups with the consequence that medical tourism be considered more of an economic project than a community economic project (Hart & Milstein, 2003). There is very little literature that explores medical tourism from a perspective of sustainable development.

Sustainable development has been viewed by tourism developers as an idealistic approach to business, one which requires extra investment, additional employees, and increased amount of time to achieve certain sustainability goals (Hart & Milstein, 2003). However, Hart and Milstein (2003) present four dimensions (internal, external, today, and tomorrow) as a two-by-two, with each dimension in a quadrant (Figure 5). One axis shows the internal and external considerations, while the other represents the *today* and *tomorrow* considerations. Each dimension includes different objectives for the company.

The internal, *today* dimension is for cost and risk reduction (Hart & Milstein, 2003). For example, some hospitals transfer part of their liabilities to third party organizations to reduce risk and costs. The hospital buys insurance coverage that costs \$10,000 yearly for the purpose of reducing the risk of malpractice suits and in the meantime protecting the patient's rights (Bookman & Bookman, 2007). Some industries rely on gas consumption which causes pollution and carbon waste, impacting environmental assets like rivers, forests, and parks. However, at least one study shows that "resource efficiency and pollution prevention are therefore crucial to sustainable development" (Hart & Milstein, 2003, p. 58). In other words, reducing the waste of materials by raising awareness about the best practices of electrical consumption, and using recyclable materials instead of raw materials will play primary roles in triggering a social change to protect local environmental assets. For example, in a study conducted by researchers at the University of Maryland, School of Public Health, the most efficient ways for hospitals to reduce cost were determined (Clark, 2011). They discovered that a small amount of planning and management efforts could save hospitals billions of dollars. Ninety percent of the medical waste items were placed in the wrong containers (i.e. hazardous materials containers) and disposed as hazardous materials, while 24 percent only of the total disposed medical items deserve to be processed as hazardous materials. Just by putting disposable items in the appropriate and corresponding containers will take less of a toll on the environment, reduce energy consumption and disposal expenses. Consequently, countless hospitals have initiated green hospital programs for waste reduction.

The external, *today* dimension represents reputation and legitimacy (Hart & Milstein, 2003). This dimension reflects the idea that the firm follows sustainable business practices that prevent miscommunication and ethical complexities. Working along with stakeholders and following international policies and legislations will enhance the company's overall reputation and draw more community engagement. This dimension is driven by civil society and stakeholders (Hart & Milstein, 2003). Excluding stakeholders' opinions will not move the firm forward; instead, the firm will continue to face difficulties as it tries to improve and move forward. For example, Canada has developed First Nations tourism in the Yukon. This tourism program was operated by the Yukon First Nations Tourism

Association (YFNATA) to promote aboriginal tourist attractions. Yet, one of the main objectives of the YFNATA is to develop positive working relationships among the YFNATA, local communities, industrial firms, and local government. As a result, local tourism enterprises, entrepreneurs and attractions run by First Nations tend to promote not only the landscape of the Yukon Territory, but also the history and the culture of the First Nations peoples, and this will help transfer these values from one generation onto the next (Hudson, 2009).

Not surprisingly, it is crucial for a firm to be in touch with stakeholders' sentiments and views, and the internet is a powerful and suitable communication tool that serves the very purpose of creating networks among stakeholders. Through this technology, stakeholders are now directly connected with the firm's management, which also allows participative opportunities for stakeholders and to share in the company's successes.

The internal, tomorrow dimension represents innovation and repositioning (Hart & Milstein, 2003), which means that the firm should not merely be satisfied with today's payoff, but also develop a deep vision that allows a repositioning of the firm's objectives as to respond efficiently to the market competencies and demands for the future. While the firm generates actual shareholder value, at the same time, it will create tomorrow's products, relative to the customers' needs, and remain competitive in the market. This dimension is driven by the desire for new technologies, such as communication technologies, nanotechnologies, information technologies, and renewable energy (Hart & Milstein, 2003). Using reusable materials rather than raw materials will reduce production costs and provide more budget flexibility, making the firm responsive to any changes in the future. Currently, most companies distribute information using the internet, which saves money, energy, and time as it reduces the consumption of paper and reliance on transportation (Hart & Milstein, 2003). This process of information gathering, which has seen countless banks and businesses replace paper records and forms with online equivalents, undoubtedly protects environmental resources for the next generation. Renewable energy consumption will soon become a commonality because of its efficiency and protection of the environment



(Christensen, Craig, & Hart, 2001). A study conducted by Hart and Milstein (2003, p. 59) argues that *“innovation and technological change are thus the key to the pursuit of sustainable development.”*

Ultimately, the external, tomorrow dimension reflects the growth path and trajectory: To create a company’s vision requires an understanding of what the company is looking to accomplish in the future (Hart & Milstein, 2003). Convincingly, a growth trajectory requires a firm to deliver a product to an existing customer or to enter a new marketplace that has never been discovered before (Hudson, 2009). Consequently, the payoff of trajectory growth will be to serve new market segments. Israel offers an example, as it has built a reputation as one of the world’s best medical tourism destinations (Steiner, 2010) by integrating tourism resources with the medical industry towards new market segments. Israeli hospitals are funding Global Health Israel (GHI) to represent the medical facilities to the rest of the world. Israel has dedicated its tourism resources to attracting American patients to travel abroad; patients who are seeking adequate medical services along with memorable vacations while in Israel. As a result, such medical tourism will play a primary role in developing local medical capabilities by designating a portion of the revenue to enhance medical and health technology. In the near future, such technological development will allow Israel to compete with other medical facilities in the global market and respond immediately to future demands. Presently, Israeli Hospitals provide one of the best health programs in the world for its residents and international patients (Steiner, 2010).

In culmination, Hart and Milstein’s framework enables a firm to work on today’s business, and also, to focus on tomorrow’s technologies and market segmentations. Thus the firm can focus on building a sustainable vision (Hart & Milstein, 2003). Hart and Milstein (2003) argue that creating a sustainable vision requires that the firm associate the concept of enterprise sustainability with the creation of the firm’s shareholder value in order to achieve the company’s goal and objectives simultaneously while respecting the three interconnecting circles: environmental, social, and economic. A sustainability enterprise can be defined as a project that achieves economic benefits while paying attention to the environmental and social considerations (Hart & Milstein, 2003). However, merging the enterprise sustainability with the creation of the firm’s business strategy, will define a sustainable value for the firm.

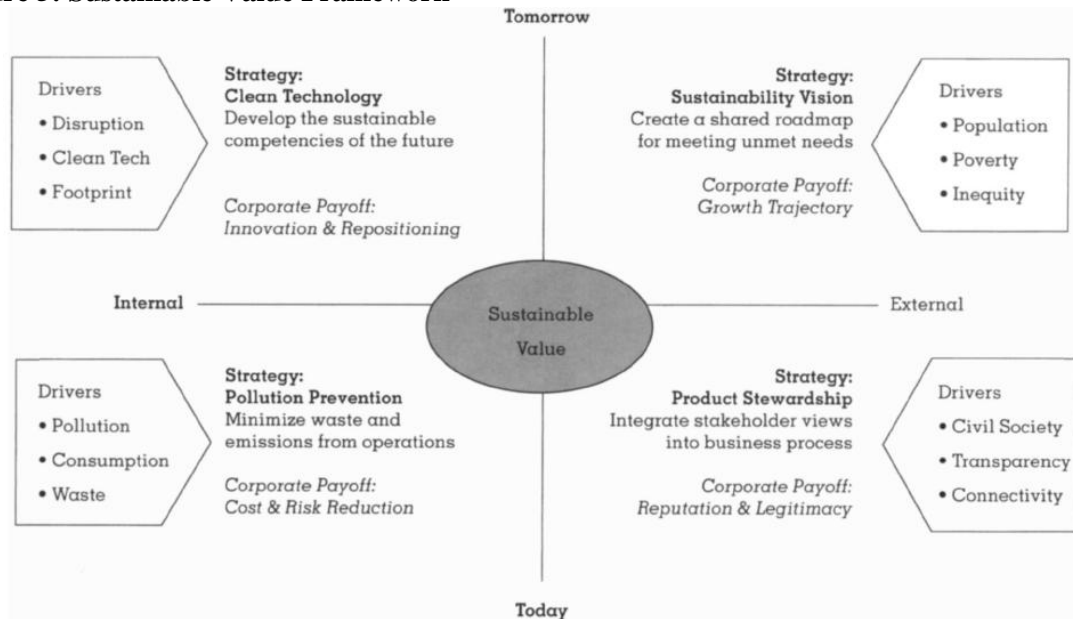
Managers, non-governmental organizations, and multiplayer and community members will all contribute to creating the firm's vision.

The vision of the firm should include obtaining a sustainable value, such as increasing the quality of life for local residents, protecting the cultural and environmental assets, or enhancing the technological infrastructure for future generations. The vision of the firm should be determined and reviewed by the stakeholders and the local community. The framework should also focus on developing the firm's sustainable competencies for the future. The corporate payoff resulting from the establishment of the vision, the sustainable competencies, and the capabilities will be: innovation, repositioning and growth (Hart & Milstein, 2003). The medical facility in any particular destination should have the ability to reform its objectives by responding to unforeseen situations. For example, in the United States, American patients have a desire to travel offshore to seek cheaper healthcare and medical services with a high quality of care and thus the number of American patients who travel offshore for adequate medical treatments is growing quickly (Medical Tourism Magazine, 2010). Consequently, international medical facilities should consider such factors when approaching a new market such as North America; they should study the competitiveness of the market and determine which are the requirements that would make that medical facility as competitive as possible. They should reform their objectives and goals according to the market requisitions.

Thus far, however, these four dimensions have not yet been employed by the medical tourism sector as it works toward building a medical facility that speaks more to sustainability; perhaps this has to do with the fact that, currently, most medical tourism facilities are funded and governed by the private sector, a medical facility with a profit-focused model instead of a sustainable model. According to Bookman and Bookman's study (2007), at present, the medical tourism sector does not rely on tourism resources, the quality of life of local residents, or public health accessibility; instead, this sector relies on the private institutions for providing medical services for foreign patients, which has a direct influence on the culture of conducting the medical facility toward future goal. Therefore, establishing a network is crucial for motivating private institutions to collaborate among each other for enhancing the market while respecting

the social and environmental assets. Singapore, for example, has realized the importance of creating a sustainable value by qualifying local medical staff for providing high quality medical care for foreign patients. As a result, the medical tourism sector in Singapore increased the quality of life for local residents by offering work opportunities within the medical facilities. Singapore has made a great effort to provide the best customer service in the medical tourism industry for foreign patients, making it one of the top medical destinations in the global market (Medical Tourism Magazine, 2010). The quality of medical services is now the main thrust behind the Singaporean medical tourism sector. Hospitals in this country have updated their medical technology to exceed patients' expectations, and now boast trained medical staffs from the local community that represent the local culture and deliver tourism values to the patients (Medical Tourism Magazine, 2010).

**Figure 5: Sustainable Value Framework**



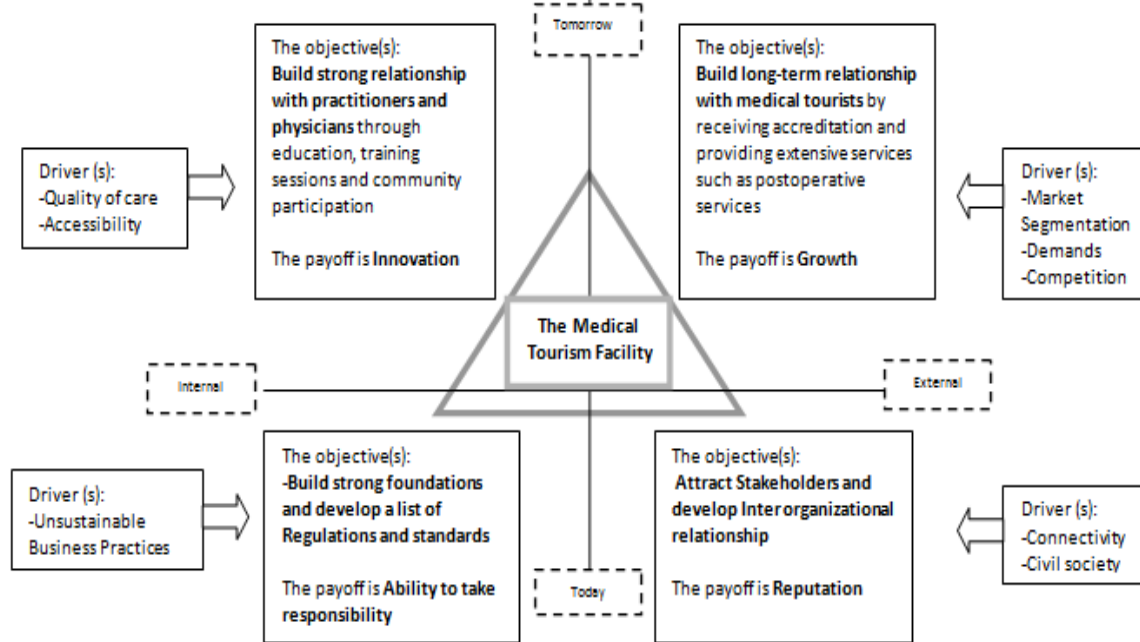
Source: (Hart & Milstein, 2003, p. 60)

#### 2.4.1 Medical Tourism Facility's Framework

Figure 6 represents the framework needed to develop a sustainable medical tourism facility. The framework was developed based on the various perspectives already introduced in the literature review by scholars and practitioners who have a wide range of experience in the medical tourism sector. However, the sustainable value framework (Hart & Milstein, 2003) was chosen in the study because of its

constructive explanations that a firm should assign its objectives based on four dimensions: internal and external dimensions, and long-term and short-term dimensions.

**Figure 6: The Framework for Developing a Sustainable Medical Tourism Facility**



The framework presents the marketing triangle of medical tourism to show the development of the relationship among medical tourism facility’s stakeholders as the facility moves forward. Therefore, the objectives and goals of the framework should be assigned in order to maintain this crucial interaction among the primary actors of medical tourism marketing. A medical facility could exist in the model of a private medical facility or non-governmental medical facility; however the medical facility could also play the facilitator role, providing links, venues, equipments and transportation services in order to facilitate a direct interaction between the physician and the medical tourist. In order to become a medical tourism facility and participate in the global market of medical tourism, a medical facility should have a marketing strategy to attract both skilled physicians and medical tourists (Bookman & Bookman, 2007). The following paragraph provides a descriptive presentation about the framework of developing a sustainable medical tourism facility.

The framework still contains four quadrants; each quadrant is now associated with the services marketing triangle to maintain a long-term relationship with the stakeholders. In addition, each quadrant

will represent the objectives and the payoff of achieving these objectives, and show the drivers specific to a medical tourism facility. Horizontally, the framework still represents two different timelines to achieve both long-term and short-term objectives. Vertically, the framework still represents two objectives: internal objectives and external objectives. The ultimate aim of this framework is to build a sustainable medical tourism facility that provides medical services combined with tourism values while concentrating on the three overlapping circles: environment, social and economic.

The first quadrant represents regulations, policies and standards. Lee and Spisto (2007) adopt Porter's diamond (international trade) theory to explain the area in which the medical tourism sector can be developed. The diamond theory argues that four factors all have a direct effect in improving a medical tourism facility. These factors are: a firm strategy structure, demanding conditions, related and supporting industries, and factor conditions. The main focus of Lee and Spisto's literature review is on the factors of a medical facility's strategy, structure and rivalry. These factors focus on the micro levels of medical tourism, especially on the regulations, policies and standards that eliminate unethical work and malpractice and focus on the quality of healthcare. The first quadrant in the sustainable value framework (2003) was pollution prevention do to cost and risk reduction (Hart & Milstein, 2003).

Hart and Milstein (2003) argue that implementing an energy efficiency program requires a firm to employ more staff and overly skilled management for continued improvements. In such a sustainable framework, that provides methods and principles to minimize the risks to the environment and achieve shareholder value in the most efficient way, the framework should first enhance the ability of the firm to be able to hold responsibilities for preventing environmental pollutions. Hudson (2009) argues that a firm should first outline its capability to handle future projects. It would make more sense to focus first on the firm's ability to hold accountability in starting its implementation plan for approaching a foreign market, before focusing on a project that the firm may or may not be able to achieve. Hence, the first approach that a medical tourism facility must take toward planning for sustainability is to develop a constitution outlining the facility's qualifications and responsibilities concerning the provision and upholding of ethical medical practices, and the motivation of employees so that they provide the highest quality of

medical and healthcare services possible while reducing the negative impact on the environment by implementing projects that aim for energy reduction. The medical regulations, policies and standards are there to prevent unethical practices and also to reduce the risk of medical malpractice. Nonetheless, medical tourism should be monitored and managed according to international and domestic standards so as to enforce the accountability of facilities working to enter the global market and gain the trust of international patients.

The second quadrant, in the lower right corner, represents a strategy for attracting stakeholders and developing an inter-organizational relationship; the payoff of achieving this strategy is the building up of a good reputation within the international market. A medical tourism facility that is looking to enhance its reputation globally would not be implemented as easily if medical stakeholders did not get involved in the marketing campaign of the medical facility for the purpose of achieving common goals. Private medical facilities realize that the creation of an association that represents the medical tourism sector is vital for integration with other sectors in order to promote: entry into new markets, communication with insurance companies for health coverage services; and the delivery of a positive image to international patients surrounding the medical facility's services (Jagyasi, 2009).

Within the medical tourism sector, collaboration with local communities and integration with local governments, nongovernmental organizations, and the public sector, are vital to the elimination of barriers like those posed by: the distances between medical facilities and patients' homes; troublesome regulations that might reduce the number of patient visits (e.g. complicated visa processes between certain countries); or the provision of illegal and unregulated services at the host country's borders. As you can see in the second quadrant, Hart and Milstein (2003) note that a firm should integrate with local communities and impose the stakeholders' opinions, which will help reduce the risk management and enhance the reputation of the firm at two levels: internally and externally (Hart & Milstein, 2003). For instance, Jordan has established the Private Hospital Association to overcome the financial crises that have spread across the entire world; the main purpose of this association is to integrate all private hospitals and tourism organizations into one network for the purpose of promoting its national medical

sector to the world (Lambier, 2009). Similarly, Israel has established Global Health Israel (GHI) to enter the American market by working with insurance companies in the United States to organize medical trips for insured patients. To resolve some of the challenges facing the medical tourism industry, such as budget shortfalls or physician shortages, collaborative efforts and integration among stakeholders is the key to overcoming all of these challenges (Bramwell & Lane, 1999). Despite the obvious benefits of working partnerships – achieving common interests with low costs, providing decent budgets, and distributing liabilities and obligations – a further understanding of the engagement models to prevent miscommunication between stakeholders is required.

Bramwell and Lane (1999) outline the importance of attracting various stakeholders with different interests. The benefit of drawing different stakeholders into the mix is pursuing multiple interests and creating multiple paths toward innovation and development (reputation). The rapid growth of partnership projects within the tourism industry helps maintain competitiveness in the global market by bringing together capital, resources, and expertise from several stakeholders (Kotler, 1984). Having said this, tourism projects, including a medical tourism facility, should not look at stakeholders as merely and exclusively financial solutions, but also as potential contributors to the decision-making process (Joppe, 1996).

The third quadrant, in the upper left corner, represents a strategy to build a strong relationship with physicians and practitioners. This will be accomplished through education training sessions and community participation. These objectives are crucial for innovating ideas that help provide unique services to medical tourists. Education is also considered a major factor underlying the importance of accountability within the medical tourism industry. For example, hosting events dedicated to raising awareness about physicians and best business practices will help reduce the incidents of malpractice in the future and earn the trust of foreign patients (Bookman & Bookman, 2007).

Hart and Milstein (2003) point out that the rise of new technologies such as nanotechnology, information technology and renewable technology provide opportunities for firms to change their operations from using fossil fuels to ones that rely more greatly on green technology. Certain medical

facilities are using green technologies and raising awareness about best sustainable practices to eliminate environmental degradation. The Green Hospital project is a program that aims to educate medical staff about the best methods for energy reduction and medical waste (Clark, 2011). To achieve recognition within this program, a candidate must revise a long-term plan that offers education opportunities for qualifying employees and a commitment to these methods which require experienced staff. The hospital should also provide education opportunities for new graduates to participate within this program (green hospital).

By providing local residents with an increased accessibility to public health services such as education and adequate health care will protect the growth and prosperity of local communities by curbing emigration of residents in search of better public services elsewhere. In addition to its mandate of educating local residents and raising awareness about best business practices, the medical tourism facility must also provide both local and international patients with trained physicians and practitioners who can deliver medical treatments with high tourism values and an exceptional quality of healthcare (Bookman & Bookman, 2007). In summation, the major benefit of implementing these objectives is to enable a medical tourism facility that can keep the promises it makes to international patients by building long-term relationships with stakeholders (Hudson, 2009).

Ultimately, the last quadrant, in the upper right corner, represents a strategy for building long-term relationships with medical tourists by offering them an accredited and competitive service, and added post-operation options such as medical consultations, spa, and therapy message . . . etc. The payoff of implementing these objectives is approaching new market segments in West Europe and North America where patients are looking for accredited foreign facilities that offer extensive services for making sure that the medical treatments were conducted according to the patients' interests. Accreditation by an international association is crucial for facilities approaching new market segments. A medical facility can obtain accreditation through the Joint Commission International (JCI) by attaining the regulations and standards that are requested by three areas: the destination country, the source country, and the



international community. All are important in developing a medical facility and turning it from a local operation into one that is recognized internationally.

There are several health accreditation programs recognized on the world stage; the type of service that will be provided by the medical facility for its patients is, obviously, an important factor in determining which accreditation will be pursued. According to Dunn (2007), before a medical facility applies for accreditation, it should first have the ability to host foreign patients and maintain its promise as an advanced medical facility that has the ability to provide high quality medical care. This part of the medical facility framework should expand its network to reach other organizations such as the Joint Commission International to meet the needs of the international patients. Also, the medical facility should remain up-to-date with the Joint Commission International to track any new policies, licenses, and modifications to the international medical and healthcare regulations (e.g., the privacy code) (Marlow & Sullivan, 2007).

To this end, medical tourism is becoming the buzz word for the merging of tourism and health organizations (Medical Tourism Magazine, 2010). However, despite the many benefits that medical tourism may offer local businesses and international patients (i.e. in the form of foreign exchanges, job opportunities, and an increase in the quality of life for local residents), medical tourism is still facing significant challenges. Horowitz and Rosensweig (2007) highlight some of these issues and challenges in their study, “Medical Tourism-Healthcare in the Global Economy” and argue that a competitive medical tourism facility must address several factors and offer: consultation services and the involvement of refereeing physicians; postoperative procedures; and malpractice. Avoiding the resolution of these challenges could heavily impact the industry and prevent it from evolving. For this reason it is very important to develop a framework for a medical tourism facility that will: raise awareness about sustainable business practices; reduce malpractice; grow within the local ecological limits; define the role of stakeholders in order to help enhance the reputation of the medical tourism facility among medical tourists; and, finally, ensure that the local community will benefit. Hopefully in the near future, more studies will focus on the development of the medical tourism facility from the perspective of community

economic development, and how the local community can manage a medical tourism facility that provides tangible benefits to the local economy without damaging the natural environment at the same time.

### 3 Chapter Three: Methodology

#### 3.1 Introduction

This chapter begins with a description of the study's objectives and goals and then goes on to provide a description of the sample population that has been interviewed and the data collection process that was used. Ultimately, a description of the analysis process concludes the chapter.

The study aims to develop a framework for establishing a sustainable medical tourism facility. A further aim is to define the role of the medical tourism network's stakeholders in developing the medical tourism sector at a particular destination. Thus, three objectives are identified and clarified throughout the study to help accomplish the research goal: 1) Determine the primary factors that motivate foreign patients to travel abroad for the purpose of receiving high quality medical care; 2) Define the roles of stakeholders in developing a medical tourism sector; and 3) Develop a framework for establishing a sustainable medical tourism facility.

In order to gain a complete and multidisciplinary understanding of the complexities of a medical tourism facility within the context of sustainable development, this study has employed a qualitative method, and a post-positivist approach. According to Daly (2007) post-positivism uses various tools – traditions, experiments, and observational studies – to provide further explanations about the reality of a particular phenomenon such as medical tourism. This is an appropriate method, which make the research able to include the different perspectives of all stakeholders involved in the medical tourism network, whether professors, government employees, facilitators, travel agents or physicians via conducting one on one interview. The key role is to determine the primary factors that motivate patients to travel abroad and the role of stakeholders to develop a medical tourism facility that provides shareholder value incorporated with sustainable enterprises.

Therefore, this research adopted a case study method for providing further descriptions about the research topic. According to Stake (1978), case study methodology is one of the most recommended methods by scholars because it reflects the various experiences and perspectives about the issue or the phenomenon. Also, a case study method can be used to examine an existed theory, framework or

principles and how it fits in reality (Stake, 1978). Thus, this research used a case study to describe the role of medical tourism stakeholders from various perspective and experiences, as well as to receive recommendation about a framework that was developed based on the literature review (Stake, 1978).

### 3.2 Case study

Jordan, known as the Al-Hashemite Arab Kingdom of Jordan, is located in the Middle East, south west of Asia. The country's borders are: Saudi Arabia to the southeast, Iraq to the east, Syria to the north, and the Palestinian Territories and Israel to the west. The population of Jordan reaches over 5 million inhabitants (United States Agency for International Development (USAID) , 2010). It became a member of the World Trade Organization in 2000, signed the Greater Arab Free Trade Agreement in December 2001, and the Euro Mediterranean Free Trade Agreement in 2001(TDS, 2009). Evidently, Jordan, which boasts an annual economic growth of 7 % (TDS, 2009) is becoming one of the fastest growing economies in the Arab region. Because of these foundations, in 2008, the World Bank recognized Jordan as the best medical tourism destination in the Arab region and the fifth best medical tourism destination in the world (United States Agency for International Development (USAID) , 2010). According to the United States Agency for International Development (USAID), in 2009, Jordan hosted over 200,000 foreign patients. Therefore, it is truly worthwhile to examine the country using the current research to illustrate the basic foundations that enhance the Jordanian economy and make the country one of the best medical tourism destinations in the world. Among the benefits of selecting Jordan as a case study for the research was the fact that, owing to the massive economic constructions that started taking place in the capital, the city has enhanced the image of Jordan as a tourism and medical destination for Arab and foreign patients.

Jordan has established a medical tourism network to enhance the medical tourism sector by motivating medical tourism stakeholders such as medical facilities, governmental/non-governmental institutions, and external medical institutions to collaborate among each other to promote Jordan's medical tourism sector as one sole unit. The medical tourism network is made up of governmental organizations, non-governmental/non-Jordanian organizations, and private organizations. The network is

developing the medical tourism sector on two levels. The first is the medical tourism destination level, and the second is the medical tourism facility level. The network is developing the medical tourism destination by implementing a marketing strategy for the promotion of the medical sector to foreign patients, the attraction of foreign investments within the medical sector to enhance the quality of medical care, and the development of a hospital information network where physicians can learn from each other and elevate their medical skills. Thus, stakeholders who are involved within the medical tourism network in Jordan have been included in this study to obtain a greater understanding of the role that the medical tourism network plays in developing a medical tourism destination, as well as, in developing medical facilities.

### **3.3 Data Collection**

Data was collected through nine semi-structured, one-on-one interviews of about 30-45 minutes in length. The researcher created 23 questions (Appendix A) that were vetted by the researcher's academic advisor. These questions were then forwarded to the Office of Research Ethics at the University of Waterloo for approval (Appendix B). The names and titles of the interviewees were eliminated from the study upon their request. However, each interviewee was selected for an interview based on suggestions received from people who are members in the medical tourism network.

Potential interviewees were sent an email (Appendix C) requesting their participation in a 30-45 minute semi-structured interview. Upon receipt of a positive response from a potential interviewee, a second email (Appendix D) was sent to provide more information regarding the study, request the consent of the interviewee (consent for: participation, including their names in a list of participants, audio recording of the interview, and use of anonymous quotations) and to confirm appropriate times to complete the telephone interview. The interviewees reviewed and completed the consent form (Appendix D) before each interview was completed.

Table 2 indicates the stakeholders who agreed to participate in this study as interviewees and provide information regarding the medical tourism sector in Jordan.

**Table 2: Medical Tourism Network's Interviewees**

<b>Name</b>	<b>Type</b>
Private Hospital Association	Non-governmental Organization
USAID	Non-Jordanian Organization
Jordan Investment Board	Governmental Organization
Jordan Tourism Board	Governmental Organization
Al-Khalidi Medical Center	Private Organization
Specialty Hospital	Private Organization
King Hussein Cancer Center	Private Organization
Jordan Hospital	Private Organization
Directorate of Health and Environment	Governmental Organization

The interviews were conducted in-person face to face and audio recorded and hand-written notes were taken throughout their duration. The order of the interview questions varies from one interview to another, depending on the interviewee's background and expertise. In some cases, probe questions were asked by the researcher in order to identify a new idea that was introduced by the interviewee. However, in all cases, the same subjects were discussed and explained through responses to the questions that were asked in each interview.

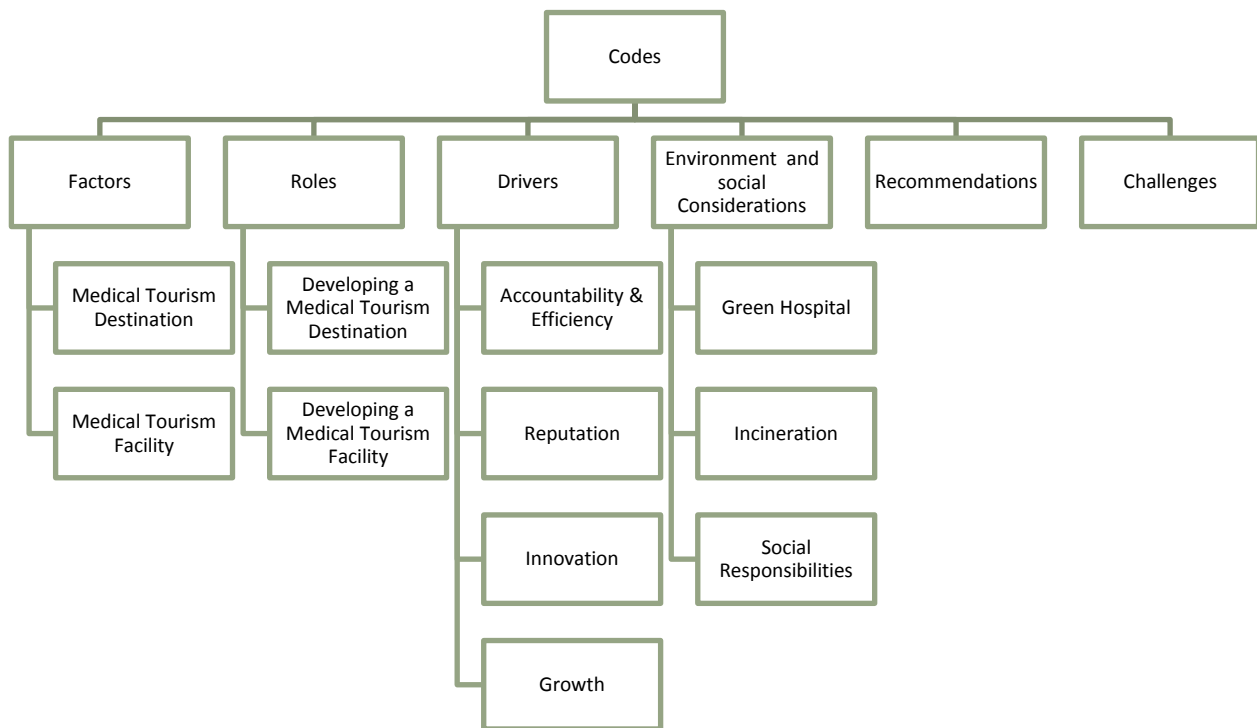
Emails (Appendix E) thanking the participants and providing further contact details for the researcher was sent after completion of each interview. Contact information for the University and the researcher's academic advisor were provided throughout the documentation that was provided to the interviewees.

### **3.4 Data Analysis**

The data analysis process was conducted by implementing several steps. The first step was transcribing all the interviews, deductive coding the transcripts, then inductive coding the transcripts, and then

narrowing down the data by eliminating irrelevant information and highlighting relevant information to the research’s questions and topic. The second step was creating a list of all the codes such as factors, roles, drivers, environment considerations, recommendations, and challenges. Third step was merging and refining the relevant codes to represent meaningful groups such as factors that were grouped into two categories: factors belonging to the medical tourism destination, and factors belonging to the medical tourism facility. The roles of medical tourism stakeholders were grouped to define three primary roles: facilitator, guide, and representatives. And the drivers for implementing a sustainable medical tourism facility were grouped into four categories: accountability and efficiency, reputation, innovation, and growth. Figure 7 represents the final categories and sub-categories that resulted from coding the data.

**Figure 7: Data Analysis Process**



Once the meaningful categories were determined, the content from the transcripts from the related codes was copied and pasted into one word document per meaningful group (i.e., category) (Daly, 2007). The content within the word file was further analyzed to confirm the sub-categories and determine how

best to present these findings (Daly, 2007). The findings for each sub-category are summarized in the Results Chapter, including representative quotations to strengthen the richness of the case (Daly, 2007).

The last step was comparing these findings to the literature to come up with conclusions as to the contributions of this thesis (Daly, 2007). The empirical findings were also used to modify the theoretically derived Sustainable Medical Tourism Framework into the final version presented in the Discussion Chapter.

### **3.5 Reliability and Validity**

Daly (2007, p. 254) argues that for reliability, “the emphasis is placed on the sustainability of the results”.

The sustainability can be demonstrated via various methods, including confirmability, trustworthiness, transferability and dependability of the findings (Lincoln & Guba, 1985). Also, Daly (2007) argues that replicability is an essential component of reliability. Therefore, researchers engage other researchers to analyze and interpret a segment of data to see the extent to which both come to the same conclusions about the data (Daly, 2007). Also, the coding of the data could be done via a group of researchers to eliminate the effects of individual interpretations. The researcher in this study analyzed apportion of the data with another researcher to make sure that both researchers have similar conclusion about the data. In addition, the research made a list of codes with other researchers to reduce the personal views of the researcher about the data.

According to Daly (2007, p. 254), “validity is concerned with the integrity of measurement”. In the qualitative study, researchers are more concerned that their claims are well grounded in the data (Daly, 2007). Also, Daly (2007) argues that validity is connected to the issue of representation and interpretation. Therefore, this research paper compared the result of the research with similar studies in order to make sure that the phenomenon is being explored in the right direction (Daly, 2007).



## 4 Chapter Four: Finding

This chapter begins explaining the factors that are required for a particular destination looking to host foreign patients. Further details will be provided about the case study's (Jordan) foundations – political, social, economic, education, sustainable development and tourism – and then this chapter will justify the development of medical tourism within Jordan by explaining the role of the medical tourism network's stakeholders in developing the medical tourism sector and the medical facilities.

### 4.1 Country Analysis

The Al-Hashemite Arab Kingdom of Jordan is located in the Middle East, in the west of Asia. The country shares borders with: Saudi Arabia to the southeast, Iraq to the east, Syria to the north, and the Palestinian Territories and Israel to the west. Jordan became a member of the World Trade Organization in 2000<sup>1</sup>, signed the Greater Arab Free Trade Agreement in December 2001, and the Euro Mediterranean Free Trade Agreement in 2002<sup>2</sup>. Jordan, with a population that reaches over 5 million inhabitants<sup>3</sup>, and which boasts an annual economic growth of 7%, is becoming one of the fastest growing economies in the Arab region<sup>4</sup>.

#### 4.1.1 Political

---

Jordan has a strong relationship with its neighboring countries. In 1994, the government of Jordan signed a peace agreement with Israel, which is supported by the US government<sup>5</sup>. Since then, Jordan has enjoyed a safe environment for investments and continues to draw international companies to set up offices in the capital. The security forces in Jordan are very strong and receive training from well-developed countries such as the United States, the United Kingdom, and France. The main reason behind this level of collaboration between Jordan and the developed countries is because of its critical geographical location near the West Bank, Syria, Iraq, and Saudi Arabia, an area within which Jordan plays a significant role as

<sup>1</sup> The Jordan-U.S. Free Trade Agreement (2000), <<http://www.jordanusfta.com/>>, Accessed June 7, 2011

<sup>2</sup> Ministry of Industry (2004), Jordan <<http://www.mit.gov.jo/Default.aspx?tabid=732>> Accessed June 7, 2011

<sup>3</sup> The Jordan National Census (2004)

<sup>4</sup> Yarns and Fibers Exchange (2011), Jordan Rising Demand for Indian MMF Textiles, <[http://www.yarnsandfibers.com/revamp\\_ir/report\\_fullstory.php3?id=552#](http://www.yarnsandfibers.com/revamp_ir/report_fullstory.php3?id=552#)>, Accessed June 7, 2011

<sup>5</sup> Israel Ministry of Foreign Affairs (1994), Israel-Jordan Peace treaty, <<http://www.mfa.gov.il/MFA/Peace%20Process/Guide%20to%20the%20Peace%20Process/Israel-Jordan%20Peace%20Treaty>>, Accessed June 7, 2011

a peacekeeper. Jordan is very well known as a country that supports peace; fifty thousand Jordanian soldiers were armed under the United Nations' supervision in order to help other countries experiencing natural disasters<sup>6</sup>. This international participation helps Jordan enhance its global image as a country that raises awareness of human development.

In 2010, the United Nations' report for Human Development Index, initiated by the United Nations Development Programme (UNDP)<sup>7</sup>, indicated that Jordan ranked 82 out of 169 countries in terms of human development. The criteria used to evaluate the human development for a country rely on three primary factors: a long and healthy life, access to education and a decent standard of living. Based on these criteria Jordan was ranked in eighth place regionally. Thus, Jordan, which offers a safe haven for Arab citizens looking to escape from conflicts in neighboring countries, is an attractive country because of its social stability.

The good political reputation that Jordan has gained among western countries encourages patients from the Middle East and the western regions to travel there for medical treatments. The government of Jordan believes that to develop a strong economy that draws investments from abroad and to develop strong relationships with Arab and western countries, its economy must be built and developed under a safe environment. Therefore, political stability is seen as one of the main foundations accelerating the development of the country's medical tourism sector<sup>8</sup>.

#### 4.1.2 Social Element

---

By 2009, the population of Jordan, a place where many cultures and people of different origins have integrated to shape the nation, reached over 5 million citizens. Immigrants from various countries such as Russia, Armenia, Palestine, Egypt, Syria, and Turkey have settled in Jordan. These waves of immigration, which began in full force in 1946, were the result of several factors including conflicts, political instability and poverty in neighboring countries. Jordan was seen as a destination where a better standard

---

<sup>6</sup> Jordan Times (2007) , Jordanian Peacekeepers earn Country Good Reputation, <<http://www.jordanembassyus.org/09262007004.htm>> Accessed June 7, 2011

<sup>7</sup> United Nations (2020), Human Development Index

<sup>8</sup> Jordan Hospital, Interview (7)

of living could be accessed. According to the Human Poverty Index, in 2010, Jordan ranked as a country with the 11<sup>th</sup> highest standard of living among the developing countries and the second highest within the Arab world<sup>9</sup>.

In 2010, a study conducted by International Living Magazine, highlighted the countries which provide the best quality of life for local residents. In this context, in 2010, Jordan was recognized as a country with the highest ranking in the Middle East and North Africa (MENA)<sup>10</sup>. The study uses the following nine indicators to measure the quality of life for a country: cost of living, cultural integrity and leisure, economic development, environmental protection, freedom, health accessibility, infrastructure, safety and risk, and natural climate diversity.

In contrast, Jordan ranks in 19<sup>th</sup> place as the most expensive country in the world<sup>11</sup>. A negative consequence of this spike in the cost of living, and of the development of Jordan's medical tourism, is the reduced access that poor people might have to adequate medical services. The medical costs associated with access to private medical facilities remain the same for both local and international patients, and this means that the majority of local patients in Jordan receive medical treatment in public hospitals and modest medical centers; only wealthy Jordanians are able to gain access to treatment with advanced medical technology and highly skilled doctors. To counter this, the Jordanian Government is working to develop tenant housings, schools, and medical centers in poorer areas. This project is aiming to build houses and offer poor residents access to good medical centers. In 2008, the human settlement project was launched by the government of Jordan to build approximately 120,000 residential units for Palestinian refugees and a community medical center – this number can be increased to include another 100,000 residential units if needed<sup>12</sup>. The main purpose of community medical centers is to provide residents of

---

<sup>9</sup> United Nations Development Programme (2010), Human Development Index <[http://hdr.undp.org/en/media/HDR\\_2010\\_EN\\_Table1\\_reprint.pdf](http://hdr.undp.org/en/media/HDR_2010_EN_Table1_reprint.pdf)>, Accessed June 7, 2011

<sup>10</sup> International Living Magazine (2010)

<sup>11</sup> Jordan Watch (2006), It is Official: Amman is the most expensive city in the Arab world, <<http://batir.jeeran.com/archive/2006/2/21834.html>>, Accessed June 7, 2011

<sup>12</sup> Arabian Business (2008), Jordan's King Abdullah II Lunched a five-billion-dinar housing project on Tuesday for low income citizens across the kingdom, <<http://www.arabianbusiness.com/jordan-unveils-7bn-housing-project-188525.html>>, Accessed June 7, 2011

poor communities with adequate medical services – not to target foreign patients. This, naturally, contrasts with the expansion of the medical tourism sector in Jordan, which relies on a private sector whose main purpose is to increase profits by targeting wealthy patients who are willing to receive high quality medical care. By comparison, the community medical centers that are going to be built in poorer areas will not be prepared with as highly skilled doctors and advanced technologies due to limited financial resources. Thus, poor communities will not have the same access to advanced medical facilities because of the latter's high medical costs.

Regarding its level and system of education, Jordan is one of the countries in the Middle East that has an education system that is highly respected internationally<sup>13</sup>. According to the United Nations Education Science and Cultural Organization (UNESCO), Jordan was evaluated as having the 8<sup>th</sup> best education system in secondary schools worldwide and the best system in the Arab region. This is likely the result of Jordan's efforts to integrate cutting-edge communications and information technologies into its education system with the purpose of attracting Arab citizens who travel abroad in search of highly advanced education systems<sup>14</sup>. Lastly, with 2,000 scientific researchers per million residents, a figure that exceeds those in Israel and the United Kingdom<sup>15</sup>, Jordan is an important scientific destination as well.

This level of educative development has made a strong impact on the medical tourism sector. Most medical schools within Jordanian universities have a direct affiliation with universities in the West, and as a result, their students are able to meet western medical standards and regulations. Consequently, the medical tourism sector is filled with skilled doctors who are able to conduct complex surgeries successfully for international patients.

### 4.1.3 Economy

---

Jordan is a fairly small country that has a shortage in important natural resources such as water. Because of this, Jordan is facing difficulties in improving its economy. Despite this, however, King Abdullah has

<sup>13</sup> USAID in Jordan (2006), <<http://jordan.usaid.gov/sectors.cfm?inSector=17>>, Accessed June 7, 2011

<sup>14</sup> USAID (2010), Turn to Jordan: Your Smart Medical Destination

<sup>15</sup> Declan Butler (2006), Statistics on scientific investment and performance are lacking across the Muslim world, Nature <<http://www.nature.com/nature/journal/v444/n7115/full/444026a.html>>, Accessed June 7, 2011

found his own way to improve the country's economy by raising awareness about the tourism attractions in Jordan and transforming the country into the regional information and communication technology hub (ICT). For example, the Ministry of Tourism and Antiquity in Jordan has developed a new strategy for the year of 2010-2015. The strategy aims to enhance the tourists' experience via providing extensive and competitive tourism services, and also enhance the competitiveness of the tourism industry by improving the quality of services in hospitality establishments to reach international requirements<sup>16</sup>. In addition, the five years strategy seeks to increase the number of jobs within tourism sector by creating 25,000 additional jobs, and provide more female participation by 15 percent. On the other hand, Cisco has announce a project partnered with the Jordanian government that worth \$10 million dollars to enhance the development of the medical tourism market by creating a medical network among medical facilities in Jordan for sharing knowledge and qualifying the best physicians in the world<sup>17</sup>.

As the tourism and CIT markets in Jordan are growing, so too is real estate, as Jordanians living abroad invest their money in this area back home in order to secure a place to which they may later return. In addition, the Jordanian government has provided incentive investment offers for international investors to allocate some of their projects in Jordan and as a result, the capital city, Amman, has been turned into a region populated by many foreign companies. Specifically, the Jordanian government has reduced the tax rates for foreign investors, and established tax-free zones with the goal of encouraging international investments within the country. Jordan's leaders have realized that expanding their country's capacity to host international business is important to sustain the country's economy. Thus, they are focusing on allocating a percentage of the revenues gleaned through foreign investments for undeveloped areas within the country to eliminate poverty, and reduce unemployment rates. In this vein, the government of Jordan has established an organization entitled 'Jordan Investment Board' to motivate foreign investments and

---

<sup>16</sup> Malkawi, K (2011), National strategy seeks to double tourism revenues, <<http://www.jordantimes.com/index.php?news=39943>>, Accessed 28 July 2011.

<sup>17</sup> Cisco (2011), Cisco Announces \$10 Million Investment to Support Sustainable Job Creation and Economic Development in Jordan, < <http://newsroom.cisco.com/press-release-content?type=webcontent&articleId=296130>>, Accessed 28 July 2011.

attract stakeholders to invest within the medical tourism sector. According to the United States Agency for International Development (USAID), which is an organization funded by the United States of America, in 2009, the medical tourism sector in Jordan generated one billion dollars, making it one of the major revenue sources that have hugely impacted the country's economy. Having said this, the medical tourism market in Jordan depends largely on the demand of medical services by Arab and Muslim patients. According to the World Bank, most skilled physicians and medical staff in the medical tourism sectors are Jordanians with a medical degree from respected western universities<sup>18</sup>. Consequently, to remain competitive on this global playing field, Jordan should enhance its medical tourism market by developing a medical tourism network to motivate collaboration among stakeholders and promote the medical tourism sector in Jordan as a single entity<sup>19</sup>.

Recently, the government of Jordan has taken measures to develop major projects meant to enhance the medical tourism sector, among which is the creation of job opportunities for youth within the medical tourism sector<sup>20</sup>. Some of the other projects include the development of: shopping centers and adequate transportation systems, advanced communication technology, hotels, and health and medical centers. The government predicted that the implementation of these projects will began at the end of 2012. This level of development will enhance the country's capacity in terms of hosting foreign investments, which will help Jordanians gain more job opportunities within the medical and CIT sectors. Despite this, however, the country still faces some challenges that prevent it from moving forward, including the lack of natural resources like water, oil, and other major elements. Consequently, Jordan is focusing its efforts on sustainable development and the use of renewable energy for its power supply.

#### **4.1.4 Sustainable development**

---

In 2000, Jordan's King Abdullah initiated a plan to raise awareness about sustainable development methods among Jordanian youth. He underscored the main points required to implement sustainability in areas such as the environment, as well as in the social and economic arenas. To this end, the government

---

<sup>18</sup> USAID, Interview (3)

<sup>19</sup> USAID, Interview (3)

<sup>20</sup> Private Hospital Association, Interview (6)

of Jordan established a network of stakeholders to collaborate with each other for the purpose of achieving sustainability. For instance, Aqaba City, which is an industrial district located in the southwest of Jordan, is facing major, fundamental changes as it works to attain sustainability. Thus, the King of Jordan introduced a sustainable development strategy in 2000<sup>21</sup> which outlined the implementation process needed to transform the city of Aqaba into an extraordinary economic zone in the region. The primary goal of this strategy is to enhance the quality of life and prosperity of the community. And because such development often comes with a serious, environmental by-product – like private medical facilities disposing of medical waste in areas inhabited by local communities – the second goal of this strategy is to dispose of the medical wastages by using eco-friendly and energy-efficient methods, which encourage medical facilities to use reusable and recyclable materials<sup>22</sup>.

The government of Jordan perceives its natural resources as tourism attractions and insists it is the leader when it comes to steering the Arab region toward innovation through sustainability. Consequently, it partners with non-governmental organizations such as the Royal Society for the Conservation of Nature (RSCN) to develop its natural attractions sustainably; it does this by recruiting its work force from within the local communities; preventing environmental pollution, and attracting green enterprises. The Jordanian government is also planning to improve health resorts along the Dead Sea shore in order to attract convalescing patients interested in visiting natural resources following a surgery or medical treatment.

Jordan is a small country with limited supplies of natural resources like water and oil. Because of this, its government is finding it difficult to identify alternative ways to supply its people with clean water and energy adequately and efficiently. To counter this problem, the government of Jordan developed a plan in 2005 to transform the city of Amman into an eco-friendly city that relies 50% on an eco-friendly power supply for its operation. Achieving this project requires a vast budget supported heavily by international aid. Fortunately, Jordan still receives financial aid from several international organizations. The aid is

---

<sup>21</sup> The Aqaba Special Economic Zone (2005), Jordan: a case study of governance, Jordan Times

<sup>22</sup> Directorate of Health and Environment Office, Interview (9)

meant to enhance the quality of life of poor people and create employment opportunities for people living in refugee areas

Another major challenge that Jordan is facing is the widening gap between the wealthy and poor classes – a phenomenon that is becoming more appalling every year: in 2010, 13% of employed Jordanians lived below the poverty line of 680 JD per month (960\$); and in the last quarter of 2010 alone, Jordan experienced a high unemployment rate with 11.9% of the overall population living without jobs<sup>23</sup>. In addition to this, Jordan's problems are compounded by the thousands of Palestinians who, living in refugee camps, remain unrecognized by a Jordanian government which, for political reasons, is unwilling to grant them citizenship. Because these refugee camps are not set up to offer access to adequate medical services or a healthy environment, the government of Jordan is working hard to sanitize these areas and attract economic projects into the undeveloped areas. For example, the *Decent House for Decent Living* project was launched by the government of Jordan to motivate Palestinian refugees to seek ownership of their own houses<sup>24</sup>. The project sought to build affordable housing units that would help poor people have a chance to own their own houses with the assistance of various financial institutions.

#### 4.1.5 Tourism

---

Jordan's tourism sector is one of its main economic strengths. In 2010, the country hosted over four million tourists whose expenditures reached approximately three billion dollars<sup>25</sup>. With well-built tourism foundations including renowned tourism operators, excellent food and beverage establishments, sophisticated accommodation facilities, adequate transportation facilities, advanced communications technology, and a developed infrastructure, it should come as no surprise that Jordan is a popular vacation destination. Its tourism attractions can be divided into four categories: historical, religious, beach, and natural reserves. Nowadays, Jordan is focusing on adding another category to the mix: medical and healthcare tourism. To this end, Jordan has connected its medical sector with tourism values, such as,

---

<sup>23</sup> Jordan Times (2010), Unemployment down to 11.9% in Q4: <<http://jordantimes.com/index.php?news=32978>>, Accessed June 3, 2011

<sup>24</sup> Arabian Business (2008), Jordan unveils \$7bn housing project, <<http://www.arabianbusiness.com/jordan-unveils-7bn-housing-project-188525.html>>, Accessed June 3, 2011

<sup>25</sup> Bloomberg (2011), Jordan Tourism Revenue Rises 17% in 2010, Jordan Times Report



hotels, gift shops, car rentals, and tourism operators. The main purpose of incorporating medical services with tourism values is to attract foreign patients to travel to Jordan to receive medical treatments, as well as, to enjoy a memorable holiday<sup>26</sup>. For instance, private medical facilities in Jordan are cooperating with tourism operators such as travel agencies in Amman to arrange tourism trips for foreign patients upon their request. Another such example is Jordan's plan to use the Dead Sea district as a backdrop for the premium healthcare destination in the Middle East region. The aim of the plan is to improve the infrastructure of the Dead Sea district via attracting foreign investments such as real estate companies and hotels to locate along the side of Dead Sea for attracting tourists and foreign patients. Nonetheless, the Dead Sea district is endangered and facing water issues. Therefore, the government of Jordan is cooperating with Israel and the Palestinian Authority to feed the Dead Sea Water from the Red Sea via Line of pipes. This project will supply water and jobs for the three countries (Jordan, Israel, and the Palestinian Authority)<sup>27</sup>.

Jordan is also known in the region for its fine hospitality education programs<sup>28</sup>. In 1969, the Jordan Hotel Association (JHA) was established with the goal of developing the country's hospitality industry<sup>29</sup>. Since 1969, the JHA has engaged various stakeholders to combine their common interests and efforts to enhance the tourism sector by providing foreign patients with quality accommodations, accessible transportation systems, restaurants, and festivals. The JHA has become a member of the International Hotel and Restaurant Association (IHRA), and the Arab Hotel and Tourism Association (AHTA), and is supporting tourism projects launched by the Jordan Tourism Board (JTB). Furthermore, the JHA is the main shareholder in the Jordan Applied University College of Hospitality and Tourism Education, one of the finest hospitality educational institutions in the Arab region. This is considered an invaluable asset for the medical tourism sector because it prepares skilled workers to deliver tourism services to foreign

---

<sup>26</sup> Al-Khalidi Medical Center, Interview (8).

<sup>27</sup> The Dead Sea Project (2009), The Dead Sea Project, < <http://www.deadseaproject.com/>>, Accessed July 28, 2011

<sup>28</sup> Jordan Tourism Board, Interview (5)

<sup>29</sup> Jordan Hotel Association (2008), <<http://johotels.org/AboutJHA/tabid/60/language/en-US/Default.aspx>>, Accessed June 7, 2011

patients while they are visiting the country for other reasons, whether that is for the purpose of attending a cultural event, a meal at a restaurant or an overnight stay at a hotel. Evidently, the development of the hospitality industry and that of the medical sector are not only compatible but, in many instances, positively symbiotic; they become quite effective in developing a medical tourism market that attracts foreign patients. For instance, Jordan Hospital has built an accommodation facility for patients' companions<sup>30</sup>. The expansion of the medical tourism market has changed the concept of the medical facility to include tourism values, such as the availability of accommodations, car rentals, gift stores, and customer services with respects to arranged trips for foreign patients. As a result, private medical facilities that benefit from the medical tourism market are transforming to better represent a medical tourism facility, which means a facility that provides patients with medical, tourism and hospitality services.

In 2004, the Ministry of Tourism in Jordan launched a strategy entitled the '*Jordan National Tourism Strategy*'<sup>31</sup>. This strategy, which was conducted for six years, aimed to establish and maintain a sustainable tourism economy via a partnership of government, private sector, and civil society stakeholders; the idea was to provide citizens and tourists with more opportunities in employment and entrepreneurial ventures, a greater quality-of-life, more competitive industries, and greater environmental protection via eco-tourism projects. The strategy was developed by implementing five steps<sup>32</sup>. The first step was to evaluate the tourism situation by measuring the number of tourists, the development of tourism attractions and determining the challenges facing the tourism sector. The second step was to set a tourism strategy by determining the market segments, and measuring the tools and the ability of the tourism sector to growth. The third step was to develop a value delivery system by matching the right product with the right market and creating profile about the market segments. The fourth step was to articulate competitive positioning by identifying the unique values and attractions in the tourism sector and analyzing competitors. The last step was strategy execution. At this stage the strategy was converted into actions by designing a campaign to attract stakeholders to commit to this strategy and developing a

---

<sup>30</sup>Jordan Hospital, Interview (7)

<sup>31</sup>Ministry of Tourism and Antiquities (2011), Jordan's National Tourism Strategy 2004-2010

<sup>32</sup>Ministry of Tourism and Antiquities (2011), Jordan's National Tourism Strategy 2004-2010

collaboration strategy, which is a partnership to implement, manage, and monitor the strategy's agenda. However, this strategy still under implementation process and the Ministry of Tourism and Antiquity in Jordan redeveloped this strategy to represent the year of 2011-2015<sup>33</sup>. Nonetheless, the medical tourism sector was not included within this strategy; neither the Ministry of Tourism nor the Ministry of Health had a direct participation in the development of the medical tourism sector. However, they were able to cooperate through the Jordan Tourism Board (JTB), an organization that liaises between medical tourism stakeholders and the Ministry of Tourism and Antiquity. However, the medical tourism network is still in its nascent stages and requires much more governmental participation in order to improve.<sup>34</sup>

## 4.2 Medical Tourism

The medical and health care system in Jordan is becoming increasingly recognized as one of the best in the Middle Eastern region. The country ranks first on the list of regional medical tourism destinations and fifth on the global ranking<sup>35</sup>. According to the USAID, the medical tourism industry in Jordan generated approximately one billion US dollars in 2009<sup>36</sup>.

Several factors play in Jordan for accelerating the development of its medical tourism sector. One of those is the cost of medical services (hip replacements, open heart surgeries, kidney transplants, and liver transplants) in Jordan – 25% cheaper than in the United States. Moreover, according to the USAID, Jordan is also known for its provision of high quality care for foreign patients<sup>37</sup>. Most of the country's private medical facilities, such as, Al-Khalidi Medical Center, Jordan Hospital, Specialty Hospital, and King Hussein Cancer Center are prepared with advanced medical technologies for emergency care, orthopedic care, maternity care, diagnostic imaging, and rehabilitation services, which meet an excellent standard of medical care. On the other hand, the government of Jordan provides easy access for foreign patients entering the country, as they are not required to obtain visas, and they are easily able to access the country's medical services. Not surprisingly, these fundamental factors translate into a long-term growth

---

<sup>33</sup> Ministry of Tourism and Antiquities (2011), Jordan's National Tourism Strategy 2004-2010

<sup>34</sup> Al-Khalidi Medical Center, Interview (8)

<sup>35</sup> USAID, Interview (3)

<sup>36</sup> USAID, Interview (3)

<sup>37</sup> USAID, Interview (3)

rate of 5% foreign patient numbers annually. In 2009, Jordan treated 200,000 patients; in 2010, it treated 210,000<sup>38</sup>. According to the Jordan Tourism Board, there is a problem with tracking the number of patients due to the lack of cooperation among private medical facilities when sharing information about patients' profiles<sup>39</sup>. That said, the government of Jordan is studying various methods to determine a more accurate representation of the number of patients traveling to Jordan for medical treatments.

According to the UNESCO, medical education in Jordan is respected due to the incorporation of the CIT sector with the education and health sectors, which have provided students with adequate access to external universities to receive qualifications as skilled physicians from Western universities. For instance, once students graduate from medical school, they must write the United States Medical Licensing Examinations (USMLE), which are sponsored by the Federation of State of Medical Board of the United States (FSMB). Such licensing guarantees that a physician is conducting a medical treatment according to the knowledge, concepts and principles that are important for health and disease<sup>40</sup> as dictated by the FSMLE. The first exam covers basic medical science, and the second, clinical science. Of Jordan's medical students, 93% pass the exam on the first attempt<sup>41</sup> on an annual basis. Such a statistic, undoubtedly, suggests that medical education in Jordan is highly credible. In addition, Jordan has two universities that have hospitals providing students with practical medical experiences before they approach the employment market.

Since 2004, Jordan has made a concerted effort to focus on improving its medical technology and developing its medical schools by training professional medical crews working in the medical and healthcare sector<sup>42</sup>. According to the Private Hospital Association (PHA), Jordan has the most advanced medical technology in terms of services such as oncology, cardiology, neurosurgery and imaging diagnosis, some of which includes Intensity Modulated Radiation Therapy (IMRT), Low-dose Rate Brach

---

<sup>38</sup> USAID, Interview (3)

<sup>39</sup> Jordan Tourism Board, Interview (5)

<sup>40</sup> United States Medical Licensing Examination (USMLE) (2011), About USMLE, <[http://www.usmle.org/General\\_Information/general\\_information\\_about.html](http://www.usmle.org/General_Information/general_information_about.html)>, Accessed June 3, 2011

<sup>41</sup> USAID, Interview (3)

<sup>42</sup> USAID (2010), Turn to Jordan: Your Smart Medical Destination, Jordan, page 10.

Therapy (LDR), PET- CT scan, MRI, Gama Camera, IVF, and lasics, to name a few. Also, medical facilities are investing in Hospital Information Systems (HIS) to automate admission finances and related administrative services<sup>43</sup>. With the rise of information technology in recent years, allowing health documentation to be processed and transferred among medical facilities more quickly, the government of Jordan and the private sector are concentrating on medical technologies by upgrading the information health technology in medical facilities, allowing critical medical data to be processed and transmitted immediately around the world in order to accelerate the development of the medical tourism sector and ensure that Jordan's medical sector reaches the international requirements and standards for quality healthcare<sup>44</sup>.

Over the last decades, Jordan has accomplished major medical feats, leaving an indelible fingerprint in the medical sector. In 1970, Jordan conducted the first open heart surgery in the country; in 1972, it successfully completed the first kidney transplant; in 1973, the first laparoscopic surgery was operated by a Jordanian physician in Jordan<sup>45</sup>. These accomplishments consider as an assets for the medical tourism sector in Jordan for attracting Arab patients. Evidently, Jordan has realized the importance of the medical industry and, therefore, is expanding the capacity of its medical facilities by developing small hospitals to be qualified to host foreign patients. In order to sustain its medical industry, the Jordanian government is helping hospitals obtain accreditation though international organizations such as the Joint Commission International (JCI). Currently, Jordan has five accredited hospitals by JCI and is planning to have 10 accredited hospitals by the end of 2012<sup>46</sup>. The country is also encouraging practitioners and physicians from the local community to obtain their medical qualifications and certification by attending educational sessions and programs planned and Hosted by the USAID and the Private Hospital Association (PHA). In 2010, Jordan had approximately 33 nurses per 10,000 citizens, a statistic that not only compares favorably

---

<sup>43</sup> USAID (2010), *Turn to Jordan: Your Smart Medical Destination*, Jordan, Page 10.

<sup>44</sup> USAID, Interview(3)

<sup>45</sup> USAID (2010), *Turn to Jordan: Your Smart Medical Destination*, Jordan, page 12.

<sup>46</sup> USAID, Interview (3)

with other developing countries that are pioneers in medical tourism (i.e., Thailand 34 per 10,000 population), but which also helps local hospitals elevate their standards of medical care<sup>47</sup>.

Relative to this focus on medical tourism, Jordan is building modern spa and healthcare resorts to attract foreign patients who are willing to receive medical treatments while enjoying visiting natural resources and the country's many tourist attractions. The area of the Dead Sea has attracted international hotels chains such as the Marriot, the Holiday Inn, and Movenpick. These hospitality establishments have helped add market value to the medical tourism market by providing medical tourists with five star accommodation facilities. Similarly, the capital city of Amman contains a vast number of international hotels that meet the international spa standards for health and modernity<sup>48</sup>. Jordan Hotel Association (JHA) makes sure that hotels are implementing the international accreditation and standards for hospitality establishments via particular evaluation criteria. In addition to these projects, Jordan also built in the Dead Sea district a resort on a hot water spring where patients can come reactivate their blood circulation and enhance their nervous system through exposure to natural waters.

### 4.3 The Medical Tourism Network in Jordan

The medical sector in Jordan contains over 20 medical and healthcare institutions, five of which are accredited as international medical facilities by the US Joint Commission International (JCI)<sup>49</sup>. The JCI certificate is important for private medical facilities for hosting international patients and approaching new market segmentation, which is a market that requires certain standards and qualifications for hosting foreign patients from the US, Canada or the UK. The USAID has been actively cooperating with the Private Hospital Association, which is a nongovernmental organization aimed to represent private hospitals within the medical sector, to enhance the market of medical tourism within Jordan. The USAID, which is a non- Jordanian governmental organization and sponsored by the government of USA, has been playing a primary role as a facilitator for the medical tourism network in Jordan. The network, however,

---

<sup>47</sup> USAID Interview (3)

<sup>48</sup> Jordan Hotel Association (2008), <<http://johotels.org/AboutJHA/tabid/60/language/en-US/Default.aspx>>, Accessed June 4, 2011

<sup>49</sup> Private Hospital Association, Interview (6)

has not yet been formally activated due to lack of communication and good management. To this end, the USAID has brokered meetings between the different stakeholders of the medical tourism market and private hospitals who are willing to host international patients. The purpose of the network is to promote Jordan's excellence in medical and healthcare services to the global market as a single entity<sup>50</sup>. Instead of promoting medical services individually, private medical facilities, facilitators, and governmental organizations are working on combining their efforts and resources to advertise their services as a package.

Jordan was recognized by the World Bank as the best medical tourism destination in the Middle East in 2007<sup>51</sup>. The government of Jordan is fully aware that to maintain this standing, it must consistently motivate stakeholders within the medical and tourism sectors to collaborate with each other; to this end, the government established a medical tourism network in 2003. However, the network was not as effective as intended for several reasons, including: budget shortages, poor management and experience, and poor communication<sup>52</sup> among the different parties. Subsequently, a number of private medical facilities agreed to establish an association that would enhance the medical tourism market by helping private medical facilities provide high quality medical services for patients. It did this by expanding the capacity of small hospitals for hosting patients, motivating private medical facility to achieve accreditation, and helping medical facilities attract patients from the US, UK, and East Europe. Thus far, the association has had great achievements; for example, it increased the capacity of small medical facilities in terms of beds, helped hospitals receive local qualifications, and facilitated the application process for the procurement of relevant governmental documentation. Despite this, the association still lacks experience working with the US and western markets, and a dearth of experience qualifying private hospitals according to the international medical standards and regulations<sup>53</sup>. Thus, in 2010, the USAID, which is an external organization funded by the US government, began cooperating with the association,

---

<sup>50</sup> USAID, Interview (3)

<sup>51</sup> Hazaimah Hani (2008), Jordan tops region as medical tourism hub, <<http://www.jordantimes.com/?news=10589>>, Accessed June 5, 2011.

<sup>52</sup> Investment Board Tourism, Interview (4)

<sup>53</sup> Private Hospital Association, Interview (6)

providing guidance for private hospitals intent on obtaining international accreditation. Since then, the USAID has also determined the primary stakeholders for the development of a medical tourism network that will promote Jordan's medical tourism sector as one entity.

The government of Jordan plays a primary role in motivating stakeholders to collaborate among each other via the Jordan Tourism Board (JTB) and the Jordan Investment Board (JIB). As the king of Jordan said, the major role of the government is to provide the private sector with the right tools and resources to help them achieve their goals<sup>54</sup>. Following this objective, the government of Jordan has established organizations co-funded by the government and the private sectors in order to accelerate the development of the medical tourism market by helping private institutions expand their ability to reach new market segments, and to reiterate the King's point, the major role of the government in the medical tourism sector is to provide stakeholders with tools that will encourage them to collaborate with each other.

For instance, the government of Jordan motivates medical facilities via The Directorate of Health and Environment Office (DHEO), which is a government institution, to raise awareness about sustainable business practices regarding recycling and the disposal of medical waste items<sup>55</sup>. This institution realizes the importance of developing a project that educates hospitals about the best methods for disposing or recycling medical items that could negatively impact local environmental areas and harm the quality of life for local residents. For this reason, the institution is dedicated to creating eco-friendly methods to eliminate the medical wastages without disturbing the social and the natural atmospheres. The institution is operated under the auspices of the Ministry of Health and works to ensure that hospitals comply with the institutions' policies and standards. Recently, the institution developed a new incinerator program for private hospitals. The aim of this program is to motivate private hospitals to dispose of their medical waste with lower costs and less impact on the environment. Also, the institution has developed a guide to educate private hospitals about how to dispose of medical waste efficiently.

---

<sup>54</sup> The Ministry of Tourism and Antiquities (2011), Jordan's National Tourism Strategy, <<http://www.tourism.jo/ar/>>, Accessed June 7, 2011

<sup>55</sup> Directorate of Health and Environment Office, Interview (9)



On a medical facility level, medical facilities usually receive guide from the Ministry of Health to implement the primary medical requirements and standards. However, medical facilities still require a framework or guide to be able to compete with other medical facilities in the medical tourism market. For instance, the USAID provides private medical facilities with a framework for receiving accreditation from the JCI. Also, the USAID offers directions for the management of the medical facility to increase the quality of medical services for patients, while the Private Hospital Association provides guidance or a framework for small medical facilities to expand their capacity in terms of beds and medical technology in order to receive accreditation for hosting foreign patients in the future.

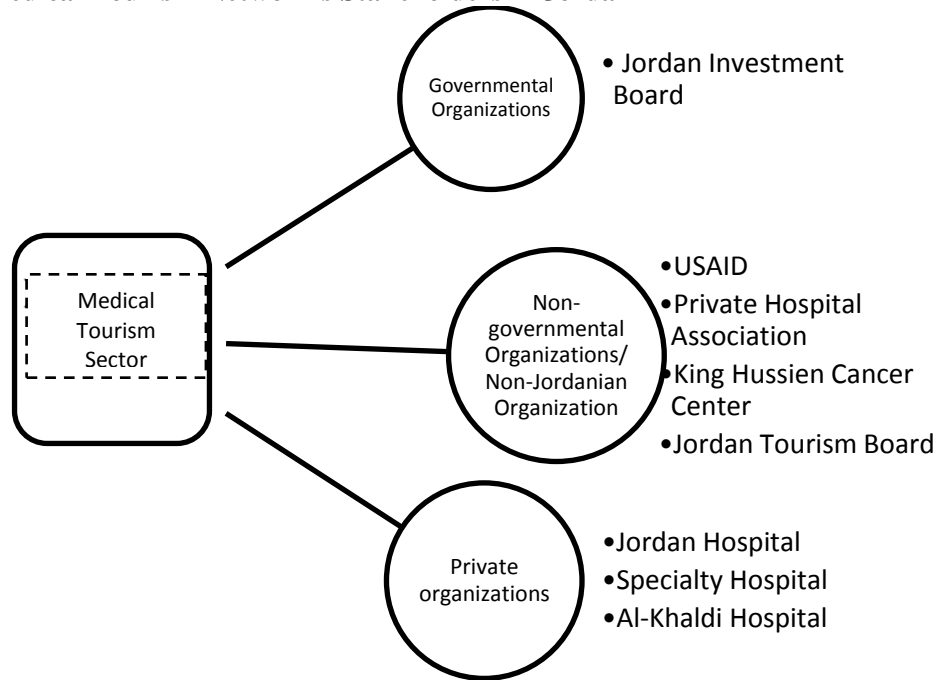
The USAID is an external party that receives its funding from the US government. The role of USAID is vital to the medical tourism facility for various reasons. First, USAID informs the medical facility regarding the requirements of attracting patients from the US. Second, USAID is affiliated with most countries in the world, and this, undoubtedly, helps private medical facilities approach new countries to promote their medical services. Third, USAID has a strong relationship with local community institutions, such as, the Jordanian Women Society, the Women Nursing Council, and various medical centers, and this plays a primary role in sustaining the development of the medical tourism market via delivering medical and tourism values through cooperating with these institutions for serving foreign patients.

However, the Ministry of Health and the Ministry of Tourism and Antiquities in Jordan cannot have a direct participation in the development of the medical tourism sector, because this sector relies 100% on private medical facilities for hosting foreign patients. Therefore, the two ministries participate in the development of the medical tourism sector via non-governmental/governmental institutions to provide the necessary tools for motivating stakeholders to collaborate among each other via a network. On the other hand, private medical facilities requested more participation from the government of Jordan in order to make this network more powerful for converting plans into actions.

#### 4.4 Introducing Medical Tourism Network's Stakeholders

The development of the medical tourism market in Jordan relies on various stakeholders that are categorized into three groups: non-governmental organization / non-Jordanian governmental organizations; Jordanian governmental organizations; and private organizations (Figure 8).

**Figure 8: Medical Tourism Network's Stakeholders in Jordan**



##### 4.4.1 Non-governmental Organization/Non- Jordanian Organization

Non-governmental organization refers to an organization that has no governmental status, meaning that it must be operated independently from any government. Usually, these organizations implement various projects meant to benefit local communities. Relevant Jordanian non- governmental organizations include the Private Hospital Association (PHA), King Hussein Cancer Center, and Jordan Tourism Board. The main purpose of these organizations is to work closely with local communities and consider their opinions and ideas, as well as enhance the quality of life for local residents by providing education and work opportunities.

#### *4.4.1.1 Private Hospital Association (PHA):*

The Private Hospital Association (PHA) is a non-governmental organization based in Amman, established in 1984<sup>56</sup> to work closely with private hospitals to help them achieve their goals and objectives<sup>57</sup>, like help private medical facilities to achieve accreditation from JCI, and provide hospitals with the required tools to attract foreign patients. In addition, the PHA strives to reduce the spread of contagious illnesses, improve the medical and healthcare services, and protect patients' rights<sup>58</sup>. The PHA also participates with private hospitals to overcome obstacles like those posed by new laws or policies that prevent the expansion of medical tourism, or new medical legislation (e.g. residents from certain countries are not allowed to enter Jordan) that needs to be modified in order to allow private hospitals to expand their market segmentation<sup>59</sup>. For instance, the PHA has requested from the government of Jordan to reduced tax rates so that private medical facilities are able to provide adequate medical services for reasonable prices.

#### *4.4.1.2 United States Agency for International Development (USAID):*

Jordan's government has no authority within this organization and relies on the USAID as it might on a non-governmental organization. The USAID branch in Jordan is known as the USAID Jordan Economic Development Program<sup>60</sup>. USAID is responsible for enhancing the local economy by providing guidance to the private sector and is also responsible for enhancing medical market competency by qualifying local people to work in the medical sector via conducting education sessions; improving the quality of life for local communities via creating work opportunities within the private sectors; and enhancing the quality of medical services via guiding private medical facilities to achieve international accreditation. However, the main purpose of the USAID is to provide technical assistance and financial grants to assist all the medical stakeholders who work within the medical tourism sector and, in particular, the private medical sector in Jordan through various projects.

---

<sup>56</sup> Private Hospital Association, Interview (6)

<sup>57</sup> Private Hospital Association, Interview (6)

<sup>58</sup> Private Hospital Association, Interview (6)

<sup>59</sup> Private Hospital Association, Interview (6)

<sup>60</sup> USAID, Interview(3)

#### *4.4.1.3 King Hussein Cancer Center (KHCC):*

King Hussein Cancer Center (KHCC) is a not-for-profit and non-governmental organization. The center specializes in treating cancer and is known as the best cancer center in the Middle East<sup>61</sup>. The center focuses on four different areas: patient care, medical research that focuses on treating cancer, hazard control, and education and training. In addition, the center works on the public awareness campaigns educating the local community about specific medical issues like cancer breast, and children rights. By providing all these services to the highest of standards and quality of care, the KHCC has received many international certificates and accreditations including those of the JIC, Hazard Analysis Critical Control Points (HACCP), and the Disease Specific College Program (DSCP). The center was the first medical facility that received accreditation certificate from the JCI<sup>62</sup>. With 540 nurses, 163 specialists, and 544 other employees, the center's staff service about 3500 cancer cases per year<sup>63</sup>.

#### *4.4.1.4 Jordan Tourism Board (JTB):*

The Jordan Tourism Board is also known as the Board Tourism Association (BTA) and is considered as the marketing arm of Jordan's tourism attractions for the international market<sup>64</sup>. The tourism board promotes Jordan as an attractive tourism destination and is dedicated to offering tourism values to visitors from all areas in the world. To accomplish this, the tourism board works on developing a new strategy every period of six years. In addition, the tourism board is also responsible for developing and implementing a marketing plan through various tourism offices located throughout the world. The tourism board's newest goal is to evaluate the development of the tourism market based on the following criteria: tourism statistics, tourists' feedback, marketing campaigns, and the development of tourism projects that belong to the ministry of tourism<sup>65</sup>. The tourism board is a non-governmental institution established as a result of the joint efforts of participants in the private and government sectors and receives funding from both sectors.

---

<sup>61</sup>King Hussein Cancer Center, Interview (2)

<sup>62</sup>King Hussein Cancer Center, Interview (2)

<sup>63</sup>King Hussein Cancer Center, Interview (2)

<sup>64</sup> Jordan Tourism Board, Interview (5)

<sup>65</sup> Jordan Tourism Board Interview (5)

#### **4.4.2 Government Organization:**

A government organization is an institution that follows the direction of a specific government body.

Some examples of these organizations include the Jordan Investment Board, and the Directorate of Health and Environment Office. The main purpose of having these organizations within the medical tourism network is to raise awareness about the best medical practices, and to promote the medical and health sector as a single, united entity.

##### **4.4.2.1 Jordan Investment Board (JIB):**

The Jordan Investment Board (JIB) is a government institution that targets the private sector as an attractive business destination for investments. One of the main goals of the board is to attract investors to Jordan in general and international investors in particular. Additionally, the JIB works to push for the modification of certain laws regulating or governing investments in Jordan, and to provide new investors with facilities like customs and registration facilities. The Investment Board also offers incentive opportunities for certain fields like agriculture, transportation, and technology business<sup>66</sup>.

#### **4.4.3 Private Organization:**

A private organization is a for-profit institution that is funded by a group of stakeholders who work together for a common goal<sup>67</sup>. However, the main purpose of the private organization is to generate profits and increase its reputation among internal and external stakeholders. The medical tourism sector relies on private hospitals for the production of high-quality medical services, for its efforts to attract skilled physicians and its capacity to host international patients. Private organizations like private hospitals that participate in the medical tourism network with the intent of approaching new market segmentation and becoming more competitive within the global market.

---

<sup>66</sup> Jordan Investment Board Interview (4)

<sup>67</sup> Privco (2011), Introduction to private companies, <<http://www.privco.com/knowledge-bank/intro-to-private-companies>>, Accessed June 4, 2011.

#### **4.4.3.1 Specialty Hospital:**

Specialty Hospital is a private institution that, in Jordan, was first established in 1993<sup>68</sup>. It is now one of the largest hospitals in Jordan, in terms of the large number of international patients it hosts, and medical procedures it offers, including hip and joint replacements, and open heart surgeries<sup>69</sup>. The Specialty Hospital has been working on improving the medical tourism market for more than five years and has participated in international medical tourism conferences to expand its market segmentation and target patients from the US and Europe.

#### **4.4.3.2 Jordan Hospital:**

Jordan Hospital is a private hospital that is known as the biggest private hospital in Jordan and the first private medical facility in the country to receive international accreditation<sup>70</sup>. Jordan Hospital is also the first hospital to successfully conduct a liver transplant surgery in Jordan.

#### **4.4.3.3 Al-Khaldi Medical Center:**

Al-Khaldi Medical Center is a private institution that was established in 1978 as a small medical center<sup>71</sup>. After the wide expansion of the medical tourism market, the medical center has made major expansions so that its facility meets the needs of patients. Today, the medical center is stocked with advanced medical technology, skilled physicians, and a state-of-the-art facility. In addition, the medical center has founded a magazine to update the local community on the latest news regarding events and happenings within the medical and healthcare tourism sector.

### **4.5 The Role of Medical Tourism Network's Stakeholders**

Through one-on-one interviews with participants, this study determined the role that stakeholders play in the medical tourism sector in Jordan. The interviewees discussed their various roles within the medical tourism network and their efforts to improve both the medical tourism sector and private medical facilities that host foreign patients. This study grouped the various stakeholders according to four roles: 1) as facilitators; 2) as guides; 3) as service providers; 4) as association representatives.

---

<sup>68</sup> Specialty Hospital, Interview (1)

<sup>69</sup> Specialty Hospital, Interview (1)

<sup>70</sup> Jordan Hospital, Interview (7)

<sup>71</sup> Al-Khaldi Medical Center Interview (8)

#### 4.5.1 Facilitators

Facilitators represent organizations that provide stakeholders with tools, resources, and information concerning recent market trends, and which allow stakeholders to reposition their goal and objectives based on the market requirements. Additionally, the major roles that these organizations play within the medical tourism network include: determining the number of patients in need of service; providing valid statistics about the medical sector; anticipating the future of the market; developing feasibility studies regarding sector potential; promoting the medical tourism sector as one entity; and, finally, providing the medical tourism sector with qualified medical crews. Stakeholders who work within the medical tourism network discussed its role in enhancing the medical tourism market. Specifically, an interviewee from Jordan Investment Board noted that:

*We are committed to working with the private sector to promote Jordan for its unique and friendly business environment and diverse investment opportunities. The JIB presents state-of-the art services for facilitating registration and licensing procedures for projects, and offers all possible simplified procedures for investment<sup>72</sup>.*

An interviewee works at the Jordan Tourism Board, noted that:

*I work as a manager for promoting Jordan's health and tourism sector to the Arab World. I'm also responsible about conducting a feasibility study about the development of medical and religious tourism in Jordan<sup>73</sup>.*

According to their previous roles, stakeholders were focusing on promoting the health services of individual facilities as single, individual entities instead of marketing them together as a network of unified facilities. The stakeholders were working to provide these facilities with marketing tools in order to promote their medical services and make them better able to reach new market segments in areas such as the UK and the US. They provided incentive opportunities for investments within the medical sector to enhance the ability of the facilities to provide valuable medical tourism services.

However, in most cases, these organizations are working independently. They are institutions which follow an informal model of random collaboration. With no commitments for collaboration among

---

<sup>72</sup>Jordan Investment Board, Interview (4)

<sup>73</sup>Jordan Tourism Board Interview (5)

stakeholders, the result is an ineffective and unclear image of the impact that the medical tourism market can have on the overall economy<sup>74</sup>.

#### 4.5.2 Guidance

Guidance represents those organizations that provide guidelines or directions for medical facilities so that they may qualify to host foreign patients and compete with other medical facilities in the global market. Usually, these organizations receive aid from foreign countries with the condition that this aid be dedicated to human development projects. For instance, the USAID, which is an external body based in the US, receives aid from the government of US. The aid is dedicated for projects that work to enhance the quality-of-life for Jordanians by developing the private sector. In an interview with USAID, an interviewee described his/her organization's major role within the medical tourism network:

*Our vision for this network is to determine the main requirements that sustain Jordan as the best medical tourism destination in the region. Also, we are focusing on recruiting medical staff from the local community to work in the medical sector, and enhancing the quality of medical services that are provided by private hospitals to foreign patients. So, what we do is to give technical assistance, and grants to assist all the medical stakeholders who work with us to improve the medical tourism market via our development projects<sup>75</sup>.*

The major role that external organizations, like USAID, play within the medical tourism network is providing guidance for stakeholders in order to develop a medical tourism network via various projects such as: helping private hospitals receive accreditation via implementing international medical standards; enhancing the competitiveness of the medical tourism market via implementing collaboration strategies among stakeholders; providing private hospitals with qualified medical staff by attracting local community members to work within the medical sector; and providing private hospitals with a framework to approach untraditional markets by building affiliations with external bodies<sup>76</sup>. The objective of hiring from within the community helps create a sense of local pride and ownership of the facilities. However, this level of engagement between stakeholders and external organizations allows private hospitals to

---

<sup>74</sup> King Hussein Center, Interview (2)

<sup>75</sup> USADI, Interview (3).



determine the major factors that motivate foreign patients to travel abroad in search of adequate medical services. By adhering to the criteria mentioned above, private hospitals in Jordan are better able to offer medical services that are compatible with those in the foreign patients' home countries.

#### 4.5.3 Service Providers

The category of service providers represents those members of the private sector who benefit financially from the medical tourism market. Private institutions can be found operating many different types of facilities including: medical labs, tourism agents, hotels, restaurants, healthcare resorts, etc. The role of the private institution within the medical tourism model is to provide patients with access to advanced medical technologies and laboratories, a high quality of medical care, and to organize full medical trips for foreign patients. Among members of the local community, the medical facility can enhance its reputation through various projects. One of my interview subjects, a Deputy Manager in King Hussein Cancer Center, highlights projects that are designed for the local community:

*I work on four things: promoting the medical services; patient care services, promoting the articles that the hospital is working on, and also I promote education programs and training sessions for universities and other institutions; on the other hand I work on organizing cancer campaigns for cancer controls and public awareness, and the role that I have been working on within the realm of medical tourism – I represent the Cancer Center in this field (Medical Tourism). Therefore, I negotiate the agreements between facilitators and other operators for the Cancer Center, and I also facilitate the communications and other documents work between the Cancer Center and the government<sup>77</sup>.*

Evidently, private medical facilities are offering ample opportunities to attract people from the local community to get involved within the medical tourism sector. Through these efforts, a clearer image of the medical tourism cluster will be delivered to the local communities and this motivates them to participate in the development via investments, volunteer opportunities and employment. This, in turn leads to a sense of pride and ownership in those same facilities, a phenomenon that helps market the quality of the facilities even further.

---

<sup>77</sup> King Hussein Cancer Center, Interview (2)

Over time, and according to market requisitions, the scope of a medical facility has changed to incorporate the hotel experience<sup>78</sup>. For instance, Jordan Hospital lobby in Jordan has been transformed into a hotel lobby that offers a variety of services including car rentals, tourism packages, and accommodation facility. These services are being added to the overall medical services experience in order to enhance the competitiveness of the medical tourism market by expanding the list of services available from one, convenient location<sup>79</sup>. Many investors are currently waiting for the government to release specific licenses for medical tourism agencies. However, the government of Jordan is rigorous and selective when it comes to issuing its licenses for certain reasons, such as, concerns in health and safety and unsustainable practices. The government of Jordan believes that keeping the competition of the medical tourism market among private medical facilities will increase the quality of medical services by providing direct interaction between foreign patients and private medical facilities, which means that the medical facility has the option to plan the medical trip for foreign patients to include tourism values. In addition, the role of a travel agent will be taken over by the same medical facilities in order to sustain the low cost of medical services and increase the quality of services by reducing administrative costs and other middle-party fees. Further ahead, medical facilities in the medical tourism network need to continuously study and understand the market requisitions and define new marketing tools to attract foreign patients. Medical facilities can also benefit from the network by collaborating with other medical facilities to enhance the competitiveness of the market by allowing each medical facility to dominate market segmentation. For example, King Hussein Cancer Center is built with highly advanced medical technology that is designed, specifically, to target cancer, while another medical facility, like Jordan Hospital is built with an advanced facility to operate an open heart surgery and kidney transplant<sup>80</sup>. As one can see, the competition among medical facilities within the medical tourism market is more organized and controlled. Nonetheless, medical facilities are still competing with each other in the method

---

<sup>78</sup> Jordan Hospital, Interview (7)

<sup>79</sup> Jordan Hospital, Interview (7)

<sup>80</sup> King Hussein Cancer Center (2)

of delivering the medical services. Thus, medical facilities are combining their medical services with added tourism values to enhance the overall experience of foreign patients<sup>81</sup>.

#### 4.5.4 Association representatives

Association Representatives are stakeholders who share similar characteristics and goals. For instance, private medical facilities within Jordan have established an association entitled Private Hospital Association to represent private hospitals in the medical sector. The aim of this association is to improve the health sector by expanding the capacity of small hospitals in terms of access to beds, helping private hospitals to achieve international accreditation, arranging communication between government and private hospitals, and providing private hospitals with qualified medical staff.

Says an interviewee in the Private Hospital Association (PHA):

*We are working on a project to expand the capacity of private hospitals in terms of the number of beds, number of medical employees, and number of physicians. The expansion in the capacity of the medical tourism sector will be accomplished by improving medium and small hospitals for hosting local patients<sup>82</sup>.*

The major role that the association representative plays within the medical tourism network is to identify and address the issues facing the medical tourism sector and which may impact the development of the medical tourism market. Thus, with modest budgets and a little cooperation with the relevant stakeholders, these association representatives can overcome certain obstacles – like malpractice, capacity, and inappropriate political policy – that prevent the medical tourism market from developing further and that could prevent certain foreign patients from entering the country for medical services.

To summarize, Jordan has become a pioneer in medical tourism. Nonetheless, the medical tourism network is still within the first stages of its development and needs more collaboration among stakeholders to improving the overall sector<sup>83</sup>. Acknowledgment of this need to improve will likely lead the medical tourism sector to study statistics concerning visiting and potential foreign patients; with this data, private medical facilities will have a clearer image of the supply and demand of the medical tourism

---

<sup>81</sup> Jordan Hospital, Interview (7)

<sup>82</sup> Private Hospital Association (PHA), Interview (6)

<sup>83</sup> Jordan Investment Board, Interview (4)

market. This data can be gathered from a committee that will be established by the medical tourism network to determining an accurate number of patients travelling to Jordan for adequate medical treatments.

After reviewing the role of the stakeholders within the medical tourism sector, it is essential to understand the characteristics of medical tourism facilities that provide medical services and tourism values for foreign patients. According to the interviewees cited above, a medical tourism facility can be defined as a medical facility that combines medical services with tourism values in order to attract foreign patients. At these locations, patients can avail themselves of other tourism values – like accommodations transportation, and medical attention – by interacting with other service providers.

#### **4.6 The Characteristics of a Medical Tourism Facility**

A medical tourism facility has several Characteristics that distinguish it from a regular medical facility.

Through interviews with actual stakeholders, this study has identified the characteristics of medical tourism facilities, and has gleaned relevant information regarding how these facilities are working to offer not only medical services but also tourism values, opportunities for community engagement and environmental protection. The individuals interviewed for this study discussed ten Characteristics that define the medical tourism facility.

Interviewees in this study have mentioned that private medical facilities play a primary role to sustain the medical tourism market by implementing a framework. According to the USAID, private medical facilities should collaborate with other stakeholders for promoting its services for foreign patients. An interviewee from USAID organization has stressed that:

*As one hospital approaches a market to promote itself, it can't be done properly, this is impossible. Approaching a market should be done by a collaboration effort between the private and the public sectors<sup>84</sup>.*

The first characteristic of a sustainable medical facility is accreditation. A medical tourism facility should be accredited by the JCI in order to be qualified to host patients from western countries. Medical accreditation is very important for approaching new market segments. Patients from the US are looking

---

<sup>84</sup> USAID, Interview (3).

for medical facilities that are comparative enough with those found in their home country; official accreditation of Jordanian facilities represents that they have met the medical standards and quality of the US medical sector.

The second characteristic is advanced medical technology. Certain medical facilities are prepared with advanced medical technology and skilled physicians. Some countries do not permit the operation of certain medical technologies without first receiving an approval from the Ministry of Health. For example, Lasik eye surgery was applied in several countries before it arrived to the US in 1992. In such cases, patients often travel abroad in order to receive those advanced medical services that are not permitted in their home countries. Not surprisingly, medical facilities tend to allocate adequate budgets for updating their medical technology in order to keep up with the market competitiveness.

The third characteristic is skilled physicians. In many cases, medical facilities are affiliated with academic medical institutions to qualify their doctors and enhance their medical skills. Such relationships offer students the opportunities to cooperate with skilled doctors via educational sessions. Many medical facilities in Jordan affiliate with western medical institutions in order to strengthen the relationships between the medical facilities and physicians who work within the medical facility to gain medical skills from western medical institutions. Following this, many private medical facilities are developing local networks that motivate local and international physicians to connect and join their efforts to innovate and use new methods for medical treatments<sup>85</sup>.

The fourth characteristic is social responsibility. Medical facilities have realized the importance of the local community for enhancing the image of the facility among stakeholders. Thus, certain medical facilities have developed a department that spends an annual budget on funding campaigns that raise awareness of medical and social issues among the local community. It is the social responsibility department, for example, that motivates the local community to engage in recycling and energy efficiency programs via the green hospital program. This program was first introduced by King Hussein Cancer

---

<sup>85</sup> Al-Khalidi Medical Center, Interview (7)

Center to educate medical staff about the best methods for reducing pollution and energy wastage. An interviewee from King Hussein Cancer Center has mentioned via an interview that:

*The green hospital (Green Thinking) is the only program available we have at this moment, and we are working on raising awareness about the best business practices for reducing the wastage, which at the end it returns some benefits for the environment. However, we hope that this plan take another level on a bigger scale<sup>86</sup>.*

As a result, private medical facilities are committing to provide environmental responsibilities via green hospital program. Thus, private medical facilities are collaborating among each other to determine proper ways to raise awareness about eco-friendly practices among employees. Also, private medical facilities fund campaigns to raise awareness about medical issues, such as cancer, children rights, women rights among the local communities<sup>87</sup>.

The fifth characteristic is accommodation facility. Foreign patients often travel abroad with their companions or dependants. Those companions, especially young children, need to stay close with their patients and have easy access to the medical facility for visitations. To address this issue, certain private facilities have built accommodating facilities to host patients' companions. An interviewee at Jordan Hospital mentioned that:

*As you know that the second element of medical tourism facility is the cost, therefore the hospital has built an accommodation facility for patients' companions to offer adequate medical costs and make them close to the hospital for fast visitations. Thus, patients do not have to rent rooms at hotels and pay extra fees<sup>88</sup>.*

The medical tourism market in Jordan has encouraged medical facilities to establish as accommodation facility that is prepared with various features such as an appropriate access with patients' rooms, food and beverage services, air conditioning, and housekeeping services. However, private medical facilities are aiming to build post operative facilities such as a resort or a rehabilitation centers for patients who are planning to extend their medical trips to enhance their health condition after the surgery<sup>89</sup>.

---

<sup>86</sup> King Hussein Cancer Center, Interview (2)

<sup>87</sup> Al-Khalidi Medical Center, Interview (8)

<sup>88</sup> Jordan Hospital, Interview (6)

<sup>89</sup> King Hussein Cancer Center, Interview (2)

The sixth characteristic is hospitality services. Because officials at private medical facilities have realized that foreign patients are attracted to facilities that provide incentive services such as hotel<sup>90</sup> accommodations, they are pushing to incorporate them into the overall experience. To this end, a number of private medical facilities, such as the specialty Hospital and Al Khalidi Medical Center in Amman, Jordan have renovated their reception areas to resemble hotels and they provide various services such as car rentals, touristic trip packages, gift stores, and general information about the country's shopping centers, historical and tourism sites, currency exchange, and consultation about arranging post-operation services. Many private facilities believe that the patients' trip should be planned by the medical facility in order to protect the patients' rights (privacy rights, medical agreement rights and disclosure rights). For this reason, the government of Jordan has not accepted applications from travel agents seeking a piece of the medical tourism industry due to the sensitivity of issues like patient rights, privacy and malpractice that are characteristic of the industry<sup>91</sup>. Conversely, the government of Jordan encourages private medical facilities to take on the role of tourism operator and to provide foreign patients with all the necessary tools and information to make their trip safe.

The seventh characteristic is foreign patient affairs, because many foreign patients seek information regarding their treatment on a regular basis (e.g. pre- and post- operation requirements) – private medical facilities have established specific departments that help foreign patients with their medical trip from their arrival through to their departure.

The eighth characteristic is affiliation with external organizations. Private medical facilities insist on offering their patients quality medical care that is competitive with and comparative to the treatments available in their home countries. Often, foreign patients seek treatment abroad because their home country lacks the level of quality health care they need; other times, they travel abroad because the cost of accessing high quality medical care back home is prohibitive. To know those high standards, and to educate their own physicians on the best medical practices available, private medical facilities in Jordan

---

<sup>90</sup> Al-Khalidi Medical Center Interview (7)

<sup>91</sup> Jordan Tourism Board Interview (4)

have developed affiliations with other countries that provide high quality medical care. It is in this vein that some private medical facilities conduct conference calls with other physicians and facilities around the world by telephone, video, or the internet – the idea is to learn from each other and share knowledge.

The ninth characteristic is collaboration with tourism stakeholders. A private medical facility cannot by itself reach foreign patients<sup>92</sup>. The USAID encourages private medical facilities to collaborate with tourism agencies and the Jordan Tourism Board (JTB) in order to reach foreign patients and promote their medical sector facilities. Also, private medical facilities cooperate with travel agents to offer full medical tourism package for foreign patients. By providing extensive tourism services, medical facilities are able to attract patients who are looking to travel for medical purposes as well as to enjoy memorable tourism experiences. Combining tourism values with medical services make the medical facility more attractive and friendly to foreign patients, and it motivates patients to travel as much for medical purposes as for spending an amazing vacation away from work and other everyday commitments.

Ultimately, the tenth characteristic is environmental responsibility. Green programs have become a core value for enhancing the image of private institutions among local and international communities. Every day it seems, more and more people are becoming attracted to businesses that use eco-friendly methods to achieve their profits. While private medical facilities are established with the objective of generating profits, it is expected that they should do so while impacting the natural environment as little as possible. For example, Jordan has two separate areas for disposing medical wastage that comes from both public and private medical facilities. Gradually, these areas have become polluted with medical wastage and consequently, the government of Jordan has developed eco-friendly methods to process medical wastages without harming the environmental areas. The Ministry of Health in Jordan has cooperated with the Directorate of Health and Environment Office and the Royal Society for the Conservation of Nature for developing an eco-friendly incinerator for medical wastage for private medical facilities.

Previously, in 2010, the government of Jordan partnered with the private and the public sectors, and the Europe Union Council has announced a project entitled “Medical and Industrial Waste treatment Plant

---

<sup>92</sup> USAID, Interview (3)



for Greater Amman and Middle Governorates<sup>93</sup>. According to a statistic revealed by Horizon 2020, in 2010, that private medical facilities in the health used medical waste incineration plant of approximately 18,000 tons/year capacity and an ancillary pre-treatment facility for oily waste of 5,000 tons/year capacity, at Ghabawi (23 km from central Amman); a physico-chemical treatment plant of 2,000 tons/year capacity at Ghabawi; a solidification plant for waste and residues, with a capacity of approximately 4,400 tons/year at Ghabawi; and a Class I landfill for slag and residues with a capacity of approximately 17,000 tons/year at Swaqa (150 km from Amman). The aim of this project is to design a specific incineration area for medical wastage, and process medical wastage that do not meet the environmental standards and requirements codes by Jordan law. However, the project will cost almost \$28 million dollars that will be funded by external party the Europe Union Council and Germany. This project will provide various benefits such as environmental protection, enhance the living condition within the incineration area, and educate medical institutions about the environment responsible culture.

Following this initiative, private medical facilities have assigned committees to educate medical staff about best business practices for disposing of medical items and putting the right disposal items in the appropriate containers, and then each container will be delivered to the right incineration area. Also, some private medical facilities are implementing “green” programs by raising awareness about protecting the environment via saving energy and recycling. Certain private medical facilities are starting to invest in renewable energy (solar cell) for power supply. According to the individuals I interviewed, a new medical facility will be relying on renewable energy (solar panel) for its heating system<sup>94</sup>.

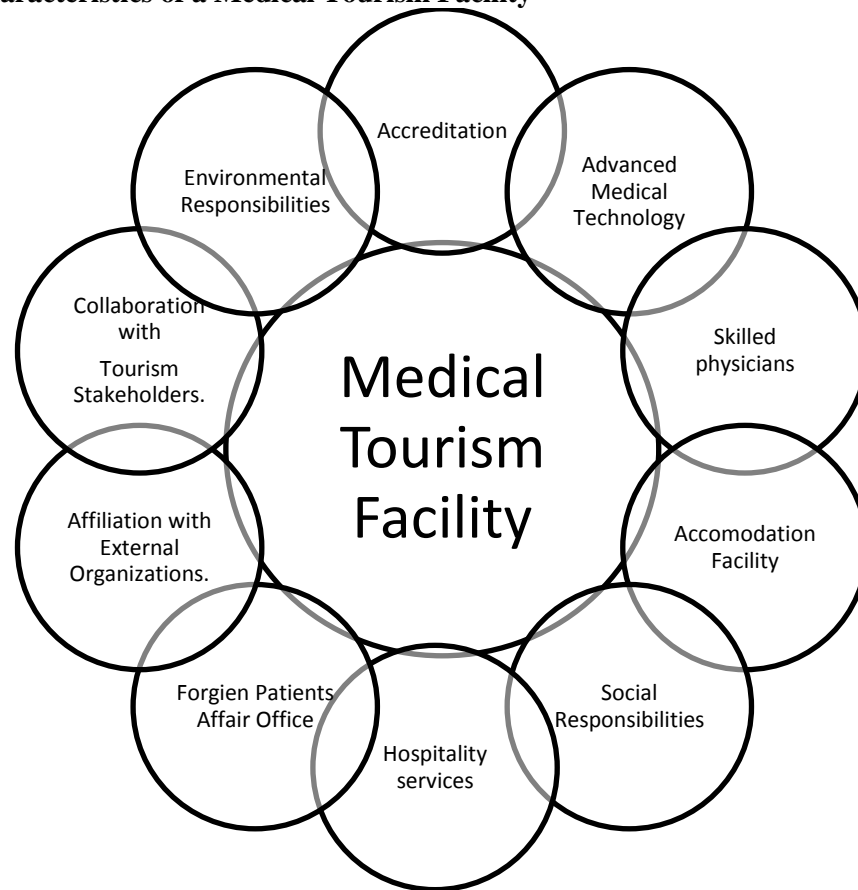
The concept of the medical tourism facility has evolved and in the last decade has grown to include more factors, including: services in accommodation, transportation, tourism, foreign patient affairs, and tourism values as well as the engagement of community members, and collaboration with tourism stakeholders. Figure 9 represents the ten factors that define a medical tourism facility.

---

<sup>93</sup> Horizon 2020 (2010), Medical and Industrial Waste treatment Plant for Greater Amman and Middle Governorates, Jordan, < [http://www.mehsip-ppif.eu/PROJ\\_PDF.CFM?PROJ\\_ID=219](http://www.mehsip-ppif.eu/PROJ_PDF.CFM?PROJ_ID=219)> Accessed June 6<sup>th</sup> 2011.

<sup>94</sup> Jordan Tourism Board Interview

**Figure 9: The Characteristics of a Medical Tourism Facility**



#### **4.7 Developing a Medical Tourism Facility**

In conjunction with other stakeholders, the USAID provides guidance via implementing a framework for private medical facilities seeking to achieve a standard quality of care and sustainability. Quality of care, which comprises **accreditation, skilled physicians, technology, and tourism values**, is an important element for developing a medical facility. To provide adequate medical services, a medical facility must collaborate with stakeholders. For example, the USAID and the Private Hospital Association help private medical facilities to affiliate with western medical institution to elevate the quality medical services. Therefore, private medical facility should work closely with external stakeholders implement high quality medical services according to the western medical standards and regulations, then these facilities become more attractive and safer for western patients.

#### 4.7.1 Accreditation

International medical accreditation is a record that qualifies a medical facility to be known as an excellent medical institution that provides a high level of quality medical care<sup>95</sup>. USAID helps medical facilities prepare to receive accreditation from the JCI. This accreditation is considered as a promise by the medical facility to provide foreign patients with a certain standard of ethical work and high quality medical care. An interviewee from USAID discussed the importance of accreditation and what it means for both foreign patients and the medical facility:

*It gives the international patients a good feeling that the services they receive in the accredited medical facility are compatible with the one back home. Also, receiving the JCI accreditation is not the last mission for a medical facility, but also an accredited medical facility by the JCI needs to be reaccredited every three years, so that means that accredited hospitals need to keep improving their services, ensure that they are taking care of patients to reduce risks and to provide a high quality of medical care, and by all that we will be upgrading the quality of medical services, and not only targeting international patients but also local patients who are interested in receiving high quality of medical treatments<sup>96</sup>.*

A medical facility that is attempting to receive a certain quality of medical care should cooperate with an external stakeholder like USAID, who can provide a framework and guidance for implementing a policy for quality of care.

#### 4.7.2 Skilled physicians

The availability of a skilled doctor is very important for the accreditation application process and for building the reputation of the medical facility. To attract skilled doctors, a medical facility should be considered as a career destination for doctors who are looking for growth opportunities. According to an interviewee from Jordan Hospital, he mentioned that a skilled doctor means a person who is willing to gain new medical skills and is always looking for great opportunities to improve its skills<sup>97</sup>. Thus, the USAID and the Private Hospitals Association (PHA) help physicians from the local community obtain the qualifications needed to work in a local medical facility that treats foreign patients. Together, the

---

<sup>95</sup> Joint Commission International (2009), Certification and accreditation process, <<http://www.jointcommissioninternational.org/Accreditation-and-Certification-Process>> Accessed June 6<sup>th</sup> 2011.

<sup>96</sup> USAID, Interview (3)

<sup>97</sup> Jordan Hospital, Interview (7)

USAID and the PHA work to motivate private medical facilities to affiliate themselves with western medical schools in order to keep up-to-date with innovations in medical technology and techniques. A medical facility should provide physicians and medical students with opportunities to learn new medical skills by affiliating with western universities and western doctors. The role of the medical tourism stakeholders is to offer guidance and to offer training sessions for medical facilities to improve their medical skills. Currently, in Jordan, all medical facilities have a direct affiliation with western universities in order to provide their medical staff with skilled physicians and learn from each other<sup>98</sup>.

#### 4.7.3 Medical Technology

In Jordan, medical technology has become an important element in attracting patients from western countries. Every year, a medical facility earmarks a part of its budget for the purpose of updating its medical technology for diagnosing injuries and treating certain diseases. These technologies, in turn, are used by stakeholders to motivate investments within the field of medical tourism<sup>99</sup>. As a result, the medical technology will be available in the market for medical facilities that are willing to improve their medical services. Recently, private medical facilities are connected to each other via a specific network, which is Hospital Information Technology Network to allow physicians share knowledge and learn from each other<sup>100</sup>.

#### 4.7.4 Tourism values

Because of the competitiveness of the medical tourism market, many medical facilities are moving to combine tourism values with medical services. For instance, medical facilities are building rental apartment for patients' companions to make visitations easier for them and to eliminate extra fees for patients. Stakeholders such as Jordan Tourism Board, help medical facilities have access to their offices around the world and promote their medical services to foreign patients<sup>101</sup>. This allows medical facilities to determine the primary factors that motivate patients to travel offshore for adequate medical services.

---

<sup>98</sup> Jordan Hospital, Interview (7)

<sup>99</sup> Jordan Investment Board, Interview (8)

<sup>100</sup> Jordan Hospital, Interview (7)

<sup>101</sup> Jordan Tourism Board, Interview (5)

To this end, many private medical facilities have developed a department entitled Foreign Patients Affairs Office (FPAO). This department provides comprehensive services such as: planning medical tourism trips for patients, protecting patients' rights, and providing post-operative services (consultation services, or referring doctors from patient's home for check-up) to make sure that patients are satisfied with their medical results.

Ultimately, representatives have realized that collaboration is the only way for their medical facilities to survive sustainably and competitively in the medical tourism market. The Social Responsibility department, hence, was established as founding principle for a medical facility – to ensure that it collaborate with external stakeholders for the purpose of enhancing its reputation among local communities and by raising awareness about sustainable medical practices. For instance, King Hussein Cancer Center, a not-for-profit medical facility in Amman, Jordan is implementing a green hospital program by educating staff about recycling and eco-friendly methods for energy reduction. The project is conducted by the Social Responsibility department, to raise awareness among medical staff about eco-friendly and energy saving practices.

## **4.8 Challenges Facing Medical Tourism Sector in Jordan**

There are some challenges that are delaying the development of the medical tourism sector in Jordan.

Some of these challenges include:

### **4.8.1 Logistics**

Usually, when patients arrive at the Jordanian airport in Amman, they need consultation and directions regarding the country's attractions and medical facilities. According to the stakeholders that were interviewed in this study, some patients get lost at the airport due to a lack of customer service and appropriate boarder facilities. To avoid such scenarios, medical facilities should cooperate with local airline companies via Jordan Tourism Board to facilitate patients' trips and prevent delays. An

Interviewee works at Al-Kahlidi Medical Center notes:

*We have problems. Unfortunately, we have some doctors who have no experience, and invite patients to be treated in Jordan. However, once the patient lands in the airport,*

*he/she gets confused where to go and how to get to the medical facility. And these doctors charge a lot, and this may impact the image of Jordan in the patient's perception<sup>102</sup>.*

Also, an interviewee he/she from Specialty Hospital pointed out that some foreign patients face a bad experience in the airport in Amman once they arrived:

*We faced a phenomenon such as patients, once they arrived in the Jordanian airport, they did not know where they should go and how to reach the most appropriate medical facility<sup>103</sup>.*

#### **4.8.2 Collaboration**

Collaboration is a primary factor in enhancing the image of the medical tourism industry inside the community perception. Private Medical Facilities know little about the impact of medical tourism on the overall local economy due to poor communication and cooperation among stakeholders who participate within the medical tourism network for tracking the right information. This study determined various perspectives about some of the issues facing the medical tourism sector. The issue of collaboration is addressed here by an interviewee from King Hussein Cancer Center:

*To understand the big picture of the medical tourism industry requires the development of a marketing plan for at least five years. Also, we need a strong management that is qualified to lead the plan, put it into practice, and facilitate all the efforts between all members<sup>104</sup>.*

An interviewee from Jordan Tourism Board notes:

*The reasons that we could not accurately determine the number of patients, is because some hospitals keep the number of their patients confidential for competition reasons<sup>105</sup>.*

Adopting a collaborative strategy will allow stakeholders to establish strong management, share valuable information concerning the medical tourism market and credible statistics on the impact of medical tourism on the local economy. With such information, medical facilities will be better able to predict the future of the medical tourism market and determine their objectives and goals according to these predictions.

---

<sup>102</sup> Al-Khalidi Medical Center, Interview (8)

<sup>103</sup> Specialty Hospital, Interview (1)

<sup>104</sup> King Hussein Cancer Center, Interview (2)

<sup>105</sup> Jordan Tourism Board, Interview (5)

### 4.8.3 Social Behavior

Social Behavior is an important factor that must be considered when developing the medical tourism facility. In Jordan, it is hard to attract Jordanians to attend educational sessions that are free charges; the USAID has conducted educational events that target mature women from the local community to qualify them to work as professional nurses. An interviewee from the USAID mentions that:

*Culture is one of the challenges; for example, we have conducted free charges medical training programs for nursing and few people have participated. Later on, we have organized the same programs with registration fees and we received a lot of participation. Thus, social behavior is considered as a barrier for our projects. Also getting people to communicate with each other was a challenge for us. The medical tourism network was only for hospitals, we had to convince them that you need to expand your horizon and include different bodies in the medical tourism network, such as, medical facilitators, airline companies, and tourism operators<sup>106</sup>.*

Another interviewee who works at Jordan Hospital, mentioned that stakeholders are responsible for motivating Jordanians to participate in the development of the medical tourism sector through various opportunities.

*A smile does not cost anything and in the same time can do a lot. What I have seen in Jordan is that the local organizations should raise awareness about the best methods of reflecting a nice picture of the Jordanian society. The foreign patient should feel that he/she is welcomed by the Jordanian citizens; otherwise this patient will not plan for a repeat visit in the future<sup>107</sup>.*

The term “medical tourism” has not being utilized among the local communities in Jordan. For this reason, medical tourism stakeholders are facing difficulties attracting local communities to participate in the development of the medical tourism sector.

### 4.8.4 Law

Jordanian law has not been modified to determine serious penalties for private medical facilities that have no insurance coverage to reduce the risk of malpractice suits. An interviewee from Jordan Investment Board mentioned that:

*One of the obstacles that I have noticed so far is the law in Jordan. The law is important to prevent the risk of malpractices, and if we don't have such a law the risk is entirely on the foreign patients<sup>108</sup>.*

---

<sup>106</sup> USAID, Interview (3)

<sup>107</sup> Jordan Hospital, Interview (6)

<sup>108</sup> Jordan Investment Board, Interview (4)

Medical tourism stakeholders have developed a proposal asking the government of Jordan to create a code that requires private hospitals to buy insurance coverage to reduce the risk of malpractice. Nonetheless, the government of Jordan is delaying the approval process for several reasons one of which is the risk that the price of medical costs will be higher for foreign patients, which may impact the competitiveness of the medical tourism market in Jordan. The medical tourism market is very sensitive to the local medical law and regulation that may contradict the medical law and regulation of the patient's home country. Thus, creating a code of law that reduces the risk of malpractice is important for protecting the right of foreign patients.

#### **4.8.5 The Medical Capacity**

As private medical facilities target wealthy patients, they have little capacity for local patients who cannot afford to be treated in these hospitals. Therefore, the PHA is working to expand the capacity of small hospitals in terms of beds and physicians in order to host both local and international patients. Most private medical facilities allocate a specific amount to cover treatment of local patients and emergency medical situations. Nonetheless, some interviewees in this study have pointed out that the development of a medical tourism market may affect the health care system's overall capacity to host local patients; the medical costs may also increase in line with the rapid demands for medical services by international patients<sup>109</sup>.

#### **4.8.6 Credible Resources**

Private medical facilities face difficulties in keeping track of the number of foreign visitors due to several reasons, such as, competition reasons, lack of direct governmental participation, and lack of educational institution participation within the medical tourism network. Nonetheless, there are no specific criteria to determine the number of patients that travel to Jordan for medical services. Therefore, private medical facilities predict the number of patients via inappropriate resources. For this reason, medical tourism stakeholders cannot access accurate information about the status of the market and thus

---

<sup>109</sup> Private Hospital Association, Interview (6)



anticipate future trends in the medical tourism sector. Some stakeholders argue that the ministry of health cannot track the number of patients due to the weak communication and management among medical institutions. Consequently, the government needs to motivate medical tourism stakeholders to cooperate among each other in order to track the number of patients and agree on criteria for measuring the sustainability of the medical tourism sector.

## **4.9 Recommendations**

In this study, interviewees offered recommendations regarding how to enhance the medical tourism sector within Jordan:

### **4.9.1 Accreditation**

---

Private medical facilities should strive to receive accreditation first in order to improve the quality of care for hosting foreign patients, and then they will have a reputation of commitment to offer high quality of medical services and continue for improvements. To obtain accreditation, the private hospitals must first provide the conditions that allow the medical facility to provide high quality medical care in the most efficient way. Later on, a trust between the management of the medical facility and its medical staff will develop, which will make the collaboration among internal stakeholders even more direct.

### **4.9.2 Medical Tourism Agency**

Some stakeholders suggest that allowing private medical tourism agencies that are owned by individuals to work to target foreign patients will help promote Jordan as a medical tourism destination. The government of Jordan rejects allowing travel agencies to have the power to connect with patients as a way of preventing malpractices. The government of Jordan believes that foreign patients should have direct communication with the medical facility in order to protect the patients' rights.

### **4.9.3 Marketing Strategy**

Medical tourism stakeholders should develop a marketing strategy for promoting the medical tourism sector to developed countries such as the UK, US, and Australia. Some stakeholders recommend that all the medical tourism institutions should work in a strategic collaboration to promote the medical tourism sector to the outside world as a single entity. Also, the country's offices such as the Jordanian embassies

and consulate offices should deliver attractive images about the medical tourism services in Jordan to foreign patients.

#### **4.9.4 Promoting a Follow-up System for Patients**

The medical tourism sector should involve other businesses such as healthcare resorts, rehabilitation services, and tourism operators in order to expand the medical tourism market and provide patients with extensive medical tourism services. Also, private medical facilities should be built horizontally in order to provide easy access for patients and to provide rehabilitation services. In this way, the medical facility will allow easy movements and more rooms for patients to stay at the hospital until they improve their health condition. Meanwhile, the facility can offer fitness center and physical therapy services for patients to heal their body after a complex surgery. Thus building a medical facility in a horizontally shape will allow the facility to have more expansions in the future.

#### **4.9.5 Governmental Participation**

Little participation has been offered by the government within the medical tourism network. The Ministry of Health in Jordan has no direct influence on the medical tourism network. Also the Ministry of Health has reopened a specific department for medical and health tourism. Nonetheless, this department has no participation within the medical tourism network. Thus, the medical tourism network in Jordan is still in its infant stages, and the collaboration among stakeholders has thus far been conducted randomly. The government should take the initiative and push the medical tourism network to the next level, one where stakeholders can foster partnerships among each other to achieve common goals. Meanwhile, the medical tourism network will take a formal shape, which communication among stakeholders in the network will be more organized, and have more power to implement stakeholders' decisions and transform programs into actions. As a result, stakeholders will develop a stronger image of the medical tourism sector.

In summation, this chapter has mentioned about the primary foundation for developing a medical tourism destination. Jordan has focused on the political stability in order to create safe environment for accelerating the development of local economy via drawing foreign investments. Also, this chapter has mentioned about the role of medical tourism network's stakeholders for developing a medical tourism

sector, and elevating the medical care for medical facility. In addition, interviewees have mentioned about the various characteristics that utilize simultaneously a medical tourism facility, which a medical facility that is dedicated to work within the medical tourism market. However, according to the interviewees, there are challenges facing medical tourism sector, such as, the local regulation or the capacity of medical facilities in terms of bed to host local patients. Thus, this chapter has identified various recommendations from interviewees to eliminate any difficulties that postpone the medical tourism sector from development.

## **5 Chapter Five: Discussion**

Chapter five addresses the factors that motivate Arab and American patients to travel abroad for receiving adequate medical services. The chapter includes the role of medical tourism stakeholders in developing a medical tourism destination and a medical tourism facility. Also, a section reviews the medical tourism network in Thailand and Jordan by implementing a comparison approach between the two networks in terms of the role of stakeholders for enhancing the medical tourism market, and the maturity level for the network. Lastly, a framework to establish a sustainable medical tourism facility that has been developed based on the literature review and interviewees.

### **5.1 The Factors of Medical Tourism**

This section addresses research question one about defining the primary factors that motivate foreign patients to travel abroad seeking adequate medical services. Also, this section reviews the medical tourism factors that were determined in Smith and Forgione's work (2007) by comparing them with the primary factors that were determined by various interviewees in this study. The purpose of implementing this comparison is to illustrate additional factors that could play a primary role for motivating patients to travel to foreign medical facilities.

The rise of medical tourism has occurred as a result of several factors. Patients used to travel from undeveloped and developing countries to the western world in search of high quality medical care and access to skilled doctors (Bookman & Bookman, 2007). Not surprisingly, medical tourism was a service demanded by wealthy patients. Now, the phenomenon of medical tourism has changed to represent not only the interests of rich patients but also of those patients who are not covered by adequate health insurance plans and who are looking to travel abroad for access to more inexpensive and better quality medical services (Bookman & Bookman, 2007). For instance, the number of uninsured patients in the US is expanding gradually every year. As a result, 1.5 million US patients travel offshore seeking adequate medical services that are compatible with those back home (Steiner, 2010).

Smith and Forgione (2007) have determined the primary factors that motivate US patients to travel offshore for adequate medical treatments. The primary factors are: lack of adequate health insurance coverage, costs, access to skilled physicians, and availability of medical technology. For these reasons, North American patients travel offshore to medical facilities which offer high quality medical care, cheap costs and enhanced post-operative services (Steiner, 2010). Also, Arab patients are motivated to travel abroad for a cheaper medical facility. For example, an interviewee in this study has identified that Arab patients from Saudi Arabia prefer to travel to Jordan for receiving high quality medical services at lower costs and in the meantime spending a holiday visiting the tourism attractions. In this sense, cost is a primary motivator for Arab patients to travel abroad for medical treatments. Also, an interviewee in this study has pointed that Arab patients put safety as a first priority when they decide to go for medical tourism and then cost comes as a second priority for them.

The following figures represent the factors that motivate North American and Arab patients to travel abroad for medical services. These factors have been determined from the literature review, and interviewees with medical tourism network’s stakeholders in Jordan. The study categorized the primary factors that motivate Arab patients to travel to Jordan seeking high quality medical services into two categories: factors belonging to the medical tourism destination and factors belonging to the medical tourism facility. Tables 3 and 4 list the factors gleaned from the literature review and interview sessions, and then compares these factors to define the gap between Smith and Forgione’s factors (2007), and interviewees’ factors.

**Table 3: Factors Belonging to the Medical Tourism Destination**

Smith and Forgione (2007)	Interviewees
Economic Conditions	Infrastructure Flight
Political Climate	Political Stability
Regulatory standards	
Social Behavior	Culture Religion Language
	Tourism Attractions

**Table 4: Factors Belonging to the Medical Facility**

Smith and Forgione (2007)	Interviewees
Costs	Costs
Physician Training	Skilled Physicians
Accreditation	Accreditation
Quality of Care	Medical Technology Services for religious patients Accommodation facilities Tourism Services Native language

### 5.1.1 Factors belong to the medical tourism destination

Factors belonging to the medical tourism destination are those factors that reflect the strengths of a country in terms of competing for medical tourists. Medical tourists, who have no adequate insurance coverage, plan to travel abroad for medical treatments by collecting information about foreign medical facilities from insurance companies, family doctor, friends and relatives, and internet (Smith & Forgione, 2007). According to Smith and Forgione (2007), American patients compare medical destinations based on several factors that could affect the patients' selection of a medical tourism destination. Some of these factors include: economic condition, political climate, social behavior and regulatory standards. In addition, interviewees in this study mentioned about factors that affect patients' choices for a medical tourism destination. Interviewees noted that infrastructure; nonstop flights, political stability, culture, religion, language, and tourism attractions all play a primary role for encouraging patients to travel to a particular tourism destination for medical treatments.

Arab patients are also motivated to a medical tourism destination that offers same language, religion, and culture. For instance, most of Jordan's foreign patients are from Arab countries; this is because of several factors. Firstly, the native language in Jordan is Arabic, thus Arab patients prefer to travel to Jordan, because they feel more comfortable using their mother language to clarify their medical issues. Secondly, religion could be a barrier for some Arab patients for traveling to a foreign country for medical services. Arab patients prefer a medical tourism destination that provides various services for Muslim community such as mosques, Islamic restaurants, and Islamic attractions. Thirdly, culture is an important

factor that motivates Arabs to travel for medical treatments. Arab patients like to spend their holiday with the family and friends. Therefore, Arab patients are more attracted to medical tourism destinations that provide similar culture such as family gathering every Friday, music events, and folklore dancing. Smith and Forgione (2007) have grouped these factors under the social behavior factor. Nonetheless, Smith and Forgione (2007) did not mention in details about these factors: language, religion, and culture, instead, they mentioned about the social behavior and how the local people perception about medical tourism could motivate North American patients to select a medical tourism destination. For example, American patients are more willing to travel to Israel because of the night life and the entertainment events (Steiner, 2010). In the Arab countries culture can be a huge barrier for entertainment establishments to be accepted by most of local citizens, which may be considered as a factor that impacts the North American patients' decisions for traveling to the Arab world for medical services. According to the World Bank, in 2007, Jordan hosted 45,000 Iraqis, 25,000 Palestinians, 1,800 US citizens, 1,200 UK citizens, 400 Canadians, and the other patients from the neighboring countries such as Saudi Arabia, Sudan, Libya, and the gulf countries (Hazaimah, 2008). Therefore, most foreign patients that come to Jordan are from the Arab Muslim countries.

Regarding religion, Ramadan is the holly month for Muslims, and they dedicate this month for worshipping and visiting the spiritual attractions. Therefore, Arab Muslim patients they prefer to go to a country that has the same religion then they feel more comfortable practicing their religion without barriers. According to Hadassah Medical Organization, in 2006, Israel hosted 14,000 foreign patients (Gross, 2008); this is not an optimistic outcome compared by the number of foreign patients in Jordan. Thus, Israel increased this number twice in 2007 by attracting Arab and Muslim patients to come to Jerusalem for medical treatments and in the same time visiting spiritual attractions such as Muslim mosques, the old city, and old churches (Gross, 2008). Therefore, religion is a primary factor that motivates Arab and foreign patients to seek medical tourism as an adequate medical treatment.

Language is a factor for medical tourism. Patients travel to a foreign country that speaks a foreign language, patients feel unsafe and language becomes a barrier to interaction with the local community

(Connell, 2006). However, private medical facilities in Jordan have realized the importance of language to attract foreign patients from Russia and East Europe. Therefore, certain private hospitals in Jordan such as Jordan Hospital and Al-Khalidi Medical Center offer translation services for patients who do not speak the host country's language. Speaking a patients' language is important to inform patients about everything regarding their medical condition. Therefore, patients feel safer when they travel to a country where the same language is spoken.

Smith and Forgione (2007) have mentioned briefly about the language factor, cultural factor and religion factor under the social behavior factor. However, mentioning about these factors in details is important in order to address what foreign patients are looking when they chose a medical tourism destination.

Interviewees mentioned that infrastructure is important to accelerate the development of the medical tourism market. They mentioned that the infrastructure should include well developed hospitality industry, advanced communication technology that allow medical facilities to share knowledge and transfer patients' documents quicker, shopping centers, and medical institutions. All these elements play a primary role for increasing the country's reputation. For instance, Cisco, which is an international network company, announced an investment in Jordan that worth \$10 million to enhance the medical network and create sustainable jobs within the medical sector (Cisco , 2011). This project will enhance the reputation of Jordan among foreign physicians and patients that Jordan provides a well developed medical network for qualifying the best physicians in the world. This network will allow medical facilities in Jordan to share information with medical institutions and physicians around the world, which will increase the quality medical care in Jordan.

Nonstop flight is a factor that impact patients' choice for medical tourism destination. Foreign patients prefer to travel to a country that provides direct flights to take advantage of the time (Dunn, 2007). Also, indirect flights could be inconvenient in some health conditions for patients. Therefore, medical tourism facilities in Jordan are cooperating with the Royal Jordanian flight company to offer direct flights for countries such as Sudan, Russia, Canada, US, and UK. Also the Royal Jordanian offers



express services for VIP passengers and patients who are willing and able to pay additional fees for expedited border-crossing processing order to save times on the borders (Royal Jordanian , 2009).

Smith and Forgione (2007) mentioned about the economic conditions in general as an important factor for attracting foreign patients without justifying the context of the economic condition in detail. However, the information and communication technology sector is an important condition for the medical tourism sector to be developed, which will help medical facilities to have an appropriate access to share medical information and receive patients' profile in a glance.

Political stability is also an important factor for medical tourism. For instance, in 1994, Jordan conducted a peace treaty with Israel to establish a safe environment for economic development and attract foreign investments (Israel Ministry of Foreign Affairs , 1994). Since then, Jordan becomes a destination for Arab people who search for a better qualify life. Arab patients travel to Jordan for medical services, because Jordan offers safe environment for socializing with local citizens, and visiting attraction areas without being harassed by random people. Smith and Forgione (2007) mentioned that American patients from the US are more willing to travel to a country for medical treatments that offer justice and freedom for local citizens and does not promote violence and revolution. In summation, a medical tourism destination should offer equality and modernized regime for local citizens in order to create a safe environment for attracting foreign patients.

Tourism attraction is a primary factor that attracts foreign patients who are looking to spend a holiday while they are receiving adequate medical services. For Instance, Jordan has various tourism attractions such as the Dead Sea, Petra which is one of the world's wonders, Wadi Rum, Desert castles . . . etc (Jordan Tourism Board, 2010). However, Jordan is developing the Dead Sea area to become an attractive destination for patients to heal their body after a complex surgery (USAID, 2010). Smith and Forgione (2007) did not mention about the importance of the tourism attraction for attracting foreign patients. Instead, they mentioned that the country should develop tourist attractions in order to attract foreign patients who would like to take a flight for medical services and tourism experience.

The last factor is the regulatory standards. According to the interviewees, the Ministry of Health should have a direct cooperation with medical facilities to prevent malpractices among medical staff and physicians. Thus, creating a law for malpractice is important to force private medical facilities to have insurance coverage. As this is not yet in place, it is not a major factor influencing people to come to Jordan for medical treatment, though it may be a major factor for growth. Smith and Forgione (2007) mentioned that the host country should have an organization to protect the right of foreign patients. For example, the Health Insurance Portability and Accountability Act provide (HIPAA) protection for patients within the US. The HIPAA require by law physicians and medical facilities to have insurance coverage in order to treat patients (Marlowe & Sullivan, 2007). Therefore American patients are attracted to travel to a country that provides similar regulations and law to reduce the risk of malpractice and force medical institutions to keep the patients' profiles confidentially. According to interviewees, recently, medical facilities in Jordan have developed a proposal for the government to release a law that requires physicians and medical facility to have insurance coverage before conducting any medical treatments for foreign patients.

### **5.1.2 Factors Belonging to the Medical Tourism Facility**

The literature review in this study highlights the several factors that define a medical tourism facility. Smith and Forgione (2007) mention that there are several factors that affect a patients' choice for a medical tourism facility. They include costs, physician training, quality of care, and accreditation.

This study shows that patients tend to evaluate a medical facility by looking at these factors simultaneously. According to the interview subjects with whom I spoke, a medical facility should be accredited and prepared with advanced medical technology and skilled physicians in order to offer an outstanding quality of medical care. On the other hand, if a medical facility is to attract a significant amount of foreigners, the cost of its medical service should be at least 25% cheaper than that of the medical services available in the prospecting patient's home country. Smith and Forgione (2007) stressed that quality of care is also an important cornerstone of a medical facility's ability to attract foreign patients. Medical staff should be well educated and healthy in order to deliver the best possible medical

service. Quality of care is a concept used by medical facilities when referring to the overall and holistic treatment and approach that they offer – and this includes all the tools or methods that help to elevate the overall standard of quality of care. Accreditation, the availability of skilled physicians and advanced technology, and the cost of services form part of the overall quality of care. To receive international accreditation, a private medical facility should attract skilled doctors to work within the facility, as well as, hire professional medical staff to deliver outstanding medical services. On top of this all, a medical facility should always be watchful of and consider the costs of running the business or the prices that patients are charged. All these factors work together to maintain the sustainability of the medical tourism market.

Currently, there are some factors that may increase the medical costs in Jordan. These factors include: accreditation, affiliations, and insurance covering malpractice. Private medical facilities in Jordan pay a vast amount of money to receive accreditation from international organizations such as the JCI in order to attract patients from western countries. Meanwhile, accreditation alone is not enough to reduce the risk of malpractice. Some countries such as the US and the UK make insurance covering malpractice mandatory for medical facilities to prevent malpractice and protect the rights of foreign patients (privacy) (Marlowe & Sullivan, 2007). According to Interviewees, this insurance coverage costs the average medical facility some \$10,000-\$20,000 a year in Jordan (USAID, 2010). When medical facilities in developing countries hold affiliations with universities in the developed world, their medical skills and cachet increase and this inevitably also increases the cost of medical services in the developing countries. Therefore, the market of medical tourism in developing countries is very difficult to be sustained due to the regulations and the international market requisitions, and this may increase the healthcare costs on foreign patients.

Often, many foreign patients travel with companions and they want their companions to stay close to them. Thus, some medical facilities have expanded to include rental apartments at cheap costs, car rentals, and special departments to arrange touristic trips for their patients. Many patients tend to travel to medical facilities that provide post-operative services. Medical facilities often connect with family doctors to monitor the health of their patients following their medical procedures. To this end, Jordan is building a

medical tourism network to motivate collaboration among private medical facilities for the provision of follow-up medical services and provide qualified physicians and medical staff for treating foreign patients (Cisco , 2011).

## 5.2 Medical Tourism Stakeholders

This section addresses the research question two about the primary role of stakeholders to develop a medical tourism destination and a medical tourism facility. Also, this section compares the maturity level of the medical tourism network between Thailand and Jordan. Thailand, which is a respected medical tourism destination, generated over one billion US dollar in 2006 (Rabindra, 2006), and Bumrungrad International hospital, which is an accredited medical facility in Thailand, hosted 5,000 American patients in 2005 (Olson, 2010). According to these facts, this study presented a comparison approach between Thailand and Jordan in terms of the development of the medical tourism network. The purpose of this comparison is to determine the various stakeholders within the medical tourism sector, and to determine their main roles for developing the medical tourism market.

The wide expansion of the medical tourism market has drawn investments for private hospitals, hotels, restaurants, massage therapy centers, cars rentals, gift shops, health insurance companies, tourism operators, and medical labs. Stakeholders have noticed that the market is expanding gradually due to the rapid demand of foreign patients seeking medical tourism as adequate medical treatments. Thus, sustaining the medical tourism market in a particular destination requires a network to be established by medical tourism stakeholder in order to enhance the competitiveness of the medical tourism market and to reduce the risk of malpractices. For instance, the JCI was established to help private medical facilities qualify to host foreign patients from western countries (Joint Commission International, 2009). The JCI provides private medical facilities with a framework to make sure that the medical facility is being operated according to the medical standards and regulations within the United States (Joint Commission International, 2009). Implementing the JCI standards is vital for a medical facility to approach the United States market and convince American patients to travel abroad for medical treatment and procedures. Thus, private medical facilities need guidance from non-Jordanian organization such as the USAID to

implement the JCI standards properly and facilitators from the government institutions need to arrange the communication between foreign patients and the medical tourism facility (USAID, 2010).

Jagyasi (2009) mentions that the development of the medical tourism sector relies on unity among stakeholders. Bookman and Bookman (2007) argue that the medical tourism market is very sensitive due to the accompanying medical regulations and laws, and, thus needs stakeholders to cooperate to make this market more secure for foreign patients. Interviewees in this study noted that a private medical facility cannot reach foreign patients on its own. Therefore, private medical facilities should collaborate with other stakeholders to better understand the requirements necessary to approach new market segmentation.

Developing a medical tourism market requires a safe environment that motivates stakeholders to network among each other. Smith and Forgione (2007) explain the globalization of the medical tourism market through Porter's Diamond. The purpose of Porter's Diamond is to determine the primary factors that allow a firm to conduct international business. These factors include: factor conditions, demand conditions, related and supporting industries, and company strategy structure and rivalry. Nonetheless, Smith and Forgione (2007) note that these factors are important to attract investments and stakeholders to participate within the medical tourism sector.

A firm that decides to establish an international business such as a medical facility needs to analyze the four factors in relation to stakeholders. A firm should determine the available resources and tools upon which it may draw and which play a vital role in developing an international medical facility; they include access to: medical universities, skilled physicians, and medical technologies. International medical facilities usually attract foreign physicians to conduct surgeries and recruit medical staff from foreign countries by offering incentive benefits and salary (Bookman & Bookman, 2007); however, these steps will not improve the competitiveness of the medical tourism market, and the price of medical services will increase due to the high salaries that foreign physicians demand. Therefore, the government of Jordan is cooperating with medical facilities to recruit professional medical staff from the local community, as their more modest salaries do not translate into higher medical costs for foreign patients (USAID, 2010).

The service marketing triangle illustrates the relationship among the three main actors within the international market, which are the service provider, end user, and facilitator (Zeithaml & Bitner, 2000). The main actors within the medical tourism market are the medical facility, the physician, and the patient. The medical facility should enhance its relationship with the physician and patient in order to improve the quality of medical care. The next section will mention three main actors within the medical tourism market in detail.

Another stakeholder is the supporting and related industries (Smith & Forgione, 2007). A firm should determine the overlapping areas between the tourism and medical sectors. The purpose of determining the overlapping areas of the medical tourism sector is to make the firm able to have an overview of the related businesses and supporting organizations. Related businesses are those businesses that offer compatible services with medical treatments for patients, such as hotels, tourism operators, transportation, shops, spas, tourism attractions, healthcare resorts, and restaurants. Supporting organizations are organizations that provide consultations, tools, and statistics to help firms achieve their goals.

A medical facility that is willing to achieve sustainability needs to collaborate with medical tourism stakeholders in order to receive support from the government for the promotion of their medical services, guidance from international organizations for targeting different patients' profiles, recommendations from local associations for enhancing the relationship between the medical facility and local community, and statistics and information about the market competitiveness from educational institutions. The biggest advantage of developing a collaboration strategy is to promote a particular medical destination as one entity and provide medical tourism stakeholders with incentive benefits.

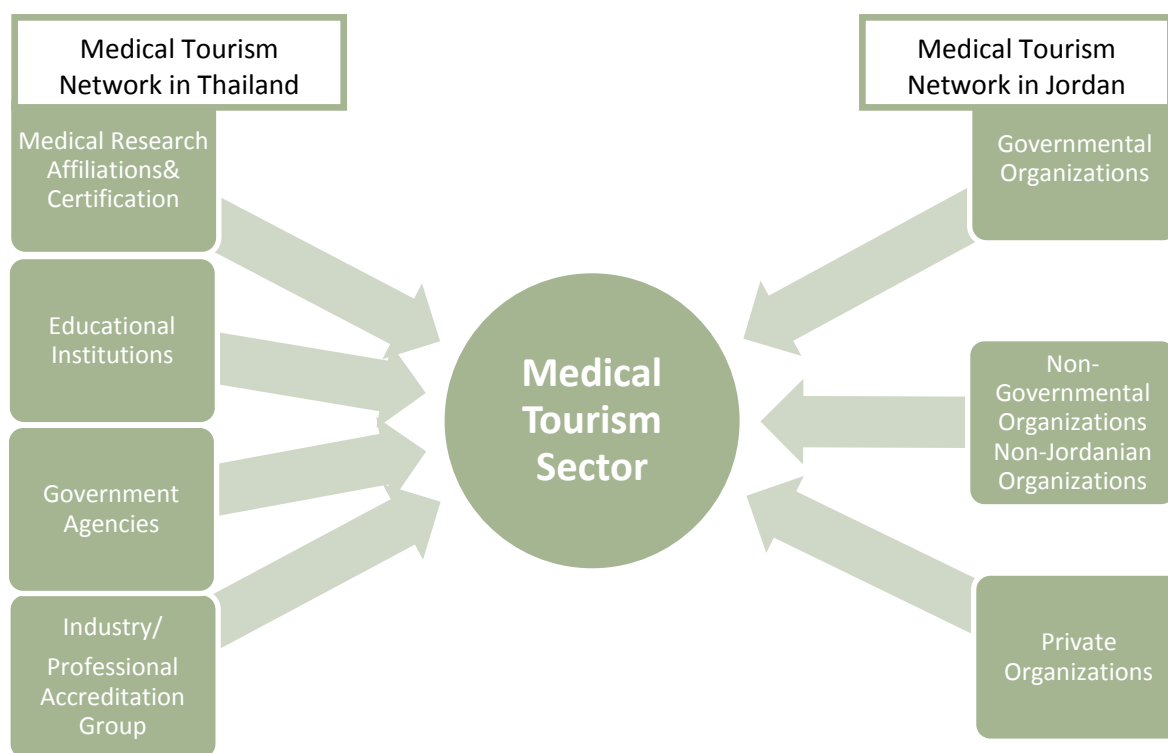
### **5.2.1 Evaluating the maturity level of the medical tourism network between Thailand and Jordan**

In 2006, a study was conducted in Thailand by Harryono, Huang and Miyazawa (2006) for the purposes of evaluating the development of the medical tourism sector (Harryono, Huang, Miyazawa, & Sethaput, 2006). The study determined the overlapping sector (medical tourism sector) between the medical sector and the tourism sector. The medical sector share the tourism sector with certain activities, such as, international transportations, agent operators, healthcare providers and hotels. This overlapping area

between the medical and tourism sectors has been redrawn as the medical tourism sector. Thus, the government of Thailand has identified stakeholders who could improve the development of the medical tourism sector. The relevant stakeholders come from: the medical research, affiliation and certification fields (e.g., HMS, JCI), industry professional accreditation groups (e.g., Medical council of Thailand), educational institutions, and other government agencies (see Figure 10). The role of these stakeholders is to help private medical facilities receive accreditation from the JCI, develop a marketing campaign for the medical tourism sector in Thailand, provide credible statistics about the supply and demand of the medical tourism market, and cooperate with universities to qualify skilled physicians and professional medical staff (Harryono, Huang, Miyazawa, & Sethaput, 2006).

The government of Jordan has determined the overlapping areas of its medical tourism sector. Thus, Jordan has developed a medical tourism network to attract stakeholders to cooperate among each other to enhance the development of the medical tourism market. Compared to the medical tourism network in Thailand, the Jordanian network is still young and requires the involvement and participation of many more stakeholders such as educational institutions and local facilitators to conduct affiliations between medical facilities and international medical institutions for increasing the quality medical care. Therefore, the medical tourism network in Jordan is still immature. Private medical facilities should broker affiliations with local universities in order to build their professional medical staff. In the meantime, insurance companies should ensure that the private medical facility has coverage for malpractice and the protection of patients' rights (privacy). Also, the medical tourism network needs more governmental participation to arrange the communication among stakeholders in formal ways. The results of these efforts will mean more motivation for stakeholders to participate within the development process. The following shape (Figure, 10) illustrates the various stakeholders of both countries that are involved in the medical tourism network for developing the medical tourism destination and the medical tourism facilities.

**Figure 10: The Medical Tourism Network in Thailand and Jordan**



Thailand’s Medical Tourism Network (TMTN) includes various stakeholders from the industry/professional accreditation group (i.e. Medical Council of Thailand), government agencies (i.e. Ministry of Tourism and Sport, Ministry of Health), educational institutions, and medical research affiliations and certification (i.e. Joint Commission International) (Harryono, Huang, Miyazawa, & Sethaput, 2006), while Jordan’s Medical Tourism Network (JMTN) includes governmental organizations (i.e. Jordan Tourism Board, Jordan Investment Board), non-governmental organizations (i.e. USAID, Private Hospital Association, King Hussein Cancer Center), and private organizations (i.e. Jordan Hospital, Al -Khalidi Hospital, Specialty Hospital). These stakeholders are the primary participators in the medical tourism network for both countries. However, Figure 10 illustrates the maturity level of both networks by determining the number of stakeholders.

TMTN collaborates with international medical school institutions for qualifying physicians and enhance their medical skills to match with physicians in the US and UK. For example, Bangkok Hospital



in Thailand is affiliated with Harvard Medical School for staff training (Harryono , Huang, Miyazawa, & Sethaput, 2006). Also, JMTN collaborated with international medical institutions in UK and US for increasing the quality medical care by connecting local physicians with respected medical schools in the western countries.

TMTN has educational institutions that offer cosmetic, organ transplants, cardiac, and orthopaedic treatments to dental and cardiac surgeries, which help to supply the medical tourism sector with skilled physicians and practitioners. Educational institutions collaborate with industrial representatives and medical associations to determine the requirements of medical crew to work in the medical tourism sector (Harryono , Huang, Miyazawa, & Sethaput, 2006). This help to create a skilled medical crew that is able to conduct surgeries for foreign patients by connecting medical students with skilled physicians around the world for sharing knowledge and medical techniques. In contrast, JMTN does not have representation from any educational institutions. Thus, the majority level of JMTN is still at the first stages and need more stakeholders to be involved in order to evaluate the development of the medical tourism sector. Educational institutions play a primary role in conducting research for evaluating the sustainability growth of the medical tourism market, and then medical institutions will have better anticipations about the future.

The Ministry of Health and the Ministry of Tourism and Sport in Thailand have a direct involvement in the medical tourism network. The Ministry of Health provides consultations for private medical facilities for implementing international medical standards and regulations in order to host foreign patients, while the Ministry of Tourism promote the medical tourism sector in Thailand through tourism offices around the world (Harryono, Huang, Miyazawa, & Sethaput, 2006). In contrast, the Ministry of Health in Jordan has no direct involvement with the medical tourism network. However, the Ministry of Health inspects medical facilities to make sure that these facilities have implemented the necessary medical standards and regulations for treating patients. Also, the Ministry of Tourism and Antiquity has no direct affect on the medical tourism network. Thus, the collaboration among stakeholders in the

medical tourism network in Jordan is in the informal shape, because JMTN has no authority to pass regulations regarding medical tourism sectors.

Private medical facilities are part of JMTN, which increases privacy and confidentiality issues among medical tourism facilities in terms of declaring the number of patients and information about the market competitiveness( (Daft & Armstrong, 2009). In contrast, private medical facilities in Thailand are not part of the network; however medical facilities participate via an association that represents them. In this sense, TMTN has the ability to gain the trust of each medical facility and collect information about the medical tourism market such as the number of patients. Having the right data will help the medical tourism network to evaluate the medical tourism market. Table 5 illustrates the strengths and weaknesses between TMTN and JMTN.

**Table 5: TMTN VS JMTN**

<b>TMTN</b>	<b>VS</b>	<b>JMTN</b>
<b>Direct governmental participation</b>		<b>Indirect governmental participation</b>
<b>The collaboration among stakeholders is formal</b>		<b>The collaboration among stakeholders is informal</b>
<b>Educational institutions are part of the network</b>		<b>No educational institutions participations</b>
<b>Indirect participation of private medical facilities</b>		<b>Direct participation of medical tourism facilities</b>
<b>Credible resources about the medical tourism market</b>		<b>Non-credible resources about the medical tourism market</b>

According to Table 5, JMTN is a young network and still needs more participation from the government in order to make this network more powerful, and conduct collaboration among stakeholders in formal shape. Educational institutions are important also to collaborate with the medical tourism network for conducting research to evaluate the medical tourism market for supplying the market with the

right physicians and medical staff. Private medical facilities should participate in the medical tourism network through an association to eliminate conflicts and confidentially issues among medical facilities, and to allow the medical tourism network to collaborate in more depth without barriers such as competitiveness among medical facilities.

### **5.3 Developing a Sustainable Medical Tourism Facility**

This section addresses research question three about developing a framework for establishing a sustainable medical tourism facility that remains competitive with other medical facilities while paying attention to the triple bottom line (economic, social, environment). The framework was developed by using the foundation of Hart and Milstein's (2003) framework for creating four quadrants to achieve a sustainable value, which is a value that provides wealth while paying attention to the triple bottom line.

Bookman and Bookman (2007) have determined the foundations and the necessary requirements for creating a medical tourism destination, and have described the globalization of medical tourism via determining the primary factors that motivate patients to travel abroad seeking adequate medical treatments. As Smith and Forgione (2007) have summarized, the relative factors fall into two categories: factors for selecting a medical tourism destination, and factors for selecting a medical facility. However, more attention should be paid to the development of the medical facility according to the globalization of the medical tourism demand and supply and in relation to local social and environmental conditions. Therefore, this study proposes a framework for the development of a sustainable medical tourism facility.

Some subjects interviewed in this study mentioned that private medical facilities are educating employees about eco-friendly practices to protect the environment through the implementation of the green hospital program. But a majority of interviewees were not informed about how a medical tourism project could be managed to protect the environmental attractions. Other interviewees mentioned that the government of Jordan is developing an incineration area to dispose of medical wastage in the most efficient way while reducing some of the negative impacts on the environment. The following figure exposes different opinions of interviewees on the issue of how medical tourism facilities can be managed to protect environmental attractions (see table 6).

**Table 6: How medical tourism projects or private medical facilities can be managed to protect the environment?**

<b>Specialty Hospital</b>	It depends what the patients are looking to do in the host country. Patients who are willing to come to Jordan for open heart surgery may not be able to visit environmental attractions, while patients who are coming to Jordan for wellness and to improve their health conditions, they have more probability to visit these environmental attractions such as the Dead Sea.
<b>King Hussein Cancer Center</b>	The green hospital (Green Thinking) is the only program that we have to offer at this moment, and we are working on raising awareness about the best business practices for reducing the waste, which in the end could return some benefits for the environment. However, we hope that this plan will take off on a larger scale.
<b>USAID</b>	
<b>Jordan Investment Board</b>	This thing is not part of the cluster agenda, and it's far away from our objectives, it will be our least concerns for the cluster. I think because we are new in this field, and the cluster can be the first step that will lead us to pay more attentions to other issues such as the environment.
<b>Jordan Tourism Board</b>	Of course, you should talk with the Ministry of Health because they know well about this subject. All hospitals within Jordan must sign an agreement with the Ministry of Health for relieving medical waste according to the Jordanian law.
<b>Private Hospital Association</b>	The government of Jordan is developing a project to dispose the medical wastes without harming the environment; and this project will be lunched in two months. And this project will be very good for hospitals to reduce the additional costs for medical wastes. Now, we have another theme of hospitals called green hospital.
<b>Jordan Hospital</b>	
<b>Al-Khalidi Medical Center</b>	Green Hospital
<b>Directorate of Health and Environment</b>	Educating employee about eco-friendly practices

Table 6 raises the point that most interviewees do not have a clear image of how a medical tourism facility can be managed in order to protect the environment. However, three interviewees noted that the green hospital program is an effective way to educate employees and also local residents about eco-friendly practices. For example, King Hussein Center has established a department for social responsibilities; this department is responsible for implementing the green hospital program via conducting campaigns and training sessions to motivate employees and local residents to play their role in

protecting the environment. However, King Hussein Cancer Center has recycling bins within its facility to encourage employees, patients and visitors to participate in the green hospital program to reduce the negative impacts on local environmental attractions. As you can see, medical tourism facilities play a primary role in protecting the environment via various projects such as the green hospital program. To implement this in the most proper way, a medical tourism facility should adopt a framework to impose sustainable enterprises, subsequently achieving shareholder value while delivering benefits to the triple bottom line.

In 2000, the King of Jordan initiated a campaign to raise awareness about the concept of sustainable development among Jordanian youth. The purpose of the campaign was to attract Jordanian youth to participate within sustainable development projects to make Jordan a better place to live. Although it initially targeted educational institutions, the campaign then went on to attract the private sector to participate in sustainable development projects (Ghazal, 2010). For instance, the government of Jordan dedicated \$29 million to develop an industrial waste treatment plant (Namrouga, 2011). The purpose of the project is to eliminate negative impacts on the environment and spillage of hazardous materials. According to the Ministry of Health, the private health sector generates 4,000 tons of medical waste every year (Namrouga, 2011). Therefore, the government of Jordan deems it vital to designate a specific area for the incineration of medical waste that would reduce the negative impacts on the environment and thus improve the quality of life for members of the local community by using eco-friendly methods. However, according to the government of Jordan, one of the project obstacles that private institutions face is developing a greater urge to participate within this project implementation, and promoting a greater desire among employees to embrace these sustainable practices. Private medical facilities should educate their employees about how to dispose of medical waste and reduce the number of incidents in which the environment is damaged; it can be as simple as putting a waste item in its corresponding container. Private medical facilities should establish strict policies governing the disposal of medical waste.

In addition to the environmental reasons for implementing a sustainable medical tourism facility, interviewees in this study mentioned other issues facing medical facilities in the medical tourism market,

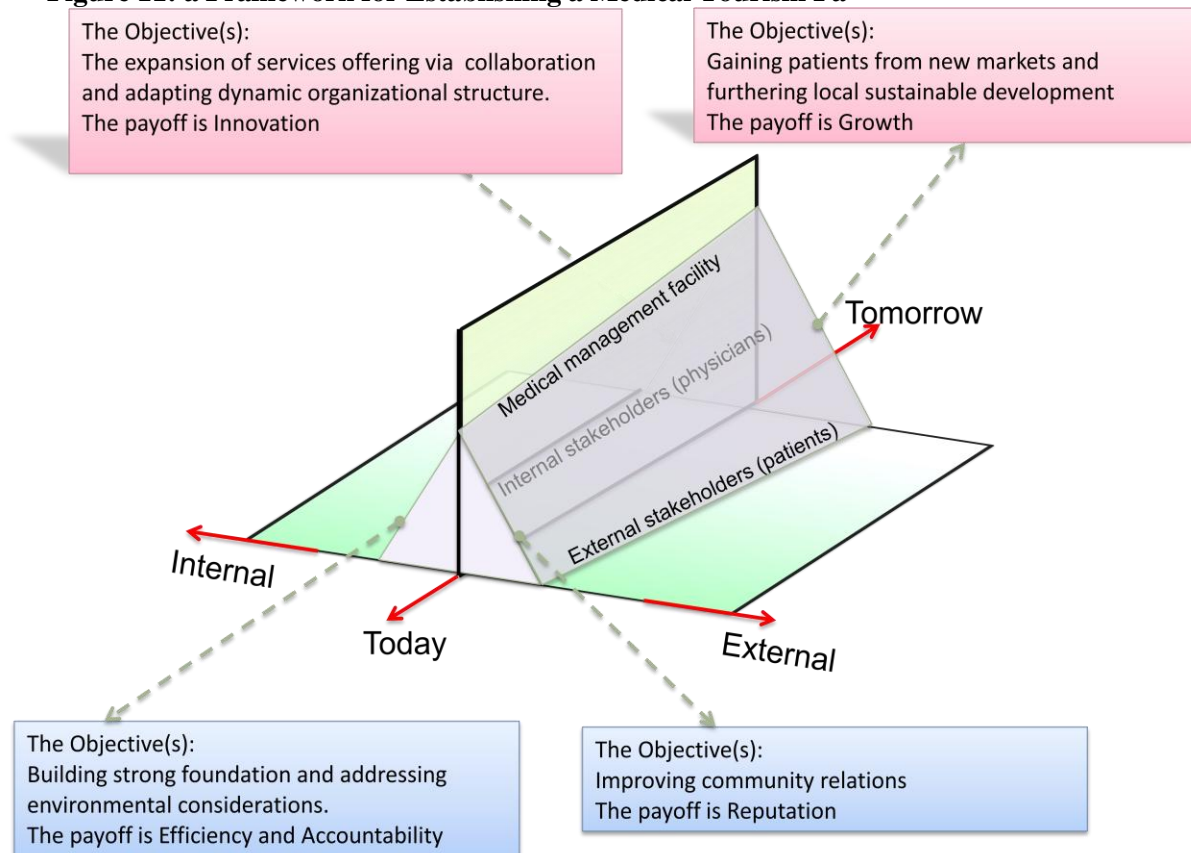
including malpractice suits, accreditation, market segment, competition, lack of skilled physicians, community participation, and credible statistics. Also, in the published literature on this topic, practitioners have mentioned that medical tourism facilities should provide post-operative services, and employ skilled physicians who received medical training in the western countries. Thus, a sustainable and well-rounded medical tourism facility should overcome these issues and provide a high quality of medical care in the most efficient way.

In terms of social development, private medical facilities in the medical tourism sector could help poor people gain access to their facilities by cooperating with the government and the bank sector in order to offer subsidized programs for poor patients. Under this scenario, the medical tourism project could be turned from an economic development project into a community development project. To build a medical tourism community, medical tourism should offer local students opportunities to participate in educational sessions, health campaigns, and interaction sessions with skilled physicians and exposure to advanced medical technologies. On the other hand, medical tourism facilities should also be accessible to poor patients via subsidized programs. So far, although there have been some recent initiatives, in the big picture, little attention has been paid by practitioners and scholars to determine appropriate methods for providing poor patients with advanced medical services (Bookman & Bookman, 2007).

Through interviews with key players in the industry, the suggested foundation of implementing a sustainable medical tourism facility has been determined. The primary requirements are accreditation, quality of care, skilled physicians, and then medical technologies, in that order (Smith & Forgione, 2007). However, developing a framework to achieve these requirements still remains unclear within the medical tourism literature. Hart and Milstein (2003) developed a framework for achieving a sustainable value, which implies anything that needs to be maintained sustainably in order to provide benefits for both the current generation, and the next generation. Hart and Milstein's (2003) framework was developed in the context of manufacturing firms, for increased efficiency, enhancement of reputation, achieving innovation, and for growth. Because the base purpose of Hart and Milstein's (2003) framework is similar to the needs of the medical tourism industry, this study has adopted it for achieving certain objectives.

These include efficiency and accountability, reputation, innovation, and growth. While the medical tourism facility is striving to achieve these objectives, management of medical tourism facilities should pay special attention to the relationship among internal stakeholders (physicians, and employees) and external stakeholders (government bodies, educational institutions, industry and professional representatives, and facilitators). The ultimate goal in this respect is to achieve a strong relationship among internal and external stakeholders (Figure 11). In order to develop a long relationship with internal and external stakeholders, future goals and objectives should be worked out according to stakeholders' ideas, within the implementation and expansion process. The following framework contains four primary objectives for achieving a sustainable medical tourism facility. The four objectives are categorized into internal and external objectives, and short and long term objectives (Figure 11).

**Figure 11: a Framework for Establishing a Medical Tourism Fa**



### 5.3.1 Stage 1: Efficiency and Accountability

Medical facilities should offer a high quality to host foreign patients. The medical facility should have standards and regulations built in to ensure they are providing a high quality of healthcare in the most

efficient way. The standards should be in line with local and international medical law. Thus, the medical facility should be strict in monitoring its compliance to the medical regulations and standards, especially in the first stages, to make sure that medical staff is delivering high quality medical services, in the most efficient ways. The medical facility management should be very conscious of the implementation of regulations and standards in order to prevent malpractice suits. At this stage, the medical facility will adopt a specific management model for operation, which is a mechanistic organizational structure. According to Daft and Armstrong (2009), a mechanistic organizational structure means that the information transferred among the staff and management moves vertically from upper level employees to lower level employees. In this model, there is a structure that provides employees with rules to resolve problems without communicating directly with their managers. However, if lower level employees are not be able to resolve a problem themselves, this model suggests that they pass it to the next level above them, until the problem gets resolved. The information system of this model is actively used by managers, which could mean that employees have no direct access to their managers to express their points of views. However, the goal of using this organization structure is to achieve efficiency and accountability in order to survive in the market; once the organization has achieved this goal, the mechanistic organizational structure can gradually transform into a dynamic organizational structure (Daft & Armstrong 2009).

Regarding environmental consideration, the medical tourism facility should develop a program for pollution prevention. According to Hart and Milstein (2003), less waste means less cost. Therefore implementing a pollution prevention program and waste reduction will save the medical tourism facilities a significant number of dollars. For instance, 1975-1990, 3M Company implemented 3p program (Pollution Prevention Pays). This program aimed to reduce waste by using reusable and recyclable items. As a result, 3M reduced its total pollution in 1975 to 50% less in 1990, and saved 500 millions (3M-Company, 1992). Recently, medical facilities are enhancing their image at the local and global level by implementing green 'green hospital'. This program aims to provide environmental responsibilities while raising awareness among employees about the best methods for saving energy, recycling medical items, and using reusable items (Clark, 2011).



### 5.3.2 Stage 2: Build a Reputation

A private medical tourism facility needs to collaborate with local and international organizations in order to gain reputation. For example, the Specialty Hospital in Jordan is cooperating with the Private Hospital Association and the USAID to promote its facility to foreign patients. According to an interviewee, Specialty Hospital representatives attend medical conferences every year in order to meet with external stakeholders and conduct partnered business for mutual benefits. Private medical facilities in Jordan have participated in the medical tourism network to promote Jordan's medical tourism sector as one entity (USAID, 2010).

A number of medical facilities are collaborating with medical tourism stakeholders and enhancing their relationships with other medical and tourism organizations to achieve their goals and objectives. Daft and Armstrong (2009) have mentioned that collaborative network models for developing relationships with other organizations, provides various benefits such as resources for enhancing the reputation of the organization via collaboration, enhancing competitiveness, and increased chance of survival via exchange of resources. In this regard, the private medical facilities in Jordan are cooperating with western universities to enhancing the quality medical services (USAID, 2010). Physicians from Jordan will travel to western universities to enhance their medical skills and become more qualified to treat patients from Europe and North America.

Bramwell and Lane (1999) outline the importance of attracting various stakeholders with different interests in terms of quality service, innovation, product development, marketing, and competitive edge. The benefit of drawing different stakeholders into the mix is creation of multiple paths for innovation and development (which leads to increased reputation). The rapid growth of partnership projects within the tourism industry helps maintain competitiveness in the global market by bringing together capital, resources, and expertise from several stakeholders (Kotler, 1984). Having said this, tourism projects, including a medical tourism facility, should not look at stakeholders as merely and exclusively financial solutions, but also as potential contributors to the decision-making process (Joppe, 1996). Thus, the medical tourism facility should allow participation of the local community via funding educational

campaigns, holding educational sessions, or planning events to raise awareness about community issues. In addition, there might be opportunities to help influence local sustainable development initiatives or provide charitable contributions. Also, the medical facility should cooperate with local and international organizations to enhance its reputation among foreign patients. The medical facility should work in partnership with tourism operators to reach foreign patients and deliver an attractive image about the facility. Private medical facilities in Jordan are collaborating with governmental institutions to plan marketing campaigns for promoting the medical tourism sector within Jordan as an entity. According to the interviewees in this study, a private medical facility cannot promote its services alone, but should plan a marketing campaign with various stakeholders in order to reach foreign patients. Daft and Armstrong (2009) outlined that the collaborative network model allows organizations to achieve their goals collaboratively. For instance, small medical facilities in Jordan are collaborating with the Private Hospital Associations in order to expand their facility for hosting foreign patients. Thus, adopting a collaborative network model at this stage is very important for a medical facility to enhance their image and build a reputation.

### **5.3.3 Stage 3: Innovation**

Once stages 1 and 2 have been adequately developed, management of the medical tourism facility will have a strong relationship with internal stakeholders such as employees and physicians; because of this relationship, the management style can be transformed from a vertical to a horizontal style by implementing a dynamic organizational structure. In this stage, collaboration among management and internal stakeholders will be more active and direct. The decision-making process can be conducted in more of a teamwork fashion, because of the climate of trust developed among internal stakeholders, motivating the medical facility staff to create move on a path of growth through opening labs for education, and encouraging student to integrate with skilled physicians. As a result, the medical staff will be motivated to share ideas and knowledge, which will lead the medical facility towards innovation by developing ideas, and converting them into action. An interviewee from Al-Khalidi Medical Center has

mentioned that we communicate with our physicians and employees via internal network that allow all facility staff to collaborate with each other for determining solutions.

According to Daft and Armstrong (2009), the dynamic organizational structure allows employees and managers to work as an integrated team for problem resolution and knowledge sharing by using a horizontal information linkages model. This model provides extensive benefits in terms of information system development and use. Going a step further and making this a computerized information system enables employees to exchange information, ideas and advice. For instance, Siemens Company, which is an international organization, uses an information system that provides a digital network for 450,000 employees to share information and knowledge regarding the quality of customer services (Daft & Armstrong, 2009).

A medical facility should adopt an information system that allowing medical staff and physicians to share knowledge, ideas, and decisions for enhancing the quality of medical services provided. Daft and Armstrong (2009) argue that information and communication technologies can be integrated within the medical sector as a development tool. According to interviewees, medical facilities in Jordan have developed an information network for hospitals to share knowledge and motivate employees to enhance their medical skills by cooperating with other skilled physicians. Ultimately this may lead to new innovative practices, and potentially new service offerings.

#### **5.3.4 Stage 4: Growth**

The last stage is growth. In this stage the medical facility should enhance its relationship with external stakeholders such as, universities, patients, and international organizations (JCI). Foreign patients are looking for a medical facility that provides follow-ups to make sure that the medical services delivered were conducted safely and with no negative impacts on the patient's health. The medical tourism facility should define new ways to follow up with foreign patients after they have received the medical treatments.

Medical facilities in Mexico have established offices within the United States solely to follow up with American patients and refer them to appropriate local physicians for further medical treatments, and to

keep the patient's health status up to date in the medical facility records. According to interviewees, certain medical facilities in Jordan have also established a specific department to follow up with foreign patients after they leave the country. Building a follow up system will enhance the relationship between foreign patients and the medical facility (Dunn, 2007). Also, a new market segment will be opened for those who are searching for high quality medical services and a spa resort to heal their body after a complex surgery (Dunn, 2007). However, these individuals are now more educated about the medical tourism destinations, and will be conscious when they pick their next medical tourism facility.

Private medical facilities could also collaborate with governmental institutions to put forward the ideas of incentive services for foreign patients, including post-operation services, tourism value, and medical consultations. For example, Jordan Tourism Board (JTB) has offices around the world to promote about their tourism attractions to foreign visitors; these could include medical facilities. These incentive services will draw foreign patients from new countries and lead the medical facility to a new market segment.

However, medical tourism has not paid attention to the poor people within Jordan. Private medical facilities have no direct cooperation with public hospitals because they have different purposes: public hospitals are dedicated to treating Jordanians who cannot afford to be treated in private medical facilities, and they cannot update their medical technology due to limited budgets. In contrast, private medical facilities are prepared with advanced medical technologies and skilled physicians. Private medical facilities target wealthy patients. Nonetheless, 20 per cent of the Jordanian population lives in rural areas under poor conditions and has no adequate access to health care (Rural Poverty Portal , 2009). There is a gap within the medical tourism system that fails to provide adequate medical services for poor patients. Recently, the government of Jordan has been working to attract foreign investments in projects like malls, hotels, resorts, and hospitals located within the undeveloped areas of Jordan in order to enhance the quality of life for poor communities that live with no adequate access to running water, food and medical services. The German Society for International Cooperation is funding a medical clinic that will be built

in the Jordan Valley to provide local communities with adequate health access (Rural Poverty Portal , 2009).

To expedite this process, private medical facilities in the medical tourism sector could help poor people gain access to their facilities by cooperating with the government and the bank sector in order to offer subsidized programs for poor patients. Under this scenario, the medical tourism project could be turned from an economic development project into a community development project.

To this end, this chapter discussed the various factors that motivate both Arab and North American patients to travel abroad for medical services, and advised that these factors should be determined and defined from foreign patient perspective in order to cover all the factors that motivate patients in general to travel abroad seeking adequate medical services. Also, this chapter defined the role of medical tourism network for developing a medical tourism destination and medical tourism facilities to promote the medical tourism sector as one entity. This chapter evaluated the maturity level of the medical tourism network in Jordan by comparing with the medical tourism network in Thailand. Finally, a framework was introduced in this chapter to provide guidance for medical tourism facility to enhance its reputation via four stages toward sustainability.

## 6 Chapter Six: Conclusion

According to Dunn (2007), the essential requirements for selecting a medical tourism destination, are political stability, economical stability, social stability, and technological infrastructure and capability. A country should be secure in these essential foundations in order to host foreign patients. The primary factors that affect a patient's choice of medical facility to visit were determined by Smith and Forgione (2007) to be categorized into external and internal factors. External factors include: economic condition, political climate, social behavior, and regulatory standards. Internal factors include: costs, physicians training, quality of care, and accreditation. As Smith and Forgione's (2007) study was conducted through the eyes of North Americans, the results may not reflect the entire set of primary factors that motivate a foreign patient to travel offshore for adequate medical treatments. Bookman and Bookman's (2007) study explained the globalization of medical tourism by determining the primary factors that motivate patients to travel offshore. Jagyasi (2009) has also mentioned that developing a medical tourism sector should be done by a specific organization that manages the development of the medical tourism market, in accordance with certain standards and regulations. There is currently little literature on the development of a medical facility based on supply and demand within the medical tourism market, and most studies are North American-centric. Therefore, this study has focused on the primary factors that motivate not only North American patients, but also non-westerners to travel abroad for medical services.

For instance, Arab patients are more motivated to travel to Jordan for medical services for several reasons, including religion, culture, security, visiting friends and relatives, and for tourism attractions. According to the World Bank, Jordan is the best medical tourism destination in the Middle East and the fifth in the world (USAID, 2010). In addition to different reasons for non-westerners to travel abroad for medical tourism, there are different factors that motivate Canadian patients to travel abroad, than American patients. Smith and Forgione (2003) distinguished quality of care factor from cost, accreditation, and medical physicians, but they also pointed out that these factors affect patients' choice of medical facility simultaneously. Interviewees in the study argued that cost first, and then medical quality, are the main reasons that Arab patients travel to Jordan for medical services. Moreover,

interviewees combined the following factors: accreditation, quality of care, skilled physicians, and tourism values under one category, called quality medical care. Jordan is focusing on enhancing quality medical care by providing incentive services that may spark the attention of foreign patients such as arranging tourism trips to resorts where patients can have the opportunity to heal their body after a complex surgery. Thus, Jordan Private Medical Facilities and USAID have developed a medical tourism network for enhancing their competitiveness in the market through a collaborative strategy among medical tourism stakeholders to promote Jordan's medical health sector as one unit.

Thailand has also developed a medical tourism network. The maturity level of the network is quite high in comparison to Jordan's. Thailand's medical tourism network contains insurance companies, Government institutions, educational institutions, industrial professional (accreditation groups), medical research affiliations, medical institutions and hospitality and tourism operators. The maturity level of the medical tourism network in Jordan is still in its infancy due to several factors such as lack of experience, poor management and informal collaboration efforts among stakeholders. To overcome these challenges, the government of Jordan should develop a formal collaboration strategy among medical tourism stakeholders in order to motivate them to cooperate and enhance the medical market competency. Hopefully, in the future, the government of Jordan, with help from the private sector will establish a medical tourism association to represent medical tourism stakeholders. Also, Jordan is developing an incineration area to dispose medical wastage by using eco-friendly practices to eliminate negative impact on the environment. Private medical facilities dump 40,000 tons of medical waste every year, and 80% of the total medical waste goes to industrial incineration areas (Namrouga, 2011). The government of Jordan is launching a project to build a specific incineration area for medical waste. Nonetheless, this project is facing some obstacles such as educating the private medical facilities regarding proper disposal methods (Namrouga, 2011), which is necessary to eliminate the risk of environmental pollution. A medical tourism network should include an environmental body in order to raise awareness about eco-friendly practices among stakeholders, and how to sustainably manage a medical tourism facility. Since Jordan has a

shortage of water, and these facilities would use a great volume of water, environmental issues should be ranked as a first concern for both the private and public sector.

A medical tourism destination that is looking to sustain its position in the world as one of the best medical destinations should create a specific set of criteria to evaluate the development of the sector. This relies on certain variables like accreditation, technological capability, privacy and confidentiality, and trained physicians. Without these elements, a medical facility cannot be promoted or used as an international medical facility (Marlowe & Sullivan, 2007). By employing a quantitative approach to determining the degree of sustainable growth of medical tourism, a dashboard approach can be developed for measuring the medical tourism sector. The dashboard can be constructed using the following variables: the number of international patients, the size of medical industry profits, the quality and quantity of the local environmental resources, the quality of patients' experiences, the number of medical jobs, and the quality of life for local residents. If these variables cannot be directly measured, a new composite should be developed in order to allow practitioners to evaluate the growth of a sustainable medical tourism facility (Farrell, 1999).

The medical tourism network in Jordan should create a composite that made of certain variables, such as, the number of international patients, the number of physicians, the number of private medical facilities, the quality of life for local residents, and the quality of environmental attractions (Garrod & Fyall, 1998). All these variables are important to evaluate the development of medical tourism sector, specific to Jordan. For example, private medical facilities in Jordan dump more than 40,000 tons of medical waste (Namrouga, 2011). Nonetheless, an interviewee in this study mentioned that Jordan is planning to increase the number of foreign patients by 10% in 2011. However, the increased number of patients will amplify the amount of medical waste produced, negative affecting the environment. Thus, the development of the medical tourism sector should be measured and evaluated according to the principle of sustainable development in order to determine if this development generates positive or negative impacts within the triple bottom line model.



On a facility level, management should also create a measurement tool to determine the positive and negative impacts of the medical tourism facility on environmental and tourism attractions, and the quality of life for local residents. Also, the facility should develop a survey to target internal and external stakeholders, allowing them to determine what a medical tourism facility should sustain, such as the local culture, or the quality of life, or the environmental and tourism attractions, or all of them? Management should be responsible for determining the various ideas, opinions and recommendations of medical tourism stakeholders in order to create a framework that provides guidance for the development of a medical tourism facility, while paying attention to the triple bottom line.

This study has used the foundation of Hart and Milstein's framework (2003) for developing a new framework that provides guidance for establishing a sustainable medical tourism facility. The framework focuses on four objectives: efficiency by implementing eco-friendly practices; reputation by implementing a collaborative strategy with external stakeholders; innovation by implementing dynamic organizational structure; and ultimately sustainability by approaching new market segmentation and providing extensive medical services like consultations, post-operation, and/or tourism services. These stages and objectives were built in line with feedback from interviewees, and in accordance with existing literature that exposes the primary factors that motivate foreign patients to travel abroad for medical services. The following section provides various recommendations regarding the particular case study of Jordan's medical tourism sector, and future studies.

## **6.1 Recommendations**

- 1- Creating indexes for measuring the development of the medical tourism sector in Jordan.

The medical tourism network should determine specific indicators to measure the development of medical tourism sector by surveying medical tourism stakeholders, such as private medical facilities, tourism operators, educational institutions, and governmental organizations. For example, the medical tourism network in Jordan should create a measurement scale for evaluating the sustainable growth of the medical tourism market by determining the following indicators: the number of patients, the number of patients visiting tourism attractions, the number of local physicians, the advanced technology and the amount of

medical waste generated. All these indicators can be used as an important element for creating a dashboard approach – with highly important measures. Thus, it is important to conduct quantitative research in order to determine the impact of medical tourism sector as a negative or positive impact on the triple bottom line (economic, social, and environmental).

#### 2- Develop a follow-up system for patients

The medical tourism network should focus on building a post-operative service system for foreign patients. For Instance, health resorts, rehabilitation centers and spa should be promoted within the medical tourism sector as a follow up system for patients. Also, private medical facilities could establish a rehabilitation center that is funded by the private facilities. The purpose of this center is to provide physiotherapy services for patients after a complex surgery. Post-operative services could also be in the form of consultation services, which provide various recommendations regarding a patient's health condition; or arranging a tour for foreign patients to experiment the host country's culture, historical and tourism attractions. The Medical tourism network should cooperate with tourism operators and medical institutions in order to provide patients with services that are designed to enhance one's health. In addition, post-operative services should be designed to make sure that the patient has received the medical services according to their expectations.

#### 3- Establishing an organization for developing a medical accreditation system

Receiving a medical accreditation from the JCI costs medical facilities more than 10,000 dollars each quarter (Joint Commission International, 2009). Receiving accreditation from external organizations like the JCI may increase the cost of medical treatments for foreign patients (Harryono, Huang, Miyazawa, & Sethaput, 2006). Therefore, the medical tourism sector should establish an organization that receives guidance from the JCI to accredit medical facilities in Jordan. As a result, medical tourism facilities will not be required to pay large sums of money for accreditation. Instead, an organization will receive a simple annual payment from each facility for updating their medical facilities and elevate the medical services according to the international medical standards and regulations. For example, Jordan's hospitals are connected under one network to share knowledge, transfer medical documents, and learn from each

other. The same idea as the hospital information network can be enhanced and upgraded to include an accreditation system to help medical facilities, regardless of size. The benefit of this network is to save money from moving out of the country towards international organizations such as JCI, or insurance companies. Another benefit is to maintain the low costs of medical services for foreign patients, which is often considered as a primary factor motivating patients' facility selection choices.

#### 4- Direct governmental collaboration with the medical tourism network

The government of Jordan should have direct collaboration efforts with the medical tourism network. For example, the Ministry of Health in Jordan has reopened a medical tourism office, but it has no connection to the medical tourism network. Without direct participation from the government, the medical tourism network will not have the power to implement such a law to eliminate the risk of malpractice among medical tourism facilities. Creating a law for malpractice will motivate medical facilities to buy insurance coverage to protect from malpractice suits. Also, the Ministry of Tourism and Antiquity should cooperate with the medical tourism network by assigning objectives within the Nation's tourism strategy for enhancing medical tourism. They should also develop a marketing strategy by cooperating with tourism operators and governmental offices around the world to promote the medical tourism sector as one entity.

The previous recommendations belong to the case study, the following recommendations target scholars and the academic field.

#### - Define medical tourism.

Practitioners and scholars are debating on one sole definition of medical tourism. Having one definition of medical tourism is important for scholars to review this definition in each study, which will help to define the medical tourism market, sector, and facilities. Bookman and Bookman (2007) have defined tourism in a simple context as "an economic activity that entails trade in services and represents the splicing of at least two sectors: medicine and tourism" (Bookman & Bookman, 2007, p. 1). However, this definition still needs to be reviewed by scholars who have a wide range of experience within the medical tourism in order to determine if this definition represents the medical tourism sector accurately. Hopefully, more

scholars' contributions will be offered on establishing a definition for medical tourism, and a theoretical framework that provides guidance to medical facilities for achieving sustainability.

As this chapter has introduced several recommendations regarding the medical tourism sector in Jordan and future studies, the following section represents the limitations that this study has faced.

#### 1- Competitiveness

Medical facilities keep some statistics and information private, not allowing it to be divulged for reasons of competition among facilities. While conducting interviews with private medical facilities, some of them could not answer all of the questions posed because of internal policies. Thus, this study was struggling to ascertain certain details such as the number of foreign patients, future projects, and how much the facility has earned through medical tourism channels.

#### 2- Credible Information

Each interviewee provided information that was potentially contradicted by others. For example, the USAID has reported that Jordan hosted 200,000 foreign patients in 2009, while the Private Hospital Association reported that Jordan hosted 210,000 in 2009. Thus, it was difficult to determine the accuracy of some interviewee reports.

#### 3- Determining the medical tourism stakeholders

The maturity level of the medical tourism network is still not as large as it could be due to several factors such as lack of management and direct collaboration among stakeholders in the medical tourism network. Therefore, a large amount of time was spent to find the medical tourism stakeholders, because Jordan does not have a specific organization such as a medical tourism association in Thailand, nor a formal network. Thus, conducting interviews required a large amount of time and could have been more efficient if there was formal network to work from.

## 6.2 Future studies

This research contributed in three areas. First, this research introduced new factors that play a primary role in motivating foreign patients to travel abroad for medical treatments. These factors can be

summarized under two categories: medical tourism destination factors, and medical tourism facility factors (Smith & Forgione, 2007). Smith and Forgione's study (2007) about Global Outsourcing of Healthcare defined the medical tourism factors according to American patients' perspective, while this study mentioned the medical tourism factors from the Arabic and foreign perspectives. This paper's second contribution includes a network of medical tourism that could help in the development of a medical tourism sector. This research explained the primary role of the medical tourism network for enhancing the quality of medical care and market competitiveness. In addition, a comprehensive explanation about the maturity level of the medical tourism network was introduced by comparing two networks: Jordan's medical tourism network, and Thailand's medical tourism network. Defining the medical tourism network in detail helps practitioners understand the benefits of implementing a collaborative strategy among medical tourism stakeholders for the purpose of developing the medical tourism destination and facilities to host foreign patients. This paper's final contribution includes evidence showing that medical facilities are increasingly coming to provide not only medical services but also tourism services, observing social and environmental responsibilities to increase their reputation among foreign patients. Thus, this research determined the drivers for implementing a sustainable medical tourism facility. The relevant drivers are: medical cost, skilled physicians, medical technology, accreditation, and regulations. According to these drivers, this research developed a framework by using the foundation of Hart and Milstein's work (2003) and interviewees' recommendations. The framework aims to achieve a sustainable medical facility by implementing four stages toward sustainability: 1) Building strong foundations and addressing environmental consideration, 2) Improving community relations, 3) The expansion of services offering, and 4) Gaining patients from new markets.

Hopefully, future studies concentrate more on developing a framework to implement a sustainable medical tourism facility that can be managed by the local community and rely on local resources to survive in the market. Developing this framework requires researcher to approach a medical facility and conduct interviews with internal stakeholders to evaluate the framework and determine how it can fit in

reality. This will help future researchers to look at medical tourism projects from a community development perspective.

Also, another way that this study will be useful for future researchers of medical tourism, is that it worked on determining the variables for measuring the impact of medical tourism on the environment, the social sphere and the economy by conducting a survey that targeted medical tourism stakeholders, such as tourism operators, government institutions, medical facilities, education institutions, physicians, and non-governmental organizations. This research will help medical facilities reposition their future goals to provide benefits to the environment, the public, and the economy while generating financial rewards and profits.

Finally, a suggestion for future studies will be to determine what types of organizational structures are being adopted by medical facilities located within a capitalism system (USA) and to compare them to other medical facilities located within the Communist system (Cuba). This research will help determine the impact that each facility has on the triple bottom line (people, product, and profit), and the various roles that each facility plays to survive in the market. On the other hand, this study will help determine the impact of the political social system on the management roles of the medical tourism facility for the purpose of improving the medical services and attracting foreign patients.

## Bibliography

- 3M-Company (Director). (1992). *Pollution Prevention Pays (Vidoe Tape)* [Motion Picture].
- Blesch, G. (2007). Charges of a different kind. Providers say overzealous prosecutors are wrongly trying to transform poor medical judgment into criminal intent. *Modern Healthcare* , 37 (1), 6-7.
- Bookman, M. Z., & Bookman, K. R. (2007). *Medical Tourism in Developing Countries*. New York : Palgrave Macmillan .
- Brundtland, & WCED. (1987). *Our Common Future*. Oxford, GB: Oxford University Press.
- Cateora, R. P., & Graham, L. J. (2005). *International Market*. New York: McGraw-Hill Irwin.
- Christensen, C., Craig, T., & Hart, S. (2001). The Great Disruption. *Foreign Affairs* , 80 (2), 80-95.
- Cisco . (2011, 5). *Cisco Announces \$10 Million Investment to Support Sustainable Job Creation and Economic Development in Jordan*. Retrieved 7 20, 2011, from Cisco Technology News Site : <http://newsroom.cisco.com/press-release-content?type=webcontent&articleId=296130>
- Clark, C. (2011, February 24). *5 Ways Green Surgical Teams Save Hospitals Money*. Retrieved March 2011, 2011, from health leaders media: <http://www.healthleadersmedia.com/page-2/TEC-262991/5-Ways-Green-Surgical-Teams-Save-Hospitals-Money>
- Connell, J. (2006). Medical Tourism: Sea, Sun and...Surgery. *Tourism Management* , 27 (6), 1093-1100.
- Daft, R., & Armstrong, A. (2009). *Organization: Theory and Design*. Toronto: Nelson Education Ltd. .
- Daly, J. (2007). *Qualitative Methods for Family Studies and Human Development*. Guelph, Ontario, Canada: Sage.
- Deloitte Center for Health Solution . (2008). *Medical Tourism: Consumers in Search of Value*. Retrieved 9 19, 2011, from [www.deloitte.com/dtt/article](http://www.deloitte.com/dtt/article)
- Dubai-Healthcare-City. (2010). *About Us*. Retrieved 8 16, 2010, from Dubai Healthcare City: <http://www.dhcc.ae/about-us/>
- Dunn, P. (2007). Medical Tourism Takes Flight. *Hospitality and Health Networks* , 81 (11), 40-44.
- Ernst, E. (1995). Complementary medicine: common misconceptions. *Journal of The Royal Society of Medicine* , 88 (5), 244-247.
- Farrell, B. H. (1999). Conventional of Sustainable Tourism? No Room for Choice. *Tourism Management* , 20 (2), 189-91.
- Gahlinger, p. (2008). *The Medical Tourism Travel Guide: Your Complete Reference to Top-Quality, Low-Cost Dental, Cosmetic, Medical Care & Surgery Overseas*. *Sunrise River Press* .

- Garcia-Altes, M. (2005). The Development of Health Tourism Service. *Annals of Tourism Research* , 32 (1), 222-266.
- Garrod, B., & Fyall, A. (1998). Beyond the rhetoric of sustainable tourism. *Tourism Management* , 19 (3), 199-212.
- Ghazal, M. (2010). *Campaign Launched to Raise Awareness on Drivers of Change*. Retrieved 07 22, 2011, from The Jordan Times: <http://www.jordantimes.com/?news=26453>
- Gross, N. C. (2008). *The Medical Tourist*. Retrieved 7 19, 2011, from Hadassah Medical Organization : [http://www.hadassah.org.il/English/Eng\\_MainNavBar/News/Press+Clips/tourism.htm](http://www.hadassah.org.il/English/Eng_MainNavBar/News/Press+Clips/tourism.htm)
- Harryono, M., Huang, Y.-F., Miyazawa, K., & Sethaput, V. (2006). *Thailand Medical Tourism Cluster*. Thiland: Harvard Business School.
- Hart, S. L., & Milstein, M. B. (2003). Creating Sustainable Value. *Academy of Managment Excutive* , 17 (2), 56-69.
- Hazaimah, H. (2008, 9). *Jordan tops region as medical tourism hub*. Retrieved 7 19, 2011, from The Jordan Times : <http://www.jordantimes.com/?news=10589>
- Horowitz, M. D., & Rosensweig, J. A. (2007). Medical Tourism-Health Care in Global Economy. *Physician Executive* , 33 (6), 26.
- Hudson, S. (2009). *Marketing for Tourism and Hospitality: a Canadian Perspective* (2 ed.). United States: Nelson Education Ltd.
- Insurance Information Institute. (2007). *Medical Malpractice*. Retrieved 4 9, 2007, from [www.iii.org/media/hottopics/insurance/medicalmale/](http://www.iii.org/media/hottopics/insurance/medicalmale/)
- International Medical Travel Journal . (2008). *USA: greater trans*. Retrieved 9 19, 2008, from International Medical Tourism Journal : [www.imtjonline.com/news](http://www.imtjonline.com/news)
- Israel Ministry of Foreign Affairs . (1994). *ISRAEL-JORDAN PEACE TREATY*. Retrieved 7 20, 2011, from Israel Ministry of Foreign Affairs: <http://www.mfa.gov.il/MFA/Peace%20Process/Guide%20to%20the%20Peace%20Process/Israel-Jordan%20Peace%20Treaty>
- Jagyasi, P. (2009). Medical Tourism Blue. *Medical Tourism Magazine* , 310 (14).
- Jagyasi, P. (2009). South Africa: The Rising Star on Medical Tourism Horizon. *Medical Tourism Magazine* , 320 (14).
- Jamal, T., & Getz, D. (1995). Collaboration Theory and Community Tourism Planning. *Annals of Tourism Research* , 22 (1), 186-204.
- Joint Commission International. (2009). *Accreditation and Certification Process, Find Accredited Organization*. Retrieved 8 9, 2010, from Joint Commission International: <http://www.jointcommissioninternational.org/Accreditation-and-Certification-Process>



- Joppe, M. (1996). *Everything Must be Connected to Everything Else : An Ecotourism Approach to Tourism Development in Northumberland Country*. New York: John Wiley & Sons Inc.
- Jordan Tourism Board. (2010). *Major Attractions*. Retrieved 7 20, 2011, from Visit Jordan: <http://www.visitjordan.com/MajorAttractions/tabid/54/Default.aspx>
- Kim, H.-m., Leong, P., Heob, E., Anderson, B., & Gaitz, C. (2009). Medical Tourism from U.S. to Border Region of Mexico ~ Current Status and Future Prospects. *319* (14).
- King, C. (2009). The Myths Behind Medical Tourism. *Irish Medical Times* , *43* (17), 27.
- Kotler, P. (1984). *Marketing Management: Analysis, Planning, Implementation, and Control* (8 ed.). Upper Saddle, New Jersey , United States : Prentice Hall.
- Lambier, C. (2009). Health Care Clusters~ Building Medical Tourism Communities. *Medical Tourism Magazine* , *306* (14).
- Lee, C., & Spisto, M. (2007). Medical Tourism: The Future of Health Services . *12th international Conference on ISO 9000 and TQM*, (pp. 1-7). Taichung .
- Lincoln, Y., & Guba, E. (1985). *Naturalistic inquiry*. Newbury Park, Canada: Sage.
- Marlowe, J., & Sullivan, P. (2007). Medical Tourism: The Ultimate Outsourcing. *Uman Resource Planning* , *30* (2), 8.
- Matto, A., & Rathindran, R. (2005). Does Healthcare Insurance Impede Trade in Healthcare Services. *The World Bank* , *35*.
- McCool, F. S., & Lime, W. D. (2001). Tourism Carrying Capacity: Tempting Fantasy or Useful Reality. *Journal of Sustainable Tourism* , *9* (5), 88-372.
- Medical Tourism Magazine. (2010). Singapore~Destination Health: Outstanding Clinical Outcomes and World Class Patient Focused Care. *Medical Tourism Magazine* , *332* (16).
- Namrouga, H. (2011). *Kingdome's First Medical Treatment Plant to be Operational Soon*. Retrieved June 9, 2011, from The Jordan Times: <http://www.jordantimes.com/?news=25389>
- Namrouga, H. (2011). *Kingdome's First Medical Treatment Plant to be Operational Soon*. Retrieved 5 9, 2011, from The Jordan Times: <http://www.jordantimes.com/?news=25389>
- Nath, S. V. (2007). Global Medical Tourism: Dawn for a New Era. *Journal of IT Case and Application Research* , *9* (3), 1.
- Olson, I. (2010). *Thailand Law Forum* . Retrieved 8 4, 2011, from Fringe Medical Practices in Thailand: <http://www.thailawforum.com/medical-practices-thailand-stem-cell-cloning-cancer-sex-change.html>
- Palvia, S. (2007). Global Outsourcing of IT and IT Enabled Services: a Relationship Framework and Two Stage Model for Selecting a Vedor. *Ivy League Publishing* , 433-458.

- Pruess, A. E., & Rushbrook, G. P. (1999). *Safe Management of Wastes from Health-Care Activities*. Geneva : World Health Organization .
- Rabindra, S. (2006). *Medical Tourism: Hidden Dimensions*. Retrieved 8 6, 2011, from Express Hospitality: <http://www.expresshospitality.com/20060630/market08.shtml>
- Reisman, D. (2010). *Health Tourism: Social Welfare Through International Trade*. Cheltenham : Edward Eglar Publishing Limited .
- Royal Jordanian . (2009). *One World News*. Retrieved 7 20, 2011, from Royal Jordanian : <http://www.rj.com/en/tabid/349/Default.aspx>
- Rural Poverty Portal . (2009). *Rural Poverty in Jordan* . Retrieved 6 9, 2011, from <http://www.ruralpovertyportal.org/web/guest/country/home/tags/jordan>
- Smith, P. C., & Forgione, D. A. (2007). Global Outsourcing of Healthcare: a Medical Tourism Decision Model. *Journal of IT Case and Application Research* , 9 (3), 19.
- Stake, R. (1978). The Case Study Method in Social Inquiry. *Educational Researcher* , 7 (2), 5-7.
- Steiner, N. (2009). Israel's Pioneer in Medical Tourism. *Medical Tourism Magazine* , 316 (14).
- Steiner, N. (2010). Medical Care~Israel's Newest Tourism Attraction. 330 (16).
- Swick, H. M., Bryan, C. S., & Longo, L. D. (2006). Beyond the Physician Charter: Reflections on Medical Professionalism . 49 (2).
- Tasker, R. (2000). Thai Hospital. *Far Eastern Economic Review* , 163 (36), 38.
- Travel Document System (TDS). (2009). *Jordan Economy*. Retrieved 8 9, 2010, from Travel Document System: <http://www.traveldocs.com/jo/economy.htm>
- Tyrrel, T. J., & Jhnston, R. J. (2008). Tourism Sustainability, Resilience and Dynamic: Toward a more Comprehensive Perspective. *Tourism and Hospitality Research* , 8 (1), 14.
- United States Agency for International Development (USAID) . (2010). Your Smart Medical Destination . Amman, Jordan.
- US Environmental Protection Agency. (2011). *Medical Waste Tracking Act of 1988*. Retrieved September 15, 2011, from United States Environmental Protection Agency: <http://www.epa.gov/osw/nonhaz/industrial/medical/tracking.htm>
- Williams, C. A., & Aguilera, R. V. (2008). CORPORATE SOCIAL RESPONSIBILITY IN A COMPARATIVE. University of Illinois. Retrieved from University of Illinois .
- Wood, D. J. (1991). Corporate Social Performance Revisited. *The Academy of Management Review* , 16 (4), 691-718.

Zeithaml, A. V., & Bitner, J. M. (2000). *Services Marketing: Integrating Customer Focus Across the Firm*. New York: McGraw-Hill.

Zeithaml, V. A., & Bitner, M. J. (2000). *Services Marketing* (2 ed.). New York: McGraw Hill.

## Appendices

### Appendix A: Interview Questions

Who: Various stakeholders (physicians, professors, government employees, policy-makers, tourism agents, and facilitators)

How: In person or over the phone for 30 minutes

Outline of the semi-structured interview:

1. Introduction to my purpose of research and opportunity to answer any questions
2. Sign letters of consent
3. Interview

Introduction questions:

1. Please tell me about the organization you work for.
2. What is your role?

Can you tell me more about medical tourism?

3. Please tell me about any projects you have worked on for developing the medical tourism industry?
4. What were the motivations for taking on these projects?
  - a) Which was the highest motivation?
5. Were there any challenges or obstacles on your project?
  - a) Can you tell me more about this?

Jordan specific questions:

6. What is your overall impression of the medical tourism industry within Jordan?
7. What are the foundations that allow Jordan to host patients from outside the country?
8. Why medical tourism is considered as an important industry in Jordan?
9. What are the critical issues within the medical tourism industry?

Stakeholder questions:

10. Did you work with any partners or other organizations?
  - a) If so, can you tell me about their role(s).
    1. Government?
    2. Universities?
    3. Tourist operators?
    4. Medical professionals?
    5. Community groups?
    6. Anyone else?
11. Is there any current collaborative strategy between any of the organizations?
12. How can educational institutions motivate medical tourism industry in Jordan?

Impact questions:

13. Does medical tourism impact the public health facilities for Jordanian citizens?
- 14.
15. What kind of infrastructure is required for medical tourism projects?
- 16.
17. Does medical tourism impact the environment?
  - a) In which ways?
18. How do you think medical tourism be managed to protect the environmental attractions and enhance the quality of life for local community?
- 19.

Closing thoughts:

20. Do you think Jordan has a plan to increase its reputation in the global market as one of the best medical tourism destinations?
21. What do you think is the future of the medical tourism industry within Jordan?
22. Is there anything you'd like to add? Anything else I should consider?
23. Do you have any final questions for me?

Thank you

**Appendix B: Ethics Approval of Research Questions**

Dear Researcher:

The recommended revisions/additional information requested in the ethics review of your ORE application:

Title: Medical Tourism Network: a Framework For Establishing a Sustainable Medical Tourism Facility.  
ORE #: 16752

Faculty Supervisor: Dr. Amelia Clarke (amelia.clarke@uwaterloo.ca)

Student Investigator: Durgham Darwazeh ([ddarwaze@uwaterloo.ca](mailto:ddarwaze@uwaterloo.ca)) have been reviewed and are considered acceptable. As a result, your application now has received full ethics clearance.

A signed copy of the Notification of Full Ethics Clearance will be sent to the Principal Investigator or Faculty Supervisor in the case of student research.

\*\*\*\*\*

Note 1: This clearance is valid for four years from the date shown on the certificate and a new application must be submitted for on-going projects continuing beyond four years.

Note 2: This project must be conducted according to the application description and revised materials for which ethics clearance have been granted. All subsequent modifications to the protocol must receive prior ethics clearance through our office and must not begin until notification has been received.

Note 3: Researchers must submit a Progress Report on Continuing Human Research Projects (ORE Form 105) annually for all ongoing research projects. In addition, researchers must submit a Form 105 at the conclusion of the project if it continues for less than a year.

Note 4: Any events related to the procedures used that adversely affect participants must be reported immediately to the ORE using ORE Form 106.

Best wishes for success with this study.

-----  
Susanne Santi, M. Math.,  
Senior Manager  
Office of Research Ethics  
NH 1027  
519.888.4567 x 37163  
ssanti@uwaterloo.ca

## **Appendix C: Email for Potential Interviewees**

Dear Interviewee,

My name is Durgham Darwazeh and I am a Master's Candidate of Geography and Environmental Management Department at the University of Waterloo (UW) In Canada. I am working with Dr. Amelia Clarke from the UW Centre for Environment and Business in the School for Environment, Enterprise and Development (SEED). My research project is "Sustainable Medical Tourism: Case Studies of Medical Tourism Facilities in Jordan. The purpose of the study is to develop a theoretical sustainable framework based on sustainable medical tourism facilities.

I am looking for participants for the interview part of my research. I would like to ask you questions relating to your perspective on medical tourism development projects. And what are the foundations to develop a medical tourism destination in a sustainable way. The interview will take about 30 minutes to complete. All responses to this interview will be kept anonymous and participants will not be identified in my research unless permission is granted.

Please reply to this email to express your interest, and to schedule an interview. I will send you more information upon receiving your reply.

This project was reviewed and received ethics clearance through the Office of Research Ethics at the University of Waterloo.

Thank you very much for your consideration.

Sincerely,

Durgham Darwazeh.  
University of Waterloo  
Geography and Environmental Management Department

Faculty of Environment  
200 University Avenue West  
Waterloo ON N2L 3G1  
Canada  
Phone number: Canada +962-787-165220  
E-mai: ddarwaze@uwaterloo.ca

## **Appendix D: Email with Detail Information and Consent Form**

Date:

Dear (insert name of participant),

This letter is to inform you about an interview for a Master's research study at University of Waterloo. The interview will take about 30 minutes and is about Sustainable Medical Tourism in Jordan. The aim of this study is to identify the major factors that contribute simultaneously in developing a medical tourism facility, and to determine the crucial variables that play a primary role in affecting the medical tourism development process at a particular destination. In addition, this research will explore the engagement models between stakeholders in promoting a medical tourism facility. You will be asked about the development of medical tourism in Jordan, the major factors of improving a sustainable medical tourism destination, the engagement models that have been adopted by stakeholders to implement a sustainable medical tourism facility, and opinions about challenges, regulations and policies that have impacted the medical tourism industry in Jordan.

All responses to this interview will be kept anonymous and you will only be identified in my research as either a private sector developer or a public sector staff member, unless permission is granted for identification in a participant list in the thesis. You may decline to answer questions if you wish and you may withdraw from participation at any time by advising the researcher.

The interview can be held in person or over the phone. With your permission, I would like to record the interview to facilitate analysis of the results. Interview recordings and any other data will be kept in a secure location and will not be made available to anyone other than the two researchers, and will be deleted after a two year period.

Participation is voluntary. If you are willing to participate in this interview, please contact Durgham Darwazeh at +962-787-165220 or [ddarwaze@uwaterloo.ca](mailto:ddarwaze@uwaterloo.ca) to confirm your participation. In your reply, please indicate a time when you will be available and a place where it would be convenient for you (Eg. your office, etc).

I would like to assure you that this study has been reviewed and received ethics clearance through the Office of Research Ethics at the University of Waterloo. However, the final decision about participation is yours. Should you have any comments or concerns resulting from your participation in this study, please contact Dr. Susan Sykes in the Office of Research Ethics at +1 519-888-4567, Ext. 36005 or [ssykes@uwaterloo.ca](mailto:ssykes@uwaterloo.ca).

After all of the data have been analyzed, you will receive an executive summary of the research results.  
Thank you.

Durgham Darwazeh  
Master's Candidate of Geography and Environmental Management  
Faculty of Environment  
University of Waterloo  
Cell Phone: +962-787-165220  
[ddarwaze@uwaterloo.ca](mailto:ddarwaze@uwaterloo.ca)

Under the supervision of Dr. Amelia Clarke  
Centre for Environment and Business  
Faculty of Environment  
University of Waterloo  
Telephone: +1 519-888-4567 ext 38910  
Email: [acclarke@uwaterloo.ca](mailto:acclarke@uwaterloo.ca)

**Consent of Participant**

By signing this consent form, you are not waiving your legal rights or releasing the investigator(s) or involved institution(s) from their legal and professional responsibilities. For phone interviewers, please sign this form and fax or mail it to the researcher.

---

I have read the information presented in the information letter about a study being conducted by **Durgham Darwazeh** of the Department of Geography and Environmental Management at the University of Waterloo, under the supervision of Dr. Amelia Clarke. I have had the opportunity to ask any questions related to this study, to receive satisfactory answers to my questions, and any additional details I wanted. I am aware that I may withdraw from the study without penalty at any time by advising the researchers of this decision. I am aware that my comments will remain anonymous in the thesis or any publications.

This project has been reviewed by, and received ethics clearance through, the Office of Research Ethics at the University of Waterloo. I was informed that if I have any comments or concerns resulting from my participation in this study, I may contact the Director, Office of Research Ethics at +1-519-888-4567 Ext. 36005, or at [ssykes@uwaterloo.ca](mailto:ssykes@uwaterloo.ca).

With full knowledge of all foregoing, I agree, of my own free will, to participate in this study.

**Consent:**

- |  |  |
|--|--|
| I agree to participate in the study                          | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| May be included in a list of participants                    | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| I agree to the interview being audio recorded                | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| I would like a copy of the thesis once it has been completed |  |
| I agree to the use of anonymous quotations                   | Yes <input type="checkbox"/> No <input type="checkbox"/> |

---

Print Name

---

Dated at Waterloo, Ontario

---



## **Appendix E: Email Thanking Participants**

Date

Dear (*Insert Name of Participant*),

I would like to thank you for your participation in this study. As a reminder, the purpose of this study is to develop a theoretical sustainable framework based on sustainable medical tourism facilities in Jordan.

Please remember that any information pertaining to you as an individual participant will not contain any personal identifiers and you will only be identified as a list of participants. Once all the data are collected and analyzed for this project, I plan on sharing this information with the research community through seminars, conferences, presentations, and journal articles. If you are interested in receiving more information regarding the results of this study, or if you have any questions or concerns, please contact me at either the phone number or e-mail address listed at the bottom of the page. When the study is completed, I will send the summary to you. The study is expected to be completed by August 2011.

As with all University of Waterloo projects involving human participants, this project was reviewed by, and received ethics clearance through, the Office of Research Ethics at the University of Waterloo. Should you have any comments or concerns resulting from your participation in this study, please contact Dr. Susan Sykes in the Office of Research Ethics at +1-519-888-4567, Ext. 36005, or at [ssykes@uwaterloo.ca](mailto:ssykes@uwaterloo.ca)

Durgham Darwazeh  
University of Waterloo  
Geography and Environmental Management Department  
Faculty of Environment  
200 University Avenue West  
Waterloo ON N2L 3G1  
Canada  
Phone number: +962-787-165220  
E-mail: [ddarwaze@uwaterloo.ca](mailto:ddarwaze@uwaterloo.ca)

Under the supervision of Dr. Amelia Clarke  
Centre for Environment and Business  
Faculty of Environment  
University of Waterloo  
Telephone: +1 519-888-4567 ext 38910  
Email: [acclarke@uwaterloo.ca](mailto:acclarke@uwaterloo.ca)  
<http://www.env.uwaterloo.ca/business/>