

## Building brand awareness in the medical travel market

APOSTU IULIA-MARIA

### Abstract

*The research work has as objective to determine the factors that contribute to the construction of the e-Reputation of a medical tourism business. The research tries to propose to medical facilitators methods and in particular Web marketing strategies, to help improve the ergonomics and the effectiveness of their web sites in order to meet the expectations of potential patients (medical tourists). The first part of the thesis exposes fundamental theories on medical tourism, its history and the issues it represents, the segmentation of the world market and the flow of patients to different destinations, the role of the medical facilitator in the patient experience, the internet and e-Reputation. The second part is based on a research with a twofold objective: on the one hand determining the motivations of medical tourists and the information they need in order to be reassured to seek treatment abroad. On the other hand, to determine which is the best approach used by the medical facilitators to meet the needs of these tourists and understand how they can build their image on the Internet (e-Reputation). The results of the analysis will help formulate marketing messages to meet the needs of the new patterns of medical tourists, who are now Internet users.*

**Keywords:** *Smedical tourism, e-reputation, brand, motivation, medical facilitator*

**JEL classification:** M31 Marketing

### 1. Introduction

With the growing trend of travelling outside the country to have access to medical services, often referred to as “medical tourism”, medical facilitators are faced to challenges, as the problem of attracting foreign patients who seek treatment in the destinations that they promote. Marketing has the key role to convince and get patients to trust the foreign healthcare systems and hospitals. The internet is now the main source of tourist information and medical facilitators realized the key role they play in their activity. With the growth of the power of the Internet, I find that knowing how to manage its reputation on the internet is extremely important, especially when talking about the fragile medical tourism activity.

Medical tourism, defined as the fact of leaving his main residence (country of origin) for the main reason of being treated, is not a new phenomenon; it exists since Antiquity, when it was linked to the quality of the thermal waters: the pilgrims were travelling around Greece to take advantage of the virtues of the thermal waters. Today, the growth of medical tourism is not anymore bound to spas, but to differences in cost of care depending on the country and the length of the waiting lists for some interventions<sup>1</sup>.

Before, only the richest people in the world, anxious to receive the best care, had the luxury to be treated away from their homes. Today, this form of medical tourism is about to be supplanted by another, which pushes patients with little money to seek good care abroad that is cheaper than in their own country<sup>2</sup>. This raises the question on migration flows of patients, because with the globalization and the standardization of the rules in the European Union, we observe today reciprocal changes between North and South, on one hand and West - East flows, on the other hand. At the global level, the medical tourism market is organized by country segmentation: Hungary, Poland and Romania are champions in dental surgery, while India specializes in heart surgery and Thailand in cosmetic surgery.

With the growth of Internet use, it is likely that the phenomenon of medical tourism is just at its beginnings. This type of approach will become more and more natural: patients who are looking for care are consumers increasingly accustomed, via the Internet, to have an eye on the world and go where the offer is attractive. It is to this cause that the professionals from the world of medical tourism should be brought to think about how to create and manage their image/reputation on the Internet, how to position themselves to meet the challenges that these new behaviors will raise.

## **2. Literature review**

Medical tourism has experienced several definitions, but the easiest is “the process to leave their country of residence for treatment elsewhere (in a foreign country)”. Medical tourism does not refer to the fact that someone needs emergency care when abroad, because the key is the intention: the patient must actually intend to go elsewhere for care. Engage in tourism activities such as the recovery in a hotel is part of the experience of medical tourism. Indeed, there is no consensus on the proposed definitions. Medical tourism refers to a multitude of health care, ranging from heavy surgery to wellness care, and even acts related to artificial procreation developed in some countries.

---

<sup>1</sup> Tourisme médical, Cahier Espaces n° 106, Septembre 2010

<sup>2</sup> Nicolas Brun, Xavier Deau et Jean-Luc Roffé, « Tourisme médical : la médecine low cost », Médecins. Magazine de l'Ordre national des médecins, 2008.

If we look at the literature of specialty, the authors used several forms to refer to tourists who travel to get treatment abroad. Loïck and William Menvielle use the term ‘tourist-patient’, a neologism they created, and which refers to a patient requiring surgery, more or less important, and eager to go abroad to receive care<sup>3</sup>.

Medical tourism is necessarily linked to the history of civilization with which it shares many points in common. Today there is more and more significant growth of this phenomenon, popularity explained by the increase in the cost of care in the industrialized countries, while that it is ridiculously low in the developing countries. This helps the healthcare to become competitive at the global level. In a second time, with the rapid increase of medical technologies, patients no longer have to fear of going to seek treatment abroad<sup>4</sup>. Thirdly, through medical tourism, patients from countries such as the United States, the Canada or the United Kingdom, where waiting lists are very long, can have access to healthcare immediately. Fourthly, the acceleration and the democratization of the means of communication allow clinics to market their offerings outside their country of residence, through their web sites.

However, the field of medical tourism is increasingly becoming a subject to examination and debate, because of concerns about ethical and regulatory issues or general health issues. If we think that for years, medical systems, like that of India, were perceived by Westerners as inadequate, now things have changed and India is positioned as a specialist in heart surgery. Increasingly, patients are beginning to change their image about exotic destinations, such as Thailand (known for sex-change operations), Brazil (known for cosmetic surgery), and Bulgaria (known for dental care). However, ethical issues arise about fairness, if we think of the vast majority of citizens, who live in developing countries where medical tourism grows, who have generally not, themselves, access to the most „ordinary” care. For example, “India is now ready to heal the world, but the majority of its population remain at the rear of the queue”<sup>5</sup>.

Today, there is a logic of specialization by countries or regions. Thus, we can identify throughout the world, different specific areas in South America, Eastern Europe, North Africa or South Africa and Southeast Asia. We can therefore speak of the so-called “branding of the destination”: some countries on the world stage were distinguished from others by offering a specialized offer in surgery or healthcare. Then, countries of the Eastern Europe, such as Poland, Hungary, Romania or Czech Republic propose a variety of clinics and dental offices that offer very competitive

---

<sup>3</sup> Loïck Menvielle et William Menvielle, « Le tourisme médical – une nouvelle façon de voyager », *Téoros*, vol. 29, 2010

<sup>4</sup> Catherine Le Borgne, « Le tourisme médical : une nouvelle façon de se soigner », *Les Tribunes de la Santé*, 15(2), 2007

<sup>5</sup> John Connell, « Medical tourism : Sea, sun, sand and ... surgery », *Tourism Management* 27 (2006), 1093-1100

services. “Belgium has other assets on hand, including a very competitive offer of retirement homes for elderly and dependent and home for autistic children, two rare foodstuffs including centers in our country. Spain attracts customers for dental care, offering - always in Alicante - poses of implants at lower rates at half of the price of those charged in France.”<sup>6</sup> Around the Mediterranean basin, Tunisia specializes in cosmetic surgery. Southeast Asia (and particularly India) will appear as a leader on the global market of medical tourism. Latin America turns to the surgery of comfort such as plastic, dental surgery or general care analyses and health check-ups.

Outside of the medical facility itself, the most usual provider of arrangements and accompanying support services is a new member of the tourism profession, called a “medical tourism facilitator”. This facilitator may be located in either the traveler’s home country or the host country, and firms offering these services have arisen across the globe<sup>7</sup>.

In order for the medical tourism industry to flourish, the international promotion of its services is needed. Marketing materials, such as websites or brochures, inform patients about potential tourism opportunities or treatment options. Facilitators / medical tourism agents in the countries of origin of the patients, in countries of destination and in third countries are doing the promotion. These agents often specialize exclusively in medical tourism and help patients interested in selecting hospitals abroad, visa applications and other documents, and sometimes also with the organization of the follow-up care at home. Normally, these agencies work with websites, which are translated into several languages (depending on the audience they address) and suggest the presence of a staff member speaking the language of the patient during care in the host country. There are specialized operators who offer luxury packages and special care at attractive prices. They position themselves as advisors and not as health travel agents: they help customers find the best health care according to their needs and requirements, with “all inclusive” packages<sup>8</sup>.

**The main role of a medical facilitator is to provide the customer a very positive medical trip experience.**

William and Loïck Menvielle conducted a study<sup>9</sup> of 235 websites specializing in medical tourism having as purpose the evaluation of business strategies used by clinics and medical facilitators. They offer “all inclusive” packages (surgery and

---

<sup>6</sup> Catherine Le Borgne, « Le tourisme médical : une nouvelle façon de se soigner », Les Tribunes de la santé, 15(2), pp. 47-53, 2007

<sup>7</sup> Dan Cormany, Seyhmus Baloglu, « Medical travel facilitator websites : An exploratory study of web page contents and services offered to the prospective medical tourist » *Tourism Management* 32 (2011) 709-716

<sup>8</sup> Medical Tourism Association, « Workbook : Certified Medical Tourism Professional »

<sup>9</sup> « Se faire soigner à l'étranger : le Web au service du tourisme médical », Université du Québec à Trois-Rivières.

holidays) to their customers. The findings of the researcher, the vast majority of identified websites offer an ergonomic interface, facilitating the identification and navigation. "In 84% of cases, the sites provide general information about the services offered by the institution. A small lot (8%) even shows television reports. Nearly three quarters of the sites offer a platform of expression to customers, by heading comments and complaints. A large proportion of sites also provide Internet users with tools to communicate with the service provider. Some companies also offer free discussion sites to tourists-patients." They also found that some clinics compare their prices to those offered elsewhere in the world and make promotional discounts. About half of the analyzed clinical sites display pictures inside or outside of the institution or photos with the medical team. They found that the specifics of the hotel infrastructure are less presented on websites, because clinics emphasize more on the medical aspect of their services. The authors also recommend that medical tourism companies must develop websites culturally appropriate Internet, "which would be an improvement track interesting from a marketing perspective".

### **3. Empirical study: the exploration of the services offered by medical facilitators platforms and how they built their image on internet**

#### **3.1. Aims**

The research tries to offer to medical facilitators methods and in particular Web marketing strategies to help improve the usability and effectiveness of their websites in order to meet the expectations of potential patients (medical tourists). The study has two objectives:

- a – on one hand to determine the motivations of medical tourists and information they need to be reassured to seek treatment abroad
- b – on the other hand to determine what is the best approach used by medical facilitators to meet the needs of tourists and how they can build their image on the Internet (e-reputation).

#### **3.2. Hypothesis**

The internet plays a central role in the business of the medical facilitators, as it has become the primary source of information. Potential patients are now users who not only seek information on the Internet, but also influence the image of the company. Doing marketing for the international patient, in the world of medical tourism is not obvious. Finding how to manage the reputation of a brand to convince patients to seek treatment in another country, and without being too oppressive, is essential. Potential customers (medical tourists) need to be reassured to trust medical facilitators to organize their medical stay abroad. They will want to find interactive web sites, secure platforms and patient testimonials.

### 3.3. Methodology

#### 3.3.1. Quantitative analysis

Initially, we have chosen to undertake a quantitative analysis. The main instrument for this research will be a survey addressed to a personal target. According to Malhotra, there are four major methods of applying a questionnaire: the telephone survey, face to face, by mail or Internet. We can collect data over the Internet by two different directions: by e-mail or using a Web site. Because the method of the attached questionnaire to an email underlies for vulnerabilities regarding the diffusion process and the return rate of the survey, we selected the administration of the questionnaire on a website. We used an online form designed with Google Docs. A sample consisting of a personal target was chosen because this is the way to get quick answers. The questionnaire includes questions about the motivations of medical tourists to seek treatment abroad and the information they need to trust the medical tourism. Most responses will be codified and measured by Likert scales.

#### 3.3.2. Qualitative analysis

Secondly, the qualitative study will be conducted toward professionals and experts in the sector of medical travel. Thus, we prepared interviews with medical facilitators. We were able to get interviews with a French medical facilitator and a Romanian one. The qualitative study's role is to deepen our knowledge on the issues of medical tourism activity and its online presence. The interview guide used to conduct this exploratory phase of the study was structured around six main steps: - The introductory phase is intended to assess the perception of medical tourism company on the medical system of the country where it operates and also the positioning it wants to promote about its customers; - The second phase is the company's reputation management - Thirdly, we discussed the online presence of the company of medical tourism - The fourth phase is dedicated to the role of the community manager in the company of medical tourism - The fifth phase evokes the online community - Finally, the last part is intended to ethics and social responsibility in medical tourism sector.

### 3.4. The query stage

Most respondents live in Romania (52%) and France (34%) and 5% are Dutch. The others live in Austria, Pakistan, United Arab Emirates or in Nepal.

Regarding the age of the respondents, 42% are between 25 and 39 years and another large category were under age 25 (32%). 60% of respondents were women and 40% men.

We consider that the answers are relevant, because 49% of those interviewed said they have already thought about traveling abroad for medical care. For those

who have not yet thought about medical tourism actions must be taken to educate and persuade them.

Initially, we studied the factors for which people will want to choose a country as a destination for medical tourism. When it comes to motivation, a Likert scale was used to analyze the results. The data was then analyzed and aggregated around the overall average. The factor with the highest average is the professionalism of the doctors and dentists (4.88), followed by the quality of clinics and hospitals (4.73). The factors with the lowest average are “similar cultures and beliefs” (with 2.62), the availability of flights (3.49) and customized accommodation (3.55). That is to say, people seek qualitative medical services, and they are even willing to travel to remote locations, without the same culture or without the availability of flights or tailor-made accommodation. At first it was thought that waiting lists were also a deciding factor for some people. But that factor has obtained a relatively low average (3.99), demonstrating that the interviewees do not necessarily seek to have immediate access to care. This is perhaps related to the culture of the respondents.

Regarding the organization of the medical travel, 61% of respondents said they would organize it themselves, directly with the clinic and the hotel, and 34% said they would appeal to a tourist agency medical to look after. Only 2 people (Romanians) responded that their employer will probably organize the medical trip, a fact that is supported by the nationality of the respondents (the self-funded companies are more common in the US).

All the factors that count in the relationship between people and medical tourism agency obtained a high average (over 4). The professionalism of the staff (4.66) and understanding of staff to their needs are the most important (4.65) for future patients. So, medical facilitators must be all the time listening to their patients, to reassure them and show that they are professionals and that the safety of their patients is the most important. The treatment of all issues, communication, and responsiveness to questions also received a very high average. On the other side, the technology they use to connect patients and doctors scored the lowest average: 5% of respondents said that this factor is not at all important or not important, while 18% gave a neutral importance to this factor.

The respondents consider that the most important factor in deciding to seek care abroad is that their treatment is only available abroad. They could also choose it because of the existing nosocomial infections in hospitals in their countries. The long waiting lists are also a factor which may contribute to the decision of medical treatment abroad. The least important factors influencing respondents to seek care abroad is that they wish to have treatment without their families knowing it (74% of respondents said that this factor is not important) and the association of treatment with holidays (only 16% of respondents concluded that this factor is important).

We considered some important factors that influence the choice of the medical facilitator, hospital, clinic, doctor or dentist abroad and we asked respondents to indicate the importance of each factor. Thus, it was found that people choose their doctor abroad because of his professionalism and his reputation (it is the factor with the largest average - 4.84). It is considered that medical facilitators should emphasize the quality of the doctors, their biographies, and their experience. The quality of health facilities received the second highest average (4.78), as well as certification of the clinic/hospital (4.44). Medical facilitators must educate prospective patients on this aspect too. The website of the medical facilitator, reviews and comments on the internet and the ability of people to speak the patient's language got the lowest average. Which is explained by the fact that only 34% of respondents said they will contact a medical tourism agency to arrange their medical trip abroad.

There are 61% who will recommend to a friend or someone in the family to seek treatment abroad. But this score is not important enough, relative to the fact that only 21% consider that the recommendation of a friend is very important.

The channels the most used to obtain information on medical tourism are the Internet and friends/relatives of the family. 66% of respondents reported that the channel they use the most often is the Internet. Therefore, medical facilitators must be present on the internet and not only manage a website. They must be attentive to their potential patients, communicate and educate them on the benefits of medical tourism, quality of care and professionalism of doctors. They must facilitate social networking and answer any question/need of the potential patient.

35% of respondents are more reassured if medical facilitators have accreditations and 29% of respondents need testimonies of patients to trust medical tourism facilitator. Other 21% need prior experience to trust in medical tourism, which means that medical facilitators should maintain a close relationship with the medical tourist, even if his medical experience is over.

The overall quality of the services offered by the medical facilitator is the most important factor that generates a good image of the company. As seen before, accreditations obtained by the company are also important from the potential patient's perspective. The third most important factor is communication and interaction on social networks, a fact which confirms again our hypothesis.

### **3.5. The interview stage**

We interviewed two professionals from the medical tourism world: a French medical facilitator and a Romanian one. The purpose of these interviews is to determine the role that Internet plays in their business. We chose the same questions



for both actors, because I would like to review responses from the cultural point of view too.

The interviews were structured into 6 different themes:

- The company's image
- Corporate reputation
- Internet presence
- The community manager and its role in a medical tourism company
- Online community
- Ethics and social responsibility

Results of the interviews

The two actors do not have quite the same activity. Surgery France is a medical facilitator, who handles flows of patients who come to France for surgery or their medical treatment (INBOUND Medical Tourism). As for Bbook, they are a business travel agency, which also deal with flows of tourists that go abroad (OUTBOUND) but also flows of incoming tourists (INBOUND).

Both players would like to position themselves as partners of trust, representing medical excellence. The quality, accessibility, transparency, confidentiality and accountability are the major points promoted by the two professionals.

The 2 companies differentiate from their competitors because they are among the only companies that offer medical tourism services in their countries. As for France Surgery, they are the only ones who represent so many clinics; they know very well the French healthcare system, because they have personal relationships with French surgeons, enabling them to generate greater trust. Bbook realized the extent of medical tourism in the world and especially the importance that medical tourism could have for Romanian tourists. The healthcare system in Romania is still not reformed. In the recent years, there has been investment in the private system. Several private clinics that offer similar services to European standards have been

built all over the Romanian territory. But the public healthcare system is still ill and patients have trouble trusting it.

When talking about reputation, the two actors interact differently. Although both want to deploy a high end reputation, France Surgery uses a different argument in B2B from that of B2C. As they seek to deploy B2B partnerships with structures that will have the same communication strategy and the same quality level as them. They use social networks to the destination of patients to reassure them, to guide them step by step in order to have a process which is consistent with their image, but also to the destination of partners to provide the tools to better sell their services to maintain the reputation. On the other hand, Bbook doesn't think the reputation management must be done differently in the B2B than in B2C. Ways to control their reputation would be: the way they respond to all complaints, the customer feedback.

Both actors recognize the importance of the Web in their business. As both of them are small structures, the Internet easily allows them to have a larger presence in the world that can touch many customers, that is very economically in time and budget. The priority is to be present on all social networks and all the forums that can be interesting for them.

France Surgery and Bbook think to dedicate someone from their team to community management. The two believe that the key role of a community manager is to be present on all the social networks, to interfere and participate in conversations. Bbook highlights the creation of content for social networks by the community manager (his EDITORIAL ability), as France Surgery highlights its adaptability to change, to the new tools and to be always on the lookout for what will be new either in terms of tools or in terms of communities. A community manager is someone who will help develop the brand visibility on the Internet. It will have to develop strategies and goals for community. The two talked about the analytical capacity of the community manager and customer support (respond to comments, manage conflicting relations, to reverse the situation. Even if there are negative comments, somewhat aggressive, you have to get the situation at the company's benefit).

Regarding the patient approach, the 2 companies consider that the best way is to be advisors, not salespeople. The two believe in offering customized services for each client and this cannot be done unless the communication reflects the feeling advice, the presence, and the patient and not to force him to make a decision.

The 2 players see ethical questions a little different, thanks to their culture. France Surgery focuses on French professionalism and the quality of medical services (they do not want to be confused with a company that offers low cost medicine). Bbook thinks the biggest risk is the confidentiality of medical data, while in Romania data security is not always guaranteed. They also think that in terms of social responsibility, medical tourism offers many opportunities to increase online reputation through affiliation with various social causes.

#### **4. Conclusions and Recommendations**

The purpose of this research was to understand and analyze the factors that contribute to the construction of the e-reputation of a medical tourism company. The study was conducted by two main approaches: from the point of view of the final consumer and from the point of view of professionals (medical facilitators).

The study has two objectives:

a – on one hand to determine the motivations of medical tourists and information they need to be reassured to seek treatment abroad

b – on the other hand to determine what is the best approach used by medical facilitators to meet the needs of tourists and how they can build their image on the Internet (e-reputation).

The research has provided results that support this goal. Data analysis showed that the most important motivational factors to choose a country as a medical tourism destination refer to the quality of medical services (doctors professionalism, quality and reputation of the clinics and hospitals), and the respondents are willing to travel even in remote locations, without the same culture or without availability of flights or tailor-made accommodation. That is to say, to build their online reputation, medical facilitators must position on medical destinations promoting quality.

Regarding the relationship between the medical facilitator and people, staff professionalism and understanding of people's needs are the most important for future patients. So, medical facilitators must be all the time listening to their patients, to reassure them, to have a sense of relationship and communication, but without being too abusive.

The decision to seek treatment abroad is supported by the fact that medical treatment is only available abroad, the risk of nosocomial infections and too long waiting lists in the country of residence. This fact is supported by the country of residence of respondents, taking into account that 52% of respondents live in Romania.

The most important result that came out of the research is that the Internet is the most frequently used channel for people to learn about medical tourism. Therefore, medical facilitators must be present on all the digital communication

channels and all the forums that may be interesting for communicating in both B2C as well as B2B. They must create a relationship of trust with their patients and maintain the relationship with the patient, even if his medical experience is over. Potential customers need testimonies of previous patients to trust the medical tourism facilitator and they are more reassured if medical facilitators possess accreditations.

Following the results of quantitative and qualitative analysis, we recommend to medical facilitators to adapt their websites to cultural particularities of internet users. In addition, integrate a secure platform that enables virtual consultation with patients will help patients to trust in the services offered by the medical facilitators. The website must have a user-friendly interface, easy navigation, so potential customers arrive more easily to the desired information.

## 5. References

- Al Hamarneh, A., « Tourisme médical arabe en Allemagne », *Tourisme islamique*, no 21 janvier-février 2006
- Bernard, S., « L'effet de la communication socialement responsable sur la réputation de l'entreprise », Université de Toulouse, 2009
- Brun, N., Deau X., Roffé, J.-L., « Tourisme médical : la médecine low cost », *Médecins. Magazine de l'Ordre national des médecins*, 2008.
- Chuang, T.C., Liu, J.S., Lu, L.Y.Y, Lee, Y., « The main paths of medical tourism : From transportation to beautification », *Tourism Management* 45 (2014) 49-58
- Connell, J., « Medical tourism : Sea, sun, sand and...surgery », *Tourism Management* 27 (2006) 1093-1100
- Connel, J., « Contemporary medical tourism : Conceptualisation, culture and commodification », *Tourism Management* 34 (2013) 1-13
- Cormany, D., (2011), « Medical travel facilitator websites : An exploratory study of web page contents and services offered to the prospective medical tourist », *Tourism Management* 32 (2011)
- Cote, J., « Mobilize your customers » Vipernet, 2012
- Crooks, V. A., Turner, L., Snyder, J., Johnston, R., Kingsbury, P., « Promoting medical tourism to India : Messages, images, and the marketing of international patient travel », *Social Science and Medicine* 72 (2011) 726-732 48
- Decaudin, J.-M., Digout, J., Fueyo, C., « e-Réputation des marques, des produits et des dirigeants », Vuibert, 2013
- Dodds, D., « A positive Brand Identity Turns Consumers Into „Frands »
- Ellesseily, M., « 5 Easy Steps to Build Your Online Brand »
- Hall, M.C., « Medical Tourism : The Ethics, Regulation and Marketing of Health Mobility », Ed. Routledge (2013), Book Review
- Le Borgne, C., « Le tourisme médical : une nouvelle façon de se soigner », *Les Tribunes de la Santé*, 15(2), 2007

- Medical Tourism Association, « Workbook : Certified Medical Tourism Professional »
- Menvielle, W. et L., « Se faire soigner à l'étranger : le Web au service du tourisme médical », Université du Québec à Trois-Rivières
- Menvielle, W. et L., « Le tourisme médical, une nouvelle façon de voyager », *Téoros*, 29-1 (2010)
- Stackpole, I., « Medical Tourism Marketing : The basics for growing your business », 2009
- Selin, C., Duhot, P., « E-réputation, le livre blanc », 12 juin 2008