

## Medical Tourism in Davao City

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**ABSTRACT.** The aim of this study was to determine the perception of the tourism stakeholders towards medical tourism as well as the factors influencing the development of medical tourism in Davao City. A qualitative research method was adopted to collect data from representatives of Department of Tourism Region XI, Davao Doctors Hospital, Ricardo Limso Medical Center, City Tourism members, Locals, Educators and Medical tourists. The results revealed the in terms of services respondents' perceived that it is existing and effective. They attest its effectivity through patronizing cosmetic product and appreciating prices of the product. On the other hand, In terms of benefits, respondents believe that medical tourism benefits are indeed helpful. The respondents thought that these benefits are visible especially in the economic growth of the City. In terms of Challenges, the respondents perceived challenges as factor that needs to be considered for it affects medical tourism as a whole. A number of respondents emphasized the lack of promotion as the major challenge in pushing medical tourism in Davao City. In terms of future development, respondents' perceived future development as something that should be implemented for the betterment of medical tourism in Davao City.

Keywords: *Tourism, Medical Tourism, Perception, Tourism Stakeholders*

### INTRODUCTION

Medical tourism is obviously becoming popular, and it has been said that as of 2007 there are approximately 750,000 Americans who seek offshore medical care (Horowitz, 2007). The citizens of many countries tend to seek the proficiency and high technology available in the United States and on leading medical centers in Europe. Recently, a craze known as medical tourism has boomed wherein citizens of highly developed nations choose to bypass care offered in their own communities and travel to less developed areas of the world to acquire a wide variety of medical services.

In addition, Carrera & Bridges (2006) said that seeking certification from international accreditation agencies such as the Joint Commission International and the British Standards Institute has always been an issue. Medical treatment from abroad interrupts the continuum of care, which can have serious implications not just for the patient, but also the local healthcare system. It is necessary to ensure the positive outcome of any treatment, not least since complications and side effects and postoperative care become the responsibility of the patient's local healthcare system, which can defeat the cost-saving rationale for seeking care abroad.

Meanwhile, in the Philippines, the Joint Commission International (JCI), the most prestigious healthcare accrediting organization in the United States has accredited St. Luke's Hospital, the Medical City, and Chong Hua Hospital. Some of the specialties that the Philippines currently offers are surgical treatment, dentistry, and wellness activities. However, incompetent infrastructures, limited resources on health and tourism facilities, and high cost of traveling to the Philippines are some of the problems that the country is facing. Despite Philippine Airlines receiving category one status in the U.S. and Europe, the quality of the airports is still lagging years behind its regional counterparts (Tiongson, 2014).

The researchers, as tourism students, observed that there is no enough facilities and equipment that would cater medical tourism in Davao City. With these underlying concerns they would like to examine the perception of Davao Tourism Stakeholders towards Medical Tourism.

The purpose of this study was to determine the perception of the tourism stakeholders towards medical tourism. More specifically, it sought to answer the following questions: What is the perception of the Davao Tourism Stakeholders towards medical tourism in terms of Services, Benefits, Challenges; and Future development?

## **REVIEW OF RELATED LITERATURE**

### **Services**

Medical Tourism activity is a newly discovered type of tourism and an international and political-economic phenomenon, which is growing fast in the world, especially in Asian countries. The private clinic Go Sculptura, provides all medical services (ranging from plastic surgery, fertility treatments, and gastric bypass surgery) abroad. Furthermore, a report published by Herrick (2007) substantiates that a group of private insurance companies are providing insurance policies that compensate medical tourists in the event of malpractice, where some of these insurance claims are administered by independent, Canadian-based firms. Moreover, Turner (2007) has identified an additional 15 companies that arrange medical tourism vacation packages in some parts of Canada. In some aspects, these businesses provide services that are somehow similar to the services offered by travel agencies specializing in traditional "holiday travel".

Moreover, as stated by Euromonitor (2015), tourism trends vary destination by destination. Yet, feeling happier, better rested, closer to the family, less stressed and more relaxed are said to be the main essence of travel experience. Consequently, Deanlex (2001) mentioned that World Health Organization defines health "as a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity." In addition, Health and wellness tourism provides the medical tourists and/or their companions with the opportunity to visit the top tourist attractions in the region and enjoy the interesting tourism trips during the treatment journey (Abdulaziz, 2002).

Consequently, the categories and availability of different treatments are also considered to represent an important factor in decision making whether to

engage in medical tourism. Some of the common types of procedures that most patients undergo during medical tourism trips are dentistry, elective cosmetic surgery, cardiac surgery, organ transplantation and orthopedic surgery (Mestrovic, 2014). However, an extensive variety of services can be obtained via medical tourism, ranging from various essential treatments to different kinds of standard and auxiliary treatments. Reproductive tourism and reproductive outsourcing are becoming increasingly popular, which is the practice of traveling abroad to engage in surrogate pregnancy, in vitro fertilization and other assisted reproductive technology methods.

Moreover, access is also a major factor responsible for the increase of medical tourism. The lack of it, either due to the unavailability of the technology or the prohibition in the home country, can subsequently lead to medical tourism. The common examples are cytoplasmic transfer or stem cell therapy (Mestrovic, 2014).

Consequently, Tourism and treatment go hand in hand since the average human is always eager to experience the inexperienced. Medical tourism in destinations like Brazil, Costa Rica, and Turkey will continue to grow as long as patients are interested in visiting exotic, picturesque and historical destinations while out for treatment. There are so many ways to attract patients to unwind during the stressful postoperative period, visiting Brazil's famous tourist attractions like the sheer number of beautiful beaches, carnivals, and the glorious Amazon rainforests is no exemption (Medhalt, 2016). In addition, tourism activities intensified in areas where tourism can be promoted as a product to improve economic conditions, particularly among marginalized communities from the mainstream of development (Panji, 2015).

### **Benefits**

Today, many countries with regards to human beings need for health have developed medical industry as a source of massive income in relation to tourism. Increasing 20% in admission to foreign patients in American hospitals confirms this matter (Kim et al., 2009).

In relation, the elites of developed countries undertaking abroad for medical care is no longer a new occurrence. For this social group, the practice of medical care offshore is part of a standard design of intake of foreign commodities and services, which in turn possibly cannot be observed. Medical tourism has been promoted by many countries around the world due to the fact that the idea produces these countries many benefits. Consequently, medical tourism is not just practical but also the economic approach for people to savor their trip and obtain medical treatment within the very same time. Tourism, combined with the phrase medical, seems to be a current form of tourism which has gained wide popularity in recent years (Danell and Mugomba 2006). This is due to multiple reasons such as; the increased demand for better healthcare (Paffhausen et al. 2010), higher healthcare costs in the US and many countries in Europe (Sarwar 2012) and the tough visa regulations imposed by the US and many European countries due to the 9/11 incident (Smith 2007). Hence, many countries around

the world have started promoting medical tourism to gain from this emerging market (Caballero and Mugomba 2006).

According to the study of Mitchell & Ashley (2010), chain effects as a result of activity involved, whether directly or indirectly; particularly transport, hotel and food were also able to generate higher income and higher job to many (Nowak et al., 2003). On the other hand, the impacts of medical tourism on local residents are mixed, highlighting the existence of negative and positive things experienced by the community. However, the positive impact is high, especially in terms of economic and social benefits (Kwon & Vogt, 2010), preservation and appreciation of culture makes it an important tool to be considered as a part of choice for the development of this community. The need for better healthcare has grown significantly in recent years. Health tourism is making its way to the market. The IUTO (1973) stated that health tourism is the provision of health facilities using the natural resources of the country, mineral water and climate in particular. In Romania, over 160 localities benefit from therapeutic mineral resources, of which more than 27% were said to be national or local tourist resorts (Pilzer, 2014). More likely, North Cyprus has becoming known as health tourism destination. World Healthcare Tourism Development Council, visited the booth of NEU Hospital, which attracted intensive interest during EMITT, and stated that health tourism with its current infrastructure and human sources emerged as a high value added sector which could provide significant inputs and contribute to the development of a sustainable economy (Cakmak, 2016).

In this rapidly growing consumer-oriented health industry, quality has become fundamental. Surely, no business can survive without providing quality services. Bookman (2007) stated that most people from developed nations are traveling to less developed countries because of less expensive but high quality medical care. Understanding of the customer's requirements has become necessary as this helps the practitioners in developing new approaches to provide improved service quality (Sohail, 2003). Thus, delivering quality services to the customers is needed in order to meet customers' expectation (Parasuraman et. al, 1988).

According to Herrick (2007), one of the drivers for medical tourism is price because remedy may often be available locally within the private sector, but at more expensive cost. There are disputations that some medical systems are inefficient and face restrictive barriers to entry. A development such as medical tourism can potentially exert competitive pressure on systems importing health care and help drive down the costs and prices offered in local systems. Medical tourism may encourage economies to maximize their comparative advantage in labor costs, technology and/or capacity. In general, medical tourism is the act of going offshore to obtain medical, cosmetic or dental treatment in another country. Medical tourism is also regarded as Health Tourism, Medical Travel or Global Healthcare. Even though medical tourism is about obtaining medical care, another benefit of medical tourism is the opportunity to travel to another country. For some medical tourists, especially those seeking dental care, cosmetic care or wellness treatments, these can enjoy the chance to travel overseas in addition to receiving less expensive health treatment.

As mentioned previously, types and availability of various types of treatments are also an important factor in selection of medical tourism. Medical tourism is

considered as a procedure that is routinely covered by health care benefits (e.g., knee replacement surgery) and elective cosmetic surgery (e.g., abdominoplasty), which includes unique travel opportunities (e.g., surgical safari), or cosmetic dentistry and reproductive tourism (e.g., in vitro fertilization) (Tompkins, 2009). Paffhausen et. al, (2010) states that medical tourism involves a wide range of therapeutic treatments ranging from various essential treatments to different sorts of traditional and alternative treatments. Further study have added that, “a specialized subset of medical tourism is reproductive tourism and reproductive outsourcing, which is the practice of traveling abroad to undergo in-vitro fertilization, surrogate pregnancy and other assisted reproductive technology treatments including freezing embryos for retro-production” (Jones and Keith, 2006).

### **Challenges**

Given the fact that the medical tourism industry is growing, its challenges should not be forgotten. Because those demanding situations are international troubles, converting them to opportunities facilitates the technique of attracting patients. According to Anak Panji (2015) one of the trouble is accessibility, in his study that asserts development has not been comprehensive due to terrible accessibility to areas which can be of excessive economic fee to explore. This results to poor communication between the people in the city and remote areas. There are still transporting through river ways amid dangerous rapids and abnormal tides. For these reason people there have a hard time to market their products outside their areas, searching for medical treatment, education and so on. The supply of earnings is usually very low and fees for visiting are times higher than the ones closer to development. As supported through the study of Tiongson (2014), incompetent infrastructures, limited sources on clinical and tourism centers and excessive fee of traveling to the Philippines are a few the problems that the country is dealing with.

In addition, access to precise treatment pushes the patients to outsource medical remedy overseas. Patients normally seek medical care overseas for one of two reasons: either they do not have get admission to a particular treatment, or they cannot come up with the money for it, in their places. (Cortez, 2008).

Consequently, Spar (2005) said that American patients to another places because of lack access to unproven medical therapies like stem cell or cytoplasmic transfer therapy. Research done in Asia have found that, Thailand has turn out to be increasingly more popular destination for a huge range of medical methods, together with beauty surgical procedure, dental work, hip and knee replacements, back surgery and for a few unproven scientific surgery (e.g. intercourse change) (Yap, 2007).

Meantime in Canada, the focus on global tour may be taken into consideration, since many patients cross provincial or regional borders to achieve health offerings. Say as an instance, it is not unusual for ladies living in far off villages and aboriginal groups to travel to city in order to give birth in a medically supervised environment (Moffitt & Vollman, 2006; Van Wagner, Epoo, Nastapoka, & Harney, 2007). There are also times where province-unique

fitness regulations generate provincial variations in access to, and affordability of, health merchandise, which includes prescription drugs (Sibley & Glazier, 2009). This in turn motivates many Canadians to accumulate scientific goods and offerings by way of accomplishing provincial cross-border travel.

However, Agrawal (2012) stated in his study that the major challenges in the scope of medical tourism that nation face throughout the globe, firstly, the follow up care would be very tough in case of medical tourism. If there will be complications that the patient would experience after the procedure and already went back to his home country, it will not only be difficult but also be very high in price. Secondly, language limitations pose most important undertaking in medical tourism. The country may additionally offer expert doctors and fantastically state-of-the-art clinical systems however if the docs, nurses and different medical group of workers do no longer recognize the language of the patient, the complete technique will become extraordinarily tough for the affected person in addition to the team of workers. So the cultural and language obstacles also impact demand.

The cultural and language barriers also influence demand. Thirdly, within the nations with a pool of gifted medical doctors and nurses like India, it is a major task to keep these specialists because of brain drain. There may be scarcity of such skilled specialists in maximum nations across the globe and therefore they may be offered the exceptional salaries abroad. Brain drain takes place due to loss of opportunities in the domestic in the home country. This statement is also supported with the aid of Garg (2013) on the difficulty of reversing the external brain drain, there are fears, however, that scientific tourism may want to worsen the internal brain drain and trap specialists from the public area and rural areas to take jobs in city company and private hospitals. In connection, Agrawal (2012) also stated that many growing nations such as India face troubles due to terrible infrastructural help in clinical services. There are issues related to proper water and energy supply, bad hygiene in hospitals which include unhygienic surroundings, untidy body of workers and low quality meals and lodging, along with poor air connectivity to assist patients' in the country. On the alternative component, the clinical body of workers in maximum growing countries lacks professionalism and behavioral factors. The tender skills of medical team of workers like warmth, concern, and friendliness, and professional capabilities like interpersonal competencies, loyalty and appearance are nonetheless underdeveloped and it negatively affects the customers' service experience.

Furthermore, Agrawal (2012) noticed that the nations like India also suffer from issues of promoting in medical tourism. There is a lack of quality accreditation and regulation within the hospitals and different medical service carriers. Other than this there is no uniform pricing and standardization of offerings performing as barrier in constructing clients' trust on the services offered. In addition, Kanani (2016) said there is lack of promotion to patients and lack of legal assistance in case of a problem. He also highlighted the absence of medical code that may help to determine what is medical negligence and malpractice in such scenarios. Consequently, as stated by Agrawal (2012), one of the serious concerns in medical tourism relate to differences in laws in different countries. There are no uniform laws and moreover, in most countries there are weak laws for malpractice in medical services which leave patients with fewer options to

fight for their rights in case they are cheated or if something goes wrong during the whole medical process.

### **Future Development**

According to (Panji, 2015) most people, specifically the tourism industry players in Sarawak ought to be made aware to the opportunities within the enterprise and the ability health tourism as a contributor to better earnings should not be overlooked. Predicted returns generated from the industry no longer most effective advantage the industry players but also create greater research on fitness tourism, employment opportunity, and better profits to neighborhood communities and excessive sales to the nation authorities. Accelerated returns (inside the form of GST and Tax series) in turn, can be channeled to projects development and improve the pleasant of existing facilities as well.

Consequently, Bookman M, Bookman ok (2007) stated that one of the fastest developing tourism markets in the international, medical tourism now generates US\$60 billion in business yearly worldwide, and the wide variety of nations presenting nation-of-the-art clinical centers and offerings to foreign tourists is at the growth. This international change in scientific services also has massive financial potential for the worldwide financial system. Moreover, Exworthy and Peckhman (2006) stated that the affected person profile of medical vacationer is in addition opaque. Medical traveler are probably to come back from an genuine social and populace organization. Exworthy and Peckhman, 2006 brought whilst there may be a war of words over the entire variety of scientific visitor, figures are rather steady on the subject of the value strategies. Ehrbeck et al, 2008 observe, however the price isn't necessarily the primary motive force, suggesting that availability and pleasant are the main elements for many medical vacationer.

According to Timmermans, 2004, Ramirez de Arellano, 2007, Turner, 2007 the most countries whom engage in delivering care to medical tourists do so to increase the level of direct foreign exchange earnings coming into their country; to improve their balance-of-payments which has grown faster than the trade in goods. To some extent this might be income thought of as accruing directly to the health system. Due of the low fees of medical tactics and surgical treatment overseas, some people fear that medical tourism might be fraud or a scam. Also added by Lee, 2010, Lee and Hung, 2010 that during Singapore the government stress that involvement in medical tourism permits those to offer a broader range of medical services to the indigenous populace that will be the case if income become no longer being generated thru medical tourism. Similarly, Ramirez de Arellano (2011) shows that the Cuban experience is to reinvest earnings from foreign patients into the country wide device. it is consequently feasible that a few countries may are searching for overseas patients which will expand centers to better serve nearby patients (e.g. improve body of workers, investment, specialist understanding, cross-subsidize, and so on.) although those arguments are much more likely to be window dressing of the center purpose which is to earn foreign exchange.

However, price is one of the most important factors for medical tourism. As (Lagace M., 2007) stated in his study that while planning for medical tourism,

cost should be an important consideration. Further study counseled that, cost is the main motivating issue amongst others (e.g. long waiting time at home) whilst patients travel for hospital treatment outside of their country home (Sydner et al., 2011). Similarly, a big range of countries around the world are promoting medical tourism to be financially benefited from the emerging marketplace (Cotez, 2008).

Minimal effort incorporated with different factors, for example, innovative ability, government's innovativeness and limited time crusades in creating human services offices and qualified workforce combined with the regular assets like shorelines, greens have manufactured the certainty of numerous created world patients to visit outside areas for restorative strategies. The regularly expanding media scope on the fulfillment of the patients who were dealt with outside the US over the most recent couple of years additionally pulled in a substantial of US patients to look for medicines abroad (Schroth L, Khawaja R, 2007). Besides, because of the huge advancement in ICT, data with respect to the medicinal methodology is currently promptly accessible and effortlessly open. What's more, web based showcasing and limited time battles by healing facilities and travel offices have helped the certainty of the remote patients as they can get their required data much effortlessly and rapidly (Lagace M., 2007). Accordingly, Web has empowered a noteworthy cost investment funds for both the patients and the doctor's facilities (Patsner, 2008). According to the book of Burkart, A. J.; Medlik, S. (2016) Tourism produces business and riches and is in numerous zones a noteworthy component in the group success, and an action of social, political, natural and social noteworthiness. Additionally expressed by David J. Tefler and Richard Sharpley tourism improvement is a perplexing procedure including the meeting up of local and universal advancements operators and key partner bunches with state approach, arranging and directions. The subsequent tourism frame has impacts in the host destination, as well as there are potential more extensive formative results profiting the goal. In connection to David J. Tefler and Richard Sharpley, Gunn and Var (2002) distinguish the objectives for better tourism advancement as upgraded by guest fascination, enhanced economy and business achievement, manageable asset utilize, and group and zone joining, while all the more as of late, goal arranging has likewise centered around put marking, vital associations and innovative destinations. As stated by Timmermans et al. (2007) the most countries whom engage in delivering care to medical tourists do so to increase the level of direct foreign exchange earnings coming into their country; to improve their balance-of-payments which has grown faster than the trade in goods.

To some extent this might be income thought of as accruing directly to the health system. For instance, foreign patients purchase health care services, and for this reason it provide an income that can be used within hospitals to cross-subsidize care for domestic patients, or could be used to help fund capital investment. Due to the low prices of medical procedures and surgery abroad, some people worry that medical tourism might be fraud or a scam. Also added by Lee, 2010, Lee and Hung, 2010 that in Singapore the authorities stress that involvement in medical tourism enables them to provide a broader range of clinical services to the indigenous population than would be the case if income was not being generated through medical tourism. Similarly, Ramirez de



Arellano (2011) suggests that the Cuban experience is to reinvest income from foreign patients into the national system. It is therefore possible that some countries may seek foreign patients in order to develop facilities to better serve local patients (e.g. improve staff, investment, specialist expertise, cross-subsidize, etc.) although these arguments are more likely to be window dressing of the core motive which is to earn foreign exchange. However, one must remember that foreign patients are merely an addition to domestic private patients; and this may be a significant or insignificant addition. There may also be different economic implications depending if these patients are simply using spare capacity or competing with domestic patients.

### **Theoretical Lens**

The study is anchored from the Self-Determination Theory (SDT) of Kent and Oxford University Press (2006). Self-Determination Theory (SDT) is a theory of motivation concerned with the development and functioning of personality within social context. The theory focuses on the degree to which human behaviours are made by personal choice. It assumes that people are active organisms with innate tendencies toward psychological growth and development, and that they strive to master challenges and integrate experiences into a coherent sense of self. According to the theory, these innate tendencies do not operate automatically, but depend on the extent to which the social context provides basic Psychological needs. If the social environment satisfies the needs, a person will function effectively and develop in a healthy way, but to the extent the needs are thwarted, a person will function sub-optimally and will show evidence of ill-being.

Moreover, the study of Adams et. al (2015) entitled "Tourism discourse and medical tourists' motivations to journey" intends to research the function of tourism and travel discourses in shaping the selection making of medical vacationers. The individual's selection to take part in clinical tourism is characterized by means of a shift in roles from an extra submissive affected person to an affected person as user/decision-maker (Mainil et al., 2011).

Similarly, the study of Lajevardi M (2016) entitled "A comprehensive attitude on medical Tourism Context" developed a theoretical structural version to study the impact of motivational aspect and perceived destination image inside the perceived carrier high-quality and overall satisfaction of clinical tourists who've travelled to a foreign country to acquire a clinical remedy. In addition to this, Connell J (2006) said that human beings wishing to access processes inclusive of cardiac, orthopedic, dental, and plastic surgeries are going to key vacation spot countries known to offer take care of global patients.

### **METHOD**

This study examined the perception of Davao Tourism Stakeholders towards Medical Tourism in selected areas in Davao City. The study employed a qualitative research design. In this context, the researchers decided to have an interview to gather reliable and supporting data for the topic. By elaborately expressing the respondents' knowledge and ideas based on the directional questions that were given, the researchers found out the importance of this method. The respondents then answered the questions with explanation to

broaden the answer. Through the data and information collected, the circumstantial events and situations experienced by the respondents were better understood. This type of research design helped the researchers to know the perception of the Davao Tourism Stakeholders towards medical tourism in selected areas in Davao city.

In this study, the source of data was collected through an in depth interview with the 3 medical doctors, 6 medical tourist, 5 locals, 2 educators, 3 tour guides and 3 DOT representatives. Knowing the fact that these people are the busiest, the researchers had an appointment during weekends to ensure the time of convenient interview. The researchers developed questions relating to the Davao tourism stakeholders towards medical tourism in selected areas in Davao city and follow up questions were also given to get more detailed and informative answers.

The participants of this study were Davao tourism stakeholders which are participating in medical tourism in selected areas in Davao city. The study conducted an interview composed of 3 medical doctors, 6 medical tourists, 3 Department of Tourism representatives, 2 educators, 3 Tour guides, and 5 communities. In order for the researchers to prove that these chosen participants and given data were reliable and can support the objectives of this study.

The data being gathered through interview guide question were written, analyzed, encoded and interpreted. The narrative analysis was guided by the frequency of the issue themes and these themes were coded and interpreted consequently. Oral communication and idiomatic expression per question that appeared to be related were grouped into same category. These categories were gradually replaced and re-evaluated to determine how they were linked. In essence, the analysis involved extracting significant statements from transcribed interviews so that the key phrases and statements that spoke directly to the phenomenon in questions to be extracted.

To provide trustworthiness and credibility of this study, gathering and the appropriateness of the interpretations, research members received a copy of the transcripts after each round of meeting for criticism. Cancellations or modifications made in the transcripts were checked. This was to guarantee authenticity in the light of the fact that the research members may have tended to specific zones in the information examination that they can't help contradicting before presentation.

To consider the moral part of the respondents, the researchers guarantee the respondents that their own profile will be managed in full secrecy. Appropriate courses of action, arrangements, and meetings were directed with deference.

## **RESULTS AND DISCUSSIONS**

### **Perception of Davao Tourism Stakeholders in Terms of Services**

Respondents' perceived that services in medical tourism is existing and effective. They attest its effectivity through patronizing cosmetic product and

appreciating prices of the product. They believe that these services are of big help to the growing population of medical seekers.

The researchers did an in-depth interview with respective respondents. The first question raised was “Do you have any idea about medical tourism?”. All respondents answered yes. Followed by this sub-question “What are the medical tourism activities found in your locality?” most respondents answered that cosmetics and surgeries are the most common facilities found in their locality. As stated by one of the respondents:

*“It can be cosmetic because most of the people tend to beautify themselves, or it can be medical itself. They also tend to have operation like kidney transplant and heart bypass that are available here.” (R.1)*

Based on the interview, all respondents had an idea about medical tourism. They also mentioned some of the services offered in medical tourism such as cosmetics and surgeries. These two are very common in Davao City because most medical tourists avail these kinds of services.

In relation, Mestrovic (2014) also mentioned the most common types of procedures that patients pursue during medical tourism trips are elective cosmetic surgery, dentistry, organ transplantation, cardiac surgery and orthopedic surgery.

### **Perception of Davao Tourism Stakeholders in Terms of Benefits**

Respondents believe that medical tourism benefits are indeed helpful. The respondents thought that these benefits are visible especially in the economic growth of the City. As mentioned by the respondents, since visiting other countries for health purposes is the main essence of medical tourism, tourists will then avail the services offered by the host community which improves its economic standing.

The second question raised during the interview was “Do you find medical tourism beneficial?” Most respondents agreed that it (medical tourism) is beneficial for the improvement of our economy. Below are some of their answers:

*“Yes, for our economy of course! If you invite more tourists to have their treatments here, its every beneficial to our economy. They can have a lot of people.” (R.1)*

*“Yes, especially in our locality we do not have enough facilities and I believe it helps boost economy of the area where it is happening.” (R.4)*

Today, many countries with regards to human beings need for health have developed medical industry as a source of massive income in relation to tourism. Increasing 20% in admission to foreign patients in American hospitals confirms this matter (Kim et al., 2009).

However, some respondents answered about the significance of medical tourism in the locality and in business purposes.

*“Yes, it’s beneficial for the family here in Davao and Mindanao in general and especially now that our government’s main focus is to invite businessman to build relationships with them and they can be a member in our Asean countries.” (R.2)*

*“Yes, it is really beneficial because personally I can help other people. People from outside, from abroad who would come here to the clinic.” (R.3)*

*“Yes, It’s really helpful for both the foreigners and locals especially in our culture, we are fond of “hilot”. It could be part of medical tourism, we just need to improve it.” (R.16)*

In connection, Turner (2007) has identified an additional 15 companies located across Canada that arrange medical tourism vacation packages. In some respects these businesses provide services that resemble the services offered by travel agencies specializing in traditional “holiday travel”.

Significantly, understanding of the customer’s requirements has become necessity as this helps the practitioners in developing new approaches to provide improved service quality (Sohail, 2003).

### **Perception of Davao Tourism Stakeholders in Terms of Challenges**

The respondents perceived challenges as factor that needs to be considered for it affects medical tourism as a whole. A number of respondents emphasized the lack of promotion as the major challenge in pushing medical tourism in Davao City. Moreover, information dissemination is needed to invite more medical tourists in the future.

The third question asked was: “What can be the challenges in pushing the medical tourism in Davao City?” Most respondents have seen the lack of promotion as one of the challenges in pushing medical tourism in Davao City.

*“Maybe we still lack of promotion, we still don’t promote Davao as a medical tourism although, Davao doctors is really trying to be part of EAGA (East Asian Growth Area) because it’s the nearest group to us.” (R.1)*

*“For me, there are 2 major challenges in pushing medical tourism in Davao city. First, is the lack of promotion. Because we don’t focus on medical tourism yet, so we really need to promote it. Second, is the new tax reform. Just like what Dr. Vicky Belo said, there will be a big effect on medical tourism because of it. If the tax will be implemented, facial treatment will not be an exemption.” (R.2)*

In addition, one of the seven challenges of medical tourism was mentioned by Agrawal (2012) in his study in which he mentioned that the countries like India also suffer from problems of promotion in medical tourism. There is a lack of quality accreditation and regulation in the hospitals and other medical service providers

However, some answered the accessibility and the infrastructure going to Davao City as challenges.

*“Personally, the infrastructure going to Davao is not well constructed especially when it’s raining it really is a bumpy road. So, basically it’s the accessibility.” (R.7)*

One respondent also answered on procurement of the facilities stating:

*“Challenges? I think it would be the procurement of the facilities because you still have to consider the approximate of the facilities from the supplier. The price could also be one of the issues but since tourists are ready-spender, it would be on the part of the locals. I think, that’s it.” (R.8)*

As supported by the study of Tiongson (2014), incompetent infrastructures, limited resources on medical and tourism facilities and high cost of traveling to the Philippines are some the problems that the country is facing. One of the problems is the accessibility which has been mentioned by Anak panji (2015) in his study that says development has not been comprehensive due to poor accessibility to areas that are of high economic value to explore.

### **Perception of Davao Tourism Stakeholders in terms of Future Development**

Respondents perceived future development as something that should be implemented for the betterment of medical tourism in Davao City. Most respondents believe that promoting Davao City as a medical destination and the acquisition of facilities are necessary for a more competent medical tourism.

The last question raised that pertains to Future development was “What future development can you suggest in improving Davao City’s medical tourism?” Most respondents mentioned about the promotion of medical tourism. They stated that:

*“Well, it’s the promotion that we should really improve. Since we already have the facilities.” (R.1)*

*“It’s the promotion. It would be a big help if we can promote it. it should grow and attract more competitors.”(R.4)*

Other respondents answered acquisition of machines and improvement of infrastructures.

*“The acquisition of machines. Because if you talk about the competence of doctors of Davao city, the doctors are very competent, they’re good.” (R.9)*

*“So, more facilities of course and also to improve its infrastructure” (R.11)*

Ramirez and Arellano (2001) says It is possible that some countries may seek foreign patients in order to develop facilities to better serve local patients.

### **Conclusions**

This research paper has been conducted to determine the perceptions of Davao Stakeholders towards Medical tourism in selected areas in Davao City. More specifically, it sought to answer the following questions: Davao Tourism

Stakeholders towards medical tourism in terms of: activities, benefits, challenges; and future development?

In terms of services respondents' perceived that it is existing and effective. They attest its effectivity through patronizing cosmetic product and appreciating prices of the product. They believe that these services are of big help to the growing population of medical seekers.

In terms of benefits, respondents believe that medical tourism benefits are indeed helpful. The respondents thought that these benefits are visible especially in the economic growth of the City.

In terms of Challenges, the respondents perceived challenges as factor that needs to be considered for it affects medical tourism as a whole. A number of respondents emphasized the lack of promotion as the major challenge in pushing medical tourism in Davao City.

In terms of future development, respondents perceived future development as something that should be implemented for the betterment of medical tourism in Davao City. Most respondents believe that promoting Davao City as a medical destination and the acquisition of facilities are necessary for a more competent medical tourism.

### **Recommendations**

The four major sub-problems that were studied by the researchers would help the public and private sectors in terms of medical tourism. The researchers suggests that the government should improve Davao City's infrastructure and focus on its accessibility for the convenience of the people. Since it's income-generating, the researchers suggest having a higher market to disseminate information about medical tourism. Developing the acquisition of facilities to improve the medical tourism here in Davao City is also a necessity. In addition, this study enhances every aspect of medical tourism.

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