

A STUDY OF DEMOGRAPHIC AND MARKETING FACTORS INFLUENCING THE DECISION-MAKING OF LAOTIAN MEDICAL TOURISTS IN CHOOSING UDON THANI PROVINCE AS A MEDICAL TOURISM DESTINATION: A CASE STUDY OF BANGKOK HOSPITAL UDON THANI

Jiraput Srinuntasuwut * , Thanadol Armartpon **

** Tourism Industry and Hospitality Management, Suan Sunandha Rajabhat University,
Bangkok, Thailand*

*** Faculty of Tourism Industry and Hospitality Management, Suan Sunandha Rajabhat
University, Bangkok, Thailand*

*E-Mail: * s65123469008@ssru.ac.th, ** tanadol.ar@ssru.ac.th,*

ABSTRACT

This study aimed to analyze the demographic and marketing mix factors that influence the decision-making of Laotian medical tourists towards choosing Udon Thani province as their medical tourism destination and offers a case study of Bangkok Hospital Udon Thani. A sample comprising 354 respondents was collected in the study areas selected. The collected data were analyzed by ANOVA (F-Test) and multiple regression analysis. The results demonstrate that demographic factors affect Laotian medical tourists, influencing their decision-making in choosing Bangkok Hospital Udon Thani as their medical tourism destination. This study also finds that the marketing mix 7Ps factors influence the decision to choose Udon Thani province as the medical tourism destination. The most significant marketing mix factors are People factors while the less influential factors are Promotion and Physical Evidence. In terms of improvement in service marketing of Bangkok Hospital Udon Thani, consideration should be made with regard to the marketing mix 7Ps leveraging both the most influential and least influential factors to develop a medical tourism destination for the Greater Mekong Sub-region, creating a new segment of tourism for Udon Thani province.

Keywords: Demographic, Marketing factors, Decision making

INTRODUCTION

According to the Medical Tourism Association (n.d.), the concept of medical tourism is defined as the action where people who live in one country travel to another country to receive medical, dental, and surgical care, receiving treatment equal to or better than the care they would have in their own country and traveling for medical care because of affordability, better access to care or a higher level of quality of care. Carrera and Vivien (20125) state that “medical tourism is more than an economic issue or a price-driven phenomenon. The involvement is regarded as crucial in achieving desired health outcomes and promoting the efficient use of resources, medical tourism should be welcome”. The aspects actually involved in medical tourism besides medical services are simple. Medical tourists are looking for information about

transportation, accommodation, food and additional services. All of these generate important revenue for the tourism industry and healthcare industry as well. In addition, most of the time the patient does not come alone but is accompanied by a family member, which in turn means additional earnings from these related services.

Furthermore, Awadzi and Panda (2006), and Rerkrujipimol and Assenov (2011), stated that medical travel is mostly associated with economically less developed countries, such as Thailand and India, etc., which provide not only low-cost high-quality treatment but also opportunity of combining it with a vacation in a popular tourist destination. Gunasekera, Bremer and Kapugeekiyana (2015) made the following recommendations for capturing the market of medical tourism in Asia: 1) Understanding the choice of geographic market is important because, for example, Americans may be looking for cost-effective treatment procedures combined with a leisure trip while Asian travelers may be seeking quality surgical procedures which are unavailable in their own country; 2) Developing clarity about healthcare offerings, as providers must make clear the advantage of treatment in their country. For example, Thailand has a reputation as the market leader in cosmetic surgery; 3) Increasing transparency regarding the three most important things that medical tourists consider, which are the physician's experience, the hospital quality, and patient satisfaction; 4) Being forward-thinking about partnerships for strategy building to create a healthcare ecosystem that enhances innovations. For example, Bangkok Hospital Udon Thani has partnerships with around 50 overseas medical institutions and can arrange exchanges of students and staff to develop the medical practice of the hospital; 5) Proactive planning for aftercare is a key component in making hospital arrangements for medical tourists who undergo surgery requiring a long recuperation period.

Nowadays, the concept of medical tourism as a possible option for health care includes treatments done in several developed countries. A growing number of medical patients are searching for international destinations where hospitals offer high-quality health care at a more affordable price. Thailand has 1,400 public and private hospitals situated throughout the nation and offering state-of-the-art equipment and overseas-trained physicians meeting international standards and providing affordable world-class medical services. In addition, Thailand has its excellent coastal, highland, and cosmopolitan tourist sites as a further benefit for medical tourists who want to bring their families along. With government agencies and business associations pushing the concept of health and wellness tourism, Thailand is also a hub of medical tourism.

Now Thailand has taken up a position as a leading global center of tourism in the ASEAN Economic Community (AEC). Healthcare and tourism are both priority service sectors targeted for the AEC blueprint (Board of Investment of Thailand, 2012), supported by the Thai government's strategy of promoting Thailand as the "Medical Hub of Asia" according to TAT Governor Suraphon Svetasreni (March 1, 2011). The Northeastern region of Thailand has Bangkok Hospital's potential in medical diagnoses and treatments which are widely accepted and can be compared to those of other hospitals. Additionally, patients from neighboring countries in the Greater Mekong Sub-region, including Laos, Myanmar, South China, Cambodia, and Vietnam, are traveling to Udon Thani province for medical services. Moreover, the upcoming establishment of the AEC gives Udon Thani the opportunity to become a regional

medical hub given its geographic location and competent personnel (Udon Thani Rajabhat University Journal, 2012).

OBJECTIVES

1. To analyze demographic factors of Laotian medical tourists which influence their decision-making in choosing Udon Thani province as a medical tourism destination: a case study of Bangkok Hospital.

2. To analyze marketing mix 7Ps as factors influencing the decision-making of Laotian medical tourists in choosing Udon Thani province as a medical tourism destination: a case study of Bangkok Hospital.

METHODOLOGY

1. Research Design

This study used quantitative marketing research techniques to accurately explore the factors that influence Laotian medical tourists to choose Bangkok Hospital in Udon Thani province for their medical needs. Quantitative research is about asking people for their opinions in a structured way that can produce hard facts and statistics to analyze.

2. Population and Sample Size

For instance, this method can be applied in order to gain initial primary data regarding specific issues such as perceptions of the image of a particular brand or collecting opinions of prospective customers in relation to a new design of product. The advantages of convenient sampling are 1) Simplicity of sampling and ease of research; 2) Helpful for pilot studies and for hypothesis generation; 3) Data collection can be facilitated within a short duration of time; and 4) Cost-effectiveness.

A sample of a particular size is obtained from the population of Laotian medical tourists in Bangkok Hospital. Dr. Thawatchai Sasiprapa, Director of Bangkok Hospital Udon Thani, stated upon the publication of the reception project to enhance the image of Thailand as a Modern Medical Hub that the number of foreign patients who used the medical services of Bangkok Hospital in 2012, separated into outpatients at 9000 people and inpatients at 300 people, totaled 9300 people. Half of these were Laotian (ASTV Manager Online, 2014). This indicates that there were 4,650 Laotian patients at Bangkok Hospital. The researcher will therefore use this number to calculate the sample size for this research.

3. Research Instrument

The research used a questionnaire survey about demographics and the marketing mix 7Ps factors influencing the decision-making of Laotian medical tourists in choosing Bangkok Hospital as a medical tourism destination. The questionnaire consists of three parts and each part represents each instrument as follows:

Part 1: Demographic Profile: the first part consisted of items about the subjects' personal background information such as gender, age, average education, income, city of residence, occupation, and frequency of visiting the study area. Frequency and percentage will be used to analyze the data by T-Test and One-way ANOVA (F-Test).

Part 2: Marketing Mix 7Ps: the second part of the questionnaire is to explore the marketing mix 7Ps in terms of Laotian medical tourists choosing Bangkok Hospital for their medical needs. The 7Ps retain the original 4Ps and added three further elements (physical evidence, process, and people). Laotian medical tourists are asked to indicate their level of satisfaction on a 5-point Likert scale, rated from 1 (Strongly disagree) to 5 (Strongly agree). Correlation is used to analyze the data by using mean and standard deviation.

Part 3: Laotian medical tourists' decision-making: the third part of the questionnaire is to acknowledge Laotian medical tourists' decision-making in choosing Bangkok Hospital as their medical tourism destination. Each question used a 5-point Likert scale, rated from 1 (Strongly disagree) to 5 (Strongly agree). Correlation is used to analyze the data by using mean and standard deviation

Laotian medical tourists' attitudes were measured using five-point scale as follows:

Strongly disagree	=	1
Disagree	=	2
Neutral	=	3
Agree	=	4
Strongly agree	=	5

4. Data Collections

The secondary data research was collected from various sources such as books, journals, articles, websites, and statistical reports that concerned the study area. The primary data research used questionnaire surveys to collect data from 354 Laotian medical tourists who visited Udon Thani, Nong Khai, and Khon Kaen provinces in September 2015.

5. Data Analysis

The researcher collected the data from the survey and input the coded data for analysis using the software package for statistical analysis (SPSS). Malhotra (2010) stated that SPSS is a program for conducting analysis of variance and for the basic analysis that we have considered; however, the program can also perform more complex analysis. This research uses descriptive and inferential statistical analysis.

1. The analysis of the status of the respondents is assessed by frequency and percentage. Data is presented in the tables and commentary.

2. The analysis of the marketing mix and decision-making for separate items is analyzed by mean and standard deviation and compared with the evaluation criteria. Data is presented in the tables and commentary.

3. Multiple regression analysis using values of the multiple regression coefficients is used to find predictions and create predictive factors that affect the decision-making of medical tourists in choosing Udon Thani province as a medical tourism destination. This case study of Bangkok Hospital uses the Stepwise technique.

4. Hypothesis Testing used the ANOVA (F-test) Multiple regression for testing the related important variables.

RESULTS

The researcher will present the revealed data in the form of several tables by arranging the data into four separate parts, as follows:

Part 1: Descriptive analysis of the general information of respondents.

Part 2: Descriptive analysis of the general opinion towards marketing mix 7Ps factors which Bangkok Hospital attributed to respondents.

Part 3: Descriptive analysis of the opinion level towards decision-making to choose Bangkok Hospital as the medical tourism destination of Laotian medical tourists.

Part 4: Overall comments and suggestions from respondents.

The research information will be the primary data collection from the questionnaires, which were distributed to respondents in Udon Thani province and nearby provinces such as Khon Kaen province and Nong Khai province since these two areas are popular tourism destinations for Laotian tourists.

Data analysis is performed applying statistical theory as the researcher collected the primary data from the questionnaires and filled in all the data in coded form for inputting to the SPSS program. The results can then be used to evaluate the research hypotheses.

Data Analysis Strategic Theory

- a. Mean
- b. Percentage
- c. Standard Deviation
- d. Multiple Regression

Data analysis was carried out according to related statistical theory, by collecting the Laotian medical tourists' opinions using a frequency rating scale and analyzing in terms of percentages. Other than that, the analysis process is dependent on the factors influencing the decision-making of Laotian medical tourists in choosing Bangkok Hospital as their medical tourism destination.

The meaning of the scale is shown below:

Strongly agree	=	5	points
Agree	=	4	points
Neutral	=	3	points
Disagree	=	2	points
Strongly disagree	=	1	point

2. The mean of the Likert scale can be identified via 5 levels by calculating according to the details as stated below:

Mean 4.21 - 5.00	in the level of the highest importance
Mean 3.41 - 4.20	in the level of high importance
Mean 2.61 - 3.40	in the level of normal importance
Mean 1.81 - 2.60	in the level of low importance
Mean 1.00 - 1.80	in the level of lowest importance

3. Data was analyzed data by using the completed program of SPSS.

4. Personal general information was calculated for frequency, by using mean, percentage, and mode.

5. Factors influencing the decision-making of Laotian medical tourists were calculated for mean as a percentage, mode, and standard deviation.

6. Hypothesis tests such as the ANOVA (F- Test) and multiple regression were used for testing the related important variables.

CONCLUSION AND FUTURE WORK

The conclusion of the analysis of the marketing mix 7Ps factors of Laotian medical tourists which influence their decision-making in choosing Udon Thani province as a medical tourism destination involved a case study of Bangkok Hospital.

Each of the marketing mix 7Ps factors considered in this study (Product, Price, Place, Promotion, People, Process, and Physical evidence) contributed to Laotian medical tourists' decision-making in choosing Udon Thani province as a medical destination due to the quality of hospital being of a higher standard than their home country. The results of relevance to this study in terms of marketing mix factors of Bangkok Hospital were that the People factor is the most influential element of the marketing mix influencing the decision-making of Laotian tourists because the professional doctors, well-trained nurses, and polite and friendly service staff are able to provide sufficient and reliable advice to medical tourists. The People factor plays the role of being the most critical influencing factor. Two factors that are the least influential are the Promotion and Physical evidence factors. Regarding suggestions and recommendations from respondents regarding Promotion factors, Bangkok Hospital should provide promotion packages of medication rates which include room rates of partner hotels to offer to medical tourists' families and relatives in case they need to wait for them to undergo operation processes.

For the Physical evidence factor, Bangkok Hospital needs to improve by providing more convenient shops, restaurants, complementary facilities, and additional space for the parking lot. With reference to Products, it appears that the products or services provided were rated highly overall and can be regarded as important factors. According to the sequence of mean scores, the most influential factors were services provided that meet medical tourists' expectations, followed by the quality of equipment used in Bangkok Hospital and the variety of services provided at Bangkok Hospital.

REFERENCES

- [1] Allison, S. (2012). *The marketing mix: from products to life-enhancing experiences*. In: Academy of Marketing Annual Conference, Southampton Management School, University of Southampton, 2-5 July 2012 (Last modified 2017).
- [2] Altin, M., Singal, M. and Kara, D. (2011). *Consumer Decision Components for Medical Tourism: A Stakeholder Approach*.
- [3] Baker, M., J. and Saren, M. (2010). *Marketing Theory* (2nd Ed). London:Sage.
- [4] Behrmann, J. and Smith, E. (2010). Top 7 Issues in Medical Tourism: Challenges, Knowledge Gaps, and Future Directions for Research and Policy Development. *GJHS Global Journal of Health Science*.

- [5] Bochaton, A. (2013). The rise of a transnational healthcare paradigm. Thai hospitals at the crossroads of new patient flows, *European Journal of Transnational Studies* (EJOTS). 2013; 5:54-80.
- [6] Bochaton, A. (2014). Cross-border mobility and social networks: Laotians seeking medical treatment along the Thai border. *Social Science & Medicine*, 364-373.
- [7] Booms, B. and Bitner, M. J. (1981). *Marketing Strategies and Organizational Structures for Service Firms*.
- [8] Brown, J. D. (2006). *Testing in language programs*. New Jersey: Prentice Hall Regents.
- [9] Charoenmukayananta, S., Sriratanabana, J., Hengpraprom, S. and Trarathep, C. (2014). *Factors influencing decisions of Laotian patients to use health care services in Thailand*. 665-671.
- [10] Chomvilailuk, R. and Srisomyong, N. (n.d.). Three Dimensional Perceptions of Medical/Health Travelers and Destination Brand Choices: Cases of Thailand. *Procedia - Social and Behavioral Sciences*, 376-383.
- [11] Consumer Channel - The right solution for Medical Hub. (2014, August 22). Retrieved June 21, 2015.
- [12] Culley L, Hudson N, Rapport F, Blyth E, Norton W, et al. (2011) Crossing borders for fertility treatment: motivations, destinations and outcomes of UK fertility travellers. *Human Reproduction* 26: 2373–2381. doi: 10.1093/humrep/der191
- [13] Crooks, V., Cameron, K., Chouinard, V., Johnston, R., Snyder, J. and Casey, V. (2012). Use of medical tourism for hip and knee surgery in osteoarthritis: A qualitative examination of distinctive attitudinal characteristics among Canadian patients. Retrieved April 19, 2015, from <http://www.biomedcentral.com/1472-6963/12/417>
- [14] Della Pietra, D. (2013). *Hospital Impact - Meet the hierarchy of patient needs to improve experience*. Retrieved May 18, 2015, from http://www.hospitalimpact.org/index.php/2013/12/03/meet_the_hierarchy_of_patient_needs_to_
- [15] Donovan, N. (n.d.). Marketing Theories – *The Marketing Mix – From 4 P's to 7 P's*. Retrieved April 17, 2015, from <http://www.professionalacademy.com/blogs-and-advice/marketing-theories---the-marketing-mix---from-4-p-s-to-7-p-s>
- [16] Gigli, M. (n.d.). What Is Demographic Segmentation in Marketing? - Definition, Advantages & Disadvantages. Retrieved April 18, 2015, from <http://study.com/academy/lesson/what-is-demographic-segmentation-in-marketing-definition-advantages-disadvantages.html>
- [17] Gunasekera, K., Bremer, M. and Kapugeekiyana, P. (2015). *Medical Tourism: What's Next for Asia?* Stax a Global Strategy Consulting Firm.
- [18] Hanefeld, J., Horsfall, D., Lunt, N. and Smith, R (2013) *Medical Tourism: A Cost or Benefit to the NHS?* *PLoS ONE* 8(10): e70406. doi:10.1371/journal.pone.0070406