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Forecasting the demand for medical tourism in different cities of Malaysia

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Abstract---Tourism, combined with the articulation medical, is apparently one more sort of tourism which has acquired massive acclaim in continuous numerous years. In any case, different compositions open with regards to the tourism business and the earnestness of the destination be that as it may, the significant viewpoints which determine the fulfillment of medical travelers are not really centered explicitly around Malaysia. There is an absence of exact proof in this space of study which should be connected. Consequently, this study pointed toward investigating the different elements assisting in the development of medical tourism in Malaysia. Because the purpose of the study was to find several elements that contribute to the improvement of medical tourism in Malaysia, the data was examined using Structural Equation demonstrating (SEM). Medical travellers who came to Malaysia with the primary intention of looking for medical frameworks other than touring were the authentic people for this study. During the months of December 2012 and February 2013, a total of 266 models were constructed using non-probability judgement inspection. The findings show that destination reality and organisation quality have a significant role in the medical traveler's decision to visit Malaysia for medical tourism. As a result, Malaysia must advance various medical cases of overcoming hardship, as well as the organisations that they have set up, in order to attract more new patients. This research contributes to the theoretical advancement of the tourism industry by presenting a coordinated relationship among numerous perspectives that contribute to the advancement of medical tourism in Malaysia.

Keywords---Medical tourism, Destination competitiveness, Service quality, Customer service.

Introduction

Wandering For the elites of developed countries, travelling abroad for medical thought is no longer an option. The employment of medical idea toward the ocean is critical for a standard arrangement of admittance of fresh work and items, which can't be taken note of, in this assembling. It has been promoted by a number of countries all over the world due to the fact that the concept provides these countries with numerous advantages. As a result, medical tourism is not only practical, but also a cost-effective option for patients to enjoy their vacation while also receiving medical treatment. Tourism, in combination with medical articulation, is a winning combination, is apparently one more sort of tourism which has acquired gigantic unmistakable quality in continuous numerous years (1). This is a direct result of different For example, the increased demand for improved medical services (2), rising medical service expenses in the United States and several European nations (3), and the extreme visa regulations imposed by the United States and various European countries as a result of the 9/11 terrorist attacks (4). As a result, numerous governments all over the world have begun to promote medical tourism in order to profit from this growing industry (1).

Because of their common resources and well-known quality, Asian countries such as Singapore, Thailand, Hong Kong, Malaysia, the Philippines, and India are widely regarded as the most likely destinations for medical tourism assistance close by restricted worth (5). Taking into account the particularly Clients can save up to 40% to 60% in these Asian countries compared to the United States or Western Europe (6).

Regardless, the general cordiality industry is under extreme strain because of colossal serious market (7). The maker further added that, to stay ferocious, zeroing in on purchaser steadfastness' has become indispensable They are in the right place for their company's success. Medical tourism is significant for the whole hospitality business region in like manner requires exceptional focus on their clients for future manageability. In any case, there is pertinent composing open concerning In any event, the vast views that determine the satisfaction of medical explorers are the tourist industry and the sincerity of the location. not really centered explicitly around Malaysia. Along these lines, there is an absence of exact proof in this space of study which should be connected. Henceforth, this study pointed toward investigating the different variables assisting in the development of medical tourism in Malaysia.

Malaysia tourism: an overview

The turn of events and headway of tourism industry is for the most part respected to move couple with social and financial turn of events. The nation's overall overflow has increased achieved a comparing increment pursued for tourism things. For example, monetary overflow gives the resources for updates in transportation, along these lines providing simple admittance to far off traveler destinations. The tourism industry has remained nimble in its response to changing circumstances promote demands by progressively transitioning away from monstrous explorer things and making relevant things to meet new interests

on the lookout In the same way, more appropriate attractions are being developed to cater to the truly insightful and generally high-quality market¹¹. With the establishment of the Malaysian Tourism Board in the 1990s, Malaysia began to focus on tourism as an industry. The Visit Malaysia Year (VMY) program. The achievement this program in 1990 had prodded the public authority to send off the in 1994, he won his second VMY. In 1994, tourism revenue totaled RM 8.3 billion, a significant increase. The third VMY was launched in 2007 to commemorate Malaysia's 50th anniversary of independence. Malaysia celebrates its fourth VMY in 2014, with the theme "Observing 1Malaysia Truly Asia," to represent the diversity of Malaysians' fortitude ⁹. Along these lines, it is undeniable that the tourism industry has advanced out and out all through the long haul, given a couple of government drives in wording of¹¹:

- creating unfamiliar trade earnings
- increasing work in the industry
- fostering local/rustic turn of events
- differentiating the monetary base of the country
- the development of the country's social diversity and
- expanding the tourism business internationally

The requirement of the tourism industry to make financial progress has been made feasible by the new development and upgrading of tourism items in the region course of the most recent thirty years to take care of a wide scope of neighborhood, provincial also worldwide sightseers. The tourism business in Malaysia is a critical new exchange laborer, adding to monetary turn of events, drawing in ventures and giving business. The amount of Inbound tourism to Malaysia increased steadily from 25.03 million to 27.4 million between 2012 and 2014, with an average of one to two million additional visitors every month.

Be that as it may, in 2015, despite the fact that With RM24.5 billion in private venture funding and RM67.1 billion in GNI, tourism was the second most funded private venture. 6, inbound tourism utilisation fell to RM74.1 billion in 2015, a drop from 2014. (RM80.1 billion). In 2015, Malaysia had a decrease in tourist arrivals (25.7 million), compared to 2014. (27.4 million). 12.9 million of the 25.7 million tourists who visited Malaysia came from Singapore. Indonesia (2.78 million), Thailand (1.34 million), Brunei (1.13 million), and the Philippines were among the great 10 explorers who appeared in the short-pull markets (0.55 million). China (1.67 million), India (0.72 million), Australia (0.48 million), Japan (0.48 million), and South Korea (0.48 million) were the top medium-pull markets (0.42). In 2014, Joined Kingdom was the super extended length market in the best 10 overview, but it slid out of the top 10 in 2015. Table 1 shows the top ten business areas for global inbound explorer in 2014 and 2015. The Malaysian Tourism Board (MTB) established markers in 1992 to dismantle the key reason for travellers to visit Malaysia. These indicators assisted MTB in planning and propelling the selected districts as needed. Table 2, on the other hand, shows the primary cause for visitors' visits in 2015.

Table.1. Top 10 Tourist Arrivals by Country of Nationality 2014 and 2015

No.	country	2014 (million)	Market share (%)	country	2015 (million)	Market share (%)
1.	Singapore	13.920	50.8	Singapore	12,5922	50.2
2.	Indonesia	45,550	5.2	Indonesia	44,465	5.3
3.	China	46,922	56.2	China	45,123	46.6
4.	Thailand	56,460	2.6	Thailand	46,120	46.2
5.	Brunei	56,788	4.3	Brunei	112,789	56.9
6.	India	56,493	9.6	India	46,78,455	4.3
7.	Philippines	50,462	5.3	Philippines	63,450	5.6
8.	Australia	56,236	5.9	Australia	123000	69.3
9.	Japan	56,789	23.2	Japan	45,896	46.2
10.	u.k	23,456	56.3	South Korea	45,789	89.63
11.	Others	45,456	25.6		459,33	415.3
	total	25,5620	13.2	Others	456700.4	66.10

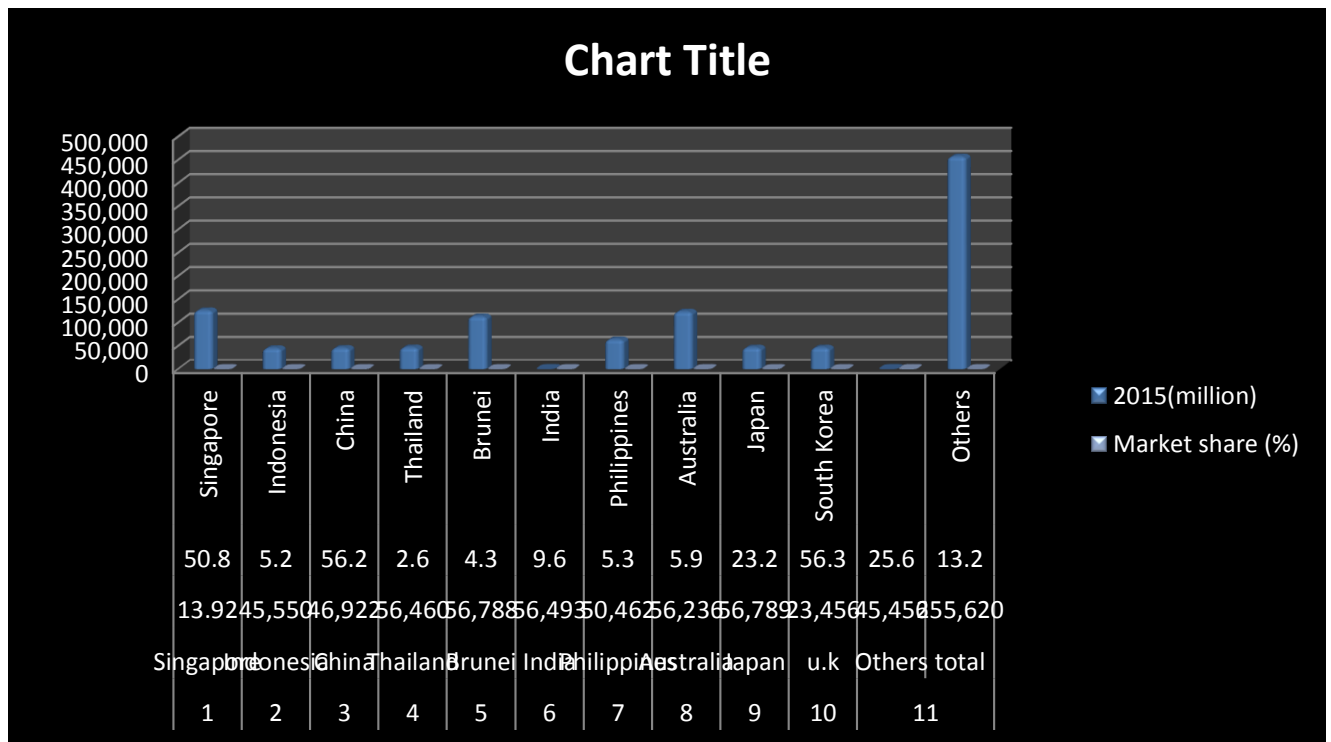
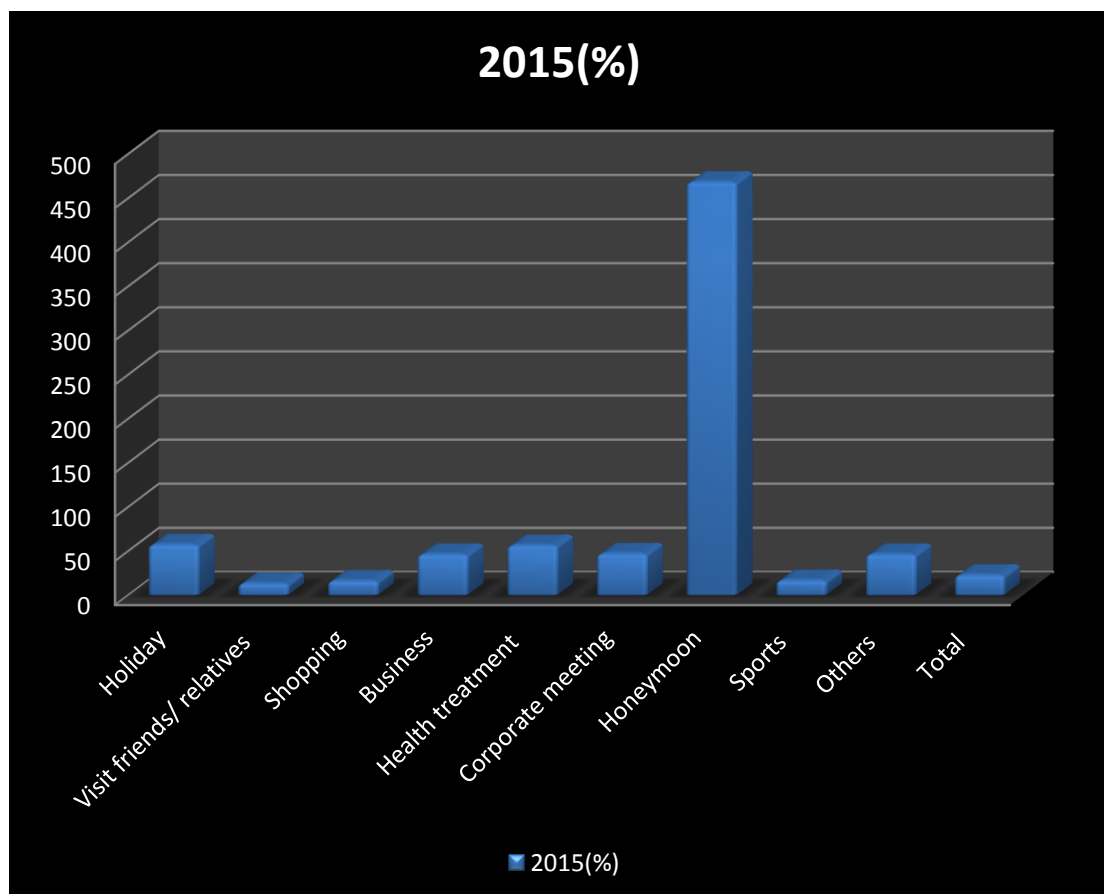


Table.2. Main Purpose of Visit to Malaysia 2015

Purpose	2015(%)
Holiday	57.2
Visit friends/ relatives	13.2
Shopping	16.2
Business	46.2
Health treatment	56.3
Corporate meeting	46.9
Honeymoon	468.2
Sports	16.6
Others	46.2
Total	22.69



As displayed Medical/wellness tourism is one of the areas of interest among the travellers, as seen in Table 2. Medical tourism is another type of specialty tourist business that has been significantly growing in recent years. Several experts, including Goodrich and Goodrich (1987), Laws (1996), and Connell (2006), have portrayed medical tourism as a lucrative business. action by which individuals travel to abroad nations to obtain healthcare administrations and offices like

medical, dental, and medical procedure while having the valuable chance to visit the places of interest of that country⁴. In the interim, Bookman and Medical tourism has been defined by Bookman (2007) in Dawn and Pal as movement fully intent on improving one's health, and furthermore a financial action that insides exchange benefits and incorporates two areas, in particular - tourism and medicine. It is likewise defined as completely organized exercises connected with movement and hosting a traveler who stays something like one night at the destination country to maintain, improving or reestablishing his/her wellbeing through medical intervention¹⁸. One intriguing idiosyncrasies with regards to medical tourism is that, countless patients travel to agricultural nations for medical services treatment. The fundamental inspiration to search for medical organizations in less advanced countries is the alluring reasonable low costs⁵. The explanation developing nations can give healthcare benefits inexpensively is straightforwardly connected with the country's monetary status. To be sure, the expenses The cost of medical thought in a destination country is usually related to the per capita GDP of that country. India and Thailand are two of the most popular destinations for medical treatment. Singapore and South Korea are two more Asian countries that are popular for medical tourism. Similarly lately, Malaysia has transformed into a substitute destination. Other than Thailand, Singapore, and India, for medical tourism. Since the year 2000, there has been a significant increase in consistent expansion in the amount of travelers looking for medical services in Malaysia. The monetary stoppage in 2015, in any case, saw a slight lessening in the medical care region by which In 2014, there were 882,000 medical services explorers in Malaysia, however this year there were 850,000 visits. The number of medical care adventurers from the Gulf Cooperation Council (GCC) flocking to Malaysia quickly grew. Malaysia is regarded as one of the finest Muslim tourist destinations³. This raises the question of why Malaysia is regarded as a preferred medical tourism destination.

As displayed in Table 4, cost is one of Malaysia's middle characteristics of medical tourism. Malaysia provides high-quality services. administrations with viable pricing, particularly considering the significant expenses of medical therapy in a few created nations. The United States, for example. Malaysia's health-care providers are an example of this appealing option in contrast to patients all over the planet.

Thus, with first rate medical administrations providing dependable, protected and successful therapies in agreeable surroundings easily of access and reasonable costs, Malaysia has surely transformed into a main choice for new patients looking for medical services treatment abroad¹³. Also, Malaysia's medical services foundations have furthermore acquired the approval. The Joint Commission International (JCI) has given us the following status: ¹⁸. JCI is the most well-known certifying body for the medical traveller business in the world. In Malaysia, there are at least seven medical service foundations gotten JCI permit. Plus, to help this industry the Malaysian government gave twofold obligation exemption for crisis facilities to entice them to obtain a JCI permit under the medical tourism umbrella initiatives.

One more part that adds The astounding and recuperating organisations provided have contributed to the increase in the number of medical explorers. Malaysian

medical organisations provide a one-stop shop for medical explorers, offering everything from pre-employment consultations to post-employment rehabilitative treatments and therapies to assist patients. These institutions combine care, vicinity, and innovation to give excellent recovery and restoration administrations. For instance, in spite of the fact that India's medical therapies in certain systems are less expensive than Malaysia, different factors, for example, government support, infrastructure, more limited waiting time, protection, and well disposed climate comes into thought for vacationers. This demonstrates Why is Malaysia a preferred place for healthcare, particularly among the average social occasion of Indian explorers? 1 Malaysia is well-known for its high achievement rate in high-end pharmaceuticals consolidate comprehensive consideration, remedial administrations, and choice of using conventional recuperative techniques other than the cutting edge treatment.

Other than the above factors, Malaysia additionally draws in medical explorers from Muslim countries. Malaysia is currently notable among Gulf Cooperation Council (GCC) nations for giving "halal wellbeing medicines" for example other than offering halal-guaranteed emergency clinics, MHTC tempt medical explorers from Muslim nations by ensuring halal food, giving request rooms, and besides giving halal medical treatments, for instance, insulin created utilizing ox-like things instead of porcine-based Malaysia is considered to be a member of the Gulf Cooperation Council (GCC) by a number of GCC various likenesses to the extent that its religion and food subsequently giving a normal environment to patients looking for Malaysian therapy MHTC also provides a serious call location and place (in Arabic language) to cater for the medical voyagers from the GCC nations. This further assists the voyagers with inquiring with regards to medical clinic administrations, therapies, inn stay and getting help concerning appointments prior to clearing a path Malaysia is the destination. Malaysia, for example, has established government-to-government agreements with three Middle Eastern countries, to be explicit Oman, Libya and Kazakhstan. With these plans set up, it prepares for these countries to pay for their inhabitants medical care organizations in Malaysia. Table 5 shows the Visitor appearances and usage by Muslims in 2010, 2014, and predictions for 2020.

Table: 3 Muslim visitor arrivals to Malaysia for the period 2010 to 2020

<i>Year (inbound tourism)</i>	<i>2010</i>	<i>2014</i>	<i>2020</i>
<i>Inbound Muslim arrivals (Millions)</i>	<i>Visitors</i>	4,64	3.26
<i>Expenditure by visitors (uss)</i>	Muslims	3,563	5,4695

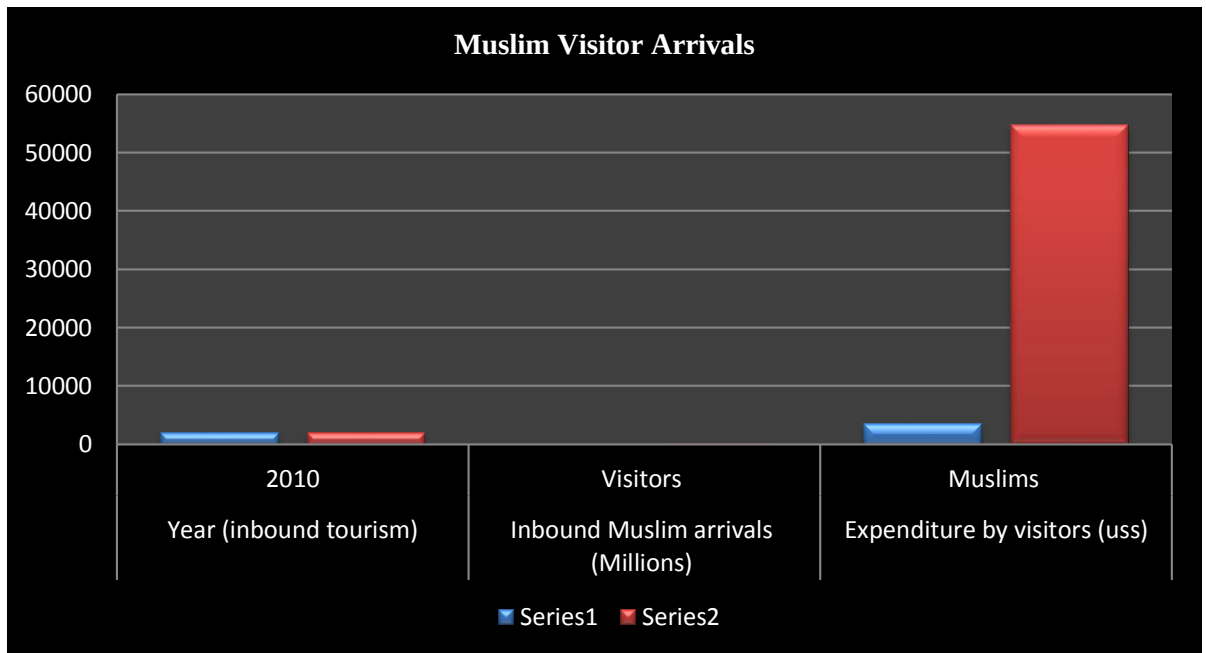


Figure: 1 Muslim visitor arrivals

Literature Review

Tang and Lau (2017) in modeling the interest for inbound medical tourism in Malaysia uncovered that income, value, swapping scale and medical quality are among the factors that altogether influence since a long time ago run interest for medical tourism in Malaysia. Chandran et al. (2017) then again, focused on that Malaysia is a leaned toward destination for medical tourism as a result of the expense distinctions Malaysia's handling of the Asian financial emergency demonstrated contrasted with different nations in the locale. Furthermore, value seriousness comparative with Singapore is a key part that impacts medical tourists to pick Malaysia rather than Singapore for medical care therapy.

Further, Awang et al. (2015) in evaluating the model for medical tourism in Malaysia legitimized that human resources and actual infrastructure are the main determinants for those who are interested in medical tourism in Malaysia. During the interim, Chandran et al. (2018) expressed that solid government initiatives, viable public-private organizations, forceful emergency clinics' marketing endeavors and continuous media uncover are the key drivers that effectively moved the medical tourism industry in Malaysia. Nonetheless, Sarwar (2013) focused on that destination intensity and administration quality additionally assume a significant part in determining the interest for medical tourism.

According to Yusof and Rosnan (2020), to draw in more medical travelers, Malaysia needs to further develop its administrations, for example, smooth movement methodology, further developed tourism spots, and upgraded individual touch to the patients. Then again, Haque et al. (2018), guaranteed that

expense, administration quality and inspiration are the main factors that determine the interest for medical tourism in Malaysia. Additionally, Afthanorhan et al. (2018), focused on that medical cost and staff ability had positive huge consequences for patient unwaveringness for the destination of medical tourism. John (2017) in analyzing the utilization of online media for marketing and advancement of medical tourism in four The majority of the medical tourism destinations in Asia (Thailand, Singapore, India, and Malaysia) discovered that the majority of the medical tourism destinations in Asia (Thailand, Singapore, India, and Malaysia) discovered that the majority of the medical tourism destinations in Asia medical tourism suppliers in these nations are not completely utilizing the capability of web-based media for tourism marketing. Subsequently, to create a positive destination picture among medical sightseers and to guarantee sustainable development in this area, medical tourism advertisers should initiate more interactive types of correspondence and advancement through web-based media and other online marketing stages.

Destination Competitiveness

The articulation "destination" has no agreed-upon meaning. As a result, describing and clarifying what genuinely defines a location is extremely difficult to do in a few words. "A destination is a development aim that the customer aspires to visit because of the attractions it offers," according to the Worldwide Association of Scientific Experts in Tourism (AIEST). These can be traditional or modern; pre-existing or created specifically for tourists. for the explorer" (8). Seaton and Bennett maintained a substitute perspective of the thought.

They described it as "the driving force connect that accelerates any remaining tourism-related enterprises" (9). Destinations are formed by the interaction of traits, impacts, and intangibles in a complex chain of events (10). According to Carter and Fabricius, "Destination is a genuine location where the explorer spends a day or an evening. It includes getaway places, items, and related organisations that are required to suit the needs of a one-day tourist in the area." (11) The World Trade Organization (WTO) stated that destinations are created from certain features that attract visitors based on its "verifiable or saw bid" (12).

The development of a destination is frequently discussed in academic writing (13-15). Moreover, numerous National Tourism Organizations (NTOs) have placed a special emphasis on destination development (16-18). Moreover, a number of makers have given it a rating of sufficient (19-21). Several studies looked at the impact of various NTOs' promotional efforts on travellers' destination choices, either unambiguously or definitively. Webster, for example, demonstrated the limited time period of NTOs by demonstrating the important size of NTO work settings abroad (22). Webster and Ivanov examined the sufficiency of the headway through the number of development tourism fairs, and Lim pointed out that advertising is one of the most important educational components in the growth of tourism (23). (21). Furthermore, as a result of the substantial advancement in data and communications development (ICT), data with respect to the medical strategies is presently speedily open and really open. What's more, unique restricted time campaigns through web by the medical centers have upheld the sureness of the new patients as they can get their necessary data significantly

more straightforward and speedier. Web moreover engaged monstrous cost reserve funds for both the patients and the centers (24). Also, expanding extraordinary missions by the state run organizations and the undertakings of movement services associated with Medical tourism has largely aided the growth of interest in medical tourism all over the planet (25).

There is similarly a colossal impact of showcasing underlying Malaysia's new prevailing medical tourism styles Understanding its enormous potential and monetary benefits, the government continues to promote medical tourism to other nations in order to encourage new patients to seek medical treatment in Malaysia, all in the hopes of establishing Malaysia as a medical tourism hub in the region. In addition, the Malaysian government has launched its own website (www.medicaltourism.com.my) to promote medical tourism over the internet. In order to speed up medical tourism, the Malaysia Healthcare Travel Council (MHTC) was established on December 21, 2009. completely expectation on rebuilding the medical care region to attract more new patients (26). Likewise, different limited time exercises were held in various nations to help the nation picture for Malaysia by different specialists (for example Malaysian Association of Private Hospitals, Malaysian Association of Tours and Travel Agencies, Malaysia Airlines, and Malaysian External Trade Development Corporation) Ministry of Health, Tourism Service, Association of Private Hospitals of Malaysia, Malaysian Association of Tours and Travel Agencies, Malaysia Airlines, and Malaysian External Trade Development Corporation) (27). Malaysia has gained a lot of renown as a medical tourism destination as a result of these amazing end avourslately.

H1: In Malaysia, there is a strong link between destination image and medical tourism.

Service Quality

Quality has become a critical component in the rapidly growing purchaser-organized wellness market. No business can survive without providing great organisations. People from developed countries are travelling to developing countries, according to Bookman and Bookman. taking into account more reasonable anyway incredible medical thought (28). Quality is an imperative Concern for patients in the process of seeking therapy.

Grönroos concentrated on two major aspects of medical assistance quality: one is specific or mechanical quality, and the other is functional or utilitarian quality (29). In the medical services business, certain equipment and other relevant medical decision-making systems are used to test patients for treatment. Important quality, as determined by the aid provided by the medical services networks, for instance, organizations of staffs, chaperons, organizations and specifically the experts The patient's and their companions' well-being is crucial. According to several medical care studies, patients choose the practical quality above the specific quality, even if the specific quality may not be attractive (30). In any instance, the particular quality for the medical patient should be an excellent article on the grounds that the legitimate therapy of patients to a great extent relies on the appropriate analyses of the infections through cutting-edge gear.

Consequently, delivering quality administrations to the clients is an absolute necessity in request to draw in more unfamiliar those who are sick (31, 32). Various patients might isolate the display in thoughtful and relaxing that are provided by medical spot expert associations, according to Lam's audit (33). As a result, clients expect the labour force support organisation to be prompt, dependable, generous, honest, and capable. Kiran also discovered in his poll that the workforce considered quality to be the most important factor in buyer loyalty (34). Co-usable and accommodating employees will be required to instil confidence with the company's clients. The staff must provide patients with error-free recording.

There are various clinics stay alive in Malaysia which furnish quality consideration with a reasonable cost. Additionally, serious contributions are making a point of convergence of thought for the clients both from within the country and from overseas. The Malaysian government has taken steps to ensure that quality is a priority in medical tourism in like manner highlighted on further developing the overall medical services. In order to attract more medical tourists, both public and private crisis centres must be of high quality (35). Furthermore, the Malaysian government allows both private and public facilities to obtain Malaysia Society for Quality in Health (MSQH) accreditation and quality (ISO 9000, 9002) authentication in order to meet worldwide standards (36, 37).

H2: In Malaysia, there is a strong link between service quality and medical tourism.

Customer Service

Medical tourism, for example, is a customer-driven example (38) that involves administration sectors that distinguishes itself as the best minimal expense, top caliber and agreeable access medical choice for individuals all over the planet (39). Because of these characteristics, this new support business has gained international attention, which has piqued the interest of a large number of patients who see it as a viable alternative. As developing countries around the world make strident efforts to promote tourism, large sums of money are being invested in replacing their healthcare systems. As a result, the quality of healthcare in the country can be improved, and nearby individuals, who make up the majority of the population, can benefit. All things considered, This investment, as well as the unique interest sparked by unfamiliar patients, pose the risk of rising healthcare costs and a disregard for the needs of local residents, implying a negative view of the healthcare system genuine place to get-away nations (40).

With a choice of countries all over the planet like Patients from Costa Rica, Brazil, India, Thailand, Singapore, Malaysia, Taiwan, and other countries are requesting time to consider their options and make a decision place to get-away for the healthcare necessities. Thus, client assistance turned out to be vital where patients might define a boundary between their decisions among the accessible choices. This turns out to be vital for patients that impact their choice of country, clinical office and the subject matter expert. In any case, medical care is really an extremely individual and basic help (41) and a ton of thought should be practiced in the specific choice of dismissing to clinical get. Medical care is actually a

district where the result of the genuine assist will with being split between the specialist co-op and the specific patient. Thus, the legitimate allotment of time toward the patients should be predictable as far as administration. In this manner, individual center should be given to clients. A specific proportion of time should be given to the clients to their fitting treatment (42).

It is moreover an incredible sincerely depleting information, all the all the more so in times when the veritable medical services intercession searched for Patients from Costa Rica, Brazil, India, Thailand, Singapore, Malaysia, Taiwan, and other countries are requesting time to consider their options and make a decision. Subsequently, achieving a productive outcome can be just attainable when the patient has a real sense of reassurance in the encompassing, and will be in handle of his feelings. In this way, relying on medical vacationer is an abstract choice not entirely set in stone by emotional and psychological elements how the patient is feeling experiencing in those long periods of independent direction.

In accordance with the most recent thing of this client arranged medical services. In order to attract more medical travellers, Malaysian centres also supplement on the client organisations. Furthermore, in order to provide adequate comfort for this growing number of medical tourists, the Malaysian government intends to obtain an additional RM 335 million from private region crisis institutions to rebuild their frameworks (for example, increasing the number of beds) (44).

H3: In Malaysia, there is a strong link between customer service and medical tourism.

Conceptual Framework

This study has identified the relationships among the variables in the study based on the text evaluated accompanying outline:

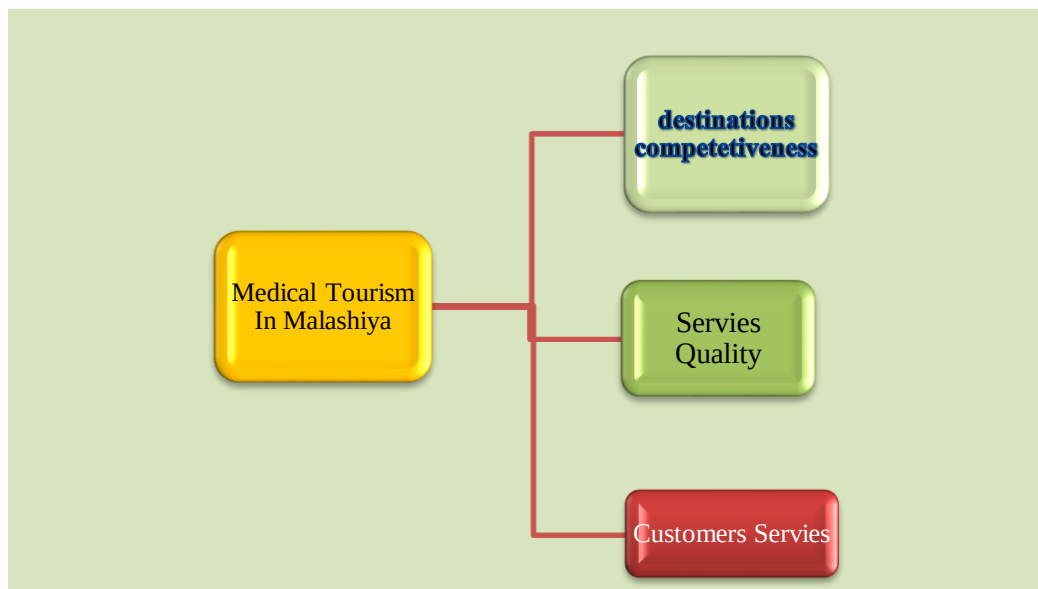


Figure.2: Conceptual Framework

Materials & Methods

Because the purpose of the investigation was to identify several factors that contribute to the growth of medical tourism in Malaysia, this study was clear in the same way that a causal analysis was (31,45). The true participants in this study were medical tourists who came to Malaysia with the primary goal of finding medicinal methods other than travelling. As a result, aliens, new workers, and visitors who live in Malaysia or visit for other reasons were not considered in this study (for instance friendly cooperations, visiting friends and family, official gatherings, etc) Due to the astronomical costs and unavoidable time constraints imposed by this audit, as well as the efficient difficulties in locating key respondents because they were dispersed throughout the destination, this focus was limited to medical travellers receiving treatment in Kuala Lumpur's crisis facilities region.

For data arrangement, this study used a non-probability judgement testing technique. This is more suited for this evaluation because many medical travellers are irritated when they have to answer questions, meet people, or judge their quality (46) and patients are not always in a condition to participate in activities an outline (47).

Full scale 300 reviews were eventually circled Between December 2012 and February 2013, 266 firm and fast responses were received from the respondents considered to be significant for extra examination. As SEM was used for data examination in this review, along these lines, a complete example size of 266 was thought of as sufficient (48-51). The poll was created in English. The poll for this examination was taken on from past investigates and hardly any inquiries were additionally added. In this investigation, a 5-point Li kert scale was used (52-55). To bolster the exploration's legitimacy, a few suggested methodology were utilized (56-62). A legitimate examination configuration was utilized and specialists' assessments were hoped to ensure that the estimating instrument's content is accurate. This study differentiated the models in order to obtain model authenticity assessment device and past broadly acknowledged estimation apparatuses. Finally, build legitimacy was utilized utilising the Cronbach alpha () test (61, 62). In exploratory variable assessment (EFA), a constraint of 0.50 was utilised to see the strength of the between connections among the variables things. At long last, for the unidimensionalityevaluation, corroborative variable investigation (CFA) was directed beforeevaluating the authenticity and constancy (63, 64).

Results

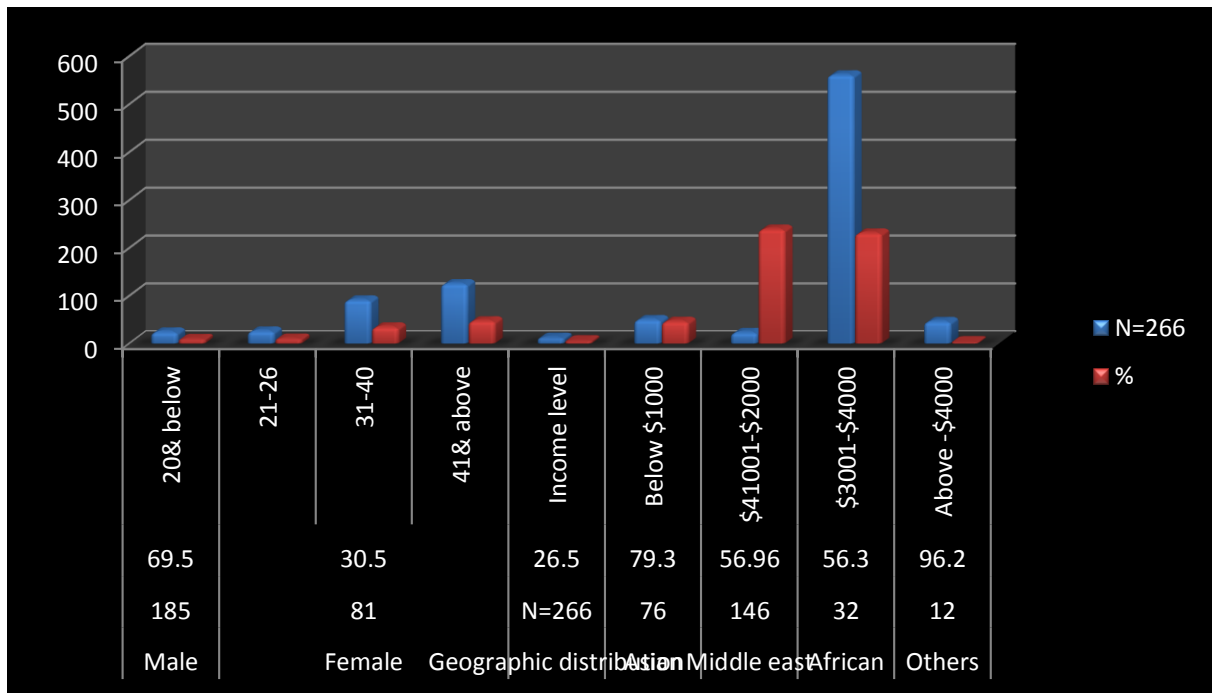
Table 3 shows that male respondents account for 69.5 percent of the total 266 respondents who took part in the survey.

Tables: 3.1 Demographic profile of the responsibilities

Variables	N = 266	%	Age	N=266	%
Male	185	69.50	20& below	24	9.0
Female	81	30.50	21-26	26	9.8
			31-40	91	34.5

			41& above	125	47.4
Geographic distribution	N=266	26.5	Income level	12	5.2
Asian	76	79.3	Below \$1000	50	46.3
Middle east	146	56.96	\$41001-\$2000	23	239.1
African	32	56.3	\$3001-\$4000	561	231
Others	12	96.2	Above -\$4000	46	2.3

It was fascinating to learn that the majority of people who came to Malaysia for medical tourism were from the Middle East (54.9%), followed by persons from Asia (28.6%), Africa (12%), and others (4.5 percent).



The majority of patients who came to Malaysia for treatment were in their forties and fifties at least 41 (47%). The most significant pay level social event who gets around \$3000-\$4000 a month involves hard and fast 33.8%.

Factor assessment was performed using chief part examination (PCA) to determine the strength of the connections between the items in the overview. The Sphericity concept by Bartlett has been useful in analysing the creates limitations. KMO was utilised to look for variables that should be deleted due to multicollinearity. The outcomes were really straightforward, and the particular variable appeared to be ideal for this factor analysis (KMO an impetus for this study is .818).

The degree of trustworthiness among the variables evaluated is communicated by the consistency estimations. Exploratory variable examination (EFA) was utilised to determine the strength of the connections between the things used in this

focus on study. Three full scale components were eliminated, yielding a total variance of 68.394. This means that the three components account for 68.39% of the total change. The elements that were deleted were renamed destination factors. power (ordinary variable stacking 0.8474), organization quality (typical part stacking 0.8013) and client support (normal element loading 0.7706) (Table 2).

Tables: 3.2 Factors loading of the measurement items

Variables	Mean	Std. deviations	Factors Loading
Destinations Competitiveness (Alpha= 0.8569)	2.631	.956	.323
Malashiyan Hospital Have Efficient Staff To Handel The Patients	3.245	.369	.162
Malashiysian Hospital Adopted A Different Strategy For Medical Tourists	3.261	.962	.163
Communications Is Not A Barrier As English Is Widely Used In Malaysian	3.6314	.965	.569
I Frequency Visit Malaysia For Medical Treatment	4.003	.362	.46.2
Malaysia Hospitals Are As Well Recognized	5.231	.462	.356
Services Quality (Alpha = 0.8013)	4.563	.964	46.7
Providing Right Information's To Patients In Malaysia Hospital Is Good	4.230	.361	.569
The Current Information Services In The Malaysian Hospitals Can Be Improved	4.693	.493	.793
The Patients Should Always Get The Value For The Money They Spent In The Malaysia Hospitals	1.936	.564	.564
Malaysia Hospitals Provide A World Class Service	8.693	.468	.238
Customer Service Tourist Are Very Hard To Satisfy	2.399	.893	.693
Achievement A Good Reputations In The Patients Mind Is Hard	4.630	.468	.469
The Hospitals Cannot Offer All The Services Required By The Patients	5.362	.663	.795

Moreover, a corroborative variable investigation (CFA) was furthermore prompted check the element a framework for assessing the factors that contribute to the advancement of medical tourism in Malaysia. The assessment of unidimensionality is essential for determining the validity and unchangeable quality of a product. Unidimensionality is obtained while estimating items are completed with acceptable variable loadings for the various lethargic creates. To find unidimensionality, everything with a low variable stacking was removed, and the process was repeated until just the essential was left. The authenticity of each assessment model was fostered in this way, as the R^2 of the saw factors was greater than 0.40, indicating that the model was reasonably well centred.

At long last, SEM was used to determine the basic relationship between the variables, as shown in Fig. 2. This evaluation has chosen one fit file from each order in order to meet the GOF threshold (out and out fit, gradual fit and closefisted fit). RMSEA and GFI were used to meet the requirements for out and

out fit, AGFI and CFI for gradual fit, and Normed Chi Square for miserly fit in this study (Table 3). The trustworthiness of fit files (GOF) was not refined during the critical run of the assessment model. As a result, this study expects to adjust the model even further to fulfil the GOF. As a result, it was necessary to examine the MI files in order to identify the multi-collinearity issues. It was discovered that the MI considers more than 15 places in the span of e13 and e14, e14 and e16, and e5 and e7. Similarly, these items were linked by the twofold scramble to create this "free boundary." The model was not set in stone once the multi-collinearity issue was resolved, and the vital level of GOF was nurtured. The degree of relationship between elements leading to the improvement of medical tourism in Malaysia is depicted in Fig. 2.

<i>Fit results</i>	<i>Flitted measurement Model</i>	<i>Flitted structural model</i>
NORMED CHI SQUIRE	3.006	2.962
GFI	0.960	0.267
AGFI	0.339	0.946
CFI	0.936	0.394
RMSEA	0.963	0.468
P- VALUE	0.791	0.971

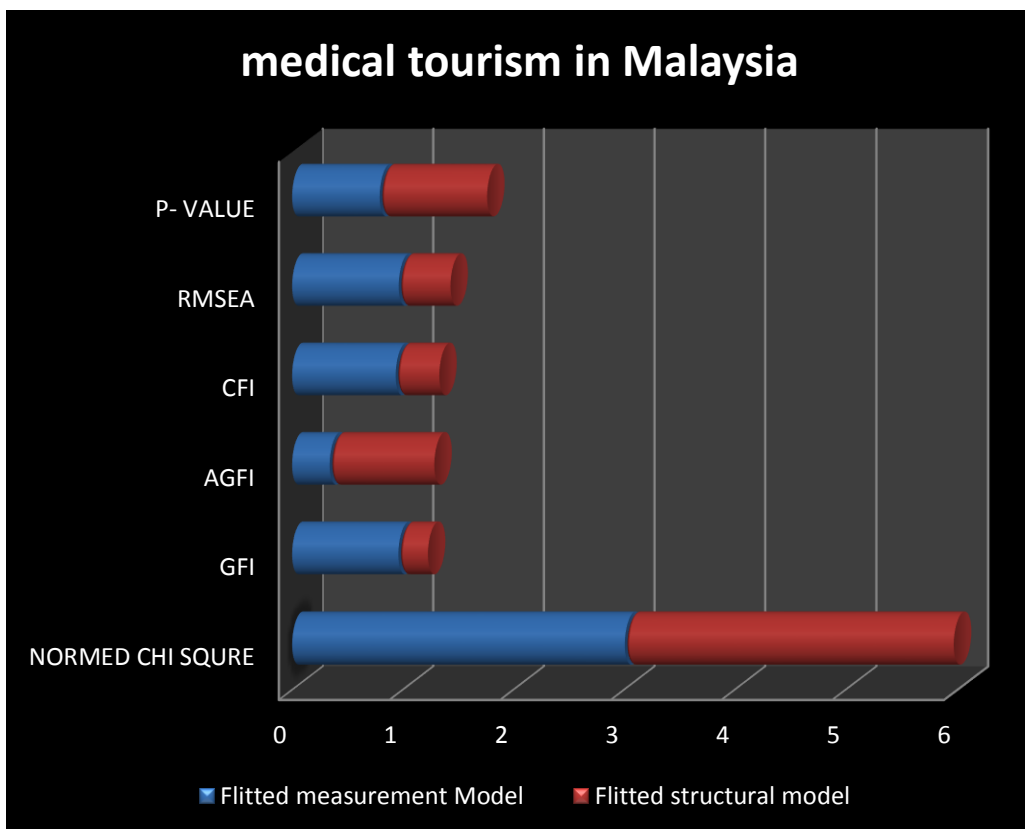


Figure: 3 Medical Tourism in Malaysia

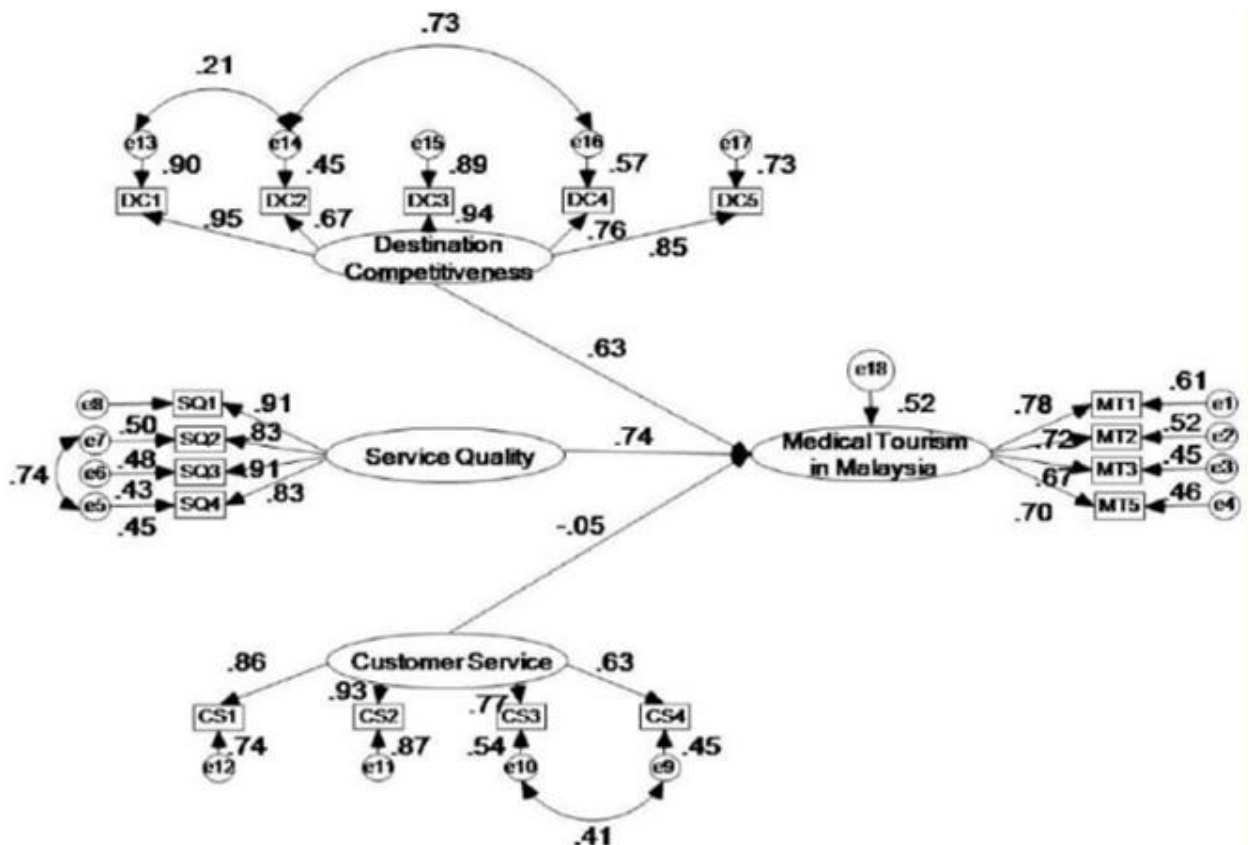


Figure 4: Structural Model of the study

Hypothesis Testing

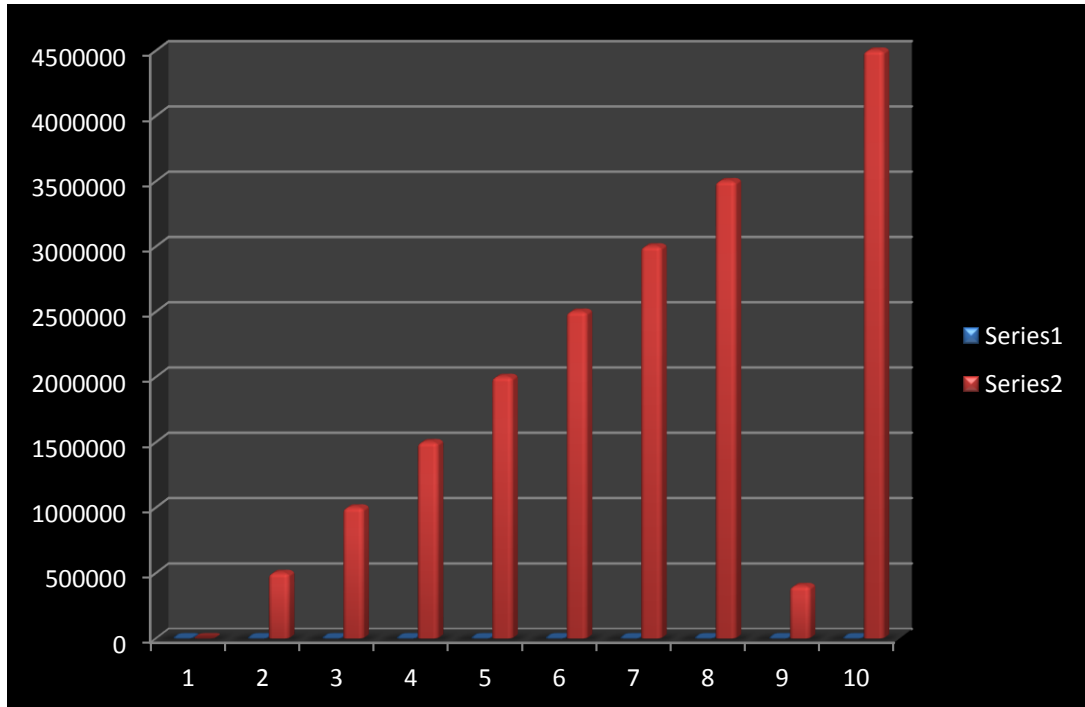
The essential condition model was utilised to examine the link between constructs based on the previously described recommended fit lists. $P = 0.068$, Normed Chi-square = 2.986, GFI = 0.930, AGFI = 0.921, CFI = 0.930, and RMSEA = 0.057 were all acceptable fits for this model (Table 3). The backslide weight for destination force in the assumption for medical tourism in Malaysia is essentially exceptional, corresponding to zero at the 0.001 level and the manner in which coefficient is 0.63, as shown in figure 2. Along these lines, H1 is acknowledged as a destination reality that plays a significant role in influencing medical travellers' decisions to visit Malaysia as a medical tourism destination.

Furthermore, the backslide weight for organisation quality in the estimation of medical tourism in Malaysia is rarely exactly equal to zero at the 0.001 level, and the manner in which coefficients are calculated is inconsistent. is 0.74. As such, H2 is in like manner recognized as organization quality basically impacts Malaysia was chosen by medical explorers as a potential medical tourism destination. Nonetheless, At the 0.05 level ($P = 0.386$), the backslide weight for client care in the assumption for medical tourism in Malaysia isn't fully distinctive equivalent to zero, and the way in which coefficient is similarly 0.05.

(Table 4) As a result, H3 is excused because it implies that client care has no bearing on medical travelers decision to visit Malaysia for medical tourism. This could be as a result of the statement that client assistance would not be evaluated prior to receiving treatment in the chosen location. As a result, this might be regarded as a post-bargains organisation where medical tourists must first profit from treatment at their preferred destination.

Tables: 4 Standard estimations of the main model

Standardized regression weight			S.E	C.R	<i>p</i>
Medical tourism In Malaysia	←	Destination competitiveness'	.0234	5.263	***
	←				
	←				
Medical tourism In Malaysia	←	Service Quality	.135	0.468	***
	←				
Medical tourism In Malaysia	←	Customer services	0.134	2.630	.3233



2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
0	500000	1000000	1500000	2000000	2500000	3000000	3500000	400000	4500000

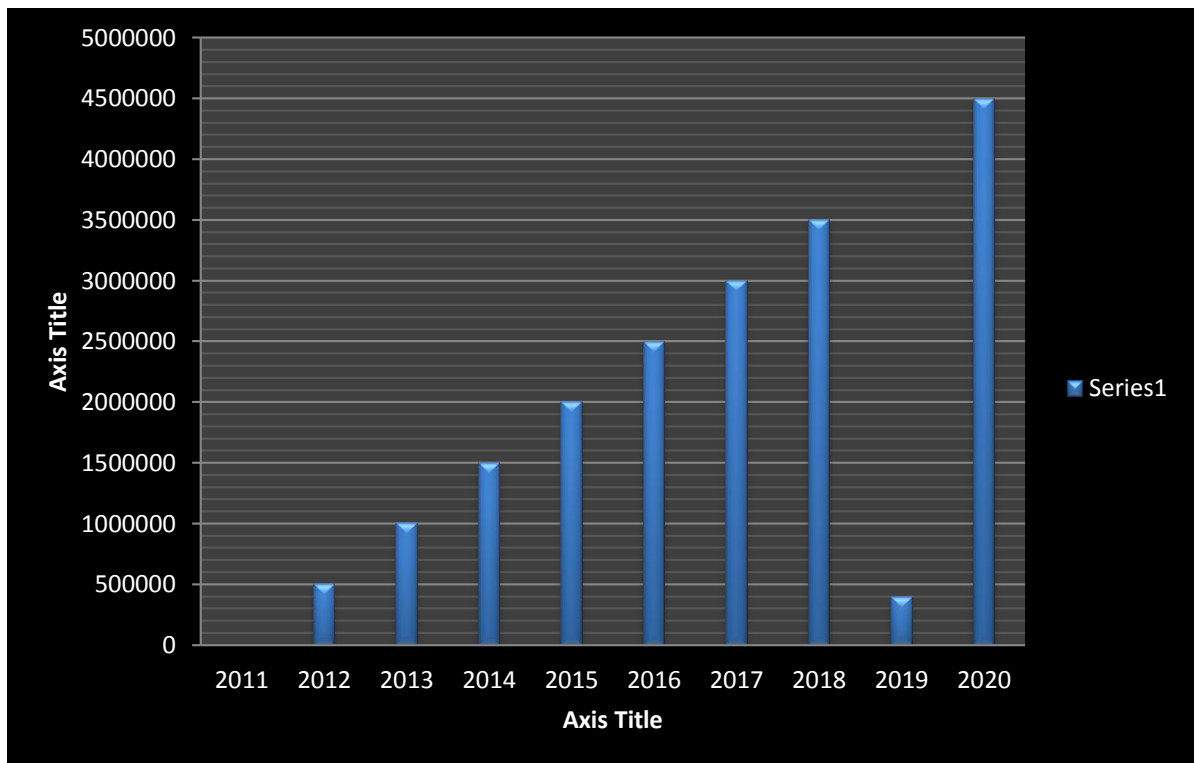


Figure: 5Medical tourism in Asia

Discussion

Medical tourism in Asia is fast growing. As numerous Asian countries provide medical tourism, Malaysia will need to make significant improvements in order to become a popular destination for medical tourists. Because medical tourism is a subset of the broader health industry, patients are at the heart of its development. The findings of this study identified critical aspects for medical tourism in Malaysia to be supported. Regardless, the findings revealed that the Malaysian government's work in promoting their destination image is highly strong; however, there is consistently an open door to develop in the medical tourism industry. The results are as follows: basically the same as what Helble and Johnston have examined before [39, 40]. Besides, the successful limited time exercises Malaysia's government, as well as other private organizations have in like manner affected different medical explorers to travel to Malaysia, which is similar to the Philippines past discoveries (for instance Chua; Shankar and Fazim) (36,37).

As far as administration quality, larger partThe contemporary organisations introduced by Malaysian facilities are satisfactory to the majority of patients. The discoveries are similar to Lam and Manaf, where the creators noticed assistance

quality, such as providing accurate data to patients, excellent data benefits, patients' care as an incentive for the money they spent on their treatments, and providing first-class organisations, to name a few major indicators for holding as well as attracting more medical tourists (33, 35). Regardless, the findings demonstrated that present practises toward client organisations in Malaysia are not very high. This has provided the required indicators for Malaysian facilities to thoroughly investigate the situation and determine the best course of action for detaining and attracting arranged medical passengers as soon as possible. This conflict has been preserved in previous compositions as well (29-32, 34, 38). As meeting the needs of clients should be the primary goal of countries promoting medical tourism, the Malaysian government must recognise the various requirements through which it can effectively propel itself as a key player in the medical tourism field in order to attract and retain future medical tourists. Furthermore, there is a need to advance various medical cases of overcoming adversity, as well as the organisations they promote, in order to attract more new patients. It is evident from this evaluation that the destination is worth seeing intensity assumes a significant part in the medical vacationer's mind. They ought to comprehend that thought processes The needs of ordinary tourists and medical travellers are not the same. Explorers travel better places for redirection, unwinding, or sightseeing in general tourism. Regardless, medical tourism is distinct in that regard, as travellers visit other nations for minor or significant precautionary reasons, which may include their health.own wellbeing. In this way, expanded help quality alongside better client organizations and authentic promoting methods are critical to attracting and retaining incoming medical tourists in Malaysia.

Conclusion

This research is extremely fundamental, both conceptually and practically. This study contributes to the tourism industry's speculative progress by presenting a coordinated relationship among numerous viewpoints that contribute to the advancement of medical tourism in Malaysia. On the other hand, this study can assist various investigators in the hospitality and medical industries, as well as people involved in such industries, by serving as a framework for comprehending how a destination's image, organisation quality, and better client service have a strong impact on clients' perceptions and demeanour toward medical tourism viewpoints in Malaysia.

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