

ROLE OF SOCIAL MEDIA MARKETING ON DESTINATION CHOICE AND REVISIT INTENTIONS: A STUDY OF FOREIGN MEDICAL TOURISTS IN INDIA

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Abstract

Past research has established the application of social media in tourism and hospitality in light of the growing importance of social media in both travelers' decision-making and tourism operations and management. Despite the increasing use of social media marketing as an avenue to inform, educate and answer queries to international patients through articles, blog posts and podcasts, there is little empirical evidence for the effect of social media marketing influencing medical tourists destination choice and revisit intentions. This study addresses these issues by providing empirical support, suggesting that social media communication play crucial role in promoting India as a medical tourist destination. Exploratory qualitative (semi-structured personal interviews) and quantitative (self report survey) methods were employed to test the formulated hypotheses. Results show that social media advertising has a significant influence on media tourists' destination choices and decisions. The results provided strong evidence that social media content has significant impact on medical tourists' cognitive, affective and behavioral attitudes towards Indian medical tourism as destination and revisit intentions. Theoretical and managerial implications of the research are discussed.

Keywords: *Medical tourism, Destination choice, Revisit Intention, Social media marketing, India.*

JEL Classification: *O1, Z3*

I. INTRODUCTION

Medical tourism is a fast growing niche market in the tourism industry and plays a crucial role in the global tourism. Since its inception, it has been reported that medical tourism is one of the most prospective and profitable tourism sectors in developing countries due to the benefits it accrues to both medical tourists and the host country (Cham *et al.*, 2016). The Indian medical tourism industry is projected to surpass US\$ 42,237.47 Million by 2032, with an estimated value of US\$ 7.417 billion in 2022. According to Future Market Insights (2022), demand is expected to grow at a healthy 19% CAGR from 2022 to 2032. Indian medical tourism accounts for approximately 6.5% of the global medical tourism market due to some of the leading factors, such as affordable treatment costs, the availability of the most advanced medical technologies, highly-skilled doctors, and shorter waiting periods that make India preferable one for medical tourism (Clinic Spots.com, 2022). Moreover, India has been ranked 10th in the global medical tourism index (MTI) for 2020-2021 out of 46 destinations in the world (Medical Tourism Association, 2021). Although India has emerged as a prominent medical tourism destination (Bagga *et al.*, 2020), recent studies (Malhotra & Dave, 2022) stated that the medical tourism industry is facing the heightened impact of rapid disruption and increased competition. Moreover, prior research indicates that tourists only consider destinations with a compelling

image and that information sources support them in building this image in plenty of ways (Gartner, 1993) as this is a high-risk and high-involvement industry. It is therefore understandable that medical tourism providers need to offer prospective patients across world with timely and credible information. Given the proliferation of the internet and its online platforms the medical tourism providers are using social media advertising extensively for communication (to build awareness and trust) and marketing in the tourism industry (Chung & Koo, 2015). Several forms of social media communication sites such as media sharing sites (e.g., YouTube), blogging (e.g., Blogger), microblogging (e.g., Twitter), networking (e.g., Facebook), bookmarking sites (e.g., Delicious), review sites (e.g., Trip Advisor), knowledge sharing sites (e.g., Wikitravel) are popular among tourists (Alizadeh & Isa, 2015; Leung *et al.*, 2013).

Past research (e.g., Kavoura *et al.*, 2015; Chan & Denizci Guillet, 2011) have discussed the application of social media marketing in tourism and hospitality in light of the growing importance of social media in both travelers' decision-making and tourism operations and management. Studies have examined the benefits of social media as a marketing and promotional tool for providers (Howison, Finger & Hauschka, 2015). Consequently, most medical tourism businesses have been integrating social media marketing into their websites to enhance medical tourists' travel information searching experience (Medhekar, 2018; Das, 2017, John, 2017, John *et al.*, 2018), tourists' travel planning processes (Amaro, Duarte, & Hernandez, 2016), word of mouth (Hudson,

Roth, Madden, & Hudson, 2015), and user involvement and perceived enjoyment (Amaro *et al.*, 2016). Despite several studies investigating the wide adoption of social media by tourists and tourism providers (Chen *et al.*, 2016; Mariani *et al.*, 2016; Lyu, 2015; Bowen & Baloglu, 2015; Guillet *et al.*, 2015; Howison *et al.*, 2015; Roque & Raposo, 2015; Tilly *et al.*, 2015), literature focusing on the analyses of social media marketing strategies in the context of medical tourism is still limited. Despite the wide adoption of social media by both tourism consumers and suppliers in recent years (Chung & Buhalis, 2008; Leung, Lee, & Law, 2011), the successful practice of manipulating and managing social media marketing still remains largely unknown to practitioners and scholars. In view of the increasing importance of social media and the absence of comprehensive information on social media marketing in the tourism and hospitality context, the objectives of the research are (1) to identify the most common social media marketing platforms used by healthcare service providers to promote Indian medical tourism, (2) to assess the effect of social media marketing content on destination choice of a medical tourists, and (3) to examine the effect of social media marketing on foreign tourists revisit intention. The insightful inputs enable medical tourism providers formulate strategic decisions regarding connecting and engaging with medical tourists across the world.

II. REVIEW OF LITERATURE

Successful social media is perceived to be an effective communication channel for both tourists and tourism providers for collecting several sources of travel-related information (Wang & Yan, 2022; Chung & Koo, 2015). A few studies have so far focused on the social media applications among tourism providers which enable them to interact, engage, influence and impact current and potential tourists (John *et al.*, 2017). Previous research (e.g., Moutinho, 1987) mentioned information search as an explicit demand to consult multiple sources before making a purchasing decision. Destination marketing practices are massively affected by developments in information and communication technologies because destination products are fragmented and information-intensive in nature. The advent of social media is transforming the tourism industry. Kaplan & Haenlein (2010) stated that social media is a collection of internet-based applications that are constructed on theoretical and technological foundations of Web 2.0 and that facilitate the creation and sharing of content online. Social media comprises social networking sites, consumer review sites, content community sites, wikis, Internet forums, and location-based social media. It is a novel innovation connecting people socially through mobile and web-based technology

blending information and communication technology with social interaction as the main motto through the construction of words, pictures, videos, audio, etc.

Social media marketing plays a crucial role in marketing and promoting tourist destinations. Social media allows reaching global onlookers with restricted resources. According to Leung *et al.* (2013), social media is widely used for communication and promotion in the tourism industry. It allows for the delivery of information to current and potential tourists. The service providers can use social media to enhance brand awareness, attitude, and consumer commitment. According to the study of Kang (2014) on exploring the factors influencing the travel motivations of US medical tourists, the findings of the study suggested that medical tourists choose not only the provider but also the destination and hence the customer image of the medical tourism destination is paramount. Patients aspiring to become medical tourists do exploratory research on the internet for gathering information and making decisions related to the medical tour. Customers now have the chance to communicate with other customers thanks to social media platforms (Berthon *et al.*, 2008). Consumers are inclined towards social media sites in search of information and moving away from traditional media sources such as television, radio, and magazines. Internet users now have access to social networking sites and widespread online exposure thanks to Web 2.0 technology's dominance. The global medical tourism market is growing at the rate of 25% per year (Howard, 2015), and the Internet is playing a leading role as a platform for the dissemination of medical tourism business information (Lunt, Hardey, & Mannion, 2010; Speier, 2011; Medhekar & Newby, 2012) as cited by Anitha Medhekar (2018). These changes in the market trend are encouraging tourism marketers to opt for social media as a promotion platform.

III. DIFFERENT SOCIAL MEDIA MARKETING PLATFORMS

Through social media and other online platforms, medical tourism marketers could start implementing more participatory modes of communication and promotion. Online visitors' comments, reviews, and queries must be monitored, and adequate responses have to be posted promptly to generate a positive destination image among medical tourists, residents, travel and tourism operators, and other stakeholders to ensure sustainable growth in this sector (John, 2017). For a decade, the Indian healthcare system is undergoing a massive transformation and the Indian private healthcare players have been witnessing unprecedented growth. India has been boarding a voyage of healthcare industry makeovers for a few years. The growth in the

internet arena added to medical advancement and human technology groomed the healthcare industry into a different version. Social media enables healthcare organizations to connect with their customers at a more personal level which is not possible in conventional marketing channels of communication. Social media can renovate the environment and interaction between patients and healthcare providers. The following are different types of social media.

a) *Social Networking* – Users are allowed to interact with each other in different ways. Examples: Facebook, Twitter, and LinkedIn. Facebook can be used to build a business profile linking website, users can post comments, “like” the pages, and users can give their reviews. On Twitter, a company profile can be posted, retweet positive customer tweets, and respond to customer questions via tweet or direct message.

b) *Photo sharing* – Instagram, Pinterest. Instagram allows us to show photos and short videos followed by a caption. Users can post a live video or create Instagram stories that disappear after 1 day. Users can interact with each other through tags, likes, comments, or direct messages. Pinterest is an e-commerce site with photo-based content for the sale of goods.

c) *Video sharing* – Youtube, Vimeo - Video-based social networking platform. Long videos can also be played on Youtube which is not possible on Facebook stories and Facebook Live.

d) *Interactive media* – Snapchat, TikTok. Allow users to share photos, videos along with AP/VP filters, music overlays, and interactive games.

e) *Blogging/community building* – Tumblr, Reddit. Allows users to post memes, events, politics, and pop culture.

According to Ventola (2014), the following are different categories of social media vis-à-vis social networking sites (Twitter, Google Plus, Facebook, MySpace), Professional networking (LinkedIn), Media sharing (YouTube, Flickr), Content creation (Blogs [Tumblr, Blogger] and microblogs [Twitter]), Knowledge/information aggregation (Wikipedia), (Second Life) Virtual reality and gaming environments. According to healthcare digital.com, the three major social media platforms used by healthcare organizations are Facebook, Twitter, and Youtube for getting connected to the world. As per the information provided on <https://www.meditwitt.com/social-media-marketing/>, the five major social media platforms used by Indian hospitals include Facebook, Twitter, LinkedIn, Youtube, and Instagram. Social media can help companies to market their products and services to other businesses or consumers. These social media sites include Google, Facebook, YouTube, Twitter, and LinkedIn.

IV. ROLE OF SOCIAL MEDIA MARKETING IN PROMOTING MEDICAL TOURIST DESTINATION

Literature review on role of social media in promoting medical tourism underscores that social media advertising has significantly enhanced consumers’ ability to acquire information and knowledge of public events, products, and services (Bertot *et al.*, 2010). Furthermore, social media improves information exchange, reduces uncertainty, and brings users a sense of belonging, fundamentally changing individual travel plans and consumption patterns of travel and leisure (Hudson & Thal, 2013). Therefore, when consumers search for online tourism information, social media has become the essential way (Xiang & Gretzel, 2010) and a prominent place of creating, distributing, and marketing content that is unique to the users (Sin *et al.*, 2020). Thus the role of social media marketing in medical tourist behavior has gained traction in academic research. Some studies focus on adopting social media tourism information and use the technology acceptance model to explain the motivation or influencing factors of potential tourists’ adoption of social media information (Chung *et al.*, 2015; Cheunkamon *et al.*, 2020). It is suggested that potential tourists are more inclined to use the contents of social media with similar interests to themselves when making destination choices and travel plans (Ayeh *et al.*, 2013). The following subsections will explain the role of social media in several ways to promote a medical tourist destination.

The widespread application of social media as a marketing communication tool during the last decade has been responsible for attracting a significant volume of academic research (Li, Larimo, & Leonidou, 2022). Substantial research about the usage and effect of social media has proliferated in the last few years. Social media can take many different forms such as SNS (Facebook, LinkedIn and Google+), blogs and micro-blogs (Twitter), collaborative projects (Wikipedia), video-sharing communities (YouTube), virtual game worlds (World of Warcraft), virtual social worlds (Second Life) and instant messaging (Mxit), although most of these social media categories are often collectively referred to as SNS (Kaplan & Haenlein, 2010). In recent times, medical tourism operators use social media marketing to initiate and participate in dialogues with consumers, foster relationships, deliver customer support, create brand communities, and connect with consumers by using interactive applications (apps) such as posting videos and photos, responding to comments, and marketing communications. The growth and development of social media has prompted change in marketing communications and the consumer decision-making process (Kozinets *et al.*, 2010). The literature review also supports the critical role social media in

hospitality, tourism and travel (HTT) marketing communications as it provides unprecedented opportunities to engage and communicate with their potential consumers throughout the stages in the consumer buying process - awareness, evaluation, and conversion (e.g., Chu, Deng & Cheng, 2020; Kumar *et al.*, 2019; Liu *et al.*, 2019; Hamouda, 2018). The medical tourism providers use advertisements, stories on Facebook, YouTube shows hosted by a hospital with one specialty doctor per week, infographics and video series, etc to create awareness among potential medical tourists.

Thus, social media is perceived as an important tool of tourism marketing that can enhance the destination's reputation (Yadav & Arora, 2012). Moreover, literature review mentions that social media helps identify solutions and make follow-ups with medical tourism patients to close the deal. A growing body of research has unravelled that social media is a key tool in facilitating information exchange among patients, healthcare providers, and other stakeholders (Kang & Schuett, 2013; Hudson & Thal, 2013; Morosan *et al.*, 2014; Anitha, 2016). These platforms help potential medical tourists to interact with other patients, and healthcare professionals, go through testimonies, and experiences of medical tourists, get their doubts clarified, directly interact with hospitals, and finally guide them during medical tourist destinations choice. Social media facilitates healthcare providers for promoting their services, accept as an advertising medium. However, few researchers focused on quantitative and qualitative empirical research to explore the extent of the use of social media tools (e.g., YouTube, Facebook, discussion forums, and Twitter) for disseminating information to medical tourists and healthcare promotion. The present research endeavoured to explore and examine whether social media helps the medical patients while making destination choices, and cost comparisons for medical treatment abroad.

Previous research (e.g., John, 2017; Chung *et al.*, 2015; Cheunkamon *et al.*, 2020) mentioned social media marketing has emerged as a powerful tool for destination marketing, allowing medical tourism providers to reach a global audience effectively, and make medical tourism destinations sustainable. John *et al.* (2018) identified the essential functions of social media in this industry are (1) its ability to collect data relating to customer behavior, and post-experience feedback (2) its use as an effective promotional channel (3) its potential to enable engagement with customers. For the application of social media, the content should be informative, highlight the destination's healthcare facilities, expertise, eco-friendly initiatives, and ethical practices and reach the target audience with appropriate content. Social media platforms like Facebook, YouTube, and Instagram are identified to be effective platforms. Moreover, the

content generated through social media is becoming increasingly important and can have a significant influence on consumer destination brand awareness (Aydm, 2016; Kim & Park, 2017; Moro & Rita, 2018; Sigala, 2018). Consumers can be affected by social media content, particularly while comparing destination brands and making their final travel purchasing decisions (Kim & Chae, 2018; Morosan & Bowen, 2018). Social media marketing content can also introduce consumers to each other, satisfying their expectations for social status and prestige (Leung, 2009). For instance, if an individual who has visited a specific tourism destination posts about it on social media, others can like the content, and those followers and friends may then desire to visit the same tourist destination at a later stage.

Tourists' destination choice has been a mainstay in tourism scholarship over the past three decades (Karl, Reintinger, & Schmude, 2015). Literature review notes that tourists destination image is an attitudinal concept formed from a complex process in which tourists develop a mental block based on their perceptions, ideas, beliefs, impressions, identities or feelings for a particular destination since the destination image is undoubtedly one of the most imperative factors for the tourists to decide to travel (Byon & Zhang, 2010; Chen & Tsai, 2007). Past research revealed that image has been found to have an impact on tourists' level of satisfaction based on their destination experience (Lopes, 2011). Previous research underscores the development and projection of a destination image is a critical element in promoting the destination and its brand (Khan *et al.*, 2016). A review of literature on medical tourism shows that image can create awareness among the tourists about a destination, and this has a direct effect on the tourists' decision-making for a destination choice (Cheng & Lu, 2013; Khan *et al.*, 2016a). Previous studies (e.g., John, 2017; Chung *et al.*, 2015; Cheunkamon *et al.*, 2020) mentioned social media marketing has emerged as a powerful tool for destination marketing, allowing medical tourism providers to reach a global audience effectively, and make medical tourism destinations sustainable. Social media facilitate travel and the implementation of destination choices (Bakr & Ali, 2013). The social media marketing communications can create medical tourism destination image of a country by highlighting several attributes, such as tourism attractions, general infrastructures, hospitals' reputation, hospitals' service quality, medical amenities, social environment, transportation services, accommodation, supportive services, food, personal safety and communication (John *et al.*, 2018; Cham *et al.*, 2019). For ensuring social media as a potential tool in creation of destination image, the content should be informative, highlight the destination's healthcare facilities, expertise, eco-friendly initiatives,

and ethical practices and reach the target audience with appropriate content.

Social media marketing communications has been found to have a significant positive impact on medical tourists' perception of destination image (Gan & Frederick, 2011; Musa, Thirumoorthi, & Doshi, 2012) as social media websites provide the public with a platform to communicate, discuss, chats, video conference, and share opinions; and they have successfully attracted millions of users (Bruhn, Schoenmueller, & Schafer, 2012; Kaplan & Haenlein, 2010). Here social media communication comes in two forms: (1) from the communication developed by the healthcare providers (hospitals-created social media), and (2) from the customers (user-generated social media). Previous research showed that the content created by the firm in their social media has a significant influence on tourists' perception of destination image (Zeng & Gerritsen, 2014). Social media facilitate travel and the implementation of destination choices (Bakr & Ali, 2013). Literature review identified that social and digital media has not only increased customer engagement but also paved the way for customers to become active co-creators, contributing to the value of businesses (Lemon & Verhoef, 2016). Customers are becoming increasingly conscious of competing offerings and engage in active interactions with service providers and other stakeholders through social media (Lariviere *et al.*, 2017). Prior research revealed that more than 80% of marketers want to win over engaged customers in order to increase advocacy and trust (Pansari & Kumar, 2017). Past research also mentioned that engagement with social media could also help tourists justify their choices and reduce post-purchase dissonance, including their destination choice (Tussyadiah *et al.*, 2018). Therefore, engagement can be viewed as a social exchange. Alghizzawi *et al.* (2020) found that Facebook was considered as effective social media platform while choosing the medical tourism destination in Jordan. Further, some studies argued that the overall image of a destination has an impact on tourists' intention to revisit a destination (Hallmann, Zehrer, & Muller, 2015; Li, Wen, & Ying, 2018). However, the customer engagement mechanism in social media has rarely been thoroughly examined, particularly in the field of tourism social media (Kanje *et al.*, 2020).

In the very recent study of John Cote (2023), it is mentioned that with the rise of digital platforms and social media marketing has emerged as a powerful tool for promoting medical tourism destinations and healthcare providers. This study explored the impact of digital word-of-mouth marketing on the medical tourism industry, its effectiveness in attracting and influencing potential patients, and key factors that contribute to the success of such marketing campaigns, including patient satisfaction, trust, social media engagement, and online reputation

management. The findings suggest that digital word-of-mouth, online reviews, testimonials, and social media discussions play a crucial role in shaping the perceptions and decision-making processes of prospective medical tourists and the choice of destination and healthcare provider. Despite the increasing role of social media in promoting tourism activities in different destinations across the globe, there is little research that has been conducted with regards to social media usage and tourism destination-decision (Lee *et al.*, 2018; Marder *et al.*, 2019). Hence, the following hypotheses are formulated:

H1: Perceived usefulness of Social media content positively affects medical tourists' cognitive, affective and behavioral attitudes towards tourists' destination choice.

H2: Social media advertising content has a positive direct effect on medical tourists' engagement with medical tourism providers.

H3: Social media advertising has a positive direct effect on medical tourists' destination decision making.

H4: Social media advertising has a positive direct effect on medical tourists' intention to revisit destination.

V. RESEARCH METHODS AND DATA

Given the little information available on role of social media advertising in Indian medical tourism, both the exploratory qualitative and quantitative research methods were employed in this study. Data were collected by self administering a pre-structured, pre-tested, reliable, and validated questionnaire to 155 foreign medical tourists who visited 42 Indian medical hospitals for availing of various medical services and treatments. With the help of SPSS software version 20.0, the data was tabulated, graphically represented, and analyzed. Necessary diagnostic tests like reliability and validity were applied to the survey instrument before embarking on full-fledged survey. The respondents were selected using a convenience sampling approach with a non-proportionate sample technique. The questionnaire utilized a five point Likert scale for rating. Majority of items of measurement were taken from social media in medical tourism and tourism literatures. An eight-item scale (Park *et al.*, 2007; Zhang *et al.*, 2014) operationalised social media content. The liking and preference constructs, which evaluate affective attitudinal responses, were adapted from Ducoffe (1996), Duncan and Nelson (1985) and Lin *et al.* (2008), Martin *et al.* (2002) and Wang and Sun (2010), respectively. Three items related to information search adapted from Kang & Schuett, 2013; Rinka & Pratt, 2018). Three items related to evaluating alternatives adapted from Magno & Cassia (2018). Five items related to user generated social media and ten items related to destination image

and choice was adapted from Cham et al. (2020). Lastly, the intention to revisit was adapted from the three-item scale developed by Kim, Kim, and Kim (2009) and (Smith, 2004) were used to assess travel revisit intentions. Both descriptive and inferential statistical techniques such as exploratory factor analysis and Regression analysis were performed to test the formulated hypotheses.

VI. RESULTS & DISCUSSIONS

The table 1 provides a detailed analysis of the characteristics and social media usage of foreign tourists. Male foreign tourists account for 68.39% of the total. Similarly, 73% of foreign medical tourists are married. About 55 % of the foreign medical tourists belong to 41-60 years age group, interestingly the middle age group formed most of the medical tourists. Majority (35 %) of the respondents are from Bangladesh followed by African countries (10 %) and Oman (7.74%). The data analysis revealed that majority (61.93%) of the foreign medical tourists visited India for the purpose of heart surgery related treatments followed by organ transplants (11.62%), infertility related treatments (10.32). Mere (7.09 %) of respondents visit India for cosmetic surgeries. Majority of the foreign medical tourists

(29.04 percent) are using social media more than four years. (70.96 percent) are using social media every day.

The daily time spent on social media among foreign medical tourists reveals majority (69.67 %) uses social media for 3-4 hours. A significant proportion of foreign medical tourists (63.23%) Table 5.8 revealed that out of 155 respondents, only 98 (63.23%) respondent stated that they collected medical tour information through social media platforms while deciding upon medical tour while 36.77% of medical tourists informed that they collected medical tour information through sources other than social media advertising, such as their referral doctors, family friends, neighbours, etc through word of mouth communication. The data analysis further revealed that out of the total 98 foreign medical tourists who collected information through social media regarding medical tour, 69.39% respondents used FaceBook for collecting information regarding different components of medical tour, 14(14.29%) respondents used YouTube, 9(9.18%) respondents used Twitter and 7(7.14%) respondents used other social media platforms. The results imply that Facebook emerged as the most preferred platform followed by YouTube and Twitter.

Table 1 Sample Description

| Demographic Description | Frequency | Percentage | |
|--|--------------------|-------------------|-------|
| Gender | Male | 106 | 68.39 |
| | Female | 49 | 31.61 |
| Age | 0-20 Years | 9 | 5.81 |
| | 21-40 Years | 36 | 23.23 |
| | 41-60 Years | 85 | 54.84 |
| | 61-80 Years | 21 | 13.55 |
| | 81 years & Above | 4 | 2.58 |
| Marital Status | Married | 113 | 72.90 |
| | Unmarried | 31 | 20.00 |
| | Single/Divorced | 11 | 7.10 |
| Type of Medical Treatments Received | Heart Surgeries | 96 | 61.93 |
| | Organ Transplants | 18 | 11.62 |
| | Infertility | 16 | 10.32 |
| | Cancer | 14 | 9.04 |
| | Cosmetic surgeries | 11 | 7.09 |
| Usage of Social Media | ≤ 1 year | 10 | 6.45 |
| | 1-2 years | 32 | 20.65 |
| | 2-3 Years | 38 | 24.51 |
| | 3-4 Years | 30 | 19.35 |
| | > 4 years | 45 | 29.04 |
| Daily Time Spent (long on duration) on Social Media | <1 Hour | 8 | 5.16 |
| | 1-2 Hour | 14 | 9.04 |
| | 3-4 Hour | 108 | 69.67 |
| | >5 Hour | 25 | 16.13 |
| Log-on Frequency on Social Media | Daily | 110 | 70.96 |

| | | | |
|--|-----------------------------|------|-------|
| | 2 – 4 times a week | 20 | 12.91 |
| | Once a week | 14 | 9.04 |
| | 2 – 4 times a month | 6 | 3.87 |
| | Once a month | 5 | 3.22 |
| Collection of Information Regarding Medical Tour | Through Social Media Ads | 98 | 63.23 |
| | Other than social media Ads | 57 | 36.77 |
| | 5 and more | 72 | 7.9 |
| Medical Tour decision influenced by Social Media Ad Platforms | Facebook | 68 | 69.39 |
| | Youtube | 14 | 14.29 |
| | Twitter | 9 | 9.18 |
| | Others | 7 | 7.14 |
| Country of Origin | Afghanistan | 12 | 7.74 |
| | Africa | 16 | 10.32 |
| | Australia | 1 | 0.65 |
| | Bangladesh | 54 | 34.84 |
| | Bhutan | 4 | 2.58 |
| | Canada | 3 | 1.94 |
| | France | 3 | 1.94 |
| | Fiji | 1 | 0.65 |
| | Germany | 2 | 1.29 |
| | Indonesia | 6 | 3.87 |
| | Iran | 9 | 5.81 |
| | Iraq | 3 | 1.94 |
| | Maldives | 10 | 6.45 |
| | Nepal | 7 | 4.52 |
| | Oman | 12 | 7.74 |
| | Russia | 1 | 0.65 |
| | Sri Lanka | 3 | 1.94 |
| | USA | 1 | 0.65 |
| | UK | 1 | 0.65 |
| Yemen | 2 | 1.29 | |
| Others | 4 | 2.58 | |

Source: Primary Data

Influence of Social Media Marketing Content on Foreign Medical Tourists' Decision Making

The results shown in Table 2 reveal that 85.71% of foreign medical tourists are highly satisfied with the reviews posted by international patients on social media about their experiences with Indian Healthcare service providers while 80.61% are highly

satisfied with the content posted by healthcare providers related to services offered to international patients. The data analysis further revealed that 62.24 % of foreign medical tourists are highly satisfied with Indian medical tour advantages. About 59.18 % foreign medical tourists are highly satisfied with Indian doctors live interaction programs while 59.18 percent medical tourists are highly satisfied with testimonials posted by service providers.

Table 2 Influence of Social Media Communication Content on Foreign Medical Tourists' Decision Making towards Indian Healthcare Service Providers

| Type of Content Posted by Indian Healthcare Service Providers | | Responses of Foreign Medical Tourists | | | | | | |
|---|--|---------------------------------------|-----------|---------|--------------------|---------------|-------|-----|
| | | Highly Satisfied | Satisfied | Neutral | Somewhat Satisfied | Not satisfied | Total | |
| 1 | Reviews posted by international patients | Frequency | 84 | 8 | 6 | 0 | 0 | 98 |
| | | Percentage | 85.72 | 8.16 | 6.12 | 0 | 0 | 100 |
| 2 | Services for International patients | Frequency | 79 | 12 | 7 | 0 | 0 | 98 |
| | | Percentage | 80.62 | 12.24 | 7.14 | 0.00 | 0.00 | 100 |
| 3 | Indian medical tour advantages | Frequency | 61 | 12 | 12 | 7 | 6 | 98 |
| | | Percentage | 62.25 | 12.24 | 12.24 | 7.15 | 6.12 | 100 |
| 4 | Doctors live interaction programs | Frequency | 58 | 27 | 11 | 1 | 1 | 98 |
| | | Percentage | 59.18 | 27.56 | 11.22 | 1.02 | 1.02 | 100 |

| | | | | | | | | |
|----|--|------------|-------|-------|-------|-------|-------|-----|
| 5 | Patient testimonials posted by service providers | Frequency | 58 | 18 | 14 | 8 | 0 | 98 |
| | | Percentage | 59.18 | 18.37 | 14.29 | 8.16 | 0 | 100 |
| 6 | Indian tourism spots | Frequency | 58 | 21 | 10 | 6 | 3 | 98 |
| | | Percentage | 59.18 | 21.43 | 10.21 | 6.12 | 3.06 | 100 |
| 7 | Health Education bulletin | Frequency | 48 | 20 | 19 | 8 | 3 | 98 |
| | | Percentage | 48.98 | 20.41 | 19.39 | 8.16 | 3.06 | 100 |
| 8 | Interactive activities like quizzes | Frequency | 37 | 31 | 20 | 6 | 4 | 98 |
| | | Percentage | 37.76 | 31.63 | 20.41 | 6.12 | 4.08 | 100 |
| 9 | Posts on special days like World Cancer day | Frequency | 29 | 21 | 20 | 12 | 16 | 98 |
| | | Percentage | 29.59 | 21.43 | 20.41 | 12.24 | 16.33 | 100 |
| 10 | Health check-up posts | Frequency | 27 | 28 | 14 | 16 | 13 | 98 |
| | | Percentage | 27.54 | 28.57 | 14.29 | 16.33 | 13.27 | 100 |
| 11 | Infrastructure videos | Frequency | 16 | 14 | 33 | 20 | 15 | 98 |
| | | Percentage | 16.33 | 14.29 | 33.67 | 20.41 | 15.30 | 100 |

Source: Primary Data

Note: Calculations in percentage are calculated as per column totals.

Influence of Social Media Content / Features on Deciding to Choose India as Medical Tourism Destination

The results shown in Table 3 reveal the 74.4% of foreign medical tourists are highly influenced by well-facilitated hospitals of India while deciding to choose India as a medical tourist destination. Similarly

high end modern technology of Indian healthcare (72.4 %), cost-effective treatment in India (69.3%), Indian Doctors' expertise(63.2%) are the significant features presented through social media platforms that highly influenced foreign medical tourists in their decision making to choose India.

Table 3 Influence of Social Media Content / Features on Deciding to Choose India as Medical Tourism Destination

| Choosing India as a Medical Tourist Destination | | | Grade of influence | | | | | Total |
|---|----------------------------|------------|--------------------|--------------------|--------------------|--------------------|----------------------|-------|
| | | | High influence | Somewhat influence | Moderate influence | Not much influence | Negligible influence | |
| 1 | Well facilitated hospitals | Frequency | 73 | 18 | 4 | 2 | 1 | 98 |
| | | Percentage | 74.4 | 18.3 | 4.0 | 2.0 | 1.0 | 100 |
| 2 | High-end modern technology | Frequency | 71 | 12 | 10 | 3 | 2 | 98 |
| | | Percentage | 72.4 | 12.2 | 10.2 | 3.0 | 2.0 | 100 |
| 3 | Cost-effective treatment | Frequency | 68 | 14 | 8 | 6 | 2 | 98 |
| | | Percentage | 69.3 | 14.2 | 8.1 | 6.1 | 2.0 | 100 |
| 4 | Doctor's expertise | Frequency | 62 | 18 | 11 | 4 | 3 | 98 |
| | | Percentage | 63.2 | 18.3 | 11.2 | 4.0 | 3.0 | 100 |
| 5 | No language barrier | Frequency | 48 | 31 | 13 | 4 | 2 | 98 |
| | | Percentage | 48.9 | 31.6 | 13.2 | 4.0 | 2.0 | 100 |
| 6 | Proximity | Frequency | 42 | 21 | 15 | 12 | 8 | 98 |
| | | Percentage | 42.8 | 21.4 | 15.3 | 12.2 | 8.1 | 100 |
| 7 | Trust worthy services | Frequency | 36 | 31 | 19 | 9 | 3 | 98 |
| | | Percentage | 36.7 | 31.6 | 19.3 | 9.1 | 3.0 | 100 |
| 8 | Availability of | Frequency | 32 | 34 | 25 | 5 | 2 | 98 |

| | | | | | | | | |
|----|-------------------------|------------|------|------|------|------|------|-----|
| | alternative medicine | Percentage | 32.6 | 34.6 | 25.5 | 5.1 | 2.0 | 100 |
| 9 | Accreditations | Frequency | 24 | 22 | 30 | 12 | 10 | 98 |
| | | Percentage | 24.4 | 22.4 | 30.6 | 12.2 | 10.2 | 100 |
| 10 | Ease in visa processing | Frequency | 22 | 25 | 23 | 15 | 13 | 98 |
| | | Percentage | 22.4 | 25.5 | 23.4 | 15.3 | 13.2 | 100 |
| 11 | Zero Waiting time | Frequency | 21 | 19 | 12 | 20 | 26 | 98 |
| | | Percentage | 21.4 | 19.3 | 12.2 | 20.4 | 26.5 | 100 |
| 12 | Influencers | Frequency | 21 | 12 | 18 | 24 | 23 | 98 |
| | | Percentage | 21.4 | 12.2 | 18.3 | 24.4 | 23.4 | 100 |
| 13 | References | Frequency | 12 | 13 | 26 | 23 | 24 | 98 |
| | | Percentage | 12.2 | 13.2 | 26.5 | 23.4 | 24.4 | 100 |

Source: Primary data

Exploratory Factor Analysis for Social Media Communication

Exploratory factor analysis (EFA) was used to identify and explain the underlying dimensions of a relatively large set of variables. For this study, Bartlett’s Test of sphericity, Eigenvalues, and Kaiser-Meyer-Olkin (KMO) measure of sampling adequacy were undertaken as the assessment for EFA. Furthermore, a principal component analysis with orthogonal rotations (Varimax) was performed to identify or reduce the dimensions of the social media advertising. A total of five statements concerning

social media communication were put to factor analysis. Bartlett's test of sphericity revealed that factors are related at a significance level of 0.000, and Kaiser-Meyer-Olkin (KMO) sampling adequacy analysis revealed that the remaining four statements had factor loadings greater than 0.5 with an eigenvalue greater than 1, accounting for 81.5% of the variance. The results provided in Table 4 presents a summary of the results for social media communication, including factor loadings, Cronbach's alpha, mean and standard deviation with factor labels.

Table 4 Exploratory Factor Analysis for Social Media Marketing Communications

| Factor Label | Statements\Items | Factor loadings (>0.5) | Cronbach’s Alpha (>0.7) | Mean | SD |
|--------------|---|------------------------|-------------------------|------|-------|
| SMMC | a) The level of India’s medical tourism social media communications meets my expectations. | 0.872 | 0.785 | 4.21 | 0.772 |
| | b) Compared with the very good social media communications of other competing medical tourism countries, India’s social media communication performed well. | 0.864 | | | |
| | c) Social media marketing communication is both informative and understandable | 0.838 | | | |
| | d) Social media marketing communication is misleading(r) | 0.780 | | | |
| | e) I am satisfied with Indian medical tourism social media communications. | 0.713 | | | |

a. Extraction Method: Principle Components Analysis, Rotation Method: Varimaxwith Kaiser Normalisation, variance explained 81.5 %, p=0.001.Note r= reverse calculated.

Exploratory Factor Analysis for user Generated Social Media Advertising (UGSMA)

Factor analysis was applied to five separate statements that investigated respondents’ opinions on user generated content on social media. The five

statements had an eigenvalue greater than 1 and explained 87.3% of the variance. They also had a Kaiser-Meyer-Olkin (KMO) measure of sampling

adequacy of 0.924, according to Bartlett's test of sphericity, which showed that factors are related at a significance level of 0.000. Table 5 summarizes the results of the analysis of user Generated Social Media

Communications, including the factor loadings, Cronbach's alpha, mean and standard deviation with factor labels.

Table 5 Exploratory Factor Analysis for User Generated Social Media Advertising

| Factor label (Latent Variable) | Statements/Items | Factor loadings (>0.5) | Cronbach's Alpha (>0.7) | Mean | SD |
|--------------------------------|--|------------------------|-------------------------|------|-------|
| UGSMC | a) The level of the social media communications feedback expressed by other users about the medical tourism in India meets my expectations. | 0.872 | 0.810 | 3.17 | 0.675 |
| | b) Compared with the very good social media communications of other users' feedback about other competing countries, the social media communications of users' feedback about the medical tourism in India performed well. | 0.856 | | | |
| | c) Reviews expressed by others helped me to make my decision in selecting India as a medical destination. | 0.833 | | | |
| | d) I am satisfied with the social media communications feedback expressed by other users about the medical tourism in India. | 0.812 | | | |
| | e) Reviews/ratings given by others positively influenced my evaluation of India as a preferred destination for medical tourism. | 0.771 | | | |

a. Extraction Method: Principle Components Analysis, Rotation Method: Varimax with Kaiser Normalisation, variance explained 87.3 %, p=0.001

Exploratory Factor Analysis for Content in Social Media Marketing (CSMM)

In order to determine how content in social media marketing is effectively influencing medial tourists decisions, a factor analysis was conducted using six statements. Kaiser-Meyer-Olkin (KMO) analysis revealed that all statements had factor loadings more than 0.5, eigenvalues greater than 1,

explained 78.6% of the variance, and had a sampling adequacy of. An analysis of factor relationships using Bartlett's test of sphericity and a sample size of 155 showed a significance level of 0.000. Table 6 summarize the results of the analysis of content in social media communication (CSMC), including the factor loadings, Cronbach's alpha, mean and standard deviation values of the construct.

Table 6 Exploratory Factor Analysis for Content in Social Media Communication (CSMC)

| Factor label (Latent Variable) | Statements/Items | Factor loadings (>0.5) | Cronbach's Alpha (>0.7) | Mean | SD |
|--------------------------------|---|------------------------|-------------------------|------|-------|
| CSMC | 1. The medical tourism content source in social media is authoritative. | 0.925 | 0.752 | 3.08 | 0.653 |
| | 2. The medical tourism content is reliable. | 0.886 | | | |
| | 3. After browsing medical tourism content in social media, I am likely to engage with medical tourism providers in India. | 0.830 | | | |
| | 4. The contents shown in the social media of Indian medical tourism providers is up to date. | 0.812 | | | |
| | 5. The medical tourism content in social media has influenced my travelling to India. | 0.776 | | | |

| | | | | | |
|--|---|-------|--|--|--|
| | 6. After browsing medical tourism content in social media, I would feel a sense of loss if I could not visit India. | 0.672 | | | |
|--|---|-------|--|--|--|

a. Extraction Method: Principle Components Analysis, Rotation Method: Varimax with Kaiser Normalisation, variance explained 78.6 %, p=0.001

Exploratory Factor Analysis for India as a Medical Tourism Destination Choice (MTDC)

In order to determine India as a Medical Tourism Destination Choice (MTDC), a factor analysis was conducted using nine statements. Kaiser-Meyer-Olkin (KMO) analysis revealed that only statements had factor loadings more than 0.5,

eigenvalues greater than 1, explained 84.5% of the variance, and had a sampling adequacy of. An analysis of factor relationships using Bartlett's test of sphericity and a sample size of 155 showed a significance level of 0.000. Table 7 summarizes the results of the analysis of India as a medical tourist destination, including the factor loadings, Cronbach's alpha, mean and standard deviation values of the construct.

Table 7 Exploratory Factor Analysis for India as a Medical Tourism Destination Choice (MTDC)

| Factor label | Statements/Items | Factor loadings (>0.5) | Cronbach's Alpha (>0.7) | Mean | SD |
|--------------|--|------------------------|-------------------------|------|-------|
| MTDC | a) India has a positive reputation as a medical tourism destination. | 0.905 | 0.742 | 3.14 | 0.671 |
| | b) The quality of medical services in India is excellent. | 0.886 | | | |
| | c) India has a flexible immigration policy. | 0.840 | | | |
| | d) Overall, the price charged by the medical service provider(s) in India is inexpensive. | 0.822 | | | |
| | e) I am willing to recommend India as the most sought-after medical tourism destination to others. | 0.786 | | | |

a. Extraction Method: Principle Components Analysis, Rotation Method: Varimax with Kaiser Normalisation, variance explained 84.5 %, p=0.001

Hypotheses Testing & Results

H1: The perceived usefulness of social media content has a positive effect on evaluating the attractiveness of a medical tourism destination.

To test this hypothesis, simple Regression technique was used to assess the influence of perceived usefulness of social media content on evaluating the attractiveness of medical tourism destination. The regression model for evaluating the attractiveness of medical tourism destination shown in Table 8 is contributed significantly and predicted with an adjusted R² value of 36.3 percent variation by perceived usefulness of content in social media on attractiveness of medical tourism destination. The ANOVA results generated (as shown in Table 4.60) in this test also shows a significant probability value (p = 0.000) and signifies that the independent variable is related to dependent variable with a significant

statistic F (1, 153) = 123.810, p=0.000. The results confirmed that the relationship between perceived usefulness of content in social media and evaluating the attractiveness of medical tourism destination is significant. The coefficient summary for regression models shown in Table 9 revealed that positive perceived usefulness of content in social media (β=0.741 t=12.218, p=0.000) was the significant predictor for evaluation of attractiveness of medical tourism destination. Hence the hypothesis (H3) was accepted. The positive and high value of beta (β) which underlines that perceived usefulness of content in social media has significant influence on attractiveness of medical tourism destination and generates the following regression equation:

$$Y = 0.816 + 0.741 X$$

Whereas, Y = Evaluating the attractiveness of medical tourism destination, X= Perceived usefulness of content in social media Ad.

Table 8 Regression model summaries for the Perceived Usefulness of Content in Social Media Marketing on Evaluating the Attractiveness of Medical Tourism Destination.

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | ANOVA Results | | | |
|-------|--------------------|----------|-------------------|----------------------------|---------------|-----|-----|-------|
| | | | | | F-Value | df1 | df2 | Sig. |
| 1 | 0.605 ^a | 0.363 | 0.362 | 0.871 | 123.810 | 1 | 153 | 0.000 |

a. Predictors: (Constant), Perceived usefulness of content in social media marketing

Table 9 Predictor Effects and Beta Estimates for Perceived Usefulness of Content in Social Media Marketing on Attractiveness of Medical Tourism destination

| Model | Variable | Unstandardized Coefficients | | Standardized Coefficients | t-Value | Sig. |
|-------|---|-----------------------------|------------|---------------------------|---------|-------|
| | | B | Std. Error | Beta | | |
| 1 | (Constant) | 0.816 | 0.164 | - | 5.016 | 0.000 |
| | Perceived usefulness of content in Social Media marketing | 0.741 | 0.041 | 0.662 | 12.218 | 0.000 |

a. Dependent Variable: Attractiveness of Medical Tourism Destination

Note: * $\alpha < 0.001$; Source: Primary Data

H2: Social media marketing has a positive direct effect on medical tourists’ engagement with medical tourism providers.

The hypothesis of relationship between social media marketing and medical tourists’ engagement was tested using simple linear regression. The regression results shown in Table 10 revealed that the

social media contribute significantly and had moderate influence on the medical tourists’ engagement with medical tourism providers ($R^2 = 0.410$). The corresponding ANOVA value ($F = 101.117, p = 0.000$) for the regression models had indicated the significant relationship between social media marketing and medical tourists’ engagement.

Table 10 Regression Model Summaries for the Social Media Marketing on Medical Tourists’ Engagement with Medical Tourism Providers

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | ANOVA Results | | | |
|-------|--------------------|----------|-------------------|----------------------------|---------------|-----|-----|-------|
| | | | | | F-Value | df1 | df2 | Sig. |
| 1 | 0.640 ^a | 0.410 | 0.406 | 0.782 | 106.117 | 1 | 153 | 0.000 |

a. Predictors: (Constant), Social Media Marketing

The coefficient summary shown in Table 11 revealed that beta values of social media marketing ($\beta = 0.702, t = 10.301, p = 0.000$) was significant predictor of medical tourists’ engagement. The results were implicit that predictor variable was related with dependent variable. Hence, the alternate hypothesis

(H5) was accepted as their p-values were less than 0.05.

Here the following simple linear regression model

$$\text{Medical tourists' engagement (Y)} = 0.776 + 0.702 (\text{Social media marketing}) X$$

Table 11 Predictor effects and Beta Estimates for Social Media Marketing on Medical Tourists’ Engagement with Medical Tourism Providers

| Model | Variable | Unstandardized Coefficients | | Standardized Coefficients | t-Value | Sig. |
|-------|------------------------|-----------------------------|------------|---------------------------|---------|-------|
| | | B | Std. Error | Beta | | |
| 1 | (Constant) | 0.776 | 0.276 | - | 2.809 | 0.000 |
| | Social Media Marketing | 0.702 | 0.068 | 0.640 | 10.301 | 0.000 |

a. Dependent Variable: Medical Tourists’ Engagement with Medical Tourism Providers

H3: Social media marketing has a positive direct effect on medical tourists' destination decision making

The hypothesis of relationship between social media marketing and medical tourists' destination decision making was tested using simple linear regression. The regression results shown in Table 12

revealed that the social media contribute significantly and had moderate influence on the medical tourists' destination decision making ($R^2 = 0.485$). The corresponding ANOVA value ($F = 143.927, p=0.000$) for the regression models had indicated the significant relationship between social media marketing and medical tourists' destination decision making.

Table 12 Regression Model Summaries for the Social Media Marketing on Medical Tourists' Destination Decision Making

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | ANOVA Results | | | |
|-------|--------------------|----------|-------------------|----------------------------|---------------|-----|-----|-------|
| | | | | | F-Value | df1 | df2 | Sig. |
| 1 | 0.696 ^a | 0.485 | 0.481 | 0.903 | 143.927 | 1 | 153 | 0.000 |

a. Predictors: (Constant), Social Media Marketing

The coefficient summary shown in Table 13 revealed that beta values of social media marketing ($\beta=0.791, t=11.997, p=0.000$) was significant predictor of medical tourists' destination decision making. The results were implicit that predictor variable was related with dependent variable. Hence,

the alternate hypothesis (H6) was accepted as their p-values were less than 0.05.

Here the following simple linear regression model:

$$(Y) = 0.359 + 0.791 (\text{Social media}) X$$

Table 13 Predictor effects and Beta Estimates for Social Media marketing on Medical Tourists' Destination Decision Making

| Model | Variable | Unstandardized Coefficients | | Standardized Coefficients | t-Value | Sig. |
|-------|--------------|-----------------------------|------------|---------------------------|---------|-------|
| | | B | Std. Error | Beta | | |
| 1 | (Constant) | 0.359 | 0.223 | - | 2.605 | 0.000 |
| | Social Media | 0.791 | 0.066 | 0.696 | 11.997 | 0.000 |

a. Dependent Variable: Medical Tourists' Destination Decision Making

H4: Social media marketing has a positive direct effect on medical tourists' intention to revisit the destination

The hypothesis of relationship between social media and medical tourists' intention to revisit destination was tested using simple linear regression. The regression results shown in Table 14 revealed that the social media marketing contribute significantly and had moderate influence on the

medical tourists' intention to revisit destination ($R^2 = 0.633$). The corresponding ANOVA value ($F = 152.623, p=0.000$) for the regression models had indicated the significant relationship between social media marketing and medical tourists' revisit destination.

Table 14 Regression Model Summaries for the Social Media Marketing on Medical Tourists' Intention to Revisit the Destination

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | ANOVA Results | | | |
|-------|--------------------|----------|-------------------|----------------------------|---------------|-----|-----|-------|
| | | | | | F-Value | df1 | df2 | Sig. |
| 1 | 0.736 ^a | 0.633 | 0.631 | 0.981 | 152.623 | 1 | 153 | 0.000 |

a. Predictors: (Constant), Social Media marketing

The coefficient summary shown in Table 15 revealed that beta values of social media marketing ($\beta=0.736, t=13.651, p=0.000$) was significant predictor of medical tourists' intention to revisit

destination. The results were implicit that predictor variable was related with dependent variable. Hence, the alternate hypothesis (H7) was accepted as their p-values were less than 0.05.

Here the following simple linear regression model

$$\text{Medical tourists' intention to revisit destination (Y)} = 0.890 + 0.736 (\text{Social media Ad}) X$$

Table 15 Predictor effects and Beta Estimates for Social Media on Medical Tourists' Intention to Revisit Destination

| Model | Variable | Unstandardized Coefficients | | Standardized Coefficients | t-Value | Sig. |
|-------|------------------------|-----------------------------|------------|---------------------------|---------|-------|
| | | B | Std. Error | Beta | | |
| 1 | (Constant) | 0.890 | 0.263 | - | 3.203 | 0.000 |
| | Social Media Marketing | 0.791 | 0.072 | 0.736 | 13.651 | 0.000 |

a. Dependent Variable: Medical Tourists' Intention to revisit Destination

VII. IMPLICATIONS OF RESEARCH

The current research enhances the understanding of preferences of medical tourists, medical tourist's behavior, medical tourist's destination choices, factors affecting medical tourist's destination choices, how medical tourists select healthcare providers etc. Research in the medical tourism industry is enhancing the understanding of how medical tourism impacts destination. As the study is conducted on the Indian medical tourism industry, the results of the study offer an insight into the evolution of Indian Medical Tourism, its market size, the position of India in the global market, the growth of the Indian medical tourism market, AYUSH market of India, etc. Once a destination for medical, health, and wellness tourism has been built successfully, marketing and promotion are crucial to draw visitors (Zhong, 2021).

The research study gives implications to the policy makers for carving policies according to the changes in demographic characteristics. The research study provides an account of how medical tourists are utilizing social media for gathering information about medical treatment options, options of different hospitals, doctor's expertise, facilities in the hospitals, etc. through which the managerial cadre of the hospitals can fine-tune their marketing strategies.

The findings of the research facilitate the managers of the hospitals in understanding the factors that influence medical tourists in choosing medical tourist destinations, and social media content that attracts foreign patients. Accordingly, the marketing managers can design promotional strategies for making India the most chosen medical tourist destination. The research findings would help tourism service providers to identify and select social media platforms as a marketing strategy for tourism competitiveness. The findings can assist medical tourism providers in optimizing online searches for medical travel information, as well as medical tourism destination marketers in directing the tourism providers' marketing efforts towards the use of social media to target potential medical tourists more efficiently and on a larger scale. The results are

relevant for marketing practitioners and managers who design strategic plans and implement tools to improve destination marketing. Medical tourism providers should pay more attention to perceived usefulness of content in source credibility which influences new medical tourists' destination decision making.

VIII. DIRECTIONS FOR FURTHER RESEARCH

The limitations of the present research study open avenues for future research. The study has several limitations. First, the study covers the 155 foreign medical tourists and 42 hospitals providing medical tourism during the study period. Covering more foreign patients and hospitals could have made the research more vigorous. Thus the research can be extended to other hospitals which were not covered in this present study. The other stakeholders viz tour facilitators, tourism companies, and tourism associations can be included for further research. It is also suggested that future research be based on a larger sample size in order to obtain more precise results. Second, important limitation of the study is that it was conducted with a convenience sample of study participants. It reduces the generalizability of the result. Third, collecting data in a short period may have influenced the participants' information. Seasonality could have an impact on the validity of the findings. Fourth, in addition to social media marketing communication, future studies should include other factors (push factors) and dimensions that can help predict medial tourist's behavior towards medical tourism destination in India, such as value, satisfaction, loyalty, and purchasing motivations. Future studies can also attempts to examine the relationships between brand image, perceived behavior control, regulatory focus, perceived service quality, patient satisfaction and behavioral intentions and actual behavior. Further research can be taken to explore tourist behavior, psychographic factors of a tourist, tourist decision-making process, etc. Finally the research study can be extended to other arena like Ayurveda, Yoga, Sidda, Homeopathy (AYUSH) which are also having strong presence in India.

IX. CONCLUSION

The evolution of the social media over the past decade has brought about a paradigm shift in global medical tourism in general and Indian medical tourism in particular. Several studies evidenced the fact that medical tourism is not only an important revenue-generating industry that empowers and enhances sustainability among the local population but also enhancing the image as well as reputation of the nation. Therefore, it requires a strategic social media marketing communication platform for the promotion that is easily accessible and measurable. It could be

concluded from the study that the active promotion of sustainable tourism destinations on social media platforms would enhance the destination's visibility and accessibility to the medical tourists. This study examined the impact of social media in Indian medical tourism. It provides valuable insights on the critical role played by social media in augmenting the attractiveness of India's brand image of medical tourist destination in the world. The research findings signify the distinctive role of social media platforms in not only creating hospital brand image and but also formulating more effective service marketing strategies for enhanced positive behavioural intentions among tourists within the medical tourism sector.

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