

Role Of Social Media In Promoting India As A Medical Tourist Destination

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Abstract:

The Indian government is serious in promoting India as a medical tourist destination via pan-India initiatives like “Heal In India”, Ayush visa – a special visa for medical tourists etc. All the stakeholders of the Medical tourism industry are gaining momentum to grab this golden opportunity. In order to reach the tourists, who is scattered across the globe, the stakeholders are finding out different tactics. Social media, a sensational technological innovation binds people across the globe and made it a village. The marketers of medical tourism industry are utilising these platforms to position their services on international dais. The purpose of the study is to reveal whether social media is playing a significant role in attracting medical tourists to India for healthcare needs. This study also conducts empirical analysis to know how many medical tourists got awareness about India as a medical tourist destination through social media and which social media – FaceBook, Twitter, Instagram, LinkedIn, Youtube. Further this study investigates which

feature of India is mostly discussed in social media and how it impressed medical tourists for opting India. The study suggests that how medical tourism marketers can utilise social media for promoting Indian medical tourism destination.

Keywords: Medical Tourism, Social Media, Promotion, Medical Tourist destination

1. INTRODUCTION:

“Medical tourism” is a phrase generally used to refer to the system of people traveling outside their home country primarily for the purpose of seeking medical treatment. (Joanna et al.,2019). In olden days the rich people from developed countries used to travel to other countries for better treatment or in search of treatment which are not available in their home country (Smith and Puczko, 2009). Now the phenomenon has totally changed. The patients from the highly developed countries are travelling to developing countries for meeting their healthcare requirements. The developing countries are fine tuning their skills, increasing their standards, enhancing their facilities for getting foreign exchange earnings. (Bookman & Bookman 2007). The medical tourism has gained momentum in India in the past 10 years. India is giving tough competition to the other medical destinations like Singapore, Malaysia, Thailand, Mexico, Costa Rica etc

Horowitz and Rosenweig (2007) in their research identified China, India, Israel, Singapore, Malaysia, Philippines, United Arab Emirates, Argentina, Bolivia, Brazil, Colombia, Costa Rica , Cuba , Jamaica, Mexico, United States, Belgium, Germany, Hungary, South Africa and Australia as medical Tourist destinations. Gradually these countries started competing vigorously for foreign pie.

As per “National strategy & Roadmap for medical and wellness tourism: An initiative towards atmanirbhar Bharath, January 2022” report by Ministry of Tourism Government of India, India has been ranked 10th in Medical Tourism Index (MTI) for 2020-21 out of 46 destinations of the world by Medical Tourism Association. According to the “India Tourism Market Outlook (2022-2032)”, The Indian medical tourism holds approximately 6.5% of the global medical tourism market. In 2022, Indian medical tourism industry is assessed to be US\$ 7,417 Mn and it is speculated to outstrip US\$ 42,237.47 Mn by 2032. The demand is speculated to raise at a healthy 19% CAGR during 2022-2032. The phenomenal growth creates inquisitiveness among the scholars to understand and know Why only India? the plausible answers are as follows: it is due to high quality medical treatments at lowest price (Snyder, Johnston, Crooks, Morgan, & Adams, 2017), world – class healthcare technology (Guiry & Vequist, 2011), world known accredited hospitals (Grepperud, 2015), no waiting time in India, availability of traditional health therapies – like ayurvedic, no language barrier, tourism attractions in India, proximity to countries like Bangladesh etc., ease in getting medical visa.

According to Livemint (2022), “To boost medical tourism, govt plans these facilities for international patients”, The Indian government has identified 44 countries from where a large number of people visit India for medical purposes. Bangladesh, Iraq, Maldives, Afghanistan, Oman, Yemen, Sudan, Kenya, Nigeria and Tanzania account for about 88 per cent of the total international patients visiting India. Bangladesh alone accounts for 54 per cent of the total medical tourists.

The following are the procedures which are majorly sought by the foreign patients who are wooed by the advantages of India include -Cardiac Treatments, Kidney Treatments, Orthopaedic Surgery, Cancer treatments, Cosmetic / Plastic surgery, Dental services, Ophthalmology, Bariatric surgery,

Neuro surgery, General surgery, Bone Marrow transplant, Organ Transplantation, Traditional medicine like Ayurvedic etc, The healthcare tycoons who are involved in medical tourism are: the Apollo Hospitals, Kokila Ben Dhirubhai Ambani hospitals, Escorts Hospital, Fortis Hospitals, Breach Candy, Asian Institute of Gastroenterology, Hinduja, Mumbai's Asian Heart Institute, Arvind Eye Hospitals, Manipal Hospitals, Mallya Hospital, Shankara Nethralaya etc. and also a government owned Institute AIIMs also in the race.

The 8 key stakeholders in the medical tourism industry identified are medical tourists, health-care providers, government agencies, facilitators, accreditation and credentialing bodies, health-care marketers, insurance providers and infrastructure and facilities and they strongly influence medical tourists' decision-making process in seeking medical treatment abroad. (Kamassi,A., Abd Manaf, N.H and Omar,A. 2020),

The governments of India, Singapore are walking an extra mile in promoting their nations as destinations for foreign patients (Valorie C, et al (2011). The government encouraged medical tourism through trade shows and promotional events in other countries to position 'world class' medical facilities among the potential patients. Thailand, India, Singapore, Malaysia, Saudi Arabia, Turkey, and Mexico countries are aggressive in promoting their medical tourism facilities (Goldbach & West Jr., 2010)

Recognising Indian Medical tourism sector to be having capacity of contributing towards development of the nation and help in attaining the objective of Aatmanirbhar Bharat, the Indian government is devising comprehensive strategies and designing road map for boosting the industry. For instance, with an integrated communication strategy a campaign called "Heal in India" is launched to promote India as a preferred brand for medical tourist destination. These initiatives are attracting the stakeholders to tighten their belts. However, these facilitations or perks to medical tourists have to be communicated properly to the right people in the right time in the right way. For the Indian medical tourism industry to flourish, the international promotion of its services is mandatory. The uniqueness of India has to cross the borders. Internet based content can be best suitable as primary marketing material for informing, attracting potential patients about tourism opportunities, treatment options available in India (Chinai & Goswami, 2007; Howze, 2007).

Designing a promotion mix for consumers who are overseas, belonging to different cultural media, different languages is a herculean task. The concept of Medical tourism has to be promoted throughout the world. Reaching the audience across the borders is not easy.

The revolutionary innovation of social media channels is giving an opportunity for the organisations to penetrate into all segments of consumers located in every nook and corner of the world. Social media is enhancing its role in customer preferences and motivations (Hays, Page, & Buhalis, 2013). Social media is proved to be an effective tool in communicating with customers, to pull and spike interest in potential customers (Roque & Raposo, 2016). Social media is a weapon to reach globally and least price (Amaro et al., 2016). Social media is successful in presenting the advantages and attractiveness of a tourism destination in a better way (Buhalis 2000) and the key benefits of medical tourism (Lee et al., 2014). The medical tourism marketers have been using traditional channels for communication (Jun & Oh, 2015) and also social media like Facebook, Twitter, YouTube (Lee, Wright, O'Connor, & Wombacher, 2014). In the recent times, the users of social media have been growing enormously. During Covid time, almost all the countries have given access to many of the digital channels to their citizens. A few studies have been conducted on

understanding how social media can influence medical tourists and whether it can be used as a marketing tool for medical tourist destinations. No research has been carried to explore whether social media can be used by the medical tourism marketers of India. The research work aims at evaluating the role of social media in promoting medical tourism destination and directs the marketers accordingly.

The objectives of the study are: To study the present role of social media in creating awareness among the medical tourists while choosing India as their Medical Tourist destination wrt FaceBook, Twitter, Instagram, YouTube and LinkedIn. To study the scope of social media for further promotion of India as a chosen Medical Tourist destination among foreign medical tourists.

LITERATURE REVIEW:

According to John Cote in his article “Digital Word –of-Mouth marketing for medical tourism industry”, Medical Tourism Magazine, concluded that social media channels, specifically facebook are the most effective channels to reach different nationalities, different age groups etc. Using video testimonials in marketing is a powerful method to create confidence in the medical tourists.

According to Salloum, Said & Alghizzawi, Mahmoud & Habes, Mohammed. (2019). The Relationship Between Digital Media and Marketing Medical Tourism Destinations in Jordan: Facebook Perspective, social media can influence tourist behaviour better than traditional techniques of marketing. Social media, ie Facebook is an effective, best and easy way to promote Medical tourist destinations in Jordan. The study advised that the legislators and administrators of Jordan has to use Social media in specific Facebook for promoting medical tourist destinations in Jordan.

Surej john, Roy Larke and Mark Kilgour (2018) in their article titled “Applications of social media for medical tourism marketing: an empirical analysis” Anatolia, an international journal of tourism and hospitality research analyses how social media is used by the medical tourism providers to distribute information, engage online users and influence travel decisions of potential medical tourists.

Bochaton (2015) concluded that social networks have a noticeable impact on choosing a destination for medical tourism in Lao. It is an influential source of information for patients who are planning their medical tourist destination. Satisfied patients can be used a free tool for the hospitals, medical tourism providers to showcase their services to the world. The previous patient’s experiences on the internet played a key role in decision making of the present medical tourist.

RESEARCH METHODOLOGY:

The study was conducted among medical tourists who are undergoing treatment in different hospitals located in different cities of India. The study was conducted during 2022 in post covid tenure. The study design is cross sectional. The sample size of the study is 100. The study population belongs to different hospitals, different countries availing different treatments. The data was collected through questionnaire which was administered among the above discussed sample.

Statistical Significance:

All statistical analysis was done by using SPSS software version 20.0 and MS Excel 200. Descriptive data was presented as Mean +- standard deviation and percentages. Data is tabulated and graphically represented. Chie-square test was done to assess the association between categorical variables. For all statistical analysis, $P < 0.05$ was statistically significant.

RESULTS:

The following are the results obtained through the study: -

Role of Social Media in creating

1. Social Media has a major role in influencing decision process of the prospective medical tourist. Majority of the medical tourists (78%) came to know about India through social media, social media highlighted the features of India and it helped the medical tourists to choose India from the list of medical tourist destinations located across the world.
2. FaceBook created awareness to 37 % of the respondents, YouTube to 20%, Twitter to 12%, Instagram to 5%, LinkedIn to 4%, and friends, Doctors referral and other sources to the remaining respondents. The Facebook- social media is the predominant media in reaching patients extensively.

SEE TABLE 2

3. The feature “Cost effective treatment” attracted 19 % of the respondents through social media, “expert doctors” attracted 14 % of the respondents through social media etc. The study shows that social media has a strong significant role in spreading awareness about different features of India and finally helping medical tourists in choosing India as their medical tourist destination.

SEE TABLE 3

4. After the treatment, 41 % of respondents want to share their experiences on FaceBook, 19 % on YouTube, 11 % on Twitter, 6 % on Instagram and 5 % on LinkedIn. Keeping this in view the marketers can encourage the foreign medical tourists to post their experiences highlighting the benefits of India and thus motivate the upcoming patients to choose India as medical destination.

SEE TABLE 4

5. The study showed that 78 % of the respondents came to India by getting awareness though social media, but 88 % of the respondents (10 % extra to the respondents who came to India through social media) are willing to share their opinion after the treatment on social media. This is an indication to the marketers directing them to make use of social media in promoting medical tourist destinations.

SEE TABLE 5

6. Most of the respondents are existing social media users and some of the non-users are still willing to share their opinion on social media. Facebook is the most preferred social media. The willingness to share the opinion indicates that the marketers can use social media for reaching all parts of the world. The videos of the satisfied patients are uploaded by some of the hospitals on YouTube to create confidence among the prospective patients. Very less users are found for Twitter, Instagram, LinkedIn.

SEE TABLE 6

7. The social media especially the FaceBook enlightened medical tourists about the salient and special features of India which can benefit the medical tourists. In addition to the features with which the medical tourists are impressed before the treatment, after undergoing treatment in India they are impressed with some more features of India.

SEE TABLE 7, 8

LIMITATIONS OF THE STUDY:

The study considered only Social media into consideration. The study took only social media-FaceBook, Instagram, twitter, LinkedIn, YouTube into account. The other new media like Whatsapp, Redditt are not involved in the study. The study can be further extended to study of marketing communication mix and promotion mix in medical tourism industry.

CONCLUSION:

The paper “Role of Social Media in promoting India as a Medical Tourist destination” concludes that social media is playing a significant role in creating awareness, communicating the uniqueness of India as a medical tourist destination. Marketers should see that social media highlights all the unique features of India, procedures for which medical tourists travel is worthwhile, tourism spots in India, patient centric attitude of healthcare service providers, patient friendly government policies etc. Now that the Indian government is aggressive in positioning India high on the global medical tourism hub, the marketers can leverage on social media for landing on the international dais. The social media can reach all the stakeholders of medical tourism industries belonging to different countries also.

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DATA ANALYSIS:

TABLE 1 DEMOGRAPHIC DETAILS OF RESPONDENTS			
		Frequency	Percent
AGE CATEGORGY	1-20	4	4.0
	21-40	18	18.0
	41-60	33	33.0
	61-80	43	43.0
	81-100	2	2.0
GENDER	Female	38	38.0
	Male	62	62.0
MARITAL STATUS	DW	16	16.0
	Married	72	72.0
	UnMarried	12	12.0
COUNTRY OF ORIGIN	Afghanistan	11	11.0
	Africa	6	6.0
	Australia	1	1.0
	Bangladesh	46	46.0
	Canada	1	1.0
	Indonesia	5	5.0
	Iraq	10	10.0
	Maldives	8	8.0
	Nepal	3	3.0
	Others	4	4.0
	Russia	1	1.0
	Srilanka	1	1.0
	Switzerland	1	1.0
	UK	1	1.0
	USA	1	1.0
MEDICAL TREATMENT SOUGHT IN INDIA	Alternative Treatment like Ayurvedic	7	7.0
	Bariatric surgeries	6	6.0
	Bone Marrow transplant	3	3.0
	Cancer treatments	19	19.0
	Cardiology Treatment	8	8.0
	Cosmetic Treatment	11	11.0
	Dental Treatment	8	8.0
	General Surgeries	1	1.0
	IVF	6	6.0
	Neuro Surgeries	1	1.0
	Ophthalmology	6	6.0
	Organ Transplantation	11	11.0
	Orthopaedic surgeries	9	9.0
	Others	4	4.0

TABLE 2: RESPONDENTS WHO BECAME AWARE OF INDIA AS MEDICAL TOURIST DESTINATION THROUGH SOCIAL MEDIA - FACEBOOK, INSTAGRAM, TWITTER, YOUTUBE, LINKEDIN

RESPONDENTS WHO BECAME AWARE OF INDIA AS MEDICAL TOURIST DESTINATION THROUGH SOCIAL MEDIA (FaceBook, Instagram, Twitter, LinkedIn, Youtube)		RESPONDENTS WHO BECAME AWARE OF INDIA AS MEDICAL TOURIST DESTINATION THROUGH SOCIAL MEDIA			
		No	Yes	Total	P- VALUE
FaceBook	No of respondents	0	37	37	0.001
	% of respondents	0.0%	47.4%	37.0%	
Instagram	No of respondents	0	5	5	
	% of respondents	0.0%	6.4%	5.0%	
LinkedIn	No of respondents	0	4	4	
	% of respondents	0.0%	5.1%	4.0%	
Twitter	No of respondents	0	12	12	
	% of respondents	0.0%	15.4%	12.0%	
YouTube	No of respondents	0	20	20	
	% of respondents	0.0%	25.6%	20.0%	

AND OTHER SOURCES	Friends	No of respondents	7	0	7
		% of respondents	31.8%	0.0%	7.0%
Doctor Ref	No of respondents	8	0	8	
		% of respondents	36.4%	0.0%	8.0%
Others	No of respondents	7	0	7	
		% of respondents	31.8%	0.0%	7.0%
Total	No of respondents	22	78	100	
		% of respondents	100.0%	100.0%	100.0%

Inference:

From Table 2, It is inferred that out of 100, 22 respondents did not get awareness of India as a Medical Tourist destination through Social Media. Of this, 7 respondents (31.8 %) got awareness through friends, 8 respondents (36.4 %) got awareness through Doctors in their native country and 7 respondents (31.8 %) got awareness through other sources. 78 respondents of the total respondents (100) got awareness through Social media. Out of 78 respondents, 37 (47.4 %) respondents are aware through FaceBook, 5 respondents (6.4 %) through Instagram, 4 respondents (5.1 %) through LinkedIn, 12 respondents (15.4 %) through twitter, 20 respondents (25.6 %) through YouTube.

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	100.000 ^a	7	.000
Likelihood Ratio	105.382	7	.000
N of Valid Cases	100		

a. 9 cells (56.3%) have expected count less than 5. The minimum expected count is .88.

Statistical Significance:

Respondents getting awareness through Social media is statistically significantly associated with different types of social media like FaceBook, Instagram, YouTube, Twitter, LinkedIn with P (0.001)

		RESPONDENTS WHO BECAME AWARE OF INDIA AS A MEDICAL TOURIST DESTINATION THROUGH SOCIAL MEDIA			
		No	Yes	Total	
FEATURE OF INDIA WHICH IMPRESSED THE RESPONDENTS VERY MUCH WHILE OPTING INDIA	Accommodation	No of respondents	0	2	2
		% of respondents	0.0%	2.6%	2.0%
	Alternative therapies	No of respondents	3	8	11
		% of respondents	13.6%	10.3%	11.0%
	Cost effective treatment	No of respondents	4	15	19
		% of respondents	18.2%	19.2%	19.0%
	Expert Doctors	No of respondents	4	11	15
		% of respondents	18.2%	14.1%	15.0%
	Indian government Policies	No of respondents	0	5	5
		% of respondents	0.0%	6.4%	5.0%
	No language barrier	No of respondents	0	6	6
		% of respondents	0.0%	7.7%	6.0%
	No waiting time	No of respondents	0	3	3
		% of respondents	0.0%	3.8%	3.0%
	Proximity	No of respondents	6	15	21
		% of respondents	27.3%	19.2%	21.0%

Healthcare Technology	No of respondents	5	9	14
	% of respondents	22.7%	11.5%	14.0%
Tourism spots	No of respondents	0	4	4
	% of respondents	0.0%	5.1%	4.0%
Total	No of respondents	22	78	100
	% of respondents	100.0%	100.0%	100.0%

Inference:

From the Table 3, It is understood that out of 100 respondents, 22 respondents became aware of India as Medical tourist destination through sources other than social media. These sources other than social media impressed 6 respondents (27.3 %) with proximity of India to their native countries, 5 respondents (22.7 %) were impressed with Indian healthcare technology, 4 (18.2%) respondents impressed with cost effective treatment in India, 4 (18.2%) respondents liked expert doctors of India, 3 (13.6%) were impressed with alternative therapies etc.

78 out of 100 respondents became aware of India as a medical tourist destination through social media. Of them 15 (19.2%) respondents were attracted for cost effective treatment of India, 15 (19.2%) respondents were attracted for proximity of India with their native country, 11 respondents (14.1%) with expert doctors of India, 8 (10.3 %) respondents with alternative therapies, 6 (7.7 %) respondents with no language barrier, 5 (6.4 %) respondents with Indian government policies which made their medical tourism easier, 4 (5.1 %) respondents with Indian tourism spots in India.

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	8.082 ^a	9	.526
Likelihood Ratio	12.160	9	.204
N of Valid Cases	100		

a. 15 cells (75.0%) have expected count less than 5. The minimum expected count is .44.

Statistical Significance:

Respondents getting awareness through Social media is statistically significantly associated with features of India which impressed the respondents with P (0.001)

			RESPONDENTS WHO LIKE TO SHARE OPINION ON SOCIAL MEDIA			P- VALUE
			No	Yes	TOTAL	
RESPONDENTS WHO LIKE TO SHARE OPINION ON DIFFERENT SOCIAL MEDIA- FaceBook, Instagram, LinkedIn, Twitter, YouTube	Facebook	No of respondents	0	58	58	0.001
		% of respondents	0.0%	65.9%	58.0%	
	Instagram	No of respondents	0	7	7	
		% of respondents	0.0%	8.0%	7.0%	
	Linkedin	No of respondents	0	4	4	
		% of respondents	0.0%	4.5%	4.0%	
	Twitter	No of respondents	0	11	11	
		% of respondents	0.0%	12.5%	11.0%	
	YouTube	No of respondents	0	8	8	
		% of respondents	0.0%	9.1%	8.0%	
Respondents who don't like share opinion on social media	No	No of respondents	12	0	12	
		% of respondents	100.0%	0.0%	12.0%	
Total		No of respondents	12	88	100	
		% of respondents	100.0%	100.0%	100.0%	

Inference:

From the above table 4, it is understood that 12 % of the respondents are not interested to share their opinion on the social media. 88 % of respondents like to share their opinion on Social Media. Of that 65.9 % on FaceBook, 8 % on Instagram, 4.5 % LinkedIn, 12.5 % Twitter 9.1 % YouTube.

Statistical Inference:

Chi-Square Tests			
	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	16.866 ^a	7	.018
Likelihood Ratio	16.323	7	.022
N of Valid Cases	100		
a. 10 cells (62.5%) have expected count less than 5. The minimum expected count is .48.			

Respondents who like to share opinion on social media is statistically significantly associated with which Social media are with P (0.001)

TABLE 5 RESPONDENTS WHO BECAME AWARE OF INDIA AS MEDICAL TOURIST DESTINATION THROUGH SOCIAL MEDIA AND WHO LIKE TO SHARE THEIR OPINION ON SOCIAL MEDIA AFTER THE TREATMENT					
			RESPONDENTS WHO BECAME AWARE OF INDIA AS MEDICAL TOURIST DESTINATION THROUGH SOCIAL MEDIA		
			No	Yes	Total
RESPONDENTS WHO LIKE TO SHARE THEIR OPINION ON SOCIAL MEDIA AFTER THE TREATMENT	Facebook	No of Respondents	10	48	58
		% of respondents	45.5%	61.5%	58.0%
	Instagram	No of Respondents	2	5	7
		% of respondents	9.1%	6.4%	7.0%
	Linkedin	No of Respondents	0	4	4
		% of respondents	0.0%	5.1%	4.0%
	YouTube	No of Respondents	0	8	8
		% of respondents	0.0%	10.3%	8.0%
	Twitter	No of Respondents	4	7	11
		% of respondents	18.2%	9.0%	11.0%
	No	No of Respondents	6	6	12
		% of respondents	27.3%	7.7%	12.0%
Total		No of Respondents	22	78	100
		% of respondents	100.0%	100.0%	100.0%

Inference:

In Table 5, it is understood that 22 respondents out of 100 were not aware of India through social media, even though they did not use social media for finding information regarding India, but after their treatment, 10 (45.5%) respondents would like to share their opinion on faceBook, 2 respondents (9.1%) on Instagram, 4 (18.2%) on Twitter. 6 (27.3 %) respondents neither came to India by getting awareness through Social media nor interested to share their opinion after treatment.

Of the 78 respondents who came to India with awareness through social media, 48 (61.5 %) like to share their opinion on faceBook, 8 respondents (10.3%) on YouTube, 7 respondents (9%) on twitter, 5 respondents (6.4%) on Instagram, 4 (5.1%) on LinkedIn.

Statistical Significance:

Chi-Square Tests			
	Value	df	Asymp. Sig. (2-sided)

Pearson Chi-Square	11.131 ^a	5	.049
Likelihood Ratio	12.625	5	.027
N of Valid Cases	100		
a. 6 cells (50.0%) have expected count less than 5. The minimum expected count is .88.			

Respondents who became aware of India as a Medical Tourist destination through social media is statistically significantly associated with who like to share their opinion on Social media are with P (0.001)

		RESPONDENTS WHO LIKE TO SHARE OPINION ON SOCIAL MEDIA			
		No	Yes	Total	
Respondents who came to India by getting information either through Social media - FaceBook, Instagram, Twitter, Youtube, LinkedIn) or Friends or Doctors referral or others	FaceBook	No Of respondents	1	36	37
		% of respondents	8.3%	40.9%	37.0%
	Instagram	No Of respondents	0	5	5
		% of respondents	0.0%	5.7%	5.0%
	LinkedIn	No Of respondents	0	4	4
		% of respondents	0.0%	4.5%	4.0%
	Twitter	No Of respondents	2	10	12
		% of respondents	16.7%	11.4%	12.0%
	YouTube	No Of respondents	3	17	20
		% of respondents	25.0%	19.3%	20.0%
	Doctor Refferal	No Of respondents	3	5	8
		% of respondents	25.0%	5.7%	8.0%
Friends	No Of respondents	0	7	7	
	% of respondents	0.0%	8.0%	7.0%	
Others	No Of respondents	3	4	7	
	% of respondents	25.0%	4.5%	7.0%	
Total		No Of respondents	12	88	100
		% of respondents	100.0%	100.0%	100.0%

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	16.866 ^a	7	.018
Likelihood Ratio	16.323	7	.022
N of Valid Cases	100		
a. 10 cells (62.5%) have expected count less than 5. The minimum expected count is .48.			

Statistical Significance:

Respondents who like to share opinion on social media after their treatment is statistically significantly associated with respondents who became aware of India through social media or other sources

		RESPONDENTS LIKE TO SHARE THE OPINION			
		No	Yes	Total	
FEATURE OF INDIA WHICH IMPRESSED THE	Accommodation	No of respondents	0	2	2
		% of respondents	0.0%	2.3%	2.0%
	Alternative Therapy	No of respondents	0	11	11

RESPONDENTS MUCH WHILE OPTING INDIA		% of respondents	0.0%	12.5%	11.0%
	Cost effect	No of respondents	2	17	19
		% of respondents	16.7%	19.3%	19.0%
	Expert Doctors	No of respondents	1	14	15
		% of respondents	8.3%	15.9%	15.0%
	Indian government policies	No of respondents	0	5	5
		% of respondents	0.0%	5.7%	5.0%
	No language barrier	No of respondents	0	6	6
		% of respondents	0.0%	6.8%	6.0%
	No waiting time	No of respondents	0	3	3
		% of respondents	0.0%	3.4%	3.0%
	Proximity	No of respondents	6	15	21
		% of respondents	50.0%	17.0%	21.0%
	Healthcare technology	No of respondents	3	11	14
% of respondents		25.0%	12.5%	14.0%	
Tourism spots	No of respondents	0	4	4	
	% of respondents	0.0%	4.5%	4.0%	
Total		No of respondents	12	88	100
		% of respondents	100.0%	100.0%	100.0%

Inference:

From the Table 7, it is inferred that 12 respondents out of 100, don't like to share their opinion on social media. Out of 12 respondents, while opting India for medical tourism 6 (50%) respondents were impressed with proximity of India, 3 (25%) with Indian healthcare technology, 2 (16.7%) with cost effective treatment, 1 (8.3%) with expert doctors in India.

88 respondents out of 100 like to share their opinion on social media. While opting India for medical tourism, 17 (19.3%) were impressed with cost effective treatment, 15 (17%) with proximity of India, 14 (15.9%) with expert doctors, 11 (12.5%) with healthcare technology of India, 11 (12.5%) with alternative therapies of India, 6 (6.8 %) with no language barrier, 5 (5.7%) with Indian government policies and 4 (4.5%) with tourism spots in India.

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	11.310 ^a	9	.255
Likelihood Ratio	13.575	9	.138
N of Valid Cases	100		

a. 14 cells (70.0%) have expected count less than 5. The minimum expected count is .24.

Statistical Significance:-

Respondents who like to share opinion on social media after their treatment is statistically significantly associated with respondents who were impressed with different features of India while choosing India as their medical tourism destination.

TABLE 8 RESPONDENTS WHO CAME TO INDIA BY GETTING AWARENESS THROUGH SOCIAL MEDIA / OTHER SOURCES AND WHO LIKE / DON'T LIKE TO SHARE OPINION ON SOCIAL MEDIA AND FEATURES OF INDIA THE RESPONDENTS LIKED MOST											
FEATURE OF INDIA LIKED MOST BY RESPONDENTS		RESPONDENTS WHO CAME TO INDIA BY GETTING AWARENESS THROUGH SOCIAL MEDIA OR NOT									
		NO					YES				
		RESPONDENTS WHO CAME TO INDIA BY GETTING AWARENESS THROUGH OTHER THAN SOCIAL MEDIA					RESPONDENTS WHO CAME TO INDIA BY GETTING AWARENESS THROUGH SOCIAL MEDIA				
		DON'T LIKE TO SHARE OPINION ON SOCIAL MEDIA		WHO LIKE SHARE OPINION ON SOCIAL MEDIA		TOTAL	DON'T LIKE TO SHARE OPINION ON SOCIAL MEDIA		LIKE TO SHARE OPINION ON SOCIAL MEDIA		TOTAL
No of respondents	% of respondents	No of respondents	% of respondents	No of respondents	% of respondents		No of respondents	% of respondents			
Accommodation facilities	0	0	0	0	0	0	0	2	100	2	
Alternative therapies	0	0	3	100	3	0	0	8	100	8	
Cost effective treatment	1	25	3	75	4	1	7	14	93	15	
Expert Doctors	0	0	4	100	4	1	9	10	91	11	
Government Policies	0	0	0	0	0	0	0	5	100	5	
No language barriers	0	0	0	0	0	0	0	6	100	6	
No waiting time	0	0	0	0	0	0	0	3	100	3	
Proximity	3	50	3	50	6	3	20	12	80	15	
Healthcare Technology	2	40	3	60	5	1	11	8	89	9	
Tourism spots	0	0	0	0	0	0	0	4	100	4	
Total no of respondents		6	27	16	73	22	6	8	72	92	78

Inference:

From Table 8, it is observed that 22 respondents out of 100 did not come to India by getting awareness through social media. They got awareness through sources other than social media. Of this 22 respondents, 6 (27%) don't like to share their opinion on social media after their treatment. In fact these 6 (27%) respondents were impressed by different features of India vis-a-vis 3 (50%) respondents about proximity, 2 (40%) about Indian healthcare technology and 1 (25%) respondent about cost effective treatment.

22 respondents out of 100 did not come to India by getting awareness through social media. They got awareness through sources other than social media. But of this 22 respondents, 16 (73%) like to share their opinion on social media after their treatment. 4 respondents like to share about expert doctors, 3 about alternative treatments, another 3 about cost effective treatment, 3 about proximity, and 3 about Indian healthcare technology.

From the 100 respondents, 78 respondents came to India by getting awareness about India through social media. Of those 78 respondents 6 respondents came to India by gathering information from social media but don't like to share opinion on social media after treatment. While choosing India for medical tourism, these 6 respondents were impressed by different features of India via social media vis-a-vis 3 (20%) respondents with proximity, 1 with Indian healthcare technology, 1 with cost effective treatment and 1 with expert Indian doctors.

72 respondents out of 100 came to India by getting information through social media and willing to share opinion over social media. From the information through social media, they are impressed with different features of India- 14 respondents about cost effective treatment, 12 about proximity, 10 about expert doctors, 8 about alternative therapies, 8 about Indian healthcare technology, 6 about no language barrier, 5 about government policies, 4 about tourism spots, 3 about zero waiting time, 2 about accommodation facilities.