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Positioning medical tourism in the broader framework of health tourism

Many terms are used to describe the relationship between health and tourism in the framework of special tourism products such as health tourism, medical tourism, hospital / clinical tourism, wellness tourism, and sometimes travel medicine, often conceptually completely inconsistently. The aim of this paper is to precisely define medical tourism within the numerous types of tourism and position it clearly in the complex framework of health tourism.

To create some kind or form of tourism it is necessary to have, on the one hand, a significantly large group of consumers that wish to satisfy their leisure or non-leisure needs in the same or similar ways and, on the other hand, tourism products need to be created to fulfill these needs.

In this, many of those not engaged in tourism need to be reminded that tourism goes beyond travel motivations, travel needs, activities and tourism attractions centered around leisure that are primarily based on the entertainment and pleasure. According to the official statistical classification of international visitors of the World Tourism Organization, (1992, in Kušen, 2002a) tourists and day visitors travel mostly for leisure reasons (rest and relaxation, sport recreation, leisure education, entertainment, pleasure), but also for non-leisure related reasons such as business trips, professional education or health. Therefore, medical tourism is based on the need of a person to travel in order to get medical treatment or related services, what is non-leisure related motive.

While those traveling for leisure travel mostly motivated by tourism attractions (Kušen, 2002a), non-leisure related travel is motivated by tourism 'para-attractions' that, for specific medical tourism consumer segment, are also important tourism attractions. Hospitals and medical centers that provide specialized medical services (treatments) to tourists and daily visitors can be defined as tourism 'para-attractions' and those able to do so in the future can be considered as potential tourism 'para-attractions'. Hospitality services such as hotels and restaurants, in such case, represent only receptive component of the tourism offer as without them such visitors could not be accommodated.

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On the other hand, health is the oldest and strongest motive generating tourism flows and, from this perspective, the entire tourism in its broadest sense can be considered as health tourism (Kušen & Klarić, 2005). Health tourism, in the narrow sense, so fondly used by many health and tourism professionals, is still not sufficiently elaborated from, both, professional and legal standpoints. In everyday use and in practice, health tourism is located in the very broad context ranging from wellness tourism to hospital-clinical tourism and from specialized hospitality enterprises to health providers.

In Croatia the Ministry of Tourism has initiated a study of health tourism which would give input for development of a new health tourism regulative framework. The study was completed in 2002 (Kušen, 2002c; Kušen, 2010). The study, conducted with representation of, both, health and tourism ministries, has demonstrated that there was not a need to introduce new law on health tourism. Instead, it was recommended that the few amendments to the existing laws on tourism would be sufficient. However, this was not implemented to date. Another important contribution of this study related to the phenomenology of health tourism, especially in terms of the holistic health (physical, mental, spiritual, social) that encompasses maintenance and improvements of health and well being, recuperation, the contemporary role of natural healing remedies, medical supervision, organization of specific services and related issues.

Maintaining and improving the holistically understood health should be fundamental goal of health tourism, which is mainly achieved by using natural healing remedies, along with medical supervision and other health procedures. Concern for the preservation of health and quality of life are the main tourist motives (rest and recuperation). They are domain of leisure activities and form the fundamentals of health tourism. Health tourism can be defined as a tourism product made of a combination of services in one or more health-tourism facilities, located in the health resort within the health tourism destination. The range of wellness programs can be used to add to the quality of experience (Kušen-Adam, 2002; Kušen & Mezak, 2005), with the mandatory use of natural healing remedies and professional medical supervision. Health tourism services can be also offered in natural spas. However, all too often their main attraction is water-park and, as such, they are visited primarily for leisure purposes (entertainment and sport recreation) and, in these cases, cannot be considered as the core product of health tourism.

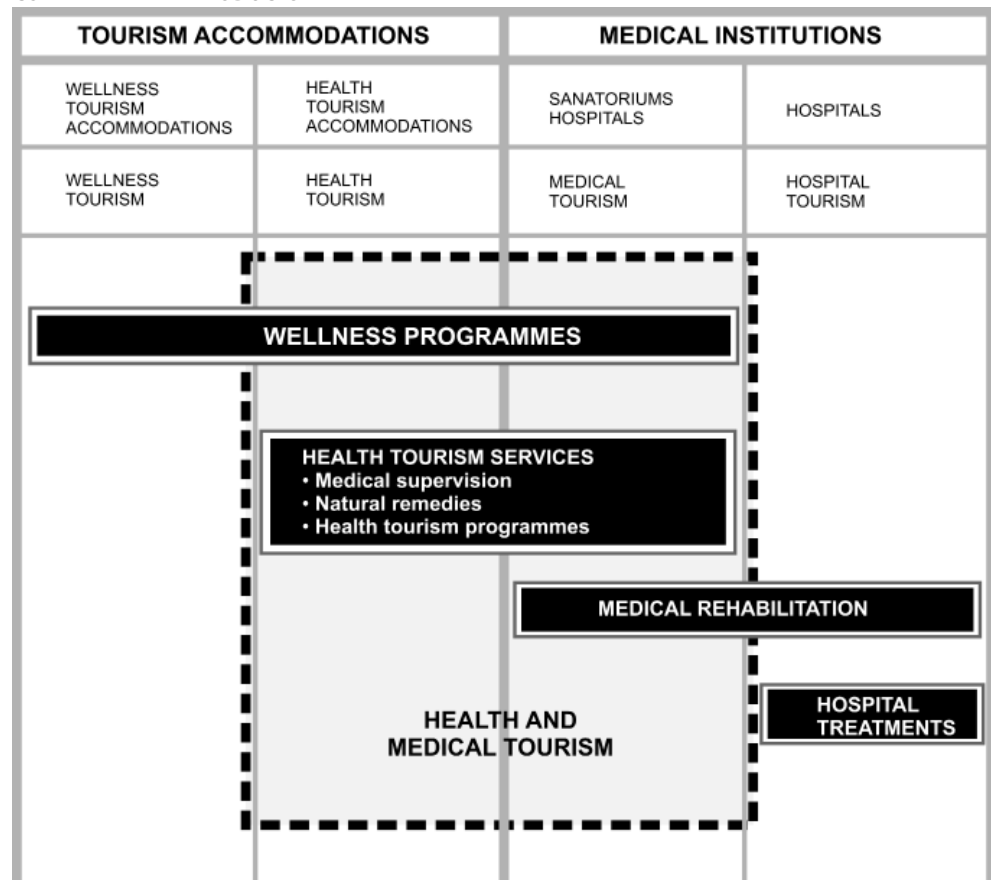
Natural health remedies as a tourism attraction (potential or real) scattered throughout Croatia and their healing properties are known at least since Roman times (Kušen, 2002b; Kušen, 2006). These are geological formations (mountains, karst caves, mines, healing sand, healing gases), air (components: insolation, temperature, humidity, air circulation, seasonal changes; healing climate: Mediterranean climate, mountain climate, a particular microclimate), water (sea water, thermo-mineral water, mineral water, healing mud) and flora (forests, essential herbs, algae, fungi). It is precisely the distance from the natural medicinal factors from the tourist generating regions that

encourages health-tourist travel. In addition, it should be remembered that the change in physical and social environment itself has a healing effect.

Croatia does not utilize well this vast potential for health tourism development based on the natural healing remedies. On the Adriatic coast marine aerosol flows 365 days a year, and it is also with the beneficial influence of the Mediterranean climate and essential oils available in the coastal area. With Azerbaijan (Baku), Croatia (in Ivanić Grad) is the only country in the world that has the therapeutic naphthalan oil. Medicinal mud deposits (peloids) in Nin (mid-Adriatic) are practically not used at all, and it is also the case with other locations (ie. such as the mud found on the island of Pag). Tourism development almost completely bypassed the areas with healing mountain climate, while few available Croatian spas are far from the optimal health tourism products as most are turned into special hospitals under the state sponsored medical insurance scheme. Those attempting to modernize their tourism product mostly evolve into water-fun parks.

Figure 1

OUTLINE OF THE HEALTH AND SPA TOURISM CHARACTERISTICS AND THEIR RELATIONSHIP WITH COMPLIMENTARY PRODUCTS



Finally, in the development of health tourism in Croatia there is still uncertainty as to the delimitation of competences between the departments of tourism and health. A good development model for health tourism is Abano Terme (Italy). New health

tourism developments in the Abano Terme have prompted the change of the Italian legislation related to the regulation of health tourism. The health and medical tourism products offered there are based on the private entrepreneurs investing in specialized hotels where, beside board and lodging, medical programs and procedures are offered, all based on thermal mineral water and curative mud, under the supervision of medical specialists. In doing so, medical and paramedical services enjoy absolute professional autonomy (staff, equipment, funds, facilities, etc.) and are under the direct supervision of the health department. City council main concern is about proper planning and development of tourism (spa) town and the entire health-tourism destination.

From the above discussion, it can be concluded that, from the tourism point of view, there are clearly defined differences between the medical (hospital / clinical) and health tourism. Medical tourism is based on non-leisure motives – getting medical treatment (regaining lost health) for which appropriate medical facilities (hospital, clinics, health professionals, equipment) need to be available. Health tourism is mostly based on leisure-related motives of rest and relaxation (maintenance and improvements of health) for which specific accommodation facilities, natural healing remedies, medical supervision and conditions for implementing health programs, complemented by a range of auxiliary services need to be offered in a health resorts and/or health tourism destination. Despite these differences, the simultaneous provision of health and medical tourism in the health tourism destination can achieve a synergistic effect.

However, there are many barriers and limitation that, currently, do not encourage development of health tourism in Croatia, in spite of the fact that the health tourism potential is widely recognized and often subject to academic and, more so, professional discussion among those interested in health tourism investments. In general, the growing demand for medical services among those able to purchase such services is well recognized. It is also acknowledged that, to be competitive, top medical professionals and equipment need to be available together with quality accommodation and safe environment. More so, Croatia can offer some medical treatments at the cost lower than in the home countries of potential medical tourists. Indeed, some have already capitalized on this trend by investing in smaller facilities such as dental specialist centers, plastic surgery, physiotherapies and in smaller hospitals specialized for orthopedic surgery or similar. There are also few large 'green field' investments announced that would include construction of the large hospital complexes, some completely outside the established tourism destinations.

While these initiatives are encouraging, at the same time there are unrealistic expectations placed on medical tourism as a vehicle for solving the two most important problems of the Croatian tourism - extreme seasonality and low occupancy rates of existing accommodation facilities. Those advocating medical tourism development are often, more or less purposefully, blurring differences between medical and health tourism, attributing potential benefits of medical tourism to the overall Croatian tourism that it cannot, in reality, deliver.

At the same time, health tourism which was developed in many Croatian inland (Varaždinske Toplice, Stubičke Toplice, Krapinske Toplice, Daruvar, Lipik, Topusko) and coastal (Opatija, Rovinj, Crikvenica, Veli Lošinj, Veli Brijun ...) spas century ago is on a continuous decline after the WW2, with most spas being turned into state-sponsored rehabilitation hospitals. It is only over the last decade or so that the health tourism is, at least, theoretically reaffirmed and this effort will be wasted if the proposed legislation does not take the insights derived into account and is not based on the consultation with a wide range of stakeholders.

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