

Consequences of Health Tourism Development: A Review of Benefits, Risks, and Strategic Policy Implications

Evangelia Ourani^a, Daphne Kaitelidou^b, Petros Galanis^c, Olga Siskou^d

^aPhD Candidate, Department of Tourism Studies University of Piraeus, Greece.

Email: evangelia.ourani@gmail.com

^bProfessor-Director, Center for Health Services Management and Evaluation, Nursing Department National and Kapodistrian University of Athens, Greece.

Email: dkaitelid@nurs.uoa.gr

^cAssociate Professor Nursing Department National and Kapodistrian University of Athens,

Email: pegalan@nurs.uoa.gr

^dAssistant Professor Department of Tourism Studies University of Piraeus, Email: olsiskou@unipi.gr

Abstract

Health tourism is a continuously expanding sector in many countries worldwide. In 2004, health tourism produced \$40 billion globally at a rapidly growing rate. By 2015, it had produced \$51 billion, with a projected growth of \$125 billion by 2021. In addition to health tourism's impact on economic growth, it generally has both positive and negative effects on both countries of destination and origin. The main purpose of this study was to identify the consequences of the development of health tourism and to bring to light an appropriate strategic plan for the sustainable development of health tourism. To achieve this goal, a systematic literature review was conducted in 2022, utilizing the PRISMA methodology through electronic databases (PubMed and Google Scholar) searching for relevant articles published after 2015. Initially, 6,396 papers were found, of which 46 met the inclusion criteria. Papers in Greek or English analyzing the (economic) effects of health or medical tourism were considered as eligible for review. Positive effects for the destination country, are related to the sectors of employment, education, economy, tourism, health, and quality of life, as well as the national level. For the country of origin, the main benefits are regarding the decongestion of the health system, the decrease of the waiting period, and the reduction in the cost of treatment of certain incidents. For the country of receipt, the main negative effects are related to the health system (e.g increase in the cost of health services leading to unequal access and increase in the phenomenon of induced demand). For the country of origin, the negative effects are related to increase in the brain drain phenomenon, increased risk of disease transmission, decrease in revenue in the health system, and decrease in productivity. In general, the existing studies seem to be focused on the positive effects, leaving gaps for the negative effects. Also, the majority of the studies concentrate on the destination country, leaving very little available information regarding the effects and risks for the country of origin.

JEL Classification: I11 Analysis of Healthcare Markets, O1 Economic Development, Z3 Tourism Economics

Keywords: 'Health tourism'; 'Health tourism positive effects'; Health tourism negative effects'

1. Introduction

The continuous advancements in technology, the increase in life expectancy, modern lifestyles and rising health costs are among the main factors contributing to the emergence of a different form of tourism—health tourism. Globally, patients are seeking improved surgical procedures in certain countries or/and more affordable health services abroad.

According to the Organization for Economic Cooperation and Development (OECD), *Health Tourism* consists an umbrella term that includes all forms of travel where the primary initiative of the tourist is to improve physical, mental, or spiritual health, through medical and/or wellness services (1,2,3,4). Health tourism can be categorized based on different aspects, such as the motivations of the tourists or the type of services provided. World Health Organization (WHO) classified health tourism in two categories: the first is wellness tourism (with or without using physical resources e.g thermal springs-spas), which refers to travels regarding the development or balance of physical, psychological, and mental status ; the second is medical tourism, which refers to travelers seeking medical procedures regarding prevention, diagnosis, treatment, and rehabilitation (6). According to the OECD, indicative services provided in the context of medical tourism are: dental care, cardiology/cardiac surgeries, orthopedic surgeries, transplants, eye surgeries, diagnostics and check-ups, bariatric surgeries, fertility, and reproductive treatments (4). Moreover, the term of cross-border care is commonly used, especially in the EU area and refers to healthcare services received by a citizen outside the country of residence, usually within the EU, with the right to reimbursement from the home country health/insurance systems.

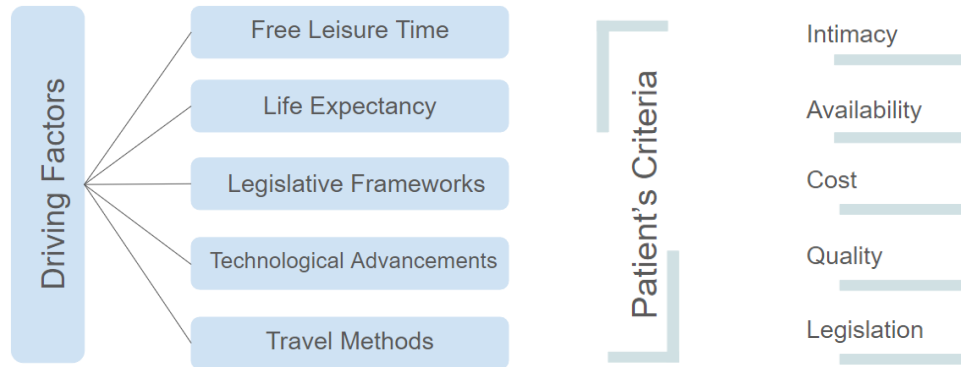
Health tourism has positive economic and social effects on the health and tourism sectors. Many studies have been conducted addressing both the positive effects as well as the strategies that focus on the sustainable development of health tourism. Countries with high-quality health services provided at low cost, are most preferred and are ranked higher in the charts of the countries with the most advanced health tourism. It has become obvious that health tourism is a growing sector that has earned the attention of more and more countries globally and thus we are reviewing health tourism broadly.

Thus, the **aim** of this systematic literature review is to assess the economic, social and health impacts of health tourism (both positive and negative)—with the ultimate goal to evaluate whether the benefits outweigh the risks and finally to bring a light a model of strategic planning that could assure the best outcome.

1.1 Driving factors for the development of health tourism

Health tourism is a rapidly growing sector, and many changes in the modern lifestyle can be considered the main factors related to health tourism development. Firstly, free time for leisure has increased in the last few decades, giving citizens more time to invest in their health. Life expectancy has also increased due to increased health needs. Traveling between countries and modern legislative frameworks enabled easy movement of patients between countries. Finally, technological advancements are facilitating improved management of the patient's history through various applications, such as e-health (6). From the patient's point of view, there are also criteria and driving factors that lead them to travel abroad seeking health services. These criteria are classified into five factors: intimacy, availability, cost, quality, and legislation (e.g., abortions).

Figure 1: Key factors for the development of Health Tourism



Health tourism can be vulnerable to economic changes in the destination country, political changes, travel prohibitions, and technological changes. On the other hand, it can also be promoted through legislative changes and international agreements, international recognition of rare diseases, the development of ways to travel and the growth of the health industry. Given the positive effects of health tourism, stakeholders (brokers, insurance companies, health providers, and tourism enterprises) are focusing on the further development of this sector. The internet remains the main source of information regarding the available health services across countries. Nowadays, there is a reported increase in the agencies and the brokers organizing these trips. Health providers are developing new treatments, and political and legal frameworks across countries are changing, aiming to ease the development of health tourism (4).

2. Materials and Methods

2.1 Data Search Process

In the data search, keywords that served the research question were initially identified, and studies were searched based on these. In particular, the specific research questions were:

- What are the main positive and negative consequences of health tourism for destination countries?
- What are the main consequences (positive and negative) for countries of origin?
- What policy or strategic planning measures are suggested in the literature to support sustainable health tourism development?

Then, all results were recorded and initially reviewed in terms of the title, followed by an examination of the abstract. Finally, after reviewing the data, those that could address the research questions were identified and included in the systematic literature review. The defined keywords are shown in Table 1.

Table 1: Keywords and number of articles

Keywords	Number of Articles
"health tourism" AND "economic benefits"	1,841
"medical tourism" AND "economic benefits"	1,807
"medical tourism" AND "economic analysis"	762
"health tourism" AND "economic analysis"	643
"health tourism" AND "economic effects"	618
"medical tourism" AND "economic effects"	547
"health tourism" AND "economic risks"	94
"medical tourism" AND "economic risks"	84

2.2 Data Selection Process

To find the appropriate data, the search was conducted in the electronic databases PubMed and Google Scholar. The search was based on the previously mentioned keywords, and results were requested to be displayed according to relevance. Additionally, the search was limited to studies published after 2015, as health tourism modern commercial form has expanded rapidly just the last decade. The results included studies, systematic literature reviews, master's theses, doctoral dissertations, conference presentations, and statistical data. Studies where access was restricted and those in languages other than English and Greek were excluded from the data collection.

2.3 Results Extraction

The total number of results amounted initially to 6,396. After removing duplicate entries, the number was reduced to 5,351 results. Then, a review of the titles was conducted, and 5,039 results were excluded. The remaining 312 abstracts were reviewed, and 228 were excluded. Subsequently, a full-text review of the remaining 84 results was performed, with 38 being excluded. Finally, the remaining 46 results were thoroughly examined concerning the positive and negative impacts of the development of health tourism. In Figure 2 section process of articles is diagrammatically presented using the PRISMA method.

Figure 2: Flow chart presenting selection process of articles

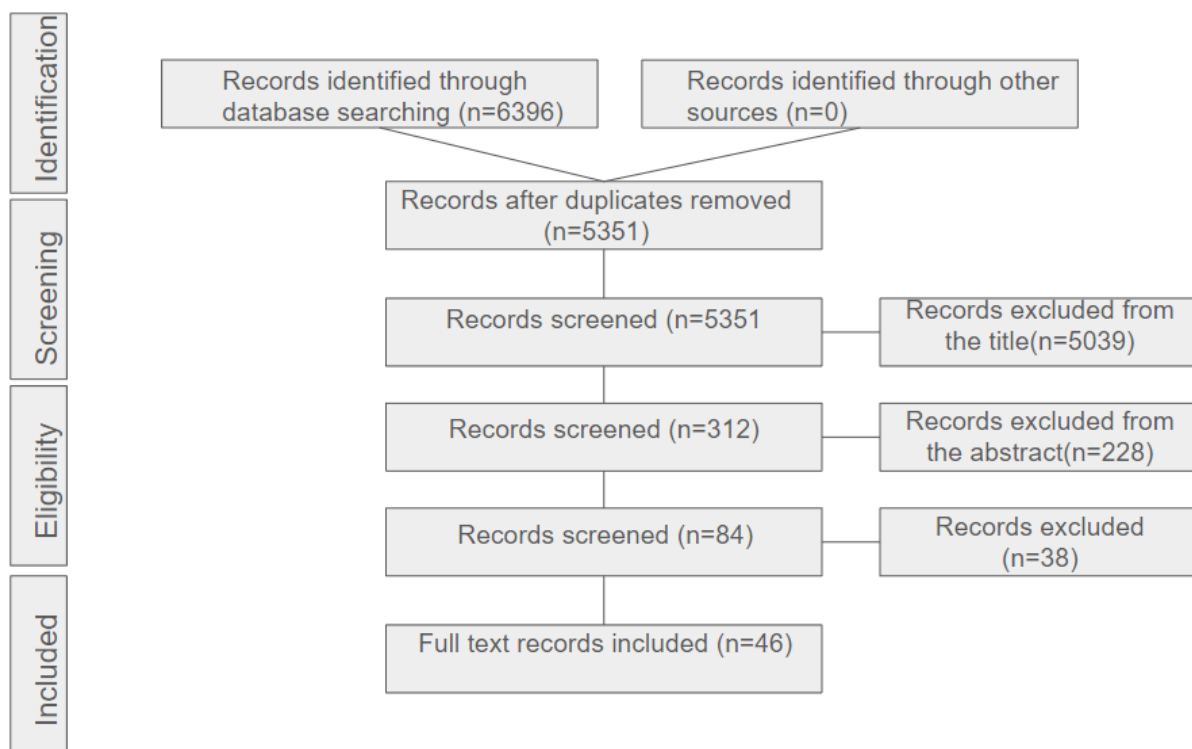
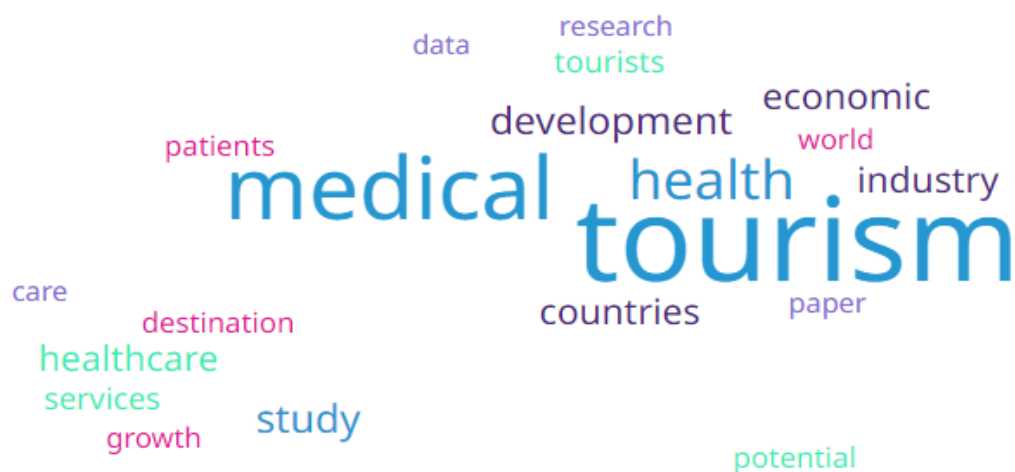


Figure 3: The 20 most common words of the abstracts



3. Results and Discussion

3.1 Analysis

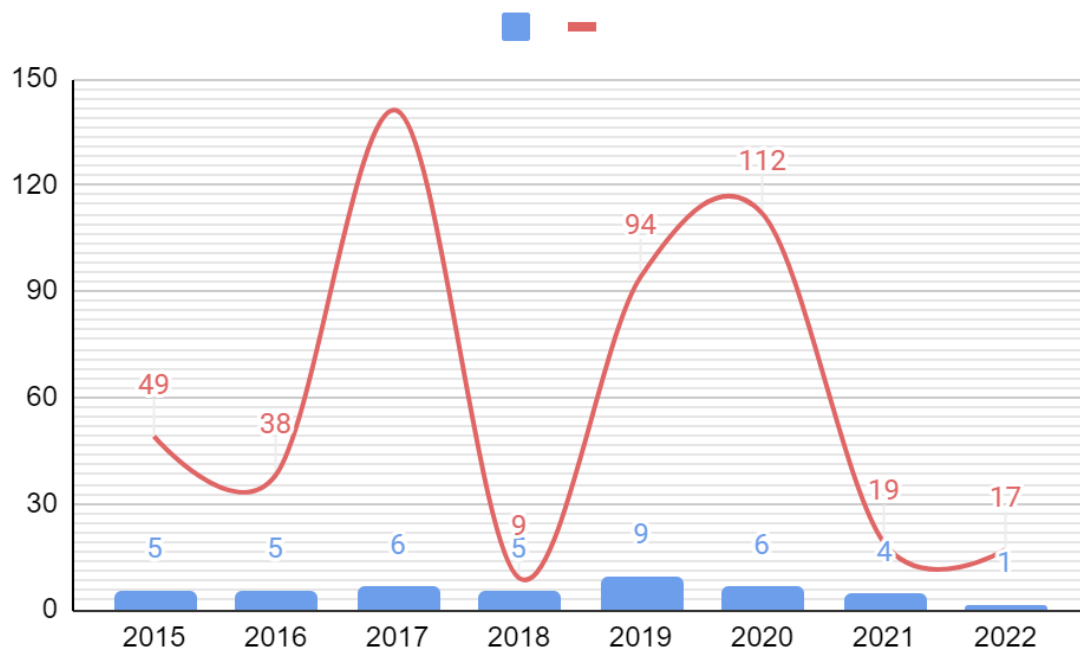
From the 46 selected studies, 23 referred only to the positive effects (50%), in 13 studies, both positive and negative effects were mentioned (~28%), four of them mentioned only the negative effects (~9%), three of them mentioned the positive effects and also employed a SWOT analysis (~7%), two of them utilized only a SWOT analysis (~4%), and the last one referenced both positive and negative effects and also employed SWOT analysis (~2%).

In the majority of studies (~78%), the focus was solely on the destination country. Six studies (~13%) addressed both the country of origin and destination; three studies made no reference to the country of origin or destination but focused on a global scale; and only one study (~2%) exclusively addressed the country of origin.

Half of the studies focused on the necessary strategies for the development of health tourism (50%); 16 studies reached the conclusion that there was a need for further investigation of this sector (~35%); and finally, the remaining seven could not be categorized (~15%).

Furthermore, an upward trend is reported in the number of articles, reaching a peak (10) in 2019, followed by a dramatic decline, most likely due to the Covid-19 pandemic. Finally, the majority of studies were concentrated in Europe, amounting to 22 studies, (with Turkey being mentioned in six studies), followed by Asia, with 16 studies. Based on these results, we can conclude that health tourism is attracting increasing interest from the scientific community, and the number of studies appears to be rising over the years. At the same time, Europe and Asia are primary destinations for health tourists, as some countries in these regions already have a well-developed health tourism sector.

Figure 4: Evaluation of articles and citations from 2015-2022
(blue color: number of articles, red color: number of citations)



3.2 Consequences for destination countries

Destination countries may benefit from revenues, employment, investment, and international visibility, but they may also face problems of inequality, higher prices, and concentration of resources in private health facilities.

3.2.1 Positive effects for destination countries

Regarding the destination country, positive effects are related to the sectors of employment, education, economy, tourism, health, and quality of life, as well as the national level. The employment sector benefits from the development of new job positions, leading to limitation of unemployment rates (1,3,9,17-33) and an increase in income (30). Furthermore, it contributes to the arrival of experts from abroad (10,22,26,31,34, 35) and the return of the scientific community that had left the country (18,22,23,26-17,31,36). In the education sector, there have been reports of the development of new specialties (10,21,23, 26) and improvement of the educational level (9,10,26,30,34,35,37). On a national level, it contributes to the preservation of historic heritage and the environment (2) and fosters the growth of provincial areas (30). Also, in many countries, it has been reported that there has been an increase in trust levels towards the government due to the positive effects that residents have been experiencing (38). Economic development is achieved due to increased revenues (9,10, 19-23,25,26,28-30,32-34,36,38-43), via direct and indirect taxation (9,22,24,28-30,33,38), as well as new investments (39,40). For the tourism sector, there have been various benefits, such as the improvement of the country's profile (2,17,18), increased country promotion (20,40), the upgrade of the local products (2), increased chances of re-visitation (17,28) and the diversification of the tourism product (2). Also, it enables cooperation between the regional providers (2), it meets the problem of seasonality (2,35,37), it preserves the regional culture, (2) and it effects the area positively, since it has been noticed that health tourists spend more than the leisure tourists (9,18,19,32). In the health sector, the upgrade of the infrastructure (9,18,20,21,32, 37,41,43), the upgrade or purchase of new equipment (9,11,18,20,21,23,27,32,33,36,37), the adaptation of modern protocols and guidelines given by international organizations (1,9,10,23, 30,36) are the main benefits. Finally, positive effects have also been noticed regarding the quality of life for the residents since health tourism contributes to the improvement of the road networks (21, 28, 30), and transport networks (20), and water supply and drainage systems (28).

3.2.2 Negative effects for destination countries

On the other hand, various negative effects have been reported from the unauthorized or the not-well-thought development of health tourism, which are also related both to the destination country and origin. For the destination country, the main negative effects are related to the health system and the national level. In the health system, there is an increase in the cost of health services leading to unequal access (18,32) and an increase in the phenomenon of induced demand (45). The negative effects are mostly related to the private sector. Unequal allocation of funds through the private and public sectors (22,34,31,32,38,42,45), unequal quality of health services (27,30), and concentration of human and physical resources to the private sector are also reported (18,22,30,32,36,38,45). The development of health tourism mainly in provincial areas also leads to unequal geographical access for permanent residents (18). At a national level, the health tourism can create problems due to the high level of competition (13,17,37,42). Moreover, most of the investors are coming from abroad, and therefore those businesses don't contribute to the national economy as expected (22).

3.3 Consequences for countries of origin

Countries of origin may benefit from reduced waiting times and lower treatment costs for some patients, but they may also face risks related to continuity of care, patient safety, loss of domestic health-sector revenue, and brain drain.

3.3.1 Positive effects for countries of origin

For the country of origin, the main benefits are regarding the decongestion of the health system (1,21,32), the decrease of the waiting period (1,21), and the reduction in the cost of treatment of certain incidents (21). Globally, there are also a few benefits from new international agreements (44) and an increase in information and knowledge flow (33).

3.3.2 Negative effects for countries of origin

For the country of origin, the negative effects are related to the health sector and the individual level. In the health sector, an increase in the brain drain phenomenon has been reported (18,42), an increased risk of disease transmission (1), a decrease in revenue in the health system, and a decrease in productivity which leads to an increase in the cost of health services (23).

On an individual level, the primary negative effect is related to potential malpractices (1,18,23, 28,31,32,42,47). Other problems reported are related to the incorrect information provided to patients prior to their trip (1,23,28,45) and consequently the formulation of inaccurate perceptions related to health services (23).

3.4 Strategies for the development of sustainable health tourism

Health tourism development can be affected by various factors such as globalization, competition, technological advancements, diversification of health systems, political agendas, and the legal framework of each country. To achieve development, three distinct stages are proposed: the state intervention, the cooperation between the stakeholders, and the provided initiatives (48).

Understanding in depth patients' motivations for seeking health care in another country is considered an essential precondition for setting up appropriate strategic planning for the further development of health tourism. The main motivations are the quality, the cost, the level of expertise, the waiting time, the ability to communicate in other languages, the insurance coverage, the available technology, and the political and social stability of the country. Through the cooperation of the agencies, accommodations, and health providers, attractive packages can be created, fulfilling all the above-mentioned needs and giving motivation (21).

According to Joseph (2017), for the sustainable development of health tourism, there are seven criteria. The first one is about the tourism factors —the ability of a country to provide a pleasant experience. This criterion concerns the beauty of the country, the culture, the climate, the available monuments, and the provided activities. The second criterion is the destination factors, which concern the facilities, the road network, accessibility through ports and airport, and security. The third criterion is the medical factors, which are about the adequacy of the health facilities, the right diagnosis and treatment, as well as the services provided within the hospital. The fourth criterion is the country's integrity. The fifth criterion is the quality of the health services using the model SERVQAUL concerning the patient's satisfaction. SERVQAUL consists of five dimensions: 1. facilities, equipment, and personnel; 2. integrity; 3. responsiveness in order to help the patients; 4. assurance coming from the personnel of the hospital; and 5. empathy. The sixth criterion is the received privileges. It is known that it is easier to keep an old customer than to obtain a new one. By giving privileges, you can obtain new satisfied customers, which will be a better marketing action. Finally, the seventh criterion is patient-centeredness which involves high communication skills, the ability to create

relationships based on trust, and the ability to provide health services to different races, cultures, and religions. These seven criteria can lead to high patient satisfaction and an improvement in the expert level of the personnel (39).

Moreover, the consequences identified in this systematic review provide a clear foundation for designing a strategic framework for sustainable health-tourism development. International evidence proves that health tourism can generate employment, investment, and infrastructure upgrades, but may also increase inequalities in access to care, divert resources to the private sector, and create risks related to malpractice (18, 19, 22, 23, 30, 34, and 47). These findings imply that strategic planning must be directly linked to the observed effects as depicted in Table 2.

Table 2: Health Tourism Effects and Strategic Planning for sustainable development

Health Tourism Effects/Problems	Strategic Axe	Indicative Actions
Increase inequality in access to care partially related to brain drain	Ensure accessibility of domestic patients	Monitoring of waiting times, public sector safeguards retention incentives, balanced staffing
Attract investments	Ensure benefit of investments for the public health sector and local communities	Direct tourism revenue into public health sector (including digital health) and transport
Malpractice and misinformation risks	Regulatory framework for ensuring patient safety and transparency	Licensing, Accreditation, Verified digital information platforms, transparent pricing, implementation of modern valid clinical protocols, informed consent, multilingual communication

Building on these insights, a more explicit and integrated framework for sustainable health-tourism development is needed—one that incorporates regulation, quality assurance, patient protection, effective workforce management, and coordinated investment.

The international literature on health tourism brings on light several drivers of competitiveness—such as destination attractiveness, medical expertise, and well developed tourism infrastructure—that are directly relevant for Greece. As Connell (2013) [50] underlines, health tourism expands most rapidly in countries where tourism capacity and medical competence coexist. Similarly, OECD (2011) [51] highlights that patient mobility is facilitated by modern legislative frameworks and improved cross-border accessibility, factors that also characterize Greece’s tourism and health-care sectors. UNWTO and ETC (2018) [6] further emphasize that destinations with established hospitality enterprises and favorable climatic conditions are better positioned to integrate health-related services into their tourism ecosystems. Given that Greece already exhibits these enabling conditions, the international evidence indicates the country potential for successful health-tourism development especially in areas such as wellness tourism, thermal tourism, and fertility services. Based on Global Wellness Institute [52] global growth in wellness and thermal tourism is reported. In these sectors, Greece has long-standing natural resources and infrastructure. Destinations with thermal springs (such as Greece) and wellness traditions are particularly well positioned to

attract health tourists seeking relaxation and prevention-oriented services [53]. In addition, fertility tourism is expanding internationally due to cost differentials and specialized expertise, both of which characterize Greek reproductive medicine [54].

At the same time, Greece also faces constraints related to health-system capacity, regional inequalities, investment needs, regulation, and competition from other destinations. Governments have to pay attention on adoption of coordinated governance frameworks to prevent health-system strain and to ensure national patients access to care. Moreover, strict regulatory oversight, including accreditation systems, transparent pricing, and quality-assurance mechanisms are considered as essential preconditions for sustainable development of health tourism.

4. Conclusion

Through this analysis, we can draw a few conclusions regarding the study of the health tourism sector so far. Primarily, the existing studies seem to be focused on the positive effects, leaving gaps for the negative effects. Also, the majority of the studies concentrate on the destination country, leaving very little available information regarding the effects and risks for the country of origin. Last but not least, while half of the studies focused on the further steps in the development of health tourism, a significant percentage suggests that further investigation of this sector is needed before we can be certain of its effects and risks.

Author Contributions

OE: investigation, writing—original draft preparation

KD: conceptualization, review and editing

GP: methodology, review and editing

OS: supervision, conceptualization, review and editing

All authors have read and agreed to the published version of the manuscript.

Conflicts of Interest

The authors declare no conflict of interest.

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