CHAPTER – 6

FINDINGS, SUGGESTIONS AND CONCLUSION

6.0 Introduction
6.1 Summary of Findings
6.2 Suggestions and Implications
6.3 Potential for Future Study
6.4 Conclusion
6.0 INTRODUCTION

The chapter presents the findings, suggestions, and conclusion of the study. This is the sincere attempts to link the pre-purchase and post-purchase behaviour of health tourists by using the scientific research method and statistical tools. The present study has uncovered the underlying dimensions of health tourist preferences, perception, and satisfaction by drawing a linear relationship with customer retention.

The study is based on the customer preferences and satisfaction on health tourism services. The study also discusses on the relationship between preference and satisfaction that can create new customers and retain the existing clients. To analyze the relationship and interdependence between preference and satisfaction, the primary data analysis was done by using advanced statistical tools. However, the scope of the study is only confined to the selected ayurvedic health resorts and their guests. After a comprehensive review of literature, an instrument was framed to gather background information about the prevailing practices in the ayurvedic resorts in Kerala. The researcher made frequent visit to these resorts to conduct interview with the managers and staff. The instrument was re-tested through the pilot survey to make more reliable and valid. A sample of 360 health tourists was collected from wide range of demographic background of sample respondents. While carrying out the analysis and interpretation of the output of the primary data and secondary data, the study has revealed some relevant findings pertaining to the customer preference and satisfaction for sustaining the ayurvedic tourism in Kerala as the state epitomizes the rich glorious tradition of traditional way of treatment.
6.1 SUMMARY OF FINDINGS

The socio-demographic profile of the health tourists reveals that there is a domination of male tourists over female tourists with an age group of 35 and above. While considering the nationality of the tourists, the majority were the nationals from various countries in Asia, including the domestic tourists of India, followed by the nationals from Europe. The socio-economic profile of the health tourists reveals that highly educated professionals with a high disposable income prefer healthy holidays. However, the respondents (tourists) were mainly educated professionals drawing a high salary of 3 lakh and above.

The travel history of health tourists reveals that the majority of the respondents were repeat visitors to Kerala not because of some other attractions of the state but because of the ayurvedic resorts with a minimum duration of a week and more. The study shows that considerable number of tourists generally pay repeat visit to Kerala with an average length of stay of more than a week with an average expenditure of one lakh and above. The motivation factor for the holiday is to travel by the ancient principle ‘healthy holidays’. The current health tourism boom in marketing terminology as we describe is nothing else but ‘an old wine in a new bottle’. When the data related to the travel companionship of tourists is analyzed, it shows that they mostly travel with friends and family. They gather information through friends and intermediaries.

The first phase of the analysis revolves around health tourist perception and preferences. The study discloses the underlying socio-economic dimensions which have association and significance to the perception of health tourists.
The socio demographic factors such as marital status, age, education, and sources of awareness play a vital role in the overall perception of the health tourists. Different age group of tourists has different priorities and perception, thus, level of perception varies with ages. John and Cole (1986) also discusses that elderly people on average, slower in encoding new informations and in retrieving information stored in memory, thus reducing information processing capability. Mittal and Kamkura (2001) explain that older people may have lower thresholds of acceptable satisfaction, it also suggests that age related differences in service evaluations may be due to different expectations driven by differences in society and culture at birth and maturation (Anderson et al., 2008). Different marital status of respondents have different level of perception. With changes of marital status respondents perception varies with the influence of their spouse. Education and knowledge preferably has an impact on the perception of health tourists. Highly educated tourists have wide exposure with much interest to get enlightened them with various aspects of health care services. To substantiate the above findings, Kotler (1996) also discusses that tourist’s buying decisions are influenced by age, life style stage, marital status, income etc.

Travel profile of the respondents was tested with the degree of satisfaction of health tourists on booking, awareness creation, environment, and facilities. The results of hypothesis tests show that travel attributes like frequency of visit, average length of stay, companionship, sources of awareness, and reasons for selection have significant association with level of satisfaction on booking, awareness creation, environment, and facilities.
The results of Garret ranking give a detail index of preferences of the selection of ayurvedic resort, health care programme and treatment by health tourists. The respondents selected the ayurvedic resorts mainly based on the quality of treatment, authenticity of medicine, and location of resort. Preferred health care packages are customized with stress management and anti-ageing programmes. Similarly, Dhara and Phizhichil are two important treatment programmes preferred by the health tourists which in turn are basically used for rejuvenation and stress relieving therapy.

The explanatory factor analysis revealed that the perception of respondents consists of three latent dimensions such as destination image, health care packages, and Ayurker. The destination image and health care package reveal the underlying dimensions health tourism in Kerala. The third factor Ayurker clearly explains the interrelationship between Kerala and Ayurveda. These results could help the resort marketers to better understand the factors contributing to the perception of health tourists.

The factor analysis on the satisfaction of tourists is done in two stages. The first one is to identify the underlying dimensions of ancillary services, whereas the second one is to identify the main health care facilities. The ancillary service factor analysis revealed three dimensions such as travel plan, peripheral services, and cleanliness and hygiene. Travel plan denotes the pre-trip arrangements and the peripheral services denotes external services in the health resort. The last factor describes about cleanliness and hygienic environment in the health resort.
Factor analysis on treatment facilities uncovers two underlying factors such as service scape and health care facilities. The service scape facilities refer to the other amenities provided in the health resort. The second factor reveals about core treatment facilities such as experienced physician and therapist and treatment facilities. Thus, the results could help the resort marketers to better examine the relevance of the factors contributing to the satisfaction and retention of guests in the resorts. So that, managers can able to deliver appropriate products and services in tune with the tourists needs and wants.

Thus, it is suggested that health tourism suppliers and managers consider the practical implication of these latent variables, which may be fundamental elements in increasing tourist’s overall satisfaction and retention.

The discriminant analysis shows the influence of socio-demographic factors with overall perception and overall satisfaction. Gender, age, income, and education attributes influence overall satisfaction of tourists. Similarly gender, education, language, and income influence the overall perception of tourists. Anderson et al. (2008) and Mittal and Kamkaura (2001) reports the influence of gender and income, their study. It was explained that women focus more on an interpersonal components of service interactions than men hence there is difference in level of perception and satisfaction of men and women. The findings from discriminant analysis throw light on the socio-economic features of health tourists which have significant influence on overall perception and overall satisfaction. Resort managers can identify these factors and plan suitable strategies to tap the health tourism market.
The results of regression analysis clearly reveal the influence of perception factors on overall satisfaction. Overall satisfaction is affected by perception factors of destination images and health care packages. The destination image factors uncover the perception about Kerala as an ideal destination and a perfect destination for health tourism. The health care package describes the features of health care programme.

Various customer retention techniques used in the ayurvedic resorts were tested with overall satisfaction to find out the association between them. It was revealed that loyalty cards, club membership, and family or group discounts play a vital effect on overall satisfaction of health tourists.

As it is evident from the analysis, the most effective customer retention tools, the managers could adopt and implement these techniques in the operational activities.

Correlation and path analysis try to draw a linear relationship between perception, satisfaction, and customer retention. These findings also revealed that customer perception and customer satisfaction are the direct antecedent of customer retention. Thus, this helps the planners and stakeholders to identify the underlying socio-economic dimensions and to draw or formulate customer oriented marketing strategies to perform a better and sustainable yield in the health tourism market.

6.2 SUGGESTIONS AND IMPLICATIONS

There is a trend at the global level to consume as much as possible. Thus, travel offers the best opportunity to expand the scale and scope of consumption mainly due to
which tourism exports have become an important sector as a growing source of foreign exchange earnings (George, 2005).

The importance of relationship marketing was proved and emphasized by many marketing scholars (Gronroos, 1990 and Christopher et al., 1991). The implications of this study have drawn a linear relationship between the pre-purchase and post-purchase behaviour of health tourists.

The demographic attributes of health tourists have revealed that gender, marital status, education, language, and income segments exhibited significant differences in their perception about ayurvedic health care programme and Kerala on health care destination. These findings substantiate the prior research regarding demographic variables and effect on perception and satisfaction of tourists. Studies by Oh et al. (2003) and Mykleton et al. (2001) have also validated that age as one of the influencers to determine perception of tourists. Similarly gender also influences the (McCleary et al., 1994 and Chi, 2005) tourists perception and satisfaction.

Hence, the impact of socio-demographic profile of health tourists may be used by managers to segment the market for more targeted advertising and promotion. However, this should not be the only way of market segmentation. Niche market can also be formed by following the travel profile of tourists also. Such as the frequency of visit, length of stay, and average expenditure can be adopted to follow this different group of health tourists.

The analysis of the motivation of selection of ayurvedic resorts explains that quality of treatment, location of resort, and authenticity of medicines are some of the
most effective preferences factors for selection of ayurvedic resorts. Thus, the resort
managers can consider these factors while planning and designing activities. Similarly,
the health care programme and treatment facilities preference analysis also explain the
most preferred services in ayurvedic health care. This helps the service providers
improve on their operational activities and will help them to provide quality and
customize service delivery according to the needs and wants of health tourists.

The outputs of factor analysis explain the factors influencing the tourist's
perception. The tourists agree with the destination image of Kerala – as an ideal health
care destination and the importance of ayurveda treatment in Kerala. Hence, it is also
revealed from this study that Kerala can continue to be marketed as a synonym for
ayurveda. The ABC (ayurveda, backwater, and culture), destination image of Kerala can
also be continued effectively. However, as cautioned by Spitzer (2009) the increasing
interest in ayurveda may have dwindling effect on botanical resources. The rush to
harvest plants for use in manufactured herbal preparation without plans for replenishing
the stock may have negative consequences. This could be continuously monitored and
controlled by proper herbal scientist assistance. Because, the association of ayurveda
and Kerala environment is reinforced by physicians who insist that ayurveda cannot be
transplanted to other environments. All Ashtanga Hridaya herbal preparations are all
available in Kerala. Thus, this divine gift of God to Kerala should be maintained
effectively to have sustainable health tourism growth. As Kerala is famous for its
success formula PPP i.e., the public private partnership it can be continued effectively.

The normal retention techniques used in the ayurvedic resorts were studied for
their association with overall satisfaction. Loyalty cards, club membership, family and
group, and discounts were some of the customer retention technique to influence strongly on the overall satisfaction. The resort managers can adopt these retention techniques to their resort to enhance their customer retention level.

Finally, the correlation and path analysis draw a linear relationship between the customer perception, customer satisfaction, and customer retention. This analysis proves that customer preference and satisfaction are the direct antecedent of customer retention.

**Suggestions for Effective Service Delivery**

- The resort operators should understand the customer’s perspective as to what the customer actually wants, accordingly services can be delivered.

- The service providers should ensure that the customers get complete information on all services and products. Not only should the information be complete, but it should also be accurate.

- There should be a sense of reliability on the ayurvedic resort and its services. If the customer is satisfied with consistent service quality, the relationship will be stronger and longer lasting.

- The resort should maintain guest profiles or guest histories of all the health tourist, seeking their health tourism services. This may lead to identify guest preferences.
- Constant interaction with health tourists, their progress, and impact should be strictly monitored and attended effectively.

- It is important to be consistent in both the service offering and the service delivery in order to build strong and sustainable relationships.

There is high employee dependent variability in health tourism services when a therapist or physician attends a guest throughout the programme, the same team should attend to the same guest during the course of the treatment. As there could be great variability at the time of service delivery person to person it varies. Utmost care should be given to all the guests while providing health tourism services. On the whole, service quality is of utmost importance (Christopher C. Doyle, 2001).

**Suggestions for Effective Marketing Strategies**

The present study has identified some of the major preference factors for selecting resort, selecting a health care programme, and treatment preferences. The socio-economic attributes relationship with perception and satisfaction is comprehensively analyzed in this study.

- Based on the analysis, appropriate marketing strategies should be designed to cater to different market segments based on age, gender, education, and income.

- Guest feedback form should be collected from all the guests on the quality of their experience and the service offered to them. Suggestions should be sought from tourists for improvement of the service process and standard.
Loyal customers should be rewarded. The retention tools used in the ayurvedic resorts are not in par with other tourism services. There were strong demand for club membership card or loyalty cards and family and group discounts on various health care services.

The ayurvedic resorts can tie up with travel agents for discounts in their pre-trip travel arrangements, insurance programme, and documentation activity. Similarly, they can also integrate with airlines for bonus on air miles.

6.3 POTENTIAL FOR FUTURE STUDY

The present study proposes the linear relationship of customer perception, satisfaction, and retention in health tourism sectors. Future research could be done to identify the gap between the perception and satisfaction of health tourists. The present study focuses mainly on ayurveda and future study can be undertaken on medical tourism (modern medicine) to find the pre-purchase and post-purchase dimension of medical tourism. A comparative study on preventive health care (ayurveda) and curative health care (modern medicine) could be studied to uncover the similarities and differences in them. Future researchers are advised to investigate additional antecedents of health tourist's loyalty. This may lead to disclose the omissions and misrepresentation of the relationship tested in the current study for further conceptual refinement and extension. The researcher proposed three models from factor analysis, one from tourist's perception, and two from tourist's satisfaction for ancillary services and health care services. These models can be tested in the future studies for their model fitting by using effective statistical applications.