

UNIVERSITI TEKNOLOGI MARA

**THE INSTITUTIONAL WORK IN
DEVELOPING THE MEDICAL
TOURISM INDUSTRY: THE ROLE
OF STAKEHOLDER GROUPS**

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PhD

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AUTHOR'S DECLARATION

I declare that the work in this thesis was carried out in accordance with the regulations of Universiti Teknologi MARA. It is original and is the results of my own work, unless otherwise indicated or acknowledged as referenced work. This thesis has not been submitted to any other academic institution or non-academic institution for any degree or qualification.

I, hereby, acknowledge that I have been supplied with the Academic Rules and Regulations for Post Graduate, Universiti Teknologi MARA, regulating the conduct of my study and research.

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ABSTRACT

Medical tourism is among the key sources of growth for Malaysia. The 1.2 million health travellers in 2018 contributed MYR1.5 billion revenue to the economy. Nevertheless, the industry is challenged by low utilisation of high-value medical treatments such as those in cardiology and fertility departments. Therefore, this study aims to delineate the role of the stakeholder groups in developing the industry. An exploratory qualitative case study was held under the Realism paradigm. One preliminary group interview and two direct observations were conducted. This was followed by 13 semi-structured interviews with Private Medical Practice Control Section (PMPCS), seven private hospitals, two medical tourism facilitators and three medical doctors. Data was analysed through thematic analysis, assisted by Atlas.ti version 8. Findings were triangulated and presented in cross-tabulation analysis tables. This study identified the stakeholder groups of the Malaysian medical tourism consisting of advisory leadership, coordinator, public agencies, private service providers, and supporting bodies. Further, this study inducted five institutional arrangements that enable industrial development which are; English language, stringent regulatory enforcement, strategic location, country and hospital reputation, and halal eateries and hospital food. Meanwhile, the eight institutional arrangements that constrain industrial development are hospital expenses, infrastructure, communication between stakeholders, policies and regulations, marketing activities, expertise/manpower, tourism deficiencies, and hospitability. Theoretically, insights into the strengths and barriers to develop the Malaysian medical tourism ecosystem as well as the individual and collective roles of the stakeholder groups were derived. To practitioners, the present study unveiled that the industry is faced with prominent challenges relating to policies and regulations. Stakeholder groups are urged to conduct monthly dialogues to enhance their inclusiveness and collaboration. Upholding the Realism paradigm, this study was constrained by its reduced objectivity. Moreover, there was limited participation from advisory leadership, public agencies, and supporting bodies which could be improved in future research.

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