



## Case Study

## Motivations and experiences of Mainland Chinese medical tourists in Hong Kong

Ben Haobin Ye<sup>a,\*</sup>, Hanqin Zhang Qiu<sup>b,1</sup>, Peter P. Yuen<sup>a,2</sup><sup>a</sup> Department of Management and Marketing, The Hong Kong Polytechnic University, Hong Kong<sup>b</sup> School of Hotel and Tourism Management, The Hong Kong Polytechnic University, Hong Kong

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## ABSTRACT

Medical tourism has been developing very rapidly in recent years and Hong Kong has emerged as a new medical tourism destination. The purpose of the study is to explore the motivations and experiences of a sample of medical tourists in Hong Kong and hence semi-structured in-depth interviews were conducted with obstetric patients from Mainland China. The findings indicate that one of the most important reasons for their traveling to give birth in Hong Kong was to avoid China's 'One Child' policy. Variations in staff attitudes were also found among different hospitals and even in the same hospital. The findings also suggest that perceived discrimination by the medical tourists emerges in the form of less favourable service and less information sharing.

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## 1. Introduction

Medical tourism describes the phenomenon of people traveling across international borders to obtain health care. Medical tourism has been developing rapidly in many countries and regions such as India, Thailand, Singapore, and Taiwan. For example, in 2006, there were 410,000 medical tourists visiting Singapore, which generated around USD 900 million ("Singapore:pioneering", 2008; Tsoi, 2008). The Hong Kong government has identified six new key areas for future development, one of which is to develop Hong Kong into a medical hub. Medical tourism started in Hong Kong in the form of Mainland mothers giving birth at local hospitals. The number of such medical tourists has increased from 620 in 2001 by nearly fifty times within a decade. In 2009, out of 58,994 mothers giving birth in Hong Kong, 29,766 were from the Chinese Mainland, constituting approximate 50% of all births and approximate 60% of all the non-local patients in Hong Kong (Hong Kong Health Authority, 2009; "Mainland mothers", 2010; The Government Information Centre of Hong Kong, 2008). Private hospitals have been proactive in attracting and benefiting from the growth of this market. For some private hospitals, around 70% of their obstetric patients are from the Chinese Mainland (Legislative Council, 2009). This study seeks to investigate motivations and experiences of obstetric patients' during their medical stay in Hong Kong.

## 2. Methodology

The current study is qualitative and exploratory in nature. Semi-structured in-depth interviews were conducted with a number of Chinese Mainland tourists who have visited Hong Kong to seek medical care. Among the respondents, eight of them came to give birth and one came for the fertilization procedure. Open-ended questions are used in this area of research as they allow the respondents to openly express their feelings and experiences. A snowball sampling technique was applied. Seven of them are from Guangdong province, and the remaining two are from Beijing and Tianjin respectively. Seven of them have stayed at private hospitals and two of them at public hospitals.

In-depth interviews were conducted to ascertain the tourists' reasons for coming to Hong Kong and their experiences during their stay. Each interview session lasted from 15 min to approximately 1 h. These in-depth interviews were tape-recorded, transcribed into text, content analyzed and inputted into a qualitative data analysis software—the Non-numerical Unstructured Data Indexing Searching and Theorizing (NUDIST) system for analysis. The recruitment of respondent came to an end when information saturation was reached (i.e., no new facts and views were recorded) (Strauss & Corbin, 1998).

## 3. Findings

Themes and categories emerge through content analysis of the interviews. The interviews were broken down into text units. A "text unit" is a phrase, a sentence or a sequence of sentences representing a point made by the respondent. Table 1 shows themes, categories and the corresponding count of text units.

\* Corresponding author. Tel.: +852 34003581; fax: +852 27650611.

E-mail addresses: [07901474r@polyu.edu.hk](mailto:07901474r@polyu.edu.hk) (B.H. Ye), [hmhanqin@polyu.edu.hk](mailto:hmhanqin@polyu.edu.hk) (H.Z. Qiu), [mspeter@polyu.edu.hk](mailto:mspeter@polyu.edu.hk) (P.P. Yuen).<sup>1</sup> Tel.: +852 27666368; fax: +852 23629363.<sup>2</sup> Tel.: +852 37460002; fax: +852 23643145.

**Table 1**  
The number of text units for themes and categories.

Themes	Categories
<ul style="list-style-type: none"> <li>• Motivations for medical travel to Hong Kong (13)</li> </ul>	<ul style="list-style-type: none"> <li>• To get around the 'one child' policy (6)</li> <li>• To obtain Hong Kong permanent residential status (1)</li> <li>• Education and living environment (4)</li> <li>• Convenience for traveling overseas (1)</li> <li>• Health care welfare (1)</li> <li>• Hong Kong's reputation in certain medical procedure (1)</li> </ul>
<ul style="list-style-type: none"> <li>• Experiences in Hospitals (24)</li> </ul>	<ul style="list-style-type: none"> <li>• Satisfactory experience (10)</li> <li>• Dissatisfactory experience (5)</li> <li>• Perceived discriminatory experience by medical tourists (9)</li> </ul>

### 3.1. Motivations for medical tourism

#### 3.1.1. Getting around 'one child' policy

With regard to the motivation of Mainland mothers to give birth in Hong Kong, the category "To get around the 'one child' policy", which has six text units, is ranked first among "Motivations for the medical travel to Hong Kong". In China, the "one family, one child" policy has been in force for many decades. Any citizen who violates the policy in the mainland would be penalized. However, Mainland mothers coming to Hong Kong for their second child can evade punishment.

*"I came to Hong Kong to give birth to my second child due to the 'one-child policy.'"(Tan, #2, private hospital)*

#### 3.1.2. Hong Kong permanent residence status

On the other hand, many of them expressed that they did so in order to acquire a permanent residential status for their children and obtain the accompanied benefits such as visa-free treatment when traveling overseas, Hong Kong local resident's welfare in education and health care.

*"I would like to give a better education and living environment for my child."(Hua, #4, public hospital)*

*"It will be easier for my child to travel overseas as Hong Kong citizens enjoy the visa-free treatment."(Qing, #1, private hospital)*  
*"The health welfare in Hong Kong is good!" (Michelle, #3, private hospital)*

#### 3.1.3. Hong Kong's reputation

The last factor emerged from the discussion with the woman who has undergone the fertilization procedure. She was attracted by the reputation of Hong Kong in such procedure after four times of failure in Mainland China.

*"The hospitals in Mainland China failed to make a tube baby for me... I knew from internet that Hong Kong is good at performing such procedure." (Liu, #9, private hospital)*

### 3.2. Experiences in hospitals

#### 3.2.1. Mixed perception of staff attitude

Although Hong Kong has a high standard of health care and medical staff is professionally trained, variations in terms of staff attitude exist. The variations can be found among different hospitals and even within the same hospital. Therefore, it can be expected that some respondents are satisfied with the medical service (10 text units), while others have some complaints over the staff (5 text units).

*"The nurses in this hospital are very nice. They called my given name 'Siu Ling' and kept giving me encouragement during my delivery. I felt so warm here. (Michelle, #3, private hospital)"*  
*"Some nurses are very nice. They ask how I feel (after my delivery), and they ask me whether or not I need help from them, whereas some nurses are very impatient and very unwilling to answer my questions."(Luo, #6, private hospital)*

As Hong Kong has a positive image of service quality, the medical tourists have high expectations on what to receive during their medical trips. When the service quality does not meet their expectations, they will be disappointed and dissatisfied with the service.

*"I thought Hong Kong people are very hospitable. They (the nurses) really fell short of my expectation." (Luo, #6, private hospital)*

#### 3.2.2. Perceived discrimination

Some medical tourists even attribute their dissatisfactory experiences to discrimination. "Perceived discriminatory experience by the medical tourists" generates nine text units. For the medical tourists, perceived discrimination can be categorized into two types. First, they received less favorable service (e.g., less respect) from the medical staff and felt Hong Kong people's self-superiority over them; second, they received less information from the doctors and nurses than the locals.

*"When I ask the nurse to teach me how to feed the baby in Mandarin, the nurse seems impatient. It seems that I make troubles for her (the nurse)" (Wang, #7, public hospital)*

*"The doctor didn't explain the purposes of each procedure for me. I think I can get more information if I can speak Cantonese."(Liu, #9, private hospital)*

Separation of the medical tourists from the local patients could be perceived as discrimination. Although it is not clear whether or not such practice is intentional, it evokes unpleasant feeling of some medical tourists who are sensitive to discrimination.

*"We are separated from the local mothers in different wards. I think this is discrimination against us."(Feng, #8, private hospital)*

Some medical tourists mentioned their friends' discriminatory experience in Hong Kong. Word-of-mouth communication is common for the medical tourists. They share information concerning the doctors, the hospitals and their travel experiences to facilitate their decision making.

*"She was forced to take a bath in cold water even when her surgical wound was not well recovered. She had to feed the baby by herself without any help" (Michelle's friend in public hospital)*

## 4. Conclusion and future research

The preliminary findings of this exploratory research facilitate understanding of the medical tourists' travel motivations, experiences and their perceived discrimination. For medical tourists' motivation to give birth in Hong Kong, the most important one is to avoid the "one child" policy in China. Generally speaking, many medical tourists were satisfied with their experiences in Hong Kong. However, there were dissatisfactory experiences due to the hospitals' inability to meet their expectations. Some medical tourists have perceived discrimination from the medical staff. Perceived discrimination emerges in the form of less favorable service and less information sharing. It appears that some cultural factors (e.g., language difference) may induce perceived discrimination. Thus, future research should reveal the underlining causes for perceived

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