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Statistical reasoning for developing an attitude scale for health tourism stakeholders in North Cyprus context

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Abstract

In this study, an "Attitude Scale for Health Tourism Education" was aimed to be developed in order to be used to determine the attitudes of stakeholders towards health tourism education and other relevant issues in North Cyprus health tourism context. The attitude scale was processed through validity and reliability tests in order to ensure the highest possible efficiency. The inadequate literature on health tourism education and the lack of an attitude scale related to the issue give the impression that the education factor in health tourism is so far ignored. In this respect, the Attitude Scale for Health Tourism Education, can be used to identify the attitudes of stakeholders taking part in the health tourism sector in North Cyprus and other relevant issues. The scale was also designed to be used in studies that could lay the groundwork for a training model which can be developed for the health tourism sector in North Cyprus. It is also believed that this work will contribute to the application of original scientific studies in areas such as the health tourism, psychology, sociology, business administration and engineering which will necessarily be engaged in developing a program for health tourism education with an interdisciplinary approach.

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1. Introduction

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Health tourism is the "entirety of activities involving accommodation and other organizations that aim to "improve health, protect health or restore health, and use holiday elements in health care procurement processes" (Gençay, 2007; Özlem, 2013). Human relations and related services are developed in line with the needs of individuals and communities. In this context, the social relations developed between individuals or societies have also made a major contribution to the sharing of human services (Biljana, 2011; Callan, 2016). Health services and medical applications are regarded as one of these services. The development of the quality of service offered is directly linked to the training conducted in accordance with the needs and the enhancement of the quality of services related to implementation.

All studies related to health tourism focus on the functions and systems of health tourism. One of the most important studies on the functions and systems of health tourism was conducted by Lee and Fernando (2015). Lee and Fernando (2015) claim that the health tourism industry has come into existence within the context of Supply Chain Management. This approach and relevant claims are included in the educational context of tourism. However, the role and position of health tourism is not defined in the educational context or curriculum of tourism related programs. Researchers who focus on the studies on health tourism emphasize the increasing popularity of the health tourism industry and draw attention to their strengths and weaknesses and come up with suggestions for further development and strengthening of this sector (Hall et. al, 2011; Meliou and Maroudas, 2010; Connell, 2013; Ghanbari, Moradlu and Ramazani, 2014; Lee and Fernando, 2015). However, none of the researchers who have expressed various views on health tourism have touched on the education and systematic education programs and management that will play a key role in improving the efficiency and performance of health tourism.

Lack of studies in the relevant literature focusing on the stakeholders' education on health tourism education and an attitude scale related to this topic was considered as a significant deficiency and it was regarded as an obligation to develop an attitude scale on health tourism education. Since all studies on health tourism focus on the economic, health and political aspects of the sector (Somnuek, 2014; Gan and Frederick, 2011; Bahar et al., 2009), the main objective of this study is create a starting point by emphasizing the importance of attitude of the stakeholders towards the health tourism education and the other relevant sub-dimensions. In this study, it is specifically aimed to develop an "Attitude Scale towards Health Tourism Education", which was processed through the validity and reliability tests, in order to determine the attitudes of stakeholders taking part in the health tourism sector in North Cyprus on health tourism education and on issues relevant to health tourism.

2. Methods

2.1. Study design

In this study, quantitative (analytical) research method, descriptive method, documentary source analysis method, sampling method and statistical method were used. Data collection techniques used in the study include collection of relevant documents and publications, and face-to-face interviews.

2.2. Setting and sample

The research population includes the senior managers in education, tourism and health sectors in Northern Cyprus between 01.05.2015 - 01.03.2016. Since reaching all the relevant individuals in the research context was quite difficult in terms of time and cost, a sample population was chosen through the random sampling method that would represent the study contect in the best and that would not disturb the randomness.

Since the exact number of people in the research context is not known, the unknown population sampling formula was used;

$$n = \frac{t^2 p * q}{d^2}$$

n: Number of individuals to be sampled.

p: Frequency of occurrence of the event being examined (probability of occurrence).

q: Frequency of nonoccurrence (probability of failure).

t: Theoretical value found at a certain level of significance, according to t table.

d: Sampling error considered according to the frequency of occurrence of the event.

Participants; 38,39% were male, 61,61% were female, 21,29% were between 24 and 29 years, 26,45% were between

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