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HEALTHCARE SIGNIFICANCE IN TOURISTS' DESTINATION CHOICES: A CASE STUDY OF POLISH TRAVELERS

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Abstract

Introduction. The purpose of the research was to analyze what role the accessibility and quality of health care plays in the country chosen as a tourist destination. It also examined where tourists get their information about health care in the country they plan to go to and whether they had to use medical services at the place of their stay. ***Material and methods.*** An analysis of source materials was performed and a diagnostic survey was conducted. ***Results.*** While the quality and availability of health care at the destination is important to some respondents, the main factors related to location, tourist attractiveness (tourist attractions, tourist infrastructure) and price still determine the choice of destination. Only 4% of the respondents identified the availability and quality of healthcare services as key factors in their decision-making process. At the same time, 38.6% of the respondents considered the quality and availability of healthcare services when choosing a tourist destination. For longer trips, the quality and availability of health care at the destination is more important when choosing a destination. ***Conclusions.*** Healthcare facilities are part of the associated infrastructure in tourism. This type of infrastructure primarily serves the local population, but also conditions the proper organization and management of tourism at the destination. In addition, in the situation related to the COVID-19 pandemic, the role of health care in tourist destinations has increased. This also requires increased efforts toward ensuring access to medical services as well as information about them in tourist destinations.

Key words: healthcare, tourism, tourist destination

Introduction

Healthcare facilities form part of the auxiliary infrastructure in tourism. This type of infrastructure primarily serves local residents but also ensures the proper organization of tourism at the destination [1]. During the COVID-19 pandemic, the restrictions established by successive countries contributed to changes in tourism and required participants to seek up-to-date information on the rules for entry into individual countries and, subsequently, on health conditions in destination countries. Thus, the quality and availability of health care in the destination country began to become one of the more prominent motives for choosing a tourist destination. As Mosadeghrad notes, the quality of health care is a subjective, complex, and multidimensional concept [2]. Quality of care refers to the extent to which health services for individuals and populations enhance the probability of achieving desired health outcomes [3]. Although quality health care can be defined in various ways, there is increasing recognition that it should be effective, safe, and people-centered [3]. In health care, access is defined as the ability or ease with which consumers or communities can utilize appropriate services in proportion to their needs [4]. However, despite the high importance of the quality and availability of health care in tourist destinations, there is a noticeable research gap in the literature on this aspect [5]. Tourists choose which destination to visit based on internal considerations related to the destination and external considerations beside it. The determinants of a tourist destination's competitiveness are based on its natural and cultural attractions, its tourist infrastructure and amenities, and the quality of the services it has to offer [6]. The literature on the main factors influencing tourism development is extensive, and an aggregate summary of the elements that have been decisive and will continue to determine tourism development in the future was presented for example by Scott and Gössling [7]. In recent years, interchangeable factors influencing tourism development have included, for example, political instability, war, terrorism, climate change, environmental sustainability, and tourist health and safety. The latter issue has been presented in the literature in several publications [6, 8, 9, 10] but still needs more extensive analysis. The healthcare system is an element of the supporting infrastructure that is part of the tourist development and, together with the tourist assets, determines the attractiveness of a tourist destination. This type of infrastructure primarily serves the local population, but also conditions the proper organisation of tourism at the destination. Since the 1990s, there has been a significant increase in interest in the field of travel medicine and its relationship to tourism research [10]. While there has been research on medical tourism in this context, there is an apparent research gap for other types of tourism. Additionally, in recent years, health and hygienic capacity practices have become particularly important for travelers choosing tourist destinations [11]. Research shows that health and hygiene influence the competitiveness of tourist destinations [12]. Practices including the development of health and hygiene policies, regulations and guidelines, enforcement of health policy implementation, government funding of health-related initiatives, and COVID-19 regulations are now considered to be structures that support tourism competitiveness [11]. This is linked to tourists' perceptions of safety at the destination [13]. The perception of risk significantly influences tourists' decisions to choose a tourist destination. Perceived risk can influence people's attitudes, decisions and behavior in relation to travel [14]. Tourists avoid those destinations with high health risks and choose countries that offer a high level of health

quality [5]. The approach to risk may depend on a number of factors, e.g. personality traits, culture or previous experiences. The main predictors of tourists' risk perceptions include cognitive, affective, contextual, and individual factors [15]. Fear of new unknown viruses, coupled with conflicting information about their origin and effects, significantly influence perception, attitudes and behavioral intentions in tourism [15].

Material and methods

Purpose of the study, research questions, research instrument

The aim of the study was to analyze what role the accessibility and quality of health care plays in the country chosen as a tourist destination. It also examined where tourists get their information about health care in the country they plan to go to and whether they had to use medical services at the place of their stay. Empirical research was preceded by a literature review. The research process utilized a diagnostic survey method, surveying techniques, and an online questionnaire tool in the Polish language containing a structured set of questions to which the study group voluntarily and anonymously responded from February to the end of March 2023. An online survey form was used as the data collection method. The survey form was subjected to a preliminary test, which showed that the respondents had no difficulty understanding the questions. Therefore, the questionnaire was accepted for further research. The research was conducted using a consumer panel. Respondents completed an online questionnaire using a computer, smartphone, or other internet-connected devices. The survey was anonymous and was prepared in the form of a questionnaire with multiple-choice answers or open-ended responses. The questionnaire consisted of 20 questions. Respondents were asked if they had to undergo medical treatment while on a tourist trip abroad, within the country they visited, and then rated this healthcare system. The questions primarily consisted of single-choice options, with the addition of an "other" response option. For the question regarding where respondents obtain information about health care in the destination country, participants had a broader opportunity to express their views. This was similarly the case for identifying the country where they had to seek health care and the country they believed offers the best health care. Statistical analysis was carried out based on the stated research objectives. In case they concerned the significance of individual elements, the frequency of specific responses in the surveys was analyzed. Besides questions regarding the subject matter, the questionnaire also included questions related to respondents' demographic characteristics.

Research sample

A total of 101 individuals participated in the survey. The respondents were between 18 and over 70 years old, with the majority being between 30 and 49 years old. Slightly over 60% of women and nearly 40% of men participated in the study. Most of the participants had higher education (47.5%) or secondary education (44.6%). 38.6% of the respondents go abroad once a year for tourism purposes, mainly for relaxation, and most often with family. Slightly over 50% of these trips are one week long. Further study also examined the impact of respondents' aforementioned demographic characteristics on the choice of tourist destination in relation to the healthcare system present there. Table 1 presents the demographic characteristics of the respondents.

Table 1. Profile of survey participants

Specification	Percentage
Gender	
Women	60.4
Men	39.6
Age	
18-29	21.8
30-49	66.3
50 years or more	11.9
Education	
Primary or vocational	7.9
Secondary	44.6
Higher	47.5
Length of tourist stays abroad	
1 day or weekend	23.8
Week	50.5
Two weeks or longer	25.7

Statistical analyses

Ordinal regression models were used in the study. In the case of this study, the explanatory variable in the models was the answer to the question "When choosing a tourist destination (country), do you pay attention to the quality and availability of health care at your destination?", taking three possible categories. In this analysis, they were taken in the following order:
- No;
- Sometimes;
- Yes.

In addition, for each of the variables included in the multivariate model, odds ratio (OR) and its 95% confidence interval were determined. The quality of the models was verified using the pseudo R2 indices McFadden, CoxSnell and Nagelkerke. For each model, the values of the information criteria are also presented – AIC (Akkaike criterion) and BIC (Bayes-Schwarz criterion). The significance level was set at $p = 0.05$; however, also indicating statistically significant results significant for levels of $p = 0.01$ and $p = 0.001$. The considered ordinal regression model included three explanatory variables in its form, which were:
- Age [years] – 18-29, 30-49, 50 and more;
- Education – primary or vocational, secondary, higher;
- Length of tourist stays abroad – for 1 day or weekend, for 1 week, for 2 weeks or longer.

In turn, the categories used as reference values were: 18-29 [years], primary or vocational and for 1 day or weekend.

Results

Among the main factors influencing the choice of tourist destinations, price and location ranked highest, with 80.2% and 76.2% of the respondents providing these answers, respectively (respondents were allowed to choose up to three answers in this question). Other important factors included tourist attractions (37.6%), accommodation facilities (25.7%), quality (22.8%), safety (16.8%), and transportation accessibility (5.9%). Only 4% of the respondents identified the availability and quality of healthcare services as key factors in their decision-making process. In a separate question, respondents were asked whether they consi-

der the quality and availability of healthcare services when selecting a travel destination. Of those surveyed, 38.6% said they do, 36.6% said they do not, and 24.8% indicated that they consider healthcare services sometimes (Fig. 1).

With the help of the ordinal regression model used, it was possible to identify one statistically significant factor, which is the length of stay. Among tourists choosing the option to leave for at least two weeks, the chance of at least partial availability and quality of medical care at the destination was a significant factor in their decision to choose a destination, and it was almost 4 times greater than for those choosing a 1-day or weekend stay (p-value < 0.027, OR = 3.735) (Tab. 2).

In these surveys, respondents also answered the question about the main sources of information for tourists regarding health care in the country chosen for vacation.

The majority (79.7%) of those who do consider healthcare services obtain their information from the Internet, with the remaining respondents using other sources. When asked to identify specific websites, Google was the most frequently mentioned (in 25% of cases), followed by travel agency websites, booking sites, Facebook, and occasionally government ministry or national health fund websites, as well as other sources. In terms of non-internet sources, respondents primarily cited travel agencies and friends/family, with occasional reference to insurance providers.

The study also shows that almost 12% of tourists required medical treatment while traveling outside of Poland and had to use foreign healthcare systems. The foreign countries most frequently mentioned by respondents were Greece, France, Bulgaria, Italy, Portugal, the Netherlands, Spain, and Austria. The majority of respondents rated the foreign healthcare system in their destination country positively, reporting no significant problems accessing healthcare services. Among the issues mentioned were language barriers. According to the respondents, Germany has the best healthcare system, followed by Switzerland, Norway, Spain, Sweden, the Netherlands, and Denmark. Other countries were mentioned less frequently.

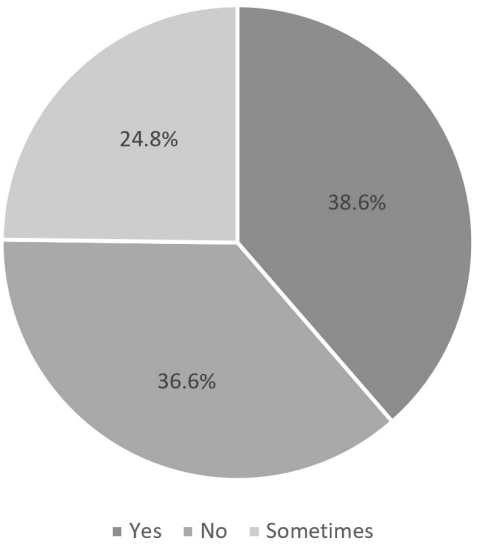


Figure 1. Summary of responses to the question: do you pay attention to the quality and availability of health care at your destination when choosing a tourist destination (country)?

Discussion

Healthcare facilities in a tourist destination not only serve local residents but also represent an important part of the tourism infrastructure. Generally, the quality of the destination's infrastructure can attract or deter tourists [16]. The analyses presented in this paper have shown that although the quality and availability of health care at the destination are important to some respondents, the main factors influencing destination choice are still related to price, location, and tourist attractions (tourist attractions, tourism infrastructure). Previous studies found that the quality of health care in host countries can be a significant factor influencing tourism decisions, destination choice, and international tourism revenues [5]. Generally, if tourists rate the quality of public healthcare services at a destination highly, they are more likely to recommend it to others or visit the place again [17].

Over the past two years, safety in tourism has gained significant attention, specifically during the spike of COVID-19 [18]. As noted by UNWTO, economic, health, and geopolitical challenges may have an impact on the sustainable recovery of international tourism [19].

In the case of health threats, issues related to information on the situation in the destination country, as well as the quality and availability of health care, are particularly important for tourists. Studies have confirmed that the Internet is the primary source of this information. Analyses have also pointed to the significant role of travel agencies in this regard (both in terms of information on their websites and beyond). The conducted research has also shown the relatively small role of Polish government websites, including the National Health Fund, in providing information to tourists on the health situation in their destination countries. According to the authors cited, most respondents obtain information from social media, insurance companies, or travel agencies, but at the same time, they consider healthcare workers and insurance companies to be the most reliable sources in this regard [20]. The analysis shows that almost 12% of travelers had to use healthcare services during their international trips for tourism purposes outside of Poland. Generally, respondents rated this care positively. Among the countries where they received healthcare services were European countries. Regarding

Table 2. Multivariate ordinal regression model

Variable	Parameter	p-value	OR	LCI	UCI
Age (years): 30-49	0.115	0.812	1.122	0.436	2.88
Age (years): 50 and more	-0.842	0.254	0.431	0.101	1.83
Education: secondary	0.405	0.559	1.500	0.385	5.84
Education: higher	0.014	0.984	1.014	0.259	3.96
Length of tourist stays abroad: for 1 week	-0.022	0.964	0.979	0.383	2.50
Length of tourist stays abroad: for 2 weeks or longer	1.318	0.027	3.735	1.163	11.99

people returning from countries with different climatic and sanitary conditions, 70% of travelers from developed countries have health problems related to their stay abroad [21]. It is estimated that 30 to 50% of travelers will fall ill or be injured during their trips [22]. The risk of contracting a disease in the destination country depends on a number of factors, including the level of endemicity in the visited region, the health status of the traveler, the preventive measures taken, the length of stay, and the activities undertaken at the destination. In some countries, there is a lack of medical services that would ensure the well-being and safety of travelers, particularly in dealing with injuries and sudden health problems. Other countries' (e.g. India's) image has improved due to the high quality of healthcare facilities and the availability of the best infrastructure at minimal costs [23]. Generally, countries should work to improve their healthcare system, as it would have a positive impact on their tourism [5].

Conclusions

Although price, location, and tourism attractions continue to be the main factors for choosing a tourist destination, the quality and availability of medical care in the destination country are significant factors for some travelers. Meanwhile, especially after the COVID-19 pandemic, the quality and availability of health care has become an important factor in the competitiveness of these regions. Research has shown a relatively small role for government websites in communicating the health situation prevailing in a country. Transparent communication about the pandemic has the potential to improve the reputation of the destination and increase people's perceived confidence at the destination. Encouraging tourists to return to tourist destinations following the COVID-19 pandemic requires a change in the countries' historical approaches to creating the image of a destination country as safe including in terms of health. When it comes to health risks, information about the situation in the destination country and the quality and availability of health care are particularly important to tourists before they leave.

In summary, the presented research demonstrates the theoretical and practical contributions of this study. Firstly, it enriches the available literature on the relationship between tourism and health. Previous studies have analyzed these relationships, but have not alluded to health systems and have not highlighted their role in tourist destinations. Secondly, previous analyses of tourist destinations and their competitiveness have focused mainly on the traditional factors of choosing a tourist destination, neglecting the theme of health care present there. Empirical studies should be viewed in the context of limitations that can create directions for further analysis. In the next research, tourists from other countries should also be taken into account and the size of the research sample should be increased. In the future, the economic status of respondents could also be considered, as such analyses could reveal additional relationships related to destination choice and provide further insight into the studied issue. However, even at this stage, the paper's insights fill a research gap and at the same time have practical relevance and applicability for health policy and tourism.

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