

Medipreneurship: A Niche opportunity. A Case study of Mangalore City

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Abstract: One such opportunity that our country possesses in general and Mangalore (Dakshina Kannada district) in particular both by the blessings of nature as well as by default is MEDICAL TOURISM. Medical facilities when collaborated with Hospitality and Tour services results in a niche opportunity for all stakeholders involved in these sectors. Medical Tourism involves people who travel to a different place to receive treatment for a disease, an ailment, or a condition, or to undergo a cosmetic procedure, and who are seeking lower cost of care, higher quality of care, better access to care or different care than what they would receive at home. Medipreneurship is basically a collaboration of medical procedure with necessary entrepreneurial skills. More so it encompasses aspects pertaining, right from travel to treatment and recuperation to return journey to the home country.

This paper is prepared with the objective of creating awareness among the locals as to the niche opportunity available to them. It also compares the cost factor for different medical ailments in Asian, American and European Nations and critically does a SWOC analysis of Mangalore city.

KeyWords: Medipreneurship, Medical Tourism, First Class Treatment at Third World rates, etc.

I. INTRODUCTION

India is a land of opportunities not only for qualified, professional or skilled workforce but also for unskilled and less qualified workforce. It is always the case where the opportunity made available either by the blessings of nature or by default is made use of or not.

One such opportunity that our country possesses in general and Mangalore (Dakshina Kannada district) in particular both by the blessings of nature as well as by default is MEDICAL TOURISM. Medical facilities when collaborated with Hospitality and Tour services results in a niche opportunity for all stakeholders involved in these sectors.

Meaning of Medical Tourism:

Medical Tourism involves people who travel to a different place to receive treatment for a disease, an ailment, or a condition, or to undergo a cosmetic procedure, and who are seeking lower cost of care, higher quality of care, better access to care or different care than what they would receive at home.

Medical tourism refers to provision of cost-effective medical care with due considerations to quality in collaboration with tourism industry for foreign patients who need specialised treatment and surgery.

Medical Tourism refers to cross-border utilisation of health care, often motivated by lower cost, avoiding long wait time or obtaining service not available in one's country. Medical Tourism is one of the fastest growing 'new businesses' in the world

On account of medical tourism, people from all over the world are travelling to different countries to obtain medical, dental, surgical care while at the same time touring, vacationing, and fully experiencing the attractions of the countries that they are visiting.

The functional meaning of medical tourism is the flow of tourists not only from across the border but also from within the country to the district for the treatment of different ailments, to rejuvenate & recover themselves and at the same time experience the beauty of the local landscape.

Medipreneurship is basically a collaboration of medical procedure with necessary entrepreneurial skills. More so it encompasses aspects pertaining, right from travel to treatment and recuperation to return journey to the home country.

Area of study:

The area of study is restricted to a medically and touristically affluent district of Coastal city of Mangalore in Karnataka, i.e., Dakshina Kannada (DK) district.

Objectives of the study:

- To understand the awareness level of medipreneurship among the stakeholders.
- To take stock of the situation of Medipreneurship in DK district and to identify loopholes in service delivery and to strengthen the tourism sector in general and Medical Tourism in particular.
- To make known the procedure for international accreditation of Medical Tourism service providers and thereby promote the same.
- To analyse and study the impact of Medical Tourism on the other crust/allied areas of tourism like Eco-tourism, Edu-tourism, Cultural tourism, Religious tourism, etc.

About Mangalore (Dakshina Kannada District):

Dakshina Kannada district is sandwiched between Goa and Kerala. The pristine beaches of Goa and the Heavenly experience of Kerala when mixed together give the feeling of the nature's incredible blessing. The beauty of this place is its connectivity, languages, healthcare, culture, tourist hot spots, rural sports, educational excellence, etc. You name one and the district possesses it as the nature's gift. It is also called as the "Land of the Literates".

- **Coordinates:** 12.6°N 75.3°E, situated in the southern state of India, Karnataka and headquartered in Mangalore.
- **Total area:** 4,866km² (1879 sq miles)
- **Population:** Total 1,897,730, Density 390/km²
- **Literacy:** 98%.
- **Languages:** English, Kannada, Tulu, Konkani, Beary and Malayalam languages are spoken by the locals.
- **Centre of educational excellence:** 3 universities (of which 2 are Medical universities and one General Education University), 8 Medical and Dental colleges with hospitals, 10 Ayurveda colleges with hospitals, 6 Homeopathy colleges with hospitals, 8 Engineering colleges, Renowned National Institute of Technology, College of Fisheries promoting Post-Doctoral studies in Marine Zoology, unlimited number of general education colleges, schools both primary and secondary are found almost everywhere throughout the district.
- **Connectivity:** Well connected with road, rail, water and air transport. A very well developed internal transport system for local and far distance road journey, Railways connect the district to the heart of the country, Sea transport has made it possible to bring in guests from foreign countries regularly through Cruise ships, whereas the International airport in Mangalore has made Middle East and European nations easily accessible.
- **Topography and scenic beauty:** The district consists of sea shore in the west and Western Ghats in the east. The major rivers are Nethravathi, Kumaradhara, Phalguni, Shambavi, Nandini and Payaswini which all join the Arabian Sea. The city of Mangalore is situated 30 feet above the sea level.
- **Tourist spots:** Religious tourism is a must see in the district of DK. World renowned temples, Churches, Mosques are found in the district. Mangalore is referred to as the Rome of the East. Historical places like Sultan Battery, a strategic fort to avoid the entry of British ships in the Phalguni river built by Tipu sultan, Two centuries old, roof tiles (Clay) manufacturing factories, Cashew processing factory, Beedi rolling industry, Typical Mangalorean houses which can accommodate around 30 to 40 members of a joint family, an artisan village, a hot water river spring, pristine and clean beaches with water sports facilities, etc. makes for the beautiful district of DK.
- **Hospitality:** Premium and budget hotels & restaurants are available all over the district serving authentic local cuisines and cuisines from all over the world to meet the dining requirements and tickle the taste buds of the connoisseurs. Rich and tasty food is one of the strongest advantages of the district. Sea food delicacies are a big hit in the district with equally excellent preparation of other food items.
- **Hospital and Medical care:** It is a major force to reckon with. The district attracts a large number of patients from all over the country as well as from neighbouring countries like Pakistan, Bangladesh, Nepal and other South East Asian countries. State of art hospitals dedicated for different ailments has made the district medically rich. List of Hospitals and facilities in the district is as follows.

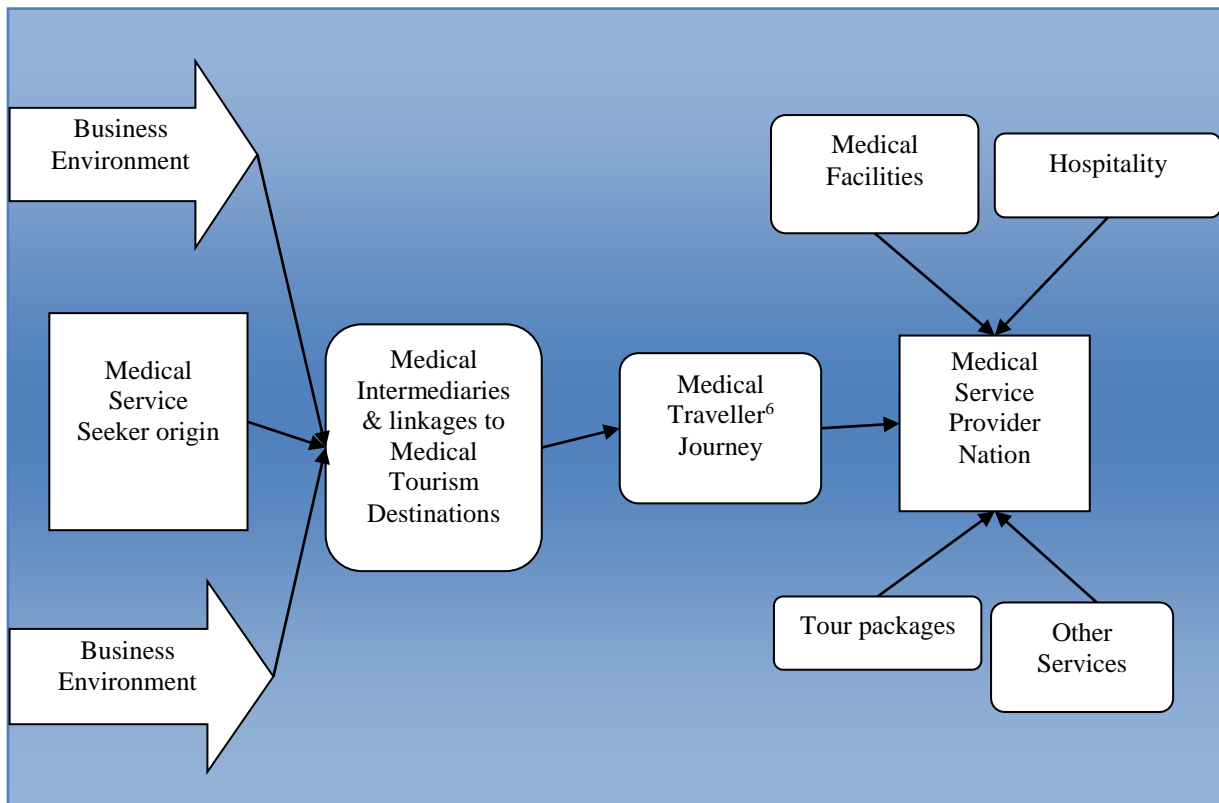
| Allopathy/English Medicine | Homeopathy |
|---|------------------------------------|
| A.J. institute for Medical Sciences | KVG College of Homeopathy. |
| Omega Hospital | SDM College of Homeopathy. |
| Fr Mullers Medical College | Wenlock Hospital |
| Kasturba Medical College | |
| University Medical Centre | Ayurvedic/Indian medicine |
| Yenepoya Hospital. | SDM Ayurveda College and Hospital. |
| Mangala Kidney Foundation | Alva's Institute of Ayurveda. |
| Athena Institute of Medicine. | KVG College of Ayurveda. |
| Indiana Hospital – A Multi-speciality hospital. | |
| Srinivas Institute of Medical Sciences. | Naturopathy |
| SCS Hospital – A multi-speciality hospital. | SDM College of Naturopathy, Ujire. |
| NITTE Medical College and Hospital | Alva's Institute of Naturopathy |
| Yenepoya institute of Medical Sciences. | Wenlock Hospital |
| KVG Institute of Medical Sciences, Sullia | |
| KVG college of Dental Sciences. | |
| A.J. Institute of Dental Sciences. | |
| Wenlock General Hospital. | |

The list mentioned above is just a few of the hospitals and healthcare centers present in the district catering to the medical needs of the people from within and outside the country.

Medipreneurship Packaging:

It basically involves three important elements

- The service seeker – Origin of the service
- Medical Intermediaries - selection of the destination and other related issues
- The service provider – Delivery of the service.



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Following table shows a comparison of the cost of medical treatment in U.S, U.K. and India

| PROCEDURE | U.K. (\$) | U.S (\$) | INDIA (\$) |
|-----------------------------|--------------|-------------|---------------|
| Hip resurfacing | 15,750 | | 7,000 |
| Hip replacement | 14,000 | 20,000 | 6,190 |
| Coronary bypass | 24,544 | | 7,044 |
| Liposuction | 5,250 | | 2,476 |
| Breast augmentation | 7,613 | | 2,972 |
| Face lift | 11,813 | | 3,750 |
| Abdominoplasty | 8,418 | | 3,001 |
| Porcelain crown | 998 | | 133 |
| Full acrylic dentures | 1,750 | | 401 |
| Dental implants (per tooth) | 3,500 | 3,500 | 963 |
| Bypass | | 30,000 | 5,000 |
| Liver transplant | | 300,000 | 30,000 |
| Radiography therapy | | 10,000 | 2,000 |

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The USP of any medical service provider is its cost effectiveness and India has a huge advantage as far price is concerned because the surgery in India may cost around a tenth of the cost incurred for a similar surgery in the U.S or any other advanced country. Hence, the slogan,

“FIRST CLASS TREATMENT AT THIRD WORLD RATES”.

RESEARCH METHODOLOGY:

Questionnaire was administered to the respondents including doctors, tour operators, hospitality service providers and general public.

The results of the objective 1 (awareness level of stakeholders) are as follows: (300 respondents)

| Stakeholders Profile | Demographic profile | Respondents | Awareness (%) |
|-------------------------------|---------------------|-------------|---------------|
| Doctors | | 80 | 100 |
| Tour operators | | 43 | 83 |
| Hospitality Service providers | | 35 | 45 |
| General Public | > 18 < 25 | 45 | 22 |
| | > 25 < 35 | 45 | 75 |
| | > 35 < 45 | 25 | 85 |
| | Above 45 years | 27 | 87 |

Objective 2: To take stock of the situation of Medipreneurship in DK district:

An in depth study of the Mangalore city and DK district has revealed the following status of the readiness of the district.

STRENGTHS:

- **Infrastructure:**

As discussed earlier, the infrastructure for developing medical tourism in DK is already in place with so many super speciality hospitals and health care centers in operation. The state of art hospitals and intellectual workforce is surely a force to reckon with.

- **Language friendly service providers:**

Language is absolutely no concern when it comes to DK district for the simple reason that the locals including service providers are comfortable with the use of English language. In fact it may prove as an opportunity to win a point over the neighbouring state of Kerala.

- **Connectivity:**

Connectivity is at its best in the district. Very well developed internal road transport system makes the journey convenient both within and outside the district. Railways help us travel the length and breadth of the district as well as connect to any city in the country. Sea transport has seen more than two dozens International Cruise liners with guests from many countries already making their way in the district. To top it all, the international airport has connected the district to the Gulf and European nations on the west and the South East Asian countries with relative ease.

- **Alternative treatment form:**

Alternative form of medicines can be best utilised to meet the different medical requirements of the service seekers. Dedicated hospitals with alternative forms of medicine is already being practised and statistics show that tourists (not medical tourists) visiting the district have shown great interest in YOGA, Ayurveda, Panchakarma, Massage therapy and other Indian form of recuperation.

- **Tourist attraction:**

District of DK is a vibrant place with a lot happening all year round. World renowned churches like the St Aloysius Chapel, The lady of Miracles church, Rosario Cathedral, etc.; Temples like Shri Kadri Manjunatha Temple, Shree Gokarnatheshwara Temple, Kudroli,, Shri Durgaparameshwari Temple, Kateel, Shree Dharmasthala Manjunatheshwara Temple, Ujire, Thousand Pillar Jain Temple etc.; Mosques like the Sayeed Madani Dargah, Idgah Mosque, etc.; Pilikula Nisargadhama, Artisans Village, Sulthan Batery, Clay Tile manufacturing factory (more than 200 years old), Beedi rolling factory, Cashew processing factory, hot water spring, etc. are some of the must visit places in the Dist.

- **Pristine beaches and rejuvenation centres:**

The district of DK is situated on the west coast of India and beautifully covered by clean and green beaches with aqua sports facility. Panambur, Thannirbhavi, Someshwara, Ullal are few of the beaches and rivers like Nethravathi, Kumaradhara, Phalguni, Nandini and Payaswini makes up for a beautiful sight. To add to we have quite a few beach resorts which are mushrooming almost everyday. Health resorts are situated in the most serene and calm interiors of the district to really make one feel in harmony with nature.

WEAKNESS:

- **Governmental issues:**

This is the major weakness that we face right now as there is no tourism policy in place when compared to other states like Kerala and Goa. A right tourism policy with flexible guidelines can make up for the shortcomings of the tourism sector. But with the Central Government proposal in the Finance Bill 2015 to provide Visas on Arrival for 150 countries is a short in the arm for the Tourism sector in general and Medical tourism in particular.

- **Absence of accreditation from Joint Commission International (JCI) and International Society for Quality Health Care (ISQH) & National Accreditation Board for Hospitals and Healthcare Providers (NABH):**

One of the most important ingredients for the successful implementation of medical tourism in Dakshina Kannada district is the accreditation of our hospitals and medical centers by International Standard Agencies like JCI and ISQH and National agencies like NABH. It is a matter of time as two of the top hospitals are already accredited by the NABH and the rest will undergo the process pretty soon.

- **Absence of a consortium of medical centres, tour operators and hospitality:**

With a strong medical tourism policy soon, we should be able to see the tie ups between different service providers to design various medical tourism packages and at the same time have Memorandum of Understanding (MOU) with Medical practitioners and hospitals in the foreign countries to facilitate medical referrals and thereby give wings to the medical tourism wave in the district.

OPPORTUNITIES:

- **Medical tourism sector is completely unexplored:**

In depth analysis of the district makes us understand that only issues right now is teething and in the course of time the big revenue generator will definitely add charm to this district. As the concept is somewhat new to the district its relevance is less understood but the scope for its growth is simply unbelievable.

- **Tremendous employment opportunities in store:**

The bigger the sector grows the more the employment opportunities to the qualified personnel. All service providers can enjoy their share of the pie provided the efforts are put in the right direction.

- **Revenue generation to the local government:**

Once its benefit is understood, the Government will surely wake up to see the Medical tourism sector adding a large chunk to its revenue. Flexible policies of the Govt. will surely add on to the revenue generating capacity.

- **Better infrastructure and benefit effect on other tourism crust areas will be visible if the medical tourism sector takes off:**

All round effort of every service provider whether the Government or medical intermediary or the doctor or the tour operator or the hospitality staff will try to outperform themselves and thereby provide better and personalised service to the service seeker. This will definitely have a positive impact on the other allied areas of tourism like eco-tourism, religious tourism, edu-tourism and cultural tourism.

CHALLENGES:

- **Governmental mind-set:**

Every government official appointed from outside the district as the head of the tourism board seeks a transfer from the place as soon as possible because of the simple reason that a lot can be done in this district. It is always the case that someone else does this job. The attitude of the government staff is lackadaisical and less encouraging in this regard. So appointment of a responsible person with genuine concern for the growth of the district is of paramount importance.

- **Attitudes of locals:**

Another threat that we foresee is the attitude of the locals. We believe that with timely inputs and awareness the mindset of the locals can be changed. More employment opportunities made available to the locals can encourage them to become partners in the medical tourism sector.

Suggestions for the development of Medical Tourism in Dakshina Kannada:

Medical tourism represents a mix of all the features required to attract the medical traveller not just for the medical treatment but also for enjoying the stay post-surgery and encourage seeing places and thereby mix business with pleasure.

- A holistic collaboration between the medical service provider, tour operator and hospitality industry is a must. Creation of a medical cum tour package can make it more effective.
- Accreditation from Joint Commission International (JCI) for identifying and certifying standards for healthcare services is of utmost importance.
- Creating and selling the place as a brand will be of great help in promoting medical tourism.
- Positive Governmental intervention is a must to make the opportunity a dream come true.
- Use of technology in different media in publicising as to the benefits available can create awareness and result in positive action form the service seekers.
- Tie ups with hospitals and other medical tourism practitioners of foreign countries.
- Crystal clear norms and procedures regarding accessibility, availability and referrals.

CONCLUSION:

More and more people from different countries are seeking out places where they can enjoy both, a vacation and at the same time obtain medical treatment at a reasonable price. Experts project annual growth as high as 30 percent in the coming years. India's medical tourism sector is expected to experience a CAGR of 30%, making it a ₹9,500 crore industry by 2018. This is a silver lining for the future of India in general and DK district in particular. The in-depth analysis of the district gives a feeling of a few missing links here and there and conveys a brighter picture about the positives to come out if a resulted oriented tourism policy is implemented. Accreditation, improvement of standards in healthcare, timely and promised delivery of service will help implement medical tourism in a better way.

To attract foreign patients, a well-coordinated effort among the travel, hospitality and health care personnel are imperative to develop a positive model of medical tourism for our district. The mind set of every service provider involved in the field of medical tourism must be to create win-win situation for all the stakeholders. DK are you READY?

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