

UDC 339.138

Abdullayev Anar Dostali

*Doctoral Student of Institute of Economic of
Azerbaijan National Academy of Science*

EVALUATION OF THE INFLUENCE OF WORD-OF-MOUTH MARKETING ON THE CHOICE OF TOURISTS PLANNING A TRIP FOR MEDICAL PURPOSES

***Summary.** Medical tourism has grown rapidly over the past decade as a result of an increase in the number of patients traveling abroad for treatment. Its rapid growth has attracted the attention of both the public and private sectors. It should be noted that the growth of the dynamics of medical tourism occurs both from the point of view of treatment and with the expansion of the scope of the countries. A growing number of countries also affect the competitive environment in this promising area. Thus, it is important to take into account the motivation factor for understanding and attracting patients who are looking for potential foreigners. This study is aimed at investigating the relationship between the facts of motivation and hospital visualization and the urgency of the hospital image for the behavior of medical tourists. 105 respondents were analyzed using the sampling equation based on modeling of structural equations. The results of this research are largely explained by the image of the motivational factors of the hospital, which in turn significantly influences the future behavior of medical tourists. The results of the study show that the descriptions of hospitals have a positive effect on the choice of medical tourists. This conclusion depends on previous studies. Many hospital audiences can build trust between medical tourists and hope that future medical services will return to the country. They can also travel to other countries and patients as painting marketing agents for tourists and*

health care providers. This initiative can be implemented through effective marketing communications, such as branding and campaign campaigns, and (2) long-term service strategies such as training programs, knowledge of foreign languages and excellent services, including competent hospital personnel, including professional appearance, responsibility and politeness.

Key words: *medical tourism, competitive environment, medical tourists, potential foreigners, hospital visualization.*

1. General outlook

Globalization and the significant growth of the world economy have led to the development of many areas, and one of them, the health sector, is that the development of medical information and technology can make people more aware of health problems. People are more active in obtaining information about health and treatment throughout the world. With the development of infrastructure, information and communication technologies, people have access to information only for travel to another country, as well as to improve access to information and treatment for treatment. This phenomenon is called medical tourism and "people travel long distances to get medical, dental and surgical treatments in foreign countries" (Connell, 2006, pp. 1094).

During international travel, security and worldwide standards of medical care, competitiveness, accessibility and commercialization are some of the reasons for the rapid growth in the medical tourism industry (Bookman and Bookman, 2007). In addition, other problems, such as the length of treatment, the lack of modern medical equipment and high medical costs, play an important role in increasing the mobility of people for medical purposes from one country to another.

As a new trend in tourism, it has shown a significant increase since the beginning of medical tourism. Currently, the global medical tourism market ranges

from \$ 40 billion to \$ 60 billion, or about 20 percent of the total tourism volume a year. (Forbes, 2015).

In India, Malaysia, Singapore, Turkey and others like these countries area is a spiral. In the countries of the former Soviet Union, in recent years, many years have been created to improve medical tourism. In particular, the development of medical tourism can be viewed as Russia, Azerbaijan, Georgia, Belarus, and the countries of the separatist region. It should be noted that health tourism, in particular resort and health resort tourism, has a high share in these cities. Suffice it to say that in 1987 in medical institutions in 132 medical institutions in Azerbaijan up to 700 000 people used the services of these enterprises to restore their health. Unfortunately, at present there is a sharp decline in this area. Thus, in 2016 the number of these enterprises decreased by more than 60 times in 2 times.

All this requires the need for research on countries that compete in attracting medical tourists, as well as on the need to identify the strengths and weaknesses of each country. It is also necessary to conduct additional studies to study how medical tourists relate to the country and intend to visit it again.

It should be noted that many of the studies have been devoted to assessing the potential of the country and the potential for its use. It should be noted that propaganda marketing of syrup has a special advantage over the conditions and potentials in the country where customer satisfaction is being considered. Studies show that people who have a negative view of goods or services in any enterprise or country can hardly get into this place, which is very small, even so low compared to those who experience these negative experiences. For example, some people continue to visit the country, hospitals, sanatoriums and health resorts that they conduct, despite ill-treatment. However, anyone who has heard a bad opinion about the establishment of a service or a country usually does not think about going there unless there is a permanent contact with that enterprise or country. Sarafan can act as the most powerful agent in marketing, and only with several

clients. They are still impressed, because regular customers are already accustomed to excellent products or services.

Patients are one of the key elements of measuring the success of operations in a hospital, so their contribution can not be taken into account.

Motivation in research in the field of tourism is usually considered as the main determining factor of tourists' behavior. Graham Dunne developed the concept of "push-pull" ("boost or drag-and-drop") in explaining the motivation of travel. People often travel (1) "drag" and (2) do it "with some strength" or factors. On the one hand, the driving factors, the process of knowledge and the internal socio-psychological motivation of people to travel abroad.

On the other hand, traction factors are external forces involved in the choice of a particular person. The main purpose of this study is to study the attractiveness of the task, so that only weight or factors of motivation are included in the study. The four motivation factors included in the study include the country's accessibility, knowledge and awareness, protection and security of the country and security. The objectives of the study are:

- 1) Study the relationship between the motivational factors and the image of the hospital.
- 2) To study the relationship between hospitality and the behavioral intentions of medical tourists (advertising sarafan).

According to Oliver (1997), "needs" are tools for studying human motivation. The theory of needs is a group of content theories that focus on such needs as sources of motivation. Human emotions and behavior are governed by their all-embracing needs. After a constant striving to achieve a stable situation, the desire to satisfy their needs makes them engage in special work. Manufacturers should pay attention to consumers to understand what motivates them to buy a particular product or to participate in a specific service provider. Since its inception, the theory of enhancement has been widely used in past tourism studies to explain the motivation of tourists.

In this study, four motivational factors - ease, knowledge of the country and education, savings, safety and security - have been incorporated into motivational motivations.

Listening to the name of an organization is a critical factor in the overall evaluation of any organization because of the power of its customers. A company with an excellent image creates remarkable suspicions in the market, as it can attract experienced users and customers. The advantage of the company's image is that consumers are more likely to acquire quality services and that they are worth the price. At the same time, patients are more accessible for imaging hospitals, which leads to more likely negative consequences for hospitals. Thus, a favorable image separates the enterprise from competitors and distinguishes and enhances customer loyalty.

Therefore, to formulate the following hypotheses, the following approach was adopted:

H1: Medical tourists influence the image of the hospital.

H2: Knowledge and understanding of the country influences the image of the hospital.

H3: The savings potential (lower maintenance costs) affects the image of the hospital.

H4: The safety and health of tourists affects the image of the hospital.

H5: Behavioral relationships affect the choice of tourists planning a trip for medical purposes.

The image of the hospital depends on the ability to realize its potential and customer satisfaction. In this case, a complex marketing agent as a marketing agent is defined as subjective, in other words, the fact that individuals participate in a certain movement.

In fact, the intent of behavior is closely related to the loyalty of customers. Behavioral intentions are considered a clear indication of the client's behavior for future cooperation with the same person. At the same time, it is used to assess the

potential for retraining the client. Behavioral intent of Zeithaml is an indication that customers have remained or are not defective. Positive behavioral relationships convey positive things about the firm, recommend a firm or service to others, pay a premium for the firm and remain committed to the firm

Based on the above discussion, a research model prepared for this work is presented below:

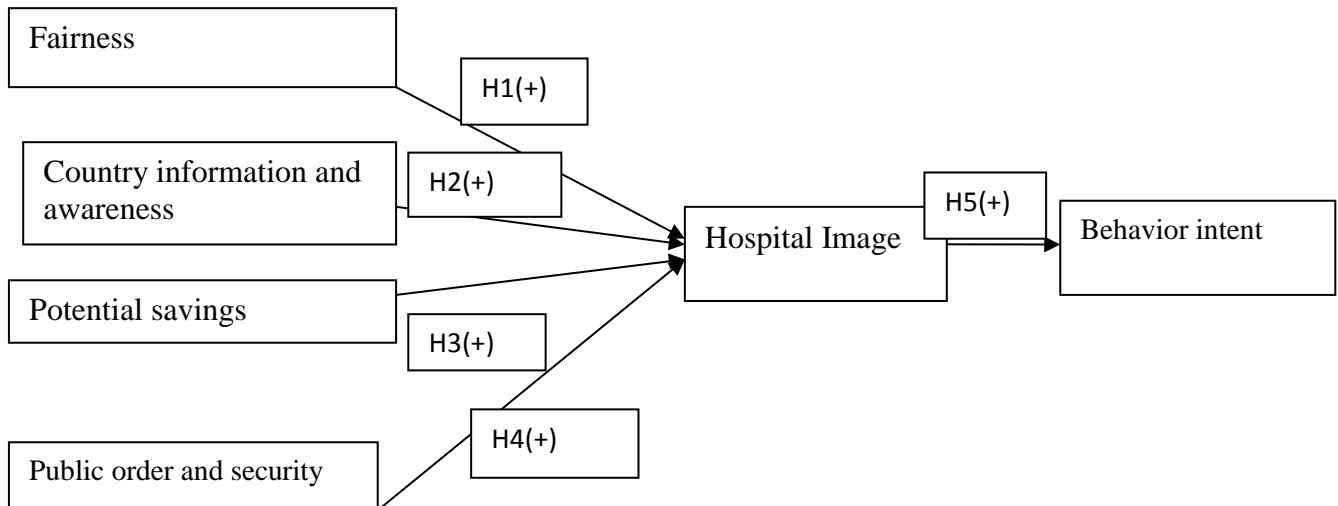


Fig. 1. Motivation factors

2. Measurement criteria

Measurements of motivation factors were carried out in accordance with relevant assessment methodologies conducted in many countries of tourism and medical tourism. These countries include India, Malaysia, Turkey, Greece, Singapore and others. can be attributed. The factors related to this work were the availability of necessary information about Azerbaijan, the opinion of the traveler who made this country more financially, the potential for stability and public safety. Access to this work was measured from the point of view of the transport system and the immigration policy of Azerbaijan.

Medical tourists identified the quality of these health centers by assessing the relationship between modern equipment and equipment, the environment, medical payments and physicians. In this case, behavioral intentions are measured on the basis of positive attitudes.

For the purposes of this case, self-employed questionnaires were used for the database. Demographic questions in the survey are age, sex, marital status, citizenship, medical care, the number of visits and treatment. As applicants are tourists from neighboring countries, the questionnaire is prepared in English and Russian. The experimental test was carried out before the collection of the actual data to verify the clarity of the substance. The experimental test confirmed that the questionnaires were accurate and relevant.

3. Verification Factor Analysis

Structural equations were used to analyze the data. The maximum likelihood of compatibility of the measurement model was investigated by the estimation method.

The criteria used to assess the conformity of the model include the conformity indices, the normal Z-square (Z^2 / df), RMSEA, the comparison index of the fitting (CFI), the Tucker-Lewis index (TLI) and the normalized index of the fixed harmony (PNFI).

JF in order to solve the convergence reliability offered by Hair, the loaded standard factor for each element should depend substantially on the latent design of at least 0.60 downloads. In addition, the average variance (AVE) for design should be greater than 0.50, and the structure reliability should be greater than 0.7. The element of the structures "savings potential" and "hospital visualization" did not fall as a result of further analysis, since the load values were below the recommended cutting value of 0.60. See Downloadable values for high standard items, remaining from 0.69 to 0.91 (point 2). Thus, the convergence reliability of the designers was determined. In addition, the minimum standard of the minimized mean variance (AVE) for all structures in this study was more than 0.50, which means that design accounts for more than 50% of the variance. As shown in Table 2, the composite reliability for all designs is greater than the recommended value for fundamental studies by 0.70.

The discriminant reliability of scale scales was evaluated according to the instructions proposed by Fornell and Larker (1981), where the square root values of the AVE values should be higher than the correlation between the pair structures. The results shown in Table 2 show that the square root of the AVE values of all structures is greater than the proportion of paired structures. As you know, all the measurement structures included in this study demonstrated the corresponding discriminant reliability, reliability of convergence and reliability.

In addition, the researchers evaluated the problem of the general dispersion method (CMV) based on Malhotra et al. All constructions for structures will be modeled as a single factor, and the approach methods are considered important if the hypothesis model is well suited. As for the present case, the results show that the model is inappropriate; Thus, the general bias method is not a serious problem for existing studies.

	C.R	F.L.		A.V.E	KNO W	HI	BI	SAVE	SAFE	ACC
KNOW	0,835	0,806	0,902	0,854	0,854					
HI	0,814	0,65	0,89	0,77	0,696	0,729				
BI	0,826	0,69	0,86	0,775	0,575	0,593	0,625			
SAVE	0,815	0,69	0,83	0,76	0,468	0,490	0,516	0,52		
SAFE	0,808	0,73	0,84	0,785	0,378	0,399	0,253	0,132	0,916	
ACC	0,812	0,7	0,73	0,715	0,307	0,323	0,101	0,106	0,086	0,729

KNOW = Country Recognition Level, HI = Description of the Disease, BI = Behavior Intent, SAVE = Conservation Potential for Medical Treatment, SAFE = Conservation of Safety and Public Order, ACC = Tolerance, CR = Composite Release, FL = Factor Load, AVE = Medium Variance removed.

b) Diagonal inputs (thicker chip) represent the mean variance of square roots and the connection between non-diagonal inputs (italics) is the constitution.

4. Structural Model and Hypothesis Test

The integrated model for this study provides consistent compatibility with information in the medical tourism device at $Z^2 / df = 1.538$, RMSEA = 0.034, GFI = 0.877, CFI = 0.942, TLI = 0.944 and PNFI = 0.743. Given an adequate measurement model, the hypotheses developed for this study can be verified by testing the proposed structural model. The statistical results presented in the table provide the traffic coefficients (β) for all hypothetical paths in the model. The results show that all motivation factors have a positive effect on the image of a medical tourist in a hospital. Similarly, hypothesis 5 ($\beta = 0.258$, $p < 0.001$) was confirmed, with direct positive relationships with the quality of care accepted by medical tourists.

5. Results of the study

Based on the results of this work, there are several points. First, all hypothetical motivational facts - accessibility of Azerbaijan, access to information, savings, public safety and security - had a significant impact on the image of the hospital. The government can include these factors in its policy of promoting Azerbaijan as a medical tourist destination. Advertising and marketing campaigns can be held through exhibitions, advertising, conferences and exhibitions.

As for hospitals in the medical tourism industry, it is recommended to look for various marketing tools such as social media, advertising sundresses and Internet marketing to effectively reach potential patients. This initiative faces any uncertainty experienced by potential medical tourists, and, most importantly, is designed to limit the risks associated with visiting our country for medical care. It is recommended that hospital management support long-term service-oriented strategies to maintain their prices in a reasonable way and to organize a positive image of the organization. In terms of accreditation, it is advisable to apply for international accreditation in the field of health, for example, with the Joint Commission on International Relations (JCI), which is a vital accreditation for

hospital health programs, which forms a safe image of hospitals in the eyes of positive and medical tourists.

It is advisable to focus on important resources to improve the image of the hospital. This will help create a reputation for a hospital that will be relevant and successful in the competitive industry.

References

1. Alexandris K., Dimitriadis N., and Markata D. (2002). Can perceptions of service quality predict behavioral intentions? An exploratory study in the hotel sector in Greece. *Managing Service Quality*, 12(4), 224-231.
2. Aydin S. and Özer G. (2005). The analysis of antecedents of customer loyalty in the Turkish mobile telecommunication market. *European Journal of marketing*, 39(7/8), 910-925.
3. Bashar Aref Mohammad Al-Haj Mohammad An Analysis of Push and Pull Travel Motivations of Foreign Tourists to Jordan *International Journal of Business and Management* Vol. 5, No. 12; December 2010.
4. Fornell C. and Larcker D.F. (1981). Structural equation models with unobservable variables and measurement error: Algebra and statistics. *Journal of Marketing Research*, 18(3), 382-388.
5. Hair J.F.J., Blac, W.C., Babin B.J., Anderson R.E. and Tatham R.L. (2010). *Multivariate data analysis a global perspective*. New Jersey: Pearson Education International.443-480, Səh.761.
6. <http://banker.az/zəncir-effekti-və-ya-sarafan-marketinqi/>
7. Hudson S. Domestic Medical Tourism: A Neglected Dimension of Medical Tourism Research *Journal of Hospitality Marketing & Management*, 21:227–246, 2012.