

POLICY RECOMMENDATIONS OF THE 15TH MEETING OF THE COMCEC TOURISM WORKING GROUP

The COMCEC Tourism Working Group (TWG) has successfully held its 15th Meeting on September 24th-25th, 2020 in Ankara, Turkey with the theme of “Developing Medical Tourism in the OIC Member Countries.” During the Meeting, Tourism Working Group, made deliberations on medical tourism in the OIC Member Countries. Accordingly, the participants has come up with some policy recommendations.

Policy Advice 1. Encouraging marketing and branding activities in order to boost the image of the destination country with a view to attract international patients.

Rationale:

Countries attract international patients with their capacity and capabilities in health provision. However, they increase their chance to be preferred as a destination country as much as their country image allows this position. In this sense, security and trustworthiness step forward as factors which influence country’s brand image. When country image is problematic as regards economic or other circumstances, it becomes important to obtain an improved image in the first place. In order to convince international communities towards a shift in their perception about the country, rebranding strategies can be introduced. Rebranding helps spread the message that the destination country is safe and trustworthy for all activities undertaken within its borders, including healthcare provision as well. For instance, integration of insurance systems is defined as an effective model for medical tourism activities regarding ease and secure payment procedures available in different countries. Medical tourism is not solely about health provision and medical services. Instead, second pillar of medical tourism consists of the tourism component. As a supporting factor to medical tourism, other tourism facilities (i.e. historical sites, cultural heritage etc.) can be promoted.

Policy advice 2. Using online platforms for customized marketing strategies towards target groups

Rationale:

Online platforms, especially popular social media channels such as YouTube, Facebook, Instagram, Twitter, Pinterest, etc. provide virtual environments to express opinions and preferences. Although these platforms are not particularly designed for marketing, advertisements are usually permitted. Data collection from the registered accounts enables algorithms to suggest personalized advertisements in parallel to the users’ activities. From the medical tourism perspective, such platforms can be used in order to attain the target groups. Based on their personal choices, matching treatments can be displayed on the channels they frequently use. Such advertisement strategy on medical products and services is especially applicable for cosmetic procedures towards those who are interested in wellbeing and beauty products. As for the OIC member countries, such an interactive tool can be used in order to understand the needs of target population. This would allow to develop segmentation strategy with the objective to respond in the most effective way to the needs of target population within the segment.

Policy advice 3. Promoting development/implementation of exchange programs among the

OIC Member Countries for medical personnel in order to boost knowledge and experience sharing

Rationale:

In response to the medical needs of individuals and societies, health sciences discipline work on development of new techniques and tools. The way to treat diseases may vary across countries. Countries develop their own unique approach in relation to their level of health infrastructure in terms of medical education and R&D capacity. From this point of view, knowledge and experience sharing becomes important for medical personnel in order to adopt different approaches into their practices. The communication between medical personnel as regards the advancements in the healthcare sector facilitates dissemination of best practices in the field. Such a blend of knowledge between healthcare professionals can create a larger impact. It has, in fact, the potential to boost the industry as well. Therefore, exchange programs can nurture the healthcare industry at healthcare personnel and healthcare provision levels among the OIC member countries.

Policy advice 4. Encouraging bilateral or regional/multilateral arrangements (such as patient exchange programs, pre-diagnosis services, alliances between healthcare providers and streamlining health insurance schemes etc.) between public/private stakeholders including insurances and hospitals in order to sustain the exchange of patients.

Rationale:

Bilateral, regional and multilateral arrangements can increase health mobility between the signing parties and serve as a stimulating factor to boost trade relations. In this respect, partner countries may benefit from the increase in health mobility through filling the gap in demand towards medical treatment. This may also enable the other side of the arrangement to provide healthcare services and meet its potential in medical tourism. These arrangements may take multiple forms such as patient exchange programs, pre-diagnosis services, alliances between healthcare providers and streamlining health insurance schemes. For instance, opening a pre-diagnosis center in a partner country would give the opportunity to the supplier country to display its medical services. On the other side, the partner country would benefit from medical knowledge and experience of the visiting medical staff coming from the partner country. As for protocols signed between healthcare providers and health insurances, it is possible to affirm that both sides would benefit from medical tourism schemes.

Policy Advice 5. Establishing a database on health tourism for the use of OIC member countries for further cooperation in terms of patient-treatment exchange and capacity building in healthcare provision

Rationale:

Data collection in medical tourism constitutes a big problem. Countries experience challenges in finding the appropriate information as regards activities taken place in medical tourism industry. The lack of data collection methodology and database creates obstacles in terms of marketing as well. Both side of the medical tourism actors (suppliers and demanders) can take data-based concrete actions for future collaborations. For instance, supplier countries can provide data on their medical services that are integrated in the medical tourism whereas demanders can list their priorities in medical treatments. Such a database can open a platform for collaboration not only in terms of patient-treatment exchange but also in terms of capacity building in healthcare provision as well. OIC level data sharing in medical tourism will facilitate both supply and demand side among the region.

Instruments to Realize the Policy Advices:

- **COMCEC Tourism Working Group:** In its subsequent meetings, the Working Group may elaborate on the above-mentioned policy areas in a more detailed manner.
- **COMCEC Project Funding:** Under the COMCEC Project Funding, the COMCEC Coordination Office calls for projects each year. With the COMCEC Project Funding, the Member Countries participating in the Working Groups can submit multilateral cooperation projects to be financed through grants by the COMCEC Coordination Office. For the above-mentioned policy areas, the Member Countries can utilize the COMCEC Project Funding and the COMCEC Coordination Office may finance the successful projects in this regard. These projects may include organizing seminars, training programs, study visits, exchange of experts, workshops and preparing analytical studies, needs assessments and training materials/documents.
- **OIC/COMCEC Private Sector Tourism Forum:** In its meetings, the OIC/COMCEC Private Sector Tourism Forum may elaborate on the above-mentioned policy areas and the sub-areas from the private sector perspective.