

Journal of
Tourism & Adventure

**Strategies for Development of Yoga, Ayurveda, and
Meditation-based Health Tourism in Nepal: Using
SWOT Analysis**

Bishnu Prasad Khanal

Ph.D. Research Scholar, Tokyo Metropolitan University, Japan

Khanal_bishnu2016@yahoo.com

Tetsuo Shimizu

Professor Tokyo Metropolitan University, Japan

t-sim@tmu.ac.jp

Article

Received 31 July 2019

Revised 16 August 2019

Accepted 15 September 2019

Keywords

Health tourism,
stakeholders,
strategic planning,
SWOT analysis,
Nepal

Abstract

Now health tourism based on yoga, Ayurveda and meditation is growing sector in Nepalese Tourism. Health tourism as one of the most important forms of tourism is not an exception and preparing strategies for its development will not be possible without considering its specific and extraordinary environment. The objective of preparing and is writing this research paper is to formulate suitable strategies for health tourism development in Nepal. This study uses a qualitative approach. We conduct 38 semi-structured interviews with related stakeholder's of health tourism in Nepal, including health service providers, tourism service providers (as enterprise), and government officials. It was carried out in 2017 in Kathmandu, Bhaktapur, Lalitpur, and Pokhara. For strategy formulation, we employ the Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis method to examine the internal and external factors comprehensively, in terms of health tourism development in Nepal. The strategy to the health tourism development will be considered in terms of four relations: strengths-opportunities (S-O), weaknesses-opportunities

Corresponding Editor

Ramesh Raj Kunwar

kunwar.dr@gmail.com

Copyright © 2019 Authors

Published by: Janapriya Multiple Campus (JMC), Pokhara, Tribhuvan University, Nepal

ISSN 2645-8683

(W-O), strengths-threats (S-T), weakness-threats (W-T). The results of this study show that the strategy in health tourism development in Nepal, it is necessary to work on policy and regulation, promotion and branding, introducing the quality standards for health products and service as well as to establish the institutional support in order to successful implementation for the strategy of the health tourism development in Nepal.

Introduction

As a new form of tourism, health tourism has substantially grown over recent years. The nature of health tourism supply-side reform is to promote the coordinated development of health tourism supply and demand system, optimize stakeholder affecting factors, and improve health tourism quality. Nowadays, the theme of tourism supply-side reform has been the research focus. The new wave of health-care tourism originating from developed countries and heading toward developing ones is accepted as a major development that can reduce costs and increase efficiencies in the health systems of developed countries. The so-called third wave of medical tourism is expected to have a positive long-term effect on developing economies (Cohen, 2012). About 30 countries, including Thailand, Malaysia, Singapore, Korea, Hungary, Poland, Jordan, Slovenia, Saudi Arabia, UAE, India, Turkey and the USA, are considered as the major players in the international health tourism market (Bookman & Bookman, 2007; Eissler & Casken, 2013; Merrell et al., 2008; Pollard, 2013). Many governments, international agencies, and stakeholders consider medical tourism as a means of economic growth, which might cross-subsidize domestic health access where that is a central governmental objective and ensure a competitive cure for the global health system and the delivery of health services worldwide (Hall, 2013).

Bookman and Bookman (2007, in Horowitz et al., 2007) emphasize that the government of destination countries must implement and enforce appropriate macroeconomic redistributive policies to ensure that the local residents of these countries actually realize the potential benefits of the health tourism industry. Empirical research proves that health care service providing, distribution of health care products, and the increase of demand for health care treatments, serve as a catalyst for the globalization of health tourism movements, which generates significant economic effects such as investments, income, employment, tax revenues, and export earnings for host countries (Kesar & Rimal, 2011). The rational usage of available energy, a friendly entrepreneurial environment aimed towards the attraction of new investments and public-private partnerships, together with the development of specific packages in order to ensure a high quality of services, this special niche of tourism has a bright future in Nepal, and can significantly contribute to the country's economic growth.

Health tourists work as the demand side, which experienced health tourism supply directly, whose supply sensing results also directly affected their subsequent tourism behavior. That is to say, they will recommend when satisfied with the health provider of their quality standards and quality service, and they won't be back or even they give a bad review when unsatisfied. Health and tourism enterprises were the main health tourism supply providers, whose high or low evaluation on health service and tourism service will directly affect their investment and construction results of destination tourism supply.

There are different stakeholders in the health tourism industry. Thus, policymakers can plan, make a policy and decision, and use effective strategies to develop health tourism by designing a health tourism stakeholders' network, a health tourism council, and clarify the roles and responsibilities of stakeholders. Some Asian countries such as India, Thailand, and Malaysia have been very active in the development of health tourism; as a result, these places have become top destinations for health tourists. It is because these countries have developed infrastructure for tourism and health treatment and provided good communication links between hospitals, insurance, and tourism agencies as well as lowering costs and waiting times (Yu & Ko, 2012).

Therefore, the perception of health tourism supply between the supply and demand sides should be taken full account to make a scientific and reasonable regulation for the structure optimization of health tourism supply. In recent years, many researchers have paid more attention to the perception of the factor affecting supply and demand sides. However, how to judge the development order of supply factors and how to optimize the destination competitiveness supply factors, which are still lack of in-depth study. The main objective of preparing and is writing this research paper is to formulate suitable strategies for health tourism development in Nepal. For this purpose we set the following research questions:

1. Which are the most affecting factors for health tourism development in Nepal and suitable strategies?
2. Who are the related stakeholders for the health tourism industry in Nepal?

Research methodology

This research is descriptive-analytical and also a kind of applied research and it was carried out on December 10, 2017, to December 27, 2017 as an attempt to prioritize health tourism development factors of Nepal's health tourism industry. This research has been done upon the health tourism stakeholders of Nepal. Also, conduct interviews and experts' opinions in the field of health tourism and health services such as those in universities, Ministry of Health, Health Education, tourism industry experts, and other related stakeholders in Nepal were used to identify the internal and external factors such as the weakness and strength points and the opportunities

Stakeholders Interviewed	Criteria for Selection									
	1	2	3	4	5	6	7	8	9	10
Stakeholder 15		Y					●			
Stakeholder 16		A								
Stakeholder 17					●					
Stakeholder 18					●					
Stakeholder 19		A								
Stakeholder 20										●
Stakeholder 21		Y		●		●				
Stakeholder 22										●
Stakeholder 23		A				●				
Stakeholder 24									●	
Stakeholder 25		Y								
Stakeholder 26		A								
Stakeholder 27									●	
Stakeholder 28		A		●			●			
Stakeholder 29		S							●	
Stakeholder 30									●	
Stakeholder 31		Y					●			
Stakeholder 32								●		
Stakeholder 33	H									
Stakeholder 34								●		
Stakeholder 35		A								
Stakeholder 36		A					●			
Stakeholder 37								●		
Stakeholder 38		Y					●			

Table 2: Criteria and key symbol used to select stakeholder for interview

Criteria	Description
1	Government Authorities: (H) Health Ministry Related (T) Tourism Ministry Related.
2	Health Providers : (A) Ayurveda, (Y) Yoga, and (S) SPA
3	Member of Nepal Tourism Board
4	Other Traditional and Natural Health Providers
5	University Authorities and Health-Related Research Organizations.
6	Spiritual Retreat/ Meditation
7	A facility offering medical tourism
8	Member of Ayurvedic Medical Council / Nepal Ayurvedic Doctor Association
9	Hotels with wellness facilities (i.e. SPA, Yoga and Massage)
10	Travel Agencies.

Methodology of analysis

To formulate the development strategies of health tourism, the SWOT analyzing method was used. As the method requires, an effective strategy is the one that as a result of its implementing, the opportunities and strong points are maximized and the weaknesses and threats are minimized. In the end, a list of strengths and weaknesses, as the internal factors, and another list of opportunities and threats, as external factors, were developed. To analyze the key elements of the internal/external environment, internal factor evaluation SWOT analysis were created. Afterward, finally, by using the SWOT matrix, the factors were compared pairwise and four strategies (SO/ST/WO/WT) were recommended for the development of the industry both at macro and micro levels.

This step is to identify the four patterns of the SWOT model for the compatibility of the internal and external factors.

Strength and Opportunity (S-O): The first area is the best position. In this case, the system faces several environmental opportunities and it has a lot of strengths that encourages the use of opportunities. This condition is recommended as a growth strategy.

Strength and Threat (S-T): In the second area, the system has key strengths but faces threats in the environment. In this condition, the strategies are used by existing strengths to build the long term opportunities in other cases.

Weakness and Opportunity (W-O): In the third area, the system is faced with great opportunities but suffer from several internal weaknesses.

Weakness and Threat (W-T): In the fourth area, the system is faced neither with the opportunities nor with the strengths of internal environmental but is faced with the internal dimensions to many threats. In this case, the best strategy will be a reduction strategy (Mousavi, 2006).

Table 3: SWOT Matrix and how to determine the strategies

Internal Factors	STRENGTH (W)	WEAKNESS (W)
External Factors		
OPPORTUNITY (O)	SO STRATEGY Achieve opportunities that greatly match the organization`s Strengths.	WO STRATEGY Overcome weakness to attain opportunity.
THREATS (T)	ST STRATEGY Use strengths to reduce the organization`s threats.	WT STRATEGY Prevent weakness to avoid making the organization more susceptible to threats.

Source: Chermack & Kasshanna, 2007; Marpaung & Shimizu, 2018

Factor affecting health tourism development

In this section, we will discuss two sections of health tourism development. The first section, factor affecting the health tourism development, where we discuss potential factors which affect the supply side of the health tourism industry. The second section, stakeholders identification their role and scope to develop the health tourism industry.

Globally, people are increasingly becoming health conscious, (Katalin, 2009) notes that feeling and looking healthy appear to be the mantra for today’s fast-moving generation. Most developed countries are taking advantage of this interest in healthy lifestyles to promote health tourism as a strategic tourism product. Meanwhile, very little is being done in developing economies regarding health tourism development

(Tomka et al., 2011). Health tourism has been actively embraced by governments and private-sector actors in a growing number of lower- and middle-income countries as a potentially powerful economic growth engine. Meanwhile, critics generally warn that health tourism may harm destinations by stimulating private health care development unresponsive to locals' needs and resources (Sengupta, 2011).

Health tourism destinations can be used to attract foreign exchange, mitigate health worker brain-drain, and improve health care and tourism infrastructure (Bookman & Bookman, 2007). The development of the sector in recent years is mainly caused by changes in the lifestyle, demographics, people perception, culture, and globalization. Table 4 shows the research on factor Affecting Health Tourist Attracting in Different Countries by different researchers.

Table 4: Research on factor affecting health tourist attracting in different countries, compiled from various sources.

S.No	Reference	Country	Methodology & Sample	Findings
1	Heung et al. (2011)	China	Qualitative method. Data were collected through in-depth interviews with hospital representatives, chief executives, directors of medical organizations, and representatives of relevant authorities in the healthcare sector.	Factors including the economy (costs), infrastructure, government attitude, policies and regulations, promotion, expertise, investment potential, language and communication, facilities and attractions are barriers to medical industry development in China.
2	Chomvilailuk and Srisomyong (2015)	Thailand	Qualitative and quantitative research methods. Fifteen interviews for which the interviewees mostly represent the supply side of medical tourism. Quantitative data were collected from 117 patients of one hospital in Pattaya.	Perceived congruence of demand-supply medical, perceived quality of demand-supply medical facilities and brand image of hospitality facilities affect destination brand choices.
3	Ulaş and Anadol (2016)	Turkey	Qualitative research was conducted, and primary data were collected from the 2 directors and 12 medical professionals in a case hospital.	Government support, infrastructure, economic factors such as cost, capacity, and human resources orientation are the main factors affecting the development of medical tourism for a private hospital.

S.No	Reference	Country	Methodology & Sample	Findings
4	Das and Mukherjee (2016) India	India	A qualitative study, 30 people whose residences were located in Kolkata was interviewed.	Four dimensions, namely, awareness, perceived quality, brand loyalty, and authenticity were developed to assess medical destination brand equity.
5	Ebrahim and Ganguli (2017) Bahrain	Bahrain	Quantitative research methods, Data were collected from medical service providers in the Kingdom of Bahrain.	Careful planning and management of multi-stakeholder engagement in the medical tourism sector are crucial to ensure place attractiveness.
6	Ganguli and Ebrahim (2017)	Singapore	Qualitative research method, in-depth qualitative analysis, case study.	An enabling tourism sector, strategic planning, Public-Private Partnerships, marketing and branding strategies, technology and innovation, accreditation and governance and human capital development are the 7 pillars that Singapore's competitive advantage stems from.
7	Aydin and Karamehmet (2017)	Turkey	Qualitative research was conducted. Structured interviews were carried out in one public and three private hospitals in Turkey	Factors affecting health tourism include costs, cultural distance, political and/or economic stability, regulations & legal framework, overall quality of care and trust

Stakeholders role in health tourism development

Stakeholders mean any individual, group, or institution, which potentially affects or would be affected by project activities and has something to gain or lose if conditions change or stay the same (Freeman, 2010). One of the most important factors to balancing stakeholders' relations and interests is the efficient role of government for coordinating, organizing, strengthening, legitimating and networking stakeholder relations in Nepalese health tourism market.

The support of health & tourism stakeholders is essential for the development of health tourism, successful operation, and long-term sustainability of the health tourism industry. In the health tourism industry, there are many stakeholders and their role is most important to develop and improve the industry. Byrd (2007) stated that: "for sustainable tourism development to be successful, stakeholders must be involved in the process". However, not all stakeholders have the same level of interest in health tourism development and may be less active or not active at all. Moreover, some stakeholders are more important than others in determining the success of health tourism activities.

The possible potential stakeholders in health tourism were determined based on literature and document review. Then, from among them, the key stakeholder of this industry, in Nepal, was identified, by interviewing the experts of health tourism. The key stakeholders were three groups of organizations and people with an important role in health tourism. The list of possible and key stakeholders is shown in Table 5.

Table 5: Possible and key stakeholders in the health tourism industry in Nepal.

Demand	Supply	Regulation
Health Tourist	Health Provider (H)	Health Ministry
	Travel Operator (T)	Tourism Ministry
	Insurance Companies (H)	Other Institution
	Destination/Markets/Hotel (TR)	
	Transportation (TR)	
	Farmers& Herbs Collector (HR)	
	Pharmaceutical Company (HR)	
	Health Equipment Supplier (HR)	
	University/ Vocational School (O)	
	Investors (O)	

(Here, H- Health Provider, HR- Health-related Supplier, T- Tourism Provider, TR- Tourism related supplier, O- Other suppliers)

According to the stakeholder theory, each group of stakeholders has different as well as similar characteristics depending on the basis of attributes and criteria appropriate to the situation. These may include the relative power and interest of each stakeholder (Freeman, 1984), the networks and coalitions to which they belong (Freeman & Gilbert, 1987) and the importance and influence they have (Grimble & Wellard, 1997).

The result showed in Table 5 that the key stakeholders were made up of three different groups in the health tourism industry in Nepal. First government side stakeholders, second supply-side stakeholders, and third demand-side stakeholders. Based on their characteristics supply-side stakeholders also divided into five groups (Table 5) health providers, tourism providers, health-related supplier, tourism-related supplier, and other suppliers.

Figure 1: Stakeholders relation in health tourism industry in Nepal

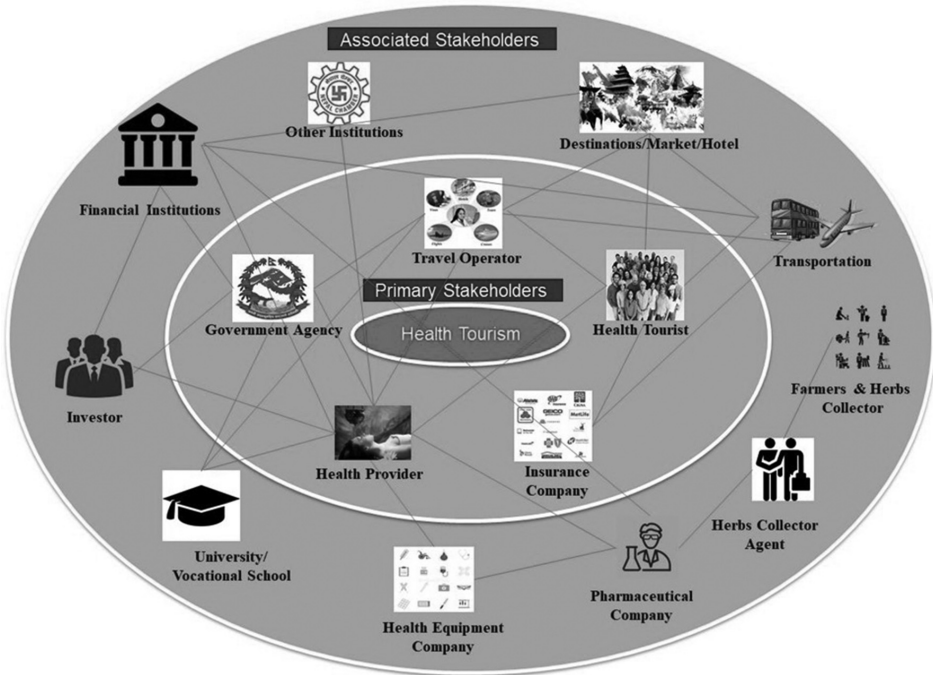


Figure 1 shows, in Health tourism industry in Nepal, there are primary stakeholders like health providers, tourism providers, insurance companies and government agencies and the other hand associated stakeholders as transportation, destinations, farmers and herbs collector, pharmacy, health equipment companies, universities, investor, financial institutes and other institution in vital role. We find here are many stakeholders and their relationship is too complex.

Thus, the government can make a plan, make a policy and decision, and use effective strategies to develop health tourism by designing a health tourism stakeholders' network, and clarify the roles and responsibilities of stakeholders.

SWOT analysis

In this research, we use the SWOT analysis method to find the most affecting factors for health tourism development and their suitable strategy. We conduct on-site interviews with the Nepalese government, health tourism providers, and health care providers. We then identify steps to more productively advance the discussion about the affecting factors and suitable strategy of health tourism development in Nepal. SWOT can serve as a basis for managers' and specialists' decisions and the determination of objectives (Nahman & Godfrey, 2010). Considering internal and external factors governing an organization it can provide a fit basis for formulating strategy (Chang & Huang, 2006).

Nepal health tourism industry SWOT analysis

Some of the SWOT analysis factors are identified by the author in their previous studies (Khanal & Shimizu 2019). And many of the factors are identified in this study and analysis for this research.

Table 6: Strength of health tourism industry in Nepal

	STRENGTH	Why? (Justification- why we consider a particular factor to be a strength)
S1	Originality of Services	Nepal is the only country which health tourism services are based on mountains. Most of the herbs are coming from the mountainous area. The originality of the meditation, yoga and Ayurveda practices, and herbs.
S2	Medical Resources	BioDiversity in Nepal offers the possibility to explore original and high-value health tourism products. Nepal has good potential for medicinal herbs and medicinal plants.
S3	Professional Skill	Ayurvedic doctors and therapist provide health services. In addition, Nepal has many colleges and universities who provide medical education for Ayurveda and other health professional. Ayurvedic doctors are trained both Ayurvedic Treatment with allopathic treatment.
S4	Low Cost	The affordable price of health care and tourism services (health services, accommodation, etc.)

	STRENGTH	Why? (Justification- why we consider a particular factor to be a strength)
S5	Waiting Time and On Arrival Visa	Low waiting time for receiving health care services for health tourists. In addition, On arrival visa facilities for main tourists arrival countries.
S6	Tourism Attraction	Many Famous tourist attractions and trekking routes in Nepal. In addition, Nepal has five seasonal climates: spring, summer, monsoon, autumn, and winter.

Table 7: Weakness of health tourism industry in Nepal

	WEAKNESS	Why? (Justification- why we consider a particular factor to be a weakness)
W1	Professional Human Resources	Lack of professional workforce for health tourism.
W2	Quality Standards	Poor quality control over services in health tourism centers.
W3	Lack of Promotion	Lack of proper operation of the mass media facilities (Broadcasting, local media, etc.) for health tourism marketing in the target market and Ineffective public information services to inform international health communities and failure to take part in international exhibits. In addition, another hand poor performance of Nepalese embassies in other countries regarding Nepal's health tourism potentials.
W4	Underdeveloped Infrastructure	Underdeveloped infrastructures (both overall and health providers)
W5	Lack of Government Support	Lack of governmental support to promote the health tourism industry. Failure of the ministry of health and ministry of tourism to keep the record of health tourists and even no health visa program for health tourist.
W6	Education and Training	In terms of hospitality and marketing education, health professional needs more education and training.

Table 8: Opportunity of health tourism industry in Nepal

	OPPORTUNITY	Why? (Justification- why we consider a particular factor to be an opportunity)
O1	Increasing Global Demand	Increasing awareness of Yoga and Ayurveda in developed countries like Japan, USA, Canada, and the UK with a high potential of health tourism and increasing Global demand for the health tourism industry.
O2	Increasing Cost of Healthcare	The cost of health service in the developed western world remaining high,
O3	Increasing Death of Lifestyle Cause of Disease	Fast-Paced lifestyle increases the demand for wellness tourism and alternative cures. Death caused by lifestyle diseases are increasing and the growth of demand for health attention.
O4	Government Attention	Attention to health tourism in country documents like Tourism Strategy (Vision 2020) National Tourism Policy (2016-2025)
O5	Developed Technology	Globalization and Internet technology, providing visibility to service providers around the world.
O6	Increasing no of Tourist	Nepal has potentials for historical, natural, cultural, adventure and religious tourism attractions. And the tourist growth rate is more than 25 percent per year.

Table 9: Threats of health tourism industry in Nepal

	THREATS	Why? (Justification- why we consider a particular factor to be a threat)
T1	Global and regional competition	Intense competition among regional countries in attracting health tourists like India, Sri Lanka, and Thailand.
T2	Legal Problems	Facing some legal question from European countries for some Ayurvedic herbs and medicine about the quality standard.
T3	Limited Accessibility	Limited accessibility with many potentials tourist markets.

	THREATS	Why? (Justification- why we consider a particular factor to be a threat)
T4	Market Share and Promotion	Stronger marketing and promotion of other competitive health tourism destinations in Asia and the globe than Nepal.
T5	Brain-drain of Nepalese Health professionals	Because of high payment and opportunity availing in other similar health destinations, many of the Nepalese professionals working overseas.
T6	International Accreditation	Lack of healthcare centers approved by the international accreditation organization.

The potential strengths, weaknesses, opportunities, and threats of health tourism of Nepal from stakeholder's perspective summarized that includes 6 strengths, 6 weaknesses, 6 opportunities and 6 threats (Table 6, 7, 8, and 9).

In table 6, According to the participant's perspective, the most important strengths are originality of the service, medical resources, and professional skills, low cost of the treatment, low waiting time and Tourism attraction. Ricafort et al., in another study, presented the factors such as the reputation of the provider, low cost of the treatment, low waiting time for receiving treatment as factors affecting the choice of health providers or destination which is consistent with our results.

As table 7 shows lack of underdeveloped infrastructure, lack of promotion, lack of government support, lack of education and training and lack of quality standards is the main barrier for health tourism development. In another study of (Heung et al., 2011) also mention the lack of sufficient infrastructure and lack of promotion and marketing as a barrier for health tourism development.

In the opportunities, Table 8 shows increasing global demand of health tourism, increasing the cost of health treatment in developed countries, increasing the death of lifestyle cause disease, government attention, developed technology and increasing no of tourists are potential opportunities for health tourism development in Nepal.

In table 9, in terms of threats of the health tourism industry in Nepal; limited accessibility with other countries, low market share, and promotion, the brain drain of Nepalese health professionals and International accreditation are the most important threats.

SWOT Matrix

Table 10: Possible strategies for health tourism development in Nepal.

<p>Internal Factors</p> <p>External Factors</p>	<p>STRENGTHS (S)</p> <p>S1. Originality of Services S2. Medical Resources S3. Professional Skills S4. Low Cost S5. Waiting Time & On Arrival Visa S6. Tourism Attraction</p>	<p>WEAKNESS (W)</p> <p>W1. Professional Human Resources W2. Quality Standards W3. Lack of Promotion W4. Underdeveloped Infrastructure W5. Government Support W6. Education and Training</p>
<p>OPPORTUNITY (O)</p> <p>O1. Increasing Global Demand O2. Increasing Cost of Healthcare O3. Increase Lifestyle Cause Disease O4. Government Attention O5. Developed Technology O6. Increasing no of tourists</p>	<p>SO STRATEGY</p> <ol style="list-style-type: none"> Promote originality of services and tourism attraction to attract the Global client. (S1, O1, O3) Maintain cost of service with high quality. (S2, O2). Increase the quality standard of medical resources to get the trust from health tourist. (S2, O5) Conduct regular professional training; involve universities for research and development for human resource development. (S3, O4) 	<p>WO STRATEGY</p> <ol style="list-style-type: none"> Establish Health tourism board to promote health tourism and design educational materials and training for health providers and also maintain the quality standards for health services. (O3, O4, W1, W2 W6) Strong government involvement to develop health tourism policy and necessary regulations. (O4 O6, W5, W6) Start a strong promotional campaign to attract health tourist from overseas countries. (O1, O2, O3, W3)
<p>THREATS (T)</p> <p>T1. Global and Regional Competition T2. Legal Problems T3. Infrastructure T4. Low Market Share and Promotion T5. International Accreditation T6. Accessibility</p>	<p>ST STRATEGY</p> <ol style="list-style-type: none"> Branding SPA, Meditation, Yoga, and Ayurveda as mountain-based health tourism. (S1, S2, T1) Maintain a quality standard of health facility and overall services. (S3, T2, T5) Encourage health providers to get accreditation from international organizations. (S1, S2, S3 T5) 	<p>WT STRATEGY</p> <ol style="list-style-type: none"> Public-private partnership to develop overall infrastructure and increase investment in health tourism (T3, W4) Use overseas embassies to promote health tourism in overseas markets. (T4, W3)

Strategic framework for health tourism development

The purposed strategic framework begins with a vision statement aiming to develop Nepal as a perfect health tourism development destination. Among the vision, we have derived three objectives. These three objectives aim to support health tourism development in terms of policy, quality standard and promotion activities.

To develop competitive health tourism industry in Nepal, it is imperative to have a differentiated positioning and product offer. The positioning and unique product offer can assist to attract target related health tourist and help to increase awareness. The framework recommends that the focus theme be Health Tourism with Ayurveda, Yoga, Meditation & Spiritual and Medical SPA services as health tourism products.

Table 11: Strategic framework for health tourism development in Nepal

STRATEGIC FRAMEWORK FOR HEALTH TOURISM IN NEPAL			
VISION			
Develop Nepal as a perfect health tourism destination in South Asia			
OBJECTIVE			
Regulation	Quality Standard	Promotion	
Make related policy and regulation standards to help the health tourism industry.	Maintain and control the quality standards of health products and overall services.	Promote Nepal as a unique and perfect health tourism destination in target markets.	
POSITIONING AND THEMES			
“Nepal as a Health Tourism Destination With Nature and Culture Tourism”			
Ayurveda Tourism	Yoga Tourism	Meditation and Spiritual Tourism	Ayurvedic & Medical SPA
STRATEGIC DIRECTION			
Short Term (In 1 Year)		Long Term (In 5 Years)	
<ol style="list-style-type: none"> 1. Establish Health Tourism Licensing and Regulation Body with the involvement of Necessary Stakeholders. 2. Make the necessary policy and regulation to develop the health tourism industry. 3. nal organizations. 		<ol style="list-style-type: none"> 1. Increase Investment in Infrastructure at the list to benchmarking with competitors. 2. Branding SPA, Meditation, Yoga, and Ayurveda as mountain-based health tourism. 3. Promote originality of services and tourism attraction to attract the Global client. 	

<ol style="list-style-type: none"> 4. Establish Health Tourism Licensing and Regulation Body with the involvement of Necessary Stakeholders. 5. Make the necessary policy and regulation to develop the health tourism industry. 6. Capacity building: Basic Infrastructures like Water, Electricity and necessary roads. 7. Encourage health providers to get accreditation from international organizations. 8. Increase the quality standard of medical resources to get the trust from health tourist. 9. Conduct regular professional training; involve universities for research and development for human resource development. 10. Use overseas embassies to promote health tourism in overseas markets 	<ol style="list-style-type: none"> 4. Increase Investment in Infrastructure at the list to benchmarking with competitors. 5. Branding SPA, Meditation, Yoga, and Ayurveda as mountain-based health tourism. 6. Promote originality of services and tourism attraction to attract the Global client. 7. Strengthening health tourism product relevance to attract health tourist from other countries. 8. Full-Fledge branding & promotional initiatives. 9. Increase private sector participation and encourage strong public private partnership. 10. Establish a National accreditation system to control quality standard and support management activities of health providers.
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Recommended coerces of action

To develop Nepal as a perfect health tourism destination in South Asia and promoting and attract health tourist from overseas countries, a two-stage strategic direction is recommended.

First set of short term strategies to be carried out within the next one years that will bring Nepal to a competitive platform in the health tourism industry and build strong capabilities to create a unique health tourism destination. Next, set a long term plans to be carried out in the next five years that would catapult Nepal from the current state of an obscure destination to that of a preferred health tourism destination amongst the affluent markets by branding and marketing initiatives. Suggested strategies are listed in Table: 11.

Conclusion

The results represented that the health Tourism Industry of Nepal has many stakeholders. Even as some of the stakeholders have no direct relationship between them. Therefore, attention to these characteristics when planning development is

necessary. In addition, it is necessary to form a national health tourism council of health tourism, assign the main responsibilities, and delegate the necessary authority to stakeholders.

To recognize the strategic position of health tourism in Nepal (Table 11) can provide proper planning to get a share of health tourism high skilled manpower, high-quality health services, improved overall infrastructure and government support for promotion and policy-making are required. This study examined the Strength, Weakness, opportunities, and threats of the health tourism industry in Nepal. Nepal has a great potential for health tourism development with its uniqueness of service and location compare with other competitors country. Because of most of the countries health tourism base on the sea-based wellness and Nepal only country with mountain-based health tourism in the world.

Based on the SWOT analysis, some health tourism development strategies are possible to implement in order to attract foreign health tourist and develop the industry (Table 10). These strategies can be applied by policymakers or health tourism providers for betterment.

The results show that Marketing & Promotion, Infrastructure, Investment, Skilled human resources, poor quality standards, medical resources, policy & regulation and networking between stakeholders are the main barriers to the development of health tourism.

Further, it should design and implement long and short-term strategies in proportion to the problems raised. Policymakers can plan, make a policy and decision, and use effective strategies to develop health tourism by designing a health tourism stakeholders' network, a health tourism licensing and quality control body, and clarify the roles and responsibilities of stakeholders.

Limitation of the study

There are some limitations to this study; the most important are listed below:

- I. The complication of this research is mainly a health provider and the Governance side study (Supply Side and government side), therefore no experimental investigation was attempted or complied with the demand side.
- II. Lack of scientific Persian references in Nepal about health tourism issues.
- III. Lack of practical research that related to this topic in Nepal.

Reference

- Aydin, G., & Karamehmet, B. (2017). Factors affecting health tourism and international health-care facility choice. *International Journal of Pharmaceutical and Healthcare Marketing*, 11(1), 16–36. doi:10.1108/IJPHM-05-2015-0018
- Bookman, M. & Bookman, K. (2007). *Medical Tourism in Developing Countries*, Vol. 86, Palgrave Macmillan, New York, NY.
- Byrd ET, (2007) Stakeholders in sustainable tourism development and their roles: Applying stakeholder theory to sustainable tourism development, *Tourism Rev*, 62:6-13.
- Chang, H. & Huang, W. (2006). Application of a Quantification SWOT Analytical Method. *Mathematical and Computer Modeling*, 43, 158-169. <https://doi.org/10.1016/j.mcm.2005.08.016>
- Chermack, T.J. & Kasshanna, B.K. (2007). The use and misuse of SWOT analysis and implications for HRD professionals, *Human Resource Development*, 10-4, 383-399.
- Chomvilailuk, R., & Srisomyong, N. (2015). Three-dimensional perceptions of medical/health travelers and destination brand choices: Cases of Thailand. *Procedia-Social and Behavioral Sciences*, 175, 376–383. doi:10.1016/j.sbspro.2015.01.1213
- Cohen, E. (2012). Medical travel and the quality-of-life, in Uysal, M., Perdue, R.R., & Sirgy, M.J. (Eds.) *Handbook of Tourism and Quality-of-Life Research: Enhancing the Lives of Tourists and Residents of Host Communities* (pp. 169-191), Springer Science_Business Media.
- Das, G., & Mukherjee, S. (2016). A measure of medical tourism destination brand equity. *International Journal of Pharmaceutical and Healthcare Marketing*, 10(1), 104–128. doi:10.1108/IJPHM-04-2015-0015
- David, F.R. (2015). *Strategic Management Concept and Cases: A Competitive Advantage Approach*, New Jersey: Pearson Education. Inc.
- Ebrahim, A. H., & Ganguli, S. (2017). Strategic priorities for exploiting Bahrain's medical tourism potential. *Journal of Place Management and Development*, 10(1), 45–60. doi:10.1108/JPMD-03-2016-0011
- Eissler, L.A. and Casken, J. (2013). Seeking health care through international medical tourism, *Journal of Nursing Scholarship*, 45(2), 177-184.
- Freeman, R. E. (1984). *Strategic Management: A Stakeholder Approach*. Boston: Pitman.
- Freeman, R. E., & Gilbert, D. R. (1987). Managing stakeholder relationships. In Sethi, S. P. & Falbe, C. M. (Eds.) *Business and society: Dimensions of Conflict and Cooperation* (pp. 397-423), Lexington: Lexington Books.

- Freeman R, (2010). *Strategic Management: A Stakeholder Approach*, Cambridge University Press, America.
- Ganguli, S., & Ebrahim, A. H. (2017). A qualitative analysis of Singapore's medical tourism competitiveness. *Tourism Management Perspectives*, 21, 74–84. doi:10.1016/j.tmp.2016.12.002
- Grimble, R., & Wellard, K. (1997). Stakeholder methodologies in natural resources management: A review of principles, contexts, experiences, and opportunities. *Agricultural Systems*, 55, 173-193.
- Hall, C. M. (2013). *Medical Tourism: The Ethics, Regulation, and Marketing of Health Mobility*. Abingdon: Routledge.
- Heung, VCS, Kucukusta, D., & Song, H. (2011). Medical tourism development in Hong Kong: An assessment of the barriers. *Tourism Management*, 32(5), 995-1005.
- Katalin, F. (2009). *New Professionalism in The Making: The Case of Tourism Sector, The Case of The Tourism Corvinus*, Budapest.
- Khanal, B. P., & Shimizu, T. (2019). Potential of health tourism development in Nepal: Literature review and future view. *Journal On Tourism & Sustainability*, 2(2), 14-29.
- Marpaung, N., & Shimizu, T. (2018). Road-development strategies to support Self-Drive Tourism (SDT) in Bali based on SWOT analysis. *Journal On Tourism & Sustainability*, 2(1), 23-33.
- Merrell, R.C., Boucher, D., Carabello, L., Herrick, D.M., Lazzaro, V., Ludwick, L., Toral, R., Woodman, J., & Doarn, C.R. (2008). Medical tourism, *Telemedicine Journal and e-Health*, 14 (1), 14-20.
- Mousavi M.(2006). *Application Model in Geography with an Emphasis on Urban and Regional Planning*, Tehran: Published by Science and Religion, Persian.
- Nahman, A., & Godfrey, L. (2010). Economic Instruments for Solid Waste Management in South Africa: Opportunities and Constraints, *Resources. Conservation and Recycling*, 54, 521-531. <https://doi.org/10.1016/j.resconrec.2009.10.009>
- Pollard, K. (2013) The medical tourism numbers game, World Health and 3rd Age Tourism Congress, Izmir.
- Sengupta A., (2011). Medical tourism: reverse subsidy for the elite. *Signs*, 36, 312,9.
- Sautter, E. T., & Reisen, B. (1999). Managing stakeholders: A tourism planning approach. *Annals of Tourism Research*, 26(2), 312-328.
- Tomka D., & Romanov, R. (2011). Wellness programi za mlade kao model proširenja turističke ponude banje/lječilišta. Zbornik radova, Treći proljetnji susreti u

Klanjcu "Zdravstveni turizam: voda, zdravlje kultura", 8-10 travanj 2011, Klanjec, Hrvatska, pp. 104-108.

Ulaş, D., & Anadol, Y. (2016). A case study for medical tourism: Investigating a private hospital venture in Turkey. *Anatolia*, 27(3), 327–338. doi:10.1080/13032917.2016.1191763

Yuksel, F., Bramwell, B., & Yuksel, A. (1999). Interviews and tourism planning at Pamukkale, Turkey. *Tourism Management*, 20(3), 351-360.

Yuksel, F., Bramwell, B., & Yuksel, A. (1999). Interviews and tourism planning at Pamukkale, Turkey. *Tourism Management*, 20(3), 351-360.