

Rise of Medical tourism in Delhi: A case study of AIIMS hospital

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ABSTRACT: In India, despite improvement in access to health care, inequalities are related to socioeconomic status, geography and gender. There is a large gap in the health care system between urban and rural areas the inequity among regions is due to a lack of health care resources and infrastructure in the rural part of the country. Rising healthcare costs are forcing population to search for different ways to reduce expenses and still get the medical service, they need. In India, the disadvantaged urban population can't offer the private facilities in the cities due to less financial capital. During the last few decades, Delhi emerged as the perfect destinations of medical tourism in India. There are number of hospitals of international standards and world class medical services at a price, which is comparatively cheaper in Delhi, that's why due to lower price and better accessibility patients from other states and countries come to Delhi. AIIMS not only serve Delhi Population but also cater patients from other states and countries. This paper is an attempt to understand the trends and patterns of medical tourism in Delhi especially in context of AIIMS and also its impact on various service provider, so data has been collected both from primary sources such as medical tourists and service provider whereas secondary data has been collected from AIIMS annual report and Statistical Abstract of Delhi. In this study, considerable efforts have been made to analyze trend of medical tourism using various statistical and cartographic technique. Due to increase in the number of medical tourists in AIIMS, various service providers have flourished in this area and converted it into an important economic hub. This paper also focuses on suggestions and recommendations to improve the medical tourism in AIIMS, Delhi.

KEYWORDS: - Globalization, Health care industries, Medical tourism, COVID 19

I. BACKGROUND

The global growth in the flow of patients and health professionals as well as medical technology, capital funding and regulatory regimes across national borders has given rise to new patterns of consumption and production of healthcare services i.e. medical tourism over recent decades. India is at the forefront of the medical tourist industry. With its economic boom starting in the 1990s, India became a destination for outsourcing and not just for information technology (IT) but also medical treatment. Subsequently, medical tourism in India has become a business sector and not just a trend (Schulte, 2008). The treatments in India especially in Delhi are much cheaper than other countries. In Delhi most of the hospital provides world class medical services at very cheaper rate. Among other hospitals, AIIMS is also emerged as a medical tourism destination in Delhi. It's a multispecialty hospital and patients and their relatives from other states and countries came to AIIMS for treatment from high qualified doctors, high quality services at a very cheaper rate. Here, the objectives of the study is to understand emerging trends and patterns of medical tourism in AIIMS and to assess the local economy that developed due to the flourishing of medical tourism in AIIMS Delhi. To conduct this study, various data has been collected from both primary as well as secondary sources. As most of the secondary data were very confidential, so it was a challenging task to collect all the secondary data from authorities. In the case of primary data collection, many medical tourists and service provider were not interested in sharing their details, that's why very few patients and service provider were interviewed for the primary data collection in this study.

II. STUDY AREA

In Delhi, though the price of treatments is low than other cities but excellent health care is taken to see that the quality of medical care is maintained. AIIMS has been chosen to study the emerging trends and patterns of medical tourism. It was created in 1956, as an autonomous institution through an Act of Parliament to serve as a nucleus for nurturing excellence in all aspect of health care and to provide excellent health care treatment at a very cheaper rate to all people including urban poor and rural population. Twenty-five clinical departments including eight super specialty centers manage practically all types of disease conditions with support from pre - and Para-clinical departments. It is located in Ansari Nagar in Delhi. It is adjacent to the South Extension-II market and Yusuf Sarai market, and lies on the south-eastern quadrant of Aurobindo Marg and Inner Ring Road crossing and opposite of AIIMS is Safdarjung Hospital.

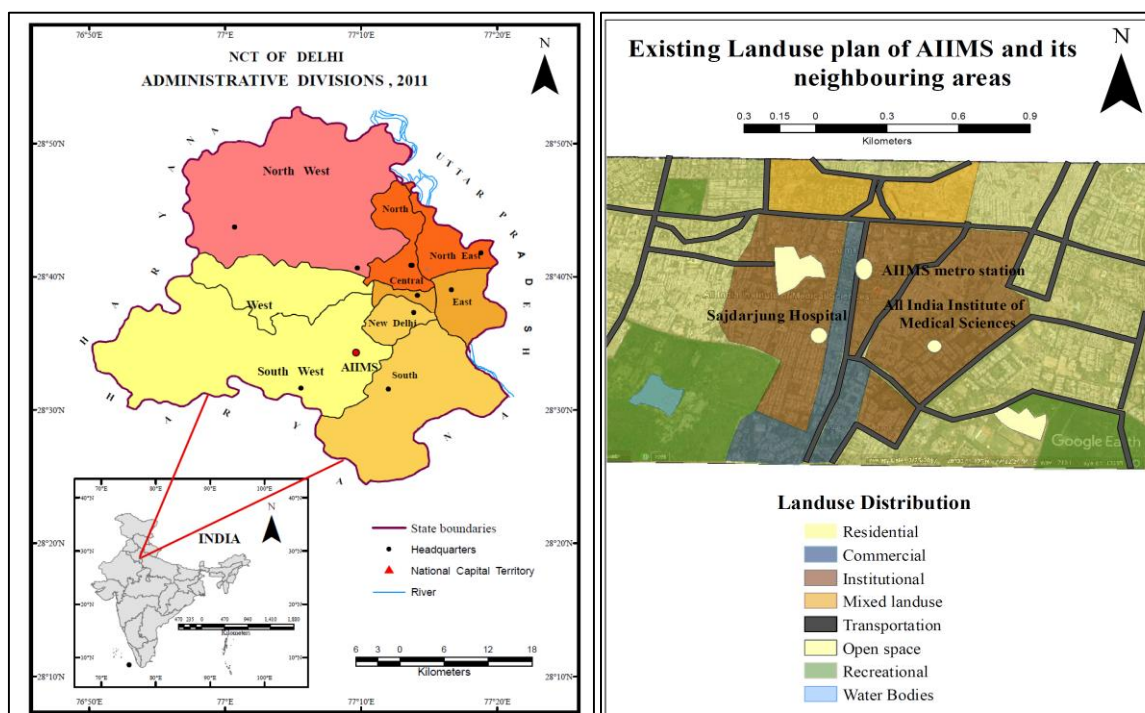


Fig.1. (a) Administrative Divisions of Delhi, 2011 with location of AIIMS, (b) Landuse distribution around AIIMS hospital

Source: - (a) Census of India 2011, (b) Map extracted from Google Earth

i) Methodology adopted to understand the emerging medical tourism in AIIMS, Delhi

The study has been divided into 4 stages: -

Stage 1: - It is a preliminary stage establishing aims, objectives and need of the study. It also involves studying literature and other facts and findings to support the study.

Stage 2: - This stage included data collection from various sources i.e. Primary sources and secondary sources.

Stage 3: - This stage include processing or analysis of data.

Stage 4: - This stage included SWOT analysis and suggestions and recommendations were framed and evaluated to further improve the present issue of the study.

ii) Trends and patterns of medical tourism in AIIMS, Delhi

(a). Region wise distribution of inpatients in A.I.I.M.S (2004 -14)

To understand the trends and patterns of medical tourism in AIIMS Delhi, region wise distribution of inpatients data were undertaken for study. For these, data has been collected from 2004 onwards. Fig 2 (a) and (b) shows the region wise distribution of inpatients from 2004 to 2014 i.e. ten years of time frame. It is inferred from the data that the total number of tourists coming in for medical treatment is still in its infancy and the total percentage of medical tourists is less as compared to the total medical tourists coming to the other hospitals in Delhi. Not only these, there is a sharp decrease in the number of Delhi patients from 2004 to 2014. The total number of medical tourists was 59% in 2004 which has been reduced by 45% in 2014. These decreasing trend is basically due to the increasing health care facilities and increases the number of multi specialists government hospitals like Safdarjung Hospital, Ram Manohar Lohia hospital etc., they provides better health care to the patients. Secondly, a larger chunk of population are central government employees who stays in Delhi, they have been benefitted by

CGHS Scheme and non-government employees usually prefer private hospitals like Saket City hospital, Max hospital etc. On the other hand, the total number of patients coming for treatment from other states such as Uttar Pradesh, Haryana, Bihar, Rajasthan and Punjab has been increased in AIIMS from 2004 to 2014. This may be due to the non - availability of better health care facilities and these states are distance wise closely linked with AIIMS.

Not only these, medical tourists from other countries have been increased in AIIMS from 2004 to 2014. The total number of international patients who came in AIIMS for treatment was just 415 in 2004 which has been increased by 734 in the year 2014. But the numbers of international medical tourists in AIIMS are very less than any other multispecialty hospitals.

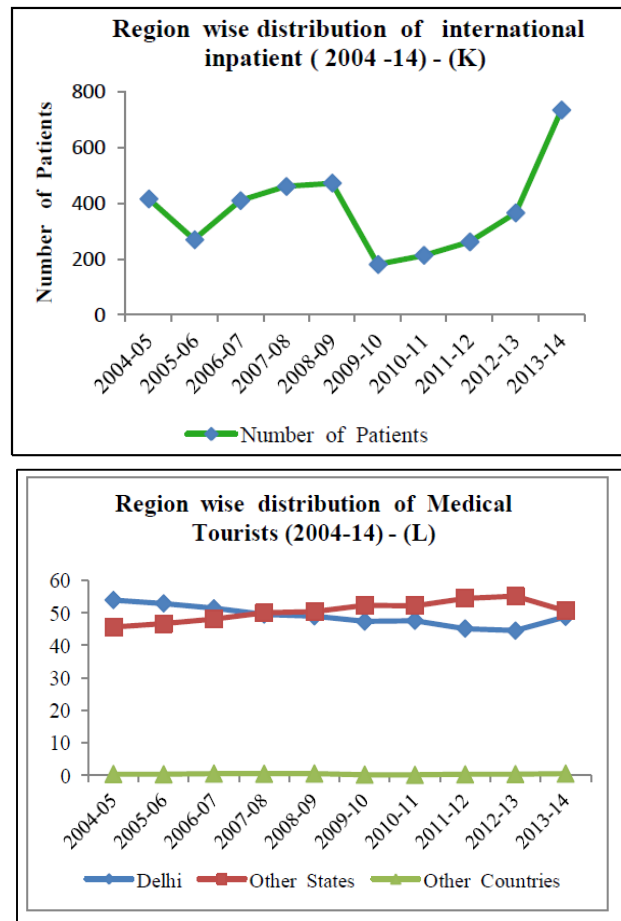


Fig 2 (a, b) Region wise distribution of medical tourists in AIIMS (2004 -14)
 Source: - AIIMS 49th to 57th Annual Report

(b). Geographical distribution of Cancer patients according to place of residence in India and from other countries (2007 – 13)

As AIIMS is a multispecialty government hospital so patients from other states and countries came to AIIMS for cancer treatment. Because cancer treatment in AIIMS is much cheaper than any other multispecialty hospital. Fig 3 (a,b,c,d and e) shows distribution of Cancer Patients according to place of residence (2007- 13) from Indian states and also from other countries.

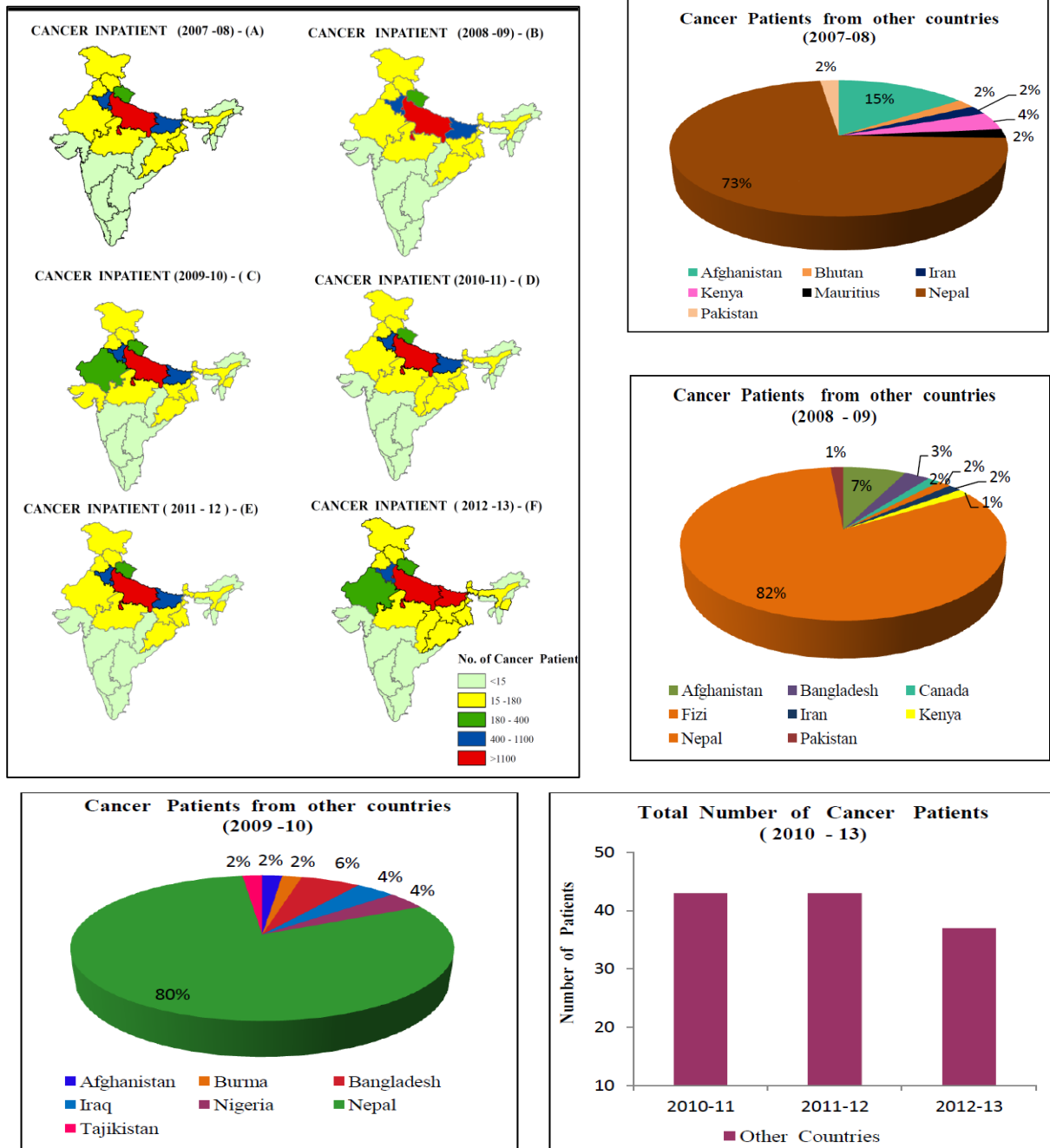


Fig 3 (a to e) Distribution of Cancer Patients according to place of residence (2007- 13)
 Source: - AIIMS 49th to 57th Annual Report

From 2007 to 2013, mostly patients came from Uttar Pradesh, Haryana and Bihar for cancer treatment. Geographically, these states are situated near Delhi, so it is very convenient for the patients from Uttar Pradesh, Haryana and Bihar to come to Delhi for cancer treatment. On the other hand, patients from North East and South India usually prefer South Indian hospitals. During the year 2007 to 2013, for cancer treatment patients also come from other countries such as Afghanistan, Bhutan, Iran, Kenya, Mauritius, Nepal, Pakistan, Bangladesh, Canada, Fiji, Iran etc. During these time, total number of cancer patients from other countries has rapidly increased in AIIMS due to availability of excellent health care services.

(c) Region wise distribution of inpatients in A.I.I.M.S (from 2014 onwards)

To understand the trends and patterns of medical tourism in AIIMS Delhi, region wise distribution of inpatients in AIIMS Delhi from 2014 onwards has also taken for study. Fig 4 (a, b,c) shows the geographical distribution of

new patients from 2014 to 2016. From other states of India, patients who came to AIIMS for treatment were mostly from Uttar Pradesh, Bihar and Punjab, Haryana and Utrakhhand. In the case of International patients, maximum number of Patients were from Nepal, followed by Nigeria etc. These may be due to the availability of excellent health care facilities at very cheaper rate and Delhi is well connected with other states and other countries.

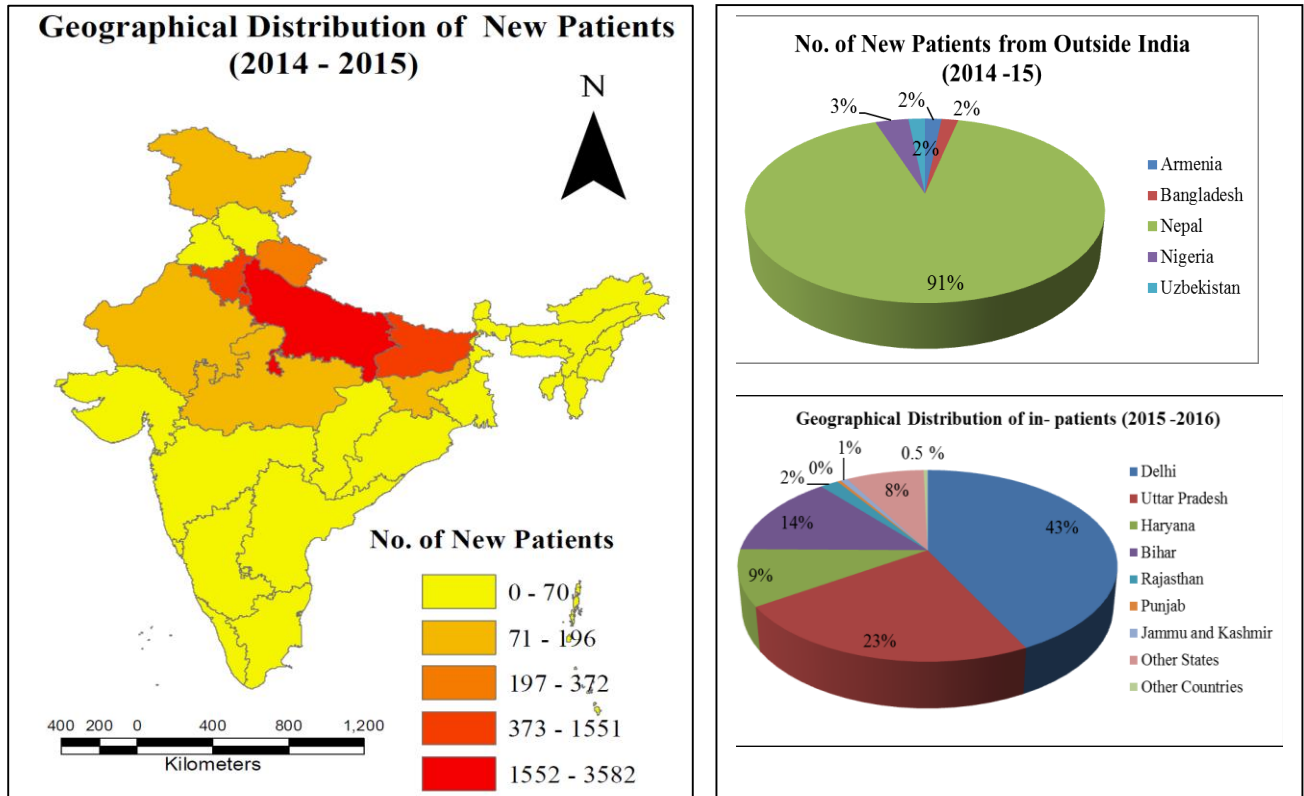


Fig 4 (a, b, c) Geographical distribution of new patients (2014 -16)

Source: - 59th and 60th AIIMS Annual Report

(d). Primary Data Analysis on medical tourists: -

For understanding the pattern and trend of medical tourism in Delhi, field survey has been conducted in and around AIIMS. For these, 45 respondents were interviewed. Questionnaire-based interaction was also held with the patients to know the factors that encourage them to seek healthcare in Delhi especially in AIIMS. An attempt was also made to understand the factors that determine the selection of a hospital.

Facilities for Medical Tourists at AIIMS:-

- Most of the medical tourists are satisfied with the services that provided by the hospital. Most of the medical tourists are comes under below poverty level. As AIIMS provides all the health care services at a very cheaper rate, therefore most of the people prefer AIIMS for treatment.
- Most of the medical tourists either stay in Dharamshalas by AIIMS or Night shelters or in their relative's home. More than 50% of the medical tourists are satisfied with the facilities and services provided by the AIIMS.
- AIIMS provide financial assistance from the Poor Fund, exemption of levy charges to poor and indigent patients, counselling, accommodation in the Dharamshala for outstation patients, adoption of orphans, coordination of these activities in different departments and centres. Every year nearly 2500 patients and their attendants who came from outside Delhi were helped in obtaining accommodation in different Dharamshalas in the vicinity of the hospital at cheaper rates.

- Patients living below poverty line are being assisted to avail of financial assistance for their treatment from Rashtriya Arogya Nidhi, PM National Relief Fund, Health Ministers Discretionary Grant, and other governmental and non-governmental agencies. Medicines were arranged for poor and needy patients from Hospital Poor Patient Fund.
- During the last few years, Government of India's Jan Aushadhi scheme provides generic medicines free of cost to patients. This is the addition to the 24x7 pharmacy which is situated within AIIMS campus which sells medicines and surgical consumables prescribed by AIIMS at 56% discount on the maximum retail price.
- Ambulance facility is available to transfer patients to other hospitals or meet any exigency/disaster situation. Free battery-operated vans (Parikrama Sewa) are available for transporting patients and attendants within the campus.

Issues faced by Medical Tourists at AIIMS:-

- Most of the medical tourists were not satisfied with the reception information system and behaviour of hospital staff.
- Some of the medical tourists were not satisfied with the food quality, room and toilet cleanliness in the hospital.
- As number of patients has been increased in AIIMS day by day, so very few medical tourists get place to stay in the vicinity of hospital especially in Dharamshala or Night shelter, most of them stay either near the gate of metro station or near the footpath of the hospital.
- Due to lack of number of beds inside hospital, it is very difficult for the hospital staff to take care of the patients more than one day. Patients are released on the same day of the operation.
- Due to the availability of one laboratory inside the hospital, patients have to wait for at least one week for a single blood test. Sometimes, patients have to book appointment at least before 15 days.

Assessment of a local economy that developed due to the flourishing of medical tourism in AIIMS Delhi

Due to increased medical tourism in AIIMS, various service providers have flourished in this area and converted it into an important economic hub during the last one or two decades. To assess the economy of local people, a field survey has been conducted in Ansari Nagar East and Yusuf Sarai market area. For these, 100 service providers were interviewed. From the study it is revealed that the economy of local people depends on the flow of medical tourists in AIIMS. There are number of service provider who provide almost all types of services, some of the services are as follows: -

(a). Impact of medical tourism on Dharamshala and Night shelter owners

Dharamshalas run by AIIMS: - Rajgarhia Vishram Sadan, Surekha Vishram Sadan, Shri Sai Vishram Sadan are the three AIIMS dharamshalas. To get admission in the above three dharamshalas, one has to take permission from doctors. Welfare unit plays an important role in providing services to the patients of AIIMS. In the year 2004, the three dharamshalas had 100 bed capacity each, which get doubles after 2010. In special cases, food was arranged through donors for the poor and needy inmates of the Vishram Sadans. A pick and drop facility from the Sadans to the hospital is also being run by the Institute for the benefit of the patients and their attendants.



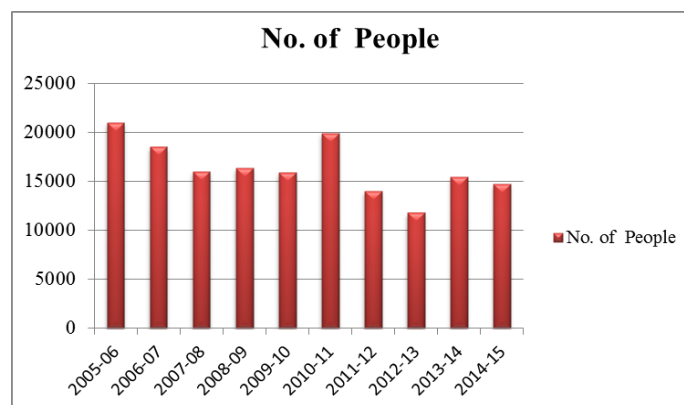


Fig 5 (a) Vishram Sadan Complex (b) Total number of patients stay in Three Vishram Sadans

Source: - (a) Google maps (b) 50 to 58th annual report.

Dharamshalas run by private service provider: -

- Shri Sanatan Dharam Dharamshala located in Shiv mandir, Yusuf Sarai. The distance between them is only 500 m. For dormitory, one has to pay Rs. 15 per night which included the availability of mattress, pillow, at and blanket and for food one only has to pay Rs. 10 for lunch and dinner.
- In Maitri Mandir Samiti, one has to pay Rs. 490 per night for four bedded rooms, Rs. 330 per night or double bedded rooms, Rs. 115 per night for per bed dormitory. One has to pay one has to pay Rs. 60 for veg meal and Rs. 70 for non- veg meal.
- In Rati lal Gami Seva Sadan, one can get independent rooms in Rs. 700 for 10 days, and Rs. 70 has to be paid for per extra bed. Even independent rooms with attached baths are available in Rs.1000 only for 10 days and Rs. 100 has to be paid for per extra bed. For dormitory one has to pay Rs. 180 for 6 days and Rs. 30 per day for two patients.

Nightshelter for AIIMS patients :-

- A Rain Basera facility for 270 people was set up in November 2012 near Sureka Vishram Sadan under the overall management of Delhi Urban Shelter Improvement Board. The facility provides shelter to poor and needy outstation patients and their attendants, who are undergoing treatment at AIIMS. A temporary Rain Basera facility for 100 persons was also set up by the Sashastra Seema Bal from 5 January 2015 to 20 March 2015. This facility provided shelter from the severe cold to poor and needy outstation patients and their attendants who were visiting AIIMS for medical treatment.
- AIIMS, in collaboration with the Central Reserve Police Force (CRPF), has set up a temporary 40-bed night shelter outside its dental center, to bring relief to patients and their relatives. This was done to provide night shelters to the patients and their relatives who camp outside the premiere institution in case they fail to get a bed.
- A night shelter also run by the NBCC. At the time of visit there was a continuous crowd to register and stay there. This being in proximity to AIIMS as well as Safdarjung Hospitals, two of the largest multi-specialty hospitals of the city.
- A night shelter also run by Perna NGO as free of cost, providing home to the patients/attendants visiting AIIMS/ Safdarjung hospitals from the nearby states.

(b). Impact of medical tourism on Medical shops and Chemists: Medical shops and chemists are the backbone of any hospitals. More than 50 medical shops are situated within the vicinity of AIIMS hospital and their income is completely depending on the number of medical tourists who came AIIMS for treatment. According to NDMC officials, the medical shops in Ansari Nagar has been rented out to a person yearly depends on the license fees they paid and medical shop or chemists owners tend to make around Rs 80,000 from sales daily and the shops located next to the AIIMS gate make 50% more. (times of India report, 2015).

(c). Impact of medical tourism on Optical Centre, Pathology lab and diagnostic Centre : There are few optical centres, pathology labs and diagnostic centres are situated within the proximity of AIIMS campus. Although AIIMS and Safdarjung are multispeciality hospitals and they have their own pathology lab and diagnostic centre. But they are the multispeciality hospitals therefore total number of patients are also very high and patients have to wait for days for their turn. Earlier, there were only 2 laboratory and diagnostic centre in these localities, but now due to the increasing number of medical tourists, many labs and centres has been emerged near AIIMS. Their income ranges between Rs. 20,000 to Rs. 40,000 daily basis depending on number of medical tourists who came AIIMS for treatment.

(d). Impact of medical tourism on travel agencies (medical tour operators) and auto drivers: Some of the auto driver plays a role of mediator between medical tourists and medical tour operator. They help the patients in finding accommodation and sometimes take them for the Delhi darshan or trip. Because their economy revolves around AIIMS campus, therefore, their income is much higher (which ranges between 6,000 to 8,000 Rs. Daily depending on number of patients who came in AIIMS) than other auto drivers in Delhi. After cure, patients wants to make some small trips, so these travel agencies provides every facility to the medical tourists.

(e). Impact of medical tourism on fruit vendors and food stalls: All types of fruits, fruit juices and fruit shakes are also available in all the fruit vendors shops. Their income depends on number of medical tourists came in AIIMS and Safdarjung for treatment and their daily income ranges between Rs. 500 to Rs. 5,000 depends on the size of shops and the number of patients. There are many food stalls are situated near AIIMS campus. Their economy mostly depends on the total number of medical tourists who came AIIMS for treatment. One can easily get all types of North Indian foods at a very cheaper rate.

(f). Impact of medical tourism on other vendors and shop owners: There are many shops are also located near AIIMS campus in Ansari Nagar east and Yusuf Sarai. Some of them are saloons, cloth shops, Xerox shops, shoes stalls etc. Multiple items are sold in one stall. Their income also depends on the number of medical tourists who came in AIIMS and Safdarjung hospitals for treatment. Their income ranges between Rs. 500 to Rs. 3,000 daily depends on the number of sales in a single day and the number of medical tourists who came in AIIMS and Safdarjung for treatment.

6. Conclusion

In India, despite improvement in access to health care, inequalities are related to socioeconomic status, geography and gender. Rising healthcare costs are forcing population to search for different ways to reduce expenses and still get the medical service, they need. During the last few decades, Delhi emerged as the perfect destinations of medical tourism in India AIIMS not only serve Delhi Population but also serve patients from other states and countries. The maximum number of patients comes in AIIMS for treatment from other states such as Uttar Pradesh, Haryana, Bihar, Rajasthan and Punjab. Even medical tourists from other countries such as Nepal, Bangladesh and Nigeria has been increased in AIIMS from 2004 to 2015. Due to increased medical tourism in AIIMS, various service providers have flourished in this area and converted it into an important economic hub. Although, AIIMS is a multispecialty hospital and provide better health care services at a very cheaper rate but there are some issues which need to be improved to increase the medical tourism in AIIMS Delhi.

a) Suggestions for the improvement of AIIMS hospital

- There is a need for building separate blocks for medical tourists and infrastructure development. More advertisement is required to attract medical tourists. There is a need for public private partnership in the healthcare sector.
- Government should take initiatives for cheaper transport and accommodation, formulation of legal guidelines and special training for service provider. Everyone should get treatment on all diseases. Security should be improved because street dogs are always roaming inside the hospital.
- Efforts to make better medical records and database available for the common people. Improve security for medical tourists is needed. There should be good coordination between patients and doctors and good coordination is also needed among the different stakeholders.

- Arrange easy availability of doctors by means of tele-medicine, video-conferencing and sharing of personal contact phone numbers of the doctors for round-the-clock availability in the event of a post-operative complication (For instance, the tele-medicine at Fortis hospital which links 54 countries to assist the medical tourists).
- Only online appointment is available at AIIMS hospital, but there is no such facilities of tele – medicine, video- conferencing etc. There should be marketing strategies, seminars and talks to educate the patients especially during the COVID times.
- Time has come to go for decentralized approach in the Pandemic era. Door to door services need to be provided.
- Standard operating procedure should be developed. Although, AIIMS is known for its world class health facilities, but some standard procedure needs to be developed. Holistic medical facilities such as yoga, meditation, naturopathy, herbal medicine, acupuncture and homeopathy etc. should be provided in AIIMS.

REFERENCES

1. Anvekar S (2012), “Medical Tourism in India: A Strategic Approach Towards Effective Branding for Health Care Services Marketing”, American Journal of Management vol. 12(2/3)
2. Dawn S, Pal S (2011), “Medical tourism in India: Issues, Opportunities and Designing Strategies for growth and development”, International Journal of Multidisciplinary Research, Volume 1, Issue 3 , ISSN 2231 5780.
3. Froelich N, Steene A (2012), “Medical Tourism: A study about motivational factors and the prerequisites for creating a competitive offer – with a Swedish perspective”, Sodertorn University, Dissertation report.
4. George B (2007), “Medical Tourism: An Analysis with special Reference to India”, Journal of Hospitality Application and Research (JOHAR), Volume 2, Issue 1.
5. Gupta P, Pandey B, Hussain S (2015), “Challenges and Strengths of Medical Tourism in Delhi NCR”, DU Journal of Undergraduate Research and Innovation, Volume 1 Issue 2, Page 230-251
6. Lai P, Mak. A (2007), “GIS for health and environment: Development in the Asia Pacific Region”, Springer Publication, ISSN 1863-2246
7. Luthra K, Bhatia Rohit (2004 -15) “49 to 58th Annual Report, All India Institute of Medical Science”, Jay Dee Service Inc.
8. Mal J (2010), “Globalisation of Healthcare: Case studies of Medical Tourism in Multi-Specialty Hospitals in India”, Manchester Business School, Dissertation report.
9. Nagarajan G (2004), “Medical tourism in India: strategy for its Development”, Crisil Young thought Leader Series, Dissertation report.
10. Reddy S (2013), “Medical tourism in India: an exploratory study”, Dissertation report.
11. Sharma A (2013), “Medical tourism: emerging challenges and future prospects”, International Journal of Business and Management Invention, Volume 2, Page No.21-29, ISSN - 2319 – 8028
12. Shukla. A, Dr. Mehrotra M (2016) “Role of Organized and Unorganized Health Care in India”, Volume 4, Issue 04, Pages -5183-5188, ISSN(e):2321-7545.