Local Resident Influence on Medical Tourism Experience in Klang Valley

Abstract: Medical Tourism has sparked the curiosity of international tourists from all over the world and become a common trend among people ready to traverse international borders. It has increased the competition between countries in the medical industry. The main purpose of this research is to find the relationship and to study the variable E-WOM, destination trust, service quality that will give local resident influence on medical tourism Klang Valley. In this research, the survey will be conducted and questionnaire will be distributed to 416 medical tourist and local tourist respondent located around Klang Valley and Kuala Lumpur. The researcher used method to analyse the data using SPSS version 26 to generate the result of the data collection. Descriptive analysis will be used to explain the fundamental features of the data collection and we had used Reliability Analysis to test the research model. The result show that all the variables (electronic word of mouth, destination trust, and service quality) has the positive relationship with local resident perception regarding their intention to visit for medical tourism. This study has provide the government, medical institution and future researcher to gain understanding on the local resident perception regarding their intention to visit for medical tourism.

Key words: Electronic -Word Of Mouth, destination trust, service quality, medical tourism experience.

Introduction

Medical tourism has sparked the curiosity of international tourists from all over the world. Medical treatment travel has become a common trend among people ready to traverse international borders. Many countries have recently acknowledged medical tourism as a viable national industry, and Malaysia has long been renowned as a popular destination for medical tourists. Malaysia has recently received a lot of attention due to increased medical tourists from all over the world, including Australia, India, and Indonesia. Puteh, Zianuddin, and Azmi (2018). The medical tourism market is rapidly expanding, and there is severe competition among industry participants globally, notably in the United States. Malaysia's top aim is to attract and retain medical tourists in a highly competitive sector. Bernama (2017).
As a result, regularly inspiring medical tourists to return to Malaysia for medical treatments is crucial. As a result, this research aims to uncover the underlying elements that impact medical tourists' happiness and, as a result, their desire to return to Malaysia for medical services in the future. Malaysia is one of the world's most popular medical tourism locations (Chia & Liao, 2021). Since its start, medical tourism has shown to be a booming speciality tourist industry with a promising development trajectory. Medical tourism has contributed significantly to the economies of several states, including Penang, where each medical tourist paid an average of RM4,247.00 per trip (Penang Institute, 2016). The majority of medical tourists are from neighbouring countries, particularly Indonesia. (Wong Dai Di, Siti Suriawati Isa, Sheena Bidin, Roslan Kasim, 2022).

Malaysia provides a wide range of medical services, from routine screening to cutting-edge therapies such as cardiothoracic surgery, orthopaedics, cosmetic surgery, cancer therapy, rehabilitative medicine, IVF, dental care, and pain management (Klijs, Ormond, Mainil, Peerlings, and Heijman, 2016; Thomas, 2019). Policymakers and practitioners must first comprehend the country and its socioeconomic components to improve Malaysia's industrial competitiveness (Zarei et al., 2018; Zolfagharian et al., 2018; Zolfagharian, Rajamma, Naderi, & Torkzadeh, 2018). Although the relevance of national characteristics in tourism research is generally recognised, it is unknown to what degree these variables impact Chinese medical tourists visiting Malaysia. Furthermore, while research on social media communication in medical tourism is still in its early phases (John, Larke, and Kilgour, 2018), social media has been highlighted as an essential mode of communication among travellers (Stojanovic, Andreu, and Curras-Perez, 2018; Usui, Wei, and Funck, 2018; Usui, Wei, and Funck, 2018). Malaysia also has benefited significantly from these programmes, attracting many Chinese medical tourists (The Star, 2018). Malaysia has recently become a popular destination for Chinese medical tourists due to low costs, accessible transit options, and simple visa application processes. (Nielsen, 2017). According to analysts, establishing a favourable medical tourism destination image and understanding the aspects of patient experience for medical tourism in Klang Valley that impact it would be advantageous strategic options for Malaysia to compete in the China market One of the major problems facing Malaysia's health care system is that our neighboring countries, such as Singapore, provide outstanding medical and health care facilities at an affordable rate, Lew, Loh, Te, Tan & Woo (2018). Patients had been encouraged by the low-quality services and high medical treatment costs to seek high quality, cheaper treatment in overseas. Singapore is hosting one of the most sophisticated, high-end health care architectures, Lew, Loh, Te, Tan & Woo.

Lastly, from this research the objective of this research is to study the relationship of Electronic Word-of-Mouth existed in Malaysia for local resident influence on medical tourism experience in Klang Valley, to study the relationship of destination trust with local resident influence on medical tourism experience in Klang Valley and to study the relationship of service quality provided by the hospital from local resident influence on medical tourism experience in Klang Valley

Literature Review

Some experts believe that "health tourism," which refers to traveling outside of an individual's local health care jurisdiction for the purpose of enhancing or restoring an individual's health via wellness activities and medical treatments, was the precursor of "medical tourism." (Suess, Baloglu & Busser, 2018). In Malaysia context, modern healthcare facilities, qualified doctors and affordable prices are the highlighted attributes of the Malaysia medical tourism (Heung, Kucukusta & Song, 2011). within the study of Leng (2007), Malaysia’s government is playing a significant role in promoting medical tourism by providing tax incentive for those medical providers. Therefore, the value of medical procedures in Malaysia is more competitive compare to their competitors thanks to lower taxes and therefore the competitive advantage is constructed on the idea of state involvement and subsidies.
Table 2.1: Definition of Medical Tourism

<table>
<thead>
<tr>
<th>Authors</th>
<th>Definitions</th>
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<tbody>
<tr>
<td>Heung, Kucukusta &amp; Song (2010, p.237)</td>
<td>An economic activity that supported integrated services provide by two sectors, which is medical and tourism.</td>
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<tr>
<td>Johnson, Crooks, Synder &amp; Kingsbury (2010, p.1)</td>
<td>Medical tourism involves patients intentionally leaving their home country to go to non-emergency health care services abroad.</td>
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<tr>
<td>Yu &amp; Ko (2012, p.81)</td>
<td>Medical tourism involves not only going across the broader to receive medical procedures, but also the hunt for destinations that have the foremost technical proficiency, and which give it at the foremost competitive prices.</td>
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<tr>
<td>Wongkit &amp; Mckercher (2013, p.5)</td>
<td>The travel of individuals to a particular destination to hunt medical help that forms the first purpose of their trip.</td>
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Adapted from: Lew, Loh, Te, Tan, and Woo (2018)

2.1 E-WOM

WOM (word of mouth) creates a main contribution to influence for the purpose of medical tourism. Medical tourism experience during this study refers to the willingness of local residents to come to foreign country for his or her healthcare service. If the country can create a robust, even emotional reference to patients, then it can influence by WOM, Berry and Parasuraman (2004). There are a lot of definitions of WOM as highlighted by Goyette (2010) most scholars considered WOM as a casual and a non-commercial exchange of post-decision information, Martin (2017). Technically, Salmi, Lim, and Phaik (2019) observed that word-of-mouth (WOM) had a considerable impact on residents’ attitudes and behaviours, which Hinz (2012), Allsop (2007), and Soares (2007) confirmed (2007). (2012). (2012). According to Abubakar (2017), Cham (2016), and Yeoh (2016), there is a positive association between WOM and the desire to visit a nation (2013). According to Martin (2017), Schindler and Bickart (2012), and Trusov, Bucklin, and Pauwels (2013), word-of-mouth advertising (WOM) is seven times more effective than magazine and newspaper advertising, four times more effective than personal selling, and twice as effective as radio advertising in influencing residents’ decisions (2017). (2009). WOM has been proven to improve travellers’ trust in a location by onzalez Rodriguez, Martinez-Torres, and Toral (2016), Jalilvand and Samiei (2012), and Jalilvand and Heidari (2013). (2017). According to Zarrad and Dehabi (2015), tourists’ future travel plans are likewise positively associated with E-WOM. According to Miao, there is a moderately positive association between E-WOM and visitor travel intentions (2015). Another study, conducted on 678 international visitors, found that face-to-face and electronic word-of-mouth communication substantially influenced tourists’ views of destination trust. Various tea varieties, including black, green, oolong, and white tea, and flavours, including the original, fruit, chocolate, and coffee, may also be used to segment the bubble tea market (Fortune Business Insights 2020). Electronic Word-of-Mouth (eWOM) has become increasingly influential in shaping consumer behavior in various industries, including medical tourism. eWOM refers to the sharing of opinions, experiences, and
recommendations about a product or service through digital platforms such as social media, online review websites, and discussion forums. A study conducted by Kim and Kim (2019) investigated the impact of eWOM on medical tourism. The authors collected data from 356 medical tourists who had visited South Korea for medical treatment. The results showed that eWOM significantly influenced the tourists’ decision-making process, with online reviews and social media being the most frequently used sources of information. The study also found that the content of eWOM was an essential factor in influencing the tourists’ decisions. Positive reviews and recommendations increased the likelihood of tourists choosing a particular hospital or clinic for their medical treatment, while negative reviews had the opposite effect. The authors concluded that hospitals and clinics should pay close attention to their online reputation and actively manage their eWOM to attract more medical tourists. Another research by Zarrad and Debabi (2015), revealed that E-WOM is positively associated with visitors’ future travel intentions towards visiting Tunisia (Zarrad & Debabi, 2015). Miao (2015) claimed that there is a medium positive relationship between E-WOM and attitude towards visitors’ intention to travel and specifically visit Thailand (Miao, 2015). As another example, Jalilvand and Heidari (2017) in their study on 678 international visitors found that both face-to-face and electronic word-of-mouth communication were found to own a considerable influence on visitors’ perception on the destination trust of Iran. The high level of trust within the visitor enhances the importance of E-WOM with relation to the intention to visit. There are many studies within the literature that show that E-WOM is a vital determinant within the selection of countries. As an example, Zhu & Lai (2009)’s factual study which compares the reception population data in Zhejiang Province and also the E-WOM information in two Chinese websites also provides the close relationship between E-WOM and decision behaviors of visitors. They had determined a correlation between the amount of online reviews and visitor population with their findings. Del Bosque et al. (2018)’s study which shows that word of mouth communication is additionally influential on visitors’ intention to visit and experience the countries for medical tourism are the studies among those on the topic. It is been seen that such studies within the literature are mostly associated with the causes and consequences of obtaining information through E-WOM. However, visitors even have the behavior of sharing information through E-WOM. Bulut & Karabulut (2018) defines visitor’s E-WOM behavior in two ways: information search and knowledge sharing. In online booking, acquiring information through E-WOM reveals the visitor's confidence level, and also the behavior of sharing information with the E-WOM includes a positive effect on the intention behavior by increasing the trust level of the visitor. In step with Aydin (2014), who deals with the E-WOM behavior of visitors in two ways: looking for information and sharing information, the foremost powerful motivation that drives the visitors to research information through E-WOM is “knowledge acquisition/social orientation”, and also the components of this factor are as follows: seeing different evaluations, taking advantage of the experience of others, comparing them with their own experiences, to fulfil others with the identical problems, helping them making the proper decision for the intention to visit. The foremost powerful motivation moving visitors to share information through E-WOM is “self-improvement” and also the components of this factor are helping others, expressing satisfaction, expressing successful experiences, warning others, protecting others and sharing successful experiences. The visitor experiences are physical and multi-sensual and responses to surrounding stimuli transformed into stories, experiences and memories (Sarıbaş et al. 2017). The influence of E-WOM on medical tourism is simply getting down to be analyzed. Abubakar and Ilkan (2015) conclude that E-WOM can reduce risk and uncertainty, thereby becoming a crucial root of the image a medical visitor may have of a country and, consequently, their intention to travel. Abubakar (2016) also found that E-WOM encompasses a significant, positive impact on medical visitors’ travel intentions which positive online reviews may increase visitors’ likelihood of traveling to certain destinations. Although there's little research on the influence of E-WOM within the context of medical tourism, this paper asserts that E-WOM, kind of like other information sources, has an influence on trust formation and intention.
2.2 DESTINATION TRUST

Tourism destination marketers must guarantee that the promised service is delivered during advertising and marketing since the nature of tourism goods manufacturing and consumption occurs in tandem. Trust in a place is built by the integrity and openness of its service offerings, and tourists develop a positive attitude toward these destinations as a result. Trust, according to Kim and Oh (2002), is a necessary condition for returning to a site more than once. The nuances of this argument with relation to revisit intention, however, remain underdeveloped despite the fact that research throughout the tourism industry recognizes that destination image and trust function via WOM and eWOM to form travel intention (Abubakar & Ilkan, 2016). Visitor’s trust has been known in many fields and has been recognized as a mediating variable in many disciplines like psychological science (Peter, 1964), management (Cropanzano & Mitchell, 2005) and marketing (Morgan & Hunt, 1994). As for the sphere of services, literatures show that there is evidence for the mediating role of trust within the satisfaction and loyalty link (Sirdeshmukh, Singh & Sabol, 2002). Trust by definition is viewed as “a willingness to depend on an exchange partner in whom one has confidence” (Moorman, Deshpande & Zaltman, 1993). Trust will help people to create a call because trust will embody the sentiments of security regarding an object of trust, which will encourage them to maneuvers forward without feeling fear or uncertainties in a very certain situation (Holmes, 1991, Luhmann, Davis, Raffan & Rooney, 1979). According to Abubakar and Ilkan (2016), destination trust refers to a visitor’s willingness to depend on the power of a medical tourism destination to perform its advertised functions. The authors added that destination trust has three dimensions, namely reputation (ability to supply consistent and improved medical service), credibility (the willingness to deliver promised medical service and attend to patients just in case of adverse effect) and competence (ability to satisfy and satisfy visitors), signaling that destination trust can have a major influence on visitors’ travel intention. Recommendations coming from the members of the family, friends and acquaintances can function important factors to create a positive attitude towards the destination image (Bigne, Sanchez & Sanchez, 2001). The results showed that destination trust had a positive and significant impact on the residents' intention to participate in medical tourism activities. The study also found that the trustworthiness of the medical tourism destination was influenced by various factors, including the reputation of the medical facilities, the quality of medical services, the safety and security of the destination, and the environmental quality. The results showed that destination trust had a positive and significant impact on the residents' intention to participate in medical tourism activities. It had been claimed that the destination trust is related to a subjective interpretation of visitors' feelings and beliefs toward a specific country (Baloglu & McCleary, 1999 and Bigne, Sanchez & Sanchez, 2001). The past studies reported that destination trust is made from a fancy process during which visitors develop an inability supported their perceptions, ideas, beliefs, impressions, identities or feelings for a country (Kotler, Bowen & Makens, 2010). The destination trust is a very important concept for medical tourism research for 2 main reasons. Firstly, the destination trust is undoubtedly one amongst the foremost imperative factors for the visitors to make their mind on intention to visit (Byon & Zhang, 2010 and Chen & Tsai, 2007). Secondly, destination trust has been found to possess an impression on visitors’ level of satisfaction supported their country experience, Chon (1990), Lopes (2011) and Mayo (1975). Even though Jadhav (2014) said that tourists who combine medical operations with a sunny holiday are pretty rare, Langviniene (2014) recommended that health programs be supplemented with entertainment and leisure tourism offerings to improve destination trust. It will also assist in ensuring the long-term viability of the medical tourism service industry. According to Balakrishnan, Nekhili, and Lewis (2011), the medical visitor's judgment of a country's attractiveness, especially hospital facilities, might impact the destination's faith in the country. It is therefore expected that, if a medical visitor believes that they will be able to meet their demand or require the medical facilities provided by the medical service provider, this will result in a positive or good destination trust, and that they will choose the provider as their medical tourism destination in the future. Chomvilailuk and Srisomyong are two of the most talented
Many disciplines, such as psychological science (Peter 1964), management (Croppanzano and Mitchell 2005), and marketing (Morgan and Hunt 1998), have recognized visitor confidence as a mediating factor in their respective fields (1994). Concerning services, research has shown evidence of the mediating function of trust in the context of customer happiness and loyalty, according to the literature. Sirdeshmukh, Singh, and Sabol are three of the most prominent Indian actors (2002). "Willingness to depend on a trusted exchange partner," according to Moorman, Deshpande, and Zaltman, is what trust is defined as in this context (1993). People will be able to decide because they have faith in the object of their confidence, and this faith will instill feelings of security in the thing of their trust, allowing them to proceed without fear or doubt in a particular circumstance. Luhmann, Davis, Raffan, and Rooney (1991) and Holmes (1991). (1979). As a consequence, both parties will speak and engage in order to convey their requirements, care, and the advantages of others, which has the ability to enhance the relationship. Rempel, Holmes, and Zanna are three fashion industry women who have built a name for themselves (1985). It is hypothesized by Morgan and Hunt (1994) that a person's perception of trust toward a country is positively associated with their level of commitment and intention to visit that country. Furthermore, it is a critical component of mediating constructions for effective relationship exchanges. Furthermore, when a service provider in a nation discovers a successful method of gaining a tourist's confidence, they may be able to make a strong forecast about the visitor's long-term intentions and, as a result, commit themselves to maintain an ongoing connection with the visitor. Visitors often depend upon some trusts in forming their perceptions, ideas, beliefs, impressions, or feelings for a selected country. Trust can create awareness among the visitors a few countries, and this features a direct effect on the visitors’ decision-making for a country choice, Cheng and Lu (2013), Deeparechigi, Ridzuan and Cham (2018) and Khan (2016a). A review of the literature on medical tourism shows that the trust of a rustic comprises of several attributes. These attributes include tourism attractions, general infrastructures, hospitals’ reputation, hospitals’ service quality, medical amenities, social environment, transportation services, accommodation, supportive services, food, personal safety and communication were those common elements that constitute the medical tourism destination trust, Jotikasthira (2010), Khan (2016a), Khan, Chelliah and Haron (2016b), Lam, Du Cros and Vong (2011) and Viladrich and Baron-Faust (2014). Mentioned again by other researchers, one of the foremost important predictors influencing visitors’ behavior is that the destination trust, Beerli and Martin (2004), which points to individuals’ overall perceptions about countries, Chen & Tsai (2007) and their prominent features, shaped via information from distinct sources, Han, Hsu and Lee (2009) and Tasci and Gartner (2007). According by Ahn, Lee, and Shafer (2019) examined the influence of destination trust on the behavioral intentions of medical tourists. The authors collected data from 218 medical tourists who had visited South Korea for medical treatment. The results showed that destination trust had a significant positive effect on the behavioral intentions of medical tourists. The study also found that destination trust was influenced by various factors, including the perceived quality of medical services, the reputation of the destination, the cleanliness and safety of the environment, and the hospitality of the local residents. The authors concluded that medical tourism destinations should focus on building and maintaining the trustworthiness of their destination by enhancing the quality of their medical services and promoting positive experiences for medical tourists. Many destination trust studies revealed that destination trust plays a considerable role in travel decision-making process, intention to revisit and willingness to recommend the country to others, Beerli and Martin (2004) and Chen and Tsai (2007). The correlational statistics between the destination trust and visit intention has been proven frequently. For example, Court and Lupton (1997) demonstrated that the potential visitors’ perceptions of a destination trust played a major role in country choice process. Lin et al. (2007) indicated that such positive image of a specific destination reinforces visitors’ trust for that country. Similarly, Sharma and Nayak (2018) found that a positive overall image that lead to trust incorporates a significant impact on the intention of visitors to visit and recommend the visited country to others. Although Jadhav et al., (2014) stated that visitors...
combining medical procedures with a sunny retreat are uncommon truly, Langvinienė (2014) however suggested to take in entertainment and leisure tourism services on top of health programs to make better destination trust. It will help too to make sure the sustainable growth of medical tourism service sector. Balakrishnan, Nekhili, and Lewis (2011) suggests that the medical visitor’s interpretation about the country’s attractiveness, particularly for hospital facilities, can have an impression on the destination trust. Therefore, if the medical visitor perceived that they will receive their demand or need for the medical facilities provided by the medical service provider, it is expected that it might create a positive or good destination trust and that they would choose that provider to be their medical tourism country within the future (Chomvilailuk & Srisomyong, 2015).

2.3 Service Quality

Service quality in the context of medical tourism refers to the degree to which medical tourism services meet or exceed the expectations of medical tourists. It encompasses various aspects of the medical tourism experience, such as the professionalism and expertise of medical staff, the quality of medical facilities, the availability of medical equipment, the level of patient care, the cleanliness and safety of the environment, and the level of customer service. Service quality is a critical factor in attracting and retaining medical tourists, as it directly influences their satisfaction and willingness to recommend the destination to others. Therefore, medical tourism destinations need to focus on enhancing service quality to ensure that medical tourists receive high-quality care and have a positive experience during their stay. Tourist service consumers are frequently split into two groups. Huang and Hsu (2009) distinguish between new and returning clients. Most first-time buyers base their selections on the knowledge they have gained from various sources, anticipating that they would receive the ideal experience from a tourist service provider. The study’s findings indicate that customer happiness is critical since happy consumers are more likely to make repeat purchases and are less vulnerable to competing products than unhappy customers (Zeithaml & Berry, 1996). According to Andaleeb (1988), patient satisfaction improves a medical facility's reputation, which leads to an increase in the number of individuals using the services and an increase in market share. A medical care provider is more likely to perform well over the long run when satisfied patients have intents to behave positively (Naidu, 2009). When customer contentment and repurchase intent rise, customers are happy with their overall shopping experiences (Chiu, Hsu, Lai, and Chang, 2012; Jani and Chang, 2012). Patients are more likely to indicate interest in returning if they are satisfied with the services provided. The following hypothesis was developed to further explore the relationship between patient satisfaction and a willingness to engage in medical tourism. Hospital accessibility is crucial in influencing the general standard of care offered there. Medical service providers need to understand how important each component of medical care is and how to deliver it in a way that will satisfy the client. Patient satisfaction and service perceptions are essential aspects to consider when assessing the chance that patients will return to hospitals in the future. SEM served as a connection between the building of high-quality services and the building of patient loyalty at medical institutions. This information is helpful to health care managers because it allows them to quantify the expectations medical tourists have of service quality in connection to the success of medical tourism initiatives. In particular, when a hospital provides professional care, it must consider reasonable medical costs that the average person can afford and the need to upgrade its required medical equipment for technical and diagnostic purposes. Al-Refaie (2013), Hwang and Sim (2016), and Lee and Kim (2017) state that Das and Mukherjee (2016) look into the effects of hospital service quality on patients' satisfaction and intent to return, while Das and Mukherjee (2016) look into quality in the areas of ambience, food, and lodging, people, infrastructure, facilities, safety, and security. The standard of care may also be assessed in this study since patients may evaluate the medical treatments they get based on their personal experiences. Accessibility to hospitals is a key factor for assessing the quality of care in hospitals. Service providers must be aware that all aspects of medical services are essential and must be delivered in a satisfactory manner in order to ensure customer satisfaction. Perceived services and satisfaction of patients is a key...
bridge in determining the likelihood of future return of patients to hospitals. SEM formed a link between the building for quality services and the building for medical loyalty. To the health care manager, this helps to calculate the expectations that medical tourists have of service quality in relation to the success of medical tourism. In particular, when a hospital offers professional care, it needs to take into account fair medical costs that the average individuals can afford and upgraded their required medical equipment for technological and diagnostic uses. Al-Refaie (2013), Hwang and Sim (2016) and Lee and Kim (2017) study the impact of hospital service quality on patients' satisfaction and intention to revisit, while Das and Mukherjee (2016) study quality in the areas of ambience, food and accommodation, people, infrastructure, facilities and safety. As consumers' review of the performance of their operation (Zeithaml, 1988), operation efficiency can be explained. The dimensions of standard of service (SERVQUAL), including measurable, trustworthy, sensitive, positive and empathic, are generously embraced. Impacts on the significant output outcome can be evaluated and comprehend in five dimensions such as customer satisfaction (Meesala, Paul, 2016). The tangibility of the dimension of service quality, which is related to the physical environment, as well as to the appearance of employees (James, Calderon, Cook, 2017). Empathy ensures that medical institutions give their patients a compassionate and personalized viewpoint (Meesala, Paul, 2018). Reliability is the ability to complete the expected service in a consistent manner and, if workers are able to demonstrate their integrity with respect to the service offered to patients, it would display a high degree of satisfaction. Responsiveness is the ability to assist and provide customers with productive resources, such as enhanced processing information, Rad, Som and Zainuddin (2010). In addition, the employee's experience, courtesy and assurance is ability to affect faith and confidence when there is a high degree of trust insurance, which ensures that patients are likely to experience a high degree of satisfaction (Rad, Som and Zainuddin, 2010). In a study conducted by Ariffin and Aziz (2008) on quality of service Hospital facilities in Malaysia, patients have been found to be more tolerant tangible factors relative to reliability factors. Hospital's willingness to offer outstanding standard of service quality to its members. Customer has a good positive relationship to maintain customer loyalty (Meesala and Paul, 2018). Cheung and To (2010) further reported that they were high the quality of frontline personnel is key to the excellence of organizations. As the service rendered by these employees represents the image of the organizations and changes consumer expectations of service quality. These studies were seconded as private hospital by Ahmed and Abd Manah and Islam (2017). Aliman & Mohamad (2016) were tangible, reliable and assurance. Significantly influenced satisfaction, particularly when insurance is affected. Satisfaction and behavioral intentions of patients. Satisfaction as have a strong positive effect on intention-behavior, both in terms of service quality dimensions and satisfaction of patients were positively linked to behavioral purpose. Medical tourism consists of travel for the purpose of accessing medical, dental, or surgical services and represents an increasingly growing niche sector in the healthcare, tourism and hospitality industries, Jisana (2014). Perovic (2017) found out that both tangible and intangible elements enhance tourist satisfaction, which affects tourist arrivals and repeat destinations. According to a study by Liang and Huang (2019), service quality in medical tourism is defined as the degree to which medical services meet or exceed the expectations of medical tourists and are delivered in a professional, efficient, and caring manner. The authors identified five dimensions of service quality that are important to medical tourists, Reliability: The ability of medical facilities and personnel to deliver medical services reliably and accurately, including the quality and accuracy of medical diagnoses and treatments, as well as the consistency of service delivery. Responsiveness: The willingness and readiness of medical staff to respond to medical tourists' needs and requests promptly and effectively, including the ability to address concerns and answer questions in a timely manner. Assurance: The competence, professionalism, and trustworthiness of medical personnel, as well as the level of confidence and trust that medical tourists have in the medical facility and its services.
Empathy: The degree to which medical staff demonstrate understanding, care, and compassion for medical tourists' needs and concerns, and provide emotional support and comfort during the medical tourism experience. Tangibles: The physical aspects of the medical facility, including the appearance, cleanliness, comfort, and safety of the environment, as well as the availability of amenities and support services.

Methodology

Methodology refers to the systematic, theoretical analysis of the methods applied to a field of study. It is a set of principles, practices, procedures, and rules used by researchers to conduct scientific inquiry, collect data, analyze data, and draw conclusions. Methodology encompasses the entire research process, from the formulation of research questions to the interpretation of results. A descriptive study is a type of research design that aims to describe and summarize a particular phenomenon or situation, without attempting to manipulate or control any variables. A descriptive study is done to explain the characteristics of the variables of interest in an exceedingly situation or particularly, the goal is to get a profile or to explain relevant aspects of the phenomenon of interest from individual, organizational, industry-oriented, or other perspectives. Sekaran (2010), Marek, Antle, and Lalkhen (2017) discuss the role of descriptive studies in nursing research. They explain that descriptive studies are valuable for providing detailed descriptions of a particular population, phenomenon, or situation, and can be used to generate hypotheses for future research. Quantitative methods are research approaches that use numerical data and statistical analysis to draw conclusions and make generalizations about a population. This type of research method is used to gather objective, measurable data that can be analyzed using statistical techniques to identify patterns, relationships, and trends. It is often used in social sciences, natural sciences, and business research. Some common examples of quantitative methods include surveys, experiments, and secondary data analysis. Surveys are used to gather data from a sample of individuals about their attitudes, beliefs, behaviors, and experiences. Experiments are used to manipulate one or more variables to test the effects on an outcome variable. Secondary data analysis involves the analysis of data collected by others, such as government agencies, research organizations, or academic institutions. Rocco and Plakhotnik (2009). A quantitative research design will be used to fill the gap in this research gap especially in information and explanation on research problem. (Creswell & Creswell, 2017). The questionnaire has 4 sections consisting Section 1: Demographic Profile, followed by our independent variable Section 2(a): Electronic - Word of Mouth, Section 2(b): Destination Trust, Section 2 (c): Service Quality and our dependent variable Section 2 (d): Medical Tourism Experience. For this research the target population are focusing on local residents (for their opinion or perspective regarding medical tourism outside and inside of the country). According to UN World Urbanization Prospects, 2020 it has recorded a total of 8,622,000 local residents in Klang Valley. Sampling locations of the study are mainly focus on Management and Science University, Shah Alam and Central Market, Kuala Lumpur, Dataran Merdeka, Kuala Lumpur and Petronas Twin Tower, Kuala Lumpur, Malaysia. The reasons behind the selection of these locations is due to the high number of local residents flooding in that area. As from the table, Krejcie and Morgan (1970) had simplified the size decision by providing a sample size table showed that 384 respondents are required in this research. Therefore, according to Hsieh et al. (2020),
they acknowledged that the use of convenience sampling may limit the generalization of their findings, but noted that it was the most feasible approach given the limited resources and time available for the study.

Overall, convenience sampling is a commonly used sampling technique in research, particularly when time and resources are limited. While it may limit the generalization of study findings, it can still provide valuable insights into specific populations or contexts. This technique allows the research to filter people who does not meet with the necessity. The Data Collection method of this study is questionnaire. A questionnaire is a research instrument consisting of a set of questionnaire for the purpose of gathering information from respondent. The questionnaire adopted from (Lew, Loh, Te, Wendy, Woo, 2018). The questionnaire was prepared bilingually in English and Bahasa Melayu. Method used to analysis the data is using the software of Statistical Package for Social Sciences (SPSS). SPSS system will used to investigate the data after the gathering. The SPSS system going to be used is version 26.

REFERENCES


