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The Effect of Hospital Brand Image and Motivational Factors on Behavioral Intentions from the Perspective of Medical Tourists: Cross-Sectional Study

Medikal Turistlerin Perspektifinden Hastane Marka İmajı ve Motivasyon Faktörlerinin Davranışsal Niyete Etkisi: Kesitsel Çalışma

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ABSTRACT Objective: Medical tourism has grown rapidly in recent years. Along with this growth, there has been a significant increase in the economic share of the market. Realizing this situation, countries have started to develop various policies to understand the behavior of medical tourists and to get the share they want from this market. Therefore, the aim of this study is to reveal the impact of hospital image and motivational factors on behavioral intention from the perspective of medical tourists. Material and Methods: The population of this crosssectional study consists of medical tourists receiving healthcare services in XXXXXXXXXX. No sample selection was made for this study; instead, a random sampling method was used to administer a questionnaire to participants receiving healthcare services at institutions that agreed to participate in the study. Data were collected between March-December 2024. A total of 360 questionnaire forms were analyzed. Results: 33.6% of the participants were between 40-49 years old and 31.7% of them came from Georgia. A positive relationship was found between hospital image, accessibility, safety and security, country knowledge and awareness, potential of saving and behavioral intention (p<0.05, p<0.001). Behavioral intention is positively affected by hospital image, accessibility, safety and security, country knowledge and awareness, and potential of saving (p<0.05, p<0.001). Hospital image, accessibility, safety and security, country knowledge and awareness, and potential of saving explain 45.8% of the change in behavioral intention. Conclusion: The findings of the study reveal that medical tourists' behavioral intentions are influenced by motivational factors and hospital image. Accordingly, it is recommended that strategies be adopted to enhance the competitiveness of medical tourism destinations by developing the quality of healthcare services and destination image in a coordinated manner.

Keywords: Hospital image; motivation factors; behavioral intention; medical tourism

ÖZET Amaç: Medikal turizm, son yıllarda hızlı bir büyüme göstermiştir. Bu büyüme ile beraber pazarın ekonomik payında da önemli bir artıs gözlenmektedir. Bu durumun farkına varan ülkeler, medikal turistlerin davranışlarını anlamak ve bu pazardan istedikleri payı almak için çeşitli politikalar geliştirmeye başlamışlardır. Bu nedenle çalışmanın amacı, medikal turistlerin perspektifinden hastane imajı ve motivasyon faktörlerinin davranışsal niyet üzerindeki etkisini ortaya çıkarmaktır. Gereç ve Yöntemler: Kesitsel tipteki çalışmanın evrenini, XXXXXXXXXXX'da sağlık hizmeti alan medikal turistler oluşturmaktadır. Çalışmada, örneklem seçimine gidilmemiş olup çalışmaya katılmayı kabul eden kurumlarda sağlık hizmeti alan katılımcılara rastgele örneklem yöntemi ile anket uygulanmıştır. Veriler, Mart-Aralık 2024 tarihleri arasında toplanmıştır. Toplamda 360 anket formu analiz edilmiştir. Bulgular: Katılımcıların %33,6'sı 40-49 yaş aralığında olup %31,7'si Gürcistan'dan gelmiştir. Hastane imajı, erişilebilirlik, emniyet ve güvenlik, şehir bilgisi ve farkındalığı, fiyat uygunluğu ve davranışsal niyet arasında pozitif yönlü bir ilişki tespit edilmiştir (p<0,05, p<0,001). Davranissal niyet, hastane imaji, erisilebilirlik, emniyet ve güvenlik, ülke bilgisi ve farkındalığı ve fiyat uygunluğundan pozitif yönlü etkilenmektedir (p<0.05, p<0.001). Hastane imajı, erişilebilirlik, emniyet ve güvenlik, ülke bilgisi ve farkındalığı ve fiyat uygunluğu davranışsal niyetteki değişimi %45,8 oranında açıklamaktadır. Sonuç: Çalışma bulguları, medikal turistlerin davranışsal niyetlerinin motivasyon faktörleri ve hastane imajından etkilendiğini ortaya koymuştur. Bu doğrultuda, medikal turizm destinasyonlarının rekabet gücünü artırmak amacıyla sağlık hizmetlerinin kalitesi ile destinasyon imajını eşgüdümlü şekilde geliştiren stratejilerin benimsenmesi önerilmektedir.

Anahtar Kelimeler: Hastane imajı; motivasyon faktörleri; davranıssal niyet; medikal turizm

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Medical tourism has emerged as a rapidly growing segment of the global health sector, driven by a combination of economic, social and technological factors. This phenomenon, defined by individuals traveling across national borders to access medical services, offers an attractive combination of healthcare and tourism.1 The growing demand for medical tourism is supported by factors such as the rising cost of healthcare in developed countries, long waiting times for elective surgical procedures, and the availability of high quality medical care at competitive prices in developing countries. This rapid evolution of the industry not only reflects the globalization of healthcare, but also highlights the important role of patient behavior, decision-making processes, and brand perception in shaping market Dynamics.^{2,3}

Medical tourism has become a sector characterized by rapidly increasing international patient flows, globalization of healthcare services, and intense competition between countries. While there are many factors influencing medical tourists' decisions, hospital brand image stands out as particularly important among these factors. Hospital brand image is a multidimensional concept encompassing the healthcare institution's reputation, perceived service quality, level of reliability, ethical stance, technological infrastructure, patient relationship management, and corporate recognition. Brand image is not limited to symbolic elements such as physical structures or logos; it also encompasses the overall perception formed in patients' minds. This image serves as a quality signal, particularly for individuals who have not previously experienced the healthcare institution, and plays a critical role in building trust.^{4,5} The majority of medical tourists do not have direct knowledge about the institution where they will receive treatment. This situation creates information asymmetry and perceptual uncertainty. In such an environment, hospital brand image becomes a tool that facilitates and guides the decision-making process. A strong and positive brand image enhances trust in the quality of services, reduces perceived potential risks, and fosters the development of positive attitudes toward the service. Additionally, brand image directly influences patient satisfaction, word-of-mouth recommendations, and the intention to revisit. In this

context, brand image not only shapes individual patient behavior but also the long-term institutional sustainability of the healthcare institution.^{2,6,7} Hospital brand image also functions as a destination marketing tool. Destination image, which is among the attractive factors in medical tourism, is evaluated in an integrated manner with hospital perception. For motivational factors such as ease of transportation, price advantage, cultural compatibility, security, technological infrastructure, and a team of expert physicians to be effective, these elements must be presented under a comprehensive brand umbrella. For countries like Türkiye, which aim to grow in medical tourism, technical quality alone is not sufficient; this quality must also be effectively transformed into brand value. Therefore, systematic management of hospital image by healthcare institutions has become a strategic necessity to enhance competitiveness in the international market and ensure patient loyalty.^{6,8} For this reason, healthcare institutions should strengthen their corporate brand values by investing in areas such as brand communication, patient experience management, digital visibility, international accreditations, and feedback systems based on patient satisfaction. They should also build global patient trust and positively influence the behavioral intentions of potential medical tourists. 1,4,9

Intention can be defined as the likelihood of performing a behavior. Behavioral intentions strengthen customer relationships with service providers and serve as an indicator of the sustainability of that relationship.¹⁰ Therefore, accurate measurement of behavioral intentions is critical for companies to predict the future purchase behavior of individuals as part of customer relationship management.¹¹ The concept of Theory of Planned Behaviour (PBT) was introduced by Ajzen in 1991. According to this theory, in order for behaviour to occur, a "Behavioural Goal" must first be formed. The main factors that influence this goal are "attitude towards the behaviour", "subjective norms" and "perceived behavioural control". These factors are shaped by "behavioural (attitude) beliefs", "normative beliefs" and "control beliefs" respectively. These beliefs are also among the factors that determine behavioural outcomes. According to the PBT, the determinant of behaviour is the individual's intention to perform certain types of actions.^{7,12,13} Behavioral intentions include an individual's future behavioral plans for a product or service after it has been paid for and consumed. Behavioral intentions can be of 2 types, either positive or negative. Positive behavioral intentions refer to the tendencies of customers to be loyal to the company, to have a positive opinion of the company, to recommend the company to others, to spend more for the company, or to accept paying a higher price for the company's products.^{14,15}

Customer loyalty, a dimension of behavioral intention, refers to the positive attitude customers develop toward a brand, product, or company. When customers are satisfied, they tend to become repeat users of the same brand, product, or company. In addition, it refers to the repurchase of the product or service and the continuation of positive behavior in this regard. Customer loyalty has 3 main dimensions: cognitive, emotional and behavioral.^{6,8,16}

Cognitive loyalty is the process of returning to the same organization after the initial purchase of a product without considering alternative companies. Affective loyalty occurs as a result of the emotional attachment that customers develop toward an organization and is usually associated with continuity of customer satisfaction.¹⁷ Behavioral loyalty refers to the type of loyalty that results in the purchase of the product or service. As customer loyalty increases, individuals are less likely to consider lower-priced alternatives for similar products and are more likely to choose the same product or service again. Loyal customers do not tend to seek alternatives for products and services with which they are satisfied and prefer to have their needs met by companies with which they are consistently satisfied. 18,19

In the context of medical tourism, behavioral intentions include the decision to travel abroad for treatment, the choice of a particular destination or hospital, and the willingness to recommend the experience to others. Previous studies have shown that behavioral intentions in medical tourism are influenced by many factors such as patient satisfaction, destination image, health care quality, religious and cultural proximity, transportation facilities, hotel and

support services.²⁰⁻²² Therefore, the purpose of this study is to determine the influence of motivational factors (accessibility, safety and security, country knowledge and awareness and potential of saving) and hospital image on the behavioral intentions of individuals seeking medical tourism services. The hypotheses of the study determined for this purpose are as follows;

H₁: Hospital brand image positively effects the behavioral intentions of medical tourists.

H₂: Potential of positively effects the behavioral intentions of medical tourists.

H₃: Safety and security positively effects the behavioral intentions of medical tourists.

H₄: Accessibility positively effects the behavioral intentions of medical tourists.

H₅: Country knowledge and awareness positively effects the behavioral intentions of medical tourists.

MATERIAL AND METHODS

TYPE OF RESEARCH, POPULATION AND SAMPLE

The study is cross-sectional in nature. The study population consists of medical tourists receiving healthcare services in XXXXXXXXXXXX. The sample size was determined using the Hair formula, as the population size is unknown and it is recommended that the sample size be at least 5-10 times the number of indicator variables.²³ Thus, the total number of indicators (28) was multiplied by 10 (28×10=280).

Research data was collected from medical tourists who received services from private health-care institutions (hospitals, medical centers, clinics, outpatient clinics) in XXXXXXXXXXX between March 1, 2024-December 31, 2024, and who agreed to participate in the study. A random sampling method was used in the study. Since the region is primarily visited by medical tourists who speak English, Arabic and Turkish, and validity and reliability studies for scales in these languages had been previously conducted, questionnaires prepared in these languages were distributed to the designated institutions and collected by their health tourism units. 16,24,25 Medical tourists who received healthcare services from healthcare institutions, spoke English, Arabic, or

Turkish, and agreed to participate in the study were included in the study. 23 questionnaires that were incomplete or incorrectly filled out were excluded from the study. A total of 360 questionnaires were collected for the study and were used as the basis for data analysis.

DATA COLLECTION TOOLS

The study used the "Personal Information Form" to determine the sociodemographic characteristics of medical tourists, the "Motivational Factors Scale" to measure motivational factors, the "Hospital Image Scale" to evaluate hospital image and the "Behavioral Intention Scale" to measure behavioral intentions.

Personal Information Form: In the study, the personal information form for the participants included age, gender, educational status, marital status, type of recommendation and the countries of origin of the participants.

Motivational Factors Scale: The Motivational Factors Scale is a scale consisting of 18 statements developed by Lim et al. The English and Arabic language and content validity and reliability study of the scale was conducted by Cham et al. The Turkish language and content validity and reliability study of the scale was conducted by Yalman. The motivational factors consist of accessibility (4 items), safety and security (5 items), country knowledge and awareness (4 items), and potential of saving (5 items). The scale is scored on a 5-point Likert scale as "1: Strongly disagree; 2: Disagree; 3: Neither agree nor disagree; 4: Agree; 5: Strongly agree". The overall Cronbach's alpha values of the scale were determined as 0.893, 0.880, and 0.930 for English, Arabic and Turkish, respectively. In this study, the Cronbach alpha values of the scale were determined as follows: accessibility (0.758), safety and security (0.730), knowledge and awareness of the city (0.709), affordability (0.873). 16,24,25

Hospital Image Scale: The Hospital Image Scale is a 7-item scale developed by Lim et al. English, Indonesian and Arabic language and content validity of the scale was conducted by Lim et al. Turkish language and content validity and reliability of the scale was conducted by Yalman. The scale is scored on a 5-point Likert scale as "1: Strongly dis-

agree; 2: Disagree; 3: Neither agree nor disagree; 4: Agree; 5: Strongly agree". The overall Cronbach's alpha values of the scale were determined as 0.885, 0.938, and 0.935 for English, Arabic and Turkish, respectively. In this study, the Cronbach alpha value of the scale was determined to be 0.843. 16,24

Behavioral Intention Scale: The Behavioral Intention Scale was developed by Lim et al. English, Indonesian and Arabic language and content validity of the scale was conducted by Lim et al. Turkish language and content validity and reliability of the scale was conducted by Yalman. The scale consists of 3 statements. The scale is scored on a 5-point Likert scale as "1: Strongly disagree; 2: Disagree; 3: Neither agree nor disagree; 4: Agree; 5: Strongly agree". The overall Cronbach's alpha values of the scale were determined as 0.836, 0.810, and 0.909 for English, Arabic and Turkish, respectively. In this study, the Cronbach's alpha value of the scale was determined as 0.718. 16,24

ETHICS APPROVAL

The approval of the study was obtained from Samsun University Non-Interventional Clinical Research Ethics Committee with the date of January 31, 024 and number 2024/3/15. The ethical principles of the Declaration of Helsinki and standards of good clinical practice were applied in the study.

DATA ANALYSIS

The study data were analyzed with Jamovi 2.6.17 software. Percentage, frequency, correlation and multiple regression analyses were used in the study. It has been determined that the skewness and kurtosis values of the data are between 0.08-1.23 (Table 2). Since the skewness and kurtosis values of the data were found to be between -1.5-+1.5, it was assumed that the data followed a normal distribution. The data were considered statistically significant at the p<0.05 level. Percentage, frequency, Pearson correlation and multiple regression analysis were used in the study.

RESULTS

Of the participants, 33.6% were between the ages of 40-49, 57.3% were female, 74.1% were married and 31.7% came from Georgia (Table 1).

TABLE 1: Sociodemographic characteristics						
Variables		n (360)	%			
Age (years)	18-29	23	6.4			
	30-39	117	32.5			
	40-49	121	33.6			
	50-59	73	20.3			
	60+	26	7.2			
Gender	Female	206	57.3			
	Male	154	42.7			
Education	Secondary school and lower	263	70.1			
	High school	97	26.9			
Marital status	Married	267	74.1			
	Single	93	25.9			
Who recommended	Medical agency	68	2.6			
this clinic?	Friend recommendation	143	47.7			
	Internet/social media	108	44.8			
	Physician recommendation	41	4.9			
Which country	Germany	91	25.2			
are you from?	Georgia	114	31.7			
	Azerbaijan	68	18.9			
	Iraq	46	12.8			
	Austria	18	5.0			
	Belgium	14	3.8			
	Netherlands	9	2.6			

The mean, standard deviation and correlation coefficient of the scales are reported in Table 2. The correlation coefficient between the constructs is below 0.70, indicating that there is no serious multicollinearity problem. The fact that the correlation values between the variables are less than 0.70 and have a significant relationship indicates that the divergence discriminant validity is provided.²³

Pearson correlation analysis was performed to determine the relationship between the variables. The results of the analysis are shown in Table 2. As a result of the analysis, a positive relationship was found between behavioral intention and hospital image (r=0.528; p<0.05), potential of saving (r=0.311; p<0.05), safety and security (r=0.328; p<0.001), accessibility (r=0.481; p<0.001) and country knowledge and awareness (r=0.360; p<0.05) (Table 2). The analysis revealed significant and positive relationships between behavioral intention and hospital image, savings potential, safety, accessibility, and country awareness. These findings indicate that medical tourists' preferences are shaped by multiple factors.

The mean behavioral intention was 3.73 ± 0.886 out of 5, the mean hospital image was 3.33 ± 1.010 out of 5, the mean potential of saving was 3.14 ± 0.565 out of 5, the mean safety and security was 3.12 ± 0.486 out of 5, the mean accessibility was 4.02 ± 0.857 out of 5 and the mean country knowledge and awareness was 3.81 ± 0.928 out of 5 (Table 2). The findings show that participants rated accessibility and country awareness higher than other factors. However, security and savings potential were the areas with the lowest average scores.

Multiple regression analysis was statistically significant (F=31.393, t=1.071, p<0.001). According to the results of the analysis; hospital image [β =0.354, 95% confidence interval "CI" (0.217, 0.490), p<0.001], potential of saving [β =0.051, 95% CI (0.031, 0.194), p<0.05], safety and security [β =0.059, 95% CI (0.046, 0. 204), p<0.001], accessibility [β =0.385, 95% CI (0.285, 0.485), p<0.001] and country knowledge and awareness [β =0.117, 95% CI (0.015, 0.249), p<0.05] positively effect behavioral intention. Independent variables (hospital image, potential of saving, potential of saving, safety and security, accessibility, country knowledge and awareness) predict 45.8% of the change in the de-

TABLE 2: Correlation analysis										
Variables	X	SD	Skewness	Kurtosis	1st	2 nd	3 rd	4 th	5 th	6 th
1.Behavioral intention	3.73	0.886	0.08	0.21	1					
2.Hospital image	3.33	1.01	0.69	1.23	0.528**	1				
3. Potential of saving	3.14	0.565	0.65	1.19	0.311**	0.473*	1			
4.Safety and security	3.12	0.486	0.45	0.90	0.328*	0.382**	0.595*	1		
5.Accessibility	4.02	0.857	0.31	0.49	0.481*	0.310*	0.402*	0.461*	1	
6.City knowledge and awareness	3.81	0.928	0.18	0.18	0.360**	0.552*	0.501*	0.348*	0.403*	1

*p<0.001; **p<0.05; SD: Standard deviation

TABLE 3: Multiple regression analysis								
Items				95% CI (a)				
	В	SD	β	t value	Lower	Upper	p value	Hypothesis
Constant	0.409	0.382		1.071			<0.001	
2.Hospital image	0.338	0.059	0.354	1.741	0.217	0.490	<0.001	Yes
3.Potential of saving	0.080	0.113	0.051	0.708	0.031	0.194	<0.05	Yes
4.Safety and security	0.108	0.134	0.059	0.802	0.046	0.204	<0.001	Yes
5.Accessibility	0.398	0.052	0.385	7.568	0.285	0.485	<0.001	Yes
6.City knowledge and awareness	0.102	0.066	0.117	5.105	0.015	0.249	<0.05	Yes
Dependent variable: Behavioral intention		F=31.39	3		R ² =	0.458		

SD: Standard deviation; CI: Confidence interval

pendent variable. According to these results, hypotheses H₁, H₂, H₃, H₄ and H₅ have been accepted (Table 3). The results show that behavioral intention is a multidimensional construct and that hospital image and accessibility significantly influence this intention. This finding reveals that both service quality and ease of access are decisive factors in the decisions of medical tourists.

DISCUSSION

This study examined the factors influencing the behavioral intentions of medical tourists and revealed that motivational factors such as hospital image, potential of saving, safety and security, accessibility, country knowledge and awareness have significant effects. These findings are consistent with various studies in both national and international literature.

The study revealed that motivational factors (potential of saving, safety and security, accessibility, country knowledge and awareness) and hospital image have a positive relationship with behavioral intentions. These results are consistent with the findings of previous studies in the literatüre. 6,15,16,24 Health institutions, local government, and tourism agencies can incorporate these factors into their promotional and marketing activities promote to XXXXXXXXXX as a medical tourism destination. For example, the International Health Services Incorporated Company, a government agency established to promote health tourism in Türkiye, and the digital marketing platform "Health Türkiye" and related institutions in XXXXXXXXXX can work in cooperation to attract potential medical tourists, especially in the immediate vicinity. Because when the study data are analyzed, medical tourists mostly come to XXXXXXXXXXXXX from Georgia, Azerbaijan, and Germany. Previous studies in this province have found that medical tourists from these countries are also medical tourists from these countries, that those from Germany are mainly diaspora medical tourists, and that those from Georgia and Azerbaijan are the most important reason for preference, in addition to religious and cultural proximity and ease of transport. Based on these results, it can be stated that religious and cultural proximity is one of the most important reasons for preference in medical tourism. 4,9,27

Another finding of the study is that hospital brand image has a significant and positive effect on behavioral intention. This finding is consistent with a previous study conducted in Malaysia, which also demonstrated that hospital image and reputation are associated with patient satisfaction and repeat visit behavior.²⁸ Similarly, studies conducted by Cham et al. and Chishti et al. reported that hospital image directly affects medical tourists' loyalty and destination preferences.^{29,30} In the Turkish context, a study conducted by Demir et al. in XXXXXXXXXXX found a positive relationship between hospital image and behavioral intention.4 These findings support the results of the current study and reveal that a strong brand image plays a critical role in guiding medical tourist preferences.

According to the findings of the study, the perception of safety and security has a statistically significant and positive effect on the behavioral intentions of medical tourists. This reveals that the need for a safe environment is a critical determinant in the decision-making process, especially for individuals traveling abroad to receive healthcare services. Indeed, a study conducted by Chaulagain et al. also indicated that the perception of a destination as safe strengthens tourists' tendency to revisit that destination.31 The perception of safety encompasses not only physical safety but also multidimensional elements such as hygiene standards, the crisis management capacity of healthcare institutions, the reliability of transportation, and interaction with the local community. For medical tourists coming from neighboring countries, safety is even more important than other motivational factors. Üstün and Uslu study on international patients coming to Türkiye emphasized that medical tourists consider safety perception alongside cultural and religious affinity when choosing a destination.5 Türkiye stable structure, social security environment, and geographical proximity offer significant advantages, especially for patients from Georgia, Azerbaijan, and Middle Eastern countries. In this context, the results of the current study are consistent with the findings in the literature and confirm that a positive perception of security is an important factor in increasing medical tourists' loyalty and intention to revisit.

Another important finding is that accessibility has a significant and strong effect on the behavioral intentions of medical tourists. This result is consistent with various studies in both national and international literature. Studies conducted in the context of Türkiye have revealed that ease of transportation and affordability are among the determining factors in medical tourists' choice of destination. 5,27,32 This finding shows that medical tourists tend to gravitate toward accessible destinations in their rational decision-making processes. Similarly, in the international literature, the destination's transportation infrastructure, geographical location, and level of international connectivity are among the main factors directly influencing medical tourists' preferences. 31,33,34 In this context, the fact that a significant portion of the participants in the study came from countries bordering Türkiye, such as Georgia and

Azerbaijan, highlights the need to evaluate accessibility not only in terms of physical distance but also in terms of cultural proximity and transportation practicality. Therefore, transportation convenience both enhances the appeal of medical tourism destinations and strengthens patients' tendency to revisit them.

According to the findings of the study, country and city knowledge and awareness of this destination have a significant and positive effect on the behavioral intentions of medical tourists. This is consistent with the study by Ghaderi et al., which examined the effect of destination awareness on tourist behavior.35 In the aforementioned study, it was revealed that destination awareness supported by digital storytelling techniques strengthens tourists' perceptions of the destination image and positively influences their behavioral intentions. In particular, it is emphasized that visual and narrative-based content presented through digital media, social networks, and online promotion channels is effective in shaping potential tourists' attitudes toward destinations, thereby increasing awareness, credibility, and preference rates. Similarly, in Yalman study on health tourism in Türkiye, it was determined that destination awareness and country knowledge were effective in the behavioral intentions of medical tourists.¹⁶ The study stated that increasing the level of knowledge about Türkiye's health tourism capacity significantly increased perceived value and intention to revisit. In this context, the findings of the current study are consistent with both national and international literature and reveal that knowledge about the destination is a decisive factor in shaping the behavior of medical tourists.

The findings of the study reveal that savings potential has a significant and positive effect on the behavioral intentions of medical tourists. This indicates that Türkiye cost advantage in medical tourism is an important determinant in the destination choice of international patients. Indeed, studies in the international literature indicate that countries that can offer both affordable pricing and high service quality become more attractive to medical tourists, and that this advantage is an effective factor in destination selection. ^{20,22,25} Similarly, studies conducted specifically on Türkiye emphasize that the country's modern healthcare infrastructure, natural tourist attractions,

and competitive pricing policies are among the reasons why foreign patients choose Türkiye. 4,5,8,16 In this context, the current findings are consistent with both national and international literature, revealing that economic affordability plays a critical role in medical tourism decision-making processes.

CONCLUSION

In medical tourism, a positive hospital image can increase trust among medical tourists and positively affect their intention to visit again. Moreover, medical tourists may recommend both the hospital and the region as a medical destination to potential medical tourists. Moreover, they may cause more medical tourists to come through word-of-mouth advertising. In the study, the average hospital image score of the health institutions in XXXXXXXXXX was determined at a medium level. Therefore, it can be stated that more resources should be allocated to this field to improve hospital image. This will help create a high level of hospital image in the highly competitive medical tourism market and generate more revenue from this market. In order to realize this initiative, effective branding and promotional activities should be carried out, and personnel with high foreign language skills, professionals in their field and strong communication skills should be employed. In order to realize this initiative, effective branding and promotional activities should be carried out, and personnel with high foreign language skills, professionals in their field and strong communication skills should be employed.

Moreover, health institutions serving in the medical tourism sector may be advised to use social media, electronic word-of-mouth and internet marketing tools more effectively to reach potential Georgian, Azerbaijani, Iraqi and diaspora medical tourists. In addition, health institutions can open representative offices in these regions to disseminate information about their services and XXXXXXXXXXX's medical tourism. In these representative offices, they can organize physician-patient meetings at certain intervals and perform remote examination procedures through these units. This will reduce the uncertainty and risk perception of potential medical tourists. Again, hospital managements should keep their prices at an appropriate level and develop long-term service-oriented strategies to support the positive image of the hospital. In addition to these, it is thought that accreditation of hospitals by an international organization will minimize the risk perception and uncertainties of potential medical tourists.

Finally, there are some limitations regarding the generalizability of the study. The data were collected from specific healthcare institutions in Türkiye and may not fully reflect the demographic characteristics or perceptions of medical tourists from other parts of Türkiye. Therefore, it is recommended that similar studies be conducted with a larger sample size and data collected from various regions of Türkiye. Moreover, further studies with data collected from different regions may provide deeper comparative analyses on the motivational factors, perceptions, attitudes, behavioral intentions and satisfaction of medical tourists from different countries. This may contribute to the development of new country-specific strategies and policies to attract medical tourists to Türkiye.

Source of Finance

During this study, no financial or spiritual support was received neither from any pharmaceutical company that has a direct connection with the research subject, nor from a company that provides or produces medical instruments and materials which may negatively affect the evaluation process of this study.

Conflict of Interest

No conflicts of interest between the authors and / or family members of the scientific and medical committee members or mem-

bers of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.

Authorship Contributions

This study is entirely author's own work and no other author contribution.

REFERENCES

- Demir Y. Sağlık turizmi yetki belgesine sahip sağlık kurumlarının WEB sayfalarının medikal turizm açısından değerlendirilmesi: Samsun'da faaliyet gösteren sağlık kurumları üzerine nitel bir araştırma [Evaluation of WEB pages of health institutions with health tourism authorization certificate in terms of medical tourism: a qualitative research on health institutions operating in Samsun]. Seyahat ve Otel İşletmeciliği Dergisi. 2024;21(2):238-52. doi:10.24010/soid.1422726
- Wong AKF, Vongvisitsin TB, Li P, Pan Y, Ryan C. Revisiting medical tourism research: Critical reviews and implications for destination management and marketing. Journal of Destination Marketing&Management. 2024;33:100924. doi:10.1016/j.jdmm.2024.100924
- Dag E, Demir Y, Kilinc ZA, Yazicioglu B. Perception of medical tourism image from the perspective of healthcare professionals: the case of Türkiye. Journal of Tourism Management Research. 2024;11(1):38-48. doi:10.18488/31.v11i1.3700
- Demir Y, Dağ E, Aydın Kılınç Z, Karakuş P, Özpınar S. Hospital brand image and determinants in medical tourism: the case of Samsun. GeoJournal of Tourism and Geosites. 2024;53(2):413-20. doi:10.30892/gtg.53204-1216
- Üstün U, Demir Uslu Y. Türkiye'nin sağlik turizminde tercih edilme nedenleri üzerine bir çalişma: Medikal Turizm Endeksi [A study on the reasons why Turkey is preferred in health tourism: Medical Tourism Index]. Avrupa Bilim ve Teknoloji Dergisi. 2022;33:344-53. doi:10.31590/ejosat.1020647
- Sancar T. The relations between motivational factors and behavioral intentions of medical health tourists. Afyon Kocatepe Üniversitesi Sosyal Bilimler Derqisi. 2024;26(1):246-59. doi:10.32709/akusosbil.1309877
- Huang X, Dai S, Xu H. Predicting tourists' health risk preventative behaviour and travelling satisfaction in Tibet: combining the theory of planned behaviour and health belief model. Tour Manag Perspect. 2020;33:100589. doi:10.1016/j.tmp.2019.100589
- Baydeniz E, Çılgınoğlu H, Valeri M. Impact of health tourism visitor experiences on behavioral intention. Journal of Organizational Change Management. 2024;37(5):1133-53. doi:10.1108/JOCM-09-2023-0381
- Demir Y. Destination image and revisit intention relationship from the perspective of diaspora medical tourists receiving health services in Samsun: a cross-sectional study. Journal of Tourism and Gastronomy Studies. 2024;12(4):2724-36. doi:10.21325/jotags.2024.1508
- Akdu U, Gülmez M. Determining the service quality in medical tourism via structural equation model. Journal of Current Researches on Social Sciences. 2017;7(2):437-62. doi: 10.26579/jocress-7.2.31
- Toni M, Jithina KK, Thomas K V. Patient satisfaction and patient loyalty in medical tourism sector: a study based on trip attributes. Int J Health Sci (Qassim). 2022;6(S7):47234-42. doi:10.53730/ijhs.v6nS7.13138
- Ajzen I. The theory of planned behavior. Organ Behav Hum Decis Process. 1991;50(2):179-211. doi:10.1016/0749-5978(91)90020-T
- Boguszewicz-Kreft M, Kuczamer-Klopotowska S, Kozłowski A. The role and importance of perceived risk in medical tourism. Applying the theory of planned behaviour. PLoS One. 2022;17(1):e0262137. PMID: 34986182; PMCID: PMC8730393.
- Rambocas M, Kirpalani VM, Simms E. Brand equity and customer behavioral intentions: a mediated moderated model. International Journal of Bank Marketing. 2018;36(1):19-40. doi:10.1108/IJBM-09-2016-0139

- 15. Dikici MS, Akkılıç ME. Algılanan hizmet kalitesi ile davranışsal niyetler arasında müşteri memnuniyetinin aracı etkisi: medikal turistler üzerine bir araştırma [Mediator effect of customer satisfaction between perceived service quality and behavioral intentions: a study on medical tourists]. İktisadi İdari ve Siyasal Araştırmalar Dergisi. 2023:275-98. doi:10.25204/iktisad.1341846
- 16. Yalman F. Motivasyonel faktörler, davranışsal niyet ve hastane imajı arasındaki ilişki: medikal sağlık turistleri üzerinde bir araştırma [The relationship between motivational factors, behavioral intention and hospital image: a study on medical health tourists]. Uluslararası İktisadi ve İdari Akademik Araştırmalar Dergisi. 2023;3(2):105-21. https://dergipark.org.tr/tr/pub/ijerdergisi/issue/87636/1563842
- Ghorbanzadeh D, Rahehagh A. Emotional brand attachment and brand love: the emotional bridges in the process of transition from satisfaction to loyalty. Rajagiri Management Journal. 2021;15(1):16-38. doi:10.1108/RAMJ-05-2020-0024
- Pang H, Zhang K. Determining influence of service quality on user identification, belongingness, and satisfaction on mobile social media: Insight from emotional attachment perspective. Journal of Retailing and Consumer Services. 2024;77:103688. doi:10.1016/j.jretconser.2023.103688
- Ahmadi A, Ataei A. Emotional attachment: a bridge between brand reputation and brand advocacy. Asia-Pacific Journal of Business Administration. 2024;16(1):1-20. doi:10.1108/APJBA-11-2021-0579
- Shareef MA, Kim DY, Khan AR, Akram MS, Butt I, Sadrul Huda SSM. Understanding the behaviour of medical tourists: implications for strategy development. Journal of Policy Research in Tourism, Leisure and Events. 2024:1-27. doi:10.1080/19407963.2024.2303446
- Mathijsen A, Dziedzic E. Diasporic Medical Tourism: examining tourists' profiles, antecedents and behavioural intention. European Journal of Tourism Research. 2024;37:3702. doi:10.54055/ejtr.v37i.3010
- Majeed S, Kim WG, Ryu K. Medical Tourism and Cognitive Dissonance: Exploring Tourist Choice Behavior, Post-Choice Pre-Outcome Regret, and Visit Intention. Journal of Quality Assurance in Hospitality&Tourism. 2024;25(3):514-544. doi:10.1080/1528008X.2022.2135058
- Hair JR, Hult G, Tomas M, Ringle CM, Sarstedt M. A Primer on Partial Least Squares Structural Equation Modeling (PLS-SEM). 2nd ed. Los Angeles: Sage; 2017.
- Lim YM, Cham TM, Sia BC. Medical tourists' behavioral intention in relation to motivational factors and perceived image of the service providers. International Academic Journal of Organizational Behavior and Human Resource Management. 2018;5(3):1-16. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3225583
- Cham TH, Lim YM, Sia BC, Cheah JH, Ting H. Medical Tourism Destination Image and its Relationship with the Intention to Revisit: A Study of Chinese Medical Tourists in Malaysia. Journal of China Tourism Research. 2021;17(2):163-91. doi:10.1080/19388160.2020.1734514
- Gürbüz S, Şahin F. Sosyal Bilimlerde Araştırma Yöntemleri. Ankara: Seçkin Yayıncılık; 2014.
- Demir Y, Oruç P, Baştürk YA, Övey İS. Medikal turistlerin tercih nedenleri: Samsun ili örneği [Reasons of preference of medical tourists: case of Samsun]. Turizm Ekonomi ve İşletme Araştırmaları Dergisi. 2020;2(1):18-30. https://dergipark.org.tr/tr/download/article-file/1174984

- Nikbin D, Batouei A, Iranmanesh M, Kim K, Hyun SS. Hospital prestige in medical tourism: empirical evidence from Malaysia. Journal of Travel&Tourism Marketing. 2019;36(4):521-35. doi:10.1080/10548408.2019.1582397
- Chishti H, Rauf R, Iram T, et al. The impact of hospital brand image on patient loyalty and patient behavioral intention: the mediating role of patient satisfaction. Journal of Namibian Studies: History Politics Culture. 2023;33:886-912. https://doi.org/10.59670/yx55ze78
- Cham TH, Cheng BL, Low MP, Cheok JBC. Brand image as the competitive edge for hospitals in medical tourism. European Business Review. 2021;33(1). doi:10.1108/EBR-10-2019-0269
- Chaulagain S, Le LH, Hancer M. Traveling for medical tourism: the roles of demographics, past experience and medical tourism destination familiarity. International Journal of Hospitality&Tourism Administration. 2024;25(5):960-85. doi:10.1080/15256480.2023.2202199
- 32. Sevim E, Sevim E. Medikal turizm tercihini etkileyen faktörlerin incelenmesi:

- Türkiye örneği [Examining the factors affecting the choice of medical tourism: the case of Turkey]. Hacettepe Sağlık İdaresi Dergisi. 2019;22(3):633-52. https://dergipark.org.tr/tr/pub/hacettepesid/issue/48867/622694
- Gangadhari RK, Shivalingam V, Tarei PK, Cherukuri S. Modeling perceptions about destination images and intention to re-visit: a mediating-moderated model of tourists' behavior. International Journal of Hospitality&Tourism Administration. 2025;26(1):1-27. doi:10.1080/15256480.2023.2235702
- Choudhary V, Bag T, Mukherjee S. Promotion of rural tourism through virtual reality: the impact of content richness on consumer's perceived value and behavioral intention. Journal of Travel&Tourism Marketing. 2025;42(5):665-92. doi:10.1080/10548408.2025.2478102
- Ghaderi Z, Mahdavizadeh MJ, Rajabi M, Hall CM. Does storytelling affect destination image, destination personality, and tourists' behavioural intention? Anatolia. 2024;35(2):313-25. doi:10.1080/13032917.2023.2191250