

Original Article (Qualitative)

eISSN: 2980-8359

health tourism in the ministry of health education and medical education

Gol Zaman Ojaghi¹ , Mohammad Ali Abdolvand² , Kambiz Heidarzadeh Hanzaee² , Fariz Taherikia³ 

- 1- Department of Business Management, UAE.C., Islamic Azad University, Dubai, United Arab Emirates.
2- Department of Business Management, SR.C., Islamic Azad University, Tehran, Iran.
3- Department of Management, WT.C., Islamic Azad University, Tehran, Iran.

Receive:

09 April 2026

Revise:

09 April 2026

Accept:

27 June 2026

Keywords:

Health tourism,
Quality of medical
services,
Tourism infrastructure,
Globalization of
services,
National branding

Abstract

The aim of this research was to present a local model of health tourism in the Ministry of Health, Treatment and Medical Education. This research is applicable in terms of purpose, and qualitative in nature, with an exploratory approach implemented based on the strategy of grounded theory and focusing on the systematic approach of "Strauss and Corbin". The required data were collected through in-depth and semi-structured interviews with 15 health experts, tourism strategists and relevant senior managers. The selection of participants was carried out through purposive sampling and continued until the stage of theoretical saturation. The data analysis process was carried out in three stages of open, axial and selective coding by the MAXQDA18 qualitative analysis software to ensure accuracy and transparency in extracting categories. The research findings led to the extraction of a paradigmatic model that showed that the local model of health tourism is based on a set of causal, contextual, intervening factors, strategies and consequences. In the causal factors section, components such as quality of medical services, tourism infrastructure, natural factors, transportation, organizational factors, globalization of health services, and destination security were identified. Contextual factors also included changes in health costs, transition to health supersystems, attraction of health tourists, and patient experience. The main strategies included institutional coordination, international marketing, national branding, and promotion of Iranian tourism. Finally, economic, social, infrastructural, and international consequences were extracted for this model.

Please cite this article as (APA): Ojaghi, G Z, Abdolvand, M A, Heidarzadeh Hanzaee, K and Taherikia, F. (2026). health tourism in the ministry of health education and medical education. *Journal of value creating in Business Management*, 6(2), 381-403.



10.22034/jvcbm.2026.578813.1720



Authors retain the copyright and full publishing rights.

Published by Research Center of Resource Management Studies and Knowledge-Based Business. This article is an open access article licensed under the Creative Commons Attribution 4.0 International (CC BY 4.0)

Publisher: Research Center of Resource Management Studies and Knowledge-Based Business

Corresponding Author: Mohammad Ali Abdolvand

Email: abdlvand.ma@iau.ac.ir

Extended Abstract

Introduction

Today, growth and development are considered the goals and aspirations of every country and society. Different societies are trying to provide the basis for sustainable growth and development by identifying their capabilities in different fields and by utilizing them appropriately. One of the areas that has received attention from different societies in recent decades for investment in growth and development is the field of tourism (zhang et al., 2023). Tourism as an industry has various potential areas for investment. One of the new areas in tourism that has the potential to invest and generate income for growth and development is health tourism, which is considered one of the most profitable and competitive industries in the world (Heung et al., 2021). For this reason, many governments at the macro level are interested in benefiting from the economic benefits of this industry, and increasing competition has begun between different countries, especially developing Asian countries, to attract health tourists (Zhao et al., 2024).

Health tourism or medical tourism is extensive and includes quality health care services as well as some other facilities such as better accommodation, shopping, and sometimes recreational facilities. In fact, health tourism is a form of tourism that includes all natural and cultural resources, rehabilitation and sports activities, facilities and places with services related to the health and treatment sector and the tourism sector to serve people who travel for physical and mental health reasons (Cha et al., 2024).

Nowadays, people travel for health as well as fitness, well-being and relaxation, and in response to this growing demand, countries, healthcare providers and hospitality and tourism organizations are striving to offer a wider range of medical, health and wellness tourism experiences (Zhong et al., 2021).

In countries like Iran, which have good healthcare infrastructure in many areas such as dentistry, cosmetic surgery, infertility treatment and traditional medicine; health tourism can be considered as a valuable economic opportunity to attract foreign exchange earnings and create employment. However, to exploit these opportunities, strategies are needed that are specifically dedicated to this industry (Jabari Nezhad esfahlan, Divsalar & Hoseini Ghoncheh, 2022). Iran will become one of the main health tourism hubs in the region based on its 20-year vision development goals in 2025. Iran should use its capabilities in the health care industry to benefit from the benefits of health tourism, and is currently among the world's leading countries in medical science such as stem cells and spinal cord injury repair. Also, in the field of infertility, invasive radiology topics of the kidney and liver are able to compete with advanced countries in the world. There are no extensive studies in the field of health tourism in Iran, and comprehensive identification of the enablers of medical tourism in Iran and evaluation of their relationships and effects on each other seems necessary. Understanding the above, the main research question is: What are the factors shaping the indigenous health tourism model in the Ministry of Health and Medical Education?

Theoretical foundations

Health tourism

Health is one of the inalienable rights of all human beings. Almost in the middle of the last century and at the beginning of the work of the World Health Organization, world thinkers emphasized that health is not just the absence of disease, but the enjoyment of complete mental, physical, social and spiritual well-being as the definition of health in past centuries was accepted and agreed upon by thinkers (Emami et al., 2025). The term health tourism was proposed by Goodrich in 1991 and then began to spread in American and English universities

(Monroy-Rodriguez et al., 2025). Health tourism is a trip designed to maintain and maintain the physical and mental health of an individual on a regular basis (Fernando et al., 2023).

Rastegari et al. (2025) conducted a study entitled "Health Tourism Destination Branding in Yazd Province Medical Centers". The findings of the study indicate the need to pay attention to infrastructure factors, cultural factors, and economic factors in the form of the health tourism destination country variable, tourism factors and destination city branding factors, and advertising, sales promotions, brand communities, and public relations in the form of communication tools variables, as well as doctors and nurses, medical center employees, and managers in the form of human resources variables, and medical equipment and facilities and services in the form of product or service variables.

Farzinmehr et al. (2025) conducted a study entitled "Investigating the Presentation of a Marketing Model in the Line of Health Tourism with an Emphasis on Medical Equipment". The findings showed that economic and policy factors indirectly affect marketing development through infrastructure and service quality.

Research Method

The present study is applicable in terms of purpose, and qualitative in nature, with an exploratory approach conducted through the data-based theory with the systematic approach of "Strauss and Corbin". The main goal of this approach is to identify and explain the processes, relationships, and interactions effective in forming the indigenous health tourism model in order to ultimately provide a theoretical framework for explaining and analyzing this phenomenon. The research population included specialists and experts in the field of health tourism who had executive and decision-making backgrounds in related organizations and institutions and were known as "informed experts". Sampling began purposefully and continued until theoretical saturation was achieved. In total, 15 in-depth semi-structured interviews were conducted with experts in the field of health tourism. The interview protocol was also designed based on a review of the research background, document review, and consultation with experts; and the validity of the questions was also approved by the experts. Before the interview began, the research objectives and questions were sent to the participants, and a brief explanation of the research topic was provided at the beginning of each session. With the consent of the interviewees, the interview process was recorded and the key points of each session were simultaneously noted. The average time for each interview was about 45 minutes.

Data analysis was conducted based on a systematic approach of grounded theory and by MAXQDA18 software, and included three stages of open, axial, and selective coding. In the open coding stage, after several times of studying and organizing the interview text, initial concepts were extracted and similar codes were categorized into initial categories. Then, a title appropriate to the content of the codes was selected for each category. In the axial coding stage, the relationship between the axial category and other categories was determined in the form of a paradigmatic model. Finally, in the selective coding stage, the central category was extracted and the relationships between other categories were explained in the form of a final model.

Research findings

The findings of this study led to the design of a local model in the Ministry of Health, based on which the quality of services and specialized infrastructure were identified as the main drivers (causal conditions). The results showed that adopting strategies such as national branding and inter-institutional coordination, under the influence of political and legal intervening conditions, can lead to the key outcome of developing currency and promoting

health diplomacy. This model, relying on the patient experience and the developments of health supersystems, offers an integrated path for the transition from traditional management to a comprehensive health tourism system.

Discussion and Conclusion

Analysis of the research findings shows that the identified causal conditions (including service quality, technological infrastructure, natural attractions, security, and organizational factors) constitute the hard core and main driving force of the model. These factors directly affect the “perceived value of the destination” and ultimately the “intention to choose Iran” by international patients. These results are fully consistent and harmonious with the new approach to medical tourism in the world. The present study confirms the fact that today, health tourists, beyond simply receiving treatment, are looking for a set of “quality, security, and a unique experience”. This finding is consistent with the results of Zhao et al. (2024) studies that emphasize the simultaneous role of medical expertise and smart infrastructure in attracting tourists.

The contextual conditions in this study represent the specific context and environmental characteristics that affect the implementation of health tourism strategies. These conditions, which include changes in health spending trends, the transition to smart supersystems, a focus on patient experience, and diversification of services, provide a context in which Iran can emerge as a strategic destination. The analysis of the findings shows that the underlying conditions emphasize “creating economic advantage” and “improving patient-centered standards.” These results are in line with the new developments in the global health industry; because in the new paradigm, the success of a destination is not limited to treatment alone, but also depends on the “digital ecosystem” and “cost management.”

Changes in health spending trends indicate the impact of the “medicalization of society” and the growth of the share of health in GDP on tourism demand. The findings of the study are in line with the study of Chowdhary & Majumdar (2025) who consider changes in health behaviors and increasing costs as a driver for the search for affordable options in developing countries. In fact, the price gap between countries is the main factor that has led to the formation of this pattern in the Ministry of Health. The emergence of new technologies such as digital medicine and remote monitoring forms the modern platform for health tourism. This finding is fully consistent with the study of Zhao et al. (2024) on the role of artificial intelligence in the future of medical imaging and health services. The transition to these intelligent systems reduces the physical distance between international doctors and patients and strengthens trust in cross-border treatments.

Intervening conditions in this study include macro-environmental variables that influence the selection and implementation of strategies. These factors, which are categorized into three areas: political, legal, and economic; can act as “facilitators” or “structural barriers” In fact, these conditions determine to what extent Iran's potentials (causal factors) can be realized in the real world. The analysis of the findings shows that the intervening conditions emphasize “system resilience” and “stability of implementation procedures”. These results are in line with the theories of strategic management in the field of health; because in international markets, even with the best medical services, sustainable development will not be achieved without legal and diplomatic supports. Coordination between the government, banks and medical centers acts as a catalyst for the implementation of the model. This finding is consistent with the structural model of Mansour et al. (2023) that emphasizes inter-institutional interaction. The existence of comprehensive plans and order in processes reduces implementation barriers and makes the partnership between travel agencies and medical

centers that you have brought in the codes productive. The research findings are in line with the study of Chowdhary & Majumdar (2025).

Strategies in This research is a set of targeted and planned measures that the Ministry of Health and relevant institutions use to manage and develop health tourism. These strategies, which include structural coordination, scientific branding, and smart marketing, are actually considered a "roadmap" for transforming Iran's potential into tangible economic and medical outputs. Analysis of the findings shows that the strategies emphasize process integration and marketing intelligence. These results are in line with modern tourism management models in the world; because in the present era, traditional marketing has given way to "holistic management" and "digital branding based on trust". This category is consistent with the findings of Chowdhar & Majumdar (2025).