

## Journal of China Tourism Research



ISSN: (Print) (Online) Journal homepage: https://www.tandfonline.com/loi/wctr20

# Developing Health Tourism in a Gaming City: Stakeholder Perceptions of a Proposed Strategy

Ming Liu, Jieqi Guan, Lianping Ren, Huijun Yang & Yang Zhuang

**To cite this article:** Ming Liu, Jieqi Guan, Lianping Ren, Huijun Yang & Yang Zhuang (2023): Developing Health Tourism in a Gaming City: Stakeholder Perceptions of a Proposed Strategy, Journal of China Tourism Research, DOI: 10.1080/19388160.2023.2177786

To link to this article: <a href="https://doi.org/10.1080/19388160.2023.2177786">https://doi.org/10.1080/19388160.2023.2177786</a>

	Published online: 15 Feb 2023.
	Submit your article to this journal $oldsymbol{arGeta}$
Q <sup>L</sup>	View related articles ☑
CrossMark	View Crossmark data ☑





# Developing Health Tourism in a Gaming City: Stakeholder Perceptions of a Proposed Strategy

Ming Liu (10<sup>a</sup>, Jieqi Guan (10<sup>b</sup>, Lianping Ren (10<sup>c</sup>, Huijun Yang (10<sup>b</sup>) and Yang Zhuang (10<sup>d</sup>)

<sup>a</sup>Macao SAR, Faculty of Business Administration, University of Macau, Macau, China; <sup>b</sup>School of Hospitality Management, Macao Institute for Tourism Studies, Macao, China; <sup>c</sup>School of Hospitality Management/ School of Tourism Management, Macao Institute for Tourism Studies, Macao, China; <sup>d</sup>School of Hotel and Tourism Management, The Hong Kong Polytechnic University, Hong Kong, China

#### **ABSTRACT**

Macao, a tourism city and a special administrative region of China, is known for its gaming industry, which accounts for the majority of its local GDP. But its singular economy has invoked much concern, especially when it is severely hit by the recent pandemic. Among others, the development of health tourism has been one of the diversification and sustainable strategies proposed. This study explores the potential and feasibility of this seemingly out-of-tune strategic proposal. Sixteen purposefully selected informants representing key strategic perspectives were approached and interviewed including academics and practitioners in health, wellness, medical and tourism fields, government legislative advisors and research institutes/associations in coordinated fields. Thematic analysis reveals an optimistic prospect in developing wellness tourism and a selection of medical tourism in Macao, capitalizing on the key trends identified, and a unique combination of VRIO (value, rarity, imitability, organization) resources and distinctive competencies that is only available in Macao. Possible implementation has also been discussed. The study contributes to scholarly knowledge of strategic visioning process.

### 在博彩城市发展健康旅游: 利益相关者对—项战略提案的认知

澳门是中国一个以博彩业闻名且富有特色的旅游城市。博彩业带来的营收是当地生产总值的最主要来源。然而,这种单一经济产业模式早前已引起了不少隐忧。特别是在遭受了新冠疫情全球大流行后,澳门经济着实受到重创。发展健康旅游已经进入澳门适度经济多元化和可持续发展的重要战略考虑范围。本文旨在探讨了这一貌似'离经叛道'的战略型提议真正落实的可能性和可行性。一共有16位代表关键战略性观点的利益相关者被挑选出来参与采访,包括健康、保健、医疗和旅游领域的学术人士、专业人士或从业人员、政府立法会委员和相关协调领域的机构或协会。透过主题分析法发现,澳门发展休闲旅游和医疗旅游的前景乐观,此举不但把握了健康旅游发展的主要趋势,还能结合澳门独有的VRIO (价值、稀缺性、可模仿性和组织)资源和特色竞争力。文末讨论了可行的实施办法,对战略愿景规划的学术知识做出了贡献。

#### **ARTICLE HISTORY**

Received 29 June 2022 Accepted 11 December 2022

#### **KEYWORDS**

Health tourism; sustainable competitive advantages; gaming; Macao; strategic visioning; stakeholder

#### 关键词

健康旅遊; 可持續競爭優勢; 博彩業; 澳門; 戰略願景; 利益相關者

#### 1. Introduction

Macao, a tourism city and a special administrative region of China, is known for its gaming industry, which accounts for more than 60% of its local GDP during 2010-2019 (DSEC, 2020). Before pandemic, Macao was the world's fast-growing gambling capital after the liberalization of the gambling industry toward the international market since 2012. However, the launch of the anti-corruption action in China in late 2012 discouraged the conspicuous consumption, and some high rollers and premium mass players were also refrained from visiting Macao (Liu et al., 2015). In addition, gaming tourism is increasingly popular in other Asian countries, such as South Korea, Singapore and Japan. The increasing regional competitions have brought dynamic challenges to Macao. In recent years, the local government has realized the negative side of over-reliance on the gaming industry. The Chief Executive of Macao SAR has mentioned for around two decades that strengthening non-gaming and economic diversification is a success factor to promote Macao as a world center of tourism and leisure. Statistics for June 2020 showed that the gross gaming revenue was 716 million Patacas, a decrease of 97.0% compared with that of the same period last year because of the impact of the COVID-19 epidemic, which has exposed Macao's shortcomings with 'singular economy' and the need to strengthen diversified industries (MSCS, 2021). In addition, the pandemic heavily hit Macao's 'singular economy' with sustained financial losses over a long period of time (Visual capitalist, 2020). This situation further revealed the necessity and urgency of economic diversification (Analytica, 2019; Liu, Liu, et al., 2021). Therefore, Macao's policy makers and industry practitioners are under significant pressure to diversify tourism attractions for avoiding heavy reliance on the gaming sector (Liu, Liu, et al., 2021).

With this new direction, various diversification proposals and initiatives have been presented for discussion. For example, the review report of Macao Tourism Industry Development Master Plan released from Macao Government Tourism Office in 2021 proposed the improvement area in extending the tourism industry chain to promote a moderately diversified economy. The idea of 'Tourism + health' is mentioned which is to use tourism as a carrier to drive the development of comprehensive health services in Macao (DMP, 2021). The addition of new industry elements can also supplement and enrich existing tourism products, thereby attracting more tourists to Macao and extending their stay. In the future, Macao will continue to explore the cross-border integration of 'Tourism +,' strive to enrich the form of the tourism industry and promote the common development of leisure tourism and various emerging industries included proposals such as water tourism, retail experience and expanding the MICE industry (MGTO, 2021).

As aforementioned, among all the diversification proposals, developing health tourism emerged as a potential area for discussion. Macao has good potential to attract the gray market, which often goes after tourism destinations with health orientation. The Chinese central government also encourages cities in the Guandong – Hong Kong – Macao Greater Bay Area (GBA) to develop health tourism as specified in its policy document released in December 2020 (GBA, 2020). For one thing, Macao is located in a pleasant climate zone and with similar culture and language background with the potential market (e.g. GBA and tourists from other mainland cities). For another, Macao has good health tourism resources, such as Chinese traditional medical treatment capacities,

quite a number of private medical/wellness centers and clinics. Early in 2011, Lam et al. already found that there is a definite opportunity for Chinese medical tourism in Macao among Chinese tourists.

However, the feasibility of the above proposal warrants study before it can be adopted. Besides, the exploration toward Macao's competitive advantages is yet to be conducted as the competition in the surrounding areas is getting sharp. Some countries have spared no effort in attracting foreign medical practitioners. Thailand and India have become medical tourism destinations, while countries such as Malaysia are also catching up. The Malaysian government has opened medical tourism to foreigners in last decade. As early as 2010, 392,000 foreigners went to Malaysia for medical tourism, and the number of medical tourists to Malaysia has continued to increase. Most of them perform cardiac surgery, orthopedics, plastic and dental surgery, IVF and health checks. The Malaysian government has also introduced travel medical insurance, which can be covered in the event of medical malpractice (Ormond & Sulianti, 2017).

Accordingly, the present study aims to address the feasibility of the proposal from the perspective of key stakeholders and explore the key competitive advantages for differentiating Macao from nearby medical tourism destinations. Prior studies have shown the importance of stakeholder assessment of development plans (e.g. Araujo & Bramwell, 1999; Tham, 2018). Thus, their views must be incorporated in strategic planning exercises. On the basis of the main findings generated from in-depth interviews, this study analyses the potential of developing health tourism, along with multiple streams of strategic thinking.

#### 2 Literature review

#### 2.1 Health tourism

Health tourism has been on the rise. Factors such as lifestyle change, demand for stress reduction and a transition in the medical prototype toward prevention and alternative practices are among the stimulators for the growth of this tourism sector. Recent studies have observed that health-related tourism would attract attention during the postpandemic era (Chhabra, 2020; Choe & DiGiovine, 2021Stankov et al., 2020; Tatum, 2020).

Health tourism is an overarching concept defined as the sum of all the relationships and phenomena resulting from changing locations and places of residence to improve and stabilize physical, mental and social health (C. G. Lee, 2010; Kaspar, 1990). Recently, UNWTO has defined health tourism from a more holistic view point:

Health tourism covers those types of tourism which have as a primary motivation, the contribution to physical, mental and/or spiritual health through medical and wellness-based activities which increase the capacity of individuals to satisfy their own needs and function better as individuals in their environment and society. (UNWTO, 2018, 11)

Medical tourism and wellness tourism could be regarded as the prominent subcategories of health tourism (Lam et al., 2011). Medical tourism is a combination of common tourism and medical service; it refers to out bound travel for seeking medical treatment (Balaban & Marano, 2010). Wellness tourism focuses on the treatment which can prevent and promote a balanced state of spirit, body and mind; it refers to noninvasive manipulations, such as traditional Chinese medicine and acupuncture treatment, body check, SPA, medical cosmetology, anti-aging therapy, body check and health preservation (M. Smith & Puczkó, 2014; Voigt & Pforr, 2014). Beside the traditional medical and wellness tourism elements, some niche areas are also getting popular in recent years. The '2016 Online Medical Tourism Report' shows that in 2016, the number of orders for medical tourism in China increased five times over the previous year, and the per capita spending exceeded 50,000 yuan. Going abroad for early cancer screening, genetic testing, live cell therapy and vaccine injection has become popular among mid-to-high-end consumers and has become one of the new health tourism items for the Chinese.

#### 2.2 Key attributes of health tourism destinations

As aforementioned, health tourism is one of today's highly thriving sections of the tourism industry in the world, and many countries have been trying to develop it as a high-value tourism product to broaden their tourism base (OECD, 2016), which significantly contributes to the local economy (J. Lee & Kim, 2015). Therefore, how tourists select health tourism destinations becomes important to determine, and the decision process in developing an international health tourism destination is also gaining importance. Offering value to related participants and stakeholders, the major factors in the process include cultural differences, political and economic stability, regulations and legal framework, ease of access, overall quality of care, credibility/trust, physical distance and costs (Yu & Ko, 2012; Aydin & Karamehmet, 2017; Zolfagharian et al., 2018; UNWTO, 2018; Moon & Han, 2018; Mahmud et al., 2021). In addition, entertainment and leisure is also an important reference factor (Moon & Han, 2018). Considering the different health tourism services, distances and types of consumption provided by each tourism destination, tourists are inclined to choose a destination with characteristics.

Cultural difference, including religion, language and eating habits (Aydin & Karamehmet, 2017), is regarded as another important factor in health tourism (Sousa & Bradley, 2008). Political and economic stability leads to a secure environment which affects the safety of health travelers during their stay (P. Smith & Forgione, 2007). Regulatory standards and the legal framework covering government policies and patient confidentiality laws are also important factors in selecting a healthcare tourism destination (York, 2008). The cost saving of health services attracts consumers to healthcare providers in destinations (Connell, 2006). The credibility of the institution/professional can help a health tourism destination enhance its reputation by adopting international accreditation and quality assurance certificates (Aydin & Karamehmet, 2017). Quality of facilities (Connell, 2013) and medical personnel (Herrick, 2007) is closely associated with the process of decision making for medical tourism (J. Lee & Kim, 2015). Ease of access includes social security and health insurance (Cohen, 2012), waiting time (V. C. S. Heung et al., 2011) and convenient accessibility to health destinations (J. Lee & Kim, 2015). Health travelers may be deterred by long distances and travel-related discomfort (Vequist et al., 2009). In addition, J. Lee and Kim (2015) indicated that climate and location are valuable factors of health tourism.



#### 2.3 Strategic planning and stakeholder engagement

To develop a popular health tourism destination, strategic planning is necessary to create long-term conformity between managerial targets and changing market opportunities. Almost all practices and operations related to tourism need to be based on a strategic plan (Phillips & Moutinho, 2014). Tourism is a sector of multiple related industries, and the strategy toward tourism development operates at different levels (local, regional, national). Therefore, it can be analyzed for the feasible strategy adopted, its focus, governance, stakeholders involved and time frames (Stokes, 2008).

#### 2.3.1 Competitive advantages and resource-based theory

Conscious planning is essential to prevent or decrease the negative impacts of tourism and to facilitate and strengthen its competitive advantages and positive influence (Ratz & Puczkó, 2002). Competitive strategy identifies the industry as the basic unit of analysis, product/service as the basic unit of business and the position in relation to its competitors (Okumus et al., 2010). It was built on the definition of strategic planning which integrates national strategies, regional developments, local destination and site management (M. Smith & Puczkó, 2009). Destinations can develop many types of health modalities and experiences. Experience would ideally be generated from competitive advantages of the destination (Bushell & Sheldon, 2009). Thus, during strategic planning, one of the basic questions during strategic planning is how to identify and sustain these competitive advantages (Teece et al., 1997).

In this study, the definition of competitive advantages is adopted from resource-based theory (RBT) (Horng & Tsai, 2012). Resource-based competitive advantages are accessed according to three main factors, namely, value, rarity and imitability (Corte & Aria, 2016). Value is the capacity of the resources to eliminate external threats and/or seize or create opportunities to increase revenue and cost differences; rarity is reflected by the control of resource/capability in the hands of a relative few; and imitability refers to the difficulty or cost to obtain, develop or duplicate the resource. These factors are included in the well-known VRIO framework (Barney, 1991). When a resource is valuable, it can be used to evaluate competitiveness; when it is rare, it can create a temporary competitive advantage; if it is difficult to imitate or if the cost of imitating is very high, it can become a source of sustainable competitive advantages (Corte & Aria, 2016; Okumus et al., 2010) also established a framework for identifying sustainable competitive advantages according to the similar school of thought. It emphasizes the resources and capabilities which need to be ensured in the first place. Then, strategies are developed to link up resources and capabilities and, consequently, sustain the competitive advantages.

In view of the competitive advantages of Macao, safety can be an inimitable factors. To become a wellness tourism destination, a society with a high degree of stability in political operations and economic activity is clearly conducive to win the market. Such a society provides a peaceful and safe environment for medical tourists to enjoy local medical services with confidence is more desirable (Aydin & Karamehmet, 2017). Despite the pandemic, it is hard to say that a destination is completely safe as tourists have to take into account the risk of contracting the coronavirus when they travel there. However, Abbaspour et al. (2021) argue that until the end of the epidemic, most tourists are still willing to return to travel destinations they are familiar with in the past. As of early

April 2022, Macau has reported only 82 cases of COVID-19 (Macao Health Bureau, 2022). Compared with other countries or cities with large outbreaks, Macau may indeed be a relatively safe tourist destination with suitable distance and similar culture background where Chinese tourists are preferable. In addition, in the current study, 'social security' can also generally refer to a situation in which the society does not have frequent threats of criminal behavior, terrorism, food safety, transportation, and natural disasters (Cham et al., 2021). Macau's per capita GDP is higher than all Chinese cities (World Bank, 2022), and its economic strength is very strong. Due to the good economic environment, in the past few decades, there have been very few social movements in Macau.

Besides, the high service quality of the hospitality industries in Macao is deemed a valuable resource. The quality of service that customers feel can influence their decision to choose a wellness tourism destination. For reasons of timeliness, many tourists prefer to obtain more high-quality services abroad (V. C. Heung et al., 2010). Chia and Liao (2021) also believe that due to the large gap between the medical equipment and service level in mainland China and some overseas countries, many tourists for health care tourism prefer to go abroad for medical treatment. Furthermore, high-quality service can increase customer satisfaction, promote the competitiveness of the destination, and build long-term loyalty with customers (Zarei & Maleki, 2019). As far as the tourism industry is concerned, hospitality services in hotels are as important as medical services, and both the expertise and the level of service provided by the hotel can directly influence the choice of wellness tourism destinations by customers (Sadeh & Garkaz, 2019). In addition, the most prominent advantage of Macao medical system is that it has a sound primary medical care network. There is only one large public hospital in Macao, but community health care stations cover every neighbor blocks. Eight community health centers constitute the primary medical service network in Macao. Macau residents should not walk more than 15 minutes to the nearest community medical service point from their homes. Besides, there are also many local provide medical centers and clinics which provides sound basis for developing health tourism. In this study, more VRIO resources of Macao to be a potential health tourism destination are identified via the indepth interview as discussed in the later sections.

#### 2.3.2 Stakeholder perspective

During strategic planning, the opinions/concerns of stakeholders must be considered because the competitiveness and sustainability of tourism destination are difficult to be achieved without their engagement and support (Beritelli et al., 2015). Therefore, successful strategic planning needs to include stakeholders at each stage of strategic development and implementation (Beritelli et al., 2015; Komppula, 2014). Freeman (1984, p. vi) defined a stakeholder as any group or individual who can affect or is affected by the achievement of an organization's purpose. For tourism development, the number and types of stakeholders involved in strategy processes depend on whether or not the political economy view or a functionalist view is adopted. The former view reveals that planning entities generally make decisions about stakeholder engagement based on self-interest (Stokes, 2008, p. 255). For example, 2011) focused on the views of public sector officials in their study related to planning and developing tourism. The latter emphasizes that all interested stakeholders should contribute to strategies which are based on

normative theory (Dimitrovski et al., 2021; Stokes, 2008, p. 255). Normative stakeholder theory focuses on the function or guidelines for tourism management and development with the involvement of all interested groups (Lin, 2021). Given health tourism having cross-sector nature and associating with a wide range of stakeholders, the normative approach is with more implication in identifying feasible development strategies. As for Macao, the development of health tourism depends on the joint cooperation and efforts of all sectors of the society and related industries which include hospitality industry, medical industry, the infrastructure and legal sectors as well as academic field (Lam et al., 2011). Macao has world top-class hospitality facilities and sufficient medical resources. Therefore, the viewpoints of stakeholders from hospitality and medical sectors are deemed important. However, as health tourism is an unexplored area in Macao, whether the existing legal system and infrastructure are sufficient and suitable to cope with the needs of developing a new industry is yet to be explored. Thus, stakeholders from other related sectors such as academic, legal and logistic fields are also essential to be approached.

#### 3. Methodology

This study adopted a qualitative approach with in-depth interviews as the main data source to explore the potential of developing health tourism in Macao from the perspective of different stakeholders and understand the strategic visioning of these stakeholders.

#### 3.1 The interviews

Sixteen purposefully selected informants from reputable organizations in the related sectors were approached and interviewed. The informants represent key stakeholders of health tourism development in Macao, including scholars, professionals, practitioners and government legislative advisors specializing in health, medical, tourism, hospitality and coordinated fields (see Table 1). In this study, the focus of informant recruitment is to look for variation and context of their viewpoints rather than enroll a large number of participants (Hennink et al., 2011). The number of informants recruited for this qualitative research is guided by the theoretical principle called 'saturation' (Saunders et al., 2018). When the collected information was redundant, several more interviews were arranged to confirm the saturation. Therefore, the number of participants in this research is guided by the diversity in the information obtained. Table 1 presents the detailed profiles of the informants.

The interview questions are more open ended in structure designed based on the research objectives, with potential of developing health tourism in Macao as the main topic. However, for informants with different backgrounds, conversations are more leaned toward their respective expertise areas, to understand feasibility in different aspects of health tourism development. For example, conversations and discussion topics with informants of medical background are leaned toward the health and medical system in the city and whether or not the medical system has the potential to support such development strategy. Meanwhile, conversations and discussion topics with informants of tourism development and administration background are leaned toward tourism and infrastructure development. However, to achieve the research objective, the questions

Table 1. List of informants.

#	Stakeholder	Organization	Position of Informants	Gender	Age	Solicited perspectives
-	Academic person specializing in health	Macau public High Education Institution (HEI) with school specialized in health sciences and sports	Professor	Female	51–60	Health and medical System, potential for developing
7	related fields	Macau public HEI specialized in nursing	Professor	Female	51–60	health tourism, future development
m	Professionals/practitioners	Leading private hospital in Macau	Vice president	Male	51–60	strategies
4	in Health, Wellness and Medical fields	Private hospital specialized in physical examination and health.	President	Male	41–50	
2		Biotechnology company in Macau	Founder	Female	41–50	
9		Health technology company in Macau	President	Female	31–40	
7		Local doctor association/local association of cardiovascular interventions/International institute in cardiovascular racearch field/Private medical institute	Vice president/ President of Administrative	Male	51–60	
		ביינים וויינים	Council/ Fellow/Doctor			
∞	Government legislative advisor	Legislative assembly, Macau SAR	Member	Male	61–70	
6	Academic specializing in	Macau public HEI with faculty specialized in integrated	Assistant dean	Male	41–50	Tourism environment, potential for
	tourism and hospitality fields	resort management	(Associate professor)			developing health tourism, future development strategies
10		Private HEI with faculty specialized in hospitality and	Dean (Professor)	Male	61–70	
		CONTINUI III aliagellielit				
=	Professionals/practioners in tourism and	Local hoteliers & Innkeepers association/Leading state- owned travel service agency (Macau branch).	Vice President	Male	51–60	
12	hospitality	Local hotel association/local Hotel, Macau	Vice president/ General	Male	61–70	
			manager			
13	Research Institute/ Association in	Local association in legal studies	President of Administrative	Male	51–60	Coordinated policies (transport, logistics,
	coordinated fields		Council			development, legal system and etc.)
14		Local association in city development research filed	President	Male	61–70	
15		International institute in logistics and transport field (Macao branch)	President	Male	51–60	
16		Local institute in sustainable development field/leading private HEI	Director/ Professor	Male	41–50	



revolved around the following areas in general which were generated based on the literature reviewed in the former sections:

- (1) Environment and trend (Taturn, 2020; Stankov et al., 2020; Chhabra, 2020; Choe & DiGiovine, 2021);
- (2) Potential and foundation in developing health tourism in Macao (Yu & Ko, 2012; Aydin & Karamehmet, 2017; Zolfagharian et al., 2018; UNWTO, 2018; Moon & Han, 2018; Mahmud et al., 2020);
- (3) Key resources available in Macao, including VRIO resources (Barney, 1991; Okumus et al., 2010);
- (4) Competitiveness of Macao in developing health tourism, compared with nearby destinations (Zarei & Maleki, 2019);
- (5) Alignment of developing health tourism with the strategic direction of Macao;
- (6) Strategic thinking on the 'how' part (Phillips & Moutinho, 2014);
- (7) Key challenges and obstacles, as well as solutions (Stokes, 2008).

#### 3.2 Interview process

Before conducting interviews, the Informants were provided with necessary information, including objectives of the research, main question areas, information of the research team and estimated length of the interview, by sending the interview confirmation through e-mail in advance. This information was further clarified before interview starts. The interviews were conducted from December 2020 to February 2022 in a face-to-face manner. The venues of the interviews were mostly in places at the Informants' convenience, either at their office, restaurants or cafés nearby, so that they Informants felt less anxious about their work schedules. Each interview lasted for about 45 minutes on average. The interviews were conducted in Chinese language and recorded upon obtaining their consent. Transcripts were prepared shortly after the interviews.

#### 3.3 Content analysis

Inductive content analysis, which includes creating small chunks of the data and then placing a code with each chunk, was applied. These codes were placed into similar groupings. Within Morgan's (1997) three-element coding framework, classical content analysis with interview data can be performed in three ways: (a) the analyst can identify whether or not each participant used a given code, (b) the analyst can assess whether or not each Informant used a given code and (c) the analyst can identify all instances of a given code.

Familiarity with the qualitative data was gained through a thorough overview of all the data prior to coding. Initial labels/codes were devised based on phrases or sentences relating to the above chunks. Each code described a specific factor, resource, challenge or obstacle expressed by a participant. All data were collated into groups identified by a code, which helped provide a condensed overview of commonly recurring topics in the qualitative data. These patterns were reviewed, and several codes were combined into single themes. Finally, each theme was given a succinct and easily understandable name (see Tables 2 and 3) to describe the main results.

#### 4. Findings and discussions

The above in-depth interviews led to insights on issues related to strategic visioning and feasibility considerations, including environment scanning, key resources and competencies for developing health tourism in Macao, challenges and obstacles ahead and areas where good potentials and competitive advantages can be envisaged. The following subsections present the rationales and strategic thinking of stakeholders in the above areas. Secondary data (published statistics) were included to support the stakeholders' argument.

#### 4.1 Environmental scanning

Environmental scanning covers two correlated areas: remote and immediate environmental analyses. The former mainly focuses on factors from the international, national and regional perspectives, whereas the latter concentrates on the elements of task and industrial environment, which is more at the local and close regional level.

#### 4.1.1 Remote environment

Not coincidentally, almost every informant mentioned that tourists from Mainland China could be the main source of potential customers for health tourism in Macao. As of 2019, the number of domestic tourists was 6.006 billion, an increase of 8.4% over the same period of the previous year. Domestic tourism revenue was U\$\\$0.85 trillion, an increase of 11.7% over the same period of the previous year (Yan, 2020). In recent years, the continuous improvement of living standards has increased people's desire for a healthy environment (Informants 12 &14). After the COVID-19 pandemic, people's awareness of health further increased (Informants 2, 5, 11).

Health care will be the general trend in the future. Health tourism will usher in a new turning point or will gain a larger market share and explosive growth (Informants 2, 4, 7, 11, 12). Statistics show more than 100 countries and regions in the world carry out health tourism at present. In 2017, the global health tourism market reached approximately US \$678.5 billion in revenue, a full increase of nearly US\$240 billion from the market revenue of US\$438.6 billion in 2012, with a compound growth rate of 9.12% (Forward, 2020). In China, almost 10% of the income is consumed for medical and health products/ services, a 12.9% increase compared with that in 2018 (STAT, 2019). Industry players also believe the market has very large potential for development as mentioned by Informant 11.

The Chinese people's awareness of health care has generally increased, especially the grey-hair generation. With this as the background, a vital demand group and new demand desires have been generated for the development of health tourism industry.

-Informant 11

In 2015, domestic health tourism accounts for only about 1% of the scale of tourism transactions. The total transaction scale of China's tourism market was US\$62 billion, and the transaction scale of health tourism was about US\$6 billion. From 2016 to 2020, The market scale of health tourism in China showed rapid growth, with a compound annual growth rate around 20% (Forward, 2020). Referring to a report released by



Table 2. Environment, resources and competencies.

Dimension	ltems	±	References (Informants)
Remote environment	Changing lifestyle (health oriented) Longer life expectancy and increasing gray- hair market	+	#1,#5,#11 #4,#5,#6#12
	'Big health' industry	+	#4,#5,#16
	Favorable political environment in the main source markets		#1,#4,#6,#7,#9,#11, #14
	Favorable economic conditions in source markets	+	#1,#11,#12,#14
	COVID-19 as a stimulator to enhance demand in health tourism	+	#2,#5,#11
	Increasing demand in health oriented tourism	+	#2,#4,#7,#11,#12
Immediate environment (task environment and industry environment)	Increasing trend of tourist arrival (customer base)	+	#3,#5,#6,#7, #10,#11, #14
	High demand from local and regional markets	+	#6,#9,#11
	Significant fiscal expenditure on health care	+	#8,#12
	Public security in Macao	+	#2,#3,#14
	No import tax/easy access to imported products	+	#1,#2,#3,#4,#8,#15
	Good access to international/regional resource and expertise	+	#2,#7,#11,#13
	Pleasant climate in this region	+	#5,#11,#14
	Efficient approval procedures for medical equipment and medicines	+	#4,#5,#6,#7,#8
	Close proximity to main	+	#1,#2,#3,#4,#5,#10,
	source market		#11,#12,#15
	Competition from nearby destinations	-	#3,#9,#14,#15,#16
	High labor cost and legal constrains	-	#3,#4, #13
	Limited natural sceneries	-	#14,#16
	Limited land and space	-	#1, #2,#13,#14
	Limited medical cases and training	-	#2,#6,#7,#10
	Constraint in medical service providers	-	#1,#3,#4, #6,#7,#8, #10
	High medical cost in Macao	-	#3,#11,#12
Key resources and competencies	Chinese medicine		#3,#6,#9,#10,#11,#12 #14,#16
	UNESCO listed City of Gastronomy		#2,#10,#11,#12
	First-class hospitality facility		#2,#3,#4,#6,#9,#10, #11,#12,#14,#16
	Superior service quality		#1,#2,#4,#6,#10,#15
	Popular tourism destination		#2,#3,#6,#7,#11,#12 #14
	World Center of Tourism and Leisure		#3,#5,#10,#11
	Favorable social and cultural environment		#1,#2, #3,#5,#6, #7, #9,#11,#14
	Close inter-sector collaboration		#2,#3,#5,#11
	Diversified medical insurance products Private medical resources		#3,4,8 #1,#3,#4,#6,#7,#8, #12,#14,#15

Note: Remark:  $'\pm'$  denotes positive and negative factors for developing health tourism.

Sequoia Capital (2019), the first two baby booms in China after 1949 have led to nearly 250 million elderly people, and the health care industry has thus ushered in development. As of 2018, the number of people aged 60 and over in China reached 249.49 million, which accounted for 17.9% of the total population with an increase of more than 40% compared with that in 2010. With the acceleration of China's 'aging' situation, the lack of resources for the elderly, the imbalance and low efficiency of the medical system have

Table 3. Environment, resource and competencies and potential products.

No.	ltems	P1 All inclusive wellness travel	P2 Grey-hair wellness tourism	P3 A selection of medical tourism products
1	Increasing demand in health- oriented tourism	V		
2	Increasing trend of tourist arrivals	$\checkmark$	$\checkmark$	
3	Changing lifestyles – health orientation	$\checkmark$	$\checkmark$	$\checkmark$
4	Longer life expectancy and increasing gray-hair market		$\checkmark$	
5	No import tax/easy access to imported products	$\checkmark$		$\checkmark$
6	Pleasant climate in this region	$\checkmark$	$\checkmark$	√
7	Limited land area/natural sceneries			√
8	High labor cost and legal constraint			√
9	Constraint in medical service providers			$\checkmark$
10	World Center of Tourism and Leisure	$\checkmark$	$\checkmark$	√
11	First class hospitality facility	$\checkmark$	$\checkmark$	√
12	Popular tourism destination	$\checkmark$		√
13	UNESCO listed City of Gastronomy	$\checkmark$	$\checkmark$	√
14	Favorable social and cultural elements	$\checkmark$	$\checkmark$	
15	Close inter-sector collaboration	$\checkmark$	$\checkmark$	√
16	Superior service quality	$\sqrt{}$	V	V
17	Chinese medicine	$\sqrt{}$	V	V
18	Private medical resource	·	V	V

become a problem to be solved. Therefore, many patients from Mainland China prefer the environment in Hong Kong and Macao, mentioned by the informants from the medical and tourism sectors.

The population base of patients in the Mainland is too large. My patients say that it is difficult to find the medical resources in the Mainland that can match with the quality of that in Macao. —Informant 7

In addition to the aforementioned factors, the political environment in Mainland China is also favorable for Macao to develop health tourism. In recent years, the mini-break /one-week holiday and more convenient cross-border mobility policies implemented by the central government have made Macao a preferred destination for many Mainland tourists (Informants 4, 7, 9, 11). In addition, the GBA tourism plan initialed by the government of Guangdong Province also encourages Macao to reinforce its role as a world center of tourism and leisure (Informant 11).

ICT has also become the cornerstone of the development of modern society. The central government provides support and guidance in promoting investment in information and communication infrastructure construction, encouraging technological innovation and regulating industry competition (Huawai, 2018). In recent years, the rapid development of ICT (Informants 15 &16), the improvement in information transparency and the trend of using social media (Informant 11) in Mainland China are conducive to the spread of Macao's tourism products/services, good reputation and high-quality service (Informants 1, 3, 6, 11, 12, 14).



#### 4.1.2 Immediate environment

As for Macao, many informants mentioned the large tourist base provides a prerequisite for developing health tourism (Informants 3, 5, 6, 7, 10, 11, 14). Visitors from Mainland China occupied 71% of the total tourist population during the first 9 months in 2019 (DSEC, 2019). The consumption of non-local visitors for tourism purpose accounted for more than 60% of GDP in the same period in the past 10 years (2009–2018) (Tang, 2020). The large tourist population also benefited from Macao's close proximity to the Mainland market (Informants 2, 3, 4, 5, 10, 11, 12, 15) and its pleasant climate (Informants 5, 11, 14).

At the same time, 'the investment in health care and medical system by the local government shows an increasing trend in recent years' (Informant 8). In fact, it is expected to reach US\$1.5 billion in 2021 (Policy address, 2020). Almost every informant from the health and medical fields emphasizes that compared with Mainland China, Macao has more advanced medicine and equipment imported from overseas countries. It also features an even more efficient supervision and approval system for new medicine and equipment than Hong Kong. According to a member of the Legislative Assembly of Macao.

For developing health tourism, convenient channels of obtaining advanced equipment and medicines are very essential. Macao has faster and more convenient access to new medicines and equipment than Mainland and Hong Kong. Generally, if a new medicine is registered and marketed in Europe or the United States, the Health Bureau of Macao SAR can immediately approve the import of medicine for local use. —Informant 8

Macao also has good assess to international/regional resource and expertise. The collaboration between the Mainland and Macao government has become closer. Since the signing of the 'Guangdong-Macao Cooperation Framework Agreement' in 2011, the Health Bureau has signed cooperation agreements with various medical institutions in Guangdong Province, including personnel training, emergency rescue and case referral. Moreover, Macao and the Mainland have signed a medical and health cooperation agreement to increase the mobility and exchange of technical personnel. The communication in the medical field also has political significance:

From a political point of view, Macao has the conditions to attract outstanding doctors from Hong Kong SAR, Taiwan and the Mainland. Take the advantage of "One Country, Two System," it can help many professionals to learn from each other in Macao. —Informant 7

Public security condition is a necessary consideration for health tourism. In the 2019 Ranking List of Competitive Advantages of Global Countries (Cities) announced in Hong Kong, Macao becomes the safest city in China by occupying the first place in the list with 96.02 points (Pou, 2019). This announcement was also mentioned by the informant of the association in city development field.

All aforementioned factors are favorable to the health tourism development. However, the informants did emphasize some unfavorable immediate environmental factors which may become barriers for developing health tourism. The inherent disadvantage mentioned by several Informants is the 'limited nature sceneries, land and space in Macao' (Informant 2,13,14,16). When climate change is accelerated and the natural and leisure environment becomes increasingly scarce due to urbanization, people begin to pay more

and more attention to sustainable development. However, Macao lacks natural sceneries and land resources which are considered as critical for developing health tourism.

Macao's major problem is limited land area and lack of natural sceneries. Although Coloane island still has areas for development and utilisation, it lacks beautiful bay and the seawater quality is not good as well. —Informant 14

The intense competition from nearby destinations, high labor cost and legal constrains also cannot be neglected (Informants 3, 9, 14, 15, 16).

I personally experienced the physical examination services in Thailand. In addition to their high quality and low-price service, they also have enough manpower. This is their very important advantage. But in Macao, local human resources in the service industry are very expensive and in short supply. The current policy is not conducive for bringing a large number of foreign labours. Therefore, policy coordination is still needed in this regard. — Informant 3

The high labor cost not only has impact on service industry but also leads to the high medical cost compared with nearby regions and cities. Although the overall medical cost in Macao is lower than that of neighboring Hong Kong and Japan, it is much higher than that of Taiwan, Thailand and Mainland cities (Informants 3, 11, 12).

Another two negative factors identified during the interview process are constraint in medical service providers and limited medical cases and training. Most of the Informants from the medical field pointed out that relevant laws and regulations of Macao prohibit any medical institution from conducting marketing promotion or advertising activities to avoid the risk of excessive publicity (Informants 3, 4, 6, 7, 8, 10). Moreover, Macao only has around 600,000 plus residents; hence, the number of difficult cases encountered by doctors is limited, and the skills and related training in relevant area are also limited (Informants 2, 6, 7, 10). Thus, the development of health tourism will be inhibited to a certain extent, especially in the initial development stage of the industry.

#### 4.2 Resources and competencies

According to the RBT as mentioned in the literature review section, the resources of an industry are an important basis for its sustainable competitive advantage (Barney, 1991; Okumus et al., 2010. In this section, several VRIO resources are identified, which could be turned into sustainable competitive advantages for developing health tourism with the interaction of some positive environmental factors.

Most of the Informants emphasized that the first-class hospitality facilities, superior service quality and popular tourism attractions can be considered as valuable resources.

'Macao's traditional education in medical discipline is an excellent service system. Doctors and nurses are very considerate to patients. this comparative advantage can be brought into play'.—Informant 1

'The tourism service industry has a solid foundation. Macao has a variety number of tourism and leisure attractions and facilities that meet different levels' tourism purpose'.— Informant 11

As outbound visa restriction is always a demotivated factor for health tourism, some tourists may turn to visit Macao due to the time-consuming visa/entry permission application procedures of oversea countries, such as Japan, Korea and Thailand. Considering that the improved cross-border policy makes it more convenient to travel between the Mainland and Macao, more and more people consult with the medical intermediary platform about the service and product in Macao because of its international credibility, good hotel facilities and high service quality as mentioned above.

In addition, the insurance legislation system is relatively tight in Mainland China, and the medical insurance products are less attractive and with higher cost compared with those of Macao as Macao has more diversified insurance products under a better insurance environment (Informants 3, 4, 8). Statistics also shows that the gross premiums of non-life insurance policies in Macao reached US\$361 million in 2019, an increase of 16% compared with that of the prior year (AMCM, 2019). Therefore, in concert with the related insurance products, health tourism will be more attractive and can also drive for more consumption.

Furthermore, Macao has sufficient human resources and manpower in health-related sectors. Hence, good customer experience can be ensured while outstanding international credibility has been widely recognized. According to the recent statistics (Wu, 2019), the manpower indicator of doctors in Macao is higher than that of the Mainland and neighboring Singapore, Japan, South Korea and Hong Kong, and the number of nurses/midwives in Macao is higher than that in the Mainland.

In general, the medical and nursing human resources in Macao are in a good and stable state, the main medical and nursing manpower is at a medium to high level, and the reserve of pharmacists is abundant. —Informant 1

Moreover, replying the one country, two system platform and low tax mechanism, Macao has attracted many diversified skilled talents from Mainland China, Hong Kong SAR, Taiwan and other countries (Informants 7, 13), which will contribute to the formation of sustainable competitive advantage for developing health tourism.

Macao also has some inimitable competencies. On the one hand, Macao has the national key laboratory in the field of traditional Chinese medicine, which unique in China (Informants 5, 10, 11, 12). With the gradual establishment of the 'production learning-research' chain, Macao's traditional Chinese medicine industry is experiencing vigorous development. According to statistics, the added value of Macao's traditional Chinese medicine industry reached US\$40 million in 2017, opening up new and broad prospects for the diversified economic development of Macao (People's Daily, 2020). On the other hand, in 2017, Macao was assessed by UNESCO as the 'Creative City of Gastronomy.' Only eight cities in the world have this reputation. If Macao can further integrate its tourism industry with Chinese medicine and gastronomy industries, nonimitable tourism products comparing to its competitors will emerge (Informants 5, 10, 12).

Lastly, the favorable social and cultural environment and close inter-sector collaboration are also important for building up sustainable competitive advantages.

'Macao has particularly good cultural atmosphere, and the relationship between people is harmonious, people treat each other kindly. With this basis, an integration can be made among various disciplines smoothly'.—Informant 3

According to Barney (1991), the persistence of competitive advantages is mainly stimulated by the core resources possessed by the industry with certain characteristics. These characteristics are difficult for competitors to imitate and construct similar core resources or to use similar resources to produce the same value, thereby maintaining the competitive advantages of the industry. Therefore, the interview results and findings indicate that Macao's heterogeneous resources will be transformed into sustained competitive advantages for developing health tourism through the complementation and integration of various resources, competencies and favorable environmental factors.

#### 4.3 Challenges and obstacles

Opportunities and challenges always coexist. While analyzing the macro environment and competitive advantages of Macao, the informants also pointed out several potential challenges and threats faced by Macao. The challenges for developing medical oriented tourism (e.g. prohibition of marketing and promotion, restriction on medicine to private sector and less advanced medical level) are caused by the conservative medical supervision and governance system (constraint in medical service providers) and tight labor law (Informants 1, 3, 4, 6, 7, 8, 10, 13). Informants from medical-related sectors invoke the local government to open market to the private sector while improving/reinforcing supervision mechanism (Informants 1, 3, 4, 6, 8). They also suggested that the related authorities formulate policies to attract global medical talents and strengthen technical cooperation and knowledge exchange with neighboring regions and cities, especially GBA. As for the cost issues such as high medical cost and high labor cost, high-end customers with high quality service should be targeted, and visa restriction needs to be released for medical tourists to increase customer volume. As for wellness-oriented tourism, aside from the high labor cost, intense competition from nearby cities and countries (e.g. Thailand, Singapore, Hong Kong) is also a key area of concern (Informants 9, 10, 12, 13, 14, 16).

#### 4.4 Developing health tourism as a new competitive advantage in Macao – what and how

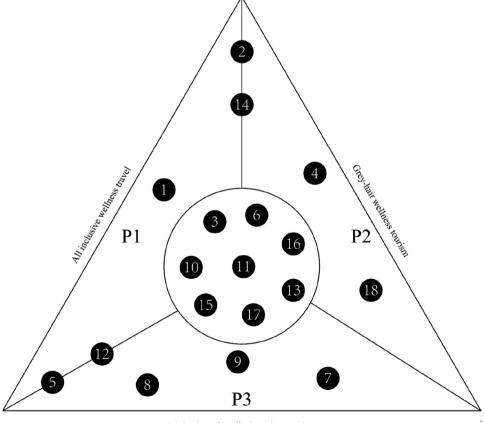
The above findings have delineated relevant remote environmental factors with opportunities ahead. Close environment factors include customer base, local legal environment, local economic development strategies, intensity of competition, and labor market, as well as the unique resources and competencies which are available in Macao for strategizing possible development of health tourism products and service. The Table 2 below displays a summary.

#### 4.4.1 Developing wellness tourism in Macao

Macao possesses a few superior resources, including world-class tourism facilities, superior service, food and beverage expertise, leisure facility and expertise in Chinese traditional medicine, and riding on the main trends and opportunities such as the potential of the 'big health' industry. Thus, it has a good potential in developing wellness tourism. Potential products to be offered include all-inclusive wellness tourism package (P1 in Figure 1) and gray-hair wellness tourism (P2 in Figure 1). Examples for P1 might be tailor-made packages including components, such as Chinese doctor consultation, spa and dietary treatment, in addition to high-end accommodation and leisure components. Examples for P2 might include specially designed holiday package for the high-end grayhair market, with special care elements. Both product categories target at the high-end tourist segments, rather than mass tourists, to avoid the constraints that city has.

#### 4.4.2 Developing a selection of medical tourism

Macao is constrained in land areas, high labor cost, medical service providers and legal framework regarding extending medical service to tourists. Therefore, Macao has limited potential in developing mass-scale medical tourism products similar to what Thailand and other destinations are offering. However, Macao still enjoys a few unique advantages which could potentially lead to the development of a selection of medical services to tourists. For example, as the informants have commented, Macao has access to imported medical products which are often not easily accessible to the target market (tourists from Mainland China), such as HPV vaccine (as Informant 3 suggested). Well-off families with young females would potentially choose Macao as a destination for HPV injection while enjoying tourism. The availability of high-end private medical provisions and services (such as genetic testing) might also attract other well-off tourist segments to receive medical treatment while enjoying luxury tourism experience in Macao. The suggested medical tourism products will be able to maximize the key resources available



A selection of medical tourism products

Figure 1. Potential health tourism products.



in Macao while avoiding being trapped by various constraints, such as the visa issue and the small scale of the current private medical providers in Macao.

#### 4.4.3 Implementation

As many informants would agree, the general trend of tourism consumption will not change with the epidemic. However, the epidemic will boost market demand for some tourism products, or a wave of 'retaliatory' consumption will occur after the epidemic is over. How Macao can ride with the trends, catch the opportunities and create healthoriented tourism products becomes an urgent agenda. Taking the informants analysis and discussions together, here are a few suggestions for implementation.

Firstly, entrepreneurs and businesses should be completely aware of the big trends, opportunities and resources available to capture opportunities in a timely manner. Closely monitoring the changing environment is necessary. Major change agents such as COVID-19 easily disrupt the trends and create or eliminate opportunities. However, constraints and shortcomings need to be realistically addressed. Strategic positioning of the product areas and how health tourism products supplement the tourism industry as a whole in Macao while being in line with the city's strategic direction is important to be in line with the principles of strategic planning as specified by experts (e.g. Edgell et al., 2008; Nematpour et al., 2021).

Secondly, businesses must adhere to the critical success factors for the health tourism industry. The recommended products above are able to correspond to the critical success factors as discussed in literature. In terms of social environment, Macao is a city with the lowest crime rate in the world, as commented by the informants, with favorable social and cultural environment where visitors can feel at ease (e.g. Aydin & Karamehmet, 2017; P. Smith & Forgione, 2007). In terms of location, Macao enjoys close proximity to the main source market, which considerably lowers monetary and time cost spent on the way. This is equally important echoing scholars, such as Yu and Ko (2012). Importantly, the tourism and hospitality industry in Macao can support the proposed products, which consequently add value to the tourism industry. As for the health care system in Macao, quality assurance in medication and personnel is present, although much constraint in scale still exists. As the informants noted, everyone in Macao is geared toward tourism development in the city and is familiar with the needs of the tourists, including the medical staff.

Thirdly, the above proposed products entail seamless collaboration and cooperation among different service sectors, including at least the medical sector/wellness or health care businesses and the key hospitality and tourism sectors. Cross sectional collaboration is a common practice in the tourism industry. The government in Macao has been promoting the concept of 'Tourism Plus,' which means that the tourism industry needs to collaborate with other service sectors to provide diversified tourism products to accommodate the ever-changing needs of the tourists. Collaboration is crucial in achieving sustainable development in tourism (Graci, 2013). However, successful collaboration depends on a few things, such as establishing common goals and a mutually agreed framework to implement joint actions, and other issues, such as coordination and communication. Therefore, much ground work needs to be established before health tourism products are offered. The good thing is that Macao has already a tradition of close inter-sector collaboration, as commented by Informant 4.



#### 4.5 Implementation and impacts

The construction of industrial development is inseparable from the support of funds. In addition to external supplies such as government and social funds, a more healthy and ideal situation is that the health tourism industry uses the achievements of its own development to achieve social and economic benefits, self-hematopoiesis, circular development, and continuous growth. In this process, the capitalization platform can assist all parties in the marketization, commercialization and capitalization of industrial achievements, obtain funds through equity ownership, pledge, securitization, etc., and reinvest in research and development, so as to realize the self-value-added development mode. Macao can consider setting up a capitalization platform to use various types of Chinese medicine intellectual property rights for financing and investment activities, so that intellectual property rights can be put into social production and better utilized, and intellectual property owners can also obtain funds for reproduction. This platform can be funded by all parties or a government-supported service organization. Its main responsibilities are: to collect and organize the scientific research results of various R&D institutions, to assist in defining the ownership of intellectual property rights, to assist in evaluating the value of intellectual property rights, and to capitalize intellectual property rights through financing networks. Besides, the government invests a certain proportion of the initial capital, and finds consulting companies, evaluation institutions, financial institutions or pharmaceutical companies with certain strengths in local market and abroad to make capital contributions for jointly setting up an investment service platform. The main business and profit model of the platform is to provide value assessment and financing services for the pharmaceutical and health intellectual property business and related health industries on the basis of integrating all available resources.

In addition, the 'Guangdong-Macao Cooperation Framework Agreement' has made a clear plan for the Chinese medicine industry in Guangdong and Macao to give full play to the overall advantages of the region, and coordinate the strategy for the coordinated development of the Chinese medicine industry in the two places. After years of development, Macao's traditional Chinese medicine industry has a certain foundation. Now is the time to discuss the next development direction. In addition to tourism, health tourism can also use the strength of Macao's traditional Chinese medicine industry, combined with traditional Chinese medical care activities, to carry out various tourism products as mentioned by the Informants from medical sectors. This approach is in line with the positioning of Macau as a world center of tourism and leisure.

Last but not the least, it is of great significance and favorable conditions for Macao to develop health tourism industry. Actively developing health tourism industry is not only conducive to improve residents' health and quality of life by enhancing the overall medical service level, but also to adjust the industrial structure and promoting sustainable economic and social development. According to industry insiders approached during the interview process, health tourism is highly comprehensive and professional. To achieve the healthy development of medical tourism, it is necessary to establish and improve the industry management system and realize the effective integration of related resources. This requires the Macao SAR government to formulate relevant development plans. In short words, without government's support, medical resources and tourism resources cannot be effectively integrated.



#### 5. Conclusion

COVID-19 has been a big alarm to the mankind of the vulnerability of human lives and the necessity of living in a healthier and more sustainable way. Health tourism will be on a higher demand in the foreseeable future. A need for diversification in economy in Macao adds on to the urgency of developing health-related tourism products in Macao. These trends may serve as the key motivations driving stakeholders to explore the hidden potential of developing health tourism in Macao, a strategic initiative which few have imagined. This study has taken a strategic perspective and explored feasibility among purposefully selected informants. The findings are more positive than negative. Given its unique resources and distinctive competency combinations, Macao has good potential in creating new competitive advantages by developing health tourism, particularly wellness tourism, and a selection of medical tourism products, capitalizing on the key trends in general and favorable political, social, cultural and economic environment in Macao.

In addition to the significant practical implications as aforementioned, this study also delivered sound theoretical contribution. It extends the implications of competitive advantages framework, resource-based theory and stakeholder theory to a hybrid industry which is 'tourism + medical/wellness sectors.' The theoretical frameworks have been applied in cross-sessional sectors for exploring the strategic direction of new industry development in the context of multi-dimensional setting.

The study is case specific and highly contextual. The result may be difficult to replicate in other contexts. However, the strategic visioning process may serve as a useful example for industry practitioners. In addition, the case itself may add to the existing body of literature on strategic management in tourism and hospitality. The study is only at the initial stage of strategic visioning, considering only a selection of the key stakeholders, the results are for reference only. How health tourism is perceived from the customer perspective is yet to be investigated. Formal strategic planning may need to include a large-scale feasibility study and market research. Future research may expand to examine other stakeholders, such as potential customers, and may include other stages of strategic management on this particular case and on other similar cases.

#### **Acknowledgments**

This paper is extended from the research project granted by the Specialized Subsidy Scheme for the Tourism Education and Training for the Guangdong-Hong Kong-Macao Greater Bay Area of Higher Education Fund, Education and Youth Development Bureau (Project No. TET-UMAC-2020-02). This paper is supported by Macao Higher Education Fund (Project No.CP-UMAC-2021-06)"

#### **Disclosure statement**

No potential conflict of interest was reported by the authors.

#### **Funding**

The work was supported by the Education and Youth Development Bureau, Macao SAR [Project No. TET-UMAC-2020-02].



#### **Notes on contributors**

*Ming Liu* is an Associate Professor in Faculty of Business Administration at The University of Macau, Macao SAR, China. His research interests include financial accounting, auditing, corporate governance, hotel and tourism accounting (E-mail: morrisliu@um.edu.mo).

*Jieqi Guan* is an Assistant Professor in School of Hospitality Management at Macao Institute for Tourism Studies, Macao SAR, China. Her research interests include corporate social responsibility, hospitality education, hotel and tourism related research. (E-mail: jenny@iftm.edu.mo).

*Lianpin Ren* is a Professor in School of Hospitality Management/School of Tourism Management at Macao Institute for Tourism Studies, Macao SAR, China. Her research interests include tourism service quality, consumer behavior, tourist experience and strategic related research. (E-mail: everen@iftm.edu.mo).

*Huijun Yang* is an Assistant Professor in School of Hospitality Management at Macao Institute for Tourism Studies, Macao SAR, China. Her research interests include human resource management, tourism leisure service, tourism and hotel education and technology development. (E-mail: june@iftm.edu.mo).

Yang Zhuang is a postgraduate student in School of Hotel and Tourism Management at The Hong Kong Polytechnic University, Hong Kong SAR, China. His research interests include hotel and tourism management and health tourism. (E-mail: john.zhuang712@icloud.com).

#### **ORCID**

Ming Liu (b) http://orcid.org/0000-0003-0272-8428 Jieqi Guan (b) http://orcid.org/0000-0001-9704-1842 Lianping Ren (b) http://orcid.org/0000-0002-2025-9998 Huijun Yang (b) http://orcid.org/0000-0003-1434-3365 Yang Zhuang (b) http://orcid.org/0000-0002-5647-7161

#### References

Abbaspour, F., Soltani, S., & Tham, A. (2021). Medical tourism for COVID-19 post-crisis recovery? *Anatolia*, 32(1), 140–143. https://doi.org/10.1080/13032917.2020.1815067

AMCM. (2019). Profit and loss account of the insurance sector for the year 2019. Monetary authority of Macao SAR. https://www.amcm.gov.mo/zh/insurance-sector/statistics

Analytica, O. (2019). Diversification will strengthen Macau's econom. *Emerald Expert Briefings*. https://doi.org/10.1108/OXAN-DB246393

Araujo, L. M. D., & Bramwell, B. (1999). Stakeholder assessment and collaborative tourism planning: The case of Brazil's Costa Dourada Project. *Journal of Sustainable Tourism*, 7(3–4), 356–378. https://doi.org/10.1080/09669589908667344

Aydin, G., & Karamehmet, B. (2017). Factors affecting health tourism and international health-care facility choice. *International Journal of Pharmaceutical and Healthcare Marketing*, 11(1), 16–36. https://doi.org/10.1108/IJPHM-05-2015-0018

Balaban, V., & Marano, C. (2010). Medical tourism research: A systematic review. *International Journal of Infectious Diseases*, 14, e135. https://doi.org/10.1016/j.ijid.2010.02.1784

Barney, J. (1991). Firm resources and sustained competitive advantage. *Journal of Management*, 17 (1), 99–120. https://doi.org/10.1177/014920639101700108

Beritelli, P., Buffa, F., & Martini, U. (2015). The coordinating DMO or coordinators in the DMO? – an alternative perspective with the help of network analysis. *Tourism Review*, 70(1), 24–42. https://doi.org/10.1108/TR-04-2014-0018



- Bushell, R., & Sheldon, P. J. (2009). Wellness and tourism: Mind, body, spirit, place. Cognizant Communication Corp.
- Cham, T. H., Lim, Y. M., Sia, B. C., Cheah, J. H., & Ting, H. (2021). Medical tourism destination image and its relationship with the intention to revisit: A study of Chinese medical tourists in Malaysia. Journal of China Tourism, 17(2), 163-191.
- Chhabra, D. (2020). Transformational wellness tourism system model in the pandemic era. International Journal of Health Management and Tourism, 5, 76-101. https://doi.org/10. 31201/ijhmt.788628
- Chia, K. W., & Liao, Y. M. (2021). An exploratory study of factors influencing Chinese outbound medical tourism. Journal of China Tourism Research, 17(3), 376-394. https://doi.org/10.1080/ 19388160.2020.1780177
- Choe, J., & DiGiovine, M. A. (2021). Three ways to ensure 'wellness' tourism provides a postpandemic opportunity for the travel industry. The Conversation.com. https://digitalcommons. wcupa.edu/anthrosoc\_facpub/135
- Cohen, E. (2012). Medical travel and the quality-of-life. In M. Uysal, R. R. Perdue, & M. J. Sirgy (Eds.), Handbook of tourism and quality-of-life research: Enhancing the lives of tourists and residents of host communities (pp. 169-191). Springer Science Business Media B.V.
- Connell, J. (2006). Medical tourism: Sea, sun, sand and ... surgery. Tourism Management, 27(6), 1093–1100. https://doi.org/10.1016/j.tourman.2005.11.005
- Connell, J. (2013). Contemporary medical tourism: Conceptualisation, culture and commodification. Tourism Management, 34, 1-13. https://doi.org/10.1016/j.tourman.2012.05. 009
- Corte, V. D., & Aria, M. (2016). Coopetition and sustainable competitive advantage. The case of tourist destinations. Tourism Management, 54, 524-540.
- Devine, A., & Devine, F. (2011). Planning and developing tourism within a public sector quagmire: Lessons from and for small countries. Tourism Management - TOURISM MANAGE, 32, 1253-1261. https://doi.org/10.1016/j.tourman.2010.11.004
- Dimitrovski, D., Lemmetyinen, A., Nieminen, L., & Pohjola, T. (2021). Understanding coastal and marine tourism sustainability - a multi-stakeholder analysis. Journal of Destination Marketing & Management, 19, 100554. https://doi.org/10.1016/j.jdmm.2021.100554
- DMP. (2021). Macao tourism development master plan review report. https://masterplan.macao tourism.gov.mo/2021/download/Review\_Report\_en.pdf?20211130
- DSEC. (2019) Tourism statistics. https://www.dsec.gov.mo/zh-MO/
- DSEC. (2020) Gaming industry statistics. https://www.dsec.gov.mo/zh-MO/
- Edgell, D. L., Allen, M. D., Smith, G., & Swanson, J. (2008). Tourism policy and planning: Yesterday, today and tomorrow (1st ed.). Routledge.
- Forward. (2020). Report of commercial model innovation and investment strategy planning analysis on china health care tourism industry (2021-2026). FORWARD Business Information Co., Ltd.
- Freeman, R. E. (1984). Strategic management: A stakeholder approach. Pitman.
- GBA. (2020). Guangdong-Hong Kong-Macao Greater Bay Area Cultural and Tourism Development Plan. http://zwgk.mct.gov.cn/zfxxgkml/ghjh/202012/P020201231518402967699.pdf
- Graci, S. (2013). Collaboration and partnership development for sustainable tourism. Tourism Geographies, 15(1), 25-42. https://doi.org/10.1080/14616688.2012.675513
- Hennink, M., Hutter, I., & Bailey, A. (2011). Qualitative Research Methods. Sage Publications.
- Herrick, D. M. (2007). Medical tourism: Global competition in health care. National Center for Policy Analysis.
- Heung, V. C., Kucukusta, D., & Song, H. (2010). A conceptual model of medical tourism: Implications for future research. Journal of Travel & Tourism Marketing, 27(3), 236-251. https://doi.org/10.1080/10548401003744677
- Heung, V. C. S., Kucukusta, D., & Song, H. (2011). Medical tourism development in Hong Kong: An assessment of the barriers. Tourism Management, 32(5), 995-1005. https://doi.org/10.1016/ j.tourman.2010.08.012



- Horng, J. -S., & Tsai, C. -T. (2012). Constructing indicators of culinary tourism strategy: An application of resource-based theory. *Journal of Travel & Tourism Marketing*, 29(8), 796–816. https://doi.org/10.1080/10548408.2012.730945
- Huawai. (2018). Huawei released a position paper on telecommunications development: The healthy and active development of the ICT industry requires government support and guidance. https://www.huawei.com/cn/news/2018/9/position-paper-itu-telecom-world-2018
- Kaspar, C. (1990). A new lease on life for spa and health tourism. *Annals of Tourism Research*, 17 (2), 298–299. https://doi.org/10.1016/0160-7383(90)90095-9
- Komppula, R. (2014). The role of individual entrepreneurs in the development of competitiveness for a rural tourism destination a case study. *Tourism Management*, 40, 361–371. https://doi.org/10.1016/j.tourman.2013.07.007
- Lam, C. C., du Cros, H., Vong, T. N., & Hall, C. M. (2011). Macao's potential for developing regional Chinese medical tourism. *Tourism Review*, 66(1/2), 68–82. https://doi.org/10.1108/16605371111127242
- Lee, C. G. (2010). Health care and tourism: Evidence from Singapore. *Tourism Management*, 31(4), 486–488. https://doi.org/10.1016/j.tourman.2009.05.002
- Lee, J., & Kim, H. -B. (2015). Success factors of health tourism: Cases of Asian tourism cities. International Journal of Tourism Cities, 1(3), 216–233. https://doi.org/10.1108/IJTC-08-2014-0014
- Lin, C.-P. (2021). The salience of stakeholders in religious tourism: A case study of the Dajia Mazu pilgrimage. *Annals of Tourism Research*, 86, 103091. https://doi.org/10.1016/j.annals.2020. 103091
- Liu, M. T., Chang, T. T. G., Loi, E. H. N., & Chan, A. C. H. (2015). Macau gambling industry: Current challenges and opportunities next decade. Asia Pacific Journal of Marketing and Logistics, 27(3), 499–512. https://doi.org/10.1108/APJML-03-2015-0045
- Liu, M. T., Liu, Y., Mo, Z., & Ng, K. L. (2021). Using text mining to track changes in travel destination image: The case of Macau. *Asia Pacific Journal of Marketing and Logistics*, 33(2), 371–393. https://doi.org/10.1108/APJML-08-2019-0477
- Macao Health Bureau. (2022). Special webpage against Epidemics. https://www.ssm.gov.mo/apps1/PreventCOVID-19/en.aspx#clg17458
- Mahmud, M. S., Rahman, M. M., Lima, R. P., & Annie, E. J. (2021). Outbound medical tourism experience, satisfaction and loyalty: Lesson from a developing country. *Journal of Hospitality and Tourism Insights*, 4(5), 545–564. https://doi.org/10.1108/JHTI-06-2020-0094
- MGTO. (2021). Macao tourism industry development master plan review study. Tourism Bureau, Macao SAR. https://masterplan.macaotourism.gov.mo/2021/index\_en.html
- Moon, H., & Han, H. (2018). Destination attributes influencing Chinese travelers' perceptions of experience quality and intentions for island tourism: A case of Jeju Island. *Tourism Management Perspectives*, 28, 71–82. https://doi.org/10.1016/j.tmp.2018.08.002
- Morgan, D. L. (1997). Focus groups as qualitative research (2nd ed.). Sage. https://doi.org/10.4135/9781412984287
- MSCS. (2021). Statistics of the gross revenue of game of the fortune. https://www.dsec.gov.mo/ts/#!/step2/KeyIndicator/zh-MO/247
- Nematpour, M., Khodadadi, M., & Rezaei, N. (2021). Systematic analysis of development in Iran's tourism market in the form of future study: A new method of strategic planning. *Futures*, *125*, 102650. https://doi.org/10.1016/j.futures.2020.102650
- OECD. (2016) . OECD tourism trends and policies. OECD Publishing.
- Okumus, F., Altinay, L., & Chathoth, P. K. (2010). Strategic management for hospitality and tourism. Butterworth-Heinemann (Elsevier).
- Ormond, M., & Sulianti, D. (2017). More than medical tourism: Lessons from Indonesia and Malaysia on South-South intraregional medical travel. *Current Issues in Tourism*, 20(1), 94–110. https://doi.org/10.1080/13683500.2014.937324
- People's Daily. (2020). *Macau's Chinese medicine industry is on fire*. http://www.xinhuanet.com/ 2020-01/18/c\_1125476588.htm



- Phillips, P., & Moutinho, L. (2014). Critical review of strategic planning research in hospitality and tourism. Annals of Tourism Research, 48, 96-120. https://doi.org/10.1016/j.annals.2014.05.013
- Policy address. (2020). Policy address of Macao SAR for fiscal year 2021. https://www.policyad dress.gov.mo/index.html?l=zh-hant
- Pou, C. (2019 July 18). China's safest city rankings announced: Macau tops the list, Hong Kong falls out of the top ten. Journal Cheng Pou. http://www.chengpou.com.mo/dailynews/178567.
- Ratz, T., & Puczkó, L. (2002). The impacts of tourism: An introduction. Hame Polytechnic.
- Sadeh, E., & Garkaz, M. (2019). Interpretive structural modeling of quality factors in both medical and hospitality services in the medical tourism industry. *Journal of Travel & Tourism Marketing*, 36(2), 253–267. https://doi.org/10.1080/10548408.2018.1527273
- Saunders, B., Sim, J., Kingstone, T., Baker, S., Waterfield, J., Bartlam, B., Burroughs, H., & Jinks, C. (2018). Saturation in qualitative research: Exploring its conceptualization and operationalization. Quality & Quantity, 52, 1893-1907.
- Sequoia Capital. (2019). China's Urban pension consumption insight report. http://admin.fang chan.com/uploadfile/uploadfile/annex/2/1409/5df727fa64430.pdf
- Smith, P., & Forgione, D. (2007). Global outsourcing of healthcare: A medical tourism decision model. Journal of Information Technology Case and Application Research, 9(3), 19-30. https:// doi.org/10.1080/15228053.2007.10856117
- Smith, M., & Puczkó, L. (2009). Health and wellness tourism. Butterworth-Heinemann.
- Smith, M., & Puczkó, L. (2014). Health, tourism and hospitality: Spas, wellness and medical travel.
- Sousa, C. M. P., & Bradley, F. (2008). Cultural distance and psychic distance: Refinements in conceptualisation and measurement. Journal of Marketing Management, 24(5-6), 467-488. https://doi.org/10.1362/026725708X325959
- Stankov, U., Filimonau, V., & Vujičić, M. D. (2020). A mindful shift: An opportunity for mindfulness-driven tourism in a post-pandemic world. Tourism Geographies, 22(3), 703-712. https://doi.org/10.1080/14616688.2020.1768432
- STAT. (2019). Residents' income and consumption expenditures in 2019. National Bureau of Statistics. http://www.stats.gov.cn/tjsj/zxfb/202001/t20200117\_1723396.html
- Stokes, R. (2008). Tourism strategy making: Insights to the events tourism domain. Tourism Management, 29(2), 252–262. https://doi.org/10.1016/j.tourman.2007.03.014
- Tang, J. Z. (2020). Analysis and prospects of Macau's tourism development from 2019 to 2020. Tourism Research Center of the Academy of Social Sciences. https://www.meadin.com/yj/ 214936.html
- Tatum, M. (2020). Will medical tourism survive covid-19? The BMJ, 370, m2677. https://doi.org/ 10.1136/bmj.m2677
- Teece, D. J., Pisano, G., & Shuen, A. (1997). Dynamic capabilities and strategic management. Strategic Management Journal, 18(7), 509-533. https://doi.org/10.1002/(SICI)1097-0266 (199708)18:7<509:AID-SMJ882>3.0.CO;2-Z
- Tham, A. (2018). Sand, surgery and stakeholders: A multi-stakeholder involvement model of domestic medical tourism for Australia's Sunshine Coast. Tourism Management Perspectives, 25, 29–40. https://doi.org/10.1016/j.tmp.2017.11.002
- UNWTO. (2018) . Exploring health touirsm, United Nations World Touirsm Organization (UNWTO). European travel Commission.
- Vequist, D., Valdez, E., & Morrison, B. (2009). Medical tourism economic report: Latin America vs. Asia. Medical Tourism Magazine, 38-40.
- Visual capitalist. (2020). Visualizing the countries' most reliant on tourism. https://www.visualca pitalist.com/countries-reliant-tourism/
- Voigt, C., & Pforr, C. (2014). Wellness Tourism, a destination perspective. Routledge.
- World Bank. (2022). GDP per capita (current US\$) Macao SAR, China. https://data.worldbank. org/indicator/NY.GDP.PCAP.CD?locations=MO&mostrecentvaluedesc=true&view=map



- Wu, L. Y. (2019, September 18). Reflections on Macao from WHO's medical and nursing manpower indicators. Macao Daily. http://www.macaodaily.com/html/2019-09/18/content 1382303.htm
- Yan, C. (2020, March 13). The global tourism industry alarm, the state has introduced stimulus policies in many places. Security Times. http://company.stcn.com/2020/0313/15725039.shtml
- York, D. (2008). Medical tourism: The trend toward outsourcing medical procedures to foreign countries. The Journal of Continuing Education in the Health Professions, 28, 99-102. https://doi. org/10.1002/chp.165
- Yu, J. Y., & Ko, T. G. (2012). A cross-cultural study of perceptions of medical tourism among Chinese, Japanese and Korean tourists in Korea. Tourism Management, 33(1), 80-88. https:// doi.org/10.1016/j.tourman.2011.02.002
- Zarei, A., & Maleki, F. (2019). Asian medical marketing, a review of factors affecting Asian medical tourism development. Journal of Quality Assurance in Hospitality & Tourism, 20(1), 1-15. https://doi.org/10.1080/1528008X.2018.1438959
- Zolfagharian, M., Rajamma, R., Naderi, I., & Torkzadeh, S. (2018). Determinants of medical tourism destination selection process. Journal of Hospitality Marketing & Management, 27(7), 1-20. https://doi.org/10.1080/19368623.2018.1444527