"The impact of motivation factors and intention to adopt Jordan as a destination for medical tourism in the Middle East"

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BUSINESS PERSPECTIVES

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THE IMPACT OF MOTIVATION FACTORS AND INTENTION TO ADOPT JORDAN AS A DESTINATION FOR MEDICAL TOURISM IN THE MIDDLE EAST

Abstract

The study aimed to investigate the impact of motivation factors on an individual's decision to choose Jordan as their primary tourism destination in the Middle East. The decision to choose Jordan as a medical destination will be analyzed based on factors, including government support; push engagement, and image perception. To this end, the study will gather data from 300 online individuals who have traveled to the Middle East for medical purposes. A qualitative approach will be adopted to provide insight into an individual's preference for Jordan as the primary medical destination. A Partial Least Squares Structural Equation Modeling method was adopted, which allows for the creation of relations with different variables. The study's findings indicate that people from rural areas in the Middle East preferred Jordan as a medical destination. Also, more women than men traveled to Jordan for medical purposes. Finally, more single people than married persons choose medical assistance in Jordan. Future studies are needed to ascertain how factors such as quality and cost influenced medical tourism into Jordan.

Keywords	medical tourism, marketing, push factors, pull factor, image perception, behavioral intention, Jordan, Middle East
JEL Classification	M30, M31

INTRODUCTION

In the last decade, medical tourism has grown to become a field of the economy, generating as high as USD 55 billion each year around the world. In the Middle East, some of the countries that seem to be attracting medical tourism the most include Lebanon and Jordan, with as high as 10% of all tourists visiting the two countries and receiving treatment as the main motivation for their visit. Hassan (2015) points out that of the medical tourists seeking medical and health services in Lebanon or Jordan, most of them as high as 90% comes from the Middle East, and the remaining 10% visit from European, Asian, and American countries. The attractiveness of the Jordanian medical tourism industry can be supported by a range of motivating factors on the side of both consumers and suppliers of such services. However, the medical tourism industry is mainly the uninvestigated area of the national economy. Few articles and books have attempted to determine the motivating factors and intentions that aim to adopt Jordan as a destination for medical tourism among Middle Eastern countries. Many of the available published materials and on the internet focus much on highlighting the importance of aesthetic tourism in the Jordanian economy, meaning that the field of medical tourism has not

received as much attention. Therefore, it is important to identify the factors that promote medical tourism in the country and understand their possible impacts on the future of health tourism. This study will also focus on identifying the possible factors that do not promote medical tourism in the country and analyze the correlation between the push and pull factors. This will be important in understanding whether Jordan is the appropriate destination for promoting future medical tourism among Middle Eastern countries.

1. LITERATURE REVIEW AND RESEARCH HYPOTHESES DEVELOPMENT

1.1. Jordan as a regional medical care service center

Jordan is a nation with an Arabic origin located in West Asia on the eastern side of the Jordan River. Its neighboring countries include Saudi Arabia, Iraq, Syria, Israel, and the Palestinian West Bank. This country also borders the Dead Sea and is situated at the center of Asia, Africa, and Europe, with its capital city being Amman. The country has a rich economic, political, and cultural center. The country enjoys an upper-middle-income economy that is favorable for high people development. Besides, the country attracts a large tourist base due to its highly skilled labor group (Vequist, 2009). The country is a crucial destination for tourists and promotes medical tourism through its most developed health sector. However, this country has been on the spot on the unavailability of natural resources, high immigration of refugees, and regional instability, which has derailed economic growth. This paper analyzed three independent variables, medical care in the government, private, military areas, natural sites, and government duty against the dependent variable having Jordan marketed as the regional medical center. The research was also aimed at finding out the government's duties in promoting Jordan as a medical care center regionally, restructure the health sector, and ensure the maximization of profit gained from the industry. Chaudhuri (2008) states that Jordan has a unique central geographical location and harbors a favorable climate, a unique human resource center, modern infrastructure, and a serene place that offers tourists a chance to meditate in God's creation. Besides, the country has numerous geographic location sites and rich cultural diversity. The researcher stipulates that Jordan has a

wide variation that encourages diversified medical care diversity that promotes successful civilizations to explore the medical benefits in Jordan. Healy (2009) proves that the country has available resources sufficient to market the country as a regional medical center with four sectors and numerous natural sites. Besides, Jordan is known to have no competitive activities, few promotion services regarding Jordan as a health-based location from the government, and small investment percentages regarding health issues in Jordan. The study also finds out that there is very little cooperation between the government, private, and military sectors with the medical sector. This leaves it important to assess if Jordan adopted as the recommendable international destination for medical tourism in the Middle East.

1.2. Reasons for medical tourism

In this paper, the researcher applied an explorative study to analyze the experiences of medical travelers in four destinations; India, China, Jordan, and the United Arab Emirates. The main aim was to derive the reasons why medical tourists choose to seek medication outside their home countries, the form of services they get, and the level of quality offered. Universal commercialization of medical care manifests that health-based tourism is the main solution to the new health trends. Fidler (2003) states that global health-based tourism is important as it reduces the time spent waiting for medical care services with insured services and costs being the highest motivating factors. The researcher finds out those expenses, medical practitioners, facility reputation, and hospital accreditation are the most significant factors that propel people in preferring country medical care services to medical services offered in their home countries. The time spent waiting and inadequate medical facilities are the main reasons for international medical travels. In this descriptive study, the research recommends that Jordan is the best

immediate center for reconciliation of the private and public access dilemmas since it is committed to improving access to medical care for exploitable communities. Gilson, Doherty, Loewenson, and Francis (2007) also establish that the four countries under study have failed drastically in their services offered to low-income individuals. Therefore, it is important to analyze whether the push factors and pull factors impact the adoption of Jordan as a tourist destination in the Middle East.

1.3. Medical tourism in South Korea

Kim, Lee, and Jung (2013) discuss the development and advancement of the medical tourism industry in South Korea by noting that in 2010 alone, the South Korean medical tourism industry attracted over 81,789 foreign medical tourists who, in turn, spend in the upwards of USD 100 million. The authors also discuss the main factors contributing to the development of medical tourism in some countries and note that pricing is a major issue. Most foreign medical tourists mostly look for cheaper or affordable and high-quality medical services when deciding on a medical tourism destination. In this case, it means that the development of the medical tourism industry in South Korea has been aided by the high-quality healthcare services provided by the facilities located in the country, as well as low and affordable prices that are lower than many developed and developing countries such as the United States, France, Thailand, India, and China.

1.4. Medical tourism in the United Arab Emirates

Al-Talabani, Kilic, Ozturen, and Qasim (2019) point out that even though UAE is not tanked as the top ten destinations for medical tourism, the Middle East country still has major potential when it comes to developing its medical tourism industry in a bid to maximize the available opportunities. The main potential for UAWE as a future medical tourism destination in the regions in the future comes from the major available resources in the region, including hot water springs, mineral water, and advanced medical technologies that the country has been developing and incorporating in the medical

services industry. Al-Talabani, Kilic, Ozturen, and Qasim (2019) estimates that currently and in the near future, UAE will become a major attraction for people seeking high-quality medical services around the world, especially now that the government continues to collaborate with prestigious healthcare companies and organizations, including Cleveland Clinic, John Hopkins University with domestic organizations such as the Al Tawam Hospital partnership.

1.5. Theoretical foundation and hypotheses development

This paper will entail the analysis of an independent variable against several dependent variables. Multiple regression modeling applied to determine the factors affecting the adoption of Jordan as a destination for a medical tour in the Middle East. The independent variables to be analyzed for this study include:

1.5.1. Push factors engagement (intangible feature) with image perception

This refers to the factors that propel tourists to seek out of country health services.

The factors are deemed to rather propel the respondents to fly out of their own country. These factors rely on the image created on medical services in Jordan that when compared to those in their own country, they are far better (Hassan, 2015). This may include the need to seek safety, adventure, rest and relaxation, fitness, socialization, and desire to escape.

H1: Tourists who chose Jordan as a medical destination are unlikely to travel to the country due to push factors resulting in image perception.

1.5.2. Push factors engagement (intangible feature) with behavioral intention

These are the factors that make tourists choose Jordan as a medical destination caused by behavioral intentions. This relies on the nature of the visitors or situations in their home country, as well as the intentions of the Jordan government (Leahy, 2008).

H2: *Tourists who chose Jordan as a medical destination are unlikely to travel to the country due to push factors engaging with behavioral intention.*

1.5.3. Pull factor engagement (both tangible and intangible features) with image perception

This refers to the factors that attract tourists to seek for the external medication in Jordan. These factors are present due to an image created that the tourists feel that they should fulfill. This entails both tangible factors such as natural and historical attraction sites, infrastructure, food, and people and intangible factors such as safety mechanisms in place (ThomasWhite-Global Investing, 2009). These factors have an attractive appearance to the tourist as they deemed to be of quality and available in plenty.

H3: *Tourists who chose Jordan as a medical destination are unlikely to travel to the country due to its pull factors engagement with image perception that needs to be fulfilled.*

1.5.4. Pull factor engagement (tangible and intangible features) with behavioral intention

This variable contains the factors that attract tourists to seek health care outside their country of origin. This is because behavioral intention of the Jordan government is to attract more foreigners to access medical care. This also results from the behavioral intentions of the tourists to fulfill their interest in having access to these features (Vequist, 2009). These features include tangible and intangible factors, including safety, natural and historical attractions, infrastructure, food, people, sport and recreation facilities.

H4: *Tourists who chose Jordan as a medical destination are unlikely to travel to the country looking for health and fitness.*

1.5.5. Image perception with government's facilitation

This variable refers to both push and pull factors that have an image perception of the tourists from the government's facilitation. The government aims to facilitate its services to improve its medical care services for its foreigners in the country (Vequist, Bolatkale, & Valdez, 2009). This includes the government's incentive to reduce the price of its visas, size, and infrastructure at its airports, number, and availability of professional tourist guides, as well as its transport infrastructure and cost in its country.

H5: *Tourists who chose Jordan as a medical destination are unlikely to travel to the country due to the image perception factors relying on the government's incentives.*

1.5.6. Behavioral intention with government's facilitation

This variable contains push and pull factors that have a behavioral intention and result from Jordan's government activities. This characteristic activities result from the government's activities to attract tourists in need of medical care. The government's involvement in its visa availability, airport infrastructure, tourist guides, and transport sector creates a behavioral intention to push and pull visitors from their countries of origin into the country (Vequist, Bolatkale, & Valdez, 2009).

H6: *Tourists who chose Jordan as a medical destination are unlikely to travel to the country due to behavioral intentions resulting from Jordan's government activities*

1.5.7. Government's facilitation on the adoption of Jordan as a medical tourism destination

This variable contains the factors revolving around the government's facilitation in ensuring that Jordan has been adopted as a destination for medical tourism. The government's activities in promoting its country's accessibility to tourists through ensuring that its visa is easy to acquire, the airport is sufficient to handle local and international flights, professional tourist guides are available, and its transport sector is effective in its services and costs.

H7: *Tourists who chose Jordan as a medical destination are unlikely to travel to the country due to natural and historical attractions.*

The Partial Least Squares Structural Equation Method in the study also helped develop and design the path models with latent variables, as outlined in the diagram further. As shown in the diagram, a path model involves a diagram that shows the hypothesis and variable relationships to be estimated in an SEM analysis. For instance, the example further shows a path model with latent variables and their indicators. As such, evidence shows that a rage push and pull engagement factors motivate individual decision making. Push factors (intangible features) include safety, adventure seeking, rest and relaxation, health and fitness, socialization, desire for escape. Pull factors engagement (tangible and intangible features) includes safety, natural and historical attractions, physical environment, infrastructure, food, people, sport and recreation facilities. As such, these factors affect the image perception and, thus, behavioral intentions of the individual.

2. METHODOLOGY

2.1. Instrument development

Data for this study were collected from primary and secondary sources. The research applied questionnaires as well as online forms for collecting data. Questionnaires used were prepared and framed to have closed questions. The online questionnaires were filled by local and new tourists who visited various sites located in Jordan.

2.2. Data collection

Primary information formed the basis of this study, which helped fill out the research questions. However, the researcher and study subjects did not contact each other since the questionnaires were filled out online. Upon completion of filling these forms, respondents submitted them back to the researcher and used for analysis.

Table 1. Data collection

Questionnaires	Total
Filled	300
Returned	300
Respondents	300

2.3. Research methodology

The research adopted a Partial Least Squares Structural Equation Modeling method as it helps to estimate the relationships between latent variables and determine how perfect the model explains the target constructs of interest. This was mainly because the research design was made up of two main methods: the measurement part representing the relationships between the observed data and the latent variables and the structural model representing the connection between the latent variables. Data for this study were drawn from a sample of 300 online respondents who had traveled to Jordan for medical care. The information collected from the subjects was crucial for subjects who relied on medical tourism in Jordan and had traversed other countries in the Middle East. The findings of this study used to draw recommendations and conclusions for the study.

Table 2. Population

Respondents	Total	%
Urban	175	58.33%
Rural	125	41.67%
Total	300	100.00

3. DATA ANALYSIS AND RESULTS

Data for this paper were analyzed to fulfill its explorative nature, confirmatory study, and test the model's structural nature. The study used descriptive statistics using the mean, standard deviation, and frequency distribution to determine the demographics, while inferential statistics involved using Chi-squared test, multiple linear regression modeling, Partial Least Squares Structural Equation Modeling, and the squared multiple correlations. Data were presented using pie charts, tables, and graphs.

3.1. Reliability

The pilot study was performed over a sample of study subjects from the nudge users. Based on the feedback received, Cronbach's alpha derived using the formula:

$$\alpha = c--v-+(N-1). \; C-, \qquad (1)$$

where N equals the number of items, c is bar average inter-item covariance within the items, and v bar equals the average variance. Cronbach's alpha measures internal consistency, thus, showing how means closely related to a set of items was as a group. For the study's sufficient reliability, the tool ranges from 1 to 5 where the scales of 2.7 and higher are shown to contain an acceptable reliability coefficient. Cronbach's alpha for reliability was 2.749, which showed that reliability was very high.

Table 3. Reliability table

Scale	Cronbach's alpha
1-5	2.749

3.2. Validity

The questionnaires were presented to experts for their opinions and insights. The wording of some sections was rectified; other parts deleted due to redundancy and having not matched with the research tool. Besides, more information added in order to match, thus making the research item have a high level of validity, thus recommended being applied to the subjects of the sample study.

Table 4. Validity

Validity	Total
Questionnaires with errors	0
Questionnaires returned with no errors	300

3.3. Structural Model

Jordan is located in the Middle East and has a good geographic site. This research aimed to identify the possible factors that predispose Jordan to be adopted as a destination for medical tourism. Data recorded for this study were analyzed using multiple regression modeling, where the equation for the model is presented as follows:

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \qquad (2)$$
$$+\beta_4 X_4 + \beta_5 X_5 + \beta_6 X_6 + \beta_7 X_7 + \varepsilon,$$

where Y is the dependent variable, entered as Independent in the model, X_1 is the independent variable, Push factors engagement (Intangible feature) with image perception, X_2 is the independent variable, Push factors engagement (Intangible feature) with behavioral intention. X_3 is the independent variable, Pull factors engagement (both tangible and intangible features) with image perception. X_4 is the independent variable, Pull factors engagement (both tangible and intangible features) with behavioral intention. X_5 is the independent variable, Image perception from the Government's facilitation. X_6 is the independent variable, Behavioral intention from the Government's facilitation. Y is the dependent variable, the Government's facilitation on the adoption of Jordan as a medical tourism destination. β_0, β_1, β_2, β_3, β_4, β_5, β_6, and β_7 are the coefficients Variable X_1, X_2, X_3, X_4, X_5, X_6, and X_7, respectively; model ε represents the standard error.

3.4. Mediation

Since the variables under study included both push and pull factors, the study analyzed the correlation between this variable. This was important in determining the variance between and within the variables.

Median test	Level of significance
Between variables	0.05
Within variables	0.05

Table 5. Squared multiple correlations

Squared multiple correlations understudy	df (degrees of freedom)
300	296

3.5. Multiple regression analysis
Table 6. SPSS input variables

Model	Variables entered	Variables removed	Method
1	Variable 7, Variable 2, Variable 1, Variable 4, Variable 3, variable 6, Variable 5[b]		

Note: a. Dependent Variable: Independent. b. All requested variables entered.

The study's findings showed that R-squared was 0.015, which showed that the model explained that 1.5% of the factors would facilitate the adoption of Jordan as a medical tourist destination. This showed that there were still a 98.5% of the variables that were not included in the study and well defined why Jordan should be adopted.

Table 7. Model summary

Model	R	R-square	Adjusted R-square	Std. error of the estimate
1	.123[a]	.015	−.008	1.437

Note: a. Predictors: (Constant), Variable 7, Variable 2, Variable 1, Variable 4, Variable 3, Variable 6, Variable 5. b. Dependent variable: independent.

Table 8. Analysis of variance

Model		Sum of squares	df	Mean square	F	Sig.
1	Regression	9.279	7	1.326	.642	.721[b]
	Residual	601.022	291	2.065		
	Total	610.301	298			

Note: a. Dependent variable: independent. b. Predictors: (Constant), Variable 7, Variable 2, Variable 1, Variable 4, Variable 3, Variable 6, Variable 5.

The variance table analysis showed that the model was not significant in determining whether Jordan should be adopted as a destination for medical tourism. The p-value = 0.721 was above the set significance level α = 0.05. Therefore, the study ought to reject the null hypothesis that there existed a set of push and pull factors that predisposed Jordan should be adopted as a destination for medical tourism in the Middle East. Since the model was not sufficient enough to determine whether Jordan should be adopted as a destination for medical tourism, the study determined on identifying which factors were significant in the model.

The coefficients table showed no statistically significant factor and was fit to be included in the model. This is because their significance levels were above the set significance level α = 0.05. The multiple regression model for the study was:

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + +\beta_4 X_4 + \beta_5 X_5 + \beta_6 X_6 + \beta_7 X_7. \tag{3}$$

The model was significant in determining whether Jordan should be adopted as a destination for medical tourism without using the variables used in this study.

After analysis, the equation for the study was thus

$$Y = 6.158 + \beta_1 X_1 + \ldots + \beta_n X_n. \tag{4}$$

Table 9. Coefficients table

Model		Unstandardized coefficients		Standardized coefficients	t	Sig.	95.0% confidence interval for B	
		B	Std. Error	Beta			Lower bound	Upper bound
1	(Constant)	3.929	.635		6.185	.000	2.679	5.179
	Variable 1	.003	.069	.002	.037	.970	−.134	.139
	Variable 2	−.128	.071	−.107	−1.806	.072	−.267	.012
	Variable 3	−.016	.068	−.014	−.235	.815	−.150	.118
	Variable 4	−.036	.072	−.029	−.497	.619	−.178	.106
	Variable 5	−.029	.067	−.026	−.433	.665	−.160	.103
	variable 6	.042	.060	.041	.695	.487	−.077	.161
	Variable 7	−.039	.065	−.035	−.605	.546	−.167	.089

Note: a. Dependent variable: independent.

Table 10. Residual statistics

	Minimum	Maximum	Mean	Std. Deviation	N
Predicted value	2.81	3.70	3.17	.176	299
Residual	−2.432	4.571	.000	1.420	299
Std. predicted value	−2.017	3.011	.000	1.000	299
Std. residual	−1.693	3.181	.000	.988	299

Note: a. Dependent variable: independent.

The residual statistics for the data showed that the predicted value had a standard deviation of 0.176. The residual had a standard deviation of 1.420; the standard predicted value had a standard deviation of 1.00, while the standard residual has a value of 0.988. This showed that both the predicted value had a mean of 3.17, which was greater than the means for residual, standard predicted value, and standard residual, respectively.

The findings showed that data for this study assumed a normal distribution with its mean at 0. The mean was 2.52 E-1, while the standard deviation was 0.988.

3.6. Partial Least Squares Structural Equation Modeling

The study also analyzed the sum of partial least squares to determine the correlation between the dependent variable and the independent variables. The study tested the hypothesis structure using a two-tailed significance test. The results of this analysis are presented in Table 11.

Table 11. Descriptive statistics

Variables	Mean	Std. deviation	N
Variable 1	3.74	1.204	299
Variable 2	3.73	1.201	299
Variable 3	3.51	1.241	299
Variable 4	3.85	1.160	299
Variable 5	3.41	1.269	299
variable 6	3.37	1.398	299
Variable 7	3.59	1.293	299
Independent	3.17	1.431	299

Table 12 showed that the means were 3.74, 3.73, 3.51, 3.85, 3.41, 3.37, and 3.59 for variable 1, variable 2, variable 3, variable 4, variable 5, variable 6, and variable 7, respectively. The independent variable had a mean of 3.17. This showed that the variables were largely concentrated at mean 3.

The results showed that the degrees of freedom were 296 for all variables. Variable 1 had a partial correlation of 1.0 with variable 1, −0.20, −0.19, −0.003, −0.076 with variables, 2, 3, 4, 5, and 0.021, and 0.021 with variables 6 and 7, respectively. The other variables had a partial correlation of 1.000 with each other at df = 0.

Table 12. Correlations table

	Control variables		Variable 1	Variable 2	Variable 3	Variable 4	Variable 5	variable 6	Variable 7
Independent	Variable 1	Correlation	1.000	−.020	−.019	−.003	−.076	.021	.021
		Significance (2-tailed)	.	.737	.741	.965	.190	.719	.722
		df	0	296	296	296	296	296	296
	Variable 2	Correlation	−.020	1.000	−.089	.051	.073	.147	−.005
		Significance (2-tailed)	.737	.	.126	.384	.210	.011	.932
		df	296	0	296	296	296	296	296
	Variable 3	Correlation	−.019	−.089	1.000	−.048	.067	.067	.054
		Significance (2-tailed)	.741	.126	.	.410	.248	.247	.352
		df	296	296	0	296	296	296	296
	Variable 4	Correlation	−.003	.051	−.048	1.000	.090	.003	−.052
		Significance (2-tailed)	.965	.384	.410	.	.123	.953	.367
		df	296	296	296	0	296	296	296
	Variable 5	Correlation	−.076	.073	.067	.090	1.000	.020	−.109
		Significance (2-tailed)	.190	.210	.248	.123	.	.727	.060
		df	296	296	296	296	0	296	296
	variable 6	Correlation	.021	.147	.067	.003	.020	1.000	−.021
		Significance (2-tailed)	.719	.011	.247	.953	.727	.	.714
		df	296	296	296	296	296	0	296
	Variable 7	Correlation	.021	−.005	.054	−.052	−.109	−.021	1.000
		Significance (2-tailed)	.722	.932	.352	.367	.060	.714	.
		df	296	296	296	296	296	296	0

Table 13. Representation of one-sample statistics 300 respondents

Variables category	N	Mean	Std. deviation	Std. Error Mean
Variable 1	299	3.74	1.204	.070
Variable 2	300	3.73	1.201	.069
Variable 3	300	3.51	1.239	.072
Variable 4	300	3.84	1.170	.068
Variable 5	300	3.41	1.268	.073
variable 6	300	3.38	1.396	.081
Variable 7	300	3.59	1.294	.075
Independent	300	3.18	1.433	.083
Age	300	3.18	1.317	.076
Gender	300	.53	.500	.029
Marital status	300	1.55	.498	.029
Residence	299	1.5017	.50084	.02896

Table 14. Presentation of one sample *t*-test

Variables category	Test value = 4					
	t	df	Sig. (2-tailed)	Mean difference	95% confidence interval of the difference	
					Lower	Upper
Variable 1	−3.794	298	.000	−.264	−.40	−.13
Variable 2	−3.895	299	.000	−.270	−.41	−.13
Variable 3	−6.804	299	.000	−.487	−.63	−.35
Variable 4	−2.419	299	.016	−.163	−.30	−.03
Variable 5	−8.061	299	.000	−.590	−.73	−.45
variable 6	−7.736	299	.000	−.623	−.78	−.46
Variable 7	−5.445	299	.000	−.407	−.55	−.26
Independent	−9.954	299	.000	−.823	−.99	−.66
Age	−10.737	299	.000	−.817	−.97	−.67
Gender	−120.156	299	.000	−3.467	−3.52	−3.41
Marital status	−85.099	299	.000	−2.447	−2.50	−2.39
Residence	−86.256	298	.000	−2.49833	−2.5553	−2.4413

Table 15. Statistics representation

		Age	Gender	Residence	V13	Marital status
N	Valid	300	300	299	300	300
	Missing	0	0	1	0	0
Mean		3.18	.53	1.5017		1.55
Std. error of mean		.076	.029	.02896		.029
Median		3.00	1.00	2.0000		2.00
Mode		3	1	2.00		2
Std. deviation		1.317	.500	.50084		.498
Variance		1.736	.250	.251		.248
Minimum		0	0	1.00		1
Maximum		5	1	2.00		2

4. DISCUSSION

The data were analyzed to determine one sample statistics for the test variable 4. The results show that all the variables are statistically significant since they have a *p*-value of α = 0.05, the significance value of the two-tailed. The variable 4 is greater than 0.05, showing that the sample mean for this value exceeds 4.

4.1. Implication

The study found out that most of the medical care tourist Jordan gets are from both rural and urban areas, respectively. The study also found that more female tourists than male tourists travel to Jordan in search of medical care. More so, there is a high rate of not married tourists compared to that of married tourists. Since the data assuming a nor-

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mal distribution, the study ought to establish that the sample was drawn from a normal population, and the results could be used to draw decisive conclusions and recommendations.

4.2. Limitation and recommendations

This study was limited to analyzing online data from 300 respondents. The study was also limited to collecting data from online sources, which could be deemed not efficient compared to questionnaires and one-on-one interviews. This study was also limited in using regression analysis and the sum of Partial Least Squares Structural Equation Modeling.

The study recommended further research to determine the remaining 98.5% explained by the model. The study also recommended that future researchers try different models, including the Logit and Probit models. This is to enable the researcher to get to narrow down on the specific factors that should consider Jordan as a medical care destination in the Middle East.

CONCLUSION

Medical tourism is a widespread endeavor that has found practice in various parts of the world. It involves visiting a country for medical purposes. Questions arose as to whether or not Jordan has attracted many medical tourists. Therefore, this study aimed to identify the possible factors that predispose Jordan to be adopted as a destination for medical tourism. By conducting primary and secondary data collection, various information was deduced. The study deduced that the adoption of Jordan as a destination for medical care is not only based on the motivation factors on individuals. The study also found that there are more females than males, seeking medical care in places based outside their home country. Lastly, it was found that many married individuals than unmarried individuals sort medical services in Jordan. The findings mentioned above followed a data analysis using Partial Least Squares Structural Equation Modeling with correlations among independent variables medical care in the government, private, military areas, natural sites, and government duty against the dependent variable having Jordan marketed as the regional medical center. Therefore, to determine whether Jordan is the appropriate destination for medical care, more research is needed to establish the factors of the findings.

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AUTHOR CONTRIBUTIONS

Conceptualization: Ahmad Al Adwan.
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Formal analysis: Ahmad Al Adwan.
Funding acquisition: Ahmad Al Adwan.
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QUESTIONNAIRE

Kindly answer the below questions by ticking (√) in the right place:

A   Demographics of respondents

A. Age (in years)   25-30 ( )   30-35 ( )   35-40 ( )   40- 45 ( )   45 and above ( )

B. Gender: Male ( )   Female ( )

C. Marital status: Married ( )   Not married ( )

D. Place of residence: Urban ( )   Rural ( )

B   Push and pull factors that relate to Jordan as a medical center

a.) Push factors engagement	Strongly Agree Agree Neutral Disagree Strongly disagree
1. You visit Jordan for safety 2. Jordan is a nice place for adventure-seeking 3. Jordan is a nice place for recreation and relaxation 4. Jordan is equipped with modern health and fitness facilities	
b.) Pull factors engagement	
1. Jordan has an attractive safety infrastructure 2. Jordan has nice natural and historical attractions 3. Jordan has a good physical environment 4. Jordan has a modern infrastructure 5. Jordan has nice food	
c.) Image perception	
1. Safety mechanism in place creates a good image of Jordan 2. Seeking adventure in Jordan is a good image 3. Jordan has a good image perception due to its natural and historical attractions 4. Jordan has a good image perception due to its physical environment	
d.) Behavioral intention	
1. Visiting Jordan for safety is a behavioral intention 2. Seeking adventure in Jordan is a behavioral intention 3. Seeking health and fitness in Jordan is behavioral intention 4. Sports and recreation facilities in Jordan have an attractive behavioral intention 5. People living in Jordan have an attractive behavioral intention	
e.) Government facilitate	
1. The government has facilitated in Visas through image perception 2. The government has invested in airports to create a good image of Jordan 3. The government has invested in tourist guides to enhance image perception 4. The government has invested in transport as a behavioral intention 5. The government has heavily invested in tourism guides as a behavioral intention	
f.) Adoption of Jordan for medical tourism	
1. Jordan should be adopted due to the government's facilitation in visas 2. Jordan should be adopted since the government has heavily invested in tourist guide 3. Jordan should be adopted since the airports large enough to accommodate international flights 4. Jordan should be adopted since its transport sector is modernized and well serviced	