

THE REQUIREMENTS AND OPPORTUNITIES FOR PROMOTION OF CROATIAN HEALTH TOURISM

Vedran Kruljac

*Special Hospital for Medicinal Rehabilitation Varaždinske Toplice, Croatia
vedran.kruljac@vz.t-com.hr*

Bozo Skoko

*Faculty of Political Science of the University of Zagreb, Croatia
bskoko@fpzg.hr*

ABSTRACT

The paper deals with the possibilities of improving the supply and promotion of health tourism in Croatia. By analyzing the goals and procedures set forth in the Action Plan for the Development of Health Tourism in the Republic of Croatia and the activities undertaken to this end so far and considering the recent achievements of the countries with the most propulsive approach to and results in the promotion of the treatment of foreign patients, this work identifies the key barriers to the development of Croatia's health tourism and Croatia as a destination that has all the possibilities to include in its rich tourism supply the health care services for foreign citizens and establish itself permanently in the international market. The suggestions for resolving the identified deficiencies, order of actions, descriptions of activities, coordination of responsibilities and the suggestion for a different approach to promotion made in this paper draw upon the Action Plan and are accompanied by concrete international examples the implementation of which should guarantee the exploitability of the rich natural, material and human resources of the Republic of Croatia in order to contribute to the global health tourism supply and visible changes on the economic map of this part of Europe and beyond.

Keywords: *Croatia, health tourism, media, promotion, public relations.*

1. INTRODUCTION

Development policies in many countries stimulate health tourism as a significant contribution to economic growth and diversification. In some countries it is included in business and commercial promotion and often in tourism as such; its is therefore considered as part of tourism development strategy or – like in India – as part of a strategy consolidating various types of tourism (Connell, 2011, pp. 162).

Croatia has substantial assets in this area because the specific natural qualities that its health tourism is or could be based on are evenly distributed throughout the country and the medicinal properties of its individual destinations have been known since antiquity. These are: geological formations (mountains, limestone caves, mines, medicinal sands, therapeutic oils), climate (annual insolation, temperature, humidity, air currents, seasonal changes, climate zones – Mediterranean climate, mountain climate, special microclimates), water (sea water, mineral waters, medicinal mud) and plants (forests, medicinal herbs...).

However, these natural advantages have not been exploited sufficiently for the purpose of development of Croatia's health tourism (Kušen, 2011, pp. 95). Besides, Croatia has access to Adriatic Sea with its therapeutic properties, available for health tourism 365 days a year. The country also has some rarities – even in European and global contexts – such as Naftalan near Ivanić Grad and its therapeutic oils (found only there and in Baku, Azerbaijan).

Although the development of Croatian medicinal tourism has in principle been highlighted as one of the priorities of the development of tourism supply in the past decade, too little has actually been done about it – with the exception of private sector, which has expanded the supply with its individual projects. Admittedly, a move was made when the Action Plan for

Development of Health Tourism in the Republic of Croatia ("Action Plan") was presented on 8 June 2015 as a result of the cooperation of the Ministry of Tourism, Ministry of Health and Institute for Tourism (Kruljac, 2015, pp. 312). In the Action Plan presented by the Institute for Tourism on 8 December 2014, not a lot of attention was given to the promotion of this type of tourism; however, it did mention that the promotion of health tourism primarily came down to independent efforts of individual service providers, while the promotion on national level was relatively limited (Action Plan 2014, pp. 16).

This is why this paper will review what does the Action Plan consider as adequate promotion of Croatian health tourism, how does it comply with the viewpoints of experts, and what models can Croatia implement in the appropriate branding of its health tourism.

2. PAST ACTIVITIES IN PROMOTION OF HEALTH TOURISM IN THE REPUBLIC OF CROATIA

According to the Action Plan, the reason for the lack of adequate promotion is the fact that large public medical institutions such as clinical and general hospitals or policlinics still show no interest for health tourism. In other words, Croatia's health tourism is currently mostly limited to the services provided by the growing number of specialized private health-care institutions. Current market position of health tourism in Croatia is primarily determined by individual efforts of private practitioners and private clinics to penetrate the market, affordable prices for internationally acceptable quality in several fields of medical expertise and credibility of personnel and equipment. On the national level, health tourism supply is still sporadic, inadequately diversified, relatively unorganized and indistinctive. We cannot talk about clusters organized on a specialist basis or about vertical integration and linking of various stakeholders into an integrated destination value-chain. We should add to this the lack of systematic national promotion and strong sales network of incoming agencies and specialized facilitators. This is why Croatia is still not an internationally distinctive health tourism destination. Finally, when it comes to demand, the lack of statistical analyses of this specific tourist product prevents us from establishing even an approximate number of its current users (Action Plan 2014, pp. 16).

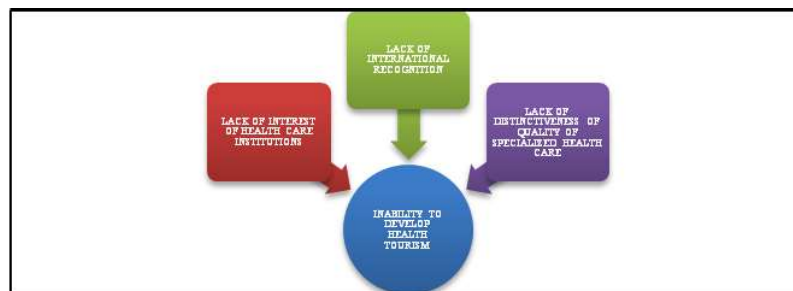


Figure 1: Barriers to the development and promotion of health tourism (Graph based on National Program – Action Plan for Development of Health Tourism 2014)

In its analysis of competing destinations, Action Plan indicates the importance of the distinctiveness of specialized health-care supply for the presentation of health tourism. Thus, it has been established that Slovenia is positioning itself as a new destination for health tourism, primarily specializing in dental medicine, orthopedics and sports medicine, while Hungary is positioning itself as "European dental medicine center", specializing also in plastic surgery, ophthalmology, orthopedics and IVF treatments (Action Plan 2014, pp. 19). Austrian private sector (public health is reserved for Austrian citizens) is focused on surgery, oncology, orthopedics and IVF and is oriented to the demand from the CEE countries and Near East. Using the European Union funds, Poland and Czech Republic have substantially improved the

quality of their medical institutions and – owing to the good perception of the quality of their medical services, prices significantly lower than in Western Europe (from 50 percent to as much as 70 percent lower) and government-stimulated promotion (Polish Health tourism Promotion Consortium and Czech MedicaTourism.cz are financed by the EU) – are positioning themselves as new European hubs for plastic surgery, dental medicine, orthopedics and IVF, targeting the patients from the US, UK, Germany and Russia. Turkey has also appeared as one of the most aggressive providers of health tourism, investing with equal intensity in facilities, quality of service and distinctiveness. Today, it has more prestigious Joint Commission International ("JCI") hospital certificates than any other European country (Turkey – 49; Austria – five; Slovenia – two). Given their resources and tradition, Romania, Bulgaria and Serbia can be considered as future competitors in the regional health tourism market, despite their still undeveloped and internationally recognized potentials. Romania has some three thousand thermal and mineral springs in around seventy health resorts, Bulgaria also abounds with mineral springs and medicinal mud centers, and Serbia has a long-established tradition of spas (Action Plan 2014, pp. 19).

Finally, based on an analysis of Croatia's regional competitors, Action Plan sees the following as preconditions for a successful promotion of its health tourism:

1. Integrated supply – Combining medicine, wellness and recreation within a single center (thermal baths);
2. Ensuring quality – Introducing national and/or international medical institution accreditation systems (e. g. Best Health Austria, ISO, DNV, JCI, ISPA, ESPA) and continued training of personnel on all levels of responsibility (e. g. Austrian BFI system and a number of health tourism management study programs);
3. Specialized sales and promotion – Web pages of service providers, national tourist boards, national marketing alliances or associations and/or specialized incoming agencies and facilitator agencies, and
4. Continued investments (Action Plan 2014, pp. 19).

3. STRATEGIES AND EXAMPLES OF SUCCESSFUL PROMOTION OF HEALTH TOURISM

The promotion of health tourism relies on informing consumers about health care services and their advantages and possibilities, acquainting them with various elements of marketing such as product, price and place and developing consumer awareness of certain products while creating their loyalty to a brand in the process. Promotion includes advertising, sales promotion, personal selling, direct marketing and public relations. In health tourism, advertising and public relations are the most frequently used methods of promotion. Advertising is a form of non-personal promotion oriented to the general public. A typical one-way communication with a consumer sends a message through various media: television, radio, press, brochures and Internet. Public relations activities include sponsoring of events and organizing charitable work (Jin, 2015, pp. 171). At that, it is important to put this segment into the context of the overall promotion of Croatian tourism. Also, promotion of health tourism has certain specific characteristics when compared with the classic marketing mix in other fields. Thus, Menvielle et al. (Menvielle et al., 2011, pp. 57) add to the four traditional Ps (product, place, price and promotion) three more Ps, specific for health tourism services; these are: physical dimension, personal contact and providing of the service. Consequently, what is important is a combination of material and immaterial dimensions of supply. Physical dimension is the first impression we get at our first encounter with some clinic or hospital (the appearance of buildings, face lifting, distinctiveness, medical aid quality...). Friendliness, kindness and expertise of the personnel,

as well as their knowledge of foreign languages, are of particular importance because they represent the emotional dimension of supply. The third segment includes the quality and price of medical services. These are also important elements in communication of health tourism since they provide additional arguments for accepting an offer – in other words, they define the level of satisfaction.

As regards the academic approach to defining health tourism promotions strategies, India has certainly done the most: a number of works that can be considered relevant for such an approach to branding of health tourism on national level have been published in the past years. Undoubtedly, India has a huge potential for becoming a consolidated branded destination of medical and wellness tourism. Participating in the branding of Indian health tourism are various experts and other stakeholders in health tourism, although the latter ones have not been included in the national marketing strategy; instead, they sell their products and/or services in the international market independently. In India, the stakeholders in health tourism do not share a common goal as those in Singapore, Malaysia, Republic of Korea and some other countries, where associations of tourist authorities, chambers of commerce, ministries of health and private organizations have been established (Bankar, 2014, <https://www.linkedin.com/pulse/20140524111528-60533361-brand-positioning-strategies-of-medical-tourism-a-case-study-of-india>).

The foreign patients seeking health care services in India are:

1. Persons who are not Indian residents – the treatments they receive in India are of the same quality as in their own countries, but at substantially lower prices;
2. Patients from other developing countries (Pakistan, Nepal, Bangladesh etc.) – the treatment they receive in India is of a much higher quality than in their own countries;
3. Patients with public health insurance from developed countries (Great Britain, for instance) – the waiting time in India is much shorter than in their own countries; and
4. Patients with private health insurance from developed countries (US, for instance) – the costs of treatment in India are much shorter than in their own countries (Kumar, 2009, pp. 89).

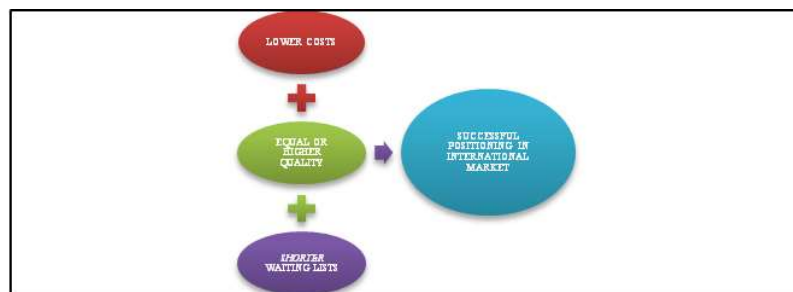


Figure 2: Factors of competitiveness of health tourism on international level (Graph based on Kumar, 2009)

Other countries have similar structure of the promotion of health tourism. Thus, the Association for Promotion of Costa Rican Health Care System consists of six health consortiums, three private hospitals, several universities and a hotel network. They are all involved in promotion of Costa Rica as a medical hub. Health tourism Chamber of Commerce in Poland brings together private stakeholders in order to promote the country's health care system. In Turkey, Ministry of Tourism and Culture promotes hospitals as eagerly as, for example, Topkapi Museum or the cavern hotel in Cappadocia. Thailand's State Tourist Administration provides

information available in Thai embassies, on its website and in its offices overseas. Cyprus has its Health Services Promotion Board and Republic of Korea has its Council for Korea Medicine Overseas Promotion (Reisman, 2010, pp. 133-134). Obviously, most medical-tourism generating countries have their respective government bodies specialized for promotion of health tourism on national level. This, however, does not affect autonomous promotional efforts of private stakeholders and – subject to their capacities – their direct contacts with international consumers.

Besides the abovementioned most expert approach to such promotion, it would seem that India has the most integrated promotion of health tourism, which has certainly contributed to the country's fast-growing success in this branch. Central for this is the portal India Healthcare Tourism.com which, using the slogan "Welcome to India, A Premier Healthcare Destination", provides a complete and easy-to-survey insight into all relevant information about India's health tourism: the most responsible persons (Prime Minister and Minister of Trade and Industry), most important information about Indian health care system, specialist treatments, locations, communications, service providers, accommodation and – particularly importantly – the *Success Stories* section, which allows patients to share their positive experience with Indian health care system and is linked to Facebook and Twitter.



Image 1: Portal India Healthcare Tourism.com
(Source: <http://www.indiahealthcaretourism.com>)

As probably the best known destination for the people of the third age in the world, Florida has its public-private agency Visit Florida – established by a 1996 law – that functions as the official marketing company of this state, specialized for developing programs for attracting visitors from all over the world. Aiming at development of health tourism, the contest Discover Florida Health was launched in November 2014: after the four-week evaluation by a committee made up of the representatives of Florida's Ministry of Health, Chamber of Commerce, academic community, tourist boards, tour operators, and Health tourism Association (the world's leading association for such tourism in the world), 25 prizes in a total amount of USD 3.1 million were awarded. Nine grants were given for promotion of destinations and 16 for promotion of medical facilities. Eligible for the contest were organizations for promotion of destinations and physicians and/or health care institutions with individual and/or joint projects (Visit Florida, 1 January, 2016). Although visually less attractive than its Indian counterpart, the portal that presents Czech health tourism has all the sections required for an integrated general promotion of the health tourism supply of a country: a description of Czech Republic as a health tourism destination, treatments offered, patients' stories, a list of service providers, communications and accommodation. The distinguishing feature of this portal is its online application form for medical treatments and an overview of approximate prices of treatments, allowing comparisons with the cost of identical services in other countries. As lower prices constitute the most important reason for seeking medical treatments abroad, a list of approximate prices should certainly be inevitable part of health tourism presentations of individual destinations both online and in any other format (Health Czech s.r.o, 01.01.2016).



Image 3: Portal HealthCzech.com (Source: <http://www.healthczech.com/>)

In 2010, Cyprus enacted its Strategy for the Organization, Development and Promotion of Health Tourism. While it does resemble to Action plan, it offers much more concrete promotion solutions than its Croatian version:

1. Ensuring stimulation of turning large hospitals and medical centers based on international standards in profitable economic subjects; quality assurance in the delivery of services provided by all stakeholders in the management of health traveler's: The ability to educate and provide information and guidance to all stakeholders concerning service delivery management based on international standards should become available.
2. Coherent approach to ensuring quality in provision of services; attracting potential capital investment in health tourism industry: In order to attract and safeguard investors willing to invest in this sector, it is necessary that all investments are made through the state, with the state being in the position of making all suitable arrangements for this transaction to take place.
3. Creating conditions for potential capital investments in health tourism;
4. Internationalizing hospital managements (using the Near East practice as a role model);
5. Continued monitoring of patients during and after therapies;
6. Developing medical facilitator activities in order to develop *one-stop-shop* packages;
7. International accreditation of hospitals;
8. Online availability of complete information on health service providers;
9. Using Internet in all other spheres enabling appropriate development of health tourism;
10. Developing accommodation infrastructure intended for foreign patients;
11. Creating a wide network of airline ticket sellers and
12. In cooperation with central authorities, introducing the highest possible flexibility of visa regime (Strategy for the Organization, Development and Promotion of Health Tourism in Cyprus, 2010, pp. 17-20).

4. POSSIBILITIES FOR IMPROVEMENT OF PROMOTION OF CROATIA'S HEALTH TOURISM

In the years to come, Croatia will necessarily enter a new phase of promotion that will require content-related, conceptual and technical changes. Now that its positioning as a Mediterranean tourist country known globally by its natural sights, clear blue sea and a thousand islands (Miličević et al., 2012) has been completed, the time has come for Croatia to tell the world a more concrete story about its overall natural, cultural, creative and all other potentials (in the context of tourism supply) and enrich its existing image of a country offering "sun and sea" with new attractions that will position it as a country of diversity and resources, where everybody – from history and classical music lovers to those who seek vitality to adventurers, gourmets and healthy life aficionados – can find something for themselves.

Consequently, promotion should become more direct and concrete and based on individual products or specificities of individual destinations, so that potential tourists could gain an

impression that it has been created particularly for them and not for everybody. In order to contribute to such an impression, a promotional message should be personalized (based on other people's experience), not general. Since Croatia is a member of the European Union that offers new possibilities in the European market, primarily in terms of drawing attention, it should necessarily present itself to its new neighbors in a more complex, direct and substantial way (while connecting its tourism promotion with other forms of promotion and public relations – health care, economy, culture and the like) and partly neutralize the existing stereotypes that mostly come down to sun, sea and war.

In terms of communication, it is necessary to exploit the huge technical possibilities (digitalization, social networks etc.) that have become available to modern tourism and complement with them the classical model based on advertising in media, participating in fairs, nurturing contacts with international media... A possibility of a completely personal approach to promotion now exists and channels and messages can be suited to fit various target groups (for example, young people from 25 to 35 years of age can be addressed via Internet and social networks and those from 55 to 65 years of age can be approached by means of public relations, using combined advertising etc.). At that, it is particularly important to keep in mind the differences between the target groups and their preferences, lifestyles, ways of communication and the media they follow. Such an approach will enable a more direct strengthening of Croatia's image and, at the same time, a more efficient linking of tourists and potential tourists with individual products and destinations. This is the only way to neutralize the negative stereotypes and associations that Croatia unfortunately still often evokes at the population with higher incomes in North European countries and make them perceive the country as an elite tourist destination, not a destination for the lower or middle classes. The promotion should particularly focus on new active consumer segments – couples of 55-65 years of age and young couples (25-35) who often travel out of season and have significantly wider motives for their travels. Additionally, part of the promotion should be focused on the programs and products outside classical summer season in order to contribute to extending Croatia's tourist season and positioning the country as a year-round tourist destination.

As we can see from the above given examples, particular stress should be made on the so-called new media because the Internet as a medium has a growing relevance for the promotion of tourism supply and tourism products. Besides speed, easy access, a large quantity of information and the possibility of a detailed analysis of the efficiency of advertising campaigns for the tourist offers of individual destinations, the Internet also boasts high price competitiveness when compared to other media. It is also a medium of the new generations. When obtaining information, planning trips, booking accommodation, buying tickets for events etc., they mostly rely on the Internet. Croatia's tourism promotion on the Internet and social networks must become more systematic, better coordinated and more functional. New communication technologies offer tourism subjects multiple possibilities for creating and promoting destination images, while providing at the same time the technical possibilities for obtaining information about services, sharing experience, booking etc. There are three key components that make this segment of promotion attractive: establishing a dialogue with visitors and potential visitors; enabling users to download information when they want to or feel the need to (unlike classical advertising in the traditional media aiming at short-term goals); and enabling multimedia communication that makes it possible to communicate with an addressee via text, image, video etc. (in other words, enabling networking of various sources of information, contents and other). Particularly important here is to offer rich contents and present them in diverse, interesting forms that can be customized for various addressees and to ensure regular updating and networking with other related sources of information. Proactive approach and timeliness must become priorities when communicating via this channel (from regular publishing of information on official websites to participating in forum discussions) and

advertising must be connected with the public relations contents and must allow direct booking and purchase. The entire website system must be much better networked (from the central portal to regions to products), so that its visitors are able to find the necessary information as soon as possible, instead of getting lost in the quantity of contents. Also, the official websites should be optimized in order to become the central information and communication points. A large majority of communication tools and public relations techniques are based on two-way communication that enables tourism subjects constant studying and understanding of the desires, needs and expectations of the public and tourists and continued development and strengthening of the relations with them.

While it may seem at first sight that only a good idea is what is required for using communication tools and techniques, the reality is completely different. The use of the tools and techniques requires prior consideration of numerous factors such as: communication goals, the population we communicate with, and the specific features of media as agents between us and target segments of the public. In other words, a research should be carried out in order to help bring visitors and potential visitors even closer to us. It is also important to develop clear and attractive messages and link them to credible sources. Preferably, public relations activities oriented to other countries and health tourism promotion activities in general should be coordinated from a single center (in order to ensure efficiency and reduce costs). To this end, it would be wise to establish a separate section of Croatian Tourist Board ("CTB") that would coordinate the public relations and promotion of the country's health tourism, continually inform international public, and also coordinate the cooperation with media and providers of such services in Croatia. In order to improve efficiency and increase the presence in international media markets, we suggest that professional public relations agencies be hired in key countries in order to strengthen Croatia's brand as a health tourism destination on the basis of the strategy and key messages. It is therefore important to ensure coordination between national communication and individual subjects in health tourism, because a foreign visitor's decision whether to accept a concrete offer or not also depends very much on the country's image and the interconnectedness of its tourism brand and health tourism.

5. CONCLUSION

In order to summarize the preconditions for the promotion of health tourism of the Republic of Croatia, three key problems hindering the development of such services in the country should first be solved in line with the regulations in force and Action Plan. The lack of interest in the development of health tourism manifested by the most relevant health care factors in Croatia should not be a problem at all if the central government imposes competition of health-care service providers by supporting financially the best rated development projects in health tourism on the basis of competing for the European Union funds and the model implemented in Discover Florida Health program described in section 3 of this paper. By using the same principle, the central government could remedy the insufficient degree of international recognition of Croatian health care institutions and the lack of distinctiveness of the specialist quality of the country's health care system by supporting – not necessarily financially – the acquiring of the international certificates already mentioned in Action Plan. Taking into account the examples of the countries with the highest growth of income from health tourism, it would be desirable to establish a specialized agency that would consolidate the activities related to health tourism currently carried out by the Institute for Health Tourism Services of the Ministry of Health and Autonomous Office for Implementation and Monitoring of Tourism Development Strategy of the Ministry of Tourism.

As far as promotion and branding are concerned, they do not have to wait for an investment boom or for the certification of a certain number of health care institutions to be implemented; such activities can begin immediately and be regularly updated in accordance with the shifts in

Croatia's development as a health tourism destination. The promotion and branding should preferably be assigned to the marketing, PR, IT and similar professionals with positive results in such and similar spheres, were they Croatian or foreign economic subjects. In this respect, while promotion at international fairs and abroad can remain within the scope of work of CTB, planning promotional campaigns, preparing promotional materials and devising Internet presentations should be assigned to professionals (who should necessarily apply to a call for proposals), provided that all these activities be jointly coordinated by a specialized agency of the central government. At any rate, promotion should include all the factors constituting the integrated identification of health tourism destinations: a list of (approximate) prices of services, essential information on Croatian health care system and tourism supply, specialist treatments, wellness offer, gastronomy, additional programs, locations, service providers, traffic information, accommodation, information for Croatian diaspora as a possible primary target group, and patients' experience; when it comes to presentation on the Internet, it should also include the possibility of online booking for treatments and active presence on the most relevant social networks should be ensured.

A successful promotion must also be accompanied by the other activities initiated by the central government: creating conditions for potential capital investment in health tourism; internationalization of hospital managements (not only because of the lack of Croatian professionals, but also in order to increase the quality of health-care institution management); prescribing continued monitoring of patients during and after the therapy; developing medical facilitator activities in order to develop *one-stop-shop* packages; customizing accommodation infrastructure to foreign patients; creating a wide network of airline ticket sellers; and introducing the highest possible flexibility of visa regime. Attracting potential capital investment in health tourism industry: In order to attract and safeguard investors willing to invest in this sector, it is necessary that all investments are made through the state, with the state being in the position of making all suitable arrangements for this transaction to take place.

LITERATURE:

1. Bankar, A. P. (2014). *Brand Positioning Strategies of Medical Tourism: A case study of India*. LinkedIn, <https://www.linkedin.com/pulse/20140524111528-60533361-brand-positioning-strategies-of-medical-tourism-a-case-study-of-india>.
2. Connell, J. (2011). *Medical tourism*. CABI, Wallingford, Cambridge (MA/USA).
3. Health Czech s.r.o. Retrieved 01.01.2016 from www.healthczech.com.
4. Jin, K. N. (2015). *Marketing medical tourism in Korea*. Edward Elgar Publishing, *Handbook on Medical Tourism and Patient Mobility*, N. Lunt, D. Horsfall, J. Henefeld, Cheltenham, Northampton, 164-173.
5. Kruljac, V. (2015). *Mogućnosti za brownfield projekte zdravstvenog turizma u Hrvatskom zagorju*. Hrvatska akademija znanosti i umjetnosti, Radovi Zavoda za znanstveni rad Varaždin, 26/2015, 309-337.
6. Kumar, S. (2009). *Designing promotional strategies for medical tourism in India: A case study of an ophthalmic hospital in NCR*. Health and Population: Perspective sand Issues, Vol. 32 (2), 86-95.
7. Kušen, E. (2011). *Positioning medical tourism in the border framework of health tourism*. Tourism, Vol. 59, 1/2011, 95-99.
8. Menvielle, L, Menvielle W. and Tournois N. (2011). *Medical tourism: A decision model in a service context*. Tourism, Vol. 59, 1/2011, 47-61.
9. Miličević, K, Skoko B. and Krešić, D. (2012). *The Power of Tourism in Creating a National Brand: The Case of Croatia*. V. Richards, *Destination Branding & Marketing IV*. Cardiff: Welsh Centre for Tourism Research and Cardiff Metropolitan University.

10. Nacionalni program – Akcijski plan razvoja zdravstvenog turizma (2014). Institut za turizam.
11. Reisman, D. A. (2010). *Health Tourism: Social Welfare Through International Trade*. Edward Elgar Publishing, Cheltenham, Northampton.
12. Services export promotion council. Retrieved 01.01.2016 from www.indiahealthcaretourism.com.
13. Strategy for the Organization, Development and Promotion of Health Tourism in Cyprus (2010). Quale Vita Healthcare Consulting Ltd.
14. Visit Florida. Retrieved 01.01.2016 from www.visitfloridablog.org.