



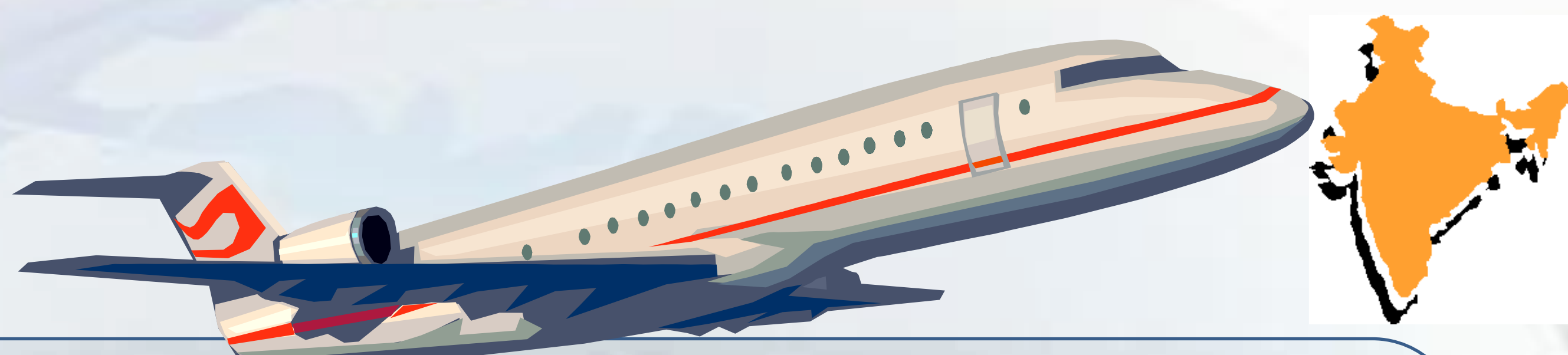
Medical Tourism c1976-2012

Indian 'High-Tech' Hospitals



1. Did you know that medical tourism is a rapidly growing commercial enterprise with widespread ramifications?

However, it has been subject to little historical analysis. I will explore the social, economic and political history of the modern medical tourism industry through a case study of India. I will ask: what effected the transition – in less than 40 years – from India having rudimentary surgical facilities to importing medical tourists for 'state-of-the-art' surgery? Incorporating illustrative studies of medical tourists and other stakeholders, my thesis will examine the development of India's 'high-tech' hospitals and the growth of medical tourism between India and the UK.



2. International trade in health services

The social, political and economic landscape for trade in health services has changed considerably since the term 'medical tourism' was coined circa 1976. The 2011 EU cross-border healthcare directive and bilateral trade agreements between India and the EU are forecast to expand markets for medical tourism, with the EU being India's biggest trading partner. UK policy makers and analysts are exploring implications for the NHS of increased medical tourism between UK and India. Until relatively recently, advanced surgical procedures were not available in India; yet today medical tourists travel to many Indian hospitals – such as Apollo and Narayana Hrudayalaya Groups – for 'state-of-the-art' surgery. Scientific and technical developments (such as molecular medicine, telemedicine and cyber-surgery) have transformed medicine, changed patients' expectations and increased medical tourism markets.



3. All this in less than 40 years!

India has moved from an absence of high quality healthcare to being seen as posing potential international threats – or opportunities – through telemedicine, importation of medical tourists and exportation of health services. How did these transformations occur? My analysis of the conditions enabling these changes will consider the politics and economics, particularly neo-liberal market reforms, neo-imperialism and deregulation of health and other services. My study will interrogate assumptions of medical tourism as consumer-driven, questioning the role played by economists, insurance/consultancy companies, and the rationing and regulating state. I will also ask: is medical tourism an innocuous phenomenon beneficial to healthcare, as most models of medical tourism suggest; or has the promotion of global medical tourism increased inequalities of access to healthcare in both host and medical tourists' countries? I will also explore contradictions inherent in government policies promoting medical tourism.

4. Medical Tourism 'Past' and 'Present'



Is 'new' medical tourism substantially different from earlier forms prior to the 1970s? While acknowledging that people have travelled for health purposes for millennia, I will question if recent medical tourism reflects escalating preoccupations with identity and the body over the last three or four decades. I will analyse how medical tourism, organised and enacted on an unprecedented scale, seems driven partly by the pursuit of individual health and satisfaction as well as by economics and governmentality. While earlier medical travellers sought thoroughgoing change as well as improved health, medical tourists' goals today appear mainly instrumental: reproductive, aesthetic or organic. While examining how these changes occurred, I will ask: how does the changing language of medical tourism reflect changes in the phenomenon itself?

5. Methodology:

This History of Medicine project, employing sociology, anthropology, health studies and medical geography where appropriate, will use a wide range of multi-media primary and secondary sources. These include policy documents, reports, newspapers, journals, websites, monographs, videos, marketing material, personal communications. To open up new lines of enquiry and enable more rounded and complex analysis of the subject, I will undertake fieldwork in the UK and India to conduct semi-structured oral history interviews with diverse medical tourism stakeholders. These interviews will serve a dual purpose of preserving those memories for future research. My aim is to contribute to existing scholarship by examining neglected perspectives on medical tourism and by highlighting the value of including historical perspectives in current policy debates on international trade in health services.

6. WANTED!



Oral histories, emails, letters, etc. Have you been, or do you know someone who has been a medical tourist in India, or who is involved in the industry? **Make YOUR history count!** Anyone who would like to contribute to my research please do get in touch.

7. Contact: Orla Mulrooney M.Phil/PhD Candidate

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