

Country strategic management of the medical tourism in emerging markets/countries, with the case study: Metropolitan Lima, Peru

Inès Villafana, Marcos Ferasso

▶ To cite this version:

Inès Villafana, Marcos Ferasso. Country strategic management of the medical tourism in emerging markets/countries, with the case study: Metropolitan Lima, Peru. 11ème Colloque de l'Association Tourisme Recherche et Enseignement Supérieur (AsTRES), "L'agilité touristique en période de crises: réplications, accélérations, réinventions..?", Association Tourisme Recherche et Enseignement Supérieur; Université Côté d'Azur, Nov 2022, Nice, France. hal-04111586

HAL Id: hal-04111586 https://hal.science/hal-04111586v1

Submitted on 18 Jul 2023

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers. L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.





(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

Dissertation proposal

Title

Country strategic management of the medical tourism in emerging markets/countries, with the case study: Metropolitan Lima, Peru

Author's information

INÉS CRISTINA VILLAFANA MEGO / INÉS VILLAFANA Universidad San Ignacio de Loyola (USIL), Consorcio de Universidades ines.villafana@usil.pe, 19900796@aole.ulima.edu.pe, a20194092@pucp.edu.pe

ABSTRACT

Research gap: Previous studies have reviewed the issue of the country strategic management of the medical tourism sector in developed countries, but there is very little written about it in emerging markets. In this research we are connecting information related to the supply chain and proposing a model to guide experts in the medical tourism sector for their country strategic management.

Purpose: To unveil the current situation of the country strategic management of the medical tourism sector through the analysis of its factors related to organizational competitiveness and propose proposals for improvements that favor the positive perception of the sector to encourage the increase in the demand for the service and its sustainable development over time.

Methodology/technique: For this research, a model of Strategic Management is proposed, and the case study methodology with interviews was applied to some stakeholders. There will also be analysis of secondary source, and subsequently a first presentation of the data in a table comparing the pattern of the most influential management factors of the selected companies.

Main findings/implications: With the processing of this data, it will be possible to establish the current situation of the sector by analyzing its factors and subsequently proposing improvements for the country strategic management of the service.

KEYWORDS: Strategic management / medical tourism / supply chain / indicators and/or factors of medical tourism / organizational competitiveness

INTRODUCTION

Object of the communication

The previous studies have reviewed the issue of medical tourism and its strategic management in developed countries, but there is very little written about it in emerging markets. At the same time, in this research we are connecting information related to supply chain and proposing a model of Strategic Management that will serve as a guide for experts in the medical tourism sector for their country strategic management in related organizations. Finally, we will propose improvements that could be applied to the medical tourism sector to improve the management of the sector.

Problematic

The need to identify the current country strategic management of medical tourism in emerging markets, with the case study: Metropolitan Lima, Peru through the analysis of its factors and their relationships to propose improvements in the perception of their organizational competitiveness. It is necessary to know more about the subject to understand the current country strategic management in the medical tourism sector and to give proposal solutions that improves the service provided for the benefit of related stakeholders and services users.

Research question

¿Which are the factors that impact the most and how do they impact on an efficient country strategic management of medical tourism in emerging countries, with the case study: Metropolitan Lima, Peru considering the competitiveness of organizations of this chain?

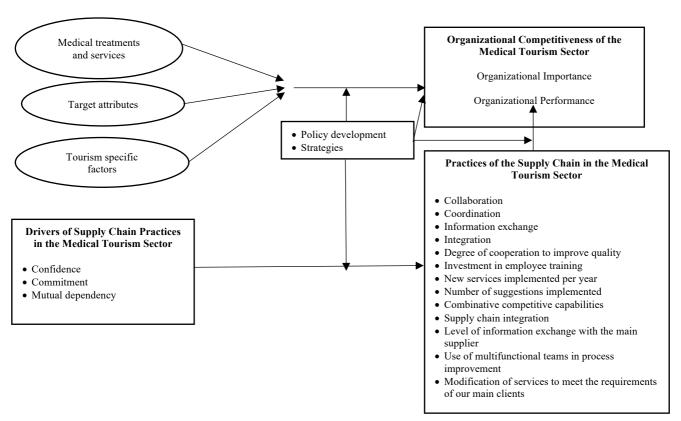
General Objective

Identify the integration and articulation of the selected companies of the supply chain (push stakeholders) of the medical tourism sector in emerging markets, with the case study: Metropolitan Lima, Peru, through the identification and comparison of the factors that impact their management strategy and influence their organizational competitiveness (organizational importance and performance).



(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

MODEL OF STRATEGIC MANAGEMENT



Font: Junio, M. M. V., Kim, J. H., Lee, T. J. (2017). Competitiveness attributes of a medical tourism destination: The case of South Korea with importance-performance analysis.

Lee, H. K. Fernando, Y. (2015). The antecedents and the outcomes of the medical tourism supply chain.

Gunasekaran, A., Patel, C., Tirtiroglu, E. (2001). Performance measures and metrics in a supply chain environment.

Chia, A., Goh, M., Hum, S-H., (2009). Performance measurement in supply chain entities: balanced scorecard perspective.

Peirchyi Lii, Fang-I. Kuo (2016). Innovation-oriented supply chain integration for combined competitiveness and firm performance Flynn, B. B., Huo, B., Zhao, X. (2010). The impact of supply chain integration on performance: A contingency and configuration approach.

Medical tourism.- services given by the stakeholders of the tourism and the medical sectors. The travel of people to a specific destination to seek medical help that forms the primary purpose of their trip. (Wongkit and McKercher, 2013, p. 5)

Supply chain.- All the stakeholders related on the service that integrates, in this case, medical tourism. Push stakeholders.- are the stakeholders related on the supply of the service.

METHODOLOGY

This research proposes to analyze how the country strategic management of the medical tourism sector is found in emerging markets, with the case study: Metropolitan Lima, Peru through the analysis of the most influential management factors of the selected companies that influence the perception of their organizational competitiveness and subsequent improvement proposals for the strategic management of the service. The study to be carried out will be cross-sectional and exploratory, being a multiple case study with a quantitative question approach supported by the proposal of the strategic management model and the subsequent comparison of the pattern of its most influential management factors of their related companies; with the processing of three interviews and secondary information found in internet until saturation. The interviews were carried out to three organizations of the tourism and health sector (medical tourism) and the study subjects are the professional experts/managers of both sectors.

In first instance, an exploratory analysis was carried out. To apply the interview guide (annexe 1), the informed consent form was added to the study subjects, which was included at the beginning of it. Regarding the access to the participants for the initial contact and the subsequent application of the instrument, this was done directly (via telephone contact, email and virtually through Zoom). As the necessary sample size could not be reached by surveys in the first moment, the procedure was changed to



(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

exploratory interviews applied to some study subjects (qualitative study), complementing the information with other exploratory surveys initially applied to other study subjects (tourism and health sector's experts). The study carried out is post positivist (multiple case study), where the information is in process of being collected, will be interpreted and the study report will be prepared. I am currently gathering information from secondary sources through internet to complement the research. And at the end the results will be presented. To analyze the results, the use of Excel (sheet) and the qualitative methodology will be considered. It is proposed to use tables and/or interpretations of the interviews in accordance with the field work and what the literature says.

The University was asked for a letter of introduction from the Doctoral Candidate (in pdf format) that was delivered/sent by mail to the person that was interviewed. To apply the surveys and the interviews, the informed consent form was added to the study subjects, which was included at the beginning of the survey and the interview. Ethical considerations such as plagiarism, double publication and falsification of some data are absolutely observed for the realization of this work. Finally, this research has already been presented to the Ethics Committee for compliance with the requested requirements and has its approval. Due to some adjustments made to this research, an addendum was presented to the Ethics Committee and has its respective approval, too.

EXPECTED RESULTS

It is expected to be able to identify the current situation of the Strategic Management and Supply Chain of the interviewed companies, identify some of their strengths and weaknesses and be able to propose alternatives to improve this situation that may favor the development of the medical tourism sector.

DATA COLLECTION

For applying the three interviews (primary data), first the related stakeholders were contacted by phone and by mail where the interview questions were sent to them so they could check them, and then, the interview was coordinated through the Zoom platform. Of all the stakeholders contacted, the interview was applied only to those who agreed to be interviewed. The interviews were applied between April and May 2022, to a Clinic (name in reserve), to Tucano Peru and to the Association of Hotels, Restaurants and related, Ahora Perú. Each interview lasted 45 minutes on average. Stakeholders were asked for permission to record the interview. Likewise, the consent agreement was requested for the interview and the use of the information collected for academic/research purposes. Finally, they were told that when the respective publication of the study is carried out, the information (papers/thesis published) will be shared with them so that they can use it as a reference in their respective works.

For the secondary data, I am still in the process of checking what has been published in the internet, until information saturation is reached.

The data collection instrument consists of 4 stages. The first stage consists of the initial contact with the stakeholder to empathize with him/her and collect information related to their professional background and his/her expertise in the sector. The second stage consisted of asking him/her questions related to his/her professional performance in the management of the area, the current situation of the area and his/her management in the interrelation with the other strategic stakeholders of the sector. The third stage consisted on asking area-specific questions about factors related on organizational importance and performance. And the fourth stage consisted in the close of the interview and asking him/her if there is anything else considered important that she/he wants to add. For preparing the instrument, I have considered as reference the one used in the paper of Junio, M. M. V., Kim, J. H., Lee, T. J. (2017) and the one used in the master's thesis of Ferasso, M. (2008) and complemented with the information of the papers of Lee, H. K. Fernando, Y. (2015), Gunasekaran, A., Patel, C., Tirtiroglu, E. (2001), Chia, A., Goh, M., Hum, S-H., (2009), Peirchyi Lii, Fang-I. Kuo (2016) and Flynn, B. B., Huo, B., Zhao, X. (2010).

DATA ANALYSIS (part of it)

	Stakeholder 1 (Health)	Stakeholder 2 (Tourism)	Stakeholder 3 (Tourism)
Professional	Deputy manager of health services	Founder of a tourism company,	Manager of the Association
background and	with 12 years of experience in the	which is precisely the partner of	of Hotels, Restaurants and
expertise	operation's area and Master of	APTAE. I studied my	Related. I have been
	Business Administration. Age: 50.	Baccalaureate in Tourism, at the	manager for three years,
		School of Tourism, which is	being Director since 2004.
		Cenfotur. My training is in the field	My studies are Superior,
		of tourism administration and	not finished. Age: 73.
		management, in addition to studies	Ü
		related to market niches, that is, I	



(+51) 992 645198 * <u>ines.villafana@usil.pe</u> * <u>19900796@ulima.edu.pe</u> * <u>a20194092@pucp.edu.pe</u>

trends and fashions in terms of travel, in all its ranges, from a market, for example, luxury to a market also of tourism, of social responsibility, wellness tourism, which is what I am carrying out lately a lot of study also to strengthen that market through different resources that Peru has. I finished my studies at the age of 20 and since that date I have been involved in the entire tourism sector, always, here in Peru, and I have worked in Europe for about six years. I was in Europe, also in charge of important companies in the tourism hospitality sector. I have more or less like 35 years in

have always been in charge of a lot of research work, also in creating

Professional performance in the management of area, the the current situation of the area and his/her management the interrelation with the other strategic stakeholders of the sector

Very dynamic topic due to the interrelation that an IPRESS (Health Services Provider Institution) has with all the actors of the health system, whether they are financiers or regulators. Very dynamic topic that has been changing, especially since 2000, from the mid-2010s, more or less between 2014 and 2015 there were changes that have made many health facilities change their way of working. What we provide are health benefits in different modalities, emergency care modality, hospitalization and consultation. Usually, the level two establishments that have hospitalization, the specialties of Neurology, Nephrology, Cardiology, Ophthalmology, others are always present. In general, more than 200 work with me.

The context of the pandemic has made precisely the strategic resource highly valued. Regarding the issue of equipment, it is well known that in medical supplies, in terms of critical areas such as UCI environments, UCI equipment, ventilators on the one hand and on the other hand, the personnel in charge of management is also scarce. We also have a lot of competition and a lot of staff turnover. So, the strategic staff of these areas is in high demand and is very scarce in the health system. So, for a health organization, these situations that were already there before the pandemic, plus the problems of the pandemic, are what have generated these inconveniences. The most relevant current problem for the sector is the shortage of supply in the health sector. A big problem is that we do not close the gap between supply and demand. So, we have

the travel sector. At the Peru level and at the level of other countries especially in Europe. I have worked in the United Kingdom and I was in charge of the office that is now called PromPerú, the Peruvian Tourist Board office that is in the headquarters of England. I was in charge of the London office, I was the director. So there I saw Scandinavian countries and all of Europe. And also, that was seeing the issue from the point of attracting those markets to Peru, with different studies that I also did of these markets. I worked with the trade of what was the travel sector and also with the media sector press. And everything that was related to looking at Peru with another vision that was, for example, through its paintings, galleries. I had a lot of exchanges, for example from painting schools here, from children who painted, for example I did exhibitions and galleries in Milan, in London. I even got a scholarship for a boy from Pucallpa whose teacher was Pablo Maringo, An extraordinary painter from all over the Amazon and we took the paintings from Pucallpa to the gallery in London. And the boy had a scholarship to study at Oxford: Art and Painting totally free. I was also in charge of an office in Belgium for about three years that saw all the representation of entrepreneurs who wanted to venture into Europe with their businesses, but who had and needed a communication issue to be able to better identify the products in these destinations of Europe. And I was the one in charge of all the marketing, the representation, the commercial part. So I have always been with the flag of Peru, moving everywhere, internationally. And now, recently for these issues, I have stayed here in Peru and I have

My experience in the tourism sector has basically been since the year 91. Professionals with me, there are a lawyer, an accountant and a journalist apart from administrative staff. The difficulties that currently arise is the situation of the sector basically as a problem, the situation due to the pandemic, obviously, and the reactivation. I would say that the current problem is the reactivation, the problems are the low arrival of foreign international tourists and the poor domestic tourism that we have, which means that companies are experiencing serious problems, problems at the hotel level, specifically more hotels and restaurants. The company basically develops strategies with our associates. Although we are a company, we are a business association, we work more than anything with our associates. And we also have meetings, obviously, and we belong to the National Chamber of Tourism in which we share this work with other business associations in the tourism sector. The strategic part: we work, as I was saying, with other unions but we also work with the Ministry of Foreign Trade and Tourism, with the Ministry of Production, with the Congress of the Republic. regional governments and municipalities, and local governments. My organization develops

with all the companies in the

sector, especially with all

those in the tourism sector



(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

a difficulty in being able to been working precisely on the which are relatively related structure an offer of health development of wellness tourism. to tourism. We are talking wellness routes that are not being services that can not only be about travel agencies, tour providing accessible care, but taken into account in Peru and that operator agencies, tour also quality care, because there we have them at hand and it can be guides. At international fairs, are many variants in what is an interesting aspect so that Peru those who make convention compliance with standards. The can have another type of identity bureaus. Other hotel guilds offer that the sector provides is and not only culture and history. and other restaurant guilds. not adjusted to the basic standards The Lima Chamber of of care. The Peruvian norm has Commerce, which has a standards since 2007, but they are tourism guild. very little respected or very little attended to. So, it is not only a matter of quantity, but also a matter of quality.

LIMITATIONS

Difficult of acceptance by some of the stakeholders to participate in the interview.

THEORETICAL CONTRIBUTIONS

Academy:

- Scientific mapping (bibliometric report) of the bibliographic review related to the medical tourism sector.
- Proposal of a strategic management model to be considered in the management of organizations in the medical tourism sector, which articulates the factors of the strategic management of the medical tourism's supply chain with the management of related organizations.
- It will favor the monitoring of the situation of the medical tourism sector and will provide improvement actions for its efficiency and effectiveness.

IMPLICATIONS FOR PRACTITIONERS

Business:

- Proposal of improvements in the medical tourism sector through the identification of the most influential factors and the comparison of their general pattern, in the context of the supply chain (push stakeholders) that influence the competitiveness of these companies.
- Better understanding of the quality of the medical/tourist services in Metropolitan Lima, Peru that aims to propose improvements to them, which would result in greater demand for it and its sustainable development over time.

State:

- Proposal of improvements to be considered by the government institutions of the country to improve the strategy applied to the medical tourism sector through the management of these organizations, not only for Peru but also to replicate later in Latin America.
- Proposal of improvements that contribute to the achievement of the objectives of the National Health Plan to 2030 (MINSA, 2020).
- Proposal of improvements that contribute to the achievement of the objectives of the National Competitiveness and Productivity Plan 2019 2030 (MEF, 2019).



(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

REFERENCES

- Abraham, J.M.a, Gaynor, M.b,c, Vogt, W.B. (2007). Entry and competition in local hospital markets. Journal of Industrial Economics, 55(2), 265-288. http://doi.org/10.1111/j.1467-6451.2007.00311.x
- Adams, K., Snyder, J., Kingsbury, P., Johnston, R., Crooks, V.A. (2011). An industry perspective on Canadian patients' involvement in Medical Tourism: Implications for public health. BMC Public Health, 11(416). http://doi.org/10.1186/1471-2458-11-416
- Agan, Y (2011). Impact of operations, marketing, and information technology capabilities on supply chain integration. Journal of Economics and Social Research, 13(1), 27-56.
- Alberti, F.G., Giusti, J.D., Papa, F., Pizzurno, E. (2014). Competitiveness policies for medical tourism clusters: Government initiatives in Thailand. International Journal of Economic Policy in Emerging Economies, 7(3), 281-309.

http://doi.org/10.1504/IJEPEE.2014.065252

- Al-Talabani, H., Kilic, H., Ozturen, A., Qasim, S.O. (2019). Advancing medical tourism in the United Arab Emirates: Toward a sustainable health care system. Sustainability (Switzerland), 11(1), Article number 230. http://doi.org/10.3390/su11010230
- Alvarez, M. M., Chanda, R., Smith, R. D. (2011). The potential for bi-lateral agreements in medical tourism: A qualitative study of stakeholder perspectives from the UK and India. Globalization and Health, 7 (11). http://doi.org/10.1186/1744-8603-7-11
- Armistead, C.G., Clark, G. (1993). Resource Activity Mapping: The Value Chain in Service Operations Strategy. The Service Industries Journal, 13(4), 221-239. http://doi.org/10.1080/02642069300000070
- Azmi, K.M., Awang, K.W. (2012). Sustainable tourism development and stakeholders' networking: A case study on medical tourism in Malaysia. Current Issues in Hospitality and Tourism Research and Innovations Proceedings of the International Hospitality and Tourism Conference, IHTC 571-576. ISBN: 978-041562133-5. ISBN: 978-020307536-4;978-041562133-5
- Baggio, R.a, Cooper, C.b (2010). Knowledge transfer in a tourism destination: The effects of a network structure. Service Industries Journal, 30(10), 1757-1771. http://doi.org/10.1080/02642060903580649

BCRP http://www.bcrp.gob.pe

- Beckert, W.a, Christensen, M.b, Collyer, K.a (2012). Choice of NHS-funded Hospital Services in England(Article). Economic Journal, 122(560), 400-417. http://doi.org/10.1111/j.1468-0297.2012.02496.x
- Bevan, G.a, Skellern, M.b (2011). Does competition between hospitals improve clinical quality? A review of evidence from two eras of competition in the English NHS. BMJ (Online), Open Access, 343(7830), Article number d6470. http://doi.org/10.1136/bmj.d6470
- Bloom Consulting (junio, 2020). Covid-19 El impacto sobre comportamiento turístico. https://www.promperu.gob.pe/TurismoIN/covid-19?page=2
- Borgatti, S.P., Halgin, D.S. (2011). On network theory Organization Science, 22 (5), 1168-1181. http://doi.org/10.1287/orsc.1100.0641
- Brekke, K.R., Gravelle, H., Siciliani, L., Straume, O.R. (2014). Patient choice, mobility and competition among health care providers. Developments in health economics and public policy, 12, 1-26. http://doi.org/10.1007/978-88-470-5480-6 1
- Brekke, K.R.a, Siciliani, L.b, Straume, O.R.c (2008). Competition and waiting times in hospital markets. Journal of Public Economics, 92(7), 1607-1628. http://doi.org/10.1016/j.jpubeco.2008.02.003
- Buhalis, D., Deimezi, O. (2004). E-Tourism Developments in Greece: Information Communication Technologies Adoption for the Strategic Management of the Greek Tourism Industry. Tourism and Hospitality Research. 5(2), 103-130. http://doi.org/10.1057/palgrave.thr.6040011
- Canatur Perú (2020). Perspectivas en turismo 2025. [Webinar]. Youtube. https://www.youtube.com/watch?v=CxrngNmn-9o
- Carrera, P. M.a, Bridges, J. F. P.b (2006). Globalization and healthcare: Understanding health and medical tourism. Expert Review of Pharmacoeconomics and Outcomes Research, 6(4), 447-454. http://doi.org/10.1586/14737167.6.4.447
- Casey, V., Crooks, V. A., Snyder, J. et al. (2013). "You're dealing with an emotionally charged individual...": an industry perspective on the challenges posed by medical tourists' informal caregiver-companions. Globalization and health, 9(31). http://doi.org/10.1186/1744-8603-9-31



(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

- Casey, V., Crooks, V.A., Snyder, J., Turner, L. (2013). Knowledge brokers, companions, and navigators: A qualitative examination of informal caregivers' roles in medical tourism. International Journal for Equity in Health, 12(1), Article number 94. http://doi.org/10.1186/1475-9276-12-94
- Castilla, L.M. (2020), Diario Gestión, 01 de junio 2020. Recuperado de: https://gestion.pe/opinion/reinventando-el-turismo-para-la-era-poscovid 19noticia/?ref=gesr
- Chan, H. K., & Chan, F. T. S. (2009). Effect of information sharing in supply chains with flexibility. International Journal of Production Research, 47(1), 213-232.
- Chan, H. K., & Chan, F. T. S. (2010). A review of coordination studies in the context of supply chain dynamics. International Journal of Production Research, 48(10), 2793-2819.
- Che Senik, Z., Masood, A., Adham, K.A., Halid, N., Mat Isa, R., Low, S.-W. (2013). KPJ Healthcare: the first 30 years. Emerald Emerging Markets Case Studies, 3(4), 1-9. http://doi.org/10.1108/EEMCS-06-2013-0081
- Chee, H.L.a, Whittaker, A.b, Por, H.H.c (2017). Medical travel facilitators, private hospitals and international medical travel in assemblage. Asia Pacific Viewpoint, 58 (2), 242-254. http://doi.org/10.1111/apv.12161
- Chen, D. (2009). Innovation of tourism supply chain Management. International Conference on Management of e-Commerce and e-Government, 310-313.
- Chen, J. V., Yen, D. C., Rajkumar, T. M., & Tomochko, N. A. (2011). The antecedent factors on trust and commitment in supply chain relationships. Computer Standards & Interfaces, 33(3), 262-270.
- Chia, A., Goh, M., Hum, S-H., (2009). Performance measurement in supply chain entities: balanced scorecard perspective. Benchmarking: An International Journal, 16(5), 605-620. https://doi.org/10.1108/14635770910987832
- Chung, K.-C.a, Chang, L.-C.b (2018). A sustainability strategy assessment framework model for medical tourism supply chain in Asia. Journal of Testing and Evaluation, 46(2), Article number JTE20160424. http://doi.org/10.1520/JTE20160424
- Cohen, D.A., Levy, M., Cohen Castel, O., Karkabi, K. (2013). The influence of a professional physician network on clinical decision making. Patient Education and Counseling, 93 (3), 496-503. http://doi.org/10.1016/j.pec.2013.08.012
- Connell, J. (2013). Contemporary medical tourism: Conceptualisation, culture and commodification. Tourism Management, 34, 1-13. http://doi.org/10.1016/j.tourman.2012.05.009
- Crooks, V.A., Kingsbury, P., Snyder, J., Johnston, R. (2010) What is known about the patient's experience of medical tourism? A scoping review. BMC Health Services Research, 10, art. no. 266. http://doi.org/10.1186/1472-6963-10-266
- Crouch, G.I. (1994). The Study of International Tourism Demand: A Review of Findings. Journal of Travel Research, 33(1), 12-23. http://doi.org/10.1177/004728759403300102
- Dedmon, R.E.a,b (2009). The future of primary care in Thailand in the context of a global financial crisis(Review) Asian Biomedicine, 3(4), 345-350. ISSN:19057415
- De la Hoz-Correa, A.a, Muñoz-Leiva, F.a, Bakucz, M.b. (2018). Past themes and future trends in medical tourism research: A co-word analysis. Tourism Management, 65, 200-211. http://doi.org/10.1016/j.tourman.2017.10.001
- Deloitte (2009). Consumer in search of value. Medical tourism. Enero 2009.
- Dwyer, L.a, Edwards, D.b, Mistilis, N.c, Roman, C.d, Scott, N.e. (2009). Destination and enterprise management for a tourism future. Tourism Management, 30(1), 63-74. http://doi.org/10.1016/j.tourman.2008.04.002
- El Comercio (2018). Turismo de salud en Perú genera unos US\$ 120 millones al año. 10 de junio de 2018. Enrich in LAC (mayo de 2022). Cambios de la Atención Médica Moderna después del COVID [Presentación en Power Point]. Red Latinoamericana y Caribeña de Puntos Nacionales de Contacto (Red LAC NCP), Agencia Uruguaya de Cooperación Internacional.
- Enright, M. J., & Newton, J. (2004). Tourism destination competitiveness: A quantitative approach. Tourism Management, 25(6), 777–788. http://doi.org/10.1016/j.tourman.2004.06.008
- Enright, M. J., & Newton, J. (2005). Determinants of tourism destination competitiveness in Asia Pacific: Comprehensiveness and universality. Journal of Travel Research, 43(4), 339–350. http://doi.org/10.1177/0047287505274647
- Estudio McKinsey (2008). Mapping the market for medical travel. Mayo 2008.
- Ferasso, M. (2018), Inovações como fatores estratégicos de PMES high-tech localizadas em ecossistemas de inovação: uma análise cross-national a partir da abordagem das configurações. Dissertation PhD in Management, Federal University of Parana, Curitiba.



- (+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe
- Ferrer, M., & Medhekar, A. (2012). The factors impacting on the management of global medical tourism service supply chain. GSTF Journal on Business Review, 2(2). http://dx.doi.org/10.5176/2010-4804-2.2.204
- Fetscherin, M., Stephano, R.-M. (2016). The medical tourism index: Scale development and validation. Tourism Management, 52, 539-556. http://doi.org/10.1016/j.tourman.2015.08.010
- Fletcher, J. E., Kaiser, R. A., & Groger, S. (1992). An assessment of the importance and performance of park impact fees in funding park and recreation infrastructure. Journal of Park and Recreation Administration, 10(3), 75–87.
- Flynn, B. B., Huo, B., Zhao, X. (2010). The impact of supply chain integration on performance: A contingency and configuration approach. Journal of Operations Management, 58-71. http://doi.org/10.1016/j.jom.2009.06.001
- Fongtanakit, R.a, Somjai, S.a, Prasitdumrong, A.b, Jermsittiparsert, K.c. (2019) The determinants of the medical tourism supply chain of Thailand. International Journal of Supply Chain Management, 8(6), 291-300. ISSN:20513771
- Gallarza, M.G.a,cSaura, I.G.b, García, H.C.b (2002). Destination image: Towards a conceptual framework. Annals of Tourism Research, 29(1), 56-78.
- http://doi.org/10.1016/S0160-7383(01)00031-7
- Ganguli, S., Ebrahim, A.H. (2017). A qualitative analysis of Singapore's medical tourism competitiveness. Tourism Management Perspectives. 21(1), 74-84. http://doi.org/10.1016/j.tmp.2016.12.002
- Ghosh, T.a, Mandal, S.b (2019). Medical Tourism Experience: Conceptualization, Scale Development, and Validation. Journal of Travel Research, 58(8), 1288-1301. http://doi.org/10.1177/0047287518813469
- Go, F., & Zhang, W. (1997). Applying importance–performance analysis to Beijing as an international meeting destination. Journal of Travel Research, Spring, 42–49.
- Goodrich, J.N. (1993). Socialist cuba: A study of health tourism. Journal of Travel Research, 32(1), 36-41. http://doi.org/10.1177/004728759303200106
- Gunasekaran, A., Patel, C., Tirtiroglu, E. (2001). Performance measures and metrics in a supply chain environment. International Journal of Operations & Production Management, 21(1/2), 71-87. https://doi.org/10.1108/01443570110358468
- Gutiérrez Peña, A. (2018). Turismo de salud: Articulación estratégica entre los sectores turismo y salud en Barranquilla. Servicio Nacional de Aprendizaje SENA/Atlántico, Barranquilla, Colombia.
- Guzmán, J. Moreno, P., Tejada, P. (2008). The tourism SMEs in the global value chains: The case of Andalusia. Service Business, 2(3), 187-202. http://doi.org/10.1007/s11628-008-0034-6
- Hanefeld, J., Horsfall, D., Lunt, N., Smith, R. (2013). Medical Tourism: A Cost or Benefit to the NHS? 8(10), art. no.e70406. http://doi.org/10.1371/journal.pone.0070406
- Hanefeld, J., Lunt, N., Smith, R., Horsfall, D. (2015) Why do medical tourists travel to where they do? The role of networks in determining medical travel. Social Science and Medicine, 124, 356-363. http://doi.org/10.1016/j.socscimed.2014.05.016
- Hanefeld, J., Smith, D.R., Lunt, N., Horsfall, D. (2014). What do we know about medical tourism a review of the literature with discussion of its implications for the UK NHS as an example of a public health care system. J.Med. Travel.
- Hartwell, H.a, Fyall, A.b, Willis, C.a, Page, S.a, Ladkin, A.a, Hemingway, A.c (2018). Progress in tourism and destination wellbeing research. Current Issues in Tourism, 21(16), 1830-1892. http://doi.org/10.1080/13683500.2016.1223609
- Heath, E. (2003). Towards a model to enhance destination competitiveness: a southern African perspective. Journal of Hospitality & Tourism Management, 10(2), 124-141.
- Helena, R. (2016). Cross-border healthcare directive: Assessing stakeholders' perspectives in Poland and Portugal. Health Policy, 120(4), 369-376. http://doi.org/10.1016/j.healthpol.2016.02.009
- Hernadez Sampieri, R., Fernández Collado, C. y Baptista Lucio, P. (2010). Metodología de la Investigación (5ta Edición). México D. F.: Mc Graw Hill.
- Heung, V.C.S., Kucukusta, D. (2013). Wellness tourism in China: Resources, development and marketing. International Journal of Tourism Research, 15(4), 346-359. http://doi.org/10.1002/jtr.1880
- Hin, C.W., Bohari, A.M., Pu, L.T. (2013). An analysis of competitiveness of medical tourism in Malaysia and Thailand: A strategic management approach. International Business Management, 7(6), 493-499. http://doi.org/10.3923/ibm.2013.493.499



(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

- Hobson, J.S.P.a, Dietrich, U.C.b (1995). Tourism, health and quality of life: Challenging the responsibility of using the traditional tenets of sun, sea, sand, and sex in tourism marketing. Journal of Travel and Tourism Marketing, 3(4), 21-38. http://doi.org/10.1300/J073v03n04_02
- Hopkins, L., Labonté, R., Runnels, V., Packer, C. (2010). Medical tourism today: What is the state of existing knowledge. Journal of Public Health Policy, 31 (2),185-198. http://doi.org/10.1057/jphp.2010.10
- Ipsos Europe Assistence Barometer (julio, 2020). El futuro de los viajes: resultados a nivel global. https://www.promperu.gob.pe/TurismoIN/covid-19?page=2
- Jones, S. (2010). The economic contribution of tourism in mozambique: Insights from a social accounting matrix. Development Southern Africa, 27(5), 679-696. http://doi.org/10.1080/0376835X.2010.522831
- Junio, M.M.V.a, Kim, J.H.b, Lee, T.J.c (2017). Competitiveness attributes of a medical tourism destination: The case of South Korea with importance-performance analysis. Journal of Travel and Tourism Marketing, 34(4), 444-460. http://doi.org/10.1080/10548408.2016.1182454
- Kamassi, A., Abd Manaf, N.H., Omar, A. (2020) The identity and role of stakeholders in the medical tourism industry: state of the art. Tourism Review, http://doi.org/10.1108/TR-01-2019-0031
- Karadayi-Usta, S., Serdarasan, S. (2020). A conceptual model of medical tourism service supply chain. Journal of Industrial Engineering and Management, 13(2), 246-265. http://doi.org/10.3926/jiem.3008
- Kumar, A., Ozdamar, L., & Zhang, C. N. (2008). Supply chain redesign in the healthcare industry in Singapore. Supply Chain Management: An International Journal, 13(2), 95-103.
- Lee, C.G. (2010). Health care and tourism: Evidence from Singapore. Tourism Management. 31(4), 486-488.
- Lee, C.G., Hung, W.T. (2010). Tourism, health and income in Singapore. International Journal of Tourism Research, Volume 12, Issue 4, July, Pages 355-359. http://doi.org/10.1002/jtr.755
- Lee, H.K., Fernando, Y. (2015). The antecedents and outcomes of the medical tourism supply chain. Tourism Management, 46, 148-157. http://doi.org/10.1016/j.tourman.2014.06.014
- Lunt, N., & Carrera, P. (2010). Medical tourism: Assessing the evidence on treatment abroad. Maturitas, 66(1), 27–32. http://doi.org/10.1016/j.maturitas.2010.01.017
- Manna, R.a, Cavallone, M.b, Ciasullo, M.V.c, Palumbo, R.c (2019). Beyond the rhetoric of health tourism: shedding light on the reality of health tourism in Italy. Current Issues in Tourism, 23(14), 1805-1819. http://doi.org/10.1080/13683500.2019.1650726
- Martínez Álvarez, M., Chanda, R., Smith, R.D. (2011). The potential for bi-lateral agreements in medical tourism: A qualitative study of stakeholder perspectives from the UK and India. Globalization and Health, 7(3), Article number 11. http://doi.org/10.1186/1744-8603-7-11
- Marzo-Navarro, M., Pedraja-Iglesias, M. (2009). Wine tourism development from the perspective of the potential tourist in Spain. International Journal of Contemporary Hospitality Management, 21(7), 816-835. http://doi.org/10.1108/09596110910985304
- Mayer F. S. (2011). Salud sin fronteras. Una nueva forma de hacer turismo.
- Mihalič, T. (2013). Performance of environmental resources of a tourism destination: Concept and application. Journal of Travel Research, 52(5), 614-630.
- Minsa (2020). Política nacional multisectorial de salud al 2030. Recuperado de https://www.gob.pe/institucion/minsa/informes-publicaciones/1127209-politicanacional-multisectorial-de-salud-al-2030
- Mitchell, J., Faal, J. (2007). Holiday package tourism and the poor in the Gambia. Development Southern Africa, 24(3), 445-464. http://doi.org/10.1080/03768350701445541
- McKinsey (agosto, 2020). Conoce al consumidor de la nueva normalidad. https://www.promperu.gob.pe/TurismoIN/covid-19?page=2
- MEF (2019). Plan anual de competitividad y productividad. Recuperado de https://www.mef.gob.pe/contenidos/archivos-descarga/PNCP 2019.pdf
- OECD (2020). Health at a glance 2019. OECD indicators. Recuperado de https://www.oecd-ilibrary.org/social-issues-migration-health/health-at-a-glance-2019 4dd50c09-en
- OECD (2020). OECD Reviews of health systems Peru 2017. Recuperado de https://www.oecd.org/countries/peru/oecd-reviews-of-health-systems-peru-2017-9789264282735-en.htm



(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

- Ogulin, R., Selen, W., & Ashayeri, J. (2012). Determinants of informal coordination in networked supply chains. Journal of Enterprise Information Management, 25(4), 328-348. http://dx.doi.org/10.1108/17410391211245829
- Oh, H. (2001). Revisiting importance-performance analysis. Tourism Management, 22, 617–627. http://doi.org/10.1016/S0261-5177(01)00036-X
- Oh, K. M., Jun, J., Zhou, Q. et al. (2014). Korean American Women's Perceptions about Physical Examinations and Cancer Screening Services Offered in Korea: The Influences of Medical Tourism on Korean Americans. Journal of community health, 39(2), 221-229. http://doi.org/10.1007/s10900-013-9800-z
- Organización Mundial del Turismo, según datos de la Organización Internacional del Trabajo (OIT).
- Packer, T.L., Mckercher, B., Yau, M.K. (2007). Understanding the complex interplay between tourism, disability and environmental contexts. Disability and Rehabilitation, 29(4), 281-292. http://doi.org/10.1080/09638280600756331
- Pashkov, V., Harkusha, A., Gnedyk, Y. (2018). Rehabilitation Tourism as a Part of Medical Tourism. Acta balneologica, 60(1), 48-53.
- Peng, H., Xu, X., & Chen, W. (2011). Tourism supply chain coordination by Tourism Websites. National Natural Science Foundation of China. http://dx.doi.org/10.1016/j.ijpe.2016.01.018
- Peirchyi Lii, Fang-I. Kuo (2016). Innovation-oriented supply chain integration for combined competitiveness and firm performance. International Journal of Production Economics. http://dx.doi.org/10.1016/j.ijpe.2016.01.018
- Promperú (2019). El turismo de salud internacional. Los principales mercados emisores de turistas que buscan servicios médicos se encuentran en América del Norte y Europa Occidental. Boletín 55, marzo.
- Promperú (2011). Disfruta Salud Perú. Departamento de exportaciones de servicios.
- Promperu Oficial (3 de agosto de 2020). Análisis del turismo interno y percepción del entorno pos-COVID-19 – TurismoIn. [Webinar]. Youtube. https://www.youtube.com/watch?v=bZRloE4QA5w&feature=emb_logo
- Promperu Oficial (23 de setiembre de 2020). Conociendo al nuevo vacacionista nacional TurismoIn. [Webinar]. Youtube. https://www.youtube.com/watch?v=3VqnmeoEaZU&feature=emblogo
- Promperu Oficial (23 de setiembre de 2020). El futuro del turismo, recomendaciones para empresarios del sector. [Webinar]. Youtube. https://www.youtube.com/watch?v=383M9HoJAj8&feature=emb_logo
- Racherla, P.a , Hu, C.b (2010). A social network perspective of tourism research collaborations. Annals of Tourism Research, 37(4), 1012-1034. http://doi.org/10.1016/j.annals.2010.03.008
- Rahman, M.K., Zailani, S. (2017). The effectiveness and outcomes of the Muslimfriendly medical tourism supply chain. Journal of Islamic Marketing, 8(4), 732-752. http://doi.org/10.1108/JIMA-11-2015-0082
- Sabre (julio, 2020). Encuesta a viajeros latinoamericanos. https://www.promperu.gob.pe/TurismoIN/covid-19?page=2
- Saxena, G. (2005). Relationships, networks and the learning regions: Case evidence from the Peak District National Park. Tourism Management, 26(2), 277-289. http://doi.org/10.1016/j.tourman.2003.11.013
- Skountridaki, L. (2017). Barriers to business relations between medical tourism facilitators and medical professionals. Tourism Management, 59, 254-266. http://doi.org/10.1016/j.tourman.2016.07.008
- Sloan, P., Legrand, W., Tooman, H., Fendt, J. (2009). Best practices in sustainability: German and Estonian hotels. Advances in Hospitality and Leisure, Volume 5, Pages 89-107. http://doi.org/10.1108/S1745-3542(2009)0000005009
- Setthachotsombut, N.a, Sua-iam, G.b (2020) Tourism value chain management and tourism logistics in ubon ratchathani province, northeast Thailand. African Journal of Hospitality, Tourism and Leisure. 9(1), 1-12. ISSN: 2223814X
- Snyder, J., Crooks, V.A., Turner, L., Johnston, R. (2013). Understanding the impacts of medical tourism on health human resources in Barbados: A prospective, qualitative study of stakeholder perceptions. International Journal for Equity in Health, 12(1), Article number 2. http://doi.org/10.1186/1475-9276-12-2
- Snyder, J., Crooks, V.A., Johnston, R., Cerón, A., Labonte, R. (2016). "That's enough patients for everyone!": Local stakeholders' views on attracting patients into Barbados and Guatemala's



- (+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe
- emerging medical tourism sectors. Globalization and Health, 12(1), Article number 60. http://doi.org/10.1186/s12992-016-0203-7
- Sultana, S., Haque, A., Momen, A., Yasmin, F. (2014). Factors affecting the attractiveness of medical tourism destination: An empirical study on india- review article. Iranian Journal of Public Health, 43(7), 867-876. ISSN: 22516085
- Tapper, R., & Font, X. (2004). Tourism supply chains. Report of a desk research project for The Travel Foundation. Leeds Metropolitan University and Environement Business & Development Group, Leeds, UK.
- 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. http://doi.org/10.1016/j.tmp.2017.11.002
- Thomas, F. (2014). Addressing the Measurement of Tourism in Terms of Poverty Reduction: Tourism Value Chain Analysis in Lao PDR and Mali. International Journal of Tourism Research, 16(4), 368-376. http://doi.org/10.1002/jtr.1930
- Tribe, J. (1997). The indiscipline of tourism. Annals of Tourism Research, 24(3), 638 -657. http://doi.org/10.1016/s0160-7383(97)00020-0
- USIL TV (18 de mayo de 2020). Reinventando el turismo en itempos de la Covid-19. [Webinar]. Youtube. https://www.youtube.com/watch?v=eKjfHHPs6M&feature=emb_logo
- Vargas, C., Gomez-Valencia, M., Gonzalez Perez, M. A., Córdova, M., Calixto Casnici, C. V., Monje Cueto, F., Nava-Aguirre, K. M., Minto Coy, I., Coronado, F. (2022). Climate resilient and regenerative futures for Latin America and the Caribbean, Futures, 142. https://doi.org/10.1016/j.futures.2022.103014
- Vásquez-Bernal, O.A., Pinzo'n-Hoyos, B., Mosquera-Laverde, W.E. (2019). Medical tourism in Colombia: A documentary analysis of the components of economic, social and environmental sustainabilityc. Proceedings of the International Conference on Industrial Engineering and Operations Management 2019, 435-438. ISSN: 21698767. ISBN: 978-153235950-7
- Weiermair, K. (2006). Prospects for innovation in tourism: Analyzing the innovation potential throughout the tourism value chain. Journal of Quality Assurance in Hospitality and Tourism, Volume 6, Issue 3-4, 21 June, Pages 59-72. http://doi.org/10.1300/J162v06n03 04
- Whitmore, R., Crooks, V.A., Snyder, J. (2019). Exploring informal caregivers' roles in medical tourism through qualitative data triangulation. Qualitative Report. 24 (8), 1852-1865. ISSN: 10520147
- Wongkit, M., & McKercher, B. (2013). Toward a typology of medical tourists: A case study of Thailand. Tourism Management, 38, 4 12. https://doi.org/10.1016/j.tourman.2013.02.003.
- World Tourism Organization (2020). Evaluación del impacto del brote de COVID-19 en el turismo internacional. 24 de marzo de 2020.
- World Tourism Organization (2020). World Tourism Baromenter May 2020. Special focus on the impact of COVID-19.
- Ye, Q.a, Li, T.a, Law, R.b (2013). A Coauthorship Network Analysis of Tourism and Hospitality Research Collaboration. Journal of Hospitality and Tourism Research, 37(1), 51-76. http://doi.org/10.1177/1096348011425500
- Yilmaz, Y.a, Bititci, U.b (2006). Performance measurement in the value chain: Manufacturing v. tourism. International Journal of Productivity and Performance Management, 55(5), 371-389. http://doi.org/10.1108/17410400610671417
- Zach, F.a,Racherla, P.b (2011). Assessing the value of collaborations in tourism networks: A case study of Elkhart County, Indiana. Journal of Travel and Tourism Marketing, 28(1), 97-110. http://doi.org/10.1080/10548408.2011.535446
- Zhang, X.a, Song, H.a, Huang, G.Q.b (2009). Tourism supply chain management: A new research agenda. Tourism Management, 30(3), 345-358. http://doi.org/10.1080/10548408.2011.535446
- Zolfagharian, M.a, Rajamma, R.K.b, Naderi, I.b, Torkzadeh, S.c (2018). Determinants of medical tourism destination selection process. Journal of Hospitality Marketing and Management, 27(7), 775-794. http://doi.org/10.1080/19368623.2018.1444527



ANNEXES

Annexe 1: INTERVIEW GUIDE

I. **General features**

Presentation:		_	Management Ph	D (c)	
Population: Objetive:	Universidades and an interview to va Management of the countries in develor Professionals in the Identify the integral chain (push staked with the case studies).	I candidate in S I am developing my lidate my research, ne supply chain (p pment, with the case tourism and health ation and articulation holders) of the med ly: Metropolitan L factors that impact nal competitiven	y doctoral thesis who and I have chosen ush stakeholders) os study: Metropolitan sector. on of the selected collical tourism sector ima, Peru, through their management	ompanies of the suppl in emerging markets the identification an strategy and influence	y c n y s, d
Day:		Time:			<u></u>
Interviewed: Position: Age: Years of experience sector: Level of accomplished: Telephone: E_mail: Company: RUC:	in the studies				
CIIU: Operating time (year Address:	rs):				
					_
	t he interview ng have you been dire	ecting/working in th	ne area?		
Years	1 – 5	6 – 10	11 - 15	16 - 20	Others
2.3 ¿What so	nts about your profess	ion currently provi	ding?	Official	Other
Service	Neurology	Nefrology	Cardiology	Oftalmology	Others
2.4 ¿How m	any professionals wo	rk with you?			
Quantity	1 – 5	6 – 10	11 - 15	16 - 20	Others
2.5 . What a	re the difficulties that	you ourrently feed	in managing the sec	otor?	

2.5 What are the difficulties that you currently face in managing the sector?



(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

- 2.6 What is the current problem that you consider the most relevant for the management of the
- 2.7 ¿The company develops strategies together with other partners? If so ¿Which ones and how? ¿How often?
- 2.8 ¿Which are the most important strategic partners for the development of the services offered by your company?
- 2.9; What would be the levels with which your company develops: with other companies in the medical tourism sector, with other organizations from the most varied sector?
- ¿Who are the key partners of your company for the medical tourism sector?
- 2.11 ¿What these partners offer your company?
- 2.12 ¿How cooperations and competitions are present between your company and others in the medical tourism sector?
- 2.13 ¿How the flows and interactions occur between related organizations with respect to the factors that impact the strategic management of each organization, to survive and stay in the
- ¿How the medical and tourism sector influences the identification of factors related to 2. 14 strategic management and its impact on the sector?
- ¿Has developed strategies related on competitive analysis?
- ¿What are the influences of the strategies of these organizations in the medical tourism 2.16 sector for your company?

III. Management of the area

Dimension: Strategic Management of the Medical Tourism

Medical Treatments and Services:

3.1; Which of the aforementioned factors do you consider to be the most relevant to evaluate the medical treatments and services in the organization? ¿How do you think these factors are found in the organization? ¿Why do you think they area in that state? ¿Any other you want to mention?

B 10 1 110 . .

 Reliabilit 	y in medical specialists			
Not so important	Less important	Neutral	Important	Very Important
•				
			1	-
 Modernit 	y of medical treatment a	nd facilities		
Not so important	Less important	Neutral	Important	Very Important
	•			
 Accessib 	ility of medical costs			
Not so important	Less important	Neutral	Important	Very Important
•		·		
 Health in 	surance coverage			
Not so important	Less important	Neutral	Important	Very Important
 Availabil 	ity of major treatments			
Not so important	Less important	Neutral	Important	Very Important
 Availabil 	ity on minor treatments			
Not so important	Less important	Neutral	Important	Very Important
 Availabil 	ity of communication in	the patient's language		
Not so important	Less important	Neutral	Important	Very Important
•	•		<u> </u>	



 Availabil 	ity of monitoring service	es		
Not so important	Less important	Neutral	Important	Very Important
D	C 1: 1 :	11 1		
	on of medical services at	Neutral	Important	Vany Important
Not so important	Less important	Neutrai	Important	Very Important
Internation	onal accreditation/creder	ntials		
Not so important	Less important	Neutral	Important	Very Important
•	•		<u> </u>	, 1
 Speed of 	medical service			
Not so important	Less important	Neutral	Important	Very Important
	ess, manner and etiquett		T	17 T
Not so important	Less important	Neutral	Important	Very Important
Tourist destination	n attributes (characterist)	ice).		
		s do you consider to be the	ne most relevant to ev	aluate the
		ow do you think these fa		
	in that state? ¿Any othe		G ···	
•	0 2	•		
 Safety 				
Not so important	Less important	Neutral	Important	Very Important
	and cleanliness			
Not so important	Less important	Neutral	Important	Very Important
• The wise	issuanas nus anom fon an	tury and atory		
Not so important	issuance program for en Less important	Neutral	Important	Very Important
Not so important	Less important	Neutrai	Important	very important
The trans	port system			
Not so important	Less important	Neutral	Important	Very Important
<u> </u>	1		1	
• The acces	ss to the information			
Not so important	Less important	Neutral	Important	Very Important
	ble accommodation			1
Not so important	Less important	Neutral	Important	Very Important
Quality for		NT . 1	T	
Not so important	Less important	Neutral	Important	Very Important
				1

Natural landscapes



Not so important	Less important	Neutral	Important	Very Important		
1	1		•	1		
• The conv	enient shopping					
Not so important	Less important	Neutral	Important	Very Important		
	rent culture and historie					
Not so important	Less important	Neutral	Important	Very Important		
Tourism factors: 3. 3 ¿Which of the aforementioned factors do you consider to be the most relevant to evaluate tourism factors? ¿How do you think these factors are found? ¿Why do you think they area in that state? ¿Any other you want to mention? • The availability of tour packages						
Not so important	ability of tour packages Less important	Neutral	Important	Very Important		
110t 50 Important	Less Important	1 (Guttat	Important	vory important		
Availabil	ity of special tour opera	tor / travel agent				
Not so important	Less important	Neutral	Important	Very Important		
• Ease of tr	avel arrangements					
Not so important	Less important	Neutral	Important	Very Important		
• The varie	ty of tourist attractions					
Not so important	Less important	Neutral	Important	Very Important		
 Internation 	onal awareness/image of	the tourist destination				
Not so important	Less important	Neutral	Important	Very Important		
• Attractive	e tourist programs					
Not so important	Less important	Neutral	Important	Very Important		
• The avail	ability of travel informa	ition				
Not so important	Less important	Neutral	Important	Very Important		
•	•		·			
Drivers of supply 3.4 ¿Which of the						

think these factors are found in the organization? ¿Why do you think they are in that state? ¿Any other you want to mention?

Confidence

Not so important	Less important	Neutral	Important	Very Important



 Commitment 	nent			
Not so important	Less important	Neutral	Important	Very Important
Mutual d	lependency			
Not so important	Less important	Neutral	Important	Very Important
Trot so important	Less important	Tiodital	Important	, ory important
	apply chain of them med		41	
	e aforementioned factors he supply chain of the m			
	actors are found in the o			
	ou want to mention?			
0.11.1	··			
Collabor Not so important	Less important	Neutral	Important	Very Important
110t 30 Important	Less important	rtediai	Important	very important
	1		1	ı
Coordina			_	
Not so important	Less important	Neutral	Important	Very Important
 Informat 	ion exchange			
Not so important	Less important	Neutral	Important	Very Important
T				
Integration	1	November 1	I	Varra Immantant
Not so important	Less important	Neutral	Important	Very Important
	<u>l</u>		<u> </u>	
 Investme 	ent in employee training			
Not so important	Less important	Neutral	Important	Very Important
• Now com	vians implamented per v	20.5		
Not so important	vices implemented per yellow Less important	Neutral	Important	Very Important
110t so important	Less important	redual	Important	very important
	1		1	1
	of suggestion implemen			
Not so important	Less important	Neutral	Important	Very Important
• Combine	ative competitive capabil	ities		
Not so important	Less important	Neutral	Important	Very Important
110t so important	Less important	redual	Important	very important
Supply c	hain integration		1	1
Not so important	Less important	Neutral	Important	Very Important
		.,		
	information exchange w		T	X7 T
Not so important	Less important	Neutral	Important	Very Important



(+51) 992 645198 * ines.villafana@usil.pe * 19900796@ulima.edu.pe * a20194092@pucp.edu.pe

• Use of multifunctional teams in process improvement

Not so important	Less important	Neutral	Important	Very Important

Modification of services to meet the requirements of our main customers

Not so important	Less important	Neutral	Important	Very Important

Dimension:

Organizational competitiveness:

3.6 ¿Which of the aforementioned factors do you consider most relevant to measure organizational competitiveness? ¿How do you think these factors are found in the organization? ¿Why do you think they are in that state? ¿Any other you want to mention?

• Organizational importance

918				
Not so important	Less important	Neutral	Important	Very Important

Organizational performance

Very poor	Poor	Average	Good	Very Good

IV. Close

¿Is there anything else in the subject that you would like to comment on?

Note: Interview guide based on the one used in the paper of Junio, M. M. V., Kim, J. H., Lee, T. J. (2017) and the one used in the master's thesis of Ferasso, M. (2008) and complemented with the information of the papers of Lee, H. K. Fernando, Y. (2015), Gunasekaran, A., Patel, C., Tirtiroglu, E. (2001), Chia, A., Goh, M., Hum, S-H., (2009), Peirchyi Lii, Fang-I. Kuo (2016) and Flynn, B. B., Huo, B., Zhao, X. (2010).